

Understanding Resentments & Anger and Anger Management Techniques

EVIDENCE BASED PRACTICES (EBP): Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics, i.e. Nutrition, Stress Management, Cognitive Behavioral, and more...

Consistency in the Group Setting

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

Psychoeducational Groups and Crisis Event Processing (when requested)

Notes to Facilitator(s):

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3rd of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

Prepare Professionals

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3rd of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

Group Beginning Suggestions

A positive group beginning (and ending) is extremely important. There are many ways to begin (and end) a group in a positive way. Suggestions to choose from can include:



1. Reading the Thought For The Day from a meditation book. (Note: Meditation books that also contain an index at the end of the book – such as *Easy Does It* – are helpful in choosing a specific reading that matches the topic(s) presented in group like Self-Esteem.), or
 2. Reading an inspirational or humorous curriculum handout from *THE BASICS, Second Edition*, or
 3. Practicing a deep breathing or a stretching exercise, or
 4. Sharing of one thing that each person is grateful for today, or
 5. Sharing of one positive thing that he/she did that contributed to their recovery in the past few days, or
 6. Reading an AA Slogan with a brief explanation or AA/NA/Dual Recovery inspirational reading.
- * Recommended Beginning: Breathing Exercise (located on page Master Tips 3)

Practice Curriculum/Topic


Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

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Based on a 2-Hour group: Two 50 minute segments	Time-Frame
Group Beginning	20 Minutes Total
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> 1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not inter-personal processing or case management questions which do not apply to the entire group.) <ol style="list-style-type: none"> a. Ask the group members to tell the group their name. b. Welcome any group members who are new to this group or phase. 2. Crisis Processing (when requested and optional): <ol style="list-style-type: none"> a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan. b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members. 	10 Minutes 
<p><u>Summarize Introduction of the Group Topic and Why It's Important: (page Subject 5-38)</u></p> <p>When anger is denied or suppressed it becomes cold and resentful. Resentments are “old” anger that have not been expressed openly. The word resent means to “re-sense” or “re-feel.” It is one thing to feel a feeling, such as anger. It is another thing to replay a scene or a conversation in your mind, dredging up the hurt and the anger again and again (Greg G., 1992) – and yet again!</p> <p>Today we will talk about resentments, anger, and anger management techniques.</p>	5 Minutes 

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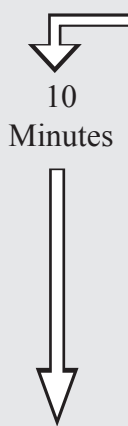


Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time- Frame
Resentments	Subject 5-38 – 5-39	1. Summarize the 2 nd group introduction and read scenario in text. (The first paragraph was summarized in the group introduction). 2. Summarize the 3 rd and 4 th paragraph. 3. Read the five ways to work through resentments that are found in the table below.	30 Minutes 
1	Naming what or who you are angry with.		
2	Discover how you have been hurt or injured.		
3	Work to move from justifying resentment to acceptance.		
4	Take responsibility for your resentment, for any part you played in the situation – even your unwillingness to let it go – then practice forgiveness, acceptance, or whatever you need to do to let go of the resentment.		
5	Find ways to soften your attitude toward the person or situation; list ways you can put yourself in the other person’s shoes; have compassion for their point of view.		
Self-Pity Is Also Anger	Subject 5-39	Summarize two paragraphs.	
Managing Personal Anger	Subject 5-39 – 5-40	Summarize three paragraphs.	
Benefits of Expressing Anger Assertively	Subject 5-40	Summarize three paragraphs.	
Skill Building Exercise and Discussion - Suggestions for topic discussion:			
<u>To the Group:</u> 1. Do you have resentments that are difficult to let go of? 2. If you chose one – perhaps a resentment you are not so angry about at this time – how would you use these steps to help you work through the resentment? (Note to Facilitators: You may ask a group member to share a resentment for this exercise, or you can use the time to clearly go through these steps by using the following example.) 3. Exercise Example: a. “I’m angry at my brother. I was only trying to help and now he won’t speak to me.” b. “I feel hurt and misunderstood cause he thought I was meddling in his life.” c. “All I can think of is how unfair he’s being. Well, I guess I have to accept that he’s mad right now.” d. “As hard as it is and even though I know I was trying to help – I was telling him what I thought he should be doing. I guess I was getting into his business.” e. “I guess I can see why he’s mad at me right now. It must be hard for him to hear the things I told him. I don’t feel angry anymore, I feel badly for him because he is hurting right now.” 4. How do you relate to self-pity? Do you throw yourself a “party” every once in a while? It’s human isn’t it?			

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Skill Building Exercise and Discussion - Suggestions for topic discussion: continued		Time-Frame
5. How does each group member relate to the topic of “ANGER?” 6. What were the messages your family gave you when you were a child or teenager about anger? 7. How do you usually react when you’re “angry?” 8. What are your successes or struggles with expressing your anger.		continued ↓
Break		10 Minutes

Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing																	
First, Accept Responsibility For Your Anger	Subject 5-40 – 5-41	Summarize two paragraphs.	 20 Minutes	 25 Minutes																	
Second, Identify Anger Triggers, Cues, and Management Strategies	Subject 5-41	1. Summarize two paragraphs. 2. Illustrate the table shown below as an anger management strategy. 3. Give two examples like the two shown in the text below.																			
<table><tr><th>TRIGGERING EVENT</th><th>CUES TO ANGER</th><th>MANAGEMENT STRATEGIES</th></tr><tr><td>1. My sister yelled at me.</td><td>1. My entire head felt hot.</td><td>1. I was really more hurt than angry and I recognized that.</td></tr><tr><td>2. A driver cut me off.</td><td>2. My heart started to race.</td><td>2. I told myself the person was having a bad day and not to personalize it.</td></tr></table>		TRIGGERING EVENT			CUES TO ANGER	MANAGEMENT STRATEGIES	1. My sister yelled at me.	1. My entire head felt hot.	1. I was really more hurt than angry and I recognized that.	2. A driver cut me off.	2. My heart started to race.	2. I told myself the person was having a bad day and not to personalize it.									
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Changing Thinking to Positive Self-Talk	Subject 5-41	Name the ten examples of positive self-talk to prevent the escalation of anger in the table below:																			
<table><tr><td>1</td><td>I don't need to feel threatened here. I can relax and stay cool.</td></tr><tr><td>2</td><td>I feel angry, which might mean I have been hurt or have some other primary feeling.</td></tr><tr><td>3</td><td>No need to doubt myself. I'm the only person who can make me mad or keep me calm.</td></tr><tr><td>4</td><td>Time to relax and slow things down. I can take a time-out if I get uptight.</td></tr><tr><td>5</td><td>Nothing says I have to be strong all the time. It's okay to feel unsure or confused.</td></tr><tr><td>6</td><td>I can't control other people, places, or things. I only have control over myself.</td></tr><tr><td>7</td><td>If another person goes off the wall, I don't need to respond to their anger with anger.</td></tr><tr><td>8</td><td>People put erasers on the ends of pencils for a reason. It's okay to make mistakes.</td></tr><tr><td>9</td><td>People are going to act the way they want to, not the way I want them to.</td></tr><tr><td>10</td><td>It's nice to have other people's approval, but even without it, I can still accept myself.</td></tr></table>		1	I don't need to feel threatened here. I can relax and stay cool.	2	I feel angry, which might mean I have been hurt or have some other primary feeling.	3	No need to doubt myself. I'm the only person who can make me mad or keep me calm.	4	Time to relax and slow things down. I can take a time-out if I get uptight.	5	Nothing says I have to be strong all the time. It's okay to feel unsure or confused.	6	I can't control other people, places, or things. I only have control over myself.	7	If another person goes off the wall, I don't need to respond to their anger with anger.	8	People put erasers on the ends of pencils for a reason. It's okay to make mistakes.	9	People are going to act the way they want to, not the way I want them to.	10	It's nice to have other people's approval, but even without it, I can still accept myself.
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Psychoeducation Part I: Topics & Focus		Pages & Location		Presentation Suggestions		Time-Frame with Crisis Processing	Time-Frame without Crisis Processing	
Anger Management Strategies		Subject 5-42		1. Name the eight anger management strategies in the table below. 2. Explain each using the information located in the text.				
	1	ACKNOWLEDGE FEAR	5	CHANGE THE WAY YOU THINK	continued			continued
	2	ASK IMPORTANT QUESTIONS	6	GET SOCIAL SUPPORT				
	3	COMMUNICATE ASSERTIVELY	7	CHANGE YOUR ENVIRONMENT IF POSSIBLE				
	4	PRACTICE RELAXATION TECHNIQUES	8	PRACTICE ANGER MANAGEMENT				
Skill Building Exercise and Discussion - Suggestions for topic discussion:						Time-Frame with Crisis Processing	Time-Frame without Crisis Processing	
To the Group: 1. Is it difficult at times to take responsibility for your anger? Is it easier to blame others? Of course it is! That’s human nature. 2. What is an example of something that triggers anger for you? What cues do you have that you’re getting angry? What management techniques do you put into practice? 3. What works for you to manage your anger? What has not worked well? 4. Are you okay with the way you express your “anger?” 5. Would you like to learn to express your anger in a healthier or more productive way? 6. Which one specific positive self-talk suggestion will you begin to use the next time you find yourself getting angry? 7. If you were to make some changes in managing your “anger” – what would the changes be? 8. Which anger management strategy will you begin to practice first – like getting social support? What is another one that you would practice – like ask yourself important questions? Is there a particular person you will practice a strategy with first?								
Crisis Processing						Time-Frame		
1. Ask the group member(s) to tell the group what happened. 2. Explore options and/or develop an immediate plan for coping. 3. Allow the group to offer support.						10 Minutes		
“Paper Work”						Time-Frame		
Group participants fill out Group Notes.						5 Minutes		
Group Closure						Time-Frame		
Recommended INSPIRATIONAL HANDOUT “Risk Taking Is Free” located at the back of Subject Five. Presentations suggestions include: 1. Read the handout to the group, <i>or</i> 2. Ask a group member to read the handout out loud to the group, <i>or</i> 3. Give a copy to each group member to take home and ask for a volunteer to read the handout to the group.						5 Minutes 