

# ARES

## Anger Regulation and Expression Scale

*Raymond DiGiuseppe, Ph.D. & Raymond Chip Tafrate, Ph.D.*

### Assessment Report

**Name/ID:** Jennifer Smith

Age: 16 years

Gender: Female

Birth Date: May 04, 1994

Grade: 11

Administration Date: September 27, 2010

Assessor's Name: ML

Data Entered By: Dr. R

Normative Option: Gender-specific norms

This Assessment Report is intended for use by qualified assessors only, and is not to be shown or presented to the respondent or any other unqualified individuals.



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ver. 1.0

## Introduction

The Anger Regulation and Expression Scale (ARES) is a comprehensive self-report assessment of the expression and regulation of anger in children and adolescents aged 10 to 17 years. When used in combination with other information, results from the ARES can help identify a wide range of potentially problematic anger patterns. This assessment can be used in screening, planning, and monitoring interventions for these youths. This report provides valuable information concerning Jennifer Smith's scores, how her scores compare to other youths similar in age, and which scales are elevated. Additional interpretive information can be found in the *ARES Technical Manual* (published by MHS).

This computerized report is an interpretive aid and should not be provided to parents, teachers, youths, or used as the sole criterion for clinical diagnosis or intervention. Administrators are cautioned against drawing unsupported interpretations. Combining information from this report with information gathered from other psychometric measures, interviews, observations, review of available records, and discussions with the youth, will give the practitioner or service provider a more comprehensive view of the youth than might be obtained from any one source. This report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Administrators should review the youth's responses to specific items to ensure that these interpretations apply.

## Response Style Analysis

The following section provides Jennifer Smith's scores for the Positive and Negative Impression scales.

### Positive Impression

The Positive Impression score (raw score = 0) does not indicate an overly positive response style.

### Negative Impression

The Negative Impression score (raw score = 0) does not indicate an overly negative response style.

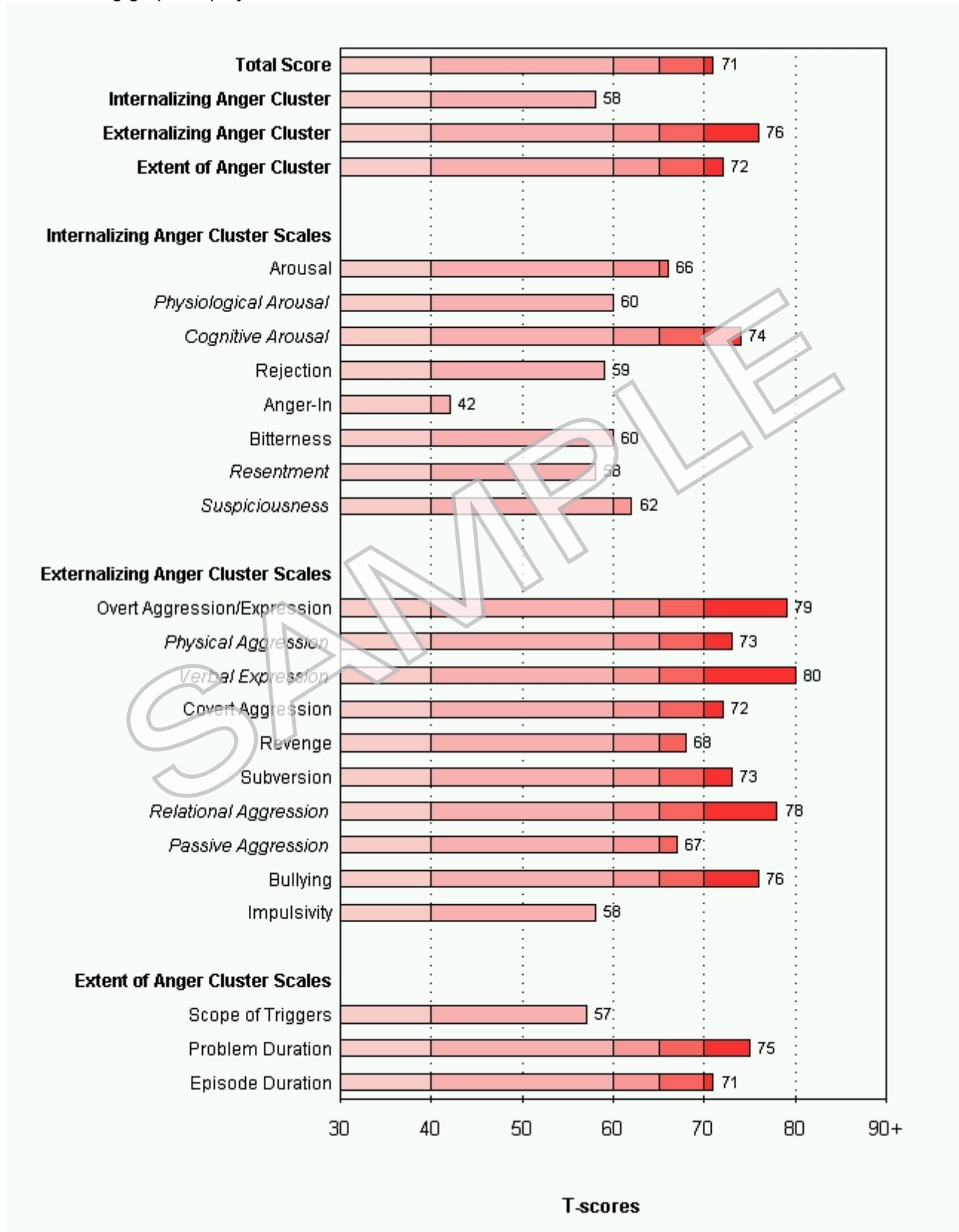
## T-score Guidelines

The guidelines in the following table apply to all T-scores presented in this report.

T-score	Guidelines
70+	Very Elevated Score (Many more concerns than are typically reported)
65-69	Elevated Score (More concerns than are typically reported)
60-64	Slightly Elevated Score (Somewhat more concerns than are typically reported)
40-59	Average Score (Typical levels of concern)
<40	Low Score (Fewer concerns than are typically reported)

# T-scores

The following graph displays Jennifer Smith's T-scores for each of the ARES scales.



## Detailed Scores

The following table summarizes the results of Jennifer Smith's assessment of herself and provides general information about how she compares to the normative group. Please refer to the *ARES Technical Manual* for more information about interpreting these results.

### Total Score and Cluster Scores

Scale	Raw Score	T-score	90% Confidence Interval	Guideline
Total Score	39.7	71	68–74	Very Elevated
Internalizing Anger Cluster	10.8	58	55–61	Average
Externalizing Anger Cluster	17.4	76	73–79	Very Elevated
Extent of Anger Cluster	11.5	72	66–78	Very Elevated

### Internalizing Anger Scales and Subscales

Scale	Raw Score	T-score	90% Confidence Interval	Guideline
Arousal	2.9	66	62–70	Elevated
Physiological Arousal (subscale)	2.3	60	55–65	Slightly Elevated
Cognitive Arousal (subscale)	3.8	74	68–80	Very Elevated
Rejection	3.8	59	53–65	Average
Anger-In	1.3	42	35–49	Average
Bitterness	2.8	60	54–66	Slightly Elevated
Resentment (subscale)	2.5	58	51–65	Average
Suspiciousness (subscale)	3.0	62	55–69	Slightly Elevated

### Externalizing Anger Scales and Subscales

Scale	Raw Score	T-score	90% Confidence Interval	Guideline
Overt Aggression/Expression	3.6	79	73–85	Very Elevated
Physical Aggression (subscale)	2.8	73	65–81	Very Elevated
Verbal Expression (subscale)	4.2	80	74–86	Very Elevated
Covert Aggression	3.0	72	65–79	Very Elevated
Revenge	3.0	68	62–74	Elevated
Subversion	2.9	73	67–79	Very Elevated
Relational Aggression (subscale)	3.0	78	72–84	Very Elevated
Passive Aggression (subscale)	2.7	67	59–75	Elevated
Bullying	3.0	76	69–83	Very Elevated
Impulsivity	2.0	58	50–66	Average

### Extent of Anger Scales

Scale	Raw Score	T-score	90% Confidence Interval	Guideline
Scope of Triggers	2.8	57	49–65	Average
Problem Duration	4.4	75	71–79	Very Elevated
Episode Duration	4.3	71	63–79	Very Elevated

## Summary: Score Interpretation

The following section summarizes the results of Jennifer Smith's assessment of herself on the ARES. Scores reported in this section include the obtained T-score, along with the 90% Confidence Interval (CI). Higher scores indicate greater problems. Interpretive guidelines are also provided.

### Response Style Analysis

The Positive Impression score (raw score = 0) does not indicate an overly positive response style. The Negative Impression score (raw score = 0) does not indicate an overly negative response style.

### Total Score and Cluster Scores

The **Total Score** indicates the degree and extent to which the youth experiences, regulates, and expresses anger. Ratings on this scale yielded a T-score of 71 (90% CI = 68–74), falling within the Very Elevated score range. The youth's Total Score on the ARES is elevated and may indicate that she has a problem with experiencing, regulating, or expressing anger. Further analysis of the Cluster scores, scale scores, and subscale scores will identify which components of anger are most problematic.

The **Internalizing Anger Cluster** consists of the following scales: Arousal (including Physiological Arousal and Cognitive Arousal), Rejection, Anger-In, and Bitterness (including Resentment and Suspiciousness). This Cluster score represents the youth's private physical sensations, experiences, and thoughts during episodes of anger. Ratings on this scale yielded a T-score of 58 (90% CI = 55–61), falling within the Average score range. Although the youth did not receive an elevated score on the Internalizing Anger Cluster, an examination of the Internalizing Anger scale and subscale scores (provided below) is recommended and will provide a more comprehensive picture of her anger experiences.

The **Externalizing Anger Cluster** consists of the following scales: Overt Aggression/Expression (including Physical Aggression and Verbal Expression), Covert Aggression, Revenge, Subversion (including Relational Aggression and Passive Aggression), Bullying, and Impulsivity. Ratings on this scale yielded a T-score of 76 (90% CI = 73–79), falling within the Very Elevated score range. The youth is most likely expressing her anger externally through physical, indirect, passive, or relational aggression, or through inappropriate verbal expression, such as insulting, or yelling. She may experience a desire to seek revenge or to use anger as a means to coerce people to do what she wants. She may also bully others and enjoy hurting them. She may feel that she is unable to control her desires or impulses to act out verbally or physically against others.

The **Extent of Anger Cluster** consists of the following scales: Scope of Triggers, Problem Duration, and Episode Duration. Ratings on this scale yielded a T-score of 72 (90% CI = 66–78), falling within the Very Elevated score range. The youth is likely to experience high trait anger. She may experience anger across a wide variety of situations, she may stay angry for an extended period of time, and she is likely to have suffered from anger difficulties for a considerable length of time.

### Internalizing Anger Scales and Subscales

The **Arousal** scale consists of the following subscales: Physiological Arousal and Cognitive Arousal. Ratings on this scale yielded a T-score of 66 (90% CI = 62–70), falling within the Elevated score range. The youth may be experiencing high physiological arousal and ruminative thoughts about her anger triggers that she cannot clear from her mind. Such high arousal may interfere and distract her from functioning well in other areas.

The **Physiological Arousal** subscale measures the youth's degree of physical sensations that she experiences when angry. Ratings on this subscale yielded a T-score of 60 (90% CI = 55–65), falling within the Slightly Elevated score range. When angered, the youth may experience significant physiological sensations such as rapid breathing, shaking hands, racing heart rate, or tight muscles.

The **Cognitive Arousal** subscale measures the degree to which the youth experiences ruminative, uncontrollable thoughts that dominate her stream of consciousness when angry. Ratings on this subscale yielded a T-score of 74 (90% CI = 68–80), falling within the Very Elevated score range. The youth may experience ruminative thoughts about the people and events that triggered her anger. She may have distracting angry thoughts that make it difficult for her to concentrate.

The **Rejection** scale assesses the degree to which the youth's anger is elicited by hurt or social rejection. Ratings on this scale yielded a T-score of 59 (90% CI = 53–65), falling within the Average score range. No rejection problems indicated.

The **Anger-In** scale measures the youth's tendency to hold in or suppress angry feelings from public view. Ratings on this scale yielded a T-score of 42 (90% CI = 35–49), falling within the Average score range. No anger-in problems indicated.

The **Bitterness** scale consists of the following subscales: Resentment and Suspiciousness. Ratings on this scale yielded a T-score of 60 (90% CI = 54–66), falling within the Slightly Elevated score range. The youth may experience bitterness and hostile attitudes. These themes may include a focus on perceptions of unfairness, resentment of those who have transgressed against her in the past, and suspicious thoughts that others purposefully want to harm her.

The **Resentment** subscale measures the youth's hostility based on her belief that she has not received a fair share of life's rewards, or that she has been treated unfairly compared to others. Ratings on this subscale yielded a T-score of 58 (90% CI = 51–65), falling within the Average score range. No resentment problems indicated.

The **Suspiciousness** subscale measures the extent to which the youth believes that people harbor hostile intentions toward her. Ratings on this subscale yielded a T-score of 62 (90% CI = 55–69), falling within the Slightly Elevated score range. The youth may feel suspicious of others' intentions and attribute hostile motives to their neutral behavior. It is likely that she will have difficulty trusting others and will often predict that people will disappoint her.

### Externalizing Anger Scales and Subscales

The **Overt Aggression/Expression** scale consists of the following subscales: Physical Aggression and Verbal Expression. Ratings on this scale yielded a T-score of 79 (90% CI = 73–85), falling within the Very Elevated score range. The youth is likely to express her anger through verbal means or by aggression toward objects or people.

The **Physical Aggression** subscale assesses the youth's tendency to express her anger through physical aggression toward people or objects, such as hitting or striking out, banging tables, or slamming doors. Ratings on this subscale yielded a T-score of 73 (90% CI = 65–81), falling within the Very Elevated score range. When angered, the youth may become physically aggressive toward people or she may destroy property. Behaviors may include throwing objects or banging doors or walls; or pushing, shoving, or hitting people.

The **Verbal Expression** subscale assesses the extent to which the youth insults, threatens, or engages in loud arguments with others. Ratings on this subscale yielded a T-score of 80 (90% CI = 74–86), falling within the Very Elevated score range. The youth is likely to express her anger verbally. She may insult or threaten others, engage in loud arguments, or make subtly insulting, hurtful, or sarcastic comments. Her angry verbalizations may intimidate those with whom she has close interpersonal relationships.

The **Covert Aggression** scale measures the youth's involvement in covert and secret attempts to damage a person's property or to make him/her fail. Ratings on this scale yielded a T-score of 72 (90% CI = 65–79), falling within the Very Elevated score range. The youth is likely to seek revenge by secretly destroying the property of the people at whom she is angry. She may also secretly work at making the target of her anger fail.

The **Revenge** scale measures the extent to which the youth desires to seek revenge against those at whom she is angry. Ratings on this scale yielded a T-score of 68 (90% CI = 62–74), falling within the Elevated score range. When angered, the youth is likely to be motivated by revenge. She is likely to spend time and energy pursuing ways to get even with those she believes have transgressed upon her.

The **Subversion** scale consists of the following subscales: Relational Aggression and Passive Aggression. Ratings on this scale yielded a T-score of 73 (90% CI = 67–79), falling within the Very Elevated score range. The youth is likely to respond toward the people at whom she is angry by using indirect or non-confrontational strategies. These may include attempts to isolate the target of her anger from their shared social network by speaking badly about the target. On the other hand, she may refuse to cooperate or comply with any expectations or requests that the target may have or make.

The **Relational Aggression** subscale assesses how frequently the youth attempts to exclude the target of her anger from her social support network, as well as how frequently she alienates, defames, or denigrates those at whom she gets angry. Ratings on this subscale yielded a T-score of 78 (90% CI = 72–84), falling within the Very Elevated score range. The youth is likely to speak negatively about the targets of her anger, and may try to convince others of the target's bad traits. She may even resort to lying or fabricating stories in an effort to isolate the target from social networks.

The **Passive Aggression** subscale measures the extent to which the youth expresses her anger by failing to complete tasks, requests, or other activities expected by those at whom she is angry. Ratings on this subscale yielded a T-score of 67 (90% CI = 59–75), falling within the Elevated score range. The youth is likely to express her anger passively by ignoring and avoiding people at whom she is angry, or by failing to cooperate with them on joint activities.

The **Bullying** scale gauges the youth's tendency to use anger and bullying to coerce and control others or to attain her desires in interpersonal relationships. Ratings on this scale yielded a T-score of 76 (90% CI = 69–83), falling within the Very Elevated score range. The youth has developed a pattern of using her anger to coerce and control others. She may enjoy being in a position of power over others; or she may use her anger to intimidate others to do as she wishes. Her desire for dominance and control over others is likely to interfere with interpersonal relationships.

The **Impulsivity** scale measures the degree to which the youth feels that that she cannot control her verbal or aggressive behaviors when angry. Ratings on this scale yielded a T-score of 58 (90% CI = 50–66), falling within the Average score range. No impulsivity problems indicated.

### Extent of Anger Scales

The **Scope of Triggers** scale measures the breadth of stimuli that elicit the youth's anger episodes. Ratings on this scale yielded a T-score of 57 (90% CI = 49–65), falling within the Average score range. The youth's anger is likely to be triggered by only one or a few specific situations.

The **Problem Duration** scale measures the length of time that anger has been a problem for the youth, as noticed by the respondent or by her family and friends. Ratings on this scale yielded a T-score of 75 (90% CI = 71–79), falling within the Very Elevated score range. The youth is likely to have had a problem experiencing or expressing anger for a considerable period of time. The duration of her anger difficulties suggests a significant clinical problem and a potential disorder.

The **Episode Duration** scale measures the average length of time that the youth's anger episodes last. Ratings on this scale yielded a T-score of 71 (90% CI = 63–79), falling within the Very Elevated score range. When the youth becomes angry, her anger is likely to last for hours or days. The long duration of her anger episodes is likely to interfere with her concentration, focus, and interpersonal relationships.

## Intervention Suggestions

This section provides intervention suggestions for all elevated (i.e., T-scores  $\geq 60$ ) ARES scores. Many children and adolescents who experience anger difficulties have very little motivation to change their behavior. They tend to blame others, justify and normalize their experiences, show a lack of awareness for the damage that their anger causes to relationships, and fail to take responsibility for their reactions. Thus, it is often appropriate to begin treatment interventions by exploring the youth's motivation for change, but continual monitoring of this motivation throughout treatment is recommended. The initial treatment stages best focus on assessing the desire for change and on motivational enhancement strategies. For a detailed discussion of these strategies, consult DiGiuseppe and Tafrate's 2007 text, *Understanding Anger Disorders*.

Note: In order to provide precise intervention suggestions, whenever subscales are available, interventions are provided at the subscale (rather than at the scale) level.

### Total Score and Cluster Scores

Based on elevations on the **Total Score**, Jennifer Smith's ARES test results may indicate the presence of an anger problem. A review of the intervention suggestions provided below will help identify specific treatment strategies.

Based on the Very Elevated **Externalizing Anger Cluster** score, it appears as though Jennifer Smith outwardly expresses anger. The expression of aggressive behaviors, as well as aversive verbal behaviors, is often influenced by environmental factors. It is recommended that a complete functional behavioral assessment be performed on any aggression and negative verbal expressive patterns displayed by Jennifer Smith to explore the discriminative stimuli and rewards that may affect these behaviors. This assessment should be done for her aggressive behaviors at home and in school. A plan that addresses the findings of this behavioral assessment will enhance the individual counseling and therapy recommendations.

Based on the Very Elevated **Extent of Anger Cluster** score, it appears that Jennifer Smith's anger reactions have been problematic for a considerable amount of time and are likely to interfere with her functioning across several life areas. An analysis of specific episodes of anger that occur over the course of at least 1 week is recommended to pinpoint situations where her anger is likely to emerge. In addition, an exploration about when Jennifer Smith notices that her anger started to become a problem would increase the awareness and motivation for change.

### Internalizing Anger Scales and Subscales

Based on the Slightly Elevated **Physiological Arousal** subscale score, intervention strategies include: self-monitoring to create an awareness of her anger symptoms and sensations, as well as the events that trigger them; relaxation training and biofeedback are also suggested strategies.

Based on the Very Elevated **Cognitive Arousal** subscale score, intervention options include relaxation training, cognitive defusion, acceptance, and mindfulness exercises that encourage the youth to release (and not harbor) angry thoughts.

Based on the Slightly Elevated **Suspiciousness** subscale score, possible intervention strategies include: cognitive restructuring aimed at changing the youth's hostility toward people at whom she is angry, as well as perspective taking.

### Externalizing Anger Scales and Subscales

Based on the Very Elevated **Physical Aggression** subscale score, possible intervention strategies include: increasing awareness of the link between angry feelings and aggressive behavior; exploring thoughts and evaluations about the perceived transgression that justifies the physical aggression; cognitive restructuring aimed at the thoughts related to physical aggression; Socratically eliciting the youth's arguments for reducing aggressive behaviors in the future; highlighting the negative outcomes associated with aggressive behaviors; exploring the values associated with each of the outcomes connected with aggression; instituting contingency management that increases non-aggressive behavior in settings that typically encourage aggressive behaviors; social skills and assertiveness training that focus on replacing aggressive behaviors with more appropriate assertive behaviors; and imaginal or in-vivo exposure practice to reduce reactivity to anger triggers and to reinforce non-aggressive responding.



Based on the Very Elevated **Verbal Expression** subscale score, intervention options include: investigating the link between anger and verbal outbursts; encouraging open discussion with the youth about reducing such behaviors in the future; exploring thoughts about the perceived transgression that justifies the inappropriate verbal reactions and cognitive restructuring aimed at such thoughts; highlighting the long-term destructive outcomes associated with negative verbalizations during anger episodes; social skills and assertiveness training that focus on replacing aversive and negative verbalizations with appropriate assertive responses and imaginal or in-vivo exposure practice to reduce the youth's negative reaction to anger triggers and reinforce more effective verbal responding.

Based on the Very Elevated **Covert Aggression** scale score, suggestions for intervention include: exploring the link between anger and covert aggressive behaviors; open discussion with the youth about reducing such behaviors in the future; investigating the values associated with each of the outcomes connected with destructive responses; exploring the youth's reasons for justifying the covert aggressive behaviors and cognitive restructuring aimed at such thoughts; exploring the potential negative outcomes of covert aggression as a social strategy; determining the actual rewards and advantages of the covert aggression; cognitive restructuring that focuses on forgiveness instead of retaliation; and problem solving to develop alternative non-vengeful responses.

Based on the Elevated **Revenge** scale score, possible intervention strategies include: examining the link between anger and the desire for revenge and to perform cognitive restructuring aimed at such thoughts; highlighting the potential negative outcomes of seeking revenge as a social strategy; cognitive restructuring that centers around forgiveness instead of retaliation; and problem solving to develop a range of alternative non-vengeful responses.

Based on the Very Elevated **Relational Aggression** subscale score, intervention suggestions include: exploring the connection between anger and the urge for relational aggression; determining the values associated with each of the outcomes related to aggressive behaviors; investigating the actual rewards and advantages of relational aggression; cognitive restructuring that focuses on learning to accept others' negative behaviors; cognitive restructuring that centers around forgiveness instead of retaliation; and problem solving to develop alternative non-vengeful responses.

Based on the Elevated **Passive Aggression** subscale score, possible intervention options include: examining the link between anger and the desire to be uncooperative with others; encouraging open communication with the youth about reducing passive-aggressive behaviors in the future; exploring the youth's reasons for justifying the passive aggressive behaviors and using cognitive restructuring aimed at overcoming these thoughts; determining the potential negative outcomes of passive aggression as a social strategy; cognitive restructuring that focuses on learning to accept others' negative behaviors; problem solving to develop a range of alternative responses; and social skills and assertiveness training to develop more effective expression of feelings.

Based on the Very Elevated **Bullying** scale score, a variety of intervention strategies include: determining the consequences of coercing and controlling others; examining the reinforcing value of dominating/coercing others that might result in an immediate reward or an increase in one's social status; Socratically eliciting arguments for reducing such behaviors in the future; exploring the consequences and potential long-term negative outcomes of coercing others; problem solving to generate alternative strategies that do not rely on anger outbursts or hostility to elicit cooperation from others; and developing social support networks in the school, home, or neighborhood that encourage cooperative behavior and eschew bullying.

### **Extent of Anger Scales**

Based on the Very Elevated **Problem Duration** scale score, possible intervention strategies include: providing feedback on the ARES results to highlight where the youth stands in comparison to other youth of the same age; and motivational interviewing or other motivational enhancement strategies to increase awareness of the extent of the youth's problematic anger reactions and to increase motivation for change.

Based on the Very Elevated **Episode Duration** scale score, possible intervention strategies include: self-monitoring of anger episodes and experiences to measure the length of anger experiences; relaxation interventions; and cognitive defusion exercises, or mindfulness exercises to help the youth move on from anger and engage in positive or reinforcing behaviors.

## Item Responses

Jennifer Smith marked the following responses for items on the ARES.

Item	Rating	Item	Rating	Item	Rating
1.	1	27.	2	53.	2
2.	4	28.	4	54.	2
3.	3	29.	2	55.	5
4.	4	30.	4	56.	1
5.	3	31.	1	57.	4
6.	3	32.	3	58.	3
7.	4	33.	2	59.	3
8.	4	34.	4	60.	2
9.	3	35.	2	61.	3
10.	3	36.	4	62.	3
11.	3	37.	2	63.	3
12.	2	38.	3	64.	3
13.	3	39.	2	65.	3
14.	2	40.	2	66.	4
15.	3	41.	3	67.	4
16.	3	42.	3	68.	4
17.	3	43.	3	69.	4
18.	3	44.	4	70.	5
19.	3	45.	1	71.	5
20.	3	46.	3	72.	5
21.	3	47.	2	73.	4
22.	3	48.	3	74.	4
23.	3	49.	3	75.	5
24.	3	50.	3		
25.	2	51.	3		
26.	4	52.	3		

**Response Key:**

**Items 1 through 23:** 1 = Never; 2 = Hardly ever; 3 = Sometimes; 4 = Often; 5 = Always

**Items 24 through 57:** 1 = Never or hardly ever; 2 = About once a month; 3 = About once a week; 4 = About several days a week; 5 = Almost every day

**Items 58 through 61:** 1 = Almost nothing; 2 = Only one thing; 3 = Several things; 4 = Many things; 5 = Almost everything

**Items 62 through 65:** 1 = Never; 2 = Once in my life; 3 = A few times in my life; 4 = Several times in my life; 5 = Many times in my life

**Items 66 through 72:** 1 = A week or less, or not at all; 2 = A month or less; 3 = About 3 months; 4 = About 6 months; 5 = A year or more

**Items 73 through 75:** 1 = Only a few minutes; 2 = A few hours; 3 = All day; 4 = Several days; 5 = About a week; 6 = About 2 or 3 weeks; 7 = A month or more

**All Items:** ? = Omitted item.

## Anger Regulation and Expression Scale Feedback Handout for Self-Report Ratings

**Youth's Name/ID:** Jennifer Smith  
**Youth's Age:** 16 years  
**Date of Assessment:** September 27, 2010  
**Assessor's Name:** ML

***This feedback report explains scores from this youth's ratings of his/her behaviors as assessed by the Anger Regulation and Expression Scale (ARES). This section of the report may be given to parents (caregivers) or to a third party upon parental consent.***

### **What is the ARES?**

The ARES is a set of rating scales that is used to gather information about the frequency, intensity, and duration of anger, expression, and aggression problems that a child or adolescent may be having. The ARES forms were developed by Drs. DiGiuseppe and Tafra, experts in the assessment of anger. Research has shown that the ARES scales are reliable and valid, which means that you can trust the scores that are produced by the youth's ratings.

### **Why do children and adolescents complete the ARES?**

Information from the child or adolescent about his or her own thoughts, feelings, and behaviors is extremely important, as the youth is more aware of his/her feelings than anyone else. Self-reports provide invaluable information about the youth's own perceptions, feelings, and attitudes about his or her behavior that parents and teachers may not know or be able to observe.

The most common reason for using the ARES scales is to better understand a child or adolescent who is having difficulty. This understanding is crucial for identifying problematic patterns and developing a plan to help the youth. The ARES scales can help ensure that treatment plans are specifically targeted at a youth's anger problems, or to see if the interventions are leading to improvement. The ARES scales are also commonly used for a routine check, even if there is no reason to suspect the youth is struggling with a problem. If you are not sure why the youth was asked to complete the ARES, please ask the assessor listed at the top of this feedback form.

### **How does the ARES work?**

Jennifer Smith read 75 items, and indicated how well each statement described herself, or how often each behavior occurred in the past. Her responses to these 75 statements were combined into several groups of items. Each group of items describes a certain type of behavior or attitude (for example, physical aggression, or resentment). Jennifer Smith's responses were compared with those expected for girls similar in age. The scores for each group of items indicate how similar she is to her peers. This information helps the assessor know if she is having more difficulty in a certain area than other youth similar in age and gender.

### **Results from the ARES**

The assessor who asked Jennifer Smith to complete the ARES will help explain these results and answer any questions you might have about the ARES or her answers. The self-report ratings will let the assessor know about some of the ways Jennifer Smith acts at home, in school, and in the community. Results from the ARES should be combined with other important information, such as interviews with the parent, teacher, Jennifer Smith, other test results, and observations of Jennifer Smith. All of this information should be used in combination to create a more complete picture to determine if Jennifer Smith needs help in a certain area, and what kind of help is needed.

As you go through the results, it is helpful to share any additional insights or information that you might have, make notes, and freely discuss the results with the assessor. If the scores do not make sense to you, you should let the assessor know so that you can discuss other possible explanations.

The following section lists the areas that may be a problem for Jennifer Smith. These bullet points provide short descriptions of the types of difficulties that are included in each problematic area. Jennifer Smith may not show all of the problems in an area; she may show only some of the problems.

## Internalizing Anger

The Internalizing Anger Cluster scale represents the degree to which the youth experiences anger internally and does not show it to others. According to results from the ARES, Jennifer Smith may be having the following problems with internalizing anger:

- When she gets angry, she may feel significant physical sensations such as rapid breathing, shaking hands, racing heart rate, or tight muscles.
- When she gets angry, she may experience racing thoughts about the events that triggered her anger. She may have difficulty paying attention in situations without angry thoughts distracting her.
- She may feel suspicious that some people will purposefully be mean to her. She may have difficulty trusting others.

## Externalizing Anger

The Externalizing Anger Cluster scale represents the outward expression of anger. According to results from the ARES, Jennifer Smith may be having the following problems with externalizing anger:

- When angry, she may express her anger with physical aggression toward objects or people. She may throw objects or bang doors or walls. She may push, shove, or hit people.
- She is likely to express her anger verbally. She may insult others, make threats, or engage in loud arguments. She may make insulting or sarcastic comments.
- She is likely to express her anger by secretly damaging the property of the people she is angry at. She may find sneaky ways to get back at others.
- She is likely to want to seek revenge on people when she is angry.
- She is likely to say bad things about the people at whom she is angry, and may even resort to lying or making up stories about them.
- She is likely to express her anger by not cooperating with others, or by not doing what is expected of her.
- When angry, she may feel the desire to bully and coerce others to get what she wants.

## Extent of Anger

The Extent of Anger Cluster scale represents the scope and breadth of Jennifer Smith's anger. According to results from the ARES, Jennifer Smith may be having the following problems with the extent of her anger:

- She is likely to have had a problem experiencing or expressing anger for a considerable amount of time.
- When she becomes angry, her anger will often last for hours or days.