

## **Self-Reported Motivations for Offending by Autistic Sexual Offenders**

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Running head: Self-Reported Motivations for Offending by Autistic Sexual Offenders

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## **Abstract**

Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder estimated to have elevated prevalence in forensic populations (approximately 4.5%). It has been suggested that offenders with ASD engage more frequently in crimes against the person and sexual offences than other types of offences such as property, driving, and drug offences. To date little is empirically known about the reasons why autistic individuals engage in sexual offences, yet understanding the motivation(s) for offending are key to developing and implementing effective interventions to help reduce both initial offending and also re-offending. In the current study, semi-structured interviews were conducted with nine autistic sexual offenders in prisons and probation services across England and Wales. Thematic analyses revealed five main themes (social difficulties; misunderstanding; sex and relationship deficits; inadequate control; disequilibrium). Analyses indicated that social skills difficulties, lack of perspective/weak central coherence, misunderstanding the seriousness of their behaviours and a lack of appropriate relationships were the main reasons for offending reported by this group of autistic sexual offenders. Findings highlight a need to develop sex and relationship education interventions which are tailored to the needs of autistic individuals, to address both their reported reasons for offending and their reported lack of sexual knowledge and awareness.

**Keywords:** autism spectrum disorder; sexual offending; offending; crime

## Self-Reported Motivations for Offending by Autistic Sexual Offenders

Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder characterised by persistent deficits in social communication and interaction coupled with restricted and repetitive patterns of behaviour, interests or activities (American Psychiatric Association, 2013). ASD is estimated to affect approximately 1% to 3.9% of the general population (Baird et al., 2006; Brugha et al., 2011; Centre for Disease, Control and Prevention, 2018; May, Sciberras, Brignell, & Williams, 2017); but a higher prevalence is reported in the prison (Fazio, Pietz & Denney, 2012; Robinson et al., 2012), secure hospital and forensic psychiatric service populations (Scragg & Shah, 1994; Hare, Gould, Mills, & Wing, 1999; Siponmaa, Kristiansson, Jonson, Nydén, & Gillberg, 2001; Soderstrom, 2005) when compared to the general population.

It has been suggested that autistic<sup>1</sup> offenders may be more likely to engage in certain types of crime than others (King & Murphy, 2013); specifically that they are more likely to engage in crimes against the person (sexual offences, assault and robbery; Cheely, Carpenter, Letourneau, Nicholas, Charles, & King, 2012; Kumagami & Matsuura, 2009) and less likely to engage in property crimes (burglary, arson and trespass), driving offences and drug offences (Cheely et al., 2012; Kumagami & Matsuura, 2009). However, it is important to briefly note some of the methodological issues of this research. For example, approximately 50% of the sample in Kumagami and Matsuura (2009) met the criteria for pervasive developmental disorder not otherwise specified (PDD-NOS) rather than autism or Asperger's syndrome specifically. Additionally, the offence categorisation used by Cheely et al. (2012) did not provide individual figures for sexual offending but rather included them within a category of 'crimes against the person'. Nevertheless, sexual offending was the most commonly committed

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<sup>1</sup> We predominantly use identity first language to refer to individuals with a diagnosis of ASD. When asked to provide one term to describe themselves, 'autistic' was the preferred term by many autistic individuals within the UK, although we respectfully note that this view is not unanimous throughout the autism community (see Kenny et al., 2016). At other times, therefore, we adopt person first language.

crime reported by Kumagami and Matsuura (2009) and, while their sample was relatively small, it was representative as they reviewed all individuals (PDD and non-PDD) in four law courts in Japan. It is important to note that sexual offences (and crimes against the person) can be committed online, for example through distributing and downloading indecent images over the Internet (Criminal Justice Act, 1988; Protection of Child Act, 1978; Sexual Offences Act, 2003)

While research indicates that autistic offenders may be more likely to engage in offending of a sexual nature relative to other types of offences (Kumagami & Matsuura, 2009), it is unlikely that the minority of autistic individuals who commit crimes of a sexual nature do so due to differences in sexual interest or understanding of sexual vocabulary (Gilmour, Schalomon, & Smit, 2012). However, studies report that autistic adults describe less sexual and privacy knowledge (i.e., seeking privacy for sexual behaviours and awareness of rules) and demonstrate more public sexualised behaviour than typically developed (TD) individuals (Mehzabin & Stokes, 2011). Research also reports that autistic adults describe less access to peers as a learning source (Stokes et al., 2007), which may increase the risk of offending in relation to inappropriate sexual behaviours (Hannah & Stagg, 2016). Stokes et al. (2007) used the Courting Behaviour Scale to measure social and romantic functioning finding that while autistic individuals may reach comparative social and romantic functioning levels to TD individuals there may be a developmental lag.

The Ministry of Justice, who are responsible for improving public safety and reducing re-offending within England and Wales (Ministry of Justice, 2016), have a database of accredited Offender Behaviour Programmes offered to offenders to reduce re-offending. The programmes are often tailored to the offence committed (e.g., the Sex Offender Treatment Programme). However, it has been suggested that many of the clinical characteristics associated with ASD, including cognitive inflexibility, empathy and social perspective taking

difficulties, may interfere with effective assessment and treatment (Griffin-Shelley, 2010; Melvin, Langdon, & Murphy, 2017; Murphy, 2010a, 2010b). These findings and suggestions, in combination with the suggested ineffectiveness of mainstream sex and relationship education in schools for autistic individuals (Hannah & Stagg, 2016), highlight the need to understand the specific reasons for committing sexual offences by autistic individuals.

Whilst there are numerous theories developed to explain the onset, development and maintenance of sexual offending in TD populations (e.g., The Integrated Model of Sexual Offending; Ward & Beech, 2006; 2016), there are no ASD specific sexual offending theories. A number of formulations have been proposed within the available autistic offender literature as to why autistic individuals engage in sexual offending, but these are predominantly derived from case studies (e.g., Griffin-Shelley, 2010; Haskins & Silva, 2006; Ray, Marks & Bray-Garretson, 2004). Nevertheless, this existing literature proposes four accounts: 1) difficulties with social cognition; 2) lack of awareness and understanding regarding sexual issues; 3) compulsive thinking and sexual frustration; and 4) exploitation and abuse. Each of these are briefly considered in turn below.

### *Social Cognition*

Diminished theory of mind (ToM) and associated social skill disparities are frequently cited as reasons for sexual offending in autistic offenders (e.g., Griffin-Shelley, 2010; Kohn, Fahum, Ratzoni, & Apter, 1998; Murrie, Warren, Kristiansson, & Dietz, 2002; Ray et al., 2004; Realmuto & Roble, 1999). Difficulties with: social reciprocity (Haskins & Silva, 2006), reading emotional cues in others (Katz & Zemishlany, 2006; Ray et al., 2004), recognising the harm being caused to the victim (Griffin-Shelley, 2010; Katz & Zemishlany, 2006; Murrie et al., 2002), empathy (Griffin-Shelley, 2010; Murrie et al., 2002), having the interpersonal skills required to engage in consensual sexual contact with suitable partner (Chesterman & Rutter, 1993; Haskins & Silva, 2006; Murrie et al., 2002; Ray et al., 2004; Realmuto & Ruble, 1999),

and social relatedness (Kohn et al., 1998), alongside interpersonal naiveté, have all been implicated in sexual offending in autism (Griffin-Shelley, 2010; Murrie et al, 2002; Ray et al., 2004). Although ToM difficulties are widely reported in autistic individuals (e.g. Baron-Cohen, Leslie & Frith, 1985; Woodbury-Smith, Clare, Holland, Kearns, Staufenberg, & Watson, 2005), it has been proposed that often autistic sexual offenders understand the concept of reading others' minds but are unable to apply the theory to everyday situations (Chesterman & Rutter, 1993; Kohn et al., 1999). This vast but largely speculative array of suggested explanations for sexual offending in ASD that are underpinned by differences in social cognition highlight the need for a more detailed and nuanced understanding of how these may translate into sexual offending.

#### *Awareness and understanding regarding sexual issues*

Reduced sexual awareness (Barry-Walsh & Mullen, 2004; Murrie et al., 2002), particularly in terms of socially acceptable and legal sexual behaviours (Barry-Walsh & Mullen, 2004; Haskins & Silva, 2006) have been proposed to relate to sexual offending behaviour in ASD. Indeed, some sexually deviant behaviours are proposed to result from lack of awareness rather than deviant preferences (Murrie et al., 2002). It is important to note, however, that this supposition is based upon only three case studies. Given that autistic adults who have not offended demonstrate similar privacy knowledge and public sexualised behaviour to TD adults (Gilmour, Schalomon, & Smit, 2012; Mehzabin & Stokes, 2011; Stokes & Kaur, 2005), further exploration of autistic offenders' sexual awareness in relation to their motivations for offending is warranted as it has important implications for education and interventions.

#### *Compulsive thinking and sexual frustration*

Obsessive behaviours with sexual connotations (Chesterman & Rutter, 1993), sexual preoccupation (Murrie et al., 2002; Ray et al., 2004), and sexual frustration and the associated

impulsiveness to relieve tensions and frustrations (Milton, 2002; Ray et al., 2004) have also been suggested to underlie sexual offending in ASD. For example, one case study reported on a 28-year-old autistic male who exhibited compulsive masturbation (5 times daily) and had a collection of 'artificial vaginas'. He moved out of the familial home in order to be able pursue his preoccupation with having sexual intercourse (Murrie et al., 2002).

### *Exploitation and abuse*

Exploitation has also been suggested to play a role in sexual offending in ASD; for example, with others convincing an autistic individual to expose themselves in public as a joke (Sevlever et al., 2013). Additionally, being a victim of sexual abuse can contribute to inappropriate sexual behaviours, whereby an individual replicates the behaviours to which they were victim (Ray et al., 2004). Research within autistic populations suggests that an individual is at increased risk of carrying out sexually abusive behaviours if they have a history of physical (10.8 times more likely) and sexual (8.6 times more likely) abuse themselves (Mandell, Walrath, Manteuffel, Sgro, & Pinto-Martin, 2005). These figures are substantially higher than TD data which indicate that sexual offenders are 3.6 times more likely to be sexually abused and 1.6 times more likely to be physically abused than non-sexual offenders (Jespersen, Lalumière, & Seto, 2009). Previous research indicates a large increased risk of sexual victimization for autistic individuals (e.g., Brown-Lavoie et al., 2014; Gotby, Lichtenstein, Langstrom & Pettersson, 2018; Roberts et al., 2015, White & Buehler, 2012). However more recently in a study of 4,500 participants, although ASD was found to be associated with a three times greater risk of childhood sexual victimization, once symptoms associated more generally with neurodevelopmental disorders as measured using the Autism-Tics, AD/HD and other comorbidities inventory (A-TAC) were controlled for there was no significant effect of the ASD diagnosis (Gotby et al., 2018). This suggests that future research should look at general

neurodevelopmental difficulties rather than focussing on individual diagnoses (e.g., ASD, ADHD) as risk factors for sexual victimization.

Whilst the literature suggests several potential reasons for sexual offending in ASD, as noted earlier this information is gathered from very small samples (i.e., mainly single case studies) with a maximum of three cases in any one study, and not always solely of a sexual nature (i.e., combined offences). To our knowledge, there is no published data that has been obtained directly from autistic sexual offenders as to their understanding of why they engaged in sexual offences. The effectiveness of current interventions to reduce recidivism in ASD are reported to be highly variable in both treatment approach and impact (Melvin et al., 2017); thus, there is an urgent need to adapt treatments to meet the needs of autistic offenders (Melvin et al., 2017).

In summary, there is very limited knowledge (derived from a scattering of case studies) of the motivations for sexual offending in ASD. Both the autistic offender literature and the TD offender literature highlight the importance of interventions which target specific needs, behaviours and motivations. The aim of the current research was to provide an in depth understanding of the motivations for sexual offending as described by autistic offenders themselves, as a crucial step to informing interventions and reducing recidivism.

## **Method**

### *Participants*

Nine male autistic offenders were interviewed in this study. They were recruited from four prisons and two probation services across England and Wales. Initially establishments were selected and contacted based on whether it was possible for the researcher to travel to the location; those who advised that they had autistic offenders who were willing to participate as well as the resources to facilitate the interviews were included. Participants were identified by Criminal Justice System (CJS) staff as being diagnosed with ASD according to their records



kept by the prison or probation service. All participants had a diagnosis of ASD. An all-male sample was selected because approximately 95% of the prison population is male (Ministry of Justice, 2016).

The inclusion criteria were that participants were aged 16 years or older and were deemed to have the capacity to consent (as initially indicated by staff and then determined at the point of informed consent), while exclusion criteria were those without a good understanding of the English language, active psychosis or psychotic illness, head injury and/or untreated epilepsy.

The mean participant age in years at time of interview was 29.56 (SD = 8.68; range = 22–50 years). Their mean age at receiving an ASD diagnosis was 13.13 years (SD = 4.90; range = 5.5-22 years). The mean full-scale IQ of the sample as tested using the Wechsler Abbreviated Scale of Intelligence was 87.56 (SD = 11.61; range = 64-102). The highest and most commonly achieved educational attainment of the sample was an undergraduate degree (n = 3) with only one participant reporting no formal educational attainments. The majority of participants were in prison at the time of testing (n = 6), two participants were in rented accommodation, and one lived in the parental home. All participants were single.

The offences committed by participants were not mutually exclusive and included: downloading and possession of indecent images (n = 4); sexual assault (n = 3); indecent assault (n = 2); taking and distributing indecent images (n = 1); causing or inciting a child to engage in sexual activity (n = 1); and arranging and facilitating a child sex offence (n = 1).

This research obtained ethical approval from the University of Bath Psychological Ethics Committee and the National Offender Management Service.

### *Procedure*

Participants engaged in a semi-structured interview lasting between 10 and 50 minutes (Mean = 19.70 minutes; SD = 13.60). The interviews were conducted in the prison or probation

service in which the individual was being managed. The interviews had a semi-structured format with largely open questions allowing for exploration of points individuals made. Questions revolved around the overarching question of why the offenders believed they offended but also included more specific questions about the role of others and substances, for example.

Interviews were recorded on an encrypted and password protected voice recorder with the participant's written consent. Data collection ended once no new themes were elicited; that is, when data saturation was reached (Glaser & Strauss, 1976).

### *Analysis*

Once transcribed, interviews were analysed using thematic analysis by the first author, whereby the aim was to provide a rich thematic description of the entire data set (Braun & Clarke, 2006). Coding was conducted in an inductive fashion where the researcher did not try to code the data according to a previously determined coding framework or analytic preconceptions but rather the coding was data driven (Braun & Clarke, 2006). A second coder (KM) coded 20% and agreement within the coding was reached. Finally, all authors (KP, KM, AR, and MB) discussed the codes to ensure agreement of theme and sub-theme names.

Following Braun & Clarke (2006), the themes were first identified at a semantic level. That is, the codes were interpreted at an explicit level and the researcher did not try to look for anything beyond what the participant had said, before interpreting them to understand the wider meaning. Ideally a theme would occur multiple times, however the number of occurrences did not mean the theme was more or less important to the results (Braun & Clarke, 2006). As discussed earlier, offender interventions are specific, and this research aimed to positively influence as many individuals as possible. Thus, from a practical and applied point of view (to enable a greater impact of offending prevention and recidivism interventions), the number of

offenders who mentioned a theme were included to enable time and resources to be targeted at the risk factors most commonly reported.

## Results

Five main themes emerged from the data with regards to autistic participants' reported motivations for engaging in sexual offending. These were: (1) social difficulties; (2) misunderstanding; (3) sex and relationship deficits; (4) inadequate control; and (5) disequilibrium. Typically, participants referred to multiple themes and sub-themes. Figure 1 details the themes and associated subthemes. Each theme (in bold) and its subthemes (in bold italics) are described in detail in the text below.

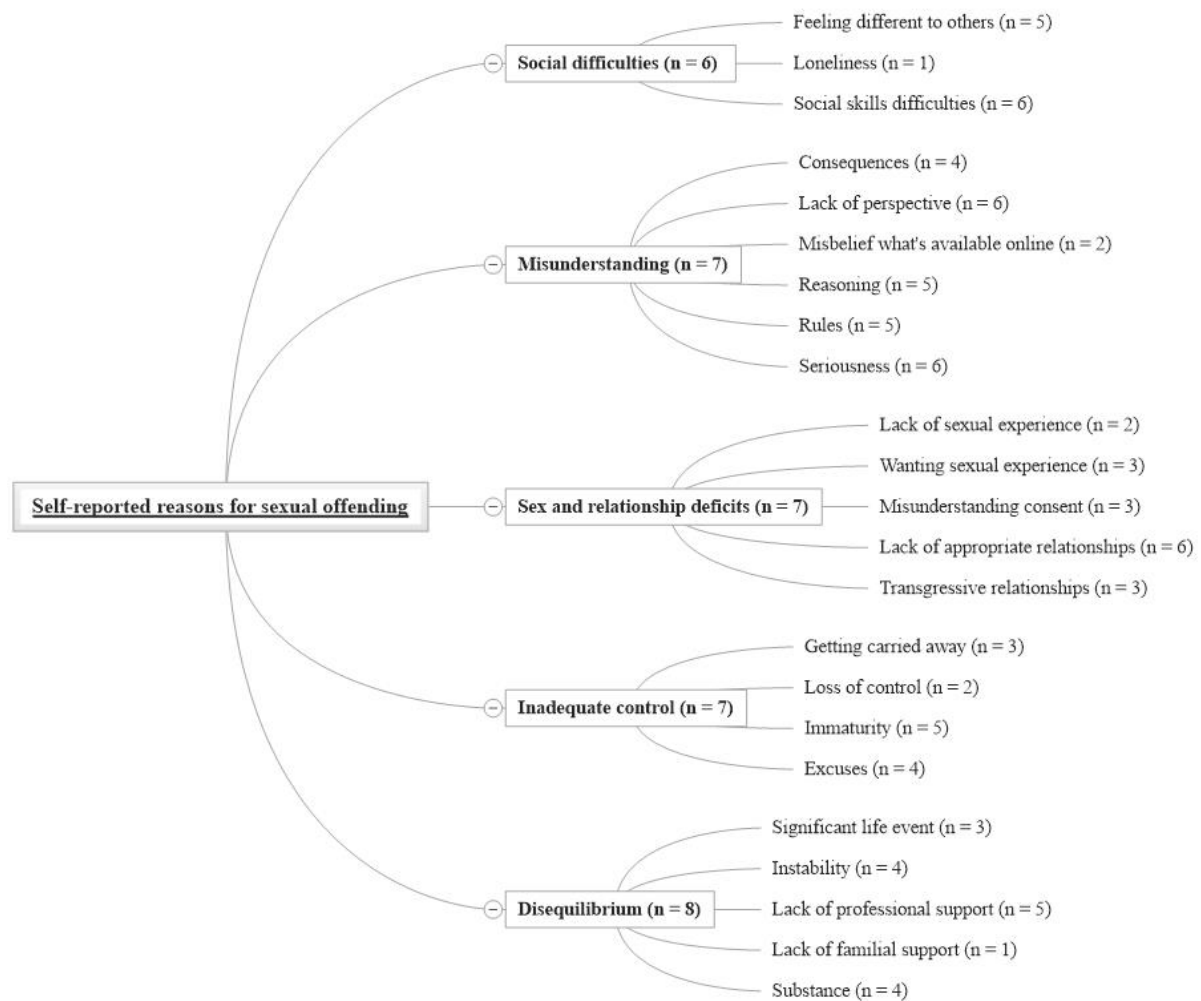


Figure 1. Reported reasons for offending provided by autistic sexual offenders

## Theme One: Social difficulties

Most participants (n = 6) referred to social difficulties as a factor in their offending. This included difficulties interacting with and understanding other people and the feelings associated with the outcomes of these difficulties (e.g., feeling different to others, loneliness). The majority of interviewees (n = 6) mentioned *social skills difficulties*, referring to difficulties interacting socially, understanding social boundaries and how to approach others appropriately:

*“at the time I was errrm not very good socially ... with people.”*

[Participant 1]

*“Primarily coz I had trouble socialising with other people and I suppose not having a normal relationship outside [of the internet] I was able to retreat to myself and keep to myself.”*

[Participant 4]

Only one participant spoke of *loneliness*, linking it directly to the offending:

*“I was quite lonely at the time and it was just kind of I did what I did [online offence] to kind of... maybe try and be closer to other people and I just went about it the wrong way.”*

[Participant 2]

Other participants (n = 5) reported *feeling different to others*, and that this influenced their lives in relation to both the development of intimate relationships:

*“...but I didn't want her to get to know me because.... I knew I was different from other people... I wasn't on the same planet as everybody else. I was in the world of ritual.”*

[Participant 1]

and friendships:

*“if you tried to make good friends they would think that you were weird because you know what I mean ... you're not normal or they would try and push you out into a different group.”*

[Participant 5]

Participants also made links between feeling different to others and elements of ToM such as being able to predict others' behaviours:

*"To be honest I didn't know how people would react normally."*

[Participant 8]

## **Theme Two: Misunderstanding**

The majority of participants (n = 7) mentioned at least one area of misunderstanding when asked about why they believed that they engaged in the offending behaviours. The different areas of misunderstanding included: *being unaware of the consequences; the seriousness of the behaviour; a lack of perspective/weak central coherence; disbelief of what is available online; and misunderstanding the rules and reasoning differences.*

A lack of understanding of the *consequences* was mentioned by a number of participants (n = 4). This included both the consequences to themselves:

*"I didn't know....and this is going to sound odd....I didn't know how wrong it was. I didn't know what the consequences were going to be."*

[Participant 7]

and also the consequences of their behaviour on others:

*"...like not really, not really knowing the errr the consequences of my actions like not just obviously what's going to happen to me but like what's going to happen to other people and everything like that."*

[Participant 2]

The majority of participants (n = 6) also reported (often on numerous occasions) being unaware of the *seriousness* of their behaviour at the time of offending:

*"erm...like I knew it was illegal erm, but I didn't realise like how severe it was, if that makes sense. Coz it kind of seemed like the sort of thing that everyone was doing so erm, yeah it was like... I knew...I knew it was bad but I didn't realise kind of like... how bad."*

[Participant 2]

*“Erm, I don’t think I realised how serious it was. I just thought, it’s fine, I did it and then deleted it [indecent images] within 24 hours.... ermmm... and then just thought that was it gone.... that’s it done, out the way. Shouldn’t have done that. Erm.... And then just got on with the few days and then the police turned up.”*

[Participant 9]

Relatedly, more than half of the sample (n = 5) reported ***misunderstanding the rules***. For example, they often reported not realising that the behaviours that they engaged in may be against the rules or were breaking the law:

*“It [the fact the behaviour was illegal] never filtered into my head until I did this [offence related] course.”*

[Participant 5]

Two interviewees referred to ***misbelief about what is available online***, with two types of misbelief arising. The first being that prior to their offence individuals felt safe to open or download items because they believed that internet search engines would not put anything illegal on their sites:

*“Google being a something that is a company that only has information given to them to advertise and stuff like that. Surely they wouldn’t put anything illegal on?”*

[Participant 3]

The second misbelief related to the nature of the contents and ease of availability of illegal images and videos.

*“I was downloading Disney DVD’s to watch on the Xbox which we had been doing and I’m sure my ex said that in interview...One of them [files] had some child porn.... ermm...it was really shocking that that is available. Obviously it had a code on the top like, some horrible code so I just searched it on the programmes that we were using to download movies – just to*

*see what came up...I downloaded a few and looked through a few but I was just like I can't believe that's available online."*

[Participant 9]

**Reasoning** that appeared unconventional and lacking in personal accountability was demonstrated by a number of offenders (n = 5). Some individuals believed that the behaviours for which they were convicted of were an extension of more minor illegal behaviours (e.g., illegally downloading films):

*"I knew what I was doing [downloading films/DVD's] was illegal anyway so it was kinda like I've been a bit more illegal now...just deleted [child pornography] and thought that was... I won't do that again."*

[Participant 9]

Some individuals placed unreasonable responsibility on the victim:

*"...she didn't tell me to get off...she just carried on...and tried to do me for a crime."*

[Participant 3]

Others showed unusual reasoning regarding the knowledge of the police about the illegal material:

*"I'm surprised that the police haven't you know, they've managed to hunt bin laden down in the middle of nowhere what, how have they not blocked all child abuse photos and images that you can download. I don't understand. And if they are arresting you for it then they know it's there so..."*

[Participant 9]

The majority of participants (n = 6) also reported a **lack of perspective/weak central coherence**, with individuals reporting being caught up in the moment and being unaware of either how the situation might unfold or how the other person(s) may feel or interpret the situation:

*“I kind of think about me in the erm... in sort of like here and now but I don’t really think about the bigger picture if that makes sense.”*

[Participant 2]

*“I think I probably got too much wanting to know why something got done and not realising the mistake of going too far forwards in like trying to understand something. But I should have took two steps back to take a look at everything backwards. Then I should have known, then I could have done, probably realised I should have gone to the police and stuff like that.”*

[Participant 3]

### **Theme Three: Sex and relationships**

Most of the participants (n = 7) discussed issues surrounding sex and relationships in the context of their offending. Two participants (both contact offenders) talked about how a **lack of sexual experience** drove their offending (n = 2). **Wanting sexual experience** was also mentioned by some of the contact offenders (n = 3), who were looking for the experience of sex rather than the relationship experience that often accompanies such experience:

*“To me at the time it was a case of... looking back ..... a sexual object....now.....if I’m quite honest with you....erm.... I just wanted sex....”*

[Participant 1]

*“I wanted to lose my virginity and I wanted to have sex. Everyone was going on about it and said how fantastic it is.”*

[Participant 8]

Some participants (n = 3) also reported **misunderstanding consent**, whereby they believed that they were obtaining consent from the victim, but their understanding of consent was incorrect:



*“because I always asked if I could and if they [child victims] said no I didn’t and so in my head that was consent.”*

[Participant 7]

*“I thought everything I was doing was correct but when I look back, even now, I’m thinking that maybe I should have asked or maybe I could have done something different or maybe I shouldn’t have done it that way or maybe I shouldn’t have done it at all.”*

[Participant 8]

**Lack of appropriate relationships** were also reported by most participants (n = 6). On occasion participants indicated that this led to seeking relationships in less than conventional ways (e.g., forums, chat rooms) and in some cases this directly led to the platform on which the offending took place:

*“I think just the fact that I can’t like or well, or I couldn’t or I struggled to erm...like socialise with people and stuff. Erm... so ... you know...it’s like, I’ve never really had any friends.”*

[Participant 2]

*“Primarily coz I had trouble socialising with other people and I suppose not having a normal relationship outside [of the internet] I was able to retreat to myself and keep to myself.”*

[Participant 4]

Some participants (n = 3) indicated having **transgressive relationships**, and this often related to a lack of appropriate relationships in their lives. Transgressive relationships refer to relationships that do not conform to normal conventions (e.g., inappropriate relationships with children, offenders being victims of abuse):

*“yeah well obviously I spoke to quite a few people and a few of them weren’t you know...erm ... of the legal age.”*

[Participant 2]

*“I don’t know how not to call it a relationship because it was...it was an abusive relationship... in the same way that the relationship that I had with \*\*\*\*\* [offender's abuser] was abusive but it was still a relationship.”*

[Participant 7]

#### **Theme Four: Inadequate control**

This theme arose in most of the interviews conducted (n = 7). Several participants (n = 3) reported **getting carried away**, whereby their intention was not to offend or cause harm to the victim but rather they focussed too intently on their own intentions without considering the other person:

*“I never really kind of like went out with the intention for it to turn like sexual but you know...we kind of got chatting and it kind of just happened.”*

[Participant 2]

Individuals also identified the link between getting carried away and a lack of sexual experience.

*“I felt emotions for this person...well not emotions...but I felt attraction and I took it for the first time...”*

[Participant 5]

Two participants (both contact and non-contact) reported a **loss of control**, with an inability to control themselves in the moment. Of note is that majority of the participants who were interviewed reported that they did not plan their offences:

*“I want to speak to people. I wanna – you know...and then it just kind of got out of control really.”*

[Participant 2]

*“I wanted sex all the time... It overcame me.”*

[Participant 8]

*Immaturity* emerged as a sub-theme in over half of the interviews (n = 5). Two variations of this emerged – one where the childish or juvenile behaviour of the individual led to an offence:

*“It was just literally play fighting that led into the like sexual assault.”*

[Participant 5]

*“A joke was taken out of hand.”*

[Participant 3]

The second where individuals reported emotional under development and a desire not to grow up:

*“I was 15 well....chronologically 15 but emotionally at least 2 years behind ...if not more....erm....and I didn't really want to grow up. The adult world was quite a scary place and I wasn't really....I was quite happy not growing up.”*

[Participant 7]

Several participants (n = 4) presented control-related issues as *excuses*; however, many also demonstrated a lack of social understanding and misunderstanding of consent:

*“but erm I... if she hadn't gone so far and then decided to stop.”*

[Participant 1]

### **Theme Five: Disequilibrium**

Almost all interviewees (n = 8) referred to an element of disequilibrium whereby significant life changes, lack of support or altered mental state due to substances appeared to impact upon their offending behaviour. *Significant life events* were mentioned by a third of participants (n = 3). A range of significant life changes (e.g., finishing education, changes in domicile, historical childhood abuse) were mentioned:

*“both convictions were where I had left home for the first time, and my head was all over the place...I went to try and find my birth family because I got adopted at a young age.”*

[Participant 5]

*“I mean I can’t really say all of this is because of what happened to me growing up ... err.... because you know that’s not taking responsibility and I do take full responsibility but the line that I took from what \*\*\*\*\* [offender’s abuser] did to me influenced my thoughts and feelings and everything else about relationships.”*

[Participant 7]

**Instability** or period(s) of uncertainty were referred to by many of the participants (n = 4) prior to offending. These periods were resultant from a number of factors (e.g., dismissal from employment, lack of money, lack of safety):

*“I had no money. I tried robbing the victim.”*

[Participant 6]

*“it’s quite difficult to kind of explain how much the feeling of safety....it you’ve never been in a position where for 2 years you’ve never felt safe [due to being victim of sexual abuse] and then suddenly being here in a position/situation where you are entirely safe [with first victim] it’s very difficult for anyone to really understand.”*

[Participant 7]

More than half of the sample (n = 5) also reported a **lack of professional support**. Participants often felt that having an ASD diagnosis was irrelevant as they did not receive the support that they felt that they needed to enable them to function effectively within the rules/norms of society:

*“it [ASD] was kind of something that was just on a bit of paper rather than something that I actually got help with.”*

[Participant 2]

*“We got no help through school...no help through any people. We applied for it...put loads of applications in but nobody came and helped out. Erm...I think we had ... we were causing*

*arguments at home so we had like counselling for family but that still isn't based on autism. It was more .... We applied for help but nothing came of it. Erm and then as soon as I turned 18 that was kind of it...everybody went - you're too old...we're wiping our hands of you."*

[Participant 5]

Only one interviewee reported a **lack of familial support**, but it appeared to have a significant impact on his offending behaviours:

*"Erm.... Yeah mum knew that there were major issues between me and him [offender's abuser] but she didn't know what they were ... and she never actually bothered to ask...."*

[Participant 7]

The use of **substances** was mentioned by four interviewees, but its role in the offending was conflicting between participants. Some participants felt the substance influenced the offending:

*"had I not been drinking I don't think I would have committed the offence."*

[Participant 1]

whereas other participants felt that the substance hadn't influenced the offending:

*"I had cannabis in my system but I was still body functioning...I was still aware."*

[Participant 5]

Themes one (social difficulties) and two (misunderstanding) appear to be more autism specific whereas themes three, four and five appear to be more general factors. Autistic offenders typically reported a combination of factors being involved in their offending (i.e., ASD-specific and general factors). Table 1 provides an overview of the themes and subthemes that each participant referred to.

Table 1. Overview of themes and participants who referred to them during interviews

Theme	Sub theme	P1	P2	P3	P4	P5	P6	P7	P8	P9	Sub theme	Theme
<b>Social difficulties</b>	Feeling different to others	x	x			x		x	x		5	6
	Loneliness		x								1	
	Social skills difficulties	x	x		x	x		x	x		6	
<b>Misunderstanding</b>	Consequences		x					x	x	x	4	7
	Lack of perspective/WCC	x	x	x		x		x	x		6	
	Misbelief what's available online			x						x	2	
	Reasoning	x		x		x		x		x	5	
	Rules		x	x		x		x		x	5	
	Seriousness		x	x		x		x	x	x	6	
<b>Sex and relationships</b>	Lack of sexual experience	x							x		2	7
	Wanting sexual experience	x				x			x		3	
	Misunderstanding consent					x		x	x		3	
	Lack of appropriate relationships		x		x	x		x	x	x	6	
	Transgressive relationships		x		x			x			3	
<b>Inadequate control</b>	Gets carried away					x			x	x	3	7
	Loss of control		x						x		2	
	Immaturity	x		x		x		x	x		5	
	Excuses	x				x		x		x	4	
<b>Disequilibrium</b>	Significant life event			x		x		x			3	8
	Instability			x	x		x	x			4	
	Lack of professional support		x		x	x		x		x	5	
	Lack of familial support							x			1	
	Substance	x		x		x	x				4	

## Discussion

The aim of this research was to provide an in depth understanding of the motivations for sexual offending as described by a sample of autistic offenders themselves. Five main themes emerged: social difficulties; misunderstanding; sex and relationships; inadequate control; and disequilibrium. The autistic offenders interviewed typically reported multifaceted reasons for offending, highlighting the need to consider a range of factors within autistic offender assessment and interventions. The first two themes (social difficulties and misunderstanding) appear to reflect broader autism specific difficulties whilst the other three themes (sex and relationships, inadequate control, disequilibrium) may be more specific to autistic sexual offenders.

Overall the findings from this single study map on well to the wide range of previous research, largely conducted across single case studies which had identified were classified under four over-arching themes in the introduction: 1) Difficulties with social cognition has parallels with the first theme of Social Difficulties; 2) a lack of awareness and understanding regarding sexual issues resonates with the second theme of Misunderstanding; 3) compulsive

thinking and sexual frustration is mirrored in the fourth theme Inadequate Control; and 4) exploitation and abuse is comparable to the fifth theme Disequilibrium. Thus, the themes that emerged from this larger single study reflect many aspects that have been identified separately across studies. One advantage of identifying the themes in the present study is to highlight how these themes are inter-dependent and a wide array of themes are consistently presented by autistic sexual offenders. In addition, the third theme identifying a lack of sexual experience, an understanding of consent and appropriate relationships may also be particularly beneficial when considering intervention.

Comparisons can be drawn between the motivations for offending reported by autistic offenders and the Integrated Theory of Sexual Offending (ITSO; Ward & Beech, 2006; 2016). For example, the reasons provided in the “inadequate control” theme of this research could be categorised within the “action section system” of the ITSO. Furthermore, some of the subthemes within the “disequilibrium” theme of this research (e.g., significant life event, instability) could be categorised within the “ecological niche” factor of the ITSO. However, there are a number of areas which require further investigation before being able to state for sure whether factors which lead to TD sexual offending also do in ASD. For example, the “perception and memory” system of the ITSO is reported to be used to process incoming sensory information to form representations which can then be used by other systems, however sensory processing difficulties are common in autistic non-offenders with research indicating 94% of autistic adults had abnormal sensory processing (Crane, Goddard, & Pring, 2009). It would also be difficult to apply the “social difficulties” element of the ITSO to autistic sexual offenders as these form part of the diagnostic criteria for ASD (APA, 2013). Future research should look to objectively quantify the element of the ITSO to enable comparison of autistic sexual offenders and autistic non-offenders to identify whether the ITSO is applicable to autistic sexual offenders.

The findings from the current research emerged not out of a predetermined coding framework or analytical preconceptions but rather the coding was data driven thus providing a true reflection of what the offenders said. The clinical features of ASD (e.g., cognitive inflexibility, difficulties with perspective taking) may lead to difficulties conducting effective assessment (Griffin-Shelley, 2010; Melvin, Langdon, & Murphy, 2017; Murphy, 2010a, 2010b). This, coupled with the reported variability in the effectiveness of recidivism interventions for autistic offenders, highlights the need to adapt interventions (Melvin et al., 2017). For example, the self-reported perceived lack of professional support (disequilibrium theme) by offenders within this study, may be pertinent when considering autistic re-offending.

Prior to engaging in sexual offences, the offenders within this study frequently experienced a chaotic period (e.g., significant life events, substance use) characterised most often by a persistent lack of professional support specific to their ASD diagnosis. The significant life events referred to by the current sample of autistic sexual offenders included: dismissal from work; moving to a new house; finishing college; moving out from the parental home; finding their birth family (where adopted); parental illness; and breakdown of a romantic relationship. Such events are likely to be particularly disruptive for autistic individuals, given that insistence on sameness is characteristic of ASD and is positively associated with anxiety (Uljarevic, Richdale, Evans, Cai, & Leekham, 2017). Stress and anxiety have been identified as core factors within TD sexual offending models such as the ITSO (Ward & Beech, 2006; 2016), however autistic adults are more vulnerable to significant change in life situation and hence may be more likely to experience increased stress than other groups (Gilliot & Standen, 2007). The final factor included within the disequilibrium theme was substance use. Substance abuse, especially alcohol abuse has frequently been linked to sexual offending within the TD sexual offender literature with regards to both the aetiology and maintenance of offending behaviours (Abracen, Looman, & Ferguson, 2017). Theories of offending suggest several



functions of substances in offending including helping to overcome inhibitions (Finkelhor, 1984) or increasing impulsivity (Ward & Beech, 2006; 2016), which may be causal factors in sexual offending for both autistic and TD individuals.

The autistic offenders interviewed within the current research reported social skills difficulties that largely revolved around difficulties and uncertainties with handling social situations. These included not knowing how to communicate with others, uncertainty over how to interact face-to-face, uncertainty of social boundaries, and how to approach others to initiate friendships or romantic relationships. This and the finding that many of the autistic offenders were unable to effectively read the social situations and interpersonal interactions that led to the offence(s), may be reflective of ToM difficulties. Previous research has reported ToM impairments in TD sexual offenders (e.g., Castellino, Bosco, Marshall, Marshall, & Veglia, 2011), and while ToM difficulties are widely reported in ASD (e.g., Baron-Cohen et al., 1985), research examining ToM in autistic offender samples has reported inconsistent findings (Chesterman & Rutter, 1993; Kohn et al., 1999; Woodbury-Smith et al., 2005). While findings from the present study indicate that social cognition difficulties are prevalent in autistic sexual offending, it is not possible to disentangle whether difficulties reading social situations are directly related to the offending behaviour or to the ASD diagnosis more broadly.

The current research suggests that many of the offences reported by the current sample may have occurred from difficulties in effectively reading and interpreting the victims' intentions and behaviour (e.g., not wanting to engage in certain acts). Thus, while autistic offenders (mixed offences) may perform similarly to TD participants on ToM tasks (Woodbury-Smith et al., 2005), when placed in a real life and dynamic situation where the demands are greater (i.e., less time, more cues to interpret) this may not be the case. Previous research specific to autistic sexual offenders suggests they have the theory of ToM but are unable to apply it to real life situations (Chesterman & Rutter, 1993; Kohn et al., 1999). Whilst

the current research did not formally assess ToM, many responses were indicative of ToM difficulties, which future research could investigate further. Given the static and lab-based nature of currently used ToM assessments which autistic offenders may pass, further research may benefit by implementing a more interactive and dynamic assessment of ToM which reflects everyday life, such as that described by Brewer, Young and Barnett (2017). Their 'Adult ToM' (A-ToM) measure requires participants to watch videos based in part on the scenarios presented in Happe's Strange Stories assessment (Happé, 1994) and to answer the associated question within one minute. The one-minute response time is to limit the potential for individuals to 'hack' out the answer (Brewer et al., 2017). Autistic individuals lack implicit theory of mind but are thought to be able to acquire explicit theory of mind through teaching of typically considered implicit rules (Frith, 2004). Careful consideration of the learnt rules is the reason why some autistic adults perform comparatively well on the static measures of ToM (Frith, 2004), but examining performance on the more dynamic A-ToM measure may be fruitful in guiding more tailored interventions to the specific needs of autistic individuals.

The findings from this study suggest social skills difficulties were strongly linked to a lack of appropriate relationships, with 83% of individuals who mentioned social skills difficulties also reporting a lack of appropriate relationships. Interviewees reported wanting to speak to others, a lack of friends and a lack of opportunity for interactions with the opposite sex. Friendships and relationships are considered vital for social functioning (Stoke, Newton & Kaur, 2007) and social functioning is in turn important to romantic relationship development (Stokes et al., 2007). Research suggests a link between social skills training and increased numbers of appropriate romantic relationship approaches made which may have led to a reduction in romantic loneliness (Gantman, Kapp, Orenski & Laugeson, 2013). This suggests that providing autistic individuals with education and opportunities (e.g., supervised social

groups) to improve their social skills might help to improve social functioning development, which in turn may enable healthy romantic relationship development.

It is unknown whether the autistic participants within the current research had received any sex and relationship education prior to offending; however, the literature suggests that current mainstream sex and relationship education packages are not appropriate for autistic individuals (Hannah & Stagg, 2016). All participants in the study by Hannah and Stagg (2016) reported a negative experience of their sex education and it is suggested that specific methods and curricular are required. For example, educational programmes should cater to thought rigidity and be tailored to the difficulties in reading the intentions of others (Hannah & Stagg, 2016). The current findings support previous research suggesting that a lack of sexual awareness may lead to ‘accidental offending’, and this should also be included in intervention packages (Hannah & Stagg, 2016; Murrie et al., 2002).

Another key finding was that, at the time of offending, the autistic offenders interviewed within this study were unaware of a number of factors such as the seriousness of their behaviour, and the rules and laws surrounding it. However, when this was explained, or the individual experienced the consequences of their actions, the offenders demonstrated improved understanding, which is rarely reported in the TD literature (Hanson & Morton-Bourgon, 2005). Many commented that now that they understood the impact of their behaviours on others and that their behaviours were illegal, they had a desire to desist from offending in the future. As noted earlier, autistic individuals do not differ from TD individuals in terms of their sexual interest (Gilmour et al., 2012; Stokes & Kaur, 2005) but their actual sexual knowledge is reportedly diminished (Mehzabin & Stokes, 2011). Education to improve the sexual knowledge of autistic individuals in combination with the seriousness and laws governing such behaviours may be particularly beneficial for this group. This should be provided in an ASD-accessible format to help prevent initial offending or re-offending. It is

important to consider whether the reasoning that indicated a misunderstanding about the responsibility of search engines such as Google reflects a retrospective view or whether this logic was at play at the time of offending. If the latter is correct, then this highlights the need for clear and more specific rules and education about the use of the internet.

As noted by Hannah and Stagg (2016), education interventions need to be tailored to the needs of autistic individuals, and they need to be age-appropriate. One such intervention is PEERS<sup>®</sup>, a social skills training intervention designed by Laugerson and Frankel in 2005 which has three different manuals (one for pre-schoolers, adolescents and young adults; Semel Institute, 2018). The adolescent and young adult manual covers a variety of social skills topics, some of which are age-specific. For example, the young adult (but not the adolescent) manual covers, “how to develop romantic relationships and use appropriate dating etiquette”. Since several individuals in the current research and previous research (e.g., Griffin-Shelley, 2010; Ray et al., 2004) initially began sexually offending before becoming a young adult, it may be beneficial to include information about this at an earlier age in interventions for those at risk. Additionally, it may be helpful to include relevant information about the law to help enable individuals to make informed choices.

The majority of participants reported that they did not plan their offending but spoke of a need for greater processing time in order to make informed decisions. Again, education may be key; autistic individuals can be advised to take time to think before acting and provided with information about the law and seriousness of certain behaviours and encouraged to make an informed decision before engaging in these behaviours.

The lack of professional support prior to offending that was reported by the offenders within this study was striking. One possible explanation is the older mean age at which the autistic offenders (Mean = 13.13) were reported to have been diagnosed compared to non-offenders which is reported to be between 3.17 to 10.0 years (Daniel & Mandell, 2014). The

reported older age at diagnosis within this study reflects previous research with autistic offenders. For example, in a review of all autistic offenders in Norway between 2000 and 2010, Helverschou et al. (2015) found the mean age for ASD diagnosis in offenders to be 25.3 years. It is possible that many autistic offenders may receive their diagnosis as part of the evaluation process surrounding their criminal charges/trials, and therefore vary significantly to non-offending autistic individuals. Thus, future research should explore with autistic offenders the types of support they feel that they would benefit from. Fabri, Andrews, and Pukki (2016) demonstrate the effectiveness of collaboration between autistic adults, researchers and stakeholders (e.g., parents, teachers, higher education academics and support staff) using the design thinking process to design a tool kit for preparing school students to navigate university. Future research should evaluate support that is currently available and identify and address any discrepancies between current and desired support to identify realistic and achievable solutions to help prevent initial or re-offending. A final tentative suggestion is that, if resources are available to do so, autistic individuals whom are at risk of offending (i.e., those experiencing adverse events or exhibiting risk factors such as those described within this paper) should be identified and offered increased support that is aligned with their current needs.

Of course, suggestions for practice are tentative given the small sample size ( $n = 9$ ); however, it is important to note that data saturation was reached (with no new themes or sub-themes emerging after participant five). Future research should seek to conduct similar interviews with autistic offenders who have committed different types of offences (e.g., non-sexual violent crime) to identify whether the themes or sub-themes differ between offence types and if new themes emerge.

Another consideration is that the method for identifying autistic offenders relied on CJS staff confirming ASD diagnoses. Unfortunately, access to offender notes was not possible due to ethical constraints, and it must be acknowledged that the level of training and expertise of

the staff member is not known, thus making it difficult to ascertain the ability of the staff member to identify whether the diagnosis was given following well-established gold standard diagnostic assessment.

A further limitation is that the current research only included those in prison or probation services; thus, findings may not be reflective of those who do not enter the CJS (e.g., those in forensic hospitals), those who evade the CJS entirely, or individuals who experience different ASD symptomology or biopsychosocial factors to those interviewed within this study. A further limitation is that the research relied on individuals being willing to discuss a sensitive topic which may have led to a selection bias during the recruitment, which may in turn influence the findings. Similarly, the post-hoc nature of the interviews mean that reported accounts of offences committed may have been constructed following multiple interviews and interventions in custody. Finally, this research did not include individuals who were engaging in sexually inappropriate behaviours and at risk of sexually offending but who had not yet come into contact with the Criminal Justice System. Future research should investigate individuals' reasons for engaging in these sexually inappropriate behaviours to help to inform pre-offending interventions.

In summary, the present findings provide a preliminary exploration of the self-reported reasons that autistic individuals believe led to their offending. Social skills difficulties, lack of perspective, misunderstanding the seriousness of behaviours and a lack of appropriate relationships all appeared to precede sexual offending in the current sample of autistic adults, but a period of disequilibrium was most common prior to committing the sexual offence. There is a need to develop tailored sex and relationship education packages which cater to the needs of autistic individuals (e.g., thought rigidity, ToM difficulties) and methods to identify when an individual is at risk of offending and the support they should receive. Participatory design, which has been shown to be effective for designing ASD tailored interventions (Fabri et al.,

2016), is a useful framework to go about this. In conclusion, future research should investigate the role of disequilibrium in ASD sexual offending and should develop ASD specific sex and relationship education packages which also include information about the law.

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