

What Do We Know About Anger Management Programs in Corrections?*

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Introduction

ASSAULTIVE OR violent behavior leading to arrest often is associated with anger. Anger management thus has earned face validity as a reasonable treatment alternative for domestic abusers, child abusers, animal abusers, substance abusers, aggressive juveniles, vandals, perpetrators of hate crimes or road rage, and other violent offenders. Such programs have been implemented in prisons, as a condition of probation or parole, and in conjunction with deferred prosecution programs and non-jail sentences. Although public awareness of anger management has increased substantially,¹ little is known about the program's effectiveness or its appropriate application. This article explores the content, application, effectiveness, and propriety of anger management programs and concludes that anger management merits additional study in order to maximize its effectiveness as an educational tool for preventing violence.

This article provides a historical context to anger control theory and documents the recent trend toward broad application of anger management programs. It explains the nature of this misunderstood emotion and the relationship of skewed perceptions and distorted thinking to the commission of crime. It also examines the content of anger management programs used in correctional settings in Madison, Wisconsin. The article distinguishes anger management from domestic violence prevention programs and notes the risks of inappropriate treatment. It describes the evaluation of anger management programs and acknowledges the challenges faced in researching program effectiveness. The article summarizes the key findings and recommends further research to determine the most appropriate and effective use of anger management.

Background

History and Theory of Anger Management

According to researchers Kemp and Strongman at the University of Canterbury, New Zealand, concern about controlling anger dates back to ancient and me-

dieval times. The beliefs we hold today about anger control are rooted in ancient philosophy but remain important lessons for living in today's society. Some members of society who fail to learn to control their response to anger-provoking situations act aggressively and end up in courtrooms, jails, and prisons. A portion of Kemp and Strongman's research is summarized as follows:

Although Stoics valued discipline and regarded anger as useless in both war and sporting events, Aristotle believed that anger that arises from perceived injustice had value in preventing injustice. However, there was agreement among philosophers on the desirability of controlling this emotion and in the belief that self-control can be learned by training in rational thought. Seneca advised that to avoid becoming angry, one should be aware of sources of personal irritation, attempt to understand the other person's motives and extenuating circumstances, not respond to anger with anger, and not serve too much wine. It also was believed that anger can be defused with wit and that children should receive early training in self-control.²

Despite these long-held beliefs, the interest in studying negative emotions has primarily focused on anxiety and depression rather than on anger.³ In the last few decades greater attention has been paid to gender differences in expressing anger and to distinguishing anger from aggression, but Kemp and Strongman note that in 2,000 years our understanding of anger has not changed significantly.

Current Applications Outside of Correctional Settings

What has changed is the widespread application of anger management programs, which have become ubiquitous. The significance of such widespread application is that there is a perceived need for such training⁴ and that shared knowledge about anger control establishes and reinforces behavioral norms.

Programs labeled "Anger Management" vary in content and methods, but share the goal of teaching people how to control their responses to anger-provoking situations. Anger management is included as part of conflict resolution and violence prevention skills taught in daycare⁵ and elementary schools,⁶ in vocational schools to promote safety,⁷ in "Parenting in the '90s" classes,⁸ for building productivity in the workplace,⁹ for career development,¹⁰ in management training,¹¹ for conquer-

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ing road rage,¹² for treating alcoholism in Malaysia,¹³ as a condition of participation in Midnight Basketball Leagues,¹⁴ and as part of sports psychology training provided to athletes such as Tiger Woods.¹⁵ The list of applications continues, including diversity training for police officers,¹⁶ job retention training for homeless men,¹⁷ coping skills for postal workers¹⁸ and for disaster victims,¹⁹ for physicians dealing with colleagues and with changes in health care delivery systems,²⁰ and for patients who have been diagnosed with a host of health problems.

Such widespread application across age categories, employment circumstances, and socioeconomic class strongly suggests a belief that anger management programs have value for nearly everyone. It also suggests that anger management is considered to be a necessary social skill that can be taught in a training seminar in addition to being a therapeutic treatment for violence-prone individuals. Learning to cope with emotions and to control behavior ideally may occur in childhood, but this widespread acceptance implies that people can benefit from training at any age in order to cope better with whatever stressors are present in their lives.

Training in emotional control and information-processing is part of the process of socialization—the reinforcement, punishment, or extinction of behaviors by peers, parents, teachers, and others²¹—that is deficient or absent in some criminals. Studies show that aggressive children have distorted or deficient information-processing mechanisms that lead them to experience anger when nonaggressive children do not.²² Crimes often are committed impulsively, without rational regard for the consequences of the behavior. Anger management can address some of these impulsive acts because it is premised on cognitive restructuring—learning how to think rationally, interpret events, anticipate consequences, and distinguish the normal emotion (anger) from the resultant undesirable behavior (violence or aggression). Changing perceptions and thoughts affects behavior. The importance of learning these skills is reflected in recent innovative application of anger management programs within the criminal justice system.

Recent Developments in Legal or Correctional Settings

The following examples illustrate how anger management programs are developing wider applications in legal proceedings and correctional settings:

- In January 1997, in response to chronic jail overcrowding, Los Angeles County developed an alternative sentencing plan, Community Based Alternatives to Custody, which includes a special lockup for domestic violence inmates, where inmates will take classes in parenting skills and anger management.²³
- In February 1997, Multnomah County in Oregon began requiring divorcing parents to take classes on

addressing their children's needs. In high-conflict divorces, the training includes anger management classes.²⁴

- A Colorado law that took effect July 1, 1997, provides that a person convicted of cruelty to animals can be forced to enter an anger management training course. Proponents of the law pointed out that killers Manson, Bundy, and Dahmer had histories of torturing animals.²⁵
- The Connecticut Department of Corrections includes anger management as one component of an innovative 12-step gang-busting program that doesn't shorten sentences but earns inmates privileges. A July 1997 report credits the program for reducing gang-related disturbances and assaults on staff members and inmates.²⁶
- In response to increased incidents of road rage in the past year, Portland's Driver Improvement Program permits counselors for teenagers convicted of at least two moving violations before age 18 to impose limits on driving privileges or require the teen to take a course in defensive driving or anger management.²⁷
- In October 1997, Idaho received a 3-year, \$600,000 federal grant to finance a program to lower the recidivism rate at the North Idaho Correctional Institution by improving life skills and employability of inmates. The program includes 25 hours of anger management instruction as well as follow-up and coordination between probation and parole officers and counselors involved in the program.²⁸

Learning Through Cognitive-Behavioral Therapy

Violence as a response to anger is a learned behavior that can be unlearned. One corrections official observed that there were three common variables in the background of participants in his anger management class: a family history of violence, including beatings, fights, and other abuse; disorganization in family structure and inadequate role models; and alcohol and drug problems.²⁹ Most participants had never been taught to respond to anger with anything other than aggression.

Anger management often is a form of cognitive-behavioral therapy,³⁰ a program designed to change offenders' perceptions, attitudes, and expectations that maintain their antisocial behavior. Participants first analyze their thinking patterns and question the underlying assumptions that led to the undesirable behavior. Then, through group discussion and role playing, they are introduced to alternative beliefs and behaviors. Anger management training is a complex method for developing thinking processes that leads to changes in behavior. Effective behavioral intervention programs usually employ a combination of methods to reinforce what is learned and to model desirable be-

havior with offenders.³¹ Within an anger management curriculum, role-playing, discussion, and an effective counselor all serve to model rational thinking and social skills. Reading assignments, anger journals, and writing exercises help develop more self-awareness and self-control and increase understanding of emotions and behavior. Effective programs usually include relapse prevention in the community—a treatment component absent from the anger management programs reviewed but recommended by several counselors. Although programs have a variety of components, they generally begin with a lesson in understanding the nature of anger.

The Nature of Anger and Its Relationship to Crime

Understanding Anger

Anger is a frequently experienced, normal emotion of varying duration and intensity, ranging from mild frustration to intense rage, which is accompanied by physiological and biological changes. These changes may include increased heart rate and blood pressure; increased muscle tension manifested by clenched teeth and fists; rapid breathing, trembling, reddening of the skin, agitation, and stomach pain, as well as an increase in the level of adrenaline and noradrenaline, which are energy hormones associated with fight or flight. However normal the emotion, anger has been described as “the chief enemy of public happiness and private peace.”³² When people are angry they assume “some of the worst characteristics of the people they hate, including bullying, prejudice, violence, and arrogance.”³³ Anger can be very disruptive, and it sometimes leads to aggression.

Anger is a feeling state, correlated with but independent from aggression, which is a motor behavior with intent to harm another person or object. Anger and aggression are related and may overlap, but correlation and causation are sometimes confused—experts do not agree that anger directly causes aggression.³⁴ One expert likens anger to an architect’s blueprint; just as a blueprint makes it easier to build a house, anger makes it easier to be aggressive.³⁵ Anger management focuses on provocation and physical response to that provocation and on the appropriate expression of anger.

Linking Anger to Crime

Criminal behavior often involves both anger and aggression. Research shows that violent men are more angry and hostile more often than nonviolent men,³⁶ but the exact relationship between anger and aggression is not so clear. Whether an angry person will be aggressive depends on “situational cues, cognitive attributions and appraisals, or prior learning and the evaluation of the outcome of actions.”³⁷ Other studies

have suggested that there may be a biologic component to being predisposed to anger.³⁸ Whether anger leads to aggression depends on the circumstances as well as on a person’s beliefs, perceptions, anticipated results, and perhaps also on the person’s biologic makeup.

According to the 1991 *Uniform Crime Reports*, aggressive acts typically occur between people who know each other and frequently occur during some kind of disagreement. For example, more than 50 percent of murder victims know their assailants and 34 percent of all murders committed in 1990 followed some type of disagreement, suggesting that murder often occurs in a social context and is not random.³⁹ A study conducted in the early ‘70s showed that felonies involving personal violence were found to occur most often where a prior relationship existed between the victim and defendant. For example, for felony arrests in New York City, in 83 percent of rape arrests and 69 percent of assault arrests, the victim knew the defendant.⁴⁰

Similarly, anger is more often experienced between acquaintances.⁴¹ The same New York study concluded that “criminal conduct is often the explosive spillover from ruptured personal relations among neighbors, friends, and former spouses.”⁴² Incidents giving rise to arrest were rooted in anger between people who knew each other.⁴³ But anger only sometimes leads to aggression, some aggression is calm and calculated, and not all aggressive behavior is criminal. Anger management programs may be wasted on non-angry violent offenders who could be better served by other treatment, and more research is needed.

Although relatively little is known about the relationship of anger and aggression, researchers report some insights on the circumstances and thinking patterns that lead to angry aggression. Surveys of college students and community residents in 1982 and 1983 showed that 83 percent of those surveyed reported becoming angry at least once or twice per week, 88 percent of self-reported anger-causing events involved at least one other person, 50 percent of anger episodes involved someone well known, although only 10 percent of episodes reportedly led to physical aggression.⁴⁴ However, 85 percent reported the cause of anger was “a perceived injustice by another person that was preventable and voluntary.”⁴⁵

Some researchers who have attempted to discern what final event triggers violence have focused on criminal thinking patterns. A study by Deffenbacher in 1993 generated a model relevant to criminal aggression which noted that anger arises in response to an act that is judged to be intentional, preventable, unjustified, and blameworthy—thus the angry person develops a sense of righteousness that the source of anger-causing behavior should be punished.⁴⁶

Criminal thinking follows a pattern based on skewed perceptions. The pattern of distorted thinking dis-

played by the angry individual includes overestimating the probability of negative outcomes, assuming that others are engaging in intentional, personal attacks, exaggerating the sense of unfairness, and failure to perceive ambiguities.⁴⁷ Following this pattern of thinking provides a moral imperative for an aggressive response, which can result in criminal aggression.⁴⁸ Alcohol, drugs, or fatigue may magnify the response. For example, alcohol use is related to impulsivity, reduced inhibition, and impaired judgment, which may aggravate relationships and predispose an individual toward violence.⁴⁹

When angry aggression is successful in satisfying needs, violent behavior can become what psychologists term a “process addiction”⁵⁰—a learned behavior that is reinforced by habit and by subculture. For example, in gangs, where violence is an accepted way of resolving conflict and angry expressions are valued and respected, the subculture provides motivation for criminal behavior. Whether anger management intervention will have impact depends in part on the circumstances under which anger arises.

In summary, negative thinking predisposes some people to be provoked by interpersonal interactions and to respond in an uncontrolled manner. Understanding the circumstances under which anger arises, the underlying warped perceptions, the effects of alcohol and drug abuse, and the relationship of thinking patterns to aggression are essential to anger intervention programs. Anger management training can help to prevent criminally aggressive behavior by cognitive restructuring. Changing the way people think includes developing skills in generating alternative solutions to problems and projecting the consequences of angry responses. Because a causal relationship between anger and aggression is not assumed, principles of anger management work to reduce and prevent both anger and aggression.

Anger Management Programs

Principles of Anger Management

Anger management involves learning to control one’s reactions to anger-provoking situations, including the emotional feelings of anger, the physiological arousal associated with anger, and the resulting angry behavior. Anger control techniques are based on assumptions of cognitive psychology, which places emphasis on the purpose, understanding, and reasoning in behavior.⁵¹ By making an individual more aware of the underlying thought process that leads to provocation and physiological arousal, anger control enables the individual to avoid aggressive behavior.

Strategies for managing anger include: (1) learning relaxation methods such as deep breathing and relaxing imagery; (2) cognitive restructuring, using logic to

understand one’s frustrations or sources of anger; (3) problem solving and recognizing that sometimes no solution may exist; (4) better communication skills by listening to underlying messages when being criticized and contemplating the best response; (5) using humor to defuse rage; and (6) changing one’s environment to reduce or eliminate the source of anger.⁵²

Anger management programs develop both cognitive and behavioral skills needed to employ these strategies. Cognitive skills are those related to paying attention and restructuring thoughts, whereas behavioral skills involve arousal reduction, communication enhancement, and problem solving.⁵³ Attentional skills increase the ability to recognize provocation cues and physical signs of arousal and are promoted by having program participants maintain an anger log to increase their self-awareness. Restructuring skills assess the anger-provoking circumstances and expectations and are developed by engaging in role-playing exercises with group discussion. Behavioral skills also are developed in an anger management curriculum in several ways: arousal reduction is achieved through positive imagery and relaxation exercises; communication is enhanced by practicing assertiveness in role-playing; and problem solving includes considering alternative responses to the events causing arousal through group discussion of hypothetical situations. The ability to learn is affected by the motivational level and intellectual ability of the participants and by the teaching style of the instructor or counselor.

According to Richard Althouse, Ph.D., anger-related behaviors are “shaped by social learning and maintained in a gender-based familial, social, and cultural context by individuals of varying levels of motivation and intellectual ability.”⁵⁴ Althouse believes that an effective anger management program must address these dynamic, interrelated variables. Participants in prison programs vary in their motivation, resistance, and readiness to change. A program presenter’s non-judgmental attitude and respectful interactions with participants reduce that resistance and increase motivation, supporting the long-term goals of changing thinking patterns and modifying behavior.⁵⁵

Dr. Althouse’s anger management program address four considerations: the surrounding environment, one’s thinking, the emotion itself, and one’s behavior. It helps offenders develop the skills necessary to recognize their angry feelings, to learn the causes of anger, and to deal with it in a responsible way that will facilitate their transition to productive community life.⁵⁶

Anger Management for Prisoners

The anger management program at Oakhill Correctional Institution⁵⁷ in Oregon, Wisconsin, is a didactic/experiential/interactive 8- to 10-week module led by Dr. Althouse in 90-minute sessions. The program is de-

signed to facilitate an inmate's ability to avoid self-defeating, victimizing behavior when angry and to promote positive self-management and conflict resolution.⁵⁸ The ultimate goals of the program are to make the institution and the community safer.

Admittance is predicated on inmate needs as identified by Assessment and Evaluation, or an inmate may be self-referred or referred by staff members based on demonstrable need. As a condition of admission, inmates must agree to attend all sessions, to participate actively in these sessions, and to complete all assignments. In order to get credit for completing the program, participants must pass a final examination consisting of multiple-choice questions on the materials covered in the course.

The program begins with an explanation and discussion of the importance of understanding what anger is and why its management is desirable. Participants examine what triggers anger and what problems arise from anger mismanagement; they explore male socialization, including values, beliefs, behavioral alternatives, and consequences; and they rehearse interventions.

Materials distributed to participants include a list of myths and facts about anger, magazine and newspaper articles addressing the impact of anger on health, the underlying fears from which anger arises, statistics on homicide, a journal article about anger and criminality, and cartoons that illustrate and reinforce various points covered in the program. The handouts are intended to deepen participants' understanding of anger. Participants are asked to maintain an anger journal to note what triggers their anger and what symptoms indicate they are angry and to consider alternative behaviors for discussion with the group. By combining readings, discussions, and journal reflection, the program strives to be both philosophical and practical.

Dr. Althouse employs the technique of "motivational interviewing" in leading the participants to recognize their potential problems with anger management and to reduce their defensiveness. In using this technique, the counselor does not assume authority but instead expresses empathy and leaves responsibility for change with the participants, who are free to accept or reject advice. Dr. Althouse does not attempt to convince the participants of the value of the anger management program and meets their resistance with reflection. It is a deliberate, nonjudgmental technique that is designed to overcome resistance to change.

Dr. Althouse asks for verbal feedback during the sessions and written comments at the end of his sessions. Typically, although a few of the group members initially are hostile and sarcastic and participate with reluctance, most appear to be at least mildly interested at the first session. Program graduates most often rank the program as either "helpful" or "very helpful."⁵⁹ Despite

the program being well received by participants, only about 15 percent of the 175 to 200 offenders who are referred to the anger management program at Oakhill each year actually receive the training.⁶⁰ The remainder are released without having received the training because Oakhill lacks sufficient staff to meet this demand.

Evaluation sheets summarizing the participants' opinions indicate that they found the presentation to be useful and informative, and they approved of the personable and respectful style in which it is taught.⁶¹ Some participants suggested expanding the program to cover more material, while one noted that more time could be spent on discussing anger within the family. Interestingly, another comment implied that society also must learn to deal with its anger toward offenders.⁶²

Aggression Replacement Therapy

Attic Correctional Services is a private, nonprofit agency under contract with the Wisconsin Department of Corrections (DOC) to provide programs for anger management, domestic violence prevention, and sex offender treatment as well as providing halfway houses in Dane County and the surrounding area. According to a field supervisor who manages the purchase of service contracts for three counties, the demand for anger management programs arose about 3 years ago when corrections agents perceived a need for a treatment program for clients on probation or in Intensive Sanctions who displayed violent tendencies but did not qualify as domestic abusers or sex offenders.⁶³ The program entitled Aggression Replacement Therapy (ART) initially was designed for young, assaultive, quick-tempered males who demonstrated a lack of impulse control. Attic currently is contracted to conduct sessions for 8 to 12 people who meet once per week for 90 minutes for 12 weeks at a cost of \$124 per group per session. Attic conducts separate programs for men and women.

Participants in ART are referred to the program by their probation or parole officers and are required to sign an agreement stating that they will attend, take the pre- and post-tests, maintain a daily log tracking moments of anger, complete all other homework assignments, respectfully participate in group discussions and role-playing, and keep all information discussed in the group confidential. Lessons include learning constructive interpersonal skills such as expressing a complaint, responding to anger, and dealing with group pressures. Participants learn to recognize physical signs of becoming angry and to employ anger-reducing techniques such as deep breathing, backward counting, pleasant imagery, taking time-outs, and thinking ahead. Participants also learn new problem-solving styles through self-speech, a method of changing thought patterns.

The facilitator models each skill in hypothetical situations and then involves the group in role-playing to

help in transferring the skills to real life situations. The final phase of the program involves dilemma discussion groups to acquire and practice the skills necessary for rational decision-making. The group is asked to solve hypothetical conflicts in order to learn how to think, reason, and resolve conflicts in real life.⁶⁴

One case manager and group leader admitted that most participants in ART do not want to be there. In a recent introductory session, in which much time was spent on completing paperwork and explaining the structure of the program, participants were quiet and generally maintained expressions of veiled contempt. When the paperwork was completed and discussion began, a few members willingly contributed comments but most sat in silence. (As with the Oakhill session, the presence of an observer may have stifled discussion.)

The group leader later explained that group dynamics vary, and some groups are more willing to participate and share experiences. (In one instance, women in one group formed such strong bonds of friendship that a participant invited the others to her wedding, passing out invitations at the sessions.) Based on her experience as a social worker and her observations teaching classes for several years, the leader believes the program is beneficial, despite a lack of data to support that conclusion. She cited anecdotal reports from prison staff who have observed the application of anger management principles by program participants who had long-standing reputations for violent behavior but when provoked demonstrated new skills in self-control.

Anger Management in a Deferred Prosecution Program

In Dane County, Wisconsin, approximately 1,000 defendants each year are diverted from the formal criminal justice process and are referred by the district attorney's office to the Deferred Prosecution Program, a county-funded program for treatment and supervision of certain offenders. Eligible defendants are often first-time offenders who are given an opportunity to plea bargain but then have adjudication withheld pending completion of a domestic violence or general aggression counseling program and fulfillment of other conditions such as restitution. Participants sign a contract to enter the program, and when they successfully fulfill their obligations, charges are dismissed, resulting in a criminal history but no record of conviction.

Program Director Nancy Gustaf estimates that program participants are split between two general categories of violent behavior: approximately 40 percent involve domestic violence, which by definition involves a spouse or significant other in a spouse-like arrangement, and about 60 percent have displayed general aggression, which may involve roommates but not with a pattern of power and control demonstrated by those categorized as incidents of domestic violence.⁶⁵ Gustaf reports the program's clients range from ages 17 to 45 but

are generally at the younger end of the spectrum and include both men and women. Participants are supervised by social workers in a manner similar to probation, with monthly meetings and follow-up checks on program participation at 6-week intervals to determine noncompliance. Participants can be assigned to one or more of several programs provided by local counseling services. Although insurance may cover the costs, participants must pay for the programs (which may be priced on a sliding scale) and contribute \$10 per month to the Deferred Prosecution Program. Failure to comply with the contract terms results in being sentenced, often to probation but sometimes with jail time imposed.

The programs to which these violence-prone individuals are sentenced focus on a specific need as determined by a professional evaluation. In Madison, Wisconsin, for example, Family Services, H & S Counseling, and Attic Correctional Services offer evaluation and treatment programs for sex offenders, domestic violence offenders, and individuals referred because of angry or aggressive behavior not meeting the criteria of domestic violence. H & S offers a 15-week general aggression program and a 24- to 36-week domestic violence program; each group meets for 2 hours per week. Individuals pay for their own treatment programs. Uninsured participants pay on a sliding scale, and rates are confidential.⁶⁶

Family Services, a nonprofit organization supported in part by United Way, conducts similar programs paid on a sliding scale by the clients, many of whom qualify for medical assistance. Clients first are evaluated to determine if underlying needs would require individual treatment before or instead of group therapy. The initial assessment costs \$110, individual treatment costs \$84 per session, and group sessions such as the general aggression program (which includes two facilitators) cost \$64 per session.⁶⁷ Sessions are 2 hours long and meet once per week; currently, the general aggression program runs 12 weeks and domestic violence intervention runs 24 weeks. Based on evaluations from exit interviews, recidivism reports, and comments from people returning to the program, the 12-week model for general aggression is being evaluated for possible expansion to 24 weeks.⁶⁸

Gustaf reports that out of the 1,000 annual referrals, 20 to 25 percent decline to enter the Deferred Prosecution Program, reoffend, or disappear before entering. Of the 750 who enter and sign a contract, about 70 percent complete the programs overall; for those involved in domestic violence, the success rate drops to about 60 percent.⁶⁹ Gustaf also agrees that it is important to distinguish anger management or general aggression programs from those designed to prevent domestic violence.

While some judges leave the determination of offender treatment programs to experts trained in evaluating needs and providing counseling, others assign offenders to specific treatment as a condition of sentence

or probation. Those judges need to be aware of the differences between anger management and domestic violence and the danger in assigning an offender to inappropriate treatment.

Distinguishing Anger Management From Domestic Violence Programs

Content Differences

Anger management is a segment of domestic violence treatment programs, which are broader in scope and have more components, including addressing personal and psychological factors and political issues that are not addressed in an anger management curriculum. Studies show that the most aggressive and violent batterers tend to focus their attention and hostility in the control of their partners, and because this hostility is methodically planned and controlled for maximum effect, it is different from the impulsive anger addressed in anger management programs.⁷⁰ Psychologist Darald Hanusa, a private practitioner and consultant to Attic Correctional Services, believes that some judges may not be aware of the distinction between these programs. Hanusa is concerned that assigning a batterer to anger management instead of to a program for batterers may be inappropriate and damaging.⁷¹

Mark Seymour, co-director of H & S Counseling in Madison, agrees with Hanusa that differences in issues and in treatment styles are important. Seymour explains that in contrast to domestic violence, general aggression occurs between two adults who are not in an intimate relationship. (If a child is involved, the treatment is for child abuse.) Examples include aggression against family members, bar fights, or altercations with bosses or coworkers. In domestic violence treatment the primary issue is power and control. A main component of treatment involves challenging belief systems that support the abusive relationship, including perceptions about sexism and inequality in a relationship. Participants in a domestic violence class are taught to replace the need for power and control with new skills in healthy assertiveness and improved communication. Teaching assertiveness includes a component of anger management, but the focus is on changing the underlying power and control orientation.⁷²

H & S Counseling offers a Domestic Violence Intervention Program (DVIP), which is distinguishable from the Generalized Aggression Program (GAP). DVIP is a 24-week program designed for men to eliminate power and control, oppression, sexism, intimidation, and violence in a domestic relationship. Men are taught new skills in order to interrupt the pattern of psychological, physical, or sexual abuse and to develop a healthy domestic relationship.⁷³ In contrast, GAP is a 15-week program available to both men and women in separate groups to work on aggression issues with

adults outside of intimate relationships. This program is designed to teach new skills in order to change behavior, including skills in problem solving, appropriate expression of anger, and interpersonal communication for an aggression-free lifestyle.⁷⁴

The clinical experience of some experts has led to the conclusion that anger management programming is not likely to be effective or properly implemented by batterers for two reasons. First, domestic abuse is not necessarily driven by anger, but by a socially learned need to control women; and, second, batterers use anger control mechanisms to get their way while continuing to abuse.⁷⁵ To prevent batterers from abusing their partners, a process of change must occur that goes well beyond the scope of anger management.⁷⁶ The fact that batterers may not lack the ability to manage anger in relationships and environments outside their home supports the conclusion that their behavior is rooted in other issues.

The Dangers of Assigning Anger Management for Batterers

Gondolf and Russell have identified the following shortcomings in using anger management programming with batterers: (1) Anger management implies that the victim provoked the anger with annoying behavior and precipitated the abuse; (2) anger management does not address other undesirable premeditated controlling behavior such as manipulating and isolating; for example, a man taking a "time out" also serves as a ploy to stop a woman from speaking up or challenging him; (3) batterers use anger as an excuse for accepting responsibility for their behavior, which in turn delays the necessary personal change by encouraging self-justification and victim-blaming; (4) anger management can be misconstrued as a "quick-fix" that enables men to use the program to manipulate their wives into returning to a still dangerous environment; (5) anger management is less threatening to the community and easier to accept than changing established sexist social conditions that give rise to domestic abuse; (6) anger management does not address the economic, social, and political injustices and patriarchal social structure that perpetuates domestic abuse and violence toward women.⁷⁷ They conclude that anger management alone might do more harm than good for batterers and their victims, and they believe that it diverts attention from societal responsibility.

"Anger management" for batterers raises some doubts because it suggests that men who are already controlling need to learn to be more controlling. But programs for batterers encompass cognitive-behavioral treatment, which is far more inclusive. Anger management, as noted earlier by Hanusa and Seymour, is only one part of the treatment provided for batterers. A national survey of programs for men who batter con-

ducted in 1984 shows that more than 75 percent of those programs include anger management, problem-solving skill training, and communication training; and more than 50 percent include stress management and behavioral contracting.⁷⁸ To discuss all components of treatment for batterers is beyond the scope of this article, but sentencing judges should be aware of the distinctions between programs and avoid the possible risks in inappropriate sentencing.

It appears there is agreement that anger management may be useful if presented in conjunction with other training for batterers, but alone it is insufficient and potentially risky. In some instances of animal abuse, the same concerns should exist. For example, a man who kills his girlfriend's kitten or beats a dog to death in the presence of his children is a violent abuser whose behavior should raise a red flag with judges. He likely needs more than anger management—or other treatment entirely—when such behavior obviously also serves to intimidate and control others. Sentencing judges would be prudent to require a psychological evaluation to determine whether anger management is appropriate or whether some other treatment is better suited for a particular offender. Anger may be a manifestation of other problems because it is common to depression, paranoia, psychotic reactions, hormonal imbalances, and neurologic conditions.⁷⁹ Anger management may be useful training for some people lacking the awareness and cognitive skills to cope with anger, but it is not a panacea for all forms of violence.

Evaluation of Program Effectiveness

Sample Studies of Anger/Aggression Control Programs

A number of studies in prisons conclude that anger management has some value in helping prisoners cope with being incarcerated and in changing thinking patterns. Following are some examples of such studies:

Evaluation of EQUIP: “Equipping Youth to Help One Another.” A study of 200 male offenders age 15 to 18 serving an average of 6 months for either parole violations or for less serious felonies (breaking and entering, receiving stolen property, burglary) at a medium-security facility in a midwestern state showed a reduction in recidivism and improvement in institutional behavior. The group received training in a multi-component program that combines the social skills training, anger management, and moral education components of Aggression Replacement Training with “guided group interaction.” The program length was not stated. The treatment group showed a recidivism rate of one-half that of the control groups after 6 months and about one-third at 12 months. Although the EQUIP group showed no gains in moral judgment, test scores for the group showed improved social skills and significant gains in institutional conduct in terms

of self-reported misconduct, staff-filed incident reports, and unexcused absences from school. Informally, the staff reported that the study group was easier to manage than other groups in that there were fewer incidents of fighting, verbal abuse, staff defiance, and AWOL attempts.⁸⁰

Anger Management Workshop for Women. A 2-hour workshop conducted on three consecutive weeks provided anger management training to a random sample of 11 medium-security women inmates at the Utah State Prison. Inmates' ages ranged from 28 to 45 with a mean of 35.4, time served ranged from 1 to 7 years with a mean of 2.2 years, and the crimes for which they were serving time included drug convictions, felony theft, forgery, and murder. The components of the training included identifying symptoms of anger, learning why people get angry, and understanding how anger can be effectively managed. Test scores revealed that the inmates felt significantly less angry at the end of the workshop, and the women reported feeling better able to cope with the frustrations of being incarcerated. The main focus was to think before acting when they became angry. Learning coping skills such as walking away from conflict and cooling down gave the women time to think and thus avoid destructive behavior. The authors acknowledge that the test sample was small, which reduces generalizability, but they selected a small group because group education and treatment is believed to be more effective in samples of 15 or fewer inmates.⁸¹

Canadian Study of Assaultive and Nonassaultive Offenders. A 5-week program for anger management taught to 57 male assaultive and property offenders in a maximum security jail reduced aggression and anxiety while increasing self-esteem in some of the participants. The program included explanation of the causation, symptoms, and techniques for coping with anger. Of the participants, assaultive offenders showed increased feelings of guilt but no decrease in the measure of anxiety or aggression. The authors note that increased guilt may be significant if offenders begin to consider the impact of their behavior on others.⁸²

Although the prison studies suggest that anger management treatment has some value, insufficient research has been done to determine the scope of its usefulness and the duration of its effects.

An Internal Wisconsin DOC Report

A report prepared in 1995 by Michael Hammer, Ph.D., former staff psychologist at the Columbia Correctional Institution in Portage, Wisconsin, concluded that it is unknown how effective anger management programs are in helping participants, which programs are most effective, how many participants benefit, to what extent they benefit, and whether mandatory participation versus voluntary participation affects pro-

gram outcome.⁸³ Hammer reported that much of the research on this subject has occurred since 1990, targeting incarcerated adult males with anger or aggression problems. The studies showed that the programs usually help participants reduce their anger and aggressiveness and also improve understanding of the anger process, decrease their number of conduct reports, improve ability to cope with anger-provoking situations, improve social skills, and increase guilt about their behavior.⁸⁴ Studies conducted on adolescent males reported similar results.

Although Hammer's report was not focused on domestic violence programs, he included a review of studies related to such programs because they often contain an anger management component. Anger management programs were effective in understanding and reducing domestic violence and aided in reducing passive-aggressiveness, reducing depressive symptoms, increasing relationship adjustment and satisfaction, and decreasing irrational or extreme beliefs about how relationships ought to function.⁸⁵ A study by Scales in 1995 showed that batterers' recidivism rate dropped by 50 percent after treatment. When both parties received programming, it reduced the number of arguments, improved relationships and the understanding of anger arousal, and eliminated further domestic violence for 6 to 8 months.⁸⁶ Other studies concluded that long-term violence is not abated and that although some treatment might be effective, sociopathic batterers and other individuals with personality disorders are generally resistant to such treatment.⁸⁷

Hammer's report directed the Department's attention to several other issues. During the Assessment and Evaluation process the Department should be aware that researchers have noted a link between anger and alcoholism, with alcoholics showing the greatest degree of anger and risk for continuing anger problems.⁸⁸ Furthermore, differences exist between angry and non-angry but nonetheless aggressive inmates. Chronically angry prisoners perceive and interpret events differently based on irrational beliefs, which may have implications for assessment of treatment program needs.⁸⁹ Hammer concluded that although anger management programs have demonstrated positive results, additional research is necessary to evaluate these programs.

Although anger management programs are not a panacea, uncertainty about the programs' success does not mean that it is not useful in reducing violence. The widespread use of anger management programs in a variety of settings reinforces the message that acting in rage is not an excuse for violent behavior. As with programs for batterers, anger management programs provide a laboratory for developing an ideal treatment model. Learning the limitations of existing programs is a significant step toward improving them.

Challenges and Caveats

Challenges to Program Evaluation

In 1996 the Wisconsin Department of Corrections (DOC) created an office to conduct internal auditing of programs to evaluate implementation of programs to determine if a program is being carried out as planned and is meeting its objectives. No process audit or effectiveness evaluation is planned for the anger management programs at this time.⁹⁰ Even if there were plans to evaluate anger management programming in DOC, any evaluation of programs is problematic in several ways. Offenders move within and then out of the state's prison system, and thus they can be either difficult or impossible to track. For example, Dr. Althouse explained that he would not automatically be informed if one of his program participants reoffended and were incarcerated at another institution outside of Oakhill and Columbia, the two locations where he works. Offenders also may move out of the state and have no further contact with the Wisconsin prison system. Program graduates who are released from prison may continue to engage in violent behavior but not be reincarcerated.

It would be challenging to measure the impact of an anger management program because of the difficulty of isolating it from other factors that may influence behavior. Other influences include the shock of being incarcerated or the exposure to the court system and threat of incarceration; the impact of other treatment programs; and the influence of changes in age, physical and mental health, finances, family circumstances, and employment status.

However, some corrections officials believe that viewing an anger management program in isolation from other factors affecting behavior may be the wrong approach. Joe Lehman, secretary of corrections in Washington State, believes a better approach would be to evaluate anger management programs in terms of how their success relates to other influences and to other programs.⁹¹ This represents systems thinking, which focuses on interrelationships rather than on the individual program. Because no program operates in a vacuum, and a program's effectiveness may be positively or adversely affected by other factors, it may be more reasonable to study these interrelationships in order to maximize whatever positive potential exists for anger management.

Caveats to Prison Research

Confronted with pandemic prison overcrowding and limited resources, policymakers should evaluate the research conducted in correctional settings in order to best allocate those resources to programs that are most effective. However, decisionmakers must exercise caution in interpreting and generalizing the results of studies and remain mindful of the limits inherent in

studying prison populations. Edwin Megargee of Florida State University articulated these concerns as follows:

Prisoners represent only a small portion of all those who commit criminal offenses, and an even smaller fraction of the overall population. Those of us who do assessment research in correctional settings must continually remember that we are dealing with atypical, highly biased samples of people exposed to massive situational influences specifically designed to alter their attitudes, personality, and behavior. Incarceration is a massive intervention that affects every aspect of a person's life for extended periods of time. We must be extremely cautious in generalizing the findings we obtain among prisoners to people in free-world settings, just as we must be careful to replicate free-world findings before applying them in correctional settings.⁹²

He also cautions that offenders have different approaches to tests administered during initial assessment compared to later tests taken voluntarily for research purposes, noting that offenders who volunteer differ dramatically from those who do not.⁹³ For example, a report on the Anger Management Program at the Colorado State Penitentiary showed that inmates who refused to participate in the program differed in important ways from those who did participate; the most important difference was that non-participants had been significantly more aggressive in their recent behavior.⁹⁴ The efficacy and validity study noted:

... the qualities which result in the greatest recent history of aggressive behavior also serve to reduce the likelihood of participation in a voluntary Anger Management Program. If confirmed in subsequent studies, this may well justify the involuntary imposition of such programs on that portion of the population which most needs it. It may also be found that this group properly avoided such a program because it would have no remarkable effect on their behavior.⁹⁵

Conclusion

In summary, long-established principles and methods of controlling anger and aggression are being broadly used in innovative applications both outside and within legal and correctional settings as one method to reduce violence. The use of anger management as a facet of conflict resolution in schools holds promise for reducing violence in the future. However, not all of these applications may be appropriate and some may be harmful.

Widespread program application suggests that anger management is a useful social skill that can be learned and applied by people facing stress in all walks of life, including persons under supervision in the criminal justice system. Studies show that anger management programs have significant utility in reducing conduct reports in prison and have impact on reducing short-term recidivism for some juveniles. If anger management skills are useful in maintaining family and work relationships, they will be of value in integrating offenders back into the community.

Anger management training alone may be insufficient for certain offenders and potentially harmful to their victims. Domestic batterers, some animal abusers, and non-angry violent aggressors may be more appropriately served by other treatment. Alcoholism and psychiatric disorders affect behavior and impair the success of learning or implementing anger management skills. Professional assessment to determine program needs before assignment may be more costly, but also may help avoid the danger of inappropriate sentencing and reduce the waste of treatment resources.

Although formal studies, anecdotal reporting, and self-evaluation conclude that anger management counseling is of value, we do not know to what extent anger management programs have helped people, for whom the programs are most effective, or how long the programs' effects last. We have not yet learned how to maximize the potential beneficial effects of anger management by coordinating treatment with other programs which also affect behavior. Some experts believe that participation in follow-up support groups would reinforce the learning that occurs in an anger management program, just as it does for alcohol and drug abuse programs.

Learning about anger and its relationship to undesirable behavior is an important social skill that some people lack but are capable of learning. However, if we are not studying and measuring the results of anger management counseling, we don't know how effective the program is, and we may be failing to consider other alternatives that may work more effectively. Without additional research, limits on our existing knowledge complicate comparisons between programs and inhibit analysis of how best to allocate resources in the correctional system.

Anger is often involved in the commission of crime, but is anger management of use in preventing crime? The short answer is, for certain offenders, no; for some offenders, possibly; but there is much we do not know. Anger management focuses on preventing negative behavior that arises from impulsive hostile aggression by teaching self-awareness, self-control, and alternative thinking and behaviors. It is not designed to address, and likely will have no impact on, predatory or non-emotional calculated acts of aggression.

Anger management is premised on the ability to learn new skills and the willingness to implement those skills. Persons with mental illness or impaired intellectual functioning from drug abuse or alcoholism may be unable to learn the requisite skills or may be incapacitated from implementing those skills. Others may remain more influenced by community norms that call for an aggressive response to a perceived insult. We can measure what has been learned by program post-testing and by observing skill demonstration in role-playing and discussion, but we cannot accurately predict behavior.

We do not know if a program's impact depends on whether the program is voluntary or mandatory. When a program is assigned within the realm of the criminal justice system, it carries an element of coercion. Some offenders are required to complete a program before release whereas others volunteer, although we do not know their reasons for volunteering. Those reasons may include a genuine interest in self-improvement, to avoid behavior that led to contact with the criminal justice system, to favorably impress others, to avoid boredom while incarcerated, or, in the case of some batterers, to convince domestic partners to stay with them. Instructors have observed that the most initially reluctant participants express the greatest satisfaction with what they have learned.

We know that alcoholism, drug abuse, and psychiatric disorders impair thinking ability and undermine anger management skills, but we do not know what other factors may enhance or detract from what is learned in these programs. The program goals include fostering insight, increasing the ability to predict and appreciate the consequences of behavior, and restructuring a person's environment to prevent violence. While participants are in a discussion group in a controlled environment with an incentive to conform, they may be able and willing to recognize what makes them angry, to express their feelings, and to calm themselves. However, what happens outside the program is guaranteed to be different from role-playing in a therapy group. Upon release, returning to an environment that provokes frustration and provides pressure to resume negative behavior may undermine any positive change. In contrast, having a job, economic stability, and family and friends who function well in society are factors all likely to reinforce anger management skills by providing motivation and support.

If program participants feel more in control, empowered with communication skills, and better able to cope with stress and frustration, the program may have served its purpose. If participation develops social skills and improves relationships with family, friends, and coworkers, factors known to contribute to a stable and law-abiding lifestyle, the program has value. We can measure treatment outcome by testing, by observation of demonstrated skills, by conduct reports, by recidivism rates, and by evaluation of the overall differences in the quality of life such as the ability to sustain relationships and employment. But research on the results of anger management training outside of a prison environment is very limited.

Anger management can be taught in a variety of settings in a few months' time. It may improve the functioning ability of some persons and may prevent some violence, but we need to learn how to mine the program's potential for preventing crime. We already know that crime is not always prevented by the imposition of

harsher criminal penalties. Our reputation as a violent society speaks for the need to learn about controlling anger. If we believe that social controls and individual self-control play a more significant role in preventing crime, then anger management programs to develop and enhance those controls merit further study.

NOTES

¹A search of Westlaw newspaper databases reveals that the term "anger management" was used in 67 documents in 1991, 372 documents in 1993, 749 documents in 1995, and 1,245 documents in 1997.

²Simon Kemp and K.T. Strongman, "Anger Theory and Management: A Historical Analysis," *History of Psychology*, Rand B. Evans, Ed., reprinted in *108 American Journal of Psychology* 397 (Fall 1995).

³Howard Kassonove and Denis G. Sukhodolsky, "Anger Disorders: Basic Science and Practice Issues," *Anger Disorders: Definition, Diagnosis, and Treatment* (hereinafter *Anger Disorders*) Taylor & Francis (1995) at 3.

⁴Kassonove and Sukhodolsky in *Anger Disorders, supra*, report that in the 5-year period from 1986 to 1990, in anger-correlated or anger-caused events, more than 300 people were killed or seriously wounded in American schools and another 242 were held hostage at gunpoint.

⁵Frank J. Mifsud, "TV or Day Care?" *Maclean's* (Sept. 9, 1996) at 5.

⁶Christopher Elser, "Juvenile Crime Rate Rises—Students Caught With Weapons in School Set Record in Upper, Central Bucks Areas," *Allentown (PA) Morning Call* (July 24, 1997) at B1.

⁷Sandra Biloon and Marilyn Quinn, "Labor and Management Work Together in Connecticut's Vocational Technical Schools to Create a Safer School Environment," *Public Personnel Management* (Dec. 1, 1996) at 439.

⁸"Lifelines Health Calendar," *Florida Today* (Sept. 3, 1996) at 4D.

⁹Elaine McShulskis, "Workplace Anger, A Growing Problem," *HRMagazine* (Dec. 1, 1996) at 16.

¹⁰"Be an Explosives Expert—Managing Your Anger on the Job," *Men's Health* (Dec. 1, 1995) at 44.

¹¹J. Carol Stuecker, "Employers Can Act to Check Workers' Anger," *Business First of Louisville* (May 26, 1997) at 36.

¹²Heesun Wee, "Conquering Road Rage; From Exercise Tapes to Anger Management, Experts Offer Tips on Beating Freeway Stress," *Los Angeles Daily News* (Nov. 17, 1997) at L3.

¹³Yong Tam Kui, "Alcoholism, A Hidden Problem in Malaysia," *The New Straits Times* (Nov. 23, 1997) at 12.

¹⁴Jill Hudson, "Summer Basketball Courts Young Men; Night Practice, Games Provide Energy Outlet and Food for Thought," *The Baltimore Sun* (July 17, 1997) at 1B.

¹⁵John McCormick and Sharon Begley, "How to Raise a Tiger," *Newsweek* (Dec. 9, 1996) at 52.

¹⁶A.D. Abernathy and C. Cox, "Anger Management Training for Law Enforcement Personnel," *Journal of Criminal Justice* (1994) at 459.

¹⁷Virginia Mullery, "Township's Heart Kept Beating: Patricia Jones Carries on a Tradition of Helping Those in Need," *Chicago Tribune* (July 20, 1997) at 1.

¹⁸Cynthia Eagles, "Violence at Work Plagues Couple for the Second Time: Husband Attacked 4 Years After Wife Shot," *Courier-Journal* (Louisville, KY) (July 3, 1997) at 3B.

¹⁹Dan Gunderson, "Weekend Edition," *Minnesota Public Radio* (Nov. 9, 1997), reporting on the emotional aftermath of North Dakota floods.

²⁰Wayne M. Sotile and Mary Owen Sotile, "Managing Yourself While Managing Others," *Physician Executive* (Sept. 1, 1996) at 39.

²¹Kassinove and Sukhodolsky, *Anger Disorders, supra*, at 19.

²²*Id.*

²³Tina Daunt, "A Look Ahead: By Sending Home Less Risky Inmates and Tracking Them With Electronic Bracelets, the County Plans on Easing Jail Crowding and . . . Keeping the Dangerous Behind Bars," *Los Angeles Times* (July 28, 1997) at B1.

²⁴Maya Blackmun, "Domestic Disputes Can Unleash Frightening Rage, Experts Say," *Portland Oregonian* (July 18, 1997) at A21.

²⁵"Colorado's New Laws," *The Gazette* (Colorado Springs) (July 1, 1997) at A9.

²⁶Brigitte Greenberg, "Novel Prison Program Tries to Cut Inmates' Gang Ties: A 12-Step Approach That Treats Affiliations Like an Addiction Appears to Find Success in Connecticut — Other States Watch Closely," *Los Angeles Times* (June 29, 1997) at A25.

²⁷Michael J. Berlin, "Portland-Area Traffic Officials See Rise in Local Road Rage," *Portland Oregonian* (July 23, 1997) at A13.

²⁸"Idaho Gets \$600,000 to Assist Prisoners," *Portland Oregonian*, October 19, 1997.

²⁹James Miller, assistant regional chief, Region 4, Wisconsin Department of Corrections, telephone interview, October 27, 1997.

³⁰Cognitive behavioral therapy assumes that a person's thoughts, interpretations, and self-statements about external events strongly influence emotional and behavioral functioning. The goal in treatment is to identify and challenge irrational and distorted thinking patterns and to develop more adaptive beliefs. See, e.g., *Anger Disorders, supra*, at 113.

³¹Paul Gendreau, *The Principles of Effective Intervention With Offenders*, paper presented for the International Association of Residential and Community Alternatives "What Works in Community Corrections: A Consensus Conference," Philadelphia, PA, November 3–6, 1993.

³²Kassinove and Eckhardt, "An Anger Model and a Look to the Future," *Anger Disorders, supra*, at 203.

³³A. Ellis, foreword to *Anger Disorders, supra*, at xii.

³⁴Kassinove and Sukhodolsky, *Anger Disorders, supra*, at 12.

³⁵*Id.*

³⁶Eric T. Gortner et al., "Psychological Aspects of Perpetrators of Domestic Violence and Their Relationships With the Victims," *The Psychiatric Clinics of North America: Anger, Aggression, and Violence*, Maurizio Fava, ed., 337 at 341 (June 1997).

³⁷Angela Scarpa and Adrian Raine, *supra*, at 383–384.

³⁸*Id.* at 384–386. The authors note that possible biologic pathways to antisocial or aggressive behavior involve areas of the brain associated with inhibiting response to punishment that are mediated by the septo-hippocampal region and with activating behavior in response to reward or to escape punishment that is mediated by the limbic system. Levels of the stress hormone cortisol (used to measure emotional arousal) were found to be lower in habitually violent offenders and ag-

gressive children, yet higher in violent alcoholics. Results are inconclusive as to the role of cortisol in emotional aggression.

³⁹Sergei V. Tsytsarev and Gustavo R. Grodnitsky, "Anger and Criminality," *Anger Disorders, supra*, at 93.

⁴⁰*Felony Arrests: Their Prosecution and Disposition in New York City's Courts* (Vera Institute of Justice), Longman (1981) at 135.

⁴¹Tsytsarev and Grodnitsky, *supra*, citing Averill, 1983.

⁴²Malcolm Feeley, foreword to *Felony Arrests: Their Prosecution and Disposition in New York City's Courts* (Vera Institute of Justice), Longman (1981) at xii.

⁴³*Id.*

⁴⁴*Id.* at 93, citing a series of surveys by Averill, and *Anger Disorders, supra*, at 83.

⁴⁵*Id.*

⁴⁶*Id.*

⁴⁷*Id.* at 95.

⁴⁸*Id.*

⁴⁹Eric T. Gortner, *supra*, at 343.

⁵⁰Tsytsarev and Grodnitzky, *supra*, at 100.

⁵¹Edward W. Gondolf and David Russell, "The Case Against Anger Control Treatment Programs for Batterers," *Response*, vol. 9, no. 3 (1986) at 1.

⁵²*Controlling Anger—Before It Controls You*, American Psychological Association.

⁵³Gondolf and Russell, *supra*, at 2.

⁵⁴Richard Althouse, *Anger Management Program*, Oakhill Correctional Institution Psychological Services program materials (August 1997).

⁵⁵*Id.*

⁵⁶James A. Gondles, Jr., executive director, American Correctional Association, foreword to *Cage Your Rage: An Inmate's Guide to Anger Control*, American Correctional Association (1992).

⁵⁷Oakhill is a minimum security correctional facility located a few miles from Madison.

⁵⁸Richard Althouse, *Oakhill Psychological Services Anger Management Program Outline* (undated).

⁵⁹Richard Althouse, interview at Oakhill Correctional Institution, July 24, 1997, and telephone interview, August 13, 1997.

⁶⁰Richard Althouse, telephone interview, November 18, 1997.

⁶¹Richard Althouse, *Anger Management Program Summary Evaluation Sheet, OCI Clinical Services* (June/July 1996).

⁶²Comments from summary of evaluation sheets, July - September 1997, on file with Dr. Althouse.

⁶³Telephone interview with Michelle Rose, DOC field supervisor (July 9, 1997).

⁶⁴*Twelve-Week Program Agenda and Introduction to ART*, Attic Correctional Services, Inc. (undated, copy on file with author).

⁶⁵Nancy Gustaf, director, Deferred Prosecution Program, telephone interview, August 25, 1997.

⁶⁶Mark Seymour, co-director, H & S Counseling, telephone interview, August 26, 1997.

⁶⁷Lyndell Rubin, intake coordinator, Family Services, telephone interview, August 26, 1997.

⁶⁸*Id.*

⁶⁹Nancy Gustaf, *supra*.

⁷⁰Eric T. Gortner, *supra*, at 341.

⁷¹Darald Hanusa, Ph.D., telephone interview, July 17, 1997. Dr. Hanusa has developed a model treatment plan for abusive men, Alternative Treatment for Abusive Men (ATAM). He also is concerned that some programs for batterers are deficient because they are too short, asserting that to be effective, programs should span a minimum of 24 weeks.

⁷²Mark Seymour, telephone interview, August 26, 1997.

⁷³*Do You Have a Healthy Lifestyle?*, H & S Domestic Violence Counseling, undated informational brochure.

⁷⁴*Id.*

⁷⁵Gondolf and Russell, *supra*, at 3.

⁷⁶*Id.*, citing a study by Gondolf and Hanneken.

⁷⁷Gondolf and Russell, *supra*, at 3, 4. Gondolf and Russell suggest that resocialization programs such as RAVEN and theme-centered discussion programs such as Second Step and accountability workshops are better alternatives that help batterers end abuse while avoiding the shortcomings of anger management treatment.

⁷⁸Eddy and Myers, 1984.

⁷⁹Jerry L. Deffenbacher, "Ideal Treatment Package for Adults with Anger Disorders," *Anger Disorders*, *supra*, at 152.

⁸⁰Leonard W. Leeman et al., "Evaluation of a Multi-Component Group Treatment Program for Juvenile Delinquents," *19 Aggressive Behavior* 281 (Nov. 1993).

⁸¹Larry L. Smith et al., "Research Note: An Anger-Management Workshop for Women Inmates," *75 Families in Society* 172 (March 1994).

⁸²Paul M. Valliant and Lynne M. Raven, "Management of Anger and Its Effect on Incarcerated Assaultive and Nonassaultive Offenders," *75 Psychological Reports* 275 (August 1994).

⁸³Michael L. Hammer, *Research on the Effectiveness of Anger Management Programs/Interventions*, paper prepared for Wisconsin DOC (1995).

⁸⁴Hammer cites studies by Gaertner (1984); Macpherson (1986); McDougall & Boddie (1991); Napolitano & Brown (1991); Napolitano (1992); Kennedy (1992); Hunter (1993); Smith & Beckner (1993); and Valiant & Raven (1994).

⁸⁵Studies cited include Cahn (1989); Faulkner et al. (1992); Flournoy (1993); Gelb (1994); Larsen (1988); and Scales (1995).

⁸⁶Hammer cites studies by Deschner & McNeil (1986); Bridge (1988); Deschner, McNeil, & Moore (1986).

⁸⁷Hammer cites studies by Lindquist, Telch, & Taylor (1983); Gondolf & Russell (1986); Goldolf (1988a, 1988b); Serin & Kuriyuchuk (1994).

⁸⁸Hammer cites Potter-Efron (1991).

⁸⁹Hammer cites Gembora (1986); McDougall & Boddie (1991).

⁹⁰Gloria Thomas, attorney and auditor, Office of Audits, Investigations and Evaluation, Wisconsin Department of Corrections, telephone interview, August 20, 1997.

⁹¹Joseph D. Lehman, secretary, Washington State Department of Corrections, interview, September 12, 1997, Madison, Wisconsin.

⁹²Edwin I. Megargee, "Assessment Research in Correctional Settings: Methodological Issues and Practical Problems," *7 Psychological Assessment* 359 (1995).

⁹³*Id.* at 365, citing studies by Dahlstrom, Pantou, Bain, & Dahlstrom (1986).

⁹⁴*Program Plan: Anger Management Program*, Colorado Department of Corrections (September 12, 1994), updated packet of materials marked "Property of NIC Information Center," dated January 17, 1996.

⁹⁵*Anger Management Research Project*, Colorado State Penitentiary, Department of Corrections (September 16, 1994).