

# **Designing Solutions for Improved Support within Health, Social Care and Criminal Justice for Adults with Learning Disabilities and/or Autism who Have Offended**

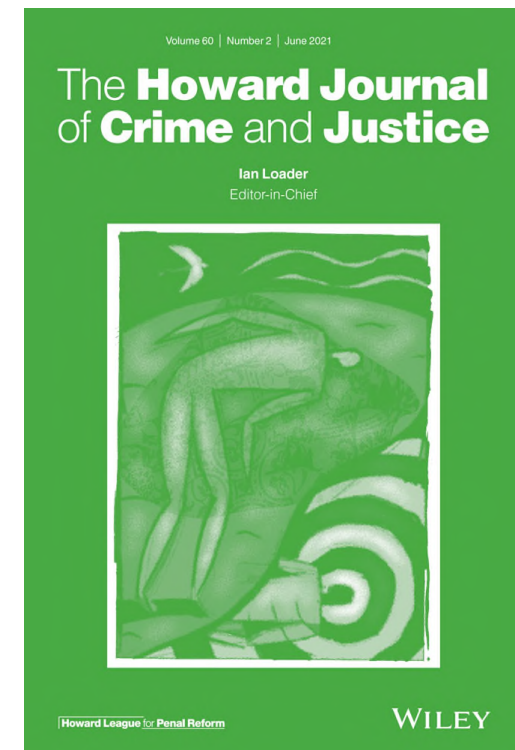
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ESRC Grant Ref: ES/L010534/1

## This presentation is based on the following (open access) paper:

- ▶ Hollomotz, A., & Talbot, J. (2021). Designing Solutions for Improved Support within Health, Social Care and Criminal Justice for Adults with Learning Disabilities and/or Autism who Have Offended. *The Howard Journal of Crime and Justice*, 60(2), 185–208.



## Foreword by the Rt Hon Lord Bradley



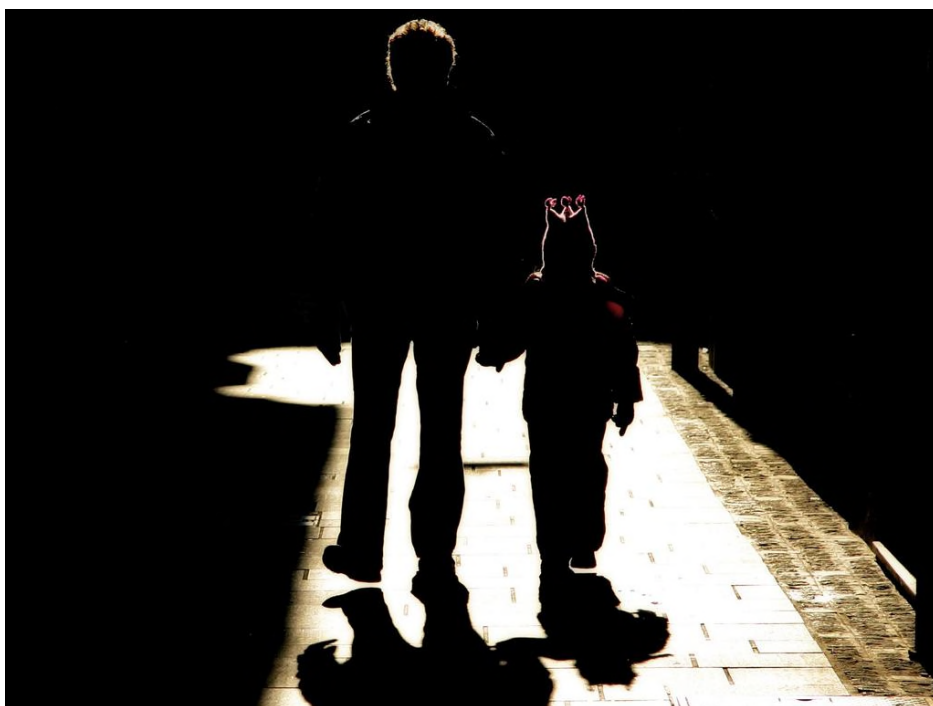
- Background info: In 2009, Lord Bradley authored a review of people with mental health problems or learning disabilities in the criminal justice system:
- Bradley, K. (2009). The Bradley report: Lord Bradley's review of people with mental health problems or learning disabilities in the criminal justice system. London: Dept. of Health.

# Overview

- ▶ Background
  - ▶ Case study of an autistic “sex offender”
  - ▶ How sociological thinking can help us distinguish personal troubles from social issues
- ▶ Methods
  - ▶ Capitalising on discussions between health, criminal justice, social care and users.
- ▶ Findings
  - ▶ Early interventions
  - ▶ Inclusive service design
  - ▶ Information sharing and consistency
  - ▶ Key relationships and support upon community resettlement
- ▶ Recommendations for policy and practice

# Background

## Case study of an “autistic sex offender”



p.6 in: Hollomotz, A., & Talbot, J. (2018). Behaviour that challenges: planning services for people with learning disabilities and/or autism who sexually offend. Retrieved from <http://www.prisonreformtrust.org.uk/Portals/0/Documents/Behaviour%20that%20challenges.pdf>

## Does the label sex offender work?



## Treatment programmes aimed at sexual offending behaviour

- ▶ Mainstream provision
- ▶ Provision for people with “learning disabilities and learning challenges”

**A:** Are these programmes designed for people with autism?

**R:** No, generally they're not.— that doesn't mean that folks with autism don't end up in the groups, they do. They're a different issue, because it's a very different identity issue for starters. The person with autism comes from a very different perspective in terms of who they see as themselves. (program architect)

## Where does Peter fit?



## The sociological imagination

When, in a city of 100,000, only one man is unemployed, that is his personal trouble, and for its relief we look to the character of the man, his skills, and his immediate opportunities.

But when in a nation of 50 million employees, 15 million men are unemployed, that is a social issue, and we may not hope to find its solution within the range of opportunities open to any one individual. The very structure of opportunities has collapsed.



Mills, C. W. (1959). *The sociological imagination*: New York, Oxford University Press.

## Personal troubles or social issues?

### Prevalence of learning disabilities and autism in the CJS

#### ► Autism

- Affects **1.1%** of the general population (National Autistic Society, 2020).
- Prevalence estimates for the CJS range from **2.74 to 26%** (King and Murphy, 2014).

#### ► Learning disabilities

- **0.6%** of adult population known to services as having learning disabilities (Hatton et al., 2016).
- Prevalence estimates for prisons are at **7%** (Murphy et al., 2017, Mottram, 2007).

#### ► likely overrepresented in the CJS

Hatton, C., Glover, G., Emerson, E., & Brown, I. (2016). Learning Disabilities Observatory - People with learning disabilities in England 2015: Main report. London: Public Health England.

Mottram, P. G. (2007). HMP Liverpool, Styal and Hindley Study Report. Liverpool: University of Liverpool.

Murphy, G. H., Gardner, J., & Freeman, M. J. (2017). Screening Prisoners for Intellectual Disabilities in Three English Prisons. *Journal of Applied Research in Intellectual Disabilities*, 30(1), 198-204.

National Autistic Society. (2021). How many people in the UK are autistic? Retrieved from <https://www.autism.org.uk/about/what-is/myths-facts-stats.aspx>

King, C., & Murphy, G. H. (2014). A systematic review of people with autism spectrum disorder and the criminal justice system. *Journal of Autism and Developmental Disorders*, 44(11), 2717-2733.

# Methods

## **Purposive sampling strategy**

### **Overview of the delegates**

- ▶ 11 delegates from the criminal justice sector (prison, probation and police)
- ▶ 9 social care (public and third sector)
- ▶ 9 health (learning disability nursing, psychology and psychiatry)
- ▶ 7 advocacy organisation representatives
- ▶ 4 legal sector (a solicitor, two prosecutors and a magistrate)
- ▶ 2 academics and Lord Bradley
- ▶ 5 members of the Working for Justice Group

## Facilitating focussed discussions

- ▶ **Part 1:** keynote panel of national leaders from health, criminal justice and social care reported on progress in their sector and their hopes for the future
  - ▶ Followed by focus group discussions between delegates about the cause of the 'problem' and pet ideas about how to solve it.
- ▶ **Part 2:** focus on practice examples
  - ▶ Followed by focus group discussions between delegates about practice examples and personal experiences.
- ▶ **Inclusive research principles:** aimed to engage delegates with learning disabilities and/ or autism in ways that were meaningful to them.
  - ▶ Individuals were encouraged, with support, to prepare what they wanted to say in advance.
  - ▶ Role of presenters of illustrative examples to open table discussions or invited speakers
  - ▶ In drafting the paper they were supported to read, edit and elaborate on the points they raised by practitioners they are familiar with.

## ► Main themes

- Early interventions
- Inclusive service design
- Information sharing and consistency
- Key relationships and support upon community resettlement

Figure 1: Word cloud of buzz words from the day

# Findings

## Early interventions

## Sex education

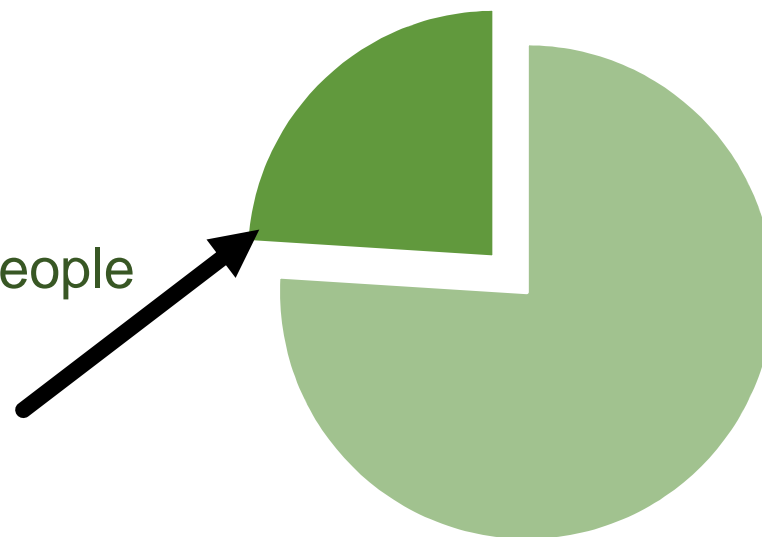
- ▶ *An autistic child may not make the link about how you get from forming romantic relationships to having sex and may well be behind their peers in experience of even friendships. So, unless completed in a specific way for autistic children, sex education may still not address risk issues (advocacy worker).*

## Early interventions

- ▶ *We get lots of panicky calls from the police and local authorities, typically about young men 16 to 17 years old, who have autism and have developed raving anxiety in tandem with their sexual development. There follows a long, detailed assessment but no offer of family therapy, meaningful employment, specialist education and/or help to integrate into society (psychologist).*

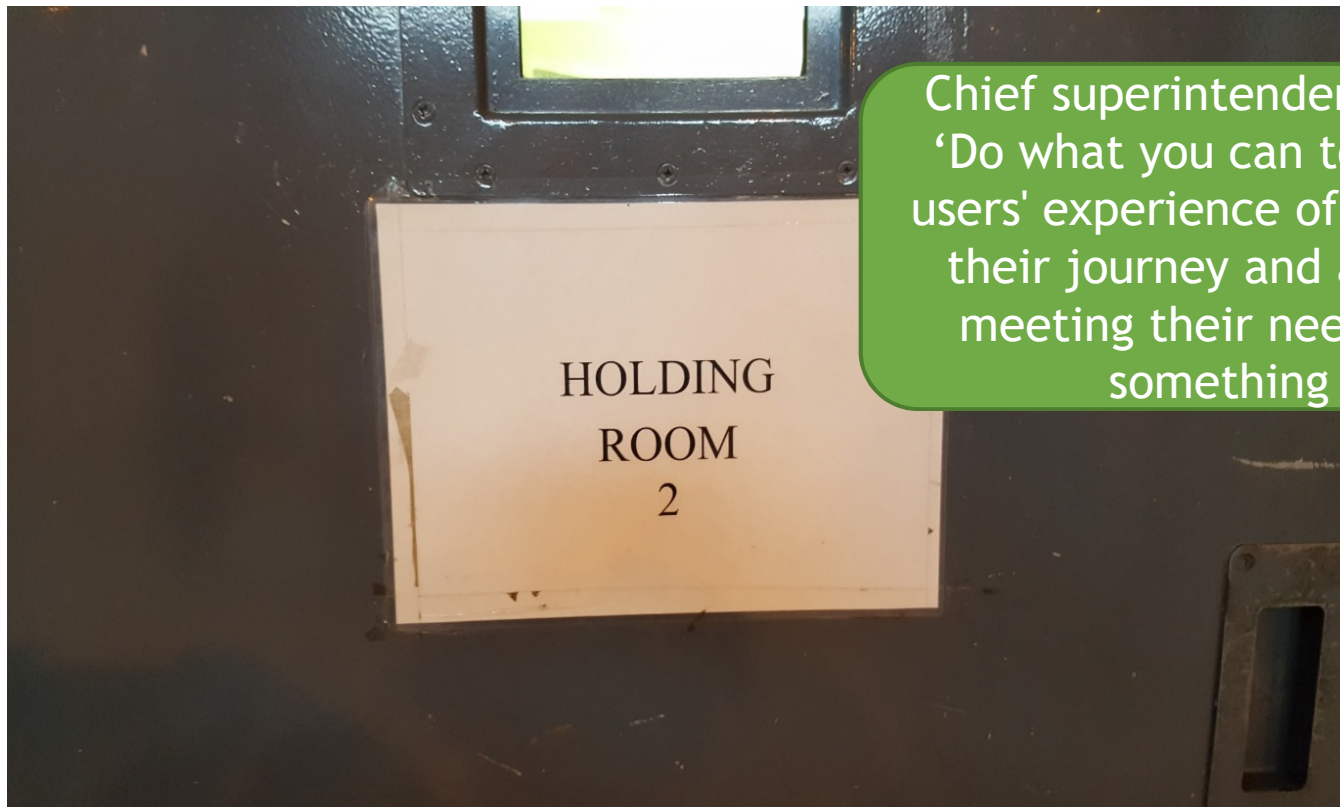
## A 'hidden majority' of adults with learning disabilities

- ▶ In England the proportion of the population known to have learning disabilities drops from
- ▶ 2.5% among children and young people to
- ▶ 0.6% among adults aged 20 to 29.



Hatton, C., Glover, G., Emerson, E., & Brown, I. (2016). Learning Disabilities Observatory - People with learning disabilities in England 2015: Main report. Retrieved from <https://healthwatchgateshead.co.uk/wp-content/uploads/2016/08/PWLDIE-2015-final.pdf>

## **Upon contact with the CJS: Making services accessible for all through inclusive design**



Chief superintendent Jonathan Betts:  
'Do what you can to understand your users' experience of your service. Walk their journey and ask yourself if it's meeting their needs. If it's not, do something about it.'



Secure  
waiting area

## Detecting and responding to needs associated with autism as a turning point

Graham: My alcohol worker was like a dog with a bone, she would not let go... even if I let go, she suggested checking for autism. I was finally diagnosed, didn't know what autism was, it was a relief, it understood my behaviour, it understood why I struggled, it brought all that together. [...] I started working with the People Focused Group and using my obsessions as therapy, like Lego, which changed my mental wellbeing. After diagnosis I got into a KeyRing support network. This gave me a grounding for where I am today, and I ended up as trustee of KeyRing for years. Two or three years ago I started to run a Lego group.

p.10 in: Hollomotz, A., & Talbot, J. (2021). Designing solutions for improved support within health, social care and criminal justice for adults with learning disabilities and/or autism who have offended. *The Howard Journal of Crime and Justice*, <https://doi.org/10.1111/hojo.12414>

## Information sharing and consistency



- ▶ A person should tell their story once and agree whether and how that will be shared with others (and why). Information should be shared along the justice pathway (police, liaison & diversion, court, probation, prison). Even better, one person should walk with the individual along this pathway. (service user)

# The journey to my front door

Derek: I got into trouble when I was younger. I was sent by the court to hospital. I spent about 18 years in various secure hospitals. In high, medium and low secure services. I was discharged once, but it all went wrong, and I had to go back.

- ▶ **The move: What helped?**
- ▶ **Derek:** Having regular meetings around my discharge and being involved.
- ▶ **Director of Derek's social care organisation:** Really involved. There was some real joint working going on. Not just people turning up for meetings.
- ▶ **Derek:** Bridging work with the new service I was going to. Develop trust.
- ▶ **Director:** The bridging and development was over a long period, this helped both of us start to develop trust and understanding.
- ▶ **Derek:** This was done in a professional way and not in the way it was done last time I was discharged.
- ▶ **Director:** I think it was important for Derek that he felt safe and looked after.
- ▶ **My own front door. What helps?**
- ▶ **Derek:** To me a good service keeps people such as managers and key staff for the long term, not constant change and people leaving. I need staff that respect me and treat me fairly. Staff who understand me and my needs and can help me when I am struggling.



# Practical support upon community resettlement



## Peer support: Giving back

- ▶ **Graham:** I started working with the People Focused Group and using my obsessions as therapy, like Lego, which changed my mental wellbeing. After diagnosis I got into a KeyRing support network. This gave me a grounding for where I am today, and I ended up as trustee of KeyRing for years. Two or three years ago I started to run a Lego group.
- ▶ **Question: What got you to the point of being able to commit to running a group?**
- ▶ **Graham:** A passion for helping in any small way that I can help. Sharing that common interest and pushing that forward. Peer support. It helped me, so I thought it would help others.

## **Recommendations for policy and practice**

- 1) Person-centred working
- 2) Inclusive service design
- 3) Screening
- 4) Services should be flexible in equating support to needs rather than to a diagnosis.
- 5) Specialist autism services
- 6) Multi-agency responses to diverse needs
- 7) Information sharing
- 8) Support individuals to develop sustainable key relationships
- 9) Sustained support with community living
- 10) Joint training

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# Thank you for listening!

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ESRC Grant Ref: ES/L010534/1