

A HANDBOOK FOR AND BY AUTISTIC PEOPLE

relationships & sexuality

Edited by Elesia Ashkenazy
& Melanie Yergeau



A project produced by *Autism NOW*, a national initiative of *The Arc*,
and the *Autistic Self Advocacy Network*

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Acknowledgments

This book is but a first. In the months we spent planning and editing and poring over pages, we realized, all too quickly, how little has been said about autism and sexuality. And again, all too quickly, we recognized that any anthology on autistic relationships would represent but a sampling of our community's diversity. And so, this book is a first. We are proud to say that it will not be the last.

A truly collective effort, *Relationships & Sexuality* represents the skills, wisdom, and labor of many. First, we wish to thank our project's sponsors, the Autistic Self Advocacy Network, The Arc, and the Autism NOW Center. Throughout the project, members from each organization lent time and advice. In particular, we'd like to thank Tonia Ferguson, Melody Latimer, and Ari Ne'eman for their continued expertise. We also thank Melanie Yergeau, who served as our typesetter, collator, and copy editor.

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And, finally, our contributors: It's no understatement to assert that this project would not exist without you.

This manuscript, written by and for adults with autism, discusses topics relating to sexuality in a frank and open manner. Although these topics may be uncomfortable and even offensive to some people, it is important to present this information as a continued effort to empower individuals with autism and other developmental disabilities. Any views or opinions presented in the following articles and essays are solely those of the authors and do not necessarily represent those of the Autism NOW Center. Additionally, although Autism NOW respects the authors' use of Identity-Based Language, as the National Resource and Information Center, we promote and encourage the use of People First Language.

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Foreword

by Elesia Ashkenazy

The Autistic Self Advocacy Network (ASAN) is excited to have collaborated with Autism NOW on this cutting-edge project about relationships, sexuality, and the Autistic community. The hallmark of our organization is to provide support and services to Autistic individuals while working to educate communities and improve public perceptions of autism. We strive to open doors for people to live fulfilling and productive lives. There should be no limitations on the possibilities for Autistic individuals to achieve their personal goals and to attain the dreams they have for themselves. Nothing about us without us!

This anthology aims to take readers on a thought-provoking journey about relationships and sexuality through the eyes of Autistic self-advocates. It is tempered with advice, rich perspectives, and stories that are woven through the personal experiences of our contributors. In the following pages, you'll discover information about romance, marriage, expectations, consent, myths, and sexual abuse. Other topics include cultural fascination, gender transition, asexuality, and other similar subjects.

We have high hopes that those who encounter this resource will find that the information and advocacy ideas presented are helpful in advancing their own life experiences. It is an honor and a privilege to participate in providing firsthand information to the community straight from the source: Autistic self-advocates. We wish we could sit down and have a chat with

each of our readers over a cup of coffee, tea—or whatever it is that is fancied—so that we could exchange further ideas and answer questions. Though we cannot teleport, please know that we appreciate your support and that we encourage you to stop by at any time:

<http://autisticadvocacy.org/>

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part 1



identity & becoming

When We Met, I Wasn't Autistic Yet

by Andee Joyce

When I first met Chris, my partner, seven years ago, through an ad I placed on OK Cupid, I was blown away by how easy it was. It might not have been love at first sight for the two of us, exactly—but synergy at first speech? That it was. It was like a couple of dogs meeting up in the dog park and stopping to sniff and wag their tails with delighted impunity—“Yep, I like this one. I couldn’t tell you why, but I do.” There was no angst whatsoever about *did he like me, did I blow it, will I ever see him again*; we just blended, like creaming Earth Balance spread into sugar. Yum.

Trust me, nothing like this had ever happened to me. During my prior 41 years on this earth, I had—in addition to one spectacular mismatch of a marriage—dozens of fabulous relationships. Only they were all in my head. (To say I was the Queen of the Unrequited Crush since the age of 11 would be lowballing it; I could have taught a class on how to fantasize endlessly about someone who won’t ever ask you for a date, let alone look your way.) When a few of my old crushes did materialize, I turned out to be staggeringly wrong about my crush-object’s rightness for me. In fact, that’s partly what got me married to Brave Sir Mismatch in the first place. At age 33, I was starving for someone to think I was good enough, pretty enough, and nice enough to want forever. I ached, screamed, and cried for something a therapist very helpfully told me “doesn’t happen between men and women,” a concept that love, when it came at last, would be a permanent validation sticker to affix to my backside.

I married Brave Sir Mismatch because I wanted to feel “normal.” Instead, I just wound up feeling like a married freak for five and a half miserable years. Having that ring on my hand didn’t remove my core feeling that I was unacceptable in every possible way. And being married to someone who didn’t—wait, couldn’t—work with me as a team (the way I saw other happy couples doing) just made it that much worse.

I thought I flunked relationships because my fat body didn’t cut the mustard (even well before I attained my present levels of psych-med-padded awesomeness), my skin tone was unlovably blotchy, my polycystic ovarian syndrome—ravaged scalp unforgivably unfeminine and gross despite all the work I did to hide it. Of course the men I liked didn’t want to be seen with me, I was hideous! What I didn’t know, in all those years I went undiagnosed, was this: it was what was going on beneath my scalp that was the real barrier between the men I pursued and me. Men (non-autistic men, that is; I knew of no other kind) were just plain weirded out by me: my raggedy speech patterns, my staring spells, my almost costume-like wardrobe, my idiosyncratic interests and unladylike sense of humor, even the herky-jerky left-sided way I moved and walked. I could read all the books and magazines I wanted, have all the therapy I could scrounge around in the couch cushions to pay for, work on myself until the cows opened a McDonald’s franchise, and there was no way, no way at all that these nice, “normal” men I was drawn to for their seeming niceness and “normalcy” would ever even have considered giving me anything more than a fast roll in the hay, if that. (I did have a two-year relationship with someone who, in retrospect, I am pretty sure I was on the spectrum, but that was no party either; if there’s one thing undiagnosed autistics in their

20s know how to do, it's relentlessly annoy the living crap out of each other.)

So how is it that Chris and I had that immediate synergy? Is he not “nice” and “normal”? Well, let's put it this way: he's very nice. But what exactly *is* normal, anyway? Does it even exist? Although Chris is not on the spectrum, he has what I've come to think of as autistic-like traits, certain neurological quirks that set him apart. Without violating his privacy, I think it's safe to say that he, in many ways, has no interest in meeting a lot of common standards for how often he's supposed to socialize and in what ways. And he appreciates that I don't approach him with a checklist of things we're supposed to be doing as a couple, or that he's supposed to do or have in order to pass some arbitrary Good Guy Test. That is something I've managed to learn with practice. I had endless lists of *supposed tos* when I was younger, and they had to do with what I perceived as the things I had to have in terms of jewelry, compliments, social outings, and so forth in order to keep some sort of validation sticker pasted firmly to my buttocks. Only the shiny sticker fell off enough times that I came to realize how little anything on my precious list actually meant. I don't pressure Chris to fit a mold, and he doesn't pressure me, either. We intuited that about each other from the start, and it's miraculous.

A little over two years into the relationship, I was finally diagnosed. In a way, I have Chris to thank; he thought my perseverative thought patterns might respond well to neurolinguistic programming, and I found a therapist who took my insurance and listed that among her therapeutic specialties. It was quite the shock when she told me, about ten minutes into our first session, that she thought I might have Asperger's. I'd always heard that

people on the spectrum weren't interested in deep connection with people, didn't like affection, didn't like sex, didn't even seem to care about anyone around them, and that just wasn't me. She assured me it didn't have to be for me to qualify for the diagnosis, that I needed to look at the diagnostic criteria and forget the stereotypes, and then do my homework to decide whether or not I thought the diagnosis was a fit. When I realized that it was, indeed, a match, I then had to tell Chris. How would he react, knowing that now he was living with a Person with Autism™? If I'd told him that at our first meeting, would he have been as receptive to me?

Turns out I was in for a surprise; he was quite familiar with the diagnosis, since one of his kids had received it in school, and he wasn't shocked at all. In fact, he seemed quite relieved to know that they at last had a definitive name for what I was, and that now I could come to realize that a lot of what I thought of as failures at various life tasks and goals weren't my fault at all—it's just that I didn't have anyone to give me the help I needed all those years. Not, mind you, that it was easy for me to grasp. I had to do some serious grieving for all the time I lost being undiagnosed and feeling like I was terminally stuck in the driveway spinning my wheels. I got horribly depressed, knowing I would never be the person I had hoped all my life I would become. I, in fact, became suicidal, and needed a pretty hardcore drug cocktail to snap me out of it.

And yet, he stuck around. Why? Honestly, I think a lot of it was because no matter how bad my problems got, I never took it out on him, ever. I didn't yell at him, didn't throw things, didn't loudly announce my intent or desire to harm myself, didn't expect him to fix me. Also, my depression was nothing like it is in the movies or books, where people take to their beds

and cry all the time. About 95 percent of the time, I was, if not in a good mood, at least in a relative steady state. It was the other five percent of the time that was dangerous, those times when I'd have those attacks that told me I was no good and the world would be better off without me. When I told my psychiatrist about it at our first meeting, he said he'd never seen anything quite like it; I could talk about my depression almost like it was happening to someone else, but at a level of detail that convinced him that my brain was, in fact, a pretty bad neighborhood at that moment and that I ought not to go there alone.

I'm not sure exactly how I wound up there, except for the fact that my brain being the way it is, and my having gotten almost no useful help for understanding or working with it, meant that I had to keep digging for answers, for decades. I had to change, I had to learn, and I had to grow, because my life depended on it; I had to keep pulling myself up and re-potting myself until I found the right soil, the right climate, the right container. I had to, or I wouldn't be here, much less able to share a life and a living space with anyone else. Chris says he's never seen anyone work harder on themselves than I have. It often seems strange to me that I feel like I'm changing at the speed of light, while he stays pretty much the same. But if anything, the ways in which I grow make me a better and better partner for him. It's often said that no one will love you unless you love yourself, but I think that's an oversimplification; it's more like, if you don't love yourself, you won't feel loved, won't ever really appreciate the other person's love, and you'll basically be reminding them all the time what terrible taste in partners you think they have. As a result, I work on loving myself better so that I don't inadvertently insult him.

Our dynamic as a couple probably feels “off” to most non-autistic couples. We don’t yell or argue. We resolve disputes with even-tempered diplomacy—and when I start getting too upset about what we’re discussing, I quickly disengage and say, “I’m going to have to come back to this later, when I’m not being triggered.” We don’t even insult or needle each other in fun; as much as I love New York sarcasm and use plenty of it, putting down someone I love (even in jest) always seemed like a bridge too far. I always found it trippy when non-autistic couples who had been together a long time seemed so detached from each other, relaying information on the phone without any laughter or *I love yous*, managing to leave the house without kissing each other. How could they do that? Don’t they know the other person could be dead in an hour, and you didn’t kiss them goodbye or say you loved them? Some of that has probably stuck with me, the girl who learned about relationships from books and movies and magazines and TV shows and songs that told me that if the other person doesn’t make your heart sing, and you don’t show that, then you don’t belong together any more. I used to think I wanted to be loved “just like everyone else”; turns out that, as has been the case with so many things in my life, that wasn’t true—I wanted more. I wanted to be thrilled every time I laid eyes on him. Every time I took him in my arms, I wanted to be struck anew by the fact that he smelled like an armful of flowers.

And guess what? I am. I did it. I got more. I give more. I can love.

Negotiating Identities

by Caroline Narby

My story may be somewhat familiar to others who have received relatively late diagnoses: I was a precocious but somewhat odd child, inquisitive but always “stoic,” as my mother puts it. As I got older, my peculiarities stood out in sharper and sharper relief. I was socially isolated, prone to anxiety and obsessive behavior, and emotionally immature. I had unusual interests, and I was confident and outspoken about those interests not because I was especially brave or self-assured, but because I lacked the self-awareness to know any better. Loneliness and my growing frustration with myself steadily took a psychological toll, and by the end of my first year of college I was in crisis. It occurred to me that maybe I wasn’t simply odd or eccentric; maybe something really was “wrong” with me. With my family’s support, I pursued neuropsychological evaluation and entered therapy, and when I was twenty I was diagnosed with Asperger syndrome.

Near the end of my senior year of college, I organized a small event that featured a panel of fellow young adults with Asperger’s. It had been about a year and a half since I’d received my diagnosis, and I was still in a sort of “honeymoon” period. The diagnostic label had come as a tremendous relief. Suddenly I didn’t feel so alone, and knowing what was “wrong” allowed me to be gentler with myself. Easing up on myself and recognizing the areas where I needed support actually allowed me to grow up and become better-adjusted.

I quickly incorporated Asperger's into my self-identity and took an interest in disability politics, because that was how I was accustomed to interacting with such labels. I had identified as a feminist since I had first learned what that word meant (so pretty much since I was seven), and proudly supported gay rights because I'm a lesbian. As a gender studies scholar-in-the-making, I understand that social categories like "woman," "gay," and "autistic" represent constructs and not fixed, objective realities, but those categories still inform the way I conceive of myself and my place within society. The labels are there for me to accept, reject, or play with.

During the panel, I experienced something new and unsettling. As I sat in front of a small audience of fellow students, siblings, and parents, I realized that, to all those people, having Asperger's was my only identifying feature. No matter what I might say, now that they knew I was autistic, that would be all they saw. My identity was forcibly flattened into a single trait; every other quality or experience was automatically "tainted." If I rambled, it would be because "Aspies" tend to ramble, not because I happened to lose my train of thought. If I expressed a strong conviction, it would be because autists tend to see things in "black and white." If I happened to mention that I was gay, it might be because I have a "male brain," or because I lack the social aptitude to express "appropriate" sexuality. If I never mentioned my sexual orientation, it might be assumed that I don't have one, because autistic people are overwhelmingly perceived as non-sexual.

I never did get to discuss my gender and sexuality as they relate to my Asperger's during that panel, and I don't think I would have known what to say other than that autistic women tend to be overlooked because, culturally, autism as a condition tends to be gendered male. I still don't

quite know how to articulate the connection between my autism and my sexual orientation, even though I know there is a connection—a conceptual connection, not a simplistic causal relationship.

I have known that I am gay for far longer than I have known that I am on the autism spectrum. I first realized that I was attracted to other girls sometime early in middle school, around the time when many children start experiencing crushes and some begin to “date.” (I’m still not sure what “dating” is supposed to mean when one is in sixth grade.) For a while I thought maybe I was attracted to boys too, so while I initially came out as gay, I then identified as bisexual for a bit, and then went back to identifying as gay. Now I understand that gender is not a binary, and my lesbian identity means that I am specifically not attracted to men, while I am otherwise not limited to partners who explicitly identify as women.

Even as my sexuality has shifted over time, it was never really a big deal. Living in a heterocentric culture means that I’m never allowed to forget that I’m not straight, but I am tremendously lucky in that, until recently, I had never been made to feel rejected, ashamed, or unsafe because of my sexual orientation. I was too oblivious to feel self-conscious about it during grade school and high school, and college was a kind of progressive bubble wherein I was never directly exposed to homophobia. Now, post-college, I have to contend with the “real world,” and as a masculine woman I’m often subjected to stares and sometimes remarks from strangers. At those moments, I feel myself “flattened” the way I was during the panel. Those people have no sense of me as a complex and contradictory individual; to them my identity is collapsed into “dyke.” It’s a horrible feeling

to have something that you're proud of and that's so much a part of you used to make you feel hurt and ashamed.

When it comes to my sexuality, those moments, however troubling, are fleeting. When it comes to Asperger's, such moments, where I can feel that single quality subsuming the rest of my identity in the eyes of others, are more frequent and more worrying. I talk and write about being on the spectrum a lot, and I want to become more active in the self-advocacy movement, but autism isn't the only thing I talk about. I don't want Asperger's to be the only thing that people see when they speak to me or read my work. Just as my previous experience with gay politics helped me understand how I wanted to approach the "Asperger's" label, my negative experience with the way others sometimes perceive my autism as my defining feature helped me understand that same feeling when I experienced it in relation to my sexuality and gender presentation. I don't want any aspect of my identity, or any label that I might choose to use, imposed on me like that.

Autism is understood as a lifelong condition that affects all areas of cognition. The diagnosis describes a constellation of behavioral symptoms that arguably indicate a particular sort of cognitive framework. But while in some way autism may partially describe how I experience the world, it does not dictate the what and why of who I am.

part 2



expectations, communication,
& commitment

Putting Words To Expectations

by Meg Evans

It is often said that marriage takes a lot of work. My husband and I have been married since 1988, and in many ways we find it easy to get along with each other. We have similar views about many things, such as relationships, society, responsibility, money, and raising children (although we're mostly finished with the latter, now that our kids are away at college). Our household division of labor works well for us. We enjoy each other's company and do a lot of things together; our kids' friends have commented on how cute they think we are when we wear matching clothes. We still have the stuffed animals that we exchanged when we were dating, as well as many other sentimental items.

Even so, we've really had to work on understanding the differences in how we communicate. Most of my thinking is in text mode, and I usually take words at their face value. Nonverbal signals such as a cheerful voice register in my mind only as general indicators; they don't trump the actual content of the words. If there appears to be a mismatch between the words and the nonverbals, I ask for clarification. My husband has a very different way of processing conversation; he relies much more on external cues and often responds to nonverbal impressions rather than to the actual words. As a result, we sometimes end up having muddled and frustrating

conversations where we don't realize that we are not talking about the same thing.

Another cause of confusion is sorting out what questions don't call for literal answers. Let's say that my husband asks me in a grumpy tone why I didn't do something that he usually expects me to do, such as bringing in the mail. That doesn't really mean he wants an explanation of why it wasn't done. He just wants to be cheerfully reassured that I'll take care of it. And to complicate things further, he's not inflexible about who does the task; he is not in fact demanding that I should always be the one to do it. If I send a text message asking him to bring in the mail when he gets home from work because the weather has turned yucky, he is perfectly happy to stop his car at the mailbox so that I won't have to walk along an icy driveway. What bugs him isn't the chore itself; it is the disruption of his routine when he gets home, sits down at the desk expecting to read the mail, and only then finds out that it is not there.

There's a saying that we both find instructive: Failed expectations are the source of all conflict. This is particularly true with regard to conversation and nonverbal signals. People often assume that their body language and use of words should be easily understandable by others. When that expectation proves false, we don't immediately know how to go about broadening our concepts of interaction to include other styles of communication. Often what happens is not that we consciously judge the other person's way of communicating to be wrong; rather, we don't even comprehend the extent to which it may differ from our own.

Modern society is becoming more aware of differences in communication generally, as well as within marriages and other relationships. The

bookstores are full of self-help titles that purport to explain how individuals can better understand their significant others. Some authors focus on more specific circumstances: a marriage between an older and younger partner, for instance, or between people of different neurological types. These books have been criticized, often with good cause, as being full of simplistic and inaccurate stereotypes; yet they continue to sell because they help people to make sense of baffling situations, even though in superficial ways.

If I had relied on a self-help book for an explanation of what my husband thought about bringing in the mail, the book might have told me, ‘men need routine!’ And while that wouldn’t have been altogether wrong, it also wouldn’t have been the whole story. I might have reached the conclusion that I had to bring in the mail every day, rain or shine, to avoid any gripes about it. Then I would have felt resentful while slipping and sliding my way to the mailbox on a snowy winter afternoon, when in fact there was no need to do that. A much more useful approach was simply to talk with each other about how best to deal with the mail situation, while recognizing that we had different perspectives on it.

To understand why our expectations are not being met, it is first necessary to examine our underlying assumptions and to acknowledge that they may be in need of revision. Self-help books can be useful in taking this first step of reframing things we find frustrating as communication issues that reflect our different perceptions, rather than as deliberately annoying or senseless behavior. But ultimately there are no shortcuts for the work that is needed to discover how a loved one communicates. While it would certainly be much easier if we could simply buy a book or attend a seminar

and then comprehend everything perfectly, real life is way more complicated than that. As with learning to accommodate diversity in other social contexts, we must be willing to refrain from prejudging the other person's experiences of the world and to seek understanding by way of respectful dialogue.

Ready to Move In Together? A 10-Step Plan for Autistic Couples

by Lindsey A. Nebeker

Making the decision to move in together is an exciting step in your relationship. It's a strong statement of commitment and it shows how devoted you are to each other. In relationships where one or both partners are autistic, it can still be an exciting step, but the transition can be more overwhelming, due to the fear of unfamiliarity. However, with careful discussion and step-by-step planning, you can make your "merging" experience start off on a good note.

1. Take it seriously.

Making the decision to move in together is not to be taken casually. If, heaven forbid, your relationship ends, moving out can be tough. So if your gut is not telling you to do it yet, then WAIT.

2. Do at least one "cohabitation experiment." Two or three times is even better.

This does not mean simply staying the night or the weekend at your significant other's place. Plan for one of you to pack enough things you'll be needing for 2-3 weeks, then stay in the other one's home as if you were already living together. This alone will give you a good taste of what life would be like if you lived together. Do not worry about the setup or decor yet—focus on how you interact as a couple while you're sharing the same living space.

If you and your partner reside in the same area, and can still commute to your school or workplace, these experiments will be fairly easy to do. If you are in a long-distance relationship, you'll have to make a few more arrangements. But believe me, it is worth it. When you finally move in together, you'll be more comfortable because you'll have gained a knowledge of each one's living habits. Your partner may have a habit of not always flushing after peeing in the toilet, or your partner may have a habit of taking over the entire bathroom counter with hair styling tools, but at least you'll both know what to expect.

3. Decide whether one of you be moving into your partner's current residence, or both of you will move into an entirely different place.

You each will need to take an inventory of your items and how much space they currently take up. If you can manage to combine your things into one of your current homes and not feel like you're cramped, then go ahead with that. However, if that's not the case, it's well worth the time and effort for both of you to seek a new place to move into.

For couples who live farther apart, you'll need to consider your employment situations and figure out which partner's work or career is more significant, or whose work is more dependent on staying in a particular location.

4. Have an open conversation about your individual needs, and figure out how to accommodate each person's needs.

As much as you talk about ways you will accommodate each other's needs, there are some things you just won't know until after you start living together. Make a commitment to keep the communication open when you do run into a sensory or related needs issue. Nearly every one of us who

When Dave (my significant other) and I began our discussions about moving in together, I was living in Nashville, Tennessee, and Dave was living in Jackson, Mississippi. Although Nashville was a more desirable location for Dave, his job as a National Weather Service meteorologist was far more significant than my job as a coffee shop barista, so it was easier (and more logical) for me to move down to Jackson. Fortunately, I was able to transfer to a coffee shop down there, while a job transfer in the NWS would have been far trickier for Dave to pull off at that time. Neither of us were from Mississippi or had friends and family there, so we both knew we would not be living there forever.

are autistic have our own “inventory” of sensory sensitivities and sensory violations.

For instance, you may want to discuss things like...

- Lighting
- Thermostat settings
- How loud you like your TV or music player
- Sensitivity to certain aromas from foods or room sprays
- Pet allergies

Developing strategies to accommodate each other is a good lesson in compromise. Compromise is one of the most difficult concepts for individuals—autistic and non—to master in a relationship. But, if we make an effort to “meet halfway,” it becomes evidence of unconditional love.

4a. [OPTIONAL STEP] One bedroom or two?

For most couples, sharing a bedroom is not at all an issue, and is very much the norm. If you plan to get a one-bedroom place, then by all means go for it!

However, as committed and in love as you may be, you may prefer having a bedroom to yourself. There is no need to be ashamed of separate bedrooms. Couples who live together and choose to sleep in separate bedrooms is not as uncommon as you may think. (Perform a Google search for “couples who sleep in separate bedrooms” and you’ll come up with plenty of articles which back that up.)

Sleeping separately may especially benefit those who...

- Prefer independence
- Are very set on their room decorating preferences
- Have particular temperature preferences to sleep comfortably
- Depend on a firmer or softer mattress (one option is the Sleep Number Bed, but not everyone likes the way it feels)

Dave has a preferable liking to energy-saving light bulbs in his apartment. However, I always used incandescent lighting in my apartment, because energy-saving bulbs don’t look as natural. Also, white fluorescent tube lighting is painful to my eyes, and leaves me nauseated, irritable, and feeling like I’m visiting an interrogation room. So when we moved in together, we combined our lighting so that each common area (living room, office, dining room, kitchen) had at least one lamp with an energy-saving bulb and one lamp with an incandescent bulb. In the kitchen, where there is a cheap white fluorescent tube light, I put out two clip-on lamps with visually pleasing incandescent bulbs. Dave is unfazed by the fluorescent tube light, so when he’s alone in the kitchen, he’ll flip that on. When we’re both in the kitchen, he’s willing to accommodate to my visual sensitivity and use the lamps instead of the overhead fluorescent tube.

- Have drastically different waking/sleeping hours
- Depend on different levels of noise to sleep (one may need complete silence, the other may need a white noise machine)

Dave and I have been maintaining separate bedrooms since we first moved in together four years ago. We're convinced this is one of the main reasons we have managed to be together for as long as we have. It prevents quarrels over how the room is to be decorated, allows us to choose our particular lighting, and sleep to our preferred temperatures (he likes 64 degrees Fahrenheit, I like 70 degrees Fahrenheit), and provides each of us with a solitary space to retreat to when we need to be alone. We are like housemates, with "intimate benefits." We visit each other's rooms. We're sexually active. And on occasional nights, we do sleep together in either his room or my room. When we travel, we always share one hotel room.

A few relationship experts do argue if couples who are married or in a committed relationship sleep separately on most nights, they are less likely to maintain a healthy sex life. However, most couples who do this say it actually improves their sex life. It keeps them more aware of the quantity and quality of the sexual intimacy shared between them.

5. Get intimate (financially, that is).

Compare your budgets so you'll know what your options are in living arrangements. Hopefully, at this stage in your relationship, you and your partner are opening up on your finances (income, savings, debts, government funding, etc.). And if you're not, I strongly advise you start doing so. Doing this will help

you both figure out two things: 1) what price range to look for if you are looking for a new apartment or home, and 2) how much you can afford in living expenses.

First, figure out how much your combined monthly costs will be. This includes rent/mortgage, renter or homeowner insurance, utilities, groceries you share, and all other household items.

Second, figure out how you will each contribute to living expenses. This depends on a number of factors (employment situation, children, etc). Obviously, if only one person is bringing in income, he or she will have to accept the responsibility of taking care of the living expenses. If both of you are bringing in income, then it makes it fair that both of you will establish a way to contribute to living expenses.

OPTIONAL: On her website, Suze Orman also suggests a Cohabitation Agreement for unmarried and same-sex couples. Hiring lawyers and signing a document when you're not married is not all that romantic, but I can see it making a lot of sense if you co-own a significant asset (such as a home or vehicle) or have a lot of money in between the two of you.

These financial tips are only meant to get some ideas going in your head. If you are in need of professional advice, seek the help of a financial expert or other trusted individual.

6. List major items and nix out unnecessary duplicates.

List all major pieces of furniture each of you own, compare lists, and identify any duplicates. It will be a significant factor in preserving space. Do you each own a washer and dryer set? It would probably make more sense for one of you to sell or give away your set. How about the

living room couch? Bed mattress? And, at least for an apartment, you probably won't be needing two dining room sets either.

If you're attached to certain items, combining smaller items that will not take a significant amount of space is okay. For instance, with the kitchen, Dave and I nixed the duplicates of major kitchen appliances, while we kept all our dishware and silverware, since we were attached to using our own knives, forks and plates to eat off of. After taking an inventory of all the things we owned and nixing out all unnecessary duplicate items, we still determined we needed a larger space. So we decided to seek out a new apartment to move into.

7. Take detailed photos during your house or apartment hunting.

This means all rooms, hallways, entryways, windows, and electrical sockets (so you'll know where you'd place your TV sets, computer monitors, or sound systems). If you're looking for a new place, you're normally seeing several apartments or homes in one day, and you are given a limited amount of time in each place. It's very helpful to have those photos as a visual guide in your decision-making, and it gives you extra time to process those visuals in your mind afterward.

I love the advice that Suze Orman gives in *The Money Book for the Young, Fabulous & Broke*. In the chapter "Money and Love," she points out that with both partners bringing in money, determining how much each person contributes to joint living expenses is not determined by a 50/50 split, but by percentage of what you earn. Since Dave and I were making two different incomes, we calculated the total estimated amounts of all our living expenses and then went by what Suze likes to call: "equal shares, not equal dollars" (p. 328).

8. Draw out a floor plan.

Once you have a good idea on what your living space will be like, it's time to draw out a floor plan. If you're still deciding on a place to live, this will help you in your final decision-making.

Things you'll need:

- Graph paper
- Pencil
- Ruler
- Protractor
- Scissors
- **Optional:** a design software program like Google SketchUp—the free version is all you'll need for this exercise

Just like when an architect depends on a house plan to construct a new home, mapping out an idea of what your living space will be like will create a dependable visual guide and prepare you better for the move-in. There's no way to figure out where to place every item until you have all the stuff in your new place. But at least you'll get an idea of where all your major furniture will go and how well it'll fit.

9. Make a list of the things you'll need to do for the move.

For the one (or both) of you who will be doing the move, advanced planning is crucial. Write down all steps necessary to ensure as smooth an execution as possible. Some stress is unavoidable, but if you prepare in advance, you can avoid a lot of unnecessary stress.

Here are some things you may need to consider:

- The number of days it will take to move (for long-distance moves, you'll need at least a few days).
- Truck rental (if necessary).
- Help from your friends and family.
- Professional movers (for your heavier items)—get quotes before you agree to hire them.
- Your parents' or guardian's advice. Ask your parent or guardian what preparations they had to take care of when they first moved in together with a significant other.
- Research, research, research. Thanks to Google, there are many resources.

Once you figure out what you will need to do, calculate the expenses so you will have an idea of how much the move is going to cost. Make sure that you are able to budget a little more than you calculate. Take my word for it: you will be spending more than you think.

Once you relocate, there will be several things you will need to take care of. Here are just a few:

- Fill out a Change of Address form (U.S. residents). You can either pick one up at your local post office or fill one out online.
- Visit the DMV closest to your new location and update your new address. For U.S. residents: if moving out of state, you will need to get a new ID card / driver's license and vehicle registration (if you own a vehicle).

- Update your new address and phone number with all banks, insurance companies, utility companies, doctor's offices, and other businesses you associate with.

10. Remain supportive and positive to each other before, during, and after the process.

With any move, whether it's halfway around the world or right across the street (I've done both), a certain amount of stress is expected. However, if you follow the steps above and remain positive and supportive to each other, I guarantee the amount of stress for a couple (autistic or not) will be less. When you feel like you are just about to go off on your loved one, politely communicate, "I need to step out and take a few minutes to myself." Frequent periods of solitude give you time to cool down and rejuvenate, so you can stay calm and collected with your significant other and all the people who will be helping you through the moving process.

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Depending on religious, cultural, or ethical belief, it is up to you as a couple to decide whether to move in prior to or after making a marriage commitment. Also, because each relationship goes by a different pace, the timing will also vary for each couple. I personally recommend you make the decision to live together once you feel that your relationship is mutually exclusive and you have a strong amount of love for each other. You don't move in together thinking you're going to break up, right?

Complex and Atypical Relationships

by Lydia Brown

I have been in a relationship with my boyfriend, who is also Autistic, for slightly longer than a year.¹ During that time, nearly every single argument we have ever had, if not all of them, was the result of miscommunication and subsequent misunderstandings on one or both ends that escalated into an emotionally exhausting and painful experience.

Each relationship is going to differ significantly from every other relationship, but the key to any successful and fulfilling relationship is good communication and the development of effective and meaningful means of communication between you and your partner. This is true whether the people in the relationship are disabled or not, and whether one or both partners are Autistic or not. When effective, meaningful, and reliable modes of communication between the partners do not exist, there is an increased potential for miscommunication and misunderstanding, even in a relationship between nondisabled or non-Autistic people.

There are several strategies for avoiding painful arguments, or at least, lessening the potential for a disagreement to become an explosive fight. One of the most important for my boyfriend and I has been to establish certain ground rules after we had several unpleasant experiences in this

1. This essay was written at a certain point in my life and reflects the experiences I'd had at that point, and may not apply to every possible person or every possible type of relationship.

area, with the intention of preventing explosive and painful fights. Some of our ground rules include the following:

- If one person asks the other to drop a topic, the topic must be dropped immediately. If either partner wishes to continue the discussion, he or she must write an email regarding the topic, which must be addressed within a reasonable amount of time. Only if it is explicitly specified in the email that the topic is an emergency is the other partner obligated to respond within forty-eight hours instead.
- If one person feels offended, insulted, or belittled, it is that person's responsibility to ask whether the other person is actually intending to be offensive, insulting, belittling, or otherwise condescending.
- Both partners are obligated to choose their words as carefully as possible to avoid using language that is likely to upset or offend the other partner whenever it is possible to use alternate language instead.

Establishing such ground rules, however, only works when both partners are willing to uphold them and willing to hold both themselves and each other accountable to the ground rules. Ground rules are a form of a social contract; they only hold force and remain effective for as long as they are recognized and granted authority by both people in the relationship.

Choosing an effective means of communication, particularly when there are myriad opportunities for miscommunication and arguments arising from it, might be more difficult. Not everyone communicates in the same way, nor does everyone process information most effectively and efficiently in the same way. This is true of both Autistics and non-Autistics. Because my boyfriend and I both process information best when it is presented or

supported visually, we find it far more effective to communicate in a textual medium than over the phone when we are not in the same geographic location. For other people, communicating in a textual medium such as email or real-time chat might be odd and uncomfortable, and communicating over real-time video conference, such as Skype, or over the phone might be a better choice.

Determining what means of communication is best in your relationship should be the result of determining both your and your partner's preferred mode of communication. In the event that there is a conflict—for example, you prefer text while your partner prefers the phone—it will become necessary to compromise before arguments occur in order to allow for the most effective means of communication as a preventive measure. Where there are differences in processing styles and preferences, receptive and expressive communication, you may agree to communicate roughly half of the time in your preferred method while communicating the other half of the time in your partner's preferred method. This strategy can potentially avert more arguments or emotional pain arising from arguments as it puts into place an agreement to communicate using a means that is amenable to the receptive and expressive communication abilities of both partners, thus vastly improving the potential for effective and meaningful communication.

When in spite of such preventive measures a painful or explosive argument or fight has still occurred, however, it may be helpful for some partners to come to some resolution relatively quickly. This may be in the form of an apology from one or both partners or a temporary compromise on the issue that sparked the argument. For other partners, it is better to

cease discussion of the topic to prevent further fighting, and to leave attempts at resolution for another time.

Whenever there is an argument, the likely cause for both the instigation of the argument and its continuing existence is miscommunication and misunderstanding between partners. If you find yourself upset or offended by your partner, first check to see whether your partner's words or actions were intentional. If it was not, and in many cases it will not be, then you will have successfully averted an unnecessary argument. On the other hand, if what you perceived as true was in fact done or intended by your partner, you now have the option to calmly and clearly communicate either a need for time to process or the need for a resolution.

In the course of my relationship with my boyfriend, some of our most significant and consuming misunderstandings and arguments have arisen as a result of our differences in religious beliefs. I am a Christian and my boyfriend is an Agnostic Atheist and humanist. Because we are involved in an interreligious relationship, which is increasingly common though not always a comfortable choice for everyone (particularly people from cultural or religious traditions that hold more conservative attitudes toward relationships outside the culture or religion), our relationship has nuances and requires certain agreements that will not exist in a relationship where the partners do not have any significant differences in religious beliefs or lack thereof.

Inter-religious relationships occur whenever the two partners have different beliefs about religion or pertaining to religious matters, regardless of their actual religious affiliations or lack thereof. For some people, inter-religious relationships do not create significant barriers to happy and

fulfilling relationships. However, for other people—and frequently for those who are in a serious or long-term relationship—having different beliefs about religious or spiritual matters creates an inherent barrier to a successful relationship. These differences of belief have the potential to become seemingly insurmountable obstacles to building a happy life with one another.

There are several areas in which this may occur. Differing religious beliefs may also mean radically different comfort levels with intimacy and sexuality. They can also be the base for fundamentally different ideas about ethics or politics. In the case of some long-term, committed relationships, different religious beliefs can and should cause the partners to question how they might want to raise potential children, what type of marriage ceremony they might like to have, and what type of funeral service would be most fitting in the event of death.

There are several potential means of addressing differences in religious beliefs:

- The partners may decide never to discuss religion and spirituality. This may spark tension in some relationships, but in others it may remove a source of tension by creating this boundary. This strategy is likely to be of little use in long-term and more committed relationships, although it has the potential to remain of value in some such relationships. If the couple maintains this strategy and decides to have children, their children will most likely be raised with minimal exposure to belief systems inside the home, but may be encouraged to seek independently when older.

- The partners may decide to create guidelines or ground rules for discussing religion and spirituality similar to the comment guidelines on many internet forums or comments sections for news stories. This strategy is likely to be most useful for partners who enjoy intense and involved discussions, whether intellectual or emotional, but not useful to partners for whom these types of discussions may create more anxiety than enjoyment. If the couple decides to have children, their children will most likely be raised with general exposure to a variety of belief systems and encouraged to freely choose their own beliefs.
- One of the partners may convert or de-convert to the belief system of the other. This may be a nominal or ceremonial conversion for the sake of social acceptance — for example, if the partners decide to marry, and one partner has a fairly culturally and religiously conservative family. This might occur, for instance, in a relationship where one partner is Muslim and the other is not. A conversion, to or from any belief system, may also be a convicted, meaningful conversion for the sake of self-fulfillment. If the couple decides to have children, their children will most likely be raised into the belief system to which the second partner converted.
- The partners may compromise on appropriate services or observances. For example, if one partner is Jewish and the other Protestant Christian, the couple may choose to celebrate both Jewish and Christian holidays together rather than observing only one set of holidays. In another example, if one partner is Presbyterian and the other is Baptist, the couple may choose to

attend Methodist services in order to avoid attending either Presbyterian or Baptist services. If the couple decides to have children, their children will most likely be raised either in both belief systems simultaneously or in a compromise version of both parents' belief systems.

In many inter-religious relationships, neither partner is expected to convert to the belief system of the other, yet meaningful dialogue about religion and spirituality will very rarely occur. Establishing ground rules for discussions about faith, religion, or spirituality may be an effective means of preventing unnecessary and particularly painful fights. Some potentially helpful ground rules for partners from different belief systems may include guidelines similar to the following ones:

- Both partners will avoid making broad, sweeping assertions about everyone who shares any belief system.
- Both partners will refrain from attacking the personal integrity, character, or personhood of the other on the basis of religious beliefs or lack thereof.
- Both partners will refrain from selectively quoting from or referencing sacred texts, commentaries on sacred texts, or critiques of sacred texts.
- Neither partner will interrupt the other when speaking.
- Both partners will avoid loaded words, inflammatory language without purpose, or bigoted language.

When one partner feels that the other has violated the established ground rules, the couple should make it standard practice to redress the

slight at a later date, though as soon as possible, in order to simultaneously avoid returning to the conversation "too soon" and address the issue in a prompt fashion.

In the case of different beliefs about intimacy and sexuality, the default is to meet the concerns of the person with the most conservative attitude toward intimacy and sexuality; however, this can easily be a terrible source of tension between the two partners if one very much wishes to be sexually active or intimate, or more sexually active or intimate, but the other does not. In these situations, there are several possible outcomes, including the following:

- The partners may create a compromise that favors the partner who wants to be more sexually active or intimate. This may mean that the partner who wishes to be less sexually active or intimate agrees to engage in more frequent or intense sexual or intimate activities. This may come to feel like guilt or coercion for the partner who wishes to be less sexually active or intimate.
- The partners may create a compromise that continues to favor the partner who wants to be less sexually active or intimate. This may mean that the partner who wishes to be more sexually active or intimate agrees to reduce the frequency or intensity of sexual or intimate activities. This may come to feel like sexual repression for the partner who wishes to be more sexually active or intimate.
- The partners may maintain the existing status quo. This means that no actual agreement is reached on altering or adjusting the boundaries or permissions of the relationship in terms of sexuality

and intimacy, either between the partners or with people outside the relationship.

- One or both partners may decide to end the relationship. This means that the partners are unable to reach a satisfactory compromise, and one or both of them decides that it is impossible to maintain the relationship because of unresolvable conflicts of interest between the partners.

The partners in such a relationship must determine their individual comfort levels with intimacy and sexuality, as well as whether they would prefer a more exclusive relationship or a more open relationship where one or both partners would be permitted to engage in some level of intimacy or sexuality with people outside the relationship. This can be very difficult to do, and may require extended periods of contemplation and discussion, and potentially, couples or relationship counseling, in order to determine both partners' comfort levels and boundaries. Ultimately, what is most important is that any person involved in a romantic or sexual relationship must make decisions and choices, and set boundaries, that will be comfortable and satisfying both in the short-term or temporarily and in the long-term.

This is also true when considering issues like pornography, which may not be an issue for some couples, but may cause tension and problems for others. When an activity such as porn creates unnecessary tension or anxiety for one or both partners in a relationship, it has become detrimental to the continuing health of the relationship, and should be addressed much like differences in comfort levels with intimacy and sexuality. The partners must reach some form of compromise or risk permanently damaging their

relationship. The partner who is less comfortable with porn or with the other partner watching porn must determine the outer boundaries with which he or she is comfortable. The partner who enjoys porn more must determine whether he or she is willing to decrease the amount of time spent watching porn or stop altogether in order to please the other partner.

As much as it has been reiterated throughout this piece, it is imperative both for people currently in relationships and those who wish to be to remember that the key to any successful relationship is **effective, consistent, reliable, and meaningful communication**. I am by no means an expert on relationships, but I do speak from both my own experiences and the experiences of many friends and acquaintances who have shared theirs with me. I know firsthand the detrimental consequences that lack of effective communication can have on a relationship, as well as the plethora of benefits that the presence of effective communication can bestow on one. Effective communication, whether face-to-face, over the phone, via a real-time video conferencing system, through a real-time text medium, or through a non-real-time text medium, can prevent or end unnecessary arguments, aid in developing compromises, and establish clear boundaries and goals for the relationship. Without it, a relationship will fail, but with it, a relationship will have the keystone necessary for long-term success, happiness, and viability.

On Being Understood

by Meg Evans

No two people have the same body language. We perceive and react to our environment in unique ways, depending on such factors as our past experiences and how our culture frames them. We have many neurological differences that include our levels of anxiety, how keenly our senses perceive things around us, what patterns these things form when our brains assemble the input, and speech processing variations that affect how others interpret our tone of voice.

As a result, misunderstandings abound. What our society calls “body language” often amounts to little more than guesswork. For instance, we’re presumed to be happy when we smile and laugh; but we may in fact be very anxious and frightened, reacting to a stressful situation with nervous laughter. We are seen as unhappy or in a foul mood when we frown, although we may simply be preoccupied with solving a complicated problem; and as we grow older, we’re likely to develop frown lines that can’t be shifted with anything short of Botox and other cosmetic procedures. Indeed, the widespread demand for such procedures shows the extent of cultural pressure to conform to narrowly defined expectations about our appearance.

Whether or not we’re aware of it, these expectations inevitably find our way into our relationships with our significant others. We may feel hurt because a loved one sounds gruff while we’re having a conversation; we assume it’s all about what we said, when in fact it’s much more likely to be

about a problem at work, a traffic jam on the way home, a sore throat, or many other reasons having nothing to do with us at all. Or we may find that a partner suddenly gets upset in response to our own facial expressions and tone of voice, when in fact we didn't intend anything negative at all—we just had a tiring day or didn't get enough sleep.

In the past, when our society had rigid gender roles and divorce was almost unthinkable, young couples often were counseled to be more forgiving instead of taking things personally. Mothers would tell their newlywed daughters that the best way to handle a husband in a bad mood was to shower him with appreciation for how hard he worked to provide for her. Young men were advised to cheer up a cranky wife with flowers and praise for all that she did to take care of the children and the home. Society took it for granted that a couple consisted of two opposite-sex people who had vastly different experiences and who could understand only a small part of each other's lives.

Now that gender roles have blurred in modern times, couples share more responsibilities and have more experiences in common. This has led to the romantic notion that we ought to understand everything about our significant other at all times. When miscommunication occurs, instead of being seen as a natural part of a relationship, it is characterized in the harsh language of failure. One partner or the other must be lacking emotional intelligence, empathy, and so forth. It becomes a personal problem to be solved by becoming a better mind-reader, instead of a mutual misunderstanding in need of respectful discussion.

Inevitably we fall short when we're measured by this demanding standard. Even if our experiences and our neurology are very similar to

those of a spouse or partner, we can never really get inside one another's minds. When we interpret each other's body language, it's still guesswork, even though we get it right more often than not. And if we have significant differences in the life experiences and the personal characteristics that shape our reactions to our environment, the task becomes much harder. Many of our assumptions will miss the mark, and then we're left wondering what's wrong with us and why our relationship isn't anything like all those ideal couples who understand each other perfectly.

Of course, what we're really doing is comparing our relationship to a cultural myth, rather than to anything that exists in real life; but it's an insidious myth that has left many couples frustrated and unhappy. Our culture teaches us that we're entitled to have our every thought understood by our significant other, and that without such understanding we're missing an essential part of our relationship. We've all known someone in a long-term marriage that broke up, even though there never seemed to be anything wrong, because one spouse decided to ditch the other for a new lover who was more understanding. We find ourselves being judged in large part by how accurately we respond to our significant other's unspoken thoughts and feelings. It's no longer enough, as it once was, simply to be reliable and of good character.

That's not to say our ancestors were better off with their strict gender roles and the resulting lack of shared experiences. We have many more choices available to us. Because we live in an open, flexible society with advanced technology, we are free to enjoy opportunities our ancestors couldn't even have imagined. Naturally we're more particular about choosing our mates, as well. We don't just want someone we can rely on—

we're looking for a soulmate who will give us a blissful life, inspire us to new heights, and make us feel complete. When we find a loving, compatible partner because we're so choosy, that's a good thing. But we also need to keep in mind how much of a burden our expectations place on our partner, who is just a mortal human being and has bad days like everyone else.

I have been fortunate to spend the better part of my life with a man who is responsible, caring, insightful, a good father to our children, and generally a fun guy to be around. Even so, I have gotten very upset on occasion because he misunderstood something I said. There have been times when we were just having an ordinary conversation, he took something the wrong way and got annoyed, and all of a sudden I was left feeling as if the entire structure of our marriage was about to crumble. That script started playing itself out in my head: How can we possibly have a good marriage when he doesn't even *understand* me?

When I look at it more calmly, I know it's not about me. Let's say I ask for help with something on the computer (my husband is a software developer) and instead of helping me with the problem as he usually would do, he reacts by snapping at me not to nag him. That's not a premeditated insult, nor does it mean he seriously thinks I have blighted his life with my horrible nagging ways. Most likely, something in my tone of voice, my posture, or a phrase I used reminded him subconsciously of an irritating person from work who nagged him to hurry up with a project. Whatever might have triggered that response, it probably came from somewhere below the threshold of rational thought and doesn't reflect how he actually sees me.

Language is often like that. When we're interpreting another person's words or body language, we view them through many filters based on our past experiences and our individual perceptions. No matter how hard we work on understanding a loved one—or how much we focus on choosing our words carefully and using clear body language so that we can ourselves be understood—some amount of miscommunication is sure to happen anyway, just because we are human. It doesn't necessarily mean that we have done anything wrong or that our relationship is destined to fail. Rather, it's an unavoidable result of being two different people with our own individual views of the world around us.

part 3



signals: body & being

Autism and Orgasm

by Lindsey A. Nebeker

One of my blog readers on the autism spectrum brought up a concern in regards to recent issues in the bedroom. Once having an easier ability to achieve an orgasm, this person is finding that the process has become increasingly difficult:

“[Since learning more about my ASD diagnosis] I've been noticing a growing awareness in what is going on around me and what my body is feeling... and it is becoming sort of distracting during sex, mainly orgasm. As I began to feel myself start to climax I suddenly became very focused on the noises and things in the room such as the fan running, and how the moving air felt on my skin. Then I suddenly became overwhelmed with my body itself, to the point that it took away the orgasm. I focused intensely on how the sheets felt against my skin, how my partner's skin felt on mine, how my hands felt running through [my partner's] hair, then the ever knowing coldness I get through my body in that passionate moment. I kept thinking... what is wrong with me? Is there something wrong with me? Why in this moment of love am I so overwhelmed with my surroundings when I have something so special happening? Do [people on the spectrum] experience intimacy and orgasms differently [than others]? It was way more intense but very overwhelming to me, too.”

This person is not alone. Others on the spectrum have voiced similar concerns and curiosity regarding these specific issues, which creates a

good excuse to bring up such a bold topic. But let's make one thing clear: many people with autism **do** experience orgasms. But how different is the orgasm experience for an autistic individual? Is it more intense? Is it less intense? Is it the same?

There has yet to be a scientific study conducted on orgasm and its effect on people on the autism spectrum. So just for entertainment's sake, we will discuss some possible hypotheses, address the possible challenges unique to individuals with ASD or sensory sensitivities based on personal perspectives, and wrap up with final thoughts.

First, let's break down some hypotheses.

Hypothesis #1: Orgasms experienced by ASD individuals are similar to individuals without ASD.

What supports this argument is our physical development. For most of us, the physical body structure and reproductive system mirrors neurotypical development. When puberty hits during adolescence, most of us experience the same physical changes to our bodies. Girls produce eggs, develop menstrual periods and grow breasts. Boys produce sperm, experience nocturnal emissions (a.k.a. "wet dreams") and may experience a voice drop. All experience body hair and pubic hair growth. Same thing applies to adulthood and aging, when our bodies are fully mature. Women and girls have the ability to get pregnant. Men and boys have the ability to ejaculate. Women and girls have the ability to give birth. Women experience menopause as they age. Men may experience erectile dysfunction as they age. Why wouldn't our sexual response cycle be similar?

Although some of us have difficulty in figuring out how to handle changes during puberty, reproductive development and aging, what our bodies go through is often no different than what individuals without ASD go through. So it wouldn't be outrageous to assume the way our bodies respond to orgasm is more or less the same.

Hypothesis #2: Orgasms experienced by ASD individuals are different from individuals without ASD.

Time to play devil's advocate.

When we talk about autism and sex, we cannot disregard the role our sensory system plays into it. Sex and intimacy between couples where one or both partners have ASD is highly influenced by the sensory system. Sensations that trigger a strong reaction, whether painful or pleasurable, tend to be amplified. This has been proven in day-to-day life activities, and it can easily apply to orgasms.

An orgasm (which occurs in the climax phase of the sexual response cycle) is a full-body response. The genital area is not the only place that has to feel right... the whole body has to feel right. The whole body has to be prepared to take in that type of response. The stars have to be aligned, figuratively speaking. However, it is absolutely possible to arrange a set-up where an orgasm can be achieved. With practice, a person can develop or adopt methods that speed up the process of preparing the body for orgasm. Most individuals on the spectrum, regardless of cognitive comprehension or communication level, have been able to figure out the right set-up to experience orgasms on a regular basis.

Some individuals have not developed a "filter" of recognizing what behaviors are appropriate in the presence of other people and what

behaviors are more appropriate to be done behind closed doors. In those cases, the individuals are not as concerned about displaying sexual behavior in another person's presence as they are more focused on setting themselves up and preparing their own bodies to experience orgasm. They require extra guidance from family, professionals and educators to assure them it is perfectly okay to engage in sexual behavior as long as it is done privately by oneself or with consenting sexual partners.

Other individuals have applied that "filter" to the extent where exposure will pose frightening and uncomfortable, even when in the presence of a sexual partner he or she has consented to. They may still be capable of enjoying intimacy and sex, but never quite get to the height of climax (we will discuss more on this later).

Orgasms release a chemical called oxytocin. There has been some discussion on ASD and its link to oxytocin levels, brought up by both researchers and individuals on the spectrum. We know oxytocin plays a role in the effects of orgasm, but oxytocin's role in the *quality* of orgasm remains uncertain. Regardless, it certainly sparks an interesting dinner conversation topic.

As of now, all of these theories are not set in concrete. But it would not be surprising if future scientific evidence were to support the idea that an orgasm experienced by an individual with ASD can easily be more intense than the average orgasm experienced by an individual without ASD.

Possible challenges in achieving orgasm for individuals with ASD

Are there autistic individuals who face issues achieving orgasms? Absolutely... just like there are non-autistic individuals who face issues achieving orgasms. The reasons for these issues will vary on a case-by-case basis, but here is a brief list of possible challenges unique to autistic individuals:

1. Lack of appropriate sex education

Personal accounts of individuals on the spectrum often reveal they were not given the proper amount of sexual education during their teen years, often leading to sexual issues in adulthood. The ideal sex education curriculum needs to be well-rounded. Sex education is not only about STD protection, birth control, and identifying the sperm and the egg. Sex education is also about encouraging sexual exploration and learning more about what your body likes and doesn't like. It's about learning what areas are usually stimulated in order to reach climax and the proper technique for stimulation. This does not need to be a hands-on demonstration (except with a sexual partner), but it's good to at least talk about it.

Educators may assume that students with ASD will just "pick up" on it like the other kids, but keep in mind many autistic people might not "pick up" on things the same way others do.

2. Temporary surrender of self-control

In order for an orgasm to be effective and enjoyed to its full potential, it requires one to temporarily surrender self-control to the unknown energies and forces. One also has to be aware that the body responses that occur during and after an orgasm are often unpredictable. These things may include the length of time, range of intensity, changes in body temperature, heart rate, involuntary muscle contractions (usually in the pelvic region),

and the amount of seminal and vaginal fluid that is discharged. It's like sneezing, as Dr. Alfred Kinsey describes it.

For autistic individuals, self-control is essential. Our rituals, routines, obsessive-compulsive tendencies, and all accompanying addictive behaviors are run by a need for self-control. Several people on the spectrum have pointed out that letting go even a little of that self-control is an issue when engaging in intimacy or role play with a partner. They may be able to enjoy intimate and sexual exchanges, but the only way that individual is able to achieve an orgasm is through masturbation or other self-stimulation methods. This way, the individual holds at least some control of the situation.

It is important to point out that not all of that self-control has to be surrendered to enjoy an orgasm. Most people have found ways to retain some of that self-control. These things may include choice of location, choice of stimulation target, choice of sexual partner, and auditory response.

Even with that said, some individuals still feel that the sensations and loss of control that accompany climax can end up being far too overwhelming, whether it be with oneself or with a partner. These people may avoid intimacy and orgasms altogether. However, for many autistic individuals, giving up self-control for a few seconds or moments of orgasmic bliss doesn't end up being a major concern.

3. Surrounding environment not sensory friendly

Because the environment plays a crucial role in our sensory sensitivities and our daily life activities, it is no different in the bedroom. We will not be discussing sensory issues in detail in this article, but here is a list of some

environmental factors that can affect our sensory sensitivities during intimacy and orgasm:

- Aroma (specific types and strength levels)
- Air temperature
- Body temperature
- Body moisture
- Lighting levels
- Colors and hues (found in lighting, walls, objects, bedding, etc.)
- Body exposure to the elements
- Bedding (mattress, sheets, pillows)
- Frequency and intensity of noise in the background (music, TV, pets, outdoor noises)

Our sensory interaction with the surrounding environment dictates the level of ease or difficulty in sustaining arousal and climax.

4. Sensation areas in the body over-stimulating or under-stimulating

The autism spectrum involves a diverse scattering in all five areas of the sensory profile. In every individual, there are areas that may be hypersensitive, areas that are more or less elevated, and areas which may be hypo-sensitive (sharing similarities with Sensory Processing Disorder). It is possible that hyper-sensitivity can be developed around the genital region and other sexual “hot spots”¹ to the point where it takes

1. Although not the primary focus of this essay, it’s important to note that sexual hot spots are *not* limited to one’s genitals; thinking in this fashion presents a very constrained understanding of what it means to have sex or experience intimacy. You and your partner

minimal effort to reach climax. It is also possible that hypo-sensitivity can be developed in these same areas to the point where sexual arousal is not left to be desired. Then, there are some cases where an individual can only “get off” when their genital area is rubbed or comes in contact with a certain texture, pressure, or surface firmness.

The amount of physical pressure given by a partner or object can play a significant role. Some people may need to be held tightly or pressed down in order to climax. Some people may need minimal pressure or touch in order to climax. In all cases, the person needs to have control over the amount of pressure being given.

5. Breathing technique

The orgasm quality, not to be confused with quantity, can affect some individuals due to challenges in maintaining proper breathing technique (often applied in tantric sex). In a way, breathing and spoken language are interconnected. Proper breathing and spoken language are not naturally acquired in autism, even for those who have learned how to speak. Those of us with speech difficulties or a history of delayed speech can appreciate the challenge of figuring out when and how to breathe while talking.

One reason why learning spoken language is a complex task is that speaking involves learning how to breathe “correctly” when projecting sounds. Training the body to achieve an ideal quality orgasm also involves monitoring breathing technique, which can turn into a multitasking

can discover other ways to achieve pleasure, perhaps through doing a “pleasure blueprint” of your body or your partner’s.

activity. If a person concentrates too little or too much in his or her breathing technique, then it can affect the quality of orgasm.

However, the level of advancement in breathing and spoken language skills does not in any way determine the ability of the body to experience orgasms. With practice and exploration (by oneself and/or with a partner), an individual can learn to figure out what breathing pattern works best for his or her body to prepare for ideal quality orgasm.

For those of you who want to be even more experimental and explore more into how orgasms can be achieved just by breathing alone, Barbara Carellas, who was featured on an episode of *Strange Sex* on The Learning Channel (a U.S. cable channel), is well known for instructing this technique.

Considering the challenges in achieving orgasm that are not ASD-related

Before drawing immediate conclusions that the difficulty in achieving orgasms has to do with lack of proper sex education, issues with self-control, environmental sensory violations, sensation responses, or breathing technique, you may want to consider other factors. Some factors to consider are: trust issues, aging, health, prescription drug side effects, anxiety over body image, history of sexual trauma or abuse, or simply your partner not knowing the correct approach and techniques to “get you off.” Consulting with a trusted doctor, therapist or other health specialist may help you determine if any of these may be causing your difficulties.

If your sexual partner is unaware of the approach and techniques to help you reach climax, you and your partner can choose to engage with self-knowledge and body exploration. Additionally, you might consider using

masturbation as a teaching tool. Whatever your decision, communicating openly with your partner is important: discuss with one another the strategies that work for you.

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Like snowflakes, no two orgasms are alike. Personal stories shared by those with ASD and those without ASD reveal that every orgasm will vary in intensity, length, and target of stimulation. How the orgasms are experienced is more difficult to compare because of the difficulty of describing them verbatim.

So, is the orgasm experience for an autistic individual more intense, not as intense, or the same? We have no real way of telling. Only speculation, wild guessing, and personal accounts can support and contribute to the debate. Even when personal experiences are shared, an autistic can only share what it's like for an autistic, and a non-autistic can only share what an orgasm is like for a non-autistic. Although research continues to be done on the human orgasmic experience in and of itself, an official study has yet to be conducted to support the possible unique factors in orgasms experienced by an autistic individual. Considering there are so many other things related to autism on the list waiting to be funded and approved for research, it may be a while before that even gets "touched" on. For now, we can continue to speculate on the thought, while continuing to entertain our knowledge with what scientific research has claimed about orgasms in general.

Note: The information and quotes by the individual mentioned has been published by permission.

Obtaining and Recognizing Consent

by Leah Jane Grantham

“ I think part of the reason we have trouble drawing the line 'it's not okay to force someone into sexual activity' is that in many ways, forcing people to do things is part of our culture in general. Cut that s*** out of your life. If someone doesn't want to go to a party, try a new food, get up and dance, make small talk at the lunch table—that's their right. Stop the 'aww c'mon' and 'just this once' and the games where you playfully force someone to play along. Accept that no means no—all the time.”

- Cliff Pervocracy

After learning how to embrace your own sexuality and define your own sexual and consensual boundaries, the most fundamental part of engaging in a happy and fulfilling sex life is learning to recognize and respect the boundaries and consent of others. Nobody is born knowing how to recognize good consent, but it doesn't have to be difficult to learn, even for somebody on the autism spectrum. I used to struggle with respecting personal space, consent, and people's boundaries, but I learned, through exercises in active listening, asking questions, checking in with others, and being aware of my personal space, how to recognize consent, differentiate good consent from false consent, and have healthy, respectful relationships with my friends and sexual partners.

Good consent leads to good sex, but learning how to respect consent doesn't start with your first sexual experience. From an early age, we can

learn to respect the boundaries of others. When I was young, this wasn't a strong suit of mine, as my younger sister can attest ("Mom, Leah's pinching me!"). I'm sure that others have stories of being overly zealous in their sibling torment, even when told to stop, either by the tormented one or an adult. When I got to elementary school and tried the same pinching and hassling on my classmates, I got punished by the teacher and lost my toy privileges for the day. That was my first real, harsh lesson in learning how to respect the boundaries of others, and it sunk in and stayed in my brain. I kept my hands to myself after that, and never lost my toy privileges again.

In a perfect world, I would have learned consent earlier than that, and would have respected the boundaries of my sister and not been surprised when my actions were punished in elementary school. Nobody's upbringing or early life lessons are perfect, however, and it's never too late to learn how to recognize and respect good consent. As an adult, there are a few exercises I learned from advocacy training and volunteer work that helped me develop a healthy respect and recognition for the boundaries and space of others, which I'll share in this essay. And, as I suggest below, one of the best ways to become socio-sexually empowered is by engaging in intentional consent negotiation.

Listen, believe, support

What does it mean to be an active listener? It's not an easy task to learn, but it's extremely valuable. I had a great deal of trouble learning it at first, because of my autism, but practice, patience, and participating in active listening exercises helped me understand and apply the basics to my life. When communicating with a partner about sex and sexual activity, active listening comes down to the simple steps of listen, believe, and support:

- **Listen** to what your partner wants before and during sexual activity.
- **Believe** them (and show it) by respecting their requests (provided they don't fall outside your comfort zone).
- **Support** them by asking what it is they would like to do if they become unhappy or uncomfortable with an activity or sex practice.

Asking and checking in

To be an active listener involves understanding the intention behind the words and respecting the message communicated—not all communication is 100% clear and verbal, after all, so it can benefit one to think of what messages accompany certain phrases. For example, if someone says “That hurts!” it's fairly easy to understand that there's a message of “please stop” embedded in there. Listen not just to them *saying* they're in pain, but also recognize the *implication* that they don't want to be in pain anymore and want you to stop. Show that you believe them by stopping immediately to check in, and support them by offering to let them try what they want during sexy fun times. It doesn't even have to involve listening to them speak; being attentive of facial expressions, body language, or physical signs of hurt and discomfort can call for a moment to pause and check in to make sure your partners are okay with what's happening and want to continue.

Good consent: What to look for, what to avoid

Communication with your partners is the only surefire way to determine if they're giving consent. Constant communication before and during sex is necessary to ensure everything is going smoothly for everybody. With nonverbal partners, or those who can't vocalize for some reason or another

at the moment, establishing a code is invaluable. Such codes might take the form of hand signals, using a flashlight (light on means *go*, light off means *stop*), dropping an object, or another method of indicating whether they want to keep going. After sex, conversations about what was enjoyable, what could be improved, and what you'd like to try next time, if you're up for it, are a great way of figuring out your partner's likes and dislikes. You might ask each other the following questions:

- What did you like or dislike about that?
- What can I do to make it better?
- Is there a way I could do that which you would like better?

It is important to remember that good consent is dependent upon clear communication.

Consent is desirable and sexy

To me, there is nothing sexier, more alluring or more exciting than having a partner who is ready to enjoy some sexy fun times with me. At the very core of this essay is my belief that consent should be a turn-on for all sexual beings. In situations that are both sexual and nonsexual, good consent makes all the difference in terms of enjoyment and satisfaction. It can't be underemphasized—consent is foundational to not only good sex, but good relationships. Once you've learned how to recognize it and ask for it, the rest of sexual discovery basically involves finding out what turns you on, what you want to do more of, and what's mutually pleasurable between you and your partner(s). Basically, what I'm saying here is this: when it comes to sexual activity, the best advice I can give is simple: Enjoy!

The Scientific Analysis of a Romantic Scene

by Lindsey A. Nebeker

The Fourth of July is a big day here in America. Above all, the annual celebration serves as a symbol of independence. And what better way to celebrate that symbolism of independence by having two people on a date make independent analyses of a fireworks show?

I was resting my head on my boyfriend Dave's shoulder and looking up towards the night sky, *ooo-ing* and *ahh-ing* at the colorful display, when, out of the blue, Dave proceeded to inform me how these particular fireworks were composed of barium and strontium salts (along with other salt compounds). It's interesting how he chose that moment to scientifically analyze a common romantic atmosphere. However, I'm not surprised.

Once in a while, my boyfriend will choose these particular moments to enlighten me with his scientific knowledge. During a walk on the beach, I may hear about the different types of tides and the possible ebb and flow peaks. While watching a sunset, I may hear about the different gases in the sky that affect the color of the sun on that particular given evening. While visiting a lake, I may hear estimates on the water depths and how they are made based on the color. While watching the stars, I will hear about which constellations are older and which ones are younger, and how clear nights always produce lower temperatures than overcast nights. I think you get the idea.

For the assumed-typical cis¹ woman who demands storybook-based romance, this would be a turnoff. And even though I crave the occasional storybook-based romantic moment, I get why Dave doesn't quite pick up on that.

Actually, there are a few possibilities why some of us may replace those "romantic moments" with special interest discussions.

Possibility #1: Romantic small talk & nonverbal cues = foreign language.

So what does that mean, exactly? Here are a few examples of verbal romantic small talk:

- “Don’t you just love the view? The trees are so green, and I love how the lake reflects against the sunset.”
- “What a beautiful night! I love looking at the stars.”
- “Isn’t this absolutely romantic?”

These examples will usually be said in a soft, slow voice, which indicate an interest in moving toward physical intimacy.

For those of us who find the nuances of small talk uncomfortable, we often replace it with discussion that does not require exposing emotions or vulnerability. Topics of discussion may include historical events, news stories, politics, scientific theories, and special interests. In a potentially romantic situation, we may talk about these things in order to make the “atmosphere” more comfortable—so when the time comes for the moment

1. *Cis*, short for *cisgender*, refers to someone who identifies with the sex or gender they were assigned at birth.

of intimacy, we enter into it with a better ability to handle the intense emotions which often accompany meaningful intimacy.

And to make this language more complicated, it also comes with a series of subtle non-verbal cues. Here are a list of common indicators:

- Deep breathing and sighs.
- Playing with their own hair or playing with yours.
- Open body posture (arms not crossed, legs not crossed, etc.).
- Head leaning on your shoulder or lap.
- Nose pressed against your cheek.
- Gentle stroking up and down your arm.
- Staring dreamily into your eyes for a long period of time.
- Leaning forward towards you and not really concentrating on what you're talking about.
- Lips parted.

When presented as a foreign language, these non-verbal cues can either be intimidating or dismissed all together. Effective and consensual physical intimacy requires giving up some level of our own control, and we may get picky on which occasions to give into that.

Possibility #2: One common goal, two separate radio signals of arousal.

Also, for those of us who struggle to recognize the “scripts” of traditional romantic advances, we may have no idea what we are supposed to do when we run into a typical romantic scenario... like a walk on the beach, a lookout on the lake, or standing on a mountaintop and watching the

stars. We may initiate factual, historical, or scientific discussions because that's what turns us on and induces our sexual arousal. In other words, special interest conversations with our date may be the key to our own emotional closeness and intimacy. The challenge in this case is to make sure there are points where you cross paths with your date's "radio signal." When you start your discussions, try to include a subject that would be interesting or relevant to your date. Also, if you are having trouble reading your date, ask them to tell you what their interests are and try to incorporate an interest of theirs into your conversation. Once you become more comfortable with each other, ask your date to describe what affection that person enjoys receiving. Chances are, when asked, they will not hesitate to tell you (at least with the innocent kind of affection). You may learn that your date loves their hair being caressed, neck gently massaged, and earlobes nibbled. And when you make an effort to be affectionate, your date won't mind conversing with you about your special interests, even if the topics are not as interesting to them.

Voila! Now you and your date have produced a crossed-path "radio signal."

Possibility #3: There simply is no radio signal.

Simply stated: there's no interest in romantic advances whatsoever. We break into special interest conversations because we simply want to talk about our special interests. There's no affection, romance, or sex desired.

[Keep in mind—if you have just begun dating someone and/or you have not developed a trust with that person yet, you have the absolute right to refuse any unwelcome physical advances that person tries to make towards you.]

Of course, there are additional possibilities, but it would take a good while to go through them all.

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I've never cared to join the "Small Talk Club" (hypothetically speaking). Actually, I find it less nerve-wracking when Dave pulls out his scientific spiels during a moment like that one on the Fourth of July. Even though I don't personally find it necessary to have to analyze a typical romantic scene, I reacted as I normally do with Dave, and added to the conversation, responding with: "Really? I didn't realize that there were different salt compounds that produced the various colors of fireworks. Very cool! Will you explain more on what colors each salt produces?"

As our little discussion continued, it was accompanied by occasional moments of pause, in which Dave pressed his cheek against mine, with a spur-of-the-moment butterfly kiss, as our eyes looked up to the firework-lighted sky. Our treasured moments of romance, triggered by an unconventional scientific analysis.

part 4



gender & sexuality

Helping a Partner Through a Gender Transition

by Leah Jane Grantham

Helping a romantic partner go through a gender transition is a lot like being autistic, in a way: the most difficult part of it really doesn't involve the actual transition or the gender identity, but rather, the barriers set up by society, the medical establishment, and people's individual attitudes that spring from prejudice, misinformation, and good intentions that happen to be combined with bad actions. And, like a new autism diagnosis, you can help a partner with their gender transition by listening, learning directly from them and people like them, and unpacking your own biases, expectations, and limitations.

I don't remember exactly what I did when my girlfriend, Jaime, and I first discussed the possibility of her undergoing hormones and surgery to make her physical body and outward identity match her mental/emotional image of herself. But I know that it's been an experience of sharing love and learning, and it can be this way for anyone, with the right attitude and conversations.

Jaime and I have been together for three years, and she's been living openly as a woman for about five months of it. In these past five months, a lot has happened; she went to a therapist who specialized in LGBTQ youth, was prescribed estrogen, progesterone, anti-androgens, and Vitamin D, and has begun experimenting with make-up and looking up different treatments and asking a variety of questions:

- Electrolysis or laser hair removal?

- Are the hormones going to impact our romantic life?
- Are the hormones going to trigger her sensory processing disorder?
- Is facial feminization surgery necessary?
- Why is acupuncture reimbursed, but not psychotherapy?
- If she goes out wearing too much make up and high heel boots, will jerks yell and possibly threaten us?
- How do we gently correct friends and loved ones who accidentally or intentionally misgender her?
- Should she tell her supervisor at work and risk getting fired when there are no real, set-in-stone legal protections against such actions? ¹

Believe it or not, however, the issues above are not what's the most challenging for me so far at this stage as a supportive partner. Emotionally and romantically, the most difficult stage for me was before Jaime was "out" to the public, when I was still trying to get used to the idea of her being trans*² without telling a soul.

1. At the time of this writing, there is a bill being debated in Canadian parliament which would extend human rights legislation to include gender identity and gender expression as protected classes.

2. *Terminology Note:* When referring to Jaime's gender identity, I use the term trans*. Most people are probably more familiar with terms like transsexual or transgendered, but trans* is generally regarded as the preferred term for individuals whose gender they were designated with at birth doesn't match their true gender identity. Also, it is generally preferred that any word choice is used as an adjective, rather than as a noun (e.g., *transgendered people* vs. *the transgendered*). When dealing with a friend who is transitioning, please keep in mind that terminology is a highly personal preference, and ask first. When interacting with strangers, however, remember that asking such questions is both intrusive and oppressive.

Have you ever heard the story of King Midas' barber? He was the only one in the kingdom to know that he'd been cursed with a pair of donkey ears, and he wore a high-peaked cap to hide them. The strain of keeping such an important secret under wraps led him to run out to the forest, dig a deep hole in the ground, and whisper, "Midas has donkey's ears!" into the hole in order to safeguard his mental health, or else he would explode with the pressure. That's equivalent to how I felt. I very badly needed somebody to talk to, but had no idea where to turn for honest advice that wouldn't be transphobic or tell me to break up with her.

I was also concerned that if I sought advice from people, they would lay great heaps of sympathy at my feet, going on and on about how "brave" and "loyal" I was for staying with her. This situation wasn't about me being brave or patient or steadfast in the face of something as "unexpected" as my partner being trans*. I wasn't looking for praise or assurance that I was doing the right thing—I just wanted to talk and sort through my own issues. Eventually, I decided that I wanted to write about it on my blog, as a form of emotional catharsis and so that I would have my readership audience, which was almost uniformly trans*-positive, encouraging, and knowledgeable, to turn to when I had questions or wanted to know what I could do better. I consulted Jaime about this, and she consented, so I began writing on my blog. It was just the ticket to better mental health. I engaged with people who knew what I was talking about, could ask questions without feeling like I was burdening any individual friend of mine with endless questions, and could be honest and articulate, rather than babbling in a single stream. It was free too, which was a blessing. It helped

me move through my own mental baggage and learn how our relationship was going to change as the transition progressed.

With that said, my experiences thus far with helping a partner during a gender transition can actually be boiled down to a few simple tips and bits of advice. I hope that, if you have a partner who ever tells you they wish to transition, you'll find this helpful. I think, however, that the basics are transferable to any situation with a major life event.

1. Don't be a martyr.

Remember earlier, when I said that I didn't want people heaping attention and sympathy on me at the expense of Jaime, or praising me for choosing to continue the relationship? That's half of what I mean by not being a martyr; it's important to remember that *they* are the ones transitioning and it is *their* experience. Don't hijack that and turn it into a time where people focus on you for being good enough to stay by their side. That's selfish and counterproductive. However, what I also mean by avoiding martyrdom is to remember to take care of yourself. It can be a difficult, confusing, and disorienting time for someone trying to be supportive. A good portion of your relationship is about to change. The way people are going to treat and perceive you as a couple is going to get a major upheaval. You're going to get a new vocabulary, a new outlook, and, if you're like me, yet another reason to despise medical gatekeeping and the bureaucracy of the world of psychology. It's okay to be stressed out, take time for self-care, and focus on your needs. Your partner should respect that; after all, you are only human.

2. Communicate honestly and both ways.

I fell into a bad habit when Jaime began transitioning; I only talked to her about what was going to happen to her, and neglected to articulate my own feelings, desires, and thoughts. I didn't want to hurt her feelings, since I know it wasn't any easier for her. But suppression of your feelings has some tragic and bizarre side effects on your physical and mental health: I started putting on weight, up to fifteen pounds, started breaking out to the point where my face, shoulders, and back were literally swollen with acne in some spots, and began getting toothaches. I would break down crying at the most bizarre and inappropriate moments, like when watching British comedy or *Pokémon*. When I began blogging (and Jaime was my most loyal reader), I was able to be more honest about my feelings. Additionally, I was able to confide in someone, albeit a large and faceless audience, and that helped me communicate better with Jaime. We started practicing self-care with each other and propping each other up equally, and the transition has gone much more smoothly since then. There's no point in bottling up one's feelings if they start coming out of you anyways, especially in the form of pimples and tears.

3. Remember that they're still the same person you fell in love with.

As cheesy and overdone as quotes from Shakespeare are, particularly *Romeo & Juliet*, I'm reminded of the words, "A rose by any other name..." Pronouns, appearances, gender, and name aside, Jaime's still the same person I fell in love with four years ago. She's still the same clever, sarcastic, nerdy physicist who stole away my heart with love poems, *Simpsons* references, and clever political observations. Nothing can change that, and you too can always treasure the person that your partner remains to be after all the little changes.

4. It takes great courage to stand up to your enemies, but even greater courage to stand up to your friends.

We have been, for the most part, a very lucky couple when it comes to the support of our friends. I have been actively involved in LGBTQ political activism since coming to college, and I had a wonderful community who was there for Jaime and me when we finally decided to be public about her being a trans* woman. Jaime's friends were mostly, like her, physicists in graduate school with no real experience with trans* issues, but they adapted quickly, and were very quick to correct their language and pronoun use. Now and again, however, we've had some moments where we've had to deal with people we love and care about challenging her gender identity, offering unsolicited advice about the "right" way to be perceived as a woman, and getting defensive about misgendering or pronoun mix-ups. For me, that hurts just as much as harassment from strangers, because I expect better from people who profess to be our friends and care about us. Don't be afraid to call them out on this behavior, though, and tell them that they need to catch up and get with the game. It doesn't always feel the best to criticize your friends, but oftentimes it's the only way to get the message that it's unacceptable to do so to sink in.

5. Stay romantic!

Now and then, part of Jaime's and my self-care routine involves a bit of extravagance. We'll go on a shopping trip for make-up, clothes, and (my personal weakness) LUSH products, then go home and dress up in our new clothes and make-up, then have fun with the bath bombs and massage bars. Or we'll have a picnic in the park with sparkling lemonade, baguettes with butter, and cold fried chicken, and take photos of peacocks

and our own silly faces. Sometimes we'll go out to dinner at a new restaurant and spend the night sampling wine, appetizers and desserts, then go home, play Mario Kart, and snuggle. There's no denying that it's different from when we were both perceived as cis³ and straight—we get stared at a lot more. Now and then, we get heckled, and we worry sometimes that we won't be welcomed into “nice” establishments like fancy restaurants and bars. I have to be more conscientious of Jaime's personal space and her sensory issues now that she's on hormones that make her skin thinner and heighten her sensitivity, and sometimes, she's just in a shitty mood and wants to be left alone. But we're hell-bent on still having a good time and expressing our love to the world, even if it makes a couple of close-minded people uncomfortable. Being romantic in both public and private allows us to enter our own private world of love and contentment, and remember just how lucky we are to have each other. Every couple and every situation are different, of course. But I hope the advice above provides at least some guidance and starting points for someone who is unsure how to be supportive and helpful to a partner or a loved one who is transitioning.

3. *Cis*—or *cisgendered*—means that you are comfortable in the gender identity assigned to you at birth, when the doctor announced, “Congratulations, it's a ____!”

Asexuality

by Elizabeth Boresow

In science class, we learned that *asexual* means something that could reproduce all by itself. While this may be the bud of the infamous joke “I wish my homework was asexual so it would do itself” and a classification for how some animals reproduce, asexual has taken on a new meaning. AVEN, the Asexual Visibility and Education Network, defines an asexual person as someone who does not experience sexual attraction. Asexuality is not the same as celibacy, the conscious choice to abstain from sexual intercourse. Think of it this way: I have made a personal decision to abstain from alcohol. That is my choice, just as celibacy is a choice to abstain from sexual intercourse. Asexuality is not a conscious choice I have made, it is just the way I am, being a person who does not experience sexual attraction.

I am a 23-year-old student who was identified in late elementary school as being on the autism spectrum. As I continue on in life, I have come to realize that I have no personal interest in sexuality or having a romantic relationship. While I realized this concept from a fairly young age, it took many years until I understood, through education from the queer community, that there were other people “like me”—and that changed my life.

Ask me what I think is the most important thing in the world. I will tell you, consistently: LOVE. What does this mean, coming from someone who considers herself asexual?

People tell me I only have one kind of love: platonic. They tell me of another kind, romantic, that sexual people experience. I have no such experience with a romantic love¹, but I can tell you that I love people, and when I say that, I mean that I genuinely care about them. YES! I love my parents and my siblings. YES! I love my friends and the people I meet at school and in the community. Yes, I know some people better than I know others, but I genuinely care about almost all of them—and that is what love is. I may show my love in different ways, but to me it is all still love. Love is giving hugs (or a high-five, smile, or encouraging word) to anyone who wants or needs it. Love is the bravery it takes to ask a stranger “Do you want a hug?” or offer up some uninvited encouragement, “That picture you’re working on is beautiful.” Love is spending my free time sitting one-on-one with a freshman, helping her through the calculus that is “ruining her life”—and it is certainly love when she sits with me during this tutoring session and comes out smiling. Love is accepting the mistakes of those around me and not holding it against them. Love is gently reminding someone they are not alone when they are grieving. Love is vast; love shows itself in many ways. You may want to classify a love as platonic or romantic, but my choice is to call it love and live by it.

The Past: Growing Up Different

1. It’s important to remember that romantic attraction is *not* the same thing as sexual attraction. Indeed, much like autism, asexuality represents a *spectrum*—there is no static definition of what asexuality looks like. For instance, some asexual people experience romantic attraction whereas others do not.

I am the oldest of four children. However, being on the autism spectrum, I was not always the first to reach typical developmental milestones. As my younger sister and I grew, she began to have friends in a different way than I did. For her group of friends, coming over to play became coming over to hang out. I realized that I was different in how my relationships with my friends worked. Mostly, my friends were the people with whom I shared classes and sports teams. Friends were at school, teammates were on the field, and then after school I just played outside with the neighborhood boys. There came a point in my life where I became upset about not having friends in the same way that my sister did. Our brothers, younger than the both of us, seemed to have a different set of social rules for friends. I didn't care to "hang out"—I wanted to play outside or make music with my peers.

Eventually, my sister began to show a new interest in boys. They went from being gross to being cute. For me, these boys were just playmates, so I merely watched my sister as she talked about her "crushes"—boys she thought looked cute. She went on dates and a few of these young men, at different times, gained the title of boyfriend. I didn't understand the appeal.

While I watched my sister hit these socially significant milestones of first date, first boyfriend, first kiss, and first school dance, all of which seemed important to her, my friends were doing the same thing. Not only were there "firsts" but then everything had an anniversary. Relationships with friends, something I already found difficult, became even more complicated as they dated, fought and broke up. Without having any desire for this circle of behaviors, even the "dating" that everyone considered so important, I had little sympathy for my peers when they struggled in this

cycle. My thought was that it was their choice and if they didn't want to deal with it they should just not bother trying, especially with how much of a hassle it all seemed.

Others noticed that I was missing this set of milestones long before I expressed any interest or concern. I never had any crushes on my classmates. As time went on, I didn't date. At middle school dances I played in the gym with the guys (and my parents). I didn't go to high school dances (with one exception)...and everyone had something to say about it.

“You’re just a late bloomer...”

My parents thought I was just slow to develop in this area. After all, my progress towards talking and being friends with my peers was made long after my peers had mastered these concepts. I lagged noticeably behind my peers in areas of social communication and relationships. My parents simply thought this was the case for crushes and dating.

“Why can’t you just be normal?”

I can only speculate as to how my siblings viewed this period. My sister, just a year and a half younger, probably wanted me to be normal. I know she was embarrassed at times by my childlike speech. In many ways, she probably felt like the oldest because she was the first to hit the dating milestones. My brothers, being younger, may have had questions of their own—but they never asked me about being different. As younger children do, they simply take what they are given and go with it.

“No, really, who is your secret crush?”

Many of my peers simply could not accept that I didn't have a secret crush like they did. They viewed me as too shy to share. Even when I

insisted “nobody”—they kept after it. It wasn’t until high school where some of them began to figure out that I really didn’t care about romance. I had no interest in crushes or dating. Once they figured that out, they quickly figured out the most important thing: me being “that way” made no difference—I was still the friend they had known all along!

“Will your kids be retarded too?” to “Will you go out with me?”

Bullies were present throughout my schooling. I have faint memories of bullying on the bus at my first elementary school. Most of what I remember is from middle school. These boys would come up to me and ask me if my kids were going to be “retarded” too. [I don’t condone the use of the R-word. It is used here because it is important for you to see how harsh preteens can be.] There were a few problems with their question, so I never knew how to answer them and I would just put my head down. My middle school self broke that down into three problems: For one, I did not have an intellectual disability. I knew the definition of intellectual disability, and it did not fit me. For two, there is nothing wrong with having an intellectual disability. For three, I could not imagine myself having kids at all. And thus I remained silent.

The other experience relevant to boys is that sometimes they would “dare” each other to ask me on dates. It was not cool to refuse a dare, but nobody was ever serious. One boy would get the dare, then (if they were “brave”) they would come up to me while the rest of the group watched, ask me on a date, and everyone would laugh and the guy would walk away without waiting for an answer. It is easy for me to see why I would want no part in dating.

Everybody else questioned how I could possibly be uninterested in “relationships” (they often use the word relationships to qualify romantic relationships—I have a much broader interpretation of the word). Nobody simply reassured me that I was fine the way I was. Doubts began to creep into my mind. I had all these questions that people asked me, and I couldn’t even answer them for myself: Why don’t I find people attractive? What even makes somebody attractive? Will I ever date? If I don’t date, I won’t get married, so what happens to me when I grow up?

Despite trying to keep my head up, not dating had several effects on my life. Some of the most important parts of school, the dances, I had no real way to participate in. I went to one dance in high school. Two of my friends (a guy and girl) invited me to come with them. The gym looked scary and I spent the entirety of the dance in the school bathroom—the quietest non-decorated place I could find. I found myself being the proverbial fifth wheel in many situations. With dinner dates, movie dates, and dances, much of my peers’ socializing was in pairs or groups of pairs. This is something that was hard for me, but because I had to, I grew to accept it.

To me, guys were still best viewed as my teammates on the soccer field at recess. I simply did not understand what was wrong with that. As time went on, I realized I wasn’t going to change. I wondered about my future and what that meant. I didn’t dwell too long on that—realizing I would jump that hurdle later. By the end of high school, I had realized what I should have stuck with all along: I did not care about dating and that was fine with me. By simply ignoring the idea in the back of my head that not dating led to a life alone forever, I was able to focus my energies on entering college.

The Present: Being Asexual in the Sex-Driven College Lifestyle

College life has opened my eyes to many possibilities. People date, people have friends and best friends, people have classmates. Relationships can be as simple or complicated as people want. I have found myself free to pursue the relationships I want to have with others. I want to be friends with people and so I have made friends. I may have gone about it in a slightly odd way, but I have found people that I can have genuine caring relationships with. I am a friend. I am also a colleague to many of my classmates. I am a student to my teachers, and some of them are mentors to me. I am a tutor for some of my friends. I am an accompanist to my boss. I am NOT a girlfriend to anybody and that is fine with me.

Peers try to explain to me the intricacies of dating, but I find myself unable to comprehend what they experience naturally. Despite that, I have accepted myself the way I am. There are times when I am grateful and consider myself lucky not to have such complexities in my life. The downside of my inability to empathize with my friends in their struggles with dating is that it becomes much more difficult to be patient with friends who agonize so long over romantic relationships that come and go.

There is a certain vocabulary that goes along with dating. It includes a whole host of terms that describe different relationships (from “going out” to “just talking” to “friends with benefits”) and one thing I constantly work on is mastering this ever-changing lexicon. While it matters little to me how dating relationships progress, my ability to listen and try to understand their experiences help me maintain friendships. I can count on one hand the number of people I have met in my lifetime who consider themselves

asexual like I do, so maintaining this vocabulary and working to understand my friends is important. In the same way, I know they try to understand what life is like for me in other areas (such as being asexual, autistic, or a music major).

Being different often inspires questions from others. I often am asked to explain various aspects of my life. Sometimes my explanations are accepted, and other times they are rejected. When I told my mom about this writing project on asexuality, she re-articulated her belief that I am not asexual. “You must experience sexual attraction. You probably just don’t *recognize* it.”

I can only smile and accept that she is just not capable of imagining a life without desires for romance. Out of curiosity, I ask peers what it is like to want to date. I cannot imagine life with a desire to date and they cannot imagine life without it. Therefore, I cannot blame my mom or anyone else for not being able to understand. Peers, for the most part, are at a point in life where they simply accept that I am the way I am and that is great with me! I run into occasional difficulties when I am asked out by someone who, for no fault of their own, does not understand or believe me when I say that I “don’t do dating.” I have been asked out by other people on the spectrum or non-native English speakers who don’t take no for an answer. I very clearly and bluntly state, like a broken record, that I do not date and eventually people understand that they should stop pursuing that sort of relationship with me. While I do not want to hurt anybody’s feelings, it is more important for me that I not give signals that indicate any possible dating interest.

“That’s what she said” is a classic college joke used after a statement to imply that the statement it follows could be applicable in a sexual situation. This infamous innuendo is naturally understood by most, although I am often unable to infer the hidden second (sexual) meaning. Most students naturally understand what statements the classic comment follows in order to be funny. To compensate for my lack of “that’s what she said” sense, I have developed a list of “trigger” words that will likely (hopefully) lead to a successful “that’s what she said” joke. I am wrong many times, but I feel good that I tried and others think it’s funny that I try without understanding the innuendo. There are many other times where others laugh and I realize I have missed a joke. While much of this may be attributable to autism, not all of it is. I was in a situation this past semester when two of the three other participants in a conversation began laughing. When I asked what was funny, the other participant not laughing stated that there was a sexual implication in someone’s comment. While it was not funny to him, he at least got the reference. When I ask what is funny about a joke I missed, there is usually some sort of political joke, celebrity joke, or sexual innuendo. I have just accepted that these things are not funny to me. Even when someone explains why it is funny, that usually doesn’t make me laugh. Sometimes, me not getting a joke makes everyone else laugh and then I just laugh at myself because I have found that I am much more happy with myself when I can laugh at myself.

Like the peers who feel compelled to explain the sexual jokes I miss, I often have peers who are willing to or feel responsible to explain “stuff” about sex to me. Having good hearing and a high school “innocence” led to me not understanding the strange sounds I heard in the dorms. My

friends were able to explain this mystery, one I would not have figured out myself. Some friends realize I did not get a lot of information about sex from the online health class I took in high school and want to fill that knowledge gap. While it doesn't matter a lot to me, it can be amusing to learn what other people do and don't do with each other. Some of my peers giggle throughout the explanation and others find creative, alternative (less factual) explanations. One guy kept a straight face and told me that "dildo" was the cousin of Bilbo (Baggins) from *Lord of the Rings*.

What I find incredibly boring is working so hard to understand the feelings that go with dating—the honeymoon phase (and when it is cute to see and when it is annoying for others to see), the arguments that have to happen, the play fighting and more. Discerning what social dialogues belong in each category is tricky and only worthwhile if you want to refrain from making social errors.

With all I have learned from peers and classes, I have formed my own opinions on different parts of romantic relationships. I know that my relationships and desired relationships are all "platonic" by the standards of most other people. The concept of kissing is gross to me. As a musician, this is the best analogy I can come up with: it is more disgusting than sharing mouthpieces with another instrumentalist. Sex is a strange concept, and I am not sure why people want to take off their clothes and press their bodies together. My friends tell me it feels good but the concept is just bizarre to my rational mind. On the other hand, I love hugs. I have no problem hugging friends or strangers. To me, hugs are a way to show you care and are with somebody in the moment.

Not dating has several impacts on my life. Some argue that these parts of my life are more related to my being autistic than asexual, but for me, there is a lot of overlap. I care very little for my appearance. I want to feel comfortable because when I am comfortable I perform better (at school, at work, and in social interactions elsewhere). I know the importance of looking decent for work settings and I strive to do that. I do best in slacks and a t-shirt (with a dress-shirt over it if necessary). I have never dressed in a provocative manner and have no need or desire to (despite how often this occurs in college).

I don't have to make plans around a significant other, which is nice. The downside of this is that when friends plan double dates I am an odd man out. However, I can choose to participate in the kinds of events I like and try to avoid dating groups, instead having groups of friends that all care about a certain community (maybe dorm kids or people in the disability-related group on campus or people in my major). There is less "drama" in my life although I do hear about it, being considered a great listener. This means that my relationships with individuals have one less dimension of complexity, which lessens the stress on me.

A couple people mentioned the term asexual to me in college, just in passing. Then a member of the queer community went a little further: she took me to a presentation on asexuality. This was the point at which I realized I was not alone. There were other people "like me" in the world. When I learned I had autism, it explained a lot of things for me. For a while I thought it even explained why I didn't like dating. Then I learned that other people with autism had the desire to date, and whether or not they had success securing dates, many of them wanted to. Finding an identity

as asexual assured me that there are a number of people in this world who also are not interested in sexual relationships. This gives me hope in the future. [I have heard that maybe 1% of the general population is asexual and 10% of the autistic population is asexual. I have no source on this, so I am not sure of its validity, but it gives you some sort of approximation of the asexual presence in this world.]

Future: The Future of an Asexual

As children, many of us were taught that life progresses a certain way. You go to school (and make friends), go to college (and get a significant other), get a grown-up job (and move into a house), get married (and start a family), and live happily ever after (and then retire).

Okay, I know I don't want to get married. Does this mean I am condemned to live my adult life alone? In high school I realized for certain that my life would not follow the standard "life progression" we are taught as children. College solidified this understanding but gave me hope that a different lifestyle might be okay. College was my affirmation that choosing my own path in life, even if it didn't fit the mold, was perfectly acceptable.

As a junior in high school, I sat in precalculus and mapped out the perfect life plan: when I "grew up" I was going to pool money with a few of my classmates that I considered friends and we would buy a mansion. We could all live there together forever. I knew in the back of my mind that my friends wanted to grow up and get married but they jokingly entertained my idea with a "maybe" and a "we'll see." Since beginning college, I have seen two of my Resident Assistant (RA) friends get married. One guy married his girlfriend of 4+ years. One girl married her girlfriend of a year. The

second couple is, of course, the less traditional of the two. The two wives are happily married adults who live in a house they purchased together. I think to myself that if they can figure out their own path in life, so can I.

Maybe I will find a roommate to live with long-term, once I stop living in the dorms. Maybe I will find a life partner. I know some asexuals have partners or even get married. While I don't intend to get married, I am open to the idea of finding a roommate to live with. Maybe I will move back home and live with my mom. That would be okay with me too. What I have realized is that this is my life and whatever happens, I need to be okay with it (and not just aim to please the rest of the world by following tradition). I hope that you can do the same for yourself.

On Being Autistic and a Not-Quite-Asexual Genderqueer Person

by Tracy Garza

As most of you are probably already aware, there is a great deal of controversy (or at least polite discussion) about the apparent connection between autism and asexuality.

I don't really consider myself literally "asexual"—for me it's not a matter of abstinence or anything like that, much less celibacy. But I readily acknowledge that my life has been decidedly asexual in the twelve years since moving to San Francisco.

To be quite blunt, I have nothing at all against sex—and definitely not when it is practiced by consenting adults as part of a caring, committed long-term relationship—but, in my experience, it's usually the relationship part that makes the whole thing seem a bit daunting.

If nothing else, the realization that I have been Autistic all along (even if I didn't really become aware of it until becoming middle-aged) makes it so much easier to understand why romantic relationships have always been challenging for me.

When it comes to relationships—romantic and non-romantic ones—it is sometimes very hard not to show either too much emotion or interest, or perhaps too little of either. From everything I've read since self-diagnosing, this isn't all that unusual for some Autistic people: your interest and enthusiasm tends to focus on one thing or one person at a time, in an almost all-or-nothing kind of way.

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So I guess it isn't all that hard, then, to understand why I may always have been at somewhat of a disadvantage in relationships. Whether showing a little too much interest, or appearing not very interested at all (even though I was), I may have inadvertently been driving potential romantic interests away even before they had the chance to get to know me.

It's still too soon to say whether this greater self-awareness about my own potential weaknesses in the romantic arena will allow me, over time, to try to compensate for my weak points with somewhat modified displays of interest or attention.

But there is something else about me that has been, perhaps, another slight impediment to a somewhat richer and more fulfilling romantic life: it is the fact that I have increasingly come to identify as a genderqueer person over the last few years.

For those of you who are not familiar with the term genderqueer, I'll save you the trouble of having to Google it. While the definition is still somewhat flexible, it denotes a fundamental inability or unwillingness to identify oneself in either of the two social gender roles (or stereotypes) that exist in the gender binary paradigm that is prevalent in most modern societies—or a desire to embrace a little of both traditional genders (male and female), or any sense of, as some in my community tend to put it, being “gender fluid.”

Living or identifying as a genderqueer person can be enormously liberating—largely leaving behind all the old-fashioned, and sometimes glaringly quaint, notions regarding certain gender stereotypes or behaviors

that were passed down for generations, and deciding what feels right and what doesn't on a case-by-case basis.

To me, just about all gender stereotypes always felt a little too restricting, confining, and they seemed largely unnecessary for any practical purposes.

While I don't really have any trouble with the fact that I am legally female, I would much prefer living in a society where there was no need for any person to have a legal gender, a society that had already managed to move past the gender binary and accept the concept of gender as a continuum rather than a black-and-white binary system.

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I'd like to think that, at some point in the future, there will be no need for any official ID to show people's "legal" gender, just as most forms of ID today do not show a person's race (in the past, most drivers' licenses in the U.S. included a racial marker); that gender could become a category that doesn't completely escape people with whom you come into contact, but that is generally not grounds for treating people any differently. In regards to these kinds of identifying information on official forms, I am intentionally overlooking the questions in many government forms that ask for such information on an optional basis, usually only for statistical analysis, precisely because it is usually not a requisite that you answer.

After all, in my reasoning, there really shouldn't be any compelling reason—especially in the 21st century—for someone to take your gender, or biological sex, into much consideration, with two possible exceptions: because that person is your physician, or because that person is a likely romantic or sexual partner.

If that seems a bit more idealistic, or downright utopian, than anything present-day societies are likely to readily adopt, at least within our lifetime, I would totally concede the point. I would be delighted to live in such a society, but I also definitely do not expect that it will happen while I am alive to enjoy it.

Being genderqueer also throws out on its ear most of the established romantic “patterns of engagement” between two people. I have been attracted to women pretty much all my life. While this has not changed at all, since I started identifying as genderqueer, it also raises the question as to whether any relationship I might ever be in would follow a traditional lesbian pattern. To clarify, if being a lesbian defines one’s sexual attraction, and being genderqueer defines one’s gender expression, I don’t see anything contradictory in being a genderqueer lesbian.

When it comes to any potential romantic relationship with another woman, I think I could very easily assume a traditionally masculine or feminine role—in some lesbian circles it’s simply called “being a switch”—but I feel I would probably like to keep it fairly flexible, at least most of the time.

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I really don’t think I would be comfortable being stuck with the same “role” all the time—in fact, I imagine it would make me feel downright miserable in the long run.

It’s still too soon for me to really know how comfortable the queer women in my community are with that. In the meantime, I am happy to just take it one day at a time.

Cultural Fascination

by Adrienne Smith

I often joke that I need therapy *because of* therapy. As in, my therapists have done me no favors: the more therapy I receive, the more therapy I need. It's an endless cycle, really. When I'm sitting in The Chair™ (or on The Couch™), poised with autly posture in a psychologist's decidedly un-autly office, I suddenly forget how to self-advocate. Instead, what percolates in the room is some foul mixture of stale hospital air and prescriptive roleplay. Allow me to summarize:

I am the client, he is the doctor.

I am deferential and clueless about my bodymind, he is the doctor.

I am socially awkward, he is the doctor.

I am broken and hold a college degree in *specialness*, he is the doctor.

I write with comma splices, he is the doctor.

You get the gist.

This isn't to say that I've never had *good* therapy experiences. I have, and I hope to god (please, dear god, *please*) that I'll have more, and soon.¹ However, most of my therapy past has been, in a word, atrocious. And this is especially the case when the therapists in question have been supposed autism "experts."

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1. As of this moment, I'm back on the market. FYI, therapist-type people who are not ableist jerks.

I am autistic. I am queer. I'm also in a long-term, committed relationship that, at least by outward appearances, might be classified as hetero-romantic.

The above three sentences utterly confound therapists.

It's taken me a lifetime to understand my own sexuality, not to mention its intersections with disability. And in many respects, I still don't understand who I am or why I am or what the meaning of life is. I'm at a place where I'm more or less OK with these things—I'm fine with being genderfluid; I'm fine with being some non-descript shade of asexual; I'm fine with not-knowingness.

My now ex-therapists, however, have not been so fine. They write things like “enigma” or “doesn't understand romance” on the spines of their legal pads.

When I first started recognizing “the signs”—not the alarming signs of autism, but the alarming signs of queerness²—I was awash in a sea of labels, none of which seemed to fit. In a lot of respects, coming to queerness was like coming to autism. There were all of these diagnostic categories, categories that I *must* try on first, per the insistence of show-mother doctors. How does OCD suit you? Would you like to wear some selective mutism instead? My, that migraine disorder does not flatter you. Oh, it does not flatter you. At all. Try something else, something with sparkles, or maybe horizontal stripes, something breezy but conservatively

2. Sarcasm. Like, really heavy, dripping sarcasm. Imagine you're standing in a puddle of whipping cream, thick and gooey and running down your sneakers. Now imagine that the whipping cream is sarcasm, and you need new shoes because the sarcasm is that sticky, that palpable. Yeah. That.

feminine, like social anxiety disorder. And hide in the dressing room with it, and coiffe your whole body in it, Victorian style, until you're ready to reel down the catwalk, corsetted and demoralized with your psychocrip self.

It didn't matter that autism fit like a glove.³ Before there was autism, there was endless testing, and rampant speculation, and hushed discussions about what's wrong with Adrienne, something's wrong with Adrienne. And there was this one doctor, and then there was this autism thing, and even though I believed I was a broken failure at first, I eventually reclaimed that autism thing. I was autistic, I was intrepid, and I wasn't a problem to be fixed.

And so there was queerness, queer me, queer something-or-other queerness-laden me. But I had no concrete explanation, no pithy label or discursive framework for articulating what, exactly, made me queer, and I certainly didn't (don't) have family support, either. The closest thing to self-understanding I could find was pansexuality—but even that wasn't wholly accurate, wasn't wholly me.

Whenever I despaired over my shade of queer, I would read *Anne of Green Gables*. Because to me, *Anne of Green Gables* was decidedly queer, and I was decidedly like *Anne of Green Gables*. It's possible that literary theorists will disagree with me on this. It's also possible that, if Lucy Maud Montgomery were alive today, she might chase me across Prince Edward Island with a bowing knife. Lots of things are possible. But frankly, I

3. How are gloves supposed to "fit," anyway? What kind of metaphor is this? By asking these questions, do I lose points on the Autism Spectrum Quotient?

don't care. What I care about is this: *Anne of Green Gables*. *Anne of Green Gables* and panromanticism. *Anne of Green Gables* and demisexuality.⁴

When the time for college applications rolled around, I mused and writhed over the sexual orientation checkboxes. I wanted to write in “Anne of Green Gables, but not Anne of Avonlea, and most definitely not Anne of Windy Poplars.” But that was kind of long, and when I tried explaining my rationale to my then-therapist, I was told that I shouldn't ever, ever become an English major.⁵

While in college, I developed an obsession with Boston marriages, any and all stories about women from the late 19th and early 20th centuries. I theorized Emily Dickinson in lesbionic and autistic terms. I read Carroll Smith-Rosenberg's “The Female World of Love and Ritual” and was convinced that this—these relationships—that this was me. Nineteenth-century American Lit was surprisingly validating.

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I am autistic.

I am panromantic.

I am demisexual.

I am currently without a therapist.

4. I'll explain what panromanticism and demisexuality mean in the pages that follow. For now, I'll leave you with this plagiarized half-poem: I feel pretty, oh so pretty, pretty and witty and gay.

5. I now have a graduate degree in English. Despite their assertions to the contrary, therapists cannot predict life outcomes. Nor can they predict when the Electric Light Orchestra will release a new album.

There are reasons for all of these things.

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“Can you blame others for not wanting to talk to you?” asked my former shrink. “If I weren’t your therapist, I wouldn’t want to have a conversation with you.”

I shrunk back from these words. I forced my body deeper into The Chair™, fiddled with the frayed thread on my shirt sleeve, stared at the air with hopes that the ceiling tiles might provide me with verbal inspiration, or pithy one-liners, or the muscular audacity to stand up and stage a walk-out. But none of these things came to pass. Instead, I stared. I stimmed. I sat. I squinted.

The assonance of my actions hung silent in the room. My ex-shrink took my quietness as a sign of something deeply pathological—what else?

There are few moments in my life that I remember with precision. But there was something precise about this moment, in The Chair™, in the office, across from a shrink who found me challenging. He grunted, knowingly. He wrote things on his legal pad, his handwriting obscured from view. In between bouts of note-taking, he commented on my body movement, my posture, my emotional stillness. He paused and drew measured breaths. “Your awkwardness fills the room,” he remarked.

As did his. As did his.

Behind the veiled insults, behind his attempts to fix me into something other, something conversant and, I imagine, something lady baker-like—behind all these things was a therapist who was really, really creepy. To him, I was so broken. But I was also so fascinating. An awkwardly queer

autistic specimen of the womanly variety. I got the sense that, had he a life-size jar with holes poked in the lid, he probably would have stuffed me in there for endless future scrutiny. In the name of curiosity.

“Tell me about intimacy,” he’d probe. Sometimes he would start our sessions with this straightaway. Other times he’d wait, usually after asking if he could visit my workplace and observe me, in situ. My queerly wired brain was a ware on display.

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These are the things that therapists have taught me about asexuality:

- Because you are autistic and therefore self-centered and unempathic, your refusal to have sex with your partner is simply a demonstration of your *true autistic nature*. (rawr?)
- There’s no such thing as human asexuality. That’s a plant thing.
- Asexuality is a mental disorder.
- There’s a pill for that.
- Naturally you’re asexual. All autistic people are.
- You have autism-induced gender confusion.
- Your orientation is the result of sexual abuse.

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There are nuanced differences between being a queer autistic and an autistic queer. I tend to identify more as the former than I do the latter. *Queer* has always been adjectival for me because, whether I want it to or not, autism has subsumed my identity. In the eyes of therapists, and even in the eyes of other (usually non-disabled) queer people, I am always

autistic first and foremost. Autism is the one fact about me that cannot be unlearned. Jim Sinclair once said that autism colors everything, every perception—and this is true. How I sense, how I move, how I interact and order information and make meaning—all of these things are autism. But autism doesn't merely color my own experience of the world; it also colors how *other people* perceive me, for better and worse.

And so, autism becomes both tool and explanation: to them, it is reason for my silences. It is reason for me standing in the corner of the room at a social engagement. It is reason for others to shun me, reason for others to deny that I even have a sexuality, much less a queerly asexual sexuality, reason to pepper me with questions about how my marriage works or whether I feel “real” emotion or whether I will open up my life to the prying, fascinated, contact-loving eyes of normlacy.

And so, I'm currently between therapists. It is hard for most therapists to understand that I'm ok with being queerly autistic. It is hard for most therapists to understand that my primary difficulties arise from an ableist world, a world that isn't designed for—much less kind to—people like me.

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I am a touch-averse autistic. I also have OCD tendencies—compulsions for cleanliness, aversion toward any and all bodily fluids, a need for showering daily and often multiple times daily. This makes sex challenging and generally unappealing. But I'm not about to talk about asexy sex.⁶

No. I want to talk about *the line*, the line between my autistic identity and my queer asexual identity. I want to talk about the line between

6. Asexy is shorthand for asexual, sort of like autie is shorthand for autistic.

perseveration and love. I want to talk about the line between sensory needs and sensory needs and sensory needs. I want to talk about the line between repetition and devotion. I want to talk about the line between autism and queerness and relationality.

Autism isn't reason for queerness, much like queerness isn't reason for autism. I'm unconcerned about reason, but I am concerned with intersectionality. Who's to say whether XYZ behavior, attraction, or interest is simply autism or simply asexuality? Because it's not simple. Nothing is simple. Cutting myself isn't simple. Sirens and sensory overload aren't simple. Lack of sexual attraction isn't simple. Non-femininity isn't simple. Shower compulsions aren't simple. Breath on my neck, or lips on my skin, or fingers on my back—and how these things all feel like fire ants, ravenous needle-like fire ants digging, *gorging* themselves underneath my dermis—these things are not simple, are not simple, are not simple. Asserting my wishes to people who don't care isn't simple. Repetition may be calming but is never simple. Nothing is.

When disability service professionals suggest that “treating” my autism will de facto “treat” my asexual hetero marriage or my dislike of penetration or my pan-gender romantic attractions—I get upset. And that's a severe understatement.

But my sexuality isn't simple, and for some reason, the people I should be able to trust most find my sexuality simply exotic and simply alluring. I'm the exception, they tell me, one of a kind. I'm fodder for a research study or journal article. After all, according to one ex-shrink, autistic people “don't form human attachments,” never mind *romantic* attachments, or, gasp of gasps, *queer* romantic attachments.

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Unless I'm visiting an asexual web forum, people tend not to know what "panromantic demisexual" means. This, of course, includes therapists.

It's hard to reduce something so complex about myself—something so core to who I am—into mere words on a mere page. When I attempt to break it down to people, I use frames of reference that I think they might understand. Sometimes, for ease of conversation (or because I'm so sick and tired of explaining what panromantic demisexuality is), I say that I'm bisexual, minus the sexual. This, of course, spurs some people to utter pithy truisms like, "BUT YOU'RE DESCRIBING EVERY PERSON ON THE PLANET."⁷

The above is one reason why I dislike having conversations with people about my sexuality. Like autism activism, despite its necessity and worthwhileness, such conversations are exhausting and triggering. Emotionally speaking, they're very rough conversations to have. And, for emotional reasons, I try not to have them often.

I have deeply romantic attractions to people, and my romantic attractions cross gender and do not revolve around gender binaries, hence the term *panromantic*. My romantic attractions are people-centered, people-specific. And, as any romantic asexual person will tell you: These romantic relationships and feelings are *not* platonic. These are not simple friendships with the occasional "buddy cuddle." These are real, serious, (sometimes) (often) (always) queer relationships. And, to my dismay, many people deny

7. No. No, I'm not describing every person on the planet. If that were the case, I'd be more likely to find a like-minded partner, or I'd be less likely to endure sexual abuse. I'm describing 1% of the population, if that. Thanks for playing, though.

the legitimacy of these relationships, as well as the legitimacy of my sexuality. (Don't you know? Asexual people don't exist. They're just people who haven't had a good lay yet.⁸)

Demisexuality further complicates my orientation. Or, at the very least, demisexuality imposes more difficulty in describing my particular brand of queerness. In asexual communities, *demisexuality* is used to signify myriad things—people who sometimes experience sexual attraction, people who identify as “halfway” between sexual and asexual, people who don't experience sexual attraction but have sex, people who have never experienced sexual attraction but believe that, under the right circumstances, they may experience it, and so on. I tend to dislike spectra metaphors, given their propensity for hierarchy and orders of normalcy, but asexuality is often conceived as a spectrum. People who find themselves “somewhere in the middle,” or people who don't feel that they're the cut-and-dry definition of *aromantic asexual*, tend to identify themselves as gray-A. And demisexuality is but one shade of gray-A.

Generally speaking, demisexual people identify as asexual, but sometimes, as the result of deep emotional connection with someone(s), demisexuals may experience some form of sexual attraction.⁹ On their wiki

8. More dripping sarcasm. Think of a slip-n-slide, except with liquid sarcasm instead of pungent backyard hose water.

9. It's worth noting that asexuality is not the same thing as celibacy. Asexuality isn't about sexual activity; it's about sexual attraction. There are many asexual people who have sex, just as there are many asexual people who do not. One is not any less asexual if they have sex, just as one is not any less sexual if they don't.

glossary, the Asexual Visibility and Education Network (AVEN) describes demisexuality as follows:

“ A demisexual is a person who does not experience sexual attraction unless they form a strong emotional connection with someone.... In general, demisexuals are not sexually attracted to anyone of any gender; however, when a demisexual is emotionally connected to someone else (whether the feelings are romantic love or deep friendship), the demisexual experiences sexual attraction and desire, but only towards the specific partner or partners.”¹⁰

As one might imagine, explaining all of this to therapists can be quite the task, as can dealing with the eventual fall out. Asexuality is typically perceived as absence. We are *missing* something. We never just plain *are*. Our orientation is construed primarily in terms of *are not*, *does not*, and *has not*. Try as I might to claim asexuality as an orientation unto itself, others are quick to couch asexuality as *lack* of orientation (or lack of experience, or lack of certain biochemicals, or lack of sexual enhancement drugs, or lack of having sex with them personally).

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I wish I could offer a simple take-away with this essay. But I can't. For now, I'm dwelling in my transitory space. I'm becoming more discerning when choosing therapists. I'm re-reading *Anne of Green Gables*.

10. AVENwiki, 17 August 2012,
<http://www.asexuality.org/wiki/index.php?title=Demisexual>

part 5



debunking myths &
stereotypes

I Am Married Too

by Michael Higginbotham

I have been married for more than half of my life. My wife has been such an integral part of who I am and how I navigate life that I can't really imagine the world without her. I hear that people on the spectrum don't know how to have or maintain relationships with others. We are told regularly that we lack empathy, theory of mind,¹ and the ability or desire to maintain social relationships. For me this just doesn't hold true, and it certainly has not been my experience.

I am reminded of the words of Jim Sinclair, "You try to relate to your autistic child, and the child doesn't respond. He doesn't see you; you can't reach her; there's no getting through. That's the hardest thing to deal with, isn't it? The only thing is, it isn't true." These same words apply to the husband and wife dynamic as much as it relates to the parent and child. My wife complains at times...she knows that my aversion to human contact can be difficult for me but at the same time I know that she needs to have that contact in order to feel the love that I know we share. The lack of understanding really comes from those around us that don't understand or even think they understand what Autism is and how it manifests itself by making comments like, "But you seem so normal"—such disappointing

1. Quite horrifically, many researchers assert that Autistic people lack a theory of mind (ToM)—that is, the ability to "mind read" and recognize that other people have their own unique mental states, emotions, and experiences. ToM, to be frank, is an ableist and oppressive theory. It suggests that Autistic people lack humanity, empathy, and worth. Furthermore, non-autistic people often use ToM as a way to silence Autistic people.

words to hear and more importantly to feel. That is the ironic part of the world's preconceived notions of what a marriage is and should be...

We are not normal in the traditional sense, that much is probably true. However, few people have had the length of a relationship that we have had. I have known my wife longer than I have not known her. We have been together as a team for over half of our lives. At times I am asked why it is that we have been together for so long. I am unsure at times how to answer that question. I think to myself that I have agreed to be with her for the rest of my life and that commitment means something to me. But I think the question that people really want an answer to is not how long but how is it that we have been together for so long and we are still happy. I can equate that to the simplest of things; my wife is my best friend. The interesting part of this statement is that if I were to listen to stereotypes and live up to the expectations of the larger population, then I would have no such thing as a best friend and certainly not be married.

I met my wife one evening at a restaurant. She worked as a waitress and she would bring me my coffee while I sat at the counter and read my books. I had no plans to meet anyone or to even find the love of my life and get married. I was there simply to drink coffee, read, and leave. I have never really been very comfortable with chitchat or small talk. But, my wife was an expert.

As we progressed through the courting process I tried my best to do the things that would impress her. I had recently ended a long-term relationship with another woman only a few months prior and that relationship had left a few emotional scars—much like it would for anyone else in a similar circumstance. I was hesitant and shy, but there was something about my

future wife-to-be that I just couldn't ignore. One evening I leaned over to my best friend at the time and told him, "That girl is going to be the girl that I marry." After some good-natured ribbing from him, I committed silently to myself that I would try my best to go on a date with her.

After this many years, I still try my best to do things that I think she will enjoy. I respect my wife and love her with all my heart and soul. This of course does not mean that all things have been perfect all the time. One of the most important parts of marriage is the art of argument. What I mean by this is the ability to argue one's point without causing damage in some way or another. My wife and I both came into our relationship truly unprepared. Some people think that Autistic people lack the communication skills of the typical person, and, ipso facto, they certainly can't learn how to argue in a meaningful way in a relationship. At first this may have been true for me...but it was also very true for my wife. She had just as few skills as I did. But this had more to do with just not knowing how to have an argument and less to do with autism. We argued in the only way we knew how. It was always to prove a point and to win the argument at all costs. I have learned that this is not an effective means of communication with anyone. Is it an Autistic thing to argue so poorly or is it just a maturation thing? I believe it is the latter. When I entered into the relationship with my wife, although I was chronologically mature, I was not emotionally and spiritually mature. I had many lessons to learn and many lessons to teach. Something that we did together.

On the other hand, I am not sure if being married is just about "getting along." As I mentioned earlier, it is rumored that people on the spectrum can't have meaningful relationships with others. I suppose there are some

that this statement applies to just as this is true of those who are not on the spectrum. There are many people who have difficulties with the construction and maintenance of any type of relationship. But to lay the claim that Autistics cannot develop meaningful relationships with others is to show how ignorant a person is to what relationships truly are and by extension what marriage really means.

I think that one of the important aspects of married life is the idea that marriage is like a partnership. She has strengths that I don't have and I have strengths that she doesn't have. These opposites complement each other. It is not that coined phrase of "opposites attract" because we are more alike than we are different, but we do have strengths that truly complement each other. One of those strengths has manifested throughout raising our children together.

When our children were born my wife was so very afraid and suffered tremendously from post partum depression that she had a hard time even holding them. However, it was something that seemed to come easily to me. There were duties and responsibilities that I knew had to be done. I went about the day as if checking off my work list. Her strength came in the areas of supplying the cuddly, loving, physical contact that I have always had a hard time with. This is what makes the creation and the maintenance of a long-term marriage successful. I never once thought to myself that I was inadequate in some way and my wife certainly never expressed any disappointment in her inability to do the daily "child maintenance." To this day, our duties as parents have changed very little for us. I help to maintain the daily needs of the boys by addressing issues of schoolwork, daily chores, mental health, and so forth. What adds an additional dynamic to

this family structure is that both of our children have been diagnosed as Autistic. This being so, I have been able to mentor my children and hopefully to bring to them a sense of self that is honest and true. My wife has been able to show to them the love and affection that I was never really given as a child.

So the question still remains—what does marriage mean for an Autistic person? I say that it means the same thing as it does to anyone else on the most basic level. I have committed to my wife a lifetime of friendship, love, camaraderie, family, support, and so much more. She has committed to me the same thing at the level that she is capable based on her ability as a unique individual. Does this really make us any different than anyone else? I think not. What most people want to look at is the differences between the normal and the strange. But that in itself has hurtful connotations based on a preconceived ideal. Marriage, for me, means solid and undying love and commitment to another human being. I don't always understand my wife and she does not always understand me. But I dare anyone to find a person that they completely understand and know absolutely. For me that is what the mystery and excitement is about. As I grow older I discover more and more about my wife and about myself. That matters far more than anything else.

Our Voices:

What are the Greatest Myths of Autism and Sexuality?

by Lindsey A. Nebeker

Autism and sexuality is not a conceptualized idea. It is a reality.

Myths and misunderstandings tend to be especially magnetized to cultural taboos. At present, the combination of disability and sexuality remains a taboo to the eyes of those who have not been exposed to the concept. For those who have been exposed to the concept, there can be the challenge of having it be seen as positive.

In dispelling misunderstandings regarding ASDs and sexuality, resources containing personal perspectives addressing the truths are minimal and difficult to locate. Mainstream audiences require specific directions to those resources, since it's not as easy as making a phone call to an autism organization or performing a Google search on autism and sexuality. Resources to accurate personal perspectives have increased, but resources to myths often still get mixed in.

During an autism town hall meeting held in April 2011, Dr. Peter Gerhardt tweeted: "It is just another aspect of human behavior but we have so pathologized sexuality that most are afraid to even discuss." It's true... we are afraid to discuss it. But why?

Human instinct relies on establishing explanations to ensure what is happening is "normal" (i.e., why the sun rises and sets each day). Traditionally, myths have been created to explain the reasons and responsibility of nature's occurrences. Myths are also created out of fear

and awe—to separate ourselves from anything we (as a general population) are taught are odd or different from the social norm. We feel comforted and protected when we reside within the social norm.

The majority of us who receive and believe in myths do not do so out of malicious intent. The majority of us who consume myths are simply misunderstood, considering we may never have had an opportunity to be exposed to the truths.

There will always be people who will hold onto their belief of a given myth after hearing a truth. When it comes to truths regarding ASDs and sexuality, it may take a while to absorb the facts. However, most people are willing to listen if the information is delivered in a consistent and convincing manner.

The more voices and stories we (as a society) hear from autistic individuals, the closer we will be to dissolving this taboo. The unique aspects found in sexuality in general is not meant to be labeled as a social norm, but we can infuse it into our society to where it is not viewed as *subhuman*, *abnormal*, and any other term with a negative connotation.

So, what are the greatest myths of autism and sexuality? The answers can be found through the people who live with it themselves. I recently reached out to fellow self-advocates via Twitter and email correspondence and posed the following question:

What do you believe is most misunderstood about ASDs & sexuality, and what myths need to be addressed in regards to ASDs & sexuality?

What follows are the responses from a small group of autistic adults who participated in the conversation.

I think the biggest myth is one that most people have about ASD individuals. That we don't have feelings like "normal" people.

—Wolfie (@wolfie74)

I think the biggest myth is that we're incapable of feeling love or higher emotions at all.

—TG (@outoutout)

...that our people can't, won't, don't want to or will never have a sexual or romantic relationship, so why teach consent?

—Mand Hoskins (@Mandlovesgeeks)

The biggest myth I encounter is that we are incapable of being tender and empathetic to our partners, sexually or otherwise.

—@Nominatissima

That there's anything that can be universally said about the sexuality of Autistics. Some are straight, some are gay, some are bisexual or might not even care about gender of their partner as far as attraction. Some might be very straight to the point, some might be into more extensive sexual play, and some might incorporate "kinky" aspects into their sexual interactions. Some might be of typical

sexual attraction, some might be hypersexual, and some have an asexual orientation. There really isn't one Autistic sexuality, just as there isn't one sexuality or approach to sexuality in the general public.

—Savannah Logsdon-Breakstone

[The greatest myth is] that we don't know or are not capable of feeling love... or that we are scared to express sexual desires.

—Zachary Harden (@zscout370)

I'm afraid to express sexual desires, but it was people—"normal" people—who instilled that fear in me. That's not autism's doing. Now, when it comes to affection, attachment, love, I often feel those with such intensity that I am overwhelmed and shut down.

—David K. March

There's this myth that Autistics who do kink play make bad dominants. This is bull crap.

—Anonymous

We are alike more than we are different. We have all the same needs as any other... love, connection, sex—we just may go about getting them met differently.

—Lynne Soraya

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The contribution of voices does not end here. The more voices heard, the more complex and rich this “orchestral piece” will resonate to audiences in need of such awareness.

Self-advocates: you have the spotlight. What do you believe is the greatest misunderstanding about ASDs and sexuality, and what myths need to be addressed regarding ASDs and sexuality?

part 6



abuse & healing

We Are No Longer Silent: The Unspoken Prevalence of ASDs and Sexual Abuse

by Lindsey A. Nebeker

Trigger warning: *The following article contains mentions and descriptions of sexual assault, sexual abuse, and sexual violence. This article does not contain graphic images depicting sexual violence.*

According to a national survey conducted by Finkelhor, one out of every four girls and one out of every six boys in the United States will experience sexual abuse by the age of 18.

I was one of those statistics.

It is a confession I am almost ashamed to admit. Even after recently completing eight months of intensive therapy at the local women's sexual assault center, I still feel a degree of responsibility and fault for getting into that personal debacle.

It began when I was 15, while attending a boarding school in a rural town out West... over 1500 miles away from home. I was a shy and studious honor roll student with a Renaissance-type physique and blackish-brown hair nearly hitting my waist. I was also sporting braces (at least in that first year).

He, on the other hand, was highly attractive, well respected, and admired by the school and the community. His intelligence and wisdom served as

strength to his persona. It was difficult for the girls not to develop a crush or become infatuated with him.

It began as an innocent friendship that gradually transformed into a continuous twisted relationship: a mixture of the emotional, psychological, and eventually physical. I lost control. I did not know how to escape.

It continued for three years—until I was 18. It went further than I initially wanted it to go. With every physical encounter... in an apartment, in the classroom, out in the woods... my adolescent body would be induced to curiosity and pleasure, yet frozen in fear. But instead of running, I willingly participated and occasionally initiated... separating my mind from my body. And I would close my eyes, waiting for it to be over.

After all that, I still convinced myself the whole thing was entirely consensual.

But he was my high school teacher. And he was nearing 50. Married. And a father. And he knew I was autistic.

That's how much I trusted this person. In recent years, I have gone public with my disability. But at the time, I was very secretive about it. Very few outside my family and early intervention team had knowledge of my diagnosis. I made the decision during my senior year to disclose my diagnosis. There was no turning back. From that point on, I exposed myself to a lot more vulnerability. I felt like I had stripped naked.

I was violated and I was scared. It was not consensual. And it took until I was nearly 30 years old to realize it was not consensual.

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While there are no definitive statistics regarding the number of autistic individuals who are impacted by sexual abuse, individuals with developmental disabilities have a higher chance of being sexually violated. What about autistic individuals over 18? What about autistic individuals who were not believed or understood when trying to communicate they were sexually abused? What about autistic individuals who are able to communicate effectively but choose not to open up about their sexual abuse?

Ignore the statistics.

Sexual abuse affects the entire lifespan of individuals with ASD and developmental disabilities. We cannot only limit our research to children and adolescents. There are plenty of us with disabilities who don't experience sexual assault and/or sexual abuse until we've reached adulthood.

What makes us (particularly with developmental disabilities) easy targets of sexual violation? There are several hindrances that barricade us. Here is a brief overview of these barriers.

Many of us are socially naive.

It's difficult to admit, but it's often true. One of the greatest weaknesses of many autistic individuals is the tendency to be socially naive. This serves as a disadvantage when it comes to learning how to protect ourselves from getting hurt: physically, emotionally, and psychologically. We have difficulty picking up on social nuances and subtleties. We easily get caught into the complex nature of grooming techniques.

As we grow, we often get hurt by the realities that reside in human interaction. A person smiles at us and we assume that person sincerely likes us. A person says they are our friend and we believe that person. A person says “I will never hurt you” and we think that person has no malicious intent. This is the cruel nature of being socially naive.

In the vast majority of reported incidents, the perpetrator is an individual familiar to the affected survivor. According to one study, 97-99% of abusers are known and trusted by the survivor with developmental disabilities (Baladerian, 1991). This can be a family member, caretaker, educator, personal care attendant, or other professional.

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I know I certainly fell into that trap. Who wouldn't fall into the arms of someone who offered a listening ear, comforted them when they were feeling lonely, complimented them on their talents, and called them “sweetheart”? Especially when that teen was bullied, hated, and ditched by her peers? Especially when that teen lived far away from home and didn't often talk to her parents?

I should have known something was up when he revealed personal life details that authority figures don't usually share... details like past lovers, sexual jokes, and discussions regarding sexuality. I should have known something was up when I revealed to him my addiction to cutting and he didn't refer me to a medical professional. I should have known something was up when he invited me into his car and drove me out to the wilderness where we would take walks and engage in deep conversations. I should have known when the two of us were standing alone inside another faculty member's apartment on my high school graduation day.

I almost didn't want to know something was up. At a time when I was bullied, threatened, and lonely, this was the only person I trusted. The only person with whom I felt I could share all my secrets and not be judged. The only person who welcomed me with open arms when I needed a safe place to run to.

We are haunted by our ability to recall specific details.

Many autistic individuals pay attention to detail when storing information in the brain. It is how many of us experience and learn new things. This is often a positive trait... but when recalling traumatic events, the ability to recall detail can be tremendously painful. Processing details involves application of all the senses in our sensory system. Since our sensory wiring is unique, recalling details in our past can feel like we are literally experiencing those moments again. This does happen to non-autistic survivors as well, but it's possible that autistic survivors may experience traumatic memories in an even more intense manner due to heightened areas in our sensory wiring.

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While I do remember the "whole picture" of the incidents in my experience, I have a better memory of specific details. Especially details involving impact on my sensory system. For instance, I may have difficulty recalling the entire experience of every particular physical exchange. But I have no trouble recalling details... such as the scent of his hair, the texture of his face, the tingling of a specific location where he kissed me, and a throbbing pressure inside my left thigh from his erection.

These memories go far beyond the visual. To this day, I can still recall the exact sound of his voice, the scent of his home when you walked through

the front door, the texture of his sweater pressed against me as we held each other, and the taste of light sweetness in the tea he prepared during our late-evening conversations as we laid down on the living room floor.

We are weakened by a lack of valid research.

As of 2012, there is yet to be specific data in the incidence of sexual abuse impacting individuals residing within the autism spectrum. There has been an array of studies specifically dedicated to the incidence of sexual abuse in individuals with developmental disabilities. However, the findings are grossly inconsistent. What follows is a sample of the study findings:

“Eighty percent of women and 60 percent of men with developmental disabilities have been sexually abused.” (Hingsburger, 2001)

“More than 90% of people with developmental disabilities will experience sexual abuse at some point in their lives.” (Valenti-Hein & Schwartz, 1995)

“Other studies suggest that 39% to 68% of girls and 16 to 30 % of boys will be sexually abused before their 18th birthday.” (Sobsey, 1994)

“The likely hood of rape is staggering; 15,000 to 19,000 of the people with developmental disabilities are raped each year in the United States.” (Sobsey, 1994)

“According to research, most people with disabilities will experience some form of sexual assault or abuse.” (Sobsey & Varnhagen, 1989)

Does this leave your head spinning? Given that the collective research spans over 20 years, it’s fascinating to observe the inconsistency of data. Without enough data, it’s difficult to implement protocols specifically addressing education and prevention of sexual abuse for autistic individuals across the lifespan.

We are weakened by lack of evidence and prosecution.

In March 2011, *The New York Times* (a widely recognized U.S.-based newspaper) published an article about a year long investigation into more than 2,000 state-run homes in the state of New York. During that investigation, *The Times* retrieved a long list of accounts of sexual abuse, physical abuse, discrimination, and other dehumanizing behavior: around 13,000 allegations of abuse in 2009 alone. Multiply that number by 50 for each of the 50 states, and you have a possibility of 650,000 incidents (give or take) of abuse to adults with developmental disabilities (including autism) across the United States in 2009. About a mere 5% of these incidents get reported.

In most of these cases, “employees who sexually abused, beat or taunted residents were rarely fired, even after repeated offenses, and in many cases, were simply transferred to other group homes run by the state” (*New York Times*).

It would not be surprising to hear if a high percentage of these incidents involved individuals who do not speak or have difficulty in

communicating. As one of the supervisors confesses in an interview with *The Times*: “It’s a hard road without a confession by the defendant.”

This is just one example out of several investigations that have been conducted in U.S. institutions within the past few years. Each investigation reveals an extensive collection of disturbing details of sexual violation to disabled clients ranging from adolescence to adulthood.

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Considering the delay in response and the timing of my own experience, the opportunity to take disciplinary or legal action has long past. Even if it wasn’t, I have no interest in doing so. Legal action is simply not worth my personal energy and time at this stage in my life. There are far more tragic cases than my own that deserve the attention of disciplinary action and legal justice. If the person in question was still employed at this school, I would have perhaps brought up the consideration with strict concern for other students possibly being affected.

Even though I have allowed myself public exposure, I still take precautions to protect myself. There are certain details (identities, etc.) that I do not intend to expose. I simply want to be heard, to be believed, and to provide a safe platform for other survivors to share their experiences....

...which leads us to our next barrier:

We are withheld from delivering effective communication.

Communication often serves as the greatest evidence in prosecuting incidents involving sexual violation. When there is lack of documented or physical evidence, communication from the survivor or witness testimony is crucial to resolution of an investigation. The inability to effectively

communicate incidents of sexual abuse often has to do with the lack of access to alternative communication methods that fits with our communication style.

Communicating incidents when we are sexually violated requires unprompted communication. This is unfortunate since many autistics have difficulty communicating complex topics without a form of encouragement or prompt. We need a third-party representative (outside our familiar relationships) to check in on our well-being, to present us with questions that are unambiguous, to encourage us to express our feelings, and to ensure we will be believed.

Disclosing incidents of sexual abuse requires referential communication—something that very few autistic individuals have fluency in. Even for autistic individuals who do speak, effective communication is often difficult. As a result, our attempts to communicate what happened are unsuccessful because we are not fully understood.

Take, for example, those of us who do not use verbal or technology-based communication.

My brother, also autistic, is in his late twenties. He is nonverbal. As of today, he has not found a technology-based communication method that works for him. He does utilize the PECS system; however, the PECS system has extreme limitations. The PECS system is focused on communicating wants and needs. My brother almost always needs a prompt to initiate communication.

Fortunately, my brother is in a safe living environment. My parents and I maintain consistent communication with the direct care staff living in his group home to ensure he continues to be well taken care of. I am

concerned, however, of those who are in a similar need of dependent care and are in a more questionable living environment.

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Even though I have been given the privilege of verbal communication, I was at a complete loss when it came to speaking up about my own sexual abuse. A significant part of this was because no one ever encouraged me to talk about it. As a result, it took me over 10 years after the fact to identify what I experienced was sexual abuse. I always knew something was not right about what happened, but I didn't know how to verbalize it.

I was always seeking to identify what happened. During college, I attempted to confide with one of my former classmates. Within a couple minutes of opening up she responded: "You don't have to talk about it, Lindsey. Be quiet. Stop talking about it." I also tried to reconnect with a couple of trusted faculty members who were employed at the boarding school. I thought perhaps they may have known what was going on. One never responded; the other one cut off all ties to the school and has gone undetected.

As a result, I completely lost hope of personal empowerment. I needed to know what happened. That's why I finally took action and sought services at my local sexual assault center. I needed at least one person to give me an honest analysis of what happened.

We are less likely to be believed (when we do speak up).

It takes a longer period of time for a developmentally disabled person to be trusted than for a non-developmentally disabled person to be trusted. Why? The reason may be that others assume our various cognitive and

intellectual challenges equate to our credibility. In other words: we are less likely to be believed because our brain wiring is different.

Different, according to heteronormative and ableist states of thinking, equates to *skewed*, *problematic* and *unreliable*. When we are labeled as *different*, it tends to have more of a negative connotation than a positive connotation.

Research is being conducted on the sexual behavior of autistic adults residing in group homes and institutional settings. However, studies that involve assessments and interviews with these adults' experiences with sexual abuse have ended up in results that are less concrete (Van Bourgondien, Reichle, & Palmer, 1997).

We are very fortunate to be alive in this day and age with the advancement of communication-based technology. A handful of instruments and tools are utilized by those of us who use alternative ways to communicate. However, we are also living in a world that has not established a mutual trust and understanding on communication technology. This applies to all of us, regardless of whether our roles are direct or indirect. There are those who believe in the accuracy of alternative communication technology while others doubt its accuracy. And this can lead to serious consequences for sexual assault and abuse survivors who do not utilize verbal communication. This is definitely of concern. Because of clients not being able to speak up, many of us have no idea how much sexual assault and abuse may actually be occurring for individuals who are unable to express themselves by verbal or facilitated communication.

The debate may continue between doubters and believers in the validity of various alternative communication methods. What is safe to conclude, without a doubt, is there are survivors with ASDs and developmental disabilities who have undergone sexual abuse in silence. With the number of evidence-based cases escalating, it does not take a rocket scientist to figure out the validity of sexual abuse that occurs in and outside institutions, community housing, or any other dwelling.

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Being believed by others is one thing. Believing in ourselves is a whole other obstacle. One of the most difficult steps in my own healing process was believing the abuse actually happened.

I didn't want to believe it because...

He was a kind person, and seemed too gentle to hurt anyone.

He made me feel protected.

I trusted he didn't have the capacity to do such a thing.

It wasn't forced, and I held responsibility for my participation.

I would never forgive myself.

I would be stuck in anger.

I hate 'pointing fingers' at people.

And if I believed it happened, I would have to...

Admit I was weak.

Admit I was naive.

Admit I was gullible.

Think too much about it.

Face accusations by those who think I'm lying.

Face accusations of degrading the reputation of a well-respected person.

Admit I can't take care of everything on my own.

Freak out more during sexual relations.

Be more reluctant to trust people.

Be more reluctant to trust myself.

Question the definition of love: giving and receiving.

Question what it really means to fall in love.

Question if I have ever been in love.

Even when I chose to believe, I felt my story was insignificant. During therapy, I often expressed my hesitation of joining a support group. I have held the assumption that other survivors' stories are comparably far worse than my own.

We are held vulnerable by a lack in appropriate education.

In their 1997 study, authors Van Bourgondien, Reichle, and Palmer almost suggest that the public fascination over sexual behavior displayed by these adults overshadows the concern over what they may be experiencing in their homes, their schools, and their communities. Those

who work with us focus more study on how to prevent adolescents and adult clients from inappropriate acts of sexual behavior towards others. Yes, it is important to learn what is deemed inappropriate (unconsented sexual advances, masturbating in public, etc.). But it is just as important to learn how to protect ourselves from sexual violation.

Defendants have argued about the lack of funding or delegation in providing adequate staff training in properly caring for individuals needing extensive accommodations in day-to-day life. While this may be true, lack of adequate staff training alone is no excuse to disregard providing adequate sexual education for autistic individuals.

We need to be educated about our rights. In *The Courage to Heal*, Ellen Bass and Lauren Davis (2008) argue that we need to know many things including (but not limited to):

The right to trust one's instincts

The right to privacy

The right to question adult authority

The right to be rude and unhelpful

The right to ask for help

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I wish I knew these things at the time.

Sure, there were some things I learned. I learned not to take candy from a stranger. I learned not to talk to anyone I didn't know by name. I learned not to give out my real phone number to the random pimp who approaches you on the street with his limousine and promises you an unforgettable night out on the town.

I didn't learn you had to watch out for anyone you are familiar with.

Sex education was administered in 7th grade at my junior high school. I happened to skip 7th grade. But that didn't prevent me from educating myself about sex through a bounty of resources: media, peers, and the like. Some information was accurate, some over-exaggerated, and some misinformed. I learned about STD/STI prevention and rape. I learned the "black and white" definition of abuse, but not how to detect the "shades of grey" that lie in between.

I didn't know a survivor can take any pleasure in an experience and still be abused. I didn't know a survivor could act as a "willing participant" and still be abused. I didn't know a survivor could refrain from saying "NO" and still be abused. I didn't know a survivor can still love the person who abused them and still be considered abused. This is why it has taken me so long to realize what happened to me.

We are misinterpreted in our behaviors and coping mechanisms.

What happens when we are not able to speak up about sexual assault or abuse? We develop coping mechanisms through our behaviors. These can be healthy coping behaviors (self-stimming, stereotypic/repetitive), or unhealthy coping behaviors (self-injury, some stereotypic/repetitive). You can also argue that the acting out of individuals through inappropriate sexual behavior is an indicator that they have been sexually violated. We either develop new behaviors or increase our current behaviors upon incidents of experiencing and recalling sexual abuse (APA, 2004; Cunningham & Schreibman, 2008).

Once we establish unhealthy coping behaviors, we can become attached to them. Replacing them with healthy coping behaviors can be extremely

difficult when we have designated our unhealthy coping behaviors as our source of comfort. It's fascinating how easy it can be to get attached to our routines.

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A few months into my first year of college, the flashbacks emerged. They were disturbingly shocking. I did not know at the time they were flashbacks. All I knew was that these haunting visuals, sounds, and tactile sensations that invaded me during the night as I laid on my dorm room bed were distorting my awareness of the present. These flashbacks took possession of my sleep, and I needed to do something about it. So I “buried” that part of my past, so to speak. I didn't confront it.

The consequences for not being able to confront or communicate the issue effectively manifested itself in a variety of ways. Some were self-destructive. An occasional slitting of my own wrists and a few planned suicide attempts were among the manifestations. The most self-destructive manifestation was when I nearly lost my life to anorexia at the age of 21.

It is important to note that eating disorders do not derive from one root source, and there are several factors that attribute to eating disorders. But it makes perfect sense why sexual abuse would play a role. I was significantly overweight during my attendance at the boarding school... and I believed that the more weight I lost, the further I was able to “run” from that horrific part of my past.

Miraculously, I didn't lose my life to anorexia. After taking a medical leave of absence from my college studies and participating in intensive outpatient treatment, I learned how to maintain a healthy weight range and take better care of my health. However, I fully admit I still have eating disorder issues

and I still practice negative coping mechanisms. And a lot of that has to do with issues that remain unresolved... such as the sexual abuse.

It wasn't until I was approaching 30 when I garnered the courage to begin confronting my past. Gradually, I am becoming more able to communicate the experience. Considering the events occurred between age 15 and 18, confronting my own sexual abuse has taken a while. There are some parts I have not figured out how to verbalize. That day may or may not come, and I am gradually accepting the possibility I won't be able to verbalize everything that happened.

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During a session with my therapist, I questioned whether my teacher ever realized the potential consequences of his actions. "I still find it hard to accept that he had malicious intent to hurt me," I explained to my therapist. "He was always a kind and gentle person. I know my feelings for him were very different than his feelings for me. He loved me but he wasn't sexually attracted to me. I honestly believe he didn't realize what he did." As expected, my therapist challenged me on my viewpoint.

Many survivors don't ever want to believe their abusers knew what they were doing. Survivors tend to protect their abusers with excuses to ease the pain that lies within the reality. Survivors, particularly autistic survivors, are reluctant to admit weakness since that weakness already exists in the social component of not all, but many autistic individuals. As an autistic, I have always had a tendency to develop deep attachments in which I cannot seem to detach myself... no matter how much pain I endure, no matter how much I have sacrificed.

There is never an excuse for sexual abuse. Those who abuse may have experienced past sexual abuse themselves. In some cases, those who abuse may not have a full understanding of what they did was not right. But that does not make their actions excusable.

So, why would abusers take advantage of autistic individuals and individuals with developmental disabilities? Because they are convinced they can get away with it. The more cognitive and intellectual challenges a person displays, the more likely that person will be a target of sexual abuse. Yes, it is devastating and sickening. But it makes perfect sense.

Despite the long-term consequences I've had to endure, I realize I am lucky. I was eventually able to verbalize my story. Those of us with more significant communication issues are not as lucky. This is not fair. We need to change this. We need to speak up, and we need to be facilitators for those who need to be heard.

To those of you who have been silenced—silenced by fear, silenced by shame, silenced by the barriers of communication, silenced by the threat to speak up: this does not make your story any less important. Your story is just as important as any other survivor's story, regardless of the degree or extent of your experience, and regardless of whether or not you are able to communicate your experience. When it comes to surviving sexual abuse, every story matters.

In this battle, no one wins.

But at least in this issue, we are no longer silent.

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10 Things I Wish I Had Known (On the Subjects of Abuse and Healing)

by Robyn Steward

Many men and women on the Autistic spectrum experience abusive relationships. It is possible to have non-abusive, happy romantic relationships if you are on the Autistic spectrum. This essay contains information that I would have found useful in the past. I have learned the things I share with you through personal experience, and also through mentoring and consulting with others on the spectrum, their families, and the organizations that provide services for them. As someone who is on the spectrum myself, and who is also working as a professional trainer, mentor, and consultant, I hope this insight is useful.

There are many different types of abuse that can occur within relationships.

Financial: This is when someone controls your money. For example, they might want you to give them money that you don't feel you owe them. Or they might want you to turn over your wages from your job, so that they can decide how much of your own money that you can have, when that is not at all how you would like your monies handled.

The key word here is *choice*. If you choose to have someone take care of your money, and that decision is in your best interests (meaning the person handling your money is truly making choices that will help you, or will be beneficial to you rather than benefitting the person in control), you should still have a say in what happens to your money. Having a say in what

affects you is part of having a healthy relationship. But if there is no choice, the situation qualifies as potential abuse.

Some people do not have understanding of money in which case someone else may make choices about what happens to their money. If this is the case, then this is okay as long as decisions are made in the best interests of the person to whom the money belongs.

Sexual: (Includes the touching of sexual areas of your body and kissing. It can also include your thighs, breasts, vagina, bottom, penis, testicles, etc.) There are many different types of sex, and while you can say yes to one thing such as oral sex, and no to another, you can always change your mind. It is important to communicate to a sexual partner—or a person who is touching you in a sexual way—what you do or do not want to do because you have a choice about what happens to your body.

Penetration is when a man's penis, or sex toys, or another person's fingers enter another person's body, and you should always be able to choose if and when this happens to you.

Physical: This is when someone is physically hurting you intentionally, like hitting or kicking you (although they might try to tell you that the action was an accident). If you are experiencing something that is making you uncomfortable, and you are not sure if it is abuse, it is important to ask someone else's opinion; a person you feel safe with and whom you can trust.

Neglect: This is when someone who is looking after you does not meet your basic needs, such as your needs for food, water, and shelter.

Imprisonment: This is when someone stops you from leaving your home or another place, and this action is against your will (when you have the capacity to choose for yourself if you do or do not want to stay at a place). There are exceptions to this rule if you are a minor, or if you have been arrested, or if you have been placed in a psychiatric hospital ward.

Emotional: This is when someone frequently, and intentionally, says things to upset you, or to control you. It's important to know that this type of behavior can be very subtle. An example of this type of abuse includes someone constantly criticizing what you do even when you have done it well. An abusive person might try to convince you that you have not done things well, which is a common tactic to keep you unaware of or unsure of the abuse. It's a good idea to ask for help if you feel you're being abused. Ask a person you feel safe with and trust to offer their opinion on whether or not you're experiencing abuse.

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With all types of abuse, it is important to know that abusers will sometimes be very nice to you. They might often say that they are sorry for bad things they have done, or try to convince you that their actions will never happen again, or that they will change. Most abusers, however, are not sorry, and they are again using tactics to make you stay in an abusive relationship with them. When an abuser does this, it is called *manipulation*. Manipulation is when someone is controlling you. It is hard for most people (including non-autistic people) to understand that someone could intend to hurt someone else, but it is a concept that needs to be understood.

In *Thinking In Pictures*, Temple Grandin (2006) describes categorizing things. I attended a seminar of hers where she described how she goes

about categorizing rules. Perhaps it would help you to categorize people such as those you can trust (for example, a doctor or a parent that you have a good relationship with) and those you cannot trust. If you need a physical representation, you might try having baskets or small boxes with *trust* and *don't trust* written on them. Write down the names of people in your life, on small sheets of paper, and place those names in the corresponding trust or don't trust boxes. (You could also try drawing trust and don't trust boxes on a sheet of paper, and then writing the names of people in your life inside each box.) I understand that not everybody thinks in pictures or finds categories helpful. If the ideas above are not helpful to you then that is okay. Everybody is different.

Remember, too, that any type of abuse can happen to anyone (regardless of age or gender or any other factor such as financial status). Being abused does not make you a bad person, and it is not your fault.

10 more things I would like to share

1. You cannot replace people.

When I was in school I had a crush on one of my teachers, as he was very kind to me and found me lots of little jobs to do (such as taking photographs for the school website). I used to talk to him after school and ask questions. When it was time for me to graduate from high school, it made me very sad because I could no longer talk to this teacher. He was married, as are my parents. And I didn't have an understanding that most people typically have a few romantic relationships before they pick the one person they want to be with and get married. I also did not understand

professional boundaries or what people could offer and/or gain in relationships.

My mother explained that people have to *work* on relationships, but I didn't fully understand what she meant at that time. Working on a relationship does not mean that being friends with someone is a job (or anything like employment for that matter). I know now that it means you have to put effort into building and maintaining a relationship. In my experience, this includes, but is not limited to, things such as finding out what is important to your romantic partner and making time in your calendar to do things together. I used to really want to communicate and share things that worried me, but when I was 16 years old, boys my age were not interested in what worried me. This does not mean that all 16-year-old boys are not interested in the type of communication that interested me. It just happened to be the case with the boys I knew. I also did not understand that partners need to give and receive at equal levels—for example, taking turns listening to each other's topics of choice.

Since I was often bullied at school, I thought older people were safe. Matter of fact, the first man I dated was older than me. Later on, I realized that I was trying to recapture the role that my former teacher had held in my life—i.e., someone to listen and support me. However, that's a teachers *job*. In a romantic relationship, it works both ways—you both have to support each other. Now I know that life does not work in that way, and that trying to replace people will make you unhappy.

The men I initially dated took advantage of my naivete and the result was I felt more like an object than a person. At the time I did not conceptualize this, but I knew I was sad and unfulfilled. In my early twenties, I started to

understand that I needed someone who loved and understood me and would value me—as I would value them—therefore creating a partnership. And true partnerships are what make successful romantic relationships work.

It's important to understand what you want and need. In my case, I needed to feel valued and special, and I also needed companionship. However, I did not need a romantic relationship for most of these needs. I wanted a romantic relationship because I did not know that there were other relationships (e.g., friendships) that could give me some of what I needed. However, friendships do not meet all of my needs for companionship; love or commitment through a romantic relationship would be more appropriate to meet those needs. But everyone is different and has unique needs.

2. Sex is more than just a bodily function.

I never realized that sex could cause a complex rush of emotions, but of course sex is different for everybody. For me, and certainly for other people as well, sex isn't always just about pleasure and it can impact your emotional state. This is different to other bodily functions such as masturbation or urination, where after each you might feel relief but have no emotional connection. But again, everyone is different. Not everyone will experience an emotional response to sex.

The emotions that come with sex aren't always about pleasure. Sex can bring about unexpected emotions. Make sure that you are enjoying sex in safe ways, and from there, you can learn to deal and process the emotions that come with intercourse (if this is an issue for you). It is advisable to discuss the possible emotional effects with your partner, if you are in a

sexual relationship, before you have sex. One thing you might try is keeping a private diary where you can chart your emotions after sexual intercourse.

3. You can learn to live without your abuser.

Abusers may tell you that nobody will help you or believe you. Because of this, it is very normal when in an abusive relationship to not know or be able to imagine how you might cope without the abuser. One way of overcoming this may be to write down a list of the things your abuser does for you, such as managing your money, shopping for you, and so forth. From there, try to think of ways you could do these things yourself, or ways your friends or others could help you. This may be very hard (non-autistic people often find this hard too), so perhaps it would be helpful if you have friends or family (or anyone you feel you can trust) make suggestions for you. Be careful not to talk about leaving with the abuser or with someone who is friends with the abuser (because they might tell the abuser). If the abuser knows you are planning to leave, they might make it more difficult for you to do so.

Domestic violence charities and other non-profits often help people who have experienced sexual, emotional, financial, and/or physical abuse, as well as neglect. To find these organizations, use a website or search engine on the Internet such as Google. If you need help, ask a trusted family member or a friend. If you do not have access to the Internet, join a library and set up a time to use their Internet services, or look in the phone book for domestic violence / abuse helplines.

Below are two examples of search strings (words you could type into Google) that may give you useful information. You can change the name of the location to reflect where you are.

Domestic violence organizations are often able to advise you on planning how to do things independently. In the United Kingdom, where I live, local councils can help people who are abused if they are living with an abuser or fleeing (i.e., leaving the abuser). The council provides accommodations to anyone who becomes homeless because of domestic violence and/or leaving an unsafe home and relationship.

Statistics show that women often leave seven to eight times before they are able to stay away from their abusive partner. The abuser may try to contact you, text you, email or call you repeatedly. If this happens, go to the police for help. They might be able to put a restraining order on the abuser, which means that he or she is not allowed to contact you or come near you any longer.

I have lived with someone who I thought I couldn't live without because he told me I wouldn't cope if I left. I did not realize that he only told me this to make me think I could not cope so that I would lose confidence and he could carry on treating me as he wished. But I did end up leaving. It was very hard, but it was possible. And many other men and women have left their abusive partners and lived happier lives too. At the time I left my abuser, I could not imagine what it would be like without him. But I knew I no longer wanted to be treated in the way he had treated me. If you are being abused, and you want to seek a better life, then you should try to leave. Get the help you need and put a plan in place. I recommend not

living with your partner should you discontinue your relationship. Find somewhere else to live and do not let the abuser convince you otherwise.

Remember, you don't have to answer phone, email, or text messages that come from your abuser. Work up the courage, and find the support you need, to stand your ground and to embrace your newfound freedom.

4. Even if you feel there is no way forward, it doesn't mean there is no way.

Sometimes explaining your situation to someone who cares about you, who is not the abuser, can help you gain a valuable and different perspective. If you talk to someone else to find a way forward in your life, this is a little like looking through a telescope: the person you are talking to is helping you to see new options, just as a telescope helps us see planets in the sky that, without the telescope, we wouldn't see otherwise.

5. When someone has hurt you or is having a negative effect on you, someone will believe you if you tell them.

Sometimes part of an abuser's tactic is to make you think that other people would not ever believe you if you told them you are being abused. There will always be someone in the world that will believe you, even if it is someone from a non-profit or a charity that can help you. Never forget this.

If someone is hurting you or having a relationship with you that you don't want to have, and they tell you not to tell anyone, this is a sign that you are being abused. In such a situation, it is okay to break rules, and to tell someone you trust—who is not the abuser or the abuser's friend—about what is going on. If you are unsure what to do, ask someone you trust for advice.

6. Not everything a person says is true.

Oftentimes, people naturally question the truth of what people say. They consider how likely it is that what they are being told is true. And they may consider the behavior of the person telling them such a thing. People question if the person they are talking to might be lying or being dishonest. People question behavior, too. (For example, if you know a person is afraid of being around crowds or strangers, you might not believe them if they tell you that they went to a big party where they knew no one.) Most people want to check out facts. Some autistic people are natural fact checkers, and other autistic people need to work on this skill in order to navigate or survive certain life or social situations. This is another area where it is helpful to talk to someone you trust.

7. You don't have to have a relationship, and it's okay not to want to have a relationship.

Some people are happy to live alone. Some people do not want friends. Some people do not want to have sex. Some people do not want children. You can choose what you want and what you do not want—it's your right. For some people, it is easy to feel that they should get married or have children just because everyone else is doing it. But just because everyone else is doing it doesn't mean it is the right choice for you. Never do something just to make other people happy. It's also important to know that it is okay to be gay, lesbian, heterosexual, or asexual. It is okay to be trans* too. Every person on this planet has a right to be who they truly are inside.

8. Professionals who are working with you should never have a romantic relationship with you.

It is almost always wrong for a professional (be it a psychologist, counselor, coach, teacher, etc.) to have a relationship with their adult clients (or former client). And it is always wrong if the client, or former client, is a child or does not have the proper understanding to willingly consent to a relationship. If the client does not want to have a romantic relationship and says so, this is known as a non-consensual statement.

In rare occasions, within professions such as counseling, there are set procedures and rules that must be adhered to if the professional and client wish to engage in a relationship that is romantic. To maintain board certification, professionals must follow strict standards of conduct.

Professionals must put their client's needs first. A professional would be unable to put your needs first if they were in an equal relationship with you (such as a romantic relationship). You should know that if you do have a romantic relationship with someone who has been professionally working with you, there is a risk that he or she could be doing it because they enjoyed the power or control they had over you rather than because they loved you. It is likely to hurt you emotionally, although you may not feel it at the time, to have a relationship with a professional who is involved in your life. Professionals have greater power and influence; therefore, it is wrong for them to use this power for their own gain.

This can be a very difficult and confusing subject to understand. If this is an issue that affects you personally, I recommend seeking out a neutral person (someone who is not personally involved in the situation) who you can ask for advice on this matter.

9. Exercise is beneficial for mental health.

I find that exercise really helps me. Just as with any strategy, it won't work for everyone. But for me, having a thrice-weekly gym routine helps me emotionally regulate my day-to-day life.

10. You can walk away. *Nobody* deserves to be abused.

You cannot make an abuser stop abusing you apart from leaving the relationship. Nobody deserves to be abused, and whilst it can be hard to leave the relationship, there have been many men and women who have left abusive relationships and succeeded in life. You can too. It does take a great deal of inner strength; so if you try, and it doesn't work out, please do not give up on yourself. It does not mean you are not a strong person—it simply means you likely need to use a new strategy to be able to leave.

Fact Sheet on Sexual Abuse of People With Developmental Disabilities

by Julia Bascom

Statistics

- Over 83% of women with developmental disabilities have been sexually assaulted.
- 68% of children with developmental disabilities under the age of 18 have been sexually abused.
- 32% of males with developmental disabilities have been sexually assaulted.
- Women with developmental disabilities are assaulted at least twice the rate of women without developmental disabilities.
- Children with developmental disabilities are abused at least twice the rate of children without developmental disabilities.
- 97–99% of the abuse is committed by people who are known and trusted by the person with the developmental disability.
- 44% of the abuse is committed by caregivers, staff, related services providers, and other people in positions of power entrusted with our care.

For more information, see <http://www.usu.edu/saavi/info/stats.cfm> and <http://ici.umn.edu/products/impact/133/133.pdf>

What is sexual abuse?

Sexual abuse is when someone takes away your ability or opportunity to make your own decisions about your body and sexuality.

- You might be forced, threatened, or deceived into sexual activities you don't want to do.
- Other people may do sexual things to you that you don't want.
- You might be denied privacy or personal space.
- You might not be allowed to make decisions about who touches you or sees you without your clothes on.
- You might be forbidden to masturbate, spend time alone with your partner, or otherwise explore and exercise your sexuality in ways you do want to do.

“Sexual activities” include...

- Looking
- Touching
- Intercourse
- Anything else that
 - gives you or someone else sexual feelings
 - or that you or they have decided is sexual.

Something that is not sexual for you may be sexual for someone else...

- If they make you do it,
- Or make you let them do it,
- It's abuse.

Something that is sexual for you may not be sexual for someone else...

- If they make you do it,
- Or make you let them do it,
- It's abuse.

Sexual abuse looks like...

- Taking away your visual supports so that you can't shower independently
- Making you take off your shirt as punishment for drooling or spilling something on it
- Preventing you from having alone time with your boyfriend or girlfriend
- Touching your genitals without your permission
- Touching your chest without your permission
- Touching you anywhere, without your permission, in a way that makes you feel
 - scared
 - dirty
 - bad
 - wrong
- Kissing you without your permission
- Making you touch them or someone else when you don't want to
- Taking your clothes off without your permission

- Making you look at pornography
- Talking to you about sex when you don't want to hear it
- Taking away the vocabulary on your device about sex, sexuality, or your body
- Not teaching you about sex or your body
- Punishing or ridiculing you for trying to communicate about sex, sexuality, or your body
- Not being allowed to lock doors
- Being punished, shamed, or ridiculed for being sexual, masturbating, having sex, wanting to have sex, or being turned on
- Spreading rumors or sharing private information about your sexuality

appendix a



glossary

Glossary

ableism // Put simply, ableism is discrimination against disabled people. And, like other forms of discrimination, ableism is *systemic*, underlying many of the cultural and political systems that shape our everyday lives. Ableism takes shape in many varieties—some more evident in their insidiousness (such as murder, forced sterilization) and some less visible yet still oppressive (such as infantilization, pity, and stigma).

asexuality // Asexuality is a sexual orientation unto itself. Generally speaking, asexual people do not experience sexual attraction. Much like any sexual orientation, asexuality is a fluid identity, and people who are asexual represent a plurality of experiences, identities, and ways of interrelating. Some asexual people experience romantic attraction (and may variously identify as *heteroromantic*, *biromantic*, *panromantic*, *homoromantic*, or other identity markers). Conversely, some asexual people do not experience romantic attraction and may refer to themselves as *aromantic*. Further still, some asexual people identify as *Gray-A* or *Grey-A*, embracing a middle space between sexual and asexual. It is also important to note that asexuality and celibacy are not synonymous. Many asexual people have sex, just as many sexual people do not have sex.

aspie & autie // Shorthand for *autistic person*. Non-autistic usage of these terms, however, is often perceived as patronizing.

a/Autistic // Modeled after the Deaf community's distinction between deaf

and Deaf, the Autistic community capitalizes the word autistic when referring to cultural, community-based, and/or identity-focused aspects of being autistic. Conversely, lowercase usages of autistic tend to designate the bodily or diagnostic experiences of being autistic.

Autistic community // The Autistic community comprises those autistic individuals who share common experiences and values. Autistic community members advocate for and hold positive viewpoints about disability, which includes the concepts of neurodiversity and the social model of disability. Self-advocacy is a strong component of the community. A popular event within the Autistic community is Autreat, which is a yearly retreat-style conference run by and for autistic people. The vast majority of those who identify with the Autistic community oppose placing focus on causes, cures, and normalizing, and instead advocate to place attention where they believe it is most needed: acceptance, accommodation, and access in the here and now.

cis // Someone who identifies with the sex or gender they were assigned at birth.

genderqueer // *Genderqueer* refers to a gender identity that resists traditional gender binaries, roles, and stereotypes. Although genderqueer is itself a distinct gender identity, many individuals also use it as an umbrella term for multiple non-binary identities and presentations. Some genderqueer individuals, for instance, do not identify with either traditional gender role (male/female) and may identify as *third gender* or *agender*. Conversely, some genderqueer individuals embrace a little of both traditional genders, or any sense of being **genderfluid**. It is important to note as well that while many non-binary people identify as genderqueer,

many do not. Equally important to note is that gender identity is not synonymous with gender expression. A person does not need to appear androgynous in order to identify as genderqueer, for example.

heteronormativity // Heteronormativity is the cultural bias that rewards, privileges, and promotes heterosexuality, as well as traditional notions surrounding gender, relationships, and sexuality. Much like ableism, sexism, or racism, heteronormativity is systemic oppression—it impacts the political, economic, cultural, and educational systems that shape our everyday lives.

neurodiversity // The idea that neurological difference is something to be valued and respected.

neurotypical (NT) // Generally speaking, an individual who does not have a mental disability. The word neurotypical originated in the Autistic community and is often used by autistic people to refer to non-autistic people. However, over the past decade, other disability communities (such as the bipolar community, and others) have begun to use the term as well.

queer // *Queer* is often used as an umbrella term to refer to individuals whose sexuality, gender identity, and/or gender expression do not conform to societal norms. Once considered a pejorative word, many individuals have reclaimed it.

perseveration // Perseveration generally refers to repetitive behaviors and/or intense interests in a particular topic. At all ends, perseveration

signals both ritual and fascination, and it's an important characteristic of what might be called an Autistic *style*.

small talk // Small talk is difficult to define. But, typically speaking, small talk is socially appropriate, almost ritualistic conversation on topics that might appear unimportant or trivial (such as the weather, a sports team, or the typical “how are you doing” back-and-forths). The purpose of small talk is often to fill uncomfortable silences or to allow people to get acquainted with each other. It is even used to pass time. For some, it is useful, but many Autistic people have reported that they find it unpleasant and/or unnecessary. And, for many people, autistic and non, small talk can be, quite bluntly, torturous. This is in part because small talk invokes cultural scripts that many people are excluded from. Small talk often centers certain cultural experiences (related to ability, nationality, race, gender, and so forth) at the expense of others.

social model // Borne out of activism in the 1960s, disability studies, generally speaking, is concerned with a social model of disability, where environmental barriers, societal infrastructures, and discrimination are more disabling than any so-called impairment or form of bodily difference. The social model of disability regards disability within a socio-cultural, as opposed to medical, frame of reference, and has much in common with cultural studies and other theories of diversity. For example, comparisons have been made between the civil rights movement and the activities of the Deaf community, and parallels have been drawn between gay pride and Autistic self-advocacy movements. Through this social model,

individuals have reclaimed the word disability and have embraced their identities as disabled, even referring to normative populations as being “temporarily able-bodied.”

stimming // Stimming represents an important part of Autistic culture, signifying how it is we interact with our environment and relate to our surroundings. Stimming often takes form as repetitive, embodied movement—including, but not limited to, full-body rocking, hand- or finger-flapping, blinking, spinning objects, fidgeting, and so forth. Like any form of embodied language, stimming holds diverse meanings and its purposes are dependent on context. Sometimes people stim in order to regulate sensory input and self-soothe. Sometimes people stim to signify their emotional state—happiness, excitement, love, fear, sadness. And still yet, sometimes people stim in order to communicate a specific desire, express contentment, quell boredom, or interact with their surroundings. While clinicians are quick to behold stimming as a symptom, or as something in need of “fixing,” the Autistic community embraces stimming as a natural part of learning, communicating, and just plain *being*.

trans* // Most people are probably more familiar with terms like *transsexual* or *transgendered*, but *trans** is generally regarded as the preferred term for individuals whose gender they were designated with at birth doesn’t match their true gender identity. Also, it is generally preferred that any word choice is used as an adjective, rather than as a noun (e.g., *transgendered people* vs. *the transgendered*).

Contributors

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MEG EVANS, who serves as the Board Secretary/Treasurer of the Autistic Self Advocacy Network, is employed in the legal publishing industry. She belongs to a multigenerational Autistic family, is married, and has two grown children. Among her interests, she has long found it fascinating to explore how our cultural narratives change over time and shape the development of social structures and expectations.

TRACY GARZA is a San Francisco-based activist for LGBT and disability causes. Previously, Tracy was a Mexico-based journalist and wrote for Reuters and The Associated Press. Tracy is also presently a member of the LGBT Advisory Committee of the San Francisco Human Rights Commission.

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MICHAEL HIGGINBOTHAM is an Autistic, married father of two young and wonderful boys, also Autistic. After struggling for many years to figure out why the world seemed so different the answer would eventually come from helping his two sons with their struggles. Today Michael is a graduate of Portland State University with a Bachelor's degree in psychology and a focus in identity development in people with disabilities. Today life is full, functioning, and challenging as always.

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