

Programmes for minors (ART)



Type of intervention



Classroom Setting



Group Work



Games

Target group/s, level/s of prevention and sub-group/s:

Secondary Prevention

(Potential)
Offenders

(Potential) Offenders | Young People |(12-20 years) | Male & Female | Group Setting | Swedish

(Potential)
Offenders

Tertiary Prevention

Offenders | Young People |(12-20 years) | Male & Female | Group Setting | Swedish

Target population

The ART (Aggression Replacement Training) intervention is aimed at adolescents 12–20 years with significant deficiencies in social skills, ability to control anger and moral reasoning. It is now also aimed at aggressive and norm-breaking young people. The method was originally developed at an institution for boys convicted of violent crimes.

Delivery organisation

The initiative was developed by American psychologists during the 1980s and was introduced in Sweden during the late 1990s. It is delivered by 'Socialstyrelsen': a government agency called 'The National Board of Health and Welfare' operating under the Ministry of Health and Social Affairs. It operates a wide range of activities and many different duties within the fields of social services, health and medical services, patient safety and epidemiology.

Mode and context of delivery

ART, Aggression Replacement Training, is a manual-based prevention program delivered as a weekly series of group lessons. It can be delivered residentially or delivered as an outpatient intervention. The initiative is carried out by two specially trained ART trainers in small groups of a maximum of 6-8 young people. It contains a behavioural component

(social skills training), an emotional component (anger management training) and a value component (training in moral reasoning).

Level/Nature of staff expertise required

There are no formal requirements for undergraduate education to be trained in ART. Several companies in Sweden train ART trainers and "Master trainers", ie people who are allowed to train others as coaches. The educations vary in length and content. Since the method developer Goldstein died, colleague Barry Glick has applied for and received the trademark ART registered in the USA. In Sweden, the Youth Alternative / UngART in Malmö, together with Glick and partners in the Netherlands, had ART registered as a trademark in the EU in 2010. However, this has had little significance for current practice in Sweden.

Intensity/extent of engagement with target group(s)

Three group lessons are taught per week - one for each component - for ten weeks. Each group contains 6-8 participants and is taught by two practitioners. Young people are taught good behavioural examples, followed by role-playing games, and receive structured feedback.

Description of intervention

The ART method is based on social learning theory and cognitive behavioral therapy. It is also based on research on stress prevention and anger management, as well as Kohlberg's theory of moral development. The initiative is carried out by two specially trained ART trainers in small groups of a maximum of 6-8 young people. It contains a behavioural component (social skills training), an emotional component (anger management training) and a value component (training in moral reasoning).

The social skills training means that the young people first get to see examples of good social skills (modelling). Then they practice the skills in role-playing games themselves under encouragement and receive repeated instruction and feedback on how things are going. They are then encouraged to participate in activities where they can continue to practice their new skills to increase the chance that they will become permanent (transfer training).

In total, teaching includes about fifty social skills that will replace the aggressive behaviours. Anger control training should increase young people's ability to self-control and teach them to reduce and manage their anger. Here they learn to identify the situations that usually lead to aggressive outbursts, to recognize signs that such a situation is on the way, and different techniques for dealing with anger. In moral training, various moral dilemmas are presented and discussed. In this way, young people must be trained to be able to make mature decisions in social situations, such as the importance of keeping promises, telling the truth, and helping others.

Evaluation

ART is included in SBU's overview [Efforts in outpatient care to prevent young people from relapse into crime](#) (12–17 years). The purpose of the overview was to examine the scientific basis for various initiatives for the target group. The results of the survey show that it is not possible to determine which specific psychosocial outpatient care interventions are more effective than those with which they have been compared in terms of recidivism in the following years (average two years). SBU's practice survey shows that Swedish social services and child and adolescent psychiatry

use a large number of outpatient care interventions for young people who have committed crimes. Many of the efforts lack a manual and have not been evaluated in terms of preventing new crimes. Even if there is a lack of scientific knowledge about the effects that various specific psychosocial outpatient care interventions can have on young people's recidivism, this does not mean that the social services and child and adolescent psychiatry should automatically stop using them. It can also be considered ethically problematic to refrain from efforts that could theoretically prevent crime, and which are perceived to work well by businesses and clients. There is nothing in the studies to suggest that the evaluated efforts would be harmful, for example to increase crime.

A systematic review from 2016 identified 16 studies with varying quality regarding method and outcome. The scientific basis is insufficient to be able to make an assessment of the effects of the intervention.

[Aggression replacement training \(ART\) for reducing antisocial behavior in adolescents and adults: A systematic review](#)

A licentiate dissertation from 2017 contains two surveys of how and to what extent ART was used in the social services' outpatient care in Sweden in 2006 and 2012, as well as a description of the target group that receives the ART intervention in outpatient care.

[Aggression Replacement Training \(ART\) in Sweden - dissemination, program fidelity, target group and evaluation \(Report in social work, Stockholm University\)](#)

The Swedish Agency for Medical and Social Evaluation (SBU) has identified a scientific knowledge gap regarding ART for children placed in foster care, young people with antisocial problems in institutions and children and young people with ADHD:

[Scientific knowledge gaps within ART \(Shows search results list at SBU\)](#)

References

Goldstein, AP, Glick, B., & Gibbs, JC. (1998). Aggression Replacement Training. A comprehensive intervention for aggressive youth. Revised edition. Champaign Illinois: Research Press.

Kaunitz, C., & Strandberg, A. (2009). Aggression Replacement Training (ART) in Sweden - evidence-based social services in practice? Socionomen's Research Supplement, 26, 36–50.

Brännström, L. Kaunitz, C., Andershed, AK., South, S., Smedslund, G. Aggression replacement training (ART) for reducing antisocial behavior in adolescents and adults: A systematic review. Aggression and Violent Behavior Volume 27, March – April 2016, Pages 30-41. 2016

Kaunitz, C. Aggression Replacement Training (ART) in Sweden - dissemination, program fidelity, target group and evaluation. Department of Social Work Stockholm. Report No. 36. 2017.

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