

Directed Anger Inventory (DAI-16)

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Please indicate the person or people who would still make you angry if they were standing in front of you and you looked into their eyes. Note: This may include people who have already passed away, or people you no longer see.

- 0 Partner
- 0 Ex-partner
- 0 Father
- 0 Mother
- 0 Step-parent
- 0 (Step) Brother of sister
- 0 Other relative
- 0 (Former) Friend
- 0 (Former) Teacher
- 0 (Former) Classmate
- 0 (Former) Employer or colleague
- 0 Employee or the management of an organization
- 0 Other (please specify) _____
- 0 Other (please specify) _____
- 0 Other (please specify) _____

When marking the following statements, choose one person, preferably the one who causes you the most anger.

Please name this person: _____

Please circle the answers according to your feelings towards this person. There are no right or wrong answers. If you have chosen someone you no longer see, imagine what would happen if he or she were standing in front of you and you looked directly into his or her eyes.

1 = not at all
 2 = a little
 3 = moderately
 4 = rather a lot
 5 = very much

not at all - very much

- | | | | | | | |
|---|--|---|---|---|---|---|
| 1 | He/she prevented me from doing things that were important to me. | 1 | 2 | 3 | 4 | 5 |
| 2 | I cannot stop worrying about the reasons he/she did this to me. | 1 | 2 | 3 | 4 | 5 |
| 3 | I would love to make the same thing happen to him/her. | 1 | 2 | 3 | 4 | 5 |
| 4 | My body becomes extremely tense when he/she is in my mind. | 1 | 2 | 3 | 4 | 5 |
| 5 | He/she treated me unjustly. | 1 | 2 | 3 | 4 | 5 |
| 6 | I keep thinking about all the times he/she made me so angry. | 1 | 2 | 3 | 4 | 5 |
| 7 | I fantasize about the ways I could teach him/her a lesson. | 1 | 2 | 3 | 4 | 5 |
| 8 | I feel humiliated and degraded by him/her. | 1 | 2 | 3 | 4 | 5 |

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not at all - *very much*

- | | | | | | | |
|----|--|---|---|---|---|---|
| 09 | I can't stop thinking of what he/she did to me. | 1 | 2 | 3 | 4 | 5 |
| 10 | If we stood face to face, I would start shaking or sweating. | 1 | 2 | 3 | 4 | 5 |
| 11 | It would give me pleasure to see him/her being afraid of me. | 1 | 2 | 3 | 4 | 5 |
| 12 | I keep wondering why he/she did this to me. | 1 | 2 | 3 | 4 | 5 |
| 13 | I feel that he/she caused me serious harm. | 1 | 2 | 3 | 4 | 5 |
| 14 | I keep thinking that he/she is only one of many people who have hurt me. | 1 | 2 | 3 | 4 | 5 |
| 15 | My heart beats faster when he/she is in my mind. | 1 | 2 | 3 | 4 | 5 |
| 16 | I would badly like to make him/her pay for this. | 1 | 2 | 3 | 4 | 5 |

Name :

Gender :

Date of Birth :

Education :
(primary school, secondary education, higher education)

Profession :

Marital status :

Date :

Taken on request of institution/private practice:

Thank you for filling in this inventory!

(to be filled in by counselor, therapist)

Scale	Harm items 1+5+8+13	Arousal Items 4+10+15	Rumination Items 2+6+9+12+14	Revenge Fantasies/urges Items 3+7+11+16	Total score
Sum					=
Minimum score	4	3	5	4	16
Maximum score	20	15	25	20	80