

# The Prevalence of Trait Anger and its Relationship with Aggression, Hostility, and Psychological Distress within Psychiatric Outpatients

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## Introduction

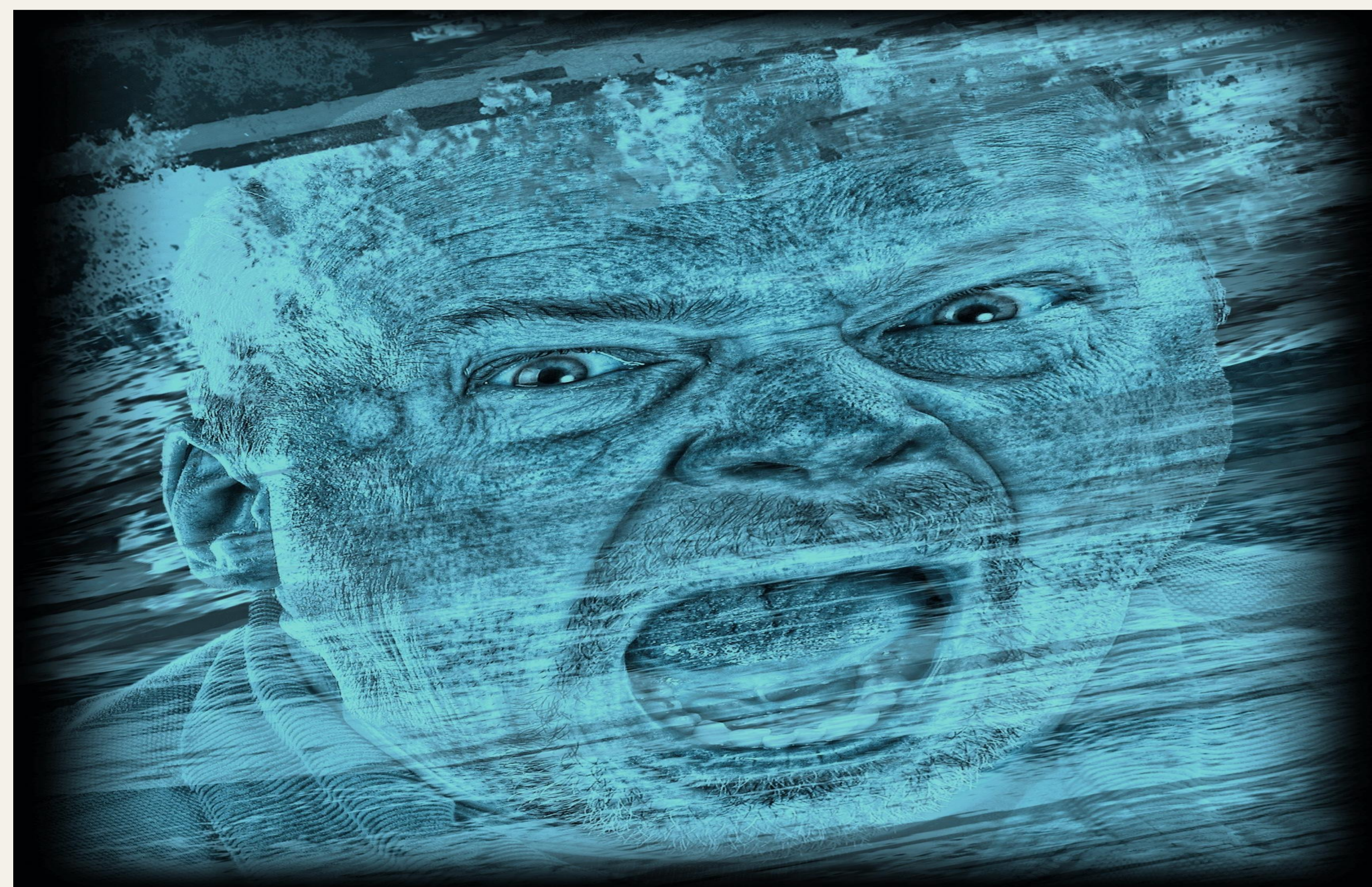
**High trait anger** reflects the tendency to experience more frequent, more intense and longer episodes of state anger (Spielberger, 1988).

Anger is a **clinically relevant emotion** that increases the chance of:

- ❖ Premature termination of treatment (Erwin et al., 2003).
- ❖ A less strong therapeutic alliance (DiGiuseppe & Tafrate, 2010).
- ❖ Resistance to change (Kassinove & Tafrate, 2002).
- ❖ Less collaboration in goal setting (Hubble et al., 2004).

Moreover, anger might lead to or result from other negative emotions and behaviors, such as anxiety, hostility, depression, and aggression.

Therefore, our goal was to enquire about anger difficulties in psychiatric outpatients and to investigate the relationship between trait anger and aggression, hostility, and psychological distress within these patients.



## Method

### Participants

- ❖ 80 psychiatric outpatients from Delta Psychiatric Hospital
- ❖ Age range: 19 to 68 years ( $M = 44.45$ ;  $SD = 12.06$ )
- ❖ ♀ = 51 (63.8%), ♂ = 27 (33.8%)
- ❖ Mostly depressed patients
- ❖ Average treatment duration:  $\pm 8$  years

### Materials

- ❖ See Table 1

### Procedure

- ❖ Participants filled in a pack of questionnaires

Table 1. Materials used in this study

Measure	Construct	Example
AVL	Aggression	"Given enough provocation, I may hit another person"
SCL-90	Psychological Distress Hostility	"Feeling blue"; "Poor appetite" "Getting into frequent arguments"
STAXI-2	Trait Anger	"Furious when criticized in front of others"
BDI-II	Depression	"Sadness"; "Guilty feelings"
STAI	Trait Anxiety	"I have disturbing thoughts"

## Results

- ❖ Trait anger is prominent in psychiatric outpatients (see Table 2). More than one quarter of the patients report experiencing anger frequently and intensively. More than 10 percent of patients score very high on trait anger, indicating that their anger might be problematic.
- ❖ Moreover, trait anger is highly associated with aggression, hostility and psychological distress (see Table 3).
- ❖ Finally, moderate to strong correlations were found between trait anger and anxiety / depression within the psychiatric outpatients (see Table 3).

Table 2. Percentage of patients scoring high on trait anger

High-Anger-Prone: $\geq 23$	Problematic Anger: $\geq 30$
27.5%	10,0%

Table 3. Associations between trait anger, aggression and psychological distress

Measure	Trait Anger
Aggression	.79**
Hostility	.75**
Psychological Distress	.53**
Depression	.37**
Trait Anxiety	.42**

Note: \*\*  $p < .01$ ; \*  $p < .05$

## Conclusions & Implications

- ❖ It is important that clinicians routinely screen for the presence of anger given its high prevalence.
- ❖ If a patient reports a high degree of anger, clinicians should take extra care to motivate the client and to build a strong therapeutic alliance
- ❖ Clinicians might benefit from treating anger on a symptomatic basis

## References

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