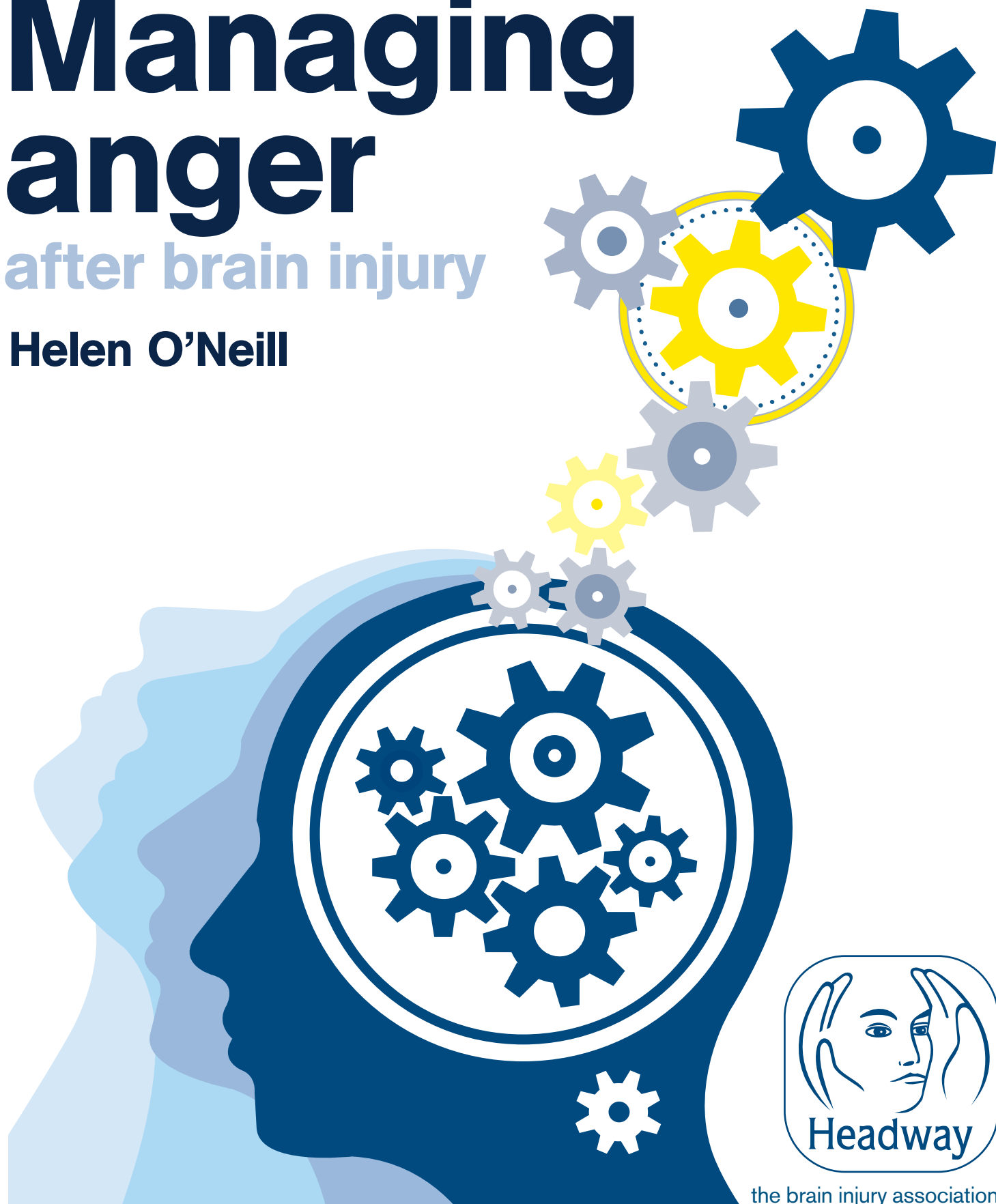


Managing anger

after brain injury

Helen O'Neill



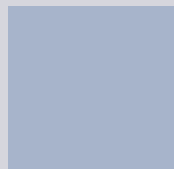
the brain injury association

 This booklet has been written for people who have had a brain injury and are now having trouble managing their anger. It is also intended for their families and carers.

■ Managing anger after brain injury

This e-booklet is an adaptation, created in May 2016, of the Headway print booklet *Managing anger after brain injury* and may contain minor updates to the original version.

published by



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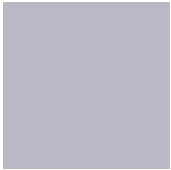


This booklet received a Commended Award at the British Medical Association Patient Information Awards 2010.

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Introduction



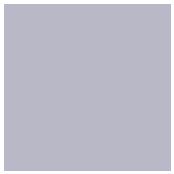
This booklet has been written for people who have had a brain injury and are now having trouble managing their anger. It is also written for their families and carers. It looks at why people with a brain injury may experience more anger and suggests ways of managing it from day-to-day.

The information in this booklet does not replace clinical guidance from medical professionals. If you feel that you or someone you know has a problem with managing anger then we would advise consulting a GP or rehabilitation professional. It may be possible to seek referral to a specialist, such as a **neuropsychologist** or **cognitive behavioural therapist**.

You will find some terms in bold type, such as those above. These are defined in the **glossary**, along with some other technical terms that you may hear from medical professionals or read in books.

Remember, anger is a normal, natural emotional response and managing anger isn't about taking it away. It is about learning to control it rather than letting it control you. We hope that after reading this booklet you will have a better understanding of anger and brain injury, and will have learned some new ways of coping.

What is anger?



Anger is an emotion; it is something that we feel. It can change:

- What we think – perhaps blaming others for problems, or remembering the last time ‘they’ upset us
- What we feel – our body feels different: we feel ‘fired-up’ for action
- What we do – respond to a situation or walk away.

Anger, like all emotions, is normal and healthy. However, when it gets out of control, it can become destructive and lead to problems.

All emotions cause changes in our bodies. You can tell when you get angry because your heart beats faster and you may feel hot and restless. This is because your body is pumping out energy hormones (like **adrenaline**), making you ready in case you have to react. These hormones act as signals when you feel frustrated or treated unfairly. The feeling of anger will tell you that something is not quite right.

When you are angry, do you:

- Notice you are angry?
- Keep yourself calm while you think about the situation?
- Work out if you have all the facts correct?
- Solve the problem?
- Make your point of view known in an effective, assertive way?

If this is the case, the anger can be healthy as it leads to you dealing with the situation. Other people may not even realise that you were angry.

Inevitably there are times when things are out of our control and we can't solve the problem. For example, we may feel frustrated when things do not go as expected. Now, this anger can be unhelpful and we need to calm ourselves down.

The way we recognise that we are angry and the skills we use to calm down are complex. Sometimes people with a brain injury can find this difficult.

Some people are more likely to become angry than others. This is because we all make sense of situations differently, which is part of our individual personalities. Past experiences, family values and ways we have learned to cope will all affect how we view things.

Anger can be a result of a misunderstanding, simply 'getting the wrong end of the stick'. While this happens to everyone at times, it can happen all too often after a brain injury.



Does anger mean aggression?

Aggression is a behaviour that people can see, feel or hear. This is different from the emotion 'anger', which is only really experienced internally by the people themselves. Other people do not always know if we are angry. Even if they guess, they cannot truly know what we are thinking and feeling in our bodies.

People often link anger and aggression together. The link can be automatic because feelings of anger can lead to aggressive behaviour. People can learn to think of anger as a warning sign of aggression. This is not always the case. Not all anger results in aggression. We can all feel angry at times, but it does not always lead to aggressive behaviour.

Some people can be aggressive when they are not angry. They may have learnt that being aggressive can get them what they want.

It is important to remember that there can be other medical reasons for aggression. In rare cases, outbursts of aggression can happen with little or no trigger. It is important that this is properly looked into. In some instances it may be diagnosed as '**episodic dyscontrol syndrome**', which can require drug treatment.

Anger after a brain injury

Anger is one of the many emotions that someone is likely to feel after a brain injury. Others include anxiety, depression, grief and loss. It is not only the person with the brain injury who will feel these emotions, but their family and carers as well. Out of all these emotions, anger is probably the most confusing.

Anger does seem to be a particular problem for people after a brain injury. It can lead to unpredictable behaviour, which can be destructive and aggressive. While some people feel at the mercy of this powerful emotion, others barely notice its presence or impact.

Case study

After my brain injury, anger was a serious problem for me and anyone I came into contact with. You don't realise what's happening to you. It's like waking up and you are someone else. You're 'different' and yet you don't know why or how. It's all confusing and frightening.

David - Rutland



How brain injury affects emotions and behaviours

Most people who have a brain injury are left with some form of **emotional and behavioural change**. This is because the brain controls all our emotions and behaviours, and damage to the frontal lobes and limbic system can affect this. If these parts of the brain are damaged it is likely that someone who has suffered the injury will experience sudden swings of emotion which they cannot control.

In the early stages of recovery, the person may shout, swear and hit out at things and people. This is not likely to be due to anger, but because they are confused and not making sense of the world. Even if someone else tries to help them wash or move, they could lash out at the helper. As they recover, this will change and new patterns of anger may be noticed.

Case study

All my emotions have been exaggerated and I have forgotten how to control them. It's like the brain injury pressed a reset button.

John - Essex

Things that can trigger anger

Things in the immediate environment

- When expectations or demands are made of the person with a brain injury they can get angry. For example, asking them to get out of bed or do exercises.

- Noise can make people angry as it uses up their attention. They may not be able to concentrate on anything else, like a conversation.
- Busy or crowded places, where there is a lot of noise and information to process, can lead to a feeling of chaos and vulnerability.

Changes caused by the brain injury

- **Communication difficulties:** not being able to find the right words, or express them clearly or quickly enough. Taking the wrong meaning from a conversation or reading facial expressions incorrectly can lead to misinterpretation and frustration.
- Many people with a brain injury need longer to make sense of what they see or hear. They may have problems understanding written or spoken information. When they realise that they are not keeping up with a conversation they may feel stupid, upset or angry.
- Difficulties with **memory** can cause people to get angry and frustrated with themselves. They may forget things, or remember being upset with someone but not remember why.
- Some people will have lost their ability to solve problems, so that even a simple problem can seem like a disaster
- A brain injury can exaggerate a part of the person's personality. Their beliefs and values may become more intense and they may be less forgiving of themselves or others.
- The emotional memory, of strong feelings and highly charged situations, may be good even though the short-term and/or long-term memory is poor. In this case, the sight of a person, or a place where an emotional situation happened, will trigger a memory of an emotion, even though there may be little or no recall of the situation itself. This is why some people can't

let some things drop – even if they have a bad memory!

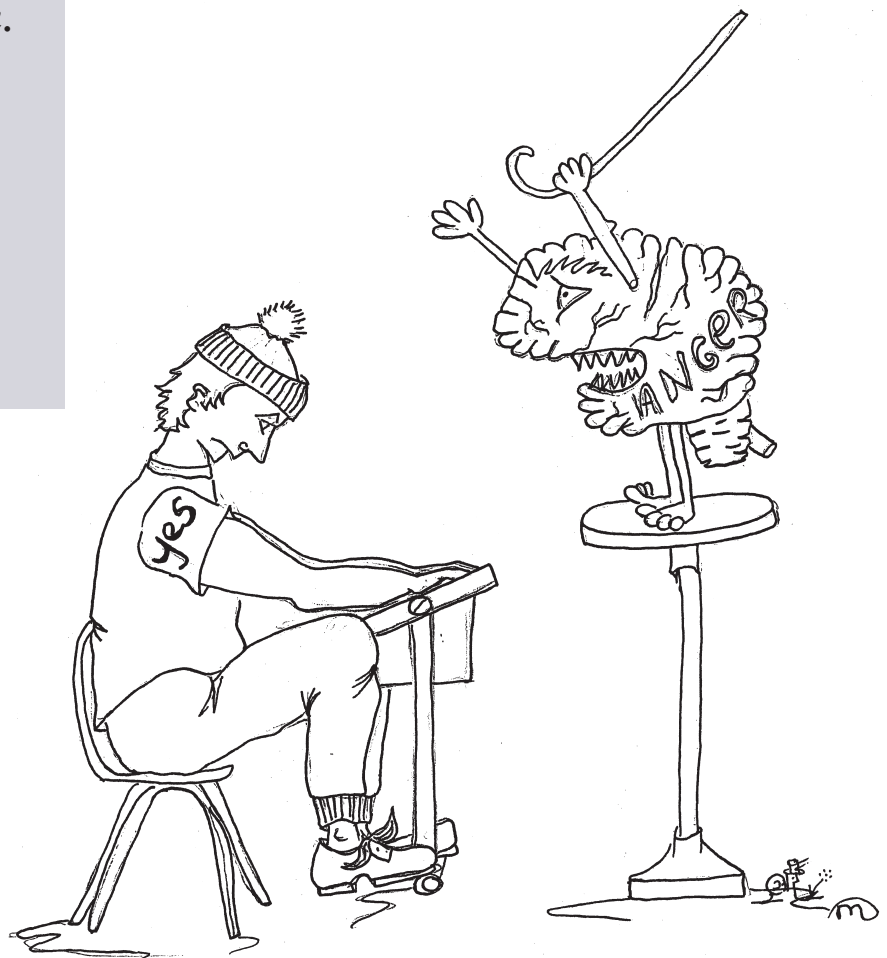
Personalised interpretations of events

- Loss of job, status or independence
- Frustration about situations leading to negative and angry thoughts
- Anger at the cause of the injury
- Low mood or poor self-esteem
- Feeling that anger is taking charge.

Case study

I get angry when people don't listen and butt in. Actually it's because I take longer to form sentences and people don't understand this.

Jane - Kent



Case study

I get angry when I look back at what caused my injury and what I could have been doing now if I hadn't been hit by the car.

Rachel - Dorset

Physical disabilities

- Loss of abilities
- Pain and tiredness
- Loss of hearing, taste or smell
- Being dependant on others and on special aids
- The stigma of 'being different'.

Family events and effects on the family

- Family relationships will alter as roles are forced to change
- Social networks may change, as family members may be less able to entertain or go out
- The family will have their own grief and anger; sometimes this is directed at the health professionals.

Case study

If other family members were involved in the accident, they may also feel anger or guilt and this will affect things at home.

Mark - Morton

Being aware of anger

Many people who have sustained a brain injury do not realise when they are getting angry. They may not realise the effect their anger is having on those around them, unless someone points it out. This could be because:

- They have lost the ability for '**self monitoring**' and are less able to notice when they get angry
- Their physiological arousal (changes in the body) is so sudden and extreme they have no time to notice the warning signs.

Many people view anger as a negative emotion and something they should not feel. So, if they feel their body getting fired up they may be reluctant to label it as anger.

Words such as stress, or frustration, can be felt as more acceptable.

Case study

I used to feel anger in varying amounts – say between 30 – 75% on a bad day, but now I go from 0-100% in less than half a second.

Lee - London

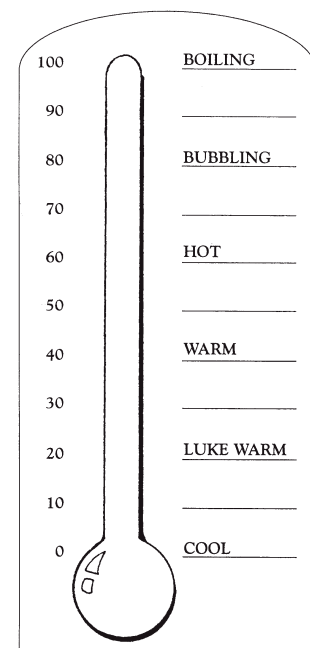
Loss of inhibition

The person with a brain injury may lose their inhibition and say things about people which would be best kept as thoughts. For example, making a reference to Judy's weight at the supermarket till. This could provoke Judy and cause the person with a brain injury to become angry with Judy or themselves. This tendency to blurt things out becomes even worse if the person is not calm.

It is important to realise that as a person becomes angry, it can make those around them feel angry. It is almost like 'catching' the anger. The two angry people may then start blaming each other and it will be difficult to calm the situation down.

Anger on a scale

It is helpful to view anger on a scale that varies in intensity and includes irritation, annoyance, frustration, anger, fury and rage. People may use their own words to describe each stage. The scale on the right is an example:



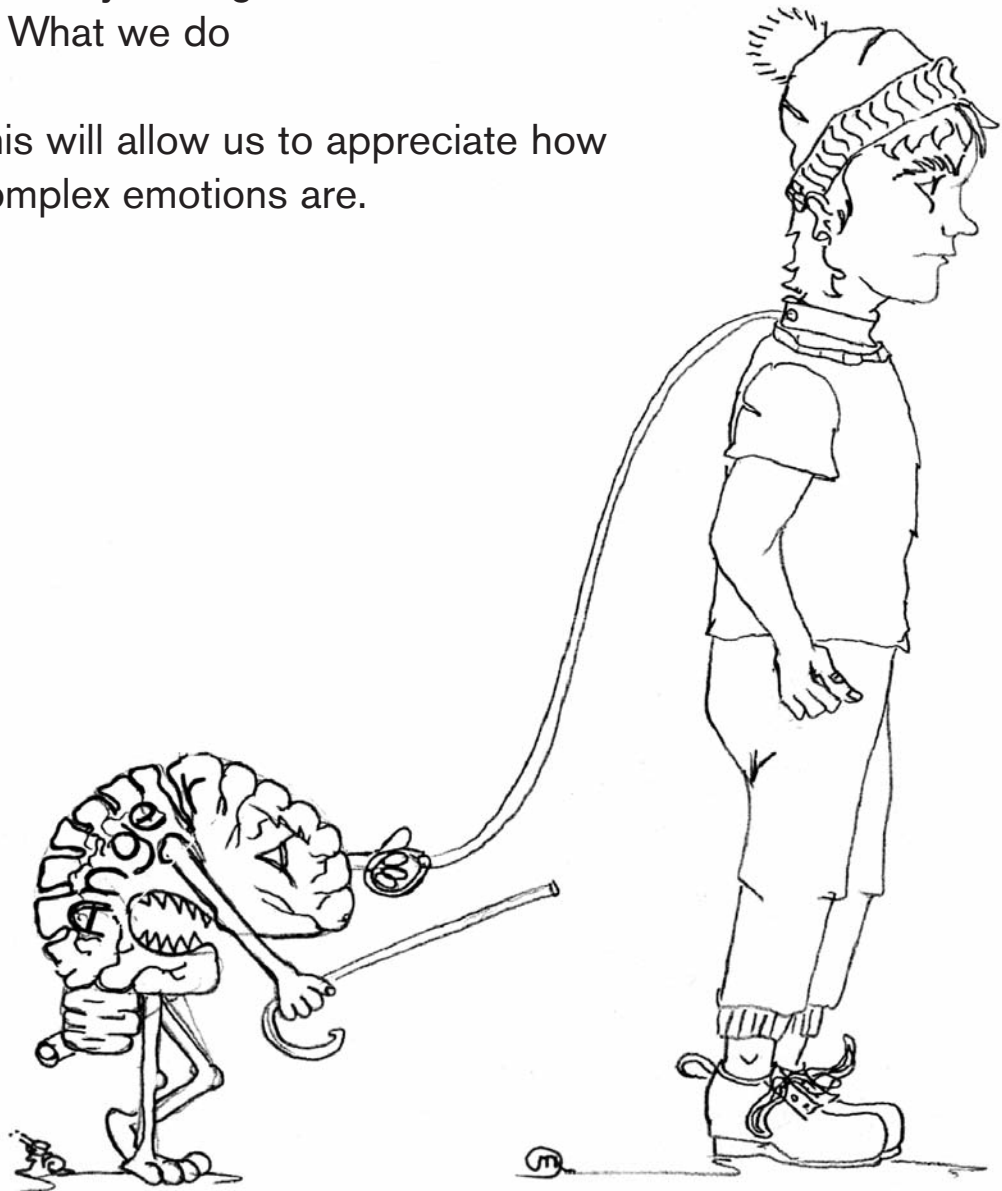
It is common for the rehabilitation team to use the image of a thermometer to describe and visualise anger, with the different levels of anger at each stage. This will raise a person's awareness, helping them describe what they are feeling. If the person can recognise that they are becoming angry, this is the first step to managing their anger.

Coping with anger after a brain injury

In order to understand and cope with our own and other people's emotions we must first understand them. We need to think of anger as an emotion that involves changes in:

- Our thoughts
- Bodily feelings
- What we do

This will allow us to appreciate how complex emotions are.



Understanding anger

When thinking about emotions, it is helpful to use the following guide:

Think ► Feel ► Do

For example, Fred goes to the cash machine and puts in his card. It doesn't work and swallows his card.

- **Thinks** – “Oh...why did this happen to me? Now I can't go out tonight!”
- **Feels** – his heart is going very fast, he gets hot, flushed and his muscles feel tense.
- **Does** – Either: Sighs loudly, takes a slow breath and calms himself, thinking “These things are sent to try us!”. Fred goes into the bank to see the cashier. Or: Takes a big breath in and thinks “I'm not going to put up with this! It shouldn't happen.” Fred fires himself up, hits the machine and shouts at the queue behind him “What are you lot bloody staring at?!”

Remember that the think-feel-do process also applies to other emotions like anxiety. Yet, whereas someone will make allowances for a person who is anxious, they are less likely to feel sympathetic when someone is angry. This is because angry behaviour can be a problem.

When you try to understand someone's anger, remember that anger can start off with anxious thoughts. For example, Melinda is waiting for her husband who has not turned up. She begins to feel anxious and worried.

- **Thinks** – “Oh where is he? I hope he’s all right?
Have I got it wrong, did I forget what he said?”
- **Feels** – Her heart goes faster and she gets hot and flushed.
- **Does** – Looks at her watch and paces around.

Then Melinda thinks, “Why didn’t he explain properly? I’m not having him make me look stupid!” She gets angry. Now blame is aimed at her husband. As Melinda’s anxious thoughts have changed to angry thoughts she feels and behaves differently.

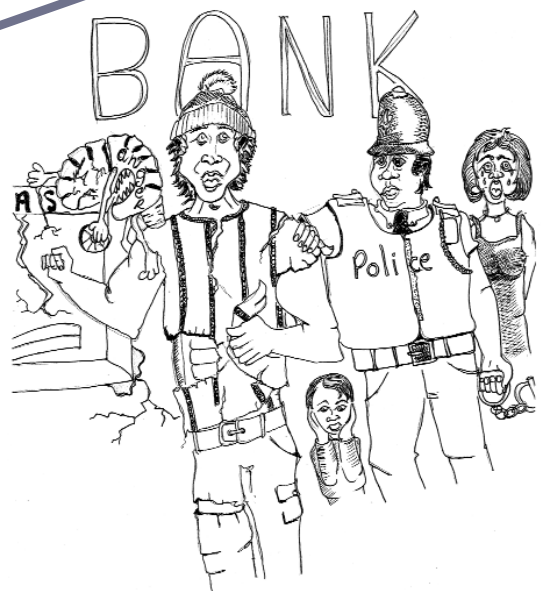


With your anger under control you will:

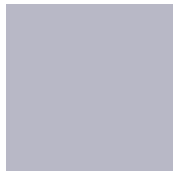
- Be calmer
- Get on better with people
- Feel better within yourself
- Be better able to achieve your aims

If your anger gets out of control it can lead to:

- Aggression
- Abuse
- Damage
- Trouble



Tips for the person with a brain injury



There are two reasons why it is important to control your anger:

- 1) It can lead to aggressive or impulsive behaviour
- 2) It can affect your thinking and speaking

All our skills work best when we are calm. As your anger increases, it can affect how you receive information, your memory and how well you speak. This can lead to you becoming frustrated and perhaps even angrier. If you already have problems in any of these areas, your anger will only make them worse.

The best way to reduce your anger is to remove yourself from the situation. You need to calm your body and thoughts before you deal with things. This is not always easy and you may not like the idea of walking away because:

- It can be seen as 'backing down' and makes you feel inadequate
- The effect of your brain injury means it can be difficult to stop angry thoughts. You may get stuck on an idea and need to express it.

It is more important to remember that if you are calm, you will be able to deal with your problems and explain yourself to others. Try to take time out to decide if:

- It is something worth dealing with. If so, plan your response calmly
- It is worth getting angry over. If not, let it drop.

You can ask the members of your rehabilitation team for advice on relaxation techniques and keeping calm.

What can help?

- Learn to appreciate just how powerful your thoughts are. They are automatic and you really believe them, so they can make you angry when there is no real reason.
- It is only your interpretation of a trigger (situation) that makes you angry. You may be right, but always think about other interpretations first.
- Write down how you feel when you are angry. You can show this to someone you trust later and get another point of view.
- Practise noticing or self-monitoring how tense and angry your body is feeling. Then relax and see the difference. You will then be able to measure how angry you are, when compared to how you feel when relaxed.
- Try to notice the warning signs of your anger – shoulders rising up, breathing faster, clenched fists, etc. Remove yourself from situations when you feel those warning signs.
- Practise relaxation and breathing exercises to calm down.
- Distract yourself by doing something you like, for example listening to music.
- Remember: all your skills decrease when you are angry. Remind yourself, “you deserve to keep yourself calm to make good decisions or put your point across”.
- When you feel yourself getting angry, think of someone who normally calms you down. What might they say to you if they were there? Or think of a special calming place, piece of music, or picture. Try to make this part of a routine that you can use regularly to help you cope.
- Write down when these ideas have helped. This will help you in the future if you have a ‘bad patch’.

Case study

I was given a 'coping routine' card to carry around. I look at this when I start to feel angry. It says "Stop. Breathe out, shoulders down, move away and think it through".

It really helps.

Roger – Midlands

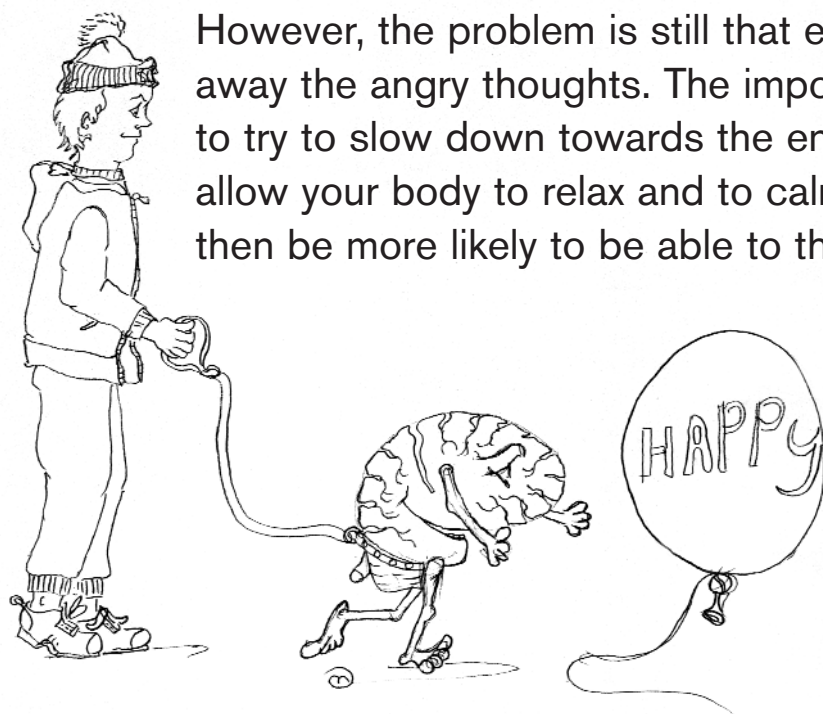
Example of a 'coping routine' card:

DAVID
BREATHING
3 in and 4 out

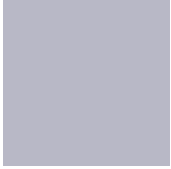
Physical activity

Some people believe that they must do something physical to let their anger out. However, while punching a punch bag is better than punching another person, it may cause problems. It will use up some adrenaline, but the thoughts that caused the anger will not have changed and what will you do when the punch bag isn't there?

If you do need to do something physical while angry then activities such as running, swimming and gardening can help. However, the problem is still that exercise itself does not take away the angry thoughts. The important thing to remember is to try to slow down towards the end of the activity, in order to allow your body to relax and to calm yourself down. You will then be more likely to be able to think things through clearly.



Tips for family, friends and carers



It can be very hard to be on the receiving end of someone's anger. It is often directed at those closest to us. It can be particularly hurtful if it is directed at family members, who are already upset and perhaps angry themselves. This section will now introduce some strategies that will, hopefully, reduce the distress of everyone involved.

What can help?

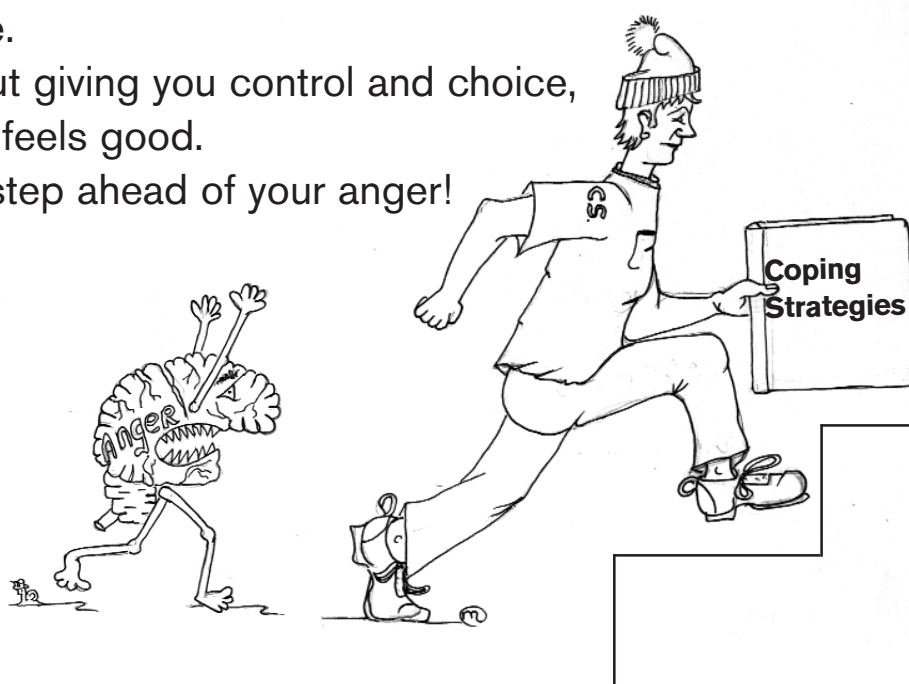
- You may feel you already know what 'triggers' their anger. However, rather than tell them what to do or what to avoid, help them discover it for themselves.
- Design some experiments (or do some tests) with them, and ask them to rate their anger on the thermometer scale when they are close to possible triggers, e.g. loud noise.
- When you both discover a trigger, help them find another way to look at the situation. Suggest to them that rather than saying, "why have you got that TV on so loud, you are so selfish", it is better to try, "please could you turn it down a bit, the noise bothers me".
- Agree on a prompt or sign that you can use when you believe that they are getting wound up. For example, you could blow over your shoulder, indicating "blow away your anger", to prompt them that they need to calm themselves.
- Think about the ideas discussed in this booklet and help the person to use them.
- Busy places can be difficult for someone with a brain injury, as they cannot process all the information. If you see them getting 'worked up', encourage them to move to somewhere quieter.

- If the person is getting angry, try to direct their attention away from the cause.
- The cause of their anger may not always be obvious. Therefore, you will need to be patient and observant at times in order to work it out. Even simple things like watching people chatting freely can bring up feelings of sadness and injustice.
- Think about strategies to help you. If you have had a bad day, and they dump their anger on to you, you can think of your own coping statements such as: "That felt very hurtful, but I know you didn't mean it that way." "What's this about? You must be feeling in a bad state to be that rude to me."

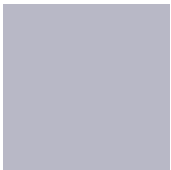
For a downloadable factsheet of the above information, refer to Headway's factsheet [Managing Anger - Tips for Families, Friends and Carers](#).

Tips for all

- Remember, managing anger is not about taking it away. You may need anger one day to give you a serious message.
- It is about giving you control and choice, and that feels good.
- Be one step ahead of your anger!



Frequently Asked Questions



Will I ever understand why I feel anger so strongly now?

Lots of people ask this question following brain injury. As a natural reaction you may feel anger about your injury, which should lessen over time as you gradually accept any changes. For some people it is actual damage to the brain that causes increased emotions, including anger. As you learn more about the effects of your own brain injury and what triggers it, it will hopefully become easier to manage. The first step to managing your anger is to be aware of when you are becoming angry.

Will I always have to use strategies to manage my anger?

Maybe not. As you practise using them, you will learn new ways of responding to the warning signs of anger. In time, your responses should become automatic. You will not have to think about using them and they will become part of the natural way you think and behave. Also, as your confidence increases, you may find you need them less and less.

My son just seems to ‘go off on one’. Will it always be like this?

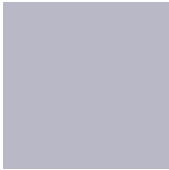
There is no definite answer to this. It is likely that it will be worse in the early stages of rehabilitation because of irritability. Later on there will be frustration and feelings of loss as the effects of the brain injury become apparent.

However, some people do not lose their tendency to ‘ignite’ for no reason. There will always be a trigger for the anger, but it may not be obvious to others. Something that was said, thought about or experienced will have triggered the anger.

It will help you understand if your son can explain to you how he feels. He may not be able to monitor his emotions and so will not be aware of what happens. He may also have a great sense of urgency that he cannot control. When the reason for the outburst is understood, it can be helped with strategies and prompts. This booklet contains some of these strategies and prompts and your brain injury team will also be able to advise on some more.



Glossary



■ Adrenaline

A chemical produced by the adrenal glands, which triggers the 'fight or flight' response.

■ Amygdala

An area of the limbic system that controls emotions such as fear and rage.

■ Cognition

A general term used to cover all areas of intellectual function.

■ Cognitive behavioural therapist

Helps people to understand the relationship between their thoughts, feelings and behaviour. Provides practical help to reduce emotional distress and change problem behaviours.

■ Episodic dyscontrol syndrome

Condition causing outbursts of anger/rage with no obvious trigger.

■ Frontal lobes

Part of the cerebral cortex. Primarily concerned with planning and organising and controlling emotions and behaviour.

■ Limbic system

An area deep in the centre of the brain that houses the hypothalamus, hippocampus and amygdala and is involved in the control of emotions.

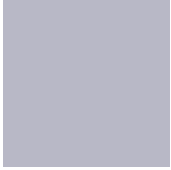
■ Neuropsychologist

A specialist in the assessment and rehabilitation of behavioural, emotional and cognitive problems caused by brain injury and other neurological conditions.

■ Self monitoring

The ability to notice and recognise our own emotions.

Further reading

 The following books can be purchased from Headway and provide a good introduction to brain injury and its effects:

- Clare, L. & Wilson, B.A. (1997) *Coping with Memory Problems: A practical guide for people with memory impairments, their relatives, friends and carers*. London: Pearson Assessment.
- Daisley, A., Tams, R. and Kischka, U. (2008) *Head Injury: The Facts*. Oxford: Oxford University Press.
- Hedley, N (2011) *Living with an Acquired Brain Injury: The Practical Life Skills Workbook*. Milton Keynes: Speechmark Publishing Ltd.
- Johnson, J. (2013) *My Dad Makes the Best Boats*. Milton Keynes: Speechmark Publishing Ltd.
- Johnson, J. (2013) *My Mum Makes the Best Cakes*. Milton Keynes: Speechmark Publishing Ltd.
- Johnson, J. (2011) *"My Parent has a Brain Injury..." a Guide for Young People*. Self-published.
- Powell, T (2013) *The Brain Injury Workbook: Exercises for Cognitive Rehabilitation*. Milton Keynes: Speechmark Publishing Ltd.
- Powell, T. (2004) *Head Injury: A Practical Guide*. Milton Keynes: Speechmark Publishing Ltd.

Headway also produces an extensive range of freely downloadable [booklets](#) and [factsheets](#).

Headway's [Amazon shop](#) sells a wide range of books on the subject of brain injury and brain function.

Other useful resources for managing anger

- O'Neill, H. (2006) *Managing Anger* (2nd edition) London: Wiley-Blackwell.
- Williams, W.H. (2011) *Managing Anger after Encephalitis*. [Encephalitis Society](#).

Useful organisations

Afasic

Helpline: 0300 666 9410

Web: www.afasicengland.org.uk

ASSIST Trauma Care

Helpline: 01788 560 800

Email: assist@traumatic-stress.freeserve.co.uk

Web: www.assisttraumacare.org.uk

Brain and Spinal Injury Charity (BASIC)

Helpline: 0870 750 0000

Email: enquiries@basiccharity.org.uk

Web: www.basiccharity.org.uk

Brain and Spine Foundation

Helpline: 0808 808 1000

Email: helpline@brainandspine.org.uk

Web: www.brainandspine.org.uk

Brain Tumour Charity, The

Helpline: 0808 800 0004

Email: support@thebraintumourcharity.org

Web: www.thebraintumourcharity.org

Carers UK

Helpline: 0808 808 7777

Email: www.carersuk.org

Web: www.carers.org

Cerebra

Helpline: 0800 328 1159

Email: info@cerebra.org.uk

Web: w3.cerebra.org.uk/

Child Brain Injury Trust

Helpline: 0303 303 2248

Email: info@cbituk.org

Web: www.childbraininjurytrust.org.uk

Connect - the communication disability network

Tel: 020 7367 0840

Email: info@ukconnect.org

Web: www.ukconnect.org

Different Strokes

Helpline: 0845 130 7172

Email: info@differentstrokes.co.uk

Web: www.differentstrokes.co.uk

Encephalitis Society

Helpline: 01653 699 599

Email: mail@encephalitis.info

Web: www.encephalitis.info

Epilepsy Action

Helpline: 0808 800 5050

Email: helpline@epilepsy.org.uk

Web: www.epilepsy.org.uk

Epilepsy Society

Helpline: 01494 601 400

Web: www.epilepsysociety.org.uk

Meningitis Now

Helpline: 0808 80 10 388

Email: info@meningitisnow.org

Web: www.meningitisnow.org

Meningitis Research Foundation

Helpline (24hr): 0808 800 3344

Email: info@meningitis.org

Web: www.meningitis.org

Mind

Infoline: 0300 123 3393

Email: info@mind.org.uk

Web: www.mind.org.uk

Pituitary Foundation, The

Helpline: 0117 370 1320

Email: helpline@pituitary.org.uk

Web: www.pituitary.org.uk

Speakability

Helpline: 0808 808 9572

Email: speakability@speakability.org.uk

Web: www.speakability.org.uk

Stroke Association

Helpline: 0303 3033 100

Email: info@stroke.org.uk

Web: www.stroke.org.uk

Rehabilitation and counselling services

The following organisations provide information on rehabilitation, care homes or counselling services in the UK. Some have online directories of professionals in NHS or private practice. Headway does not recommend any specific services and it is suggested that you contact more than one before making a decision.

Association for Rehabilitation of Communication and Oral Skills (ARCOS)

Helpline: 01684 576 795

Email: admin@arcos.org.uk

Web: www.arcos.org.uk

Association of Speech and Language Therapists in Independent Practice

Tel: 01494 488 306

Web: www.helpwithtalking.com

BrainNav – The National Brain Injury Service Directory

Web: www.brainnav.info

British Association for Behavioural and Cognitive Psychotherapies (BABCP)

Tel: 0161 705 4304

Email: babcp@babcp.com

Web: www.babcp.com

British Association for Counselling and Psychotherapy

Tel: 01455 883 300

Email: bacp@bacp.co.uk

Web: www.bacp.co.uk

British Association of Brain Injury Case Managers (BABICM)

Tel: 07002 222 426

Email: secretary@babicm.org

Web: www.babicm.org

British Association of Occupational Therapists and College of Occupational Therapists

Tel: 020 7357 6480

Email: reception@cot.co.uk

Web: www.cot.co.uk

British Psychological Society (BPS)

Tel: 0116 254 9568

Email: enquiries@bps.org.uk

Web: www.bps.org.uk

Care Quality Commission (CQC)

Tel: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

Chartered Society of Physiotherapy

Tel: 020 7306 6666

Web: www.csp.org.uk

**College of Sexual and
Relationship Therapists**

Tel: 020 8543 2707

Email: info@cosrt.org.uk

Web: www.cosrt.org.uk

Counselling Directory

Tel: 0844 8030 240

Web: www.counsellingdirectory.org.uk

**Find a Therapist – UK & Ireland
Directory of Counselling and
Psychotherapy**

Web: www.cpdirectory.com

Physio First

Tel: 01604 684 960

Email: minerva@physiofirst.org.uk

Web: www.physiofirst.org.uk

Relate – the relationship people

Tel: 0300 100 1234

Email: enquiries@relate.org.uk

Web: www.relate.org.uk

**Royal College of Speech and
Language Therapists (RCSLT)**

Tel: 020 7378 1200

Email: info@rcslt.org

Web: www.rcslt.org

UK Council for Psychotherapy

Tel: 020 7014 9955

Email: info@ukcp.org.uk

Web: www.psychotherapy.org.uk

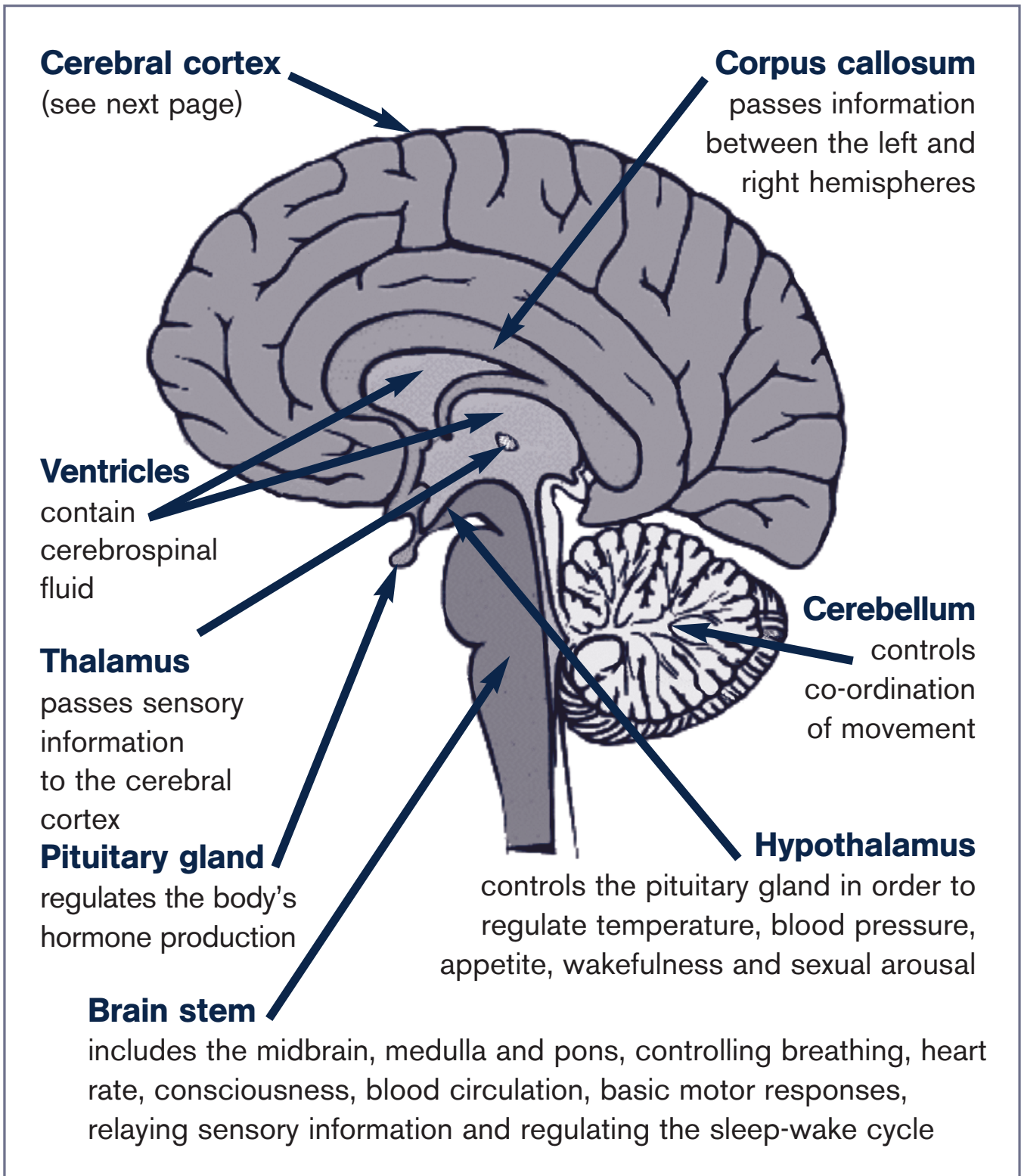
**United Kingdom Acquired
Brain Injury Forum (UKABIF)**

Tel: 0845 608 0788

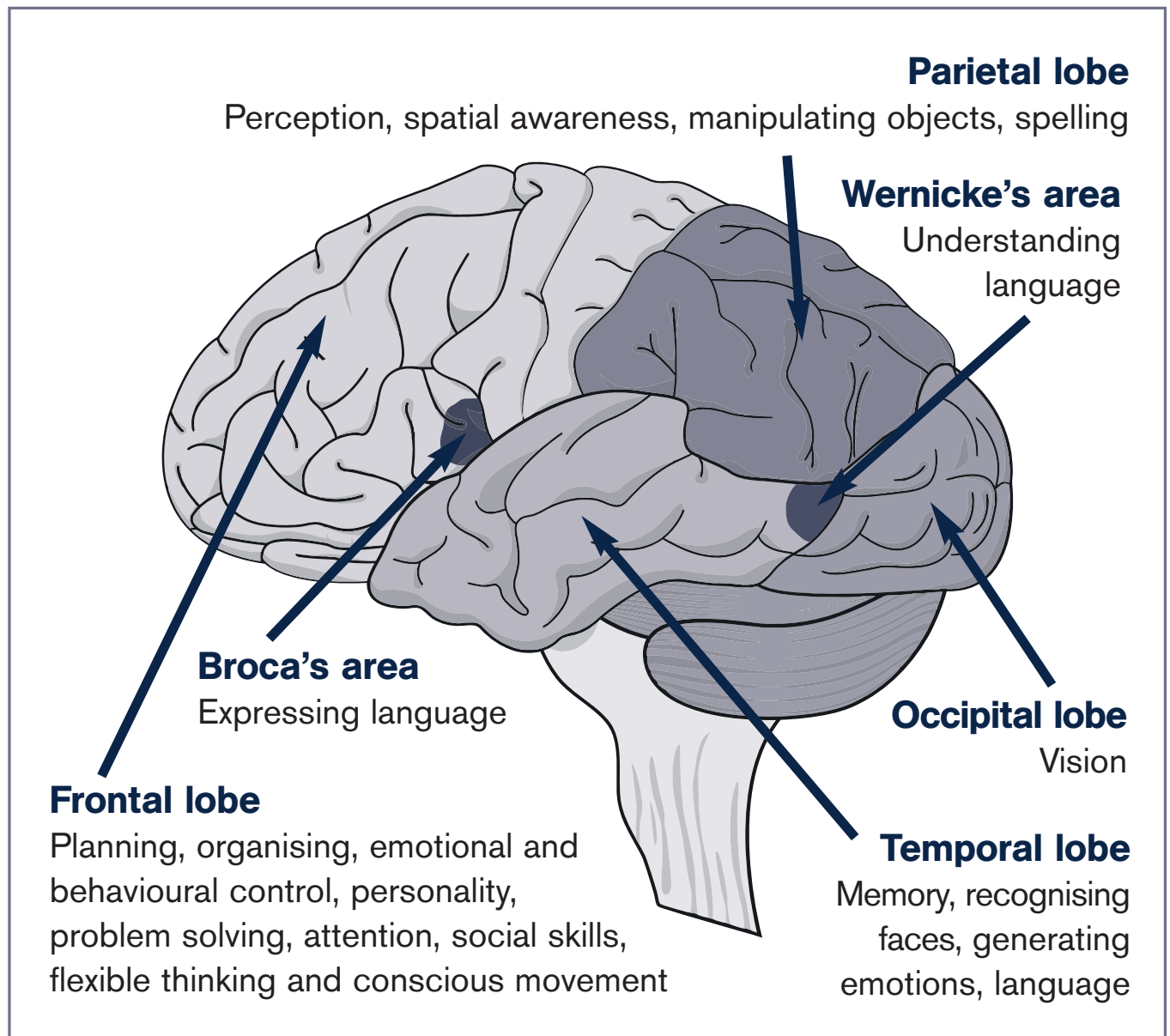
Email: info@ukabif.org.uk

Web: www.ukabif.org.uk

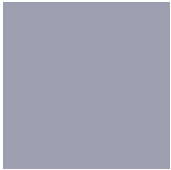
Internal areas of the brain and their functions



The cerebral cortex



About Headway



Headway – the brain injury association is a charity set up to give help and support to people affected by brain injury.

A network of local [Headway groups and branches](#) throughout the UK offers a wide range of services including rehabilitation programmes, carer support, social re-integration, community outreach and respite care. The [Headway helpline](#) provides information, signposts to sources of support and rehabilitation services, and offers a listening ear to those experiencing problems. Other services provided by Headway include:

- Supporting and developing local [groups and branches](#)
- Promoting understanding of brain injury and its effects
- An award-winning range of [publications](#) on aspects of brain injury
- Accreditation of UK care providers through the [Approved Provider scheme](#)
- A comprehensive, newly launched [website](#)
- [Campaigning](#) for measures that will reduce the incidence of brain injury
- Providing grants from our [Emergency Fund](#) for families coping with financial difficulties
- [Headway Acute Trauma Support](#) (HATS) nurses to support families with loved ones in hospital

■ Freephone helpline: 0808 800 2244

(Monday–Friday, 9am–5pm)

■ Telephone: 0115 924 0800

■ Website: www.headway.org.uk

■ Fax: 0115 958 4446

■ Email: helpline@headway.org.uk



Managing anger

after brain injury

Helen O'Neill

This booklet has been written for people who have had a brain injury and are now having trouble managing their anger. It is also intended for their families and carers. It looks at why people with a brain injury may experience more anger and suggests ways of managing it from day-to-day.



Web: www.headway.org.uk
Helpline: 0808 800 2244