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## Arson assessment and treatment: The need for a consistent evidence-based approach

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Recent statistics estimate that there were 324,000 arson offences committed in England and Wales in 2017/2018 <sup>[1]</sup>. Further, in 2018, 1,144 individuals were proceeded against on a charge of arson (either endangering or reckless to endangering life), 770 were found guilty and sentenced, of which 351 (46%) received a custodial sentence and 13 received a hospital order <sup>[2]</sup>. On the 3<sup>rd</sup> July 2019, the Sentencing Council for England and Wales published new formal guidelines for the sentencing of individuals charged with arson offences, to take effect from 1<sup>st</sup> October 2019. These sentencing guidelines emphasise the need of the courts and judiciary to take into account the seriousness of the harm caused by arson and the culpability of the perpetrator, with a particular focus on the role of mental illness and intellectual and developmental disabilities. They also provide definitive starting points for the sentencing of cases where there is recklessness to endanger life versus intent to endanger life. The new sentencing guidelines represent a positive step in recognising the need for clearer guidance around aggravating and mitigating factors associated with acts of arson. However, what options are available for assessing and reducing risk of repeat firesetting post-conviction?

Despite the number of individuals convicted of an offence of arson each year, arson remains one of the poorest understood behaviours, both from a psychiatric and psychological perspective. There is a paucity of evidence regarding risk factors for reoffending and dangerousness. Consequently, there is a distinct lack of specialist assessment and intervention frameworks for professionals to use to assess and treat this highly destructive behaviour.

There are currently no empirically validated risk assessment tools designed specifically to assess risk of reoffending for individuals who have set fires. This presents a serious issue for psychologists and psychiatrists tasked with providing evidence-informed and defensible risk-based decisions, both pre-and-post sentencing. The Firesetting Risk Assessment Tool for Youth (FRAT-Y) <sup>[3]</sup> and the Multi-Trajectory Theory of Adult Firesetting (M-TTAF) <sup>[4]</sup> represent relatively recent developments and provide frameworks which professionals can use to formulate an individual's risk of reoffending with fire and potential dangerousness. However, despite the FRAT-Y and M-TTAF's usefulness for formulating arson offending and risk, their ability to predict reoffending is yet to be tested.

In addition to the lack of validated risk assessment tools, historically there have been few attempts to develop and evaluate specialist treatment programmes to target deliberate firesetting internationally. Interventions in the UK have predominantly been offered by community-based organisations (e.g., the Fire and Rescue Service) and been aimed at children and adolescents, with very few available for adults and young people residing in mental health and custodial settings. In recent years, focus has increased in this area with the development of two psychological treatment programmes specifically aimed at adults who set deliberate fires. *The Firesetting Intervention Programme for Prisoners (FIPP)* <sup>[5]</sup> and *The Firesetting Intervention Programme for Mentally Disordered Offenders (FIP-MO)* <sup>[6]</sup> are

specialist evidence-based interventions developed to address the treatment needs of men and women who have set deliberate fires. Both interventions are subject to ongoing evaluation, however, findings from the initial evaluations suggest that both programmes are effective in reducing the core psychological vulnerabilities associated with firesetting (e.g., fire interest) [7-8]. Although the FIPP and FIP-MO represent advancements in the field for adults convicted of arson offences, there has not been the same progress in establishing evidence-based interventions for young people. Further, despite the development and evaluation of the FIPP and FIP-MO, access and availability of interventions for both adults and young people who set fires across the criminal justice system (e.g., prisons, forensic mental health services, probation, community rehabilitation companies) is both varied and restricted in scope. This poses real difficulties for psychiatrists and psychologists both in terms of effective care and sentence planning, and for evidencing to tribunals and parole boards that fire-specific risk factors have been effectively addressed. Ensuring the availability of effective interventions for arson is particularly pertinent for those who are handed a custodial sentence or hospital order, to ensure that they can move effectively through their sentence plan or care pathway.

To ensure that individuals sentenced for offences of arson are consistently provided with similar assessment and treatment opportunities as those convicted of other offences it is critical that service providers, policy makers, practitioners, and researchers, collaborate to develop evidence-based practice for the assessment and treatment of arson. Further, professionals involved with the criminal justice system have a responsibility to ensure the availability of effective assessment and interventions across services to ensure that arson risk is effectively and consistently evaluated and managed.

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**Conflict of Interest:** NT, TAG and KS are involved in providing training and evaluating the FIPP and FIP-MO programmes. TAG is the developer of the FIPP and FIP-MO programmes.

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