

Aggression Control Therapy for Violent Forensic Psychiatric Patients

Method and Clinical Practice

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Aggression control therapy is based on Goldstein, Gibbs, and Glick's aggression replacement training and was developed for violent forensic psychiatric in- and outpatients (adolescents and adults) with a (oppositional-defiant) conduct disorder or an antisocial personality disorder. First, the conditions for promoting "treatment integrity" are examined. Then, target groups, framework, and procedure are described in detail, followed by the most important clinical findings during the period 2002 to 2006. Finally, new programme developments are mentioned, with aggression control therapy as a starting point.

Keywords: *aggression; cognitive-behavioral programme; treatment integrity*

Because there was no treatment programme for Dutch violent forensic psychiatric patients, a start was made with the development of the aggression control therapy in 2000 (Hornsveld, 2004a). The therapy was founded on the aggression replacement training (ART) of Goldstein, Glick, and Gibbs (1998). In the Netherlands, forensic psychiatric patients are offenders for whom, based on examination by a psychiatrist and/or a psychologist, a judge has established a connection between a "deficient mental development or mental disorder" and a committed offence. The aggression control therapy was initially meant for adult inpatients "detained under hospital order," but after some time it was also applied to violent adolescent and adult outpatients.

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