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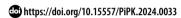
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Crime and responsibility among individuals with autism spectrum disorder. Doubts and challenges for experts

Przestępczość i odpowiedzialność za popełnione czyny wśród osób z zaburzeniami ze spektrum autyzmu. Wątpliwości i wyzwania dla biegłych

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Abstract

Experts preparing forensic psychiatric opinions - due to the continuous expansion of medical knowledge and the evolving understanding of mental disorders and diagnostic criteria – are increasingly facing new challenges. Recently, psychiatrists and psychologists have been increasingly encountering diagnoses of autism spectrum disorders in their daily practice, also in their roles as court experts. Individuals affected by autism spectrum disorders show a diversity of clinical presentations that translates into their functioning and comprehension. New classifications of diseases, changing diagnostic criteria, and, above all, a much broader empirical knowledge base, allow for a more comprehensive view and better understanding of autism spectrum disorders; however, they do not provide answers to all questions regarding this disorder, particularly among individuals affected by this disorder in the context of their contact with the justice system. The assessment of patients with autism spectrum disorders for judicial purposes by psychiatrists and psychologists is a topic of consideration in many countries. The topic arises both in the context of the relationship between autism spectrum disorders and aggression and in the context of responsibility for acts committed. Forensic and psychiatric opinions in cases where a person with autism spectrum disorder is a suspect may be difficult. Therefore, it is important to consider offenders with autism spectrum disorders in terms of responsibility for the act, punishment, and its impact on the defendant. This publication will present data from the literature on the prevalence of violent behaviour among individuals with autism spectrum disorders, causes of criminality in this group of offenders, and considerations regarding the assessment of culpability and the role of punishment for these offenders.

Keywords: autism, violence, case law, criminal responsibility, Asperger syndrome

Streszczenie

Opiniowanie sądowo-psychiatryczne ze względu na stałe poszerzanie wiedzy medycznej, zmieniające się rozumienie zaburzeń psychicznych oraz kryteria diagnostyczne stawia przed biegłymi nowe wyzwania. W ostatnim czasie coraz częściej psychiatrzy i psychologowie w codziennej praktyce spotykają się z diagnozą zaburzeń ze spektrum autyzmu, również jako biegli sądowi. U osób dotkniętych zaburzeniami ze spektrum autyzmu obserwuje się różnorodność obrazu klinicznego przekładającego się na ich funkcjonowanie i rozumienie świata. Nowe klasyfikacje chorób i zmieniające się kryteria diagnostyczne, a przede wszystkim znacznie obszerniejsza baza wiedzy empirycznej pozwalają na szersze spojrzenie i lepsze zrozumienie zaburzeń ze spektrum autyzmu, nie dają jednak odpowiedzi na wszystkie pytania dotyczące tego zaburzenia. Zwłaszcza takie, które dotyczą osób dotkniętych tym zaburzeniem w kontekście ich kontaktu z wymiarem sprawiedliwości. Ocena przez psychiatrę i psychologa osób z zaburzeniami ze spektrum autyzmu na potrzeby wymiaru sprawiedliwości jest przedmiotem rozważań w wielu krajach, a temat ten pojawia się zarówno w kontekście związku zaburzeń ze spektrum autyzmu z agresją, jak

i w kontekście odpowiedzialności za popełnione czyny. Opiniowanie sądowo-psychiatryczne w sprawach, w których osoba z zaburzeniami ze spektrum autyzmu występuje jako podejrzany, może nastręczać trudności. Dlatego ważne jest podjęcie rozważań dotyczących sprawców cierpiących na zaburzenia ze spektrum autyzmu w kontekście odpowiedzialności za czyn, kary i jej wpływu na oskarżonego. W niniejszej publikacji przedstawione zostaną dane z literatury dotyczące rozpowszechnienia zachowań agresywnych wśród osób z zaburzeniami ze spektrum autyzmu, przyczyn przestępczości w tej grupie sprawców oraz rozważania dotyczące oceny poczytalności i roli kary u tych osób.

Słowa kluczowe: autyzm, przemoc, orzecznictwo, poczytalność, zespół Aspergera

AUTISM SPECTRUM DISORDERS IN THE CONTEXT OF VIOLENT BEHAVIOR

The word "autism" comes from the Greek autos meaning "alone". When Leo Kanner introduced the concept of "congenital autistic affective contact disorder" in his 1943 work, he was aware that the term might also seem misleading and does not fully reflect the essence of the described disorder. The latest DSM-5 (American Psychiatric Association, 2018) and ICD-11 (World Health Organization, 2019) disease classifications include autism spectrum disorders (ASD) in the category of neurodevelopmental disorders, while at the same time moving away from specific and narrow disease entities such as childhood autism, Asperger syndrome, or Rett syndrome, in favour of assessing the symptom spectrum of autism. In my clinical experience, I observe that knowledge about this disorder is insufficient, especially among psychiatrists who work primarily with adults in their practice. Increasing awareness of ASD among psychiatrists may be important not only in the context of treatment, but also for the assessment of responsibility for acts committed by individuals suffering from ASD and the use of adequate protective or penal measures. Therefore, it is worth asking whether these individuals use violence more often than the general population, whether certain regularities can be observed in their criminal behaviour, and what factors might influence it.

In the 1990s, publications began to appear suggesting that individuals presenting symptoms of Asperger syndrome (Asperger, 1944 - 1991) may have a predisposition to aggressive and antisocial behaviour (Baron-Cohen, 1988; Mawson et al., 1985; Tantam, 1988). Ghaziuddin et al. (1991) analysed all reports regarding Asperger syndrome published from 1944 to 1990, focusing on criminal behaviour. Importantly, most of the works they reviewed were case reports, which made them quite critical of the presented results and case descriptions. The authors pointed out, among other things, unclear diagnostic criteria, lack of distinction between antisocial behaviour and violence, and an insufficiently clear definition of aggressive behaviour. Their conclusion, therefore, was that given the small number of Asperger syndrome patients who exhibited aggression compared to the prevalence of violence in the general population, the reported cases could very well be due to chance. In their opinion, speculations about a predisposition to

aggressive behaviour based on unclear criteria might lead to the stigmatisation of patients and their families (Ghaziuddin et al., 1991).

Since the publication of this report, the issue of the extent to which individuals diagnosed with ASD may have a predisposition to commit acts of violence or other antisocial behaviour has remained important. Analysing the available literature, one may get the impression that the data are often contradictory and do not provide clear answers about the risk of aggressive acts by individuals with ASD (King and Murphy, 2014). When examining data on violence in the context of ASD, much of the information suggests that individuals with ASD are more often victims than perpetrators (Mattison et al., 2018; Sobsey et al., 1995), and there is no unquestionable empirical evidence that they engage in criminal behaviour more often than people without ASD (Im, 2016). Some studies have shown that individuals with ASD are less likely to engage in behaviours such as probation violations and property crimes (Cheely et al., 2012; Kumagami and Matsuura, 2009). The cited research indicates that while a certain group of individuals with ASD may exhibit aggressive behaviour, it is essential to determine the underlying causes. Criminal acts committed by individuals with ASD are often explained by unfavourable conditions in childhood (Allely et al., 2017). However, key symptoms of ASD, such as impairments of social, cognitive and communication skills, may cause individuals suffering from ASD to display aggressive behaviour in response to new and unfamiliar situations (Mayes and Calhoun, 2003). This can increase their contact with the criminal justice system (Howlin, 2004; Tint et al., 2017; Weiss and Westphal, 2015). Howlin (2004) identified four factors that she believes make individuals with ASD more likely to engage in aggressive or unlawful behaviour:

- a) impaired social communication may lead to susceptibility to manipulation by others;
- b) disruption to routine or violation of internal rules may lead to impulsive behaviour and, consequently, aggression;
- c) lack of understanding of social situations may lead to socially unacceptable and aggressive behaviour;
- d) an obsessive pursuit of satisfying personal interests may result in a lack of understanding of the consequences of such behaviour¹.

¹Based on: Howlin, 2004.

Overall, there is more evidence in the literature suggesting that people with ASD, unlike the general population, are not more likely to commit violent crimes (Woodbury-Smith et al., 2006), but may be more inclined to engage in certain types of criminal behaviour, such as arson (Hare et al., 1999; Mouridsen et al., 2008), sexual crimes (Cheely et al., 2012; Kumagami and Matsuura, 2009), and aggressive acts involving assault or robbery (Cheely et al., 2012). Individuals with ASD are probably more likely to commit specific types of crimes, which is consistent with the factors described by Howlin (2004), resulting mainly from problems in communication, interpersonal relationships, and rigid interests within this population (Im, 2016).

According to Freckelton (2011), hostility and aggressive behaviour in individuals with Asperger syndrome do not stem from personal reluctance, but rather from an impulsive reaction to something perceived as disgusting, unacceptable, or intrusive. In this context, it is a form of self-defence for, after which they may express a lack of understanding of the victim's reaction to an often brutal attack. Similarly, in cases of sexual violence, misunderstanding of moral norms and social conventions causes misunderstandings in communication and leads to inappropriate sexual behaviour (Hénault, 2015). This is due, among other factors, to the fact that, unlike individuals with psychopathy, who are characterised by a lack of empathy and whose criminal activities are often aimed at satisfying their own needs, individuals with Asperger syndrome maintain their own, often eccentric, moral framework and try to seek interpersonal relationships in their own way (Freckelton, 2011). In cases where individuals with ASD engage in arson, factors related to the flame, such as its colour or heat, are often more important than the desire to destroy someone's property or cause a threat (Freckelton and List, 2009). This raises the question of the extent to which their existing deficits may exclude responsibility for the acts committed.

CRIMINAL LIABILITY OF PEOPLE WITH ASD COMMITTING PROHIBITED ACTS

Freckelton and List (2009, p. 16), referencing court decisions in the United Kingdom, Victoria, Canada, Australia, and Nova Scotia, point out that Asperger syndrome must be distinguished by the justice system from other disorders, such as personality disorders and intellectual disability, and should be recognised as having a potentially significant, if subtle, impact on the way individuals with ASD think and understand, and their emotional responses to situations they perceive as traumatic.

Barry-Walsh and Mullen (2004) investigated whether individuals with ASD can be fully responsible for their actions given their varying degrees of inability to recognise and understand what others think and feel. More precisely, if social conventions and relationships are opaque and unclear to them, can they reliably assess whether their actions are

consistent with legal and moral norms, and whether they can, through their actions, cause unpleasant consequences for other people? Barry-Walsh and Mullen (2004), focusing only on Asperger syndrome, highlighted the diversity of the psychopathological picture. In their opinion, variability and differences in the depth of the disorder may result in some of these individuals retaining an ability to understand the meaning of their actions and thus being responsible for them. Fitzgerald (2013, pp. 98-100) additionally raises the issue of responsibility for actions among individuals whose predisposing factors to commit crimes include features of criminal autistic psychopathy, as seen in the cases of the serial killers he described. Masters (2020), describing Dahmer's behaviour, indicated that he did not suffer from a mental illness and understood the meaning of his actions, but he was unable to control them, i.e. manage his impulses, which resulted from autistic psychopathy. The diversity of the psychopathological picture means that it is not surprising that individuals involved in the justice system may be uncertain when deciding on the level of responsibility for an act if they receive information indicating that the accused person suffers from ASD (Berryessa, 2014). As a result, while some lawyers view ASD as a mitigating factor in the judgment and sentencing, others consider it a potentially aggravating factor (Berryessa, 2016). The context of criminal liability for committed acts is outlined in Art. 31 of the Penal Code. In the Polish legal system, the assessment of sanity consists of a biological/medical dimension and a psychological dimension. The mixed model of understanding criminal responsibility reflects a certain consensus, but in the case of individuals with ASD it may raise numerous doubts. The primary concern is the assessment of whether the accused has a mental illness, mental retardation, or other mental disturbances. In the current ICD-11 classification of diseases, there is no concept of 'mental illness', and all abnormalities are referred to as 'mental disorders'. Taking into account the interpretations of 'mental illness', they indicate that they are primarily disorders presenting with psychotic symptoms. Nevertheless, this position is not fully clear (Bolechała, 2009). Therefore, should ASD, not being classified as a mental illness, be considered a medical condition as defined in the Criminal Code? According to the new ICD-11 classification, ASD can coexist with intellectual disability, should it then be considered as equivalent to the premise of mental impairment? Other disturbances of mental function are doctrinally referred to disorders of the regulatory and integrative role of personality (Paprzycki, 2013), which may arise on pathological grounds, e.g. meningitis, or from nonpathological factors - menstruation, exhaustion, but also as transient, short-lived conditions with exogenous causes such as intoxication or consumption of intoxicating substances, or endogenous ones such as severe stress (Dudzik, 2015). Budyn-Kulik (2023) concludes that ASD may fulfil two of the three criteria indicated in Art. 31 of the Criminal Code and may fall within the group of other mental disorders. If accompanied by intellectual disability, questions of the person's sanity may be based on this premise. ASD should therefore be considered among other mental disorders with a pathological basis, although they have been overlooked in the literature (Hajdukiewicz, 2007). This may be due to the fact that previously the diagnosis of ASD mainly concerned individuals under the age of 18.

Nevertheless, psychological assessment in the context of understanding the meaning of an act and directing one's behaviour may pose difficulties. People with ASD have difficulty understanding social relationships, mainly resulting from deficits in the theory of mind, i.e. the ability to take the perspective of another person and understand their emotions (Głowacka, 2019). In individuals with ASD, deficits in social motivation can also be observed (more: Pudło et al., 2022), manifesting as a lack of pleasure in interpersonal relationships (Chevalier et al., 2017), low value of social rewards (Clements et al., 2018), or a preference for negative social stimuli (Kim, 2015). Deficits resulting from both theory of mind and social motivation disorders make navigating the world of interpersonal contacts extremely important for individuals with ASD when interpreting their behaviour in the case of actions that are related to broadly understood relationships with others. Committing such acts may result from a lack of understanding by individuals with ASD of another person's behaviour, which may be perceived as intrusive or threatening, even if not objectively so e.g. touching, taking a specific object (Freckelton, 2011). On the other hand, the actions, or rather behaviours, of individuals with ASD may be misunderstood by others and cause feelings of threat. This situation may occur in cases where individuals with ASD face accusations involving sexual acts (Hénault, 2015). Additionally, individuals suffering from ASD have difficulties with abstract understanding, and their thinking is schematic and concrete (Chojnicka et al., 2010; Rybakowski et al., 2014). This is especially important in in assessing the motivation behind an act. It is necessary to take into account that in some situations individuals with ASD may have the intention to perform an act, but their motivation is not clear in our understanding of motivational processes (Budyn-Kulik, 2023). They are guided by their own understanding of the world around them or by obsessive preoccupation with activities and objects. This may occur in the case of destructive acts, arson, or theft (Freckelton and List, 2009).

For the purposes of this article, available databases of court decisions were searched. Using the phrases "autism", "autism spectrum disorder", "Asperger syndrome" in the search, a total of 924 court decisions, both common and administrative, were found. However, only five of them concern individuals who were accused of prohibited acts and in whom experts diagnosed ASD. It should be noted that not all judgments regarding similar cases are available in electronic databases. The available judgments concerned cases such as attempts to plant a self-made explosive device in public places (e.g. a school classroom or bus),

possession of a significant amount of narcotic substances, using another person's documents, and attempted robbery and theft. In four of these five cases, the defendants were found to have had a significantly limited ability to understand the meaning of the actions and direct their conduct. The experts based their conclusions on the diagnosis of ASD. In a case involving possession of a significant amount of narcotic substances, it was found that the individual with ASD was completely sane. In my practice, during scientific conferences, I have encountered descriptions of cases where the accused were diagnosed with ASD. These cases involved defendants who engaged in aggressive, but destructive behaviour. In the above cases, the experts concluded that the respondents had a significantly limited ability to understand the meaning of their actions and direct their conduct. As the described cases show, the experts' assessments are not consistent, but most often, they conclude that Art. 31 § 2 of the Penal Code applies.

The role of punishment and the adaptability of individuals with ASD should also be noted here. When a defendant with ASD is found to be mentally or severely impaired, they may be sentenced to imprisonment. For a person with ASD, time in prison can have two effects. On the one hand, the routine and clearly defined rules that prevail in prisons may be beneficial for people with ASD, and they may find themselves quite well in such an environment due to their schematic and concrete thinking. For other people with ASD, contact with other inmates and the rules of the prison community - often incomprehensible to them - can cause discomfort and tension, and even trigger aggressive behaviour (Budyn-Kulik, 2023; Lisowska, 2023). It is also necessary to consider whether imprisonment will serve as an element of rehabilitation for individuals with ASD, or whether it will only play an isolating role. Similarly, this consideration applies when a person with ASD is declared insane and meets the prerequisites for the application of a security measure under Art. 93a § 1 pt. 4 of the Criminal Code. A security measure in the form of placement in a psychiatric hospital requires the therapeutic staff to implement appropriate measures so that through therapeutic, resocialisation, and rehabilitation interventions, the patient can improve in such a way that they no longer pose a threat to public order. However, it is known that therapeutic interventions bringing positive changes in the functioning of individuals with ASD must be undertaken at early stages of life, and their effectiveness has been evaluated in studies up to the age of 22 (Waligórska et al., 2019). In adult patients, therapeutic interventions, at least those applied in psychiatric hospitals that are not adapted to the special needs of people with ASD, have a mediocre effect. In such cases, the protective measure of psychiatric hospital placement has a purely isolationist role (Budyn-Kulik, 2023). Addressing the isolationist dimension of both prison and psychiatric hospital placement is important in the context of the Charter on the Rights of Persons with Autism,

which asserts that individuals with ASD have the right to exist in conditions appropriate to their abilities and needs, in particular free from the fear and danger associated with unjustified placement in psychiatric hospitals or in other institutions that restrict personal freedom and liberty. According to paragraph 18, they also have the right to adequate treatment and protection from abuse and excessive use of pharmacological agents².

DISCUSSION

The diagnosis of ASD affects the defendant's understanding of the meaning of the act and their ability to control their own behaviour. The nature of ASD and the deficits exhibited by those affected, at the very least, limit their capacity to understand the meaning of their actions and their ability to manage their behaviour. Therefore, it would appear that, notwithstanding the inadequacies of the code terminology, it is necessary to treat ASD as a disorder with significant clinical relevance in the assessment of the defendant's sanity (Lisowska, 2023). This is particularly important due to the legal consequences for the accused. When the accused has been diagnosed with ASD, it is necessary to relate the deficits manifested by the accused to the alleged act. In such cases, a psychologist's opinion is crucial to determine whether the observed disturbances in the regulatory and integrative functions of personality can be related to the responsibility for the acts committed by the examined person.

On the basis of the issues presented, it should be considered impossible to establish clear criteria for expert witnesses. Summarising the data from the literature, the following conclusions can be made about individuals with ASD in contact with the justice system:

- 1. Individuals with ASD do not display aggressive behaviour more often than the general population.
- 2. Aggression in people with ASD is more common in those who have experienced difficult parenting.
- Impulsive and delinquent behaviour in individuals with ASD is mainly due to a lack of understanding of social situations, disruption of routine, or obsessive pursuit of self-interest.
- 4. People with ASD are more likely to commit destructive offences (arson) or sexual crimes.
- 5. ASD should be taken into account in the context of the assessment of insanity as one of the two medical grounds outlined in Art. 31 § 1 of the Criminal Code.
- ASD should be considered in the category of other mental disorders and, when coupled with intellectual disability, also as mental retardation.
- If the accused is diagnosed with ASD, it is necessary to consult an expert psychologist and, in cases involving acts of a sexual nature, also an expert sexologist.
- ² Read more: http://www.sejm.gov.pl/sejm7.nsf/PrzebiegProc.xsp?nr=380, accessed 11 March 2024.

- 8. In relation to the alleged act, the expert psychologist should identify deficits in social relations, theory of mind, motivation, or other psychopathological traits that may be related to understanding the consequences of the accused's behaviour.
- 9. The opinion issued by the expert team should include a detailed description of the defendant's functioning, their motivation in the context of the alleged act, but also a general overview of ASD, allowing the participants to understand the nature of the disorder.
- 10. The opinion should also include an assessment of the defendant's capacity to understand the punishment imposed on them and its consequences for their mental state, taking into account any possible penal, protective and probationary measures.
- 11. The sentence imposed should be appropriate to the act charged, taking into account the specific nature of ASD, the inconvenience to the accused, and the purpose the sentence is intended to serve.

The suggestions for addressing offenders diagnosed with ASD presented above are based on data from the literature and my own experience as an expert witness for many years. It is important to bear in mind that autism spectrum disorders have a significant impact on the assessment of motivation and the ability of the perpetrator to understand the meaning of their actions and to manage their behaviour. Therefore, each case should be treated with care depending on the nature of the alleged act and the specific deficits of the accused.

Conflict of interest

The author does not report any financial or personal connections with other persons or organisations which might negatively affect the contents of this publication and/or claim authorship rights to this publication.

Author contribution

Original concept of study; collection, recording and/or compilation of data; analysis and interpretation of data; writing of manuscript; critical review of manuscript; final approval of manuscript: AWN.

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