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OVERCOMING ANGER AND IRRITABILITY

A self-help guide using Cognitive Behavioral Techniques

WILLIAM DAVIES
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Acknowledgements

Reading through previous Acknowledgements contained in books in this series I see that the form is to thank all the wonderful people that have written about and researched Cognitive Therapy. Quite right too, I hope that is taken as read. More immediately, however, I would like to thank Amy and Helen for the work they put in to typing this book at very short notice, under great pressure, and with very little irritation! (One or two assertive comments perhaps, but probably well justified!) Also to Paul Gilbert for pushing forward what he terms my ‘approachable writing style’ and, just as much, to the publishers for creating a series that is so relevant and important that it makes one enthusiastic to write for it. Finally, although I can’t imagine they will ever read this, an acknowledgement to ‘Danny and Vicky’ who feature in one of the many case studies and who may well be recognised for the well-known characters they are. A special word of thanks to them for the endless entertainment they provide, and of reassurance that their inclusion is not yet another dig at them, but is simply intended to create an entirely non-malicious smile in the reader.
Introduction

Why a cognitive behavioral approach?

Over the past two or three decades, there has been something of a revolution in the field of psychological treatment. Freud and his followers had a major impact on the way in which psychological therapy was conceptualized, and psychoanalysis and psychodynamic psychotherapy dominated the field for the first half of this century. So, long-term treatments were offered which were designed to uncover the childhood roots of personal problems – offered, that is, to those who could afford it. There was some attempt by a few health service practitioners with a public conscience to modify this form of treatment (by, for example, offering short-term treatment or group therapy), but the demand for help was so great that this had little impact. Also, whilst numerous case histories can be found of people who are convinced that psychotherapy did help them, practitioners of this form of therapy showed remarkably little interest in demonstrating that what they were offering their patients was, in fact, helpful.
As a reaction to the exclusivity of psychodynamic therapies and the slender evidence for its usefulness, in the 1950s and 1960s a set of techniques was developed, broadly collectively termed ‘behavior therapy’. These techniques shared two basic features. First, they aimed to remove symptoms (such as anxiety) by dealing with those symptoms themselves, rather than their deep-seated underlying historical causes. Second, they were techniques, loosely related to what laboratory psychologists were finding out about the mechanisms of learning, which were formulated in testable terms. Indeed, practitioners of behavior therapy were committed to using techniques of proven value or, at worst, of a form which could potentially be put to the test. The area where these techniques proved of most value was in the treatment of anxiety disorders, especially specific phobias (such as fear of animals or heights) and agoraphobia, both notoriously difficult to treat using conventional psychotherapies.

After an initial flush of enthusiasm, discontent with behavior therapy grew. There were a number of reasons for this, an important one of which was the fact that behavior therapy did not deal with the internal thoughts which were so obviously central to the distress that patients were experiencing. In this context, the fact that behavior therapy proved so inadequate when it came to the treatment of depression highlighted the need for major revision. In the late 1960s and early 1970s a treatment was developed specifically for depression called ‘cognitive therapy’. The pioneer in this enterprise was an American psychiatrist, Professor Aaron T. Beck, who developed a theory of depression which
emphasized the importance of people’s depressed styles of thinking. He also specified a new form of therapy. It would not be an exaggeration to say that Beck’s work has changed the nature of psychotherapy, not just for depression but for a range of psychological problems.

In recent years the cognitive techniques introduced by Beck have been merged with the techniques developed earlier by the behavior therapists to produce a body of theory and practice which has come to be known as ‘cognitive behavior therapy’. There are two main reasons why this form of treatment has come to be so important within the field of psychotherapy. First, cognitive therapy for depression, as originally described by Beck and developed by his successors, has been subjected to the strictest scientific testing; and it has been found to be a highly successful treatment for a significant proportion of cases of depression. Not only has it proved to be as effective as the best alternative treatments (except in the most severe cases, where medication is required), but some studies suggest that people treated successfully with cognitive behavior therapy are less likely to experience a later recurrence of their depression than people treated successfully with other forms of therapy (such as antidepressant medication). Second, it has become clear that specific patterns of thinking are associated with a range of psychological problems and that treatments which deal with these styles of thinking are highly effective. So, specific cognitive behavioral treatments have been developed for anxiety disorders, like panic disorder, generalized anxiety disorder, specific phobias and social phobia, obsessive compulsive disorders, and hypochondriasis (health
anxiety), as well as for other conditions such as compulsive gambling, alcohol and drug addiction, and eating disorders like bulimia nervosa and binge-eating disorder. Indeed, cognitive behavioral techniques have a wide application beyond the narrow categories of psychological disorders: they have been applied effectively, for example, to helping people with low self-esteem and those with marital difficulties.

At any one time almost 10 per cent of the general population is suffering from depression, and more than 10 per cent has one or other of the anxiety disorders. Many others have a range of psychological problems and personal difficulties. It is of the greatest importance that treatments of proven effectiveness are developed. However, even when the armoury of therapies is, as it were, full, there remains a very great problem – namely that the delivery of treatment is expensive and the resources are not going to be available evermore. Whilst this shortfall could be met by lots of people helping themselves, commonly the natural inclination to make oneself feel better in the present is to do precisely those things which perpetuate or even exacerbate one’s problems. For example, the person with agoraphobia will stay at home to prevent the possibility of an anxiety attack; and the person with bulimia nervosa will avoid eating all potentially fattening foods. Whilst such strategies might resolve some immediate crisis, they leave the underlying problem intact and provide no real help in dealing with future difficulties.

So, there is a twin problem here: although effective treatments have been developed, they are not widely available;
and when people try to help themselves they often make matters worse. In recent years the community of cognitive behavior therapists have responded to this situation. What they have done is to take the principles and techniques of specific cognitive behavior therapies for particular problems and represent them in self-help manuals. These manuals specify a systematic program of treatment which the individual sufferer is advised to work through to overcome their difficulties. In this way, the cognitive behavioral therapeutic techniques of proven value are being made available on the widest possible basis.

Self-help manuals are never going to replace therapists. Many people will need individual treatment from a qualified therapist. It is also the case that, despite the widespread success of cognitive behavioral therapy, some people will not respond to it and will need one of the other treatments available. Nevertheless, although research on the use of cognitive behavioral self-help manuals is at an early stage, the work done to date indicates that for a very great many people such a manual will prove sufficient for them to overcome their problems without professional help.

Many people suffer silently and secretly for years. Sometimes appropriate help is not forthcoming despite their efforts to find it. Sometimes they feel too ashamed or guilty to reveal their problems to anyone. For many of these people the cognitive behavioral self-help manuals will provide a lifeline to recovery and a better future.

Professor Peter Cooper
The University of Reading
PART ONE

Understanding What Happens
What are irritability and anger?

We are probably right to put irritability and anger together because they are so often associated with each other. Nevertheless they are somewhat different. Consider the following stories:

I was in the pub one evening with a couple of friends, just sitting near the back door to the pub, talking. It was a November evening and it was quite cold outside. Somebody came through the back door and left it just a little open so that I had to get up and close it. I didn’t mind too much. About a quarter of an hour later somebody else came in and did the same thing, didn’t quite close the door properly. So I got up again and closed it. A little while later a third person did the same thing. I closed the door, but gave him a good hard stare. Mind you, I don’t think he noticed because he was walking to the bar by that time so I was staring at the back of his head. It happened a fourth time a bit later on - the thing is, the self-closing mechanism on the door had broken. Anyway, this time I said to the bloke who’d
come in, ‘Don’t you think you should close the door behind you when you come in?’ He just looked at me as though I was some kind of oddball and went and ordered himself a drink. It was when the fifth person came in that I really went to town on him. By this time I had sunk probably four or five pints. He did exactly the same as all the others, left the door just slightly open. The thing that really got me about it was that they don’t seem to care, they just seem so intent on getting their own drinks inside them that they don’t give a damn about anybody else in the pub. Anyway, something snapped in me. I didn’t actually hit the bloke but I jumped up, started shouting and swearing at him, jabbing my finger in his chest and generally calling him all the names under the sun. He was only a small bloke. And the funny thing was he had only done exactly the same thing as the first one. Simply left the door a little open.

Compare that story, told by a 28-year-old man, Steve, with the following one from David, aged 45.

It was a Wednesday evening and four of us went down to town for a meal in an Indian restaurant. That’s me, my wife and the two kids. Anyway, we parked the car in a back street, it must have been about eight o’clock in the evening, walked round to the restaurant and had a very good meal. It was the first time we’d been there, we were all on good form, had a good laugh and a joke about everything, even at how thick and new the carpets
were, and altogether had a thoroughly good time. Anyway, about half-past nine or ten o’clock, we’d just turned the corner of the street we’d parked the car in when we heard an almighty crash and the sound of breaking glass. Except it hardly sounded like glass, it was a stronger, louder sound than that. We looked down the street, and there was some bloke with his head stuck through the passenger window of our car, and another bloke standing by him. I didn’t grasp what was happening for a moment; then I realized that the sound we had heard was the window glass breaking, and these two were in the process of stealing the stereo from my car. Anyway, I felt that mixture of stuff that courses through your body when these things happen, shouted but not very loud, and set off after these two. One bloke saw me after a couple of seconds and just ran off. That left the guy with his head still through the window, engrossed in prising my hi-fi out of the car. He still had his head through the window when I got there. I just grabbed hold of him and pulled him out – I didn’t care if his head caught on the bits of broken glass or not – and manhandled him, not at all gently, on to the floor. By this time my wife was there and telling me to take it easy, and one of the kids had already got his mobile phone out and was dialling for the police. The lad I’d got out of the car was never more than sixteen, but I just had him on the floor and could cheerfully have throttled him. What did they think they were doing, just thinking they could go up to somebody else’s property and take it? Anyway, I just sat astride
him, threatening him and telling him what a useless piece of machinery he was until the police came. Half a dozen people must have gone past us during all that, but I couldn’t care less. When the police arrived they did at least seem to take my side, took all the details and took him off in their car.

Which of those two stories would you say illustrated irritability and which one anger? To my mind, irritability is shown in the first one and anger in the second. But there is another question, perhaps a more important one, posed by these two examples, and that is: which of the two men was justified in his reaction? Or, if you think that both were justified in their reactions, which was more justified?

**The ‘justified?’ test**

Personally, I would say the man in the second example was more justified: the man who caught somebody trying to steal his stereo. But maybe I say that because I have been in pretty much the same situation, coming back to the car after a nice meal out, only to find the window broken and the stereo gone. And I must say, if I had been able to get hold of the person who had done it, just at that instant I don’t know what I would have done to him. So I feel that I can’t really blame David.

On the other hand, I have also inadvertently left a door open and probably irritated somebody thereby – especially if I was the fifth person to have done so that evening. So I would say that perhaps the guy who reacted aggressively
in that scene was a bit over-aggressive. Maybe in an ideal world Steve could have toned it down a bit and simply asked persons two, three and four to shut the door after them. But there again, he’d got a few drinks inside him, so possibly his inhibitions were weakened a bit by the time person number five came in. And also he said that customer five was a small bloke, so perhaps that had a bearing on events too.

One of the main judgements we make whenever we see someone behaving in an aggressive or hostile way is whether they are justified in doing so. If we consider that they are justified, then we probably won’t describe that person as irritable; we reserve the term ‘irritable’ for people who are hostile, angry or aggressive without good cause. If we think the person is justified in being angry or aggressive, then we tend to see nothing wrong with that. So, if we see David as justified in his anger, we probably won’t blame him for pinning the thief to the ground until the police arrive. We might see that as a proportionate response. If, on the other hand, he had started banging the 16-year-old’s head up and down on the pavement while loudly cursing him, we might have seen that as disproportionate and unjustified.

So, if we really want a definition of irritability it will be something along the lines of: an unjustified negative response to a situation. Unjustified in whose eyes? In ours, of course. And therein lies a problem, because everybody has a different judgement as to what is justified and what isn’t. What is more, sometimes our judgement goes a little hazy. I can still remember the first time I saw the film One Flew...
Over the Cuckoo’s Nest, in which Nurse Ratchet torments a group of mentally ill patients led by Jack Nicholson. Certainly the patients were full of antipathy towards Nurse Ratchet after about an hour of the film, but not half as much as the audience. At this point, after Nurse Ratchet’s particularly savage treatment of one of the patients, Jack Nicholson could stand it no longer, grabbed hold of her, had her on the floor and was throttling the life out of her. Half the audience in the cinema was on its feet, shouting encouragement and just hoping he would finish the job before the two male nurses rushing to Ms Ratchet’s assistance could get there. He didn’t, the authorities got the better of him, and we all trudged unhappily out of the cinema.

Even though Nurse Ratchet’s behavior was extreme, perhaps Jack Nicholson’s response was somewhat disproportionate. Of course, in a case like this our judgement is clouded by the events being on the silver screen rather than in reality. But this ‘temporary clouding of judgement’ is exactly the problem; because, unfortunately, it happens not just on the silver screen but in real life as well. On those occasions we get repeatedly remorseful and self-critical. We feel that our response was out of all proportion to the event; it was not justified.

These are themes that will run throughout this book. How do we get ourselves always – or nearly always – to respond to negative events in a way that is in proportion to them? In a way that we, and others, would say is justified?

It is worth lingering a little on these questions of definition. The word ‘irritability’ implies a minor kind of
response on the part of the irritable person, probably verbal, usually not physically aggressive. Even so, we tend to react against irritable people because we think that their response is not justified. Anger, on the other hand, might lead to a much more forceful response. The man who pinned the thief to the floor was angry. Nevertheless, we don’t necessarily react against people who are being angry, so long as we see their anger as justified.

In fact, we sometimes like to see people getting angry, so long as they are on our side. Margaret Thatcher was often referred to as ‘handbagging’ her counterparts from other European countries in order to stick up for those in Britain perceived as their rights. I, for one, never heard many people complaining about that at the time. Her successor John Major, on the other hand, was painted as a much more grey character (literally in the case of the satirical Spitting Image programme): so grey, in fact, that he would be unlikely to get openly angry with too many people. Whether this perception was accurate is another matter but, accurate or not, it seemed to count against him. What is more, this negative perception of John Major was exacerbated by rumours that he could also be rather irritable in private – a shade on the snappish side when perhaps it wasn’t warranted. Again, whether this perception was true is another matter, but it does illustrate the point that what people dislike is not the fact of other people getting angry, it’s the fact of other people reacting in a way that is not justified, or out of proportion to the situation.
Anger, irritability and frustration

Just to finish off this chapter, see what you make of the following two stories.

The first was related to me by Anne, a woman of 34, telling me about how she was getting on with her 12-year-old daughter.

The biggest rumpus Rachel and I have had this week was Tuesday evening. Of course, it’s half-way through the holidays and she always gets on my nerves in the holidays anyway. But Tuesday was particularly bad because I’d been going on at her all day to tidy her room. It was a terrible mess, she could hardly set foot in it without tripping over something – and it smells when you walk in there, I’m sure she’s got some food that’s going off buried under all her clothes on the floor. Anyway, I’d been going on at her all day to tidy her room and she just wouldn’t do it. There was always something she had to do first. So, it was about seven o’clock in the evening, I was downstairs and Rachel was upstairs. I’d just got back from the shops, I’d only been out five or ten minutes. Anyway, the house was quiet so I thought that maybe Rachel had decided that she’d better do what her mum says and get on with tidying her room. So I went upstairs ready to praise her and tell her what a good girl she was and how pleased I was with her and how much better the room looked and so on. When I got up there I could see that Rachel wasn’t in her room and the place looked just as much of a tip as it ever had. Anyway, to cut a long story
short, there was Rachel, in the bathroom, sitting in the bath washing her hair. Well, I just flew at her. It was absolutely the last straw. She hasn’t lifted a finger to help all holidays, she can’t even be bothered to tidy her own room, and there she is sitting in the bath like a little madam washing her hair with my shampoo! I just ranted and raved at her for a good ten or fifteen minutes, just shouting and screaming. All the frustrations of the holidays came out in that time. The poor kid looked absolutely petrified, and as for what the neighbours thought, I’ve no idea.

Justified? Perhaps not.

And what about this one, in which Paul, 46, told me about his son John, also aged 12?

You see, the thing is, all I’ve ever tried to do is to do my best for him. And I have learnt the hard way that if you don’t pay proper attention to education and schooling then you’re the worse off for it as you get older. So I’m always going on at him about how important it is to pay attention in school and do his homework properly when he gets home. But he knows better, of course, and he tells me that he can concentrate better doing his homework in front of the television. And I’ve seen him doing it. He sits there, mouth half open, staring at the screen and just every now and again looking at what he’s meant to be doing. And he thinks he’s got me fooled doing this. He thinks that I believe he’s doing his homework. So anyway, Monday
was like that, Tuesday was the same, just the same as any other day, and on Wednesday I told him to show me his books after he’d packed them away and said he’d done all the homework he had to do. And so I was looking at his exercise book, for maths; he was meant to have done twenty sums in it. And he’s got all the numbers 1 to 20 down there, and some of them he’d done, though God knows whether they were right or not, but I could see that more than half the sums he was meant to have done he just hadn’t. He hadn’t even tried to. There were just blank spaces where the answers were meant to be. So I saw red and I just walloped him. He was sitting just opposite from me looking stupid and frightened and I just walloped him. I hit him straight across the face so he all but fell off the chair and I didn’t waste my breath on him, I just told him to get straight upstairs to bed. And I’ve not spoken to him since, and that was three days ago.

Justified? Well, again, maybe not. But it is all too easy to be critical of those two parents, or say that their reactions were out of proportion to what triggered them and therefore were not justified. Sometimes people get to such a pitch that they can no longer tell what’s justified and what isn’t; and both of those parents described, quite truthfully, genuinely wanting to do the best for their children. Sometimes the level of frustration that builds up is unbearable. This was not the first such incident for either of these parents. Both had tried all sorts of tactics without success. And now they saw themselves still as having no success –
but also having been pushed into doing things they didn’t like doing.

**SUMMARY**

- Irritability and anger take lots of different forms. Both are emotions that most people have felt.
- There’s nothing wrong with being angry in itself; sometimes it is clearly justified. It is when we overreact, responding in a way that is out of proportion to the situation, that we lay ourselves open to criticism. And sometimes we ourselves are our harshest critics.
- The very term ‘irritability’ implies that the reaction is unjustified. It normally suggests that a person is being snappy and bad-tempered when there is no call to be so. As such it fails the ‘Justified?’ test; people are almost always criticized for being irritable. Again, we may be our harshest critics in this respect.
- There are times when, through frustration or for other reasons, we lose our sense of perspective. It’s on those occasions that we find ourselves unable to judge what is justified. And then we see ourselves doing things which we feel are justified at the time but which later on – once our true sense of judgement returns – we are horrified that we did.

**A final thought**

Most of us feel rather critical of irritable and unjustifiably angry people, almost as if they were doing it deliberately to make our lives miserable. And, certainly, it is no fun at all living with an irritable and unjustifiably angry person.
One point that is sometimes forgotten, however, is that neither is it any fun being the irritable and angry person! Many, many people have their lives virtually ruined by their own irritability and anger. So it is both for them and for those around them that this book is written.