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# Autism and vaccines: The history and politics of the Kennedy-Trump attack on public health

## Part one of two

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In recent weeks, US Health and Human Services Secretary Robert F. Kennedy Jr. has made a series of remarks about autism that advocates, families, and medical experts have widely condemned as dehumanizing and scientifically unfounded. At a press conference on April 15, following the release of new Centers for Disease Control and Prevention (CDC) data showing that 1 in 31 American children (and four times as many boys as girls) are now diagnosed with autism, Kennedy described condition as an "epidemic" and a "preventable disease," pledging to uncover its environmental causes within months.

His selection of David Geier, a well-known anti-vaxxer and indicted fraudster to run the investigation has been seen by many in public health and the sciences as an attempt to assert the non-existent link between autism and vaccines. Daniel Geschwind, director of UCLA's center for autism research and treatment, told the *Guardian*, "The evidence is overwhelming. Inherited genetic factors contribute to at least 80 percent [of autism], and another 10 to 15 percent are attributed to non-inherited genetic factors." In other words, dysregulated autism genes that misdirect the formation of developing fetal brains exist in utero and do not first appear after children receive their vaccines, as eloquently presented by Dr. Eric Courchesne of UCSD in November 2023.

Most incendiary has been Kennedy's open denigration of the autistic, which included sweeping statements such as autistic children "will never pay taxes, hold a job, play baseball, write a poem, or go on a date." This demeaning rhetoric comes at a time when autism diagnoses are indeed rising, but experts attribute the increase primarily to broader diagnostic criteria, improved access to care, and greater awareness—rather than a sudden surge in actual cases. Nevertheless, Kennedy has dismissed these explanations as "indefensible" and doubled down on his belief that autism is driven by environmental toxins, promising a "massive testing and research effort" to identify the cause by September.

The backlash has been swift and vocal. A joint statement released on April 17, 2025, by Autistic Self Advocacy Network, Autism Society of America, Autism Speaks, and many more, declared:

> We are deeply concerned by growing public rhetoric and policy decisions that challenge these shared principles. Claims that Autism is "preventable" is not supported by scientific consensus and perpetuate stigma. Language framing Autism as a "chronic disease," a "childhood disease" or "epidemic" distorts public understanding and undermines respect for Autistic people.
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> At the same time, federal proposals to reduce funding for programs like Medicaid, the Department of Education, and the Administration for Community Living threaten the very services that Autistic individuals and their families rely on. Research must be guided by credentialed experts and inclusive of the complexity and diversity of the lived experiences of the Autism community—not redirected by misinformation or ideology. As leaders in the fields of Autism and public health, we are committed to contributing meaningfully to the ongoing dialogue and initiatives led by HHS.

Families, autistic self-advocates, and experts have pointed out that Kennedy's portrayal of autistic people is not only inaccurate but deeply stigmatizing. Fewer than 40 percent of children diagnosed with autism in 2022 were also identified as having an intellectual disability, according to the CDC, and many, many autistic individuals live independently, work, and have meaningful relationships. "He's spreading fear and misinformation," said Beth Hoffman, a parent of a non-speaking autistic child, echoing a widespread sentiment among parents and advocates. Colin Killick, director of the Autistic Self Advocacy Network, described Kennedy's remarks as "disgusting and fearmongering," emphasizing that autistic people—including those with high support needs—can and do achieve the very milestones Kennedy claimed were out of reach.

As Kennedy moves forward with his initiative to investigate the "causes" of autism, many in the scientific and advocacy communities worry that his approach will reinforce outdated stereotypes, distract from evidence-based research, and undermine the progress made toward acceptance and inclusion. The debate over his comments has become a flashpoint in the broader conversation about how society understands and supports autistic people—a conversation that, many argue, must be grounded in science, respect, and the lived experiences of autistic individuals themselves.

### A national registry of the autistic

Furthermore, Kennedy has announced the creation of a national autism registry as part of his administration's sweeping new initiative to investigate the causes and potential treatments for autism. On April 25, an HHS official released a statement maintaining that the department was not creating a separate autism registry, but rather linking existing datasets across multiple agencies to support the research.

Irrespective of how these terms are being defined, the registry or datasets, now being assembled by the National Institutes of Health (NIH), will draw on a vast array of private and federal medical records—including pharmacy data, laboratory results, genomic information, insurance claims, and even data from smartwatches and fitness trackers. The plan is to integrate these sources into a single, comprehensive database that will, for the first time, allow researchers selected by Kennedy's team to analyze "broad coverage" patient data on Americans with autism.

NIH Director Dr. Jay Bhattacharya has described the goal as overcoming the fragmentation and inaccessibility of current health data, which he says often leads to redundant spending and inefficiency. The registry will be accessible to 10–20 external research organizations, which will receive grant funding to conduct studies using this unprecedented trove of linked, identifiable health information. Kennedy has framed this registry as essential to his pledge to "find the cause of the autism epidemic" and eliminate what he describes as an "environmental toxin" by September.

The announcement of this registry has raised alarm among scientists, privacy advocates, and the autism community. Dr. Peter Hotez, a physician-scientist, vaccine expert, and parent of an autistic adult, has been a particularly vocal critic.

In a recent interview on *Democracy Now!* Hotez described Kennedy's approach as "misguided on multiple levels" and "deeply offensive." He noted that Kennedy's portrayal of autistic people as doomed to lives without work, relationships, or independence is not only factually incorrect—many autistic adults work, pay taxes, and otherwise lead fulfilling lives—but also perpetuates stigma and dehumanization. Hotez warned that Kennedy's rhetoric and the creation of a government database tracking autistic individuals evoke "a kind of creepy tone," reminiscent of eugenicist thinking, and risk setting back public understanding of autism by decades.

Beyond the ethical and privacy concerns, Hotez and other experts question the scientific premise of Kennedy's project. Hotez emphasized that autism is a complex condition with hundreds of genetic contributors and a multifactorial etiology involving both genes and environment, not a single cause to be discovered and eradicated in a matter of months. He cautioned that the registry, in the hands of an administration seeking to validate predetermined and discredited theories—such as the debunked link between vaccines and autism—could be misused to justify harmful policies, further stigmatize autistic people, and divert resources away from evidence-based support and inclusion.

## The Nazi "*Lebensunwertes Leben*" program

Critics have drawn direct parallels between Kennedy's language and the pseudoscientific justifications used by the Nazi regime to rationalize the systematic murder of disabled people.

They note that framing autism in terms of its financial toll, rather than focusing on systemic barriers to inclusion, mirrors a "dehumanizing calculus" seen historically. This rhetoric, they warn, risks normalizing the idea that some lives are disposable and could divert funding from crucial support services towards speculative interventions. The concern is that Kennedy's approach, which seeks to "identify and eliminate" supposed causes, aligns with eugenic strategies aimed at eradicating disability, harkening back to the Nazi concept of "*Lebensunwertes Leben*" (life unworthy of life).

The Nazi regime's persecution and extermination of disabled people were rooted in a bio-racial philosophy that sought to fundamentally alter the biological and racial makeup of Europe. This ideology stemmed from late 19th and early 20th-century eugenics and racial hygiene precepts, which were radicalized under Nazi rule to prioritize the blood purity of the German population.

The concept of "life unworthy of life" justified actions against the disabled, starting with sterilization (enabled by the 1933 Law for the Prevention of Genetically Diseased Offspring, which targeted the "hereditary disease") and escalating to systematic murder. The Nazi euthanasia program, known as *Aktion T4*, pioneered techniques deployed on an even vaster scale in the Holocaust. It targeted institutionalized mentally ill and physically handicapped individuals. The policies established under the program allowed doctors to violate their own ethical principles by developing methods of selection and killing.

Criteria for selection often included those institutionalized for at least five years, unable to work or only capable of "mechanical work," the criminally insane, and "foreign nationals or racial aliens." Lack of productive work was a decisive criterion. These individuals were deemed "*Ballastexistenzen*" (ballast existences), seen as economically unproductive and a burden on the state. The program involved registering and selecting victims based on questionnaires reviewed by medical experts, who decided life or death often solely on the information provided. The victims were transported to extermination centers and killed using carbon monoxide gas in chambers disguised as shower rooms. An estimated 300,000 mentally ill and handicapped people were murdered by the Nazi state between 1939 and 1945.

This extermination program of the disabled was, in many ways, prototypical to the development of the Final Solution. Overlapping phases existed, particularly targeting the Jewish mentally ill who were systematically killed under *Aktion T4* simply for being Jewish, over and above any consideration of their mental illness. The infrastructure, techniques (such as gassing), and personnel trained and employed in the *Aktion T4* program were transferred to the death camps of Aktion Reinhardt, which carried out the mass murder of Jews. The involvement of medical professionals and bureaucrats in this "mechanization of murder" was facilitated by the ideology that certain forms of life were "life unworthy of life."

Disability studies scholars note that Nazi euthanasia represents the most terrible demonstration of what can happen when disabled people are stripped of their humanity. The historical connection between the killing of the disabled and the broader program of genocide highlights how the classification of disability as a form of biological inferiority served as a foundation for Nazi eliminationist policies. Contemporary concerns arise when rhetoric focuses on eliminating disability or views disabled individuals primarily through the lens of economic burden, as did Dr. Mehmet Oz when he was sworn in as administrator of the Centers for Medicare and Medicaid Services, when he admonished Americans it was "the patriotic duty of all Americans to take care of themselves … because healthy people don't consume healthcare resources." These words echo the dangerous dehumanization seen in the past.

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