Agressie Regulatie op Maat (Individualized Aggression Regulation Training, “AR op Maat”) is a behavioral intervention aimed to improve aggression regulation of 16 to 21 year-old youths in a residential treatment setting for severely aggressive behavior problems. The specific contents of each training are adapted to the individual needs of each client. The present study originally aimed to evaluate the implementation process of AR op Maat with youths placed in juvenile detention as part of a judicial sentence. However, while preparing the study, it became clear that only six youths were participating in AR op Maat in the Netherlands at that time. Due to imminent closing of their treatment facility, even these six youth would likely not complete the intervention. Because of this, it was not possible to carry out the original study.

The minimal participation in AR op Maat did raise the question why so few youths participated. This issue was studied by means of interviews with trainers and managers of the facilities participating in AR op Maat. Interviews were conducted in the first semester of 2010.

That AR op Maat was hardly implemented seems partly due to low influx of youths in the facilities and unclarity about the place of AR op Maat in the further trajectories of these youths. Unclarity about roles and responsibilities for AR op Maat among staff, unclarity about overlap with other treatment modalities in the primary method of the facilities (‘basismethodiek’), and unclarity about continuity in treatment after detention also play a part.

Participation in AR op Maat and implementation quality are currently too low to meaningfully study effectiveness of the intervention. An increase in participation may be attained through more systematic screening of all youths upon intake in the facilities. Inclusion of youths who will only start AR op Maat in detention and complete it elsewhere would also increase participation. However, participation will always be dependent on the number of youths being convicted, which is highly unpredictable.

Implementation of AR op Maat may improve by shortening and structuring the manuals, clear integration with other methods (specifically the ‘basismethodiek’), more intensive supervision and intervision for trainers, certification of trainers through a strict monitoring system for intake and session contents (using the materials provided in Appendix B of this report), and clear choices about the place of AR op Maat in the methods used to treat aggressive behavior problems in these youths.