Autisms and Sexual Difference

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How’s your sex life?

• How did it get that way?
• How would you like it to be?
• What about your child/adolescent?
• What about your child/adolescent with ASD?
Outline

- Neuro-sexual Diversity in Autism
- Why such diversity?
  - Normal sexual development
  - The impact of autism on sexual development
- The range of sexual differences in Autism
- Sex education and sex therapy for individuals with Autism
- Relationships
Sexual Stereotypes

• There is not one “Autistic Sexual Phenotype”
• The sex lives of individuals with Autism are different in many ways
Why such a Broad Array of Autistic Sexual Differences?

- Autism is best represented as a single diagnostic category, defined by a common set of behaviors
  - Deficits in social communication and interactions
  - Restricted, repetitive patterns of behavior, interests and activities

- **BUT with individual functional and etiologic specifiers**

  - DSM5
Autisms are...

- A heterogeneous array of social communication disorders
- Resulting from numerous and varied combinations of neurodevelopmental differences
- Affecting sexual development (amongst other things) in many different ways
Q: How do the neurodevelopmental and psychosocial differences of Autism inevitably affect sexual development?
Biopsychosocial Transactional Models of Normal Sexual Development

- Biological development
- Sociosexual development
- Cognitive stages (Piaget)
- Psychosocial crises (Erickson)
First, a few definitions
Sexual Developmental Differences

- Asexuality
- Bisexuality
- Homosexuality
- Gender Identity Disorders
  - Gender Variance
  - Gender Dysphoria
  - Transsexuals
Biological development

• Chromosomal sex, genital dimorphism
• Capacity for orgasm, growth in size
• Puberty
  ▫ secondary sex characteristics
  ▫ menarche, ejaculation
Sociosexual development

- Gender assignment
- Self-exploration
- Mutual exploration
- Genital play
- Dating
- Petting
- Coitus
Cognitive stages (Piaget)

- Sensory motor
- Preoperational
- Concrete operational
- Formal
Psychosocial “crises” (Erickson)

- Trust vs. mistrust
- Autonomy vs. shame and doubt
- Initiative vs. guilt
- Industry vs. inferiority
- Identity vs. role diffusion
- Intimacy vs. isolation
Autistic differences affecting sexuality

- Temperament
- Sensory
- Motor
- Attention
- Executive dysfunctions
- Social
- Psychiatric/medical
- Adaptive behavior
- Social environment
Temperament

- Activity
- Rhythmicity
- Approach/ withdrawal
- Adaptability
- Threshold of responsiveness
- Intensity of reactions
- Quality of mood
- Distractibility, attention span and persistence
Sensory Differences

• Under-sensitive or over-sensitive sensitive
• Deep touch, light touch, taste, smell, noise, movement/proprioception, visual
  ▫ Overload, anxious withdrawal, need for solitude or agitation, aggression
  ▫ seeking, craving
Motor Differences

- Discoordination
- Sexual clumsiness
- Lack of sexual energy/ stamina
Attention Regulation

- Perseveration, hyperfocusing
- ADHD
  - Distractibility, impulsivity, hyperactivity
- Different eye-tracking preferences
  - Geometric forms vs. social stimuli
  - Parts vs. wholes
- Deficits in joint/ shared attention
Executive Dysfunctions

- Initiating
- Sustaining
- Inhibiting
- Shifting (perseveration/ inflexibility)
- Strategic thinking, planning, organization
- Time awareness and management
- Central Coherence
Social (non-verbal) language

- Literal expression and interpretation
  - “all or none”/ “black or white”
  - poor inferential reasoning
- Context-blindness
  - ok in one setting but not ok in another?
  - private vs. public
  - Internet porn taken as realistic script for life
- Theory of Mind
  - Misreading non-verbal cues
  - restricted emotional code-book/ repertoire
  - lack of colloquial “sexually cool” language
Psychiatric/ medical

- ADHD: Inattention, Hyperactivity, Impulsivity
- Anxiety
- OCD
- Depression
- Severe Mood Dysregulation /Bipolar
- Psychosis/ schizophrenia
- Sleep disorder
- Gastrointestinal
Sexual side effects of psychiatric medications

- Drowsiness
- Emotional reactivity
- Irritability
- Decreased libido
- Problems with erection or ejaculation
Adaptive Behavior Impairments

- Lack of accurate knowledge about sex
  - Poor sex education
- Self-care skills/ Hygiene
  - not concerned enough or
  - too demanding of others
- Range of unusual or maladaptive behaviors
Social environment

- Heterosexual segregation
  - 4:1 male:female ratio in special education/therapeutic settings
- Lack of appropriate intimate social-sexual experience
- Social isolation
- Inconsistent messages about appropriate sexual thoughts and behaviors from:
  - Family, culture, media (internet!), peers
The result:
A wide range of sexual differences in Autism

- Sexual thinking differences
- Psychosocial consequences
- Sexual behavior differences
- Gender identity differences
Autistic sexual thinking

- Misunderstandings
  - confusion/ bewilderment
  - obliviousness
- Lack of taboos, no sexual compass
  - too ready to conform
  - too ready to act out
- Difficulty relating to love, closeness, and the importance of showing feelings
Psychosocial consequences

• Delayed first sex
• Less frequent sex
• Less successful/ less satisfying sex
• No sex/ virginity
• Sexual victimization
  ▫ Bullying
  ▫ Abuse/ Rape
  ▫ Prey/ Prostituted
Psychosocial consequences (cont’d)

• Poor self image, low self-confidence
• Increased anxiety, frustration, depression
• Further relationship avoidance, lack of experience with intimacy
• Chronic and self-perpetuating cycle of sexual/intimacy deprivation
Coping Reactions

• Further withdrawal, lowered desire: “It’s not worth it. It’s too complicated.”
• Use of drugs/ alcohol to manage socio-sexual anxiety, depression
• Heightened desire, obsessive frustration with being a virgin; not having a relationship
Autistic relationship problems

- Poor partner selection
- Over-attached and dependent
- Detached and unresponsive
- Excessively demanding, brutally honest
- Extremely reactive
- Unusual ways of showing love/affection
- Infidelity
Masturbation / Public Erection

- Compulsive, repetitive, perseverative
- Public vs. private
- Excessive if:
  - distraction
  - injury
  - anxiety, shame
  - misunderstanding by others
Sexual Obsessions

- Fantasies
- Magazine, movie or internet porn
- Virtual sex: phone, internet
- Sexual exhibitionism
- Flirtatiousness, inappropriate or excessive touching, promiscuity
- Staring, stalking, voyeurism, harassment
- Sexual aggression/ assault
Paraphilias/ Fetishisms

• Sexual excitement by a body part, object or specific characteristic
• Sadomasochistic behaviors
• Transvestic cross-dressing
Autism and distorted thinking about gender

• “I can’t be a feminine man or a masculine woman without going all the way.”
• “I’m a boy with Autism. If I become a girl, I won’t have Autism anymore.”
• “It’s better to be sexually different than socially different.”
• “I was rejected by the opposite sex” or “I don’t fit with same sex” so “The other will be better.” (“tomboys” and “girlie-boys”)
Gender identity differences

Autism Spectrum Disorders in Gender Dysphoric Children and Adolescents

Annelou L. C. de Vries

22 January 2010

- Children and adolescents (115 boys and 89 girls, mean age 10.8, SD = 3.58) referred to a gender identity clinic
- Incidence of ASD in this sample of children and adolescents was 7.8% (n = 16).
- Clinicians should be aware of co-occurring ASD and GID
Child's Wish to Be the Opposite Sex as Reported by Parent

*(John Strang, March 2014, Archives of Sexual Behavior)*

<table>
<thead>
<tr>
<th>Group</th>
<th>Percent Endorsement</th>
<th>Odds Ratio&lt;sup&gt;a&lt;/sup&gt;</th>
<th>95% Confidence Interval</th>
<th>P -value</th>
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<tbody>
<tr>
<td>Epilepsy or neurofibromatosis</td>
<td>1.7</td>
<td>0.52</td>
<td>0.10 - 10.53</td>
<td>Not significant</td>
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<tr>
<td>Attention-deficit/hyper activity disorder</td>
<td>4.8</td>
<td>6.64</td>
<td>2.45 - 17.99</td>
<td>&lt; .001</td>
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<tr>
<td>Autism spectrum disorder</td>
<td>5.4</td>
<td>7.59</td>
<td>3.05 - 18.87</td>
<td>&lt; .001</td>
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</tbody>
</table>

<sup>a</sup>Peto odds ratio compared with the standardization sample of the Child Behavior Checklist.
Is Autism gender/ X-linked?

• 4:1 male: female ratio
• Increased incidence of Autism in:
  ▫ Kleinfelter’s (Testicular Feminization/ XXY) boys
  ▫ Turner’s (Ovarian Dysgenesis /XO) girls
  ▫ Congenital Adrenal Hyperplasia(excess androgens)
  ▫ Fragile X
• Extreme Male ("systematizing vs. empathizing")

Brain Theory in Autism (Simon Baron-Cohen, The Essential Difference)
  • “explains masculine autistic women but not feminine autistic men”
Autism and liberated thinking about gender

- ASD as difference, not disability
  - Neurodiversity and Autism-pride
- Freedom from irrelevant socio-cultural constructs, norms and taboos
  - “I didn’t give a damn. Genderlessness made more sense.”
  - “I just wondered what it would be like to be bisexual.”
  - “You neurotypicals and your stereotypes about relationships- and your need for sex! I’ve just never had any interest whatsoever.”
How to separate autistic distortions and obsessions from non-autistic differences in sexuality and gender identity?

- Persistence of the wish
- Centrality of the wish
- Specificity of the wish (parts vs. wholes)
- Clarity of communication about the wish relative to other issues
Disorder, Diversity, and Doubt

- Treat disorder / relieve distress
- Accept diversity/ accommodate difference
- When in doubt: buy time, support, and wait
  - for “neurotypicals”, sexual development continues throughout adulthood
  - in Autism, adolescence and sexual development may be even more prolonged
Sex education and sex therapy for individuals with Autism
Using autism special education principles for autism sex education

- More proactive
- More explicit
- More structured
- More scripted
- More “black and white”
- More clearly stated “dos and don’ts”
- More visuals
- More coaching?
- More practice?
Sex Education Techniques for Autism

- Structured programs/curricula (Henault)
- Example: Teaching masturbation
  - Private masturbation (with or without porn) is easier and safer than navigating a relationship for sex
  - “Finger Tips”, “Sex for One: The Joy of Self-loving”
- Visual communication, Social Stories, Cartoons
- CBT: training in social skills and social thinking
- Unstuck and on-Target for sex?
Supervision

- Prevent unhealthy or dangerous sex
- Facilitate healthy and appropriate sex
  - experienced professional sex workers?
  - sex therapists?
Internet

- Source of information: both good and bad
- Source of community: both supportive and dangerous
Finding a partner

• The internet; on-line dating, not at the bar
• Full disclosure
• Look for shared interests
• Specific preferences regarding physical appearance
• Compensatory strengths in your areas of need
• “Birds of a feather” flock (and stay?) together
• Happiest couples are often both autistic or eccentric
Relationship advice

- Open and honest
- Accepting
Open and Honest

- Explicit communication and instruction
- Knowing what to expect
- State specific sexual preferences
  - sensory preferences
  - hygiene
  - routine vs. experimentation
- If you don’t know or don’t understand, ask!
Accepting

• Everyone is different
  ▫ Respectful
  ▫ Flexible
  ▫ Willing to accommodate
Must sex always be shared, reciprocal “love-making”?

• Or, after insuring mutual consent and safety, is it ok for a willing partner to be an unconditional object of sexual experimentation and play?
• “I loved being his special interest.”
Masturbation, sex and mature relationships

• Sexual readiness should depend upon some minimum level of social development
• But for people with ASDs, do we set the social skills pre-requisites for sex too high?
• Could safe sex represent an earlier step toward the development of mature relationships?
• Could sexual acceptance and sexual success help bridge individual differences and lead to more mature relationships?
The socio-sexual challenges of people with ASD amplify the importance of understanding, accepting and enjoying the individual differences of all human beings.
Resources

- Sarah Hendrickx, *Long-Term Relationships: What People With Asperger Syndrome Really Really Want*
- Henault, Isabelle, *Asperger's Syndrome And Sexuality: From Adolescence Through Adulthood*
Resources

- Liane Holliday Willey, *Pretending to Be Normal: Living With Asperger's Syndrome*
- Maxine C. Aston, *The Other Half of Asperger Syndrome: A guide to an Intimate Relationship with a Partner who has Asperger Syndrome*
- Ashley Stanford, *Asperger Syndrome and Long-Term Relationships*
- Daniel Tammet, *Born on a Blue Day*