What is anger?

Anger is an emotional response experienced by all people. It can vary from mild irritation to extreme rage, and can build up over long periods of time or burst forth in a matter of seconds. It is natural for people to have different levels of anger in their lives. This is due to differences in personal or family circumstances, and body chemistry.

Anger can be caused not just by what other people do to us but also by what we do ourselves. It could be directed at family, co-workers, friends, or strangers. It can be caused by excessive worrying, traumatic memories, sleep disturbance, substance or alcohol abuse, illness, stress, and poor communication.

Anger is a natural response when a person feels threatened. The brain releases hormones and other chemicals to excite the body and prepare it for action. The way a person thinks changes so that they are more focussed on aspects of a situation which they feel threatened by, and less concerned about the opinions of others. In highly threatening situations this can be a way for the individual to protect themselves as a last resort.

Both trauma and bereavement can leave people feeling very angry. Dealing with injustice, blame and the necessity of continuing on with life are all sources of anger which are normally experienced after a traumatic death. Although this anger will resolve itself with time, for some people it will be prolonged. They may need to control their anger, to express it safely or control its impact on others.

Anger management

Excessive anger is difficult to define and will vary from person to person. Usually if a person has a problem with anger they will know it themselves. They may act in ways that feel out of control or frightening. They will become angered by things which were not a problem in the past, or will feel misunderstood.

The goal of anger management is to reduce the physical and emotional pressure to act out aggression. This is done by identifying anger triggers (e.g. not being listened to) and developing a plan for dealing with these as they arise. Skills such as relaxation (deep breathing) or distraction (counting) are often used to control anger, or safe methods of expressing anger are used (exercise or keeping an anger diary).
Skills for managing anger

**Awareness and preparation** – this is the most effective method of managing anger. It involves identifying causes of anger and planning what to do when they arise. Having a plan in advance can give back a sense of control and optimism to the person.

One of the most important steps in this process is identifying the changes which occur when we begin to get angry. Very often these changes involve speeding up the heart rate and breathing. Other signs include frowning, feeling flushed, tension in the shoulders, and irritability. Once these signs are identified, the person can work on a method of avoiding escalation into full blown anger.

Identifying causes of anger can be done with either the help of a friend or alone (e.g. keep private ‘anger diaries’ of when and how anger takes control). These can help the person see if there are patterns or triggers associated with their anger such as places, people, time, events (they may also include traumatic memories, sleep disturbance, caffeine, alcohol, family members, co-workers, finances, time of day). Once triggers are identified, the person can decide on the best method of dealing with them.

**Avoidance** – avoidance is a good way of managing the sources of stress in everyday life so that they do not become overwhelming. For example, a person may avoid thinking about a distressing memory or situation during working hours but put aside time at night to reflect on it. Alternatively, they may only expose themselves to mild triggers and avoid others until such time as they feel they are ready to deal with them. Avoidance can help make life more stable and predictable, and gives the person control over their progress. This can be especially useful immediately after a traumatic death, when people are more likely to be overwhelmed.

**Distraction** – distraction is an effective way of dealing with anger as it arises. It involves switching a person’s attention away from their anger when that anger is destructive. Instead, the person focuses on:

- a sensation (e.g. taking a deep breath, finger tapping);
- an action (e.g. counting to ten slowly);
- a thought (e.g. I am calm)
These should be focussed on, to the exclusion of all other thoughts. Different methods of distraction will suit some people more than others (e.g. whistling a favourite tune), so it is important to identify and practice an individual method of distraction in advance.

**Relaxation** – this is an important skill for people who have been traumatically bereaved, as trauma and loss require them to face many difficult memories and overwhelming moments. Learning an individual method of dealing with emotional stress can be invaluable.

People relax in many different ways, from taking a bath, reading a book, or watching television to long walks, running, or playing sports. Not every relaxation technique will be suitable for each person, but most people are good at finding at least one which works for them. This is an important tool in anger management for calming down after a bout of anger or hard day. Following trauma and bereavement, individuals may need to find different methods of relaxing or unwinding than they used in the past.

- Yoga
- Music
- Hobbies
- Aromatherapy
- Walking
- Fresh Air
- Massage
- Structured Relaxation (tape or book)
- Jogging
- Games
- Controlled Breathing
- Exercise
- Reading

**Guidelines**

**Take a flexible approach** – the needs of people who have been traumatically bereaved are individual and changeable as they work through their grief. As a result, levels of anger will vary over time, and require flexible planning.

- What works for one person may not work for another
- What works at one time may not be suitable later on
- Men and women are likely to have different coping methods
- Be prepared to try different approaches
Set aside time to think about the trauma in a constructive manner – many people are tempted to put thoughts of the trauma from their minds as they are too distressing. Having a set time to think about the trauma enables people to prepare themselves for this upsetting task, and also to be able to do so in privacy or with a trusted adult. Many people use this time to create a diary, scrap book, or otherwise to help work through their feelings and concerns.

- Make time for reflection in your daily or weekly routine
- Plan what has to be done in this time (e.g. reflection, writing)
- Allow time afterwards for relaxation

Use good communication – good communication can eliminate the need for anger because it facilitates the exchange of ideas and concerns without aggression. Much of what is said when angry does not represent true opinions, and can make the situation worse. Other people may avoid talking or conceal their anger only to have it surface again later.

- Think through all responses before responding
- Speak in a clear voice, and go slowly
- Listen to other people and imagine their concerns
- Check with other people that everyone has the same understanding
- Make all complaints as specific as possible
- Keep talking to other people

Be prepared for triggers – identify triggers for anger or aggressive reactions in the environment so that the person can become more in control and know what to expect. This helps make the person’s life more predictable and less overwhelming. Identifying personal warning signs that anger is on the rise (e.g. flushed face, faster heart beat and breathing) can also help identify triggers and minimise anger. Especially in the early stages of traumatic grief, people can be easily overwhelmed by exposing themselves to too many triggers before they are prepared.

- Identify relevant triggers in advance
- Be aware of on-going triggers (e.g. finance, work, other people)
- Be aware of personal warning signs (e.g. faster pulse)
**Develop strategies for dealing with anger** – people need practice in how to deal with triggers in their environment before they occur. Some people use distraction (e.g. counting, thought stopping, or taking a deep breath) to take a step back from their anger, whereas others may use relaxation, humour, or having a friend or family member with them to help diffuse it.

- Identify and practice a personal method of mental distraction (e.g. counting or thought stopping) to interrupt angry thoughts
- Use relaxation or exercise to reduce stress
- Set personal time aside to think about the anger, how it was triggered, or how it relates to the trauma
- Express anger in a controlled way (e.g. in an anger diary, shouting into a pillow, or use of vigorous exercise)
- Use humour and optimism where appropriate

**Outcome**

Many people who have been traumatically bereaved will either experience only moderate amounts of strong anger or none at all. Anger is likely to be directed at particular people or groups related to the trauma or family, and should fade and or be resolved naturally without having to complete any of the steps outlined in this booklet.

For some people, anger can either be prolonged or have a more noticeable effect on work, education, family, sleep, etc. An individual can benefit from understanding more about anger, how to recognise it before it takes control, and how to develop personal methods of managing it.

Anger relating to a traumatic bereavement can appear immediately or after a number of years. Be prepared for anger to resurface (in an individual or family) in response to the media, anniversaries, or other reminders, and refer back to the guidelines for advice.
What else?

There may be a need, from time to time, for specific help to manage or control certain excessive intrusions or distress. These are best discussed with your GP, health worker, or social services representative, who will be able to consider your options and information available to you. Referral to bereavement/trauma groups and voluntary agencies can also be arranged through these sources.

Professionals guide

Traumatic grief in early childhood
Ages 0-5
Traumatic grief in middle childhood
Ages 5-10
Traumatic grief in adolescence
Ages 10-18
Traumatic grief in adults
Traumatic grief
Anger management
Traumatic grief
Dealing with intrusions
Sleep disturbance in adults
and adolescence
Sleep disturbance
in children under 10 years of age
Self care for workers supporting
the traumatically bereaved
Guidelines for the immediate response
to children and families in traumatic
death situations

Dealing with sudden death
in middle childhood  Ages 5-10
Dealing with sudden death in adolescence
Ages 10-18
Dealing with sudden death for adults
Sudden Death
Anger management
Sudden Death
Dealing with intrusions
Sudden Death
Insomnia and sleep disturbance
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Sudden Death
Sleep disturbance
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The Coroner

Schools Guide

Traumatic grief in early childhood
Ages 0-5
Traumatic grief in middle childhood
Ages 5-10
Traumatic grief in adolescence
Ages 10-18
Traumatic grief
Sudden death
Information for pupils

Individual booklets are available from your local health centre, library or school
The full series can be downloaded from www.royalhospitals.org/traumaticgrief