Don’t Blame Autism for Newtown
By PRISCILLA GILMAN

LAST Wednesday night I listened to Andrew Solomon, the author of the extraordinary new book “Far From the Tree,” talk about the frequency of filicide in families affected by autism. Two days later, I watched the news media attempt to explain a matricide and a horrific mass murder in terms of the killer’s supposed autism.

It began as insinuation, but quickly flowered into outright declaration. Words used to describe the killer, Adam Lanza, began with “odd,” “aloof” and “a loner,” shaded into “lacked empathy,” and finally slipped into “on the autism spectrum” and suffering from “a mental illness like Asperger’s.” By Sunday, it had snowballed into a veritable storm of accusation and stigmatization.

Whether reporters were directly attributing Mr. Lanza’s shooting rampage to his autism or merely shoddily lumping together very different conditions, the false and harmful messages were abundant.

Let me clear up a few misconceptions. For one thing, Asperger’s and autism are not forms of mental illness; they are neurodevelopmental disorders or disabilities. Autism is a lifelong condition that manifests before the age of 3; most mental illnesses do not appear until the teen or young adult years. Medications rarely work to curb the symptoms of autism, but they can be indispensable in treating mental illness like obsessive-compulsive disorder, schizophrenia and bipolar disorder.

Underlying much of this misreporting is the pernicious and outdated stereotype that people with autism lack empathy. Children with autism may have trouble understanding the motivations and nonverbal cues of others, be socially naïve and have difficulty expressing their emotions in words, but they are typically more truthful and less manipulative than neurotypical children and are often people of great integrity. They can also have a strong desire to connect with others and they can be intensely empathetic — they just attempt those connections and express that empathy in unconventional ways. My child with autism, in fact, is the most empathetic and honorable of my three wonderful children.

Additionally, a psychopathic, sociopathic or homicidal tendency must be separated out from
both autism and from mental illness more generally. While autistic children can sometimes be aggressive, this is usually because of their frustration at being unable to express themselves verbally, or their extreme sensory sensitivities. Moreover, the form their aggression takes is typically harmful only to themselves. In the very rare cases where their aggression is externally directed, it does not take the form of systematic, meticulously planned, intentional acts of violence against a community.

And if study after study has definitively established that a person with autism is no more likely to be violent or engage in criminal behavior than a neurotypical person, it is just as clear that autistic people are far more likely to be the victims of bullying and emotional and physical abuse by parents and caregivers than other children. So there is a sad irony in making autism the agent or the cause rather than regarding it as the target of violence.

In the wake of coverage like this, I worry, in line with concerns raised by the author Susan Cain in her groundbreaking book on introverts, “Quiet”: will shy, socially inhibited students be looked at with increasing suspicion as potentially dangerous? Will a quiet, reserved, thoughtful child be pegged as having antisocial personality disorder? Will children with autism or mental illness be shunned even more than they already are?

This country needs to develop a better understanding of the complexities of various conditions and respect for the profound individuality of its children. We need to emphasize that being introverted doesn’t mean one has a developmental disorder, that a developmental disorder is not the same thing as a mental illness, and that most mental illnesses do not increase a person’s tendency toward outward-directed violence.

We should encourage greater compassion for all parents facing an extreme challenge, whether they have children with autism or mental illness or have lost their children to acts of horrific violence (and that includes the parents of killers).

Consider this, posted on Facebook yesterday by a friend of mine from high school who has an 8-year-old, nonverbal child with severe autism:

“Today Timmy was having a first class melt down in Barnes and Nobles and he rarely melts down like this. He was throwing his boots, rolling on the floor, screaming and sobbing. Everyone was staring as I tried to pick him up and [his brother Xander] scrambled to pick up his boots. I was worried people were looking at him and wondering if he would be a killer when he grows up because people on the news keep saying this Adam Lanza might have some spectrum diagnosis ... My son is the kindest soul you could ever meet. Yesterday, a
stranger looked at Timmy and said he could see in my son’s eyes and smile that he was a kind soul; I am thankful that he saw that.”

Rather than averting his eyes or staring, this stranger took the time to look, to notice and to share his appreciation of a child’s soul with his mother. The quality of that attention is what needs to be cultivated more generally in this country.

It could take the form of our taking the time to look at, learn about and celebrate each of the tiny victims of this terrible shooting. It could manifest itself in attempts to dismantle harmful, obfuscating stereotypes or to clarify and hone our understanding of each distinct condition, while remembering that no category can ever explain an individual. Let’s try to look in the eyes of every child we encounter, treat, teach or parent, whatever their diagnosis or label, and recognize each child’s uniqueness, each child’s inimitable soul.