

The Contributory Role of Autism Spectrum Disorder (ASD) Symptomology in Offending Behaviour

Dr Clare Allely

The majority of individuals with ASD are law-abiding (Murphy, 2017, King & Murphy, 2014). However, research has shown how ASD symptomology can contribute to various types of offending behaviour, with those behaviours most associated with ASD including violent behaviour, sexual offending, fire setting/arson, obsessive harassment (stalking), and cyber-crimes (e.g. Baron-Cohen, 1988; Everall & Lecouteur, 1990; Schwartz-Watts, 2005; Mouridsen et al., 2008; Ledingham & Mills, 2015; Allely and Creaby-Attwood, 2016). There is much debate about whether individuals with ASD should be treated exactly the same as the general population in the criminal justice system as currently happens (e.g., Hayes, 2016). As highlighted in the paper by Hayes (2016), not every offence which is committed by someone with ASD is due to their disorder. There are cases involving individuals who have engaged in offending behaviour which have been intentional and voluntary criminal acts (Freckelton, 2013; Berryessa, 2014). The difficulty is trying to identify whether ASD symptomology did in fact contribute or not to the offending behaviour on a case-by-case basis (see also, Allely & Cooper, 2017; Cooper & Allely, 2017).

All people with ASD are individuals but some of the unique features of ASD that can be relevant to offending behaviour are as follows:

- Impaired understanding of relationships and social norms;
- Restricted empathy, impaired ability to appropriately interpret the cues and negative facial reactions of others towards their behaviour, and being genuinely unaware of the harm caused to any victim;
- Lack of perspective taking;
- Interpersonal or social naiveté, which may also allow young people with ASD to be led into criminal acts by others;
- Repetitive, ritualistic or obsessive behaviour - the pursuit of special circumscribed interest(s). For example, there are a large number of cases where individuals with ASD have been found to have substantial collections of pornographic material (often involving child abuse images), with thousands of unopened computer files. Sugrue (2017) highlighted that there is a widely held belief that the greater the volume of images, the greater the risk that the individual will act on their urges. There is no research which supports this belief (Stabenow, 2011, Mahoney, 2009);
- Difficulty managing disruption of routines;
- Difficulty in expressing their sexuality within the context of an appropriate relationship because of their lack of or limited experience of being in an intimate relationship;
- Difficulties with impulse control which may make an individual act “without thinking” (Haskins & Silva, 2006);
- Many individuals with ASD will have average or above average intelligence while their social maturity is that of someone much younger or is not expressed in a typical or age appropriate way. This can result in them being more interested in befriending and/or learning about sex

and sexuality with children younger than themselves, which research indicates is not automatically a precursor to sexual offending towards children (Mesibov & Sreckovic, 2017).

Case Example

Ray and colleagues (2004) described the case of Bill, a 17-year old who presented with features of pervasive developmental disorders (PDD - a subtype of ASD) and exhibited sexual tendencies towards the clothing of others, which he would steal and use to masturbate. Following behavioural analysis of incidents of stealing, it was found that Bill chose the clothing of others whom he found both intimidating and sexually appealing. Immediately following these incidents, he experiences a sense of mastery in addition to a significant reduction in his levels of anxiety. This behaviour was more prevalent when Bill's external environment was chaotic, disorganised and distressing.

Implications for practice (Ray, Marks, & Bray-Garretson, 2004)

- Young people with ASD are typically good at creating lists and giving facts in “an almost inventory fashion” regarding their offences (pp. 278). These lists can be used to create a basis for gathering further information and exploring emotions as interventions progress.
- The use of cue cards and red/green/yellow cards for particular thoughts and impulses can help support the development of self-monitoring skills and control.
- The use of role playing with a particular focus on practicing “I statements” can enable young people to take responsibility for their actions.
- When looking at patterns of offending, dominoes can be made from cards, on which information can be written. As the individual lists the factors which contributed to their offending, the practitioner helps the individual to make a domino for every trigger, high-risk situation, or warning sign. The dominoes are then lined-up in the sequence of when they took place to provide a concrete and tangible visual of the factors influencing their behaviour.
- The use of visuals, interactive discussions, social stories or comic style cartoon stories may be useful.
- Rather than theoretical discussions of what is right and wrong, it may be more helpful to develop relapse prevention plans that provide specific details about ways in which the young person can avoid being drawn into offending behaviour or what to do when they feel that they will explode if they do not engage in something illegal or inappropriate.

About the author

Dr Clare Allely is a Reader in Forensic Psychology at the University of Salford in Manchester, and is an affiliate member of the Gillberg Neuropsychiatry Centre at Gothenburg University, Sweden. Clare is also an Honorary Research Fellow in the College of Medical, Veterinary and Life Sciences affiliated to the Institute of Health and Wellbeing at the University of Glasgow. [Read more.](#)

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