



Efficacy of Anger Management Therapy

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DESCRIPTION

Anger is a universal and adaptive human experience. Expressions of anger can signal distress, fatigue, conflict, fear. Asking the person who has been angry how he or she is doing can be a good beginning to dealing with the person. These individuals may have fatigue, fear about some aspect of the journey, or conflict with someone in the group. Active and non-judgmental listening can often find the problem and help to a resolve. For example, the wilderness trip may need to be slowed down to permit rest for someone who has become tired or to offer empathy for a person who is struggling to keep up on the journey. More difficult are people with psychiatric disorders, particularly those with antisocial personality disorders, who have maladaptive ways of expressing anger and hostility. These individuals may be habitually angry, hostile, sarcastic, and even threatening on a wilderness journey.

The different analysis for antisocial personality disorder contains antisocial behavior, impulse control disorders, other cluster B personality disorders, mania, substance abuse disorders and psychosis, mental retardation, and personality changes caused by general medical conditions. Patients with marginal personality disorder may perform illegal acts, yet they tend to prove more and parasuicidal behaviors and repetitive suicidal as well as intense affect and self-loathing. When patients with narcissistic personality disorder disrupt the law, it is naturally inspired by a need to keep their sense of entitlement rather than to meet an instrumental desire (narcissistic personality disorder is related with "white collar crime," whereas antisocial personality disorder is associated with "blue collar crime").

Anger management therapy gives a complete set of recovery guidelines. It provides the person in treatment a measured platform for the release of their emotions. Simultaneously, it aims to get positive responses, rather than destructive ones. People in therapy are encouraged to examine what stimulate their anger. They try to know of their emotions at each level of stimulation. People learn how to use those signs as a map to control their anger.

People got to know how their body responds to past and future incidents in therapy. They do this by knowing the emotional reaction to a certain condition. Therapists can also suggest people how to notice anger responses that may be defence mechanisms for other concerns. These concerns are depression, anxiety, or other mental health issues.

It may also help the people to maintain their social network. Irrepressible anger may lead to harmful psychological and physical conditions. Anger management helps to reduce and control anger. This allows people to reduce stress. It can also lower the risk for serious health problems. These can include heart disease and high blood pressure.

The goal of anger management therapy is to teach people how to control their triggers. It also helps people to adjust how they look at situations. Successful anger management therapy develops healthy ways for people to express frustration and anger. Some techniques used in anger management therapy include:

- Impulse control
- Self-awareness
- Meditation
- Frustration management
- Breathing techniques
- Relaxation strategies

Anger management therapy may take place in group settings. Classes address specific types of anger issues. These can include relationship issues, teens, parenting, and work-related anger or rage. Sometimes people take court orders to attend an anger management class. This can be leads to domestic or legal issue. Therapy is available on a continuing basis. These strengthen the techniques learned in therapy. They also give permission the person in therapy to practice their new skills in real-life situations.

The main treatment for violence with criminals with ID has been that of Anger Management Treatment (AMT). All the controlled treatment trials have been lead on AMT as a corporation of treatment approaches including arousal reduction, emotional recognition, emotional problem solving, the development of an anger hierarchy, cognitive reform in relation to the perception of threat and stress inoculation. This is a complex merger of methods aimed at the reduction of violence that has been shown to be effective in a number of controlled trials in reducing reports of anger, one randomized controlled trial and a reduction in the number of violent incidents. Although these controlled assessments mean that AMT as a treatment program is the best evaluated treatment in the field of criminals with ID, there has been little analysis of each treatment. This is of interest because some of the methods

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may pay nothing to the effectiveness of the approach as a whole while others may certainly reduce the effectiveness or work against the effectiveness of the more strong procedures. For example, one carefully controlled case series emphasizes on the stress inoculation aspect of AMT and notified considerable effectiveness for this shortened anger treatment in a series of three carefully controlled case studies.

CONCLUSION

Several of the controlled trials that found major differences between

the treatment group and comparison group were not conducted on forensic cases. Studies which are conducted on forensic cases have shown significant developments following AMT and one study found a positive result in aggressive incidents for the treated group. For these reasons, AMT and other anger treatments that employ stress inoculation procedures fulfill the requirements for “well-established treatment” and represent Level IV in the “what works” criteria.