



# Anger Management

Recognizing and understanding patient anger is important for ensuring the safety of staff and patients. A verbal outburst may not always lead to aggression or violence. Understanding anger as a manageable emotion can help with de-escalation skills when dealing with potential patient behaviors. This resource is intended to help staff understand the emotion of anger and some myths and facts about how to manage it.

## The Problem of Anger: Some Operational Definitions

In the most general sense, **anger** is a feeling or emotion that ranges from mild irritation to intense fury and rage. Anger is a natural response to those situations where we feel threatened, we believe harm will come to us, or we believe that another person has unnecessarily wronged us. We may also become angry when we feel another person, like a child or someone close to us, is being threatened or harmed. Anger can be a positive emotion—a moral response to injustice or a rational response to a threat—and it can be expressed in assertive and productive ways. In addition, anger may result from frustration when our needs, desires, and goals are not being met.

When we become angry, we may lose our patience and act impulsively, aggressively, or violently. People often confuse anger with aggression. **Aggression** is behavior that is intended to cause harm to another person or damage property. This behavior can include verbal abuse, threats, or violent acts. Anger, on the other hand, is an emotion and does not necessarily lead to aggression. Therefore, a person can become angry without acting aggressively. A term related to anger and aggression is hostility. **Hostility** refers to a complex set of attitudes and judgments that motivate aggressive behaviors. Whereas anger is an emotion and aggression is a behavior, hostility is an attitude that involves disliking others and evaluating them negatively.

## When Does Anger Become a Problem?

Anger becomes a problem when it is felt too intensely, is felt too frequently, or is expressed inappropriately. Feeling anger too intensely or frequently places extreme physical strain on the body. During prolonged and frequent episodes of anger, certain parts of the nervous system become highly activated. Consequently, blood pressure and heart rate increase and stay elevated for long periods. This stress on the body may produce many different health problems, such as hypertension, heart disease, and diminished immune system efficiency. Thus, from a health standpoint, avoiding physical illness is a motivation for controlling anger. Another compelling reason to control anger concerns the negative consequences that result from expressing anger inappropriately. In the extreme, anger may lead to violence or physical aggression, which can result in numerous negative consequences, such as:

- Being arrested or jailed
- Losing your job
- Being physically injured
- Being retaliated against
- Alienating loved ones
- Being terminated from a substance-use disorder treatment or social service program
- Feeling guilt, shame, or regret

Even when anger does not lead to violence, the inappropriate expression of anger, such as verbal abuse or intimidating or threatening behavior, often results in negative consequences. For example, others will likely develop fear, resentment, and lack of trust toward those who subject them to angry outbursts, which may cause alienation from individuals, such as family members, friends, and coworkers.

## Myths About Anger

### Myth

### **The Way You Express Anger Cannot Be Changed**

### Fact

One misconception or myth about anger is that the way people express anger is inherited and cannot be changed. Our facial expressions and our nervous system's response when we become angry are inherited, but what we do next, our behavior, is learned. Because people are not born with set, specific ways of expressing anger, it is possible to learn more appropriate ways of expressing anger. Similarly, you can change the way your nervous system reacts after you get angry. You can learn to calm down more quickly with practice.

### Myth

### **Anger Automatically Leads to Aggression**

### Fact

A related myth involves the misconception that the only effective way to express anger is through aggression. There are other more constructive and assertive ways, however, to express anger. Effective anger management involves controlling the escalation of anger by learning assertiveness skills, changing negative and hostile thoughts or "self-talk," challenging irrational beliefs, and employing a variety of behavioral strategies.

### Myth

### **You Must Be Aggressive To Get What You Want**

### Fact

Many people confuse assertiveness with aggression. The goal of aggression is to dominate, intimidate, harm, or injure another person—to win at any cost. Conversely, the goal of assertiveness is to express feelings of anger in a way that is respectful of other people. Expressing yourself in an assertive manner does not blame or threaten other people and minimizes the chance of emotional harm.

### Myth

### **Venting Anger Is Always Desirable**

### Fact

For many years, there was a popular belief that the aggressive expression of anger, such as screaming or beating on pillows, was healthy and therapeutic. Research studies have found, however, that people who vent their anger aggressively simply get better at being angry. In other words, venting anger in an aggressive manner reinforces aggressive behavior.

Source: [https://store.samhsa.gov/sites/default/files/d7/priv/anger\\_management\\_workbook\\_508\\_compliant.pdf](https://store.samhsa.gov/sites/default/files/d7/priv/anger_management_workbook_508_compliant.pdf)

[www.qsource.org](http://www.qsource.org)

This material was prepared by Qsource, a/an Network of Quality Improvement and Innovation Contractors under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this document do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 23.QIO.02.026

