

**CLINICIAN'S GUIDE TO**  
**Partial Hospitalization and**  
**Intensive Outpatient Practice**

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# Contents

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|  |    |
|--|----|
| Anger  | 1  |
| Understanding and Emotional Intelligence About Anxiety | 4  |
| Boundaries   | 8  |
| Thinking Errors  | 11 |
| Your Future Recovery                                   | 15 |

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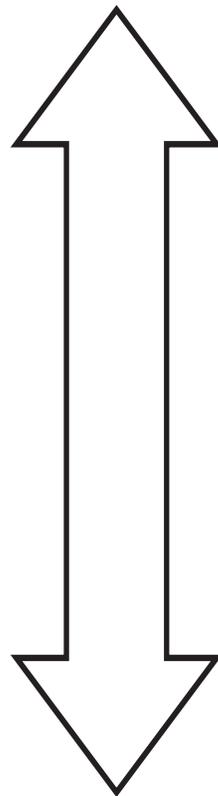
# Anger

Our definition: Anger is an emotion or energy that is a response to pain.

## Some Typical Forms of Anger<sup>1</sup>

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Highest Intensity



Rage  
Hostility  
Jealousy  
Infuriation/Furor  
Hate  
Acrimony  
Animosity  
Critical  
Petulance  
Surliness  
Exasperation  
Frustration  
Hurt/Pissed Off  
Indignant  
Irateness  
Sullenness  
Skepticism  
Sarcasm  
Impatience  
Resentment  
Annoyance  
Irritation

Lowest Intensity

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1. The intensity varies according to opinion.

All of these different forms of anger generally occur

- At different times
- For different reasons
- At different intensity levels

A person can have more than one type of anger at a time and not know which forms of anger are actually present.

However, they all tend to produce the same physical reactions of which include:

- Adrenalin production
- Muscle tension
- Increased heart beat and blood flow
- Increased breathing

They serve a *purpose* to motivate us to act or react in some form or fashion.

## MANAGING ANGER

Question: Do you have an actual problem with anger?

- Anger is an uncomfortable emotion to have.
- Many are scared of it.
- Just because you are angry does not mean you have an anger problem.
- There is healthy anger and unhealthy anger.

People get mad for good and bad reasons.

- Some people have been hurt, abused, or treated unfairly.
- People get mad when boundaries are crossed.
- People have anger as part of grief and loss (Kubler-Ross, 1969).
- People get angry as part of symptoms of depression.
- People are more likely to get angry when tired or worn down.
- People are more likely to get angry when under stress.
- The intensity of anger is related to the value of an object or issue.
- Some people have low distress tolerance or immaturity regarding issues and are more likely to get angry.

Kinds of Anger Management Problems

- Avoidance (*afraid to be angry, stuffing and blowing, panic attacks*)
- Passive aggressiveness (*wearing a mask, being sneaky or starting drama*)
- Paranoia/Rage (*jealousy, "I am mad therefore everyone else must be too"; "I have to show that I am in charge and I must dominate"*)

Some people have more than one issue

## TREATING ANGER PROBLEMS

Anger management classes typically teach

- Recognition of anger signs
  - Ways of self-calming/soothing/tension reduction
  - Ways of thinking to reduce anger intensity (change rage reactions to irritation reactions)
  - Ways of appropriate anger expression
- (People are referred to these classes by courts and employers.)

Here in this program you can:

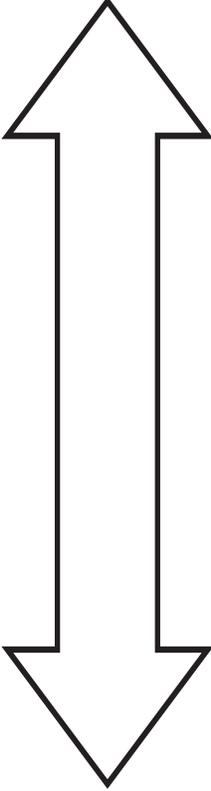
- Talk about your feelings and pain
- Get feedback from the group
- Learn skills
- Develop a plan for your personal situations
- Identify what you may need to work on further when you leave here:
  - Read some books on anger management?
  - Go to individual therapy?
  - Take a class on assertiveness?
  - Go to a support group?

# Understanding and Emotional Intelligence About Anxiety

Our Definition: Anxiety in its most basic form is an emotion that warns of danger and motivates us to do something to make ourselves safe.

**Chinese Proverb:** A little anxiety helps to focus the mind, but too much paralyzes it.

## Varieties of Anxiety

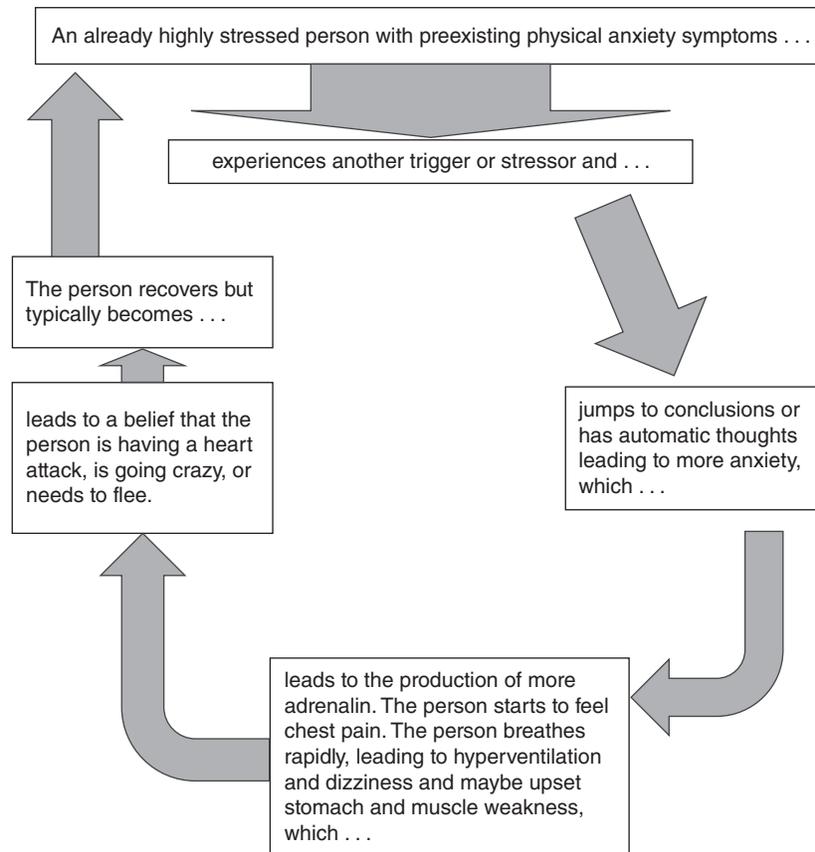
| Typical Intensity Level   | Some Types of Anxiety  |  |
|---|--|--|
| <p>Highest Intensity</p>  <p>Lowest Intensity</p> | <p>Terror/Panic</p> <p>Excitement</p> <p>Humiliation</p> <p>Rejection/Abandonment</p> <p>Helplessness</p> <p>Embarrassment</p> <p>Fear/Phobias</p> <p>Worry</p> <p>Insecurity</p> <p>Angst</p> <p>Discouragement</p> <p>Insignificance</p> <p>Nervousness</p> <p>Confusion</p> <p>Discomfort</p> | <p>All of these different feelings generally occur</p> <ul style="list-style-type: none"> <li>• At different times</li> <li>• For different reasons</li> <li>• At different intensity levels</li> </ul> <p>However, they all tend to produce the same physical reactions of anxiety, which include:</p> <ul style="list-style-type: none"> <li>• Adrenalin production</li> <li>• Muscle tension</li> <li>• Increased heart beat and blood flow</li> <li>• Increased breathing</li> </ul> <p>They all serve a <i>purpose</i> to motivate us to make ourselves safe or secure in some form or fashion.</p> <p>These feelings can compound on each other. A person can have more than one type of anxiety at a time and not know which form of anxiety is actually present.</p> |

When anxiety becomes a problem for a long period of time, and the anxiety disrupts a person's normal functioning, then the person may have an **anxiety disorder**.

**The Common Anxiety Disorders**

| Disorder Name                                       | Definition   |
|---|--|
| <b>Posttraumatic Stress Disorder</b>                | Flashbacks and other anxious behaviors that are responses to trauma that occurred more than six months prior to onset.   |
| <b>Generalized Anxiety Disorder</b>                 | Excessive and unrealistic anxiety, worry, and apprehensiveness experienced across a wide variety of everyday situations and circumstances.   |
| <b>Social Phobia/Social Anxiety Disorder</b>        | A marked and persistent fear and avoidance of social situations in which one may be closely observed by others and thus rejected, humiliated, or embarrassed.  |
| <b>Obsessive-Compulsive Disorder</b>                | <p>Frequent, recurring, obsessions that lead to compulsions that consume time and cause distress and impairment in functioning.</p> <ul style="list-style-type: none"> <li>• <b>Obsessions</b> are unwelcome recurring thoughts, impulses, or mental images that cause distress.</li> <li>• <b>Compulsions</b> are unwelcome repetitive actions and behaviors (e.g., hand washing, checking doors, needing belongings or objects in precise order, repeated cleaning of the same room).</li> </ul> |
| <b>Hypochondriasis</b>                              | A continual worry or anxiety about having a serious disease despite medical reassurance to the contrary.   |
| <b>Panic Disorder (with or without Agoraphobia)</b> | A person's functioning is disrupted by <b>panic attacks</b> . With agoraphobia, a person has intense anxiety about being in public or private situations where escape might be difficult or embarrassing or where help may not be available if a person has a panic attack.  |

### The Typical Panic Attack: A Cycle



One panic attack does not necessarily mean another panic attack, but individuals who develop agoraphobia (fear of public places) tend to obsess on “what if I have a panic attack” at that place.

If you are having panic attacks, treatment will not make them go away immediately. It takes some time.

### HOW ARE ANXIETY DISORDERS TREATED?

1. Medication—There are a number of effective medications out there.
2. Therapy—Talk in the group or later with a therapist about your anxiety and explore ways you can reduce it.
3. Coping skills—These are strategies, activities, and techniques for changing thinking and relieving stress so you are less anxious.

**Examples of Coping Skills**

| Immediate Activities  | Long-Term Activities  | Changes in Thinking Patterns  | Lifestyle Changes  |
|---|---|---|--|
| <ul style="list-style-type: none"> <li>• Deep breathing</li> <li>• Squeezing balls</li> <li>• Hot baths</li> <li>• Exercise</li> <li>• Reducing your caffeine and sugar intake</li> </ul> | <ul style="list-style-type: none"> <li>• Hobbies</li> <li>• Going to support groups</li> <li>• Yoga/meditation</li> </ul> | <ul style="list-style-type: none"> <li>• Think in the present.</li> <li>• Think positively.</li> <li>• Stop trying to read people’s minds.</li> <li>• Reduce being competitive/trying to prove yourself.</li> </ul> | <ul style="list-style-type: none"> <li>• Change jobs.</li> <li>• Downsize to less-expensive and demanding housing.</li> <li>• Move away from stressful relatives.</li> <li>• Change your social circle.</li> </ul> |

**NEXT STEPS**

1. If you have not done so, talk about your anxiety symptoms with your psychiatrist and/or therapist.
2. Talk in group about your anxiety. Your fellow group members and therapist may have ideas for you to reduce your anxiety and improve your coping.
3. Take responsibility for your treatment by using healthy coping skills and making needed changes.

**TAKEAWAY THOUGHT**

Anxiety is not all bad. It serves a purpose to make us safe but can get out of hand sometimes. Balance is the key. Managing it is a learning process.

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# Boundaries

## THE BOUNDARIES BETWEEN US

Boundaries: Lines or limits between individuals that maintain integrity in relationships.

### Basic Categories of Boundaries



|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| S | P | T | I | E | M | T |
| P | O | H | N | M | O | I |
| A | S | I | F | O | N | M |
| C | S | N | O | T | E | E |
| E | E | G | R | I | Y |   |
|   | S | S | M | O |   |   |
|   | S |   | A | N |   |   |
|   | I | Y | T |   |   |   |
|   | O | O | I |   |   |   |
|   | N | U | O |   |   |   |
|   | S | D | N |   |   |   |
|   |   | O |   |   |   |   |



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**Space:** We need a physical space between us and other individuals.

**Possessions:** We have items that are important or valuable to us.

**Things we do/actions:** There are limits to what we will do for others.

**Information:** We have private and sensitive information.

**Emotion:** Some of our feelings are intimate and touchy.

**Money:** Our money and how we spend it in relationships is important to us.

**Time:** We can have many demands on our time and must make choices.

**When boundaries are crossed or threatened, people feel some form of**

**Anger**  
or  
**Anxiety**

**When individuals have poor boundaries . . .**

- They tend to have higher levels of anxiety and depression.
- They tend to have more chaos and drama in their lives.
- They tend to have more resentments and anger issues.

- They tend to feel like slaves to others.
- They suffer avoidable consequences and losses.
- They neglect their own needs and priorities.

Improving boundaries can improve mental health and order in one's personal life.

**Reasons for people having poor boundaries include:**

- They come from an enmeshed family that practices and expects poor boundaries.
- They have codependent traits.
- They have low self-esteem and have a problem saying "no."
- They are needy or are in crisis.
- They just want to be nice.
- They have irrational beliefs.
- They are under the influence of drugs or alcohol.
- They do not know how to set limits with other people.

**Setting Boundaries may be a matter of . . .**

- Doing something:
  - Saying no
  - Leaving a situation
  - Telling people there is a rule

Or

- Not doing something:
  - Not telling/withholding information
  - Refusing to get involved
  - Not answering the phone

**Some steps to improve boundaries include:**

- Identifying where you need to improve your boundaries
- Evaluating your self-talk that may hinder setting boundaries
- Identifying your challenges to setting improved boundaries
- Developing a plan or script for how you will act:
  - What you will say
  - What you will do
- Carrying out the plan

**Caveats or warnings about setting newly set boundaries:**

- You have no control over the responses of others.
- Many (especially family members) will test your boundaries with anger and guilt.
- You may need some support from a therapist, support person, or support group in setting and maintaining your boundaries.

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# Thinking Errors

## **IRRATIONAL THINKING: TORTURING OURSELVES**

Changing what you think can reduce your anxiety and emotional distress.

### **It's All or Nothing**

- If something is not perfect, it is a total failure.
- It is black or white.

### **Overgeneralization**

- Everyone
- Always
- Never

### **Negative Mental Filter (wearing dark glasses as opposed to rose-colored ones)**

- Dwelling on a single negative detail to the point that all of reality is distorted
- Dwelling on the negatives and ignoring the positives

### **Disqualifying the Positive (“Yeah, but”)**

- Insisting that positive qualities and experiences do not count for some reason or another

### **Jumping to Conclusions**

- Self-fulfilling prophecy/fortune telling—you predict or anticipate.
- Mind reading—you believe people are thinking things and you have no proof.

### **Magnification/Catastrophization and Minimization**

- (Magnification) You exaggerate the importance of negative things or events.
- (Magnification) You exaggerate the accomplishments or achievements of others.
- (Minimization) You usually inappropriately downplay your good qualities and achievements.

### **Emotional Reasoning (assuming that negative feelings are facts)**

- You are mad so it must be my fault.
- I just feel that you are mad.
- I feel like an idiot, therefore I must be one.

### **Shoulds/Musts/Oughts**

- You criticize yourself and others.
- You try to whip yourself into shape with these statements by guilting yourself.

### **Labeling and Mislabeled**

- You call yourself and/or others names

### **Personalization/Blame (It's all my fault!/All about me)**

- You see yourself as the cause of some problem that you were not entirely responsible for.
- You take on someone's opinion as having more value than appropriate.

## **RATIONAL THINKING: A HEALTHIER ALTERNATIVE**

### **Instead of *all or nothing thinking*, say:**

1. Like everyone else, I am a human being and will make mistakes sometimes and learn from them.
2. Very few things if any are perfect in this world. No one is perfect.

### **Instead of *overgeneralizing*, say:**

1. This is an opportunity and not a threat.
2. I will use this experience to learn something new, to change my direction, or to try a new approach.
3. While it is true I get some things wrong, I do get some things right.

### **Instead of using the *negative mental filter*, say:**

1. I choose to be happy.
2. There is less stress in being positive and choosing to be in control.

**Instead of *disqualifying the positive*, say:**

1. I am a worthy and good person.
2. I will enjoy myself while catching up on all I want to accomplish.

**Instead of *jumping to conclusions*, say:**

1. I feel better when I don't try to guess about the thoughts or behaviors of others.
2. One step at a time.

**Instead of *magnifying, catastrophizing, and minimizing*, say:**

1. I will respond appropriately and not be reactive.
2. I will be honest and true to myself.

**Instead of *emotional reasoning*, say:**

1. What is . . . is.
2. Is this really important enough to become upset about?
3. Make sure I am not jumping to conclusions.

**When you catch yourself using *shoulds/musts/oughts*, say:**

1. I don't really need to prove myself in this situation.
2. Others are not perfect, and I won't put pressure on myself by expecting them to be.
3. I am doing the best I can given my history and level of current awareness.
4. I cannot control the behaviors of others. I can only control my own behaviors.

**When you catch yourself *labeling and mislabeling*, say:**

1. I am respectful to others and deserve to be respected in return.
2. There are no failures, only different degrees of success.

**Instead of *personalizing*, say:**

1. I am not responsible to make others okay.
2. Other people's opinions are just their opinions.
3. Other people are responsible for their own feelings.

**USING THIS CONCEPT IN YOUR LIFE . . .**

Some people realize immediately that they are doing some of this, start putting it in practice, and start feeling relieved.

Some people who engage in thinking errors may have to have them pointed out to them in counseling or therapy.

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## Your Future Recovery

This program typically helps people get back to their regular lives.

- Initiation of medication to alleviate symptoms
- Addressing of the primary stressors that disrupted your life

Treatment typically has to continue for a while after leaving here.

- Medication needs to continue.
- Some therapy issues that cannot be addressed here may need to be taken to an individual or couples therapist.

Some people need to make changes in habits or practices.

- Stopping unhealthy practices
- Starting healthy practices such as setting boundaries and using rational self-talk
- Detaching from unhealthy or dysfunctional relationships
- Going to self-help groups
- Making lifestyle changes or finding different jobs
- Investing in yourself and taking care of yourself

### A BRAINSTORM OF INVESTING IN YOURSELF

1. New underwear/undergarments/bras/undershirts
2. New pajamas/sleepwear
3. New slippers or house shoes
4. Nice or new lounge wear/bathrobes/housecoats
5. New sheets and bed coverings
6. New pillows
7. Clean sheets
8. Good fabric softener
9. New socks/pantyhose
10. New toothbrush
11. Good toothpaste
12. Good soap
13. Bath salts/beads
14. Good shampoo
15. Good shaving supplies
  - a. For men, good razors and shaving cream
  - b. For women, good depilatories or razors

16. Good beauty grooming supplies
    - a. Comb/brush
    - b. Nice back brush
    - c. Towels and linens
  17. Good deodorant/antiperspirant
  18. Quality lotions/colognes/aftershaves/body sprays
  19. Good breakfast cereal or your favorite breakfast food
  20. Vitamin supplements
  21. Your favorite beverage
  22. Regular haircuts/hairdos/manicures/pedicures
  23. Membership in clubs and organizations
  24. Getting a pet (**warning:** this comes with obligation)
  25. Engaging in meaningful activities such as charities and volunteer opportunities
  26. Regular religious attendance
  27. Development of the hobby you have always been interested in
  28. Gym membership/exercise classes
  29. Join an organization, club, or team
  30. Do financial planning and get your retirement in order
  31. Take adult education classes to better yourself, such as learning a foreign language
  32. Learn to dance (take dance classes)
  33. Weekend trips to other cities/places
  34. View the arts (museums/theatre/concerts)
  35. Buy and use a proper journal for journaling your feelings
- *Investing in yourself varies to your personal taste.*
  - *Only you know about most of these things unless you tell other people.*
  - *Many of these items are not extraordinarily expensive.*

## **CONCLUSION**

The goal is to prevent relapse or a return of symptoms.

Recovery from mental health symptoms often requires ongoing therapy and medication.

For many, recovery also requires making changes that may include stopping some practices and starting others.