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## CURRENT ISSUES

### On the Ontological Status of Autism: the 'Double Empathy Problem'.

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#### Abstract

In recent decades there has been much debate over the ontological status of autism and other neurological 'disorders', diagnosed by behavioural indicators, and theorised primarily within the field of cognitive neuroscience and psychological paradigms. Such cognitive-behavioural discourses abstain from acknowledging the universal issue of relationality and interaction in the formation of a contested and constantly reconstructed social reality, produced through the agency of its 'actors' (Garfinkel, 1967). The nature of these contested interactions will be explored in this current issues piece through the use of the term the 'double empathy problem' (Milton 2011a), and how such a rendition produces a critique of autism being defined as a deficit in 'theory of mind', re-framing such issues as a question of reciprocity and mutuality. In keeping with other autistic self-advocates, this piece will refer to 'autistic people', and 'those who identify as on the autism spectrum', rather than 'people with autism' (Sinclair, 1993).

#### Introduction

Socrates: ...Can you point out any compelling rhetorical reason why he should have put his arguments together in the order that he has?

Phaedrus: You do me too much honour if you suppose that I am capable of divining his motives so exactly. (Plato, 1973: 78).

In recent decades there has been much debate over the ontological status of autism and other neurological 'disorders', diagnosed by behavioural indicators, and theorised primarily within the field of cognitive neuroscience and psychological paradigms. The triad of dominant theories that include: theory of mind deficit, executive dysfunction, and weak central

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coherence theory, as well as behavioural diagnosis and behavioural psychological intervention paradigms; all position autism as a neurological disorder, a pathological deviance from expected functional stages of development. This approach when applied to the

education of those diagnosed becomes a ‘treatment program’ of modifying the ‘autistic person’ as ‘best one can’ to fit in with the mainstream culture of society. Such views are informed by research that champions the use of the randomised controlled trial, yet discounts the subjective experiences of those who identify as being on the autism spectrum themselves as worthy of rigorous academic study. Such cognitive-behavioural discourses abstain from acknowledging the universal issue of relationality and interaction in the formation of a contested and constantly reconstructed social reality, produced through the agency of its ‘actors’. The nature of these contested interactions will be explored in this current issues piece through the use of the term the ‘double empathy problem’ (Milton 2011a), and how such a rendition produces a critique of autism being defined as a deficit in ‘theory of mind’ and social interaction, re-framing such issues as a question of reciprocity and mutuality.

### **Assumptions of social relationality**

The inability to ‘read’ the subtext of a social situation is often deemed to be a major feature of those diagnosed as being on the autism spectrum, yet it is suggested here that social subtext is never fully given as a set of a priori circumstances, but is actively constructed by social agents engaged in material and mental production. There is a tendency in the application of positivist methodologies in cognitive psychology and science to incorrectly assume that there is a set of definable social norms and rules that exist for people to follow. This ideology is also supported more explicitly by functionalist sociologists. This is not the philosophy propounded by those of a phenomenological or ethnomethodological persuasion however. The ‘theory of mind’ and ‘empathy’ so lauded in normative psychological models of human interaction, refers to the ability a ‘neuro-typical’ (NT) individual has to assume understandings of the mental states and motives of other people. When such ‘empathy’ is applied toward an ‘autistic person’ however, it is often wildly inaccurate in its measure. Such attempts are often felt as invasive, imposing and threatening by an ‘autistic person’, especially when protestations to the contrary are ignored by the NT doing the ‘empathising’.

*The ‘double empathy problem’: A disjuncture in reciprocity between two differently disposed social actors which becomes more marked the wider the disjuncture in dispositional perceptions of the lifeworld - perceived as a breach in the ‘natural attitude’ of what constitutes ‘social reality’ for ‘neuro-typical’ people and yet an everyday and often traumatic experience for ‘autistic people’.*

To expand on the above definition, the ‘double empathy problem’ refers to a breach in the ‘natural attitude’ that occurs between people of different dispositional outlooks and personal conceptual understandings when attempts are made to communicate meaning. In a sense it is a ‘double problem’ as both people experience it, and so it is not a singular problem located in any one person. Rather, it is based in the social interaction between two differently disposed social actors, the disjuncture being more severe for the non-autistic disposition as it is experienced as unusual, while for the ‘autistic person’ it is a common experience (Milton, 2011b). The ‘empathy’ problem being a ‘two-way street’ has been mentioned by both ‘autistic writers’ (Sinclair, 1993) and NT writers alike (Hacking, 2009), yet despite such protestations, the ‘lack of theory of mind’ myth persists.

### **The stigma of being ‘othered’ and the normalisation agenda**

To be defined as abnormal is potentially to be seen as ‘pathological’ in some way and to be socially stigmatised, shunned, and sanctioned. Then if there is a breakdown in interaction, or indeed a failed attempt to impose upon or align toward expressions of meaning, than a person who sees their interactions as ‘normal’ and ‘correct’ can denigrate those who act or are perceived of as ‘different’ (Tajfel and Turner, 1979). If one can apply a label on the ‘other’ locating the problem in them, it also resolves the applier of the label’s ‘natural attitude’ of responsibility in their own perceptions and the breach is healed perceptually, but not for the person who has been ‘othered’ (Said, 1978).

### **Internalised oppression and psycho-emotional disablement**

The imposition of one’s views upon another and the subsequent internalisation of this view can be seen to be a form of internalised oppression, where the negative connotations of the normative model of pathological difference becomes a self-fulfilling prophecy (Becker, 1963), leading to a self-imposed psycho-emotional disablement (Reeve, 2011). For those who resist such self-identifications and attempts to normalise, however ‘well intentioned’, are experienced as an ‘invasion’ of the ‘autistic’ ‘lifeworld’ by people wanting to modify one’s behaviour to suit their purposes and not one’s own (Milton and Lm, 2012).

### **Autism and knowledge production**

Although compared to many categorisations of disability, autism has attained a great deal more public attention and that one could say that the label has become a fetishised commodity and even a global industry (Mallet, 2011), yet it is an industry that silences the

autistic voice from any participation, other than in the form of a tokenistic gesture. Therefore, far from owning the means of mental production about one's own culture, the 'autistic individual' becomes the 'product' of the industry, the 'thing' that is 'intervened' with. 'Services' are provided for the carer's of 'autistic people' with often little attention given to the needs of the 'autistic person' as they perceive them to be. Autism is not just an 'invisible disability' to many in terms of a behavioural definition, the 'autistic voice' is made 'invisible' within the current culture of how knowledge produced about 'autistic people' often excludes empowered 'autistic advocates' from such processes.

### **Implications for service providers**

There is a spectrum in theory and practice more generally regarding service provision for 'autistic people', between at one end those adhering to techniques of behavioural modification, so that children are socialised into what are deemed appropriate behaviours of socially functional future roles. At the other extreme of this spectrum is an ethos of interactive mutuality concerned with the empowerment of individuals and communities, and where dominance and imposition of authority is seen as 'dysfunctional'. Expressions of these extremes could be said to be found more frequently in discourses regarding best educational practice for 'autistic people', ranging from the efforts of the Lovaas model of Applied Behavioural Analysis, through to child-focused and democratic educational ideological preferences. These narratives and practices can be said to be embedded within the wider discursive debate that exists between the medical and social models of disability as played out in the field of autism. It is the view of this author that there is an increasing complacency around the idea that lead professionals and practitioners have a good understanding of what 'good autism practice' entails, for me this is an ongoing imperfect process of interaction and should never be seen as a given.

### **Conclusion**

The lack of 'social insight' seen to be manifested in the actions of 'autistic people' is both biologically and socially derived, and yet is also historically and culturally situated in discourse. The experience of a lack of realisation or the lack of insight is a very common one in social interactions of many varieties however, and leads to the 'double empathy problem' between differently disposed social actors. Such divergences of perception are inevitable to a greater or lesser extent. So it is true that autistic people often lack insight about NT perceptions and culture, yet it is equally the case that NT people lack insight into the minds

and culture of 'autistic people', or that they may lack social insight in other social situations due to an easily repaired natural attitude, and the aligning tendencies of their peers. One could say that many autistic people have indeed gained a greater level of insight into NT society and mores than vice versa, perhaps due to the need to survive and potentially thrive in a NT culture. Conversely, the NT person has no pertinent personal requirement to understand the mind of the 'autistic person' unless closely related socially in some way.

In analysing the interactions that 'autistic people' have with the wider population, it is easy to problematise the definition of autism as a 'social deficit' located within an individual's mind. Differences in neurology may well produce differences in sociality, but not a 'social deficit' as compared to an idealised normative view of social reality. Such definitions may help to signpost disability support services, but they are no way of defining autism in any kind of holistic sense.

*Socrates: But suppose the words used are 'just' and 'good'. Don't we then go each his own way, and find ourselves in disagreement with ourselves as well as with each other?*

Phaedrus: Undoubtedly. (Plato, 1973: 77).

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