



King's Research Portal

DOI:

[10.1177/1362361316685554](https://doi.org/10.1177/1362361316685554)

Document Version

Peer reviewed version

[Link to publication record in King's Research Portal](#)

Citation for published version (APA):

Helverschou, S. B., Steindal, K., Nøttestad, J. A., & Howlin, P. (2017). Personal experiences of the Criminal Justice System by individuals with autism spectrum disorders. *Autism*. Advance online publication. <https://doi.org/10.1177/1362361316685554>

Citing this paper

Please note that where the full-text provided on King's Research Portal is the Author Accepted Manuscript or Post-Print version this may differ from the final Published version. If citing, it is advised that you check and use the publisher's definitive version for pagination, volume/issue, and date of publication details. And where the final published version is provided on the Research Portal, if citing you are again advised to check the publisher's website for any subsequent corrections.

General rights

Copyright and moral rights for the publications made accessible in the Research Portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognize and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the Research Portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the Research Portal

Take down policy

If you believe that this document breaches copyright please contact librarypure@kcl.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.

Personal Experiences of the Criminal Justice System by Individuals with Autism Spectrum Disorders.

Helverschou SB, Steindal K, Nøttestad JA, Howlin P.

Date accepted 24 November 2016

Abstract

The processes of arrest, investigation, trial and imprisonment are considered extremely difficult for individuals with Autism Spectrum Disorders (ASD).

In the present study nine offenders with ASD were interviewed about the circumstance surrounding the criminal acts, their views of the arrest, the police interrogation, the trial and the defence, and their experiences of being in prison and/or life following the offence.

The nine individuals described a range of different, and often negative experiences with the CJS but the majority of those given a custodial sentence coped well in prison, probably due to the high levels of structure and firm frameworks in that environment. ASD characteristics such as misunderstandings, obsessions and idiosyncratic beliefs and/or behaviours were frequently involved in the offences, but stress was the most common explanation provided by the participants. The findings suggest limited understanding of ASD within the CJS which needs to be significantly improved in order to secure their legal protection.

Introduction

There is limited understanding of Autism Spectrum Disorders (ASD) within the field of forensic psychiatry (Freckelton and List, 2009; Helverschou et al., 2015) and contact with the Criminal Justice System (CJS) are assumed to be extremely difficult for individuals with ASD (Allen et al., 2008; Underwood et al, 2013). Abnormalities in social interaction, communication and imagination (WHO, ICD-10; APA, DSM 5) that characterise individuals with ASD may increase their vulnerability for becoming both a victim of crime and an

offender. Social naiveté, limited empathy, lack of understanding of social situations, impairments in moral reasoning, emotional dysregulation, obsessional interests, disturbance caused by disruption of routines, and failure to recognize the implications of their behaviour have been suggested as possible risk factors for criminal behaviour (Howlin, 2004; Learner et al., 2012; Wing, 1981). Similarly, ASD characteristics such as communication deficits, interpretation and comprehension problems, difficulties in unfamiliar situations and emotional dysregulation may lead to misunderstandings, confusion, and fright the processes of arrest, investigation, trial and imprisonment (Allen et al., 2008; Freckelton and List, 2009; King and Murphy, 2014).

Studies of the relationship between criminality and ASD have mainly focused on prevalence and types of offences and the characteristics of offenders. Conflicting data have been reported in the pattern of offending in ASD, with some finding diminished likelihood of committing certain types of crimes such as probation violations and property offences (e.g., Cheely, Carpenter, Letourneau et al., 2012; Kumagami & Matsuura, 2009), others have reported they are more likely to commit other types of offences such as arson (Hare, Gould, Mills et al., 1999; Haskins & Silva, 2006; Mouridsen, Rich, Isager et al., 2008; Mouridsen, 2012), sex offences (Cheely et al., 2012; Kumagami & Matsuura, 2009), assault and robbery (Cheely et al., 2012). These contradictory findings may mainly be explained by methodological limitations in the studies, such as biased and small samples, lack of control groups and inadequate methods for diagnosing ASD in adults (King and Murphy, 2014; Underwood et al., 2013). However, most evidence suggests that individuals with ASD are less likely to offend than their peers of the same age and gender (Bjørkly, 2009; Cashin and Newman, 2009; King and Murphy, 2014). And yet, relatively little is known about the circumstances of offending in this group (Helveschou et al., 2015).

Studies of offenders with ASD have generally identified few specific characteristics. For example, there are no clear differences in cognitive profiles or Theory of Mind difficulties between offenders and non-offenders with ASD or between offenders with ASD and individuals with personality disorder or schizophrenia (King & Murphy, 2014; Woodbury-Smith & Dein, 2014). Both offenders and non-offenders with ASD tend to have low educational and employment levels and limited social networks outside the family (Brugha et al., 2011; Helverschou et al., 2015; Howlin & Moss, 2012). These characteristics are also associated with non-ASD offenders (Friestad, 2010), as are risk factors such as psychiatric comorbidity and adverse childhood experiences (Helverschou et al., 2015; Kawakami et al., 2012; Kumagami & Matusuura, 2009). In contrast to offenders without ASD, only a small proportion of those with ASD tend to abuse drugs, although the risk of offending may be particularly high in those who do (Helverschou et al., 2015; Sizoo et al., 2009; Stoddart et al., 2012; Woodbury-Smith et al., 2010). Thus, it is uncertain whether there are evident differences between offenders with ASD and individuals with ASD who have not committed criminality, and whether ASD offenders differ from non-ASD offenders (Helverschou et al., 2015).

There has been little research on the experience of people with ASD themselves in the CJS (King and Murphy, 2014). Allen et al. (2008), in a Welsh study of individuals with Asperger syndrome who had committed serious crimes, including murder and sexual assault, identified a wide range of triggers such as agitation, impulsivity, substance abuse, family conflict, mental health problems, work difficulties and bereavement. Lack of concern for or lack of awareness of the consequences of the crime, social naivety, misinterpretation of rules and overriding obsessions were also predisposing factors. Six individuals who were interviewed in detail about the reasons for the offence also reported “an accumulation of stress” as being the most frequent antecedent. Although most of these individuals experienced

the Criminal Justice System (CJS) as frightening, stressful and confusing, their views of prison were more variable. Negative experiences included missing family, being bored, not knowing what to expect, but there were also positive aspects such as having more structure and less free time.

A case study of two prisoners with Asperger syndrome reported problems following prison routines and isolation from other prisoners used as a strategy to avoid bullying (Paterson, 2008). Newman, Cashin & Waters (2015) examined the lived experiences of eight prisoners with ASD and reported difficulties of being in an unpredictable environment characterised by ever-changing routines and complex social situations.

In a case-report study of 48 individuals with ASD who had been examined by forensic psychiatric experts in Norway (Helverschou et al., 2015), no direct association between ASD characteristics and the criminal acts could be identified. However, in most cases features such as obsessions, or idiosyncratic beliefs and/or perceptions of their actions, appeared to be related to the offence. In contrast to the findings of the UK study (Allen et al, 2008), none of the Norwegian forensic experts identified stress as a predisposing factor. These findings were based on reports from forensic experts, thus, it would be useful to explore whether these predisposing factors correspond to those described by the individuals themselves.

In order to try to prevent people with ASD from offending, and to plan appropriate services for those who have committed crimes, it is important to understand more about those who do offend. Research in prison populations is difficult, due to inadequate methods for diagnosing ASD in adults (King and Murphy, 2014; Newman, Cashin & Waters, 2015). A qualitative approach seems appropriate based on present knowledge status and available methods. Thus, the present study sought to explore in more detail the subjective experiences of individuals with ASD who had been involved with the CJS in Norway. (see Recruitment below). Participants were interviewed to explore the participants' personal experiences

regarding: the reasons underlying their offending behaviour and their understanding of the offence; the arrest and police interrogation procedures; trial; prison; and life after the offence.

Method

Recruitment of participants

This was a follow-up of a previous study (Helveschou et al., 2015). Participants were recruited from a study of *all* offenders (n=48) with a diagnosis of ASD who had undergone a forensic psychiatric examination in Norway, between 2000 and 2010, because of the seriousness or unusual nature of their crime. In the former study, the forensic examination data were abstracted from records stored in the archives of the Norwegian Board of Forensic Examination and the study was approved by the regional Committee for Medical and Health Research Ethics and the Ministry of Justice. Access to Norwegian psychiatric forensic reports is highly restricted, and the authorisation to perform a follow-up and interview a subsample of the original participants imposed even more restrictions. Initial contact with participants was allowed only via professionals working in prisons or health services which excluded contact with half the sample who were not provided with any public services. Among the 48 participants in the original sample, only 12 individuals were asked to take part because these were the only ones we were able to locate and whom professionals considered appropriate to interview. Of these, four refused participation, primarily because they or their relatives wanted to “leave the criminality behind”; eight individuals consented and an additional participant who had been diagnosed with ASD while in prison was also recruited. Thus, the present sample comprises nine highly selected individuals with ASD who had committed one or more criminal acts. Because of their vulnerability and the unusual nature of some of their crimes, certain individual details (exact age, place, description of offence) have been slightly modified to preserve anonymity.

Participants

The final sample comprised eight men and one woman. Mean age at the time of interview was 34 years (range 21-50 years; SD 9.5); mean age of ASD diagnosis was 22.6 years (range 10 - 39 years; SD 9.0). The participants had been diagnosed with ASD by forensic psychiatric professionals or previously by child and / or adult mental health services according to ICD-10 criteria (WHO, 1992). Four participants had been diagnosed with ASD prior to the offence; four were diagnosed during the forensic psychiatric examination; one was diagnosed while in prison. All the men were diagnosed with Asperger syndrome; the female had a diagnosis of ASD and Intellectual Disability (ID). Occupational and educational levels were low; only one person had completed secondary school and only two had ever had paid employment (four were or had been in sheltered employment; three had never worked). Five individuals had been diagnosed with a co-morbid psychiatric disorder by the forensic experts (one with personality disorder, four with affective disorders); two participants, both of whom also had an affective disorder, were diagnosed with a substance abuse disorder.

At the time of interview four participants lived in sheltered homes run by the municipality, one lived in a forensic mental health security ward, and one was in special residential accommodation for individuals with mental health problems. Three participants were in prison at the time of interview. Previously, three of the others had served a prison sentence.

Interview process

Semi-structured interviews were conducted by K.S. and S.B.H. who are professionals with long experience in the field of ASD. K.S. primarily asked the questions and S.B.H. made notes. Additional questions were asked by both interviewers when needed and follow-up questions were specific to the individuals' responses. Interviews were conducted in

participants' place of residence (prisons, secure hospital, mental health services, or sheltered homes). The semi-structured interview consisted of broad, open-ended questions that covered the following topics:

- 1) The type of crime committed (what was done; was it planned, regretted, committed under the influence of drugs or alcohol, undertaken alone; what were the precipitating factors; did participant understand the act was illegal; what circumstances might have prevented the crime).
- 2) The arrest and police interrogation (how did the police behave; understanding of what was happening; participant's response; was crime admitted)
- 3) Experience of the trial (quality of help from the defence lawyer; understanding of court procedures; opportunity to present own case; emotional responses)
- 4) Experiences in prison (negative and positive aspects; activities provided; interactions with other prisoners)
- 5) Life after the offence (accommodation and employment; support from family, friends, other services)

Each interview lasted from one to two hours.

Data analysis was guided by the realistic framework approach developed by Miles and Huberman (1994) for robust use of qualitative methods (Robson, 2000, Silverman 2005) and consisted of the following steps: 1) Participants' answers were transcribed at the time of the interview by S.BH. (Recordings were not used to reduce stress by the participants.) 2) Immediately post-interview K.S. read through each transcript and if necessary included supplementary comments. 3) Agreement between both interviewers (KS, SBH) about the accuracy of the transcript was established immediately after each interview (cf. Bradley, Curry and Devers, 2007). 4) Subsequently, transcripts were reviewed to identify central themes at a latent level and classify participants' responses in codes. An integrated approach

which indicates a combination of inductive and deductive method for establishing codes was used (c.f. Miles and Huberman (1994). Coding was completed initially by S.B.H then recoded individually by K.S. Full agreement between the two raters was obtained. Therefore, inter-rater reliability was not calculated. 5) Finally, all coding based on the interview transcripts were again checked and discussed between the three first co-authors and illustrative quotations were identified. The fourth co-author (PH) supervised the process.

Eight of the participants had previously been examined by psychiatric forensic experts (Helverschou et al., 2015) who, at the time of that examination, had also rated individuals' motives and explanations for the crime. The principal reasons identified in the psychiatric reports were: social misunderstandings, idiosyncratic rationalisations/explanations, obsessions and/or special interests, social naiveté, and revenge. These categories were not mutually exclusive and each index crime was found to have more than one possible explanation/motive, resulting in more than one rating for each participant. In the present study, these ratings were compared with the answers provided by the interviewees themselves.

Results

Types of crime

The nine participants had committed six different types of offences: arson (n=3), violence (n=3), murder (n=2), sexual offences (n=2), fraud (n=1), drink- driving (n=1). Three participants had committed more than one type of crime. Seven individuals had committed similar offences several times, and two had previous convictions; for two participants this was their first offence.

Individuals' own explanations and views of the offence

Four participants reported that they had planned the crime; five said that it had happened accidentally. Six individuals still did not seem fully to understand that they had done anything wrong. For example: “*I only wanted to make friends with one of the staff, but they said it was wrong, and I was provoked*” (participant 4); “*I do not really understand why I did it, but I had to fulfil my plan*” (participant 3).

Six participants said they regretted their offence but only one expressed serious regret: “*Nothing can justify what I did, and no conviction can put right what I did*” (participant 8, murder). Most said they would try to avoid offending in future but two participants admitted that they would probably do the same again if similar circumstances arose. A third participant said he enjoys committing the offences; indeed these are his special interest and excitement in life and he plans to continue even if he has to go to jail again (participant 2, fraud).

In total, participants provided seven different explanations for the criminal acts and some gave more than one explanation (see Table 1). Comparison between the explanations given by participants themselves and the explanations based on the forensic reports (see Helverschou et al, 2015) revealed a number of differences. In particular, although stress and excitement were not among the explanations recorded by the forensic reports, in the interviews stress was given as an explanation by five participants and excitement by three.

Circumstances of the crime

Eight individuals said they had committed the crime alone; one who had acted together with others and had a minor role in the primary crime, reacted with greater agitation than the rest when the police arrived, and was given the most severe sentence. He felt he had unfairly taken all the blame. Only two participants were under the influence of alcohol at the time of the crime; both claimed that intoxication was an important factor in the offence and one admitted that abuse of alcohol was his main problem. The remaining seven participants were very

offended when asked about the possible influence of drugs or alcohol, insisting that they never used either, or, if they did drink, this was very seldom and with care.

Understanding of the crime

Eight participants agreed that they had committed a criminal act and seven thought the criminal act was both serious and illegal; the other admitted that what he did was illegal but he did not consider it a serious offence and showed no understanding of how his behaviour had affected the victims (fraud). The remaining individual did not consider that he had done anything wrong and complained that he had been unfairly arrested.

Possible ways of preventing the crime

Four participants answered that talking with somebody, care staff or family, particularly about their problems, ideas, or the stress they experienced prior to the criminal act could have prevented it. Two could not think of anything that might have prevented the crime, and two participants identified external factors: “*It was convenient because I was in the neighbourhood and to prevent the crime I would had to travel another route*” (participant 6); “*I was restless and bored because I had to have a holiday from work. I always get restless when not occupied and the crime would not have happened if I had had a full-time job*” (participant 9).

Experiences with the arrest and trial proceedings

Response to the arrest

Six participants said that they understood why the police had been called, that they had been well treated when arrested and that the police had listened to their explanations; however, one complained that his ASD was not taken into consideration. In contrast, two participants had panicked and fought with the police when they arrived and they were then isolated after their arrest. Both claimed they did not understand why the police came; that they not were given

any explanation, and were not given an opportunity to explain what had happened concerning the offence although they later agreed that they had been involved in criminal activity. Six individuals made full and immediate confessions of the offence when arrested; a typical answer being: *“I confessed it all but the police had not found out everything, so I had to tell about all the criminal incidents.”* (participant 2).

The trial

Seven individuals thought that their conviction was fair and all had had a defence lawyer during the trial. Although most said their defence lawyer was pleasant none felt that their case had been fully represented (i.e. the defence lawyer had not tried to understand their version of events and/or the arguments presented by their lawyer did not help to enlighten the court about their own views of the circumstances of the crime. One participant who experienced being unfairly treated also complained that his defence lawyer did not keep track of the time limit for appeal.

Four participants reported that they had understood what was happening during the trial and that it was conducted in an acceptable way. Nevertheless, they felt that they had not had enough time to explain the circumstance surrounding the criminal act. For example: *“It was more serious than in movies”* (participant 4). *“It was ok, but I was not capable of following everything that happened and my statements to the police were read out in court”* (participant 6). *“I was interrupted when I was supposed to give testimony in court. The judge claimed that everything was explained earlier during interview with the police, and I was not given the opportunity to explain my behaviour properly”* (participant 7). The remaining five experienced the trial as very challenging and stressing: *“People in my home town wanted me sent away”*(participant 3); *“I was afraid all the time, sweated heavily, and just wanted to finish as fast as possible”* (participant 9); *“It was terrible in court with a lot of people present.*

I was not able to explain myself because I find it difficult to answer properly with many people present. For me it is better to write.”(participant 8).

Experiences with prison

Coping and prison activities

All six participants who were or had been in prison answered that they coped well. Two said it was just “okay” but four reported that they enjoyed the firm structure and the routines: “*I enjoyed myself in prison, and that is in contrast to what the forensic experts said, who claimed that prison would be bad for me*” (participant 6); “*Prison suits me; structure and firm frames. I am an exemplary prisoner*“ (participant 9). Other positive aspects were the activities on offer, such as opportunities for working, studying, and leisure. All six of these individuals were engaged in work or were studying. When asked about negative aspects of prison one participant could not describe anything he disliked; he had work he loved and was left alone when he wanted. The remainder noted loss of freedom to move around; limited contact with family and worry about what would happen after their release.

Interactions with other prisoners

Five of the six individuals who had been in prison described some interaction with other prisoners, but only with those who were specially selected by prison authorities, such as people who were calm, quiet or also had ASD. One individual preferred to be alone most of the time but the rest enjoyed activities with other prisoners (e.g. sports, watching movies, playing games, cooking). Most participants stressed that they did not feel confident with non-ASD prisoners and felt different from them. For example: “*Yes, I am different and that is the same everywhere and throughout my whole life*” (participant 9). Another said: “*I do not mix with criminals*” (participants 7). Five said that they had not experienced bullying, but the

individual who preferred to be alone described teasing and negative comments from other prisoners.

Life after the offence

Accommodation and employment

The four participants living in sheltered accommodation said they wanted this to continue, and three reported being afraid of losing their flat and their belongings if they committed further crimes. *“I get a lot of support from professionals in my municipality and by my parents to behave properly, and I am afraid to disappoint them”* (participants 5). One, who is waiting for a new trial, thinks his life will continue in the same way: further criminal acts, prison, and then back to the sheltered home. The others reported wanting to have a flat of their own although the two in the most secure settings realised this might not happen. One said: *“I do not expect any changes from how I now live, but hate being controlled by staff once I am outside the flat”* (participant 6, sheltered home provided by private organisation in association with mental health services). Two participants, currently in prison, wanted a job after their release. One has previous experience of being employed; the other is studying for qualifications in prison so that he will be able to work after release.

Family and other contacts

Seven participants reported having regular contact with their family; two who have very frequent contact described how important their family was for keeping them cheerful and “on track”. The others had less frequent family contacts. One reported missing contact with siblings, but said: *“They have children now and are afraid of what I might do to them”* (participant 1). Another said: *“I do not want contact with anybody outside prison, neither my parents nor siblings who never have understood me, or with my ex fiancé and mother of my children.”*(participant 9). The ninth participant had no contact with family. Most individuals

also had very limited social networks. Two reported having a friendship with one person outside the family; another described professionals from previous services as his friends.

Discussion

This study was a qualitative investigation of the experiences of nine individuals with ASD who had committed criminal offences. There has been published little research on the experience of people with ASD themselves in the CJS (King and Murphy, 2014). The present study adds to the few previous reports from small samples of offenders with ASD and both support, impart nuances to and partly contradict previous findings.

In line with previous reports (Allen et al., 2008; Browning and Caulfield, 2011; Helverschou et al., 2015) the interviewed individuals in the present study reported various and many negative experiences with the criminal justice system (CJS). However, all six participants who had experienced custodial sentences coped well in prison. Although some positive aspects of prison also have been reported by Allen et al. (2008) this finding is somewhat surprising. It may indicate that prison offered an environment that had not been provided previously, such as structure, predictability, and organised activities. Clearly, not all prisons offer such opportunities and, as reported in other studies (Allen et al, 2008; Underwood et al., 2013), several negative aspects of being in prison were also reported. Nevertheless, it is a sad indictment of the services and support available in the community that, for so many, prison was viewed as a mainly positive experience.

Factors underlying the offending

In accordance with previous reports (see King and Murphy, 2014; Murrie et al., 2002; Woodbury-Smith and Dein, 2014) ASD characteristics such as comprehension problems, misunderstandings and obsessions were among the most common factors underlying the

offences. Stress was also a significant precipitant, as found by Allen et al. (2008). However, it was notable that the explanations provided by participants themselves often differed from the reasons proposed by the forensic experts. These discrepancies may be related to differences in perspective and experience but may also indicate a lack of understanding of individuals with ASD by forensic services (Helverschou et al., 2015).

Finally, the finding that most participants immediately confessed to the crime, and some admitted even more offences than they had been accused of, has also been noted by others (Allen et al., 2008; Helverschou et al., 2015; Freckelton and List, 2009; King and Murphy, 2014). The fact that individuals with ASD may be more eager to please or to avoid conflict and confrontation than controls, and may be more prone to respond compliantly to requests and demands, also raises the possibility of increased vulnerability to pressure in situations such as forensic interrogation (North et al., 2008).

Experiences with the Criminal Justice System

As well as their increased tendency towards compliance (North et al., 2008), suspects with ASD may be particularly vulnerable during police questioning because of their interpretation and comprehension problems and their difficulties in unfamiliar situations (Allen et al., 2008; Underwood et al., 2013). The findings of the present study raise further concerns about their vulnerability within the CJS. Several individuals remained confused, either about the reasons for their arrest or about the trial proceedings, and none felt that their defence lawyer fully understood them or presented their case well. Some individuals still failed to recognise the seriousness of their crimes. Participants' descriptions of their contact with the CJS reflect previous reports (Browning and Caulfield, 2011; Freckelton and List, 2009) and indicate a legal protection issue, highlighting the need for guidelines for police and the CJS when they

come into contact with individuals with ASD (e.g. Debbaudt, 2002; The National Autistic Society, UK, 2011).

Clinical and service implications

The social vulnerability of the present sample was evident; educational and employment levels were low, rates of psychiatric disturbance were high, participants had limited social networks outside the family and were highly dependent on service providers. This is in line with reports from other adult ASD cohorts (Brugha et al., 2011; Howlin & Moss, 2012). Such vulnerability is also associated with non-ASD offenders (Friestad, 2010) which give rise to question if offenders with ASD in many respects just are like offenders in the population more generally.

The importance of support from care staff, professionals and family was emphasised by most participants and such support may be vital in order to prevent re-offending. Participants expressed a need for someone to talk to about their personal problems, stress and obsessional ideas. In addition, being provided with good residential accommodation and having access to treasured daily activities may also increase motivation to avoid further offending. The one participant who expects to continue his criminal behaviour, for example, was provided with particularly inadequate services.

Of particular concern was the late diagnosis of ASD for most of the participants in the present study. Earlier identification, together with adequate services and support might have prevented at least some of the offences. Also disturbing is the fact that, of the 48 individuals with ASD who had initially undergone forensic examination, 31 could not subsequently be located and nine others were protected by professionals and care staff from participation in order not to trigger new criminal acts. Such individuals may have even more severe

difficulties in coping post-conviction and thus learning about their experiences and needs could prove particularly important in helping them better to manage their lives.

It has been suggested that those individuals who have difficulties recognising that they have done anything wrong, cannot explain why they committed the crime, and fail to understand the consequences for their victims, have more severe ASD deficits, including intense preoccupations and narrow interests and greater impairments in Theory of Mind (Haskins and Silva, 2006; Murrie et al., 2002). Many of these offenders may be helped to avoid future crimes by the provision of comprehensive services including psycho-education, stress and anger management, and adequate residential, care and support services. Nevertheless, there may be some offenders with ASD whose problems are so profound and whose crimes are so severe that they may require much more intensive supervision in order to keep them and/or others safe, and to prevent further criminal acts.

The findings of this and other studies highlight the need for significant improvements in how the police and the criminal justice system respond to offenders with ASD (Browning and Caulfield, 2011). The National Autistic Society, UK (2011) and Debbaudt (2002) have listed a number of practical recommendations for police officers and criminal justice professionals who may come into contact with individuals with ASD. Unnecessary misunderstandings, anxiety and violence could be avoided if the police and the CJS, in all countries, can learn more about ASD and how to approach and talk to individuals with this condition. Furthermore, the positive experiences with prison reported by the present sample, may indicate that organising prison facilities adjusted to ASD including smaller groups with specially selected others prisoners, adjusted activities and structure and predictability may reduce the previously reported burden of prison (e.g. Allen et al., 2008; Newman, Cashin & Waters, 2015; Paterson, 2008).

Study limitations

Although the findings have significant implications for care within the CJS, the study has a number of limitations. Firstly, it is important to recognise that this small and highly selected sample may not be representative of other adults with ASD who have committed crimes; neither may their experiences reflect those of other offenders with ASD. Secondly, sample size is very small and, in the absence of a control group, we do not know whether the negative experiences with the CJS reported by the participants differ from those of non-ASD offenders. Finally, the data are based on participants' subjective reports and their own versions of events may not necessarily accord with the descriptions given by others. Thus, the findings should be interpreted with caution and larger studies including appropriate control groups, and conducted in different countries are clearly warranted.

Conclusion

Within this small and highly selective sample, offenders with ASD described varied and often negative experiences with the criminal justice system. ASD characteristics such as misunderstandings, obsessions and idiosyncratic beliefs and/or behaviours were frequently involved in the offences, but stress was the most common explanation provided by the participants. The findings suggest limited understanding of ASD within the CJS which needs to be significantly improved in order to secure their legal protection. Nevertheless, the majority of those given a custodial sentence coped well in prison, probably due to structure and firm frameworks and smaller units with prisoners with similar needs and behaviour.

The findings also suggest that the offenders were highly vulnerable and isolated adults who were very dependent on service providers and family. Several participants showed little understanding of their actions or the impact of their crime on others. Most participants expressed the need for adequate living conditions, meaningful activities and support from family and professionals in order to prevent future criminality.

Acknowledgement

We want to thank all participants who took their time and dealt their narratives. They all expressed hope that sharing their stories might improve the conditions for individuals with ASD who might come in contact with the CJS in the future. Thanks also to professionals in health care and prisons who have helped with getting in contact with participants.

References

Allen D, Evans C, Hider A, Hawkins S, Peckett H and Morgan H (2008) Offending behaviour in adults with Asperger syndrome. *Journal of Autism and Developmental Disorders* 38 (4): 748-758.

American Psychiatric Association (2013) *Diagnostic and statistical manual of mental health disorders* (5th ed) Washington, DC : Author.

Bjørkly, S (2009) Risk and dynamics of violence in Asperger's syndrome: A systematic review of the literature. *Aggression and Violent Behavior* 14 (5):306-312.

Bradley E H, Curry L A and Devers K J (2007) Qualitative data analysis for health services research: Developing taxonomy, themes, and theory. *Health Services Research* 42(4):1758-1772.

Browning A and Caulfield L (2011) The prevalence and treatment of people with Asperger's syndrome in the criminal justice system. *Criminality & Criminal Justice* 11(2): 165-180.

Brugha TS, McManus S, Bankart J, et al., (2011) The epidemiology of autism spectrum disorders in adults in the community in England. *Archives of General Psychiatry* 68 (5):459-466.

Cashin A and Newman C (2009) Autism in the criminal justice system: A review of the literature *Journal of forensic Nursing* 5 (2):70-75.

Cheely CA, Carpenter LA & Letourneau E J, Nicolas JS, Charles J, King LB (2012) The prevalence of youth with autism spectrum disorders in the criminal justice system. *Journal of Autism and Developmental Disorders*, 42(9):1856-1862.

Debbaudt D (2002) Autism, advocates, and law enforcement professionals. Recognising and reducing risk situations for people with Autism Spectrum Disorders. London: Jessica Kingsley.

Freckelton I and List D (2009) Asperger's disorder, criminal responsibility and criminal culpability. *Psychiatry, Psychology and Law* 16 (1):16 - 40.

Friestad C (2010) Socio-economic status and health in a marginalized group: the role of subjective social status among prison inmates. *The European Journal of Public Health* 20 (6): 653-658.

Grøndahl P (2005) Scandinavian forensic psychiatric practices – an overview and evaluation *Nordic Journal of Psychiatry* 59 (2): 92-102.

Hare DJ, Gould J, Mills R, & Wing L (1999) *A preliminary study of individuals with autistic spectrum disorders in three special hospitals in England*. London: National Autistic Society/Dept. of Health.

Haskins BG and Silva JA (2006) Asperger's disorder and criminal behavior: Forensic-psychiatric considerations. *American Academy of Psychiatry and Law* 34 (3): 374-384.

Helverschou S B, Rasmussen K, Steindal K, Søndanaa E, Nilsson B, Nøttestad J A (2015). Offending profiles of individuals with ASD; a study of all individuals with ASD examined by the expert forensic psychiatric service in Norway between 2000 and 2010. *Autism*, Special Issue Article, 19 (7): 850-858.

Howlin P (2004) *Autism: Preparing for adulthood* (2nd ed) London: Rutledge.

Howlin P and Moss P (2012) Adults with Autism Spectrum Disorders. *Canadian Journal of Psychiatry* 57 (5): 275-283.

Kawakami C, Ohnishi M, Sugiyama T, Somekl F, Nakamura K and Tsujii M (2012) The risk factors for criminal behaviour in high-functioning autism spectrum disorders (HFASDs): A comparison of childhood adversities between individuals with HFASDs who exhibit criminal behaviour and those with HFASD and no criminal histories. *Research in Autism Spectrum Disorders* 6 (2):949-957.

King C and Murphy G H (2014) A systematic review of people with autism spectrum disorders and criminal justice system. *Journal of Autism and Developmental Disorders* Epub ahead of print 28 February 2014 DOI 10.1007/s10803-014-2046-5

Kumagami T and Matsuura N (2009) Prevalence of pervasive developmental disorder in juvenile court cases in Japan. *Journal of Forensic Psychiatry and Psychology* 20 (6):974-987.

Learner M D, Haque O S, Northrup E C, Lawer L and Busztajn H J (2012) Emerging perspectives on adolescents and young adults with high-functioning autism spectrum disorders, violence and criminal law. *Journal of the American Academy of psychiatry and Law* 40 (2):177-190.

Mouridsen S E (2012) Current status of research on autism spectrum disorders and offending. *Research in Autism Spectrum Disorders* 6 (1): 70– 86.

Mouridsen S E, Rich B, Isager T, and Nedergaard N J (2008) Pervasive developmental disorders and criminal behaviour: a case control study. *International Journal of Offender Therapy and Comparative Criminology* 52(2):196-205.

Murrie D C, Warren J I, Kristiansson M and Dietz P E (2002) Asperger's syndrome in forensic settings. *International Journal of Forensic Mental Health*, 1(1), 59-70.

Murphy G and Mason J (2014) People with intellectual disabilities and offending behavior. In E Tsakanikos and J McCarthy (Eds) *Handbook of psychopathology in intellectual disability*. New York: Springer.

National Autistic Society (2011) *Autism, a guide for criminal justice professionals*. London: National Autistic Society.

Newman C, Cashin A & Waters C (2015) A hermeneutic phenomenological examination of lived experience of incarceration for those with autism. *Issues in Mental Nursing*, 36 (8): 632-640.

North A S, Russel A J and Gudjonsson G H (2008) High functioning autism spectrum disorders: An investigation of psychological vulnerabilities during interrogating interview. *Journal of Forensic Psychiatry and Psychology* 19 (3):323-334.

Paterson P (2008) How well do young offenders with Asperger's syndrome cope to custody? Two prison case studies. *British journal of Learning Disabilities*, 36 (1):54-58.

Silverman D (2005) *Doing qualitative research*. Second edition. London: Sage Publications.

Sinzoo B, van den Brinck W, Koeter M, Gorissen van Eenige M, van Wijngaarden-Crers P and van der Gaag RJ (2009) Treatment seeking adults with autism or ADHD and co-morbid substance use disorder: Prevalence, risk factors and functional disability. *Drug and Alcohol Dependence* 107(1): 44-50.

Robson C (2002) *Real world research*. Second edition. Malden MA: Blackwell Publishing Ltd.

Stoddart K P, Burke L and King R (2012) *Asperger syndrome in Adulthood. A comprehensive guide for clinicians*. New York: W.W. Norton & Company.

Underwood L, Forrester A., Chaplin E and McCarthy J (2013) Prisoners with neurodevelopmental disorders. *Journal of Intellectual Disabilities and Offending Behaviour*, 4 (1/2):17-23.

Wing L (1981) Asperger's syndrome: A critical account. *Psychological Medicine* 11 (01): 115-129.

Wing L (1997) Asperger's syndrome: Management requires diagnosis. *Journal of Forensic Psychiatry* 8 (2): 253-257.

Woodbury-Smith MR, Clare I C H, Holland A J, Watson P C, Bambrick M, Kearns A, et al (2010) Circumscribed interests and "offenders" with autism spectrum disorders: A case-control study. *Journal of Forensic Psychiatry and psychology* 21 (3):366-377.

Woodbury-Smith M and Dein K (2014) Autism spectrum disorders (ASD) and unlawful behaviour: Where do we go next? *Journal of Autism and developmental Disorders*, Published online 26 August 2014 DOI 10.1007/s10803-014-2216-5

World Health Organization (1992) *The ICD-10 classification of mental and behavioural disorders: clinical descriptions and diagnostic guidelines*. Geneva, Switzerland: Author.