Development of an Anger and Aggression Awareness Treatment Manual for At-Risk Youth

by

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The procedures in this training manual are meant to be used by agency staff, as part of the broader services they provide, or under supervision of agency staff.
DEDICATION

I wish to dedicate this thesis to my father, Jim, my mother, Lore, my step-father, Dan, and my sister, Kristen, for their undying love and support throughout my entire life, and especially during the past four years of my education.
ABSTRACT

This thesis documents the creation of an anger management program for a specific agency. It describes key research and best practices in the treatment of anger and aggression. As well, it explains the process of creating a program for an agency that deals specifically with at-risk youth. Relevant literature is reviewed to gain insight into what their ideal program would look like. The manual itself is summarized and it is provided as a whole in an Appendix. The manual is comprised of eight sessions and has three measures to assess pre- and post-treatment. The thesis culminates with a discussion of its major conclusions, including that the manual has been directly tailored to the agency and that it is in need of testing with potential clients. The manual’s strengths are discussed, as are limitations to its creation. One major limitation is that the manual was not given a trial run and potential limitations are discussed. Lastly, future recommendations for the manual are stated, including the additions of both a client workbook and more parental involvement.
ACKNOWLEDGEMENTS

First and foremost, thank you to my thesis supervisor, Cindy, without whose dedication, ideas, and support I could not have completed this thesis. Secondly, thank you to Youth Diversion and the entire staff, especially Emma-Jane, for allowing me the opportunity to grow and learn under their supervision. Lastly, thank you to all of my professors, in the Behavioural Psychology program at St. Lawrence College, for their guidance and knowledge throughout the past four years.
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Chapter I: Introduction

Youth face a number of adversities on a daily basis. The outcome of these challenges depends upon how well-equipped the youth are to deal with them. Unfortunately, at-risk youth are a growing population and one that experiences a number of intense emotions, especially that of anger. These are youth who may be exposed to a variety of risk factors including significant social and economic deprivation, family conflict, lack of commitment to academics, lack of social skills, and alienation. Simply put, these youth are exposed to and affected by risk factors that correlate with delinquency (McShane & Williams, 2003).

Anger has been said to represent a major problem for both children in public schools and adolescents (Blake & Hamrin, 2007). Blake and Hamrin discuss the impact when anger and aggression are left untreated, suggesting that the early maladaptive behaviours formed, can lead to delinquency, academic failure, antisocial behaviour, and conduct problems. There is a distinct need for intervention with these at-risk youth. Cognitive-behavioural anger management programs have been proven effective with a wide range of populations. Therefore, this thesis will develop an anger and aggression awareness workshop manual for at-risk youth. It stands to reason that when at-risk youth participate in an eight session cognitive-behavioural anger management workshop, the frequency and intensity of their anger and aggressive behaviours will decrease.
Chapter II: Literature Review

Defining Anger & Aggression

Anger is a normal emotion. However, the intensity and frequency of how the anger is felt and expressed determines whether it is problematic. To make matters more complex, it is a difficult term to define, as there have been countless definitions within the literature. Anger cannot have a single definition because it is an emotion that varies from individual to individual. Within the literature there are a few definitions that appear to suit the term best. Tice and Baumeister (1993) define anger as “an unpleasant, distressing emotion for most people, often commingled with anxiety and guilt” (p. 393), while Kassinove and Sukholdsky (1995) define the term as “a negative feeling state associated with cognitive distortions, physiologic changes, and behavioural reactions” (p. 248). These authors are essentially describing anger in a way that combines psychological, physiological and behavioural components. Due to its multifaceted nature, anger can be a difficult emotion to treat. The physiological component of anger includes the physical warning signs such as increased heart rate, perceived temperature changes and muscle tension, while the psychological facet may be expressed through negative and/or distorted cognitions, assumptions and beliefs and a lack of cognitive problem-solving skills. Lastly, the behavioural component of anger is typically seen as various forms of withdrawal or aggression, but may also be expressed healthily such as through the act of talking it out (Feindler & Starr, 2003).

Adding to the complexity is the term aggression, which can at times be confused with anger, although it should not be because they are not synonymous. Aggression is a display of action defined as “the actual or intended harming of another” (Thomas, 2001, p. 42) or “a goal-directed behaviour with a deliberate intent to harm a person or object and typically violating social rules” (Blacker, Watson, & Beech, 2008, p. 130). Anger and aggression may at times be intertwined, but the feeling and expression of anger does not necessarily have to include aggression. At times, expressing one’s anger may even have the ability to prevent aggression because the individual is not bottling up their emotions. As well, aggression and other acts of violence have been known to occur without anger such as in the instance of cold-blooded murder (Thomas). The cold-blooded murderer may not have any feelings of anger whatsoever; they could be elated and excited, or quite calm. It is necessary to differentiate between anger and aggression, while still keeping them both in mind when treating one or the other. Anger and aggression are not used interchangeably, but they are related (Feindler & Starr, 2003).

Factors Surrounding Anger & Aggression

Every individual has or will experience anger at some point in their lives. For many, anger incidents provide a common occurrence in everyday life (Averill, 1982) whether we are in our role as a family member, student or employee. Anger, as all other emotions do, varies on a continuum. Incidents of anger can range from the slight frustration one feels when they are cut off in a line of traffic to the deep-seated resentment that provokes intense confrontations with family members. In one study it
was shown that people possess fewer strategies for dealing with anger than for any other emotional state (Tice & Baumeister, 1993).

A review of the literature revealed that anger and how it is expressed in youth has created significant mental health problems. Reports by Abikoff and Klein (1992) state that “anger-related problems such as oppositional behaviour, verbal and physical aggression, and violence are some of the more common reasons children are referred for mental health services” (p. 209). Furthermore, it is known that the most frequently seen childhood disorders are often expressed through anger such as attention-deficit hyperactivity disorder, conduct disorder, and oppositional defiant disorder (American Psychiatric Association, 1994). These youth, as well as those who are exposed to risk factors, are more likely to have negative anger and aggressive behaviours (McShane & Williams, 2003).

Risk factors play a crucial role in a child’s ability to appropriately regulate and express both their anger and aggression. There are biological risk factors which include difficult or uninhibited temperament (Dodge, 1980). Children may lack social cognition, which puts them at risk for both inability to express anger and developing aggressive patterns of behaviour (Dodge). Dodge suggested that aggressive children have severe deficits in social information processing which includes: “cognitive perception and appraisal, formulation and selection of goals and responses, and behavioural enactment” (p. 168). For example, an aggressive child may identify a neutral cue in their environment as a threatening and hostile one. Their misinterpretation then leads to, and provides rationalization for, an aggressive response. Another risk factor that may lead to anger and/or aggression in youth is poor parenting, proposed by Blake and Hamrin (2007) as “parents who provide harsh discipline, poor problem solving, and poor monitoring of children’s behaviour” (p. 210). Further social and family variables that have been said to predict delinquent behaviour include poor parent health, parental rejection, low socioeconomic status, and parental criminality (Blake & Hamrin).

**Treatment of Anger & Aggression**

Fortunately, there have been a number of positive outcomes reported in regard to anger management with a wide-variety of populations. Successful programs on anger management have been completed with college students (Hazaleus & Deffenbacher, 1986), individuals with learning disabilities (Rossiter, Hunnisett, & Pulsford, 1998), and incarcerated women (Smith, Smith, & Beckner, 1994), among others. Due to the many problems that untreated anger and aggression can lead to, it is necessary to consult current literature and develop effective treatment programs.

Blake and Hamrin (2007) completed an extensive review of the literature on the management of anger and aggression in youth. They contend that the most successful type of interventions found in the literature thus far are those based upon cognitive-behavioural techniques. In another meta-analysis, cognitive-behavioural therapy was found to have an effect size in the medium range, which suggests that it is an effective treatment for anger and aggression in youth (Sukholdosky, Kassinove, & Gorman, 2004).
The techniques reviewed range from affective education to behaviour modification to cognitive skills training. The authors categorized the techniques based upon the target of therapy and therapeutic approach. It was found that skills training and multimodal treatments, which are those that target a variety of areas in the client’s lives, were most helpful at reducing aggressive behaviours, while problem-solving techniques aided in the lessening of subjective anger experiences.

One study that was particularly successful was a 10-week intervention to control anger and aggressive behaviour in fourth and fifth grade boys. Thirty-three participants were split into two groups. The control group participated in 10 sessions of structured game playing, while the treatment group completed 10 sessions of cognitive-behavioural therapy. The treatment consisted of affective education, relaxation training, cognitive skills training, and techniques for anger control. Those who participated in the treatment exhibited a significant reduction of reports of aggressive and disruptive behaviour and significant improvement on ability to control their anger (Blake & Hamrin, 2007). A similar study further demonstrated the effects of 10 weeks of cognitive-behavioural therapy with 15 boys and girls, ages 10-13-years-old. These students met criteria for attention-deficit hyperactivity disorder, oppositional defiant disorder, and/or conduct disorder. They were taught skills to help cope with anger and behavioural goal setting techniques, and were given positive reinforcement. At the end of the study, it was found that aggressive and delinquent behaviour as rated on the Child Behaviour Checklist (CBCL) decreased significantly (Blake & Hamrin, 2007).

Bartol and Bartol (2008) describe characteristics of successful programs for juvenile offenders. While a number of the agency’s clients for whom the manual is to be developed are not juvenile offenders, many of them possess some of the characteristics of this population. The authors describe a review by Zigler et al. (1992) in which they concluded that the best way in which to prevent delinquency is through “early childhood intervention programs that promote social, interpersonal, and academic competence in children across multiple systems in which they are embedded (family, school, peers, and community)” (p. 569). In essence, they are describing the most effective means in which to deliver the anger and aggression awareness workshop. Establishing partnerships among the agency, school and homelife will maximize the potential for the client’s growth in the program. According to Sheridan and Kratochwill (2008) the development and continuation of positive relationships between the main systems in an adolescent’s life can assist the family’s ability to utilize resources in the most effect means possible. Overall, “targeting multiple potential risk or protective factors rather than one or two in isolation greatly increases the likelihood of positive adjustment and the significant reduction of antisocial and violent behaviour” (Bartol & Bartol, 2008, p. 571). Therefore, the manual is created with each system in the clients’ lives involved in examples and activities in order to maximize potential for success.

While the success stories provide promise for the future in regards to treating anger and aggression in youth, there is much more research needed. Blake and Hamrin (2007) point out a gap in the literature with regard to the management of anger in female children and adolescents. As well, they note that very few studies have examined anger
interventions for school-age populations, which is the target population of the agency for whom the manual is developed. Blake and Hamrin concluded that, “Given the detrimental outcomes of anger in children, more research is needed to address early intervention and prevention of anger-related problems in youth” (p. 219). Therefore, it stands to reason that the development of an anger and aggression awareness workshop manual would be beneficial for the agency’s target population of at-risk youth.
Chapter III: Method

Participants

The only participants during the development of the thesis were the agency staff, as they are the people for whom the manual was being developed. All of the staff members at the agency work closely with at-risk youth, coordinating programs for them. The staff range from teachers to victim support workers, and they all share a common goal, which is to support at-risk youth.

The target group of participants for whom the manual was developed are youth ages 10-17-years-old. These youth have problems with anger and/or aggression and these issues are causing impairment in their daily lives. This impairment could be illustrated through a number a ways including suspensions and expulsions from school or engaging in criminal behaviour. The participants will be referred to the agency by a number of means including self, family, school and court referrals. At their initial agency intake, participants will be given the agency intake assessment, which will assist in gauging their current issues with anger and/or aggression.

Format & Materials

The thesis is presented in the format of a manual for agency staff. It includes the instructions and most of the materials needed in order to conduct eight sessions of anger and aggression awareness training. While the manual is comprised of eight ordered sessions, the session order can be varied as need. It is formatted in a manner that remains flexible. The manual has been developed multimodally, as suggested by the literature, in that it includes a wide variety of activities and examples taken from not only the agency setting, but at home and school as well. Case examples used within the sessions are from all three settings. The manual includes various topics surrounding anger and aggression that have either been empirically-supported to be included in this type of a manual and/or they have been suggested by the agency staff to be included. Also contributing to the multimodality of the manual is its variety. There is a wide range of activities throughout the manual including: active and written homework, drawing, role plays and small and large group discussions.

While creating a program that is multimodal increases the agency’s chance for success with it, there is much more tailoring to be done. For the agency, the manual must be extremely flexible. The sessions need to be created for both individual and group use. For the most part individual work is encouraged at the agency (See Appendix A, Question 3). However, in the future they may want to run a group specifically for anger awareness and conflict resolution. The manual needs to be tailored to the specific student population. At the agency, clients mainly range from age 12-17-years-old, but may be as young as 10 years old, so the material must be at an appropriate reading level. Depending on the age of the client, the shift will be made from cognitive-behavioural to more behavioural. The younger students may need to follow a more behavioural program because they do not yet possess the ability to process cognitively what the older, more
developed students can. A further accommodation to keep in mind for this agency is that a number of the clients are diagnosed with ADHD, and others have difficulty concentrating for extended periods of time as well. To accommodate for this, sessions are approximately one hour in length, with the option of having breaks every 15-30 minutes. By taking into account the above characteristics of the specific clients and setting of the agency, the anger and aggression awareness program is much more likely to be a success.

In order to gather suggestions from agency staff, a staff survey (Appendix A) was developed. This was done by combining the ideas of the manual creator and her two supervisors. Questions were brainstormed and then reduced to create a simple, straightforward staff survey that would allow the manual creator to gain insight into exactly what the staff wanted from the workshop manual. Results from the survey indicated that staff wanted a manual developed for 8-10 flexible, individual sessions of anger and aggression management that focused on substance abuse, defining anger, and options for resolving conflict, among others. All of the staff’s suggestions were taken into consideration as the manual was developed. The following comprises a list of the sections of the manual. Rationale and descriptions for each of the eight sessions can be found in the Results Chapter:

Session One: Introduction to Anger & Aggression Awareness & Goal Setting
Session Two: Defining Anger & Aggression
Session Three: Physical Anger Cues
Session Four: Relaxation & Other Techniques to Manage Anger & Aggression
Session Five: Cognitions Surrounding Anger & Aggression
Session Six: Substance Abuse & Emotions
Session Seven: Decision Making - Choices & Consequences
Session Eight: Conclusion – Tips for Continued Success

Measures of Anger & Aggression

The manual includes three different pre- and post-measures to evaluate the effectiveness of the program at decreasing participant’s anger and aggression and increasing their ability and skills to deal with their anger and aggression. The first and most informal measure is the Anger Awareness & Conflict Resolution Test. This is designed as a quiz for participants to take both before and after they participate in the eight sessions in order to see what they have learned. The quiz is mostly comprised of questions from the eight sessions that were developed by the manual creator. It is supplemented with a few questions that were modified from an existing anger management manual regarding the participant’s beliefs about their ability to control their own anger and/or aggression (Fitzell, 2007). The second measure is the Beliefs Supporting Aggression Assessment (Bandura, 1973). This assessment, as well as the remaining two, was suggested for use by the Centers for Disease Control and Prevention (Dahlberg, Toal, & Behrens, 1998). It is gauged at a 12 year old reading level, as it is targeted for youth aged 12-16-years-old and has an acceptable level of reliability, with an
internal consistency of .66. The tool measures clients’ normative beliefs about aggression, which the treatment sessions will attempt to modify. A final measure is the Modified Aggression Scale (Bosworth & Espelage, 1995). This was chosen because it includes four subscales that are applicable to the client population: fighting, bullying, anger and caring/cooperative behaviour. It has been proven reliable with levels of internal consistency ranging from .60 for caring/cooperative behaviour to .83 for bullying. As well, this scale measures client’s behaviour in the past 30 days and has a focus on anger. It will be interesting to see the differences in client behaviour between the 30 days prior to beginning treatment and the 30 days prior to completion of the eight week program.

**Procedures**

In order to develop the manual, a number of procedures were followed. First, an extensive literature review was completed on anger, aggression, and related topics. The information gathered from the review was then synthesized and discussed with the agency supervisor. From this point, a preliminary list of possible topics to be included in the manual was developed, as well as a staff survey to be distributed to all agency staff. Once the staff survey was collected and analyzed, the information gathered from the survey and the literature review was put together and a final topic list was developed. Each topic on the list was given a purpose and researched. Ideas were pulled from the thesis writer and supervisors, as well as from various other resources on anger management appropriate for the age of the target client population. For each topic, a session was developed in the manual. Each session was comprised of a purpose, a number of exercises and instructions, and homework assignments. The sessions were then edited and reworked by the college supervisor and thesis writer. After sufficient editing, the manual was presented to the agency supervisor for final approval.
Chapter IV: Results

The completed result of this project is the Anger & Aggression Awareness Manual found in Appendix B. In summary, the finalized manual is comprised of eight sessions. Each session is made up of a number of lessons and includes appendices containing the worksheets needed to complete each lesson. It also includes an introduction and instructions for the agency staff on how to run the program.

The manual begins with an introduction to the program facilitator. This is included in order to brief the instructor on the content of the manual. As well, it includes suggested steps to beginning the program, such as giving the three measures of evaluation, obtaining informed consent from clients, and providing them with information about the nature of the program. The first session of the program begins with an introduction to anger and aggression awareness and goal setting. It is necessary to introduce the clients to what they will be learning about over the next eight weeks. As well, it is suggested that rules are established and goals are set in the beginning of treatment. Additionally, icebreakers are built in to help facilitate group cohesion.

SMART goal setting is incorporated because this is a method used in the classroom at the agency already. The second session of defining anger and aggression was developed in order to accommodate a portion of the psychoeducation aspect of treatment, as well as agency requests. The anger web and ABCs of anger are just two of the many specific requests made by agency staff on the Staff Survey fulfilled by this session. The third session is focused on physical anger cues because it has been shown that if clients are able to recognize these cues, they are more likely to alter their reactions to them. As well, this topic was a request for inclusion from agency staff. The fourth session is comprised of relaxation and other techniques to manage anger and aggression because after having discussed the various aspects of anger for the previous three sessions, some positive ways to deal with the client’s difficult feelings needed to be presented.

Progressive muscle relaxation (PMR) was chosen because it is an empirically-based form of muscle relaxation and one that was presented at a conference attended on cognitive-behavioural therapy in the city of the agency. The fifth session of the manual is about cognitions surrounding anger and aggression because, as previously noted, cognitive-behavioural therapy is a largely empirically-based treatment for anger and aggression problems. Therefore, the exploration of cognitions, including maladaptive thoughts and cognitive distortions, needed to be included. Session six is about drug abuse and its effect on emotions. This was included because a high percentage of the clients seen at the agency have experienced problems with either drug use or abuse and it has been shown that aggression is increased when people are under the influence of certain drugs (Loseke, Gelles, & Cavanaugh, 2004). Therefore, the connection between drug use/abuse and aggression needs to be shown to the clients. The seventh session is about decision making and teaches clients about various choices they have and the consequences that come along with them. Numerous scenarios are presented in order to accommodate for the variation in areas in clients’ lives. The clients are taught that they have the option of displaying anger and engaging in aggressive behaviour or not. The last session provides a wrap-up to the program. Tips for continued success are provided to the clients and any questions or concerns regarding the end of the program are addressed. This session was included in order to promote generalization and maintenance of any treatment gains. It
provides much-needed support for the clients by allowing the agency staff to gauge their growth during the program, as well as direct them to further-needed supports.
Chapter V: Conclusion/Discussion

Summary

The creation of this thesis required researching both empirical articles for best practices and current anger management manuals for activity ideas. The anger and aggression awareness manual is an ensemble of activities pulled from current resources and the creator’s mind, which allow the instructor to teach eight lessons deemed important by both the agency for which the manual is created and research alike.

Strengths

A true strength of the finalized manual is that it is directly tailored to the agency that it was created for. It takes into account all of the requests from staff members. It includes activities for the appropriate client levels and ensures that they can be done individually or in groups, as requested, in the space available. Another key strength of the manual is that goal-setting is incorporated into the beginning, middle, and end of the program and the keeping of anger logs is done throughout the program. Both of these items act as tracking devices that will allow for the program facilitator to judge the effectiveness of the program and client rates of success. The multimodal aspect of the manual provides another strength. Not only is the manual multimodal, as it includes examples from various settings in the clients’ lives, but it is also multimodal because it includes a wide variety of activities. The variety of activities that clients are involved in will keep their attention better, as well as promote skill generalization to a greater variety of clients. Each session has a wide range of activities from reading to role plays to art. Examples are included for some of the activities, which provide useful information for the facilitator, as well as save them the time of creating their own examples. A final strength of the manual to consider is that the activities, whether they are newly developed or taken or modified from other resources, are at appropriate reading levels for the proposed client population.

Limitations

There were a number of challenges faced when creating the anger and aggression awareness manual. Initially it was a challenge to get feedback from the agency staff on what they wanted the manual to look like. The main challenge in the creation of the manual was that it had not been previously done by the creator. Therefore, every piece that went into it involved extensive research and planning. It was difficult to make the manual flexible enough to suit all of the agency’s needs, as they have a diverse client population.

The manual itself has its limitations as well. First, it is comprised of bits and pieces from other programs, so there is no way to know that the activities chosen will be as effective in their new context. Also, treating anger and aggression in youth was identified as an area in need of more research, therefore borrowing best practices from this group could prove to be ineffective. The pre- and post-treatment measures could
limit the utility of the manual because the one that was specifically designed for the program does not have any current reliability or validity data. As well, the program facilitators may not be sufficiently trained in scoring the measures.

There are also projected challenges for the future when the agency uses the manual. The main concern is that the manual has not been tested with clients yet, therefore the results may not turn out as anticipated. As well, agency staff may have difficulty getting clients to ‘buy in’ to some of the activities. The diverse client population could prove to be a challenge if using the manual in a group format with a range of ages. As well, the agency has a high rate of client turnover, therefore it may be difficult for clients to complete the entire program. Lastly, a lack of staff training in running anger awareness programs could limit the effectiveness of the delivery of the sessions.

Contributions to the Behavioural Psychology Field

The development of the anger awareness and conflict resolution manual makes a direct contribution to the behavioural psychology field. It was reported that anger-related problems are two of the more frequent reasons people refer children for mental health services (Abikoff & Klein, 1992) and that people have fewer strategies for dealing with anger than any other emotion (Tice & Baumeister, 1993). The eight session program developed in the manual has the potential to aid some of the youth that may have otherwise sought more intense treatment (e.g., individual therapy from a behavioural psychologist). By helping these youth within the agency, it saves other community resources and frees up professionals to help youth with other problems. If the program is successful, it could keep many at-risk youth from getting into deeper trouble.

The manual was created as a form of cognitive-behavioural therapy for youth with anger and aggression problems. As previously noted, Blake and Hamrin (2007), came to the conclusion that there was a need for more research in the area of “intervention and prevention of anger-related problems in youth” (p. 219). The manual is targeted to at-risk youth and provides an intervention to use and facilitate the prevention of issues related to anger, aggression, and conflict within them. As well, the manual directly contributes to the agency it was designed for. It takes into account the specific needs of the agency and addresses them head-on, enabling the staff to better-aid their youth.

Recommendations for Future Research

It is recommended that the manual be evaluated by each staff member at the agency, as well as a specialist in anger management. Furthermore, it is suggested that the eight session program be tested out with willing clients at the agency. This should be done in both individual and group settings as to properly evaluate each session and activity. Based on the results of the testing, staff can continue with the sessions as laid out or make changes to them.
A suggested addition to the manual is to include more parental involvement, such as having the parents attend one of the sessions or building another session into the program specifically for parents. Furthermore, a handout summarizing each session for the clients to take home to their parents could be provided. As well, it could be helpful to develop a client version of the manual that acts as a handbook. It would include all of the handouts and homework assignments needed. This would prevent the agency staff from having to photocopy each of the activities for the lessons separately. It is hoped that these recommendations are taken into consideration, as they are intended to aid in the success of the anger and aggression awareness treatment manual.
References


Appendix A: Staff Survey Questions & Results

1.) Looking at past clients, what are some typical behaviours that have led you to believe they could use anger management programming?

- anxiety leading to angry outburst
- lack of knowledge of how to deal with what is making them anxious
- substance use (both legal and illegal)
- swearing (2)
- name calling and making hurtful comments
- yelling, storming away
- ripping up work when frustrated
- assaults of parents, siblings, partners and peers
- aggressive behaviour of throwing and breaking things

2.) What would be the ideal number of sessions and the ideal length for a session?

- 6-8 sessions
- 10-12 sessions (2)
- 1-2 hours in length
- depends on the individual

3.) What type of a format can you see being most effective at Adolescent Awareness? Group versus individual? Why?

Individual (4)
- easier for youth to express themselves one to one than in a group setting
- ability to tailor program to the individual
- more safe, secure and confidential
- ability to incorporate parent-child exercises to facilitate effective conflict resolution

4.) What are a few specific components of anger that you would suggest be included in the sessions? (e.g. primary and secondary emotions, relaxation training, etc.)

- body response awareness training
- how to take a ‘time out’
- strategies for resolving conflict and how to discuss conflict connecting with another one of Anger Awareness’s programs
- operationally defining anger
- what it means for them as an individual to be angry
- what other people’s anger looks like
- what function does the anger serve
- ABC’s – antecedent, behaviour, consequence
- Influence that anger and substance use have on one another

5.) Do you know of any pre/post-test measures that would be appropriate for youth undergoing anger management training?
- Not Available

6.) Is there a component to the anger management program that should be gender-based -male vs. female anger?
- probably in regards to typical expression, however typology does not always fit so you need to account for individual differences
- Male – physical aggression and tend to keep anger bottled up
- Female – relational aggression and possible work on victim empathy
- No (2)

7.) Thinking of your clients, are there any specific areas in their lives where anger is directed towards or centered around for the most part? (e.g. – school, home, peers)
- Teachers & principals (3)
- CAS workers
- Family (4)
- Peers (3)
- Partners

8.) Do you have any further suggestions that may help in the development of an anger management program for Adolescent Awareness?
- integrate with agency’s current MEND program
- have a parent/child component regarding handling conflict productively

**Survey Statistics**
Percentage of staff members completing survey: 50%
Number of staff members completing survey: 4 of 8 full-time program coordinators at the time the survey was taken
Anger and Aggression Awareness Treatment Manual

by

Kathleen Nash

Part of a thesis submitted to the School of Community Services

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the degree of

Bachelor of Applied Arts in Behavioural Psychology

St. Lawrence College

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Canada.

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The procedures in this training manual are meant to be used by agency staff, as part of the broader services they provide, or under supervision of agency staff.
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Introduction

The purpose of the Anger and Aggression Awareness Manual is to provide a comprehensive guide for the facilitator of eight sessions of cognitive-behavioural therapy (CBT) for youth ages 10-17-years-old. The cognitive-behavioural approach is research-based and empirically-validated. The main application of CBT to anger and aggression is to help clients identify and adapt their thinking (cognitions) and behaviour, and become aware of the connection between the two, as well as develop appropriate coping skills.

This particular manual will include the following aspects of cognitive-behavioural therapy:

- Psychoeducation – provides clients with information about anger, aggression, cognitive distortions, and other aspects of CBT
- Self-monitoring – clients will keep journals, as well as daily anger logs, to help them become more aware of their emotions, behaviours, and the accompanying triggers and consequences
- Social Skills Training – clients will be taught communication and conflict skills to increase their ability to function appropriately in social settings and will practice these skills through role playing
- Relaxation Therapy – includes deep-breathing and progressive muscle relaxation to assist in counteracting the physical signs of anger
- Cognitive Distortions – clients will be taught the different types of these maladaptive thoughts and methods to alter them
- Behavioural Role Plays – both clients and facilitators will participate in role plays in order to practice skills learned in sessions
• Homework – clients will complete homework between sessions to improve their chance for success both through allowing them to practice the skills learned as well as allowing the facilitator to review the client’s progress.

The manual is presented in a flexible manner for both individual and group use. The activities within the sessions can be easily altered to accommodate either an individual or a group, and instructions and suggestions for both individual and group activities are included. The manual also includes a variety of examples that are appropriate for youth ages 10-17-years old. This manual provides a framework for CBT with youth struggling with anger and aggression; however, it is intended to be built upon. Facilitators are encouraged to use their creativity to ensure the material is tailored to their client(s).

Prior to the first session, it is recommended that staff meet with each client and have them complete all of the assessments found towards the end of the manual. These assessments will be given again at the end of the program in order to compare clients’ progress pre- and post-treatment. As well at this meeting, you must provide the client with informed consent. This should be done both verbally and written. The informed consent needs to include the nature of the sessions and possible benefits of participation in the program, such as improvements in undesired symptoms, as well as the risks of participation, like the possibility of having strong emotional reactions to the contents discussed. Confidentiality will be covered, as to ensure the client that what is discussed will kept between themselves and the facilitators, with the exception of intent to harm oneself or others, disclosure of criminal acts, or of child abuse or neglect. They will also
be informed that they can withdraw from treatment at any time and will be given the opportunity to ask any necessary questions. It is crucial that the client’s rights and the limits of confidentiality, as well as your obligations of when to breach confidentiality are discussed.

The manual is set up in order of the lessons and following each lesson are the corresponding appendices. Depending on your client population, you may want to take breaks every 15-30 minutes. They can be easily built in between activities.
Session One Outline: Introduction to Anger & Aggression

Awareness & Goal Setting

Purpose:
- to introduce clients to therapy and one another (if in a group setting)
- to establish rules
- to define and set goals to be achieved throughout therapy
- Goal setting may also assist the facilitator in gauging the client’s motivation for therapy.

Introduction to Group

For the initial meeting of a group it is important to create an environment that is conducive to group cohesion. The key tasks of this session are to introduce members to one another and therapy and create rules and guidelines for the group. Rule-setting can be done collaboratively as a group. It is suggested that you bring a list of rules you expect the group members to follow and then have members add to them. Some suggestions include:

- One member may talk at a time and will be given the attention and respect of all other members
- If any member feels like they need a time-out from the group they simply need to tell the facilitator
Ice-breaking activities may help develop connections between the group. A couple of examples are:

- have the group split up into pairs, each learning a couple of things about one another, and then have each pair come back to the group and introduce their partners to everyone else
- have everyone in the group tell two things that are true and one thing that is false about themselves, and then have the group guess which thing is false about each person

Consult [www.icebreakers.ws](http://www.icebreakers.ws) for many more ice-breaking activities.

**Goal Setting**

- Ask client(s) about their past and current experiences with goal setting
- Ask them what they believe makes a good goal
- Discuss the differences between short- and long-term goals
- Discuss appropriate goals for this group
- Complete My Goals sheet (Appendix 1-A)
- Introduce SMART goal setting (Appendix 1-B)
  1. Ask client if the goals on their Goal Setting sheets are SMART
  2. If not, assist them in making SMART goals.
- Complete My SMART Goals sheet (Appendix 1-C)
- Possible examples for goals are:
  1. Learn how to not get mad over the little things
  2. Learn how to control my aggression
3. Learn the difference between appropriate and inappropriate anger

**Homework: Anger Logs**

Give client(s) copies of the Anger Log (Appendix 1-D) and explain to them that you would like them to record any incidents in the next week when they become angry. It is helpful to review each section of the log, answering any questions as you go along. After reading through the directions, you may complete a practice log with your individual client or as a group. Clients may share a recent experience that they had or create a fictional one. Explain that the clients will be required to keep anger logs every week throughout therapy as part of their homework.
Appendix 1-A

My Goals

What do you hope to achieve out of these sessions, both short- and long-term? What changes in your behaviour and your life would you like to see? What do you want to accomplish?

Short-term

_________________________________________________________
_________________________________________________________
_________________________________________________________
_________________________________________________________
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_________________________________________________________
_________________________________________________________

Long-term

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_________________________________________________________
_________________________________________________________
My Goals Example

What do you hope to achieve out of these sessions, both short- and long-term? What changes in your behaviour and your life would you like to see? What do you want to accomplish?

Examples for short- and long-term goals:

- Learn the difference between good and bad anger
- Figure out what makes me mad
- Learn how to let my anger out in an appropriate way
- Not hit things and people when I am upset
- Go one week without yelling at someone
- Apologize to my mom and sister for causing them pain with my anger
- Learn how to relax without smoking
Making SMART Goals

In order to define your goals, they need to be SMART:

S – Specific
M – Manageable
A – Achievable
R – Realistic
T – Timely

For Example:

My goal is to: Stop getting into fights at school.

More Specifically, I plan to: Tell people that I’m not going to fight them, keep myself calm, and try to get away from the fight. And avoid situations/people that might lead to a fight.

My goal is Manageable because: I am always in control of my own thoughts and actions and I know how to and have the ability to calm myself down when I really try.

I can Achieve my goal by: I can avoid the fight by thinking before I act. I can tell the person that the fight is not worth it. I can walk away.

My plan is Realistic because: I have gone to school without getting into fights before and I have only had two fights in the last year.

The Timeframe in which I plan to achieve my goal is: By the end of this month.
My SMART Goals

Specific, Manageable, Achievable, Realistic, Timely

My goal is to:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

More Specifically, I plan to:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My goal is Manageable because:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I can Achieve my goal by:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My plan is Realistic because:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The Timeframe in which I plan to achieve my goal is:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Appendix 1-D

**Weekly Anger Log**

Each time you get angry this week, use the Anger Log below to track it. Fill in every part as best as you can.

**Name:**

1) **When & Where?** – What date, time of day, and place did your anger occur?
   
   **Date:**_______________________________________________________
   
   **Time:**_______________________________________________________
   
   **Place:**__________________________________________________________________
   
   ________________________________________________________________

2) **Who & What?** – Who or what is the subject of your anger?
   
   **Who:**___________________________________________________________________
   
   ________________________________________________________________
   
   **What:**__________________________________________________________________
   
   ________________________________________________________________

3) **Behaviour?** – What actions did you take when you were at your anger peak (most angry)?
   
   **Behaviour:**______________________________________________________________
   
   ________________________________________________________________
   
   ________________________________________________________________

4) **Rating?** – On a scale of one to ten, one being cool and calm, and ten being the most intense anger you could possibly feel or show, rate your anger (circle the number or numbers that fit your level best)
   
   **Rating:**     1     2     3     4     5     6     7     8     9     10

5) **Triggers?** – What set off your anger? – It could be something inside that you were thinking about or something outside of you that happened.
   
   **Triggers:**______________________________________________________________
   
   ________________________________________________________________
6) Cues? – What signals could have helped you realize that you were becoming more and more angry? – These could be thoughts, emotions, or actions.
Thoughts: ________________________________________________________________

Emotions: ________________________________________________________________

Actions: _________________________________________________________________

7) Hidden Emotions? – Are there any other emotions involved apart from anger that may have contributed to this situation? What other emotions did you experience?
Hidden Emotions: __________________________________________________________

8) Positives? – What did you do well in this situation?
Positives: _________________________________________________________________

9) Negatives? – What could you have improved on? What would you do differently next time?
Negatives: _______________________________________________________________
Session Two Outline: Defining Anger & Aggression

Purpose:
- to define anger and related terms in general and personally for each client
- to distinguish between anger and aggressive behaviour

Anger Web

Using the Anger Web (Appendix 2-A) and chart paper (if working with a group or active client), collaboratively brainstorm as many words as possible that mean or are related to anger (Examples: annoyance, temper, irritation, fury, rage, mad, frustration). Next, have the client(s) categorize the words into physical sensations (e.g., hot) and emotions (e.g., mad, rage). Discuss any themes among the words.

Defining Anger & Aggressive Behaviour


Read the following definitions of anger and aggressive behaviour and hand out Appendix 2-B to client(s).

Anger

- An emotion
- A natural part of human experience
- Neither good not bad – it just is
- Usually feel it when we think we are wronged, or when our wants are not met
- Helps prepare us for action
- Can be expressed constructively or destructively (i.e., in a healthy or an unhealthy way)

- Ask client(s) to add to this definition of anger.
- Before reading the definition of aggressive behaviour, ask client(s) what is meant by aggressive behaviour and how aggression differs from anger.

- Write their answers down on their definition paper or chart paper if in a group.

**Aggressive Behaviour**

- Hostile actions and often express anger
- Includes verbal and physical behaviours
- Directed towards self or others
- Violates the rights of others, is socially inappropriate and unacceptable
- Often illegal

- Ask client(s) to add to this definition of aggression.

- Ask client(s) what some examples of aggression are (e.g., hitting, kicking, physical violence with a weapon, yelling, etc.) and why people choose to behave aggressively (e.g., they like the feeling of power, want to hurt others, learned to behave this way from their parents or other role models).

- Ask if you can have aggressive behaviour without anger? Point out the difference between emotions and behaviours, anger as an emotion and hitting/threatening as behaviours.

- Ask client(s) where they see aggressive behaviour. If the media does not get brought up, do so; explain that there are a number of examples in the media where aggressive behaviour is seen, from gang scenes to war movies. You can mention that they will be exploring examples of aggressive behaviour in the media they watch for homework. As well, have clients share Appendix 2-B with their parents during the week.
**ABCs of Anger & Conflict**

Hand out The ABCs of Anger & Conflict (Appendix 2-C) and explain to client(s) that they’ll be defining anger in another way, using three steps, the ABCs. Describe each step, beginning with antecedent, then behaviour, and consequence. Note the similarities between the Anger Log clients have been completing for homework and the ABCs. Ask client(s) to share an example of a conflict situation (it can be from their Anger Logs or made up) and break it up into the three steps of Antecedent, Behaviour, Consequence. Discuss how this is done with your client or as a group.

**TTEBC (Triggers, Thoughts, Emotions, Behaviours, Consequences)**

Adapted from L. Eggert (2008), *Anger Management for Youth: Stemming Aggression and Violence*, Solution Tree.

Explain to client(s) that there is another way of describing situations of anger and conflict that is related to the ABCs. It is called Your Anger Pattern (handout Appendix 2-D to client(s)). It is suggested that you draw examples on chart paper when you explain each step. Have them take notes on their blank sheet as you explain the following five steps:

1.) Triggers – Triggers are the antecedents of our behaviour, they set us off. They can be external or internal. In other words, they may happen inside or outside of the body. External triggers are events that happen to you in your environment, while internal triggers happen inside of you like thoughts and feelings. Have each client choose a few of their top triggers and write them on their Your Anger Pattern forms. Triggers can be thought of as “pushing
someone’s buttons”. (Group/Visual e.g. – Draw a person with large buttons on his/her shirt and have each client write one of their triggers in each button).

2.) Thoughts – Tell clients that as you explain this section, you want them to write down their answers in the Thoughts part on their Your Anger Pattern forms. Ask client(s), “What do you usually say to yourself when each of these troublemaker triggers gets to you? What is your attitude and what are you thinking? Why is this situation you are thinking of so awful? Instruct clients to list as many as they can.

3.) Emotions – Explain that some of the words they brainstormed for anger last session can apply here. Emotions are our experience. You could feel hurt, scared, mad, or nervous. Explain that clients may experience varying emotions depending on which thoughts and triggers have set them off. Have them write down as many emotions as they can think of on their Your Anger Pattern forms.

4.) Behaviours – Ask client(s) what their typical responses are, such as if they usually withdraw or attack. Ask them what you could observe about them that would tell you they were angry and have them write it down on their Your Anger Pattern forms.

5.) Consequences – Explain that just as in the ABCs of anger, consequences are what typically happens after their behaviour. Have client(s) write in their usual consequences on their Your Anger Pattern forms.

**Homework:** In order to have your client(s) further explore the frequency of their exposure to aggressive behaviour, have them complete Aggressive Behaviour In
Hollywood (Appendix 2–E) while watching a TV show or a movie and check off the number of and types of aggressive behaviour seen. Remind them to continue filling out their Anger Logs and keep in mind either the ABCs or the TTEBCs when they do so. They can use blank copies of either the ABCs or TTEBCs as well to keep extra notes on conflicting situations. Provide more copies of the Anger Log, ABCs and Your Anger Pattern as needed.
Anger Web

Fill in words that come to mind when you think of anger. Add as many bubbles as possible to the web.
Appendix 2-B

Anger

• An emotion
• A natural part of human experience
• Neither good not bad – it just is
• Usually feel it when we think we are wronged, or when our wants are not met
• Helps prepare us for action
• Can be expressed constructively or destructively (i.e., in a healthy or an unhealthy way)
  •
  •
  •
  •

Aggressive Behaviour

• Hostile actions and often express anger
• Includes verbal and physical behaviours
• Directed towards self or others
• Violates the rights of others, is socially inappropriate and unacceptable
• Often illegal
  •
  •
  •
  •

The ABCs of Anger

A – Antecedent – What is happening right before you get angry?
B – Behaviour – Describe what your anger looks like. What do you do?
C – Consequence – What happens after you are angry? Remember that consequences can be both positive and negative.

<table>
<thead>
<tr>
<th>Antecedent</th>
<th>Behaviour</th>
<th>Consequence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Your Anger Pattern

1.) Triggers


2.) Thoughts


3.) Emotions


4.) Behaviours


5.) Consequences


Adapted from L. Eggert (2008), Anger Management for Youth: Stemming Aggression and Violence, Solution Tree.
**Aggressive Behaviour In Hollywood**

**Directions:**

1. Choose a TV show or movie to watch and circle the type.
2. Each time you see an aggressive behaviour in the TV show or movie, put a check-mark in the check-marks column next to the type of aggressive behaviour you see.
3. At the end of the TV show or movie, add up the total number of checks for each type of aggressive behaviour and write them in the totals column.
4. Add up all of the totals and fill-in the overall total in the bottom row.

**Type/Genre of TV show or Movie (circle one or fill-in Other blank)**

<table>
<thead>
<tr>
<th>Comedy</th>
<th>Drama</th>
<th>Action</th>
<th>Horror</th>
<th>Musical</th>
<th>Cartoon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other: __________</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Aggressive Behaviours</th>
<th>Check-Marks</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal Aggression (yelling, shouting, arguing, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Aggression (towards a person – punching, shoving, kicking, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Destruction of Property (breaking or throwing things, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of a Weapon (knives, guns, chains, bombs, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overall Total: __________</td>
</tr>
</tbody>
</table>

Session Three Outline: Physical Anger Cues

Purpose:
- to explore the physical signs of anger
- to increase client awareness of their physical cues
- to begin discussing relaxation techniques to help counteract the physical cues

Review Homework

Have clients share their aggressive homework worksheets. Tally up how many each client had and discuss which types of media had the most/least. Ask client(s) if they think media violence effects conflict in “real life”. Check in to see how client(s) are managing with their anger logs. Ask who was able to use either the ABCs or TTEBCs during the week and if anyone is willing to share.

Physical Cues to Anger


If working with an individual client, you may give them a copy of Appendix 3-A and ask them to think about a recent time they got really angry. Have them tell you the story and as they are reaching the peak of their anger, ask the client to describe what he/she was feeling physically and have them write that down on the Physical Cues to Anger handout.

If working with a group, on a large piece of chart paper trace one of the client’s body outlines and title it Angry Albert. Explain to them that we’re going to draw on each part of his body that is being affected by his anger. For an example you may start by
drawing a fast-beating heart or a clenched fist. Have each client draw at least two physical cues to anger. Hang up the drawing once completed and discuss each cue drawn. Hand out copies of Appendix 3-A to each client and have them write down their personal physical cues to anger on their sheets. Discuss with clients the importance of noticing these cues early enough to do something effectively about them and the ensuing conflict. Ask clients to give examples of how identifying anger earlier can assist them in planning more effective responses.

**Case Example**

Read the following case example to client(s) and discuss:

David is on his way home from basketball practice, when a couple of grade 12 students start teasing him about his legs. He feels his heart start to race and he begins walking faster to get away from them. He notices his palms becoming sweaty and feels nervous. He is kind of scared of the older guys, but at the same time is starting to get angry. His fists clench, but then David takes notice of this. He begins to turn up his headphones and imagine he is at his favorite band’s concert. He is able to tune out the other guys and ignore them, until they eventually get tired of not getting a reaction and leave.

Ask client(s):

1) What was David angry about?

2) What physical cues to anger did David notice?

3) How did he handle his anger?
4) Was this effective and what are other effective ways David could have dealt with his anger?

**COPING with Anger**


This lesson is provided to teach clients a method of problem-solving when they feel themselves getting angry and encourage them to develop appropriate self-talk. Basically, they will be taught to calm down, think about their options, choose one, and act on it through an introduction to the COPING method. Hand out COPING with Anger (Appendix 3-B) to each client and explain to them that they will be learning an easy way to remember six key strategies to deal with their anger. Take your time going through each step, ensuring that ample self-talk is identified and all questions are answered.

Explain each of the following COPING steps:

**C – Calm Down**

Count to 10. This prepares you to think more clearly. This is a very important first step and should not be ignored.

**O – Overcome the negative; Opt for control**

Have students discuss and complete the sentence, “If I lose control now, then ______________.”

**P – Prepare, Problem-solve, Plan**

Point out that this is a crucial moment in which they need to take another minute and think.
I – Identify and invite alternatives. Instead of insults, imagine success

Say that by this time, if they have used the first three steps successfully they have got things under control. However, they still need to go further and make the situation better. This means taking the last two steps.

N – Name your feelings; Negotiate

Point out that naming the feeling (anger) to yourself can be a signal, a reminder to negotiate instead of blowing up. Negotiating is critical to making thing better and improving the typical consequences.

G – Go! Get on with the plan

Get the hang of these strategies and give praise to yourself and others that are helping you.

Have your client(s) discuss their own experiences with losing control and then have them rework the situations, explaining them in a more positive manner, as if they had used the COPING method.

**Homework**

Hand out the COPING with Anger Habit Check (Appendix 3-C) and ask your client(s) to check off which of the COPING techniques they use throughout the week when they record in their Anger Logs. Have them focus on their physical anger cues.
Physical Cues to Anger

Anger is a normal reaction to an apparent threat. All animals have certain physical reactions to threats that let them respond to them: for example, to run away from danger, to fight to protect ourselves or our family, or to stay still in order to avoid being seen by another creature that could hurt us. On the drawing below, write in any of the following physical symptoms you feel when your anger is increasing (feel free to write in any that are not listed): ringing in your ears, clenched jaw, raised shoulders, grinding teeth, headache, cry, warm face, knotted stomach, tense neck, increased heartbeat, backache, clench fists, sweaty, tap feet.

The physical symptoms you wrote on the drawing can be used as cues or signals to let you know when your anger is escalating. Some of these cues may happen before others. If you are able to tune into your own physical signs of anger, you can learn to recognize them sooner and respond to your emotions in more planned and effective ways.

COPING with Anger

These six strategies can be very helpful when you are involved in a conflict or feeling angry. There are suggestions of what to say to yourself at each step, but you may always write in your own self statements as well. The key is to figure out what works for YOU and apply it.

C – Calm Down

Count to 10. This prepares you to think more clearly. This is a very important first step and should not be ignored. Say to yourself, “Calm down! Stop!”

or

or

O – Overcome the negative; Opt for control

Say to yourself, “You don’t need to blow up. It’s not that bad. I can handle this.”

Or, “If I lose control now, then __________________________.”

or

P – Prepare, Problem-solve, Plan

Say to yourself, “Think! Problem-solve!” Remember my plan and don’t get pushy.

or

or
I – Identify and invite alternatives instead of using insults.

Say to yourself, “Imagine success; don’t assume the worst. If I start to get mad, I’ll just be banging my head against the wall. Don’t insult.”

or__________________________________________________________________
__________________________________________________________________

N – Name your feelings; Negotiate

Say exactly what you are feeling to yourself, “I’m angry.” That should be a signal to start thinking about negotiation.

or__________________________________________________________________
__________________________________________________________________

G – Go! Get on with the plan

Get the hang of these strategies and give praise to yourself and others that are helping you.

or__________________________________________________________________
__________________________________________________________________

Adapted from L. Eggert (2008), Anger Management for Youth: Stemming Aggression and Violence, Solution Tree.
### COPING with Anger Habit Checks

Check off each time you use the COPING strategies and calculate your daily and weekly totals.

<table>
<thead>
<tr>
<th></th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
<th>Sun</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C – Calm Down</strong></td>
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<td><strong>O – Overcome the negative, opt for control</strong></td>
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<td><strong>P – Prepare, problem-solve, plan</strong></td>
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<td><strong>I – Invite alternatives instead of insults</strong></td>
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<td><strong>N – Name the anger feelings, negotiate</strong></td>
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<td><strong>G – Get on with the plan and give praise</strong></td>
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Adapted from L. Eggert (2008), *Anger Management for Youth: Stemming Aggression and Violence*, Solution Tree.
Session Four Outline: Relaxation & Other Techniques to Manage Anger & Aggression

Purpose:
- to help client(s) learn a deep-breathing technique
- to explore other strategies to control conflict
- to check-in on the progress client(s) are making towards their goals

Quote

As a short warm-up to begin the session, read the following quote and discuss its meaning with client(s):

“Anger cannot be overcome by anger. If a person shows anger to you, and you respond with anger, the result is disastrous. On contrast, if you control anger and show opposite attitudes—compassion, tolerance and patience—then not only do you yourself remain in peace, but the other’s anger will gradually diminish.” – Dalai Lama

Explain to client(s) that today will be a very positive session where they’ll be exploring many great strategies to help them with anger and conflict issues. Remind them that last session, we looked at the COPING strategy. Have client(s) share their habit checks. Discuss the pros and cons they experienced.

Role Play: COPING strategy

The following are a few role plays that involve key situations in your client’s lives. There are situations involving friends, school and home life. It is important to include situations from all of the areas in their lives. You may also have clients suggest situations for role rehearsal. If working with an individual client, act out the role plays
with them. When completing role plays in groups, assign clients not only roles to act out, but also observer and note-taker roles. Set ground rules for the role plays and remind clients that although they are acting, they still need to follow the group rules, such as no physical contact or using language that will offend one another. Role plays can be difficult for clients who are shy so be sure to use generous doses of both individual and group positive feedback. The important principles of this lesson are for clients to define situations as problems that call for solutions rather than as threats calling for attack, and to focus on the issues involved and avoid responding in anger.

**Friends Role Play**

Your current girlfriend/boyfriend broke up with you today. They told you that they like you alright, but want to date other people. You are very upset because you still care about them and you’re mad at them for not wanting to be with you. You can feel your face getting red and hot and you’re really down now. What are you going to say to your girlfriend/boyfriend? How can you get out of your bad mood?

**School Role Play**

You are in math class, which you hate going to and it is time to hand in your homework assignment. You do not have it ready, for the fourth day in a row, when your teacher asks you for it. He is clearly angry and tells you that you’ll be receiving a failing grade for homework for the week. He continues by explaining to you that if you do not start completing all of the homework assignments, you will not be able to earn credit in his class. You feel frustrated at the thought of failing another math class and contemplate storming out of the room. How can you calm yourself down? What can you say to your teacher to let him know that you understand what he is saying?
Parent Role Play

You have a curfew of midnight for the weekend. On Friday night, you come home at 3 a.m. without having called home explaining yourself. You arrive home to find your parents angry, having stayed up worrying about you, unable to contact you. How can you listen to your parents explain their frustration to you in a way without becoming defensive and angry? How can you respond to your parents to let them know you understand what they are saying? What can you say to one another in order to help understand each other’s point of view?

Progressive Muscle Relaxation (PMR)

Explain to clients that they are going to learn a strategy that will counteract their physical cues of anger that were discussed last session. PMR is a type of relaxation where you tense and relax specific muscle groups in your body in order. It can be very effective at reducing client’s physical signs of anger, stress, and agitation. Explain to clients that there are a few minimal risks associated with PMR and that they should not participate if they have severe muscle pain. There is a risk of injury if PMR is improperly used. As well, client anxiety could possibly increase after the first session of PMR. Also explain that this technique takes practice and the more they do it, the easier it will be for them to relax, but that PMR may not be effective for everyone. The following provides a script for you to read for clients to participate in PMR. It is a good idea to record the script and make CDs or tapes for clients to use at home when they practice.
**PMR Script**

*Instruction to Facilitator: turn lights down and have a clock with second hand visible before beginning the exercise*

Before we begin I would like for you to get as comfortable as you can in your chair with your feet on the floor. When you are ready close your eyes and we will begin.

I would like you to start by concentrating on your breathing. Take slow breaths in ... and out ... and in ... and out. (Let them concentrate for approximately 15 seconds before beginning with the tensions).

(Have the client hold each tension for 5 seconds)

1. Now, I would like you to raise your eyebrows up as far as you can toward the top of your head. Feel the wrinkles on your forehead. Feel the tension. (Hold 5 seconds). Now slowly lower your eyebrows until they are relaxed. Feel the tension fading from your forehead.

Continue to concentrate on your breathing. Take slow, deep breaths in ... and out ... and in ... and out.

2. Now squeeze your eyelids tightly together. Feel the tension all around your eyes. (Hold 5 seconds). Now slowly release that tension; Feel it fading from your eyes and your forehead.

3. Now, I would like you to open your mouth as wide as you can. Feel the tension in your jaw. (Hold 5 seconds). Now slowly close your jaw, leaving your mouth slightly open. Feel all the tension leaving your jaw ... your eyes ... your forehead.

Continue to take slow, deep breaths in ... and out ... and in ... and out.

4. Now slowly, and carefully lower your chin toward your chest as close as you can. Feel the tension in the back of your neck. (Hold 5 seconds). Now slowly raise your head. Feel all the tension fading from your neck.

5. Now raise your shoulders up toward your ears as high as you can. Feel the tension in your shoulders ... your upper back. (Hold 5 seconds). Now slowly
lower your shoulders. Feel the relaxation spreading from your shoulders ... your back ... your neck.

Concentrate once again on your breathing by taking slow, deep breaths in ... and out. ... and in ... and out.

6. Now I would like you to make fists with both hands and squeeze tightly. Feel the tension in your hands ... your wrists. (Hold 5 seconds). Now slowly open your fingers and release that tension. Feel it fading from your hands ... your arms.

7. Now take a slow, deep breath in and this time hold that breath. Feel your chest muscles tighten. (Hold 5 seconds). Now slowly let out your breath and feel the tension flow out of your chest with that breath.

Once again concentrate on taking slow, deep breaths in ... and out ... and in ... and out.

8. Now tighten your stomach muscles by sucking in your stomach as far as you can. Hold that ... feel the tension in your abdomen ... and your lower back. (Hold 5 seconds). Now slowly relax your stomach muscles. Feel the relaxation spreading from your abdomen and lower back ... your chest.

9. Now slowly and carefully stretch out your legs and point your toes and feet toward you. Feel the tension in your calves ... the back of your thighs. (Hold 5 seconds). Now slowly relax your toes and feet. Feel the tension spreading from your calves up your legs.

10. Now once again stretch out your legs and this time point your toes and feet away from your body. Feel the tension in your feet. Now slowly relax your feet and feel the relaxation spreading from your feet and calves ... up your thighs. Feel the relaxation in your abdomen and chest. Feel the tension fading from your shoulders, upper back and neck ... down your arms. Feel how relaxed your face feels ... your jaw ... your eyes.

Continue taking slow deep breaths in ... and out ... and in ... and out.
When you are ready start to move your fingers and toes. Slowly open your eyes.

Ask clients if they were able to relax and what they thought about the PMR experience. Reiterate that it may take some practice and encourage clients to practice at home once per day, each day, for this entire week. Ask them to write down their thoughts after completing the PMR each day in Appendix 4-A and bring it in next session (wait to hand out Appendix 4-A until the end of the session).

**Word Search**

Give each client a copy of Appendix 4-B. Have them find and circle as many words and phrases as they can. If wanted, you may give them a copy of the answer key as well (Appendix 4-C). After each client finishes the word search, have a discussion about which of the activities they have done in the past or currently do. Ask them which ones they would be willing to try, and finally brainstorm activities not found in the word search. A few ideas are: draw, jump rope, scrapbook, clean, call a helpline, and get some fresh air.

**Homework**

Remind client(s) to practice PMR and handout the PMR Log (Appendix 4-A) and the TTEBC Check-Up (Appendix 4-D) for them to complete as homework. For a quick review, have clients tell you what the TTEBC stands for before giving out the handout.

**Goal Check-In**

Since it is halfway through the program, it is a good idea to check-in on the progress of client goals. At the end of today’s session, meet with each client individually
to check-in on the progress they are making towards the goals they set during session one. Provide support and encouragement for clients as it may be difficult for those who feel they have not made progress thus far. Positively reinforce all strides being made towards goals and offer to help clients rework goals if necessary. Be sure to not allow clients to aim lower than they should, however, sometimes editing goals might encourage more positive development. For example, if a client had set an original goal of keeping their anger log six days a week, you could have them aim for four days a week to start and then work up to five or six when they reach the initial four-day goal.
## Progressive Muscle Relaxation (PMR) Log

<table>
<thead>
<tr>
<th>Day</th>
<th>Did I complete the PMR today?</th>
<th>Why did/didn’t I complete the PMR today?</th>
<th>My thoughts after completing the PMR today are…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
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<td>Sunday</td>
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</table>
Ways to Decrease Anger Word Search

The following word search has 25 ways to help reduce your anger or “de-stress” hidden in it. The words and phrases are hidden horizontally, vertically and diagonally (up, down, side-to-side, diagonal). Circle or highlight as many as you can find. Think about which activities you could use in your life.

Adapted from K. Moles (2003), Strategies for Anger Management. Wellness Reproductions & Publishing, Inc.
Word Search Answer Key

1. Take a walk
2. Jog
3. Sing
4. Dance
5. Listen to music
6. Read a book
7. Watch a movie
8. Meditate
9. Write a letter
10. Journal
11. Make crafts
12. Take a bath
13. Shower
14. Play an instrument
15. Play a sport
16. Exercise
17. Talk to a friend
18. Breathe deeply
19. Bike
20. Skate
21. Yoga
22. Hike
23. Paint
24. Laugh
25. Swim
TTEBC Check-Up

1.) Triggers – What are you currently working on?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2.) Thoughts – What self-talk are you using to help refocus?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3.) Emotions – How are your thoughts influencing your emotions? How are you doing at controlling your anger?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4.) Behaviours – In your conflict situation, what would you like to be able to say or do? How is your practice going?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5.) Consequences – What consequences have you experienced? How are these different than before?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Adapted from L. Eggert (2008), *Anger Management for Youth: Stemming Aggression and Violence*, Solution Tree.
Session Five Outline: Cognitions Surrounding Anger & Aggression

Purpose:
- to explore with client(s) their cognitions and ways to alter them, including cognitive distortions, self-talk, “I” statements and thought stopping

Self-Talk & Cognitive Distortions
Definitions adapted from M. Cullen & J. Wright (2006), Cage Your Rage For Teens, American Correctional Association.

Explain to client(s) that everyone engages in self-talk on a daily basis and it is exactly what it sounds like – the things we say to ourselves. Self-talk can be negative or positive and many times negative self-talk is involved in situations of conflict and/or when you are feeling angry. Ask clients for examples of their negative or positive self-talk. Explain that a lot of the time negative self-talk can take the form of cognitive distortions. Hand out Common Cognitive Distortions (Appendix 5-A) and explain that cognitive distortions can basically be thought of as thinking mistakes. As well, explain that there are alternatives to these common thinking errors, some of which work for more than one. (The alternatives are highlighted in bold below each error, both below and on Appendix 5-A. Review the following list of ten common ones from Appendix 5-A (if in a group, have clients take turns reading them out loud):

1. All or nothing thinking
   This means that you fail to see the middle ground, everything is one-sided. Things are always completely black or completely white…there is no gray area. For example, if your mom said she would pick you up at 5:00pm and it is 5:10pm and she has not arrived yet, you automatically assume that she is not going to pick you up, that she forgot or something.
   Alternative: Are there other possible outcomes you haven’t considered?
2. Overgeneralization
This is what happens when you take one bad circumstance and look at it as a never-ending pattern of bad circumstances. For example, if someone picked on you on the way to class. You then want to avoid going to class because you think that you always will be in this situation.

Alternative: Are there times things are not this way?

3. Mental filter
This is what happens when you choose one bad thing and focus on it so much that everything seems bad: The only things that filter through are the bad ones. For example, if you got a science report back from your teacher with a grade of an A and all you could focus on was her comment about you forgetting two commas you would be demonstrating a mental filter. You focus on the one bad comment, completely forgetting about your achievement of getting an A.

Alternative: Is there anything you are not noticing that supports the opposite view?

4. Not counting on the good things
This means that when bad things happen, you say it is normal and when good things happen, you say it is just luck. Good things don’t count. For example, you might think “I may have talked to my good friend last night, but I have not seen her in over a month.” It’s just luck that she happened to call you last night, and you focus on not having seen her in over a month.

Alternative: Is there anything you are not noticing that supports the opposite view?

5. Jumping to conclusions
This means you assume that something is bad even though you are not sure. You make up your mind before having enough information to do so.

Alternative: Is there a chance the outcome is not so certain?

6. Mind reading
You think you know what other people are thinking or feeling even when you don’t have proof. For example, you are having a conversation with a friend and they make a squinty face at you that you assume is them disagreeing with you. However, they are not disagreeing; they are simply squinting because they got a hair in their eye. You assume people are thinking things, without first asking questions.

Alternative: Is it possible the other person doesn’t think this way?

7. Fortune telling
This is what happens when you act in a certain way because you believe the situation is going to turn out negatively. For example, you think you are going to do poorly at an interview, so you approach the interviewer with a negative attitude. You believe you’ll
fail so you make that happen by behaving negatively. Perhaps you had a chance at 
getting the job, but did not get it due to the way you presented yourself to the 
interviewer.

Alternative: Is it possible the other person doesn’t think this way?

8. Magnifying or minimizing

This happens when you look at positive events as small things and negative events as 
big things. You play up the importance of the bad and downplay the good. For example, 
you get a spelling test back with a grade of 90% and all you can focus on is the one word 
that you got wrong. You magnify the one word you got wrong and minimize the nine 
you got right.

Alternative: I wonder if you are giving either yourself or the event too much or too 
little credit.

9. Labeling and mislabeling

This is what happens when you judge people. For example, you see a mom scolding 
her child at the grocery store and think, “What a horrible mom…what’s wrong with 
her?” However, what you don’t know is that she is a great mom, who just happens to be 
disciplining her child appropriately for what she had done. You jumped at what you saw 
and mislabeled the mom negatively. When you give people labels, it can be very hard to 
change those labels and your thoughts and feelings about those people.

Alternative: Is there a different way of looking at that? What is it?

10. Taking it personally

This is what happens when you blame yourself for something bad even though it was 
not your fault. We can think of these as tapes of blaming statements we play to 
ourselves. Some examples of these tapes are, “It’s my fault my parents got divorced. I 
shouldn’t have fought with my sister so much,” or “If I hadn’t gone to my friend’s house 
the other night, my sister wouldn’t have gotten hurt because I would have been 
responsible for her and not that stupid babysitter. It’s all my fault she got hurt.”

Alternative: Are you taking all of the responsibility for everything? What other 
factors might be at play?

Ask client(s) for examples of each of the types of cognitive distortions that they 
either exhibit personally or have witnessed others thinking. You can use TV as an 
example. Ask them for ways of counteracting the distortions. Explain to them that one 
way of controlling negative self-talk like these distortions is called thought stopping.
Thought Stopping

Hand out Thought Stopping (Appendix 5-B) and read through with client(s). Ask for their opinions and discuss examples of using this technique. Be sure to emphasize that clients need to practice this technique often in order to use it effectively.

“I” Statements

Ask client(s) how they feel when they are blamed for things. After they tell you bad, explain to them that when they are in a conflict and use “you” statements they tend to increase the level of anger because they are accusatory. Playing the blame game does not solve anything so rather than using “you” statements, they should focus on using “I” statements. Hand out “I” Statements (Appendix 5-C) and read through with client(s). Next hand out Appendix 5-D and have client(s) develop their own “I” statements for each of the scenarios. If in a group, you can split them up into smaller groups and then have everyone come together at the end and share various solutions.

Homework

Ask clients how their PMR is going and collect their TTEBC check-ups from last session. By reading these you will be able to gauge if client(s) are grasping the concepts. Hand out Appendix 5-E and ask clients to read through the scenarios and answer each question for homework, keeping in mind self-talk, cognitive distortions, and “I” statements.
Common Cognitive Distortions

1. All or nothing thinking
   This means that you fail to see the middle ground, everything is one-sided. Things are always completely black or completely white…there is no gray area. For example, if your mom said she would pick you up at 5:00pm and it is 5:10pm and she has not arrived yet, you automatically assume that she is not going to pick you up, that she forgot or something.

   Alternative: Are there other possible outcomes you haven’t considered?

2. Overgeneralization
   This is what happens when you take one bad circumstance and look at it as a never-ending pattern of bad circumstances. For example, if someone picked on you on the way to class. You then want to avoid going to class because you think that you always will be in this situation.

   Alternative: Are there times things are not this way?

3. Mental filter
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   Alternative: Is there anything you are not noticing that supports the opposite view?

4. Not counting on the good things
   This means that when bad things happen, you say it is normal and when good things happen, you say it is just luck. Good things don’t count. For example, you might think “I may have talked to my good friend last night, but I have not seen her in over a month.” It’s just luck that she happened to call you last night, and you focus on not having seen her in over a month.

   Alternative: Is there anything you are not noticing that supports the opposite view?

5. Jumping to conclusions
   This means you assume that something is bad even though you are not sure. You make up your mind before having enough information do to so.

   Alternative: Is there a chance the outcome is not so certain?
6. Mind reading
You think you know what other people are thinking or feeling even when you don’t have proof. For example, you are having a conversation with a friend and they make a squinty face at you that you assume is them disagreeing with you. However, they are not disagreeing; they are simply squinting because they got a hair in their eye. You assume people are thinking things, without first asking questions.
Alternative: Is it possible the other person doesn’t think this way?

7. Fortune telling
This is what happens when you act in a certain way because you believe the situation is going to turn out negatively. For example, you think you are going to do poorly at an interview, so you approach the interviewer with a negative attitude. You believe you’ll fail so you make that happen by behaving negatively. Perhaps you had a chance at getting the job, but did not get it due to the way you presented yourself to the interviewer.
Alternative: Is it possible the other person doesn’t think this way?

8. Magnifying or minimizing
This happens when you look at positive events as small things and negative events as big things. You play up the importance of the bad and downplay the good. For example, you get a spelling test back with a grade of 90% and all you can focus on is the one word that you got wrong. You magnify the one word you got wrong and minimize the nine you got right.
Alternative: I wonder if you are giving either yourself or the event too much or too little credit.

9. Labeling and mislabeling
This is what happens when you judge people. For example, you see a mom scolding her child at the grocery store and think, “What a horrible mom…what’s wrong with her?” However, what you don’t know is that she is a great mom, who just happens to be disciplining her child appropriately for what she had done. You jumped at what you saw and mislabeled the mom negatively. When you give people labels, it can be very hard to change those labels and your thoughts and feelings about those people.
Alternative: Is there a different way of looking at that? What is it?

10. Taking it personally
This is what happens when you blame yourself for something bad even though it was not your fault. We can think of these as tapes of blaming statements we play to ourselves. Some examples of these tapes are, “It’s my fault my parents got divorced. I shouldn’t have fought with my sister so much,” or “If I hadn’t gone to my friend’s house
the other night, my sister wouldn’t have gotten hurt because I would have been responsible for her and not that stupid babysitter. It’s all my fault she got hurt.”

Alternative: Are you taking all of the responsibility for everything? What other factors might be at play?

Adapted from M. Cullen & J. Wright (2006), Cage Your Rage For Teens, American Correctional Association.
Thought Stopping

Thought stopping can help you control the obsessive, negative self-talk that often fuels anger. Follow these steps to stop negative thoughts:

**Step 1**
Become aware that you are obsessing on negative self-talk. For example, you are thinking about the person you are angry with and going over the situation in your head, repeatedly. Often, your self-talk gets more violent and more intense in the process. Notice how you have made yourself more upset.

**Step 2**
Stop and think about what you are doing. Be a thought detective.

**Step 3**
Deliberately do something that will distract your mind from the negative self-talk. For example:

- Shout, "Stop!" or "Stop! I'm keeping my power!" Eventually, you might be able to simply whisper, "Stop," and your mind will be free of the angry self-talk.
- Visualize a bright red stop sign.
- Put an elastic band around your wrist and, when you catch yourself obsessing over the situation, snap the elastic so you feel a slight sting.

**Step 4**
Substitute these thoughts for the obsessive thoughts:

- "I can handle this!"
- "My time and energy is worth more than this!"
- "It's not worth it."

**Step 5**
Repeat. Practice makes perfect. Practice these steps as often as possible because the more you do it, the more effective they will become.

"I" Statements

It is important that we own our own thoughts and emotions. One way to take ownership of your thoughts and emotions is by using “I” statements. “I” statements express what you are thinking, rather than “You” statements which tend to blame people and escalate conflict.

<table>
<thead>
<tr>
<th>“You” statement that escalates conflict</th>
<th>“I” statement for the same issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>“You don’t care about me!”</td>
<td>“I feel neglected when you ignore me.”</td>
</tr>
<tr>
<td>“You hit on my girlfriend/boyfriend!”</td>
<td>“I feel disrespected when you flirt with ____.”</td>
</tr>
<tr>
<td>“You are an inconsiderate jerk!”</td>
<td>“I feel betrayed when you criticize me.”</td>
</tr>
</tbody>
</table>

"I" statements can take many forms. As you get comfortable using them, you will most likely find a variety of ways to phrase them. When learning, it is helpful to start with a formula.

First

Think about who owns the problem (Whose problem is it?) If you are upset, it's your problem. If another person is upset, it's that person's problem. If you care about the relationship, it's our problem.

Second

Think about how you'd express your feelings, using the following template:

1. I feel ______________________ (disappointed, hurt, scared ...)  
2. When ______________________ (say what happened)  
3. Because ______________________ (why it upsets you)  
4. And I would like ______________________ (what you want to happen or change)  

For example: “When you interrupted me, I felt angry because I was feeling disrespected,” instead of "You make me furious when you keep interrupting me!”
The second statement not only blames the other person, it also gives away your power.

Take the first statement up another level by adding, "I would appreciate it if you didn't interrupt me when I'm speaking."

CAUTION

- Be careful that the "I" statement is not really a disguised "you" statement. Avoid using the words that or like in your statements. These words muddy up what you are trying to communicate and are often loaded with judgment or negativity. For example, "I feel that you ..." or "I feel like you ..." really attack the listener. The phrase "I feel" should always be followed by an emotion word.

- Try to avoid using words for anger in your "I" statements. Anger emotion words often cause the other person to stop listening. Try to use words that more effectively express how you feel. It's easier for the listener to hear "I feel overwhelmed ..., "I feel disrespected ...," or "I feel hurt ...," than it is to hear "I feel angry" because it better describes your emotions and thoughts.

Create Your Own “I” Statements

Using the following template, create “I” statements for each scenario.

1. I feel _________________ *(disappointed, hurt, scared ... )*
2. When _________________ *(say what happened)*
3. Because _________________ *(why it upsets you)*
4. And I would like _________________ *(what you want to happen or change)*

1. You have plans to go to the movies with some friends tonight and go to your closet to pick out the outfit you want to wear. Your favourite shirt is nowhere to be found because your sister wore it without permission yesterday and didn’t wash it.

   I feel ________________________________
   When ________________________________
   Because ______________________________
   And I would like ________________________________

2. Your teacher calls you out in class and you feel extremely embarrassed because you do not know the answer and you can hear your classmates laughing at you. You think that your teacher put you on the spot on purposely.

   I feel ________________________________
   When ________________________________
   Because ______________________________
   And I would like ________________________________

3. Your friends have been talking about you behind your back to one another.

   I feel ________________________________
   When ________________________________
4. Your mom tells you that she really appreciates all of the extra effort you have been putting into your chores around the house.
I feel_________________________________________
When_________________________________________
Because_______________________________________
And I would like__________________________________

5. Your parents tell you that instead of going out to your favourite restaurant for dinner on Saturday like you usually do, you will have to stay home and babysit your little brother.
I feel_________________________________________
When_________________________________________
Because_______________________________________
And I would like__________________________________

6. Create your own scenario and “I” Statement
Scenario
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
I feel_________________________________________
When_________________________________________
Because_______________________________________
And I would like__________________________________
Emotions, Self-Talk & Perception

1. Mike walks into a movie theater and sees a group of teens he knows from school. When he walks over to join them, one of the guys whispers, just loud enough for Mike to hear, "Oh, no. Here comes Mike, the fag."
   a. How might you feel if you were Mike?

   b. What self-talk comes to mind?

2. Maria and Carlos have been going steady for about two months. Carlos knows about Maria's old boyfriend, Rick. One day Carlos and Maria are at the local hangout having coffee and donuts when Rick walks in and asks if he can join them.
   a. How might you feel if you were Carlos?

   b. What self-talk comes to mind?

3. Jim and his younger bother, Gil, are playing a strategy game. Their father walks in and sees Jim make a bad move. He looks at Jim with disgust and asks, "Why don't you THINK before you make such a stupid move?"
   a. How might you feel if you were Jim?

   b. What self-talk comes to mind?
4. An unfamiliar group of teen boys is hanging out on the street corner. Elaina walks by, and one of the boys whistles and calls her over while the others laugh and start to move towards her.
   a. How might Elaina feel?

   b. What self-talk comes to mind?

5. George and Erica have been going steady for months. George sees the star football player, Blake, talking to Erica after games and in the hall at school. When George confronts Erica about it, she denies there’s a problem and says, "If you have a problem, why don't you do something about it?"
   a. How might George feel?

   b. What self-talk comes to mind?

6. Rachael and Siobhan were on opposite sides of the cafeteria. Rachael came up to Siobhan and said, "Melinda said you were talking trash about her with Jo. She's really mad at you." Siobhan knew she had not talked about Melinda.
   a. How might Siobhan feel?

   b. What self-talk comes to mind?

Session Six Outline: Substance Abuse & Emotions

Purpose:
- to teach clients about how substance use effects emotions
- to help clients become aware of how their personal substance use/abuse may be affecting their anger and other emotions

Review Homework

Have client(s) share and discuss their answers to the Emotions, Perceptions & Self-Talk handout. Ask client(s) if they were able to identify any of their own self-talk or cognitive distortions throughout the week. Ask how the PMR is going, as well.

Substance Abuse & Emotions


Ask client(s) the following questions in order to get a conversation going, regarding the effects of substance abuse on emotions (if working with younger clients, you may only need to discuss cigarettes, alcohol and/or marijuana and be sure to discuss the effects of legal substances like caffeine as well):

1. Have you ever lost your temper when you were sick, overtired, or not well? Why do you think this happened?
2. Was it more difficult to contain your anger when you weren’t feeling well?
3. Is it easier to manage anger if you are feeling good, healthy, or content?
4. How does how you feel before a situation affect how you deal with the situation?
5. If you are depressed, stressed, or in pain, how can you have the personal strength and presence of mind that you need to manage anger well?
Hand out a copy of Substance Abuse & Emotions (Appendix 6-A) to client(s) and read through it. Ask them to name a common substance that is used among their age group or possibly adults or friends that they know. The goal here is to name a substance that, if used, might affect your life and relationships. Next, hand out a copy of Neuron, Synapse, and Receptors (Appendix 6-B). Ask clients to fill in the correct receptors as you discuss them. It is a good idea to draw them out on a blank piece of paper, or better yet chart paper. Use the following examples of alcohol, marijuana, and cocaine:

**Alcohol**

![Image of alcohol receptor diagram]

If students call out alcohol, say that alcohol alters serotonin levels and substitutes for endorphins, therefore causing an imbalance in the brain. The brain signals that it has excess endorphins and slows down its natural production of them. When the alcohol wears off, the brain does not have endorphins.

Low post-drinking serotonin levels affect sleep. Also, there are not enough endorphines present in the body to relieve normal, everyday pain. (Afterwards, people get a hangover—and a hangover is painful.)

**Marijuana**

![Image of marijuana receptor diagram]

If students call out marijuana, you could say that pot replaces the natural receptor for serotonin, therefore causing an imbalance in the brain. The brain signals that it has too much serotonin and stops producing it. When the drug wears off, the brain does not have enough serotonin, which consequently causes withdrawal symptoms.

Serotonin affects sleep, mood, and memory. If the brain has an imbalance of serotonin because of marijuana use, there will be decreased appetite, insomnia, fatigue, irritability, mood swings, and depression.
Cocaine

If students call out cocaine, say that cocaine releases excess dopamine. Dopamine is not recycled in the brain (as it is supposed to be). Instead, cocaine molecules block the gates where dopamine would reenter the cell for up to 72 hours. Some of the dopamine is lost. Cocaine can damage a person’s ability to feel pleasure. When the drug wears off, users are often unable to feel pleasure, happiness, or other emotions. They often become severely depressed.


**Homework**

Ask client(s) to keep track of any substances they use throughout the week and the effects they feel, especially those related to any anger, aggression, or other emotions. They can keep track of this use with My Weekly Substance Use (Appendix 6-C) throughout the week in order to become more aware of their personal use and its effect on their mood.
Chemical Abuse and Emotions

- Mood-altering drug upsets brain chemical balance.

- Brain adjusts by making less of the natural chemical.

- Brain requires drug to maintain balance.
Neuron, Synapse & Receptors

Definitions

Dopamine – the main neurotransmitter in the brain. It causes increased mental alertness and awareness. Dopamine controls our moods, energy, and feelings of pleasure. When dopamine is prevented from release, or when there is too little of it in the brain, feelings of depression and/or dissatisfaction result.

Serotonin – the neurotransmitter responsible for the five senses, as well as sleep, aggressive behaviour, eating, and hunger. When released, it brings about feelings of calm, happiness, peace, and satisfaction. Sufficient amounts of circulating serotonin also signal feelings of fullness and reduce appetite. If the levels of serotonin are decreased or serotonin is blocked in the brain cells, aggression and violent behaviour may result. Low levels of serotonin are linked with depression and increased appetite. Serotonin is a very powerful mood enhancer and appetite regulator.

Appendix 6-C

My Weekly Substance Use

<table>
<thead>
<tr>
<th>Day &amp; Time</th>
<th>Substance(s) Used</th>
<th>Why did I use?</th>
<th>My thoughts after using are…</th>
<th>My emotions after using are…</th>
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Session Seven Outline: Decision Making – Choices & Consequences

Purpose:
- to help client(s) understand their choices and the consequences that come along with them
- to teach client(s) about the effects of grudge-holding and other behaviours on themselves and others

Homework Review
Meet individually with each client for a few minutes and go over their My Weekly Substance Use forms. While doing this, in order to get the other clients thinking about the topic for the day, have them complete Appendix 7-A, Tickets, Tires & Teens. After you are able to meet with each client individually, discuss the four questions from Appendix 7-A:

1. How do you think the boys felt as they saw the man drive away with air leaking from his tires?
2. Did they overreact?
3. How do you think the boys felt when they found out he was a pastor?
4. Do you think the boys will change? Will they be more patient and kinder to others?
You Be the Judge


This activity will allow clients to make judgments on various controversial scenarios. Start out by writing down the word Judgment and asking client(s) what the word means to them. Listen to several responses and explain that they may not have thought of this before, but they are judges. They judge things every day from what to say to people, to what to wear, to how much work we accomplish. Tell client(s) that they will be given scenarios that they will have to judge and make decisions on. If working with an individual, go through each scenario you think is appropriate for the client on Appendix 7-B. If in a group, you can split them up into small groups, as in the role plays. The roles for each group will be a reader, discussion leader, recorder, and reporter to the large group (if smaller group, you can double up the roles). Hand out the scenarios to each group and give them enough time to discuss and make judgments. When they are finished, come together as a large group and have the reporters share which decision they chose for each scenario and other possible choices they thought of. Be sure to praise your client(s) for good judgments they make. Point out discrepancies among the groups. Have client(s) point out possible cognitive distortions.
**Choice Wheel**


Hand out Appendix 7-C and have each client fill it out individually. Once completed, have a group discussion and ask clients to share their conflicts and the best possible choices they would make. Remind client(s) that they always have a number of choices in any situation. They need to make good judgments and choose the appropriate response.

**The Cold Within – A Lesson About Grudge-Holding**

Lesson adapted from T. Carr (2005), *141 Creative Strategies For Reaching Adolescents with Anger Problems*, Chapin, SC: YouthLight, Inc.

For this activity you are going to share with your client(s) the following story of Rubin Hurricane Carter. In the 1960's, Rubin Hurricane Carter was one of the top boxers in North America. In 1966 he was forced to go to prison after being accused of murder. He was in prison for just under 20 years, when he was proven to be innocent and released. Share the following excerpt from an interview with him in August, 2003, where he talks about the bitterness and anger he felt:

*If I learned nothing else in prison, I learned that bitterness only consumes the vessel that contains it. I was angry for a very long time. I was eating hatred and bitterness and envy as if they were succulent morsels of buttered steak. I was angry at everything that moved. I was angry at the two state witnesses who lied. I was angry at the police who put them up to it. I was angry at the judge who allowed their testimony. I was angry at the prosecutor who sanctioned it. I was angry at the jury who accepted it. I was angry at my own lawyer for not being able to defeat it. I was furious at everyone who helped to put me in prison.* (p. 6).
While Carter had every right to be angry, he ended up holding onto this anger for a long time and he became very bitter. Eventually, something happened to him that made him change his mind and let go of his anger. He talked about this event in the same interview:

One day, I was flying back from the West Coast, and in the seat pocket in front of me was a newspaper folded up to an Ann Landers column. In that column, Landers printed a poem by an anonymous author (later to be James Patrick Kinney). I memorized that poem. The poem was “The Cold Within.”

After some time, Carter was able to completely let go of his anger and he ended up doing something positive: he helps out other prisoners who were falsely accused of crimes, as he was, and he always reads that poem with his students.

Give each client a copy of Appendix 7-D and read the poem aloud. Have a discussion about its meaning. You can relate it back to the story about Carter and ask client(s) to relate it to their lives. Discuss the fact that a lot of the times it is not worth it to get angry, even though we might think we have a good reason to feel that way. A lot of times you end up disappointing and hurting yourself more than the person that you are angry with. Have clients either share verbally or write down experiences where they have held grudges. Ask them to come up with alternative plans and the benefits from letting go of the grudges.

A supplemental activity that can be incorporated is to have clients write hypothetical letters to people that they have held grudges against. After the clients complete their letters, they throw them out as a symbol of throwing the grudge out. This activity can nicely illustrate the act of letting a grudge go.
The Cold Within

By James Patrick Kinney

Six humans trapped by happenstance
In dark and bitter cold
Each one possessed a stick of wood,
Or so the story's told.

Their dying fire in need of logs,
The first woman held hers back.
For on the faces around the fire,
She noticed one was black.

The next man looking cross the way,
Saw one not of his church,
And couldn't bring himself to give
The fire his stick of birch.

The third one sat in tattered clothes,
He gave his coat a hitch.
Why should his log be put to use,
To warm the idle rich?

The rich man just sat back and thought
Of the wealth he had in store.
And how to keep what he had earned
From the lazy, shiftless poor.

The black man's face bespoke revenge
As the fire passed from sight,
For all he saw in his stick of wood
Was a chance to spite the white.

The last man of this forlorn group
Did naught except for gain
Giving only to those who gave
Was how he played the game.

The logs held tight in death's still hands
Was proof of human sin.
They didn't die from the cold without,
They died from ---THE COLD WITHIN.

Homework

Remind client(s) that next week will be their last session. Ask them to write about how they feel they have improved over the last seven sessions and anything else about their experience they would like to share with you. Also, ask them to include what they would like to continue to work on and/or what they would like assistance with in the future. This will allow you to hear the opinions of your clients, as well as aid you in identifying further resources to provide them with or direct them to. Remind client(s) to finish their last week by completing Anger Logs as well. This will allow you to gauge their progress from session one to now.
Tickets, Tires & Teens

Read the story and answer the questions on the following page.

Heavy snow was falling outside a small diner just north of Lewiston, Montana. It was dark and freezing as Jamie and Conrad stuck out their thumbs, hoping for a ride to Chinook. The two teenagers were getting extremely frustrated because no cars stopped. Soon they started swearing and giving the "middle finger" at those who whizzed by. Around nine o'clock a small Volkswagen bug pulled into the diner parking lot. An older gentleman got out and went inside for a coffee. His little car was packed full of boxes, books, clothes, and suitcases. The teens approached the man and asked, "Hey, are you traveling north?" The man said he was. Jamie responded, "Hey can you give us a lift to Chinook?" The man replied, "I'm sorry. I don't have enough room for two more people in my little car. Plus, I'm stopping off to pick up a friend. He'll be sitting up front with me."

Conrad said to Jamie, "He could have given us a ride!" Jamie said, "What are we going to do? We don't have any money, it's getting late. It's snowing hard and there aren't going to be any more cars on the road in a while." Conrad responded, "I'm sick and tired of people not helping us! Give me your pen knife." Jamie asked, "Conrad, what are you going to do?" Conrad took the thin knife and poked a small hole in each tire on the Volkswagen. Then he mumbled, "That will teach the old man! By the time he gets a few miles out of town his tires will be flat and he'll be in the middle of nowhere freezing. That'll teach him not to help us!"

They continued to hitchhike as the man came out of the diner. The man handed the boys a small brown bag and then drove away as air leaked out of his four tires. Jamie asked Conrad, "What's in the bag?" Conrad reached into the bag and pulled out a roll of money and a small note. The note read:

*I'm sorry I couldn't give you guys a ride. I didn't have enough room. I was worried about you being cold and far from home so I told everyone in the diner about your dilemma. I passed this bag around and almost everybody tossed in a few dollars to help you. Here is enough money to go across the street to the bus station and purchase two tickets to Chinook.*

*God bless the both of you,*

*Pastor Kris Sanders*

Tickets, Tires & Teens Questions

1. How do you think the boys felt as they saw the man drive away with air leaking from his tires?

2. Did they overreact?

3. How do you think the boys felt when they found out he was a pastor?

4. Do you think the boys will change? Will they be more patient and kinder to others?

5. Describe a time when you jumped to conclusions about something and then later regretted it.

Adapted from T. Carr (2005), *141 Creative Strategies For Reaching Adolescents with Anger Problems*, Chapin, SC: YouthLight, Inc.
You Be the Judge Scenarios

1. Angie and Teresa

Angie is having fun at a birthday party. She came with her friend, Teresa who suddenly points at her and starts to laugh. Loudly Teresa tells everyone, "Hey look at Angie…what an airhead! She's got her shirt on inside out!" Angie is hurt and embarrassed. She turns red. Then she becomes angry.

You be the judge! Angie should:

- Run to the bathroom and not come back out until the party is over.
- Scream at Teresa, "You witch! Look who's talking. A few days ago you wore one green sock and one blue sock to school."
- Remain quiet and breathe deeply until she gets control of herself. Then she should smile and say, "Thanks so much Teresa. I was wondering when someone would notice. I like this side of my shirt better."
- Remain quiet and try to hide her shame and anger from everyone including herself.

Which action shows the most careful judgment and self-control? Why is it best?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Kelly and Mr. Donavan

Kelly is used to getting his own way most of the time. He generally thinks it's his natural right. A rule that is hard for Kelly to follow is walking in the hallways. He prefers to run as fast as he can. More than once he has knocked someone down. When this happens he takes off and gets out of there. One day a teacher, Mr. Donavan, catches Kelly sprinting down the hall for the third time in one week. He stops him and tells him to go with him to the office to see the vice-principal. Kelly is scared because teachers have taken him to the office too many times already for the same reason. Suddenly he becomes furious.

You be the judge! Kelly should:
• Realize he is guilty of breaking a rule he has broken many times and apologize.
• Tell Mr. Donavan in a loud voice that he didn't hurt anybody and having to go to the office isn't fair.
• Clam up while giving Mr. Donavan and everyone in the office the meanest look he can put on his face.
• Run away.

Which action shows the most careful judgment and self-control? Why is it best?

3. Shelly and Jamal

Even before they were born Shelly and Jamal's families lived next door to each other and they have been good friends. All this changed, however, when Jamal's Dad got a transfer at work making it necessary for their family to move across the country. Even before Jamal moved away Shelly became sad and even sadder after he was gone. Then Shelly got angry. One evening just before dinner her mom asked her to get her books and papers off the table where she had begun doing her homework. Kelly screamed, threw a book on the floor, and ran out of the room crying.

You be the judge! Shelly should:

• Stay in her room the rest of the evening and not answer her family if they ask her to come to dinner or try to talk with her.
• Call Jamal long distance and yell at him for moving away.
• Go out in the yard and throw rocks at the garage.
• Cry out her sadness, then return to the kitchen, pick up her books and papers, and tell her mom she's sorry for her behavior. Then she might ask her mom if they could talk later about her sadness and anger.

Which action shows the most careful judgment and self-control? Why is it best?
4. Harry

Last night Harry couldn't get to sleep because his parents were drinking and fighting. Again the next morning they were arguing loudly as he dressed and left for school. Harry is anxious that his parents won't be able to live with each other much longer. He doesn't know what will happen if they split up. It's all he can think about and he is becoming more and more irritable with his friends.

You be the judge! Harry should:

- Make up his mind to ignore the situation, and how he is feeling, and stay away from home as much as possible.
- Talk with a counselor at school about the situation and his emotions, even if he might cry during their talk.
- Interrupt his parents during their next fight by yelling at them and threatening to run away.
- Pour all the liquor in the house down the drain when his parents aren't home.

Which action shows the most careful judgment and self-control? Why is it best?

5. Juan, Nicole and Enrique

Juan and Nicole are boyfriend and girlfriend. They are in the same grade and live on the same block. Every afternoon after school they walk home together laughing and talking. Juan asked Nicole to go to a game with him next week. Nicole said sure, of course. Then they met Enrique, a new boy who is two years older and very good looking. Juan invited him to the game too. But Juan was very hurt, disappointed, and jealous when Nicole became friendly with Enrique and frequently talked with him during the game. It seemed
to Juan that she was giving more attention to Enrique than to him. Before the event was over Juan became angry.

You be the judge! Juan should:

- Get up and walk out before the game is over.
- Nudge Nicole and say, "Hey, what's wrong with you. How rude can you get?"
- Join Nicole and Enrique's conversation. Be friendly and talk with other people seated nearby as well.
- Decide to ignore his feelings and hope that Nicole will never act this way again.

Which action shows the most careful judgment and self-control? Why is it best?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. Selena

Selena was shocked and then scared when she entered the math classroom and discovered that her teacher was distributing tests to the students. She had completely forgotten that today was a big test day. She had not prepared. Suddenly Selena was fuming with anger.

You be the judge! Selena should:

- Calm herself down by breathing deeply and reassuring herself that she knows enough to do fairly well on the test. Then she should take the test and do the best she can.
- Tell the teacher in a loud voice that he had forgotten to remind them the day before about the test and that it isn't fair to make her take it.
- Lie and say she is feeling too sick to take the test.
- Punish herself by telling herself she is an airhead, an idiot, and deserves to flunk the test.

Which action shows the most careful judgment and self-control? Why is it best?
7. Brigitte and Billy

Billy is Brigitte's seven-year old brother. Frequently Brigitte discovers that Billy has come into her room and taken things. This causes her a lot of frustration. She has screamed at him to stop doing it. But now and then Billy just can't resist the temptation to enter Brigitte's room and "borrow" things. He also enjoys antagonizing her. One day Brigitte comes home from school to find Billy in the family room playing a CD she recently bought and put in one of her drawers. Brigitte is extremely upset.

You be the judge! Brigitte should:

- Push the power button, remove the CD, and tell Billy in a strong, steady voice how angry she is. Then she should ask him for his ideas about how they could make an agreement for him to stay out of her room when not invited that he would respect. In exchange, she promises not to make an issue of it with their parents and whenever possible she will share her things with him. In fact, if he cooperates she will make him a copy of the CD in two weeks.
- Call Billy a thief and hit him.
- Give up on the whole situation and go to her room in a fury saying nothing to Billy.
- Say or do nothing until dinner. Then she should tell her parents what happened, demanding that they solve the problem.

Which action shows the most careful judgment and self-control? Why is it best?

8. Ramona

Ramona is always rushing and stressed because she has too many commitments. Besides school, she takes piano lessons, voice lessons, is in three different clubs, and plays forward on the soccer team. Her parents have encouraged her but she agreed to all of these activities herself. One afternoon Ramona rushes into the gym to suit up for soccer practice and suddenly realizes she left her practice shoes and clothes at home. She's wearing a long skirt and boots. There's no way she can participate in practice wearing the clothes she has on. Soccer is the activity she likes best. Ramona is very annoyed.
You be the judge! Ramona should:

- Kick her locker door until she bends it.
- Ask her teammates for some practice clothes she could borrow. Then burn off her anger in practice and, realizing that she is too stressed with all her activities, decide to drop some of them - but not soccer.
- Leave and head home telling herself she really didn't want to practice soccer that day anyway.
- Go home and yell at her parents for making her get involved in so many activities.

Which action shows the most careful judgment and self-control? Why is it best?

________________________________________________________________________
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Appendix 7-C

Choice Wheel

1.) Write a situation in which you experienced conflict in the center hexagon.

2.) Write possible choices that you could make in response to the conflict in the arrows.

3.) Describe possible consequences to the choices in each on the squares.
**Choice Wheel Example**

1.) Write a situation in which you experienced conflict in the center hexagon.

2.) Write possible choices that you could make in response to the conflict in the arrows.

3.) Describe possible consequences to the choices in each on the squares.

Hexagon (Conflict): My brother stole $10 from my wallet.

Arrow (Choice) 1: Ask why he stole it

Arrow (Choice) 2: Punch him

Arrow (Choice) 3: Yell at him

Arrow (Choice) 4: Steal $10 back from him

Arrow (Choice) 5: Tell my mom that I’m having a problem with my brother stealing my money.

Square (Consequence) 1: He says he needed it or he says he wanted to buy candy with it

Square (Consequence) 2: He cries or punches me back

Square (Consequence) 3: He ignores me or it turns into a huge screaming match

Square (Consequence) 4: I end up getting punished by my mom or my brother retaliates back by stealing more money from me

Square (Consequence) 5: She confronts my brother and has him pay me back or she encourages me to talk to him about it.
The Cold Within

By James Patrick Kinney

Six humans trapped by happenstance
In dark and bitter cold
Each one possessed a stick of wood,
Or so the story's told.

Their dying fire in need of logs,
The first woman held hers back.
For on the faces around the fire,
She noticed one was black.

The next man looking cross the way,
Saw one not of his church,
And couldn't bring himself to give
The fire his stick of birch.

The third one sat in tattered clothes,
He gave his coat a hitch.
Why should his log be put to use,
To warm the idle rich?

The rich man just sat back and thought
Of the wealth he had in store.
And how to keep what he had earned
From the lazy, shiftless poor.

The black man's face bespoke revenge
As the fire passed from sight,
For all he saw in his stick of wood
Was a chance to spite the white.

The last man of this forlorn group
Did naught except for gain
Giving only to those who gave
Was how he played the game.

The logs held tight in death's still hands
Was proof of human sin.
They didn't die from the cold without,
They died from ---THE COLD WITHIN.
Session Eight Outline: Conclusion – Tips for Continued Success

Purpose:

- to provide client(s) with some tips and tools for success in the future
- to solidify what client(s) have learned over the past seven sessions
- to complete post-treatment assessments

Homework Review

Collect the write-ups that were completed by your client(s) over the past week. Congratulate them on their attendance and progress over the past seven weeks. This session is supposed to end on a very positive note.

Student Stress Self Audit


Hand out copies of Appendix 8-A to your client(s). Tell them that this audit is a simple tool that they can use to gauge their stress level. Remind them about the connection among stress, both physical and mental, and anger and aggression. Read through each “S” and ask clients for positive examples of each one.

Got Bounce? Ten Tips for Teens to Build Resilience


Hand out copies of Appendix 8-B to your client(s). Read through the ten tips with them and tell them that when their self audit scores are low, they can consult these tips and choose a couple of them to work on.
Next, begin a discussion with your client(s) about what they have learned over the past seven weeks. Ask them what they have liked/disliked and which tools have been most effective for them. Encourage clients to ask you any questions and share any remaining concerns they may have. It is crucial to ensure that your clients are prepared for the termination of the sessions and that you provide them with information on where they can find additional support, when needed. The ideal termination has been described as similar to a graduation. “There's a bittersweet feeling for both parties. It's bitter because a productive, engaging relationship is ending. The routine of the sessions, the unique language shared and the supportive environment are drawing to a close. It's sweet because this ending marks a new era of independence while applying the skills (the program) provided. Also, the ideal termination is clean. The work is reviewed, all feelings are verbalized and goodbyes are shared. There are no loose ends” (www.psychologytoday.com). In termination you want to allow your client(s) to:

- review what they have learned about themselves

- discuss goals (if any) that they were not able to accomplish during the sessions and what they want to do about them in the future

- develop an aftercare plan and have access to resources needed to act out the plan

- discuss the end of the therapeutic relationship that has been developed and any emotions this evokes
Assessments & Wrap-Up

Have each client complete the assessments at the end of the manual, as they did prior to the first session. If running a group, ensure that clients work individually to complete these, as they are essential for appropriate evaluation. Compare the clients’ pre and post assessment results to see the changes each client has undergone. The areas that are weak in the Anger and Aggression Awareness Pre/Post Test should be especially noted, as this test is specifically tailored to some of the key concepts presented throughout the program. The weak areas should be researched and more fully developed. Keep all client(s) results from pre- and post-tests coded and filed, as they will allow you to gauge the success of the program.

To end the last session on a positive note, thank clients for their continued dedication throughout the past seven weeks. Share with them the growth you have seen and encourage them to continue on a positive path. If wanted, a nice added touch is to give each client a simple certificate, noting completion of the program. As well, you can always celebrate with treats either in the form of edibles or inexpensive items, like key chains or pens.
# STUDENT STRESS SELF AUDIT

*Exploring the 10 S’s*

Directions: Rate yourself on each of the ten areas of stress. Today’s date ____________

<table>
<thead>
<tr>
<th>AREA</th>
<th>DESCRIPTIONS</th>
<th>RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SLEEP</strong></td>
<td>I am getting enough sleep. I feel fresh and rested and energized. On most school nights I get at least eight hours of sleep.</td>
<td></td>
</tr>
<tr>
<td><strong>STUDIES</strong></td>
<td>I can honestly say I’m doing the best I can. I’m doing quality work. I complete assignments and study for exams.</td>
<td></td>
</tr>
<tr>
<td><strong>SUSTENANCE</strong></td>
<td>I watch what I eat, not too much junk food. I eat a good breakfast every morning. I eat enough fruit and vegetables.</td>
<td></td>
</tr>
<tr>
<td><strong>SOLITUDE</strong></td>
<td>Almost every day I try to find quiet time for myself. I sit quietly in my room or go outdoors.</td>
<td></td>
</tr>
<tr>
<td><strong>SPORTS</strong></td>
<td>I get plenty of exercise. I play a team sport or I exercise alone by running, walking, swimming, or biking.</td>
<td></td>
</tr>
<tr>
<td><strong>SERVICE</strong></td>
<td>Every week I find time to help others. I volunteer through my school or church. I do things to improve my community.</td>
<td></td>
</tr>
<tr>
<td><strong>SPIRITUALITY</strong></td>
<td>I find time to attend the religious institution of my choice. I take time to appreciate nature, the earth, and sun. I feel blessed.</td>
<td></td>
</tr>
<tr>
<td><strong>SOCIAL LIFE</strong></td>
<td>I have several friends and at least one “real close” friend who is always there for me. I attend social events on a regular basis.</td>
<td></td>
</tr>
<tr>
<td><strong>SUN</strong></td>
<td>I get outdoors often to soak up the valuable rays of the sun. I like going outside to read, play, relax, or exercise.</td>
<td></td>
</tr>
<tr>
<td><strong>SUBSTANCES</strong></td>
<td>I limit my intake of caffeine. I avoid smoking, alcohol, and illegal drugs. I do not abuse prescription drugs.</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL POINTS:** [ ]

Scoring:
- 40-50 points: Stress level low.
- 30-39 points: Stress level average.
- 20-29 points: A little bit high, monitor closely.
- 10-19 points: Stress level high.
- Less than 10 points: Extremely high, seek assistance.

Got Bounce? Ten Tips for Teens to Build Resilience

Socialize.
Don't be a loner. Talk with friends, parents, teachers and others in your community.

Cut yourself some slack.
Accept the fact that bad things happen to everyone. Go easy on yourself and your friends.

Create a hassle-free zone.
Select a private setting to be alone when you begin to get stressed. Go to your room, climb a tree, or sit by the river.

Develop a plan.
What can you do when you get stressed? Develop a consistent plan or routine.

Take care of yourself.
Get enough sleep, exercise regularly, and watch what you eat. Are you fit physically, mentally, and spiritually?

Take control.
Even in the midst of tragedy, you can move toward goals one small step at a time. Bad times make us feel out of control. Grab some of that control back by taking decisive action.

Express yourself.
If talking doesn't work, do something else to capture your emotions - start a journal or create art.

Help others.
One of the best ways to forget about your problems is to help others.

Put things in perspective.
Learn some relaxation techniques. Try meditation, yoga, or deep breathing. Don't let the little things get you down. Think of the real important things in life like friends, family, your religion, and community.

Turn it off.
Stay informed - you may even have homework that requires you to watch the news, but try to limit the amount of bad news you take in, whether from newspapers, television, magazines, or the Internet.

Assessments
Anger & Aggression Awareness Pre-Test

Name: __________________________ Date: __________

True or False – circle either T for True or F for False

1.) I can explain the way I feel without using the word angry. T/F

2.) If I get angry because of what someone else did, it is his or her fault. T/F

3.) I do not notice when I start to get mad. T/F

4.) I know the steps that lead up to me getting angry or starting a conflict. T/F

Short Answer – provide a short answer below for each question

1.) What is a SMART goal?

2.) What are 5 physical cues to anger?

3.) What can you do when you notice a physical cue to anger?

4.) What are two ways to de-escalate conflict?

5.) How can drug/substance use affect anger and aggression?

6.) On a scale of 1-10, with 1 meaning not at all and 10 meaning completely, rate your ability to effectively deal with anger and aggression?

1 2 3 4 5 6 7 8 9 10

Anger & Aggression Awareness Post-Test

Name: ____________________________ Date: __________

True or False – circle either T for True or F for False

1.) I can explain the way I feel without using the word angry. T/F
2.) If I get angry because of what someone else did, it is his or her fault. T/F
3.) I do not notice when I start to get mad. T/F
4.) I know the steps that lead up to me getting angry or starting a conflict. T/F

Short Answer – provide a short answer below for each question

1.) What is a SMART goal?

2.) What are 5 physical cues to anger?

3.) What can you do when you notice a physical cue to anger?

4.) What are two ways to de-escalate conflict?

5.) How can drug/substance use affect anger and aggression?

6.) On a scale of 1-10, with 1 meaning not at all and 10 meaning completely, rate your ability to effectively deal with anger and aggression?

1  2  3  4  5  6  7  8  9  10

Beliefs Supporting Aggression Assessment (Bandura, 1973)

These items measure agreement with normative beliefs about aggression. Respondents select the one choice that best describes their own ideas or experience.

1. It makes you feel big and tough when you push someone around.
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

2. If you back down from a fight, everyone will think you are a coward
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

3. Sometimes you have only two choices – get punched or punch the other kid first.
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

4. It’s OK to hit someone if you just go crazy with anger.
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

5. A guy who doesn’t fight back when other kids push him around will lose respect.
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

6. A guy shows he really loves his girlfriend if he gets in fights with other guys about her.
   - Strongly agree
   - Agree
   - Disagree
   - Strongly disagree

Scoring and Analysis:

Point values are assigned as follows:
- Strongly agree = 4
- Agree = 3
- Disagree = 2
- Strongly disagree = 1
This scale can be scored by summing the point values of the responses from a participant. If one or two responses are left blank, the average of the point values for the remaining items should be multiplied by eight to calculate a pro-rated score. The scale should generally not be scored if more than two responses are left blank.

A maximum obtainable score of 32 indicates a strong favourable attitude toward using violence to resolve disagreements or conflicts. A minimum score of 8 indicates a strong negative attitude toward using violence.

PARTICIPANT VERSION
BSAA

Circle the one choice that best describes your own ideas or experience.

1. It makes you feel big and tough when you push someone around.
   Strongly agree    Agree    Disagree    Strongly disagree

2. If you back down from a fight, everyone will think you are a coward
   Strongly agree    Agree    Disagree    Strongly disagree

3. Sometimes you have only two choices – get punched or punch the other kid first.
   Strongly agree    Agree    Disagree    Strongly disagree

4. It’s OK to hit someone if you just go crazy with anger.
   Strongly agree    Agree    Disagree    Strongly disagree

5. A guy who doesn’t fight back when other kids push him around will lose respect.
   Strongly agree    Agree    Disagree    Strongly disagree

6. A guy shows he really loves his girlfriend if he gets in fights with other guys about her.
   Strongly agree    Agree    Disagree    Strongly disagree

FACILITATOR VERSION
Modified Aggression Scale (Bosworth & Espelage, 1995)

The scale is composed of four subscales: fighting, bullying, anger, cooperative/caring behaviour. It is a modified version of the Aggression Scale. Respondents are presented with a series of behaviours, and are asked to mark with a circle the number of times they did that behaviour during the last 30 days.

Choose how many times you did this activity or task in the last 30 days. In the last 30 days…

Fighting
1.) I hit back when someone hit me first.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
2. I encouraged other students to fight.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
3. I pushed, shoved, slapped, or kicked other students.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
4. I got into a physical fight because I was angry.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
5. I walked away from a fight.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

Bullying
6. I teased other students.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
7. I said things about other students to make other students laugh (made fun of them).
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
8. I called other students names.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
9. I threatened to hit or hurt another student.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times

Anger
10. I frequently get angry.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
11. I was angry most of the day.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
12. I got into a physical fight because I was angry.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
8. I was mean to someone when I was angry.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
9. I took my anger out on an innocent person.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times

Caring/Cooperative Behaviour
10. I helped someone stay out of a fight.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
11. I told other students how I felt when they did something I liked.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
12. I cooperated with others.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
13. I told other students how I felt when they upset me.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
14. I protected someone from a “bully”.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
15. I gave someone a compliment.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
16. I helped other students solve a problem.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
17. I avoided getting in trouble at home, school, or in the community.
   No Opportunity     Never     1 or 2 Times     3 or 4 Times     5 or More Times
(Items 5, 10, 13, 14, 15, 19, 20 and 22 were added by Bosworth & Espelage, 1995. Item 6 was modified.)

Scoring and Analysis
Point values are assigned as follows:
No opportunity = 1
Never = 1
1 or 2 times = 2
3 or 4 times = 3
5 or more times = 4

The Fighting subscale is calculated by reverse coding Item 5 and summing across all five items. A total of 20 points is possible and a high score indicates more aggression or fighting. The other three subscales are calculated similarly, by summing across all responses. The Bullying subscale has a total of 32 points. High scores indicate more bullying behaviour, more anger, and more caring/cooperative behaviour.

PARTICIPANT VERSION

MAS

Choose how many times you did this activity or task in the last 30 days. In the last 30 days…

1. I hit back when someone hit me first.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

2. I encouraged other students to fight.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

3. I pushed, shoved, slapped, or kicked other students.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

4. I got into a physical fight because I was angry.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

5. I walked away from a fight.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

6. I teased other students.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

7. I said things about other students to make other students laugh (made fun of them).
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

8. I called other students names.
   No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
9. I threatened to hit or hurt another student.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

10. I frequently get angry.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

11. I was angry most of the day.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

12. I got into a physical fight because I was angry.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

13. I was mean to someone when I was angry.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

15. I helped someone stay out of a fight.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

16. I told other students how I felt when they did something I liked.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

17. I cooperated with others.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times

18. I told other students how I felt when they upset me.
No Opportunity  Never  1 or 2 Times  3 or 4 Times  5 or More Times
19. I protected someone from a “bully”.

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20. I gave someone a compliment.

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21. I helped other students solve a problem.

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22. I avoided getting in trouble at home, school, or in the community.

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References


