Why we did this study

Research suggests that individuals with an FASD are more likely to have contact with the criminal justice system due to neuropsychological deficits in judgement, understanding consequences of behaviour and learning cause and effect. Although widely believed, there was no existing research examining the prevalence of FASDs among the general adult offender population.

The goal of this research was to determine the prevalence of FASDs among a sample of adult male offenders from the general offender population and to develop a screening tool for FASD to be used to flag offenders at risk for an FASD.

What we did

The FASD Brief Screen Checklist (BSC) was developed and a diagnostic protocol piloted. During the 18 month study period all newly sentenced offenders at the institution, age 30 and under, were asked to participate in the research. Interviews were held with all offenders who met the inclusion criteria, and 65% agreed to participate. Each offender underwent a full medical assessment for FASD. Research Assistants in the community contacted family members to administer the BSC and asked questions regarding prenatal alcohol exposure. Once all data on each participant was collected, a case conference was held to determine if the offender met the criteria for a diagnosis in one of the FASD categories.

What we found

Ninety-one offenders participated in the full research process. The assessment found that 10% of offenders were diagnosed with an FASD, while a diagnosis could not be confirmed or ruled out in 15% of offenders. Neuropsychological deficits unrelated to prenatal alcohol exposure were found in 45% of offenders, and 30% were found to have no identifiable deficits.

Analysis of offenders with an FASD demonstrated that they had higher risk and need ratings compared to other offenders in the research. They had severe deficits in attention, executive functioning and adaptive behaviour in particular. In addition, they were much more likely to have had previous incarcerations as juvenile offenders, and previous incarcerations in adult provincial facilities.

The properties of the BSC were analysed and the screening tool was found to be predictive of an FASD. Medical diagnosis was used as the gold standard to assess performance of the BSC.

What it means

None of the offenders diagnosed in this study had been previously identified as having an FASD. There is a population of offenders within Correctional Service Canada who are affected by FASD who are currently not being recognized upon intake, and are not being offered the types of services or programs that meet their unique needs. This research has shown that adult male offenders with FASD have a higher severity of needs and are rated as higher risk as compared to offenders without FASD.

Screening to identify those at risk for an FASD is necessary and has been demonstrated as feasible in a correctional context. In addition, the medical and neuropsychological requirements of a diagnosis can also be successfully implemented with individuals incarcerated in an adult federal penitentiary.

For more information


To obtain a PDF version of the full report, contact the following address: addictions.research@csc-scc.gc.ca.

Prepared by: Patricia MacPherson

Contact
Addictions Research Centre
(902) 838-5900
addictions.research@csc-scc.gc.ca