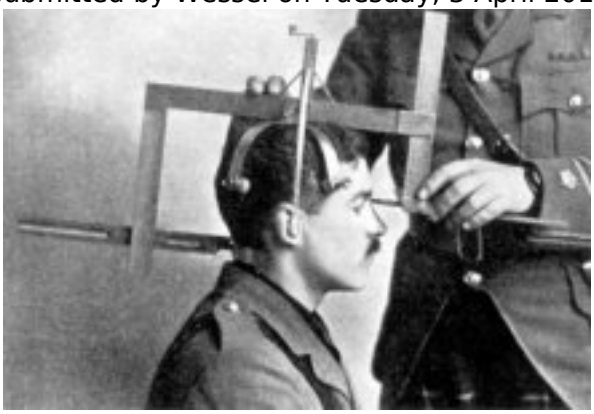
Where do we Draw the Line with Eugenics? **[1]**

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Yesterday was World Autism Awareness Day [2]. As my masters thesis dealt with Asperger Syndrome—which is a form of autism—autism is something that is close to my heart. I desire to see more people educated about autism; that our society can adapt to accommodate people who have autism more and integrate them as fully-fledged members of society (at least there where they are still treated like outsiders). However, as the abortion and infanticide [3] debate continues, I fear the day when children with autism are targeted as children with Down Syndrome are today. It is clear that children are eliminated simply for the sake of the parents' convenience, so it is not far fetched to imagine that it could happen to children with autism (if we were to develop prenatal tests for autism, which do not yet exist, but could be on the way [4]). In this article I hope to show how typising a child based on their diagnosis is a slippery slope.

Consider three hypothetical people: Adam, Bruce and Christine. Adam has Asperger Syndrome. He is high-functioning, meaning that he gets along quite well in society. He attended a typical school, is married and has a decent job. While he occasionally struggles with the "illogical" nuances of typical social behaviour, he has learned to "play the game". But what makes Adam exceptional, is his command of the violin. Having been obsessed with the instrument for years, he mastered it in a remarkably short time and captivates anyone who is even vaguely interested (and even some who are not!).

Bruce has Down Syndrome. Under the patronage of an uncle, he has a steady job where he earns enough money to provide for himself. Bruce is generally a happy person and finds delight in many things.

Christine has autism. She is low-functioning. She will never be able to live on her own, never marry, and never have a job. She lives with her parents who love her, but as they approach retirement age, they are concerned about the fact that at some point they will no longer be able to take care of her.

Which of these people "deserve" to live? None are neurotypical. Adam appears the closest to a "normal" person, but he is acutely aware that he is fundamentally different from everyone else around him. Yet he is fine with that, and like many people who have autism, he does not believe that there is anything "wrong" with him. Bruce has severe disabilities, but considering that he can provide for himself and is generally happy, he is probably better off than a great many people who are neurotypical but are, for whatever reason, unable to hold a steady job, or are mostly miserable and grumpy. But Christine... her life is not an easy one, and one has to be sympathetic to her parents, who have endured much in raising their only child.

Conventional thinking [5] is to eliminate unborn foetuses which have been diagnosed with Down Syndrome. Tests which can detect Down Syndrome are fairly standard. But if someone like Christine is even less "functioning" or "normal" than Bruce, then logic would dictate that she needed to be

eliminated as well. This would put Adam in danger: while DSM-IV currently distinguishes between Asperger Syndrome and autism, this is no longer going to be the case [6] in the upcoming DSM-5. Additionally, even with the old definitions, a person with "normal" autism who is high-functioning can still be higher-functioning than someone who has Asperger Syndrome who is low-functioning. So it gets a bit difficult to make that call. The thing about autism (Asperger Syndrome included) is that it is a *spectrum* disorder. This means that there are many different degrees and severities to which someone can be "afflicted".

A pro-choice advocate might say at this point that this demonstration is irrelevant, because autism can be handled in a case-by-case basis, while Down Syndrome not, because it is not a spectrum disorder. Fair enough, but the problem which exists, is that while the presence of Down Syndrome can be prenatally verified, autism—at the time of writing—cannot. But, as already mentioned, this could soon change. However, at present the only way for a diagnosis of autism to be made is by a clinical expert who has studied the subject and interviewed his or her family. Autism can be diagnosed in this way in infancy already, but Asperger Syndrome usually only in childhood. So really, the same criteria being applied to people with Down Syndrome is not the same as that to people with autism. That seems discriminatory. Also, if we *were* to apply eugenics selectively to people with autism, where do we draw the line? How do we decide which ones are going to be the ones worthy of life and which not? More importantly, how are we going to know which are going to be high-function people who contribute to society, and who is going to be low-functioning and require lifelong care? There is also a further problem. While someone with autism may appear to be low-functioning, they could actually turn out to be remarkable individuals [7] who could contribute to society.

I am sure that this debate is going to become significant soon as the rate at which autism is diagnosed increases [8].

The problem with applying labels to people who have syndromes, disorders and conditions is that you are fundamentally talking about individuals.

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