

ANGER AND RAGE ADDICTION & THE SELF-PACT

New Lights on an Old Nemesis

The out-workings of anger and rage addiction are corrosive and toxic, cumulative and cyclical. They are characterized by the phenomenon of “triggering” (a neurological process that is faster than rational thought and conscious vigilance can track), conscious motive (which makes the surfacing of anger and rage seem plausibly rational and justifiable), efficacy (transitory: the immediate consequence of a triggered episode often appearing to achieve, at least briefly, conscious intention), consequences (in which the pushback—either active or passive—of affected parties gives rise to shame, guilt and remorse: the implosion of self-esteem), fervid attempts to undo the damage (all of which are part and parcel of *reloading* in preparation for the next triggered unleashing), and then the eruption of the next triggering episode ... and on and on it goes.

None of this is new behavior. Anger and rage are stitched into the fabric of every human being on earth, arising first as a neurological discharge in the life of an infant—a response to acute or unmet needs of early life, along with a shedding by the body of excessive, “stacked” energy and sensory stimulation—and building on these origins throughout toddler-hood and early childhood. In abusive households, rage and tantrums may even be a first

attempt—primitive though it is—to establish a self-other boundary: to erect, and enforce, a “No Trespass!” zone regarding abuses and torments, and those who inflict them.

In later childhood, adolescence and on into adulthood, self-righteous indignation and lust for vindictive triumph are often a part of conscious mindset in and around the phenomenon of triggering, inseparable from the need to experience oneself as possessing, and asserting, personhood amidst the perceived absence of outer-world respect and validation. Curiously, there are often, in hindsight, varying degrees of amnesia in the picture if someone who has unleashed is asked, subsequently, to recall events or provocations leading up to the moment of triggering, along with the events immediately following.

In the world of psychology, anger and rage that reach levels of manifestation considered pathological are categorized as “disorders” (impulse disorders, etc.). The range of “treatments” the professionals have brought to the table from the world of mainstream psychology, as served up by mental health practitioners, have largely been aimed at awareness-building combined with behavioral modification stratagems in which “triggering” is the enemy, and all efforts are to be exerted to keep triggering

from happening.¹ As well intended as such approaches may be, they have, on balance, fallen short due to an underestimation of the dynamics of what they are attempting to influence—the basic neurological reality of triggering itself (to be set forth presently).
