



## Specialist group therapy for psychological factors associated with firesetting: Evidence of a treatment effect from a non-randomized trial with male prisoners



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### ABSTRACT

Despite huge societal costs associated with firesetting, no standardized therapy has been developed to address this hugely damaging behavior. This study reports the evaluation of the first standardized CBT group designed specifically to target deliberate firesetting in male prisoners (the Firesetting Intervention Programme for Prisoners; FIPP). Fifty-four male prisoners who had set a deliberate fire were referred for FIPP treatment by their prison establishment and psychologically assessed at baseline, immediately post treatment, and three-months post treatment. Prisoners who were treatment eligible yet resided at prison establishments not identified for FIPP treatment were recruited as Treatment as Usual controls and tested at equivalent time-points. Results showed that FIPP participants improved on one of three primary outcomes (i.e., problematic fire interest and associations with fire), and made some improvement on secondary outcomes (i.e., attitudes towards violence and antisocial attitudes) post treatment relative to controls. Most notable gains were made on the primary outcome of fire interest and associations with fire and individuals who gained in this area tended to self-report more serious firesetting behavior. FIPP participants maintained all key improvements at three-month follow up. These outcomes suggest that specialist CBT should be targeted at those holding the most serious firesetting history.

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Deliberate firesetting is a societal problem of vast proportions. Latest available statistics show that between 2007 and 2011, US fire departments received annual reports of approximately 282,600 deliberate fires which were responsible for 1360 casualties, 420 deaths, and \$1.3 billion USD costs in property damage (Campbell, 2014). These latter property costs represent only a small amount of those incurred since they do not include some of the wider costs associated with firesetting (firefighting, or health costs or costs associated with wildfire damage). In the UK, there were 53,000 deliberately set fires and 451 fire-related deaths in 2008 (Department of Communities and Local Government, 2010) with estimated costs to the total economy in 2004 of £2.53 billion (Office of the Deputy Prime Minister, 2006). In Australia there is no

centralized database documenting recorded incidents of deliberate firesetting. However, Rowlings (2008) has estimated that total costs associated with reports of arson in Australia in 2005 are in the region of \$1.62 billion AUD. Yet despite the huge human and economic costs associated with deliberate firesetting, no standardized therapy programs are available for individuals who present with this hugely destructive behavior. Compared with other offending behaviors such as sexual offending and violence, empirical research examining deliberate firesetting is embryonic. To date, there are no established assessments available for assessing risk of deliberate firesetting and no convincing evidence of 'What Works' to reduce deliberate firesetting behavior (Fritzon, Doley, & Clark, 2013; Gannon & Pina, 2010; Palmer, Caulfield, & Hollin, 2007).

Lack of research in this area appears to have stemmed from a long-standing assumption that deliberate firesetters are psychological 'generalists' who do not require specialist assessment or treatment. However, according to the only study to have adequately tested this hypothesis, deliberate male firesetters are

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psychologically unique offenders who—relative to other matched offenders—exhibit higher levels of problematic association with fire (e.g., serious fire interest and identification with fire), anger related cognition, external locus of control, and hold lower levels of general self esteem (Gannon et al., 2013). On the basis of these findings, and those of other contemporary professionals examining allied areas of firesetting specificity (Ducat, McEwan, & Ogloff, 2015), professionals are now recognizing the need to establish assessment and treatment strategies for this neglected group. Fritzon et al. (2013), for example, argue that a more standardized evidence-based approach needs to be taken in devising and implementing treatment with firesetters. Towards this aim, researchers have recently begun to scrutinize how firesetters might best be assessed on fire-related variables (Ó Ciardha et al., 2015) and have developed an empirically informed theoretical framework examining the development and maintenance of firesetting (i.e., the Multi-Trajectory Theory of Adult Firesetting [M-TTAF]; Gannon, Ó Ciardha, Doley, & Alleyne, 2012). The M-TTAF emphasizes the interaction of biological, social-cultural, and contextual factors associated with firesetting and emphasizes the importance of examining inappropriate fire interest and associated cognitions (see Fritzon et al., 2013; Gannon et al., 2012).

Over the past two decades, a small number of cognitive behavioral treatment packages (CBT) have been developed for use with mentally disordered firesetters (Hall, 1995; Swaffer, Haggett, & Oxley, 2001; Taylor, Thorne, Robertson, & Avery, 2002; Taylor, Robertson, Thorne, Belshaw, & Watson, 2006). However, these represent uncontrolled 'in house' therapy conducted with very small numbers of participants. In the largest study available ( $N = 14$ ), Taylor et al. (2002) reported that a 40-session package of group CBT aimed primarily at reducing problematic fire interest and attitudes in patients with a learning disability led to significant improvements on standardized measures of fire interest and attitudes, anger, goal attainment (e.g., understanding of risk), and self esteem. In the absence of any control group, however, the beneficial effect of this group therapy remains largely unclear. To our knowledge, no further firesetting treatment evaluation studies have been published. Furthermore, no treatment evaluation studies in prison settings have ever been reported. The current study aimed to provide the first evaluation of a specialist group therapy trial for male firesetters in a UK prison. The therapy evaluated differs from previous 'in house' therapies since it was designed for implementation in any UK prison, and was associated with a standardized CBT manual and training for all staff.

CBT has been established as most effective for addressing criminal behaviors (Lipsey, Chapman, & Landenberger, 2001). Meta-analyses, in particular, have highlighted the effectiveness of CBT in addressing sexual offending (Lösel & Schumucker, 2005; Walker, McGovern, Poey, & Otis, 2005), as well as generalist offending involving property or violent misdemeanors (Landenberger & Lipsey, 2005; Pearson, Lipton, Cleland, & Yee, 2002; Redondo, Sánchez-Meca, & Garrido, 1999). CBT allows individuals to challenge and restructure thoughts and attitudes associated with their offending, recognize and appropriately respond to the range of triggers associated with their offending, and practice newly developed competencies and skills aimed at promoting a pro-social lifestyle (Milkman & Wanberg, 2007). In addition, CBT allows individuals to engage in behavioral reconditioning designed to decrease problematic behaviorally learnt associations that result in criminal behavior (Jennings & Deming, 2013). Empirical research examining sexual offending shows that the most effective treatments produce changes not only for inappropriate sexual interests and behavior but also for secondary treatment targets such as emotional regulation and social skills training (Hanson et al., 2002).

The specialist group therapy evaluated in the current study—the Firesetting Intervention Programme for Prisoners (FIPP; Gannon, 2013)—was developed from latest theory and empirical research with male firesetters (e.g., Dickens, Sugarman, & Gannon, 2012; Fritzon et al., 2013; Gannon et al., 2012, 2013; Gannon & Pina, 2010). The resulting program consists of 28 weekly 2-hour group sessions as well as a weekly individual support session of up to one hour in length. The FIPP targets four key components empirically associated with firesetting behavior: *Fire-Related Factors*, *Offense-Supportive Cognition*, *Emotional Regulation*, and *Social Competence*. In terms of fire-related factors the FIPP targets problematic interests and associations with fire, teaches fire safety and prevention, and aids clients to develop the skills to understand their own firesetting and how to prevent future firesetting relapse. In terms of offense-supportive cognition, the FIPP aims to cognitively restructure attitudes supporting violence, entitlement, and antisocial behavior. Regarding emotional regulation, clients are encouraged to examine the role of anger arousal, cognition, and provocation tolerance in the lead up to their offending. They are also encouraged to develop effective strategies for regulating anger (e.g., relaxation techniques, cognitive restructuring), in order to improve their perceived self-regulatory control (i.e., a more internalized locus of control). Finally, the FIPP aims to improve social competence through psychoeducation and experiential exercises associated with assertiveness, relationships, and general self esteem. A key focus of the program is to enable clients to become more aware of the factors associated with their firesetting and to support the development of personalized coping skills to deal with similar factors in the future (i.e., within prison or the community). Throughout treatment, clients are requested to complete out-of-group exercises documenting their childhood experiences with fire, current thoughts and feelings about fire, general coping strategies and thought patterns, as well as a written account of the factors leading up to their firesetting offense(s). Clients share written accounts within the group and are encouraged to receive feedback from group members and facilitators to challenge distorted cognitions associated with their firesetting and develop a realistic picture of the factors associated with firesetting behavior. In terms of skill generation, clients are encouraged to practice and document their use of new skills (e.g., coping, assertiveness) within the prison setting. Conditioning principles in the form of covert satiation (i.e., repeatedly pairing a client's fire excitement with more negative and emotionally salient consequences) are also used with clients to reduce problematic affiliation with fire. Finally, fire safety officers visit the program to deliver sessions on fire safety practices.

Previous research with firesetters (Gannon et al., 2013) shows that Fire variables effectively discriminate firesetting and non-firesetting prisoners with the largest effect sizes when compared with non-fire variables. Thus, we conducted our treatment evaluation focusing on Fire variables (i.e., fire interest, attitudes, and affiliation with fire) as the primary outcome. Specifically, we predicted that firesetters attending the specialist FIPP would show significant improvement on these variables at treatment completion which would be maintained at three-month follow up. We predicted that this improvement would not be apparent in firesetters who were simply engaging in treatment as usual (i.e., receiving no treatment targeting their firesetting behavior). We included as secondary outcome measures variables that theory and research indicated were likely to facilitate and maintain firesetting behavior in unison with primary motivators such as Fire variables: *Offense-Supportive Cognition*, *Emotional Regulation*, and *Social Competence*. Again, we predicted that firesetters attending the FIPP would demonstrate significant improvement across these variables which would be maintained at three-month follow up. We

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