

**ABRAXAS YOUTH CENTER**

**Secure Firesetter and  
Sexual Offender Treatment**

**AYC**



### Abraxas offers specialized treatment for male juvenile firesetters and sexual offenders in a secure residential environment.

With over 15 years of experience treating these youth, we understand and can characterize the primary motivational factors behind juvenile firesetting. At Abraxas we treat many of the co-morbid features of the juvenile firesetter effectively. When we 'treat the whole person,' the risk for recidivism can be significantly reduced. Thus, attention disorders, depression, conduct disorders, and other disorders are treated concurrently with specific firesetting issues. There is a growing body of clinical research on the underlying foundations out of which the most serious and pathological juvenile firesetters arise. These children frequently have developed with issues of early neglect and abuse. Healthy attachment processes are impeded as are the development of more functional self-regulatory abilities. With therapeutic work, the juvenile firesetter can develop more functional patterns and coping strategies.

Juvenile firesetters often have experienced high levels of neglect, as well as abuse. Verbal, emotional, and physical abuse are common. The firesetting youth also exhibits a higher proportion of experiencing sexual abuse than other juveniles as well as victimizing others sexually. For this reason, sex offender treatment is also a part of the treatment milieu.

When attachments are damaged by abuse or children are over sexualized, they often fail to learn appropriate boundaries and fail to understand reciprocal relationships, and as a result can engage in inappropriate sexual behaviors resulting in adjudication. Often times these youth use sex to solve problems resulting in the need for individualized treatment plans and groups that target trauma recovery and offense specific treatment. In addition, evidence based curricula such as ART®, Botvin LifeSkills Training, Cognitive Behavior Therapy, and Thinking for a Change assist with the formation of pro-social skills and attitudes.



## ADMISSION CRITERIA

- Delinquent male youth ages 12 to 18
- IQ of 70 or above preferred, however others will be reviewed on a case-by-case basis

## CLINICAL SERVICES

The program is based on a four phase curriculum:

- Phase I:** Introduction, Disclosure of problematic behaviors and Fire Safety Training
- Phase II:** Critical Beginning Skills (Impulse Control and Affect Management)
- Phase III:** Critical Intermediate Skills (Criminal Personality Theory, Cognitive Distortions, Moral Reasoning, and Developing Empathy)
- Phase IV:** Critical Advanced Skills (Triggers and Cues, Victim Cycles, and Relapse Prevention)

Upon admission and prior to discharge, every youth receives a psychiatric evaluation. Various evidence and competency based curricula are utilized throughout the course of treatment.

- Aggression Replacement Training (ART®)
- Pathways
- The Good Lives Model
- Pennsylvania Victim/Community Awareness
- Cognitive Behavioral Therapy
- PTSD Residential Treatment Curriculum
- Thinking for a Change
- Botvin LifeSkills Training
- Casey Life Skills
- Healthy Masculinity
- SELF - Psycho-Education

Residents participate in daily group counseling and have individual sessions once a week with a counselor and bi-weekly with a clinician. The program offers an individualized emphasis on trauma recovery and issues related to PTSD.

## ASSESSMENTS

- FRAT-Y – Firesetting Risk Assessment Tool for Youth
- ERASOR: Estimate of Risk of Adolescent Sexual Offense Recidivism - Sexual Offender specific
- Casey Life Skills
- MAPP: Multidimensional Addictions and Personality Profile – Addiction
- Transitions to Work Inventory
- Psychiatric evaluation at intake and discharge

# DIFFERENT firesetters require DIFFERENT treatment approaches; this is NOT a 'one size fits all' clinical population.

*Abraxas Youth Center offers a residential diagnostic evaluation to examine firesetting risk and appropriate treatment interventions, as well as long term treatment options based on a 52 week core group curriculum.*

## Juvenile firesetters are a high risk population in several different ways.

Juvenile firesetters do considerable damage to their communities.  
Children "playing" with fire start over 100,000 reported fires annually in the US.

The monetary damages that result from juvenile set fires are substantial.  
Fire protection costs and property loss attributed to fires set by youth exceeds \$350 million dollars annually.  
Annually, Juvenile firesetters cause more damage than all other natural disasters combined.  
55% of all arson arrests in the U.S. are children under the age of 18.

Fire can and does lead to serious injury or even death including both to innocent victims as well as firefighters.  
1 in 3 children who die in fires, die in a fire they started.

Firesetting also is frequently a precursor to significant criminality.  
Worse yet, it is true that very violent criminals have had histories of juvenile firesetting, a proposition proven in retrospective studies of some of the most notorious offenders.

The below listed juvenile firesetter typology can be used to help recognize behaviors and begin to identify treatment needs. Effective outcomes are even more frequent when we carefully match treatment intensity to the seriousness of the juvenile firesetter's problems.

TYPES	CHARACTERISTICS	TREATMENT NEEDS
<b>Curious or Accidental</b>	Younger children who do not understand the basics of fire such as it hurts, it spreads, etc.	Fire Safety Education, including their caretakers (when possible). Possible counseling/therapy to help the child deal with the impact of their fire when indicated.
<b>Crisis/Cry for Help</b>	Children who use firesetting as a method (however distorted) to manage or resolve a crisis situation. Either they do not know how to get help or have psychological impediments to getting help.	Fire Safety Education, social service and/or counseling/therapy to resolve the underlying crisis. Relapse prevention so that future crisis situations do not lead to firesetting recidivism.
<b>Delinquent</b>	Usually middle school aged, these children derive pleasure from their intent to be destructive and the anti-authority aspect of setting a fire. Usually set fire with peers.	Implementation of legal and financial consequences. Education regarding other potential and realistic consequences. Balanced and Restorative Justice initiatives such as restitution, containment when safety needs to be ensured and possible highly structured residential care in more serious cases.
<b>Revenge*</b>	Children, usually teenagers, who use fire to obtain revenge. This is easy to ascertain when the revenge is direct but more difficult to discern when the target is random.	Consequences for setting the fire are necessary. Residential care is often necessary. Treatment should focus on down regulation of anger as well as exploration of other underlying emotions that magnify anger (fear, shame, hurt, etc).
<b>Maladaptive Coping*</b>	For these teenagers, firesetting becomes a solution to feelings of alienation, poor self-esteem, anxiety, and the like.	Residential care is frequently indicated. Work must focus on removing fire from being a solution to in-depth psychological problems. These problems will also require considerable clinical work.
<b>Fire Fascination*</b>	These teenagers have almost always had an interest in fire as youngsters and, as they develop, their interest in fire grows with them to become quite unhealthy. They psychologically 'light up' when seeing or thinking of fire.	Residential care is usually required. These teenagers need to be externally curtailed from stimulating their fire interest until they can quell this fascination internally. They require considerable clinical care.
<b>Thrill Seeking*</b>	These teenagers get equal enjoyment from their firesetting as they do from their attempts to elude being caught. Their firesetting usually rapidly progresses to become more and more serious.	Highly structured residential care is mandated to interrupt their progressive firesetting and to clinically deal with underlying issues.
<b>Complex Firesetters*</b>	These teenagers will have a combination of types of firesetting sub-types. They thus have an all too high psychological interest in firesetting and use fire to regulate themselves in complex ways.	Highly structured residential care with intensive clinical care is necessary.



## EDUCATIONAL SERVICES

All residents attend school year-round at our private, licensed on-site school. We offer a full range of Special Education services. Many residents are able to make up education deficits (credit recovery) and progress more quickly than they have in the past. Core subjects include: English, Language Arts, History, Mathematics, Physical Education and Health, Science, and Life Skills. Smart Boards are used in every classroom and the on-site computer lab helps increase each resident's computer skills. Residents are strongly encouraged to set and meet high academic standards. Additional tutoring is available from the teachers for those who need it. Students are rewarded for academic accomplishments and positive behavior. Both diploma and GED tracks are offered. PSAT and SAT testing is also available.

## CAREER & TECHNICAL EDUCATION

- Certification in Microsoft Word, PowerPoint, Excel, Access and Outlook
- O\*NET career aptitude assessment tool

All students will complete a portfolio and take it with them at discharge.

Portfolios will include:

- All certifications received
- Competency Lists
- Resume
- Evaluations

## FAMILY INVOLVEMENT

- Families are encouraged to visit on a bi-weekly basis and transportation assistance is available.
- Families are invited to participate in Individual Service Plan meetings and therapeutic family sessions.
- Families receive weekly phone calls and monthly reports.
- Residents can earn a home pass during the final phase of the program with Court approval.

## RESTITUTION & COMMUNITY SERVICE

We offer opportunities for both restitution and community service. Residents engage in community service activities with such groups as the National Fire Academy, Gettysburg Battlefield and a local Therapeutic Riding Center. Youth who owe restitution can participate in the restitution program if their behavior warrants it and can earn up to \$250 annually.

Residents are required to develop and present a BARJ Project to their treatment team and peers, and when permitted, they present to their referral agency or other outside groups.

## DISCHARGE PLANNING / REINTEGRATION

- The final phase of treatment is 'Planning & Relapse Prevention' but discharge planning starts from day one. Counselors work with the placing agency to gain information on reintegration services available in the area.
- The program staff makes recommendations and can assist in finding step-down facilities for residents.
- Abraxas staff conducts both 30 day and quarterly follow ups with clients up to 2 years post discharge.



**Abraxas**  
a GEC Group Company®

**FOR MORE INFORMATION:**

Contact your local Client Relations Liaison or email us at [info@abraxasyfs.com](mailto:info@abraxasyfs.com)

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Abraxas Youth Center is licensed by The Commonwealth of Pennsylvania Department of Human Services, accredited by the Middle States Association of Colleges and Schools and the National Commission on Correctional Health Care and partnering with the Sanctuary Institute for clinical and organizational change.