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ANGER MANAGEMENT TRAINING WITH ADULT PRISONERS

by

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the degree of Doctor of Philosophy

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Abstract

The present study was designed to assess the efficacy of anger management training with aggressive, adult male offenders. The research design included two active treatment conditions and two delayed treatment control conditions. Treatment consisted of cognitive (Anger Control Training) and behavioral components (Structured Learning Therapy). The order of these components was balanced so that the therapeutic effectiveness of each component could be determined, as well as the complete program.

Treatment was provided in a traditional correctional centre and in a specialized treatment centre. The program was conducted over a five week period and consisted of a total of 23 therapy sessions, each of which were three hours in length. Thirty-seven adult, male offenders confined in a medium security prison volunteered to participate in the study. All participants were assessed prior to treatment, following the first component of the program, following

the second component of the program, and two months following termination of the program.

The results of this study demonstrated that anger control training and structured learning therapy are both effective treatment modalities for incarcerated adult male offenders with severe anger and aggressive behavioral problems. Subjects in all four active treatment conditions displayed the following changes. They self-reported less anger to a variety of provocations common to the prison setting. They self-reported decreases in the frequency, intensity, and duration of anger, more appropriate modalities of expression, and fewer consequences of anger reactions. Objective behavioral ratings of their verbal responses to laboratory role-played provocations indicated their responses were more appropriate, as were their self-reported reactions to these provocations. In addition, subjects demonstrated more prosocial attitudes following completion of the program. The overall findings from the followup measures provide strong support for the extended maintenance of treatment benefits. Subjects continued to demonstrate lower

levels of anger arousal on cognitive indices of anger.

There were no differences in treatment effectiveness between the two institutions on the majority of dependent measures. Overall, the order of presentation of the therapeutic components (Anger Control Training and Structured Learning Therapy) had no distinguishable effects. Thus, all treatment groups benefitted equally from the program. However, the results do indicate that the major therapeutic gains occurred during the first phase of treatment, regardless of the treatment component received. Comparisons conducted on the disciplinary offense yielded inconsistent findings. Although, no strong statement about treatment efficacy can be made from the misconduct data, exposure to the first phase of the program may have had practical value for some of the participants.

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Chapter 1

Introduction

Statement of the Problem

All of the North American media and entertainment industries, but particularly television dramas and films, present us with an almost uninterrupted procession of aggression and violence. Fictional violence is periodically reinforced by sensational accounts of real acts of assault and homicide in the news. Consequently, one may conclude, correctly, that violence in North America is increasing at an alarming rate, as incidents of child abuse, spouse battery, and media-inspired violence have become commonplace (cf. Apter & Goldstein, 1986; Goldstein, 1983a). It has been proposed that this increase has occurred because our social, economic, and political milieu promotes an increasingly more stressful lifestyle which, in turn, increases agitation and violence amongst its citizens (Novaco, 1975). In such a context, effective intervention strategies for

limiting or diverting aggression in all its forms is vital.

This dissertation addresses one particular kind of attempt to reduce the level of violence in today's society. Specifically, it examines anger management techniques with incarcerated offenders, a population which has repeatedly demonstrated poor control of hostile and aggressive impulses. In many cases, the problems these men exhibit in normal society are exacerbated by the prison environment itself, both because of increased stress levels and because of the reinforcement of violence which so often occurs in prison subcultures.

In a prison setting, the typical administrative response to an inmate's verbal or physical aggression may range from a verbal reprimand, to loss of "good" time, to suspension of eligibility for passes to the outside world, to cell confinement on a "restricted" (usually unpalatable) diet. These sanctions are intended to suppress aggressive behavior. However, evidence as to their actual effectiveness is meagre.

In addition, serious questions have been raised as to the efficacy of certain types of punishment with certain types of clinical clientele (cf. Bandura, 1973; Harris & Eshor-Hershfield, 1978; Kazdin, 1975; Matson & DiLorenzo, 1984). There are also definite legal limitations on the types of punishments that can be employed to encourage behavior change in offenders (cf. Gendreau & Ross, 1981) and data as to the effectiveness of these particular prison punishments are virtually nonexistent. Moreover, there have been few attempts in adult correctional settings to devise or evaluate alternative punishments.

In addition to the immediate costs of high rates of aggressive behavior in prison, the likelihood that many or most inmates will eventually generalize this mode of adaptation to the community is a further incentive in the search for effective treatment and prevention programs. With respect to the immediate effects of pervasive violence on correctional inmates, there have been vigorous calls, in recent years, from correctional managers and practitioners to develop procedures to assist new incarcerates in coping with an

indisputably hostile environment (e.g., Porporino and Zamble, 1984; Toch, 1977). To this end, improving anger management skills in prisoners would not only directly benefit the prisoners themselves, but could potentially improve their interactions with correctional staff, thus improve the overall morale of the institution, provide a climate more conducive to prosocial behavioral change, and in turn facilitate the reentry of the prisoner into the community. In particular, anger management training programs instituted early in the individual's prison career may reduce the problems he is likely to face when he is freed from prison constraints and must rely on his own self-control.

Review of the Literature

In recent years, mental health professionals have developed training programs to alleviate maladaptive anger arousal at the individual level. Two major approaches are evident in the current literature on anger management: cognitive and behavioral. The process of anger arousal is central to Novaco's (1975) conceptualization of aggressive behavior. His anger

management procedures are based on the premise that anger arousal is defined or determined by an individual's cognitive structuring or interpretation of the situation (Novaco, 1977). Therefore, it is his contention that effective treatment must involve a restructuring of cognitions. Programming within this context has been termed stress inoculation (cf. Meichenbaum, 1975).

In contrast, the behavioral approach assumes that aggressive behavior is a consequence of inadequate or maladaptive social skills which render the individual incapable of expressing anger in an appropriate, adaptive, socially acceptable way (Foy, Eisler & Pinkton, 1975; Fredricksen, Jenkins, Foy & Eisler, 1976; Goldstein, 1973; Rimm & Masters, 1974; Wallace, Tergen, Liberman & Baker, 1973). This skills-deficit model suggests that as anger accumulates behavioral inhibition also increases until the individual reaches a critical state where his inhibitory controls are overwhelmed and he "explodes" into verbal or physical aggression (Rimm & Masters, 1974). Consequently, the active focus of therapy is on teaching specific

appropriate ways of expressing anger. The most prominent of the programs falling within the skills-deficit training model, is structured learning therapy (Goldstein, 1973; 1981).

Stress Inoculation Training

Stress inoculation was a concept proposed first by Meichenbaum and Cameron (1973) and later expanded by Meichenbaum (1975). Their initial work targeted problems of anxiety (Meichenbaum, Turk & Burnstein, 1975) and pain management (Meichenbaum & Turk, 1976) and Novaco (1975) extended the basic principles to the treatment of anger. Stress inoculation training (SIT) is a self-control procedure which provides the individual with a "proactive defense", a set of coping skills to deal with future stressful situations that might lead to the experience of anger. Analogous to the medical procedure of inoculation to build resistance to disease, SIT is designed to build coping skills and to enhance an individual's resistance to stressful stimuli through exposure to manageable doses of similar stimuli.

Novaco's anger treatment package includes the three basic components of stress inoculation: (1) cognitive preparation, (2) skills acquisition, and (3) application training. The cognitive preparation phase provides the client with a conceptual framework to assist him in understanding his responses to a stressful situation. The skills acquisition phase then provides him with a variety of direct action and cognitive coping techniques. Finally, the application phase permits the client to test out and practice his newly acquired skills in stressful situations (Turk & Burnstein, 1975).

Novaco (1975), in the first experimental research on the efficacy of stress inoculation for anger problems, compared the efficacy of self-instruction, relaxation training, self-instruction combined with relaxation training, and an attention-control condition in the treatment of maladaptive anger arousal. His subjects were adult volunteers who answered a newspaper advertisement and who were assessed to have chronic anger problems. Participants were randomly assigned to four treatment conditions. The self-instruction plus

relaxation treatment consisted of self-instruction using Meichenbaum's (1974) stress inoculation training, and self-statements and procedures in the form of instructions on how to view an anger-provoking situation (provocation) in stages. In addition, relaxation training was employed following Jacobson's (1964) deep muscular relaxation procedures. The "attention-control" treatment consisted of having clients keep an anger diary and informing them that their job was to learn about their anger. In addition, they were also informed that they would eventually be placed in a treatment program.

On a series of self-report, physiological, and laboratory-based imaginal and role-played provocation measures, Novaco found that all three treatment conditions were superior to the attention-control condition. The combined self-instruction and relaxation treatment subjects experienced the greatest reduction in anger when compared to either of the component treatments, while self-instruction alone was more effective than relaxation alone on all measures with the exception of imaginal provocation. The author

concluded that the cognitive treatment by itself was more powerful in effecting generalized positive change than was the exclusive application of relaxation training. Nonetheless, relaxation training did provide some benefit, probably by increasing the client's awareness of physiological arousal.

However, there were a number of methodological shortcomings in Novaco's study. Konecni (1976) has criticized the study on the grounds that instructional sets varied depending on whether the participants were in the attention control or other treatment conditions. In the attention-control condition, participants were merely instructed to monitor their anger and to wait for program participation at a later date. In the treatment conditions, however, participants were led to expect that they would learn techniques to control their anger. In addition, Novaco neglected to control for therapist effects, since he himself was the only therapist. Moreover, by relying exclusively on self-report measures, he limited the scope of his conclusions. Although, participants were instructed to keep diaries, they frequently failed to do so and since

no follow-up period was included one has no way of knowing whether any benefits accruing from the program generalized beyond the laboratory.

In a subsequent paper, Novaco (1977) reported an application of his procedures to the treatment of a 38 year-old hospitalized depressive male with severe anger problems. The treatment package was expanded to follow Meichenbaum's (1975) stress inoculation procedure. At the end of 11 treatment sessions and a two-month follow-up period, the client's self-report of anger arousal on the Anger Inventory was substantially lower. Although the results of this investigation are generally positive, the findings are complicated by the primary presenting complaint of depression. Any conclusions are further limited by the short (1 week) baseline period and, again, by his exclusive reliance on self-report data. The aforementioned limitations preclude any conclusions regarding the clinical effectiveness of stress inoculation in alleviating maladaptive anger arousal.

A more recent study by Bistline and Frieden (1984) paralleled Novaco's (1977) case study but included several methodological improvements. While Novaco's patient was hospitalized primarily for depression with a secondary complaint of anger problems, Bistline and Frieden's patient was specifically referred for anger and aggressive behavior. They employed a 3 month baseline period and a 12 month followup, and they included unobtrusive measures as well as self-report. The unobtrusive measures consisted of monthly records of the number of times the patient was written up for verbal and physical aggression versus prosocial behavior, and frequency and duration of placements in seclusion. The measures of prosocial behavior included cooperativeness, helping, and attempts and successes in maintaining and reducing inappropriate anger. This patient received more extensive treatment than the subject in Novaco's study, though, as three of the follow-up measures were obtained unobtrusively, contact between therapist and client was limited. Following treatment, there were substantial reductions in perceived anger and aggressive acts and substantial increases in prosocial behaviors. Although it has only

a very limited data base, essentially one well-controlled case study, stress inoculation strategies appear to have some tentative promise for long-term benefits in the treatment of maladaptive anger arousal.

Moon and Eisler (1983) compared the effectiveness of stress inoculation training, social skills training, problem-solving training, and an attention control group in the reduction of anger. The results indicated that all experimental groups had significant effects in reducing the cognitive components of anger (i.e., decreased anger-provoking cognitions). However, only the problem solving and social skills training groups increased on the behavioral indices of anger, that is to say, they increased in socially skilled assertive behavior in the presence of anger-provoking stimuli. In fact, the subjects in the stress inoculation group became uniformly more passive with respect to behavioral manifestations of anger in the presence of anger- provoking cognitions. The authors attribute this finding to the emphasis of stress inoculation on a covert, reinterpretive type of anger reduction

strategy. These findings must be interpreted with caution since the treatments were evaluated on male undergraduates and were not evaluated on a clinical population of disturbed individuals.

Structured Learning Therapy

The second major treatment approach which has also received support in the literature involves various behavioral interventions which focus on skill acquisition and practice or psychological skills training programs (Goldstein, 1973; 1981).

> Psychological skills training is the planned systematic teaching of the specific behaviors needed and consciously desired by the individual in order to function in an effective and satisfying way over an extended period of time, in a broad array of positive, negative and neutral interpersonal contexts. The specific teaching methods which constitute psychological skills training directly and jointly reflect psychology's modern social learning theory and education's contemporary pedagogic principles and procedures

(Goldstein, Hapter, & Harootunian (1984, p. 157).

There are published reports of at least fifteen different psychological skills training programs oriented to chronically aggressive adolescents and children which meet the formal definitional characteristics of psychological skills training. An overview of these programs is provided in Table 1. As can be seen from the table, there is a substantial amount of diversity across programs. For example, some programs focus on teaching a broad array of personal and interpersonal skills (e.g., Elarado & Cooper, 1977). Other programs have a much more narrow focus, concentrating on a single skill such as problem solving (e.g., Rotherman, 1980). Still others appear to be more interested in specific settings (e.g., Cox & Gunn, 1980). There is also considerable diversity across programs in terms of the particular client population investigated, ranging from early elementary-school age children through all stages of adolescence. Clients also differ considerably in their pretraining levels of skill competence, ranging from substantially skill-deficient, retarded children or adolescents to

Table 1
Psychological Skills-Training Programs for Adolescents and Children

DEVELOPER	PROGRAM	TRAINERS	TRAINEES	TRAINING METHODS	SKILLS
Adkins (1970, 1974)	Life-skills education	Professional and para-professional	Disadvantaged adolescents and adults	Instruction, A/V demonstration, discussion	Developing self; Relating to others; Managing home & family responsibility; Exercising community rights
Bash & Camp (1980)	Think aloud	Teachers	Elementary school children	Modeling, self-instruction, scripts, games, role playing	Problem solving Interpersonal skills Self-control Emotional awareness
Cox & Gunn (1980)	Interpersonal skills in the schools	Teachers	Elementary school children	Modeling, didactic instruction, performance feedback	Interpersonal conflict reduction skills
Elardo & Cooper (1977)	AWARE: Activities ror social development	Teachers	Elementary school children	Structured discussion, exercises, games, role playing	Getting-acquainted skills, Recognizing feelings, Understanding others, Social-living skills
Goldstein, Sprafkin, & Klein (1979)	Structured learning	Teachers	Adolescents	Modeling, role playing, feedback, transfer training	Conversational skills Expressive skills Responsible skills Dealing-with-feelings Dealing-with-stress Alternatives-to-aggression Planning skills
Hare (1976)	Teaching	Teachers	High-school students	Exercises, role play simulations,	Developing awareness of conflict-management styles Building trust Alternatives to conflict
Hawley & Hawley (1975)	Developing human potential	Teachers	Elementary school children	Exercises, simulations, structured discussion	Self-awareness skills Communication skills Relationship skills Creativity Skills
Heiman (1973)	Interpersonal communication	Teachers	High-school students	Lecture, exercises, role play	Trust building Sharing of self Communication Listening
Oden (1980)	Social isolation intervention	Teachers	Elementary school children	Coaching, games, behavioral rehearsal	Participation Cooperation Communication

Table 1 (cont)
Psychological Skills-Training Programs for Adolescents and Children

DEVELOPER	PROGRAM	TRAINERS	TRAINEES	TRAINING METHODS	SKILLS
Rinn & Markle (1979)	Social-skills deficit modification	Clinicians	Children, ages 8 to 11	Instruction, questioning, modeling, review, feedback	Self-expressive skills Other-enhancing skills Assertiveness skills
Robin (1980)	Problem -solving performance	Family therapists	Parents and adolescents training	Modeling, didactic instruction, rehearsal, feedback	Interpersonal-conflict Behavioral reduction skills
Rotheram (1980)	Cognitive behavioral	Parapro-fessionals	Elementary school children	Simulation, coaching, shaping, rehearsal	Interpersonal problem-solving skills Assertion
Stephens (1976, 1978)	Directive teaching	Teachers	Children ages 7 to 12	Modeling, rehearsal, social reinforcement, contingency contracting	Environmental behaviors Interpersonal behaviors Self-related behaviors Task-related behaviors
Terkelson (1976)	Parent-Child communication skills	Counselors	Parents, children grades 4-6	Exercises, role playing, review	Listening Sending "I" messages
Wehman & Schleien (1980)	Leisure skills	Teachers	Severely disturbed children and adolescents	Games, coaching, modeling, feedback	Social, cognitive, gross/fine motor skills

Note: From School Violence, 1984, Englewood Cliffs, N.J.: Prentice Hall.

"normal" subjects whose general skill level is satisfactory but who wish to improve some specific skill deficits. Considerable diversity also exists with respect to the trainers in these psychological skills training programs, who represent a number of different types of professionals and paraprofessionals. In general, the training methods employed in these studies consist of either social learning-based or educationally-based procedural combinations (Goldstein et al., 1984).

One particular variant of this approach, structured learning therapy, is especially germane to the teaching of alternatives to aggression (Goldstein, 1983a). With a theoretical basis in Bandura's (1973) social learning theory, structured learning therapy as developed by Goldstein (1973) contains four essential elements: (1) modelling, (2) role-playing, (3) performance feedback, and (4) transfer training. Modelling refers to exposing the trainees to expert demonstrations or examples of the specific skills they are attempting to learn. Skills are demonstrated or modeled ("live", audiotape, videotape, or film) and

illustrate the behavioral steps of the particular skill applied in a variety of relevant settings. Clients are instructed to pay close attention to the manner in which the model enacts the behavioral steps comprising each skill. Following the modelling demonstration, the next phase in learning the skill is role-playing where the objective is realistic behavioral rehearsal. The third element, performance feedback, follows completion of each role-play and consists of a specific and detailed evaluation of the role-played rehearsal. Transfer of training, the fourth component of structured learning, refers to an assortment of techniques employed to promote generalization of the newly learned skills from the clinical setting to the actual real life environment of the trainee (Goldstein, 1981). Transfer of training is both the most crucial and the most difficult phase of structured learning therapy. According to Goldstein et al. (1984), "if the new learned behavior does not carry over to the real-life environment, then a lasting and meaningful change in the youngster's behavior is extremely unlikely to occur" (p. 163).

The major studies of structured learning therapy conducted over the past decade by Goldstein and his associates have looked at applications of the techniques to treatment of long-term, highly skill-deficient chronic mental hospital patients. A series of investigations comprising a systematic empirical evaluation of structured learning is summarized in the book Psychological Skills Training (Goldstein, 1981) which concludes that the skills-training program is consistently successful in producing skill-enhancement effects. Skill acquisition occurs in well over 90 percent of structured learning clients and skill transfer occurs with approximately 50 percent of clients.

Having established the utility of structured learning techniques, Goldstein and his colleagues turned their attention from teaching a wide array of interpersonal and daily living skills to adult psychiatric inpatients to other populations for whom aggression is a critical problem, including aggressive adolescents (Goldstein, Sprafkin, Gershaw and Klein, 1980), abusive parents (Solomon, 1978; Sturm, 1979),

and police being trained to deal with disputant spouses (Goldstein, Monti, Sardino, and Green, 1978). A series of 12 outcome studies investigating structured learning with aggressive adolescents is summarized in Table 2, which provides a descriptive overview, the particular population of adolescents investigated, the size and age of the sample, the targeted skill, the setting, and selected findings pertaining to outcome. All of the clinical studies dealt with aggressive adolescent and preadolescent clients. Sample size ranged from 40 to 96 with the entire age span of adolescence represented across the studies. Experimental settings included residential centres, a state mental hospital, regular and special education classes in urban and rural elementary, and junior high, and senior high schools. The experimental procedures in most of the investigations involved the following measurement and training sequence:

A. Pretesting: Direct Test (pre);

B. Training: Structured Learning and/or treatment element condition or control;

Table 2
Structured-learning Research with Adolescent and Preadolescent Trainees

INVESTIGATOR	TARGET SKILL	TRAINEES	SETTING	RESULTS
Berlin (1976)	Empathy	Aggressive adolescents (JD & PINS)[a], n=58 Mean age =13.6	Residential center	1. SL with conflict content; SL with nonconflict content 2. SL with conflict content no treatment 3. 1 level 3 and 4 1 level 2
D. Fleming (1976)	Negotiation	Aggressive preadolescents (N=80); X age = 10.5	Regular classes; elementary urban school	1. No difference between high & low self-esteem trainees 2. No difference between adult led and peer-led SL groups 3. All SL groups: significant acquisition but non-significant transfer
L. Fleming (1976)	Negotiation	Aggressive (n=48) & passive (n=48) mentally retarded preadolescents; Mean age=10.5	Special-education classes; urban elementary school	1. SL attention control for aggressive and passive students
Golden (1975)	Resistance reduction	Aggressive adolescents n=60; Mean age=15.2	Regular classes; urban senior high school	1. SL = discrimination training with authority figures 2. SL no treatment control on acquisition and transfer criteria
Greenleaf (1977)	Self-control	Aggressive preadolescents n=60; Mean age=14.6	Regular classes; urban junior high school	1. SL + transfer programming attention control on acquisition and transfer measures of self-control 2. SL attention control on acquisition and transfer measure of self-control 3. No significant effects for transfer programming alone
Hummel (1977)	Self-control n=60; Mean age=15.8	Aggressive Adolescents high school	Regular classes; rural senior & transfer measures for self-	1. SL (stimulus variability) SL (constant) on acquisition control & negotiation skills
Jennings (1975)	Interviewee behaviors: initiation, elaboration, etc.	Emotionally disturbed adolescents n=40; Mean age=13.7	Children's unit of state mental hospital	1. SL minimal treatment control on subskills of initiation and termination of silence 2. SL minimal treatment control on attractiveness to interviewer

Table 2 (cont.)
Structured-Learning Research with Adolescent and Preadolescent Trainees

INVESTIGATOR	TARGET SKILL	TRAINEES	SETTING	RESULTS
Litwack (1976)	Following instructions	Passive-resistive adolescents n=53; Mean age=14.1	Regular classes; urban junior high school	1. SL + anticipate serving as peer trainer / SL alone / no treatment on both acquisition and transfer criteria
Raleigh (1976)	Assertiveness	Aggressive (n=37) & passive (n=37) adolescents; Mean age=13.5	Regular classes; urban junior high schools	1. SL (in groups), SL (individual), discussion (groups), discussion (individual), no treatment on assertiveness or acquisition and transfer criteria
Swanstrom (1977)	Self-control	Aggressive preadolescents n=42; Mean age=9.0	Regular classes; urban elementary school	1. SL = structured discussion 2. SL no treatment control on acquisition criteria
Trief (1976)	Perspective-taking (PT)	Aggressive adolescents (JD and PINS)[a] n=58; Mean age=15.5	Residential center	1. SL (affective + cognitive focus SL placebo control and brief instruction control on PT[b] 2. SL (affective focus) SL placebo control and brief instruction control on PT[b] 3. SL (cognitive focus) SL placebo control and brief instruction control on PT[b] 4. SL (combined focus) SL placebo control and brief instruction on cooperation
Wood (1977)	Assertiveness	Aggressive & passive adolescents; n=70; Mean age=14.0	Regular classes; urban senior high high school	1. SL brief instructions control on acquisition and transfer measures of assertiveness across type of trainer 2. Greater assertiveness acquisition and trend toward greater transfer if teacher trained.

[a]JD = juvenile delinquency; PINS = persons in need of supervision.

Note: From School Violence, 1984, Englewood Cliffs, N.J.: Prentice Hall.

C. Posttesting: Direct Test (post), Minimal Generalization Test and Extended Generalization Test

Each of the Situations Tests (Direct, Minimal Generalization, and Extended Generalization) consists of a series of descriptions of stimulus situations that might occur in the real world in which one of the skills taught would be the optimal response. The Direct Situations Test, administered both pre- and post-treatment, consists of 40 such situations (4 for each of the 10 skills taught) described in an audiotaped presentation. (The modelling displays enacted by Structured Learning trainers during treatment portray the same stimulus situations). The Minimal Generalization Situations Test consists of four new situations per skill, situations not previously practised by the youth. These situations are only administered at posttest. The Extended Generalization Situations Test consists of two more posttest situations per skill.

As can be seen from Table 2, a significant prosocial skills acquisition effect has emerged from these studies, demonstrating the utility of structured learning in teaching aggressive adolescents such prosocial skills as empathy, negotiation, conflict management, self-control, interviewee behaviors, following instructions, assertiveness, and perspective-taking (Goldstein et al., 1984). However, as noted earlier, the demonstration of prosocial skill acquisition in the therapy setting is by itself a rather limited achievement. In all of these studies, it is extremely difficult to ascertain the extent to which treatment transferred to the real world because of the absence of any long-term follow-up.

Aggression Management in Prison

Until recently, there has been little research specifically addressing the effectiveness of anger management techniques for controlling maladaptive anger arousal in incarcerated offenders. Most of the studies which have targeted offenders have employed a stress inoculation training paradigm. Although in a few cases other procedures were added, no outcome studies using

structured learning therapy with incarcerated adult offenders have been published to date.

The first systematic application of behavioral self-control treatment techniques to anger problems in criminal offenders was reported by Petrella (1978). He examined the effects of self-control/systematic desensitization, and self-recording in male and female offenders living in halfway houses. All subjects reported a history of faulty anger control. They were seen twice a week in five individual treatment sessions, and tested immediately following treatment and three weeks later. There were no significant differences between treatment groups on any of the measures. However, the results revealed nonsignificant trends in the desired directions on the Anger Inventory, diary recordings, and staff reports of anger experiences, and 80% of the participants and 32% of the staff rated the overall effectiveness of the program as "fairly much" or higher.

Subsequently, Ritter (1980) investigated the role of coping efficacy self-estimates in anger arousal

using incarcerated female offenders as subjects. The study compared two treatment regimes: a combination of cognitive restructuring and systematic desensitization versus systematic desensitization alone. Results indicated that the combined treatment produced significant increases in self-estimates of coping and significantly greater reductions in anger intensity when compared to the no-treatment control group. The desensitization group showed only marginal improvement in coping estimates but significantly greater decreases in anger than control subjects, who showed no change on any of the dependent measures.

Fleming (1982) examined an adapted stress inoculation procedure in the treatment of aggressive boys in a residential treatment facility. Subjects were seen individually for 18 half-hour therapy sessions. The anger management condition was a three phase treatment package similar to that of Novaco (1977). The attention-control condition consisted of an equal number of therapy sessions in which emotions other than anger were discussed. Dependent measures included self-report, teacher ratings, unit staff

ratings, and beha··ioral observations. The results of the study were inconclusive. At posttest, the anger management treatment was not significantly different from the attention control on any of the objective measures, although subjects in the treatment group self-reported greater reductions in anger and aggression.

Gaertner (1983) compared three components of stress inoculation training (i.e., education, coping skills training, and exposure to a stressor) in the reduction of anger-related aggression. Subjects were 50 adult male prisoners, each of whom had a history of anger problems and at least one institutional misconduct in the previous nine months. The design of the study included five treatment cells: a no treatment control, education only, education plus coping skills, education plus exposure, and education plus coping skills plus exposure (i.e., stress inoculation). Subjects were seen individually over a five-week period with the number of therapy sessions varying from two to ten depending on the treatment condition. A posttest immediately followed treatment and subjects were

retested at 3-month follow-up. It should be noted that this is the most extensive follow-up reported in the literature with offender populations. As expected, there were a number of significant differences at posttest, including a significant main effect for the coping skills component on both the Anger Inventory scores and on the behavioral ratings of role-played provocation scenes. No significant main effects or interactions were found for the exposure component on any measure. The comparisons between education alone and no treatment revealed no differences on any measure. At posttest, education plus exposure was superior to no treatment on the role-played measures but not on the Anger Inventory. The data indicated that the education plus coping skills group and the stress inoculation group incurred fewer aggressive misconducts at posttest. However, this difference was not maintained at follow-up. In fact, at follow-up there were no significant differences between the four active treatment conditions, though all active treatments except education alone were superior to the control group on the Anger Inventory. Thus, in spite of the encouraging posttest results, the overall

findings from the two follow-up measures, Anger Inventory and institutional behavior ratings, indicated quite clearly that these effects were not maintained three months later. Gaertner (1983) attributes this to negative effects of the institutional environment and he recommends that additional booster sessions at periodic intervals may be necessary to maintain treatment effects.

Schlichter and Horan (1981) evaluated the effectiveness of stress inoculation training for 38 institutionalized aggressive juvenile delinquents. The three experimental conditions were stress inoculation training, similar to that of Novaco (1977), a "treatment elements" condition which was an abbreviated version of stress inoculation, and a no-treatment control condition. The design of this study addressed several of the limitations of Novaco's (1975) experiment. For example, in addition to a no treatment control group, Schlichter and Horan provided controls for experimental demands and for possible therapist effects by randomly assigning each of the three therapists an equal number of subjects under each

treatment condition. Both treatment conditions were superior to the no treatment control condition on three self-report scales at posttest. However, only the stress inoculation subjects demonstrated reductions in objective measures of verbal aggression. Like Gaertner (1983), Schlichter and Horan suggest that the negative effects found on the institutional behavior ratings may have been due to the negative impact of continued exposure to the institutional environment.

Recently, Stermac (1986) examined the efficacy of anger control treatment with forensic patients. The treatment condition consisted of six, one-hour sessions based on Novaco's (1977) stress inoculation procedure. The control condition consisted of six, one-hour psychoeducational sessions. Dependent measures included the Novaco Anger Inventory, the Porteus Mazes-Vineland Revision, and the Coping Strategies Inventory. The results revealed that program participants significantly decreased their scores on the Anger Inventory and demonstrated improvement in their use of coping strategies for dealing with stress (i.e., greater use of cognitive restructuring

strategies and less use of self-denigration strategies) than did control subjects. Although the overall findings of this study support the use of anger control training with forensic patients, the conclusions are limited by a reliance on self-report, an absence of behavioral and institutional measures, and the lack of long-term follow-up measures.

Rokach (1987) conducted the first published study investigating the efficacy of anger management training with incarcerated adult offenders. Treatment was based on Novaco's (1975, 1976, 1977) stress inoculation procedures and consisted of five, 90 minute sessions. Dependent measures included the Novaco Anger Inventory, the Test of Social Insight, and posttreatment informal interviews. Following treatment, subjects in the experimental group, when compared with controls, significantly reduced self-reported anger in provocation situations, were less aggressive, less withdrawn, less passive, and more cooperative. Informal interviews case managers corroborated these results. Similar to the Stermac (1986) study, the overall findings of the present study, although

encouraging, are limited by the sole reliance on self-report, the absence of systematic observation of behavioral changes as well as longitudinal followup research in order to confirm the reported changes.

The most comprehensive of the skills training programs was developed for adolescents by Goldstein et al. (1978, 1985). Aggression Replacement Training (ART) consists of three coordinated interventions: Anger Control Training, Structured Learning Therapy, and Moral Education. The first component, Structured Learning Therapy, is a psychoeducational intervention that Goldstein developed in (1973) to enhance prosocial skill levels, as described earlier. Anger Control Training, the second component, was initially developed by Feindler, Marriott, and Iwata (1984), but was based on the earlier stress inoculation procedures of Novaco (1975, 1977). Its main goal is to teach antisocial behavior inhibition, that is, the reduction, management, and control of anger and aggression. The third component of ART, Moral Education, is based on the research of Kohlberg (1969, 1973) and is designed to increase the individual's levels of moral reasoning

by raising his level of fairness, justice, and concern with the needs and rights of others. Goldstein and his colleagues (1987) believed that the combination of these three components (enhanced prosocial skill proficiency, heightened anger control, and advancing levels of moral reasoning) might yield more reliable and longer term positive outcomes than each component in isolation.

The first major evaluation of ART was conducted by Glick and Goldstein (1987) at Annisville Youth Centre, a New York State residential facility for boys ages 14 to 17. Residents are incarcerated in this institution for such crimes as assault, burglary, grand larceny, possession of stolen property, criminal trespass, and drug offenses. Sixty adolescents were randomly assigned to three experimental conditions: Aggression Replacement Training, brief instruction control, and no-treatment control. ART sessions were held three times per week for 10 weeks. Following completion of ART, participants showed significantly greater acquisition and transfer of Structured Learning skills than did control subjects. Youths who had received

ART, in comparison to those who had not, demonstrated significantly less acting-out behavior in terms of the number and intensity of acting-out incidents as rated on weekly behavioral incident reports by staff. Staff ratings of impulsiveness on the Kendall-Wilcox Self-Control Scale were also significantly lower. However, no significant differences were found between the ART group and the control groups on the Sociomoral Reflections Measure, suggesting that participation in ART sessions failed to substantially alter moral reasoning level. The second phase of the study involved exposing control group subjects to ART to test for replication effects, with particular attention to possible reductions in acting-out behaviors. Both number and severity of behavioral incidents showed significant reductions from phase 1 to phase 2. In addition, approximately three months after their releases from the institution, 17 youths who had received ART and 37 who had not, were rated by parole officers on a Community Adjustment Rating Scale. These ratings were conducted by means of a telephone interview with parole officers who were blind as to whether the subject had or had not received ART.

Adolescents who had completed ART were rated significantly higher on community adjustment in their relations with peers, family, the justice system, and in overall adjustment, but not at school or work, as compared with youths who had not received ART. These results indicate that the therapeutic gains acquired during ART also generalize to most, but not all, community settings.

The Glick and Goldstein study was subsequently replicated at MacCormick Youth Centre, a New York State secure facility for male juvenile delinquents (ages 13 to 21) incarcerated for serious felonies ranging from armed robbery to murder (Goldstein & Glick, in press). Subjects who had completed ART demonstrated significantly greater acquisition and transfer of the Structured Learning skills than did those subjects who did not receive ART. These results essentially replicate the Annisville Structured Learning results. However, at MacCormick, youths who had received ART demonstrated significant increases in their levels of moral reasoning, in contrast to the Annisville findings. Moreover, at MacCormick there were no

significant differences between ART subjects and control subjects in either the number or intensity of acting-out behaviors or their rated levels of impulsiveness.

To summarize, the quality of the research on Structured Learning Therapy and related skills training programs with aggressive populations is very encouraging. The comprehensiveness of these multimodal programs is noteworthy and there is little doubt that the cognitive-behavioral skills taught to clients serve to control aggressive behavior and facilitate more appropriate social skills. Furthermore, there is evidence to suggest that these therapeutic gains generalize to other environments.

The Present Study

Structured Learning Therapy and Stress Inoculation Training are two treatment techniques that have been applied to a number of populations across a variety of settings and each has demonstrated some utility for effective anger control in previous research. In the past, these two approaches have represented two

divergent paradigms which differed substantially with respect to the behaviors targeted for intermediate change (i.e., cognitions vs. overt behavior), the training methods, and the dependent measures employed (reflecting their different theoretical positions). However, in recent years many anger management training programs have employed a combination of cognitive and behavioral techniques, with Aggression Replacement Training being the most comprehensive program currently available. Unfortunately, there have been no applications of ART to adult prison settings where verbal and physical aggression are particularly high frequency behaviors. Also, there have been no published attempts to conduct component analyses of the ART components to evaluate the relative contributions of its various manipulations.

The present study was designed to examine the efficacy of the Anger Control and Structured Learning components of Aggression Replacement Training with adult male incarcerates. The research design consisted of four treatment groups who received the two active treatment conditions, anger control (cognitive) and

structured learning (behavioral). The order of treatment was reversed for two of the groups. Two groups consisted of residents in a regular correctional centre while the other two groups were from a correctional treatment facility. In addition, some subjects from both facilities participated in a delayed treatment condition. The effectiveness of the cognitive and behavioral components, as well as their cumulative effects, were examined. Subjects were evaluated at pretest, interim test, and posttest on a variety of self-report and role-played anger provocation measures in order to assess the specific effects of the program on the behaviors targeted for change. Disciplinary infractions were monitored throughout as a measure of the generalization of therapeutic gains to institutional behavior. In addition, measures of criminal attitudes were included to evaluate the extent to which therapeutic gains generalized to other manifestations of prosocial behaviour. Lastly, two months after treatment, subjects were reassessed on the self-report anger and criminal sentiments measures and on their disciplinary infractions.

Chapter 2

Method

Setting

Subjects were recruited from a prison population of 244 incarcerated offenders at Rideau Correctional and Treatment Centre. The Centre is a medium security provincial institution for adult male offenders who are serving sentences from three months to two years less a day. The institution consists of two discrete facilities, Rideau Correctional Centre (RCC) and Rideau Treatment Centre (RTC). The Correctional Centre is a 160-bed traditional provincial correctional facility with residents living in dormitories and working in the institution. The Treatment Centre is an 84-bed facility based on a therapeutic milieu, with residents participating in daily group therapy sessions as well as some individual counselling throughout most of their stay.

Subjects

Subjects were solicited by posted written announcements requesting volunteers for a research

project investigating various anger management techniques (see Appendix 1). Subjects who were interested in obtaining more information about the program signed an attached information blank (see Appendix 1) which was returned to the Psychology Department at the institution. Each subject who requested more information was scheduled for an interview with the investigator.

During the initial phase of the interview, the investigator described the purpose of the study. The study was presented as a graduate school project separate from any institutional programs. It was described as being voluntary in nature and the inmate was assured that no record of his involvement would appear in his case record unless he explicitly requested that an entry be made in his file. After this information was presented, the potential subject was asked if he had any questions or concerns and if he was interested in learning more about the program. Each inmate was prompted for his views of anger control and asked whether he believed he had a problem with anger management. If he was not interested or if it was

determined that his expected discharge date was prior to the projected program completion date, the interview was terminated. For those who expressed additional interest, the final phase of the interview included a review and detailed explanation of the informed consent form (see Appendix 2).

Initially, forty subjects completed all pretest measures. Three subjects subsequently withdrew from the study. One of these subjects was transferred to another institution due to outstanding criminal charges, one declined further participation without articulating a specific reason, and one requested protective custody (i.e., segregation from other inmates for his own safety) which effectively precluded any further participation. Nineteen of the remaining 37 subjects were housed in the Treatment Centre and 18 were housed in the Correctional Centre.

Design

Subjects from two correctional settings were assigned to one of four treatment groups (RCC Cognitive-Behavioral, RCC Behavioral-Cognitive, RTC

Cognitive-Behavioral, and RTC Behavioral-Cognitive). Subjects were administered a test battery on four separate occasions. Each group received the same aggregate treatment, consisting of two separate and distinct components, although the order of component presentation was varied as shown above. Consequently, a 2 x 2 x 4 (Institution x Order x Time) experimental design was employed (see Table 3). The first factor, Institution (between subjects), was the location from which subjects were recruited, RCC vs. RTC. The Institution factor was included to compare the effects of treatment in different environments and to serve as a replication across settings. The second factor, Order (between subjects), was the sequence in which treatment components were given. This factor was included so that the relative contributions of the two treatment components could be properly assessed by balancing the order of presentation. The third factor, Time (within subjects), was the point in the study at which the dependent measures were collected.

The complete test battery was administered to all subjects immediately prior to the first treatment

Table 3

Research Design

Group	Inst	Pretest	Pretest	Treat	Int	Treat	Posttest	Followup
1	RTC		X	Cognit	X	Behav	X	X
2	RCC		X	Behav	X	Cognit	X	X
3	RTC		X	Behav	X	Cognit	X	X
3A	RTC	X*	X	Behav	X	Cognit	X	X
4	RCC		X	Cognit	X	Behav	X	X
4A	RCC	X*	X	Ccgnit	X	Behav	X	X

* = First pretest followed by 5 week interval

X = Testing

component (i.e., pre-treatment), at the end of the first treatment component, which occurred after 10 sessions (i.e., interim), and at the end of the second component (i.e., post-treatment). In addition, all subjects who were still incarcerated in the institution were tested at eight weeks following completion of treatment (i.e., followup). Those subjects who had been released before the end of the followup period were sent the test package by mail; seventeen subjects failed to return the followup package. In addition, half of the subjects in two of the four groups were also administered the test battery five weeks prior to their pretreatment assessment and their first treatment session, in order to provide a delayed treatment control condition. This resulted in five measurement occasions: Pretest 1, Pretest 2, Interim Test, Posttest, and Followup.

Because treatment was offered at two different time periods (series 1 and series 2), allocation to groups was restricted to the groups available at the time of volunteering. Groups 1 and 2 ran for 5 weeks. Following a 2-week break, Groups 3 and 4 ran for a

second 5 week interval. This also served as a replication factor with each group being repeated a second time. Subjects in Groups 1 and 3 were residents of the Treatment Centre, while subjects in Groups 2 and 4 were residents of the Correctional Centre (see Table 3). The order of presentation of the two treatment manipulations was counterbalanced, with Groups 1 and 4 receiving cognitive training first followed by behavioral training, and Groups 2 and 3 receiving behavioral training first followed by cognitive training.

Half of the subjects in each of Groups 3 and 4 were assigned to a delayed treatment condition. These subjects (identified as Groups 3a and 4a) initially received all pretest measures and five weeks later received all "posttest" measures with no intervening treatment. Following this, RTC subjects in Group 3a were merged with those identified as Group 3 and, similarly, RCC subjects in Group 4a joined Group 4. Both groups were then given their respective treatment procedures in the same manner as the other groups. Subjects whose discharge dates would have left

insufficient time for a later group were not allocated to the delayed treatment condition. A description of the two principle treatment components is presented below.

Procedure

Subjects convened daily in a specifically designated room for anger management located in the school. Treatment was provided to all groups by the investigator, a female graduate student in psychology. The program was conducted over a five week period and consisted of a total of 23 therapy sessions, each of which were three hours in length. Correctional Centre residents received treatment in the morning while Treatment Centre residents received treatment in the afternoon.

Treatment Intervention. The general format of each anger management training session consisted of four elements: (1) modelling, (2) role-playing, (3) performance feedback, and (4) transfer training. The modelling element consists of exposing subjects to expertly portrayed demonstrations of either the anger

control techniques or the structured learning skills being taught in that session. Subjects were instructed to pay close attention to the manner in which the model enacted the technique or the various steps comprising the behavioral skill. The second element was role playing in which the subject rehearsed or practised the skill or technique in a simulated life situation. Verbal feedback concerning the subject·s performance was given by the group leader following each role play. The final element was transfer of training, which consisted of an assortment of techniques employed to promote transfer of the newly learned anger control techniques or structured learning skills from the therapy setting to the subject's actual environment.

Anger Control Training. In this component, subjects were given information that would provide them with an understanding of what causes an individual to feel angry and act aggressively. They were also taught techniques for reducing anger and aggression, as well as specific techniques to assist them in identifying physiological cues for anger, internal and external triggers. Additional specific techniques taught

included self-statement disputation, refocusing anticipation of consequences, and self-evaluation.

Structured Learning Training. In this treatment component, subjects were taught specific alternatives to aggressive behavior. These included expressing a complaint, responding to the feelings of others (empathy), preparing for a stressful conversation, responding to anger, keeping out of fights, helping others, dealing with an accusation, dealing with group pressure, expressing affection, and responding to failure. Goldstein et al. (1980) have demonstrated that these 10 skills are especially germane for aggressive and aggression-relevant populations. (For a detailed summary of the treatment procedures see Appendix 3).

Dependent Measures

Anger Inventory. The Anger Inventory (AI) devised by Gaertner (1983; see Appendix 4) is an 80-item self-report inventory for assessing the magnitude of the subject's perceived anger across a variety of situations commonly observed to be anger provoking for

adult male offenders. The AI was presented in written form with an accompanying audiotape to control for reading problems. Each subject was asked to rate how angry he would get if he was actually involved in the situation described, using a 5-point scale: (1) not at all angry, (2) a little bit angry, (3) angry, (4) quite a bit angry, and (5) very, very angry (see Appendix 5 for Anger Inventory instructions and answer sheet). A total raw score was obtained by summing the scores for all 80 items.

Dimensions of Anger Reactions. The Dimensions of Anger Reactions (DAR) questionnaire developed by Novaco (1975; see Appendix 6) is a 7-item, self-report scale for obtaining a quick estimate of several parameters of anger reactions (i.e., frequency, intensity, duration, and modality of expression). In addition, the consequences of anger reactions can be estimated in terms of their effects on work performance, social relationships, and health. Each subject was required to rate the degree to which each of the 7 statements applied to himself, using a 9-point scale: (0) not at all, (1) very little, (2) a little, (3) some not much,

(4) moderately so, (5) fairly much (sic), (6) much, (7) very much and (8) exactly so. A raw score was obtained by summing the scores for each item.

Role-Played Provocation Test. The role-play provocation test procedure was derived from a study by Schlichter (1977) on anger control with institutionalized juvenile delinquents. Scripted role-play situations were employed in which the provoker (a research assistant) was provided with all of his lines while the subject was provided with only his first four lines. After his fourth response, the subject was required to generate his own responses based on how he would likely respond if the role-played provocation events were actually occurring. In all role-play provocations, the subject was given a script that depicted the setting of the events to be re-enacted and was permitted to ask the research assistant questions about the scene.

Two sets of two role-play provocations each (see Appendix 7) were employed with each set containing an

interaction between two inmates and an interaction between an inmate and a correctional officer. At pretest 1 and interim test all treatment subjects received Set 1. The delayed treatment subjects received Set 1 at pretest 1, pretest 2, and interim test. At posttest, all subjects were given their original Set 1 as a direct measure followed by Set 2 as a generalization measure. The first provocation required the subject to supply five responses and each of the other provocations required six responses. Each role-played provocation was recorded on audiotape, with the subject's knowledge and consent.

After completion of all assessment phases, the audiotapes were rated in random order by two judges who were unaware of the research hypotheses. The investigator trained both judges in the use of a 7-point scale ('7' being the highest level of aggression) designed by Schlichter (1977) to measure verbal aggression (see Appendix 8 for the scale). The judges assigned a point-value to each of the responses that the subject made during a provocation. If two or

more categories of the scale were found in a single response, the highest level of aggression was recorded.

Self-Report Scale for Direct Experience Laboratory Provocations. The Anger Self-Report Scale (ASR) developed by Novaco (1975; see Appendix 9) is a 7-item scale designed to assess the intensity of the subjects' perceived anger in the direct experience laboratory provocations. The ASR was administered after each role-played provocation. Each subject was required to rate the degree to which statement applied to him on an eight-point scale: (1) not at all, (2) very little, (3) a little, (4) some not much, (5) fairly much, (sic) (6) much, (7) very much, and (8) exactly so. A raw score was obtained by summing the scores for each item.

Measures of Criminal Sentiments. Three measures of Criminal Sentiments were developed to evaluate ones' personal attitudes, values, and beliefs regarding the criminal justice system, law violation, and law violators (Andrews & Wormith, 1984; see Appendix 10). Attitudes Toward the Law, Courts and Police (LCP) consists of 25 items pertaining to respect or disregard

for the law and criminal justice without specific reference to law violations or law violators. Tolerance for Law Violation (10 items) pertains to specific justifications for illegal activity. Identification with Criminal Others consists of 6 items eliciting personal judgments regarding criminals. Subjects were requested to rate the extent to which they agreed with each statement on a 5-point Likert scale: Strongly Agree, Agree, Undecided, Disagree and Strongly Disagree.

Disciplinary Charges. All subjects were monitored on three objective measures of institutional behavior: frequency of institutional infractions (misconducts), notices of satisfactory ratings (brownies), and notices of unsatisfactory ratings (speeders). Misconducts were counted separately according to type of infraction: aggressive misconducts, rule violation misconducts, and security misconducts (Appendix 11). These data were collected in order to assess the generalization of treatment effects to daily life in the institution.

Demographic Data. Finally, data from a wide range of social history, criminal history, and demographic variables were compiled for each of the 37 subjects completing the experiment.

Chapter 3

Results

Demographic Data

The social, demographic, and legal history variables are summarized in Table 4 for the 37 subjects who completed the entire anger management program. The mean age at time of participation in the study was 24.54 (S.D. = 7.09) with a range of 18 to 44 years. Prior to beginning the program, participants had been incarcerated in the present institution for an average of 84.35 days (S.D. = 59.67) with an average sentence of 424.81 days (S.D. = 155.18). The mean number of prior criminal convictions was 5.65 (S.D. = 5.67) of which an average of .62 (S.D. = 1.06) were for person offenses. On average, subjects had had 3.16 prior incarcerations (S.D. = 3.46). The mean number of criminal convictions for which subjects were currently incarcerated was 5.32 (S.D. = 3.51), of which an average of .57 were for person offenses (S.D. = .80). These statistics are comparable to those reported in other studies using adult incarcerates (Ministry of

Table 4

Demographic and Criminal Record Variables

	Mean	SD
Age	24.54	7.09
Education	10.05	1.37
Pre-Program Days	84.35	59.67
Aggregate Sentence	424.81	155.18
Prior Person Offenses	0.62	1.06
Prior Property Offenses	5.03	5.17
Total Prior Offenses	5.65	5.67
Current Person Offenses	0.57	0.80
Current Property Offenses	4.76	3.74
Total Current Offenses	5.32	3.51
Prior Incarcerations	3.16	3.46

	Frequency	Percent
Marital Status		
Married	5	13.5
Common-Law	5	13.5
Single	27	73.0
Dependants		
No Children	26	70.3
One Child	4	10.8
Two Children	5	13.5
Three Children	2	5.4

Table 4 (cont.)

Demographic and Criminal Record Variables

		Frequency	Percent
Referral Source			
	Self-Referral	10	27.0
	Classification	21	56.8
	Other	6	16.2
Religion			
	Roman Catholic	19	51.4
	Protestant	5	13.5
	Other	5	13.5
	None	8	21.6
Race			
	Caucasion	35	94.6
	Black	1	2.7
	Other	1	2.7
Language			
	English	33	89.2
	English & French	4	10.8
Employment			
	Unemployed	24	64.9
	Employed	13	35.1

Table 4 (cont.)

Demographic and Criminal Record Variables

	Frequency	Percent
Occupational Group		
Professional	1	2.7
Clerical	1	2.7
Craftsman	3	8.1
Personal	1	2.7
Labourer	29	78.4
Student	1	2.7
Other	1	2.7
Blishen's SES		
60-69	1	2.7
40-49	1	2.7
30-39	1	2.7
Below 30	33	89.2
Type of Offence		
Person	13	35.1
Property	18	48.6
Narcotics	1	2.7
Liquor/Traffic	3	8.1
P/P Violation	2	5.4

Table 4 (cont.)

Demographic and Criminal Record Variables

	Frequency	Percent
Offence Severity		
Serious Violent	6	16.2
Break & Enter	12	32.4
Traffic Drug	1	2.7
Weapon	2	5.4
Fraud	5	13.5
Person	1	2.7
Theft/Possession	1	2.7
Assault	4	10.8
Traffic Alcohol	3	8.1
Parole Violator	2	5.4

Correctional Services Annual Report, 1988). Thus, the current sample does not appear to be atypical for adult offenders in provincial correctional institutions.

Psychometric Properties of Test Instruments

The mean scores and standard deviations for the Anger Inventory, Dimensions of Anger Reactions, Anger Response Style, Criminal Sentiments Scale, and the provocation role-plays are summarized in Table 5. The data are presented separately for the pretest, interim test, posttest, and followup assessment periods. Five week test-retest reliabilities for all dependent measures were calculated by comparing the delayed treatment control subjects' scores on pretest 1 and pretest 2 (Table 6). Pearson product-moment correlation coefficients ranged from -.01 for self-report Scene B to .77 for Tolerance for Law Violation. Since the test-retest reliabilities of the self-report ratings following the role-played provocations were quite low further results on these measures should be regarded with caution. However, the behavioral ratings following the role-played provocations were quite acceptable, in the .60 range.

Table 5

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Anger Inventory

Treatment Condition		Pre	Int	Post	Followup
Cog-Beh (RTC)	M	255.33	219.11	169.78	170.00
	SD	62.52	80.88	48.47	77.89
Beh-Cog (RCC)	M	246.78	220.89	206.00	182.00
	SD	51.31	63.34	63.04	51.48
Beh-Cog (RTC)	M	266.90	192.11	172.60	177.00
	SD	43.71	25.91	37.92	43.54
Cog-Beh (RCC)	M	260.78	222.56	177.44	165.50
	SD	46.97	38.68	28.00	30.75

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

		Dimensions of Anger Reactions			
Treatment Condition		Pre	Int	Post	Followup
Cog-Beh (RTC)	M	28.67	15.75	14.11	10.83
	SD	14.60	13.45	9.73	8.09
Beh-Cog (RCC)	M	28.22	19.67	19.00	13.83
	SD	4.02	9.75	12.75	9.99
Beh-Cog (RTC)	M	27.80	16.78	14.50	15.60
	SD	12.00	4.35	8.77	9.86
Cog-Beh (RCC)	M	22.00	17.44	15.67	15.00
	SD	9.68	6.99	9.92	3.37

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Law Courts and Police

Treatment Condition		Pre	Int	Post	Followup
Cog-Beh (RTC)	M	78.33	86.38	91.89	92.83
	SD	20.86	20.62	19.64	20.42
Beh-Cog (RCC)	M	66.11	75.22	74.44	88.83
	SD	16.34	18.05	24.25	15.05
Beh-Cog (RTC)	M	83.50	99.11	101.20	97.40
	SD	16.73	18.19	18.40	17.54
Cog-Beh (RCC)	M	73.89	86.33	86.11	77.25
	SD	12.54	8.63	9.70	10.72

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Tolerance for Law Violation

Treatment Condition		Pre	Int	Post	Followup
Cog-Beh (RTC)	M	26.33	26.00	23.00	21.17
	SD	9.46	8.73	7.12	7.08
Beh-Cog (RCC)	M	35.78	28.89	31.89	23.17
	SD	7.05	6.66	9.64	6.11
Beh-Cog (RTC)	M	28.60	21.33	20.40	22.20
	SD	6.08	7.62	7.68	11.12
Cog-Beh (RCC)	M	33.56	28.44	27.78	29.75
	SD	7.28	7.70	5.87	6.85

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Identification with Criminal Others

Treatment Condition		Pre	Int	Post	Followup
Cog-Beh (RTC)	M	17.22	14.75	15.11	14.83
	SD	3.07	3.62	3.10	3.06
Beh-Cog (RCC)	M	20.11	18.56	18.22	16.33
	SD	4.01	4.03	5.43	2.94
Beh-Cog (RTC)	M	18.20	18.56	16.90	15.20
	SD	4.78	4.80	4.56	4.21
Cog-Beh (RCC)	M	20.89	16.67	16.78	17.25
	SD	2.85	1.80	2.17	1.26

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Self-Reported Anger Ratings on Scene A of the Role-Played Provocations Test

Treatment Condition		Pre	Int	Post	Post (Gen)
Cog-Beh (RTC)	M	33.11	16.89	11.78	13.89
	SD	13.77	9.44	3.80	9.50
Beh-Cog (RCC)	M	34.44	22.89	18.44	21.33
	SD	11.63	9.61	10.15	10.81
Beh-Cog (RTC)	M	29.90	16.44	11.40	16.50
	SD	14.84	8.11	4.60	8.30
Cog-Beh (RCC)	M	35.33	26.11	17.00	21.78
	SD	13.24	6.47	6.42	8.01

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Self-Reported Anger Ratings on Scene B of the Role-Played Provocations Test

Treatment Condition		Pre	Int	Post	Post (Gen)
Cog-Beh (RTC)	M	26.67	14.78	10.56	10.11
	SD	12.00	10.37	4.53	4.23
Beh-Cog (RCC)	M	27.44	17.11	13.89	18.67
	SD	7.92	8.48	4.51	10.43
Beh-Cog (RTC)	M	23.10	13.11	10.30	11.70
	SD	14.07	6.21	5.01	5.48
Cog-Beh (RCC)	M	26.89	16.22	10.56	16.22
	SD	11.54	6.10	2.83	6.32

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Behavioral Anger Ratings on Scene A of the Role-Played Provocations Test

Treatment Condition		Pre	Int	Post	Post (Gen)
Cog-Beh (RTC)	M	4.21	1.97	2.09	1.49
	SD	1.46	.96	.77	.63
Beh-Cog (RCC)	M	3.91	2.90	2.29	2.04
	SD	1.77	1.56	.92	1.43
Beh-Cog (RTC)	M	3.84	2.53	2.14	2.08
	SD	1.23	1.15	.10	.75
Cog-Beh (RCC)	M	2.99	2.49	2.04	2.07
	SD	1.64	.55	.77	.82

Table 5 (cont.)

Means and Standard Deviations of the Raw Scores for Each Dependent Measure by Treatment Condition and Assessment Occasion

Behavioral Anger Ratings on Scene B of the Role-Played Provocations Test

Treatment Condition		Pre	Int	Post	Post (Gen)
Cog-Beh (RTC)	M	1.94	1.37	1.31	1.06
	SD	.95	.76	.40	.18
Beh-Cog (RCC)	M	1.85	1.28	1.00	1.45
	SD	.66	.54	.00	.43
Beh-Cog (RTC)	M	1.91	1.21	1.18	1.23
	SD	.76	.24	.24	.28
Cog-Beh (RCC)	M	2.07	1.33	1.14	1.69
	SD	.58	.31	.18	.84

Table 6

Five week test-retest reliabilities for the Anger Inventory, Dimensions of Anger Reactions, Measures of Criminal Sentiments, and Self-Reported Anger and Behavioral Ratings of Anger on the Provocations Tests.

Anger Inventory	.6972
Dimensions of Anger Reactions	.7275
Law Courts and Police	.7098
Tolerance for Law Violation	.7706
Identification with Criminal Others	.3804
Self-Report Provocations (Scene A)	.4319
Self-Report Provocations (Scene B)	-.0090
Behavioral Rating Provocations (Scene A)	.6020
Behavioral Rating Provocations (Scene B)	.5821

Similarly, the psychometric scales, the anger scales (.70 & .73), and two scales (Law Courts and Police and Tolerance for Law Violation) of the Criminal Sentiments Scale (.71 & .77), were acceptable. However, the Identification with Criminal Others subscale which has fewer items (6) had the lowest test-retest reliability of all the psychometric scales (.38).

A correlation matrix of pretreatment dependent measures scores is presented in Table 7. Correlations between the two self-report Anger measures (AI & DAR) were statistically significant. The self-report Anger measures were not significantly correlated to the Criminal Sentiments Scales. The three scales of the Criminal Sentiments Scale were significantly inter-related. The two psychometric self-report Anger measures were not significantly correlated with either the self-report or the behavioral ratings following the role-played provocations with the exception of AI and SRA. The three scales of the Criminal Sentiments Scale were not significantly correlated with any of the self-report or behavioral measures. Correlations between self-report and behavioral measures following the role

Table 7

Correlation Matrix for Dependent Measures at PreTest

	AI	DAR	LCP	TLV	ICO	SRA	SRB	BRA	BRB	BRT
AI	----	+.45*	-.26	+.18	+.12	+.53*	+.28	+.40	+.09	+.35
DAR		----	-.25	+.10	+.13	+.26	+.37	+.32	-.03	+.23
LCP			----	-.83**	-.65**	-.19	-.18	-.20	+.26	-.07
TLV				----	+.65**	+.15	+.15	+.13	-.10	+.06
ICO					----	+.01	+.03	+.09	-.27	-.03
SRA						----	+.61**	+.63**	+.52**	+.68**
SRB							----	+.30	+.37	+.37
BRA								----	+.52*	+.95**
BRB									----	+.75**

AI Anger Inventory
DAR Dimensions of Anger Response
LCP Criminal Sentiments Scale: Law, Courts, & Police
TLV Criminal Sentiments Scale: Tolerance for Law Violations
ICO Criminal Sentiments Scale: Identification with Criminal Others
SRA Self-Reported Anger, Scene A
SRB Self-Reported Anger, Scene B
BRA Behavioural Anger Rating, Scene A
BRB Behavioural Anger Rating, Scene B
BRT Behavioural Anger Rating, Scene A & B

* $p<.05$
** $p<.01$

played provocations were generally high, though not significant for the inmate-staff scenario.

In addition, independent t-tests were performed, collapsing across Order, in order to ascertain whether or not there were any differences between Correctional Centre residents and Treatment Centre residents on any of the dependent measures prior to treatment. With regard to the social, legal, and demographic variables no significant differences were found on age, employment, occupational group, socioeconomic status,type of offence, offence severity, total current and past criminal offenses against person and property, remand, aggregate sentence,time served prior to admission to Rideau, time served in the community, total amount of time served on sentence, mode of discharge during and after the two month follow-up, number of previous incarcerations, and number of previous times placed on probation. However, RTC residents had significantly more dependents than RCC residents, $t(35) = 2.12$, $p<.05$, significantly less education, $t(35) = -2.58$, $p<.05$, and they tended to have left school at an earlier age, $t(35) = -1.87$, $p =$

.07. Differences between Institutions on amount of time served prior to and following program completion at Rideau approached statistical significance, $\underline{t}(35) = -1.93$, $\underline{p} = .06$, and $\underline{t}(35) = -1.74$, $\underline{p} = .09$, respectively. In addition, significant differences were found between Institutions on total amount of time served prior to discharge from the institution, $\underline{t}(35) = -3.12$, $\underline{p}<.01$, with Treatment Centre residents being released earlier than the Correctional Centre residents.

An investigation of the psychometric measures revealed no significant differences between Institutions on any of the anger measures at pretest (i.e., Anger Inventory, Dimensions of Anger Reactions, Self-Report Scales, and Objective Behavioral Ratings). In a similar vein, no significant differences were found between Treatment Centre and Correctional Centre residents on the total number of Disciplinary Infractions (misconducts) and on Notices of Outstanding Performance ("brownies"). However, significant differences were found between the two Institutions on Notices of Unsatisfactory Performance ("speeders"),

$t(35) = -2.05$, $p<.05$, with Correctional Centre residents receiving more unsatisfactory ratings than Treatment Centre residents prior to treatment. Furthermore, significant differences were found between the two Institutions on all three subscales of the Criminal Sentiments Scale (Law, Courts, and Police, $t(37) = 2.21$, $p<.05$; Tolerance for Law Violation, $t(37) = -3.23$ $p<.01$; Identification with Criminal Others, $t(37)=-2.29$, $p<.05$) suggesting that Treatment Centre residents were more prosocial in their attitudes than Correctional Centre residents prior to treatment.

The role-played provocation measure consisted of two subtests serving as direct and generalization measure. Each subtest contained two scenes an Inmate-Inmate Scenario (Scene A) and an Inmate-Staff Scenario (Scene B). The participants received one set prior to treatment and at interim test, and both sets after treatment. Subjects were asked to give five or six role-played verbal responses at various times during each scenario. Two judges blind to experimental procedures independently rated a total of 3404 responses on a 7-point scale. Prior to scoring the

data of this study, each judge was required to have achieved 95% agreement with the investigator for ten consecutive scenes (55 responses). The interrater agreement between the judges was first calculated by correlating the two ratings for each response made by the subjects. This resulted in a total of 56 correlations. These correlations ranged from -.04 to 1.0 (Table 8). Subjects' average score for each scene as rated by each rater was calculated for further analyses and correlations were calculated between raters. These correlations ranged from .53 to .81. The average scores between the two raters for each scene were used in all subsequent analyses.

Analysis of Treatment Effects

One-way ANOVAs were conducted on all pretest data to examine differences among groups on each of the measures. These comparisons were made across the six groups (four treatment groups and two delayed treatment control groups). Where no significant differences were found, the four treatment groups and two delayed treatment control groups were collapsed to form two

Table 8

Interrater reliabilities for the behavioral anger ratings in the Provocations Tests.

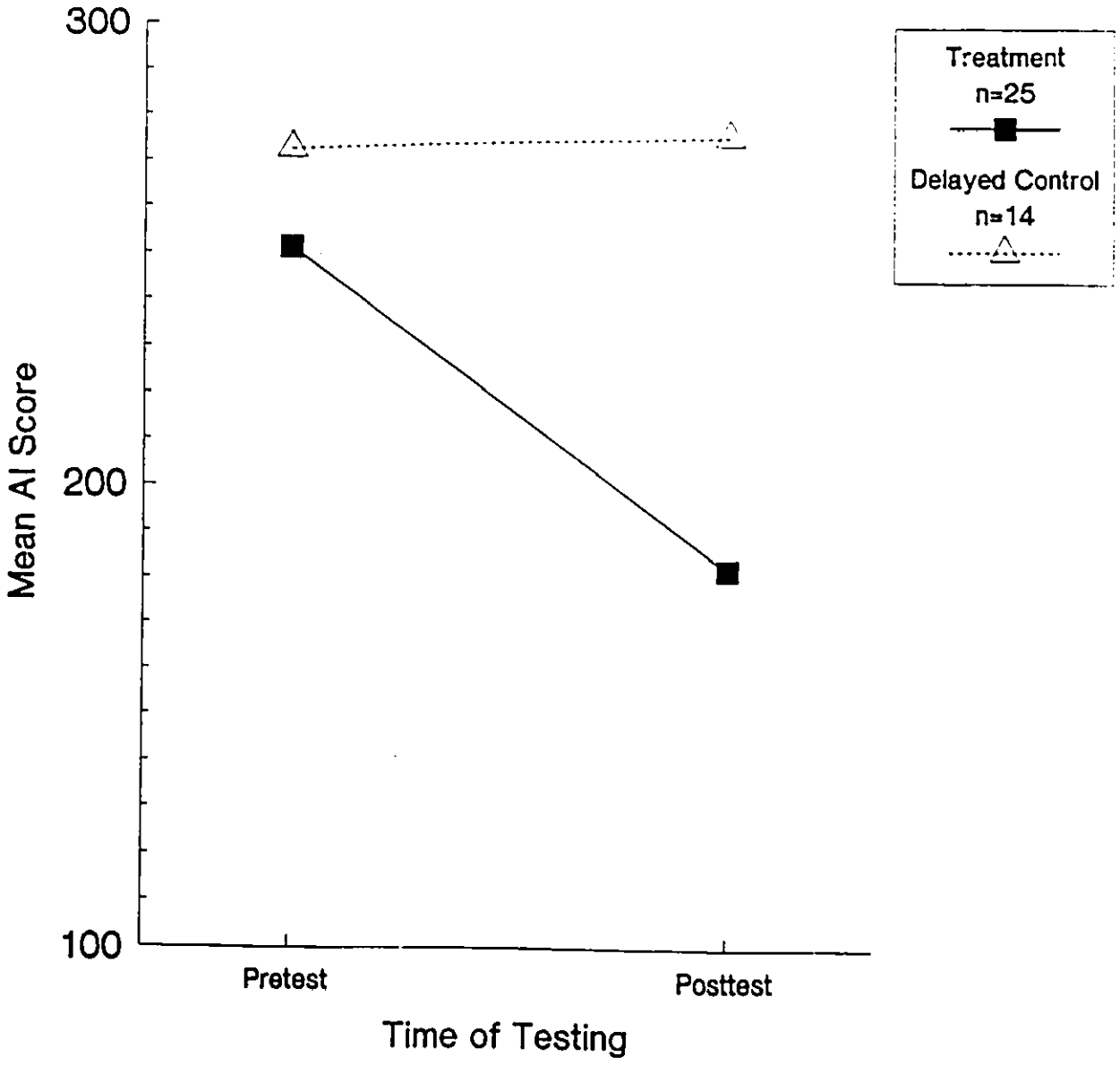
	Scene A				Scene B				Scene C	Scene D
Line	P0	P1	Int	Post	P0	P1	Int	Post	Post	Post
1	.26	.75	.32	.59	.52	.28	.39	.47	.69	--
2	.94	.85	.75	.18	.63	.69	--	--	.55	.88
3	.99	.69	.31	.38	.85	.85	.79	1.0	.68	.89
4	.73	.88	.65	.67	--	.63	.97	.70	.67	.90
5	.71	.84	.51	.63	.73	.38	.80	.89	.64	.59
6	--	--	--	--	.58	.56	-.04	1.0	.66	.58
Overall	.77	.83	.61	.55	.53	.64	.73	.81	.74	.69

groups: an experimental group and a control group. Where significant differences were found on a pretest measure analyses were employed to control for the pretreatment differences.

Effects on Anger Inventory

There were no differences between the six groups on the pretreatment scores of the Anger Inventory (AI), $F(5,33) = .52$, ns. Moreover, independent t-tests showed no differences between experimental and control groups at pretest, $t(38) = -1.57$, ns. Therefore, a 2 x 2 (Group x Time) ANOVA on the Anger Inventory scores was performed (see Figure 1). This analysis revealed a significant main effect for Time, $F(1,37) = 15.97$, $p<.001$. However, there was also a significant Group by Time interaction, $F(1,37) = 19.15$, $p<.001$. Independent t-tests demonstrated that the groups differed significantly at posttest, $t(37) = -5.50$, $p<.001$. Furthermore, paired t-tests indicated that the AI scores significantly decreased for the experimental group over time, $t(24) = 6.28$, $p<.001$, while there was no change over time prior to treatment in the delayed treatment control group, $t(13) = -.32$, ns. These

Figure 1. Mean Anger Inventory scores for treatment and delayed treatment control groups.

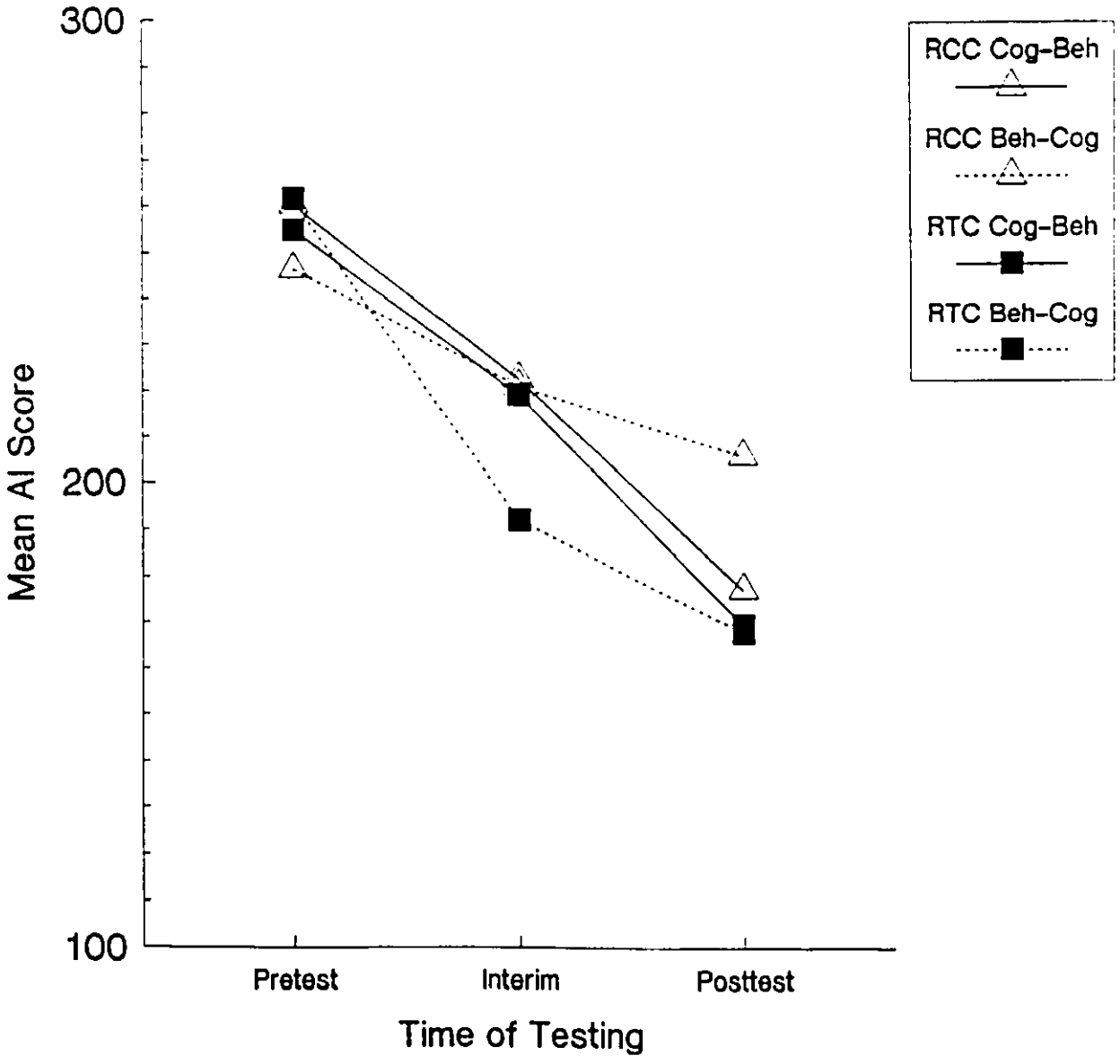


Anger Inventory

results indicate that subjects who participated in the anger management group self-reported less provocation in a set of hypothetical situations following their participation in the program in comparison to their self-reports prior to the program.

Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the Anger Inventory responses yielded a significant main effect for Time, ($F(2,64) = 38.45$, $p<.001$ (Figure 2). Individual comparisons revealed that the Anger Inventory scores were significantly higher at pretest than at either of the other two testing periods (pretest vs. interim test, $t(35) = 4.28$, $p<.001$; pretest vs. posttest, $t(36) = 8.69$, $p<.001$. Moreover, there was a significant decrease in AI scores from interim test to posttest, $t(35) = 4.62$ $p<.001$. Thus, results indicate that all subjects self-reported less anger after exposure to either the cognitive or the behavioral component, and further decreases in self-reported anger following the remaining components. There were no differences between Correctional Centre and Treatment Centre groups and no significant effects of order of treatment

Figure 2. Mean pretest, interim test, and posttest Anger Inventory scores for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Anger Inventory

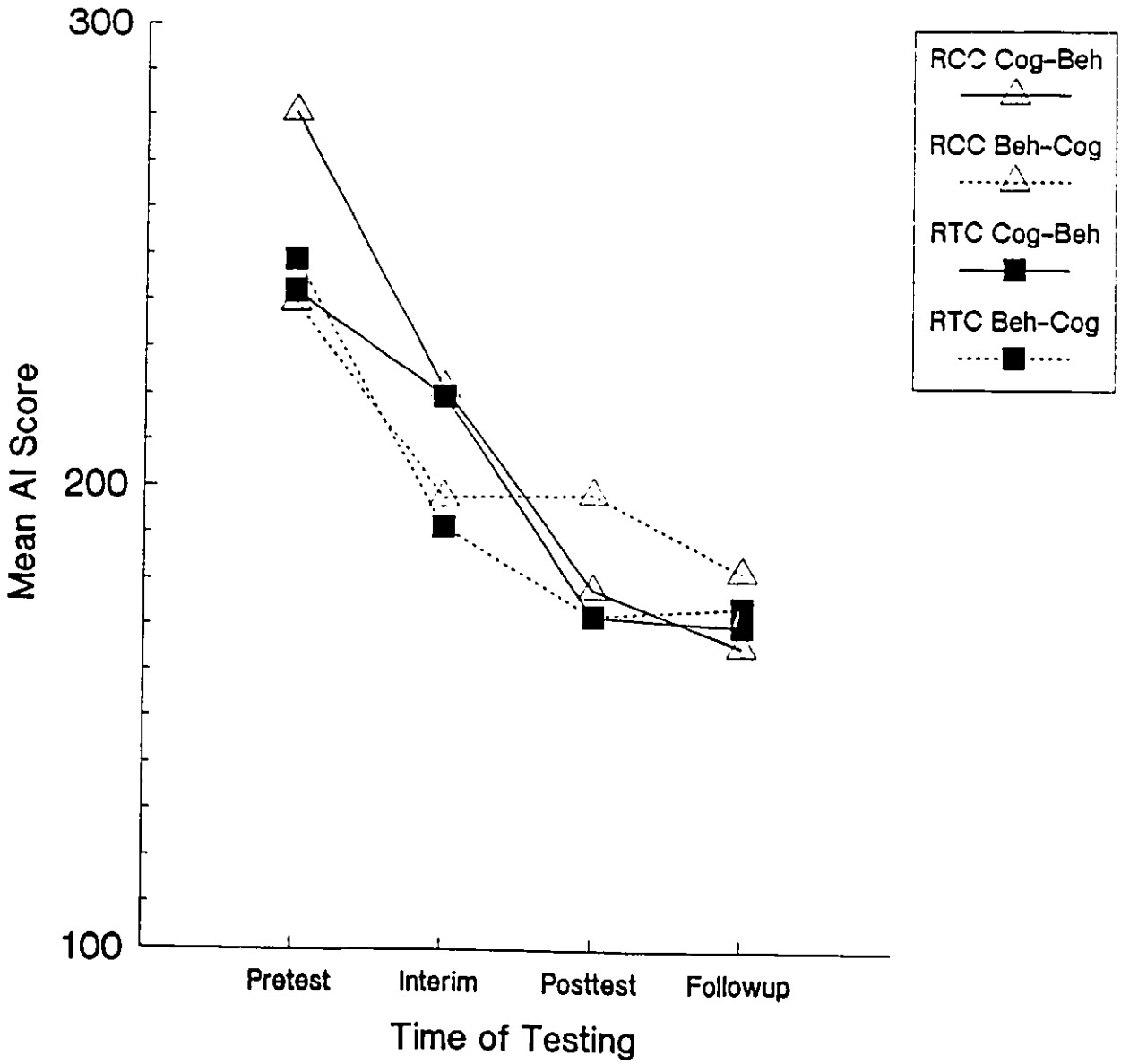
components.

Followup. The previous analyses were repeated using the followup data for the 20 subjects who were still accessible eight weeks following treatment. A 2 x 2 x 4 (Institution x Order x Time) ANOVA of the Anger Inventory scores indicated a significant main effect for Time, $F(3,48) = 35.34$, $p<.001$ (Figure 3). Individual comparisons revealed significant differences between pretest and followup, $t(20) = 7.64$, $p<.001$, and between interim test and followup, $t(19) = 4.85$, $p<.001$. However, there was no significant change on Anger Inventory scores from posttest to followup, $t(20) = 1.38$, ns., indicating that the treatment effect, i.e., reduced anger in provocation situations, was maintained for at least two months following termination of the program.

Effects on Dimensions of Anger Reactions

There were no differences among the four experimental and two delayed treatment groups at pretest on the Dimensions of Anger Reactions (DAR), $F(5,33) = .65$, ns. The experimental and control groups

Figure 3. Mean pretest, interim test, posttest, and followup Anger Inventory scores for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.

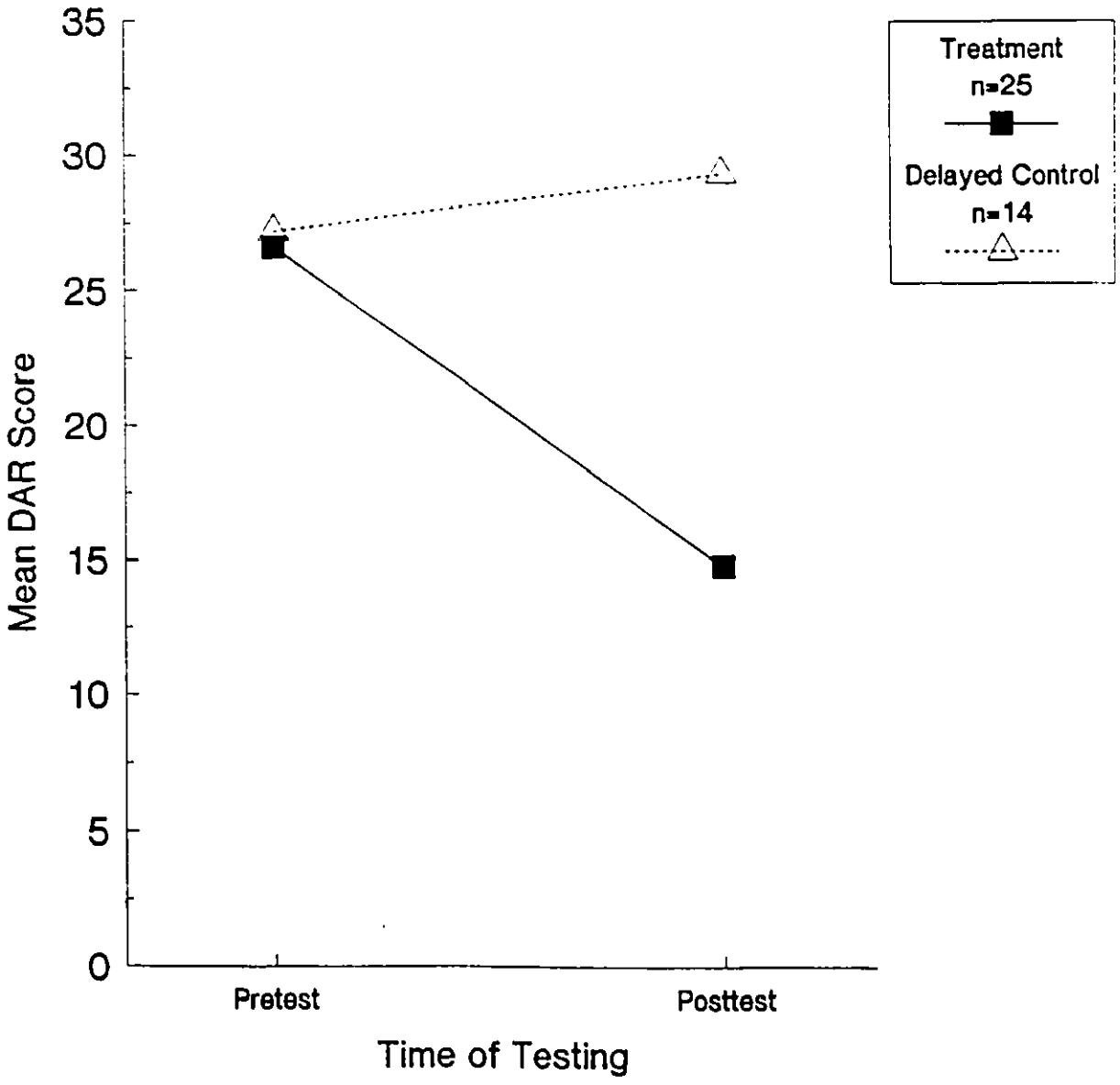


Anger Inventory

did not differ at pretest, $t(38) = -.25$ ns. Thus, a 2 x 2 (Group x Time) ANOVA on the DAR total scores was performed. This analysis revealed a significant main effect for Time, $F(1,37) = 7.77$, $p<.01$, and a significant Group by Time interaction, $F(1,37) = 16.15$, $p<.001$. The treatment and control groups differed significantly at posttest, $t(38) = -3.62$, $p<.001$. Furthermore, the experimental group evidenced a significant decrease in DAR scores, $t(24) = 5.28$, $p<.001$, while the delayed treatment control group displayed a nonsignificant increase, $t(14) = -.91$, ns (Figure 4). These results reveal that subjects in anger management treatment had lower expectancies and/or appraisals of provocative situations following the intervention.

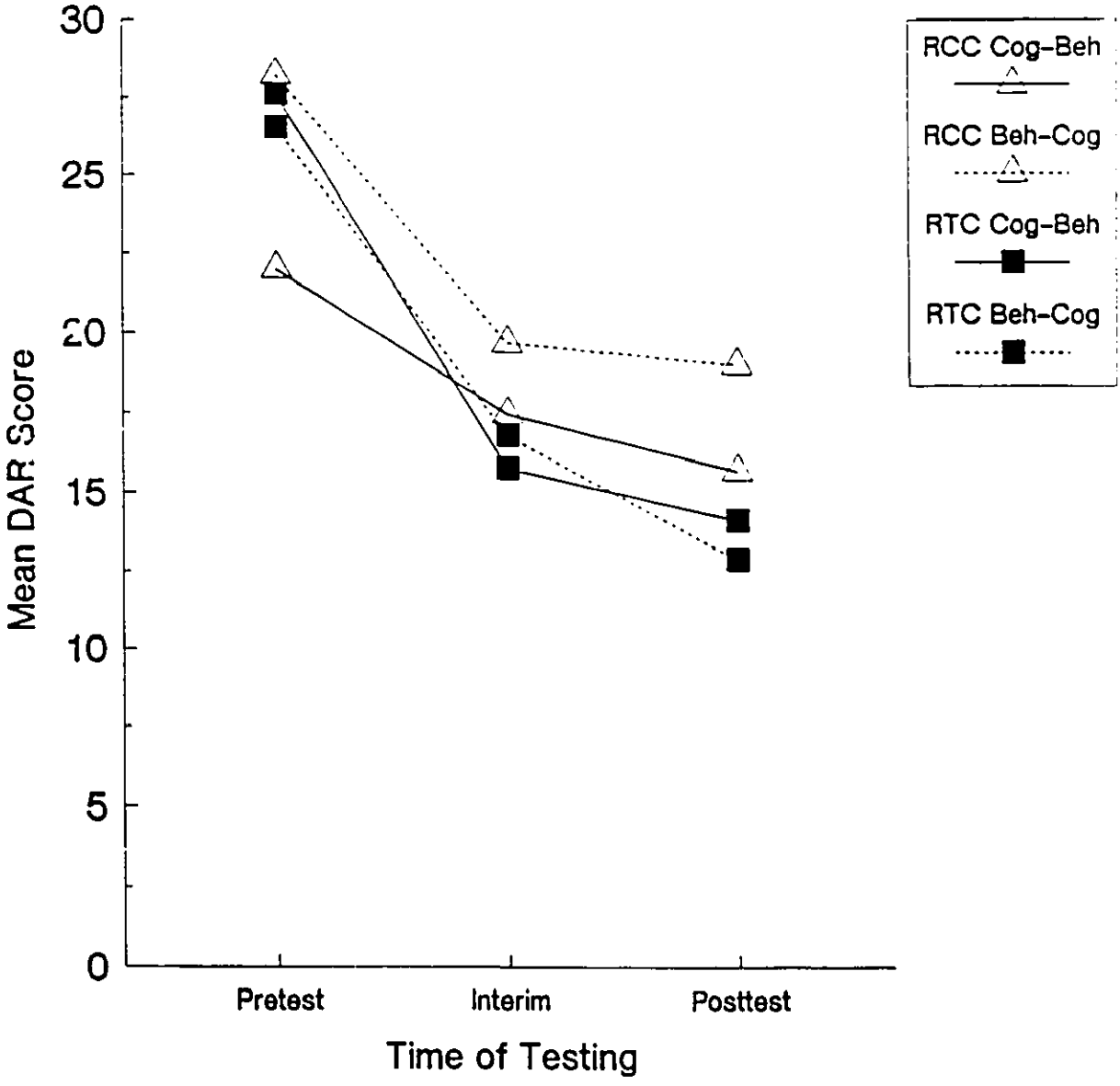
Posttreatment The 2 x 2 x 3 (Institution x Order x Time) ANOVA on the DAR scores showed only a significant main effect for Time, $F(2,62) = 19.14$, $p<.001$ (Figure 5). Individual comparisons revealed that all groups improved during the first phase of treatment (pretest vs. interim test, $t(34) = 4.72$, $p<.001$) and these gains were maintained at posttest

Figure 4. Mean Dimensions of Anger Reactions scores for treatment and delayed treatment control groups.



Dimensions of Anger Reactions

Figure 5. Mean pretest, interim test, and posttest Dimensions of Anger Response scores for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Dimensions of Anger Reactions

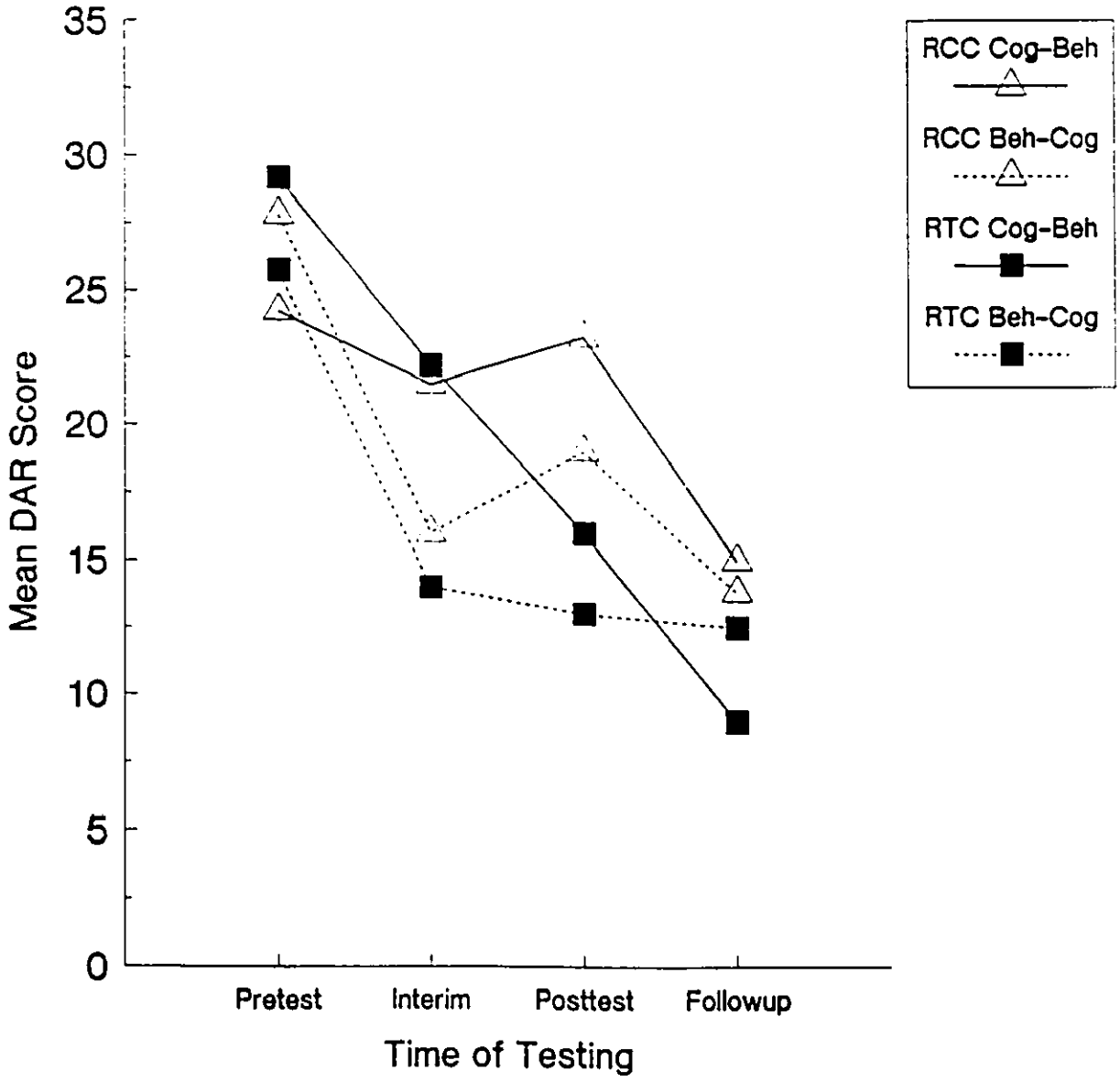
(pretest vs. posttest, $t(36) = 5.74$, $p<.001$). There was no further improvement during the second phase (interim test vs. posttest $t(34) = 1.31$, ns.). There were no Institution or Order effects or interactions in this analysis.

Followup. The 2 x 2 x 4 (Institution x Order x Time) ANOVA yielded a significant main effect for Time, $F(3,45) = 11.79$, $p<.001$ (Figure 6). Individual comparisons revealed significant improvements from pretest to followup, $t(20) = 6.41$, $p<.001$, and from interim test to followup, $t(18) = 3.12$, $p<.01$, while the improvement from posttest to followup approached significance, $t(20) = 2.02$, $p = .06$. The results show that treatment gains were maintained and may have continued to accumulate for at least two months following termination of treatment.

Effects on Measures of Criminal Sentiments

Law Courts and Police. There were no pretreatment group differences on the Law Courts and Police Scale (LCP), $F(5,33) = 1.34$, ns. Independent t-tests revealed that the experimental and control groups did

Figure 6. Mean pretest, interim test, posttest, and followup Dimensions of Anger Response scores for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.

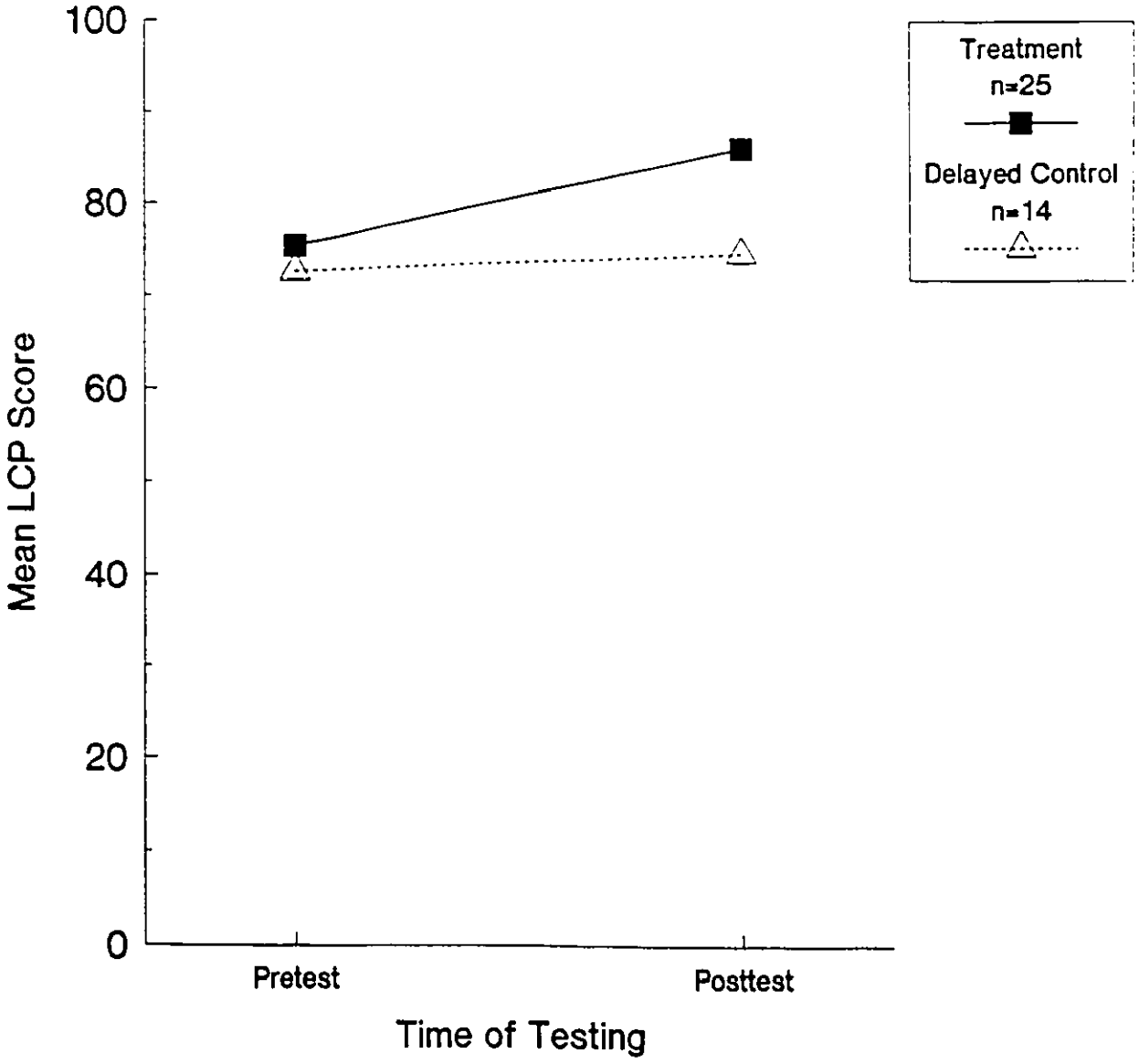


Dimensions of Anger Reactions

not differ at pretest, $t(38) = .67$, ns. Therefore, a 2 x 2 (Group x Time) ANOVA of the LCP scores was performed. This analysis yielded a significant Time effect, $F(1,37) = 10.42$, $p<.01$, and a significant Group by Time interaction, $F(1,37) = 10.42$ $p<.01$ (Figure 7). Independent t-tests revealed that at posttest, there was a nonsignificant trend in the expected direction suggesting that the experimental group differed from the control group, $t(37) = 1.69$, $p = .10$. Comparisons within groups revealed that attitudes towards the law, courts and police changed significantly in the prosocial direction following program completion, $t(24) = -4.61$ $p<.001$, while attitudes in the delayed treatment control group did not change, $t(13) = -.61$, ns.

Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA showed a significant main effect for Time, $F(2,62) = 30.69$, $p<.001$. Pretest scores were significantly different from scores at either of the other two testing periods (pretest vs. interim test, $t(34) = -6.27$, $p<.001$; pretest vs. posttest, $t(36) = -6.78$, $p<.001$. However, there were no changes from

Figure 7. Mean Law Courts & Police scores on the Criminal Sentiments Scale for treatment and delayed treatment control groups.



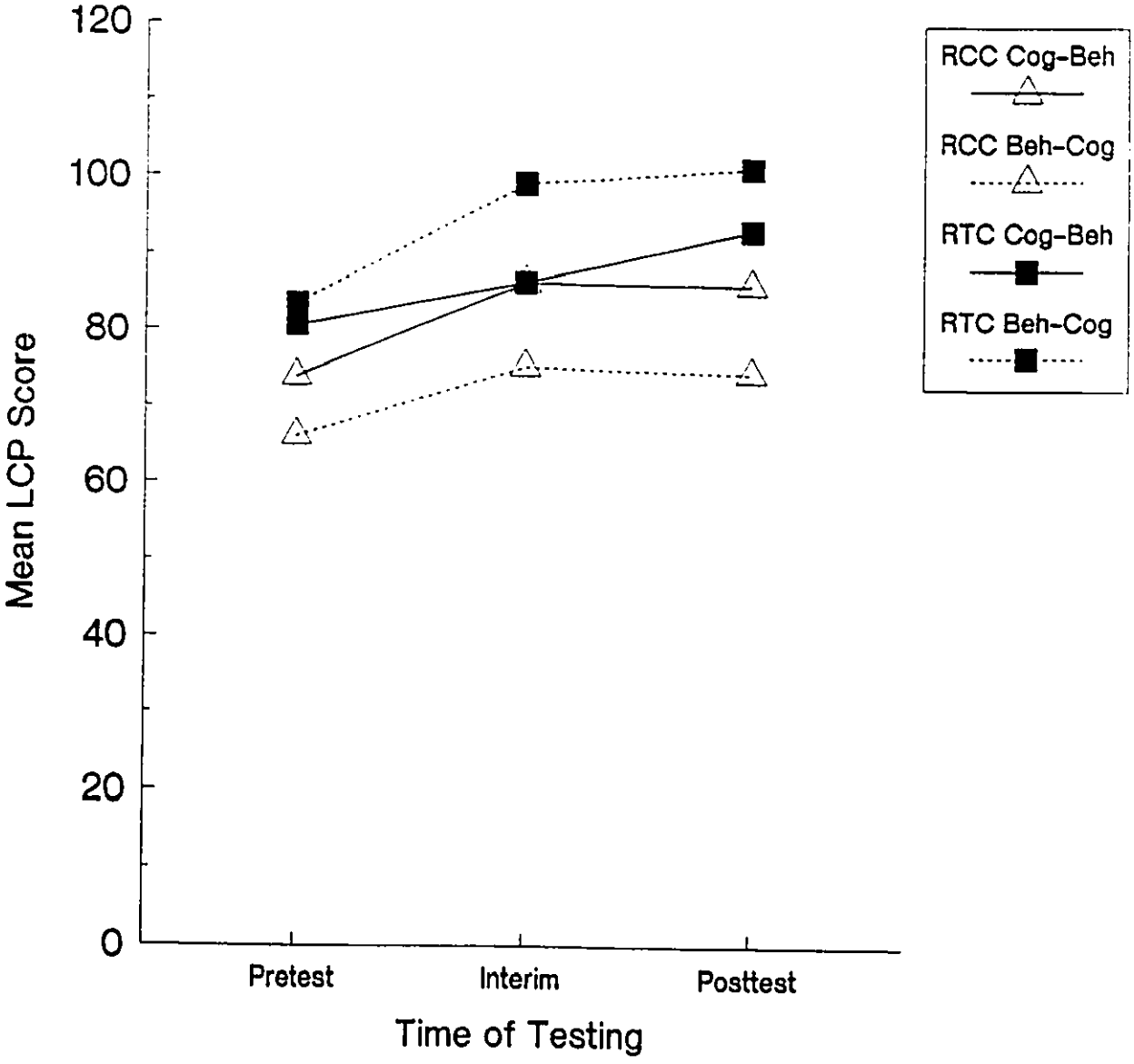
Criminal Sentiments Scale
Law Courts & Police

interim to posttest, $t(34) = -1.24$, ns. No other Order or Institution effects or interactions were statistically significant (Figure 8).

Followup. A 2 x 2 x 4 (Institution x Order x Time) ANOVA yielded a significant main effect for Time, $F(3,45) = 13.72$, $p<.001$ (Figure 9). Individual comparisons revealed a significant improvement from pretest to followup, $t(20) = -5.31$, $p<.001$. However, no significant differences were found between interim test and followup, $t(18) = -.62$, ns., or between posttest and followup, $t(20) = .61$, ns.

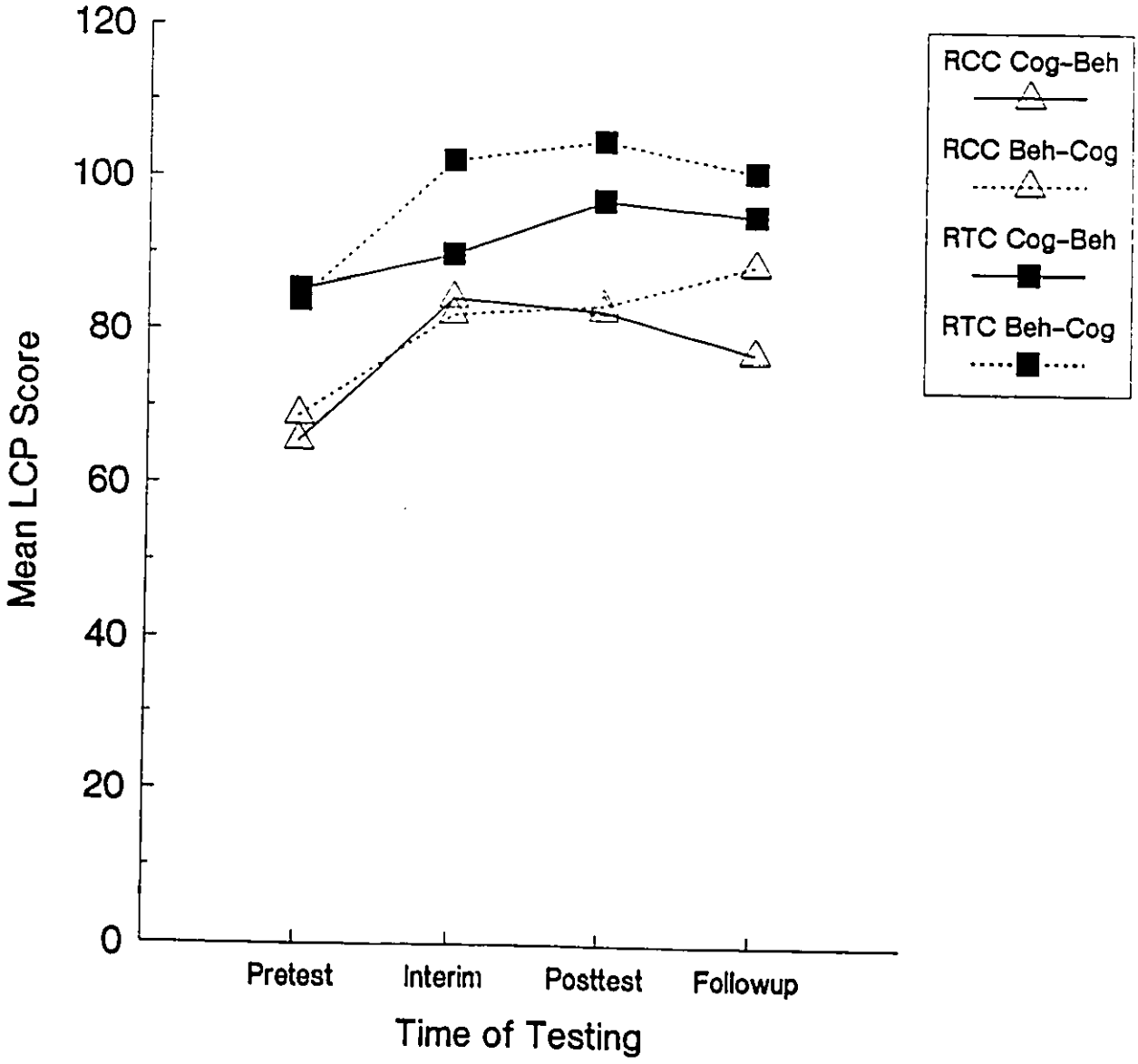
Tolerance for Law Violation. A one-way ANOVA revealed that there were significant differences at pretest among the six groups on TLV, $F(5,33) = 2.79$, $p<.05$. However, independent t-tests revealed that there were no significant differences between the experimental and control groups at pretest, $t(38) = -.62$, ns. Thus, a 2 x 2 (Group x Time) ANOVA was performed. This analysis demonstrated no significant main effect for Time, $F(1,37) = 1,14$, ns., but did demonstrate a significant Group by Time interaction,

Figure 8. Mean pretest, interim test, and posttest Law Courts & Police scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Criminal Sentiments Scale
Law Courts & Police

Figure 9. Mean pretest, interim test, posttest, and followup Law Courts & Police scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.

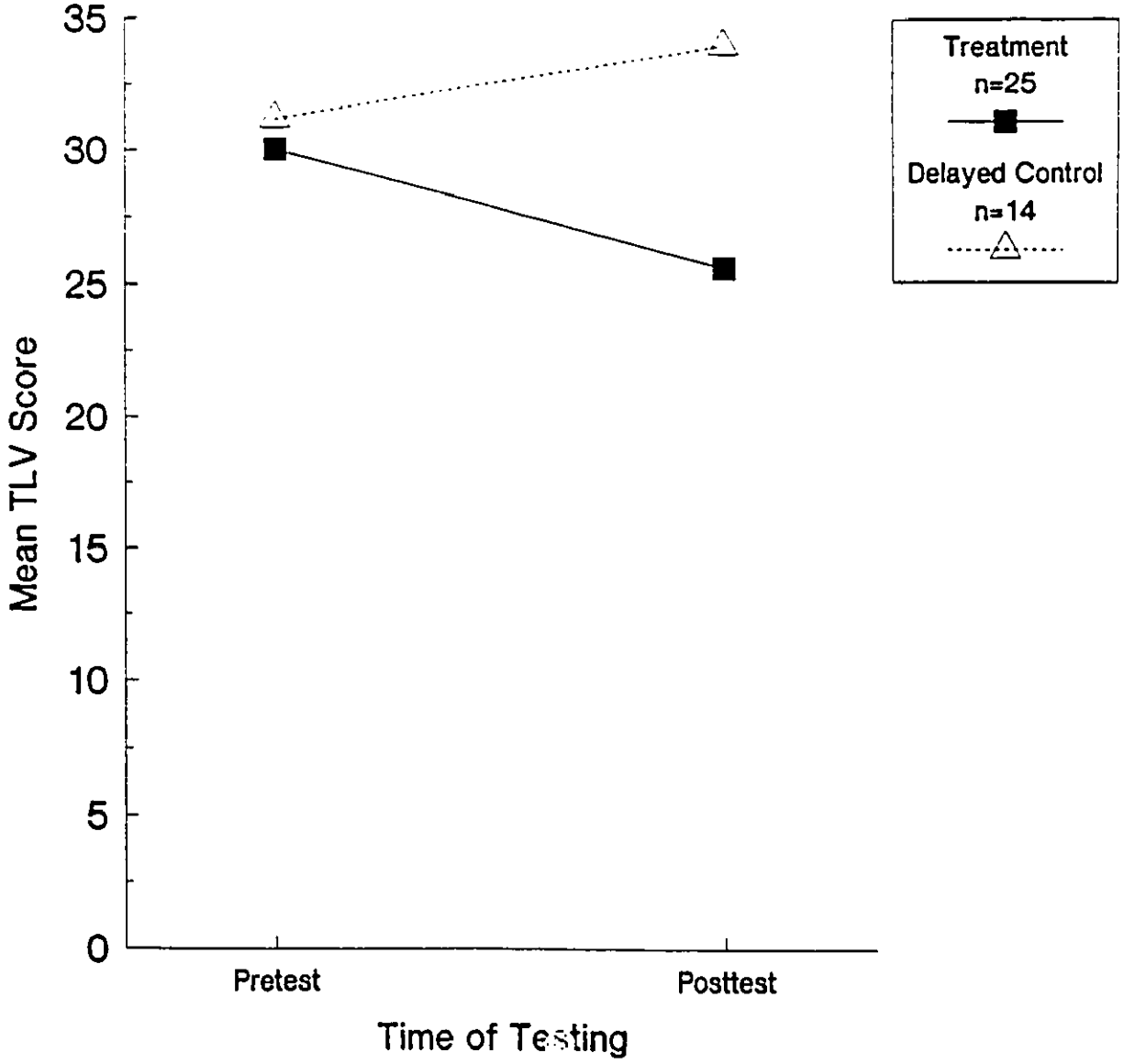


Criminal Sentiments Scale
Law Courts & Police

$F(1,37) = 22.25$, $p<.001$ (Figure 10). Individual comparisons revealed that the groups differed significantly at posttest, $t(37) = -2.94$, $p<.01$. Moreover, paired t-tests indicated that the TLV scores decreased significantly for the experimental group over Time $t(24) = 5.06$, $p<.001$, while there was a significant increase over in the delayed treatment control group, $t(13) = -2.15$, $p<.05$. These results indicate that tolerance for law violation changed significantly in the prosocial direction following program completion, while subjects who did not receive treatment increased there tolerance for law violation.

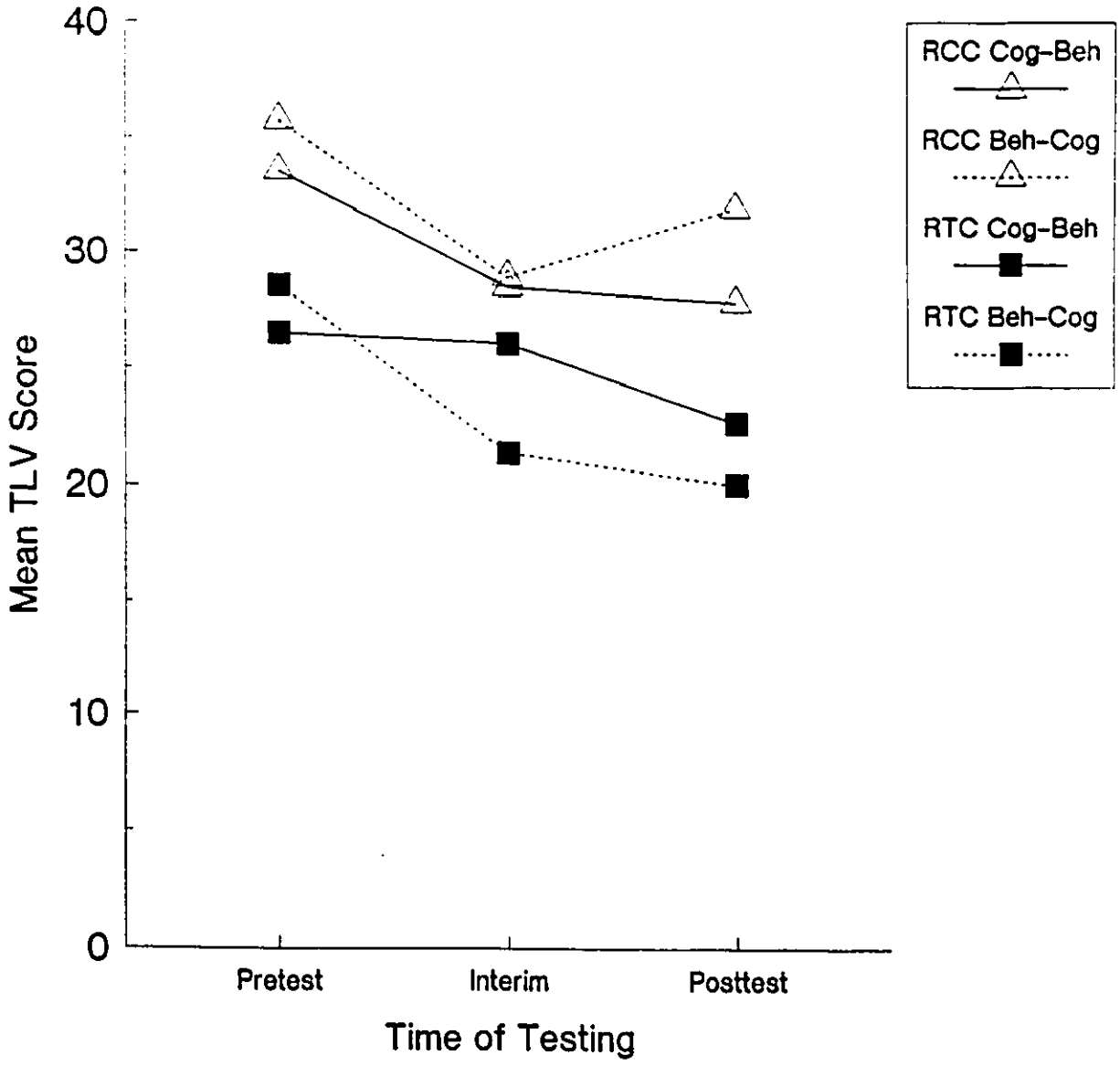
Posttreatment. 2 x 3 ANOVAs on Treatment Centre and Correctional Centre residents scores on TLV produced significant main effects for Time, $F(2,30) = 13.72$, $p<.001$, and, $F(2,32) = 15.36$, $p<.001$, respectively (Figure 11). In addition, there was a significant order by time interaction for Treatment Centre residents, $F(2,30) = 4.14$, $p<.05$. When paired t- test comparisons were conducted a different pattern of results emerged between the two institutions. Treatment Centre residents improved following both

Figure 10. Mean Tolerance for Law Violations scores on the Criminal Sentiments Scale for treatment and delayed treatment control groups.



Criminal Sentiments Scale
Tolerance for Law Violations

Figure 11. Mean pretest, interim test, and posttest Tolerance for Law Violations scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.

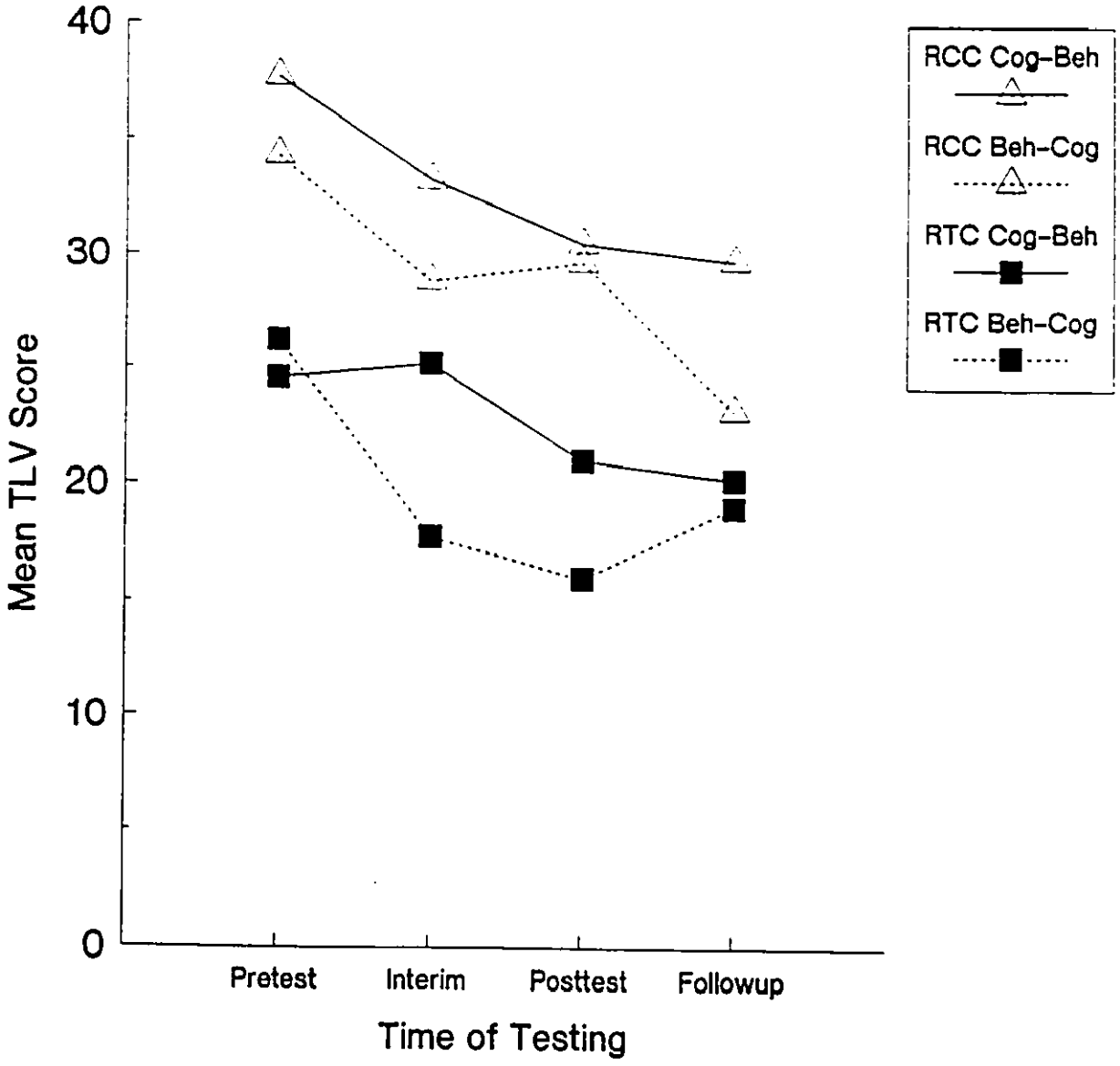


Criminal Sentiments Scale
Tolerance for Law Violations

phases of treatment (pretest vs. interim test, $t(16) = 2.80$, $p<.05$; interim test vs. posttest, $t(16) = 2.32$, $p<.05$; and, pretest vs. posttest, $t(18) = 4.41$, $p<.001$). Correctional Centre residents improved during the first phase of treatment (pretest vs. interim test, $t(17) = 5.53$, $p<.001$) and these gains were maintained at posttest, $t(17) = 4.58$, $p<.001$). However, there were no further improvements during the second phase (interim test vs. posttest, $t(17) = -.89$, ns.).

Followup. 2 x 2 x 4 (Institution x Order x Time) ANOVAs on Treatment Centre and Correctional Centre residents scores on TLV yielded significant main effects for Time, $F(3,21) = 3.27$, $p<.05$, and, $F(3,24) = 8.92$, $p<.001$, respectively (Figure 12). However, a different pattern of results emerged between the two Institutions when paired t-test comparisons were conducted. With regard to the Treatment centre residents scores, there were no significant improvements from pretest to followup, $t(10) = 1.39$, ns., from interim test to followup, $t(8) = .83$, ns., and from posttest to followup, $t(10) = -1.08$, ns. In contrast, analyses of the Correctional Centre residents

Figure 12. Mean pretest, interim test, posttest, and followup Tolerance for Law Violations scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



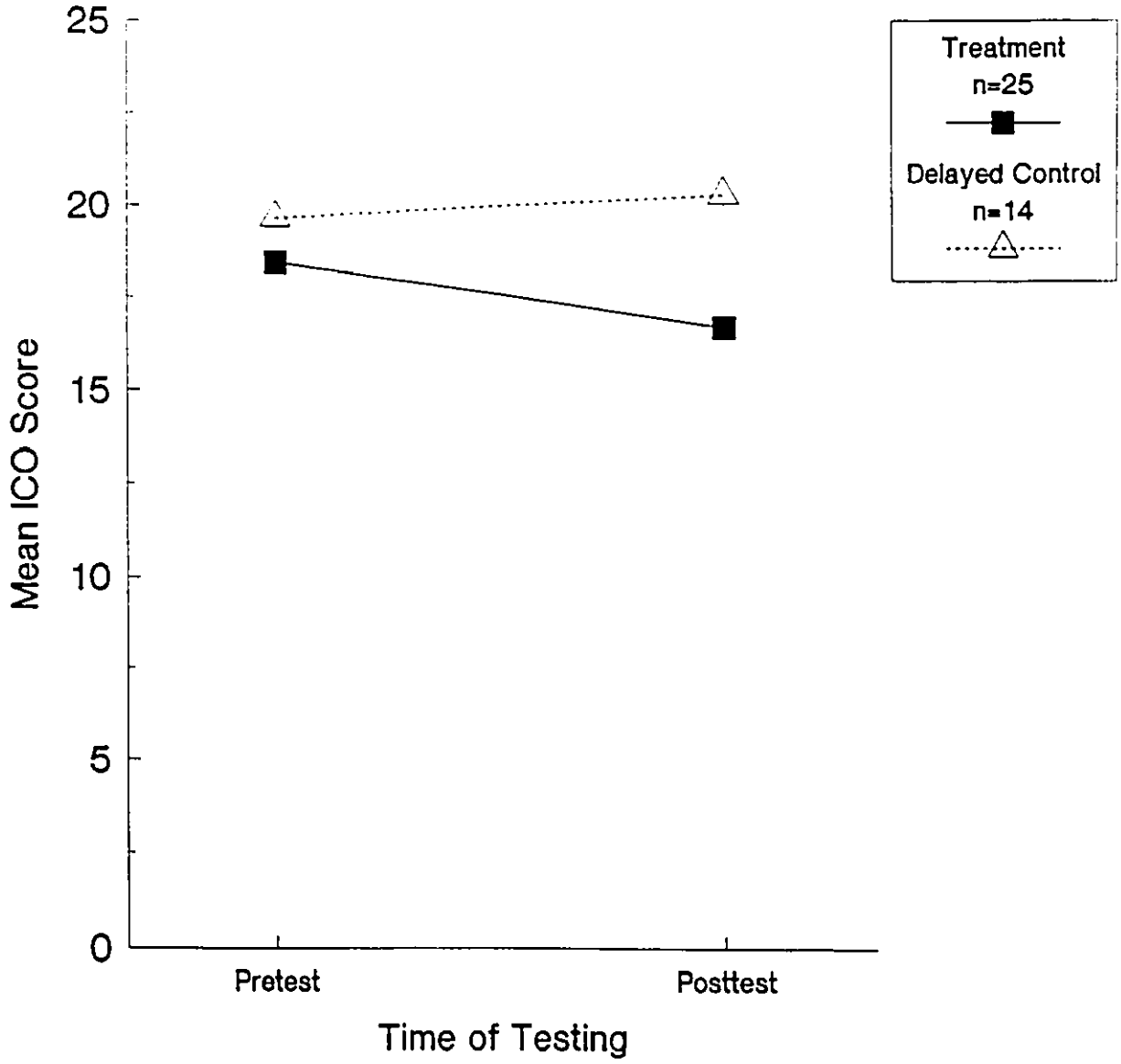
Criminal Sentiments Scale
Tolerance for Law Violations

scores revealed that subjects improved from pretest to followup, $t(9) = 4.89$, $p<.001$, and from interim test to followup, $t(9) = 2.24$, $p<.05$. In addition, there was a nonsignificant trend suggesting improvement from posttest to followup, $t(9) = 1.84$, $p = .10$.

Identification with Criminal Others. There were no pretreatment differences among the six groups, $F(5,33) = 1.72$, ns. The experimental and control groups did not differ at pretest, $t(38) = -.88$, ns. A 2 x 2 (Group x Time) ANOVA of the ICO scores yielded only a nonsignificant Group by Time interaction, $F(1,37) = 25.91$, $p = .06$ (Figure 13). Independent t-tests indicated that the groups differed at posttest, $t(37) = -2.72$, $p<.01$. This reflects a significant decrease over time in the experimental group, $t(24) = 2.52$, $p<.05$, with no such trend in the delayed treatment control group, $t(13) = -.60$, ns.

Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA indicated a significant main effect for Time, $F(2,62) = 9.63$, $p<.001$. The analysis also showed a significant interaction for Order by Time,

Figure 13. Mean Identification with Criminal Others scores on the Criminal Sentiments Scale for treatment and delayed treatment control groups.

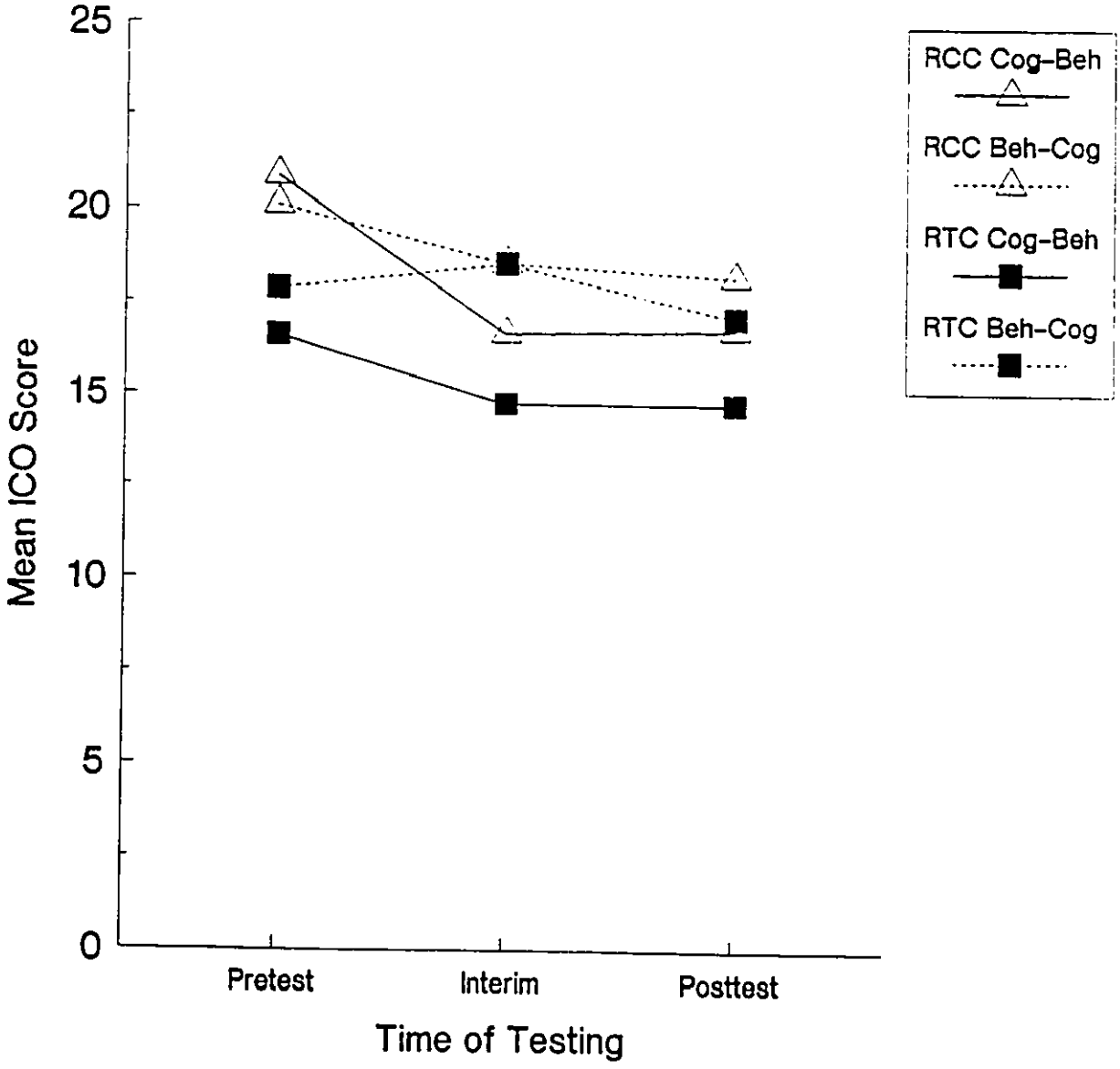


Criminal Sentiments Scale
Identification with Criminal Others

$F(2,62) = 3.18$, $p<.05$ (Figure 14). Consequently, changes over time were examined separately for each sequence. For the cognitive-behavioral sequence, subjects improved following the first phase of treatment (pretest vs. interim test, $t(16) = 4.20$, $p<.001$) and these gains were maintained at posttest (pretest vs. posttest, $t(17) = 4.42$, $p<.001$). However, there were no further improvements during the second phase (interim test vs. posttest, $t(16) = -.10$, ns.).

In contrast, analysis of the behavioral-cognitive sequence revealed a different pattern of change. Pretest scores were not significantly different from scores at any of the other testing periods (pretest vs. interim test, $t(17) = .59$, ns.; interim test vs. posttest, $t(17) = 1.46$, ns.; pretest vs. posttest, $t(18) = 1.70$, ns.). Thus, while the cognitive-behavioral sequence appeared to reduce ICO following the cognitive component, the behavioral-cognitive sequence did not appear to have an influence on identification with criminal others.

Figure 14. Mean pretest, interim test, and posttest Identification with Criminal Others scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.

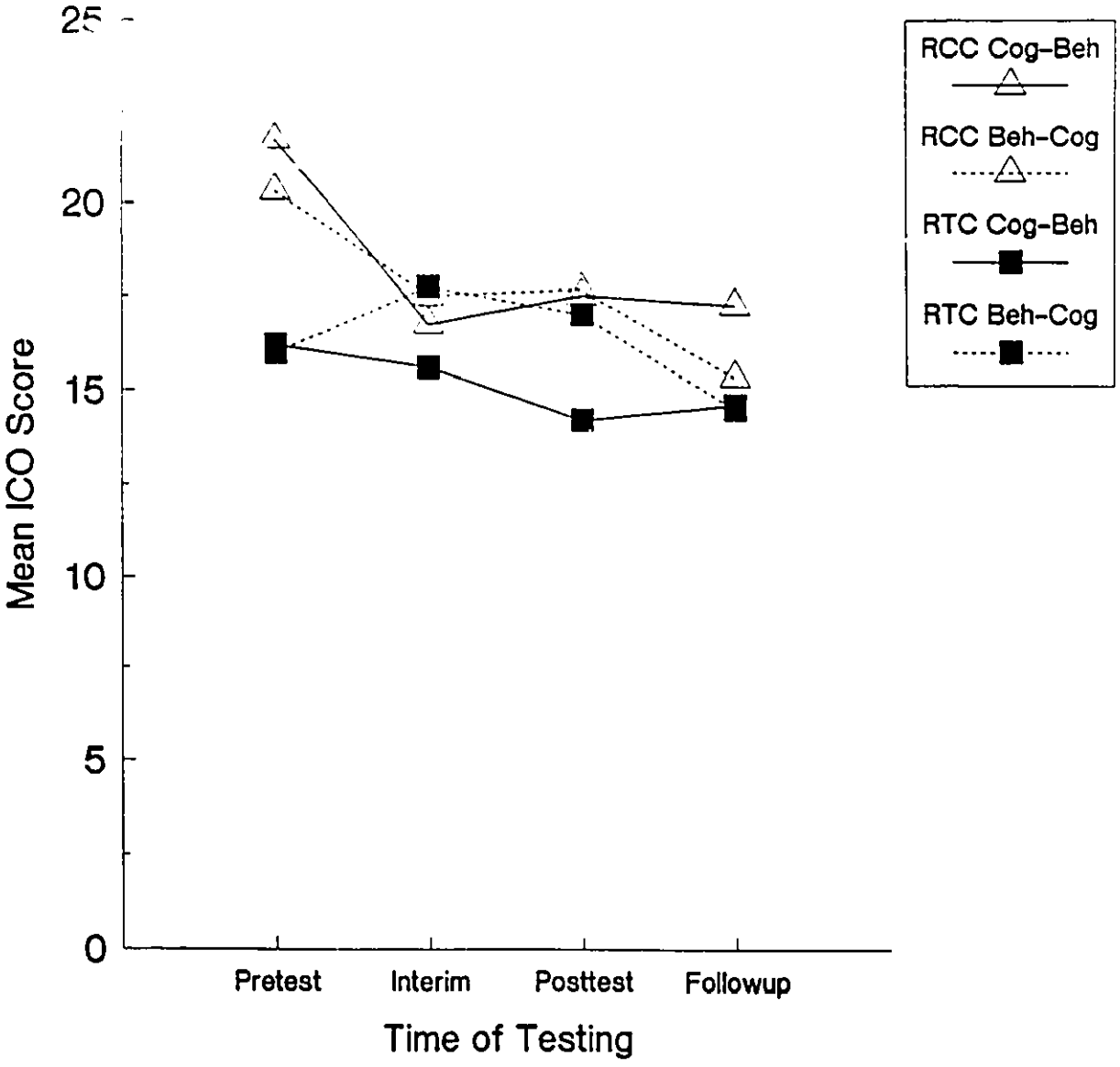


Criminal Sentiments Scale
Identification with Criminal Others

Followup. A 2 x 2 x 4 (Institution x Order x Time) ANOVA yielded a significant main effect for Time, $F(3,45) = 4.86$, $p<.01$. There was also a significant Time by Institution interaction, $F(3,45) = 2.90$, $p<.05$ (Figure 15). Consequently, changes on ICO were assessed separately for the Correctional Centre and the Treatment Centre residents.

The Treatment Centre residents showed no significant change from pretest to interim test, $t(16) = .71$,ns., from interim test to posttest, $t(16) = 1.0$, ns., from interim test to followup, $t(8) = 1.47$, ns., or from posttest to follow-up, $t(10) = .71$, ns. However, these residents did demonstrate an improvement from pretest to posttest which approached significance, $t(18) = 2.04$, $p = .06$, and similarly from pretest to followup, $t(10) = 2.18$, $p<.05$. Correctional Centre residents improved following the first phase of treatment (pretest vs. interim test, $t(17) = 3.71$, $p<.01$; pretest vs. posttest, $t(17) = 3.52$, $p<.01$; pretest vs. followup, $t(9) = 3.81$, $p<.01$). However, there were no further improvements from interim test to posttest, t(17) = ns., from interim test to followup,

Figure 15. Mean pretest, interim test, posttest, and followup Identification with Criminal Others scores on the Criminal Sentiments Scale for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Criminal Sentiments Scale
Identification with Criminal Others

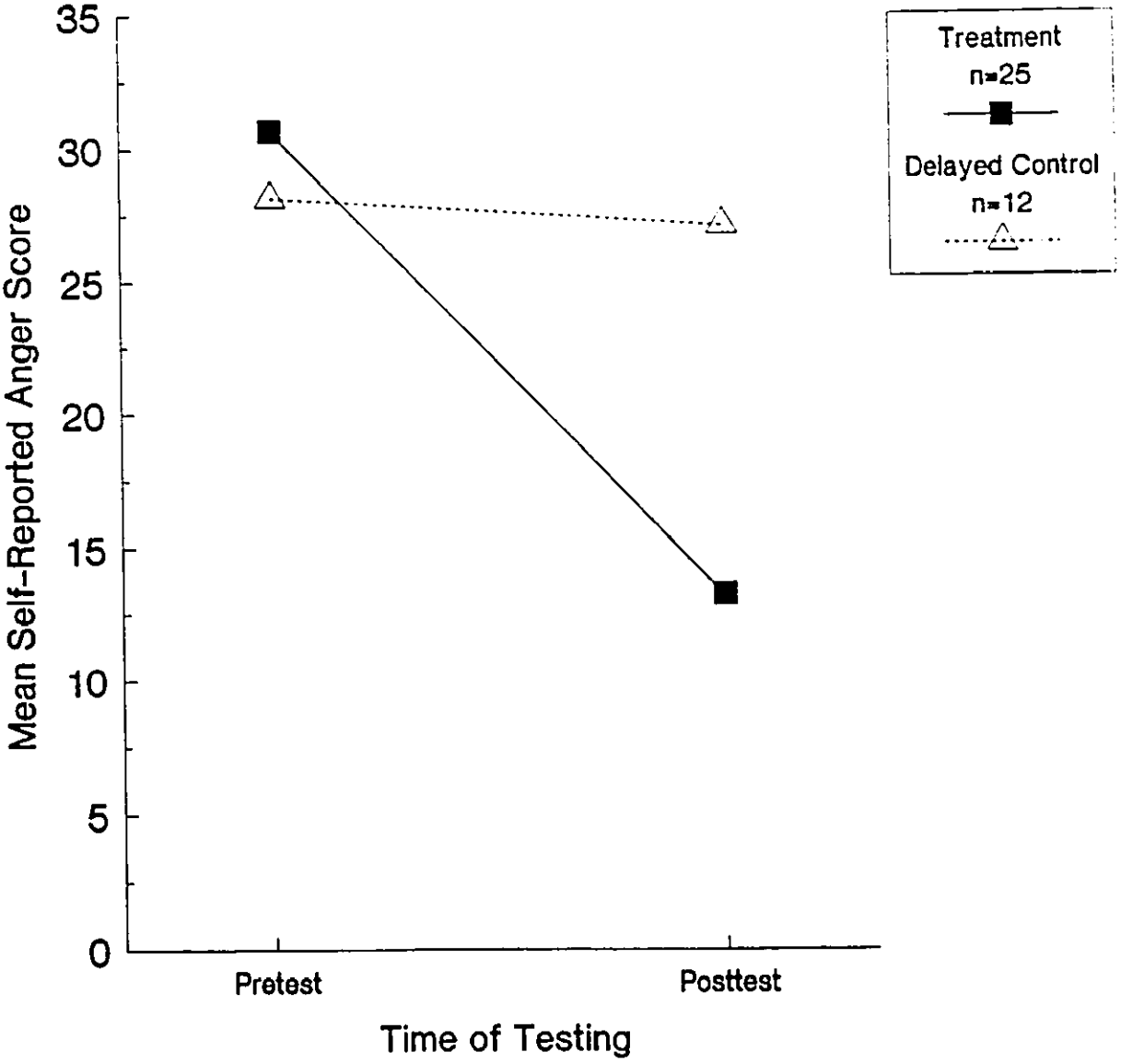
$t(9) = .75$, ns., and from posttest to followup, $t(9) = .88$, ns.

Effects on Self-Report Ratings for the Direct Experience Laboratory Provocations

Overall (Scene A and Scene B Combined). A 2 x 2 (Group x Time) ANOVA on the combined self-report measures (Scene A and Scene B) yielded a significant main effect of Time, $F(1,35) = 25.85$, $p<.001$, and a significant Group by Time interaction, $F(1,35) = 20.35$, $p<.001$ (Figure 16). Individual comparisons revealed that the groups did not differ at pretest, $t(38) = .13$, ns., but did differ at posttest, $t(35) = -4.96$, $p<.001$. Moreover, paired t-tests indicated that the experimental group significantly decreased its self-report anger scores over time, $t(24) = 7.84$, $p<.001$, while there was no change over time in the delayed treatment control group, $t(11) = .43$, ns.

Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the self-report ratings revealed a significant main effect for Time, $F(2,64) = 65.59$,

Figure 16. Mean self-reported anger scores for treatment and delayed treatment control groups on the provocation tests: Scene A and Scene B combined.

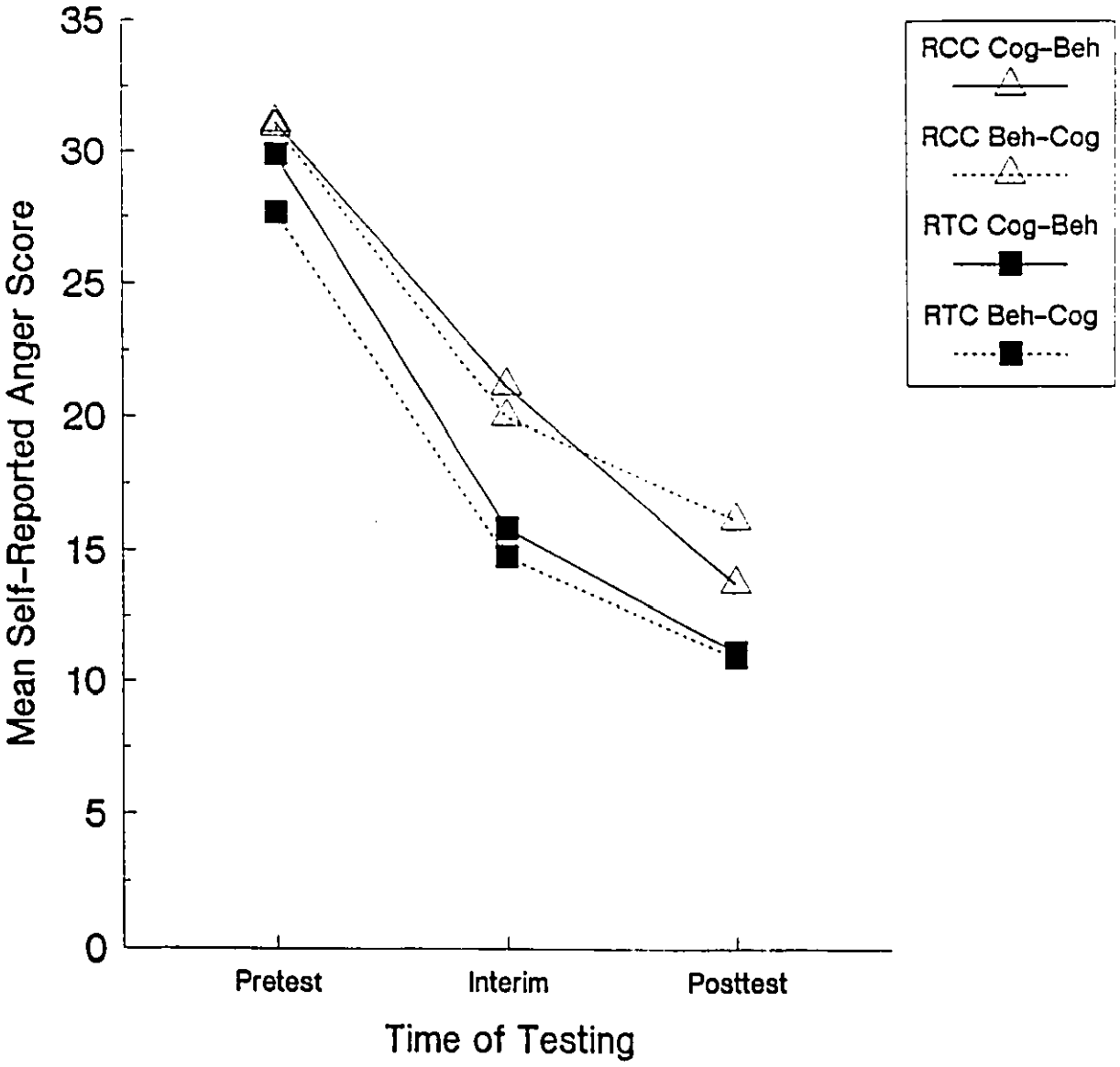


Laboratory Provocations
Scene A & Scene B Combined

$p<.001$ (Figure 17). Individual comparisons demonstrated that participants self-reported less anger following each phase of treatment (pretest vs. interim test, $t(35) = 7.42$, $p<.001$; pretest vs. posttest, $t(36) = 9.52$, $p<.001$; interim test vs. posttest, $t(35) = 5.58$, $p<.001$). These analyses were then repeated separately for the Inmate-Inmate (Scene A) and the Inmate-Staff (Scene B) provocations.

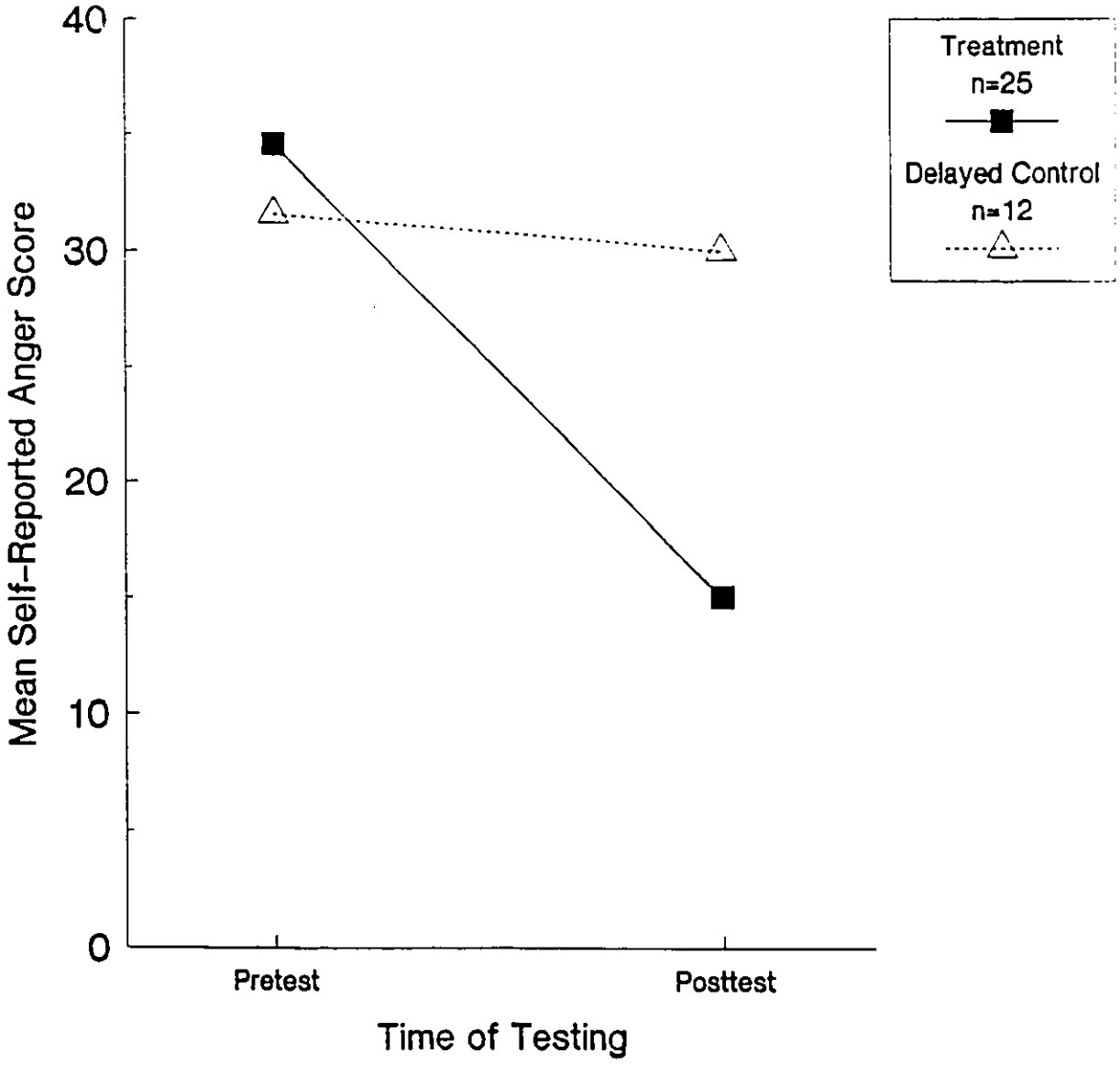
Scene A (Inmate-Inmate Scenario). A one-way ANOVA demonstrated that there were no significant differences among the six groups at pretest, $F(5,31) = .93$, ns. Independent t-tests indicated that the experimental and control groups did not differ at pretest, $t(38) = .53$, ns. A 2 x 2 (Group x Time) ANOVA on the laboratory provocation self-report for Scene A revealed a significant main effect of Time, $F(1,35) = 25.12$, $p<.001$, as well as, a significant Group by Time interaction, $F(1,35) = 18.15$, $p<.001$ (Figure 18). Individual comparisons demonstrated that there was a significant difference between groups at posttest, $t(35) = -4.09$, $p<.001$. Moreover, paired t-tests indicated that the experimental subjects self-reported

Figure 17. Mean pretest, interim test, and posttest self-reported anger scores on the provocation tests (Scene A & Scene B combined), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Laboratory Provocations
Scene A & Scene B Combined

Figure 18. Mean self-reported anger scores for treatment and delayed treatment control groups on the provocation tests, Scene A (inmate-inmate interaction).



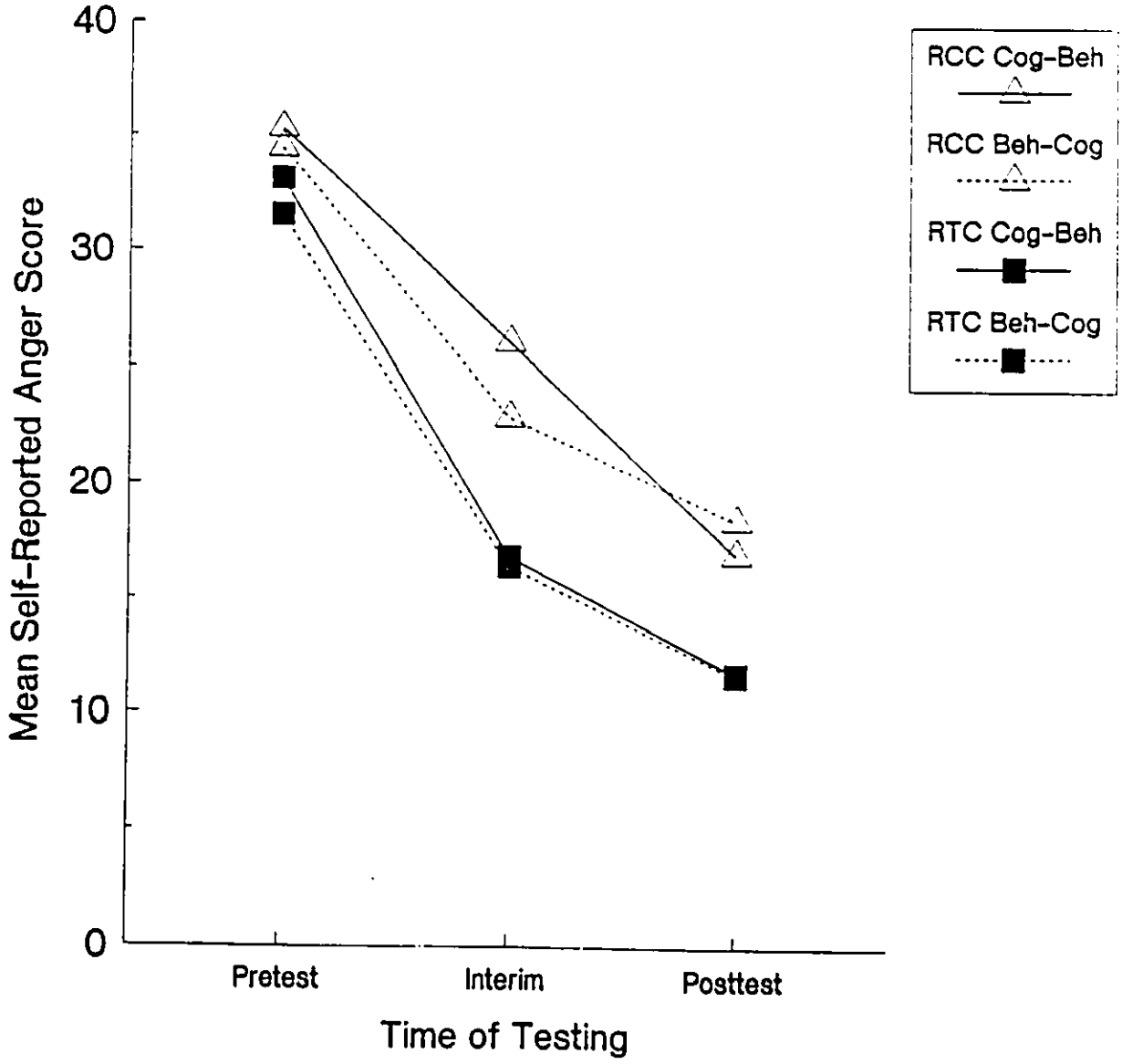
Laboratory Provocations
Scene A

less anger following the role-played provocation over time, $t(24) = 7.62$, $p<.001$, while there was no change over time for the delayed treatment control group, $t(11) = .55$, ns.

Posttreatment A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the self-report role-play measures for Scene A revealed a significant main effects for Time, $F(2,64) = 57.11$, $p<.001$ (Figure 19). Individual comparisons revealed that subjects self-reported less anger following each phase of treatment (pretest vs. interim test, $t(35) = 6.89$, $p<.001$; pretest vs. posttest, $t(36) = 9.01$, $p<.001$; interim test vs. posttest, $t(35) = 4.80$, $p<.001$).

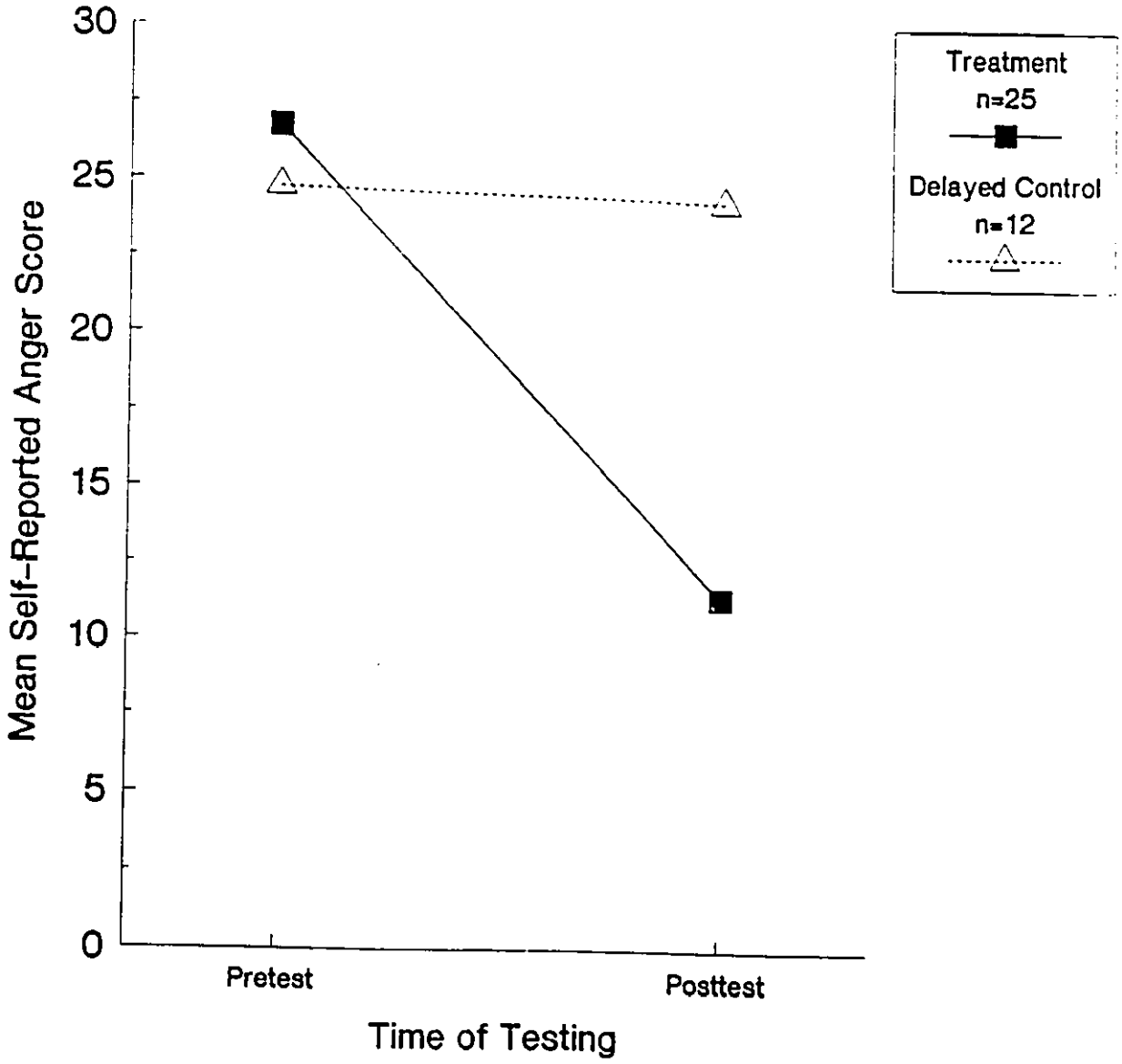
Scene B (Inmate-Staff Scenario). A 2 x 2 (Group x Time) ANOVA on the self-report ratings for Scene B yielded a significant main effect for Time, $F(1,35) = 15.65$, $p<.001$, and a significant Group by Time interaction, $F(1,35) = 13.74$, $p<.001$ (Figure 20). Independent t-test revealed that the groups did not differ at pretest, $t(38) = -.33$, ns., but did differ at posttest, $t(35) = -5.16$, $p<.001$. Moreover, paired

Figure 19. Mean pretest, interim test, and posttest self-reported anger scores on the provocation tests, Scene A (inmate-inmate interaction), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Laboratory Provocations
Scene A

Figure 20. Mean self-reported anger scores for treatment and delayed treatment control groups on the provocation tests, Scene B (inmate-staff interaction).



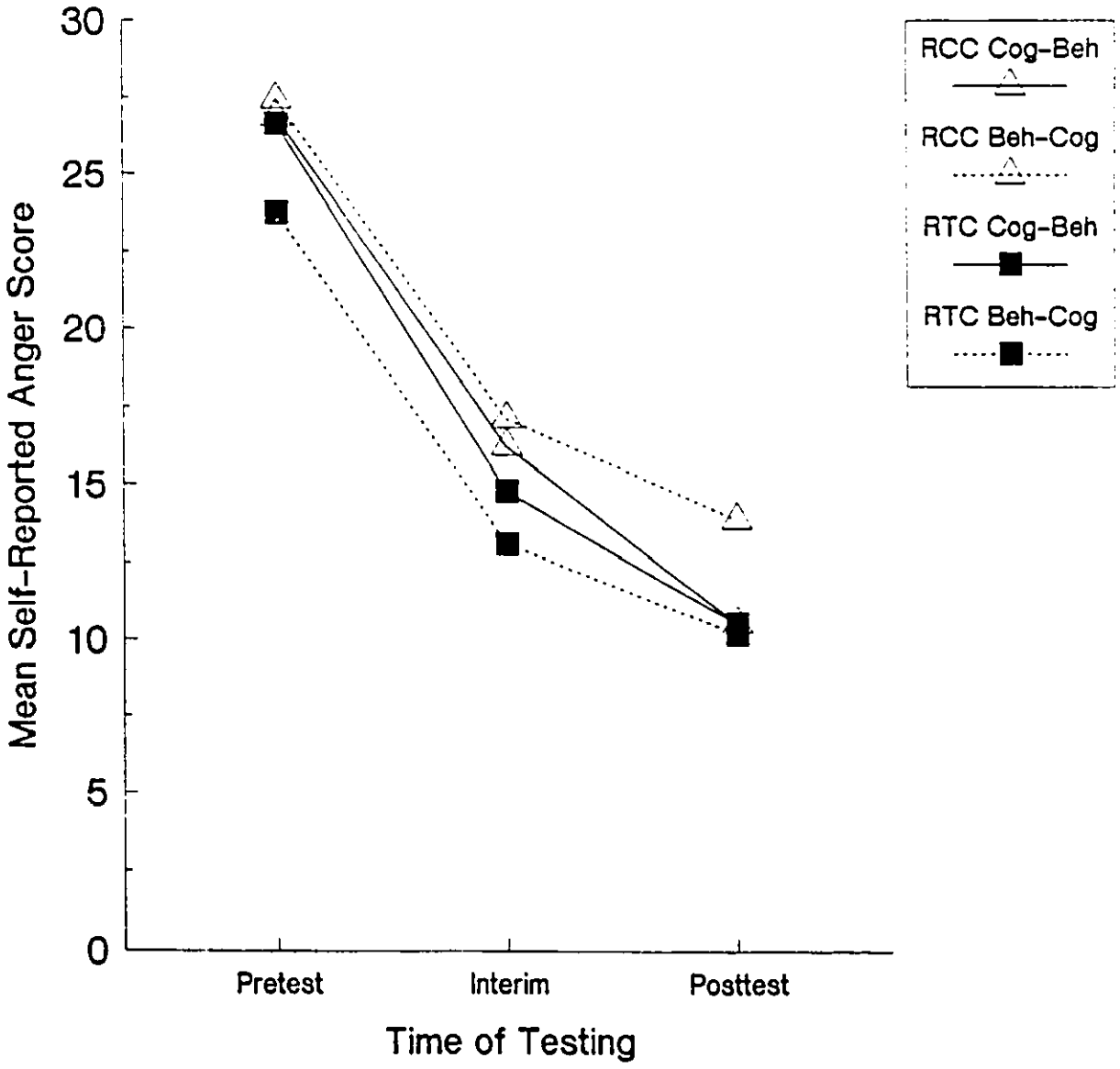
Laboratory Provocations
Scene B

t-tests indicated that the experimental group subjects self-reported less anger following the role-played provocations over time, $t(24) = 6.51$, $p<.001$, while there was no change over time in the delayed treatment control group, $t(11) = .16$, ns.

Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the self-report measures for Scene B produced a significant main effect for Time, $F(2,64) = 41.90$, $p<.001$ (Figure 21). Individual comparisons revealed that the self-report ratings were significantly higher at pretest than at either of the other testing periods (pretest vs. interim test, $t(35) = 5.85$, $p<.001$; pretest vs. posttest, $t(36) = 7.92$, $p<.001$) and were higher at interim test than at posttest, $t(35) = 4.35$, $p<.001$. These results indicate that subjects self-reported less anger after exposure to either the cognitive or the behavioral component, or to a combination of the two components.

Generalization Effects. The self-report results from Scene A (Inmate-Inmate Scenario) and Scene B (Inmate-Staff Scenario) were compared to self-report

Figure 21. Mean pretest, interim test, and posttest self-reported anger scores on the provocation tests, Scene B (inmate-staff interaction), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



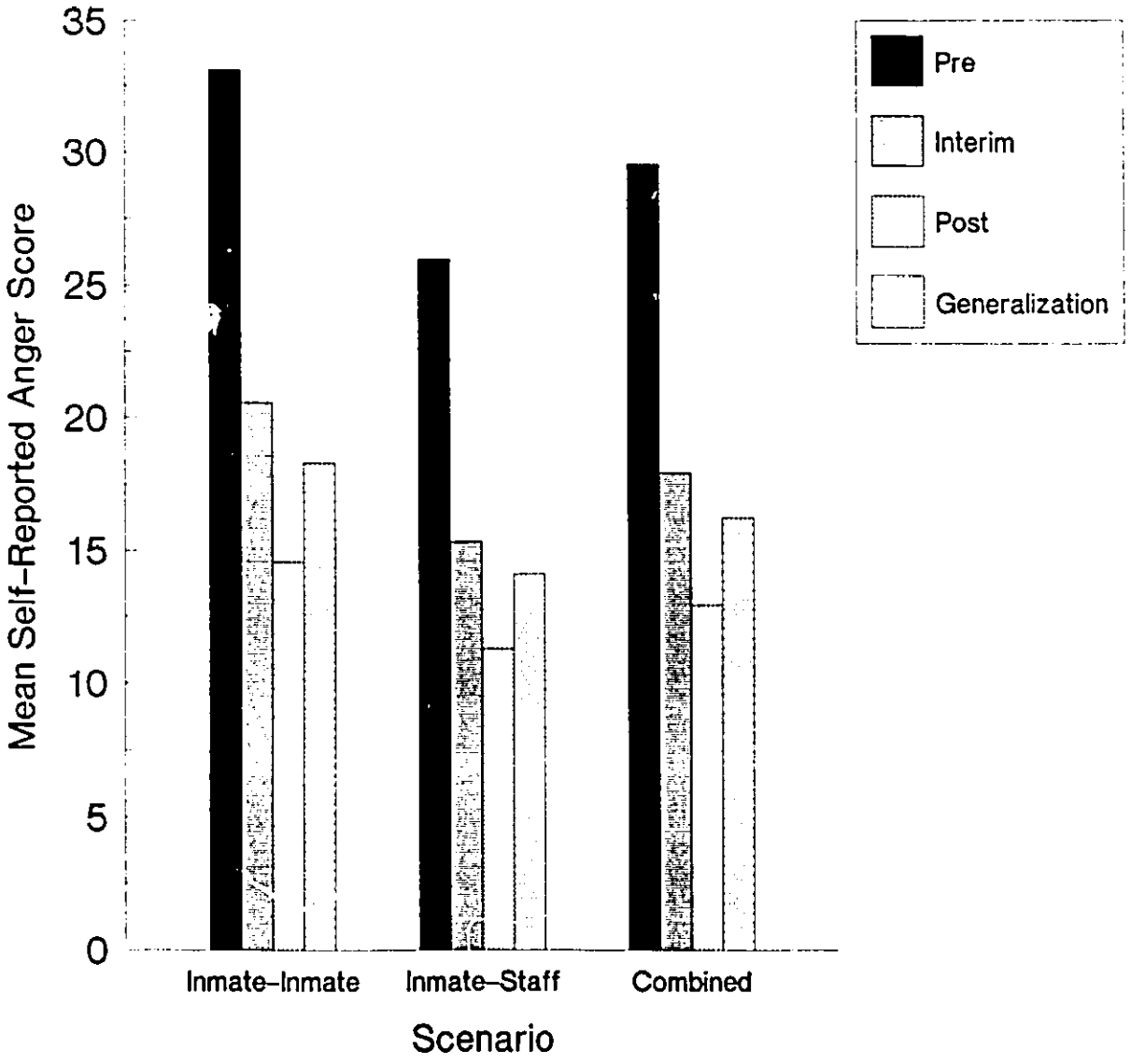
Laboratory Provocations
Scene B

responses to novel parallel situations (Scene C and Scene D, respectively) to evaluate whether treatment gains had generalized to other scenarios (Figure 22). Paired t-test comparisons indicated that participants self-reported more anger following the novel role-play scenarios than to the repeated scenarios at posttest, suggesting that they did not completely generalize treatment gains to the new Scenarios (Scene A/B vs. Scene C/D, $t(36) = -3.93$, $p<.001$; Scene A vs. Scene C, $t(36) = -3.14$, $p<.01$; Scene B vs. Scene D, $t(36) = -3.19$, $p<.01$). However, as can be seen from Figure 22, residents did not self-report as much anger to the novel Scenes C and D at posttest as they did to the initial presentation of Scenes A and B at pretest.

Effects on Behavioral Ratings of Laboratory Provocations

Overall Scene A and Scene B (Combined). There were no differences among any of the six groups at pretreatment, $F(5,31) = .78$, ns. Independent t-tests revealed that the experimental and control groups did not differ at pretest, $t(35) = .32$, ns. A 2 x 2 (Group

Figure 22. Mean self-reported anger scores at pretest, interim test, posttest, and generalization test, Scene A (inmate-inmate) and Scene B (inmate-staff interaction), for all treatment groups combined.

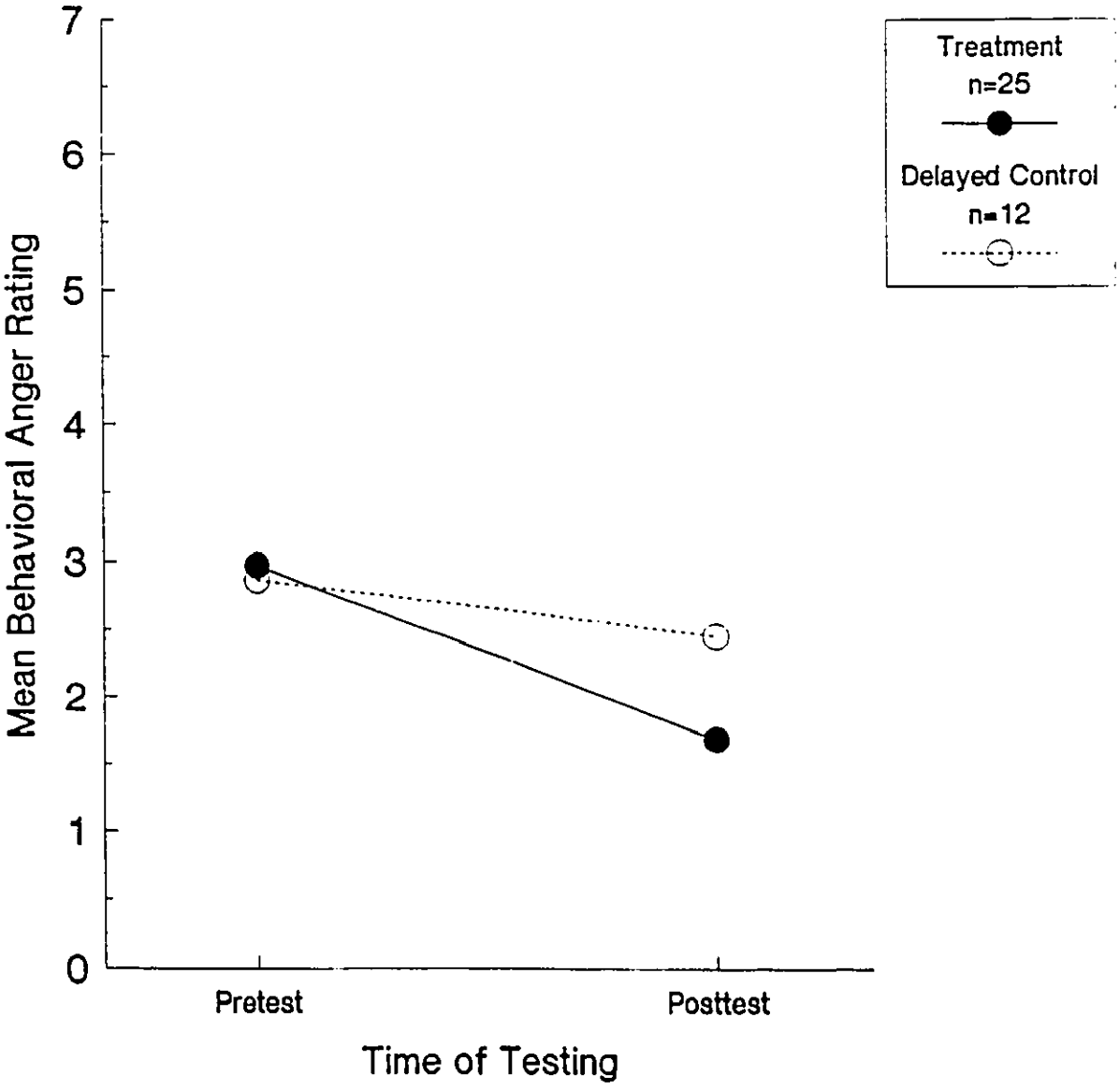


Laboratory Provocations
Generalization

x Time) ANOVA on the behavioral measures showed a significant main effect of Time, $F(1,35) = 24.03$, $p<.001$, and a significant Group by Time interaction, $F(1,35) = 6.38$, $p<.05$ (Figure 23). There were significant differences between the experimental and control groups at posttest, $t(35) = -4.27$, $p<.001$. Comparisons within groups indicated that the experimental group evidenced significantly less verbal aggression, $t(24) = 5.82$, $p<.001$. However, there was also a decrease in verbal aggression which approached statistical significance for the delayed treatment control subjects, $t(11) = 2.18$, $p = .052$.

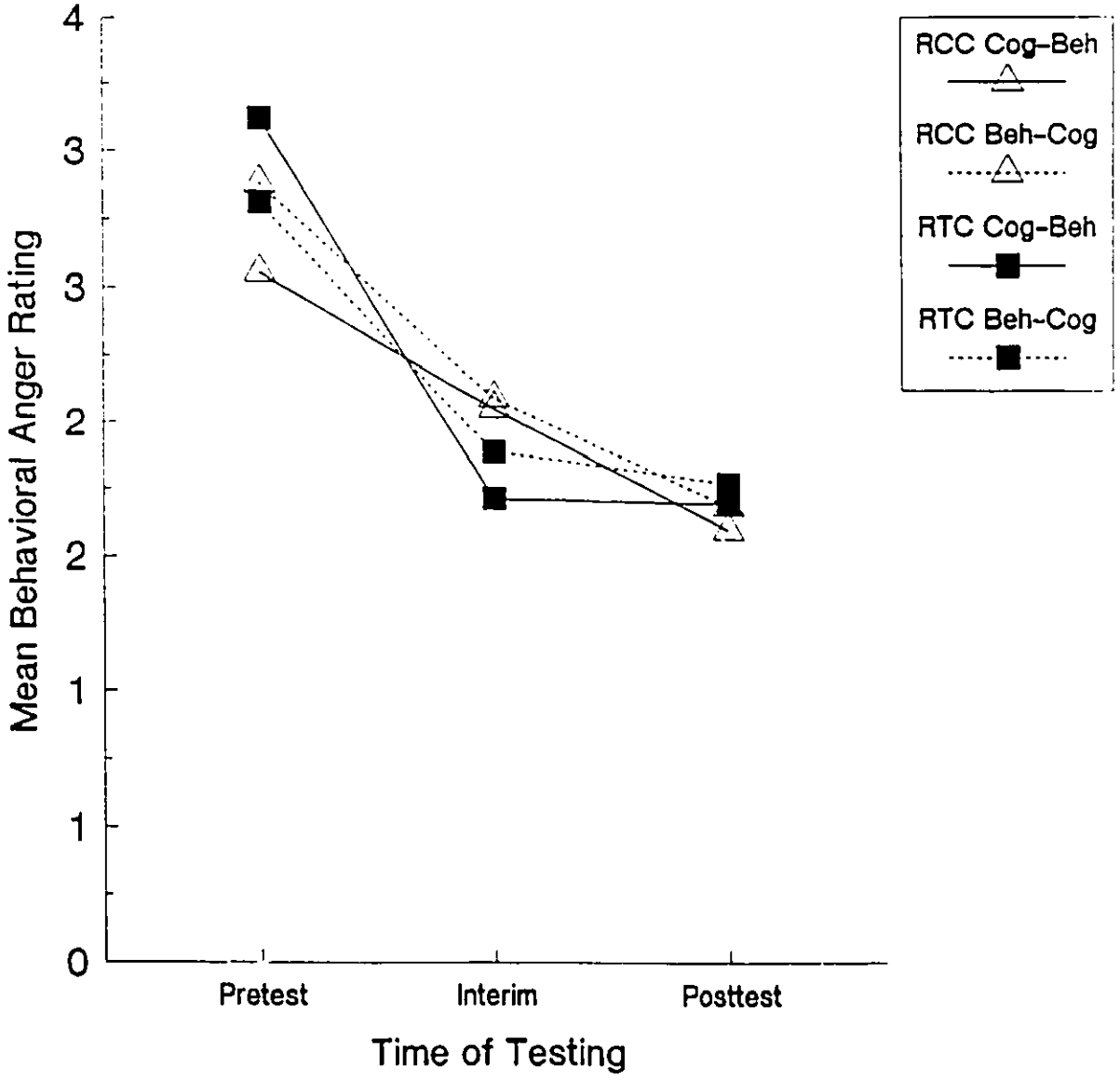
Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) Anova on the combined (Scene A and Scene B) behavioral measures revealed a significant main effect of Time, $F(2,64) = 28.33$, $p<.001$ (Figure 24). Paired t-tests revealed that subjects improved following the first phase of treatment (pretest vs. interim test, $t(27) = 4.82$, $p<.001$; pretest vs. posttest, $t(26) = 5.90$, $p<.001$). However, there were no significant improvements during the second phase of treatment (interim test vs. posttest, $t(26) = 1.73$, ns.). There

Figure 23. Mean behavioral anger ratings for treatment and delayed treatment control groups on the provocation tests: Scene A and Scene B combined.



Laboratory Provocations
Scene A & Scene B Combined

Figure 24. Mean pretest, interim test, and posttest behavioral anger ratings on the provocation tests (Scene A & Scene B combined), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



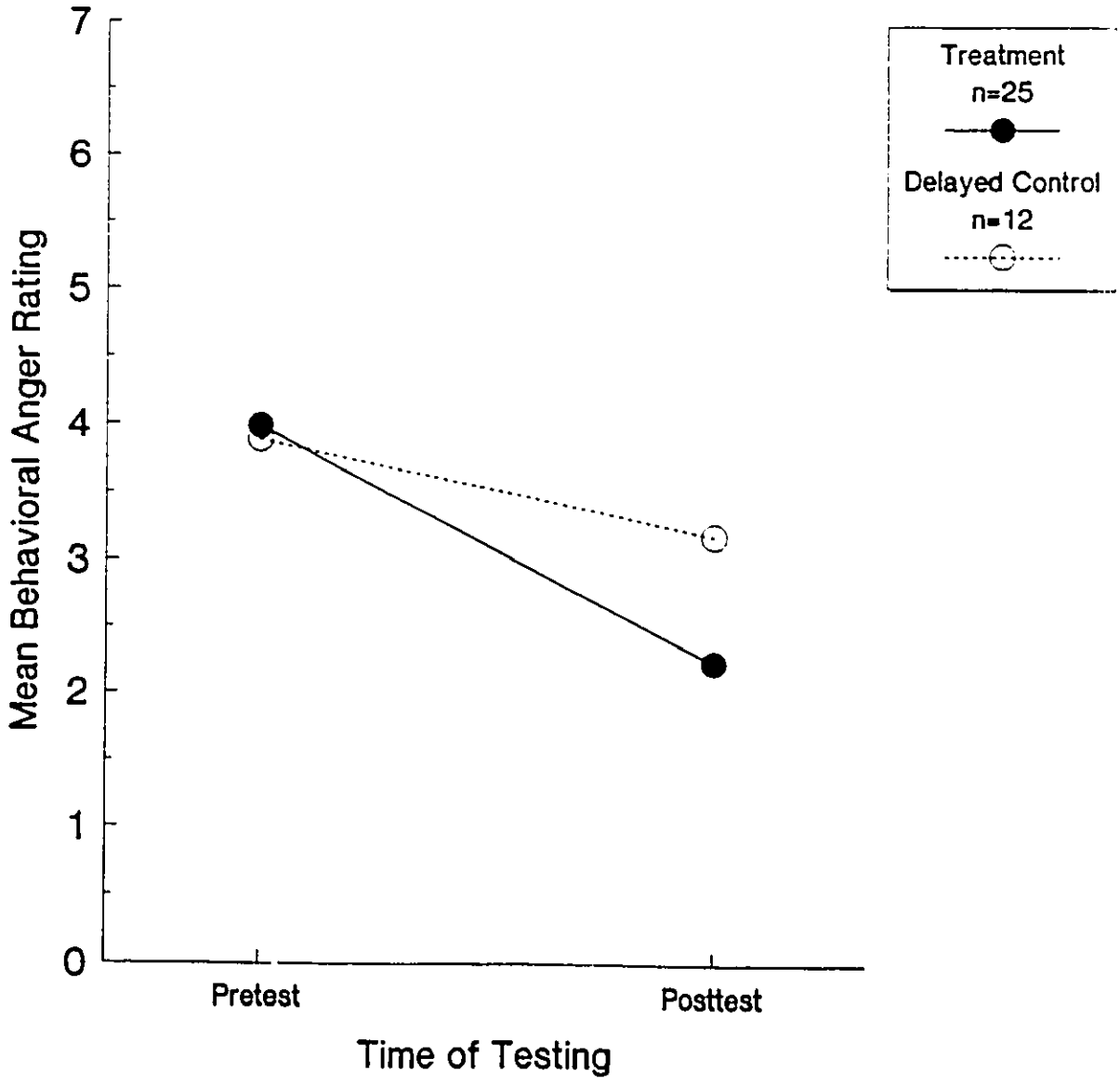
Laboratory Provocations
Scene A & Scene B Combined

were no Institution or Order effects or interactions in this analysis.

Scene A (Inmate-Inmate Scenario). A 2 x 2 (Group x Time) ANOVA on the behavioral measures demonstrated a significant main effect of Time for Scene A, $F(1,35) = 19.08$, $p<.001$ and, a nonsignificant Group by Time interaction on Scene A, $F(1,35) = 3.45$, $p = .072$ (Figure 25). Independent t-tests revealed that there was no difference between the two groups at pretest, $t(35) = .19$, ns. However, there was a significant difference at posttest, $t(35) = -2.73$, $p<.01$. Furthermore, the experimental group evidenced a significant decrease in their aggressive responses, $t(24) = 5.17$, $p<.001$, whereas the delayed treatment control group did not, $t(11) = 1.77$, ns.

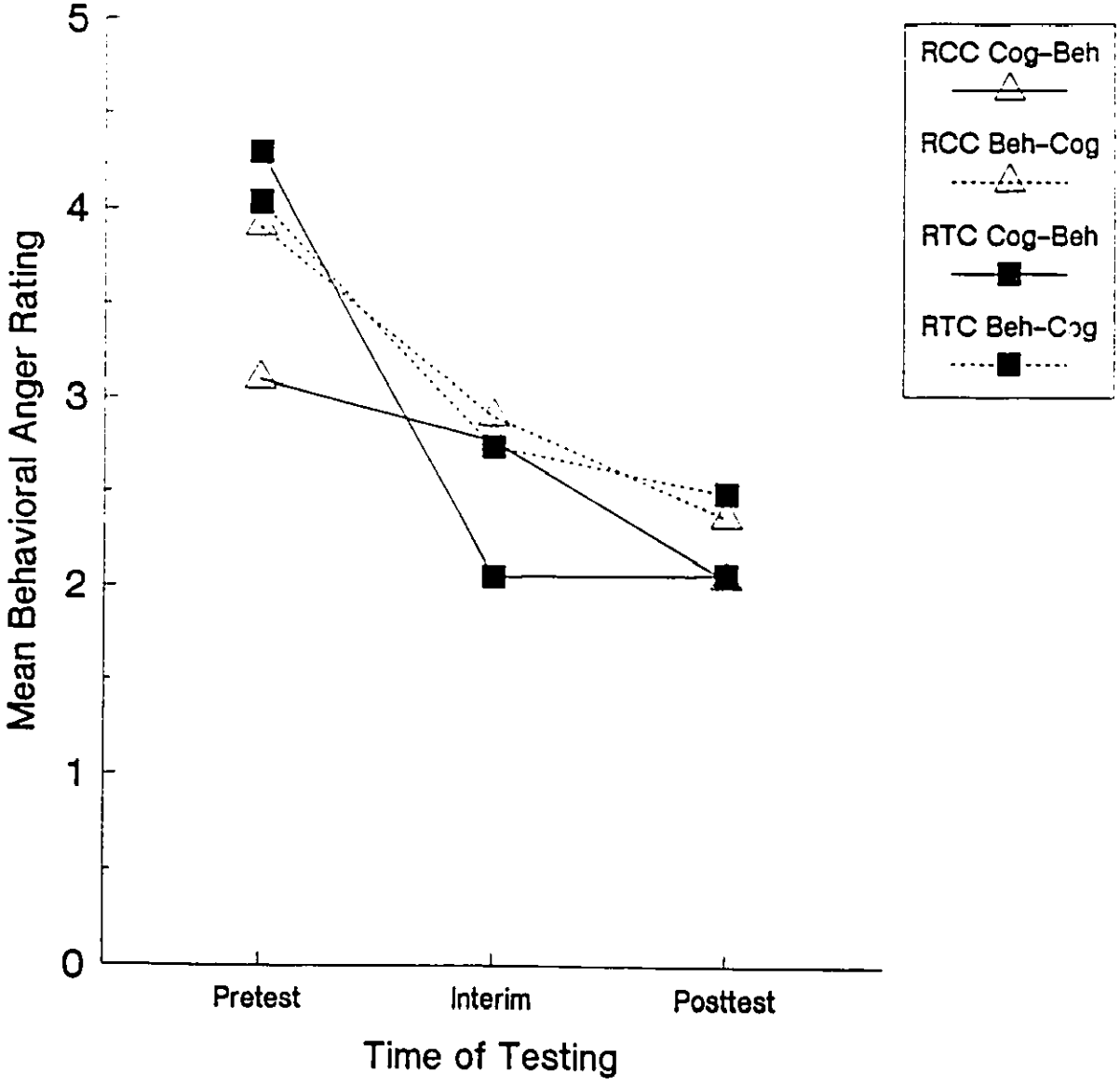
Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the behavioral ratings produced significant main effects for Time on Scene A, $F(2,62) = 19.27$, $p<.001$ (Figure 26). Individual comparisons demonstrated that all groups improved following the first phase of treatment (pretest vs. interim test,

Figure 25. Mean behavioral anger ratings for treatment and delayed treatment control groups on the provocation tests, Scene A (inmate-inmate interaction).



Laboratory Provocations
Scene A

Figure 26. Mean pretest, interim test, and posttest behavioral anger ratings on the provocation tests, Scene A (inmate-inmate interaction), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



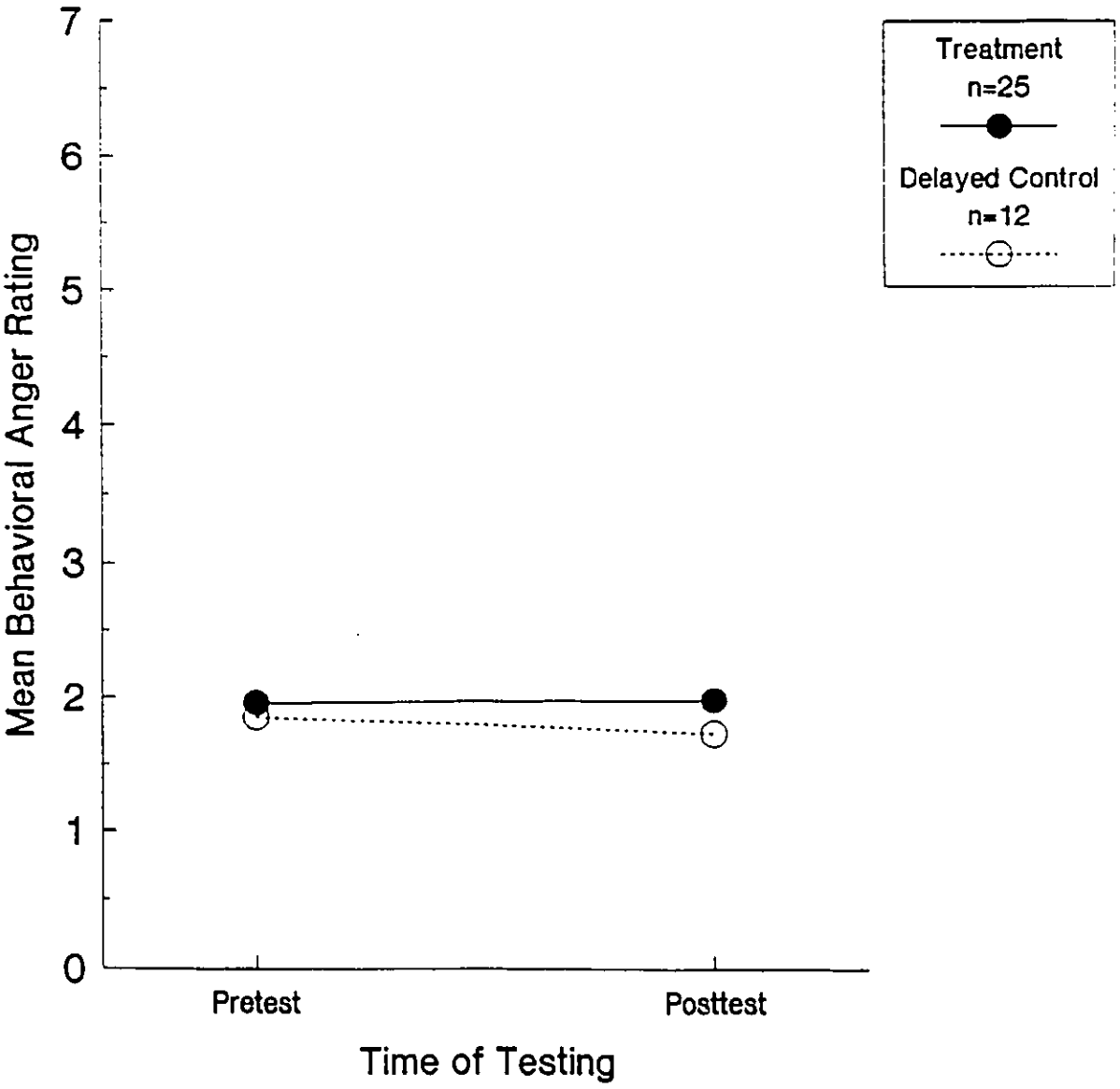
Laboratory Provocations
Scene A

$t(34) = 5.88$, $p<.001$; pretest vs. posttest, $t(36) = 6.35$, $p<.001$). However, there was no further improvement during the second phase (interim test vs. posttest, $t(34) = 1.07$, ns). There were no differences between Institutions nor was there an Order effect.

Scene B (Inmate - Staff Scenario). A 2 x 2 (Group x Time) ANOVA on the behavioral measures demonstrated no significant main effect of Time for Scene B, $F(1,35) = .10$, ns., and no significant Group by Time interaction, $F(1,35) = .18$, ns. (Figure 27).

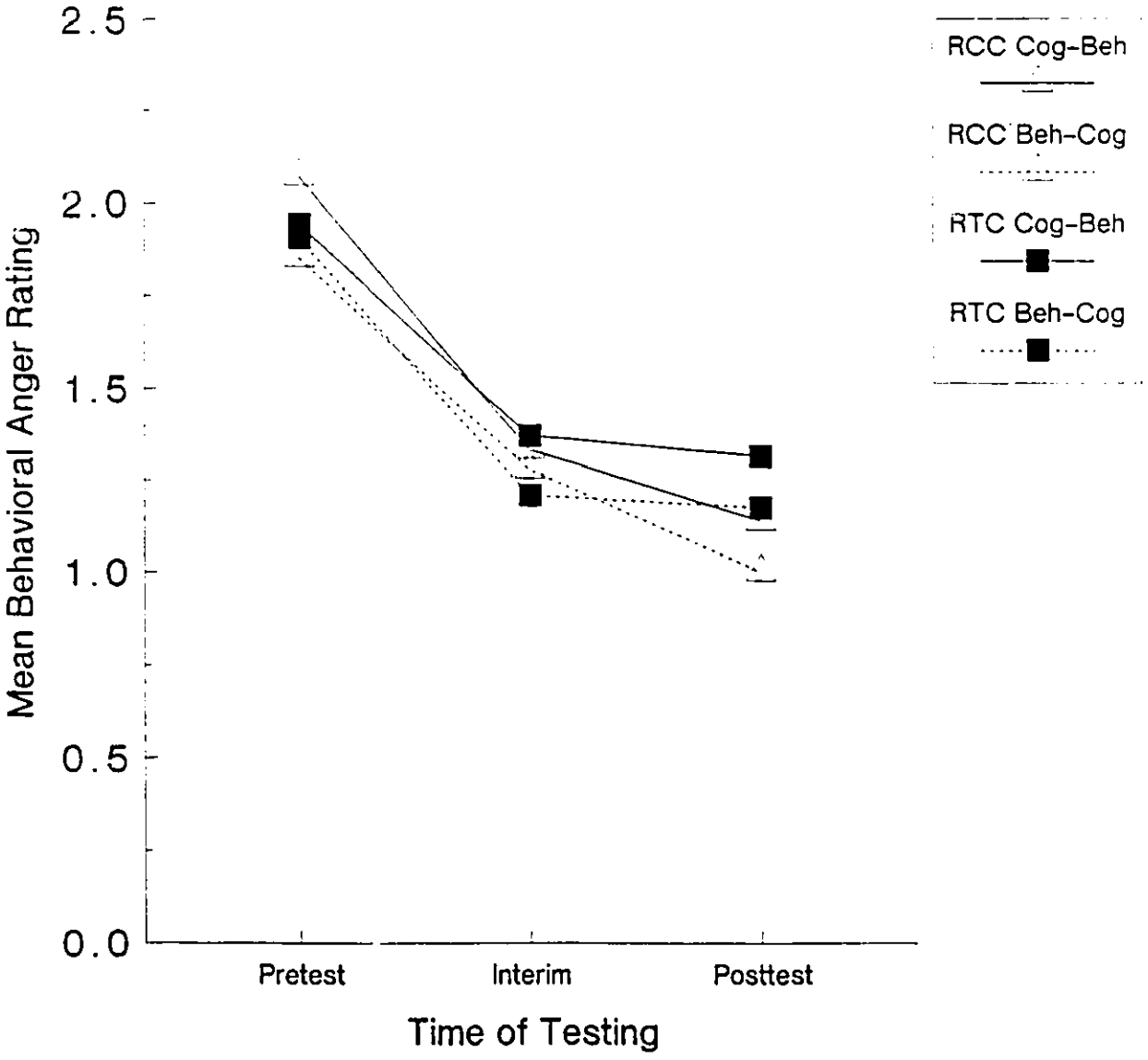
Posttreatment. A 2 x 2 x 3 (Institution x Order x Time) ANOVA on the behavioral ratings produced significant main effects for Time on Scene B, $F(2,64) = 12.76$, $p<.001$ (Figure 28). Pretest scores were significantly different from scores at both other testing periods (pretest vs. interim test, $t(32) = 4.62$, $p<.001$; pretest vs. posttest, $t(32) = 6.03$, $p<.001$). Moreover, there was a significant decrease in scores from interim test to posttest, $t(33) = 2.14$, $p<.05$.

Figure 27. Mean behavioral anger ratings for treatment and delayed treatment control groups on the provocation tests, Scene B (inmate-staff interaction).



Laboratory Provocations
Scene B

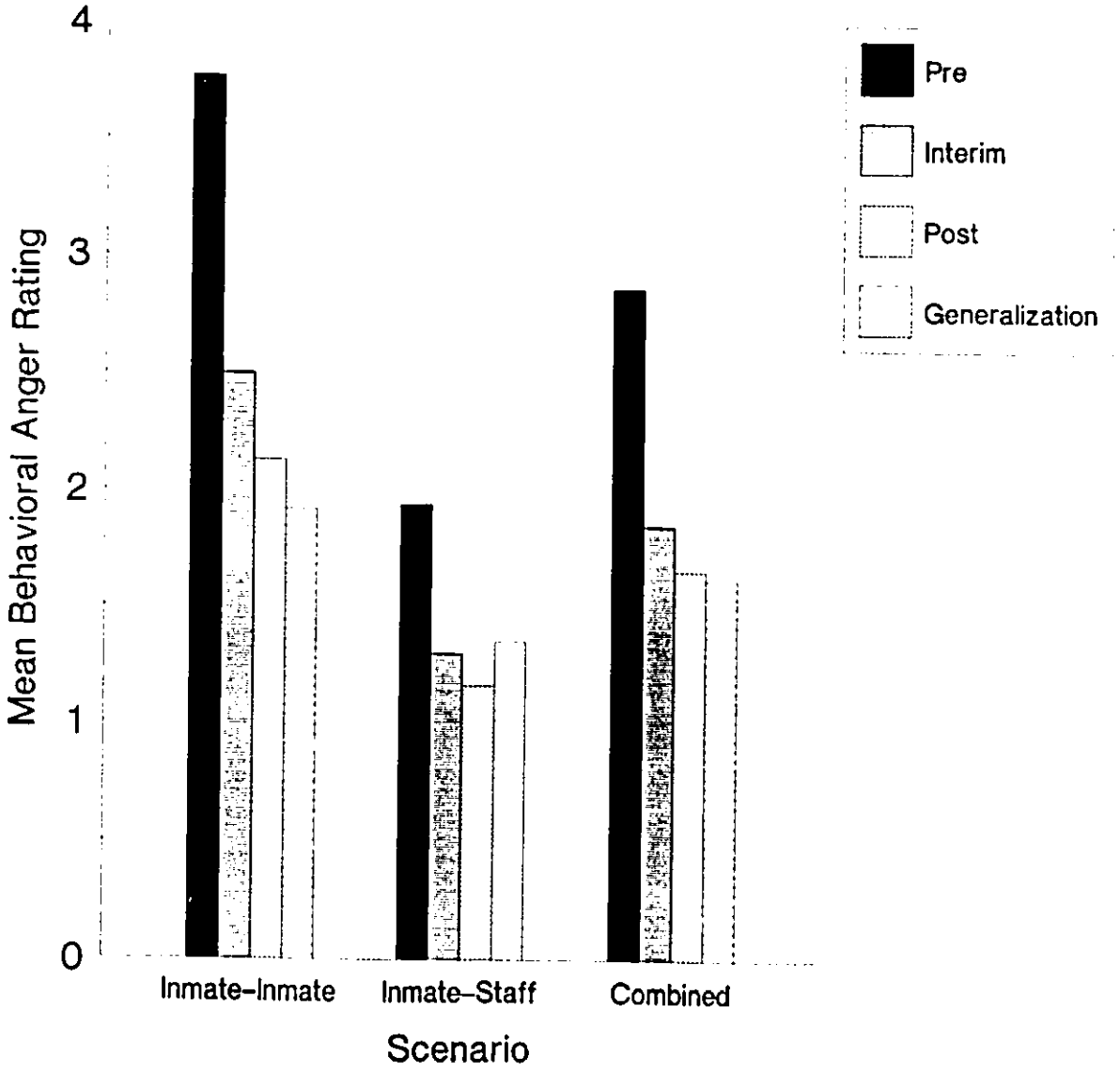
Figure 28. Mean pretest, interim test, and posttest behavioral anger ratings on the provocation tests, Scene B (inmate-staff interaction), for the cognitive-behavioral versus behavioral-cognitive treatment conditions as a function of institution.



Laboratory Provocations
Scene B

Generalization Effects. To assess whether the treatment effects found for Scenes A and B generalized to other scenarios, and were not simply due to practice, the results from Scenes A and B were compared to novel, parallel Scenes C and D (Figure 29). When paired t-test were performed on the combined Scenes (A/B versus C/D) at posttest no significant differences were found, $t(36) = .43$, ns. This result suggests that the treatment gains demonstrated on Scenes A and B were due to an acquired skill that could be applied to similar situations. When the original Inmate-Inmate Scenario (Scene A) was compared to the new provocation (Scene C) at posttest, subjects scored even better on the novel scene in that they demonstrated a tendency for less verbal aggression on the new Inmate-Inmate Scenario, $t(36) = 1.98$, $p = .06$. When Scene B and Scene D (Inmate-Staff Scenario) were compared at posttest a different pattern emerged in that subjects tended to respond less well on the novel Scene D, $t(36) = -1.93$, $p = .06$, suggesting that subjects did not generalize treatment gains as much to the new Scenario even though the treatment gains in Inmate-Staff provocations which were presented in the previous

Figure 29. Mean behavioral anger ratings at pretest, interim test, posttest, and generalization test, Scene A (inmate-inmate) and Scene B (inmate-staff interaction), for all treatment groups combined.



Laboratory Provocations
Generalization

section, were minimal. However, as can be seen from Figure 29, subjects displayed less verbal aggression to the novel Scenes C and D at posttest than they did to the initial presentation of Scenes A and B at pretest.

Effects on Disciplinary Offenses

The collection of the institutional data was straightforward and primarily archival. Disciplinary offenses include notices of satisfactory performance, notices of unsatisfactory performance, and misconducts. All disciplinary charges in the institution are routinely reported in a central institutional file. The number of charges incurred on each resident was recorded separately for the pre-program, part 1, part 2, and followup phases.

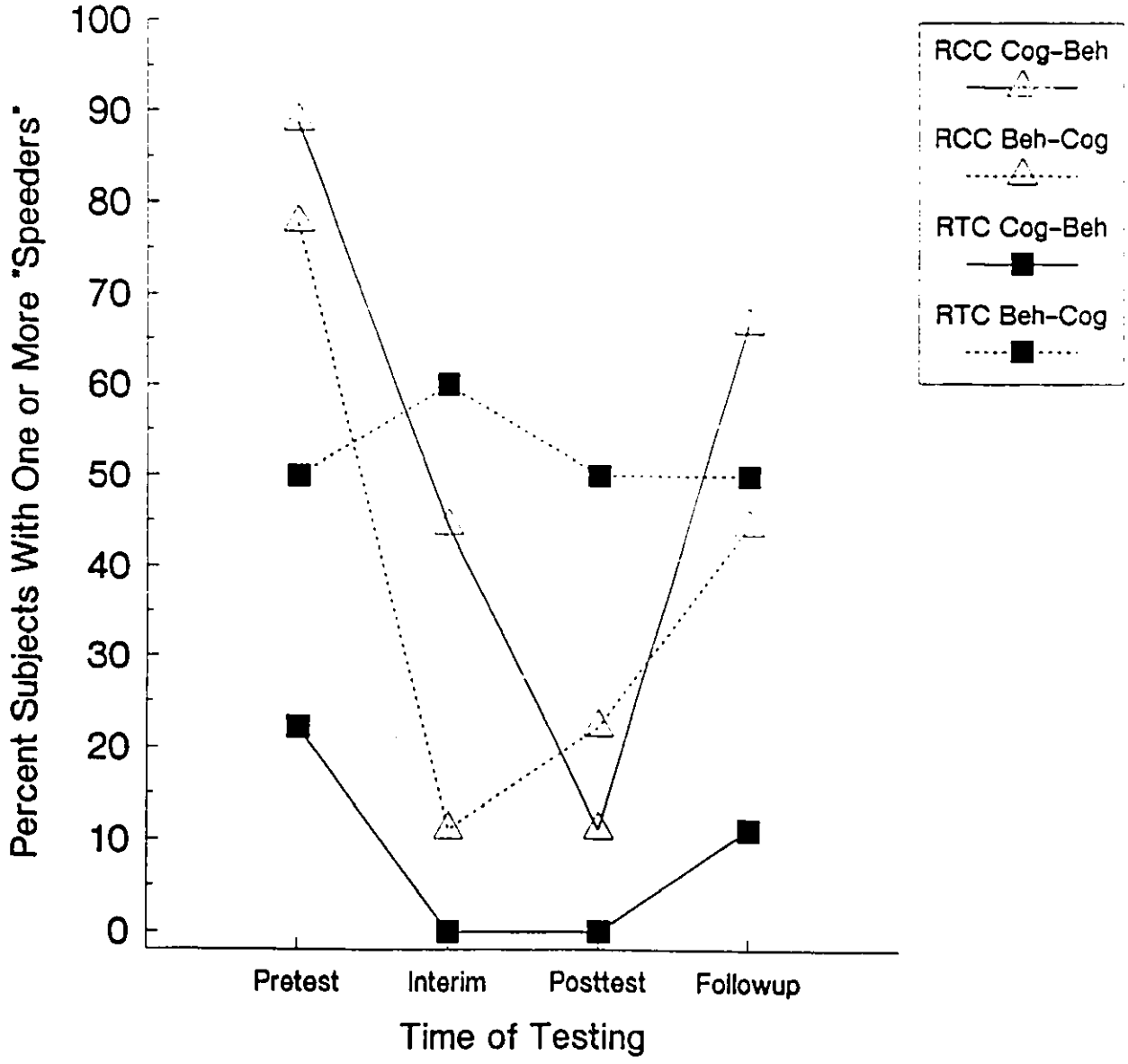
Notices of Performance. A one-way ANOVA on the Notices of Unsatisfactory Performance revealed that there were significant pretreatment differences among the six groups, $F(5,31) = 4.25$, $p<.01$. A 2 x 2 x 4 (Institution x Order x Time) ANOVA revealed a significant main effect for Time, $F(2,66) = 3.59$,

$p<.05$. However, as can be seen from Figure 30 there does not appear to be any consistent pattern over Time on these ratings across treatment conditions.

Analysis indicated that there were significant differences between the six groups at pretest on the Notices of Outstanding Performance, $F(5,31) = 2.49$, $p = .05$. A 2 x 2 x 4 (Institution x Order x Time) ANOVA on the percentage of subjects in each treatment condition receiving one or more "brownies" yielded a significant Time effect, $F(2,66) = 5.87$, $p<.01$. As is evident from Figure 31, however, this does not represent a significant increase or decrease on these ratings across treatment conditions.

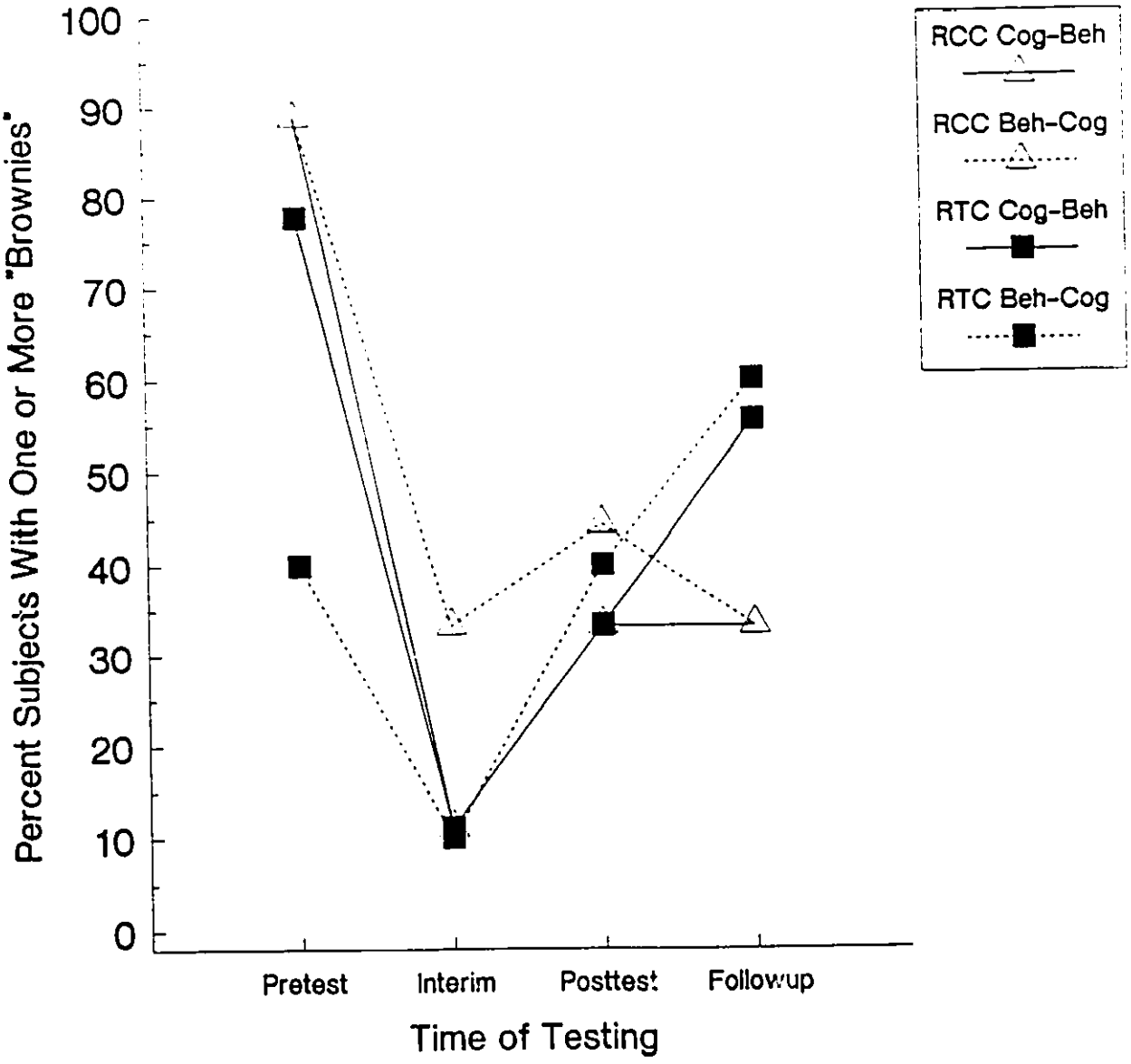
Misconducts. Misconducts were subdivided into total percentage of Misconducts, Aggressive Misconducts, Rule Violation Misconducts, and Security Misconducts. Since any analysis based on low frequency data has limited statistical power, a misconduct measure was calculated by investigating the number of participants receiving misconducts for each treatment condition on each assessment occasion. Calculation of

Figure 30. Mean percentage of subjects in the cognitive-behavioral versus behavioral-cognitive treatment conditions who incurred one or more notices of unsatisfactory performance ("speeders") at pretest, interim test, posttest, and followup as a function of institution.



Notices of Unsatisfactory Performance

Figure 31. Mean percentage of subjects in the cognitive-behavioral versus behavioral-cognitive treatment conditions who incurred one or more notices of outstanding performance ("brownies") at pretest, interim test, posttest, and followup as a function of institution.

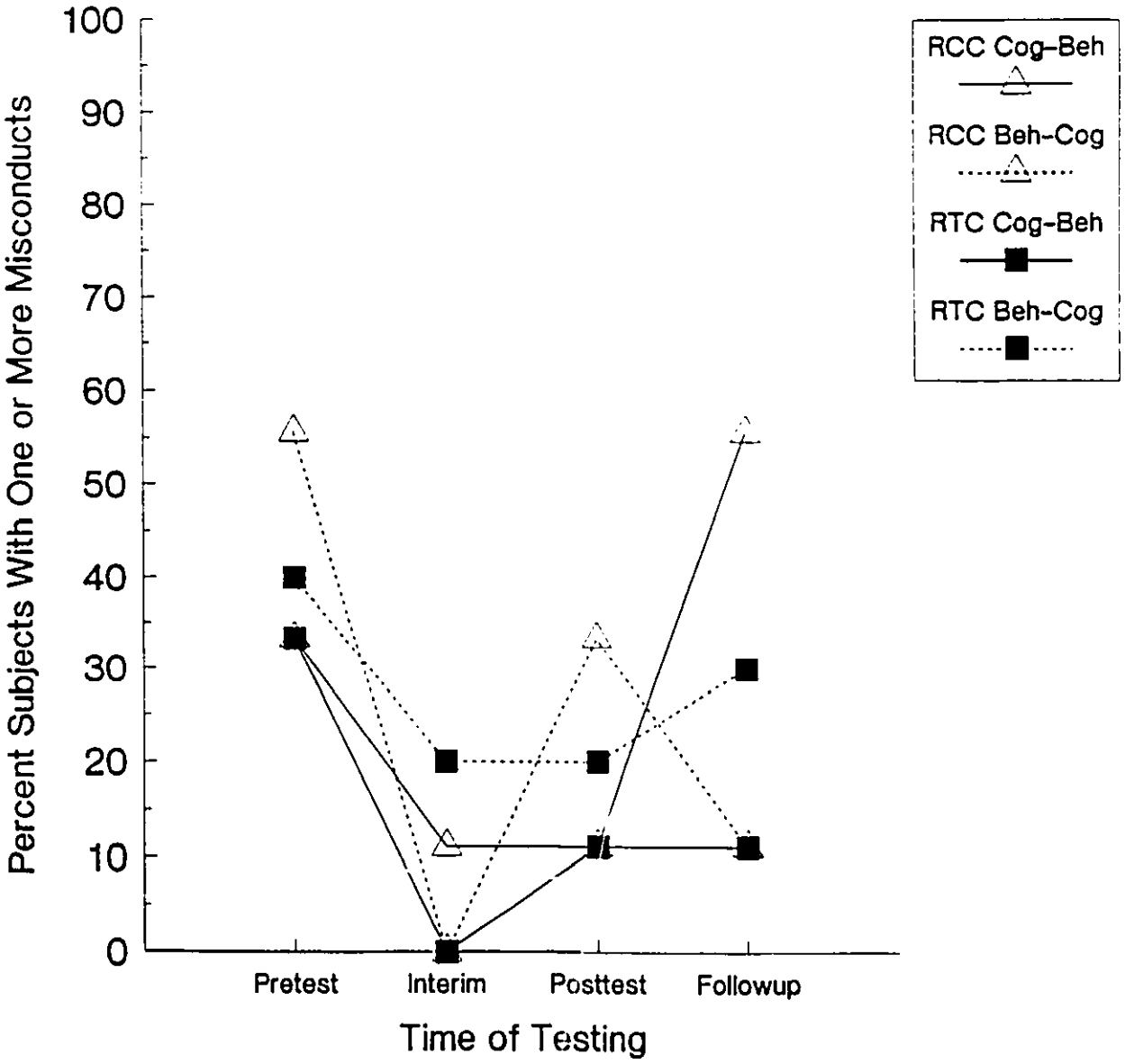


Notices of Outstanding Performance

the percentage of Security Misconducts produced low frequency data and thus were not subjected to analyses. One-way ANOVAs revealed that there were no significant pretreatment differences on Total Misconducts, $F(5,31) = 1.09$, ns., on Aggressive Misconducts, $F(5,31) = 1.74$, ns., and on Rule Violation Misconducts, $F(5,31) = 1.17$, ns.

Total Misconducts. A 2 x 2 x 4 (Institution x Order x Time) ANOVA on the presence or absence of total misconducts produced a significant main effect for Time, $F(3,99) = 4.47$, $p<.01$ (Figure 32). Moreover, individual comparisons demonstrated that there was a significant decrease in misconducts received from pretest to interim test, $t(36) = 3.72$, $p<.001$ and from pretest to posttest, $t(36) = 2.09$, $p<.05$. There were no significant differences between any of the other treatment phases (pretest vs. followup, $t(36) = 1.40$, ns.; interim test vs. posttest, $t(36) = -1.43$, ns.; interim test vs. followup, $t(36) = -2.49$, ns.; posttest vs. followup, $t(36) = -.72$, ns.).

Figure 32. Mean percentage of subjects in the cognitive-behavioral versus behavioral-cognitive treatment conditions who incurred one or more misconducts of any type at pretest, interim test, posttest, and followup as a function of institution.

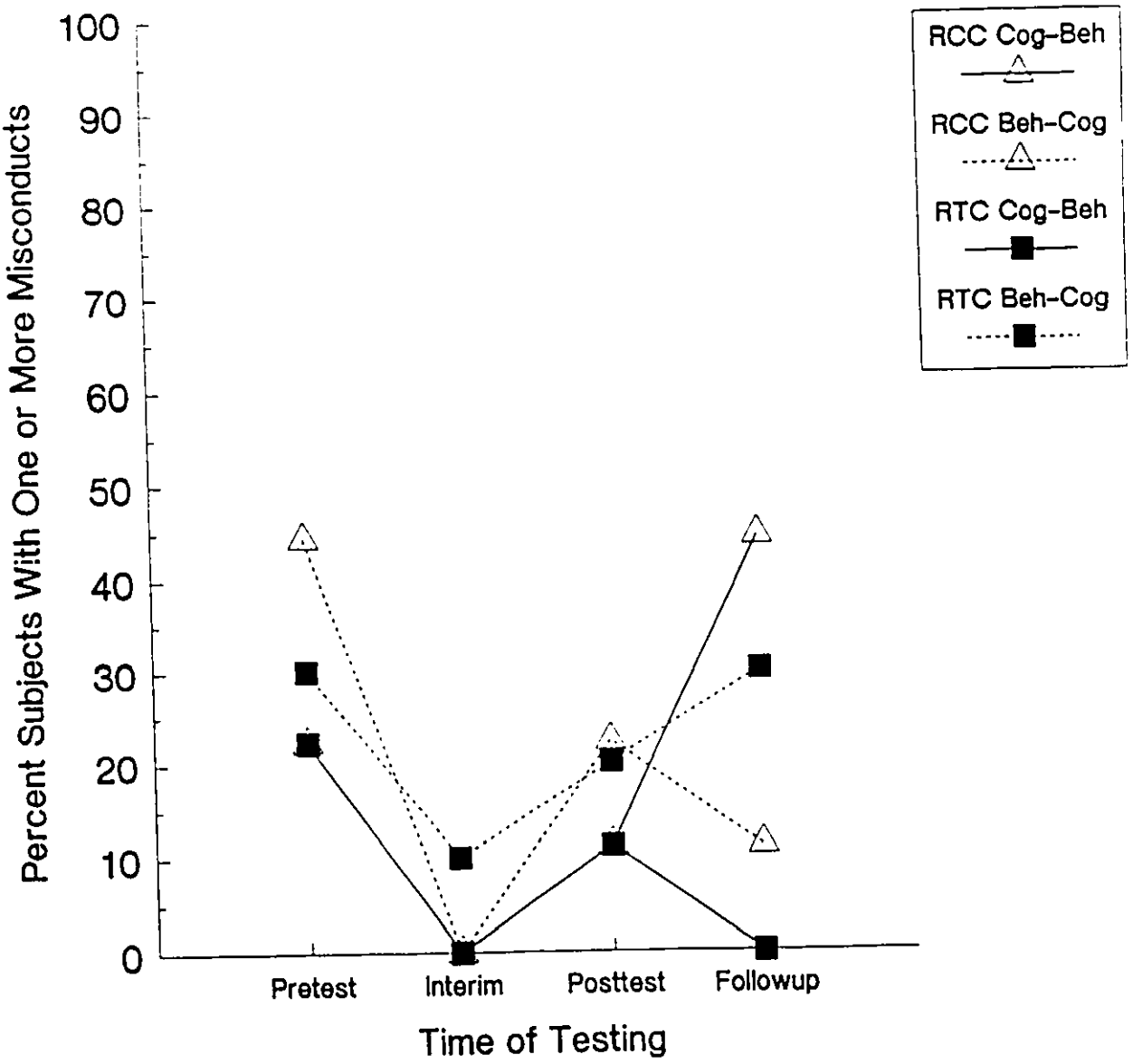


Total Misconducts (All Types)

Aggressive Misconducts. A 2 x 2 x 4 (Institution x Order x Time) ANOVA on the presence or absence of Aggressive Misconducts produced a significant main effect for Time, $F(3,99) = 3.54$, $p<.05$ (Figure 33). Individual comparisons revealed that aggressive misconducts significantly decreased pretest to interim test, $t(36) = 3.65$, $p<.001$. However, there was a significant increase in the number of subjects receiving misconducts from interim test to followup, $t(36) = -2.90$, $p<.01$. Furthermore, there was a nonsignificant trend suggesting that aggressive misconducts also increased from interim test to posttest, $t(36) = -1.96$, $p = .06$. There were no increases or decreases in the number of subjects receiving aggressive misconducts at any of the other testing phases (pretest vs. posttest, $t(36) = 1.40$, ns.; pretest vs. followup, $t(36) = .83$ ns.; posttest vs. followup, $t(36) = -.53$, ns.).

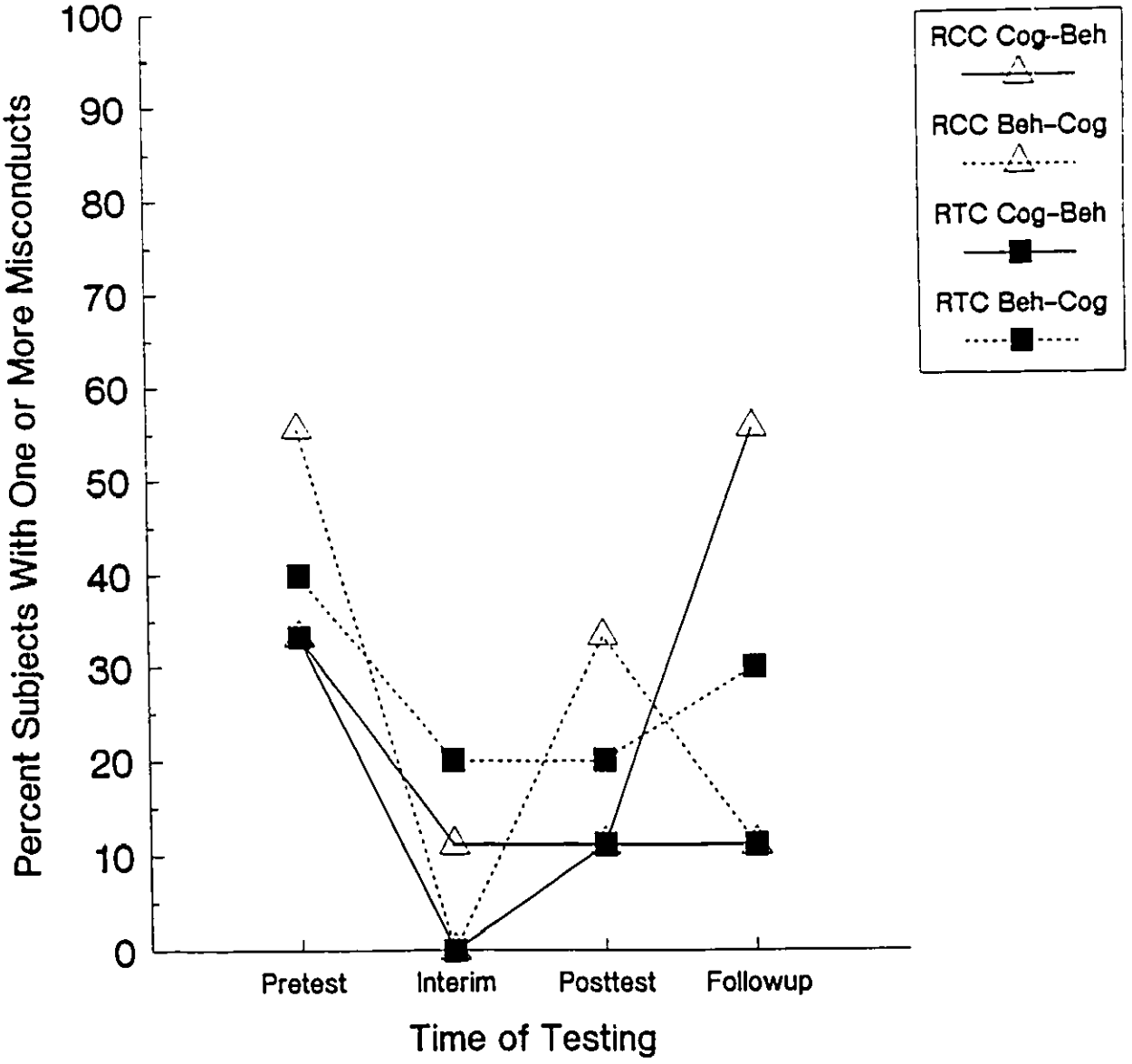
Rule Violation Misconducts. A 2 x 2 x 4 (Institution x Order x Time) ANOVA on Rule Violation Misconducts yielded a significant main effect for Time, $F(3,99) = 3.01$, $p<.05$ (Figure 34). There was a

Figure 33. Mean percentage of subjects in the cognitive-behavioral versus behavioral-cognitive treatment conditions who incurred one or more aggressive misconducts at pretest, interim test, posttest, and followup as a function of institution.



Aggressive Misconducts

Figure 34. Mean percentage of subjects in the cognitive-behavioral versus behavioral-cognitive treatment conditions who incurred one or more rule violation misconducts at pretest, interim test, posttest, and followup as a function of institution.



Rule Violation Misconducts

nonsignificant trend indicating that fewer subjects received misconducts from pretest to interim test, $t(36) = 1.96$, $p = .06$ However, there was a significant increase in misconducts from interim test to followup, $t(36) = -2.49$, $p<.05$; and a nonsignificant increase from posttest to followup, $t(36) = -1.78$, $p = .08$. There were no significant differences at any other treatment phases (pretest vs. posttest, $t(36) = 1.43$, ns.; pretest vs. followup, $t(36) = -.63$, ns.; and interim test vs. posttest, $t(36) = -.57$, ns.).

Cognitive and Behavioral Component Effects

The relative contribution to change by the cognitive and behavioral components was determined by calculating difference scores for each component. This was done on all dependent measures by subtracting the component prescore from the component postscore. Paired t-test comparisons were then conducted in order to ascertain the separate contributions of the cognitive and behavioral effects. Since the research design was such that the order of the components was reversed for half of the subjects, any primacy effects are balanced across the two components. There were

statistically significant differences between the cognitive effect and the behavioral effect on Tolerance for Law Violation, $t(34) = 2.22$, $p<.05$, where the behavioral effect was greater and on Identification with Criminal Others, $t(34) = -2.28$, $p<.05$, where the cognitive effect was greater. There were no statistically significant differences between the cognitive effect and the behavioral effect on the remaining dependent measures (i.e., Anger Inventory, $t(35) = 1.32$, ns.; Dimensions of Anger Reactions, $t(34) = .16$, ns.; Self-Report Ratings to Role-Played Provocations: Scene A (Inmate-Inmate), $t(35) = .58$, ns., Scene B (Inmate-Staff), $t(35) = .22$, ns.; Behavioral Ratings to Role-Played Provocations: Scene A and Scene B, $t(23) = .80$, ns., Scene A (Inmate-Inmate), $t(23) = .98$, ns., Scene B (Inmate-Staff), $t(31) = -.21$, ns.; Law, Courts, and Police, $t(34) = -1.02$, ns.). However, visual inspection of the mean change scores suggests that the behavioral component produced a slightly greater amount of change on all of the dependent measures with the exception of the Behavioral Ratings to Scene B (Inmate-Staff scenario) where the cognitive component produced

a slightly greater amount of change. It should be noted that none of these differences reached statistical significance levels.

Chapter 4

Discussion

Perhaps the primary contribution of this study is that it establishes that anger management treatment programs with adult male incarcerated offenders is effective. These were subjects with "real" anger problems, not simply college students exposed to experimental manipulations designed to elicit anger in contrived laboratory situations. Most of the present subjects had exhibited anger problems for many years and had reported histories of aggression and assault since early childhood. Typically, their problems with the legal system were attributed to inadequate temper control and lack of respect for authority figures. They complained of frequent or chronic feelings of anger which they usually discharged in impulsive and maladaptive ways. Thus, the subjects in the present study were individuals whose difficulties with anger profoundly interfered with their daily lives and contributed significantly to their involvement with the criminal justice system.

Treatment Effects

All four treatment groups benefitted significantly from the anger management program, as evidenced by improvements in self-report ratings of anger and criminal sentiments, objective behavioral ratings of verbal aggression following role-played provocations, and on some measures of institutional behavior. However, the majority of the therapeutic effects occurred during the first phase of treatment, regardless of whether this consisted of the cognitive or the behavioral component. The order of presentation of treatment components had few discernable effects at program completion. In addition, there were no differences between institutions on the majority of the dependent measures.

Statistically significant changes were observed on ten of the 11 dependent measures after the first ten sessions. Subjects reduced their anger-provoking thoughts and aggressive responses on four self-report scales, and improved their behavioral competence in anger-arousing situations (Role-Played Provocation tests) as rated by experimentally blind observers. In

addition, all experimental groups displayed a more prosocial orientation on two of the three Criminal Sentiments Scales at the end of the first phase of treatment. Moreover, treatment gains resulting from either the cognitive or the behavioral component became evident within a relatively short period of time. These results are consistent with other findings in short-term treatment studies (e.g., Stermac, 1986; Moon & Eisler, 1983; and Novaco, 1975).

Regardless of the therapeutic component to which they were first exposed, subjects perceived themselves to be less angry and aggressive and they displayed increases in socially skilled assertive behavior in the presence of anger provoking stimuli. These results are consistent with a study conducted by Rahaim, Lefebvre, and Jenkins (1980) in which assertiveness training and a focus on skills acquisition resulted in adaptive cognitive as well as behavioral changes. However, the findings are not consistent with results obtained by Moon and Eisler (1983) who reported that subjects participating in stress inoculation training significantly decreased anger provoking cognitions but

did not increase appropriate assertiveness, whereas the social skills and problem-solving subjects reduced anger provoking cognitions and also displayed improved assertive behavior.

Overall, the absence of different therapeutic effects following the cognitive or the behavioral components casts doubt on Novaco's contention that a strategy designed to restructure cognitions is essential for effective anger control. It is conceivable, however, that although cognitive and behavioral components target different behaviors for change, they may effect their changes through fundamentally the same mechanisms. For example, in the present study there was considerable overlap in terms of the general format of the two components as well as the actual content of the sessions and there were some behavioral aspects to both components. In fact, when Goldstein and his colleagues conduct their program, the two components are offered simultaneously and are viewed as complementary.

Exposure to the second phase of treatment, regardless of whether this was the cognitive or behavioral component, did not have a large effect on the majority of the dependent measures. However, there were some improvements during the second phase of treatment, notably on the Anger Inventory score and the self-reported intensity of anger experienced during role-played provocations (ASR). It appears that exposure to the second therapeutic component had the effect of increasing thresholds or tolerances for provocation. This finding suggests that the subjects' perception of anger-provoking incidents continued to improve in the second phase. Although, the second phase failed to augment the gains evident at the end of the first phase on the remaining measures, the initial gains were maintained throughout the second phase.

The continued reduction in self-reported anger (decreased physical and verbal antagonism and increased constructive action) following role-played provocations may reflect a concomitant increase in self-confidence or self-efficacy as participants experienced increased control and mastery over their anger. As a

consequence, subjects would have become more proficient at setting goals and developed more competence and flexibility in employing the new skills that they had learned. In other words, the continued improvement on these cognitive indices of anger during the second phase of treatment may have occurred because subjects, who learn to relate to their environment in a new way, began to think about their environment in a new and perhaps less threatening way. This finding is noteworthy since it contradicts previous research (Moon & Eisler, 1983) which failed to find any significant effects for treatment on the self-reported intensity of anger experienced during role-played provocations.

There were also improvements from interim test to posttest on the Tolerance for Law Violation scale, although this was only true for Treatment Centre residents. The RCC subjects showed TLV improvements from pretest to interim test but no further changes from interim test to posttest. Since all of the RTC residents (and none of the RCC residents) were involved in other programs prior to and during the anger management program, one might argue that any

differences between RCC residents and RTC residents were due to therapeutic benefits derived by RTC residents from these other programs. However, if this were the case, differences between RTC and RCC residents should have been seen on other measures as well and this did not occur. A more likely explanation is that RCC residents are more antisocial in their attitudes at the outset and thus exhibit larger and more rapid attitudinal shifts during treatment.

Improvements from interim test to followup were observed on only two dependent measures, Dimensions of Anger Reactions for all subjects and Tolerance for Law Violation, for RCC residents. The fact that there were no improvements on these measures from interim test to posttest on these measures might be interpreted as evidence that participants did learn something during the second phase of treatment but that a period of consolidation was necessary before therapeutic gains reached statistical significance levels. An alternative explanation is that those subjects who did not evidence additional improvement following the

second phase of the program did not complete the followup testing.

With regard to response maintenance, the followup data for the two scales assessing cognitive parameters of anger arousal and management are encouraging. Subjects in all four active treatment conditions continued to exhibit reduced levels of anger over the 2-month followup period. Results from one of these cognitive indices of anger (DAR) even suggest that treatment gains continued to accumulate slightly during the two months following termination of treatment, though this trend did not reach statistical significance levels. A similar pattern of results emerged from the followup data on the Criminal Sentiments Scale, where Tolerance for Law Violation and Identification with Criminal Others continued to decline during the two months following treatment, though again this trend did not reach statistical significance levels. Therefore, the overall findings from the five followup measures do provide some evidence of extended maintenance of treatment benefits.

Given the present results, one might be tempted to argue that only one of these components is actually required and that it does not matter which is offered since either component will produce much the same effects. However, subjects did benefit in some way from receiving the second component, as evidenced by the improvements from interim to post for AI and for self-reported intensity of anger experienced during role-played provocations (ASR), and from interim to followup for AI and DAR. It seems reasonable to conclude, therefore, that both components are beneficial but that order of the components is inconsequential. However, one cannot rule out the possibility that one or the other of the components is necessary but not both, provided that at least one of the components is offered for the full five weeks. It may even be the case that directing a subject to monitor and think about his anger is in itself sufficient to produce some improvements in anger indices, regardless of how this is achieved.

Generalization Effects

Although no followup assessment was conducted on the role-played provocations, the posttest generalization measures showed higher levels of self-reported anger to the novel role-played scenarios than to the repeated scenarios at posttest, suggesting that subjects did not totally generalize treatment gains to the new scenarios. However, the fact that subjects self-reported significantly less anger to the novel scenes at posttest than they did to the initial presentation of the original scenes prior to participating in the program indicates that a substantial amount of generalization did occur. One possible explanation as to why subjects did not totally generalize treatment gains at posttest is that, regardless of how proficiently subjects may perform in novel situations, they may still feel the intense emotion of anger. This may be due to limited cognitive repertoires, a lack of self-confidence in such situations, or a lack of sufficient practice with a wide enough range of training scenarios.

Further analyses of these data produced an unexpected but important finding. The objective behavioral ratings of verbal aggressiveness during the novel role-played provocations revealed that on the Inmate-Inmate scenario and the combined scenes (Inmate-Inmate and Inmate-Staff scenarios) subjects showed reduced verbal aggression, suggesting that treatment effects had generalized. On the novel Inmate-Staff scenario at posttest, subjects showed significant generalization when their scores were compared to pretest scores, however, their responses were significantly poorer than their responses to the original stimuli at posttest. The reasons for this difference are not entirely clear. Moreover, the results are in contrast to previous studies (Gaertner, 1983; and Schlichter & Horan, 1981) which found a strong degree of generalization to both novel Inmate-Inmate and Inmate-Staff scenes. Possibly, the novel Inmate-Staff scenario was different in some important feature from the familiar Inmate-Staff scenario. If this were the case, the familiar-novel comparison would not constitute an appropriate generalization test. Since provocations were not counterbalanced for order,

it is impossible to determine whether differences at posttest were actually due to not having equivalent scenarios or to a failure to generalize totally the treatment effects.

There is another possible explanation for subjects failure to totally generalize their gains on the role-played Inmate-Staff scenarios. Possibly, the subject must also have a reasonable expectation of a successful outcome to the anger interaction. Most inmates in a correctional institution have quite an extensive history of confrontations with correctional staff. In the vast majority of those interactions, it is the staff member who "wins" the confrontation. Thus, it would not be surprising to learn that the inmate would approach yet another such confrontation with a sense of futility or helplessness (cf. Seligman & Beagley, 1975; Seligman, Klein & Miller, 1976; Miller, Rosellini & Seligman, 1977). This, in itself, might fuel his feelings of frustration and anger. In reality, this influence would be potentiated if the staff member were to approach such an interaction in an overly aggressive or defensive way because of his own history of

confrontations with inmates which would have led him to expect obstinacy and aggression on the part of the inmate.

Institutional Behaviour

The misconduct data, which were analyzed in terms of total misconducts, aggressive misconducts, and rule violation misconducts, yielded several interesting results. Analyses of the percentage of participants receiving misconducts provided a measure of practical effectiveness which was important in a prison setting where release can be contingent on the frequency and nature of such misconduct reports. However, it should be noted that this measure produced low frequency data which provided only a crude measure of treatment effectiveness. A consistent pattern of results emerged on the misconduct data. The percentage of aggressive, rule violation, and total misconducts all decreased following the first phase of treatment. No subsequent changes occurred during the second phase of the program except in the case of aggressive misconducts where there was a nonsignificant increase. The only significant change from pretest to posttest

was a decrease in the total number of misconducts. Unexpectedly, all groups increased in terms of percentage of aggressive, rule violation, and total misconducts from interim test to followup. Moreover, there was a nonsignificant trend toward an increased number of aggressive misconducts from posttest to followup.

Few conclusions about treatment efficacy can be made from the misconduct data. Exposure to the first phase of the program may have had some practical utility for some of the participants. On the other hand, it could be argued that training offenders to become more proficient at handling situations assertively may not necessarily be reflected in fewer misconduct charges, given the social psychology of the prison environment. The influence of peers alone can have a powerful effect on a resident trying or failing to control aggression, particularly since aggressive behavior is largely viewed in the institutional environment as the manly and appropriate way to respond to a provocation (cf. Toch, 1969). In some cases, prison staff may also model or reinforce aggressive

responses to provocation (Bandura, 1973).

The present misconduct data are not inconsistent with previous findings. Although Glick and Goldstein (1987) found that treatment decreased the number and intensity of acting-out behaviors, the positive effects were not maintained when this study was replicated with more severe offenders (Goldstein & Glick, in press). In a similar vein, Gaertner (1983) reported that treatment-induced reductions in aggressive misconducts were not maintained at followup, while Schlichter and Horan (1981) found that treatment had no effects on institutional behavior ratings.

Order of Treatment Components

The order of presentation of the therapeutic components (anger control training and structured learning therapy) had little effect on any of the anger measures (AI, DAR, ASR, objective behavioral ratings, and institutional misconducts) at program completion. Overall, the absence of Treatment Order effects indicates that it does not matter which component is offered first because either order will produce much

the same effects at posttest. Although the order of presentation of the components was inconsequential on the majority of the dependent measures there was one exception. The results for Identification with Criminal Others (ICO) depended on order of presentation of the treatment components. Subjects receiving the cognitive-behavioral sequence showed lower self-reported ICO from pretreatment to posttreatment, but subjects receiving the behavioral-cognitive sequence showed only a nonsignificant trend towards lower ICO from pretreatment to followup. The results from the cognitive-behavioral sequence demonstrate the value of prosocial role models to the residents when supplemented by a behavioral component that provides specific techniques to achieve the desired ends. However, these results should be interpreted with caution since this scale consists of only six items.

Cognitive and Behavioral Component Effects

Separate cognitive and behavioral component effects were calculated for each group based on dependent measures immediately before and after the relevant component for each group. It should be noted

that these cognitive and behavioral effects are not pure measures as there were some behavioral aspects to both components. Thus, hey provide only a crude measure of the separate contributions of each component. These results revealed that on all but two of the dependent measures there was no difference between the cognitive effect and the behavioral effect, although, there was a nonsignificant trend indicating that the behavioral component produced a slightly greater amount of change on eight of the ten dependent measures. Nevertheless, the present results confirm previous indications that both components contributed equally to the overall effectiveness of the anger management program. The exceptions were two of the Criminal Sentiments scales, TLV and ICO, which showed statistically significant differential contributions made by the two components. On the TLV scale, the behavioral effect was significantly greater than the cognitive effect. In contrast, the cognitive effect for the ICO scale was significantly greater than the behavioral effect. This difference was unexpected, since these two subscales are highly correlated. Moreover, one would expect that the cognitive effect

would be greater since the scales are measuring attitudes which should be more susceptible to cognitive restructuring then to skills training. There are no obvious explanations for this finding, and it may be merely a statistical anomaly.

Institution Effects

There were no treatment differences between institutions on the majority of the dependent measures. This finding suggests that other aspects of the Treatment Centre milieu had no discernible effects, neither diminishing nor enhancing the benefits of the anger management program. Thus, it is reasonable to attribute the observed gains to some part of the anger management program itself. Moreover, the fact that treatment gains occurred over two separate facilities at two different time periods lends further credibility to these treatment results.

Two of the Criminal Sentiments scales, Tolerance for Law Violation (TLV) and Identification with Criminal Others (ICO), require comment. With regard to the TLV scale, there were differences between

institutions prior to treatment, with Treatment Centre residents exhibiting lower tolerances for law violations than Correctional Centre residents. This finding is in itself not very surprising, since the presence of prosocial attitudes is one of the factors routinely considered in evaluating a resident's amenability to treatment and motivation for change and is one of the selection criteria for placement in the Treatment Centre. Thus, the TLV differences are likely due to the selection process in assigning residents to their respective facilities. The fact that Treatment Centre residents displayed a more prosocial orientation at the outset and were more likely to be involved in other treatment programs prior to participation in the anger management program may explain why no significant differences were found between pretest and followup for these subjects, whereas Correctional Centre residents did show some improvement across this time period.

When the followup data on Identification with Criminal Others (ICO) were analyzed the Treatment Centre residents demonstrated a nonsignificant trend towards improvement (lower ICO) from pretest to

posttest and a significant improvement from pretest to followup. In contrast, Correctional Centre residents improved following the first phase of treatment, following the second phase of treatment, and from pretreatment to followup. Taken together, these results suggest that Correctional Centre residents derived greater benefit from the program in terms of a more prosocial orientation, though again this seems to have occurred because their orientation at the start of treatment was more antisocial than RTC residents.

Implications of the Present Study

Social learning theory has postulated that psychological changes achieved by different modes of treatment are mediated by a common cognitive mechanism, the expectation of personal efficacy (cf. Bandura, 1977). The results of the present study are consistent with Bandura's assertion that treatment based on actual experiences of personal mastery provides important sources of self-efficacy information. Moreover, the temporal parameters of the learning which occurred during the anger management program conform to the classical learning curve, that is, a rapid rate of

change early in training followed by a progressively diminishing rate of change as the curve approaches asymptote (Hulse, Deese, & Egeth, 1975). Thus, the pattern of results is not surprising in the context of learning theory and if Bandura's contention is correct, it is even predictable in the context of social learning theory. Certainly, an analysis along these lines might explain the failure of treatment effects to generalize to new Inmate-Staff interactions, as suggested above.

The substantial prosocial changes, which included increased respect for the criminal justice system, decreased tolerance for crime, and decreased identification with criminals, may be surprising. However, though the program was designed to help subjects deal with one specific antisocial behavior, namely, maladaptive anger arousal and aggressive behavior, it is not unrealistic to expect such a program to have effects on other antisocial behaviors. Several studies (Andrews,1980; Andrews, Wormith, Kennedy, & Daigle-Zinn, 1977; Andrews, Young, Wormith & Searle, 1973; Wormith, 1984) have demonstrated the

positive therapeutic effects of exposing offenders to prosocial role models in a structured context.

The overall format of the program, the nature of the discussions, and in particular the role-played scenarios clearly had a prosocial orientation. Typically, subjects would bring situations in which they had been involved to the sessions for discussion. While these real life situations always involved anger and aggressive behavior, the successful resolution of the "hassle" often dictated that the subject employ a more prosocial approach to the problem. For example, in responding to dealing with group pressure, the subject would have to make the decision not only to reject the antisocial behavior but also to articulate the reasons why he wanted to do so, which necessarily required the articulation and justification of prosocial attitudes. Though subjects were not coached by the investigator prior to their role-played demonstrations in terms of what course of action to take, they consistently chose prosocial solutions. In many ways, Goldstein and Glick's third component of

Aggression Replacement Training, moral reasoning, was touched upon in the current two components.

Limitations and Directions for Future Research

This study clearly establishes the effectiveness of anger management programs in two samples of incarcerated adult offenders. In addition, the effects were replicated in two groups of delayed treatment control subjects who subsequently participated in the program. However, the utility of the anger management techniques used in this study may not generalize to more secure correctional settings. For example, some of the examples and discussion topics in the treatment package are directed at residents who will have an opportunity to gain release and therefore to apply the techniques to the outside world within the next few months. However, in a maximum security facility, residents are likely to be serving longer sentences and scenarios based on the external environment may have little relevance for them. Thus, some adjustments in the treatment package would be needed before these techniques could be employed in some other settings.

Because the majority of the treatment effects occurred within the first phase, it is difficult to isolate the specific individual contributions of the anger control component and the structured learning component on outcome or indeed to determine whether the two components had any unique effects. In retrospect, it would have been helpful to have included two additional treatment conditions, a group which received only anger control training and a group which received only structured learning therapy. Due to institutional programming limitations and time constraints, this was not feasible for the present study but future investigations should give this serious consideration. In the present case, there were no institutional differences, no effects of order of presentation of treatment components, and virtually no effects which could be attributed specifically to either the cognitive component or the behavioral component alone. All four treatment groups benefitted equally from the anger management program.

Although there were few significant differences between the cognitive component and the behavioral

component, the behavioral effect was slightly greater on the majority of the dependent measures. There were, however, two exceptions where the cognitive effect was slightly greater: identification with criminal others and the behavioral ratings for the Inmate-Staff scenario. These findings are interesting particularly in light of the fact that subjects were unable to totally generalize therapeutic gains to the novel Inmate-Staff scenario. In view of these results, it might be advisable for future research to attempt a more detailed microanalysis of the differential effects of anger control training and structured learning therapy.

One particular shortcoming of the present study was that the same therapist was used for all groups. Consequently, the results may be unique to this particular therapist. Ideally, the design would have assigned several therapists to an equal number of participants in each treatment condition to control for possible therapist effects. Nonetheless, a comparison between the two time periods during which treatment was offered indicated that there was neither a practice nor

fatigue effect for the therapist. In other words, subjects benefited equally, regardless of when they received treatment.

An additional variable for future investigation is length of treatment. At the end of the program, several of the participants expressed disappointment that the program was over. They indicated that they had really enjoyed the program, but felt it was too short as they were just beginning to get "a better handle" on their anger. They believed that they could have benefitted from additional training. This suggestion is given partial support by some of the followup measures as described above. Participants also suggested that an advanced anger management program should be developed. It should be noted that six of the 37 inmates were charged with a total of ten misconducts during the final two days of the program. When the investigator inquired as to what had happened, a few stated "see - we do need more anger management". However, it was impossible to determine whether their behavior was part of the residents' manipulative strategy. Regardless of whether or not the misconducts

which occurred as the program was ending was a manipulative strategy, it suggests that extending the program should or might be considered. These findings are also interesting in light of the fact that Goldstein et al (1987) have suggested Advanced Anger Control Training as a candidate for curriculum development.

If the present study was unable to establish a differential advantage of either anger control training or structured learning therapy in anger management, the results do indicate that treatment had a positive impact on the behaviors targeted for change (intermediate gains) and that these gains in some cases generalized to other behaviors within the institution. A remaining question is whether or not the treatment benefits will transfer and generalize over the long-term to the community and to post-release criminal behaviors as measured by recidivism rates and recidivism severity. At this point, arrangements are being made with the Ministry of Correctional Services to conduct a post-release followup study on the

participants of this program so that this question might be addressed.

Conclusion

Traditionally, the response to aggressive behavior in a prison setting is punishment. The results of the present study indicate that anger management can reduce anger arousal and verbal aggression, increase socially skilled assertive behavior, and lead inmates to adopt a more prosocial orientation. Clearly, the current study calls for the continued development, implementation, and empirical evaluation of such alternatives to the problem of antisocial and aggressive behavior in prisoners.

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APPENDICES

Appendix 1

Anger Management Program Announcement

Anger Management Program Announcement

Do you frequently lose your temper and get angry? When you are angry do you sometimes do things you later regret? When you are angry do you have trouble expressing yourself? Do you say and do things before you really think about what you are doing? Do you get into fights? Have you ever assaulted anyone?

Everyone knows how easy it is to lose one's temper. Some individuals seem to have more difficulty managing their anger than others. In the near future, a treatment program carried out by myself under the auspices of the Department of Psychology at Rideau Correctional and Treatment Centre will offer a voluntary treatment program to individuals who have problems controlling their anger. The focus of this program is to teach you to deal with your anger in an effective and appropriate manner.

There is also a research component to the program. That is, I want to measure how effective these treatment are. Those who participate in the program will be

assigned to half day programming by the work board for a period of 5 weeks. If you are interested in obtaining more information about the program and how you can become involved, fill out and sign the attached information blank. Please return the signed form to any psychology or classification staff member. The signing of the information blank is strictly voluntary and in no way obligates you to participate in the program.

Thank you for your cooperation.

Sincerely,

Sharon Kennedy

Information Blank

I,_____, wish to obtain more information about the Anger Management Program. I would like Sharon Kennedy to explain the details of the program including its possible risks and benefits. I agree to provide information to help determine if I qualify for this program. I realize that I am in no way obligated to participate in this program.

Signature _____

Date _____

Appendix 2

Consent Form

Informed Consent Form

I _____ have agreed to participate in the Anger Management Program being offered by Sharon Kennedy at Rideau Correctional and Treatment Centre. The purpose of this program is to teach me how to better control my anger through various cognitive and behavioral approaches which have been shown to be successful in reducing maladaptive anger. The program has been explained to me thoroughly by Sharon Kennedy. I understand that my participation in this program is strictly voluntary and that I may withdraw at any time without penalty. I also understand that all test results and information concerning my participation will be kept completely confidential. Information will not be given to anyone nor will it be entered into any type of official record unless I give my written consent.

I understand that the program consists of 23 half days of treatment for a five week time period. The study will require me to fill out questionnaires, listen to some tapes and answer some questions about what I

hear on those tapes, and role-play some situations which will be tape recorded. The above will be conducted prior to participating in the program, during different phases of the program, as well as, once I have completed the program. The purpose of this is to provide information about how I handle my anger and to see if any of the techniques that I have been taught help me to control my anger better. I am aware that staff at Rideau will be making behavioral reports about my anger related behavior. I have also given permission that both my probation/parole officer or myself may be contacted if I am paroled or released within eight weeks of completing the program, to find out how well I am managing my anger.

Participant's signature_____

Date_____

Investigator's signature_____

Date_____

Appendix 3

Trainer's Manual

TRAINER'S MANUAL

ANGER MANAGEMENT TRAINING

PROGRAM FOR ADULT MALE OFFENDERS

Adapted from Goldstein et al. (1987),

Gaertner (1983), and Novaco (1975)

COMPONENT 1: Anger Control Training

The first component of the Anger Management Training Program is called Anger Control Training. Its main goal is to teach inmates (1) to understand what causes them to feel angry and act aggressively and (2) techniques they can use to reduce their anger and aggression. Many inmates believe that in many situations they have no choice: the only way for them to respond is with aggression. Although they may perceive situations in this way, it is the goal of anger control training to give them the skills necessary to make a choice. By learning what causes them to become angry and by learning how to use t series of anger reduction techniques, inmates will become more able to stop their almost "automatic" aggressive responses long

enough to consider constructive alternatives. For the next eight sessions inmates will learn to understand the external and internal cues which chronically instigate their anger responses and will be armed with a set of anger inhibition and anger-reduction techniques to be used in provocation situations.

SESSION 1 & 2

1. Explaining Program Goals

In the first session it is necessary to introduce the program, "sell it" to the trainees, and get their commitment to participate. The basic introduction involves talking with the trainees about how being angry and aggressive can at time lead to trouble for them with authorities (police, school), with peers, and even with regard to how they feel about themselves. The following strategies will help the trainer to "sell" to the trainees the idea that leaning to achieve greater control of their anger is a worthwhile task.

The trainer can give examples of admired people who have excellent self-control, for example, Bruce Lee and

Suger Ray Leonard. These people would not/could not be successful by being out-of-control. These examples help make the point that having more self-control does not mean that the trainees will be pushed around or be "wimps".

After providing the examples, the trainer explains how greater self-control means greater personal power. Trainees are more powerful when they are in control of their reactions to others, despite the attempts of others to provoke them. By being aggressive, they allow others to control them.

2. Explaining Rules and Procedures

It is essential to present procedural matters at the outset of the program. The trainer beings by explaining that meetings will be held everyday for 6 weeks on (day) at (time) and will last 2 hours. At these meetings, each trainee is expected to participate actively, cooperatively, and with respect for the other trainees. Homework will be given and used as the material for the next session; therefore, completion of the homework is required for the success of the program.

Different techniques for anger reduction will be taught by (1) explanations and demonstrations by the trainer and (2) practice in the form of role playing by trainees. Trainees will get to role play the anger control techniques in the situations they bring to each session, so that the next time the situation or a similar one occurs, they will have the choice to do something other than get angry.

3. Introducing Education Component

There is always a lot of talk in the institution about people snappin' out, showing an attitude, or losin' their cool. There is also a lot of talk about the tensions and pressures inside this place and guys talk about the difficulty and struggle to stay cool. A man can get pissed off pretty easily and lose his temper which is really bad because he can end up staying longer in a place where he did not want to be in the first place. When you can't control your temper, you end up having other people punishing you and doing things to control it for you. The bottom line of all this is that you suffer the consequences and so does your family who do not always understand why you are not coming home on

parole or a TAP.

So what we are going to try to do is have you get a better understanding of what losing your temper means. From now on, however, we will refer to this as not having control of your anger. Anger control does not mean stopping all anger expression or bottling it up. It does mean controlling it to your benefit, but first we need to know what anger is. Anger is an emotion just like fear and love and emotions. For you to experience this emotion, some type of frustration or provocation needs to be applied to you. In jail, provocation can come from many sources including staff, other inmates, or the noise level in the block. When you have an anger reaction, both your body and head are involved. Your whole body is aroused, which means your heart beats faster, your muscles tense all over, and your blood pressure rises. A the same time, inside your head your brain is processing what is going on. What you think or say to yourself while you are being provoked will help determine how you will act. For example, a staff member is telling you something you did wrong and you say to yourself, if he does not get our of my face and stop

harping on this I am going to club him.

Overall though, your head and body work together and thus can occur in a spit second (like when you act impulsively) or over an extended period of time (like when you may be brooding about something). (The participant should be allowed to discuss what is involved in an anger reaction).

Later I will talk about what causes your anger, but now I am going to get into the good and bad of anger. Many people from their early learning are told anger is good and the only way to handle things, while others say anger is bad or it is wrong to feel anger. Some people will even avoid expressing anger and they let it build up inside only to explode later on. As you will see, anger like other emotions has both good and bad functions in your everyday behavior.

On the positive side, anger can:

1. Provide go power and act as an energizer to mobilize your body for self defense. For example, if you are under physical attach and you need fuel

to defend yourself. It can also pep you up and give you stamina when you are faced with a difficult task. For example, you are working on a mechanical problem on your car and after an hour you still can't get it right, you get angered by the situation and use that anger to become more determined. Of course if you get too hot about the problem, you won't be able to fix it.

2. Express your tension and communicate negative feelings constructively. For example, instead of bottling up your anger or going on an all out assault on another person's character you could tell a frequent borrower of your stuff, I am pissed off about you not returning the last magazine right away, how about being on time the next time.

3. Cues you that something annoying or irritating is going on and also serves as a signal to cope with the annoyance by controlling your anger. For example, you are explaining something to another person and a "buttinsky" tells you that you don't know what you are talking about. When this guy says this, your body becomes tense and lets you

know that you are getting angry and also that you have to control yourself because if you don't, you're going to deck the guy.

You may be pretty familiar with the negative sides of anger, because people have been preaching to you about it for some time. So that you can compare the positive with the negative, I will list some of the negative or bad points.

Anger can:

1. Disrupt your thoughts and actions. When you get really pissed, you can not think straight and you say or do something impulsively. For example, there are times you get so ticked at someone on the phone that you say something that you later regret. Like calling your wife or a friend names.

2. Move you to defend yourself when it is not necessary. This is when you get angry to save face. For example, you are in a group of people and you do something dumb like tripping over a chair. The people laugh and instead of feeling

embarrassed or laughing, you get ticked off and tell them all where to go.

3. Create an image or front and promote an impression of yourself. For example, how many guys have you seen carry themselves physically and verbally in an angry, mean manner. They react angrily to situations big or small to intimidate people and show how bad they are.

4. Can instigate aggression which does not involve you using force to protect yourself. While anger does not always lead to aggression, when you get upset and release your feelings through your behavior you can take it out on someone else or some object. For example, you get bad news from home and it pisses you off more than anything. To release these feelings, you kick in your T.V. set or slug the next guy that tries to bum a cigarette.

(Discuss functions of anger and make sure participant has attitude that anger is not always bad).

Now that you realize anger is not always bad, let's discuss when it is a problem. There are four things that indicate if a person does have a problem in anger control. Try and think how these apply to you. (Show chart with for points listed).

You have a problem with anger control:

1. If you find your anger usually leading to aggression either verbal aggression like in the form of threats or character assaults or physically like in the form of punching or pushing. While cursing or slugging someone can provide immediate relief of your muscle tension, it also results in poor human relations, institutional misconducts, parole set off, and disappointed and sometimes confused family members.

2. When your anger is too frequent. There are many situations where anger is justified and appropriate. For example, if someone steals something from you. However, sometimes people find themselves getting angry too often over any little

thing. They can jump to conclusions about what someone else says or does. If you recall, anger has positive functions, so if a person is getting anger all the time, he will have trouble figuring out when it is ok to be angry and when it is not a good idea. He generally looks at the world through glasses tinted with anger.

3. When your anger is too intense. Anger occurs at different levels of intensity, kind of like the burners on a stove where you have high, medium, low. If someone pisses you off and you can keep you anger from going beyond a medium or moderate level, you are better able to say what's on your mind. When your burner is too hot or your anger too hot, you are likely to jump to conclusions or do something without thinking.

4. When your anger lasts too long. This means you can't cool down after a provocation. You may have had times when someone has said something that got you pissed and about an hour later when you are in your house you're still ticked. It may even be days before you calm down. When you do brood this

long, your body functions abnormally and your blood pressure is affected. Also, sitting around and thinking about a situation that ticked you off also sets you up to get angered pretty easily by different circumstances. For example, you're brooding about a confrontation you had with a staff member and later on that day your wife or girl friend tells you on the phone that she can not visit this week as planned and you explode on her because you were boiling prior to the call.

Overall, if you take you anger to extreme levels and physically and verbally attack someone or if it is too frequent, too long and too intense, you definitely have a problem in controlling your anger and certain things can happen to you:

1. As was mentioned before, your body changes when you get angry. It's really like a complex machine and an anger control problem can cause a lot of unnecessary wear and tear on that machine. What happens is the parts of that machine (like your heart) wear out a lot quicker. The bottom line is that you could be setting yourself up for health

problems.

2. An anger control problem can affect your performance on your job or in school by interfering with your ability to concentrate on work or school assignments. For example, you're more likely to be thinking about what pissed you off than what is going on in your job. This can especially be a problem if you're working around machinery or driving a vehicle.

3. An anger control problem can affect how other people respond to you. If you've got a hot head, people can start doing things to get you mad just to amuse themselves. They can pull you chain intentionally and control your behavior. Some people may start shying away from you or avoid you because your anger control problem makes them feel uncomfortable. Other people may start acting hostile toward you since your hostility brings out their anger. This can especially be a problem if you're around a lot of other people who have trouble controlling their anger.

4. An anger problem can result in some type of administrative action against you. For example, a new charge, lack of support for TAP's, or a parole set off.

5. Finally, you can get physically hurt by provoking someone else.

(Discuss anger control problems and how it can affect a person).

So far we have talked generally about what anger is including its positive and negative functions as an emotion. We also have discussed when anger can be a problem and how it can affect you.

4. Reviewing

A brief review of the reasons for developing greater self-control, the rules and procedures of the group, and the education component ends the meeting. Finally, the trainer gives each trainee an education component handout (see Appendix 1) and a binder that they will use to hold all of the program materials and

reminds them of their commitment to the program.

SESSION 3

1. Reviewing the First Two Sessions

Trainees should be reminded that they increase their personal power by having control over their reactions to others. Again, providing examples of popular sports figures who demonstrate exceptional self-control that leads to their success is helpful. The trainer should review the rules and procedures, emphasizing that this program will involve learning anger control techniques by watching them being demonstrated and then practicing them. Then the trainer goes over the education component reminding the group of the positive and negative functions of anger and when anger can be a problem.

2. Introducing the Hassle Log

The trainer shows the group an example of the Hassle Log (Figure 3) and asks someone different to read each item. Then he explains the importance of the log: (1) It provides an accurate picture of conflicts that

occur during the week; (2) it helps trainees learn about what makes them angry and how they handle these situations (so that they can work to change those that they handle poorly, that cause them trouble, and that leave them feeling bad about themselves); and (3) it provides material for role playing in future sessions (using situations that really happen makes practicing the anger control techniques much more effective than using "made-up" situations). At this point, the trainer gives an example of a conflict and how to fill out the Hassle Log for it. The Hassle Log should be filled out for situations that trainees handle well in addition to those in which they become angry or aggressive. The trainer makes sure each trainee understands how to complete the Hassle Log by having each of them fill out a log in the session for a recent hassle. Then the trainer checks the logs and corrects any misunderstanding of the instructions. Trainees receive a stack of Hassle Logs to keep in their binders and are instructed to fill them out as soon as possible after an incident.

3. Giving Initial Assessment of the A-B-Cs

The trainer should explain to the group how each conflict situation has three steps: (A) What triggered the problem? What led up to it?, (B) What did you do? (the actual response to "A"), and (C) What were the consequences to you and to the other person? Then the trainer gives examples of how he has handled some conflicts, being sure to point out the "A", "B", and "C" steps. Finally, trainees give examples, and the trainer helps them identify the "A", "B", and "C" steps operating in the situation.

4. Reviewing

The trainer reviews the Hassle Log and reminds the group of the importance of completing it. A brief review of the A-B-C's ends the meeting.

SESSIONS 4 & 5

1. Reviewing the Third Session

The trainer goes over the A-B-C model of conflict reminding the group of the three steps in each conflict. The trainer gives and example and asks a few trainees

for examples from their hassle logs and prompts them to identify the A, B, C's of a given anger-provoking situation.

2. Discussion Cues

Every person has physical signs that let him know he is angry: for example, "getting hot", rigid posture, angry stare, facial muscles tensed, muscle tension, a knot in the stomach, clenched fists, grinding teeth, or a pounding heart. The trainer should give some examples of the signs that let her know when she is angry and explain that individuals must know they are angry before they can use self-control to reduce the anger. Next, the trainees try to identify their own and each other's warning signs by role playing short conflict situations. The trainer gives feedback on how well each trainee could identify the warning signs or cues.

3. Discussing Anger Reducers 1, 2, 3, 4, and 5

Now that the trainees have begun to be able to identify their anger warning signs (cues), they can start to make use of anger reduction techniques to increase their self-control and personal power when they

notice themselves getting angry. Any or all of the fire anger reducers can be a first step in the chain of new behaviors giving the trainees greater self-control and the time needed to decide how to respond most effectively. The key sequence here is that noticing the cues leads to use of an anger reducer. As the trainer presents each of the five anger reducers, he models its use, has the trainees role play the sequence "cue + anger reducer", and then gives feedback on the role plays.

Anger Reducer 1: Deep muscular relaxation

The trainee was instructed to learn the difference between a relaxed state and a tensed state specially since his muscles got tight and blood pressure rose when he was angry. Deep muscular training was also presented as a way the trainee could "cool down his system" after he became angry. Then the trainer models, has trainees role play and gives feedback on the sequence of "cues + deep muscular relaxation". The trainees were asked to practice the technique for at least twenty minutes a day between sessions. To facilitate practice, an outline of the script was given to each trainee and an audiotape of

the sequence was available for review between sessions. A form was also given to chart practice times and problems with the technique.

Anger Reducer 2: Deep breathing/relaxation through recall

The trainee is instructed to focus his attention on his breathing and take a few slow deep breaths and with each exhalation he repeated the word calm or any other work he chose to equate with relaxation. Trainees are told that this can help in making a more controlled response in a pressure situation. Examples from sports of taking a few deep breaths (e.g., in basketball - before taking important foul shots, and in boxing) can be presented. Trainees are reminded about their signs of being angry and how deep breathing can reduce tension by relieving physical symptoms of tension. Then the trainer models, has trainees role play, and gives feedback on the sequence of "cues + deep breathing relaxation-through-recall".

Anger Reducer 3: Backward counting

A third method of reducing tension and increasing

personal power is to silently count backward (at an even pace) from 20 to 1 when faced with a pressure situation. Trainees should be instructed to turn away from the provoking person or situation, if appropriate, while counting. Counting backward is a way of gaining time to think about how to respond more effectively. The trainer models, helps trainees role play, and gives feedback on the sequence of "cues + backward counting".

Anger Reducer 4: Pleasant imagery

A fourth way of reducing tension is an anger-arousing situation is to imagine a peaceful scene that has a calming effect (e.g., you are lying on the beach. The sun is warm, and there is a slight breeze). The trainees are encouraged to think of scenes they find relaxing (e.g., imagining doing something they enjoy, imaging a pleasant circumstance that happened in the past or can happen in the future. Then the trainer models, helps the trainees role play, and gives feedback on the sequence of "cues + pleasant imagery".

Anger Reducer 5: Negative and positive consequences

A fifth way of reducing tension and making a more

controlled response in a pressure situation is to first imagine the negative consequences of poor anger control and then imagine the negative consequences removed when the controls his anger. Then the trainee models, helps the trainees role play, and gives feedback on the sequence of "cues + negative and positive consequences".

4. Reviewing

Each member's warning signs of anger (cues) and the five anger reducers are reviewed. Homework is given in which the trainees will attempt to use each of the five anger reducers during one situation in the coming week in which they notice they are getting angry. Trainers will note on their Hassle Logs for that situation which anger reducer they used.

SESSION 6

1. Reviewing the previous sessions

The trainer reviews the cues and anger reducers taught in previous sessions by going over the completed Hassle Logs for those situations in which trainees used one of the five anger reducers assigned in the homework from the last session. Reinforcement is provided for those trainees who successfully used the reducers following the identification of the warning signs (cues) of being angry. The trainer checks to be sure the Hassle Logs are filled out properly.

2. Discussion Triggers

The trainer reviews the idea that each conflict situation has an "A" (trigger), "B" (behavior), and a "C" (consequence). The goal is to help trainees identify things that trigger, or arouse, their anger. Both external and internal triggers will be described.

In order for you to gain better control of your anger, you will need to get an idea of what causes your anger. When you have an anger reaction to a situation,

it is the result of a combination of what we will call external triggers or what happens outside your self and internal triggers or what happens inside you head and body.

Let's first look at the possible external events:

1. Frustrations: This is when you are blocked or prevented from trying to do something. For example, you have call out to see your counselor about an important matter and despite your yelling your head off, you can not get an officer to open your door.

2. Annoyances and Irritations: These are minor incidents that get on your nerves like accidentally breaking something, or the guy next door playing his radio too loud.

3. Abuse: This can be verbal like when someone calls you or your loved ones a name or when someone says something derogatory in front of other people to make you feel like a chump and which can be physical like someone punching, grabbing, kicking

or pushing.

4. Injustice or Unfairness: These are situations when you or other people have not been treated fairly or you did not receive what you deserved. This could be either intentionally or unintentionally. For example, you work hard and avoid write ups, but a judge turns you down for a TAP or there are three other guys in the chowline with you and all of you have your shirt-tails out and the officer tells you alone to tuck yours in.

Now to understand the role that these external triggers play in causing your anger, you must realize that when these events do happen in your life, it does not always mean you will get angry. What you must realize is that each person will react differently to the same situation. You have seen for yourself the different reactions people give to getting a parole flop. Some people explode, some cry, some tell how ticked they are but don't blow up, and some people act as if they could care less. Basically, through our experiences in life we have learned our own familiar

ways to respond to the different types of external triggers. Our way of responding makes each person unique and is influenced by what we previously mentioned as internal triggers. If you will recall, there are two kinds of internal triggers which include what happens in your head (which we will call cognitive) and your body (which we will call affective).

The cognitive factors include your appraisal, you expectation, and your self statements about an external event.

1. Appraisal:

This refers to how you look at and what meaning you give to a situation. For example, if your drop or break something that was getting old and of little importance you may not get angry or as angry as you would if that same item was viewed as a special gift from a friend.

Another example concerning your thoughts about a situation would be if you came in to the block from work and your number is on the blackboard for mail. However, when you check with the sergeant he says with a poker

face that there isn't any and that he put the wrong number on the board. You can look at the situation a number of ways including the thought that he did this personally to irritate you or that it was an honest mistake. It should be noted that taking situations personally regardless of the other person's intentions will probably lead to an anger reaction.

2. Expectations:

This refers to how we believe matters should be for ourselves and other people. Sometimes you can set very high standards for your behavior and that of others and when these standards are not met you can get angry by being frustrated and disappointed. For some people, they can get really bent out of shape. For example, you have come to expect a letter every day or every other day from your wife or girl friend and for three days you don't get a letter due to what she described as a busy schedule. You may get really ticked at her and say something you will later regret. Your reaction was based on her not meeting the standards you set for her.

3. Self Statements:

This refers to what you say to yourself or the private speech you use to express your thoughts. Many people do not realize that they do say things to themselves that are not spoken out loud. An example for anyone who has ever been in jail is that on at least one occasion when talking with a staff member about a problem you have said to yourself "how does this person know anything since he has never done time?"

In terms of your anger, these statements you make to yourself can often add fuel to the fire and prolong your anger reaction and possibly set up an explosion. For example, when you are being provoked and you say to yourself, "he's really getting the best of me and no one does that" or "I can't be the loser" or "that guy's a real asshole and needs to be put in his place".

What you tell yourself can also increase your anger level later on even after you've cooled down. How many times have you started thinking about a situation hours later and made statements to yourself like "who does he think he is?" or "now that I think about it more, I should have really let him have it".

(Ask trainees for questions).

Before we discuss factors that can help cause you anger, we should recall our definition of anger from the first session. Anger is an emotion which includes arousal of your body and your thoughts about a particular situation. What we just discussed were the thought processes that help cause you anger, and now we are going to talk about arousal states in your body that can affect how you react to an external event or provocation.

1. Tension: When you feel strung out and you are more easily provoked. Tension, especially if accumulated in the form of tense muscles or headaches will make your anger more difficult to control as little annoyances could be treated like a major catastrophe. What happens is you waste a lot of energy for something that may not have meant that much. For example, you are tensed up as you really didn't sleep well the night before and a good friend wants to borrow the latest issue of your favorite magazine, but you haven't read it.

When he asks you, you snap and tell him to keep out of your face and buy his own magazine. In this situation, your body was set up or in an arousal state where you could easily have an extreme anger reaction. The result is that you have added to your tension and lost a friend.

2. Ill Humor: This refers to having a generally sour disposition and lack of a sense of humor. When a person takes everything too seriously he sets himself up for anger. A good example are those people who can not laugh at themselves and take themselves too seriously.

3. Emotional Hurt: If you are already hurt emotionally, but not angry, you could also be more easily aroused for anger. For example, you get a bad letter from home that puts you at a loss for words, but it does not make you angry; however, an officer tells you you need a haircut and you blow your stack.

To summarize to this point, we have been talking

about what causes your anger. We have discussed two major parts that contribute to an anger reaction - an external trigger (provocation) and internal triggers (what you think about the provocation and how your body is aroused). When these two parts interact, people become angry and they behave in many ways. Unfortunately, people in jail who have problems with controlling their anger tend to behave in two extreme, but not very good ways. They can withdraw and avoid the conflict or react impulsively with hostility and aggression.

Withdrawal and avoidance means that the person is "going away mad: and not dealing with the conflict. The anger can remain inside and turn to bitterness and resentment toward the other person. It can build over a long period of time and result in a violent blow up later on. Holding in anger can lead to repeated "instant replays" of the provoking situation which will make you brood and be depressed. People who use avoidance, direct their anger toward themselves and lose their self respect. When this happens, they can turn to booze and other drugs to cope with any bad feelings.

Hostile and aggressive anger responses result when a person reacts too quickly and intensely to a provocation. This means he causes injury or damage to a person or a thing. When someone snaps out like this, he gives little thought to his actions and the consequences of his actions. In jail, it is probably very easy to react this way because there are a lot of people who have trouble controlling their anger. How many times a day in the block, the chow hall or at work do you see someone blowing their stack? While another person's anger control problem may have triggered your anger, your hostility will add a log to his fire and this can build to a full scale war where both of you try to overpower each other either physically or mentally. If you do overpower the other guy, you may get immediate feelings of relief, but you might get a new charge or at the least you will have to watch your back for future retaliation.

(Discuss ways trainees handle anger by looking at examples they brings in with them).

Now a key thing to remember is that you lack

positive control of your anger when you behave at either extreme, that is to better manage your anger you cannot keep a lid on it or explode impulsively when you're provoked. If you recall, anger includes a body reaction and when you body is aroused, you can use the anger as a signal to take construction action. Since anger also includes what goes on inside your head, you also need to use your brain to keep anger at a moderate level instead of letting it become too intense, too frequent, and/or too long. Not taking yourself too seriously and not taking everything personally will help. Finally, if you can keep your anger at a moderate level, you will better able to communicate positive and negative feelings to another.

3. Role Playing

The trainer models, helps the trainee role play, and gives feedback on the chain "triggers (external and internal) + cues + anger reducers (any or all of 1, 2, 3, 4, and 5)". For these role plays and all other, situations from the Hassle Logs are used. In this session's role playing,the emphasis is on identifying the internal triggers. Some situations that may be

useful for this role play include: (1) sports situations in which someone is deliberately tripped or foul, (2) getting into trouble for something one didn't do, and (3) feeling lied to by a peer or adult.

4. Reviewing

The trainer reviews the chain of events taught so far, including the idea of internal and external triggers, the cues for recognizing anger, and the use of anger reducers 1, 2, 3, 4, and 5.

SESSION 7

1. Reviewing the previous session

The trainer briefly reviews the definitions of internal and external triggers by going through the completed Hassle Logs with the group and having them identify the internal and external triggers for one hassle for each of the trainees.

2. Introducing Reminders: Self-instructioning training

The trainer defines reminders as things we say to ourselves to guide our behavior or to get us to remember

certain things. Group members are asked to think of specific things they say to remind themselves to bring certain items to class etc. Reminders are statements that can be used to help increase success in pressure situations of all types. Some examples of reminders that can be used during pressure situations in sports are: (1) "Bend your knees and follow through" when making a foul shot in a basketball game and (2) "Watch out for his left" or "Jab and then hook" when boxing. Trainees should suggest several remainders of this type that they do use or could use. The trainer describes and gives several examples of how reminders can also be very helpful in pressure situations in which trainees must try very hard to keep calm (e.g., confrontations with police, court appearances). Finally, trainees generate a list of reminders they have used or could use in recent pressure or conflict situations involving anger (drawn from the Hassle Logs). These reminders can be written on the board. Some possible reminders include:

- Take it easy
- Cool it
- Slow down

- Chill out
- Ignore it
- Take a deep breath

3. Introduce the Four Provocation Stages

Introduce the staging idea of breaking down an anger experience into chunks. Indicate that in trying to handle something all at once is difficult, so we will instead attack it part by part. The various provocation stages are presented to trainees as (1) preparing for a provocation, (2) impact and confrontation, (3) coping with arousal, and (4) reflecting on the provocation.

4. Examples of self-statement rehersed in self-instructional training for anger management are provided to illustrate the various stages

Preparing for provocation

This is going to upset me, buy I know how to deal with it. What is is that I have to do?

I can work out a plan to handle this.

I can manage the situation. I know how to regulate my anger.

If I find myself getting upset, I'll know what to do.

There won't be any need for an argument.

Try not to take this too seriously.

This could be a testy situation, but I believe in myself. Time for a few deep breaths or relaxation.

Feel comfortable, relaxed, and at ease.

Easy does it. Remember to keep your sense of humor.

Impact and Confrontation

Stay calm. Just continue to relax.

As long as I keep my cool, I'm in control.

Just roll with the punches; don't get bent out of shape.

Think of what you want to get out of this.

You don't need to prove yourself.

There is not point in getting mad.

Don't make more out of this than you have to.

I'm not going to let him get to me.

Look for the positives. Don't assume the worst or jump to conclusions.

It's really a shame she has to act like this.

For someone to be that irritable, he must be awfully unhappy.

If I start to get mad, I'll just be banging my head against the wall.

So I might as well just relax.

There is not need to doubt myself. What he says doesn't matter.

I'm on top of this situation and it's under control.

Coping with Arousal

My muscles are starting to feel tight. Time to relax and slow thing down.

Getting upset won't help.

It's just not worth it to get so angry.

I'll let him make a fool of himself.

I have a right to be annoyed, but let's keep the lid on.

Time to take a deep breath.

Let's take the issue point by point.

My anger is a signal of what I need to do. Time to instruct myself.

I'm not going to get pushed around, but I'm not going haywire either.

Try to reason it out. Treat each other with respect.

Let's try a cooperative approach. Maybe we are both right.

Negatives lead to more negatives. Work constructively.

He'd probably like me to get really angry. Well I'm going to disappoint him.

I can't expect people to act the way I want them to.

Take it easy, don't get pushy.

5. Modelling Using Reminders

The trainer should model the use of appropriate reminders to increase self-control and personal power in conflict situations, as opposed to using internal triggers (e.g., "Cool it" versus "I'll kill him"). As first, it is useful for trainees to say the reminders out loud, but over time and practice, the goal is to be able to "say" them silently - that is, to think them.

This goal can be accomplished by gradually decreasing the frequency of saying a reminder out loud and increasing the frequency of saying a reminder silently. The trainer explains that a reminder should be used at the right time (not too early and not too late) and emphasizes that trainees must make a choice to use a reminder in a conflict situation.

6. Role Playing

The trainer models the chain "triggers + cues + reminders + anger reducer(s). "Then trainees role play conflict situations from their Hassle Logs in which the main actor (1) identifies the external and internal triggers, (2) identifies the cues of anger, and (3) uses reminders and anger reducers 1, 2, and 3 (any or all). If the main actor is having trouble using the reminders, it may be helpful for the trainer to quietly say examples of them to him at the proper time. Focus in the role play should be on going from "out loud" reminders to silent ones. The trainer gives feedback on the role plays, particularly on the use of the reminders and anger reducers.

7. Reviewing

The trainer summarizes the use of reminders, their timing, and the rationale for their use. Then trainees are given index cards and asked to select and write down three reminders that they feel they might use in the coming week. As homework, trainees are instructed to use each of there reminders during hassles that arise during the week and to note in the Hassle Log for that situation the reminder they used.

SESSION 8

1. Reviewing the Previous Session

The trainer reviews reminders by having each trainee relate a hassle from the past week in which she used a reminder from the ones written down in the last session and assigned as homework. The group is reminded about the A-B-C model and each trainee is asked about the consequences to herself and to others of having used the reminder. Again out loud and silent reminders are distinguished. The outcome of using the reminder is evaluated: Did the reminder work? If not, what went wrong?

2. Introducing Self-Evaluation

Self-evaluation is a way for trainees to (1) judge for themselves how well they have handled a conflict, (2) reward themselves for handling it well (self-rewarding), or (3) help themselves find out how they could have handled it better (self-coaching). Basically, self-evaluation uses a set of reminders that can be used after a conflict situation. The trainer should present some statements that trainees can use to reward themselves (e.g., "I really kept cool" or "I was really in control") and to coach themselves when they have failed to remain in control in a conflict situation (e.g., "I need to pay more attention to my cues"). Then each trainee should generate a list of self-rewarding and self-coaching statements to use in the situations from the Hassle Logs. These statements are gone over individually and as a group.

3. Examples of Self-Statements rehearsed in Self-Evaluation are provided by the trainer

Reflecting on the provocation

1. When conflict is unresolved:

Forget about the aggravation. Thinking about it may makes you upset.

These are difficult situations, and they take time to straighten out.

Try to shake if off. Don't let it interfere with your job.

I'll get better at this as I get more practice.

Remember relaxation. It's a lot better than anger.

Can you laugh about it? It's probably not so serious.

Don't take it personally.

Take a deep breath.

2. When conflict is resolved or coping is successful:

I handled that one pretty well. It worked!

That wasn't as hard as I thought.

It could have been a lot worse.

I could have gotten more upset than it was worth.

I actually got through that without getting angry.

My pride can sure get me into trouble, but when I

don't take things too seriously, I'm better off.

I guess I've been getting upset for too long when it wasn't event necessary.

I'm doing better at this all the time.

4. Role Playing

The trainer models the chain "triggers + cue + reminders + anger reducer(s) + self-evaluation". The reminders technique (anger reducer 4) is so important that it should always be included in the role playing chain, in addition to choosing any or all of the other anger reducers taught so far. In this modeling, both self-rewarding and self-coaching self- evaluation statements are emphasized. Next, the trainer conducts role plays from Hassle Log situations in which the main actor carries out all of the following steps: (1) identifies external and internal triggers, (2) identifies cues of anger, (3) uses reminders plus anger reducer(s) 1, 2, and 3 (any or all), and (4) evaluates her performance, either rewarding or coaching herself. The trainer provides feedback on the role play with an emphasis on self-evaluation.

5. Reviewing

The two types of self-evaluation are reviewed. Then the trainer assigns homework requiring trainees to list on their Hassle Logs self-evaluation statements following conflicts (resolved or unresolved) that occur in the coming week.

SESSION 9

1. Reviewing the previous session

The trainer reviews self-evaluation by going over the Hassle Logs for the self-rewarding and self-coaching statements written down as the homework assigned last session.

2. Introducing Thinking Ahead

Thinking ahead is another way of controlling anger in a conflict situation by judging the likely future consequences for current behavior. The trainer refers to the A-B-C model and explains that thinking ahead helps a trainee figure out what the "C" (consequence) will probably be before he decides what to do. The sentence, "If I do this now, then this will probably

happen later" is a good way to estimate consequences.

The trainer should distinguish between short and long-term consequences, encouraging trainees to consider the long-term results over the short-term ones (e.g., short term: "If I slug him now, he'll shut up" versus long term: "If I slug him now, my probation will probably get extended 3 months"). Trainees are asked to list short and long-term consequences of specific aggressive acts they have engaged in during the last 2 months.

Next, trainees talk about the most and least serious consequences of being aggressive. Trainees are encouraged to list a series of consequences that might follow from an aggressive act they have engaged in within the last 2 months.

Finally, the trainer explains the difference between the internal and external consequences of being aggressive (e.g., external: going back to court, having to spend another 3 months in a facility; internal: feeling terrible about yourself, losing self-respect).

The trainer also talks about social consequences, such as losing friends or being excluded from a group. Group members each list negative external, internal, and social consequences of being aggressive and enumerate the positive consequences of using self-control.

3. Role Playing: "If-Then" Thinking Ahead

The trainer models, helps trainees role play, and gives feedback on using the "if (I act aggressively), then (this will probably be the consequence)" thinking ahead procedure using situations from the Hassle Logs. Negative consequences are emphasized as additional reminders not to act aggressively.

4. Role Playing Anger Control Chain

The trainer models the chain presented so far "triggers + cues + reminders + anger reducer(s) + self-evaluation". Then he conducts role plays from the Hassle Log situation in which the main actor follows all of the above steps and uses any or all of anger reducers, 1, 2, 3, and now 5 (thinking ahead). The trainer gives feedback on the role plays.

5. Reviewing

The reasons to use thinking ahead, the different types of consequences to aggression, and the "if-then" statement are reviewed. Then the trainer assigns as homework to use thinking ahead in two conflict situations in the coming week and to write the "if-then" statement on the Hassle Log for that situation.

SESSION 10

1. Reviewing the Previous Session

The trainer reviews thinking ahead by going over with the group the completed Hassle Logs in which the trainees wrote down the "if-then" statements used in conflict situations in the past week as part of their homework.

2. Introducing the Angry Behavior Cycle

Until this point in the program, the focus has been on what to do when someone else makes one angry. Naturally, there are things that everyone does that can make other people angry and lead to conflicts. Today's

session will focus on what the trainees themselves do to make other people angry with them.

The trainer should give some examples of things that he does that are very likely to make other angry (e.g., calling someone a name, making fun of a person's appearance). Trainees then think about and list three things they do that make other people angry at them. (Each trainee should identify at least three things that he does that make others angry). If the trainer feels the group can handle some confrontation, trainees can respectfully tell another group member what he does to make them angry.

The trainer gets an agreement from each trainee to try to change these problematic behaviors in the coming week, perhaps by using the thinking ahead procedures ("If I do this, then this person may get angry and the situation may get out of hand"). Changing even one behavior may prevent some conflicts and lead to trainees' being better liked or having more friends.

3. Role Playing

This role play is again designed to allow practice of all the anger control techniques taught so far. The trainer models the chain of "triggers + cue + reminders + anger reducer(s) + self-evaluation". Then the trainer conducts role plays of this chain from trainees' Hassle Logs with the main actor using any or all of anger reducers 1, 2, 3, and 5 in addition to all the other steps. He then gives feedback on the role plays.

4. Reviewing

The trainer reviews the behaviors that each trainee has identified as often making other people angry. Trainees are reminded of their agreement to try in the coming week to change at least one of the three behaviors they identified as being part of their Angry Behavior Cycle.

COMPONENT 2: Structure Learning Training

Trainees have now completed the first component (Anger Control Training) of the Anger Management Training Program. It is hoped that at this point trainees have successfully learned what not to do (be aggressive) and how not to do it (the anger control techniques). Although this is certainly an important and necessary accomplishment it is not sufficient for successful anger management. Trainees now need to learn what to do in place of being aggressive. That is, they need to learn how to meet the demands of life situations effectively and in a satisfying manner without needing to resort to aggression. Hence, the necessity for the second component of the anger management training program which is Structured Learning. Its main goal is prosocial behavior facilitation. The the next 10 sessions trainees will learn a series of new skills to use in getting along better with others and in handling like situations in an effective way. The ten Structured Learning Skills selected for inclusion were chosen for their clear relevance to aggressive behavior. Five skills teach appropriate responses to provocation from

others (e.g., Dealing with an Accusation, Dealing with Group Pressure); five are alternatives to aggression which may appropriately be initiated by the trainee (e.g., Empathy, Expressing Affection).

A. Introductions

1. Trainers introduce themselves.

2. Trainers invite trainees to introduce themselves. As a way of relaxing trainees and beginning to familiarize them with one another, the trainer can elicit from each trainee nonprivate information such as neighborhood of residence school background, special interest or hobbies, and so forth.

B. Overview of Structured Learning

Although some or all of this material may have been discussed in earlier individual meetings with trainees, a portion of the opening session should be devoted to a presentation and group discussion of the purposes, procedures, and potential benefits of Structured Learning. The discussion of the group's purposes should stress the probable remediation of those skill deficits

that trainees in the group are aware of, concerned about, and eager to change. The procedures that make up the typical Structured Learning session should be explained again and discussed with give an take from the group. The language used to explain the procedures should be geared to the trainees' level of understanding, that is, "show", "try", "discuss", and "practice", respectively, for the words "modeling", "role playing", "performance feedback", and "transfer training". Perhaps heaviest stress at this point should be placed on presenting and examining the potential benefits to trainees of their participation in Structured Learning. Concrete examples of the diverse ways that skill proficiencies could, and probably will, have a positive effect on the lives of trainees should be the focus of this effort.

C. Group Rules

The rules that will govern participation in the Structured Learning group should be presented by the trainers during the opening session. If appropriate, this presentation should permit and encourage group discussion designed to give members a sense of

participation in the group's decision making. That is, members should be encouraged to accept and live by those rules they agree with and seek to alter those they wish to change. Groups rules may be necessary and appropriate concerning attendance, lateness, size of the group, and time and place of the meetings. This is also a good time to provide reassurance to group members about concerns they may have, such as confidentiality, embarrassment, and fear of performing.

Following introductions, the overview of Structured Learning, and the presentation of group rules, the trainers should proceed to introducing and modeling the group's first skill, conducting role plays on that skill, giving performance feedback, and encouraging transfer training. These activities make up all subsequent Structured Learning session.

Later Sessions

Much of the foregoing procedural material may be conveniently summarized for purposes of review by the following outline.

Outline of Later Session Procedures

A. Homework review.

B. Trainer presents overview of the skill.

1. Introduces skill briefly prior to showing modeling display.

2. Asks questions that will help trainees define the skill in their own language.

Examples: - "Who knows what _____ is?"

- "What does _____ mean to you?"

- "Who can define _____ ?"

3. Postpones lengthier discussion until after trainees view the modeling display. If trainees want to engage in further discussion, the trainer might say, "Let's wait until after we've seen some examples of people using the skill before we talk about it in more detail".

4. Makes a statement about what will follow the modeling display.

Example: - After we see the examples, we will talk about times when you've had to use and time when you may have to use that skill in the future".

5. Distributes Skill Cards, asking a trainee to read the behavioral steps aloud.
6. Asks trainees to follow each step in the modeling display as the step is depicted.

C. Trainer presents modeling display.

1. Provides two relevant examples of the skill in use, following its behavioral steps.

D. Trainer invites discussion of skill that has been modeled.

1. Invites comments on how the situation modeled may remind trainees of situation involving skill usage in their own lives.
   Examples: - "Did any of the situation you just saw remind you of times when you have had to _____?"
2. Designates this trainee as a main actor, and asks the trainee to choose a co-actor (someone who reminds the main actor of the person with whom the skill will be used in the real-life situation).

Examples: - "What does _____ look like?"

- "Who in the group reminds you of __ ____ in some way?"

3. Gets additional information from the main actor, if necessary, and sets the stage for the role playing (including props, furniture arrangement, etc.).

Examples: - "Where might you be talking to ?"

- "How is the room furnished?"
- "Would you be standing or sitting?"
- "What time of day will it be?"

4. Rehearses with the main actor what he will say and do during the role play.

Examples:- "What will you say for step one of the skill?" - "What will you do if the co-actor does_____?"

5. Gives each group member some final instructions as to his part just prior to role playing.

Examples: -To the main actor: "Try to follow all of the steps as best you can".

- To the co-actor: "Try to play the part of as best you can. Say and do what you think

would do when follows the skill's steps".

-To the other trainees in the group: "Watch how well follows the steps so that we can talk about it after the role play".

F. Trainer instructs the role players to begin.

1. One trainer stands at the chalkboard and points to each step as it is enacted and provides whatever coaching or prompting is needed by the main actor or co-actor.
2. The other trainer sits with the observing trainees to help keep them attending to the unfolding role play.
3. In the event that the role play strays markedly from the behavioral steps, the trainers stop the scene, provide needed instruction, and begin again.

G. Trainer invites feedback following role play.

1. Asks the main actor to wait until he has head everyone's comments before talking.

2. Asks the co-actor, "in the role of _____, how did make you feel? What were your reactions to him?"

3. Asks observing trainees: "How well were the behavioral steps followed?" "What specific things did you like or dislike?" "in what ways did the co-actor do a good job?"

4. Comments on the following of the behavioral steps, provides social reward, points out what was one well, and comments on what else might be done to make the enactment even better.

5. Asks main actor: "Now that you have heard everyone's comments, how do you feel about the job you did?" "How do you think that following the steps worked out?"

H. Trainer helps role player to plan homework.

1. Asks the main actor how, when and with whom he might attempt the behavioral steps prior to the next class meeting.

2. As appropriate, the Homework Report may be used to get a written commitment from the main actor to try out his new skill and report back to the group

at the next meeting.

3. Trainees who have not had a chance to role play during a particular class may also be assigned homework in the form of looking for situations relevant to the skill that they might role play during the next class meeting.

SESSION 11

Skill 1. Expressing a Complaint

1. Define what the problem is and who is responsible for it.
2. Decide how the problem might be solved.
3. Tell that person what the problem is and how it might be solved.
4. Ask for a response.
5. Show that you understand his/her feelings.
6. Come to agreement on the steps to be taken by each of you.

SESSION 12

Skill 2. Responding to the Feelings of Others (Empathy)

1. Observe the other person's words and actions.
2. Decide what the other person might be feeling and how strong the feelings are.
3. Decide whether it would be helpful to let the other person know you understand his/her feelings.
4. Tell the other person, in a warm and sincere manner, how you think he/she is feeling.

SESSION 13

1. Imagine yourself in the stressful situation.
2. Think about how you will feel and why you feel that way.
3. Imagine the other person in the stressful situation. Think about how that person will feel and why.
4. Imagine yourself telling the other person what you want to say.
5. Imagine what he/she will say.

6. Repeat the above steps using as many approaches as you can think of.
7. Choose the best approach.

SESSION 14

Skill 4. Responding to Anger

1. Listen openly to what the other person has to say.
2. Show that you understand what the other person is feeling.
3. Ask the other person to explain anything you don't understand.
4. Show that you understand why the other person feels angry.
5. If it is appropriate, express your thoughts and feelings about the situation.

SESSION 15

Skill 5. Keeping Out of Fights

1. Stop and think about why you want to fight.
2. Decide what you want to happen in the long run.
3. Think about other ways to handle the situation besides fighting.
4. Decide on the best way to handle the situation and to it.

SESSION 16

Skill 6. Helping Others

1. Decide if the other person might need and want your help.
2. Think of the ways you could be helpful.
3. Ask the other person if he/she needs and wants your help.
4. Help the other person.

SESSION 17

Skill 7. Dealing with an Accusation

1. Think about what the other person has accused, you of.
2. Think about why the person might have accused you.
3. Think about ways to answer the person's accusations.
4. Choose the best way and to it.

SESSION 18

Skill 8. Dealing With Group Pressure

1. Think about what the other people want you to do and why.
2. Decide what you want to do.
3. Decide how to tell the other people what you want to do.
4. Tell the group what you have decided.

SESSION 19

Skill 9. Expressing Affection

1. Decide if you have good feelings about the other person.
2. Decide whether the other person would like to know about your feelings.
3. Decide how you might best express your feelings.
4. Choose the right time and place to express your feelings.
5. Express affection in a warm and caring manner.

SESSION 20

Skill 10. Responding to Failure

1. Decide if you have failed.
2. Think about both the personal reasons and the circumstances that have caused you to fail.
3. Decide how you might do things differently if you tried again.
4. Decide if you wart to try again.

5. If it is appropriate, try again, using your revised approach.

SESSION 21

1. Reviewing the Previous Sessions

The trainer review the Angry Behavior Cycle - the idea that in addition to getting at what other people do, we do things that make other people angry. She goes over with the trainees their attempts at changing their own anger- provoking behavior, the procedures they agreed to try in the previous sessions.

2. Introducing Using New Behaviors

The trainer explains to the group that the next five sessions will be spent doing role plays that use all the anger control techniques and some of the skills they have learned in Structured Learning Training.

3. Role Playing

The trainer conducts role plays from situations in trainees' Hassle Logs hat follow the entire sequence: "triggers + cues + reminders + anger reducer(s) + SL

skill + self-evaluation". Then she gives feedback on the role plays, focusing on how well all the steps were put together.

SESSION 22

1. Reviewing the Hassle Logs

The trainer goes over the completed Hassle Logs to reinforce how well the trainees are using all of the anger control techniques and beginning to add the use of the SL skills.

2. Role Playing

Role playing and feed back are continued using the entire series of steps: "triggers + cues + reminders + anger reducer(s) + SL skill + self-evaluation".

SESSION 23

1. Reviewing the Hassle Logs

The trainer goes over the completed Hassle Logs to reinforce how well the trainees are using all of the anger control techniques and beginning to add the use of

the SL skills.

2. Role Playing

Role playing and feed back are continued using the entire series of steps: "triggers + cues + reminders + anger reducer(s) + SL skill + self-evaluation".

GENERAL OVERVIEW OF GROUP ANGER MANAGEMENT TRAINING

Component 1: Anger Control Training

SESSION 1-2

1. Explain the goals of Anger Control Training and "sell it" to the inmates (Goldstein, Glick, Reiner, Zimmerman, and Coultry, (1987).
2. Explain the rules for participating and the training procedures (Goldstein et al., 1987).
3. Introduce the education component (Gaertner, 1983).
4. Review goals, rules, procedures and education

component; give handout on education component.

SESSION 3

1. Review first session.
2. Introduce the Hassle Log (Goldstein et al., 1987).
3. Give initial assessments of the A-B-C's of aggressive behavior: (A) What led up to it? (B) What did you do? (C) What were the consequences? (Goldstein et al., 1987).
4. Review Hassle Logs, and A-B-C's; give out binders and Hassle Logs.

SESSION 4-5

1. Review second session.
2. Discuss how to know when you are angry (cues) (Goldstein et al., 1987).

3. Discuss what to do when you know you are angry.
   - Anger Reducer 1: deep muscular relaxation (Gaertner, 1983).
   - Anger Reducer 2: deep breathing relaxation through recall (Gaertner, 1983).
   - Anger Reducer 3: backward counting (Goldstein et al., 1987).
   - Anger Reducer 4: pleasant imagery (Goldstein et al., 1987).
   - Anger Reducer 5: negative and positive consequences (Gaertner, 1983).
4. Role play: cues + anger reducers (Goldstein et al., 1987).
5. Review cues, and anger reducers 1, 2, 3, 4, and 5; give handout on Relaxation Training Outline and Practice Chart (Gaertner, 1983).

SESSION 6

1. Review third session.
2. Discuss understanding what makes you angry (triggers) (Gaertner, 1983).
   - External triggers
   - Internal triggers
3. Role play: triggers + cues + anger reducer(s) (Goldstein et al., 1987).
4. Review triggers, cues and anger reducers 1, 2, 3, 4, and 5.

SESSION 7

1. Review of fourth session.
2. Introduce reminders (Goldstein et al., 1987).
3. Introduce the four provocation stages (Novaco, 1975).
   - preparing for a provocation
   - impact and confrontation
   - coping with arousal
   - reflecting on the provocation
4. Provide examples of self statements rehersal in

self-instruc- tional training to illustrate the various stages (Novaco, 1975).

5. Model using reminders (Goldstein et al., 1987).
6. Role play: triggers + cues + reminders + anger reducer(s) (Goldstein et al., 1987).
7. Review reminders.

SESSION 8

1. Review the fifth session.
2. Introduce self-evaluation (Goldstein et al., 1987).
   - self-rewarding
   - self-coaching
3. Provide examples of self statements rehersal in self- evaluation (Novaco, 1975).
4. Role play: triggers + cues + reminders + anger reducer(s) + self-evaluation. (Goldstein et al., 1987).
5. Review self-evaluation.

SESSION 9

1. Review the sixth session.

2. Introduce thinking ahead (Goldstein et al., 1987).
   - short and long term consequences
   - most and least serious consequences
   - internal, external, and social consequences
3. Role play: "if-then" thinking ahead (Goldstein et al., 1987).
4. Role play: triggers + cues + reminders + anger reducer(s) + self-evaluation (Goldstein et al., 1987).
5. Review thinking ahead.

SESSION 10

1. Review the seventh session.
2. Introduce the Anger Behavior Cycle (Goldstein et al., 1987).
   - identify your own anger-provoking behavior
   - changing your own anger-provoking behavior
3. Role play: triggers + cues + reminders + anger reducer(s) + self-evaluation (Goldstein et al., 1987).
4. Review the Angry Behavior Cycle.

COMPONENT 2: Structured Learning

SESSION 11

Expressing a Complaint

1. Define what the problem is, who's responsible for it.
2. Decide how the problem might be solved.
3. Tell that person what the problem is and how it might be solved.
4. Ask for a response.
5. Show that you understand his/her feelings.
6. Come to agreement on the steps to be taken by each of you.

SESSION 12

Responding to the Feelings of Others (Empathy)

1. Observe the other person's words and actions.
2. Decide what the other person might be feeling and how strong the feelings are.
3. Decide whether it would be helpful to let the other person know you understand his/her feelings.

4. Tell the other person, in a warm and sincere manner, how you think he/she is feeling.

SESSION 13

1. Imagine yourself in the stressful situation.
2. Think about how you will feel and why you feel that way.
3. Imagine the other person in the stressful situation. Think about how that person will feel and why.
4. Imagine yourself telling the other person what you want to say.
5. Imagine what he/she will say.
6. Repeat the above steps using as many approaches as you can think of.
7. Choose the best approach.

SESSION 14

<u>Responding to Anger</u>

1. Listen openly to what the other person has to say.

2. Show that you understand what the other person is feeling.
3. Ask the other person to explain anything you don't understand.
4. Show that you understand why the other person feels angry.
5. If it is appropriate, express your thoughts and feelings about the situation.

SESSION 15

Keeping Out of Fights

1. Stop and think about why you want to fight.
2. Decide what you want to happen in the long run.
3. Think about other ways to handle the situation besides fighting.
4. Decide on the best way to handle the situation and to it.

SESSION 16

Helping Others

1. Decide if the other person might need and want your help.
2. Think of the ways you could be helpful.
3. Ask the other person if he/she needs and wants your help.
4. Help the other person.

SESSION 17

Dealing with an Accusation

1. Think about what the other person has accused, you of.
2. Think about why the person might have accused you.
3. Think about ways to answer the person's accusations.
4. Choose the best way and to it.

SESSION 18

Dealing With Group Pressure

1. Think about what the other people want you to do and why.
2. Decide what you want to do.
3. Decide how to tell the other people what you want to do.
4. Tell the group what you have decided.

SESSION 19

Expressing Affection

1. Decide if you have good feelings about the other person.
2. Decide whether the other person would like to know about your feelings.
3. Decide how you might best express your feelings.
4. Choose the right time and place to express your feelings.
5. Express affection in a warm and caring manner.

SESSION 20

Responding to Failure

1. Decide if you have failed.
2. Think about both the personal reasons and the circumstances that have caused you to fail.
3. Decide how you might do things differently if you tried again.
4. Decide if you want to try again.
5. If it is appropriate, try again, using your revised approach.

SESSION 21

1. Reviewing The Angry Behavior Cycle (Goldstein et al., 1987).
2. Introducing using new behaviors (skills) in place of aggression (Goldstein et al., 1987).
3. Role play: triggers + cues + reminders + anger reducer(s) + SL skill + self-evaluation (Goldstein et al., 1987).

SESSION 22

1. Review Hassle Logs.
2. Role play: triggers + cues + reminders + anger reducer(s) + SL skill + self-evaluation (Goldstein et al., 1987).

SESSION 23

1. Review Hassle Logs.
2. Role play: triggers + cues + reminders + anger reducer(s) + SL skill + self-evaluation (Goldstein et al., 1987).

Understanding My Anger

1. Anger is an emotion that results from a provocation. When you react, something happens in your body and your head.

2. Functions of Anger:
    A. Positive
        i) pep you up
        ii) help you express negative feelings
        iii) signal you to start coping
    B. Negative
        i) disrupt your thoughts
        ii) save face
        iii) project an image or front
        iv) hurt somebody
3. Anger is a problem when it is:
    A. Too long
    B. Too frequent
    C. Too intense
    D. Lead to aggression
4. Poor anger control can:
    A. Put stress on your body
    B. Result in poor job and school performance
    C. Lead to poor relationships with people
    D. Bring administrative action against you
    E. Result in physical damage to yourself

5. Causes of anger:
    A. Provocations
        i) frustrations
        ii) annoyances
        iii) abuse (physical or verbal)
    B. Internal factors
        i) how you look at a situation
        ii) your body is in a tense state
        iii) you are in a bad mood
6. Ways people usually handle their anger:
    A. Avoidance and withdrawal
    B. Hostility and aggression

RELAXATION TRAINING OUTLINE

<u>Key Points for Relaxation Practice</u>

1. LEARN the difference between tension and relaxation as you tense and relax muscles one by one.
2. STUDY the contrast between tension and relaxation and ENJOY the relaxation.
3. As you tense any particular muscle, keep the rest of your body relaxed.

Sequence of Relaxation Practice

(First get comfortable in a chair. After each tension, relax it away, study and appreciate the differences).

1. HAND AND ARMS
   a. right fist: clench fist
   b. left fist: clench fist
   c. both fists: clench fists
   d. biceps: bend elbow
   e. triceps: stretch arms out

2. HEAD and SHOULDERS
   a. forehead and brow: tighten, frown
   b. eyes: close eyes tightly
   c. jaws and cheeks: clench teeth
   d. tongue: press hard against roof of mouth
   e. neck: press head back as far as it will go, then forward as far as it will go
   f. shoulders:shrug shoulders, try to bring them up to your ears

3. REVIEW: Let relaxation spread from shoulders to arms and hands and neck and facial muscles. Focus on the relaxed, calm, warm feelings.

4. CHEST, STOMACH, and LOWER BACK

   a. chest: take a deep breath, hold it

   b. stomach: 1) make stomach muscles as hard as possible

      2) such in stomach as much as possible

   c. lower back: arch back

5. REVIEW ALL MUSCLES SO FAR

6. HIPS, THIGHS, and CALVES

   a. thighs & buttocks: push heels down on floor hard

   b. calves: stretch out legs as far as possible, point toes away from body

   c. shins: keep legs stretched out: bring toes up to point toward face

7. REVIEW AGAIN

8. No tensing, first, just get each part to relax even more as you think of each part and say to yourself, for examples, "feet relax, ankles relax, etc."
   a. feet
   b. ankles
   c. calves and shins
   d. knees and thighs
   e. buttocks and hips
   f. stomach and waist
   g. lower back
   h. upper back
   i. chest
   j. shoulders
   k. arms, hands, fingers
   l. throat and neck
   m. jaws and face

9. Just think about lifting one leg; don't actually lift it. See if you can spot the tensions that develop - and relax them away. Do the same with other muscles.

10. Keep relaxing for as long as you want. When you want to stop, count backwards from 4 to 1, stretch, yawn, and slowly stand up.

HOMEWORK REPORT

Name _____ Date _____

Group Leaders _____

FILL IN DURING THIS CLASS

1. Homework assignment:
   a. Skill:
   b. Use with Whom:
   c. Use when:
   d. Use where:
2. Steps to be followed:

FILL IN BEFORE NEXT CLASS

3. Describe what happened when you did the homework assignment:
4. Steps you actually followed:
5. Rate yourself on how well you used the skill (check one):

   Excellent Good ____ Fair ____ Poor ___

6. Describe what you feel should be your next homework assignment:

HASSEL LOG

Name _____ Date ____

Morning ____ Afternoon ____ Evening ____

WHERE WERE YOU?

Classroom/School____Bathroom_____ Off grounds ____

Dorm ____ Staff office ____ Halls _____

Gym ____ Dining room_____ At work ____

Recreation room ____Outside/on grounds ____

Shop ____Group Mtg. room ____ Pass (TAP) _____

Other ____ (be specific)

WHAT HAPPENED?

Somebody teased me. ____

Somebody took something of mine. ____

Somebody told me to do something. ____

Somebody was doing something I didn't like. ____

I did something wrong. ____

Somebody started fighting with me. ____

Other: ____

WHO WAS THAT SOMEBODY:

Another resident ____ Aide ____ Teacher ____

Another adult ____ Counselor ____

WHAT DID YOU DO?

Hit back ____ Told peer ____

Ran away ____ Ignored it ____

Yelled ____ Used Anger Control ____

Cried ____ _____

Broke something ____ _____

Was restrained ____ Used Structured

Told aide or counselor ____ Learning skill ___

Walked away calmly ____ _____

Talked it out ____ _____

HOW DID YOU HANDLE YOUSELF?

1	2	3	4	5
Poorly	Not so well	Okay	Good	Great

HOW ANGRY WERE YOU?

Really Burning_	Moderately Angry __	Mildly Angry __	Angry but still okay __	Not angry at all

APPENDIX 4

ANGER INVENTORY

ANGER INVENTORY

1. You're riding in a car with your friend when the car "conks out" right in a traffic light. You're out of the car trying to help him get it started and this guy in the car behind you keeps laying on the horn.
2. You ask a man in the next dorm to borrow (hold) his radio for a short time. He tells you to "forget it, chump--I wouldn't let you borrow anything of mine".
3. You find out that this other inmate was cutting you up to your friends back home.
4. You're having a loud argument with some guy when he suddenly starts pushing and shoving you.
5. Your woman tells you she does net have time to visit you this month, yet she is going somewhere with her girl friends.
6. Your wife or parents tell you they don't like the people you hang around with because they're no good and going to cause you trouble.
7. You're stuck in this joint doing some chores you hate one day and you're thinking about all the guys out in the world who have done a lot worse things

than you have but who never got caught, of if they did get caught, they never got sent to an institution.

8. You're walking along the street, minding your own business, when this cop comes by, stops his car, and picks you up. He says he's taking you to the station because you were involved in some robbery last night. You know you weren't in any robbery last night.
9. Your wife or mother get mad and tell you in front of other family members about some bad things you've done.
10. You're walking down the street where there are big pools of water because it just rained. This car comes by real fast, splashing you and soaking you from head to foot.
11. You're sitting on a bus where there are "No Smoking" signs all over the place. They guy sitting next to you is smoking a giant cigar and keeps blowing smoke in your face.
12. A friend lends you his new coat. You wear it to a party. You lay it down somewhere at the party, but when you're ready to leave. it's not there.

13. While you're having a good time playing cards, a guard keeps bugging you and hassling you every five minutes to go clean up some trash you were supposed to clean up before.
14. You really wanted to talk to your counselor, and he said he would see you today at 2:00, but when you went to his office, he wasn't even there. After you waited an hour, he still wasn't there.
15. Somebody sneaks into your locker and steals your canteen but you don't know who did it.
16. You go into a job interview and everything is going good until the guy sees you have a criminal record and tells you he can't hire you.
17. You really want a smoke, when you notice that this other guy has a full pack. Since you don't have any, you ask him for one. He says, "No I don'T have any". You know he has them because you saw them.
18. You see that a friend of yours is being hassled by a guy much bigger than him.
19. Your wife or a parent buts into a T.V. show you're watching at home and starts giving you hell about everything you've ever done wrong--like staying out

too late at night, staying out all night, your smoking, drinking, and your work.

20. You're around somebody who is always trying to "get one over" on you.

21. You're with some guys you like and you're going to a movie, but there is this one guy with you who is always "fronting" about how tough he is.

22. Some guys on your dorm are getting passes. But when you ask your counselor if you can get one he says no because you have not done enough programs.

23. Ycu're in your dorm quietly watching the ball game while two men nearby are yelling at every play and the guard comes up and tells you to keep it down.

24. You're standing and talking with someone on the sidewalk, when this guy comes running along a big hurry and knocks you out of his way. He doesn't even stop.

25. Your counselor tells you to shut up when you're trying to tell him something important.

26. You're forced to go to the dentist to get your teeth fixed when you don't want to go because you can't stand going to the dentist.

27. In a ball game you're playing, one of the guys on

the other team starts using rough stuff (like elbows in your check) on you whenever he gets a chance.

28. A (black) (white) kid keeps calling you a (honkie) nigger) every time he sees you. (This item will be individually adapted to the color of the participant).

29. Your mom told you she was going to buy you some new shoes you've been wanting for your birthday, but when your birthday comes she doesn't get them for you and she acts like she never promised she would.

30. Your gang boss is made and he accuses you of breaking a machine. Even though you didn't break it some other guys told him you did and he accuses you.

31. You're trying to study for a test and the guy next to you is playing his T.V. too lound and laughing at a show.

32. A family member accuses you of stealing money from him/her even though you did not do it.

33. When you're in court, the judge gives you a nasty lecture about your past right in front of everybody there.

34. You're around someone who thinks he is always right--about everything. He acts like he never makes any mistakes.
35. You walk into the dorm where another man comes up to you, hassling you and cursing at you for something he thinks you did to him. He stops you from walking all the way into the dorm and keeps jumping in your face.
36. You're walking by some guys on a corner and one of them calls to you, "Hey, faggot! How did you get to be such a sissy?"
37. Before you go to court for your hearing, your lawyer tells you he's going to try to get the judge to give you probation instead of sending you to an institution. But when you go to court, your lawyer seems to be telling the judge that he think it's all right for you to go to an institution.
38. You're walking back to your dorm by yourself, and you're thinking about how unfair it is for you to be in an institution and wanting to be back home.
39. On your job you have to work next to this guy who acts like a girl--a sissy, a faggot.
40. You're playing ball with some guys and one guy who

thinks he knows everything keeps telling you you're screwed up or doing it wrong every time you throw the ball, catch it, or try to do anything.

41. You're with your girl in a restaurant ordering a pizza. There is a group of guys in the place. You don't know them. One of them starts talking about your woman and putting her down right in front of you and her.

42. You get caught in another man's dorm and a guard starts yelling at you about it in front of a bunch of other men in the dorm.

43. You're at a check-out counter in a store and you're in a hurry to leave, but the person who is supposed to be waiting on you is busy talking on the phone to somebody and she keeps ignoring you, making you wait and wait.

44. You're alone, thinking about this guy who pushed you around in an argument you had with him today.

45. You've been working real hard in a school class trying to get a good grade. When you go in to take the test, you can't do most of the problems and you think the test is unfair.

46. One of your counselors keeps telling you that

you're one of the dumbest men he ever knew and he says it's no wonder you're in an institution.

47. You find out while you're in here that your girlfriend or wife is out screwing around with other guys.

48. You buy a new radio, but when you take it to your dorm and turn it on you find it doesn't work.

49. You're walking down your street in the middle of winter and somebody throws a snowball that hits you right in the face.

50. You lend some guy your new jacket and when he gives it back to you it's dirty and torn.

51. You're on the phones in the office, talking to your family, when a guard yells at you to get off the phone because somebody else wants to use it.

52. You're trying to make an important phone call in the street. You put your last quarter in the pay phone, but you get cut off before you even finish dialing. The phone keeps you quarter you don't have any more change.

53. You're walking by a swimming pool when all of a sudden a couple of guys, laughing and clowning around, pick you up and throw you in the pool with

your clothes on.

54. You're with a group of inmates and everybody is sort of cutting everybody else up. One of the guys who you don't like too well starts cutting up your mother, calling her a whore.

55. When you're all packed and ready to leave jail on a pass one of the counselors tells you that the staff had decided you can't go on your pass because if your behavior during the week.

56. On the dorm where's a guy from your home town who keeps making fun of the things that you did that got you sent to jail. He always does it in front of other people.

57. You're trying to fix something with a hammer and a nail and you hit your finger really hard with the hammer by mistake.

58. You're having an argument with another inmate and in the middle of it he starts calling you names like bastard, dumb motherfucker, son of a bitch, and goof.

59. A staff member gets you to tell him the truth about something you did wrong and then he punishes you for doing it.

60. One of the men at work is a guy who always brags about himself--he always tells everybody, all day long, about how great he is.
61. Your school teacher or work officer calls you in after class and tells you that he thinks you really should be doing better work and that he thinks you spend all your time goofing off.
62. An officer asks you or tells you to do something right away, and when you don't do it right away, he shoves you.
63. When you're with some other guys, this guy a lot smaller than you, sucker punches you in the face just to prove how tough he is to the other guys there.
64. You let a friend of your borrow some boo's of yours, but when you ask him for them back, he says he can't find them.
65. One inmate in a group of inmates who seems not to like you for some reason starts staring at you, gives you the finger, and calls you out for a fair one saying that you're really a pussy.
66. You ask a family member for $5.00 for something you really need, but he/she says "no" and doesn't tell

you why you can't have it.

67. On your way into a room, your hear your name mentioned by somebody, but when you get in there everybody stops talking. You know they were talking about you.

68. In court, the judge tells your mother, in front of everybody, that he thinks your mom did a lousy job of raising you.

69. This guy who doesn't like you gets punched in the face one day by somebody. Just to try to get you in trouble, he tells the guard you punched him and you are called into cells and accused of doing it.

70. You're walking along and you step in this big glob of chewing gum that sticks to your new shoes.

71. You beat everybody in cards on your dorm until this new guy comes into the dorm. Every time you play <u>him</u>, you get beat.

72. You see a bunch of (white) (black) guys hassling a (black) (white) girl. (This item will be individually adapted to the color of the subject).

73. You're with this guy who is a friend of yours, when a couple of other guys come up to him and start hassling him about some money he is supposed to owe

them. They're really threatening him.

74. Your parents tell you that you can live with them on parole or pass, but you have to follow all their rules, including a curfew.

75. Sometimes when you're alone you start thinking about how you hate having staff and family telling you what to do all the time.

76. You're trying to fix your radio which cost you a lot of money when you bought it. Your hand slips and you drop it on the floor, breaking it into little pieces.

77. You're alone, thinking about the judge who sent you here.

78. Your counselor tells you one day that he's going to take care of an important matter the next day, but the next day he says he doesn't have time to do it.

79. You're in the back of the dorm horsing around and making a lot of noise with three or four other guys. Everybody's making noise, but when the guard comes walking by, he yells at you to keep it down and doesn't yell at any of the other guys.

80. Your girl smacks you in the face when you say something to her she doesn't like.

APPENDIX 5

ANGER INVENTORY ANSWER SHEET & INSTRUCTIONS

ANGER INVENTORY

ANSWER SHEET

The following instructions were placed on an audiotape:

You have been given an answer sheet and a list of situations which you will also hear on this tape. Many of these situations have already happened to you or other man at Rideau. What I would like for you to do is read or listen to each situation and place yourself in it by trying to get the thoughts or feelings you would have if this was happening right now.

To better understand, please look at the answer sheet which has the following directions: after you have read and heard each of these situations on tape, please circle the number which says how angry or mad you think this situation would make you. The numbers on the left-hand side of this sheet are the same as the numbers on the left-hand side of the sheet which has the situations listed on it. This is not a test. There are no right or wrong answers. You should just try to be as honest as you can about your own feelings. The first row of answers below is a sample.

O.K., now let's try a sample situation. You're in

the kitchen walking away from the serving line and someone bumps you and knocks over your glass of milk but before you can get a refill, a guard tells you to sit down.

Think about this situation (pause), now look at the letter "a" on the answer sheet and circle how angry you would be. Circle (1) not at all angry, (2) a little bit angry, (3) angry, (4) quite a bit angry, (5) very, very angry.

If you have any questions about how to use the answer sheet or about anything else, please turn off the recorder (pause). The rest of the situations will be answered in the same way. You can begin.

Answer Sheet for Anger Inventory

Directions: After you have read and heard each of these situations on tape, please circle the number which says how angry or mad you think you would get in the situation. The numbers on the left-hand side of this sheet are the same as the numbers on the left-hand side of the sheet which has the situations listed on it. This is not a test. There are no right or wrong answers. You should just try to be as honest as you can about your own feelings. The first row of answers below ("a") is a sample.

a.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
1.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
2.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
3.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
4.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
5.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
6.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
7.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

8.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
9.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
10.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
11.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
12.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
13.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
14.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
15.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
16.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
17.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
18.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

19.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
20.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
21.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
22.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
23.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
24.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
25.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
26.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
27.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
28.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
29.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

30.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
31.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
32.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
33.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
34.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
35.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
36.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
37.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
38.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
39.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
40.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

41.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
42.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
43.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
44.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
45.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
46.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
47.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
48.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
49.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
50.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
51.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

52.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
53.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
54.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
55.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
56.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
57.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
58.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
59.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
60.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
61.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
62.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

63.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
64.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
65.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
66.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
67.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
68.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
69.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
70.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
71.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
72.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
73.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

74.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
75.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
76.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
77.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
78.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
79.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry
80.	1 Not at all angry	2 A little bit angry	3 Angry	4 Quite a bit angry	5 Very, very angry

APPENDIX 6

DIMENSIONS OF ANGER REACTIONS

Dimensions of Anger Reactions

Do your best to judge as accurately as you can the degree to which the following statements describe your feelings and behavior. That is, rate the degree to which each statement applies to you.,

1. I often find myself getting angry at people or situations.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder-ately so	fairly much	much	very much	exactly so

2. When I do get angry. I get really mad.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder-ately so	fairly much	much	very much	exactly so

3. When I get angry, I stay angry.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder-ately so	fairly much	much	very much	exactly so

4. When I get angry at someone, I want to hit or clobber the person.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder-ately so	fairly much	much	very much	exactly so

5. My anger interferes with my ability to get my work done.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder-ately so	fairly much	much	very much	exactly so

6. My anger prevents me from getting along with people as well as I'd like to

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder- ately so	fairly much	much	very much	exactly so

7. My anger has had a bad effect on my health.

0	1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	moder- ately so	fairly much	much	very much	exactly so

APPENDIX 7
ROLE PLAYED PROVOCATIONS

ROLE-PLAYED PROVOCATIONS

Role-Played Provocations:

Set I:

A. Script for Participant in Other Inmate Provocation: A guy in the next dorm does not have any money and he owes another man money. You lend him some money until next pay day. When you go to collect, he is not willing to pay you. He acts like he does not want to be bothered.

These are your lines:

Inmate: ". . ."

YOU: "A couple weeks ago you asked me to bail you out. How can you forget?"

Inmate: ". . ."

YOU: "I'd appreciate it if you paid me back".

Inmate: ". . ."

YOU: "Look I'm short this month and need some smokes too."

Continue on your own from here.

Script for Assistants:

A: "I don't remember borrowing any money from you."

S:"A couple weeks ago you asked me to bail you out. How can you forget?"

A: "Oh yeah, I remember now".

S: "I'd appreciate it if you paid me back".

A:"Yeah, well I don't have it so it looks like you are out of luck".

S:"You just got your pay yesterday, so you've got to have something left".

A:"Yeah, well if I pay you I'd be without smokes another week".

S: "Look! I'm short this month and I need some smokes too".

A:"O.K., plain and simple, you ain't getting nothing from me".

S: ". . ."

A: "Look chump, why don't you go about your business".

S: ". . ."

A: "Why don't you tell it to the man?"

S: ". . ."

A: "You're a real asshole to think I would pay you".

S: ". . ."

A: "Your woofin' isn't going to get you anything".

S: ". . ."

B. Script for Participant in Staff Provocation: You have something urgent you need to see your counselor about. There is a mistake made in your job transfer and you are not on the callout sheet. Besides it would take several days for you to get a request slip answered, so you approach a guard on the subject.

These are your lines:

Officer: ". . ."

YOU: "I need to see my counselor".

Officer: ". . ."

YOU: "No, this is really important".

Officer: ". . ."

YOU: "I need to get a pass, it's about my job".

Officer: ". . ."

YOU:"I don't really care about those guys. My situation is important".

Continue on your own from here.

Script for Assistants:

A: "What seems to be the problem?"

S: "I need to see my counselor".

A: "Did you put in a request?"

S: "No, this is really important".

A: "Your counselor's a busy man".

S: "I need to get a pass; it's about my job".

A:"You know you're the third man to ask me this in the past hour".

S:"I don't really care about those guys. My situation is important".

A: "How do I know you're not pulling my leg?"

S: ". . ."

A:"You know an emergency to you might not be an emergency to your

counselor".

S: ". . ."

A: "I think you're trying to get one over on me".

S: ". . ."

A: "Don't get smart with me".

S: ". . ."

A: "You know I don't have to do anything if I don't want to". S: ". . ."

A:"Why don't you come back later? If I have the time I'll do it".

S: ". . ."

Set II:

C. Script for Participants in Other Inmate Provocation: You're signed up for a phone call to a loved one and the man on the phone ahead is over his time. You give a signal that his time is up, but he ignores it and uses almost all of your time.

These are your lines:

Inmate: ". . ."

YOU: "What do you mean by that?"

Inmate: ". . ."

YOU: "I was just trying to let you know your time was up".

Inmate: ". . ."

YOU: "No, I'm just tryin' to make my call".

Inmate: ". . ."

YOU:"I was signed up for 6:45 and you got off at almost 7 and I needed to talk to my family".

Continue on you own from here.

Script for Assistants:

A: "Hey, why were you interfering with my call?"

S: "What do you mean by that?"

A:"I was having an important conversation and you're trying to tell me something".

S: "I was just trying to let you know that your time was up". A: "What are you some kind of guard or something?"

S: "No, I'm just trying to make my call".

A:"Listen chump, I don't care what you do, but keep your nose out of my business".

S:"I was signed up for 6:45 and you got off at almost 7 and I needed to talk to my family".

A: "So you think your family is more important than mine".

S: ". . ."

A: "I don't give a shit what you think".

S: ". . ."

A: "I really think you're trying to fuck with me".

S: ". . ."

A: "I ought to hit you up along side the head".

S: ". . ."

A: "Why are you trying to get over on me?"

S: ". . ."

A: "You're like the rest of the pussies".

S: ". . ."

D. Script for Participant in Staff Provocation: You are in the hallway outside the dining room and a friend of yours, as a joke, pushes you into another guy. A guard does not see the push, but he does see you crash into the guy.

These are your lines:

Officer: ". . ."

YOU: "Nothing really".

Officer: ". . ."

YOU: "(Give your number)".

Officer: ". . ."

YOU: "I don't have it on me".

Officer: ". . ."

YOU: "I left it in my coat pocket".

Continue on you own from here.

Script for Assistants:

A: "What's going on here?

S: "Nothing really".

A: "What's your number?

S: "(Give your number).

A: "Let's me see you I.D. card".

S: "I don't have it on me".

A:"Don't you know that you're supposed to have it on you at all times".

S: "I left it in my coat pocket".

A:"I ought to write your ass up for not having your I.D. and horseplay".

S: ". . ."

A: "I don't want to hear any excuses or smart mouth".

S: ". . ."

A: "Who takes care of you on the street?"

S: ". . ."

A:"It's about time you start acting like a man and not a kid".

S: ". . ."

A: "Don't try to get one over on me".

S: ". . ."

A: "It's punks like you that make it rough for everyone".

S: ". . ."

APPENDIX 8

ROLE-PLAYED PROVOCATIONS RATING SCALE

ROLE-PLAYED PROVOCATIONS RATING SCALE

Criteria for Rating Aggression in Role Play Responses

Aggressive content of verbal responses will be rated on a seven-point scale (1 = not at all aggressive, 7 = maximally aggressive), according to the following criteria.

1. Participant said something to calm the situation down or keep it cool, or he walked away.
   a. specifically he requested more information
   b. attempted to rationally explain the issue being rated
   c. gave an understanding of the other person's point of view, his feelings, or his position
   d. answered questions directly and clearly
   e. expressed his point of view assertively

2. Participant told the person to leave him alone or to mind his own (the other person's) business.

3. Participant asked the person what was wrong with him or used inflammatory language (e.g., curses).

4. Participant tried to argue with the person (e.g., in oppositional).

5. Participant called the person names or insulted him or his family.

6. Participant threatened the other person.

7. Participant challenged the other person to a physical fight or stated that he would hit the other person.

APPENDIX 9

SELF-REPORT SCALES FOR THE DIRECT EXPERIENCE LABORATORY PROVOCATIONS

Self-Report scales for Laboratory Provocations

1. Rate the degree to which this experience made you feel angry.

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

2. When this experience happened, you may have had certain feelings and impulses. Rate the degree to which you acted or wanted to act in each of these ways.

A. I cursed or shouted

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

B. I wanted to hit the person

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

C. I stayed composed and was constructive

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

D. I wanted to pound or kick something

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

E. I wanted to tell the person off and start an argument

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

F. I tried to understand the situation and kept cool about it.

1	2	3	4	5	6	7	8
not at all	very little	a little	some not much	fairly much	much	very much	exactly so

APPENDIX 10

CRIMINAL SENTIMENTS SCALE

CSS Opinion Questionnaire

Name _____ **Date** _____

We would like you to indicate whether you **agree** or **disagree** with some opinions listed on the following pages. Enter **1**, **2**, **3**, **4**, or **5** next to each statement using this scale:

Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1	2	3	4	5

Please give us your own opinions about the statements: There are no right or wrong answers on this questionnaire.

Example:

____ 1. Laws are made to be broken.

If you **strongly disagree** with this statement (you believe it to be completely wrong), you should enter "1". If you **strongly agree** with the statement, enter "5". If you tend to agree or disagree but don't feel quite so certain about your opinion, enter "2" for **disagree** or "4" for **agree**. If you are unable to make up your mind about the statement or if you have no opinion about the statement, enter "3".

Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1	2	3	4	5

____ 1. Laws are so often made for the benefit of small selfish groups that a person cannot respect the law.

____ 2. Nearly all laws deserve our respect.

____ 3. It is our duty to obey all laws.

____ 4. Laws are usually bad.

____ 5. The law is rotten to the core.

____ 6. Almost any jury can be fixed.

____ 7. You can't get justice in court.

____ 8. On the whole, lawyers are honest.

____ 9. Fake witnesses are often produced by the prosecution.

____ 10. On the whole, the police are honest.

____ 11. A cop is a friend to people in need.

____ 12. Life would be better with fewer police.

____ 13. The police should be paid more for their work.

____ 14. The police are just as crooked as the people they arrest.

____ 15. All laws should be strictly obeyed because they are laws.

____ 16. The law does not benefit the common person.

____ 17. The law as a whole is sound.

____ 18.In the long run, law and justice are the same.

____ 19. The law enslaves the majority of people for the benefit of a few.

Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1	2	3	4	5

____ 20. On the whole, judges are honest and kind-hearted.

____ 21. Court decisions are almost always just.

____ 22. Almost anything can be fixed in the courts if you have enough money.

____ 23. A judge is a good person.

____ 24. Our society would be better off if there were more police.

____ 25. Police rarely try to help people.

____ 26. Sometimes a person like myself has to break the law in order to get ahead.

____ 27. Most successful people used illegal means to become successful.

____ 28. People who have been in trouble with the law have the same sort of ideas about life that I have.

____ 29. People should always obey the law no matter how much it interferes with their personal ambition.

____ 30. I would rather associate with people who obey the law than with those who don't.

____ 31. It's alright for a person to break the law if he or she doesn't get caught.

____ 32. I'm more like the people who can make a living outside the law than I am like those who only break the law occasionally.

____ 33. Most people would commit crimes if they knew they wouldn't get caught.

____ 34. People who have been in trouble with the law are more like me than people who don't have trouble with the law.

Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1	2	3	4	5

____ 35. There never is a cause for breaking the law.

____ 36. I don't have much in common with people who never break the law.

____ 37. A hungry person has the right to steal.

____ 38. It's alright to evade the law if you don't actually break it.

____ 39. No one can violate the law and be my friend.

____ 40. A person should obey those laws which seem reasonable.

____ 41. A person is a fool to work for a living if he or she can get by some easier way, even if it means violating the law.

APPENDIX 11

CATEGORIES FOR INSTITUTIONAL MISCONDUCTS

Categories for Institutional Misconducts

Aggressive Misconducts

-- commits or threatens to commit an assault upon another person

-- makes a gross insult, by gesture, use of abusive language, or other act, directed at any person

-- wilfully damages any property that is not owned by the inmate

Rule Violation Misconducts

-- wilfully disobeys a lawful order of an officer

-- takes or converts to the inmate's own use or to the use of another person any property without the consent of the rightful owner of the property

-- has contraband in his possession or attempts to or participates in an attempt to bring contraband in or take contraband out of the institution

-- leaves a cell, place of work or other appointed place without proper authority

-- refuses to pay a fee or charge established by this regulation

-- willfully breaches or attempts to breach any other regulation or a written rule, of which the inmate has received notice, governing the conduct of inmates

Security Misconducts

-- creates or incites a disturbance likely to endanger the security of the institution

-- escapes, attempts to escape or is unlawfully at large from the institution

-- gives or offers a bribe or reward to an employee of the institution

-- counsels, aids or abets another inmate to do an act in contravention of the Act and regulations

-- obstructs an investigation conducted or authorized by the Superintendent

-- wilfully breaches or attempts to breach any term or condition of a temporary absence

Curriculum Studorium

Name:	SHARON MARIAN KENNEDY (nee Kelly)
Date of Birth:	February 2, 1960
Education:	General B.A. with distinction (Major in Law and Psychology, Concentration in Criminology and Corrections), Carleton University, 1982.
	B.A. (High Honours in Psychology), Carleton University, 1983.
Awards:	University of Ottawa Supplemental Research Scholarship, 1984, 1985, 1986, 1987.
	Social Sciences and Humanities Research Council Scholarship, 1986, 1987.
	Ontario Graduate Scholarship, 1986.
Publications:	With N. Spanos & M. Gwynn (1984). Moderating effects of contextual variables on the relationship between hypnotic susceptibility and suggested analgesia. Journal of Abnormal Psychology, 93, 285-294.