

Article 10

Anger Management for Adolescents: A Creative Group Counseling Approach

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In today's society, adolescents face daily situations that contribute to them being angry. A multitude of factors contribute to their anger. Some of these factors include poverty, divorce, physical or psychological abuse, neglect, and alcoholism (Thompson, Rudolph, & Henderson, 2004). In fact, most teens encounter several conflict situations each day (Arlett, Elgar, & Groves, 2003). A plethora of research has supported the hypothesis that exposure to violent media is causally related to subsequent expression of aggression, as well (Anderson, Carnagey, & Eubanks, 2003).

To be healthy and safe, adolescents need to be equipped with skills that allow them to cope with anger in a productive manner. Most anger management groups have the potential to help adolescents develop the resources to creatively and effectively manage their anger. Moreover, investigations into the efficacy of group therapy have demonstrated that it is basically as effective as individual treatment for most problems, including anger (Pollock & Kymissis, 2001). Therefore, working with a group of adolescents will help counselors reach more young people at once while simultaneously decreasing the adolescents' feelings of isolation around the issue of anger.

In the school setting, students don't often receive anger management counseling until after they have acted their anger out. In community counseling settings it might be easy for some to underestimate the importance of providing prevention and intervention for anger management because young people being treated in these settings often have more extreme issues. In both school and community settings counselors need to consider the harmful, long-term emotional consequences of untreated anger, which can mask itself as typical adolescent rebellion (O'Connor & Schaefer, 1994). Although not every teen is an angry young man or woman, all teens can benefit from learning healthy anger management (Golden, 2004).

Less intense aggressive behaviors, such as cursing, rule violations, and disruptiveness, can precede more harmful expressions of anger, such as verbal threats, vandalism, and physical attacks (Hughes,

LaGreca, & Conoley, 2001). Helping adolescents learn to control anger can help stop intensely aggressive behavior before it starts.

Like other emotions, anger is accompanied by physiological and biological changes. When you become angry, your heart rate and blood pressure rise, as do levels of energy, adrenaline, noradrenaline, and hormones (Peacock, 2000).

The overall goal of anger management intervention programs is to reduce and control the emotional feelings and physiological arousal caused by anger. Although most adolescents can't eliminate, avoid, or change the things or people that cause their angry feelings, they can learn to control their reactions (American Psychological Association, 2004).

According to Golden (2004), healthy anger management is taught to adolescents by helping them (1) identify and recognize the negative emotions behind their anger; (2) identify, challenge, and replace unrealistic expectations and conclusions; (3) learn relaxation skills and stress reduction strategies; and (4) develop problem-solving skills.

Establishing the Anger Management Group Intervention

A flyer or newsletter that advertises the group can be posted at the school and/or community treatment center. Advertisements can also be mailed to members' homes or put on Web sites. Potential group members are identified and referred by counselors, therapists, teachers, administrators, caregivers, and family members. After potential group members have been identified, they are interviewed to screen for suitability. The counselor should create a screening device that ensures that he or she has members who are appropriate for the group. After screening, parents or guardians should be contacted to request written consent for their child to participate. This is also a good time to address any questions or concerns parents may have about the group. The group should consist of approximately six to seven members who are at the same grade and/or

developmental level. It is wise for the counselor to create a heterogeneous group in terms of gender, ethnicity, socioeconomic status, and sexual orientation. The group will meet for 8 weeks at a time that is convenient for all involved.

Introductory Session

Session one consists of explaining the focus of the group and the way groups are organized and operate, and outlining what each session will cover. Confidentiality and its limitations are discussed, and group ground rules are established. The facilitator provides the group norms, and the ground rules are those provided by both the counselor and group members. With the help of the facilitator, the group selects the group goals.

To be effective, these group goals should meet several criteria. First, the group members must have an investment in the goals; second, they must be goals the counselor is willing to help members achieve; third, the goals must be measurable (Jones, 1980). Group members are to be provided a journal and encouraged to spend 5 to 10 minutes each night tracking their feelings of anger and writing down their thoughts and feelings about the day. Journal writings can be shared at group meetings on a voluntary basis. Finally, members will participate in a brief icebreaker activity designed by the counselor to build trust and rapport.

Session 2

During the second group session, members receive a copy of the group ground rules, and they sign a copy that the counselor will keep and post in the group meeting room. Group rules may be added at any time throughout the group with group consensus.

In general, anger is experienced in one or all of five different areas of life. Anger at others, anger directed at us from others, our anger at ourselves, anger lingering from the past, and abstract anger (Ingram, 2002). All of these areas are addressed by this group intervention.

Group members are asked to identify their own personal anger triggers and complete a questionnaire regarding what causes them to become angry (Phillips & LaHaye, 2002). This invites group members to indicate what factors influence their feelings of anger. From this starting point the facilitator can lead a discussion into what causes them to be angry, who is involved, and what other feelings they are experiencing along with anger. The group can also discuss other names given to anger along with other feelings

that can accompany anger like sadness and frustration (Ingram, 2002).

Session 3

From the first cave-wall artists to modern-day Sunday landscape painters, normal people in ordinary settings have been using art for therapeutic purposes. On other occasions, art and the creative process can be used as a specific tool to deal with experiences that are difficult to assimilate or verbally express. The creative process can be responsive and therapeutic in providing a release of tension and a vehicle for self-expression. In investigating the popularity of various art media, it was determined that the most popular material was clay, followed closely by paint (Rubin, 1984).

After the third group begins with a check-in, members create a face mask that depicts a feeling of their choice. Students are provided air-dry clay and instructions on making a mask that reflects a feeling or feelings. This can be a feeling or emotion they frequently encounter, a preferred feeling, how they are feeling today. It can be a happy, sad, angry, or any other kind of face. They sculpt the mask by hand and then use their hands or various implements to design their face.

Session 4

Session four is spent decorating the masks that members created during the previous session. They work with paint, collage cutouts from magazines, yarn, beads, glitter, paint, and various other media. Several sample masks that vary in complexity of decoration and feeling should be available to provide inspiration and ideas. Students take turns talking about their mask and the feeling(s) and emotion(s) portrayed in the mask.

Session 5

It is helpful to have members identify behavior that is not productive in response to having feelings of anger. During this session members consider various options and possibilities of how to deal with anger more effectively. Group members are encouraged to identify and discuss negative responses to anger such as passive aggressive behaviors, aggression, and irrational thinking (Kranz & Dentamaro, 1995; Phillips & LaHaye, 2002). Group members are encouraged to consider any positive behaviors they have used in the past that allowed them to manage their feelings of anger. These positive coping skills should be discussed and role-played, if possible.

Session 6

During this session students discuss faulty assumptions and conclusions that can lead to anger. They learn about overgeneralizing, mind reading, labeling, all or nothing thinking, catastrophizing. They also discuss the concept of self-talk and the impact it has on how they feel about themselves and how they cope with anger (Ingram, 2002; Peacock, 2000). After discussing new, more positive ways of thinking, they participate in a story writing exercise using positive thinking strategies to help manage anger.

During the story writing, group members write about real life situations they have encountered, or they can be given a scenario to write about. For example, the facilitator may provide a beginning sentence such as, "As I walked into the classroom, the student in front of me let the door go and it slammed into my nose and people laughed. As I felt the sting in my nose, I thought_____." They write their story and then discuss how they looked at the situation in a productive manner.

Session 7

Group members receive further information about productive ways to manage anger. Ideas will include recognizing and expressing feelings, being assertive vs. aggressive, stress reduction and relaxation, accepting responsibility, learning to listen to others, avoiding arguments with someone who simply wants to argue for the sake of arguing, ignoring slights or insults by others, putting themselves in the other person's place, and treating others as they would like to be treated (www.teachers.net, www.angermanagement.com). They participate in role-playing some of the strategies discussed from either real life situations or exercises designed by the facilitator.

Session 8

The focus of this session is to increase awareness of stress in the lives of the group members. Members should receive information about the causes and signs of stress, stress reduction, and relaxation techniques such as deep breathing, and they participate in a guided visualization to increase relaxation and put them in a state of rest. The counselor should create or find handouts containing the information discussed and additional stress reduction resources.

The final group ends in termination of the 8-week group process. Members are encouraged to discuss anything they learned in the group and how it may help

in their daily living. Group members should be informed that the counselor maintains an open door policy when they need assistance dealing with their anger.

Learning healthy anger management requires patience, a willingness to try different ways of dealing with anger, commitment, and practice (Golden, 2004). Adolescents who learn to effectively manage their feelings of anger greatly decrease the incidence of self-defeating behaviors, increase self-awareness, develop a healthier self-concept, and increase their ability to build positive and healthy relationships. This group is designed to help adolescents become more aware of their anger and what triggers it while providing them with some tools to deal with it more effectively. Counselors in any setting can use this model to help adolescents with anger problems become healthier young adults.

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