

# Fire setting in people with intellectual and developmental disabilities

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## Fire Setting in IDD

“ Half of those fire setting histories did not have formal arson convictions, highlighting the need for thorough history taking. Prevalent comorbidity suggests interventions should focus on treating psychopathology before commencing offence-specific arson therapy.”

Alexander et al. Jan 2015

## Story of Albert

- Albert is a person with IDD
- Has convictions for arson – the other half
- Clinical characteristics
- Background
- Motives
- Comorbidities
- Journey through CJS
- Journey through hospitals
- Future

## Albert

- 48 years old
- Single
- Male
- Index offence – arson
- 18 years old when convicted
- Serving a life sentence – Tariff 3 years
- Moved from prisons to hospitals

## Albert - Background

- Mother consumed alcohol excessively during pregnancy
- Perinatal depression of the mother
- Has a younger sister
- Developmental milestones delayed
- Difficulties in bonding
- Taken into LA care during first year
- Multiple care homes and fostering
- Placements failed due to aggression
- Suffered physical and sexual abuse in care

## Albert... Background cont.

- Age 6 - Started a special school
- Multiple schools – behaviour problems
- Age 12 – Residential school
- Age 14 – Attacked a teacher with a knife – excluded from school. Transferred to a specialist residential home
- Physically and sexually abused at care placements
- Sister accused Albert of sexual abuse
- No close friends

## Albert - Fires

- Fascinated with fires since 6 years old
- First fire at the age of 6
- Set fires to bins in classrooms
- Enjoyed teachers and other kids running around during fires
- Attempted to set fire to sister's room – because sister falsely accused him of assault
- At 15 – Set a fire in the kitchen while on holiday – no significant damage – not prosecuted
- Most fires were in retaliation

## Albert – Convictions for fires

- Has 2 convictions for arson
- First conviction - At 14 years
  - Set fire to the office of the residential home. ‘I was abused there’ - Transferred to a secure unit for children
- Index offence – Aged 18
- Set fire to accommodation of the Care Home
- ‘I complained of abuse by staff of me and other kids. Nothing was done about it.’



## Albert... Index Offence

- Broke a window during an argument with a staff.
- Made to apologise.
- Set fire to a wardrobe in the night
- Children were evacuated. Not harmed. ' I did not want to harm them.'
- Significant fire damage.
- One fireman was injured.
- Received Life sentence with the tariff of 3 years
- Surprised why he was not supported by other kids. ' I complained of abuse for them'

## Albert ..

- Not diverted during trial or at sentencing
- Difficult prisoner
- Complained of physical and sexual abuse by prisoners
- Frequent angry outbursts – property damage, attempted assaults on staff
- Took part in anger management programme
- Had a spell in a therapeutic community prison – found it very stressful, threatened to commit suicide few times
- Not suitable for offence specific therapy
- Not suitable for parole due to minimising arson and lack of remorse

## Albert...In hospitals

- Transferred to a Adult Mental Health Secure Hospital under s.47 and 49 of the MHA 1983 following a suicide attempt.
- Isolated, angry, irritable and grandiose
- Diagnosis ? Mania. ? Learning disability
- Treated with an antipsychotic
- Not suitable for ASTP due to LD
- Transferred to LD secure hospital

## Albert.. TPTP

- Ten point treatment programme
- Diagnoses
  - Mild LD ( FSIQ 63)
  - ☐ Cause of LD - ?FAS
  - ☐ -Childhood onset Autism
  - ☐ -Non-organic Psychosis
  - ☐ - Borderline Personality Disorder – Emotionally unstable
  - ☐ - No history of alcohol or substance misuse
- Treated with an antipsychotic –Psychosis improved

## Albert... Treatment

- Psychological formulation completed.
- Risk assessments
- ☐ *HCR -20, Forensic START and Specific Assessments for Fire setting*
- Individual and group Psychotherapy
- Offence Specific Therapy
- ☐ *Adapted FSTP* – attended but poor participation, when talked about his fires – justified them, blamed others, no remorse, no victim empathy, variable accounts of his fires
- ☐ - *Not able to make strategies for relapse prevention*

## Albert ... Treatment cont..

- Has structured OT/vocational activity programme
- Has escorted s.17 leave
- No access to fire setting in secure hospitals
- What is his risk of setting further fires in the community?
- Future.....
  - ☐ next step of the pathway
  - ☐ long term outcome of Albert's fire setting