

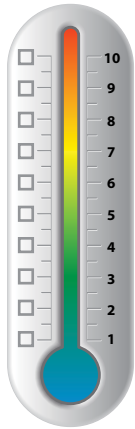


# LEARNING LOG

## Module 1 Getting Started Managing Your Anger

### LEARNING LOG ASSIGNMENT

Use the Anger Meter to rate how angry you became this week.



Did you get a chance to practice the Deep Breathing exercise? If so, how did it work?

---

---

---

## Module 2 Understanding Your Anger

### LEARNING LOG ASSIGNMENT

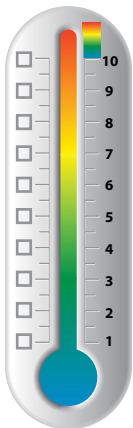
Think of the event in the past week that made you the most irritable or angry. Enter a brief description of the event and the date it happened.

---

---

---

Use the Anger Meter to rate how angry you became this week.



What warning signs did you notice as you started getting angry?

---

---

---

Did you try anything to decrease your anger? If so, how did it work? Did you get lower on the Anger Meter?

---

---

---

## Module 3 Breaking the Aggression Cycle

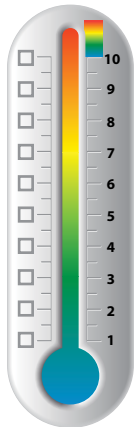
### LEARNING LOG ASSIGNMENT

Think of the event in the past week that made you the most irritable or angry. Enter a brief description of the event and the date it happened.

---

---

Use the Anger Meter to rate how angry you became this week.



What warning signs did you notice as you started getting angry?

---

---

Did you try anything to decrease your anger? If so, how did it work? Did you get lower on the Anger Meter?

---

---

Have you practiced Deep Breathing? How did it work for you?

---

---

Did you start working on your Anger Control Plan? How did it go?

---

---

## Module 4 Behavioral Tools to Manage Your Anger

### LEARNING LOG ASSIGNMENT

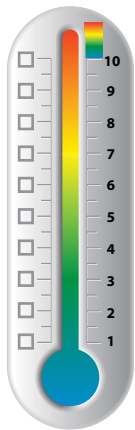
Think of the event in the past week that made you the most irritable or angry. Enter a brief description of the event and the date it happened.

---

---

---

Use the Anger Meter to rate how angry you became this week.



What warning signs did you notice as you started getting angry?

---

---

---

Did you try anything to decrease your anger? If so, how did it work? Did you get lower on the Anger Meter?

---

---

---

Did you practice using two of the behavior tools you learned? If so, which tools did you use? How did they work for you?

---

---

---

## Module 5 Cognitive Tools to Manage Your Anger

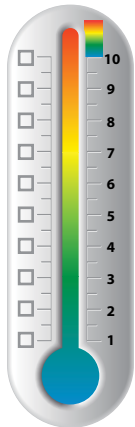
### LEARNING LOG ASSIGNMENT

Think of the event in the past week that made you the most irritable or angry. Enter a brief description of the event and the date it happened.

---

---

Use the Anger Meter to rate how angry you became this week.



What warning signs did you notice as you started getting angry?

---

---

Did you try anything to decrease your anger? If so, how did it work? Did you get lower on the Anger Meter?

---

---

Did you identify any unhelpful thoughts? List the thoughts you identified.

---

---

Did you use Thought Stopping or Self-Talk? Describe the situation and how you used the tools.

---

---

## Module 6 Conflicts and Communication

### LEARNING LOG ASSIGNMENT

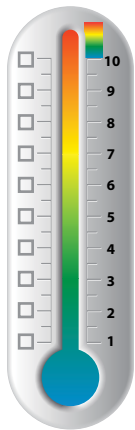
Think of the event in the past week that made you the most irritable or angry. Enter a brief description of the event and the date it happened.

---

---

---

Use the Anger Meter to rate how angry you became this week.



What warning signs did you notice as you started getting angry?

---

---

---

Did you try anything to decrease your anger? If so, how did it work? Did you get lower on the Anger Meter?

---

---

---

Did you practice communicating assertively? Describe the situation and how it worked for you.

---

---

---

## Your Anger Control Plan

### YOUR GOALS AND MOTIVATION

- |  |  |
|--|--|
| <input type="checkbox"/> Improve relationships with family members   | <input type="checkbox"/> Stay out of legal trouble           |
| <input type="checkbox"/> Get along better with friends and neighbors | <input type="checkbox"/> Improve physical health             |
| <input type="checkbox"/> Avoid problems at work                      | <input type="checkbox"/> Feel more in control of my emotions |

### ENTER OTHER PERSONAL GOALS AND MOTIVATION

---

---

---

### YOUR HIGH-RISK TRIGGERS (PEOPLE)

- |   |   |
|---|---|
| <input type="checkbox"/> People asking rude questions or being nosy | <input type="checkbox"/> Loud people in a theater or place that should be quiet |
| <input type="checkbox"/> People joking about important subjects     | <input type="checkbox"/> People disrespecting me                                |
| <input type="checkbox"/> Rude or messy neighbors or roommates       |   |
| <input type="checkbox"/> People that don't pay back money they owe  |   |

### ENTER OTHER PERSONAL GOALS AND MOTIVATION

---

---

---

### YOUR HIGH-RISK TRIGGERS (PLACES)

- |   |  |
|---|--|
| <input type="checkbox"/> Places that bring up bad memories      | <input type="checkbox"/> Traffic                       |
| <input type="checkbox"/> Places where you feel trapped          | <input type="checkbox"/> Crowded public transportation |
| <input type="checkbox"/> Waiting in long lines                  | <input type="checkbox"/> Crowded stores                |
| <input type="checkbox"/> Waiting a long time for an appointment | <input type="checkbox"/> Bad working conditions        |

### ENTER OTHER PERSONAL GOALS AND MOTIVATION

---

---

---



## Your Anger Control Plan

### YOUR HIGH-RISK TRIGGERS (SITUATIONS)

- |   |  |
|---|--|
| <input type="checkbox"/> Hungry, Angry, Lonely, Tired (HALT)          | <input type="checkbox"/> Cleaning up other people's mess |
| <input type="checkbox"/> Being wrongly accused                        | <input type="checkbox"/> Rumors or gossip                |
| <input type="checkbox"/> Getting lost or being given wrong directions | <input type="checkbox"/> Being stolen from               |
| <input type="checkbox"/> Being placed on hold on the phone            | <input type="checkbox"/> Slow customer service           |

### ENTER OTHER PERSONAL GOALS AND MOTIVATION

---

---

---

### YOUR ANGER WARNING SIGNS (PHYSICAL)

- |   |  |
|---|--|
| <input type="checkbox"/> Racing heart rate      | <input type="checkbox"/> Headache                |
| <input type="checkbox"/> Tightness in the chest | <input type="checkbox"/> Upset stomach           |
| <input type="checkbox"/> Sweating/shaking       | <input type="checkbox"/> Tense muscles           |
| <input type="checkbox"/> Clenched jaw           | <input type="checkbox"/> Frowning/scowling       |
| <input type="checkbox"/> Fast breathing         | <input type="checkbox"/> Turning red in the face |

### ENTER OTHER PHYSICAL WARNING SIGNS

---

---

---

### YOUR ANGER WARNING SIGNS (BEHAVIORAL)

- |   |  |
|---|--|
| <input type="checkbox"/> Clenched fists | <input type="checkbox"/> Slamming doors                |
| <input type="checkbox"/> Yelling        | <input type="checkbox"/> Pounding or banging on things |
| <input type="checkbox"/> Pacing         |  |

### ENTER OTHER BEHAVIORAL WARNING SIGNS

---

---

---

## Your Anger Control Plan

### YOUR ANGER WARNING SIGNS (EMOTIONAL)

- |   |  |
|---|--|
| <input type="checkbox"/> Feeling abandoned or afraid        | <input type="checkbox"/> Feeling insecure            |
| <input type="checkbox"/> Feeling disrespected or humiliated | <input type="checkbox"/> Feeling jealous or rejected |
| <input type="checkbox"/> Feeling guilty                     |  |

### ENTER OTHER EMOTIONAL WARNING SIGNS

---

---

---

### YOUR ANGER WARNING SIGNS (COGNITIVE)

- |  |   |
|--|---|
| <input type="checkbox"/> Thinking of hurting someone           | <input type="checkbox"/> Thinking that someone is controlling |
| <input type="checkbox"/> Thinking of teaching someone a lesson | <input type="checkbox"/> Thinking about seeking revenge       |
| <input type="checkbox"/> Thinking someone is rude on purpose   | <input type="checkbox"/> Thinking something bad is happening  |

### ENTER OTHER COGNITIVE WARNING SIGNS

---

---

---

### YOUR TOOLS (BEHAVIORAL TOOLS)

- |   |  |
|---|--|
| <input type="checkbox"/> Timeout        | <input type="checkbox"/> Muscle Relaxation |
| <input type="checkbox"/> Deep Breathing |  |

### ENTER OTHER BEHAVIORAL TOOLS THAT WORK FOR YOU

---

---

---

### YOUR TOOLS (COGNITIVE TOOLS)

- |   |  |
|---|--|
| <input type="checkbox"/> Disputing Thoughts (A-B-C-D) | <input type="checkbox"/> Self-Talk           |
| <input type="checkbox"/> Thought Stopping             | <input type="checkbox"/> Conflict Resolution |

### ENTER OTHER COGNITIVE TOOLS THAT WORK FOR YOU

---

---

---