Relationship Problems of Adults with Asperger’s Syndrome

by Tony Attwood

The following article was recently published as the Foreword to an excellent and highly recommended new book: “The Partner's Guide to Asperger Syndrome” by Susan J. Moreno, Marci Wheeler and Kealah Parkinson, 2012, Jessica Kingsley Publishers, London. We reprint it here for the many we know will be interested.

Introduction

Adults with Asperger’s syndrome have difficulties acquiring relationship skills due to the defining characteristics of the syndrome, experiences with peers during childhood and the expectations of their partner. However, some adults with Asperger’s syndrome do achieve long-term relationships. This article examines the factors inhibiting relationship skills at each stage of the relationship continuum, the characteristics of Asperger’s syndrome that can be attractive to a partner and strategies to improve relationship skills.

Article

Children with Asperger’s syndrome have significant difficulty developing peer relationships and are developmentally delayed in knowing what someone may be thinking or feeling. Such individuals also have a conspicuously limited ability to have a reciprocal conversation or communicate emotions, and have special interests that can be unusual in terms of intensity or focus. They can also have an extreme sensitivity to particular sensory experiences. All of these characteristics will affect relationship skills throughout childhood and eventually an adult’s ability to achieve a long-term successful relationship.
While an adult with classic autism may appear content with a solitary ‘monastic’ lifestyle, this is often not the case with adults who have Asperger’s syndrome. Clinical experience has identified that the majority of adolescents and young adults with Asperger’s syndrome would like a partner, and that those who do achieve a relationship have problems maintaining the relationship. However, there is remarkably little research examining this aspect of Asperger’s syndrome, and very few proven strategies to facilitate successful relationships. This chapter will outline the difficulties in acquiring relationship skills experienced by people with Asperger’s syndrome, based on the defining characteristics of the syndrome, clinical experience, autobiographies, and the descriptions of partners. The chapter will also provide some preliminary suggestions to encourage a successful relationship and indicate areas for future research.

Factors inhibiting relationship skills

From early childhood, people with Asperger’s syndrome are less likely to recognize and understand thoughts, beliefs, desires and intentions of other people in order to make sense of their behaviour. They are developmentally delayed in Theory of Mind abilities (Baron-Cohen 1995). This will adversely affect the development of the important relationship skills of empathy, trust, and the ability to repair someone’s emotions and share thoughts and responsibilities (Attwood 2004). Typical children have a natural ability to achieve an age appropriate Theory of Mind and have practiced relationship skills with family members and friends for many years before applying them to achieve a successful relationship with a partner.

In order to achieve a successful relationship, a person also needs to understand and respect themselves (Lawson 2005). Self-understanding and self-reflection can be particularly difficult for people with Asperger’s syndrome (Frith and Happe 1999). Self-respect will have been adversely affected by being rejected, ridiculed and tormented by peers (Attwood 2006). Adolescents with Asperger’s syndrome are also gullible and vulnerable to being given misinformation on relationships by fellow teenagers. This can include instances of being deceived and ‘set up’ that could lead the person with Asperger’s syndrome to be accused of inappropriate social or sexual behaviour.

Clinicians recognize that people with Asperger’s syndrome have difficulty understanding and expressing emotions and are prone to develop an anxiety disorder, depression or difficulty managing anger (Attwood 2003a). These characteristics will obviously have a detrimental effect on the ability to develop friendships throughout childhood and relationships as an adult. One of the characteristics of Asperger’s syndrome can be emotional and social immaturity that can influence the person’s age preference for
friends. This can be of particular concern when an adolescent with Asperger’s syndrome prefers the company of much younger children. The relationship motivation of the person with Asperger’s syndrome could be interpreted as being more than platonic.

An emotion that is confusing to people with Asperger’s syndrome is love. Typical children and adults enjoy frequent expressions of affection, know how to express affection to communicate reciprocal feelings of adoration and when to repair someone’s feelings by expressions of affection. A child or adult with Asperger’s syndrome may not seek the same depth and frequency of expressions of love through acts of affection, or realize that an expression of affection is expected in a particular situation and would be enjoyed by the other person. They can be bewildered as to why other people appear to be ‘obsessed’ with expressing love for each other. Someone with Asperger’s syndrome may actually perceive expressions of affection as aversive experiences, and a hug as an uncomfortable squeeze that restricts movement, and they can become confused or over-whelmed when expected to demonstrate and enjoy relatively modest expressions of affection. We generally have a wide ‘vocabulary’ of expressions of affection but someone with Asperger’s syndrome may have a more limited vocabulary and problems with the intensity of expression. One of my adult clients with Asperger’s syndrome said, ‘We feel and show affection but not often enough and at the wrong intensity.’

Another of the diagnostic characteristics of Asperger’s syndrome is to develop a special interest that is unusual in terms of the focus or intensity. In adolescence and adult years the focus can be a person, which could be interpreted as a typical teenage ‘crush’, but the intensity and some of the associated behaviours could lead to accusations of stalking or harassment.

The predisposition to develop a special interest can have other effects on the development of relationship knowledge. Special interests have many functions for people with Asperger’s syndrome, and one of these is to acquire knowledge to understand bewildering aspects of their experiences (Attwood 2003b). Teenagers with Asperger’s syndrome are often eager to understand and experience the social and relationship world of their peers, including relationships and sexual experiences, but there can be problems regarding the source of information on relationships. An adolescent with Asperger’s syndrome usually has few, if any, friends with whom he or she can discuss and be informed about relationship topics such as romantic or sexual feelings and the codes of sexual behaviour. Unfortunately, the source of information on relationships for adolescents with Asperger’s syndrome can be pornography for males and television ‘soap operas’ for females. The person with Asperger’s syndrome can assume that the actions in pornographic material provide a script of what to say or do on a date that could lead to being charged with a sexual offence. The charges tend to be for sexually inappropriate behaviour rather than sexually abusive or sexually violent behaviour (Ray, Marks and Bray Garretson 2004). Adolescent women with Asperger’s syndrome may use television programs and films as source material to learn about
relationships, and fail to recognize that the actions and themes are not an accurate portrayal of how to achieve and maintain a relationship in real life.

Clinical experience indicates that previously socially excluded and unpopular teenage girls with Asperger’s syndrome have, after the physical changes that occur at puberty, become flattered by the attention of teenage boys. Due to her naivety, the adolescent girl may not recognize that the interest is sexual and not a way for the boy to simply enjoy her personality, company or conversation. Because their daughter has no female friends to provide advice on dating and the social and sexual codes, parents may become concerned about her vulnerability to promiscuity, sexual experiences and date rape.

Difficulties at every stage of relationships

There is a relationship continuum from being an acquaintance to a partner. People with Asperger’s syndrome can have difficulties at each stage on the continuum. The social circle of adults with Asperger’s syndrome can be remarkably small, especially if the person is unemployed and tends to stay at home to avoid social situations. There may be few acquaintances. To progress from an acquaintance to a friend, the person with Asperger’s syndrome needs to have age appropriate skills in the pragmatic aspects of language, the art of conversation. Adults with Asperger’s syndrome often have difficulties with initiating, maintaining and ending a conversation, and show a lack of reciprocity or conversational balance and a tendency to be pedantic with excessive and tedious detail (Attwood 2006). We also recognize problems with empathy, limited conflict resolution skills, an inclination to criticize and rarely compliment, and a tendency to show little interest in their friend’s experiences and emotions. Adults with Asperger’s syndrome may talk a great deal about their special interest, but not be proficient with social chit chat, the art of attentive and empathic listening, or recognising what might be of interest to the other person.

To progress along the relationship continuum from a friend to a boyfriend or girlfriend, an adolescent or adult with Asperger’s syndrome needs to understand the art of flirting and romance, to accurately read the signals of mutual attraction and understand the dating game. These abilities are not intuitive for people with Asperger’s syndrome. I am often asked by teenagers and young adults with Asperger’s syndrome, ‘How do I get a girlfriend/boyfriend?’ This is not an easy question to answer. Adults with Asperger’s syndrome often want to be a friend and lover but have little idea of how to do either (Jacobs 2006). One of the difficulties for people with Asperger’s syndrome can be to correctly interpret someone’s intentions. An act of kindness or compassion can be perceived by the person with Asperger’s syndrome as a signal of a deeper level of interest or more personal than was intended. I have had to explain to men with Asperger’s syndrome that the smile and personal attention of a female member of the
cabin crew on an aircraft are signs of courtesy, not an indication of a desire for a relationship.

Despite the problems in relationship skills experienced by many people with Asperger’s syndrome, some adults can progress along the relationship continuum and are able to experience intimate personal relationships, even becoming a life-long partner. To achieve such a relationship, both partners would have initially noticed attractive qualities in the other person. What are the characteristics that someone would find attractive in an adult with Asperger’s syndrome?

Attractive qualities of a person with Asperger’s syndrome

Men with Asperger’s syndrome have many qualities that can be attractive to a prospective partner (Aston 2003). When conducting relationship counseling with one or both partners having the characteristics or diagnosis of Asperger’s syndrome, I often ask the typical partner, ‘What were the characteristics that made your partner attractive when you first met him/her?’ Many women describe their first impressions of their partner with Asperger’s syndrome as being someone who is kind, attentive and socially or emotionally immature. The term ‘silent, handsome stranger’ can be used to describe someone who seems relatively quiet and good looking. Physical characteristics and attentiveness can be important, especially if the woman has doubts regarding her own self-esteem and physical attractiveness. The man’s lack of social and conversation skills can lead to his being perceived as the ‘silent stranger’ whose social naivety and immaturity can be transformed by a partner who is a natural expert on empathy, socializing and conversation.

I have noted that many of the partners of men and sometimes women with Asperger’s syndrome have been at the other end of the social and empathy continuum. They are intuitive experts in Theory of Mind, namely understanding and empathizing with someone else’s perspective. They are naturally gifted in the ability to understand the world as experienced by the person with Asperger’s syndrome, much more than a person of average Theory of Mind abilities. They are understanding, sympathetic and provide guidance for their partner in social situations. Indeed, these are the characteristics that an adult with Asperger’s syndrome recognizes that he or she needs and would find desirable in a partner. They will actively seek a partner with intuitive social knowledge who can be a social interpreter, is naturally nurturing, socially able and maternal. However, while a socially insightful and empathic partner may understand the perspective of the person with Asperger’s syndrome, the person with Asperger’s syndrome is usually unable to understand the perspective of their typical partner.
The attractiveness of a person with Asperger’s syndrome in a prospective relationship can be enhanced by intellectual ability, career prospects and degree of attentiveness during courtship, although the attentiveness could be perceived by others as almost obsessive. The person’s history of special interests is viewed as typical of many men and initially endearing. The partner may share some of the enthusiasm for the interest, for example learning foreign languages or wine tasting. The person can be admired for speaking his mind, even if the comments may be perceived as offensive by others, due to his strong sense of social justice and clear moral beliefs. The fact that he may not be ‘macho’ or wish to spend time with other men at sporting events or drinking alcohol can also be appealing for some women. The person with Asperger’s syndrome can be a late developer in terms of relationship experiences - there is no previous relationship ‘baggage’. I have also noticed that many women have described to me how their partner with Asperger’s syndrome resembled their father. Having a parent with the signs of Asperger’s syndrome may have helped determine their choice of partner as an adult.

What are the characteristics that men find attractive in a woman with Asperger’s syndrome? The attributes can be similar to the characteristics women find appealing in a man with Asperger’s syndrome, especially the degree of attentiveness. The woman’s social immaturity may be appealing to those men who have natural paternal and compassionate qualities. There can be an appreciation of her physical attractiveness and admiration for her talents and abilities. Unfortunately, women (and sometimes men) with Asperger’s syndrome are not very good at character judgments or identifying relationship predators. Women with Asperger’s syndrome often have low self-esteem which can affect their choice of partner in a relationship. They can be the victim of various forms of abuse. As Deborah explained to me, ‘I set my expectations very low and as a result gravitated toward abusive people’.

Problems in long-term relationships

Oscar Wilde suggested that ‘Women love men for their defects’, but defects that were initially attractive can become a problem in a long-term relationship. The courtship may not provide an indication of the problems that can develop later in the relationship. Hans Asperger stated that ‘Many of those who do marry, show tensions and problems in their marriage’ (Asperger 1944). Some partners have explained that the real persona only became apparent after they were married.

The initial optimism that the partner with Asperger’s syndrome will become more motivated and able to socialize, develop empathy and the ability to meet their partner’s need for affection and intimacy can gradually dissolve into despair that these abilities are not going to be achieved easily, if at all. The most common problem for the non-Asperger’s syndrome partner is feeling lonely. The person with Asperger’s syndrome can
be content with his or her own company for long periods of time. Conversations may be few and the opinion of the person with Asperger’s syndrome is that a conversation is primarily to exchange practical information. They may not notice, recall or want to talk about information of emotional significance to their partner.

In a successful relationship there is the expectation of regular expressions of love and affection. Chris, a married man with Asperger’s syndrome, explained that:

*I have an enormous difficulty with the verbal expression of affection. It is not just a case of feeling embarrassed or self-conscious with it. I understand that this may be difficult for anyone else to understand, but it takes a great deal of effort of will to tell my wife how I feel about her.* (Slater Walker and Slater Walker 2002, p.89)

His wife added her comments regarding her husband’s infrequent words and gestures that communicate feelings of love and affection:

*Chris told me once that he loved me. I have since discovered that it is not necessary for the person with AS to repeat these small intimacies that are frequently part of a relationship; the fact has been stated once, and that is enough.* (Slater Walker and Slater Walker 2002, p.99)

The non-Asperger’s syndrome partner can suffer affection deprivation which can be a contributory factor to developing low self-esteem and depression. A survey of women who have a partner with Asperger’s syndrome included the question, ‘Does your partner love you?’ and 50 per cent replied, ‘I don’t know’ (Jacobs 2006). What is often conspicuously missing in the relationship are daily expressions of love for the other person. For the person with Asperger’s syndrome, this frequent reiteration of the obvious or known facts is illogical and unnecessary.

During moments of personal distress, when empathy and words and gestures of affection would be anticipated as a means of emotional repair, the typical partner may be left alone to ‘get over it’. This is not a callous act. For the partner with Asperger’s syndrome, the most effective emotional repair mechanism is often solitude, and he or she assumes this is the most effective emotional repair mechanism for his or her partner. The partner with Asperger’s syndrome may also not know what to do, or may choose to do nothing, because of a fear of doing something that could make the situation worse.

Partners have reported problems with sexual knowledge and intimacy. Adults with Asperger’s syndrome tend to be at the extremes of sexual knowledge, having either remarkably little information on sexuality and few sexual experiences, or a great deal of knowledge from pornography or being sexually abused. Partners with Asperger’s syndrome tend not to be naturally skilled in the art of romance, foreplay and sensuous
touch. Sensory sensitivity in general and tactile sensitivity in particular can affect both every day and sexual relationships. An intense sensitivity to specific aromas can affect the tolerance of perfumes and thus proximity to other people. Due to tactile sensitivity, gestures of reassurance or affection, for example a touch on the forearm or a hug, can be perceived as an overwhelming, restricting and unpleasant sensation. The typical partner may resent the obvious lack of enjoyment in response to affectionate touch and avoidance of tactile experiences during more intimate sensual or sexual moments. The aversion to touch is due to problems with sensory perception rather than a lack of commitment to the relationship. The sexual script of the person with Asperger’s syndrome can be described by their partner as rigid, repetitive and unimaginative with a relative lack of sexual desire.

Having a relationship with a person with Asperger’s syndrome can affect the partner’s mental health. A survey of the mental and physical health of couples where the male partner in the relationship had Asperger’s syndrome indicates that the relationship has very different health effects for each partner (Aston 2003). Men with Asperger’s syndrome stated that their mental and physical health had greatly improved due to being in a long-term relationship. They were less stressed than when single and the relationship brought considerable personal satisfaction. This was in contrast to their partners, who reported that their mental health had deteriorated due to the relationship. They described feeling emotionally neglected and physically exhausted and depressed. They may resent their partner for being emotionally inarticulate and feel trapped by the relationship. The physical exhaustion can be due to the partner with Asperger’s syndrome not sharing the work load at home for domestic chores or caring for children. Adults with Asperger’s syndrome can have organizational problems such that their partner has to be an ‘executive secretary’, taking responsibility for budgeting and planning. In modern western society we have tended to replace the word husband or wife with the word partner. Women today expect their partner to not only share the responsibilities but also be their best friend to provide emotional as well as practical and financial support. Sharing and being a best friend are not attributes that come easily for the person with Asperger’s syndrome.

Strategies to improve relationship skills

People with Asperger’s syndrome will require guidance in relationship skills at each point on the relationship continuum and probably throughout their lives. Children will need guidance from a speech pathologist in the art of conversation, and strategies to improve friendship skills throughout the school years from a teacher or psychologist. The development of friendship skills must be a priority for educational services that support a child with Asperger’s syndrome, as greater maturity and ability in friendship skills will improve self-esteem, reduce incidents of being teased or bullied, lay the foundations for adult relationship skills and encourage teamwork abilities for successful employment (Attwood 2006). Adolescents will need accurate information on attraction,
the dating game and sexuality. While this information is easily available for typical teenagers, often from friends, parents, classroom programs and gradual experience, this information and experience may not be as easily available for a teenager with Asperger’s syndrome. The lack of peer guidance, group discussion and practice will inhibit the development of relationship skills. Fortunately, we now have programs on relationships and sexuality specifically designed for adolescents with Asperger’s syndrome (Henault 2005), advice from fellow teenagers with Asperger’s syndrome (Jackson 2002), and some Family Planning organizations, particularly in Australia, are developing resource material and expertise in teaching relationship skills to adolescents and young adults with Asperger’s syndrome. The education ranges from improving knowledge on dating etiquette and dress sense to ways to identify and avoid sexual predators. A valuable strategy is to have a socially perceptive friend or relative meet a prospective date to determine whether the person appears to be of good character, before developing a relationship.

Young adults will need encouragement to make acquaintances and friends. This can include joining a hobby or interest group that is associated with a special interest such as attending a Star Trek or Dr Who convention, or an application of a talent, such as a natural ability with animals and joining an animal protection group. There can be opportunities to make friends at community activities such as a local choir, taking a class or renewing old acquaintances. It may be wise to avoid trying to meet people at pubs and clubs due to the risk of meeting a relationship predator, access to alcohol and drugs and the practical difficulty of trying to have a conversation in a noisy and crowded environment. Local Asperger’s syndrome support groups for parents have established support groups for young adults with Asperger’s syndrome. This can provide an opportunity for someone to address the group and provide discussion and guidance in relationships. The group can also be an opportunity for relationships to develop between group members. The relationship that developed between Jerry and Mary, two adults with Asperger’s syndrome who met at a support group in Los Angeles, has been the subject of a film and book (Newport 2007). Some adults with Asperger’s syndrome have used the Internet and dating agencies to meet people, but this method of introduction can also be used by relationship predators and an adult with Asperger’s syndrome needs to be aware of relationship risks using this strategy.

**Do all individuals with an ASD seek a partner?**

I have noted that adults who had clear signs of autism in early childhood (that is, language delay, learning difficulties and avoidance of social situations) and who in later childhood progressed to a description of High Functioning Autism, are often less motivated to seek a long-term relationship. They are more likely to be content with solitude and celibacy and having acquaintances rather than friends. A sense of self-identity and personal value is achieved by having a successful career and being independent. Temple Grandin is a well known example (Grandin 1995). Some adults
with Asperger’s syndrome have also decided not to seek an intimate relationship with someone for sensible reasons when one considers the characteristics of Asperger’s syndrome. Jennifer explained her rationale: ‘Can I deal with sharing a house with someone who might possibly touch my model airplane collection?’ and ‘model airplanes do not decide that they want to be built by someone else who is more attractive or less needy’ (McIwhee Myers 2006 pp. 109, 112). Her life does include moments of intense personal satisfaction. She states that, ‘I can assure you that being in love and having special interests are much the same feeling’ (p.112). Not having a relationship can be a positive choice for some adults with Asperger’s syndrome who enjoy pursuing their special interests, such as wild life photography or a career in information technology. They are content not to be swept away by the cultural belief that marriage or a long-term relationship are the only ways to achieve happiness.

**What makes a successful long-term relationship?**

When a person with Asperger’s syndrome is in a long-term relationship, clinical and relationship counseling experience suggests that there are three requisites for both parties to enjoy and benefit from the relationship (Aston 2003). The first requisite is that both partners acknowledge the diagnosis. Assuming the partner with Asperger’s syndrome has not been given a diagnosis in childhood, the non-Asperger’s syndrome partner is usually the first to recognize the signs of Asperger’s syndrome. The signs may have been recognized from information on Asperger’s syndrome in the media or a relative (sometimes a child of the relationship) being diagnosed. Asperger’s syndrome often occurs within and between family generations.

Recognition that a partner has Asperger’s syndrome can be a revelation. There is now an explanation for behaviours that have been confusing or infuriating. The non-Asperger’s syndrome partner’s emotions, circumstances and experiences are finally validated. However, his or her acknowledging the diagnosis and becoming knowledgeable about the nature of Asperger’s syndrome can be the end of hope that the Asperger’s syndrome partner will easily improve his or her relationship skills and acquire insight into someone’s thoughts and feelings. The acceptance of the diagnosis is also important for the partner with Asperger’s syndrome to recognize his or her relationship strengths and weaknesses and relationship skills that need improvement.

The second requisite is for both partners to be motivated to acquire and apply strategies to improve the quality of the relationship and to change their behaviour, abilities and routines. There is usually greater motivation and flexibility in adapting to change from the non-Asperger’s syndrome partner, who already has a good foundation of relationship skills and is more adaptable to change. The partner with Asperger’s syndrome may be more content than his or her partner with the existing relationship pattern and may not recognize there will be sufficient benefits to himself or herself to justify a change in the relationship.
The third requisite is access to relationship counseling, modified to accommodate the profile of abilities and relationship experiences of the partner with Asperger’s syndrome, with a counselor knowledgeable in how Asperger’s syndrome affects a relationship. Conventional relationship counseling with a counselor who is not knowledgeable about Asperger’s syndrome is unlikely to be successful. A survey of couples with one of the partners having Asperger’s syndrome found that the majority were dissatisfied with the relationship counseling they received (Aston 2003). They reported feeling misunderstood and their problems disbelieved or trivialized.

There is literature that provides guidance on relationships written by couples with one partner who has Asperger’s syndrome, and by specialists in Asperger’s syndrome. (Aston 2003; Attwood 2006; Edmonds and Worton 2005; Jacobs 2003; Lawson 2005; Rodman 2003; Slater Walker and Slater Walker 2002; Stanford 2003). There are also web-based support groups such as www.faaas.org or www.aspires-relationships.com. In recent years there has been the development of local support groups such as www.aspiepartners.com or qaps.group@gmail.com in Brisbane and www.aspia.org.au in Sydney, Australia, specifically for partners, to provide practical and emotional support.

There are constructive strategies to assist the non-Asperger’s syndrome partner, who can feel that they are gradually absorbing the characteristics of Asperger’s syndrome in his or her own personality. The development of a network of friends can reduce the sense of isolation; and he or she may choose to participate in social occasions without the presence and responsibility for a partner with Asperger’s syndrome, who can be a social liability rather than asset. A friend or relative who has the intuitive ability to provide empathy and repair emotions can become a supportive soul mate, and an occasional escape or holiday with friends can provide an opportunity to regain confidence in social abilities and enjoy social rapport.

Parenting

When the relationship evolves into being parents, the partner and now parent with Asperger’s syndrome often has little understanding of the needs and behaviour of children (Attwood 2006, Snyder 2006). Having a parent with Asperger’s syndrome can sometimes cause children to feel that they are ‘invisible’ or a nuisance and deprived of the acceptance, reassurance, encouragement and affection that they need. The child only feels noticed and valued for his or her academic achievements and can be embarrassed by the behaviour of a parent with Asperger’s syndrome in public and when inviting friends home. The non-Asperger’s syndrome parent has to compensate for the lack of parenting skills of his or her partner, and can feel like and function as a single parent. They may have to explain their partner’s behaviour to the child to prevent resentment, and mediate in disputes. They also have to provide guidance and
encouragement to the parent with Asperger’s syndrome regarding what a parent is expected to do and say in order to have a successful relationship with their children. When one of the children has Asperger’s syndrome there can be either a natural attachment or antagonism between the parent with Asperger’s syndrome and child who has the same diagnosis. The parent recognizes the daily challenges faced by the child from his or her own experiences and becomes a social mentor. This may be an ideal relationship between parent and child, but often the enforced proximity of two inflexible and controlling characters with Asperger’s syndrome can lead to animosity and arguments. A metaphor for the relationship between a parent and child with Asperger’s syndrome is the poles of two magnets that either attract or repel each other.

Developing new strategies for successful relationships

We know that adults with Asperger’s syndrome have considerable difficulty progressing along the relationship continuum, but we lack research that provides quantitative and qualitative data on the relationship abilities, circumstances and experiences of adolescents and adults with Asperger’s syndrome. There is research on the friendship abilities of children with Asperger’s syndrome that has recently been reviewed (Attwood 2006), but very little research on boyfriend/girlfriend relationships and sexuality. Clinicians who specialize in relationship counseling suggest that the sexual profile of adults with Asperger’s syndrome is different to typical adults in terms of lower body image and fewer sexual experiences, although sexual interest usually develops at the same time as adolescent peers. There can also be a more liberal attitude to sexual diversity such as homosexuality and bisexuality, and a rich fantasy life and sexual imagery. There may be less concern regarding age and cultural differences in a relationship. However, clinical impressions need to be substantiated by research that includes the administration of standardised assessments for relationship abilities and sexuality (Henault and Attwood 2002).

We also need to develop and evaluate strategies to improve relationship skills. Much as Cognitive Behaviour Therapy has been modified to accommodate the unusual profile of abilities and experiences of people with Asperger’s syndrome, modifications will also be needed for conventional relationship education and counselling programs. There is a growing demand for access to professionals who are able to provide guidance for people with Asperger’s syndrome who are seeking a relationship and those who want to improve an existing relationship. This is due to the increasing number of people being diagnosed with Asperger’s syndrome and the knowledge from research studies that the same characteristics, although to a lesser degree, can be identified in the relatives of someone with Asperger’s syndrome (Bailey, Palferman, Heavey and LeCouteur 1998; Cederlund and Gillberg 2004; Volkmar, Klin and Pauls 1998). Clinicians may diagnose a young child with Asperger’s syndrome and recognize a ghosting of the characteristics in a parent or grandparent. That family member may benefit from relationship education and counselling, which would help the whole family.
References


