

Effectiveness of Anger Management in Enhancing Emotional Intelligence and Mental Health of Alcohol Dependent Patients

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ABSTRACT

Patients with alcohol dependence show impairments in imbalanced emotion stability, and poor mental health wellbeing, which affects their day to day life. Anger management program that targets improvement of emotion stability, and promote mental health wellbeing. The present study aims to assess the effectiveness of Anger Management, in enhancing emotional intelligence and Mental health of Alcohol dependent patients (15 session, span of one month). The Present study was conducted on de-toxicated, 30 male patients with Alcohol Dependence syndrome. All subjects were administered the Spielberger's State-Trait Anger Expression Inventory (STAXI), Schutte Emotional intelligence scale and Augustine Mental Health Inventory, at a baseline assessment and post intervention. Paired "t" test was used to compare the pre and post scores of the participants. Following anger management programme, it was found that there was a significant reduction in state anger, and improved emotional intelligence and mental health among the participants. Also the finding shows that there was significant reduction in the level of Anger and Anger-Out of the alcohol dependent patients after the anger management programmed. The Module of Anger Management Programme, was found effective in reducing levels of anger, enhancing level of emotional intelligence and mental health of alcohol dependent patients.

Key words: Anger Management, Alcohol dependence, Emotional Intelligence, Mental Health.

Introduction

Alcoholism is a progressive disorder of excessive drinking, characterized by physical or psychological dependence or both, which over a period may lead a dysfunction in personal, family, occupational and social.

WHO (1992) defines addiction as a cluster of physiological behavioral and cognitive phenomena in which the use of alcohol takes on a much higher priority for a given individual than other behavior that once had greater value a central descriptive characteristic of this dependence syndrome is the desire (Often strong, sometimes overpowering) to take alcohol there may be evidence that return to alcohol after period of abstinence leads to a more rapid reappearance of the features of the syndrome than occurs with non-dependence individuals.

An emotion is "an experience characterized by a strong degree often quite intense. "Anger that is to say is an emotion and contains a decided element of actions and motor response. Anger has been described as the excited emotion plus certain ancient or aggressive reaction.

Modern Psychologist view anger as a primary, natural and even mature emotion experienced by all human at times, something that has functional value for survival. Anger can mobilize psychological resource for corrective action. Uncontrolled anger can however negatively affect personal and social well-being. Therefore, it seems Emotional Intelligence (EI) is of determinative and effective factors in most human reactions toward social environment.

The term emotional intelligence refers to the ability to perceive, understand, and manage emotions in the self and others (Mayer, Salovey, & Caruso, 2004). Salovey and Grewal (2003) describe emotional intelligence as the result of interactions between an individual's emotions and cognitions that lead to personal growth and adaptive functioning.

Mental Health is a term used to describe either a level of cognitive or emotional wellbeing or an absence of a mental disorder. According to World Health Organization (WHO) health is a state of complete physical, mental and social well-being and not merely absence of disease or infirmity.

Alcohol problems are common among people with mental health problems and evidence shows that people who consume high amount of alcohol are vulnerable to increased risk of developing mental health problems.

Aim

- The present study aims to assess the effectiveness of Anger Management, in enhancing emotional intelligence and mental health of Alcohol dependent patients.

Objective

- To find out the level of Emotional intelligence among alcohol dependent patients after the anger management Programme

- To find out the level of Mental health among alcohol dependent after the anger management Programme
- To find out the any reduction in level of anger of alcohol dependent after the anger management Programme

Hypotheses

- The level of Emotional Intelligence will be low among alcohol dependent after the anger management Programme
- The level of Mental Health will be low among alcohol dependent after the anger management Programme
- There will be no significant reduction in level of anger among alcohol dependent after the anger management Programme

Methods

Study design

This was a De-addiction centre based cross- sectional study, using purposive sampling technique.

Venue

Mann Shree De-Addiction centre (now its calls First Hand Help), Chennai

Sample

Study on subjects was conducted on 30 male in patients with Alcohol Dependence syndrome. Sample was taken from a Mann Shree, (now its calls First Hand Help) De-Addiction Centre, Chennai.

INCLUSION CRITERIA (For Alcohol dependent Patients)	EXCLUSION CRITERIA (For Alcohol dependent patients)
○ Male patients diagnosed according to ICD-10, DCR (W.H.O, 1992). ○ Patients in the age range 20-45 years old. ○ Education range: 10th grade above. ○ Patients who are ready to give informed consent.	○ Major medical illness, psychosis/ organic mental disorder and mental retardation ○ Patients with moderate to severe depression and anxiety. ○ Patient with any neurological disorder or significant head injury.

Study procedure

After having informed consent patients fulfilling the inclusion and exclusion criteria. The participants were assessed on State-Trait Anger Expression Inventory (STAXI), Emotional intelligence scale and The Mental Health Inventory, as a pre and post assessment, than followed the Anger management programme in the span of one month

Statistical Analysis

After completed the intervention programme, Pre and post assessment data's were analyzed with Paired "t" test was used to compare the pre and post scores of the participants.

Result and Discussion

Table-1: Showing the level of Emotional Intelligence of Alcohol dependent patients, after the anger management programme.

Variable	Anger Management programme	N	Mean	S.D	„t“-value
EI	Baseline assessment	30	126.23	14.06	0.71 df = 29
	Post intervention	30	128.20	12.21	

Emotional Intelligence (EI): (Low=55, Moderate=55 to 110 high = 110 to 165)

There was a significant improved the level of Emotional Intelligence (EI) was high among the participants (refer the table-1:128.20±12.21)

Table-2: Showing the level of mental health of Alcohol dependent patients, after the anger management programme.

Variable	Anger Management programme	N	Mean	S.D	„t“-value
Mental health	Baseline Assessment	30	29.67	4.89	1.54 df = 29
	Post intervention	30	31.63	5.98	

Mental Health (low = 0 to 20, moderate = 20 to 40 and high 40 to 60).

There was a significant improved level of mental health was moderate among the participants (as per mean = 31.63±5.98)

Table-3: Showing the reduction in level of Anger of Alcohol dependent patients after the Anger Management Programme.

Variable	Anger Management Programme	N	Mean	S.D	df = 29 „t“-value	P
Anger	Baseline assessment	30	106.37	11.67	2.21*	0.03
	Post intervention	30	100.97	12.05		
Anger-Out	Baseline assessment	30	16.40	3.94	2.60*	0.01
	Post intervention	30	15.00	3.40		

* Significant at 0.05 level

It was inferred from the table 3. There was significant reduction in the level of Anger and Anger-Out of the alcohol dependent patients. Also, patients have no significant reduction in the level of State-Anger, Trait-Anger, Anger-In, Anger-Control, and Anger-Expression of patients after the anger management programmed.

Discussion

The findings revealed that the level of Emotional intelligence was high and Mental Health seems to be moderate of alcohol dependent patients. It was suggest the emotional intelligence and mental health are improved among the participants and it promote the better in self-acceptance, goal-directive activates self-reliant, feel optimistic, emotional stability and balanced mental health wellbeing.

The finding shows that there was significant reduction in the level of Anger and Anger-Out with alcohol dependent patients. This was indicating that patient have significant reduction in anger and improvement in the level of emotional stability and coping with their environment.

Conclusion

The Module of Anger Management Programme, was found effective in reducing levels of anger, enhancing level of emotional intelligence and mental health of alcohol dependent patients. In the present study was positively directs to the patients towards a healthy life style.

Limitation of the study

- Only male patients were considered for the present study.
- Intervention span has to be increase in future
- Control group comparison has to be include in the future

References

- Augustine, V.D (1978). Mental health of industrial worker. Unpublished M.Phil. Dissertation submitted to the Madras University, Madras.
- Mayer, J. D., Salovey, P., & Caruso, D. R (2004). Emotional intelligence: Theory, findings, and implications. *Psychological Inquiry*, 15, 197-215.
- Mayer, J. D., Salovey, P., Caruso, D. R., & Sitarenios, G (2003). Measuring emotional intelligence with the MSCEIT V2.0. *Emotion*, 3, 97-105.
- Rodgers, B., & Korten, A. E et.al (2000) Non-linear relationships in associations of depression and anxiety with alcohol use. *Psychological Medicine* 30, 421–432.
- Rodgers, B., et. al (2000) Risk factors for depression and anxiety in abstainers, moderate drinkers and heavy drinkers. *Addiction* 95, 1833–1845.
- Schutte, et al (1998). Development and validation of a measure of emotional intelligence. *Personality and Individual Differences*, 25, 167-177.
- Spielberger, C.D., et.al (1985). The experience and expression of anger: Construction and validation of an anger expression scale. In M.A. Chesney and R.H. Rosenmann (Eds.), *Angerand hostility in cardiovascular and behavioral disorders* (pp. 5-28). New York: Hemisphere Publishing Company.
- Tivis, Laura J. Parsons, Oscar. a and Nixon, Sara J. (1998). Anger in an Inpatient Treatment Sample of Chronic Alcoholics. *Clinical and Experimental research*, 22(4), 902-907.
- Trinidad DR, and Johnson CA. (20020). The association between emotional intelligence and early adolescent tobacco and alcohol use. *Personality and Individual Differences*. 32:95–105.10.1016.
- Timetostop (2015).Alcohol and Mental Health. Available at <http://www.timetostop.net/alcohol/mental.html>.
- World Health Organization. (1992) *The International Classification of Mental and Behavioural disorders*, 10th revision. Geneva: WHO.