

Forensic Involvement in the Neurodiverse Population

Lanterman START (Southern California)

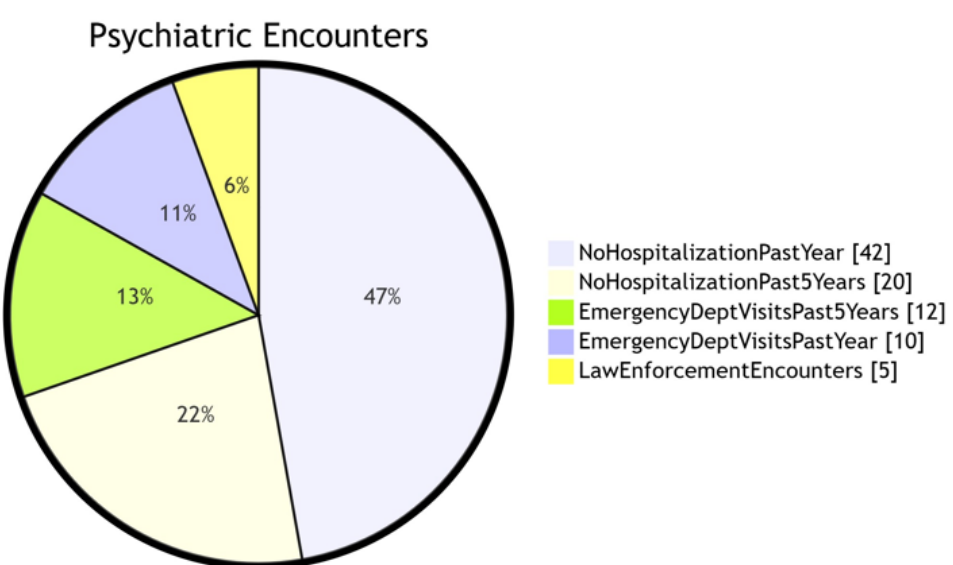
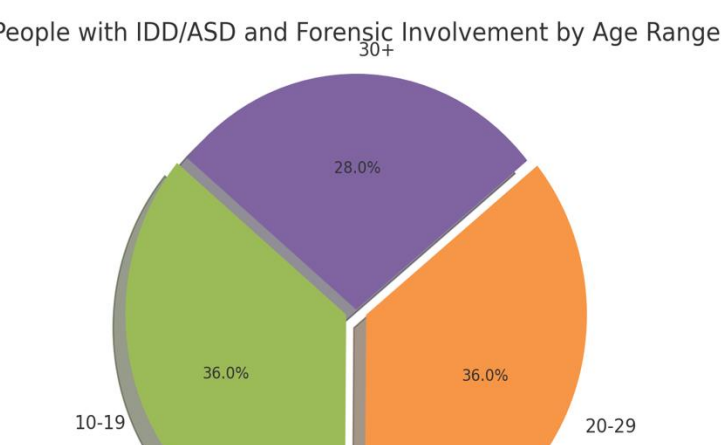
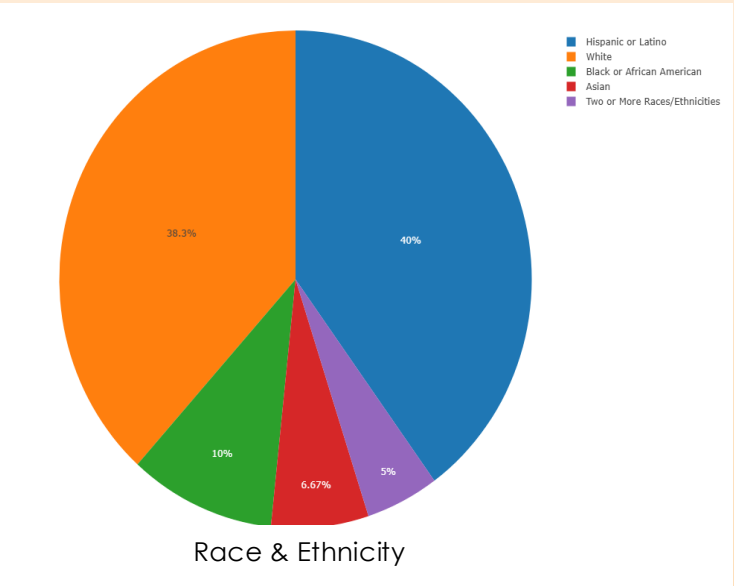
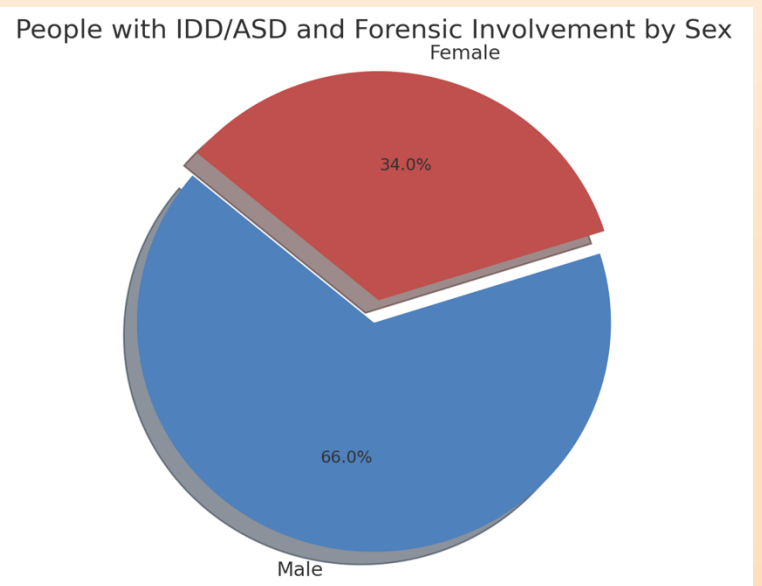
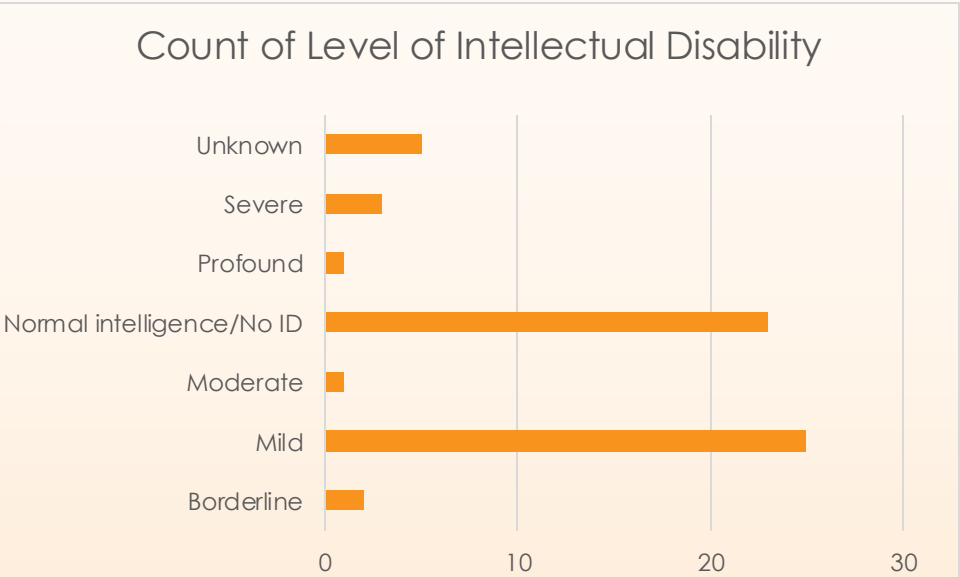
INTRODUCTION

The World Health Organization (WHO) defines maltreatment as encompassing “all types of physical and/or emotional ill-treatment, sexual abuse, neglect, negligence and commercial or other exploitation which results in actual or potential harm to the [person’s] health, survival, development or dignity in the context of a relationship of responsibility, trust, or power.” People with intellectual and developmental disabilities (IDD), particularly those who also experience mental health (MH) challenges, are especially vulnerable to complex and often harmful interactions with systems such as law enforcement, protective services, and emergency responders. These encounters frequently leave lasting emotional and psychological impacts, especially when a person’s neurodiverse needs are misunderstood or overlooked, further highlighting the need to address the systemic gaps that contribute to such outcomes. Research continues to show that adverse childhood experiences (ACEs) are highly prevalent among autistic youth, and are strongly linked to poor physical health, mental health concerns, and broader developmental challenges (Liu et al., 2024). In addition, ACEs have been found to significantly impair mental health and brain development in people with autism spectrum disorder (ASD), with effects that may differ markedly from those seen in neurotypical populations (Zhang et al., 2024). Despite growing awareness of these risks, a significant gap remains in understanding the complex interactions between people with IDD and forensic systems, including law enforcement, protective services, and the justice system. A 2024 report from the RAND Corporation underscored this gap, identifying both the lack of consistent IDD-related data collection and the critical need for enhanced training and resources to help law enforcement and protective services more effectively engage with this population (Richardson et al., 2024). The present study aims to contribute to this evolving body of research by examining how gaps in system knowledge and trauma-informed care may increase the likelihood of forensic involvement for people with IDD and co-occurring mental health conditions. Data from the Lanterman START program revealed that 76 out of 133 people served had experienced some level of involvement with Law Enforcement (LE), Adult Protective Services (APS), or Child Protective Services (CPS) over the course of their lives. Many of these people were identified both as victims and as subjects of concern, underscoring the dual vulnerabilities faced by this population. The data also pointed to a significant prevalence of adverse life experiences, many of which are associated with trauma-related responses. When these trauma responses are misinterpreted or overlooked—often due to a lack of specialized, trauma-informed supports—they may present as behaviors such as aggression or self-injury, which in turn can trigger further involvement with emergency services or protective systems. These findings reinforce prior research indicating that people with IDD are at heightened risk for forensic involvement when compared to the general population. The data from the START program further highlight a persistent gap: the current system of care lacks the accessibility, accountability, and person-centered approaches necessary to meet the complex needs of this population. This study aims to deepen understanding of the ways in which systemic limitations contribute to forensic involvement for neurodiverse people and to encourage the development of more supportive, preventative, and trauma-informed frameworks.

OBJECTIVES

This study explored demographic trends associated with an increased risk of forensic involvement among people with intellectual and developmental disabilities (IDD) and/or autism spectrum disorder (ASD). The findings aim to support service providers in identifying risk factors during assessment and emphasize the need for adequate, targeted resources and supports for this population.

DATA



CRITERIA

- Incarceration
- APS/CPS involvement
- Police/911 calls for behavioral challenges
- Court involvements

Demographic Information Collected

Age
Sex
Race
Level of IDD/ASD

Trends within the data were identified and the top 3 are highlighted

All active person served from the Lanterman START Program in Southern Cal were pulled on April 14th, 2025

*of 133 people served to date, 76 met criteria

RESULTS

In the examination of 76 people who have IDD and/or ASD with some level of involvement with Law Enforcement (LE), Adult Protective Services (APS), or Child Protective Services (CPS), significant trends were observed in sex, age range, and level of IDD. Of the people forensically involved, 66% were male. Ages were broken down into 10-year increments; notably, 73% of the people served fell between the ages of 10-29, with 36% in each of the two-decade spans. Another significant trend was observed in the 31 persons with an IDD diagnosis — 26 of whom were identified as having a mild level of IDD, representing 84%. Based on the data, it can be concluded that males between the ages of 10-29 with a mild IDD diagnosis are the most likely to have forensic involvement and are likely to require more targeted support and resources.

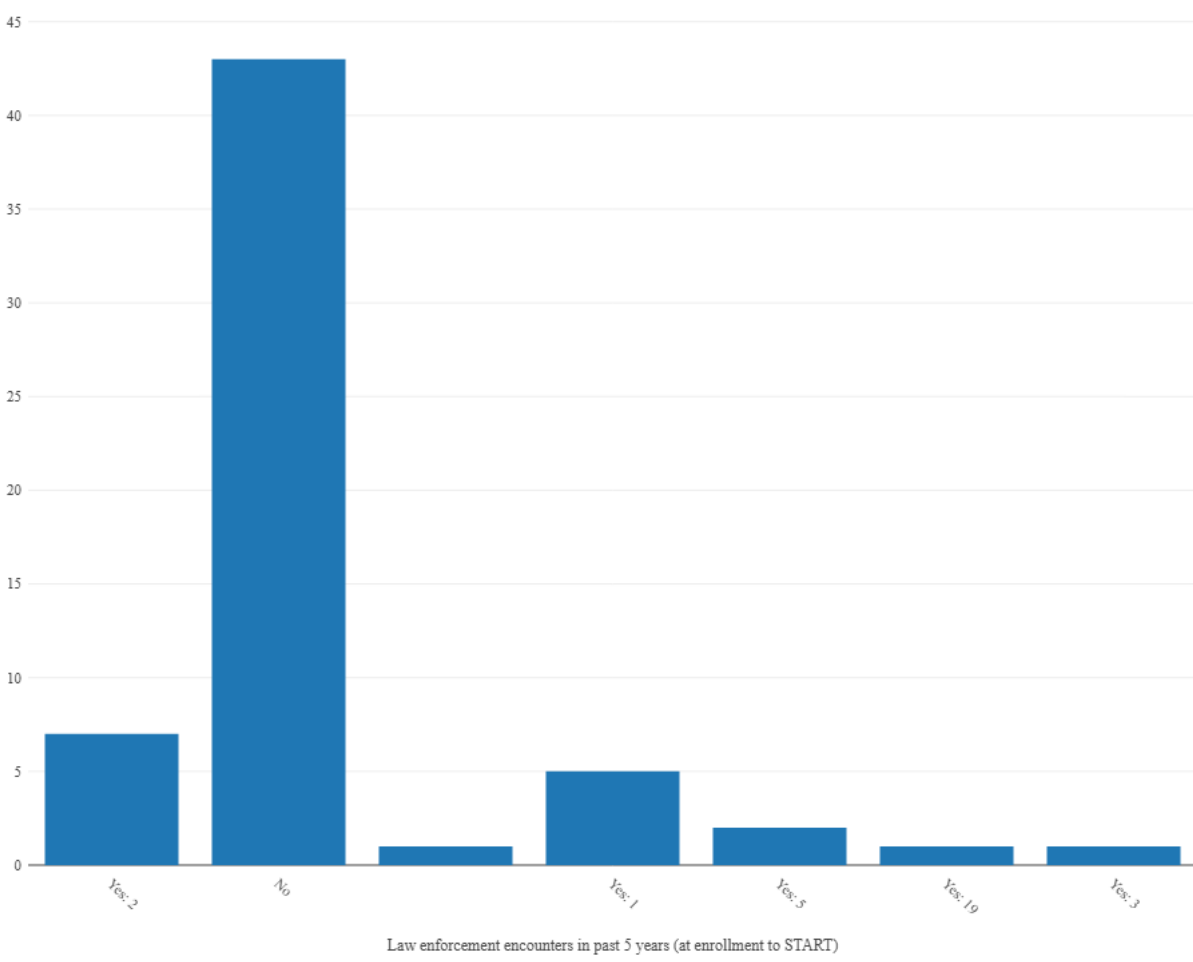
DISCUSSIONS

The findings from this study align closely with existing research, which has consistently shown that people with mild intellectual disabilities (ID) and/or autism spectrum disorder (ASD) are especially vulnerable to forensic involvement, including contact with law enforcement (LE), Child Protective Services (CPS), and Adult Protective Services (APS) (Liu et al., 2024; Richardson et al., 2024). Notably, approximately 42% of people receiving START services have experienced some form of forensic involvement — a rate that is significantly higher than the estimated 10% prevalence within the general population (Lindsay et al., 2014). This disparity reinforces concerns that people with mild ID and/or ASD are disproportionately represented in forensic systems, and that their underlying mental health needs are frequently misunderstood or mislabeled as behavioral issues. Such misinterpretations often result in an overreliance on emergency services rather than timely and appropriate mental health interventions (Zhang et al., 2024). Additionally, this study underscores the urgent need for specialized supports tailored to address the complex mental health and behavioral needs of people with intellectual and developmental disabilities (IDD) and ASD, particularly those who face forensic system involvement. However, several limitations should be noted. Participants in this analysis were limited to people actively enrolled in START services, meaning that those who were incarcerated or relocated outside the catchment area before accessing services were likely underrepresented. Furthermore, the study did not consider mental health diagnoses as part of its inclusion criteria, which may have influenced the interpretation and depth of the findings.

FURTHER CONSIDERATIONS

- Incorporation of mental health diagnoses in future studies.
- Longitudinal tracking of forensic involvement over time.
- Examination of cultural and socioeconomic factors over time.
- Evaluation of the effectiveness of support programs.
- Exploration of collaboration between law enforcement and service providers.

DATA



REFERENCES

- Liu, S. R., Ali, A. M., & Kerns, C. M. (2024). Adverse childhood experiences and health outcomes among transition-age autistic youth. *Journal of Autism and Developmental Disorders*, 54(5), 1891–1906. <https://doi.org/10.1007/s10803-024-06401-7>
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- Zhang, W., Li, H., & Wang, Y. (2024). Impacts of adverse childhood experiences on individuals with autism spectrum disorder. *Current Opinion in Neurobiology*, 89, 102932. <https://doi.org/10.1016/j.conb.2024.102932>

