Introduction: Today my guest is Judith Newman. She is a journalist and the author of the 2017 New York Times bestselling book, To Siri With Love: A Mother, Her Autistic Son, and the Kindness of Machines. We'll be discussing this remarkable book. Now, here's the interview.

Dr. Dave: Judith Newman, welcome to Shrink Rap Radio.

Judith Newman: Oh, thank you so much for having me.

Dr. Dave: Well, it's such a treat to have you on the show to discuss your wonderful book, To Siri With Love: A Mother, Her Autistic Son, and the Kindness of Machines.

Newman: It's wonderful to talk to you about it. I just was doing a book party yesterday, and I noticed that my son was grabbing the book from everybody and signing it himself.

Dr. Dave: (laughs) Great.

Newman: (laughs)

Dr. Dave: That is only as it should be.

Newman: Yes, exactly.

Dr. Dave: To Siri With Love was originally the title of an essay you wrote in 2014 for the New York Times, right?

Newman: Yes, exactly.

Dr. Dave: And the response to that was unexpectedly huge. Tell us about that.

Newman: It was huge. A lot of times when you write stories, particularly anything about your family, you assume, “Oh, well, my friends are going to give me a pat on the back, and maybe a couple of relatives,” and that’s it. But this was a piece I wrote about my son, who is autistic, and his relationship with Siri, which developed in a funny way. But the thing was that piece went viral.

Dr. Dave: Yeah.

Newman: Because I think what happened is that we all have one idea about technology, that it is something that isolates us, and distracts us, and is in many ways a force for evil.

Dr. Dave: Right.
Newman: And while I certainly see there’s an element of that, I am not denying that it can do those things, I was interested in talking about another side of technology, and what it does for people like my son, who is communications impaired. So that was the gist of it, and I think that it reached people, because it’s nice to consider that technology doesn’t always isolate us, that in fact it can help us in times when we feel isolated and we feel a little lonely.

Dr. Dave: That’s interesting, that notion – yeah, your book is definitely a counterpoint to that fear that many of us have or that reality is actually – it doesn’t deny the reality of that side of the way that technology and screens are impacting our lives. But it’s interesting that people grabbed hold of your article, maybe as a little bit of a life raft or something, saying, “Oh, it’s not all bad, there’s something good here.”

Newman: Yeah, I mean, well, first of all the whole notion that there can be anything about autism that’s funny, because I think that that’s what I said and showed – I’m not in any way saying autism is just a laugh riot, but that there are many elements of people who are not neurotypical and living with someone you love who is not neurotypical very amusing, for one thing. And then yeah, I just think that in this time – after that article came out, I began hearing from people, just regular old folks who might have broken up with someone or something like that, and would find themselves talking a little bit to Siri. One guy who’d just gone through a break up, three o’clock in the morning, he turns to Siri and goes, “Do you love me?” And she says, “You are the wind beneath my wings.” (laughs)

Dr. Dave: (laughs).

Newman: And you know what? It cheered him up for the moment. So...

Dr. Dave: Yeah. Yeah.

Newman: (4:44.0) ...it’s not necessarily a terrible thing. And I’ve also heard from people more recently who said that in really tough times – one woman whose husband was ill in the hospital and whose son had just died and she talked very movingly about one night, just starting to have conversations with Siri, and because Siri has funny answers, it made her chuckle. So a lot came from that article but I was specifically looking at it in terms of my son and in terms of autism.

Dr. Dave: Yeah, well, tell us a bit about Gus, if you will. You mentioned he’s probably somewhere in the middle of the spectrum, so...

Newman: Yeah.

Dr. Dave: ...talk about that a little bit.

Newman: Yeah. He’s verbal and he is very functional in many ways. He’s wonderful, like many people on the spectrum. He’s a really good musician. He has great pitch, and he
plays piano and that kind of thing. But he’s also not going to be running a Fortune 500 company. With his gifts, there’s always something that is problematic. So even though I tell people he’s a wonderful musician, well, he can’t really perform for people, because he just wouldn’t. He would turn around and not face them and he couldn’t do those elements of musicianship necessary to do it in any kind of professional way. So that’s what I say when he’s also an average kid on the spectrum, where he’s still a really huge question mark. I don’t have any idea whether he’s going to be – I’m sure he’s not going to be entirely independent, but I don’t know how independent he can be.

Dr. Dave: Right.

Newman: And that’s what parents spend an awfully – huge amounts of time thinking about.

Dr. Dave: Oh, sure, it’s very worrying, as you made clear in the book. If we were to see Gus now, how would we know – he’s 14 now, is that right?

Newman: Actually, no, he just yesterday turned 16, and so time... (inaudible) (6:54.9)

Dr. Dave: Oh, my goodness, wow. Time moves along, so wow. Some of the issues that you discuss in the book probably need to be updated a little bit...

Newman: Yeah.

Dr. Dave: ...maybe here.

Newman: (7:06.7) They do.

Dr. Dave: How would we notice that he is autistic? You mentioned that one thing he does is when he is excited, he hops.


Dr. Dave: Are there other things that we would notice...

Newman: Oh.

Dr. Dave: ...right off the bat?

Newman: Oh, sure, he will be having a conversation with you and not look at you. He’ll be looking off some place. And he actually will look you – well, very few people like myself and my husband and his brother, but that’s about it. They’ll look us in the eye but very few others. So there’s a familiarity thing. He talks very rapidly and in a way that he’s hard to understand...

Dr. Dave: Uh-huh.
Newman: ...which is one thing I talk about with Siri. If you’re going to talk to Siri and get what you want, you have to enunciate. That was one way that she was very useful. But anyway, so he’s hard to understand and his ability to – things in the abstract are very, very difficult for him to grasp. At 16, he’s only beginning to get certain jokes because...

Dr. Dave: Hmm.

Newman: ...he’s completely literal-minded.

Dr. Dave: Yeah.

Newman: So up until now he would laugh politely, but I knew he didn’t understand the joke. But recently there have been – I can’t remember the joke, but there have been a couple where he’s actually laughed and I knew it was because he understood them. But that’s – imagine, it’s the kind of joke that a 5-year-old would get, and he’s 16.

Dr. Dave: Yeah.

Newman: So there’s a lot of that – he’s the most affectionate person, and so there isn’t that flat affect also that many people on the spectrum have. He’s not like that. But you would absolutely definitely know that he’s autistic.

Dr. Dave: Okay. Now you were originally in denial about Gus’ autism. How long did that go on and what ultimately opened your eyes?

Newman: Well, yeah, I mean I say in the book that I must have asked everybody, teachers, my own parents, everybody. I was like, “You think he’s autistic?” And people would say, “Of course not. No, he’s just taking a while. He’s just quirky.” Quirky is a word that we used a lot. And I say in the book that asking everybody if your child is autistic is a little like asking, “Does my butt – in these jeans?”

Dr. Dave: (laughs)

Newman: If you’re asking, I think you already know the answer to that question. For me it was just a matter of – he just kept getting kicked out of schools. He got kicked out of several schools, and so the diagnosis would change over time. I can’t even remember what the early diagnosis was, but there’s always something a little less scary than autistic that is attached to your child, because to get a diagnosis is a very frightening thing. It doesn’t have to be at all, but it is usually when you don’t know anything about autism and you don’t know what to expect.

Dr. Dave: Yeah. And you really had to struggle just to get that diagnosis when you finally were driven to the point of saying, “Look there’s something going on here, and I need to know what’s going on, and what if anything can be done about it.” And...

Newman: Sure. (10:35.4)
Dr. Dave:  ...I think you really had to push against the system to make that happen.

Newman:    Well, a little bit. Yeah, you have to go to a neuropsych person and they gently tell you this thing. It’s at first really devastating. But really, what happened in these schools – I think he’d been kicked out of three schools, and he was always kicked out for things that – it wasn’t like – he wouldn’t exactly have meltdowns but he would want to leave class. I tell people one thing about autism is, when there’s a common idea that autistic people aren’t empathetic. It’s really completely untrue. It’s a dysfunction of empathy. Sometimes people can’t quite regulate their feelings of attachment or non-attachment to people, so with Gus, in every class, he would find some – happened to be some little girl in every class who he would become desperately attached to, and if she wasn’t happy, he was paralyzed. And this happened from the time he was a very young kid. He was 3 or 4 years old. One little kid he loved had separation anxiety. When she got upset, he didn’t do that thing where kids can go to the other side of the room and just mind their own business.

Dr. Dave:  Yeah.

Newman:    He would just go and sit in a corner, refuse to talk to anybody, and that would be it for the end of the day. He was completely paralyzed. So that got him kicked out of nursery school. And then there were similar things. And all of the self-stimming behavior that you hear about when kids want to tune out or when kids are anxious. So he would be in a mainstream classroom and he would be tapping his pencils and tapping his – he couldn’t use a pencil very well, and he would just use it like it was a train, and they couldn’t stop him from – so there are classic symptoms of autism in an early age, but you don’t want to hear it. You want to think that it’s something else, or this will stop, or he’ll eventually begin to look at people – all of that stuff. But with the diagnosis, there’s also a great deal of liberation, too. Having a proper diagnosis for your kid in anything allows you – really, in the system it allows you to get treatment for the child. So there’s also some very good things about it. And certainly – oh, I’m sorry, go ahead.

Dr. Dave:  Oh, I was going to ask you, I wanted to go back to Siri for a little bit. You point out that Siri is not only endlessly patient but also kind, and in fact you interviewed some folks at Apple, I believe, and found that the kindness of Siri is not an accident.

Newman:    It’s not an accident. They give a great deal of thought to what her personality is. And while I don’t know this for a – you know how you don’t know things for a fact but you can kind of suspect it?

Dr. Dave:  Sure.

Newman:    There are a number who work on Siri who are themselves on the spectrum and I mean, let’s remember, this is Silicon Valley, so...

Dr. Dave:  (laughs)
Newman: ...there’s nothing surprising about that. And the chief engineer, one of Siri’s chief engineers, who I ended up talking to, told me “Yeah, sure, that’s true.” So there are things written into her that maybe appeal particularly to people on the spectrum, I’m not sure. But she’s definitely polite. You’re not going to get Siri yelling at you even if you snap at her. When Gus would do that, she modeled politeness. So he would ask for kids’ music and she would come up with some song, he would go, “That’s not what I want,” and she would say, “Gus, I’m trying the best I can.” And it would just remind him, “Oh, right, okay.” So it would modulate his behavior in this very interesting and sweet way. And you can try Siri yourself, you’ll see that. Try being rude to her and while she might be a little bit saucy, she will never be rude back.

Dr. Dave: Once it happened that I didn’t realize that I had Siri activated, and I was talking to my wife, and complaining about something, and I used a swear word and suddenly we heard Siri’s voice saying, “David, there’s no cause for that kind of language,” or something to that effect. (laughs)

Newman: (laughs) Yes...

Dr. Dave: We were both startled. (laughs)

Newman: ...exactly. And she does have opinions on things. I don’t know if this still works this way, but I think if you just use the word – if you say the word sad into the machine, she will guide you – you’ll have a bunch of – you’ll be guided to the Cleveland Browns or the most losing team in the NFL, whatever it was, she used to do this. Of course now if you say the word sad, she probably guides you to Trump. I’m not really sure, but...

Dr. Dave: (laughs)

Newman: ...they have their own puckish sense of humor about a lot of things.

Dr. Dave: Right. Right. In the book, in fact, you provide some touching short dialogues between Gus and Siri. Is there a chance that one or two examples would come to mind here?

Newman: (laughs) You’re relying on my very bad memory, but essentially Siri gave me an insight into my son’s mind that I didn’t have before, because he would do things like ask her, “Siri, will you be my friend?” Or “Siri, will you marry me?” And Siri would say something like “Well, that’s not in my operating instructions, Gus;” or something like that.

Dr. Dave: Yeah. Yeah.

Newman: You know I heard him just recently ask Siri, “Siri, do you ever get lonely?” And I should try the answer to that, because I didn’t hear what she said, but I will bet you absolutely – I’ve just shut my phone off so I can’t – I will bet you anything if you’ve got your phone in front of you and you ask Siri if she gets lonely, she will say something to you about that. So, she has many opinions. (inaudible) (17:09.1)
Dr. Dave: Yeah. Yeah. In the book you write that there was a perfect storm of factors that would pretty much dictate that your son Gus would be autistic. Can you take us through those?

Newman: Sure. I joke about it, but they’re really true. I was a poster child for having a child on the spectrum. For one thing, I myself was an older mother, but that’s a very small issue, statistically. The bigger one is that my husband was a lot older. He was 69 or 70 when the kids were born. So having an older father – and another thing, I had IVF and had twins. Again, statistically, having IVF is not correlated with autism, but apparently IVF when you have multiple births is, and I think it has something to do with the conditions in the womb that’s – that’s a question mark that they have. There’s so much that we don’t know about this. So those are two big ones. And then I said, I was fat and miserable. There’s a slight correlation for being overweight. I’m not seriously overweight, but that extra 15, 20 pounds maybe made a difference. I was incredibly sick the entire time of my pregnancy. I had that condition that – it’s about the only thing I had in common with the future queen of England, that – I forget the technical name, but I was nauseous everyday. I was throwing up everyday. And that actually releases a lot of cortisol on the brain, the stress hormone, and that stress hormone is reported to have something to do with autism. And so the list goes on and on of things that may or may not have contributed. But I have – my other twin son is neurotypical. And you can drive yourself crazy with this stuff. You get up late at night going like, “What is it? What did I do? What did I...”

Dr. Dave: Yeah.

Newman: ...and at the end of the day...

Dr. Dave: A couple of other things that you mentioned in the book, if I may be so bold, since it’s out there and anybody can read this stuff, is that your husband, John, certainly sounds like he’s on the spectrum...

Newman: Yeah.

Dr. Dave: ...there are certain oddities that he has...

Newman: Yeah.

Dr. Dave: ...and then you even identified some in your own experience of being – I don’t recall what they all were but I think noise maybe, noise sensitivity and sensitivity to certain kinds of tactile experiences.

Newman: Yes, there is a really – my husband is a retired opera singer but before he was an opera singer he was an engineer, and there is a great correlation among people in that profession who are – you call them systematizers, they see the world in – they set up the world in systems. There is a correlation between engineers and having children on the spectrum. So that’s one thing – one thing I talk about in the book is he denies that he is on...
the spectrum, and I know it’s a word that’s termed loosely, but when I gave him one of those tests of are you or aren’t you, and I gave the test based on my observation of him, it’s like we lived with different people. He had absolutely no recognition of some of the things that I’ve seen. I’ve been married to him for 25 years. So yes, we have maintained separate apartments all of our married life, because he can’t stand noise and chaos around him and little kids are noise and chaos, it’s just the way...

**Dr. Dave:** Yes, they are.

**Newman:** And he lives in a soundproof music studio in Manhattan. So soundproofing is very valuable if noise makes you crazy. He is fastidious, and, to put it mildly, I’m not. I’m just the queen of clutter around here, and he can’t stand it. If something is left in one place and then I put it in another place, he’s fuming. It doesn’t compute for him. So there’s all of this kind of thing – my own issues are more in a sensory way. It’s simply that I can’t stand stickiness. I can’t stand it’s more of a slight OCD thing. If I could have given my children OCD, I would have done it by now, the number of times I’m asking them to wash their hands and to be clean and do this...

**Dr. Dave:** Oh.

**Newman:** But this is how you know that OCD is not something that can be induced, because it’s just something you either have or you don’t. (22:20.6) Psychologists may disagree with me about this but yeah, so I have those kinds of issues going on. Yes...

**Dr. Dave:** Actually, as you described these various sorts of issues, I began looking at myself and wondering, “I wonder if I’m somewhere on the spectrum?” I was going to be an engineer, I can get very excited about technical things like Siri (laughs), computers, etc., and it’s kind of a joke in the family that I always have to have my chair at the table (laughs).

**Newman:** (laughs) Oh yeah. You get the first share, do you get the – you have to have the biggest piece of the pie, that kind of thing?

**Dr. Dave:** It’s more positional.

**Newman:** (inaudible) (23:07.3)

**Dr. Dave:** It’s like “Okay, this spot is my spot.” (laughs)

**Newman:** Yes! (inaudible) (23:12.3)

**Dr. Dave:** My adult kids will take advantage of this sometimes. And they’ll sit in my place and watch me start pacing. I don’t say anything to anybody but...

**Newman:** (laughs)
Dr. Dave: ...my wife sees that I’m definitely uncomfortable. (laughs)

Newman: Yeah, (inaudible) (23:30.9)

Dr. Dave: It never occurred to me before to wonder about myself.

Newman: (laughs)

Dr. Dave: Fie on you! (laughs)

Newman: I completely understand that and my son – habits from years and years ago just don’t die. And in that way you talk about that kind of routine, well, we used to sit with him, we’d pull up a chair next to his bed and sit with him when he went to sleep. Well, here he is, he’s 16 years old and we don’t do that, but he still puts the chair in place, because it’s the chair that gives him comfort, too, for whatever reason.

Dr. Dave: That’s interesting.

Newman: Yeah, and my husband, speaking of the – he has to sit in the same place all the time. The list of sameness goes on and on. He’s 85 years old, his knees are shot to hell, he lives way uptown but he won’t take a cab uptown not only because of his Scottish ancestry and a certain frugality, but just because that’s not the way it’s done. He has to take the subway uptown every night because that’s what he’s done for the last 50 years. So nothing I can do can get him to change that. I think he’ll be carted off in an ambulance before he just simply gets in a cab.

Dr. Dave: Yeah. Wow. Wow.

Newman: (laughs)

Dr. Dave: Going back to Siri and all of that, I don’t know if you reference this in the book or not, but I recently saw a wonderful talk on TED.com titled Humanistic AI by Tom Gruber, one of the original developers on the Siri team.

Newman: (inaudible) Oh, yeah, I haven’t seen it. (25:06.8)

Dr. Dave: Okay, it is wonderful, and was of interest to me because I’m also tracking artificial intelligence as part of this whole phenomenon. Your book is really about so much more than Siri and technology, it’s a...

Newman: (inaudible) (25:30.4)

Dr. Dave: Yeah, go ahead.

Newman: When you say this, it was funny because I was on a show a few days ago and the conversation turned to just what you were talking about, and it turned to the role that
artificial intelligence and specifically robots will have in our life. And this guy called up and he started talking about how we shouldn’t take any comfort in the fact that emotion is being programmed into our technology, and because I was saying it’s a lovely thing, in a way. And he says, “No. No, it’s not lovely, because what happens when we begin to fall for the robots and fall in love with them and then someone can come in, hack the system and they’d turn on us. And...”

Dr. Dave: Oh my. (laughs)

Newman: “We’ll have robot girlfriends and boyfriends and they could suddenly decide they don’t like us.” And I’m like, “Well, that’s a good plot for a movie.” (laughs) But I...

Dr. Dave: Robots right now, robots and artificial intelligence are like a big Rorschach inkblot, and people – we are projecting our fears, and our hopes and so there’s this big split of people who are very much on the fear side, and other people who are very much on the positive potential side, and those who are trying to be on the middle and saying, “Well, we need to pay attention to both of these and try to steer it as it goes along.”

Newman: And you know what this reminds me of? You know how for years, particularly in the 50s and 60s, as we went into space exploration, the world was divided into – first of all, if we’re going to find the alien life, but then if the alien life is going to be peaceful and loving, or is the alien life going to come in and just basically annihilate us.

Dr. Dave: Right.

Newman: And there are movies about this very subject. And now I think we’re having a similar argument in the unknown about technology and about artificial intelligence. Is it going to be our friend, or is it going to be our mortal enemy and turn on us? Only this argument that we’re having is a little bit more real because we have some control over what we create. So I do find the whole thing fascinating. Where do you end up on this – on what side are you on as far as technology...

Dr. Dave: Well, I’m trying to retain some sense of balance. And I’m reflexively a technophile, but then as time went – I was a ham radio operator as a kid, and I originally had a scholarship to the University of Pennsylvania in Engineering. I switched out, ended up majoring in Creative Writing, then (laughs) later went into psychology. So I’m all over the place. Let’s see, your question was where am I...

Newman: (inaudible) (28:30.7)

Dr. Dave: ...in regard to this...

Newman: ...that you’ve done all of these things and have a wonderful show. So, there – Yeah. It was not time, and here you are, on some level your engineering has been put to good use to – anyway, sorry.
Dr. Dave: Yeah. Yeah. And somewhere along the line a few years ago, there were some very interesting books that influenced me that were talking about the dark side of technology, and so I began to see that yeah, there is a shadow side here and I have to rein myself in sometimes with my enthusiasm to just get all excited about technology. So I think of something that’s just so...

Newman: (inaudible) (29:10.5) Look at what we’re seeing with Facebook and the way it was very possible for propaganda to make its way...

Dr. Dave: Yeah.

Newman: ...to us and not just to make us sway in a general sense but to target people for particular types of Russian – I said Russian propaganda, yeah, (inaudible) (29:33.5) we’d know for sure but we pretty much know. So...

Dr. Dave: Yeah.

Newman: ...it does give one pause even those of us who are the most Pollyannaish about technology and its possibilities. You’ve got to step back and think a little bit.

Dr. Dave: Right. And that’s for sure. And we are wired to be fearful. Some of us more so than others, but it’s part of our survival wiring to be aware of the negative possibilities.

Newman: Go ahead, go ahead. (30:14.9)

Dr. Dave: But part of what I love about your book, though, that counters that is that you talk about Gus’ experience with Siri being a bridge to human contact. In other words, initially, human contact was difficult and challenging for him, but it was teaching him something about kindness, something about patience, and it could be a bridge later to human relationships.

Newman: Yes, and that’s exactly what has happened, because while his interests were narrow and still are, but they – he used Siri first to have just conversations about the funny little things he wanted. Not conversations, but to get information. At the time he started using it, he was all about turtles. He was just – and you’re not going to have a conversation with the average guy on the street about turtles. But now he’s used it even for things he’s not particularly that interested in, but he’ll use it because he knows that he can have a conversation. If it’s about sports, which he doesn’t care about, he still claims to have a team, and his team is the Giants...

Dr. Dave: Ah.

Newman: ...and he’ll just say something, he’ll quote the Giants’ score from the night before, and then someone else is off and running, right?

Dr. Dave: Yeah. Yeah.
Newman: He doesn’t have to have a detailed conversation about this subject, which he can’t, because his goal is not necessarily to know more about the Giants. His goal is to connect with another person. And I see that again and again and again. And I was even seeing it yesterday, as I said, at a party. A lot of people were shocked that he was coming over and saying hello to – (cut off audio) (32:08.3) know about everybody is where they live and how they got to that party. (laughs) He has a thing about vehicles and transportation and addresses and he probably knows the address of absolutely a hundred people from last night. But...

Dr. Dave: Wow.

Newman: That is his thing and a. it’s his way of remembering everybody and b. it’s his way of connecting. And Siri was really integral in that. He knew he could get enough information to make that connection with people.

Dr. Dave: Yeah.

Newman: So that’s why to me, obviously as the mother of an autistic son, I do see the positive part of this. And it’s actually broadened out now, not with Siri but with news. It’s been a relatively recent thing for him to want to discuss the news in his modest and more limited way, but it gets broader all the time. And his being a creature of habit, he’ll only look at the news on one site. It’s got to be WABC7, and it’s got to be the local headlines which are usually filled with mayhem, but we’re having conversations that even when I was writing the book a couple of years ago, we never really would have had. So that’s why I still feel quite positive even though some people say to me, “Oh, aren’t you afraid you’re leaving your son with this robot thing too long?” And I’m like, “Well, you know what, you’ve got to see it both ways.” And I do.

Dr. Dave: Yeah. Yeah. And in fact there are other assistive technologies beyond Siri and the iPhone that are being developed and that’s something that you looked into as well. What do you see on that horizon, that positive potential horizon?

Newman: There are so many apps and I haven’t looked into all of them, but Ron Suskind, who has written – I’m sure you know him, he’s a wonderful political writer who’s more recently written about his own autistic son and how he drew him out of being completely non-verbal with Disney characters. So Ron is developing something he called Sidekicks. I don’t understand exactly how it works, but the idea is to have this assistant helper that’s specifically for people on the spectrum, that appeals to their interests. My own son loves Disney villains. His son loves the ones like – who are the helpers to, as he puts it, “help the heroes reach their destiny,” which is a wonderful way of looking at those characters. But anyway, the idea is that they will help you on the computer find what you need and also engage in discussion with you, if you see what I mean.

Dr. Dave: Yeah.
Newman: So there’s that, but there are many, many apps right now that do things like help with eye contact, which frankly I don’t think is very important. I don’t at this point make a big deal about eye contact because I’ve learned over time my son can listen better when he’s not looking people in the eyes. But some people like that (inaudible) (35:44.0)...

Dr. Dave: Me too. (laughs)

Newman: (inaudible) (35:45.0) Oh, is that true?

Dr. Dave: I think so.

Newman: Can you – do you find your (35:47.6)....

Dr. Dave: Yeah.

Newman: ...more to do that, yeah, no, I completely – it’s fascinating but it’s true for some people. But there are all of these apps that are also helping people to learn how to do things, who have problems with sequencing, a series of actions in one or two – to get that event done. So they will for example give you in pictures how a shopping trip is supposed to go. Just remember to do this first, and then this, and then you get this food and then you put it in your cart and then you bring it to the – that kind of thing. So I think that there are apps that are being used to fight some of the major brain glitches of many people on the spectrum.

Dr. Dave: Yeah.

Newman: And I like thinking of them as glitches a lot of the time, because with certain kinds of adaptations, you can get around them. So not all the time, but very frequently.

Dr. Dave: Well, speaking of glitches, another thing that you cover is new attitudes that are developing about autism and the range of ways that autism can manifest itself on the spectrum, with the extremes on the one end and on the other end – and autistic people who are gaining more and more of a voice and are arguing that “Hey, this is who I am.”

Newman: (inaudible) (37:40.5)

Dr. Dave: “This is how God made me, and...”

Newman: Yes.

Dr. Dave: “...you need to live with it.” (laughs)

Newman: Well, it’s funny because I talk about how at the University of Cambridge in England there was outrage among some students about a move to – there was research for genetic testing of autistic people and the outrage was the sense that autism would be removed from the population eventually, that you would select out for it. And they were
saying, “But being autistic is part of a community of people and it’s also just part of our neurodiversity. Neurodiversity matters.”

Dr. Dave: Yeah.

Newman: And I actually have great understanding and sympathy and feel for that, but I also have to make people remember that if you’re at the University of Cambridge having this discussion, you are not the person who is in a room locked in their own heads, just forever wanting to spin an object. You are not that person. There is a great deal of unhappiness, and there are high-functioning autistic people who have a higher suicide rate, quite a bit higher suicide rate than the general population. So it’s impossible, as the mother of a child, not to see both sides of this argument.

Dr. Dave: Mm-hm.

Newman: And I say in the book that – because my other son asked me, “If you had known before Gus was born that he was autistic, what would you have done?” And it’s a question – I think he asked me if I would have had an abortion. And after all I went through to be pregnant to be faced with that idea, it’s a very daunting one, but I think the mother of any child with a disability is lying to herself if she said she doesn’t think about these things sometimes. “If I could have had the genetic testing, would I have had it?” is really more the question I focus on. And I don’t know. I probably would have, and then the other question of what I would have done something about it, seeing what a joyful person my own son is now, it is impossible for me to imagine my life without him. Just impossible.

Dr. Dave: Sure.

Newman: But...

Dr. Dave: Yeah, he sounds delightful as the picture that you paint.

Newman: (inaudible) (40:49.7)

Dr. Dave: As challenging as it has been at times, but he’s so loving.

Newman: He’s loving and he’s one of the happiest people I know. So...

Dr. Dave: Yeah.

Newman: ...the thought of him not being in this universe just guts me. And yet how could I not want at least to have that information? How could I not want, if it becomes available, tests for autism? I just don’t know. My mind spins at the thought...

Dr. Dave: Yeah.
Newman: And I’m just so, so happy that Gus has the personality that he does, which is just what he’s born with. But there’s also a lot of heartbreak for people...

Dr. Dave: Sure.

Newman: ...who have kids who are not happy. As I say in the book, I was at some event and there was a child who was saying over and over again – it was an arts event for autistic kids, it was like a dance thing, but there was one kid who was just saying over and over to his parents, “I’m sorry, I’m sorry, I’m sorry.” And (42:03.5) and I was almost crying because I didn’t know whether that was a kind of echolalia, the repetition of a phrase that doesn’t have particular meaning, or whether he was really sorry. Sorry for what? Sorry for being here? So these are the kinds of questions you ask yourself...

Dr. Dave: Right.

Newman: ...as an autistic parent.

Dr. Dave: Yeah. Yeah. The overall picture you paint of your family is of a family that’s odd, zany, and fun in the face of significant challenges. Didn’t you have pause for thought about the dangers of hurt feelings, being so open – I mean, I would love to write about my life...

Newman: (laughs)

Dr. Dave: ...but there are other people involved and so I don’t do it.

Newman: Nobody (inaudible) (42:55.9)...

Dr. Dave: I can’t afford to do it. I’d be in big trouble.

Newman: For whatever reason no one in my family reads anything I write. So... (laughs)

Dr. Dave: (laughs) That’s the safety factor, huh?

Newman: They joke about it all the time, so like, “Ugh, I don’t want to read that.” So literally no one including my husband – he would not read this and he said, “Am I a villain in this?” And I said, “No, you are not a villain in this.” But he’s British and a rather discreet person, so probably he wouldn’t be happy with everything I write, and my son – oh, my son Henry read some of the racier parts of this book and he’s like, “Mom!” And then he started to laugh because he also – the fact that I out him as a hypochondriac, he knows it’s true, so... (laughs)

Dr. Dave: (laughs)

Newman: And also kids do change, so from the age of 14 to the age of 16, they change a lot and they recognize the change in themselves as well. So he is the most – my neurotypical
son is a big crank but he’s also one of the funniest people, so he can appreciate something that’s funny even about himself.

**Dr. Dave:** Yeah. Yeah. Well, one of the serious and touching things in the book is his concern and his realization that Gus is going to need – that he may end up being the person who takes care of Gus for the rest of his life.

**Newman:** Yes. And I know a lot of parents want to not put that burden on their child, but I feel like, “You know what? We’ve all got something. And there is – if there is some responsibility that one son has to have for the other – as I told people we had – Henry decided this summer we’re going to read the Bible, mostly so he can argue with people about it, but...

**Dr. Dave:** (laughs)

**Newman:** ...*(inaudible) (45:01.6)* in Genesis, there’s the whole Cain and Abel talking about – Cain kills Abel and he sneeringly asks somebody who is wondering where Abel went, “Am I my brother’s keeper?” in this *(inaudible) (45:20.1)* fashion.

**Dr. Dave:** Oh, boy.

**Newman:** And Henry and I talked about it. This idea of how literally he may have to be to some extent his brother’s keeper, and is that a bad thing? And I said, you know what, the world is divided into those who think that they don’t have that responsibility towards the more vulnerable and those who feel that they do have that responsibility to the more vulnerable, and I said I know where I – of course we were having this in the context of the discussion of Republicans and Democrats but (laughs) I won’t get too political about this.

**Dr. Dave:** Okay.

**Newman:** I said, “I think this is a big question of your humanity, not just with your brother, but with all people. So if you’ve got a little bit of responsibility I don’t – it’s not going to be huge, and we will not consume your life but there may be some responsibility for you. At which point he just says to me, “Well, you better leave me more than half the money. Because…”

**Dr. Dave:** Yeah. Right. He’s thinking about the money, he’s saying, “How can I become rich?”

**Newman:** (laughs)

**Dr. Dave:** “I’m going to have to do this, carry his weight.”

**Newman:** *(inaudible) (46:27.0)* Yeah, he’s like, “What kind of job am I going to have to have” – and he calls his inheritance the death money. “You better be leaving me more than half the death money.”
Dr. Dave: Oh, God. (laughs)

Newman: (laughs) “Yeah, don’t worry, we’ll work that all out, I promise.” (laughs)

Dr. Dave: Yeah. Wow. Wow.

Newman: So anyway...

Dr. Dave: When we last left Gus in the book, he was, I think, he was 14 maybe then, and it looked like he was starting to have a girlfriend. What happened with that?

Newman: (laughs) Well, he did not.

Dr. Dave: Okay.

Newman: Various things happened, and so he has really – they still – he has a girlfriend to the extent that they still eat lunch together everyday. And they have had a couple more hang-outs. But he has said he’s just not ready, and wasn’t ready then, is still too babyish now, and that is just fine with me. It’s not yet part of his life. Although my other son was also very worried that Gus would beat him to it in the girlfriend arena. (laughs)

Dr. Dave: (laughs) Right.

Newman: But this particular girl, he still talks about and is very fond of, but basically keeps it in school. I have many, many photos of them together and that’s just fine but I think he’s still, even at – just turned 16, I think this is going to be a little while for him, where he understands and wants to understand the dynamics of that. But he talks all the time about having crushes on this person and that person. But to him that just means mostly having lunch together.

Dr. Dave: Yeah. Yeah. Rightfully, you are concerned about the future and about the possibility of reproduction and have...

Newman: Yes.

Dr. Dave: You’re open about that. You wrestle with that question of whether or not you should make some sort of intervention, a medical intervention...

Newman: Yeah (inaudible) (48:45.0)

Dr. Dave: ...or not.

Newman: Some people do find it appalling that I even think about this. And fortunately I think I have a lot of time, but more than anything, I want my son to have love in his life. And I want him to have a companion, whoever that is, and whatever way he wants it. But
there is a point where you go, “But should he be having children?” And right now if I look at my 16-year-old son as he is, I would say no. But fortunately, and that’s one reason I keep medical power of attorney, because I’ve thought to myself certainly two years ago I thought, “Yeah, he should have a vasectomy when he gets to be sexually active.” And I think that you’re not doing your job as the parent of a person with a disability to not at least not be acknowledging these things, thinking about them, and maybe making plans for what you’re going to do in the future. I’m very happy I don’t have to make that kind of decision now. And Gus has changed quite a bit in two years, so given how he might be when he’s 20 or 25, I may never be facing this. I don’t know. I’d like to think not, but I at least have to speak about it.

Dr. Dave: Yeah.

Newman: Because I (inaudible) (50:06.4) we all need to think about these things.

Dr. Dave: Yeah. Autism seems to be on the rise. I know you keep up with all the literature on this. What is the current thinking as to why?

Newman: Well, I do to a certain extent and there’s just within the last couple of weeks, there was a story out in Nature that I need to look at more carefully, where a couple of physicians originally from South Korea believe that they – again, whenever anybody says they believe they’ve discovered something important in mice, you have to keep in mind how often things with mice don’t translate to humans. But they believe they see a connection between certain changes in the gut biome in the mothers of all sorts of kids who have ended up being autistic and that there’s some kind of correlation between that and the autism itself. Now, they’re seeing this – excuse me, they’re not seeing it in humans, they’re seeing it in particular in mice, and more to the point they’ve apparently been able to – I don’t want to talk about it too carefully because I’m afraid that my information is wrong – but they’ve been able to create autistic characteristics by giving the mice mothers some of these particular gut flora. So...

Dr. Dave: Mm-hmm.

Newman: ...that’s very, very interesting if it’s true. And that’s the most recent thing that they’ve been talking about. Where to go from there, I’m not sure. If it ends up being that there’s something also in the gut flora of the autistic people themselves, that can be altered in some way, well, that’s going to be fascinating, but I think we’re quite a long way from that right now.

Dr. Dave: Yeah.

Newman: Maybe (inaudible) (52:11.4) As long as I think maybe 10 – I don’t know. But that’s what I’m – when I saw that story I’ve made the note to myself to really look at that more carefully because there’s something in that thinking – there’s so many theories about what causes autism, and many of them don’t make sense to me. There’s something in that
that makes sense to me. You know why? Because how has our eating changed over the last 20 or 30 years?

Dr. Dave: Uh-huh.

Newman: It has – and it’s changed with many of the foods we eat and the processed foods we eat, and so it’s to me a very interesting idea that there may be some kind of connection going on. Just in the way there is a connection absolutely about peanut allergies – I don’t know when you were growing up, but when I was growing up, nobody had peanut allergies.

Dr. Dave: Right.

Newman: Suddenly everybody had peanut allergies...

Dr. Dave: Yeah.

Newman: ...and they’re finding that doctors’ advice not to introduce the allergen in an early age has actually caused severe allergies. So doctors are now – in other countries this doesn’t exist. I’m sure you’ve heard that in Israel, for example, really people don’t have peanut allergies almost at all, and it’s because a very common childhood food has a little bit of peanut in it. It’s like a kind of a popcorn-y kind of food that’s very popular there. So...

Dr. Dave: Yeah, we read about that and my wife ordered a bunch of it on Amazon. I don’t remember the name of it, but every now and then we have that.

Newman: (cut-off audio) (53:40.9) children so maybe you should be feeding it to your grandchildren if you happen to have them. So...

Dr. Dave: Yeah, we do.

Newman: You do. So...

Dr. Dave: We did. We have. (laughs)

Newman: (laughs) Yeah, oh good! Excellent. See, I think that this is going to work out just the way I think everyone should have dogs and have dirt in their lives and stuff. A little bit of dirt is, we know, it’s good for the immune system, so...

Dr. Dave: Yeah.

Newman: I worry (inaudible) (54:04.6) go to somebody’s house and they’re asking me to take off my shoes and they have little kids, I’m like, “Uh-oh.” Too sanitary is not too good.

Dr. Dave: Yeah. Yeah.
Newman: (inaudible) (54:13.5) So it...Yeah.

Dr. Dave: Well, writing a book is maybe a little bit like having a child, and you’ve launched this delightful book into the world. What’s your hope for the book?

Newman: My hope is that – well, first of all I hope people are entertained and actually find it fun and interesting. I’ve given people the gift of short. I only believe in writing short books. So (laughs) there’s that.

Dr. Dave: Thank you. Thank you. (laughs)

Newman: Everyone expects me to say I want to further the conversation about autism and that is all true. I want very much for us to figure out all sorts of ways to embrace this growing population of people into our communities, into our lives, in whatever way we can. But my completely selfish reason, I tell everybody, is that in a few years I hope people remember Gus and they’re like, “Oh, that kid in the book. Let’s bring him in for a job interview,” because my son wants to work.

Dr. Dave: Mm-hmm.

Newman: And I’m very much convinced that – not a zillion things he can do but he can do some things beautifully and forever. And I want him to have his place at the table. So ultimately it’s entirely a selfish reason for writing a book, but then I hope that there will be larger reasons too, and that people will have this conversation with each other and with loved ones and get a laugh out of it too. That’s always a good idea.

Dr. Dave: Yeah. Yeah. And somehow you succeeded in doing that. What a gift you have, to be able to write about such a serious issue and to make it fun to read. If I recommend the book to people, I’m not going to be saying, “Hey, you want to find out everything there is about autism?” No, I’m going to say, “You want to read a delightful book? Read this.”

Newman: Yeah. Yeah. I mean, really, I try to wedge in a little bit of information but basically it’s a family book. That’s what it is.

Dr. Dave: Yeah.

Newman: And hopefully one that – I really don’t think that you need to have an autistic family member in order to get a kick out of it, and – “Or at least that’s my hope,” she said modestly.

Dr. Dave: (laughs)

Newman: (inaudible) (56:41.5) (laughs)

Dr. Dave: I think it’s true.
Newman: Thank you.

Dr. Dave: That’s a probably a good place to wrap it up. I think that’s a good final wrap-up, that statement that you made, so Judith Newman, I want to thank you for being my guest today on Shrink Rap Radio.

Newman: Thank you. And delighted to be here. And look, that was a quick hour that went by. (laughs)

Dr. Dave: Yeah! Yeah.

Newman: (inaudible) (57:08.8) After – oh, no, you can’t – there’s nothing more to talk about after half an hour, well you managed to make me gab like a maniac, so I...

Dr. Dave: I was hoping to turn you into a believer. (laughs)

Newman: (laughs) Believer. Yes. Thank you so much. Great talking to you.