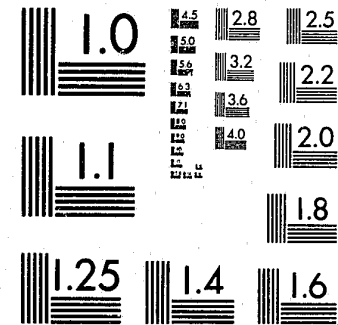


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Interviewing and Counseling Juvenile Firesetters

The Child Under
Seven Years of Age



Interviewing and Counseling Juvenile Firesetters

**THE CHILD UNDER
SEVEN YEARS OF AGE**

**FEDERAL EMERGENCY
MANAGEMENT AGENCY**

**United States Fire Administration
Office of Planning and Education
November 1979**

We wish to express our thanks to the following members of the Fire Services and Arson Prevention Committee, Division I of the California State Psychological Association who are responsible for the content of this manual on Interviewing and Counseling Juvenile Fire-setters.

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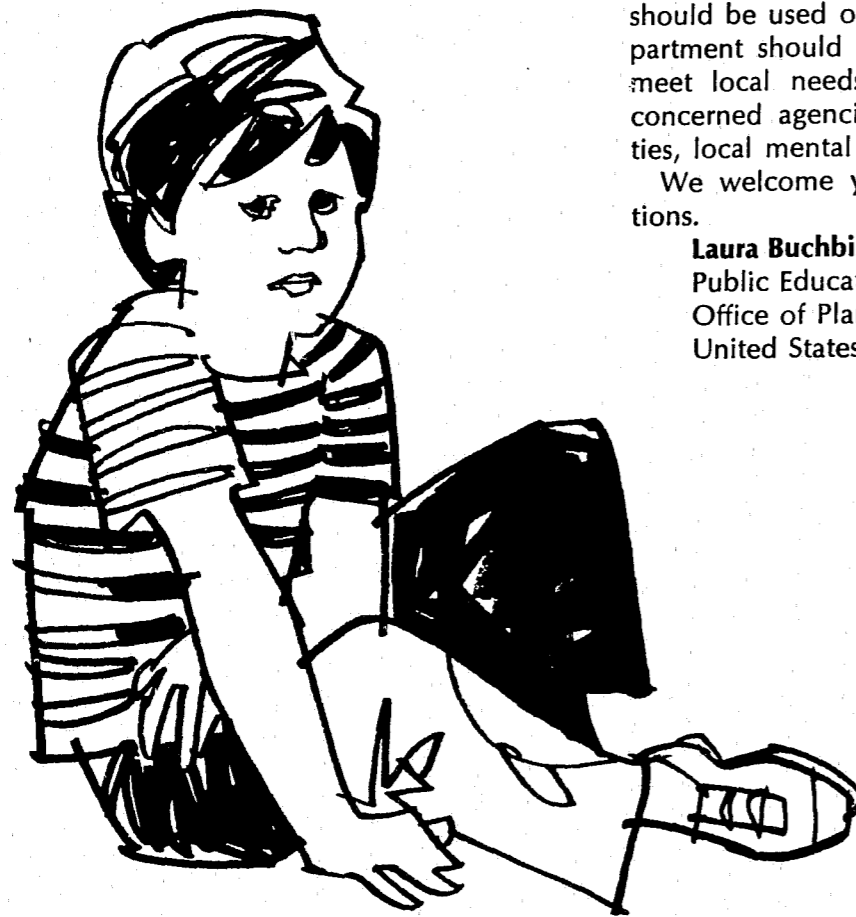
To the Reader

Juvenile firesetting results in significant fire loss in many communities and contributes to our national fire problem. Yet, fire departments have shown that innovative counseling programs can reduce the incidence of fires set by juveniles.

This manual, prepared under USFA Grant #77071 to the Los Angeles County Fire Department, includes suggestions by fire service representatives and psychologists for dealing with the juvenile firesetter. However, this manual should be used only as a guide. Each fire department should modify the material to best meet local needs and should inform other concerned agencies (police, juvenile authorities, local mental health service, etc.).

We welcome your comments and suggestions.

Laura Buchbinder, Manager
Public Education Assistance Program
Office of Planning and Education
United States Fire Administration



INTRODUCTION:

Fire has powerful emotional impact and meaning for most people. Any force so powerful and so destructive can easily be misunderstood and therefore misused.

The fire set by a curious child can cause the same disastrous results as a fire started by a severely disturbed adolescent. Any firesetter must be evaluated and provided with effective intervention to halt the firesetting behavior.

Early identification and treatment of disturbed children can give many of them the opportunity for a normal, untormented life. Early intervention protects the community from a potential menace. Helping curb fires set by juveniles is central to a firefighter's responsibility to the community.

Purpose and Goals

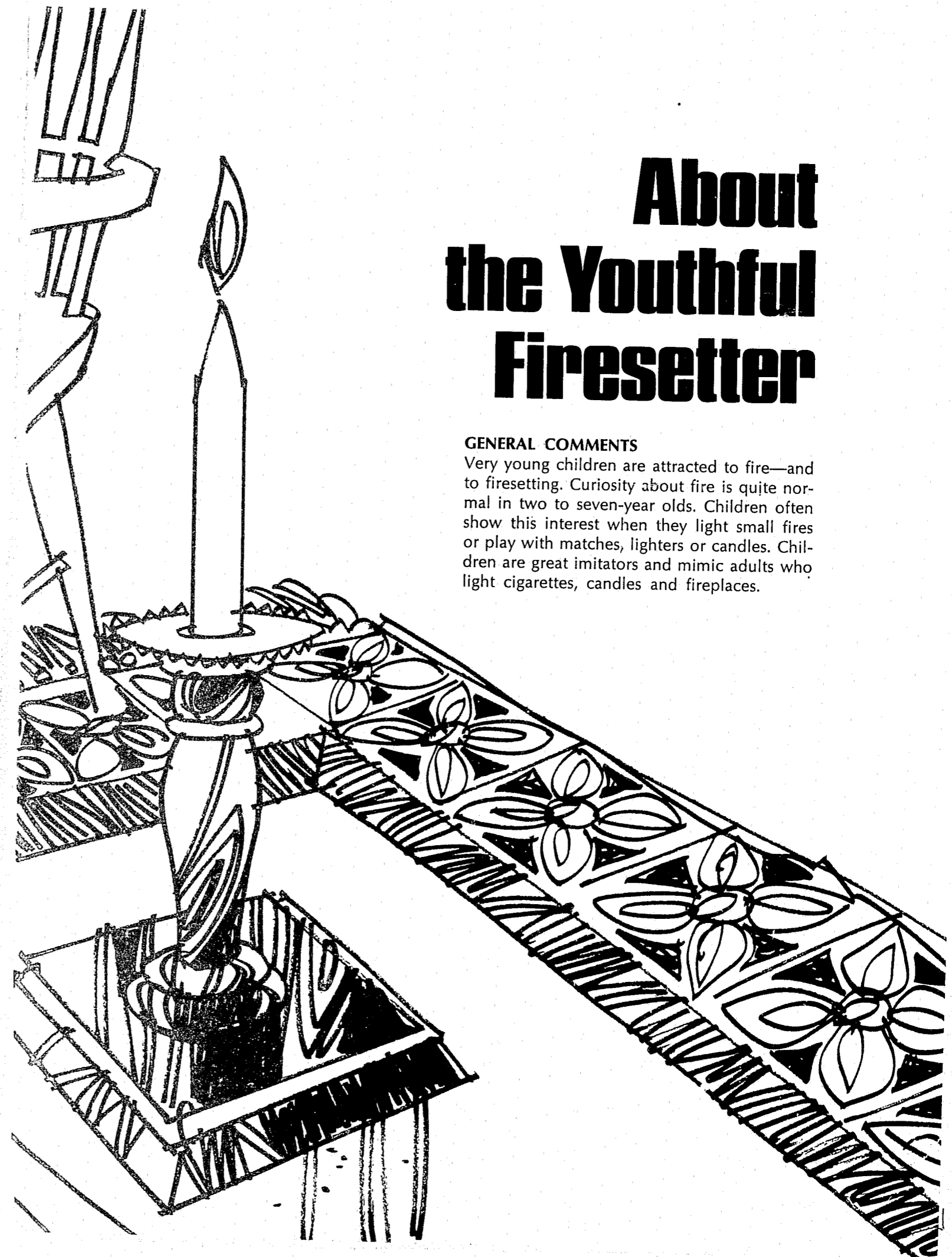
This manual is not an end in itself, nor does it completely discuss every type of firesetting behavior and situation which fire service personnel are likely to encounter when interviewing youthful firesetters or their families. Rather, it is intended to be a guide—an aid—another tool for use by properly trained people to help reduce death, injury and property damage by fire.

Former baseball star Yogi Berra once remarked, "If you don't know where you're going, you won't know when you get there." This manual, then, does not contain discussions of psychological principles and theories, but has been designed to be used—to get the user going with clear goals in mind.

The five primary goals of this manual are:

1. *Teaching fire service personnel to recognize problems in children that may lead to recurrent firesetting.* Early recognition and treatment of firesetting—whether motivated by anxiety, frustration, guilt or dozens of other human conditions—remains the best permanent way to prevent more serious difficulties.

2. *Teaching fire service personnel how to interview firesetting children and their families.* More and more, the roles of fire department personnel are expanding to cope with the many aspects of "fire." These activities include code enforcement, the promulgation of much-needed legislation, and curbing arson. Interviewing juvenile firesetters is among the new duties for many firefighters.
3. *Teaching fire service personnel methods and strategies for educating curiosity firesetters and their families.* Fire service professionals can counsel or educate some firesetting children and families. Short term fire counseling takes the form of educational intervention. Several options for education intervention are suggested in this manual.
4. *Teaching fire department personnel to select children and families for professional mental health assistance based on the severity of their problems.* The fire service's role is not psychological counseling and therapy. However, it is essential that the fire service recognize mental health problems in firesetters and their families and refer these troubled people. A primary purpose of this manual is to teach fire service personnel how to evaluate the severity of firesetting behavior.
5. *Teaching the fire service ways to refer children and families for appropriate mental health assistance.* The referral process is an art in itself. The manual describes how to locate possible resources in the community and suggests effective ways to make such referrals.



About the Youthful Firesetter

GENERAL COMMENTS

Very young children are attracted to fire—and to firesetting. Curiosity about fire is quite normal in two to seven-year olds. Children often show this interest when they light small fires or play with matches, lighters or candles. Children are great imitators and mimic adults who light cigarettes, candles and fireplaces.

Most children under seven do not understand fire's destructive consequences. To them, fire is bright, warm, exciting. Curious firesetters are usually boys and usually do not collect fire-setting tools (lighters, matches, etc.). They set fires fairly close to home. Curious firesetters who see a fire growing beyond their control will often try to extinguish the blaze or run for help.

In contrast to the curious firesetter, other youngsters light fires because of emotional/mental disturbances ranging from mild to severe. These children and their families may need counseling to stop the firesetting behavior.

FIRESETTING BEHAVIOR

There are a number of reasons for firesetting behavior in children. The reason or motivation for the behavior often indicates the type of intervention—education or referral for therapy—which would be most appropriate.

Curiosity firesetting refers to a child experimenting with fire because he is interested in exploring the environment. He wishes to know how fire feels, how it looks, how hot it is, how it burns, what it does. This child can usually be helped by educational intervention by fire service personnel.

Fires may also be started accidentally because of poor judgment. The child who causes a fire by accident can often be helped by educational intervention. However, *accident*

proneness—a continuous pattern of accidents—may indicate a more serious problem and require professional assistance.

Firesetting behavior may also be caused by peer pressure, a situation in which peers bully or coerce the child into firesetting, or may be the result of a major crisis or trauma in the child's life—such as moves, deaths or divorce.

Other types of firesetting reflect more serious emotional/mental disturbances and require the services of mental health professionals.

When to be Concerned about Mood

The child's mood (emotional state) can also indicate the seriousness of the child's firesetting behavior. Mood is usually noticeable and is usually appropriate to a given situation. A child brought into a fire station for a "talk" would be expected to be fearful, possibly anxious or depressed. These moods would be appropriate for the situation. We should be concerned about an overly depressed, anxious or fearful child. Overconfidence and/or happiness in this situation would also be inappropriate and therefore give us cause to be concerned.

The fire interviewer's own intuition can determine the appropriateness of the child's mood. Asking the child and the parents about the child's mood is quite acceptable. Beware of the child who is overly moody or has large and variable mood swings.

When to be Concerned About Thoughts

Normality of a child's thoughts, fantasies and dreams is difficult to determine. Thoughts, fantasies and dreams are not observable and vary greatly. Violent, destructive, sadistic, or masochistic thoughts (when continual or re-occurring) are indications of poor adjustment. Reoccurring thoughts and fantasies may be de-

termined by asking the child his thoughts (e.g., "Do some thoughts or daydreams continually run through your head?") Ask parents if the child is preoccupied about recent dreams or nightmares.

Traits Commonly Found in Children Who Set Fires

Behavioral, environmental or physical difficulties are traits commonly found in the firesetter under seven years old. The following list of traits* may signal a firesetter:

Poor relationship with other children:

- Frequent jealousy
- Frequent breaking of other children's toys
- Frequent fighting
- Refusal to play with other children

Frequently exhibits the following behavior:

- Impulsiveness—acting before thinking
- Showing off
- Stealing
- Running away from home or school
- Cruelty to small children
- Cruelty to animals
- Impatience
- Temper tantrums
- Nightmares
- Enuresis (day or night wetting)
- Extreme mood changes—happy to angry
- Feeding disorders
- Accident proneness

* This information on behavior, environmental and physical traits has been compiled from numerous studies of young firesetters. During the interview with the family and child, this information will help you determine whether the child is a curious firesetter or whether serious problems needing professional mental health attention are involved.

Disrupted parental or home structure:

- Parent(s) divorced, separated or dead
- Lives with relative other than parents
- Lives in a foster home
- Hospitalized for an extended period

Recent change in family structure:

- New baby
- Death of relative
- Parents recently divorced, separated
- New parent partner

Poor apparent relationship between mother and/or father and child:

- Parent(s) seem hostile toward child
- Parent(s) criticize child constantly or indicate how bad, dumb, ugly, or unwanted the child is
- Lack of true parental affection
- Lack of parental attention and supervision

Physically abused by parent(s) or guardian:

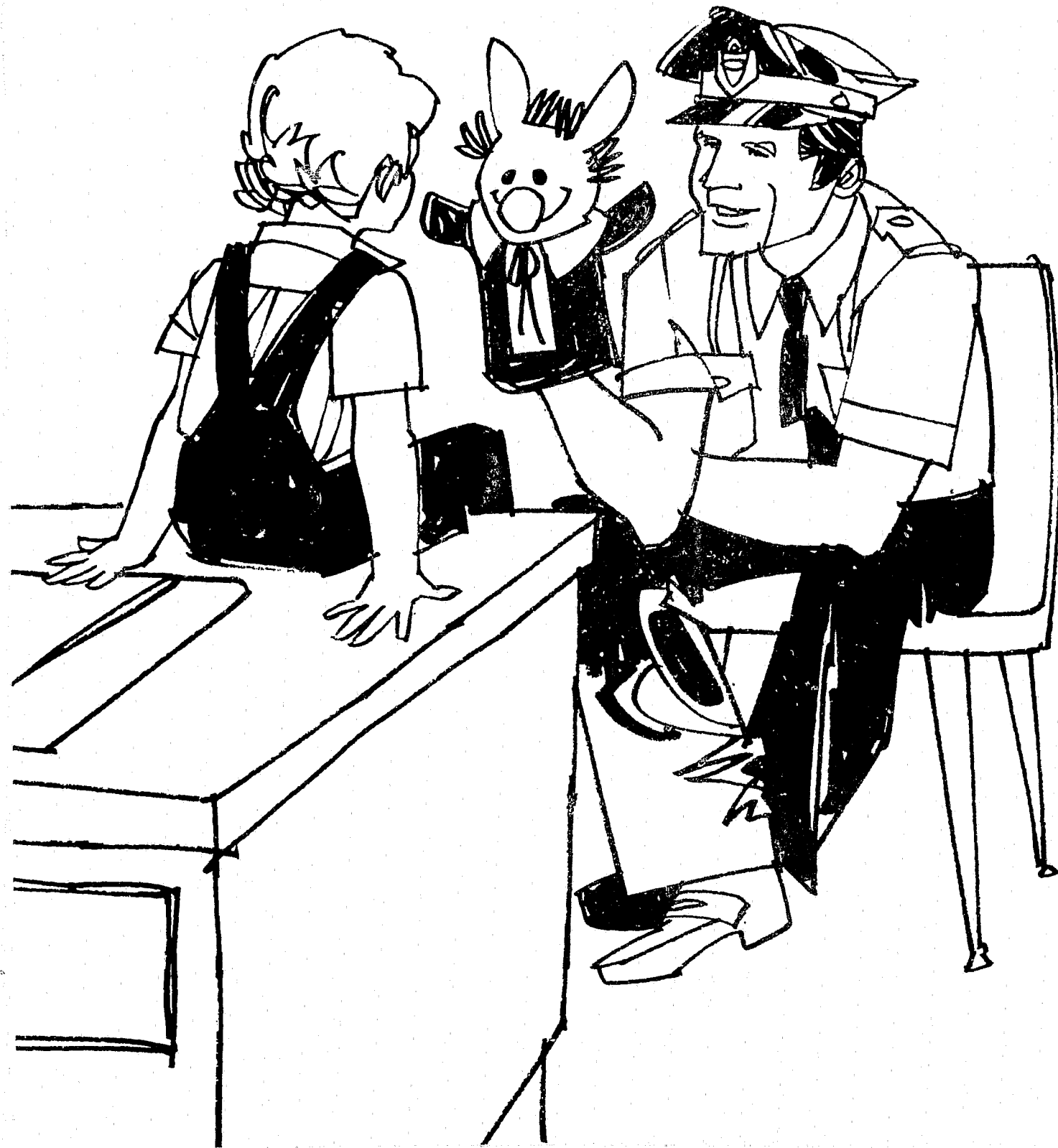
- Beaten
- Burned
- Starved
- Sexually abused
- Unusual punishment such as confinement to a small space, such as a closet

Over-burdened parent

Physical ailment(s):

- Obvious physical defect
- Frequent stomachaches
- Allergies

The Interviews



General Comments

Cooperation and effective communication are important to an interview. Both are essential for getting information for implementing intervention and referral programs. Sample evaluation forms and categorizing sheets are provided with this Manual. These forms can be used when interviewing children and their families.

However, the questions in these forms are models and should not limit your technique, questions, or sequence. As you become a more experienced interviewer, you will develop "gut level" or intuitive feelings about the child and the family. These feelings may be useful and can be tested against your growing experience and knowledge in dealing with the firesetter.

The family, the child's peer group, and the child's response to the school system—as well as the child's personality, thoughts, and behavior—all play an important role in determining your degree of concern for the fire-setting behavior. As such, they are all subject to your scrutiny during the interview.

The School Interview

If the firesetter attends school, the fire interviewer should learn about the child's behavior at school. In some cases, teachers and parents may view the child quite differently.

To conduct a school interview:

1. Contact the principal to explain why you need to interview the child's teacher(s);
2. Interview the teacher(s) using the parent questionnaire form to determine if the child has any learning difficulties, social adjustment problems or other circumstances which may contribute to firesetting.

Interviews With the Child and His Family

The purpose of the interview is to determine the basis for the fire setting behavior, how best to work with the child and to determine if the child and family should be referred for professional therapy.

All interviews should be conducted as soon as possible after the incident has occurred.

The following is a suggested sequence for the interviews:

1. Greet the parents and child
2. Interview the parents alone
 - a. Establish rapport (Activity 1)
 - b. Information gathering (Activity 3)
3. Interview the child alone
 - a. Establish rapport (Activity 1)
 - b. Determine level of understanding (Activity 2)
 - c. Information gathering (Activity 3)
4. Talk with parents or parents and child again

To arrange the interview, phone the parents and schedule an appointment for them and their child. (Some people prefer home interviews. However, most fire service personnel will find the office interview more practical and effective.) Allow for a minimum of one hour for the interview. Try to schedule a time when both father and mother will be available. By having both parents present, the interviewer can develop a picture of family interaction and provide a broader spectrum of information on the child.

Step One: Talk with the Parents and Child

Talking with both the parents and child allows the interviewer to greet them and establish rapport. At this time the fire counselor should also express his concern about the firesetting and state the purpose of the interview. For example, the interviewer may say, "I'm concerned about the fire(s) you have had and want to help you make sure there aren't any more fires because a fire might hurt you. We're going to talk about the fire so we can understand why it happened." Tell the child that you are going to let him play, see a film or read a book on preventing fires while you talk to the parents alone. The interviewer should also tell the child that they will talk alone later. If young or dependent children refuse to be separated from their parents, the interview may be conducted with both parents and child in the room.

Step Two: Interview the Parents

After establishing rapport with the parents and determining their level of understanding (if a language problem exists), the "formal interview" of the parents can take place. Although the tone of the interview remains informal, the interviewer will ask more structured and specific questions based on the Family Interview and Evaluation Form found later in this Manual.

When the parents are asked to step out of the room for the private child interview, they should be given the parent questionnaire to fill in.

Lack of Parental Cooperation

Occasionally, you will meet parents who refuse to discuss their child's problem or are just not available for an interview. These situations indicate that the child may be living in an emotionally deprived environment. Since a young child's immediate environment determines his relationship with others, it is extremely important that this child not be overlooked because his parents do not seem to care.

If you are confronted by resistant parents who do not accompany the child to the interview or who refuse to give information, you may:

1. Explain the importance of the interview and potential danger of firesetting to the parents. Relate some actual instances where children have injured themselves or others or damaged property.
2. Tell the parents that their cooperation may well help the child to avoid trouble with the police.
3. Inform the parents that they could be financially responsible for the child's acts and that civil suits may be filed against them.
4. Inform the parents that they might be held civilly or criminally liable for negligent supervision of the child.

If you are convinced that the child's long-term welfare is at stake and the parents refuse to come to the interview or allow you to enter their home to interview the child, you may:

1. Inform the juvenile authorities
2. Inform the police department
3. Inform local child protective services agency

Step Three: Interview the Child

Effective communications with the very young child are often quite difficult, especially if the child feels guilty or afraid. The interviewer must gain the child's trust before the child will talk freely. To help develop this trust and not disturb the child's security, the young child may be interviewed with his parents present. This, however, should be avoided if at all possible.

Many times you will need the parents' assistance in interpreting the child's dialogue. Preverbal children may possess an average or superior understanding but rely on a parent or other family member to communicate for them. Early in your interview with the child it will become apparent if the child is preverbal. A verbal child can communicate independently.

With children under three years, an interview with the child would not be necessary. The responsibility should be placed with the parents, as outlined in the intervention portion of the manual. With the child age 4 to 7, the interviewer, after establishing rapport and determining that the child can understand, will ask more structured and specific questions as outlined in the Child Interview Form in this Manual.

Step Four: Talk With Parents Again

After talking with the child and parents separately, the interviewer will talk with the parents again. This discussion allows the interviewer to re-emphasize his concern for the child and family. At this point, the interviewer will also outline steps to prevent future firesetting. Depending upon what the interviewer finds, these steps could be educational intervention, referral for mental health assistance or a combination of educational intervention and referral. Factors leading to these decisions are

discussed in chapters on educational intervention and referral in this manual.

The following three main activities—Establishing rapport; Determining level of understanding; and Gathering information—are involved throughout the above four steps.

Activity One: Establish Good Rapport

Most adults and children, meeting with a fire official after a fire occurrence, will be quite concerned or tense. The interviewer should try to help them to relax, to be honest and open, while at the same time maintaining the official decorum of the setting.

Stimulate conversation with the parents and the child by talking about non-threatening things. The conversation will put your subject at ease and make communication easier. Feel free to discuss events of the day, the weather, etc.

To build rapport with children, the interviewer can comment on a child's T-shirt or toy. The child can also be asked about favorite foods or television programs.

Be sensitive to what the family may say and how it is said. Speak in common, everyday language, rather than fire service terminology or psychological jargon.

People tend to feel understood and feel like they have found an ally when the interviewer shows concern for their feelings. Feel free to ask the parents or child about how they feel about the situation they are in.

Avoid making moral judgments about the parents or the child; do not prejudge them. Refrain from "talking down" to the child or family, even if you have strong feelings about them. Young children, as well as adults, are capable of reading between the lines. Avoid innuendos, sarcasm and other forms of game-playing.

Speak in a clear and firm voice, using the tone of voice you would use in a friendly social situation. Avoid speaking too softly; people may not be able to hear you. Avoid speaking

too loudly as this may imply a tendency to berate and frighten the family.

To aid in developing rapport, use open gestures. Even very young children can read another person's emotions through non-verbal gestures. Crossed arms or closed eyes may imply that the interviewer is not listening or does not care. Sit in front of the person being interviewed, rather than sitting to one side. Keep full eye contact most of the time but do not get into a staring contest with the child or the parents. Arrange seats a comfortable distance apart, yet close enough to maintain good contact.

CHECKLIST FOR ESTABLISHING RAPPORT

APPEAR FRIENDLY AND REASSURING

PROJECT CALMNESS AND CONFIDENCE

Relax, Take your time

LOOK CLEAN, CASUAL AND COMFORTABLE

PROPS OR CUDDLY TOYS CAN BE HELPFUL*

A prop such as a puppet may help you to break the ice. Many times the child will communicate quite readily with the puppet.

VOICE

Speak clearly. Speak slowly.

KNOW YOURSELF . . . BE YOURSELF

Do not act in a manner in which you are not comfortable

SEATING DYNAMICS**

Seat the child nearer to you than to the door. Arrange seats a comfortable distance apart. Do not sit too far away from the child or you will lose the feeling of a warm, informal atmosphere.

Position yourself in front of the child, full-face.

* These recommendations apply to children under 7 years of age.

** The child may wish to sit in his parent's lap, or may crawl up on your lap while you are talking with him. As you build trust with the child, the closer he will be willing to come to you.

PROPS

- Telephone melted by fire
- Fire damaged toy
- Fire damaged book
- Any other object with which the child can identify

PICTURES

- Fire damaged kitchen
- Car damaged by fire
- Wildlands damaged by fire
- Fire damaged bedroom, living room, etc.

NO PICTURES OF CHILDREN OR ANIMALS KILLED BY FIRE

CHECK THE COLUMN FOR THE APPROPRIATE LEVEL OF UNDERSTANDING:

	Limited Understanding	Normal Understanding
1. Show child a picture or prop.	_____	_____
2. Ask, "What do you think this is?" If the child answers incorrectly, tell him what it is and comment on item, leaving conversation open for more discussion.	_____	_____
3. Discuss and ask child for various ways fires can start.	_____	_____
4. "If a fire could burn this toy, it could burn you too, couldn't it?"	_____	_____
5. "What else can fire burn?" Houses, people, clothes, trees, etc.	_____	_____
6. Ask the child how we can help people not to get hurt by fire.	_____	_____

Total each column. The column with the greatest number of marks indicates the child's level of understanding.

These questions and answers have also assisted in teaching the child an understanding of cause and effect about the dangers of fire.

Activity Two: Determine the Level of Understanding

Determining whether a talkative five-year old child understands what is being said is relatively easy. Their level of understanding can be assessed in the rapport-building stage. Children between three and four years of age and reticent older youngsters may present a more difficult challenge. The interviewer needs special techniques to build rapport and assess the

level of understanding for these children.

Use hand puppets or toys to play a short game with the child. Dolls are appropriate for both boys and girls at this age. Some children feel more comfortable and less frightened talking through dolls or puppets or toy animals. The puppets or dolls can be used to ask simple questions to see if the child will respond. You may ask the three or four year old child to pick up objects in the room, to put them other

places or to place dolls in a certain position (standing, sitting, etc.). In this way you can see whether a child can follow instructions even if the child refuses to talk.

Puzzles may also be used. The local toy store or school supply equipment store can furnish a number of puzzles for the average three to four (or five to six) year old child. The child's ability to follow your directions to complete a puzzle can tell you something about his ability to follow verbal or non-verbal directions.

Any game or playtime activity that does not get the child too excited would be quite appropriate for this phase of the counseling process.

Verbal children, in addition to describing their interests or hobbies, can be asked what they would do if they had three wishes. The answer to this question will tell the interviewer something of their intelligence and their value system.

Children have a great curiosity. They learn from what they feel, see and hear. Props and pictures, along with your answers to his questions, will help the child take fire from the world of fantasy and magic and put it into a perspective of reality. Encourage the child to examine the prop, look at the pictures and ask questions regarding them.

The following type of props, pictures and questions can be used to assist in determining the child's understanding of how destructive fire can be, as well as a basis for planning effective educational intervention.

Activity Three: Gather Information Using the Interview Forms

There are three sample interview forms provided in this manual. The interviewer will use the first form, the Family Interview and Evaluation Form, when interviewing parents. Parents complete the second form, the Parent Questionnaire, while the interviewer and child talk privately. The Child Interview Form is completed by the interviewer during the conversations between the interviewer and the

child. The interviewers should have their interview sheet in front of them so they may check off items as they are asked. At the end of the interview, C's and P's (representing Child or Parent problems) are transferred from each interview form to the Category Profile Sheet explained in the next chapter.

The questions need not be asked in the order given on the interview sheet.

A reasonable attempt should be made to seek answers to all of the questions but, of course, the interviewer should use his own judgment in this matter.

Questions should be asked of the parents or child in an open, friendly and conversational manner. The conversational tone should be a dialogue, as opposed to an interrogation. If the question is not understood, it should be rephrased. The important thing is to make the necessary observations and to record the answers on the interview sheet.

In many of the questions on the forms one is given the option of a P-2 or C-2 explanation. In some cases, poor parenting will result in a child with problems. Thus, on certain questions the interviewer has the option of placing a P in Column 2 of the Category Profile Sheet rather than a C in Column 2.

By the end of the interview, the interview forms should be complete. Next to the checks marked by the interviewer is a code number: C-1, C-2, C-3 for child's answers or P-1, P-2, P-3 for parents' answers. Detailed information on how and why responses are coded will be given in the next chapter.



Introduction to Categorizing

Before deciding how to help a juvenile fire-setter, the interviewer must determine the degree of concern to have for the child's general mental health, as well as for the firesetting behavior. Research has shown that the more severe the child's problems, the more difficult it will be to correct the firesetting behavior.

To find out how concerned to be about a juvenile's future firesetting potential (once he has been brought in) we will use the three column Category Profile Sheet (Figure 1).

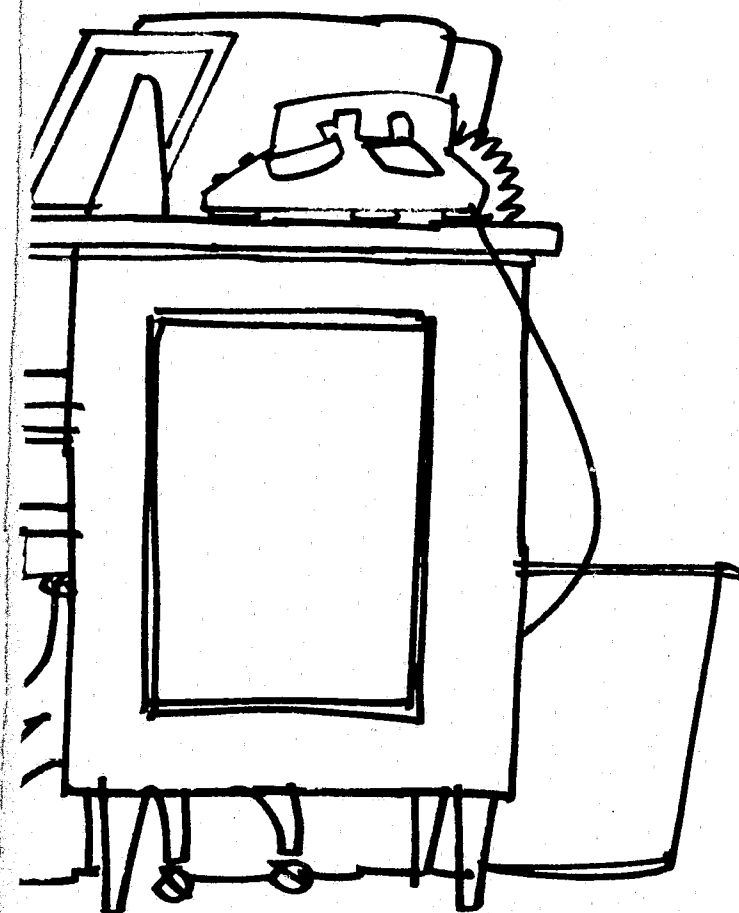


FIGURE 1
CATEGORY PROFILE SHEET

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
TOTAL C _____	_____	_____
TOTAL P _____	_____	_____
TOTAL C + P _____	_____	_____

The parent's answers (represented on the Profile Sheet as P's) and the answers related to the child (represented by C's) are placed in Column 1, 2 or 3 of the Category Profile Sheet.

These answers are found on the child or parent interview forms. By the end of the interview, the interviewer should be able to place P's and C's in all appropriate columns. By adding the columns as in the examples to come, the severity of the problem and the best intervention strategy can be determined.

The answers to interview questions will be categorized in three ways:

- (1) those of little concern
- (2) those of definite concern
- (3) those of extreme concern

These coded answers will be placed in one of the three columns in Figure 1. Each P answer and C answer to a specific question will be placed in Column 1, 2 or 3.

The following Figures show the outcome of interviews with different children and their families.

FIGURE 2
LITTLE CONCERN—DON'T REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
P P C C C P C C P P C C C P		
TOTAL C _____	_____	_____
TOTAL P _____	_____	_____
TOTAL C + P _____	_____	_____

Figure 2 is the profile of a relatively normal child. All P (parent) answers fit neatly in Column 1. All C (child) answers also fit into Column 1. This tells us that we are dealing with a relatively normal child and family.

FIGURE 3
DEFINITE CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
	P P C P C C P C C P P C C C P C C C C C P	
TOTAL C	0	13
TOTAL P	0	8
TOTAL C + P	0	21

Figure 3, on the other hand, shows a basically disturbed situation. All answers to both P and C questions fall into Column 2. We have "definite concern" for this child, based not only on firesetting potential, but also the child's general mental health. The large number of P-2 responses indicates that the parents may also be disturbed.

FIGURE 4
EXTREME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
	P P C C C C C C C C	P P P C C C C C C C C C
TOTAL C	0	8
TOTAL P	0	2
TOTAL C + P	0	10

Figure 4 indicates a severely disturbed child for whom we would have "extreme concern." This child will need immediate referral. Because so many P answers also fall into Column 3, the area of "extreme concern," we would also question the likelihood of these parents understanding and following through with any educational intervention provided by the fire-fighter.

FIGURE 5
LITTLE CONCERN—DON'T REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
C C P C C C P P C C P C	C P	
TOTAL C <u>8</u>	<u>1</u>	<u>0</u>
TOTAL P <u>4</u>	<u>1</u>	<u>0</u>
TOTAL C + P <u>12</u>	<u>2</u>	<u>0</u>

Figure 5 shows the profile of another normal child. Rather than the "purely" normal child and parent situation in Figure 2, this profile shows the child and family within the normal range, although some of their behaviors can

fall into Column 2. However, since most of the answers fall into Column 1, and assuming that the single C-2 or P-2 is not an unusually bizarre answer, this profile would fall into the normal range, requiring no referral.

FIGURE 6
SOME CONCERN—CONSIDER REFERRAL

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
P P C C C C C C C P	C C C C	
TOTAL C <u>7</u>	<u>4</u>	<u>0</u>
TOTAL P <u>3</u>	<u>0</u>	<u>0</u>
TOTAL C + P <u>10</u>	<u>4</u>	<u>0</u>

Figure 6 profiles a questionably normal child. The term questionable is used because there are more than the number of C-2 answers one would like to see. The concentration of P answers in Column 1 indicates a basically normal family. However, the child's good adjust-

ment is questionable, based on the number of C-2 responses and the firefighter should consider referral. A lack of response to educational intervention would be an additional reason for referral.

FIGURE 7
SOME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
C P C C	C P	
C C	P P	
C P P C	P	
C		
TOTAL C <u>8</u>	<u>1</u>	<u>0</u>
TOTAL P <u>3</u>	<u>4</u>	<u>0</u>
TOTAL C + P <u>11</u>	<u>5</u>	<u>0</u>

Figure 7 is the reverse of Figure 6. Here we see a relatively normal child with questionable home environment. This question comes about because of the number of P answers in Column 2. Again the interviewer can look directly at what those P's in Column 2 represent. The fire-

fighter would do well to refer the child to a psychological consultant, especially since the parents may not follow through with the educational intervention at home. Referral is also recommended since the child's firesetting is likely a "cry for help."

FIGURE 8
DEFINITE CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
C P C	C C C C	
C P	C C C C	
C P C	P	
TOTAL C <u>5</u>	<u>8</u>	<u>0</u>
TOTAL P <u>3</u>	<u>1</u>	<u>0</u>
TOTAL C + P <u>8</u>	<u>9</u>	<u>0</u>

Figure 8 shows the category profile of a disturbed child and normal parents. There are many C's in Columns 1 and 2. The overabundance of C's in Column 2 suggests a child with definite difficulties. Another important point is that P answers are by and large in the normal or "column of little concern" (Column 1). This suggests that we are dealing with a fairly normal family with a troubled child.

In working with the Category Profile Sheet, interviewers learn to sense the number and type of answers in Column 2 that suggest the need for professional intervention.

A Category Profile Sheet with this number of C-2 responses suggests a child of considerable problem behavior.

This child is a high risk for further firesetting and should be referred.

FIGURE 9
DEFINITE CONCERN—REFER

	1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
	C C C	C P P	
	C P	P P P P	
	C P C	C P P P P	
TOTAL C	6	2	0
TOTAL P	2	10	0
TOTAL C + P	8	12	0

Figure 9 is similar to Figure 8. The primary difference is that we see a great many P's in the second column and C's primarily in the first column. This profile suggests a rather normal child in a rather disturbed family situation. Some C's would be expected in Column 2 because of the poor parenting implicit in a high P score for Column 2. This may imply a less disturbed child than in profiles with low P scores in Column 2. The number of P's in Column 2 suggests that there are many some-

what unusual family behaviors, based on the general norms of society.

The primary difference between this profile and Figure 6 is the poorer functioning of the parents. The parents' problems may have affected the child to the extent of firesetting.

Difficulties with the family must be dealt with and this can best be accomplished by a psychotherapist. This child and family should be referred after the firefighter has provided educational intervention.

FIGURE 10
DEFINITE CONCERN—REFER

	1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
	P C	C P C P P	C
	P C	C P C P	P
		C P P C P	
		P C P C	
TOTAL C	2	8	1
TOTAL P	2	10	1
TOTAL C + P	4	18	2

Figure 10 represents the profile of a significantly disturbed child and parent or family. Though there are marks in Column 1 and Column 3, the bulk of responses for both parent

and child are in column 2. A high level of troubled interaction between child and parent is very likely. This family and child should be referred to a psychological consultant.

FIGURE 11
EXTREME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
C	C	P P
P	C P C P C	P P
	C C P C	P P
	C C C C	
	P P	
TOTAL C <u>1</u>	<u>10</u>	<u>0</u>
TOTAL P <u>1</u>	<u>5</u>	<u>6</u>
TOTAL C + P <u>2</u>	<u>15</u>	<u>6</u>

Figure 11 indicates a troubled child with an extremely troubled parent. The unusual quality of responses requires the referral of the family and child. The firefighter may also need to

verify that the family has sought and found the appropriate mental health professional. A very few P or C responses in Column 3 convinces us that outside professional help is needed.

FIGURE 12
EXTREME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
C P	P P P C	C C C C
	P P C P C	C C C C
	P P P C	C
TOTAL C <u>1</u>	<u>4</u>	<u>9</u>
TOTAL P <u>1</u>	<u>9</u>	<u>0</u>
TOTAL C + P <u>2</u>	<u>9</u>	<u>13</u>

Figure 12 represents an extremely disturbed child and parent. This combination should also be automatically referred. Educational intervention by the firefighter would probably be ineffective for a child who is this disturbed. The important intervention would be the referral. If the parents are not too disturbed, the

firefighter can have some confidence that the family will seek help. However, if the firefighter feels that the family will not respond to the suggested referral he can refer to page 38 for ways to persuade parents to seek referral. Appropriate follow-up would also be important in this case.

FIGURE 13
EXTREME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
P	C P C P C	C C C P P P C C C P P P
TOTAL C	0	3
TOTAL P	1	6
TOTAL C + P	1	5
		12

Figure 13 represents the profile of an extremely disturbed parent and extremely disturbed child. It is likely that this family is already in therapy, or involved somehow with

the legal system. Educational intervention will likely be a waste of time. Appropriate referral would be of greatest importance. Possible legal action as well as follow-up may be necessary.

FIGURE 14
EXTREME CONCERN—REFER

1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
P P P P P	C C C C	C C C C C C C
TOTAL C	0	4
TOTAL P	5	7
TOTAL C + P	5	0
	4	7

Figure 14 represents a normal parent with an extremely disturbed child. Educational intervention with this child will likely be ineffective, since the firesetting is probably a symptom of an extremely unusual mental condition. This child should be immediately referred. The parents will probably follow through with your

suggestion and coercive measures will probably not be necessary. Note that normal child or adult behavior may be indicated not only by a large number of P's and C's in Column 1, but also by a lack of P's and C's in all other columns.

FIGURE 15
EXTREME CONCERN—REFER

	1 Little Concern (Educational Intervention)	2 Definite Concern (Psychological and Educational Intervention)	3 Extreme Concern (Psychological Intervention)
	C C C	C P	P P P P
	C C C	P P P	P P P
TOTAL C	6	1	0
TOTAL P	0	4	7
TOTAL C + P	6	5	7

Figure 15 represents an extremely disturbed parent with a relatively normal child. Normal children of extremely disturbed parents will often act out behavior, such as firesetting, because of the unusual pressures in the family. It is often a child's call for help. This family needs referral, not so much because of the child's acute difficulties, but because of the on-

going family disturbances. Coercive measures may be necessary, depending on the degree of disturbance in the parents. Follow-up is highly recommended. With extremely disturbed parents, the firefighter should be aware of legal alternatives, including making the child a ward of the county or the state.

SUMMARY

The preceding examples illustrate basic guidelines that determine whether to use educational intervention or refer the child and family to a mental health professional.

When most or all parent and child behaviors appear relatively normal, referral is not necessary. Instead, institute an educational intervention and, where possible, follow-up to be assured that the parents have followed through with your program, and the child has not set more fires.

Refer whenever there are indications of a troubled parent. Most children will continue to set fires or act out unhappiness in other ways when in a troubled home. If the parents can follow through with basic instructions, and the child is not extremely troubled, institute your educational program in addition to the referral. If the parents are so disturbed that they cannot follow through, educational intervention will likely be of little value. Always follow-up with disturbed parents because they will often not follow through, and coercive or legal means may be necessary to insure the safety of the child and society.

Educational intervention may help questionably disturbed children if the interviewer feels that (1) the child can understand the firefighter's directions and (2) the parents can follow through with the home intervention system. It usually makes sense to use educational intervention if the child can understand. The educational intervention may help to prevent the child from becoming an habitual firesetter.

The interviewer may actually fill out the Category Profile Sheet at a number of different times, depending on the characteristics of the family he is interviewing. Most often used times to quickly transfer P's and C's to Columns 1, 2 and 3, are:

1. After the child interview. The whole family is in the waiting room a few minutes while the interviewer makes calculations and plans in his office.
2. During the final phase of Step 4 (talking with the parents again) the interviewer asks the parents to wait while he makes calculations and decisions.
3. After talking with the parents again (Step 4), the interviewer may ask the parents to wait outside while he "gets further information," and calls them back to give them his plan of action, (i.e., intervention plan).
4. If pressed for time, the interviewer may conclude his calculations when enough information suggests "definite" or "extreme" concern. He can then finish all calculations "for the record" after the family has gone. The total filling in of the Category Profile Sheet is important; be sure that you do not "categorize in haste."

Intervention in the Firesetting Process



Your primary goal is to correct the child's fire-setting behavior. The younger the child, the more cooperation from the parents will be required. Nevertheless, the firefighter can intervene to some degree either in the child's home or in the fire station.

The interventions discussed in this chapter are primarily designed for the curiosity or mildly troubled juvenile firesetter. The more troubled the child's behavior, the more likely that disturbed motivations caused the fire-setting.

Interventions for the Curiosity Firesetter with Limited Understanding or Preverbal

If a child has a normal curiosity about fire, is under three years of age, and/or has a limited understanding of cause and effect, adults in the household *must* be responsible for prevention.

The adults should tell the child, "NO." He is not to play with matches, lighters, candles. If adults see the child with matches, the emphatic NO should be followed by a simple explanation such as: "No, matches are hot; they can burn and hurt you."

In addition, adults in the home should make fire less accessible to the child. They should keep matches, lighters and other ignition sources out of the child's reach and sight.

Remove handles to the burners on the stove or other heat producing devices that are accessible to the young child. The child should always be supervised in a room in which a fireplace, candle, heater, or other open flame is present.

The fire department's fire prevention bureau can aid in the adult's education of fire by providing the parent(s) with pamphlets and other educational materials to use in the home.

The Curiosity Firesetter Possessing Understanding

Normal firesetters who understand cause and effect can be made to understand that fire is dangerous and that they may injure themselves, their family, home or toys.

The following suggestions have proven to be effective in reinforcing the proper use of fire. Take the lead in structuring the following for parents:

SUGGESTION NO. 1—Educational Strategy

1. Ask the child how we can help people not to get hurt by fire. Discuss the child's ideas.
2. Show the child appropriate teaching films, especially those showing danger to firefighters. Films, slides or photographs showing burn victims are not recommended for children this young.
3. Ask the child to help prevent fires at home.
 - a. Stress the child's own responsibility in dealing with fire. Tell and show the child how fire can hurt firefighters and others, and emphasize how the child can prevent fire.
 - b. Have the child promise to use matches only under the supervision of adults. Also have the child tell you why he is not going to play with matches again. This serves to reinforce the child's understanding.
 - c. Request the child to tell his parents or other adults if other children play with matches or fire. Make sure the child understands why to contact an adult.
 - d. Assign the child a fire prevention task, such as emptying waste baskets each day or disposing of used cigarettes from ash trays into covered cans each night.Be sure the child understands the reasons behind these actions.

SUGGESTION NO. 2—Negative Practice Strategy

A match fascinates most children who desire to investigate this mysterious object. The curiosity can be guided and saturated by having the child strike 200 paper matches, following this sequence:

1. Open the package and take out a match.
2. Close the package.
3. Turn the package over to the striker surface side.
4. Hold the match in the proper position and strike away from the body.
5. Hold the match in a horizontal position (after ignited) for two to three seconds.
6. Blow out the flame and wait until the match is cool to the touch (five to ten seconds).
7. Repeat.

This sequence should be followed through ten packages of paper matches (200). Often, by the time the children have struck their thirtieth match, they want to stop. They should be forced to continue until they have struck 200 matches or absolutely refuse to strike another match. When they have reached the 200th match or refusal point, the children are upset and usually will not be interested in seeing more matches, much less playing with them. Make the child pick up all of the spent matches and packages and dispose of them in a covered trash container.

While conducting the "200 Match Sequence" explain to the child: (1) the only time matches may be used is in the presence of parents or another adult; (2) the child will be permitted to strike matches ONLY IN THE PRESENCE OF

THE PARENTS OR ANOTHER ADULT; (3) a child should learn to use matches and fire properly under the PARENT'S SUPERVISION; (4) the child must promise to use fire and matches ONLY in the parent's presence. The parents will promise to let the child use matches in their presence.

SUGGESTION NO. 3—How to Light a Match (home strategy)

Dr. Phil Wroblewski and Fire Inspector Ray Walters of the City of Hayward, California, Fire Department, suggest the following strategy for teaching a child to light a match. Before teaching a child to light a match, tell the child that matches are to be used only with supervision from a parent or other adult. Never **play** with matches, use them only for specific purposes such as helping parents light the campfire, fireplace, birthday candles, etc.

Light a match only over an ash tray or other safe area which won't burn if the match is accidentally dropped. Never leave matches or match books within the reach of children. Then, proceed with the following "Birthday Candle" sequence:

1. Remove one match from the book and close the cover.
2. Hold the match near the middle—not too close to the match head, nor too close to the end.
3. Strike the match on its side, not flat, to keep it from bending.
4. Hold the match away from your body and clothes, over the ash tray or safe area. Strike the match away from the body.
5. When the match is lit, hold it level or upward, never face it downward.
6. When transferring from the match to a candle or fire kindling, never reach across or over flames. Start at the candle farthest away from you and continue to light the others moving toward you.

The parent is asked to spend five minutes, once a day, for a week teaching the child how to safely light a match. This time is for the child and parent alone, without interruptions or other children allowed. The parent allows the child to practice striking matches under supervision during these sessions. The first session should be done outside on concrete with an ash tray but protected from the wind. The parent should praise the child often for correct actions.

Demonstrate correct actions if the child does anything wrong and explain what could happen by doing it the wrong way. It is also recommended that the parent ask the child questions about fire safety—such as "What would happen if . . .?", "What would you do if . . .?", "Where could you use fire safely?" "Where would you never use matches?", and "If your clothes are on fire, what would you do?"

SUGGESTION NO. 4—A Match is a Tool

Children who understand cause and effect can be taught that "A Match is a Tool." Any tool has a specific purpose and should be used only for that purpose. Like other tools, a match has a specific function (lighting candles, starting campfires, lighting a fire in the fireplace, etc.). A match is not a toy and to use it as a toy would be the same as trying to cut a board with a hammer or drive a nail with a saw.

To reinforce this concept, parents can ask children to list tools in the house and the purposes the tools have.

SUGGESTION NO. 5—Behavioral Strategy

The behavioral strategy defined here is not specifically a strategy for dealing with firesetters, but is rather a strategy for teaching the child to comply with specific requests or demands made by a parent.

As part of the behavioral program the parents assume that all the child's behaviors are for a specific purpose: either to gain reward

or somehow avoid punishment or other negative consequences.

Thus, the parent attaches the behavior to a specific positive reward or negative consequence or reinforcer.

This system may be easily put into effect with a large chart, which helps both child and parent keep track of his progress.

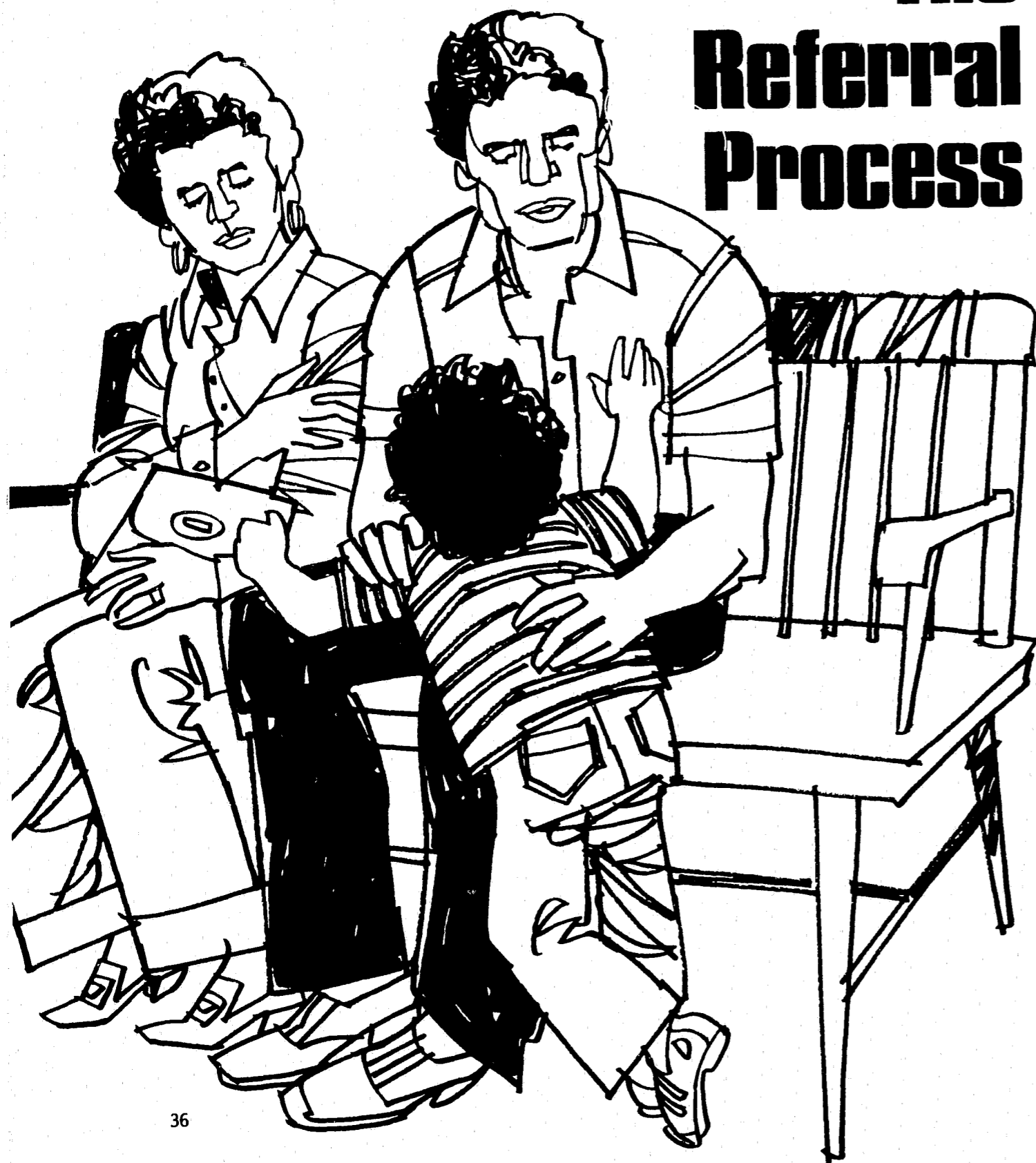
Refer parents to the book "Living with Children" by Jerry Patterson. This is a programmed text and the parents can easily read it and develop their own program. If a strategy does not work, it is usually due to the complexity of the program or the inconsistency of the parents. Parents who want additional information on behavioral strategies should consult a behavioral psychologist.

According to behavioral methodology, youthful firesetters should not automatically be toured through a firehouse. Touring firehouses can reinforce or reward firesetting. Even the perfectly normal child who has set an accidental or curiosity fire benefits more from a firehouse tour and other special privileges after the firesetting has stopped.

SUGGESTION NO. 6—Restitution

It is often useful to children to help repair or in some way to make up for damage that has resulted from their firesetting behavior. Some examples of restitutions are: helping to clean up resulting damage, helping to paint or repair, etc. Either or both parent and child may decide on an appropriate restitution.

The Referral Process



Most firefighters have neither the time nor the specific training needed to deal with more complex mental and emotional disturbances of firesetting children and their families. The firefighter is usually seen as an educator, not a long-term counselor. Mental health professionals do have the training to offer firesetters and their families moderate to long-term therapy.

Using guidelines in this manual, the interviewer must independently decide which cases would benefit by referral to a professional therapist. If at any time you see a situation beyond your training, or a situation in which the child may not respond to educational intervention, refer the child and family to an appropriate mental health consultant. In general, always refer when you feel that you have done all you can and additional help is necessary. For example, whenever the Category Profile Sheet suggests a troubled child and/or family, refer the child and family.

The extremely disturbed child should always be referred. Although the child's firesetting may be suppressed, the underlying problems may manifest themselves in other ways. Referral can help reduce firesetting and allow the child and/or family to solve other problems related to the firesetting behavior.

Professional Therapy/Private Sector

Professional therapists can diagnose and treat both children and families involved in firesetting problems.

Many mental health practitioners in private practice, and in public and private agencies, can treat the people referred by a fire department. The one common denominator is that all practitioners are trained to practice psychotherapy. The term psychotherapy refers to a variety of psychological techniques to help people change their conscious and unconscious behavior and adapt to everyday circumstances.

Each state and the District of Columbia have different criteria and licensing procedures for the private practice of psychotherapy.

The *clinical psychologist* is usually a Ph.D. health care professional and specializes in

diagnosing and treating mental and emotional disorders through graduate and post doctoral training. A *psychiatrist* is a medical doctor who specializes in the diagnosis and treatment of mental and emotional disorders after receiving his medical degree.

Clinical social workers and *psychiatric social workers* are usually trained at the master's degree level and in many states practice psychotherapy.

Referral of firesetters and their families should be to one of these types of professionals. Each type normally practices in large or medium-sized communities. The county and state associations of the above professionals will usually be able to furnish a number of names of professional mental health workers who practice in your community or nearby.

It is important, however, to (a) specifically request the names of professionals who have extensive experience in dealing with families and children and, (b) to check this information directly with the professionals you are contacting.*

The Public Sector

In public agencies the child and family work with fully trained mental health professionals or frequently with interns or trainees (in psychology, psychiatry and clinical and psychiatric social work) who are supervised by fully trained professionals. The following are agencies and institutions which may be good referral possibilities.

* In California one can contact the members of the Fire Services and Arson Prevention Committee, Division I, of the California State Psychological Association.

1. *State, county, city, and regional mental health centers.* States, and particularly counties, often provide regional mental health teams. These teams are often organized into child and adult sub-sections. Public mental health teams will frequently work with families who cannot afford private help.
2. *State or county hospitals.* State or county hospitals often have outpatient departments which treat children and families. These public agencies are usually willing to care for those who cannot pay fees.
3. *Department of Social Services*
 - A. Child abuse
 - B. Protective Services

Departments of Social Services may fall under various local or state commissions. They will often be able to provide both legal and psychological help.
4. *Religious—family services*
Religious organizations often provide mental health services to their members and are sometimes non-sectarian.
5. *Local School Districts*
In very small communities without regional mental health clinics or private practitioners, school psychologists or counselors may be able to provide some of the needed help. They may also be contacted for referrals to professionals in nearby communities.

6. *Juvenile Diversion Programs—Youth Services Programs*
 - A. At police departments.
 - B. At fire departments.

Diversion programs are often Federally-funded programs that hire trained or supervised counselors to work with children.
7. *Drug Abuse or Substance Abuse Center*
Some Federal, county, or state programs may be oriented towards drug abuse difficulties. If the child or family in question abuses drugs, these centers can be potential referral sources.
8. *Community Clinics*
Community clinics which are primarily geared toward general physical health care often have a mental health component. They often work with patients on a sliding scale fee or without charge.
9. *Community Mental Health Clinics*

MAKING THE REFERRAL

Suggesting that one or more members of a family needs psychological help is at best a highly sensitive situation.

Some families may immediately seek help at the interviewer's suggestion. Unfortunately, many will not. Usually, a family does not want to hear that a child or the family itself has significant problems and needs outside help.

When suggesting a referral, follow earlier guidelines on attitude, tone of voice and firmness. The interviewer should tell the family that the interview results call for a follow-up. The interviewer can then suggest names of appropriate individuals or agencies. (If the parents also appear to be disturbed, do not comment on their disturbance.)

After telling the parents that their child needs additional help, the firefighter should immediately give them the name or names of consultants or public agencies so they can make an appointment as soon as possible. Tell the families that you will follow up to be assured that the appointment has been made and kept. Depending upon the specific laws in your state or county, the family may be required to obtain additional help by law. You may also be able to require that family to notify you that the appointment has been kept.

Whenever you fear for the child's safety and the family has not followed through, you may contact a legal representative who may represent child protective services, the juvenile police section, an abuse program, or even a diversion program. Based on the severity of the problem, these representatives may advise that the child be placed in protective custody. It might then be easier for the child to receive mental health help.

It is often important to remind parents that delaying professional mental health consultation may lead to additional problems, possibly involving the child directly with the law. Parents should understand that more firesetting behavior could lead to more severe mental strain and psychological problems. Emphasize that *immediate* help is quite important. Always be tactful in your approach, remembering that parents usually do not like what they are hearing and may react unpredictably. Contacting the referral source and sharing your impressions about the child will be useful.

Not all consultants may meet your needs or the needs of your firesetting children and their

families. If you find that you cannot communicate with the consultant or you do not get the feedback you need, find another consultant or try another agency. There are many psychologists and other mental health professionals who are qualified and interested in working with juvenile firesetters and their families.

In Summary

The final determination of the appropriate course of action to follow in dealing with a juvenile firesetter remains in the hands of the interviewer. There is no magic formula. The purpose of this Manual is to provide guidance in ways to obtain and analyze information to make the best decision, and some suggestions or options for carrying out the intervention strategy selected.

Information on firesetters counseling programs is limited. If you utilize this Manual in establishing a counseling program in your community, please share your experience with OPE. Descriptions of programs for juvenile firesetters may be sent to:

Office of Planning and Education
United States Fire Administration
Federal Emergency Management Agency
Washington, D.C. 20472

Appendix



FAMILY INTERVIEW AND EVALUATION FORM ("QUESTIONS TO BE ASKED OF PARENTS") For Children Under Seven Years of Age

INTERVIEWER _____ DATE _____

JUVENILE'S NAME _____ SEX ___ DOB _____

ETHNICITY/RACE _____

ADDRESS _____ PHONE _____

SCHOOL ATTENDED _____ GRADE _____

ADDRESS _____

MOTHER'S NAME _____

FATHER'S NAME _____

MARITAL STATUS: ___ Married ___ Single ___ Divorced ___ Widowed/Separated

NUMBER OF CHILDREN IN FAMILY _____ BIRTH ORDER OF JUVENILE _____

1. Is child on medication? ___ yes ___ no What type? _____

2. Has child been considered to be hyperkinetic or have a neurological dysfunction?
_____ (yes = C-2)

3. Is this your own child? ___ yes ___ foster ___ adopted

4. Has there been a recent change in family structure? ___ divorce (P-2) ___ new baby (P-2)
___ death of relative (P-2) ___ other

5. Has the child been under severe stress in the past six months? (i.e., moved to another
neighborhood or school or losing friends)

Explain _____

6. Does the child have a physical ailment? (Explain) _____

7. Is the child physically immature for age? ___ yes (C-2) ___ no

8. How do you normally discipline the child? spank isolate withdrawal of privileges yell other (Explain) _____

9. How often is the discipline given? _____
10. Was this his/her first fire? _____
How many others set? _____
11. What was set on fire? _____ paper, trash, leaves (C-1 or C-2)
 child's own property (C-2) child's room (C-2) self, animals, people (C-3) other person's property (C-2) other
Explain _____

12. Materials used to start fire matches lighter other
Explain _____
13. How did child get material to start fire? found it went out of his way to acquire it (C-2) other Explain _____

14. Is the child's curiosity about fire mild (C-1) moderate (C-2) extreme (C-3)
15. Was child pressured or coerced into fire setting behavior by his peers? yes (C-2) no
16. Was the fire in question an accident? yes (C-1) no (C-2)
17. Was the child attempting to do harm or to destroy property by setting the fire? yes (C-2) no (C-1)

18. Was the fire set because the child was incapable of understanding what he was doing? yes (C-2 or C-3) no (C-1)
19. Was the child properly supervised during the fire setting incident? yes no (P-2)
20. Does the child know the proper use of matches and/or fire? yes no (P-2)
21. Did the child panic when the fire got out of control? yes (C-1) no (C-2)
22. Did the child attempt to get help? yes (C-1) no (C-2)
23. Was anyone with the child when the fire was set? yes no
If yes, who _____
(Address) _____ (Phone) _____

Additional Observations Regarding Child's Home and Parents:

(Don't ask Parents *All* the following questions. Most questions are based on information or observations)

24. Was outside of residence sloppy? yes (P-2) no
25. Was inside of residence sloppy? yes (P-2) no
26. Does parent(s) appear indifferent toward child? Mother (P-2) Father (P-2)
27. Does parent(s) appear hostile towards child? Mother (P-2) Father (P-2)
28. Does child appear neglected? yes (P-2) no
29. Does child appear abused? yes (P-3) no
30. Is there an indication that fire was precipitated by family difficulties or family arguments? yes (P-2 or P-3) no

31. Is there an indication that the fire was started after the child became angry at another person or himself? yes (C-2) no
32. Is there an indication that the fire was set primarily to destroy something or someone? yes (C-3 or C-2) no
33. Is there an indication that the fire was set primarily because the child was told that he could not play with fire? yes (C-1 or C-2) no
34. Is there an indication that the child perceives magical qualities to fire? yes (C-1 or C-2) no
35. Does the child deny interest in fire if information to the contrary is available? yes (C-2) no
36. Does the fire appear to be a "cry for help" from the child? yes (C-2) no
37. Does it appear that parenting has been inadequate or infrequent for this child? yes (P-2) no
38. Does the fire appear as positive or funny to the child? yes (C-3) no
39. Does the fire appear to bolster the child's feelings of power or self-confidence? yes (C-2) no
40. Does mother (P-2) father (P-2) appear indifferent or unconcerned to the present situation?
41. Does mother (P-2) father (P-2) appear of subnormal intelligence?
42. Does mother (P-3) father (P-3) appear in poor contact with reality?
43. Does mother (P-2) father (P-2) appear inappropriately angry or moody?

PARENT QUESTIONNAIRE

PARENT(s): Please fill out this form *As Soon as Possible*. Make a check mark under the answer—"never," "sometimes," or "frequently"—that best describes your child for every question. Ask any questions you have. We want to know if the child exhibits the following behavior. When marking the form consider all parts of the child's life (at home, at school, etc.) where these behaviors might be present.

Behavior	Never	Sometimes	Frequently
Hyperactivity	C1	C1	C2
Lack of Concentration	C1	C1	C2
Learning problems (home or school)	C1	C2	C2
Behavior problems in school	C1	C2	C2
Impulsive (acts before he thinks)	C1	C1	C2
Impatient	C1	C1	C2
Accidents	C1	C1	C2
Convulsions or "spells"	C1	C2	C2
Wets during day	C1	C2	C2
Extreme mood swings	C1	C1	C2-3
Need for security	C2	C1	C2
Need for affection	C2	C1	C2
Depression	C1	C2	C2-3
Unusual movements—tics	C1	C2	C2
Stuttering	C1	C2	C2
Bed wetting (after age 3)	C1	C2	C2
Soiling (after age 3)	C1	C2	C2
Lying	C1	C1	C2
Excessive & uncontrolled anger	C1	C2	C2
Violence	C1	C2	C2
Stealing	C1	C2	C2
Truancy	C1	C2	C2
Cruelty to animals	C1	C2	C2-3
Cruelty to children	C1	C2	C2-3
Fighting with peers	C1	C1	C2

Behavior	Never	Sometimes	Frequently
Fighting with siblings	C1	C1	C2
Destroys toys of others	C1	C2	C2
Destroys own toys	C1	C1	C2
Runs away from home-school	C1	C2	C2
Disobeys	C1	C1	C2
Long history of severe behavioral difficulties	C1	C2	C2
Child is a poor loser	C1	C2	C2
Child expresses anger by hurting other's things	C1	C2	C2-3
Child expresses anger by hurting self or something he likes	C1	C2-3	C3
Child has been in trouble with the police	C1	C2	C2
Easily led by peers	C1	C1	C2
Jealousy	C1	C1	C2
Temper tantrums	C1	C1	C2
Doesn't play with other children	C1	C1	C2
Shows off	C1	C1	C2
Severe depressions or withdrawal	C1	C2	C3
Child is good in sports	C2	C1	C1
Shyness	C1	C1	C2
Extreme goodness	C1	C1	C2
Sexual activity with others	C1	C2	C2
Stomach aches	C1	C2	C2
Nightmares	C1	C2	C2
Other sleep or waking problems	C1	C2	C2
Anxiety	C1	C1	C2
Fantasizing	C1	C1	C2
Poor or no eye contact	C1	C2	C3
Child has twitches (eyes, face, etc.)	C1	C2	C2
Crying	C2	C1	C2
Nail biting	C1	C1	C2
Vomiting	C1	C1	C2
Thumb sucking	C1	C1	C2
Aches & pains	C1	C1	C2
Chewing odd things	C1	C1	C2

Behavior	Never	Sometimes	Frequently
Constipation	C1	C1	C2
Diarrhea	C1	C1	C2
Masturbation	C1	C1	C2
Curiosity about fire	C1	C1	C2-3
Plays with fire	C1	C1	C2-3
Panicked when fire got out of control	C2	C2	C1
Fires set some distance from child's home	C2	C2	C1
Child proud or boastful regarding his fire setting	C1	C2	C2
Stares at fires for long periods of time	C1	C2	C3
Daydreams or talks about fire	C1	C2	C2-3
Unusual look on child's face as he frequently stares at fires	C1	C2-3	C3
Family discord	P1	P2	P2
Father or mother absent	P1	P2	P2
Family has moved with child	P1	P2	P2
Child has seen a therapist	C1	C2	C2
Other family member has seen a therapist	P1	P2	P2
Parent has serious health problem	P1	P2	P2
Marriage is unhappy	P1	P2	P2
Mother's discipline is effective	P2	P1	P1
Father's discipline is effective	P2	P1	P1
Unusual fantasies	C1	C2	C3
Strange thought patterns	C1	C2	C3
Speech bizarre, illogical or irrational	C1	C3	C3
Out of touch with reality	C1	C3	C3
Strange quality about child	C1	C2	C3
Self-imposed diets	C1	C1	C2
Sleep walking	C1	C2	C2
Phobias	C1	C2	C2
Fears	C1	C1	C2
Child plays alone	C1	C1	C2

**CHILD INTERVIEW FORM
FOR CHILDREN UNDER SEVEN YEARS OF AGE**

**In order to establish rapport with the child ask
as many of the following questions as necessary.**

1. What is your name? _____
Your age? _____ What grade are you in? _____
2. What do you think of your school? _____
What do you think of your teachers? _____
3. What do you do for fun, do you have hobbies? _____
4. Do you have a favorite TV program? _____ What is it? _____
Who is your favorite person in that show? _____ Why do
you like him/her? _____
5. What does he/she do that makes the show good? _____
6. What food do you like to eat best? _____

When rapport is established, determine level of understanding.

- a. using information gained from rapport session above
- b. using puppets
- c. using toys
- d. using games

If you are satisfied that the child has adequate understanding, proceed with the interview.

7. Who is your friend? _____ What is he/she like? _____
8. What is your favorite thing to do when you play with your friend? _____
9. Does your friend set fires? _____
10. How many fires have you set? _____ Tell me the different things you have set on
fire _____
One _____ (C-1) More than one _____ (C-2)
_____ paper (C-1) _____ child's own property _____ other person's property
(C-1/C-2) (C-2)

- _____ trash (C-2)
_____ leaves (C-1) _____ self, animals, other _____ other (Explain)
people (C-3)
_____ child's room

11. How did you start the fire? _____
 12. Where did you find the ? _____ to start the fire? _____
_____ (if gathered C-2)
_____ found it _____ went out of way to acquire it (explain above) (C-2)
_____ from another child
 13. Who was with you when you started the fire? _____
Name _____
 14. What do you think made you want to start the fire? _____
_____ don't know _____ another child told _____ to see it burn (C-2)
_____ to hurt someone (C-2 or C-3) _____ to destroy something (C-2)
(explain above)
 15. Was the fire set after any of the following? _____ family fight (C-2) _____ being an-
gry at brother or sister (C-2) _____ being angry at a friend (C-2)
 16. Did the fire or fires you have started make you happy or make you laugh?
_____ yes (C-3)
 17. Do you dream about fires at night? _____ yes (C-2)
 18. Do you think about fires in the day? _____ yes (C-2 or C-3)
 19. Can fire do magical things? _____ yes (C-2 or C-3)
- To determine the child's mood, need for affection and security, and coherency of thought
pattern, ask the following questions with regard to family stability and peer interaction:**
20. Do you see your mother a lot, or is she gone a lot? _____ Gone (P-2)
 21. Do you see your father a lot, or is he gone a lot? _____ Gone (P-2)
 22. Tell me about your parents, what are they like? _____
_____ (-)* = P-2

* Indicates negative response

23. Tell me about your brothers or sisters, what are they like? _____
 _____ (-)* = P-2
24. What do you do together with your family? _____ (-)* = P-2
25. Do you fight a lot with your brothers or sisters? ____ (yes = P-2)
26. Do you fight a lot with your mother? ____ (yes = P-2)
27. Do you fight a lot with your father? ____ (yes = P-2)
28. Do your parents fight a lot with each other? ____ (yes = P-2)
29. How do your parents punish you when you do something wrong? _____
 What do they usually punish you for? _____
 Do you feel they punish you more than they should? ____ (yes = P-2)
30. Has anything bad happened at your house lately? ____ (C1-3, P1-3)

Rate Child as Follows:

31. Are child's behavior and mannerisms:
 ____ normal (C-1) ____ troubled (C-2) ____ very troubled (C-3)
32. Is the child's mood:
 ____ normal (C-1) ____ troubled (C-2) ____ very troubled (C-3)
33. Is the child's way of thinking:
 ____ normal (C-1) ____ troubled (C-2) ____ very troubled (C-3)

* Indicates negative response



END