

Unfortunately, addiction is somewhat common among autistic individuals: studies indicate that people with ASD are two to three times more likely to develop an addiction at some point in their lives.

One study found that individuals with ASD were four times more likely to develop an addiction than those without the condition. Another study found that people with autism who also had ADHD were more likely to develop a substance use disorder than those without ADHD.

<https://www.abtaba.com/blog/autism-and-addictions>

What Is the Connection Between Addiction and Autism?

Autistic individuals are more likely to develop substance use disorder or a behavioral addiction. There are a few theories about why addiction is somewhat common in the Autism community, including:

- Brain wiring
- Predisposition to repetitive behavior
- ASD symptoms such as hyper-fixation and obsessive tendencies
- Desire to lessen the severity of some ASD symptoms
- Wanting to “fit in” socially
- Difficulty with self-regulation
- Self-medicating with substances as a coping mechanism

Addiction Trends in the Autism Community

The following data illustrates some key trends regarding substance abuse within the Autism community.

- Individuals with ASD are twice as likely to develop an addiction problem than their non-autistic peers.
- Nearly 7% of individuals seeking substance abuse treatment also had an AUD diagnosis.

- An estimated 1 in 5 teens and young adults receiving substance abuse treatment may have undiagnosed symptoms of ASD.
- Research from the University of Cambridge [revealed](#) that alcohol abuse is somewhat lower in autistic individuals compared to the general public; however, autistic individuals were almost nine times more likely to engage in recreational drug use than non-autistic people.
- Autistic adults are three times more likely to self-medicate with drugs and/or alcohol for symptoms of depression and anxiety.

It's not uncommon for an individual with ASD to receive a dual diagnosis that includes a mental disorder. An estimated [84% of autistic people](#) also deal with some type of anxiety problem. There also seems to be a high prevalence of autistic individuals with OCD.

The most common mental health conditions that appear alongside an Autism diagnosis are:

- Attention Deficit Hyperactivity Disorder (ADHD)
- Depression
- Generalized Anxiety Disorder
- [Bipolar Disorder](#)
- Social Anxiety Disorder
- Obsessive-Compulsive Disorder (OCD)
- Schizophrenia
- Eating Disorders (e.g., [Binge-Eating Disorder](#), Anorexia, Bulimia, and Pica)

Substance Addiction

The most frequently-reported substances abused by autistic individuals include:

- Alcohol
- Nicotine
- Marijuana
- Prescription Opioids
- LSD
- Magic Mushrooms
- Heroin
- Cocaine
- Amphetamines (e.g., Crystal Meth)

Behavioral Addiction

The most common behavioral addiction among those with AUD include:

- Internet addiction
- Videogame addiction
- Gambling addiction
- Shopping addiction

Repetitive or Obsessive Behaviors

The need for a strict routine and the tendency toward repetitive behaviors are common traits of autistic individuals. Autistic people tend to hyperfocus on tasks and activities, such as video games. Unfortunately, these traits can contribute to developing a behavioral addiction.

Notably, there is a [significant crossover](#) between people diagnosed with AUD and Obsessive-Compulsive Disorder (OCD). People who struggle with obsessive and/or compulsive tendencies can become deeply attached to specific activities and habits, potentially becoming addicted to these hobbies.

Impulsivity

Autistic people, especially those with a dual diagnosis of ADHD, often struggle with impulse control. Impulsivity can lead to risky behaviors, including experimenting with illicit substances. Many drugs are highly addictive and can lead to addiction even after the first use.

Autistic people can often struggle with self-regulation, making them more vulnerable to becoming addicted to drugs or alcohol.

Mental Focus

Some substances can make a person gain a better ability to focus. Drugs like cocaine, amphetamines, and even prescription stimulants like Adderall or [Ritalin](#) can be “helpful” in allowing a person to eliminate distractions and “zone in” to a specific task.

While the ability to focus is often considered a common symptom of Autism, an autistic person may find that certain environments make it challenging to do so—like a hectic workplace or busy college library. Abusing prescription stimulants or using illicit drugs may offer them what they think is a solution to their inability to focus when their environment feels disruptive.

Overstimulation

Alcohol and some drugs can reduce sensory overload, which can seem appealing to autistic individuals that have to deal with overstimulation. They may seek these substances as a way to make the world feel less intense than it does when they are sober.

Masking

Drugs and alcohol can often reduce social inhibitions. For autistic individuals, social anxiety is one of the most common concerns they report. By using drugs or drinking alcohol, they may feel less anxious in social situations. They may also want to hide or “mask” some of their symptoms, such as social awkwardness or uncertainty around others.

In addition, some autistic people may consume drugs or alcohol because the people around them are doing it. They may feel socially pressured to fit in. Socializing can sometimes be a struggle for autistic individuals, so they may see drinking or doing drugs as a way to be part of a particular peer group because that’s what the group does.

Negative Emotions

Many autistic individuals struggle with their symptoms to varying degrees. Autism has its strengths, but some symptoms can also be very challenging. An autistic person may turn to drugs or alcohol to alleviate their negative emotions and “just get through the day.”

Depression and anxiety commonly occur alongside Autism diagnoses. People dealing with anxiety or depression, whether they have Autism or not, may turn to drugs and alcohol as a form of self-medication to lessen these feelings.

Co-Occurring Mental Illness

It is not uncommon for autistic individuals to also experience psychiatric comorbidity, which is the presence of other mental health disorders alongside their Autism diagnosis. Autistic people who are also struggling with mental illness may feel tempted to self-medicate using alcohol and/or drugs to cope with their mental disorder on top of the difficulties that Autism can cause for them.

<https://www.addictionhelp.com/addiction/autism/#:~:text=Individuals%20with%20ASD%20are%20twice,also%20had%20an%20AUD%20diagnosis.>

Individuals with ASD seem to have more hypersexual and paraphilic fantasies and behaviors than general-population studies suggest.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5789215/#:~:text=Individuals%20with%20ASD%20see%20to,for%20male%20participants%20with%20ASD.>

Sexual symptoms

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- Sexual engagement is not about connection but objectification and obtaining release due to lack of oxytocin in their system (lack of ability to connect with others or feeling bonding)
- PGAD (Persistent Genital Arousal Disorder) constant “arousal”(pressure, pain) in genitals and pelvis due to stress and anxiety being held there by autistic individuals. Sex is not about pleasure or connection but relief from the pain and pressure that continued to build.
- Need for chronic masturbation to relieve stress and the “relief/release” from the pressure/pain
- Paraphilias (frotteuristic behaviors, masturbation, sexual disorders, sexual coercion, sexually deviant behaviors, etc) due to needing sexual release to offset anxiety and stress.
- Paraphilias—Pedophilia, Transvestic fetishism, Exhibitionism, Fetishism, Voyeurism, Sexual masochism, Sexual sadism, Frotteurism, Telephone scatologia (obscene phone calls), necrophilia (sexual attraction to corpses), partialism (exclusive focus on part of body), zoophilia (sexual attraction to animals), coprophilia (erotic attraction to feces), klismaphilia (erotic attraction to enemas), and urophilia (erotic attraction to urine)—are grouped in the category “Paraphilia not otherwise specified.” It is specifically stated that these are examples, but this category is not limited to these.
<https://nursekey.com/41-sexual-deviant-behavior-and-crimes/>
- Stalking behaviors

Individuals who suffer from ASD tend to suffer paraphilic psychopathologies. The etiology of autism and paraphilia disorder is still unclear. Neurobiological approaches emphasize brain networks being disturbed in both disorders [9]. Pathologies of the amygdala and hippocampus are thought to be involved in both autism and fetishism, although no definitive studies have been conducted.

<https://www.cureus.com/articles/7295-paraphilic-disorder-in-a-male-patient-with-autism-spectrum-disorder-incidence-or-coincidence#!/>

Interpreting social cues and anticipating consequences

By definition, kids and adults on the ASD spectrum have difficulty understanding social norms, social cues and the point of view of others. Without these skills, they may not know to avoid behavior interpreted as harassment.

One problem is that harassment is vague; it can be *any repeated behavior* that makes someone feel stressed or threatened. It's in the experience of the accuser. Kids or adults on the spectrum can miss other people's subtle or **nonverbal signals** that they are not interested in a friendly—or intimate—relationship. Even when someone says "No" or "Please stop," people on the spectrum might continue because they don't understand the "why" behind it. The request seems illogical, and people with ASD best understand and respond to logic. They certainly don't foresee the potentially serious outcome....Sometimes, people on the spectrum want a relationship and lack the necessary skills. They can misinterpret someone who is kind or friendly as wanting a close friendship or intimate relationship. Their efforts to respond or initiate a friendship can be perceived as stalking. A second reason for stalking behavior is when people on the spectrum are obsessed with a person, even with no romantic intent. Another motivator for stalking behavior is seeking revenge for rejection or jealousy. Repeated texting or advances can be an attempt to get an apology or the original desired response. A child or adult with ASD might not understand rules for touching, hugging, or other violations of personal space."

<https://www.autismparentingmagazine.com/harassment-reduce-situations-people-autism/#:~:text=Sometimes%2C%20people%20on%20the%20spectrum,can%20be%20perceived%20as%20stalking.>