Constructing autism inside and outside the clinic: Exploring relationships between psychoanalytic psychotherapists' and activists' discourses.

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Abstract

This research investigated the construction of autism in clinical and social terrains. Study one drew from Critical Discursive Psychology (CDP) to examine the language of psychoanalytic psychotherapists in constructing the phenomenon of autism spectrum disorders. This study relied on interview data with eight experienced psychoanalytic psychotherapists using a Free Associative Narrative Interview design. The investigation of the therapists' discourses revealed four main interpretive repertoires that organised the rhetorical agenda's of participants. The analytic notions of interpretive repertoires, ideological dilemmas and subject positions demonstrated how neo-liberal political frameworks influenced the therapists' negotiation of the meaning of autism. The implications of this discursive framework were subjected to a critical analysis revealing the limitations that they impose on the possible ways of being for autistic people.

The second study used multimodal analysis to investigate an activist's momentary identities on a "viral" YouTube video entitled: "In My Language" (see appendix 4). It focused on the verbal and non-verbal elements of the video material. The analytic attention predominantly settled on the interplay between the various semiotic resources that the activist utilised to negotiate a multiplicity of meanings. A wide range of identities produced by the participant's social actions, exploring a political manifesto against the social oppression exerted on people with autism. The findings suggested that meaning-making inside this video was intricately related to the pathological language that saturates autistic lives from their beginning. This study also considered how multimodal designs of research could add to the investigations of disability and autism studies, pointing to the need to employ more autism lead research in the clinical and non-clinical sites.

The findings from both studies highlighted two critical factors in autism as a discursive and multimodal phenomenon occupying a socio-cultural niche. A) Autism evolves through a conflictual and irreconcilable discursive framework. This conflict reflects profound issues of power that were taken as residing in a micro-fascism political dynamic. B) A need to break from the dichotomous deployment of autism in the

current political setting is becoming apparent. The current clinical and social arrangement needs to change; a negotiation in which psychoanalytically and relationally inspired disability politics may become central. Part of this new "diplomacy" lies in engineering new discursive research designs that could offer the opportunity for the two realms to inter-relate in unforeseen and unpredictable ways.

TABLE OF CONTENTS

CHAPTER ONE

Introduction

1.1 Introduction to the thesis

The foundations of this research adventure were planted many years ago when as a young practitioner I found myself in the opaque landscape of autism. As I struggled to frame my theoretical and clinical understanding of this phenomenon, I oscillated between either a need to provide a "remedy" for the "disordered" individual or a desire to engage freely in a mutual relational choreography outside the conventional practices of life and therapy. In this vein the current research has been the result of some very intimate moments where I found myself acting both as a social regulator and a democratic advocate of the child's subjective world.

In general, I conceived this thesis as the operationalisation of my personal conundrums in the vast space of the autism universe. Whilst this thesis started with a predominantly essentialist outlook searching for a core definition of autism it later ended up being my own rebellion against positivistic understandings of the condition (Biklen et al., 2005). I now advocate that there are multiple constructions of an autistic subject that barely stabilise in the context of my thinking. The task of this thesis then has shifted from exploring the core essence of the autistic subject to unmasking the multiple positions that the individual can assume in the context of talk about therapy and the everyday multimodal discourse.

Since the initial conception of autism large amounts of autism research have predominantly focused on the pragmatic deficits of the disorder (Broderick & Ne'eman, 2008). In this vein most clinically related autism research intended to provide robust and

consistent data that would define the core deficits of the condition and also the efficacy of the treatment protocols (Waterhouse, 2013). Much of the empirical and critical research in autism therefore developed across the health-disease dualism. This included many clinically related studies and also many extra-clinical investigations. In this respect while there have been various attempts to explicate the role of power and the discursive effects of power as a regulatory activity on autism, there has never been a research study that would examine the mutual deployment of this presumed dualism as part of the same research project. The present thesis then is an attempt to bring together those separate cultural environments. While doing this it tries to examine the way language functions in each one of them separately but also in its complementariness.

This first study conducted in this project aimed to discursively capture the psychoanalytic therapist's use of language in their encounters with autism. Autism has been associated with the views of a limited number of analysts, producing adverse reactions to the scientific and non-scientific community. The review of the literature of psychoanalysis showed that psychoanalysis offers an intertextually rich corpus of theories in order to account for the lives of people with autism (Georgiou, 2014). These discourses and ideas have been, as Broderick and Ne'eman (2008) noted, part of the mythologising past, present and possibly the future of autism. They have contributed, to the reification of autism, causing considerable critique, discredit and scepticism (Nadesan, 2005).

Psychoanalytic discourses, especially during the past, pronounced a hegemonic voice, which appropriated autism as an object of psychoanalytic scrutiny. This type of categorization gave life to acts of resistance from those populations that found themselves mesmerised by them. In the same directionality, we have witnessed and

continue to do so what Yergeau (2017) noted as a series of 'coalition' histories, an arrangement of the opposite forces that came to craft the meaning of autism away from the premises of the clinic. The second study then investigated the way an autism activist tried to fight against inequity while crafting a multimodal online video.

Accordingly the following research questions provide the primary context of this research:

1) How is autism constructed through the therapist's talk and what types of subject positions do these constructions entail?

2) How did the therapists and the interviewer orchestrate their discursive repertoires and what were the effects of these mutual negotiations for the possible ways of being of the autistic subject?

In the same fashion the second study mainly asks:

1) What kinds of identities become visible within this type of amateur-video activism?

2) What types of citizenship do these identities enable or delimit?

3) How is meaning negotiated through the various semiotic units that exist in the video?

4) How do certain social languages become more or less voiced crafting a kaleidoscope of identities for the activist?

Separately, each study explored the construction of autism in the two diverse social settings. The psychoanalytic clinic was expressed by the free-associative talk of the analysts interviewed. The voice of the activist was reflected in the video-making activity as this was uploaded to the YouTube social platform. The first study, mainly investigated the construction of autism in the language of psychoanalysis and the creation of different subject positions through recognizable interpretive repertoires. Standing as an

interrelated complement to the first study, the second one was an attempt to focus on the everyday practices of the autism activist as these were portrayed in the popular YouTube platform. By asking questions of identity formulation and paying attention to the vast array of meaning making resources, this study voiced the activist's struggle to resist the subordinating discourses that impact autism. Towards the end of the thesis there is an attempt to bridge the divide that lies between the clinical and the non-clinical autism universe. The results from both studies are then reconsidered in a dialogic spirit in an effort to unmask the rhetorical strategies that weave the fabric of autism into its current historical niche. In their complementariness the two studies arouse an imaginary dialogic platform where both social players develop as unique yet irreconcilable discursive fields.

CHAPTER TWO

Autism Spectrum Disorders (ASD): A critical perspective

2.1   Introduction

'If there is one takeaway from what I here write, it is this: what we do not know, and what we often purposively ignore, are autistic narrations of such rhetorical events, the interbodily potentials, desires, and moments that structure an autistic life, or any life. To whom do we listen? The autistic or the nonautistic? Can there ever really be an in-between? What of my shit? What of my unhuggable body? What of me? What of autos, the self that so consumes the presumably autistic? Where the fuck are we?' (Yergeau, 2018, p. 4)

'Theories are created

For reasons observed

Theories are broken

For reasons replaced

As old order goes by

They inspire the new

We watch them die

With our obscured view

So what if a Theory Says something

It doesn't change for sure

Any — Thing.

I may be that

And I may be this...

Who Cares anyway?

I am a Proud Autistic'. (Mukhopadhyay as cited in Savarese, 2016, p. 12)

The phenomenon of autism has attracted a great deal of attention in the academic and professional literature over the last 70 years. It has often become a disputed subject, 'a boom industry' (Hacking, 2009, p. 499; Timimi, Gardner & McCabe, 2010) and has reached critical proportions (Murray, 2008; Nadesan, 2008). Ever since Kanner (1943) named the condition, it has been credited with numerous representations, many of which could be seen as an effort to re-invent its raw and emergent materiality and to regulate societal anxiety, associated with the increase of autistic cases in the general population (Verhoeff, 2012). The public imagination around autism has developed rapidly, giving life to identifiable voices around 'what autism is', 'what autism is not' and the way that autistic lives could be storied and thus lived (Yergeau, 2018). The apparent variability of autism has become so disrupting that authors like Waterhouse (2013) emphatically stated that 'the central challenge to studying autism has been its heterogeneity' (p. 2).

Autism, except a vast philosophical jargon, became the point where individual subjectivity settled into a complex realm of intersecting discourses posing the poignant question 'who are we to believe?' (Nadesan, 2005; Yergeau, 2018). Several publications tried to explore this multivocality by assuming a critical constructionist framework (O'Dell, 2016). In general, this line of thinking emphasised the fact that since its initial conception, it has been spoken by many language cultures. For instance, an impressive accumulation of data has been

reviewed in Murray's (2008) 'Representing autism', emphasising the way that the stories about autism affected its situated and public appearance.

Autistic life and autistic ways of being are usually inhabited by dominant discourses, which elaborate autism in ways that are intensely pathologising and damaging (Waltz, 2003). Autistic individuality tends to be alienated so that humanity can celebrate its normative status across the disabled bodies (Hacking, 2009; Waltz, 2013). Autism literature underlines the powerful effects of representation over autistic lives. This takes place through the impressive accumulation of new narrative that does not necessarily result in a conducive widening of understanding. It is proposed that navigating into the autistic universe most of the times embraces the logic of war against those that seem deviant and different. Autism is usually seen as something that should be fought about, almost as if it was an act of terror against average humanity (Maguire, 2016).

The ambiguous theorisation of autism is sometimes interpreted either as a kind of societal fetishisation or as an indication and celebration of diversity and democratisation of autistic life (Wexler, 2016). Schreibman (2005) portrays the breadth and multiplicity of representations around autism as extending from the laborious inquiries of scientific research up to the hills of novelist imagination.

2.2 Selecting the literature

With autism extending into a large number of academic and non-academic fields I had to devise a search strategy in relation to the literature review (Hart, 2018). From the beginning of this project in 2009 and for nearly three years I engaged in an extensive search of the literature in order to be able to provide a thorough and comprehensive review. Two main points were attended to when searching for relevant material in the literature. First, while I had to find all relevant psychoanalytic literature, I also had to give particular emphasis to the

medical literature. Since the medical literature in autism is very extensive, I decided to focus on the seminal works that seem to provide the hegemonic understanding but also the historiography of autism. My inclusion criteria for this matter corresponded to authors who have been sited widely and also those who currently provide some more critical views on the medical perspective of autism. In relation to the psychoanalytic literature, I decided to emphasise those central publications that were produced by the object relations school, since this is the most practiced let alone recognisable school of thinking in the psychoanalytic therapy of autism (Kenny, 2019).

However, I did not delimit my search only to this field. Therefore, I expanded my search to the most seminal papers of other schools of thinking in some other regions of the world. As a result, I finally attended to the work of keynote French writers who published in English. The second wide array of literature that I attended to stemmed from work conducted on autism and disability. As part of this process I searched widely in the literature on disability, in critical studies of autism and also other publications such as autism memoirs and activists' texts. Stemming from this three-fold perspective the initial output of this search provided a broad range of published material that I interpreted as an indication of the importance of critical work in autism and disability.

In order to locate the relevant literature I accessed some of the most widely known search engines that are currently in use in the social sciences. My search in the following databases and popular social science media (PsychInfo, ERIC, google schoolar, Dissertation Abstract International, Academia Edu, Psychoanalytic Electronic Publishing and Research Gate) included keywords that oriented to the main focus of this study. In this vein, I devised a long list of relevant keywords (see appendix 8) that I examined either in isolation or in combination with each other. This strategy allowed delimiting the vast numbers of papers that appeared when keywords were used in isolation. For example, a search for "autism"

provided hundreds of thousands of hits while a search for "autis* AND discours*" efficiently delimited the number of results. Because of the fact that the literature on autism is quite recent my literature search did not use any specific chronological limitations. Also, my selection of the empirical papers that studied autism was not limited to discourse analysis but also strived to incorporate other methodological approaches, such as conversational analytic and critical discursive. Finally, my strategy of locating relevant literature consisted in a very elaborate skimming of the reference list in the most central bibliographic material. Twice during the course of this thesis, I had to adapt my literature review due to having to include more seminal publications that appeared later in the course of the project.

2.3 The critical investigation of the autistic phenomenon

The critical investigation of autism and other mental health phenomena has lately been constituted as a new curriculum, fostering a growing number of publications that challenge the insights of traditional research paradigms (Davidson & Orsini, 2013; O'Dell et al., 2016; O'Reilly & Lester, 2017). By relying heavily on social constructionism, post-modernism and a post-structural understanding of the language of human distress, the study of autism and its subjective nature acquired new dimensions leading to the questioning of its core principles. Critical work in mental health, as Parker et al. (1995) suggested, is about deconstructing the way that meaning systems work on the experiences of things and selves. Deconstruction points to a process of critical inquiry concerning the patterns of talking that inform the way people position themselves inside the cultural and relational matrix (Parker, 1995).

O'Dell et al. (2016) suggested that approaching autism from a critical perspective should involve at least three overlapping areas of thinking:

- The first one, involves approaching autism from an inter-cultural point of view leading to the examination of the ways that each culture gives life to different performances of it.

- The second, deals with acknowledging the fact that the identity or else subjectivity of autistic people changes significantly between the different social terrains, emphasising the fluid and complex constitution of identities.

- The third, is about studying the implications of power relations and state provision about therapy and treatment. This idea considers the multiple ways of producing and perpetuating the institutional character of autistic lives.

Nadesan (2005) offered a rich account of autisms' construction inside history and up to the present point. She appeared highly sceptical about the state of autism in current knowledge regimes. Her primary purpose was to unmask the 'truths' that constitute autistic realities while providing an alternative reading against them. Although autism is a condition that lies in biogenetic roots, autistic lives should be examined across the multiples ways that are talked. This examination reveals the multiple varieties of representation that domesticate lives in neo-liberal Western societies, providing ways of framing the autistic phenomenon.

2.4   Constructing autism as a transient illness and niche disorder

A critical elaboration of autism is to understand it as a niche or transient disorder. Although the two terms stem from different backgrounds, their function is to provide a social extension to discrete categories of mental life. A simplistic definition of a niche disorder is one that is produced by a complex interaction of historical-societal-political-and cultural conditions (Hacking, 1998). The repercussions of this thinking framework are varied. The most important thereof relate to the fact that autism is not something that was discovered in vitro, but a condition that gradually came into life within a complex combination of cultural social and institutional practices (Hacking, 2009b).

Several authors favour the social construction of autism in the broad field of disability studies (Glastonbury, 1997; Osteen, 2008). Hacking (1998), locates similarities between autism, schizophrenia and hysteria and claims that these disorders appear under certain social conditions. His account is a demonstration of the interaction between culture and biology, or else the interaction between ideas and material bodies (Georgiou, 2014).

The core of Hacking's theory lies in the fact that through a process of 'bio-looping', classificatory systems such as autism can be affected by environmental practices and social attitudes. Even though autism has a biological component, autistic lives are formed within a constellation of complex social dynamics (Hacking, 1999; McDonagh, 2008; Nadesan, 2008). There is a restrictive dualism in this account, but its moderate constructionist stance could sound more compatible with the way mental illness has been theorised in Western culture (Cromby, Harper & Reavy, 2013).

Autism develops distinctive and sometimes fragmentary and contradictory characteristics between the different locations of social lives. For a growing number of social institutions like medicine, psychology, therapy, education, the school, family, the law, public media, autism's local and worldwide associations or even for most forms of art just to name a few, the meaning of autism has become highly contested, contributing to what might be described in a Bakhtinian sense as the 'heteroglossia' of autism (Morris, 1994). For example, empirical medicine sees autism as a series of brain impairments caused by the ''faulty wiring diagram'' (Ortega & Vidal, 2011). Citizen-based autism activists find this definition as dismissive and unfeeling towards the neurodiversity of humans. Its normal variation is discounted and not merely defined as a difference rather than disability. Equality considerations allow the autistic citizen to be imbued with as many rights as the neurotypical one (Timbault, 2014).

2.5   Multiple voices in autism: Investigating discourses

Bakhtin's (1981) understanding of heteroglossia, is associated with a noted and profound dynamic relationship between voices, genres and social languages. The rising visibility of different languages, genres and voices are so intriguing that it calls for a research investigation. The fundamental nature of this inquiry relates to the effects of language on the unique ways of experiencing autistic life. The radicalisation of the above question is associated with the initial musings of this research that correspond to a series of derailing questions:

'What if all language around autism got lost one day? What would we be left with to narrate if suddenly all semiotics around autism disappeared out of the blue? How could our autistic and non-autistic musings go on existing and how would autistic bodies keep pacing for the rest of that day? Would they be different and in what ways? Would they fall in a semiotic vacuum with nothing to story, no place to go? Would they even exist?

A thing cannot exist without it being described in human language. It is by definition ''unknown'' if it does not have an agreed language. In Villeneuve's film, "Arrival", humans and aliens cannot communicate (with worryingly escalating consequences). However, this is not just because they do not understand each other's spoken language. There is also no agreement between them on the fundamentals of symbolization and the purpose of communication. Barthes (1977b) indicates that narrative can be transmitted by verbal and non-verbal means, often through "an organised mixture" of all these forms of communication. Barthes' (1977a) ideas about the Author and the Scriptor may be relevant here. No new position can be produced, but the agreement is a constant realignment of positions that have already been taken in the literature. There is no theory. It is the combination of positions that defines novel thought

CHAPTER THREE

Exploring the multiple voices of autism

3.1   Stories of autism: Destinies through past discourses

Autism started life as two professional voices separated by war (Waltz, 2013). In the USA, Kanner (1943) described the ethereal, "other-worldly" boys with whom he had contact in various state institutions. In Nazi-Occupied Austria, Asperger examined the same children and wondered at their brilliant but highly stereotyped intellect. Scheffer (2018) points to some darker voices with the Nationalist Socialist voice of "useless mouths" enacted through the Aktion T4 extermination programme. Adherents of the planned eugenics programmes in the United States were not far behind the sterilisation of undesirable additions to the gene pool.

One might date the history of modern psychiatry to the 1830s when a group of eminent physicians asked the Bavarian government for funding for the care of psychiatric patients. The government agreed but with no proviso that a tariff structure was needed to determine how much these conditions would cost them. Thus, needs-based classification was born, which still exists as the NHS ICD-10 care clustering system (WHO, 1993). As part of this process, autism endured a rapid shift that coincided with the gradual identification of many of today's nosological entities (Rose, 2019).

During the shift of the previous century, the new visibility upon children caused the emergence of new forms of family and childhood management and regulation. This reconstruction entailed a double bind that included, on the one hand, the privatisation of the working-class family and its contents and on the other hand the development of a new range of social agencies and authorities entitled to normalise, control and regulate the

population (Rose, 1999). The new visibility acted as a vital catalyst in forging the destinies of autistic people.

Historical investigations of autism locate the existence of it in earlier ages (Waltz, 2013). One of the soundest cases is the one referring to Hugh Blair of Borg. In this case, autism, expert Frith and the historian Houston attempted to trace and to make a clinical justification through investigating public historical documents (Houston & Frith, 2000). According to them, the behaviour of Hugh Blair coincided with what we currently recognise as core deficits in autistic disorders. Their monograph included rich details that not only attended to the behaviour of Hugh but also concerned other aspects of his social activity. The authors carefully provided stringently detailed information about this case sketching the family and the social context of the 17th century. In general, the descriptions of the court emphasised the mental and social incapacities of Hugh. The emphasis on his delinquent character and his apparent idiocy are indicative of the stigmatising discourses that existed since the 17th century.

Shortly after the establishment of the first mental institutions, the case of the 'wild boy of Aveyron' appeared as the first genuinely scientific case that resembled autism. This narrative was about a boy who was found lost and neglected inside a forest in the French countryside and was later accepted for treatment by a French medical doctor called Jean-Marc Gaspard Itard. Itard treated the boy using innovative techniques that were quite similar to current treatments targeting sensory and behavioural components of human functioning (Waltz, 2013).

Itard insisted that the boy was not congenitally retarded but that his condition was a reaction to the intense struggles of his life in the forest and the activation of his survival instincts, resulting in a complete loss of his humanity. By describing his condition as a coping mechanism, he tried to bring new ideas about the contribution of nature and nurture to the

constitution of the self. What he fundamentally tried to justify was that individualised treatment could help alleviate the implications of environmental or innate, constitutional defects, an idea that is still evident in current therapeutic practices (also see next chapter). In this way, Itard opened the way to the clinicians who appeared sympathetic to an idea of treatment of mental disability and the effectiveness of individualised therapy (Wolff, 2004).

3.2   Changing discourses about childhood through the discovery of autism

Describing something brings it into existence. Description through diagnosis provides the opportunity to treatment. This process brings the "relief of explanation" to the patient, their family and the law and considerable monetary recompense and high social rank to the health professional involved. New forms of description and diagnosis also create new representations of childhood, and also new forms of juvenile guidance and surveillance (Rose, 1989). The new view of childhood develops across evaluative binaries and most notably across the normality pathology division calling for action towards delinquent and maladaptive children.

Historical elaborations of childhood alert us towards the fact that children and childhood did not always enjoy the same attention and visibility that they hold nowadays (Hultqvist & Dahlberg, 2001). In her '*Centuries of Childhood'*, Aries (1962) suggested that the discourse around children was mainly adultomorphic, and thus infant individuality was more or less obscured and negated. Aries concluded that children's appearances changed importantly after the seventeenth century, where the infantile selves achieved a higher status of innocence encapsulated in a newly formed infantilising vocabulary.

These new styles of talking about infancy seemed to alter the affective and relational perspectives of children's nurture. Children began to be thought of as distinct forms of life, opening the terrain to a new public imagination. Lock wrote about the infant being a tabula

rasa, and he is perhaps the first to describe the child as having agentic and interior qualities that could be placed in the provision of education and learning (Moore, 2008). The new child discourse brought changes to parenting attitudes that involved more active participation and took distance from the prevailing Aristotelian and Christian logic, which emphasised the deterministic accounts of childhood (Pollock, 1983). Once it started, this changed attitude towards children affected childhood practices, by shifting the ambitions and anxieties of the middle and higher social classes (Aries, 1992; Nadesan, 2010).

3.3   Naming and defining autism through the use of the medical gaze

This section highlights the powerful effects of medical discourses that mostly position autism inside the moral frameworks of health-illness and normality-pathology. It examines the birth of new vocabularies against the motivations, anxieties and fears of the population with regards to raising healthy and 'normal' children and the new authorities of medical psychiatry, child guidance and mental hygiene. Simultaneously, it harvests some of the ideas that appear relevant to this text and that stem from Kanner's classical text about autism. Finally, it provides selected references to the work of Asperger in order to place autism in its historical context.

Such discourses were about the importance of breeding children correctly. In England for example, there was an increasing interest among the aristocracy about maximising advantage through breeding sturdy livestock. These principles were simply applied to children as well (James & James, 2008). A biological, Darwinian discourse took over from the previously moral position of the 'natural gentleman', but the importance of breeding remained (Aries, 1962).

As it appears in several historical considerations (Hultqvist & Dahlberg 2001), it was the appearance of Freudian ideas with regards to psychopathology that altered the dominant

views of the child's problematic symptomatology. Freud overtly pronounced the effect of childhood experiences on adult pathological conditions. He stayed in line with the romantic views of childhood while loading the child with an abundant instinctual life that acted as an interior force that navigated the child into relationships with the external environment. His understanding of neurosis as lying upon childhood trauma legitimised the therapeutic remediation of the suffering population.

The penetration of Freudian ideas into scientific and mainstream thinking was intense. It signified the departure from the mainstream organic Kraepelian understanding of mental disease towards a more psycho-biological view. These new understandings gradually fueled the monitoring of juvenile lives while intensifying the anxieties and fears of modernised families concerning child development. Society thus, turned to raise more socially adaptable children that would ultimately not become societal burdens exhibiting offending or disruptive behaviours (Donzelot, 1979).

New institutions such as mental hygiene have been established to prevent deviant forms of development. These institutions mainly worked in detecting and remediating pathological forms of character and personality. The new social activities were considered important because they reflected collective social concerns about controlling and regulating dysfunctional and problematic behaviours in children.

This complex interplay between social and individual realms was personified in many of the historical figures inside psychiatry. Among them, Freud was the one who provided the ideas for attending to the significance of early childhood experiences for the developing personality as noted before. It was Meyer; however, a European psychiatrist who immigrated to the United States, who tried to envisage this when he founded the Henry Phillips psychiatric clinic in John's Hopkins Hospital in 1913 and in a sense popularised these ideas further. The role of Adolph Meyer in autism is not direct, but it seems that through his

close mentoring relationship with Kanner, he influenced him in essential respects (Waltz, 2013).

Feinstein (2010) opined that the relationship between the two men seemed to be moving along mutual appreciation. Meyer influenced Kanner's clinical reasoning in the fact that he generally assumed environmental logic against childhood pathology. Similarly, he appeared sympathetic towards psychoanalysis as a clinical template, although at times he disregarded Freudian theories for being arbitrary at the theoretical level.

The contradiction in Kanner's writing was exemplified in his explanatory accounts. He embraced a biological, inborn explanation of children's mental health and a more environmentally laden discourse that at times moved closer to the psychoanalytic ideas concerning mothering and parental functioning. It was in this sense that he published his 1943 eleven case studies under the heading 'Autistic Disturbances of affective contact' (Kanner, 1943). In this powerfully descriptive text, autism received both its naming and also its first defining characteristics.

The word autism was firstly used by the psychiatrist Bleuler, in the context of schizophrenia, another term that was coined by him (Waltz, 2013). In the original framework, autism was used mainly to describe a defensive manoeuvre of the person towards isolation and indifference. According to Bleger (2012), Bleuler described autism in two main ways. The first is closer to Kanner's sentiment, related to the condition of withdrawing from relationships with the external world while the second emphasised the person's preoccupation with the self and the presence of autistic thinking without the presence of autism. In Bleuler's rationale, autism and autistic thinking were reported as conditions that linked to schizophrenia and mainly referred to the pathological loss of sense of reality.

The use of the autistic label as a derivative of schizophrenia seemed to create misunderstandings to clinicians who adopted the psychoanalytic descriptive language. For this reason, Kanner (1943) was cautious in trying to discriminate his newly formed syndrome from that of schizophrenia and also from dementia praecox. He wrote emphatically when described the child's inability to relate themselves to others: '*This is not, as in schizophrenic children or adults, a departure from an initially present relationship, it is not a withdrawal from formerly existing participation*', and then he goes on to clarify that: '*There is from the start an extreme autistic aloneness*' (Kanner, 1943, p. 242).

Waltz (2005) in discussing the case presentations in the 1943 paper, attended to Kanner's effort to alleviate gross similarities between his newly formed syndrome and other clinical conditions. She underlined the fact that Kanner purposefully selected to present these cases in the form of case study since that textual form was highly appreciated in the psychological and psychiatric professional disciplines. Although they did not have the nomothetic tools to justify the use of large numbers of studies, the idiographic, case study was all they had really. Kanner blended his ideas with that of other clinicians while also relying heavily on quoted material from several sources. In this sense, he provided his narrative with rich intertextual information, something that is used to increase the validity and strength of his main arguments. The declaration of autism included an assembly of representations which provided autism with a sufficient indexical life.

Kanner (1943) attempted to organise his narrative across the domains of symptoms and causality while trying to preserve an optimistic view of the child's overall development. He carefully positioned autism around its core defect, namely the inability to make emotional links to other people. Broadening the defining characteristics of autism he referred to autistic aloneness, the difficulties with utilising and understanding everyday language, the

emphasis on sameness and structure, the obsessionality of their character and the effect of everyday sensory experiences that are always felt as overly intrusive.

In describing the condition, he tried to counter the overtly impairing representation, by paying attention to unique characteristics such as the '*Excellent rote memory*' (Kanner, 1943, p. 243), the intact reading skills and their overall good '*cognitive potentialities'* (p. 247). In a further blending of sources, he selected parental descriptions to build his core arguments, mainly the fundamental 'pathognomonic' characteristics of autism and its existence from birth. These descriptions, lexicalised children in terms of their defensive sociality using a repertoire of technical terms such as: 'self-sufficient; 'like in a shell'; 'happiest when left alone'; 'acting as if people weren't there'; 'perfectly oblivious to everything about him' (Kanner, 1943, p. 292).

Kanner, however, was not alone in setting the discursive grounds of autism. In Vienna, the paediatrician Hans Asperger has been accredited with almost concurrently describing another set of symptoms quite similar to those of Kanner (Waltz, 2013). Acting within the same worldly contexts but influenced by the doctrines of euthanasia and Nazi rationale against eugenics, he wrote in a less methodical and thus accessible way than Kanner. Although the two men never related their texts and never met, there is a debate over who was the first to write about autism (Houston & Frith, 2000). The psychiatric establishment eagerly embraced Kanner's work. The reason is probably a combination of being on the winning side in the Second World War and the post-war dominance of the DSM diagnostic system introduced by the American Psychiatric Association.

Asperger did not enjoy the rapid dissemination of his work due to his involvement with the Nazi regime and the unwillingness to use "Germanic" medicine as tainted by Nazi atrocities. His work was finally brought to the broader public in 1981 when Lorna Wing translated his work into English from German and thus made it more accessible to wider audiences (Wing,

1981). Even though there are indications that Asperger was talking about 'autistic psychopathy' in his University lectures earlier than Kanner his ideas being published in a paper in the less prestigious *Central European Journal of Medicine in 1938* (Feinstein, 2010) he never received the same publicity.

Asperger used to designate the name 'autistic psychopathy of childhood' to describe children that encapsulated some very distinct and unique characteristics. His observations could be split into two distinct categories, a) the category of sociality and interpersonal behaviour and b) the category of cognitive-perceptual potentialities. Asperger wrote about the social skills of the individuals, calling them weak and malicious towards social others. He often tried to associate the clinical appearance of children with autistic psychopathy with gender-associated features, claiming that children with autistic psychopathy embodied extreme male traits, a claim that is taken on by others to formulate the extreme male brain theory of autism (Baron-Cohen, 2003).

Others have argued that the descriptions of autistic children that Asperger produced were merely Nazi-inspired propaganda as he then made decisions on whether to send them to the euthanasia programme (Wyndham, 2000). On the other hand, he made sure that he carefully described several 'gifts' that these individuals seemed to enfold, such as their special cognitive abilities evidenced in their ability to practice complex mathematical skills and be increasingly cognizant of scientific reasoning. This kept some of the children (the ones that he favoured) out of that programme.

Asperger wrote this text in a historical time that was politically saturated by Hitlerian discourses on genetic selection and the importance of racial purity, enshrined in the Nuremberg Laws. Eugenic fundamentalism seemed to travel into opposite directions with regards to newly formed ideas against autism and disability. Not long ago there were voices inside the prestigious *American Journal of Psychiatry* published by the American Psychiatric

Association that guided practitioners to think and decide whether a child with mental and physical defect should be led to euthanasia in order to be relieved from '*the agony of living*' (as cited in Waltz, 2005, p. 49). The US attitude was influenced by the idea of immigrants reducing the "natural strength" of the population as this is portrayed in many of the accounts of Ellis Island. This is the origin of many psychometric tests to bar entry to "foreign imbeciles". The US was more interested in forced sterilisation than euthanasia, per se.

Whereas most historical elaborations of autism postulate Kanner and Asperger as the fathers of contemporary autism, there are currently new entries with regards to this subject. Van Drenth (2018) tries to shift the mundane questions about autism discovery, rejecting them as largely outdated and essentialist. Turning to matters of how autism came into psychiatric nomenclature and also attending to its situated usages, this author conducted an extensive survey of psychiatric documents in the Netherlands. The authors' main suggestion was to set 'aside from the rather arbitrary question of "who was first" in the discovery of autism. Instead, he proposed a study of cases such as those of the Dutch pioneering work that could reveal something inherently crucial: the productive interplay between social interventions and scientific efforts in unravelling complex questions about the inner world of special children.' (p. 37).

3.4 Taxonomising autism: The diagnostic culture of autism after Kanner and Asperger[1]

The social implications of diagnosis and screening are varied and manifold (Guerin, 2017). Diagnosis is a process of systematising and categorising people, which informs individual styles of living (Brinkmann, 2017). Rose's (2007) attempt to explicate the cultural distribution of diagnostic practices reveals that while initially conceived as a strictly

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[1] Throughout the text I do not employ any specific version of DSM but as shown in this section I try to show the political framework of the shifts between the various classificatory systems.

psychiatric instrument, diagnostic language entered social thinking abruptly, affecting people's interpretations and navigating their actions in personal and social landscapes.

A quick look at autism's diagnostic history would reveal first of all that it did not appear as a distinct condition in the Mental Disorders Classification Manuals until the 1980s, and it will also unmask the continuities and discontinuities that seem to exist between current and past ideas (Verhoeff, 2013). During the first publications of the APA (American Psychiatric Association) DSM and the ICD international classification of disorders, autism did not appear as a single condition, falling under the schizophrenia group and in a sense reflecting the general diagnostic confusion. The third edition of the DSM attempted to provide a broader categorical framework of Pervasive Developmental Disorder (PDD) to situate 'infantile autism', becoming the first international psychiatric instrument to enlist autism as a distinct phenomenological and behavioural condition separate from schizophrenia. The World Health Organisation (WHO) ICD-10 also placed autism under its PDD cluster along with other types of childhood disorder such as atypical autism, childhood disintegrative disorder, Rett syndrome, Asperger syndrome Hyperkinesis associated with mental retardation, other PDD's and PDD-unspecified (WHO, 1993).

The elusive nature of the diagnostic history of autism is exemplified by the fact that there have been several changes with regards to how autism has been identified, constructed and theorised. At first, Eisenberg and Kanner (1956) attempted to set several distinct universal criteria for the recognition of autism, emphasising a) the limited affective engagement and b) the behavioural abnormality of the children. Rutter (1978) appropriated those two clusters, designing a tripartite shape consisting of inadequate social relationships, difficulties with language communication and ritualistic engagement with activities. Later, Wing and Gould (1979) were the first to mobilise an extended number of epidemiological studies to ground their now recognisable 'triad of impairments'.

The critics of the DSM-V persisted after three major revisions indicating that there are still problematic diagnostic areas. Those critics focused on the one hand on administration weaknesses and the fact that diagnostic skills require expertise and intensive education and are hard to acquire while on the other accentuated the identification of autistic disorders in the population because of the broadening of criteria (Verhoef, 2013).

Except for the diagnostic instruments described, other screening tools have been devised. Tools such as the Revision of the Autism Diagnostic Interview ADI-R (Lord, et al., 1994), the Autism Diagnostic Schedule-Generic ADOS (Lord et al., 1999) or the Autism Spectrum Quotient (Baron-Cohen et al., 2001) receive a growing publicity and are utilized by clinicians as part of their diagnostic practice. These prestigious inventories rely principally on the craft, skill and subjectivity of each clinician and although striving for quantification and measurement of autism, they seem to involve active interpretation during their implementation, revealing their highly disputed character.

The Autism Spectrum Quotient (Baron-Cohen et al., 2001) for instance, relies on generic, abstract questions that on the whole provide a pathological intonation to behaviours without examining their contextual character or their social embeddedness. For example, they ask whether one prefers doing things on his own or with other people, or if one is fascinated and intrigued by numbers and so on or whether or not one notices patterns in things all the time. These questions impose an autistic framework into everyday action while trying to classify children. Through their descriptive dialect, they manage the person across an evaluative language, providing an index of criteria that would help clinicians and lay people locate and detect autistic signs.

3.5 Challenging autism orthodoxy

The different varieties of autistic talk, build up a perplexing confusion around it. The way autism is storied from fascination to bewilderment, from fragmentation to integration and from admiration to humiliation has succeeded in intensifying the anxieties that mark this phenomenon, pointing to the need to question the constitution of autism in its current form (Runswick-Cole et al., 2016).

The scope of this arrangement is to present a non-linear, multi-perspectival description of the phenomenon that points to the idea of re-thinking the autism state of being. Two broad strands of questioning will be deployed here showing that: a) medicalized understanding of autism spectrum disorders is troubled by its apparent variability and understudied heterogeneity while b) historical, situated and cross-cultural studies of autistic individuality that investigate the use of brain explanations of autism postulate a considerable variation of representations and meaning. (Waterhouse et al., 2016; Waterhouse & Gillberg, 2014)

Sceptics in the medical discipline implicitly ask whether the autism diagnosis should be questioned and thus propose that:

> '*no form of the behavioral diagnosis has been validated, and the evidence for many shared risk factors, broad brain disruptions and multi-symptom phenotypes suggests that the behavioral diagnosis of autism is unlikely ever to be validated, scientific progress will continue to be stalled if the DSM 5 diagnosis remains in use. The most simple and minimal solution would be to replace the DSM-5 diagnosis with an open set of symptoms that makes no claim to be a disorder*' (italics in the original Waterhouse, 2013, p. 433).

The most daunting issue in the biomedical research of autism is to provide an explanatory account of the apparent variation in autism that will confirm the diagnostic label

(Waterhouse & Gildberg, 2014). Waterhouse, (2013) among others (Timbault, 2014) claims that autism label should be eliminated giving its place to a symptomatic view of the disorder. A focus on symptoms could be used as an alternative to diagnostic instruments currently in use. Instead of grouping symptoms under a single label with no unified basis, clinicians could assemble a set of symptoms that might drive clinical justification and of course, therapeutic management.

According to the diagnostic disintegration logic, research at all levels has not provided evidence that autism is a single disorder in the same way that other conditions are. The questioning of the autism category is justified using three areas of research data that arguably show a failure to explain and subsequently unite the variable phenotypes of autism. Data from the first area indicate that autism should not be considered a single brain deficit since studies of drug outcome fail to show any improvement in autistic symptoms. Also, research data that are generated from various genetic studies fail to provide evidence that would link autism to a specific genome. A third and equally important strand of data comes from twin and family studies that focus on genetic linkages and show that up to now no specific genetic substrate has been discovered in molecular studies (Waterhouse, 2008).

The pragmatic value of the Diagnostic and Statistical Manual (DSM) is negated either based on scant scientific data or because of the role of the diagnostic manual in current ways of identifying, remediating and treating people with autism. The critiques object to the identification of autism through an arbitrary accumulation of behavioural similarities that subsequently gives life to a robust and oversized and expanded industry that is generously funded in all stages and levels of its appearance (Anderson & Cushing, 2013).

The aspect of heterogeneity challenges the existence of the autism spectrum as a unified disorder and is at the heart of the questioning discourses (Verhoeff, 2004). Heterogeneity of ASD is believed to be higher than among any other mental health conditions and is

described as the most critical obstacle in the scientific exploration of autism. For Waterhouse (2013), research into ASD shows how its diagnostic appropriations and the implementation of more narrow identification criteria failed to account for its numerous representations. Also, the qualitative changes introduced in the DSM-V categorisation lead to an increased prevalence and heterogeneity of the disorder. As such, the multiple varieties of autism phenotypes challenge the very idea of it as something meaningful, and this is not uncommon to be expressed in less scientific vocabularies. Scott, for example, states that: 'If you have seen one child with autism, you've seen one child with autism. Autism's like a snowflake' (as cited in Waterhouse, 2013, p. 3).

Verhoef (2012, 2013) spotlighted autism's transformations since its initial launching. By placing a critique on essentialist accounts, he suggested that the current prevailing view of autism as a disorder of social cognition of neuro-psychological origin is highly questionable (Verhoef, 2012). He exemplified how autism in history underwent three major transitions in its original conceptualisation, ranging from emotional disorders to cognitivist impairments and ultimately to disorders of social understanding and empathy. This trajectory could be perceived as indicative of the mythologising quality of autism's truism. A break from the current 'truths' essentialising autism is necessitated so that alternative representations of it can flourish.

3.6   Re-thinking autism using the language of neuroscience

The fact that autism has not been proven in any objectivist framework has convincingly contributed to its apparent reification. By viewing autism as a 'real' entity, people accelerate their efforts to provide explanations for its unique and enigmatic functioning. Most of the time these seem to utilise a hypothetical discursive spiral, where what needs to be explained coincides with the descriptions of it. This leads to a reductive approach in terms of

understanding the etiological grounds of ASD that subsequently informs the treatment parameters and also the societal attitudes against it.

Within the biomedical sciences, some voices try to resist this sort of essentialist elaboration of autism. Recent developments tend to counter this sort of understanding, creating openings to a more critical, reflexive and complicated perception of the human neurological constitution. This new conceptual arrangement offers a contrasting view of the effects of 'neuro-language' on the contexts and meaning of human lives. What is doubted is the goal of neuroscience to provide the fundamental, explanatory vocabulary of mental life in order to uncover 'the big riddle of humanity' (Choudhury & Slaby, 2012 p: 2). This is not only hard to achieve but also falsified in terms of its scope that is to ultimately account for all human behaviour.

The centrality of the brain in understanding human life is currently contested. Theorists advocating the critical turn to neuroscience calling the end of the cerebral subject, actively resist one of the most taken for granted understandings brought by neuroscience that 'we are our brains' (Choudhury & Slaby, 2002, p. 1). They ask, what if this monolithic brain metaphor that dominates social lives ceases so that other forms of understanding that are less dichotomised, less individualistic and less deterministic in their content and application become alive? What if we post-modernise the brain and start thinking about subjectivity in a different sensibility that would treat subjects as located inside robust systems of knowledge that characterise the social institutions that ultimately provide the possibilities of human functioning?

These questions are particularly relevant to a critical exploration of autism that pays attention to the dominant cerebralising tendency about autism (Metzinger, 2009; Ortega, 2009, 2013). The critical framework lies in the fact that autism as a scientific object relied so heavily on the brain sciences to construct its nature that it could be fair to say that brain

imaging technologies ultimately became autism life technologies in two senses. Firstly, this neuro-logic attempted to provide a definite answer to the riddle of autism while secondly it was used as the main argument of autistic rebellion, emancipation and advocacy (Ortega & Choudhury, 2011).

The critical turn to neuroscience could be informative of further critical processing of autism. An examination of the effects of neuro-dialects on the constitution and performance of autistic lives could lead to novel interpretations of old assumptions. This examination is vital for understanding the relationship between neuro-scientific language and the production of autistic selves. These newly established ways of talking are said to construct distinctive ways of being while shaping the content of our culture. For example, the current trend of representing autism as a form of neuro-diversity opens a new window to how one understands and experiences autistic life. This 'making up' of people with autism through ways of talking about their brains and their neuro-constitution should be seen as creating a 'hybrid' nature that as Choudhury and Slaby (2012) write 'breeds practices and institutions of subjectification' (p. 9).

3.7 Autism as Neurodiversity and Neuroactivism.

Prizant & Meyer (2015) noted that autism is not about being alien to most performances of everyday lives, but it is about 'a different way of being human' (p. 143). This is how he sets up his main argument about difference in autistic children:

> '*The behavior of people with autism isn't random, deviant, or bizarre as many professionals have called it for decades. These children don't come from Mars. The things they say aren't as many professionals still maintain-meaningless or ''nonfunctional.''*

Autism isn't really an illness. It's is a different way of being human. Children with autism aren't sick; they are progressing through developmental stages as we all do. To help them we do not need to change them or fix them. We need to work to understand them, and then change what we do' (italics added in the original, p, 148).

Borrowing from the social model of disability (Oliver, 2013), this text implies that it is not the autistic individual that needs to change its unwanted behaviours. Instead, it is the world of psy-experts that should re-consider as to their understanding of autism, which focuses on eliminating pathological behaviours. However, although it voices an alternative path to acquiring those 'desirable behaviors' (Oliver, 1990, p. 177) its motivation rests on disempowering one form of therapy logic in order to exercise another and consequently disturb the established power relations that run through the therapeutic culture.

Similar stories about the neurodiversity of autism, try to establish a new cultural habitat for autistic people. Autism is represented as a different form of neural functioning, perhaps atypical, but not disordered. Ortega and Choundhury, (2011) suggest that the underlying mechanism of this new way of talking is a result of the changing principles of psychophysiology. These changes produce effects on how perception, cognition and volition are understood concerning the person's identity. The implication is a renewed consideration of autism based on its distinctive neurological characteristics. Interestingly enough, pathological representations are not abandoned but in a way used to form a hybrid discourse that emphasises autism's neural potentialities, postulating positive attributes.

The utilisation of the language of diversity and its growing visibility generates a new realm of political activism through which people with autism try to enact their new agency. This new understanding of identity is inspired by the ideological forces of late capitalist society that allow for the production of individuality based on self-definition and self-actualisation.

Identity politics constitute a robust social regime that gives life to complicated political movements such as the disability rights movements, or the neurodiversity autism movement (Schmidt, 2017). The new dialect empowers autistic people by helping them construct a lifestyle based on their positive qualities. It also allows them to reclaim the origin of their condition inside the body to get rid of the moral-psychological explanations of autism that placed particular emphasis on parental attitudes as a cause for autism (Woods et al., 2018).

By being closely allied to other forms of disability rights movement, autism activism rejects the overtly pathologising accounts that circulate in society, negotiating a new political agenda for autistic subjectivity (Brownlow, 2010). Persons with autism are valued on the grounds of their difference, presenting a new way to signify the overt behavioural characteristics. The following clause summarises this new dialect plainly and straightforwardly: 'I am different because I am autistic and autism explains my difference' (Nadesan, 2005, p. 205).

CHAPTER FOUR

Psychoanalysis and autism

4.1   Early psychoanalytic accounts of autism

From its birth onwards, autism has always accentuated the role of parents. Mother-blaming, as Grinker (2008) claimed, has been an enduring societal pre-occupation. Within the American sociogram, bad mothering featured in a long list with regards to inadequate child practices. By idealising the aspects of closeness and distance, the mother's have been seen as either offering or depriving the essential growth-promoting nutrients (Kutzner, 2006).

Psychoanalysis, with its emphasis on primary attachments between the mother and the infant, brought a relatively new societal gestalt, residing in the new theorisation of internal life. It became the mainstream discourse for the fabrication of social and individual existence, providing a new imperative for thinking about individuality (Graunman, 2006). Psychoanalysis as the zeitgeist of psychological life became an authoritative voice that was unproblematically taken by the public.

Kanner's initial formulations and Bettelheim's clinical practices placed autism inside the theoretical circuit of psychoanalysis (Waltz, 2005). Personified in Bettelheim, the history of autism in psychoanalysis was composed of arguments that relied on a blend of personal blaming and scientific criticism (Fitzpatrick, 2008). The study of Bettelheim's life could reveal two main respects. Firstly, with no proper education and psychoanalytic training, Bettelheim seemed to rely on a relatively idiosyncratic construct of psychoanalysis that mostly borrowed from his life predicaments. As such, his life in a concentration camp seemed to have shaped his ideas of autism, bringing to the fore the aspects of isolation and cruelty. Secondarily, psychoanalytic nourishment of children became an antidote to the social

anxieties about the birth of autism. The societal craving for answers seemed to have made them susceptible to ideas that emphasised blame and guilt.

4.2　Early discourses in the psychoanalytic study of the autistic child

Psychoanalytic views about autism gradually departed from their previously taken for granted unitary and mechanistic accounts, becoming more fluid and contextual. They gradually became more sensitive to their changing social matrices departing from their initially decontextualised and self-referential structure. Their fertilisation by exogenous (with regards to psychoanalysis) discourses, gave life to hybrid systems of meaning.

The case of Dibs was the first psychoanalytically informed case study of an autistic child. Its author Virginia Axline (1964) tried to construct autism from a psychotherapeutic perspective based in her innovative play therapy techniques. According to her, autism could be considered a disorder of the self which resulted from emotional injury. She portrayed autism as a fully reversible pathological state which required the therapist's unconditional attention and also his/her healing properties. Indeed, the protagonist of her monograph, 'Dibs', received psychotherapeutic intervention which made him fully able to rebuild his damaged self. Drawing from a client-centered perspective, Axline (Ibid.) placed emphasis on the client as the most important source of self-knowledge and self-transformation. This kind of representation seemed attractive to the wider audience, causing less negative attributions in relation to parental negative influences (Osteen, 2008). Fisher (2008) indeed, underlined that while Axline clearly connected parental attitudes with the child's pathology she was not met with the same negative apprehension from the public as Bettelheim. In general, Axline's work appeared more or less in congruence with the American restitution narrative that was grounded in Protestantism and primarily focused on the self-actualization of the individual (Osteen, 2008).

In 1930 Klein, wrote about a 4-year-old boy whose clinical presentation seemed to match the phenomenology of autism that Kanner described some 13 years later. The child, Dick, was described in terms of his flattened affectivity, the absence of emotional linkages with the environment and the lack of any play and communicative gestures. Hobson (1990) elaborated Klein's paper by organising her thinking around four basic constructs that act as explanatory categories: 1) The issue of aetiology. 2) The applicability of the psychoanalytic technique, with seemingly unrelated children. 3) The issue of constitutional incapacities against defensive withdrawal; and, 4) The role of cognitive, social and motivational difficulties concerning this condition, which seemed to be central in the development of her reasoning (Hobson, 2011).

Klein proposed a link between the child's developmental inhibitions, the brutal and aggressive attacks on the mother's body and the resulting anxiety caused by the fear of the mother's retaliation towards the child (Houzel, 2009). Her primary focus in this article has been to show the significance of symbol formation for personality development. Implicitly this article succeeded in providing a series of arguments for Klein's followers in the study of autism and the use of play as a form of treatment (Hobson, 2011). By introducing the notion of autism, Klein unwittingly saturated and formed later attempts to theorise and treat autism under the psychoanalytic technique (Tustin, 1988a).

Appropriating Klein, Rodrigue also implied that autism was a reaction to the external environment. (Rodrigue, 1955; Rodrigue, 1956). It was a compensatory move where the child tried to preserve his omnipotent phantasies about the object. In this respect, autism represented a defence against the frustration caused by the environment (Nadesan, 2008). Drawing from theories of the symbolic, he made a crucial distinction between the autistic states where symbols are not communicated as such, having an isolated atomic quality and

another one that relied less on excessive projective functioning and could be thought of as more representational of external reality.

Ogden presented a similar conceptualisation through his autistic contiguous position. Although working with adults and strongly influenced by Bion's and Klein's theoretical understanding, he proposed an interesting concept that linked to an autistic dynamic in human development (Houzel, 2009). His autistic contiguous position appeared intermediate to Klein's dichotomised dialectics between a paranoid-schizoid and a depressive position in mental life. Autism, as a developmental theme, corresponded to the most elemental anxieties and fears of the individual (Mitrani, 2008). What characterised experience in this mode was the rupture of the sensory apparatus, with concomitant imprisonment in the bodily sensations that prevented the development of any symbolic activity. Psychopathology in Ogden would result from a lack of a dialectic fluidity between the three positions and not due to fixation in one of them (Ogden, 1992).

4.3   Autism through the prism of individual psychic experience

The dominant views around infancy, child development and the popularisation of ideas about individuality and personality development functioned as the habitat for mapping the dynamics of the autistic mind. Psychoanalysis in its early days oscillated between a rather individualist paradigm to the study of development in infancy and its pathology, and an alternative more intersubjective one. From Freudian epigenetic and stage-based theories (Gay, 1998) to the Kleinian positioning sequels (Likierman, 2001), Mahlerian developmental phases (Palombo et al., 2009), Anna Freud's developmental lines (Edgcumbe, 2000), attachment theories and the Winnicottian dependency spectrum (Kenny, 2013) the psychoanalytic infant strived to attain its individuality through a process of maturation that centered on the notions of separation, individuation and autonomy.

The 'turn' to individuality is evident in the work of Mahler (1968). Mahler tried to theorise the autistic mind based on its development towards autonomy and individuality (Palombo et al., 2009). The autistic infant, according to Mahler (1968), failed to endure the process of individuation that followed an initial phase of symbiotic union with the mother. Following Freud's epigenetic notions, her theories were an effort to examine the autistic mind in a framework of selective intersubjectivism similar to that of Spitz and others (Kenny, 2013).

Mahler (1958) was cautious in navigating among the autistic phenotypes. Indeed, although she seemed to imply that autism had to do with the faulty development of the separation procedure, she carefully distinguished several autistic phenotypes. What seemed vital for her were not only the infant's constitutional vulnerabilities but their derivatives for the infants developing personality (Hobson, 1990, 2011). For Mahler, as for other theorists, the mothering principle was placed in the centre of infant development since it was through the mother's ministrations that the child could progress towards health and autonomy. The autistic child, not being able to use the 'beaconing of emotional orientation' of the mother, was left devoid of opportunities to progress naturally. It was as if the baby was thrown alone into the bathwater, to quote Bell's poignant metaphor (Bell, 2009).

The current revisions of Mahler's work, counter the old criticisms (Stern, 1995). The preface of the new edition of Mahler's "Autism and Symbiosis" book, is a re-examination of old ideas in a philosophically enriched basis. The concept of 'merger experiences' is placed upon the old theories so that it explains what happens between mother and infant in a series of challenging situations. The new line of thinking brings a focus on situations where both mother and infant lose their ability to 'hold' aspects of an inevitable reality and therefore merge into a symbiotic union with blurred individual boundaries (Pine, 1980). The author first focuses on individual differences in developmental lines, second argues for the

situatedness and contextuality of development and third provides a reworking of the phase

notion as an 'Affectively intense place in life' (Mahler et al., 2000, p. xii).

4.4   Autism as reaction and defence

Following Mahler, others have tried to stay true to the autism-as-defence discourse. Tustin,

drawing from object relations theory rejected the idea of a normal autistic phase while

maintaining manifold attention towards separateness and the other than me experience

(Tustin, 1988b). Tustin (1991) said that it was the intensity of the not-me experience or the

amplification of perceptual events that would make the child resort to an autistic refuge, an

autistic shell. She named this as auto-generated encapsulation to the process of becoming

hidden in a world dominated by un-real objects. These objects functioned as omnipotent

tools at the hands of the autistic child (Olin, 1989; Tustin, 1992). Their purpose, according to

Tustin (1986), was to maintain the child's illusion of adhesiveness with the object of

satisfaction and provide complete protection from unbearable terror. These autistic objects

and autistic shapes referred to sensory generated patterns of experience that were devoid

of any communication towards the external world (Tustin, 1980, 1989).

Tustin exhibited exceptional insistence in trying to access the non-verbal world of the

autistic child (Spencley, 1995). In the case of Daisy, a young post-autistic 7-year-old girl, she

emphasised the use of idiosyncratic language and therefore tried to capture the subjective

meaning of words and actions. She explained that the therapist not only needed to be

careful not to impose any sophisticated meaning on the child's dramas but further needed

to be in a position to discriminate between thoughts proper, that is thoughts that belong to

a thinker and thoughts without a thinker or 'proto-thoughts' (Tustin, 1986, p. 177).

Tustin (1991) occasionally questioned the qualitative aspects of the autistic subjectivity. She

claimed   that   the   child   lost   the   corporeal   continuity   needed   in   order   to   protect

himself/herself from environmental intrusions (Hobson, 2011; Isaacs, 1989). In response, what was left after this catastrophe was a 'black hole with a nasty prick' (Tustin, 1980, p. 30). Against this 'painful' reality, the child needed to resort to mechanistic behavioural patterns, similar to Kanner's stereotypic behaviours. Tustin contended that this was a self engendered encapsulation driving the child into a shell of hard sensations that absorbed all signs of vitality in the developing personality. The child, in this sense, developed an 'allergy' to others (Spencley, 1995).

Meltzer et al. (1975) suggested two categories of autistic states of mind without clearly considering the causative factors of autism. He called the first part "autism proper" and described it as constitutional and genetic. Then, he portrayed the second part as a derivative of autism proper and therefore called it post-autistic. The post-autistic state of mind developed out of a passive collapse of the child's mental apparatus that led to a suspension of the normal functions of attention. In a poetic metaphor, Meltzer thought that it was the unbearable impact of the object's beauty that gave life to the catastrophic defence mode he called dismantling (Meltzer & Williams, 2008).

Following the dismantling of the self, attention was directed towards the most stimulating aspect of the environment, leaving the child in an obsessional mental state (Williams, 2010). An omnipotent phantasy nurtured the obsessionality of the character. There were detrimental implications for the child's ability to identify, explore and develop a sense of the other person as a three-dimensional object. In dynamic terms, this meant that the child could no longer use projective identification in order to be helped by the auxiliary object. Meltzer (1975) described the therapist's functioning in these terms '*not only as a servant, or surrogate but as a prime mover in the situation*' (p. 21 italics in the original). This architecture towards experiencing fits well with Bion's descriptions of thinking in psychotic

personalities and with Alvarez's autistic links, where experience is made rigid or flaccid through mechanical ways of understanding and relating (Alvarez, 2012).

4.5 "Hybrid accounts". Discourses of autism, through developmentally informed psychoanalysis

Some of the most influential ideas in the psychoanalytic approach to autism have kept the autism conundrum alive in the 20th century. Current developments and cross-fertilisations between different disciplines indicate the need to understand the clinical reality of complex conditions such as autism, based on what is called a "multiple causality" approach and also from what is considered a two-person psychology (Alvarez, 1992).

Hobson (1991) proposed an approach that distance itself from the traditional cognitive theories of autism and proposes an affect-oriented explanation. According to Hobson's (1993) *Affective Interaction Theory*, autistic individuals are born with an inability to respond emotionally to others or, in other words, they are born with a biologically-based impairment of affective contact that ultimately hinders their ability to participate in the affective life of others and so to develop their knowledge of persons as persons.

Recently, Hobson stated that it is the failure to engage in the self-in-relation-to-other experience that might underlie the clinical phenotype of autism (Hobson, 2010). The development of autistic pathways, according to Hobson, sounds similar to others suggested by Alvarez (1992) in her modified object relations theory. For Alvarez, the autistic withdrawal is not considered linear but derives from the child's relational embeddedness. In other words, the individual's developing self is manufactured through the interplay of emotionally defective other-than-me relations that create autistic configurations of the self (Hobson, 2010). The importance of such a thinking line lies in the fact that, by bringing

attention to the relational practices of the self-among-others, allows a distance from the traditional dichotomous views of autistic symptomatology.

Alvarez's thinking is situated in the space where neurological vs environmental causal explanations of autism might not be seen as antagonistic and thus mutually exclusive. Although she avoids discussing issues of aetiology, like many other psychoanalytic thinkers, mainly, those endorsing object-relational perspectives, she bases her findings on notions of multiple causation and the role of emotional interaction with the primary caregivers to the ability of the individual to "become alive". She suggests that autism may start with an organic deficit, but the autistic path and the retreat to autism are not strictly due to the biological deficits but emerges secondarily in the context of a dysfunctional interactional template (Alvarez, 1992). In this way, Alvarez is in line with all significant recent cognitive psychology accounts of development in autism, since they all reject a simplistic linear relationship between initial deficits at the biological level and the later cognitive phenotypes, but she is certainly less concerned with mechanisms at the cognitive level. Moreover, she emphasises the dynamics of the relational framework as a level of analysis that cannot be directly reduced to cognitive terms while focusing on the transformational potentialities inherent in relationships.

The role of a modified version of counter-transference is discussed in her work. Alvarez (1996) introduces the idea of using her counter-transference as a window into her clients' experience without arguing that this is what counter-transference is all about. She describes her subjective reactions as having to do with a dichotomy of life, that is to say, with a sense of being and not being alive. Her subjective state is about the contrasting ideas, feelings and mental states experienced during meetings with autistic patients.

The vibrations of emotional nature that occur inside the therapist through the child's projections provide a sense of the patient's internal reality, a sense of the architecture of his

internal object relations (Alvarez, 1992). Alvarez refuses to see the child as "object-less" and describes him/her as relating to a dead object. It is, therefore, by the therapist becoming a "live-company" and engaging the child in such a way that a recovery (Alvarez uses the concept of "reclamation") from these unrelated states of being can become possible.

The therapist's subjectivity becomes crucial in the process of beaconing[2] the child into a lively engagement. The therapist sees him/herself as a person who needs to be sensitive to weak, delayed or highly immature signals of life that need amplification in order to set the foundations for aliveness in the autistic child and its surroundings (Alvarez & Reid, 1999). In this way, Alvarez elaborates on previous therapeutic techniques that generically reside in the therapist's effort to mobilise the child's suspended attention in order to re-establish the transference relationship (Meltzer, 1975). Her approach does not consist of blind repetitions of the past technicalities and an orthodox way of approaching the 'truth' of the mind

The public's growing relational concerns are also reflected in the work of contemporary clinicians who have attempted to rekindle the issue of autism by setting up a new clinical and theoretical agenda (Crown, 2009). A series of articles appear in the *Journal of Infant Child and Adolescent Psychotherapy* supporting the applicability and usefulness of psychoanalytic technique with autistic individuals and their families (Drucker, 2009). This publication offers an approach where issues of aetiology become marginal in understanding the autistic condition. Most authors discuss autism adopting mostly a Winnicottian and developmental model of individual development. The role of the environment acquires centrality in facilitating the developmental process. Most significantly, the authors underline the role of the mother as the person who perceives the child's signals and consistently responds to them.

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[2] I use the concept of beaconing in a similar way to Mahler (1968) that talked about the mother beaconing the child in emotional communication.

4.6   Autism and French psychoanalysis

Autism and psychoanalytic mentality were intricately related in France and other Francophone countries due to strong philosophical roots. Houzel (2018), a prominent psychoanalyst that has a long history of publications in psychoanalysis and autism contented that these roots stem back to the 18th century and the French Doctor Jean Itard. Itard set the stage for the subsequent generation of recognisable practitioners such as Pinel and Seguine. Then during the 19th-century psychiatry became more academic in France, and it was also fertilised by psychoanalytic ideas that still hold a high prestige inside this discipline.

While psychoanalysis has been overshadowed in the Western psychiatric system, this development did not occur in France until recently. The result was a generalised opposition to psychoanalytic treatments that finally reached the European Union social regulatory boards (Chamak, 2008). In this respect, the National Health Authority of France adopted the European political stance, overtly denouncing psychoanalytic treatments as 'non-consensual' (Chamak, 2008, p. 741). Even within the premises of the French parliament, psychoanalytic treatments of autism have been systematically devalued also been regarded as abusive towards people with autism. Indicative of this effort to repudiate psychoanalysis as a treatment choice with regards to ASD, a parliament member invited the French government to ensure that the French Federation of Psychiatry recognises the recommendations of the HAS (High Authority of Health) and ANESM (the French Agency for the Safety of Health products) for good practice, so that it officially renounces psychoanalysis as an abusive treatment.

Despite this debate, what seems essential with regards to autism and French psychoanalysis is the closeness between Lacanian inspired treatments and their attention to language and discourse. Parker (2015) claimed that Lacanian ideas should be apprehended as an extension of critical discursive psychology (CDP). He further stated, 'There is an emphasis in this

Lacanian current of psychoanalytic psychosocial research on the 'indeterminacy' of discourse, and subjectivity is treated as something that arises in discourse and in relation to politics' (p. 239). Other publications have also been amenable to such an implosion of Lacanian inspirations into discourse analysis. (Billig, 1997; Pavon-Cuelar 2010). Lacanian theory offers a unique opportunity to study subjectivity not as something that resides inside the interior of the subject but as a linguistic and political phenomenon.

The Lacanian logic resides in the fact that the non-verbal infant due to its lack of language depends solely on the family discourse in order to construct his/her personality. Immersed within this symbolic order (the symbolic in Lacan equates with subjective experience and is crafted by language) the infant is represented as being depended to the mother's language expression in order to structure his/her wishes. Although this idea is present in other psychoanalytic accounts, here it seems to align with a potentially harmful explanation of autism as being victimized by the mother (Houzel, 2018).

With a particular interest in causality discourse, Lacan's followers selectively de-emphasised the role of the mother as a causative factor of autism. The appropriation of these ideas aligned to the public's frustrations with regards to negatively formulated perceptions of autism and mothering. These ideas contain an imaginatively extended vocabulary. While not totally abandoning the notion that autism can be explained as an impingement on the normative mother-infant bond, the child's autism is no longer seem to imply a compensatory movement against the faulty ministrations of the mother (Anzieu, 1993) or the phallic qualities of the mother (Mannoni, 1964) or even the effects of the mother's deadening language (Aulangier, 2014). The mechanisms of autism are located within the body of the child and especially within his/her inability to orbit across the desire of the other (Laznik, 2013) or else to construct an appropriate psychic skin that could fold the mother/infant dyad (Haag, 1993).

Most contemporary notions of autism are far less Lacanian. Dolto exerts a significant influence in Francophone infant psychoanalysis. Drawing from the idea of language as the primary means of survival, individuation and maturation, she rephrases those central ideas that originated in Lacan's literature. Borrowing from views similar to Tustin's, Dolto attributes autism to the factor of trauma during separation from the mother (Saint-Onge, 2019). She states that the infant not only suffers a traumatic separation from the mother but what also makes it unbearable is the fact that this is not adequately spoken about so that it can become less detrimental. Autism becomes the catastrophic consequence of a cataclysmic event within which the absence of language processing leads to a self-enclosed state. In Dolto's own words 'the infant resides in a state of fusional desire, unseparated from a ghost mother and is menaced by death, which is warded off by mimicry' (As cited in Hall et al., 2009, p. 48).

CHAPTER FIVE

Language research in autism and Psychotherapy

5.1 Brief review of the divide among traditional forms of research in language and autism

Sterponi (2017) similar to Ochs (2002) adopted an anthropological-cultural perspective in studying the language of autism. This framework emphasised the rhetorical features that bind up societal activities with communicative competence inside a context of meaningful communicatory practices. Communication and relational encounters co-ordinate to the normative expectations and contingent understandings that co-occur during mutually developed conversations (Ochs, 2012). Language acquisition was seen as a process of assimilating cultural artefacts that secondarily provide membership in discrete cultural forms of participation.

This conception of language is radically different from what has been fundamentally received as linguistic competence of ASD in the context of positivist psychology (Streponi et al., 2015). Language, in the objectivist understanding, is conceived as the result of discrete internal mechanisms that allow for linguistic competency. Children come with a propensity to acquire the tools of communication through developing an overarching cognitive competency.

Positivist experimental designs of language impairment in ASD emphasised etiological factors (Frith, 1989), the role of semantics and deviant development of concepts (Tager-Flushberg, 1981) and more recently the pragmatic deficits that influence language development and linguistic failures (Tager-Flushberg 1996). Abnormal language use and development were principally seen as resulting from the core characteristics of the condition, namely autistic withdrawal and impaired social understanding (Boucher, 2012). Baltaxe and Simmons (1997) studied language dysfunction beyond internal structural

characteristics. By moving their attention beyond the structure of the autistic syntax and into the social aspects of language, other researchers attempted to move towards situated understandings of language, similar to those that reside in research based on discourse analysis (Waltz & Shattock, 2004).

Recently the value of conversational analysis in the study of interaction in relation to mental health phenomena has been recognised (Karim, 2014). While conversational analysis is a newly established method for studying human-autism interaction, it provides a deeper understanding of the way relationships are built on the discursive and extra-discursive level (Dickerson et al., 2013). In this manner, conversational analytic methods have become pertinent to the study of interaction in mental health and in specific areas such as autism. Most importantly, they offer opportunities to study interaction as it gets actualized in everyday, naturalized environments.

In the case of autism conversational analysis has been utilized in a much more broad respect than in conventional research to explore the way autistic children navigate inside human to human interaction or in human-android communication. For example, Dickerson et al. (2005, 2013) investigated the engagement of a child with autism with a humanoid robot. The authors indicated that conversational analysis can be of important value for the study of autism interaction, offering a renewed emphasis on the children's communicative responses. Conversational analytic studies of autism can illuminate the process of reciprocal communication by extending the notion of communication and interaction. In this manner Dickerson et al. (2005) again engaged in research which offered a less pathological interpretation of autistic expressive behaviors. This research emphasized the pragmatic value of conversational analysis to the study of previously pathological features of autistic conduct such as joint attention and gaze-flexibility. Specifically it showed that the participating children engaged in much more efficient types of triadic relationships

exhibiting advanced social skills, questioning the core neuro-cognitive understandings of autism.

The papers selected in the next section try to capture these novel methodological attempts which share 'family resemblances' with the current research. By the end of this chapter it should become evident that language-based methodologies a) in the study of autism and b) the investigation of therapy, are the basis of a particularly vibrant area of research (O'Reilly et al., 2016, Smoliag & Strong, 2018).

5.2 Communicative (in)competence and interactional investigation. Autism as a situated accomplishment

The first group of studies brackets traditional deficit-laden understandings of language. Rooted in naturalistic data, it investigates language phenomena in the immediate context of interaction (Sterponi et al., 2015a). These studies are essential for illuminating previously unnoticed features of autistic interactions, providing new grounds for theorising communication with people on the spectrum.

Two broad clusters of research could be discerned:

a) Autism as part of the social domain.

Emphasising on the way children with autism navigate inside the complex social milieu, this strand of research is located in a range of interactional settings and relational activities. For example, in research designed to study the maintenance of peer relations of a child with Asperger syndrome, Rendle-Short et al. (2015) emphasised the activity of using derogatory language inside peer-related interactions. Their results coincide with traditional research views explaining poor social functioning in Asperger syndrome. The detailed sequential analysis of the material revealed that derogatory name-calling could be used as a form of strengthening peer relationships and not as a sign of declined social functioning.

Sterponi and Fasullo (2010) tried to elucidate the role of the child's rhetorical moves to proceed in the unfolding conversation. They noted that the five-year-old child with autism who participated in the study efficiently managed to make progressive moves inside the conversation when trust and sharing became the substrate for the dialogue with the mother. This research revealed that when the mother addressed the child through controlling his/her language responses, the child's utterances and the overall conversational activity became less satisfactory for both ends and significantly deteriorated.

Other research attempts in the same area, questioned the relational and conversational practices of high functioning autism (HFA). Sterponi (2017), for example, argued that while traditional research designs highlighted deficient characteristics of autistic communicative practices, the minute details of conversational choreographies are best captured by attending to the naturalistic micro perspectives of talk (Sterponi & de Kirby, 2017).

Fasulo and Fiore (2007) argued that instead of searching for idealised forms of communication as signs of adequate social attunement, one should alternatively embrace the disorderly characteristics of autistic communication to identify potent areas within educational contexts. Research from Stickle et al. (2017) attended to the use of the phrase 'I don't know' during clinical assessments. They concluded that this language device a) could be seen as a successful manoeuvre against the social environment that b) depends upon four distinct interactional senses. These senses showed that the type of clause emphasised is crafted as a conversational move displaying epistemic value, resistance to conformity, a departure from what and how questions and finally a preference towards the inclusive discourse on behalf of the person posing the questions.

b) Linguistic and interactional competence.

A broader area in this type of research begins with investigating specific interactional phenomena. Three areas of concern have been targeted under this framework. The first deals with the study of perspective-taking during the construction of an activity that involves creating imaginary storyboard characters. After reviewing the literature on perspective-taking in ASD, the authors proposed a different, non-mentalistic explanatory mechanism where agents need to orient towards two interconnected realms. In the first, they need to attend to the character's courses of action. Then, they secondarily have to borrow from socio-cultural reservoirs to inform their thinking. In ways opposite to what was expected, the authors suggest that the children showed elevated understanding of cultural meanings when trying to coordinate their language practices towards specific audiences (Bottema-Beutel et al., 2017).

Ochs et al. (2004) questioned the notion of perspective-taking. They tried to articulate this impaired ability as a two-fold skill that could be studied by conversational analytic methods. Using naturally occurring data, they elucidated the concept, offering novel insights. Language competence and social functioning in ASD was explored as an active interactional-conversational dynamic phenomenon. The children's capacities with regards to the interpersonal and the cultural variant of perspective-taking were examined across three levels of perspective-taking. It was suggested that a) the ability to follow turns within a conversation b) the ability to construct situational scenarios with others and c) and the ability to interpret social meanings of indexical behaviours was variable. It extended from good performance in locating future rhetorical moves to low outcomes about positing explanations in the form of behaviours.

Others have studied the role of pauses and silences for the on-going dialogue (Rendle-Short, 2015) and also the appearance of topic perseveration as an interactionally conditioned

phenomenon (Stribling et al., 2009). These research endeavours underlined the role played by the context in showing the locally contingent nature of specific interactional and language phenomena. With regards to the role of silences, the authors showed the precarious and skilled employment of pauses as part of the progressive conversation. They confirmed that autistic children use pauses and silences as part of their being skilled interactionists.

Ochs & Solomon (2005) tried to capture the details of the linguistic adaptation in HFA children during social experiences that required a degree of flexibility and micro-calibrations. As they explained, their analysis showed that although children remained tuned inside the general conversation, they did this in ways that were not locally and interactionally contingent. They claimed that the '*proximal relevance'* (p. 158) inscribed by HFA children could be explained based on other deficit-based theories such as the weak central coherence and the difficulty to exhibit empathy during conversations.

Sterponi (2004) renounced the assumptions derived from Ochs & Sollomon (2005) by stressing that HFA people were capable of actively conversing about norms and violations of normative behaviours, exhibiting a mastery of processing sequential interpretations of talk. Solomon (2004) scrutinised the way HFA children constructed personal narratives as part of self-introductions. The study mainly focused on the ability of the children to sustain continuity with regards to prior and subsequent talk, while locating the discursive resources utilised in the process of narrative flow.

The third camp of research could be seen as comprised of broader concerns with regards to interaction and communication effectiveness in ASD. These studies are concerned with issues ranging from methodological and analytical potentialities on the study of interaction (Dindar et al., 2017; Muskett & Body, 2013) to the study of parental interactional strategies in naturalised play sequences (Maynard et al., 2016) and finally the cross-cultural dimensions of interaction between a foreign child with autism and an English speaking

listener (Zain et al., 2017). Even though it seems to stand in relatively isolated conceptual spaces, this last thread of research shows methodological ingenuity towards the study of interaction in ASD.

5.2.1 Positioning autism and the negotiation of autistic identity

The studies presented so far orient to a view of language as social action within naturally occurring interactions. The next area of language research in autism, exploits language as a route to the construction of meaning, subjectivity and identity.

These studies are arranged with regards to their constructive orientation in ASD and also their analytic content. Three broad clusters of studies can be discerned. A) The first of them contains studies that situate towards the analytic tools of positioning and subjectivity. B) The next bulk of research takes a broader view of discourse as constructive and therefore tries to investigate the way autism is built within institutional domains and through particular discourses. C) The last strand of research also originates in the constructive foundations of language, examining the deployment of autistic identities in mundane societal domains.

A) The first three selected empirical papers reviewed, display an ambiguous contention with regards to the study of subjectivity and the constitution of autistic selves. Drawing from the Wittgensteinian notion of 'language game' and the idea that words acquire their meaning through particular activities, the authors of the first (Sterponi et al., 2015b) paper devised a multi-layered and inter-textual piece of research. While they wanted to examine the role of pronoun use in autism they also built on a theoretical body that a) shared common grounds with traditional explanations of pronoun reversal and b) tried to investigate the way that happens in relationally specific interactions. The conclusion reached was that the children's poor performance could not solely be explained in terms of language development and that it could be specified within the 'child's proclivity to see himself and his interlocutors from a

distance' (Sterponi et al., p. 291). This research showed that the ability to properly engage in crucial I/you subjectivity related talk correlated with the utterances of the language partner and the complexity of the inter-subjective field.

The next study explored the ways children with autism were positioned by experts' language in a YouTube video tutorial. This research (Brownlow et al., 2017) sat on the critical end of discourse analysis employing a blend of analytic tools to guide analysis. The conclusions revealed how the text was organized around discourses of deficit and impairment that ultimately positioned autistic children and autistic adults in a negative contour against neurotypical subjects. One of the things that this research emphasised is the attitude of describing neurotypical populations as 'no-ASD'. According to Brownlow et al. (2017) 'This serves to position children on the spectrum as 'special cases' (p. 157) that warrant a specific label to differentiate them from the norm which is taken as positively natural.

B) The following studies will be organized across their tendency to study autism as a discursively constructed phenomenon in a variety of cultural sites. The first study used interview data from the discussions between parents and therapists in a specialised child clinic in the USA. Drawing from discursive psychology but also keeping an eye on the role of broader discourses, this author postulated how autism-related meanings fluctuated between normality and abnormality in therapeutic contexts. Lester (2011, unpublished Theses) observed how parents and clinicians attended the fluidity of autism-related meanings associated with local performances of autism. The author pointed out that sometimes parents performed saturated disability meanings of autism, in order to account for their child's non-normative behaviour while at others, they presented the child across the discourse of normality.

The next research used material from group discussions held on the internet a relatively versatile method for obtaining naturalistic data (Brownlow, 2010). The researchers attended

to specific subject positions made available for autistic people within the talk (Edley & Wetherell, 2001). Their talk centred on the role of therapeutic intervention and also its normalising effects on children with ASD. One prominent feature of this study regarded the way participants negotiated autism as a positive attribute. As Brownlow (2010) suggested, resisting deficit-laden repertoires become apparent in the negotiation of a positive identity for autism. This formulation spotlighted heightened anxieties with regards to issues of employment and social engagement within a working environment dominated by neurotypical individuals.

The last research extract included studied the conceptual framing of autism by lay people (Huws & Jones, 2010). The findings of this mixed phenomenological-Foucauldian research study pointed towards four broad conceptualisations, framing autism a) 'as transgressing normative expectancies; b) dependency and functional ability discourse; c) autism and the discourse of mental status; d) autism and explanatory discourses' (p. 336). The researchers underlined the fact that beliefs about autism were expressed through heightened confidence, which is associated with the widespread views about autism in the public media.

C) The third thread of discursive research commits to the constructive role of language, asking questions about the way autistic people negotiate or build their identities inside public or private environments. In order to ensure the visibility of autistic identities, the first two exemplars, rely on the network as a particularly rich source of autism-related data. According to Brownlow and O'Dell (2006), the internet has been populated by autistic voices. Through the use of online forums, personal blogs or in many cases the use of new media by autistic people, it has been claimed that the internet is a particularly suitable place for raising their concerns and locating an identity that resists dominant ways of representation.

This research studied conversations within an autism chat group for adults who had a subscription in the specific forum. The researchers presented their findings as developing two main constructions. The first was organised around expert knowledge in ASD targeting questions such as 'who are the experts' (Brownlow & O'Dell, 2006, p. 317). The second oriented to the question of identity, specifically within the talk about autistic and neurotypical identities. The authors commented that while this approach offered an empowering view of autistic identities, it raised questions with regards to the arrangement of power. Within this peer-related discussion group, power functions in a way that marginalises other topics that could be of particular importance for autism.

Parsloe (2015) questioned the way identities got fixed inside on-line autistic communities and the implications for aspects of well being. By focusing on the group of Aspies Central, using a methodological approach called 'netographic' (p. 342), he attended to the way people with Asperger participated in repositioning their identities against the mainstream. Relying on the concept of 'reframing' (p. 344) as an activity of altering one's life representations (also see Foss et al., 2013) he located three '*reclaiming* elements of identity' that took place through discursive activity namely 'a) normalcy; b) symptoms; and c) agency' (p. 345). In sum, it was suggested that these communities form a cultural counterweight that can fruitfully extend the ways dominant discourses operate on the well being of people with Asperger syndrome.

Bagatell (2007) conducted daily observations of a young man who identified as being on the higher end of the autism spectrum. She explored the role of creativity and originality as this man struggled to craft his identity through tailoring of discourses. She noted: 'for Ben, it was not merely a matter of choosing one voice over another, but rather discovering how to orchestrate these voices and, in the process, author himself. Instead of seeing his choices like black or white, choosing one world over another, Ben would need to discover a way to

see himself in both worlds and, perhaps, enter other worlds as well' (p. 423). The conclusion reached indicated the struggle of a person with autism to navigate in the complex social field while allowing for other less autism saturated forms of self to become alive.

The idea that autism is not crafted out of thin air but is mainly fabricated inside collective societal membership is also explored in Baines (2012). This author examined the challenges of students with autism as they tried to enhance their participation in schooling environments. The analytic notion of positioning was used to examine how certain subject positions affected the interactional trajectories and choices of students with ASD. It was shown that the students went to make themselves eligible for social contact through strategic positioning. The students tried to fit the requirements of a normative environment or in other cases to mask their autism so that it did not interfere with the perceptions of others about them.

Attention has been given to the way autism impacts the identity of the family per se. Heys and Kolaner (2016) investigated the influence of autism upon family functioning. They indicated that a normality discourse permeated the family's communicative activity. In most cases, the family was described as 'just a normal family' (p. 155), with the authors reporting that the term normal denoted that this was the right way to run a family. An ordinary family was enacted in the discourse in ways that crafted autism as something that the families had to endure as part of the total family functioning.

The question of normal-abnormal identity construction has been inquired by Lester et al. (2014). This research associated with the current critical approaches to autism (Davidson & Orsini, 2013).The discourse analytic framework of this study revealed a notable dilemma with regards to normal and pathological representations of autism. Within a broader 'repertoire of disability' (Lester et al., 2014, p. 12), respondents raised important ideological issues which troubled the disabling representations. Instead of devising autism as ability,

they claimed for a societal change instead. The existence of such binaries was mobilized in the talk of autism stakeholders to trouble the authoritarian practices in autism.

5.2.2 "The clinical is the political": Institutional cultural 'voices' and Autism Spectrum Disorders

The remaining part of this review contains discourse studies that a) hold political leverage that attends to issues of advocacy, neurodiversity and the emancipatory practices of autistic people and b) clinically related designs that investigate the concept of power in ASD. The papers selected either address the role of power in the regulation of autistic populations through classification and identification practices or examine the effects of hegemonic forms of knowledge that contribute to the reproduction of institutional power structures (Hall, 1997).

a) McGuire (2013) suggested that advocacy in the neoliberal context is performed through the danger placed upon the disordered body. The advocate secures his/her place inside society and validates his/her apprenticeship through a rationale of ordering a satisfactory body, overcoming its inherent dangers. The interplay between advocacy and self-advocacy was investigated in a prestigious Swedish advocacy journal (Bertilsdotter Rosqvist, 2014). The study indicated that advocacy could be enacted through different strands of discourse. For example, parents resorted in a medicalised framework to advocate for autism pointing to the need for a cure. On the contrary, self-advocates critiqued the cure dominated view by employing the discourse of neurodiversity. The findings revealed two distinct let alone opposite subject positions that related to degradation of membership in the journal. The first group made use of an 'interactionist discourse' (p. 229) devising a participatory subject position for advocates, who were asked to conform to parental regulations in order to be accredited as full members. On the other hand, the second subject position of 'Aspie' (p.

229) relied on a 'separatist' (p. 229) discourse that countered parental overpowering advancing member solidarity and openness.

This kind of analysis seemed to renounce the role played by hegemonic discourses in the shaping of autistic narratives (Broderick & Ne'eman, 2008). It explicated the intrinsic divide that exists between autism driven and parent-directed patterns of advocacy. Parents were found accommodating their experience of autism using three main ways of talking. First, they concurred to a narrative which emphasised normative styles of understanding. Then, through the other narratives, they played out their activist ideological concerns by either relying on an oppositional or to a religious repertoire (Gray, 2001).

With regards to the experience of obtaining a more agentive voice, Roscqvist (2017) studied the concept of leisure in autism. An alternative system of language operated inside talk, constructing a repertoire of 'meaningful leisure' and 'time balance' (p. 3). Ambivalence was revealed when self-advocates tried to account for maintaining time equilibrium. They seemed to imply that time spent within special interests was pictured as inherently satisfying for them as long as it was correlated with self-maturation and social engagement.

Parental activism was studied as a practice that strives to obtain more 'social goods' [3] for the benefit of autistic children. This type of activism is equated with the white, middle-class guardian. The Latin equivalent is more or less dispatched from the realm of public media. However, despite the widely held opposite belief, parents of a Latin background were found equally demanding when it came to obtaining social services. The study of Angell and Solomon (2017) showed that indeed Latin parents forcefully requested the provision of public services as opposed to school officials/staff who mostly adhered to a market rationale that dictated them to save financial resources.

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[3] as referred in Gee (2010)

B) A politicised let alone critical employment of language studies investigates the dominant and naturalised ways of speaking about autism. This type of research centres on diagnostic and clinical language, which while being informative of autism has also been contested as dividing autism in unproductive ways (Goodley, 2016).

Parental articulations of autism have been identified as an underexplored area of qualitative investigation (Grue, 2011). Avdi et al. (2000a), carried out a traditional discursive research study which focused on the construction of the problem in the talk of parents during the first assessment. She suggested that parents' talk employed three main discourses to account for the problematic behaviour of autistic children. The discourse of normal development, the medical discourse and the discourse of disability were employed in dilemmatic ways, showing how parents were divided by cultural meanings of disability and the fear of receiving a long life disability label. The medical discourses displaced normative language at the face of receiving an autism diagnosis.

Parents did not subscribe to monolithic meanings when discussing autism but tried to construct it as a more fluid entity than a realist account would have done so (Avdi, 2000a, Avdi 2000b). Similarly, Lester (2012) reported that parents constructed autism in variable ways. Some of the parents adhered to autism as being momentary, while others, presented autism in its 'mythologising' properties (Siebers, 2008). On the other hand, other parents mostly oriented to the challenge of overcoming autism, attending to it as a passing illness. The author's analysis in this sense was successful in unearthing the inherent variability of meaning that fabricated parent talk.

Focusing on parental discourse, Avdi et al. (2001b) tried to examine another vital element of the unfolding clinical dialogue. This research produced various insights on the authoritative role that mental health professionals exercise in clinical situations. They stated: 'It is, however, suggested that being aware that the position of expert is paradoxical and that the

power of expertise often remains concealed and operates at the level of meaning-making, might help to extend health professionals' thinking about our interactions with clients.' (p. 336).

Professional discourse has populated autistic life by setting limitations on what can be talked about and done with regards to autistic experiences. The following studies revealed the complexity of the clinically saturated language. O'Dell and Browlown (2015) studied the production of a normal childhood and the implosion of pathologising therapeutic explanations of non-normative behaviours. Lester and Paulus (2014) explored how non-normative behaviours overtly problematised the role of symptom regulation in therapy. Other researchers studied symptoms as signifiers of the disabled self (Giles, 2015). Their attention alternated between autistic behaviours on the one hand and clinically saturated language on the other. They credited that behaviour on its own does not hold symptomatic interpretations. Instead, as shown by Solomon et al., (2016), the psychological articulation of 'problematic' behaviour poses alarming states to the general population, framing the interaction between doctors and children with ASD.

CHAPTER SIX

Methodology

In his critical discursive psychology book Parker (2015) makes a startling point that seems to be reflective of my personal experience inside discourse fieldwork, that is: 'Where do we start, even when we start again? Often when we are faced with an insurmountable problem or we want to get somewhere when the route looks too rough, we think that it would be much easier if we could start from anywhere but here' (p. 9). Where do I start, therefore, when I need to start over, again and again?

6.1   Process impressions

The first step inside this rambling route was to search for answers relating to the big question 'what is discourse analysis (DA)?' One of the determining characteristics of the discursive method is the fact that defining discourse and its methodology is beset of overwhelming problems. Most of the literature in DA converge on the fact that the definition of discourse is a laborious and perplexing activity (Willig, 2008). Potter and Wetherell (1987) reconsider the method's perplexity when they comment that: 'Perhaps the only thing that all commentators are agreed on in this area is that terminological confusions abound' (p. 6).

Several writers noted that the concept of discourse had been nearly abused in many respects in its recent history (Cheek, 2004). Ill-defined as it came to be, it was either taken as a simple linguistic statement meaning almost nothing or in its most intellectual forms, it pointed to the particular ways of organising talk inside social life (Taylor, 2013).

Parker (1999b) highlighted that: 'one of the difficulties students new to discourse research face is the bewildering variety of approaches to the study of texts that go under the heading of 'discourse analysis' (p. 3). Even more experienced scholars within the field sometimes fail

to develop a transparent version of discourse. Thus, it has become normative to use several incongruous languages to refer to discourse and DA. As such it is described as a 'common currency' Mills, (1997), a specific pattern of ideas and thinking (Lupton, 1992, p.145), or in its most general terms as an overarching conceptual umbrella (Gee, 1999).

One of the critical limitations of identifying discourse as the study of patterns of language, is that it can be misleading about the role of language in fabricating life, reality and ultimately providing the cultural spaces from which people can view themselves, can understand others or shape the social world. This position might reflect a mechanical view of language, where speaking subjects mobilise pre-conceived linguistic resources in order to sequence their utterances. In many respects, this line of criticism has been evidenced in current discourse debates, building accusations against discourse determinism and discursive imperialism (Parker & Burman, 1993).

6.2   Understanding of discourse analysis as embedded in late modernist history: Main concepts and key ideas

DA represents a large body of theoretical understandings that ultimately amalgamate in sophisticated research applications, sometimes taken to constitute a 'complete package' (Georgaca & Avdi, 2012; Kiyimba, 2015). The integral module in most of the DA paradigms lies at their common origins and their underlying philosophical foundations. The common feature in this diverse field of inquiry grounds on the conceptualisation of language as constitutive of social phenomena.

This seemingly internal congruence is not to be taken at face value. Fine-grained analysis between the different strands of DA can reveal significant morphological and ideological tensions. Jongersen and Phillips (2002) emphasised that the approaches might differ in at least two significant respects, that is: a) the extent to which discourses structure the social

world or b) the analytic focus chosen by the researcher. Others also cautioned against gross simplifications by recording the different axes that each of the approaches develops in its relationship with philosophical traditions (Wiggins, 2017).

The historical considerations of DA can provide an understanding of what preceded the establishment of the discursive era, identified as the 'turn to language'. As Potter and Wetherell (1987) underlined, discourse analysis did not 'fell out of the air. It has roots in a variety of more established perspectives in philosophy, sociology and literary theory' (p. 7-8).

Discourse analysis sprung out of creative debates that occupied the field of sociology in the 1970s, questioning the mundane beliefs of positivism. Woofit (2005) indicated that sociological inquiries were always sensitive in understanding the interplay between the sciences and the wider social habitat. Most of the studies, however, assumed a positivist perspective that emphasised objectivity, essentialist accounts of knowledge and universal assumptions.

Gradually, through a series of transformations, the scientific community developed a counter-interest in understanding social phenomena from a multiplicity of perspectives. This revised attention was associated with a need to understand the interplay between societal agenda's and their implications for the conduct of research and the production of scientific knowledge. The question that came in the foreground embraced a critical rationale emphasising the role of society in making some kinds of knowledge more factual than others.

The most indicative example that belongs to this shift is to be found in GIlbert's and Mulkay's research on biochemistry (Gilbert & Mulkay, 1984). This research is nodal for three main reasons inside the sociology of knowledge. First, it profoundly altered the agenda of

scientific research by revealing the variability of scientific accounts. In this respect it showed how the variability of the research artefacts could stand against the simplified assumption that research texts were orchestrated as monolithic descriptions (Wood & Kroger, 2000). Second, it provided discourse with a new place in research, signifying it as a topic in its own right. Third, it introduced the concept of interpretive repertoires to wider audiences and provided the foundations for subsequent research in the discourse analytic field (Dunn, 2016).

6.3   Reflexive moments

Inside this fluctuating philosophical territory, I witnessed my resistances in moving into this academic landscape of DA. These included strong reactions in departing from a well-accustomed understanding of language into a completely new one, framed by post-structuralist ideas. In terms of one's subjective involvement with scientific knowledge I followed Kress (1995) suggestion about assuming a post-modern sensibility in research. According to Kress (ibid) there can be alternative readings of the history of subjects that are centrally influenced by the readers' identity and point of view.

I can locate therefore two important derivatives that follow the above statement. The one is that as a user of language, I have mostly been implicated in traditional forms of linguistic commonalities that have been informed by positivism and realism. The second is that my 'turn' towards the social view of language was only made relevant in the context of this research. I now view my individuality as being radically changed by the fact that I conceive myself as a kaleidoscope of selves in a dialogic relationship to the world.

6.4   Exploring the changing ideas about language.

In order to capture the influences of the changing ideas about language in DA, I will draw upon the most influential theorists that have framed this subject. Saussure should be

acknowledged as one of the most quoted figures in discursive and linguist literature. As Kress (2001) suggested, Saussure posed a different set of interesting questions that emphasised the physiology and structure of language. He distinguished among two interrelated dimensions of language which he mostly understood as a perpetual correlation of signs. While he named the two facets langue and parole, he also strived to provide a rich theory in order to advocate for the study of the language as an autonomous system of arbitrary signs. He saw langue as the overall structure of language that relates to the stream of signs that attach meaning to objects. Langue, as the foundation of meaningfulness of an object, was seen as a steady, objectified construct that is decided by social conventions that cannot be altered by the individual. On the contrary, parole was viewed as a more unstable system that was influenced by people's subjective inputs but could not alter the system of language.

In conjunction with this structural view of language that seemed to dominate the early 20th-century linguistics, other scholars strived to import cognitivistic dimensions into the initial framework. The Chomskian perception of language was largely founded on the premise that language is independent of the author's influences. The author's subjective usages are merely seen as potential distortions on the course to understand the reality of the language. Among others, Chomskian psycholinguistics overemphasised the role of grammar in creating an infinite number of novel sentences, in speech creativity. Chomsky's theory embraced a largely innate, genetically driven cognitive account to explain language acquisition and potency (Burr, 2005).

The turn from the traditional representational view of language signified the birth of a new movement that is informant of DA in many respects, called post-structuralism. Post-structural thinking originated through Foucault's intellectual accomplishments that subsequently have been eagerly taken up by diverse disciplinary circles around the world.

One common feature that serves the post-structuralist framework is the interest expressed in transcending the structural components of language, appearing in structuralist and pragmatic contexts. This allows for a thorough re-working of language as the primary ground, where meaning is negotiated and shaped (Laclau, 1993).

The implications of post-structuralist thinking in the field of DA is manifold. As Jongersen and Philips (2002) suggest, DA research remains in a dialectic relationship with ideas stemming from post-structuralism, but some researchers still refrain from versions of DA that advocate for a complete linguistic 'imperialism'. They note that not all discourse analytical approaches subscribe explicitly to post-structuralism, but all can agree to the following main points:

• 'Language is not a reflection of a pre-existing reality.

• Language is structured in patterns or discourses – there is not just one general system of meaning as in Saussurian structuralism but a series of systems or discourses, whereby meanings change one discourse to another.

• These discursive patterns are maintained and transformed into discursive practices.

• The maintenance and transformation of the patterns should, therefore, be explored through analysis of the specific contexts in which language is in action' (p. 12).

6.5   Social constructionism as context

Although the new view of language has impacted on the discursive tradition, it is also the reliance on the approach of social constructionism that shaped its key ideas and theoretical premises. Potter (1996) stated that defining constructionism as a neutral and objective state of affairs begins with a paradox, the paradox being that constructionism should be seen as being constructed out of materials that circulate in society in specific historical moments. Instead of following its philosophical roots, the definition attempts to crystallise or else to

freeze constructionism in order to make it more feasible. The exit from this unwanted position is to admit that defining constructionism through a realist framework can be necessary and thus helpful in the process of understanding the concept.

Social constructionism is rooted in the philosophical jargon of postmodernism and in this sense, it assumes an antirealist perspective (Lock & Strong, 2010). Berger and Luckman (1996) in their 'Social Construction of Reality' developed this whole new approach to understanding reality. Writers such as Kant, Marx, Nietzsche and Mead have informed the field by opening the window into expressing a human-society dynamic in the production of knowledge (Burr, 1995). Wittgenstein, Austin and Foucault diachronically informed major strands of discursive constructionist practice (Hall, 2001; Potter, 2001). However, in more disciplinary terms, it is the work of Gergen (1999) that introduced this new radical way of doing psychology and introduced the approach to social psychology audiences.

The type of social constructionism that informs this project could be located in the early works of Gergen (2011). It relies on at least three central strands of critique that overtly problematize the status quo of modern science. These include an ideological-political critique that works to bracket the taken for granted realities by associating them to their political affiliations. They also include one form of questioning that draws from the work of Derrida on deconstruction and the belief that all knowledge is bound into language systems (Parker, 1999a). They finally embrace a radical form of critique that generates new claims about the social origins of science.

There are distinctions inside the constructionist landscape that should not go unnoticed. For example, McNamee (2012) argued that Gergen had developed a distinctive type of relational constructionism that uniquely incorporates an intersubjective ontology of the person. One of the main aspects of this relational ontology added to constructionism is that 'it is in the active engagement, the situated joint action, that meaning is constructed with others and

realised (literally, made real) in the collaborative performances of people. Meaning is doing' (p. 152).

Although it is difficult to move into a unified declaration of social constructionism, it is easier to detect some common markers. Gergen (1985), for instance, supporting his relational constructionism, argued that there are at least four central premises in all social constructionist work. He began by identifying an intense questioning of the taken-for-granted world. On another level, he declared that knowledge should always be examined as historically, socially and culturally saturated. Following that, he asserted that knowledge about phenomena is made relevant by social negotiations with no objective validity. He finally claimed that power issues always influence the production of descriptive and explanatory accounts and as such, language statements always carry a political colouring.

No matter how alien or rebellious this sort of thinking might sound, there is always the risk of collapsing social construction into a futile antagonism with its rivals residing in foundationalism and realism. Hacking (1999) asserted that: 'What difficult terrain we enter! One of the reasons that I dislike talk of social construction is that it is like a miasma, a curling mist within which hover will-o'-the-wisps luring us to destruction. Such talk will no more go away than will our penchant for talking about reality. There are deep-seated needs for both ideas' (p. 101). Putnam (1994) seemed to reverberate with this by saying that a 'common philosophical error of supposing that 'reality' must refer to a single super thing, instead of looking at the ways in which we endlessly renegotiate—and are forced to renegotiate—our notion of reality as our language and our life develops' (p. 452).

6.6   Difficulties of constructionism

While constructionism began as a liberating social agenda, mainly from the plights of objectivism, it later became in Hacking's (1999) metaphorical sensibility, an accumulation of 'cancerous cells' (p. 2) leading to uncontrollable replication in diverse fields. Cultural issues extending from gender and emotions to refugee identity and or mental health have become entrenched inside constructionist ontology that sometimes sets out as an 'anything goes' mindset (Gergen, 1985; Zielke, 2006).

Some authors currently question the validity of the central constructionist assumptions. By asking 'What is wrong with constructionism?', this strand of questioning appears in Cromby and Nightingale's (1999) elaboration, which takes the form of outlining the most contested issues around it. A series of questions could phrase my reflexive engagement with constructionism as they appeared during my theoretical inquiries and as a part of my research journal. I directly quote the most important ones:

- What happens to individual subjectivity if everything is determined by the social?

- Is there anything outside the text, outside our ability to hold a specific language to use? What about moments where speech is not applicable, let us say between a speaking and a non-speaking subject? What about our intimate moments such as in our kissing, fighting or making love?

- If what I know is engendered in the course of activities and interactions and is situated among people, myself and the local context then why do certain truths become more recognisable and universal than others? Is there a supreme necessity for it?

- What are the implications of this relativised stance? What if all claims can be potentially equivalent?

- What about our bodies and those aspects of the world that reside outside language? What about images or materials that belong to the physical realm but so centrally influence our lives?

One could see that some of these conflictual issues are difficult to resolve. It might not even be the case that the resolution of the conflict is where we should look at. Instead, it could be claimed that the constructionist ontology allows for a kaleidoscopic, timely, occasional and situated understanding of the social world that is never fixed and thus final.

6.7   Understanding the main approaches to discourse analysis

Discursive psychology (DP) and Foucaldian discourse analysis (FDA) have evolved through different philosophical trajectories and correspond to a distinctively diverse range of studies about language in use. Discursive psychology has been inspired by ethnomethodology, conversational analysis and the work of Wittgenstein and Austin and therefore has developed a unique interest in the micro-level of talk and interaction and moreover the way meaning is negotiated within this immediate context. On the other hand, Foucauldian discourse analysis originated in the post-structural understandings and focused on the macro-level of discourse by explicating the way power and knowledge play a formidable role in terms of regulating subjectivity and governing social life (Georgaca & Avdi, 2012).

DP developed as a new way of doing psychology and understanding traditional cognitive psychological facets (Holt, 2011). To problematise the crude cognitivism that seemed to dominate the field of psychology, DP opposed the taken-for-granted value of internal mental states that could be objectively examined and located in the interior of psychological subjects. Through the implementation of constructionist ideas and conversational analytic technicalities, it provided a new revolutionary view of the traditional mental concepts such as emotions, selves and identities (Harper, 2006). In this way, it challenged the central

assumption crossing mainstream social psychology that discourses offer a direct reflection of internal cognitive states.

DP generally is seen as focusing on the way people report on their psychological 'realities' although it secondarily tends to adopt a questioning attitude against it. As an approach, it has been influenced by the work of Edwards and Potter, while several ideas were later appropriated through the work of Wetherell and others (Potter, 1996; Wetherell, 1998). One of the core ideas that shaped discursive psychology is its post-structural emphasis on the constructive and constitutive role of language and the nature of Discourse (Wiggins & Potter, 2008).

DP could also be examined in terms of the analytic interests that guide the process of researching texts. Discursive psychologists examine the commonalities of the language used in order to develop a sense of the rhetorical devices utilised by speakers or writers. They study the action orientation of the texts by asking how people mobilise discursive resources and with what effects. In order to do this, they employ the analytic concept of interpretive repertoires, which is understood as relatively flexible linguistic resources, or differently as 'broadly discernible clusters of terms, descriptions and figures of speech' (Potter & Wetherell, 1995, p. 89) used by people in their interactions.

Discursive psychologists focus on construction and variability in the sense that when people create accounts of events, these inevitably entail a) a relatively unstable dualistic content that b) is locally constructed and Interactionally situated to serve the interpersonal goals of interlocutors. Finally, they carefully attend to how people negotiate issues of stake, accountability and interest, examining how arguments are put together to appear persuasive and factual (Willig, 2008).

While DP advocates for a focus on the micro-level of analysis FDA assumes a macro-level approach (Heller, 2001). It studies the ways that wider social languages or discourses mobilise speakers in a fashion that enables or delimits what can be said by them in particular topics and settings (Parker, 1992). In this respect, FDA is viewed as a vehicle to examine the reproduction of social objects and subjects through cultural discourses and secondarily to outline the percussions of these discourses for possibilities of being. A central idea that informs FDA is that wider discourses which circulate in societal realms provide the mundane world views that fabricate individual lives.

FDA departs from the unitary, rationalised, ahistorical, universal subject that resides in capitalist political and economic environments. This diversion has been documented in the context of deconstructive attempts (Parker, 1995), but most significantly it was celebrated in the now-classic work of Henrique's et al. (1984) 'Changing the subject'. This publication signalled the end of the computationally guided individual, giving life to an alternative form of subjectivity that is fabricated by language and discourse.

Despite the genuine enthusiasm created by the 'turn' into discursive subjectivity, this novel approach also fueled heated debates and new areas of disagreement. Not all commentators inside this field coincide in terms of the locus of discourses about individual agency. There is at least, though, one point of convergence that lies in the fact that people are at the same time producers and products of discourses in the process of negotiation of meaning (Billig, 1991).

FDA offers a unique reconsideration of the psychological properties of individuals while questioning the traditional understanding of subjectivity as an accumulation of psychological properties that reside inside individuals. This revised examination concerns the way lives are conducted on the discursive level but also the ways people understand their subjective participation in the world as inside their thoughts and feelings.

The notion of discourse as informing subjectivities involves a stringent exploitation of issues ranging from political concerns, living materialities and also the way knowledge is used as a form of power that saturates the lives of the human population in an always historical axis. Foucault tackled discourse as a systematic way of talking about social affairs that dictates meaning in particular historical moments, ultimately shaping the ways we conduct our interpersonal lives (Hall, 1997). The language was conceptualised as the primary means of understanding human social practices. Without falling into deterministic fallacies, he dictated that through studying the language in use, one could obtain an understanding of the social forces that inscribe human lives.

According to Foucault (1982), one should always be alert against productive links between knowledge, power and social regulation. This is achieved through a circular process of normativisation of knowledge. Some forms of knowledge for specific historical contingencies become common sensual, exerting more power than others. The role of FDA is to pay attention to the circulating languages while trying to bind inferences between subjectivities and regimes of knowledge that domesticate the social-institutional terrain. In other words, it is within this playful anthropo-discursive interlay that languages produce 'real' effects for people who travel inside discrete discursive trajectories (Hook, 2007).

6.8   Combining discourse analysis with Discursive psychology into a Critical Discursive Psychology (CDP) framework

6.8.1 Introducing the most important constructs informing this research

Two lines of thinking provided the methodological inspiration for the first study. The first came when I initially encountered Hollway's and Jefferson's (2000) publication dealing with the need to do qualitative research differently. This work seemed to eradicate all aspects of methodological presuppositions, entailing an emergent structure in terms of qualitative

methodology. It also fostered a way to evidence the possibility of importing psychoanalytic sensitivities inside anti-psychoanalytic methodological arenas. The second is related to the work of Hammersley (2011) that advocated for an attempt to break off from traditional methodologies as argued in his anti-methodological rhetoric.

Hammersley's (2011) logic is to disturb the conduct of qualitative research that takes place within unimaginatively formulaic ways. He poignantly claims that the problem with traditional views of methodology begins with dehumanising research, often translating it into a set of rules that uncritically provide a systematisation of the research process. His critique is constructed by notions of the craft model of research. Drawing on the work of Seale, Mills and others, he argues for a much more auto-biographically informed methodology that originates inside particular research contexts. The crafting of research is seen as a kind of learning from experience, 'a vicarious learning' (p. 26). Connected to this, he notes that: 'research is a practical rather than a technical activity: it necessarily involves making judgments, often on the basis of uncertain and inadequate evidence' (p. 27).

In order to describe the dangerously infectious attachment between research and the researcher, Hammersley (2011) aligns himself with Bell and Newby (1977), who state that the conduct of their research changed their entire constitution as individuals. The role of the researcher as a kind of craftsman and bricoleur is highly regarded in such an approach. Denzin and Lincoln (1994) describe the activity of actively selecting from a variety of methodological approaches, analytic tools and interpretative agendas in order to tailor the method to the conduct of the study. The bricoleur is asked to improvise in terms of engineering the analytic and data generation devices (McLeod, 2001). The attitude requires that the researcher incorporates novelty and originality, that he/she is cognizant of the vast 'marketplace' (McLeod, 2001, p. 3) of qualitative genres and that through his interactive

frames he inescapably influences any selection that takes place during the life of the research (Denzin & Lyncoln, 1994).

Creative research models require the personal and political commitments of the researcher, who metaphorically acts like an artist trying to perform using his improvisation skills. In the opposite direction, one risks falling into a position cautioned by Hamersley (2011) that 'research involves following the procedures of scientific method…From this radically reflexive point of view methodology is simply a distortion of the research process; one created by the ideological imposition of a natural scientific or technical model, under the influence of a false positivist philosophy' (p. 30). My research commitments are formed by my experience in music, therapy and qualitative research declaring that the score (as in music) does not either dictate or necessitate the music. Instead, it is the other way round.

There are, within this last sentiment, multiple forces that bring a revolutionary anti-conventional pull in qualitative inquiries. According to them, the methodology should be viewed as a kind of emissary trying to expand the edges of what can be known and can be seen through it. It should overtly exemplify firmness to do justice to those who decide to expose their lives against their and our willingness to 'know', 'discover' and perhaps 'disturb' their universe (Chamberlein, 2000; Denzin, 2017).

Within this kind of mentality, I voice my reflexively and auto-biographically generated research. It should be made explicit that this text is the narrative amalgamation of a to and fro activity that took place during my PhD life. Turning the gaze on myself (Finlay, 2003) inevitably captures the oral history (Janesick, 2007) and the recollection of my personal stories that cascade within and most importantly in the periphery of my PhD life.

6.8.2   Storying, theorising and tailoring the research methodology

> What teaches us to learn, that is the method. I am not furnishing
>
> the method; I am starting out on the search for the method. I am
>
> not starting out with a method; I am starting out with the refusal to
>
> simplify, taken fully consciously. Edgar Morin (As cited in Jones,
>
> 2013, p. 19)

Some nine years ago, I decided to write a research proposal in order to apply for a research degree placement. At that time, I had a minimal sense of what was looming for me. The only clue I could decipher was that inside my academic background, I was numbering three different strands of work that corresponded to three interrelated ways of being. The first was related to my academic and professional pre-occupation as an occupational therapist. The second was an art degree in violin musical performance that represented something like a finish –line in a long-lasting relationship with music. The third was a moderate approach that related to combining music with therapy inside a psychodynamic music therapy professional training.

As a young clinical practitioner, I decided to work, or in a sense I ended up working with families that raised children with developmental and associated mental health problems. It soon became noticeable to me that from the broad range of children with disabilities, it was the children with autism or at the risk of autism who captured my attention and most of all triggered my imagination. I can now recall my agonising attempts at explaining or at least trying to communicate an understanding of what I initially conceived as one of the most inhuman conditions that I ever encountered. I can still recall the coldness, the numbness and deep sense of losing control.

I remember some of my field notes of that early stage that said: 'No matter what I do, the child still will not turn to me, will show no affection towards me and will pass through me as if I am so invisible to him. Between, myself and this glossy toy he would go for the second and would only ask for my help when things go terribly wrong for him'. However, I remember treating other children who were not so uninterested in me. I again recall some thoughts: 'He enters the room rushing over me to get his favourite swing. He grabs my hand decisively while his body has already reached the swing. He looks so alive and energised. He is so geared on me while I hold the swing. He expects me to give him a big push but I hesitate trying to provide an emotional signal to him. He responds by moaning, looks angry, shouts he tries with all means to make me move. He seems in intolerable pain but still I try to make him tune-in to me. To remain geared as long as I can. We are like loving spaceships trying to resist the pull of gravity around us'.

I am sure that whoever had an interactive experience with a child with autism could appear sympathetic to the descriptive language constructing this textual account and also to the emotional atmosphere that was hovering around the room. However, here, I want to stress a particular paradox in my positioning as a clinician. Instead of becoming more confident in terms of knowing autism, knowing what to do and how to give advice to parents, I experienced what I can now call a radical decline of certainty. Knowledge became less of an enclave of objectivity, orienting to doubt and 'failure'. But this again was a kind of 'productive failure' as in the rationale of Derrida (2003) pointed to the necessity to embrace risk that orients towards faith in research, a kind of failure akin to the ability to question fixed meanings of autism, moving towards unexplored, uncharted and always fluctuating understandings. That was my exit towards research. Also, that was my declaration of a new arrival into re-thinking autism.

What followed this imminent watershed is the story of the "raison d'etre" of my research subjectivity. This does not correspond solely to a singular, finalised settlement but on the contrary to several fluctuating culturally shaped predicaments that give life to a particular set of possibilities about the viewing, constructing and finally studying the world of autism.

This approach could potentially be heard as containing a gross vagueness. For example, one might reasonably question what do I mean by saying the world of autism and most importantly, which world is scrutinised here? In order to disclaim the accusation of being vague in constructing the fundamentals of research, I will now describe in considerable detail the reasoning that accompanied my main steps in researching autism.

6.8.3   Presenting the scope of the research

Serious concerns have been expressed with regards to the scope and utility of autism research (Fletcher-Watson et al., 2018; O'Reilly et al., 2016). The major criticism seems to rely on the import of autism advocacy principles that crystallise in the declaration of 'nothing of us without us' (Charlton, 1998). The popularisation of participatory research designs offers a novel orientation to autism research mainly through prioritising autistic concerns (Silverman, 2008). It is debated whether the growing funding for autism research impacts positively on the lives of autistic individuals and their families. As a consequence, it is sought that research into autism becomes more culturally sensitive mainly through 'incorporating the views of autistic people and their allies about what research gets done, how it is done and how it is implemented' (Watson et al., 2018, p. 1).

Autism research is disproportionally situated within the medicalised, let alone neuro-biological genre (Biklen, 2005). Lester (2011, Unpublished Theses) concludes that autism is mostly studied through an 'etic perspective' (p. 7). Glynn-Owen (2010) discusses the domination of the positivist medical paradigm in autism inquiries, which produces a growing

corpus of research that unnecessarily emphasises measurable variables. This template further raises serious objections, mainly due to the crude generalisations of its results that mostly overstate issues of deviance and treatment efficacy. Biklen et al. (2005) propose that 'knowing' autism requires more than a phenomenological attempt to capture the 'pure' essence of the condition. An inductive approach is favoured since it searches for the multiplicity of meanings as they fluctuate inside diverse contexts.

Accumulating concerns inside autism disciplinary studies, accentuate the need to turn to research that incorporates a democratic mentality (Denzin & Lynclon, 2005) while staying contingent to the idea of blurring the boundaries between the researcher and the participants of the research at all stages of the research (Marshall & Rossman, 2011). The democratisation of qualitative research incorporates a critical focus, actively contesting the dominant versions of autism. It discusses issues of power that are included in the predominant deficit saturated models, also 'demanding sensitivity to kaleidoscopic complexity' (Orsinni & Davidson, 2013, p. 12) of autism.

The investigation of the autistic phenomenon inside or outside the clinical environment becomes a matter of enormous importance. The review of language-based research revealed that language-based methodologies had shown a slow yet considerable increase, both in the realm of psychotherapy research (Avdi & Georgaca, 2018), but also in the extra-clinical articulation of autism (O'Reilly et al., 2016). This line of research heralded a growing significance by studying the role of language in dialogically and intersubjectively informed therapeutic encounters (Smoliak & Strong, 2018).

Avdi & Georgaca (2007), exemplified the various ways that constructionist methodologies re-examine therapy as a discursive accomplishment. A kaleidoscope of themes emerged from this, illustrating therapy a) as a process where meaning and the description of the 'problem' is negotiated and finally altered, b) as changes in the way subjectivity is portrayed

in the domains of self-reflection, agency and the negotiation of blame, c) as an examination of the role of the therapist mainly emphasising the role of the therapist's rhetorical devices on the stories of their clients, d) as an exploration of the therapists authoritative position and the way power issues implicate the process of therapy and finally, e) as a macro-analysis of the cultural discursive strategies that fabricate the unfolding therapeutic dialogues.

The discursive exploration of autism has lately been evaluated as a particularly fruitful research arena (O'Reilly et al., 2016). The qualitative research designs in ASD can generate fruitful knowledge that empowers the lives of autistic people (Karim & O'Reilly, 2014). This implication could be taken as a way to 'voice' the concerns of the autistic populations while creating alternative stories from those that subjugate them.

CHAPTER SEVEN

METHOD: STUDY ONE

7.1 Rationale and research questions

7.1.2 Stating the problem for the first research study

Discourse analysis is a radically disruptive approach to research data. Autism research seems to be at a point where traditional methods may be increasingly seen as "too established" and not helpful for the questions that modern researchers want to ask about the autistic community. There is a shortage of research that interrogates autism with regards to clinical and extra-clinical language (O'Reilly et al., 2016). No research uses discourse analysis to explore the language of psychoanalysis in autism.

In this vein, I investigated the discursive practices of psychoanalytic psychotherapists, who had considerable experience with treating children with autism. I was interested in their descriptions of their practices, views and assumptions with regards to autism. I selected psychoanalysis not only for its influence in my therapeutic logic but also because of the creeping stereotypes and controversies that accompany its presentation in therapy for autism.

7.1.3   Reflexive presuppositions about autism

This section will describe my philosophical presuppositions about autism. As I initially qualified as an occupational therapist in Greece in 2004 I then continued my professional qualifications by earning a post-graduate degree in psychodynamic music therapy in the United Kingdom in 2005. In the meantime, I had the opportunity to finish my music degree, which led to a violin performance qualification. As a clinician, I started my professional

career in private practice, where I was honored to treat a large number of autistic individuals and interact with their affectionate but sometimes highly stressed families.

In my clinical interventions, I struggled to capture the conventional practices of the contemporary therapeutic protocols. During this time I had the opportunity to engage with colleagues whom I understood as being open to experimentation and innovation. Their philosophy opposed the tyrannical nature of the classical therapeutic techniques. However, there have been times when I found myself struggling to impose a particularly dogmatic framework in the style of treatment that I was following. After considerable reflexive engagement, I could see how this framework could be thought of as a particular doctrine capable of alleviating the anxiety-provoking nature of the treatment of children with autism. From the vantage point of the present I cannot say that I have never been afraid inside the therapy room and also that I have never been intimidated by the deep and profound differences that seemed to exist between me, the children that I treated and also their families. In this sense, I could say that most of the time I struggled and perhaps failed to advocate for the children, under the stress of the families and the societal pressure which demanded adaptation to a normative way of being for the child.

This said, I can now say that psychoanalysis has been a useful ally in the course of my professional life. First and foremost, it provided an alternative way to regard the child's needs and also to establish a kind of contact that would escape the domination of psychological techniques. Apart from providing an exit towards a less oppressive position in my therapy practice I strongly identified with the vocabulary used by analysts in the treatment of autism. I found that within my practice I borrowed a wide range of symbolic terms that rendered the child "alive", "dead", "malicious" or "mentally unborn" in an effort to conduct life in the therapy room. I can also say that I now live in my post-psychoanalytic

era where I try to provide a more critical flavour to my being there. Nevertheless, I still find it very hard to escape pathologisation in my daily interactions with children.

In this sense I do not yet find that the character of my clinical practice has efficiently shifted into a more democratic place. Discourse analysis has played a crucial role in this shift by making me more sensitive to the way I frame therapy life in the consulting room. There are many reasons for this, one of them being that the escape from the network of the social forces that rule therapy seems impossible. One of the consequences is that the escape from this regime might create huge economic disruption. These days therefore I wonder and actively try to re-establish a different voice within the clinical community. My philosophy thus is that therapy apart from being mainly a colonising activity should transform into a shelter where the autistic individual could entertain the possibility of finding a space to develop their unique consciousness. Otherwise therapy is converted into a set of practices that serve the purposes of biopower in the context of the neoliberal society (Rustin, 2015).

7.1. 4 Research framework

This research was conceived as falling into a broad discursive framework. Initially, I strived for data generated by actual therapeutic sessions depicting aspects of the therapeutic encounter. One particular problem with this approach was the relatively limited number of therapists practising psychoanalysis with autistic people. Some of the research candidates refused to provide therapy transcripts, citing issues of confidentiality. However, they seemed quite willing to talk about their therapeutic practices with children with autism.

As a response to this, I had to reorient my research focus and decided that my research attention moved to examining the ways autism gets constructed by culture and how the autistic identity is mediated through institutional terrains such as the one of psychoanalysis. Through repeated scrutiny of actual discourse analytic studies, I broadened my theoretical

horizons also to acknowledge the political dimensions of this 'reality'. I wanted to examine the role of power in maintaining unequal forms of relationships. I finally examined how therapists mobilised talk to serve interpersonal goals and how they utilised discourse to produce particular forms of autistic life.

7.1.5   Centering the approach through research questions

The deployment of research questions started with general ideas. I concurred with Harper (2006) and Nikander (2008), who suggest that it might be better to adhere to a 'last-minute' approach towards the research question. In this sense, I intended to begin with strands of broad research questions and later deploy more focused ones after interacting with my research data (Howitt & Cramer, 2011).

Thus I initially decided to rely on two broad levels of questioning that reflected my research interests:

a) The first level of questioning attended to the macro-level of language and communication, asking: How is autism constructed inside the clinical realm? I envisaged some secondary questions that related to the way the therapist utilises discourses that are available through psychoanalytic and wider culture to construct their experience. What does the therapist talk about and where are the emphases when constructing their experience of the autistic client when in conversation about them? What subject positions are made available for the autistic subject or therapist through this talk? Further, I asked what ways of being these subject positions enable or delimit either for the therapist or the person with autism?

b) The second strand of questions that guided this research derived from the micro-level of interaction by focusing on the immediate interactional context. In this, the primary aim was to identify the discursive repertoires that the therapist utilised in

order to achieve specific goals in the context of the interview and to construct different versions of autistic 'realities' (Jongersen & Phillips, 2002). Further, through the micro-level of DA, I strived to attend to the discursive devices[4] that were mobilised in the therapy talk. One of my initial concerns was to interrogate how therapists pursue their accountability by building credible and persuasive accounts.

7.1.6 What are the aims and expectations of this research?

This research began with a desire to understand autism spectrum disorders in the clinical setting. The main component of this endeavour was to focus on language, text and the construction of meaning. This could be presented as a series of themes that summarise the aims of this research formulation.

Thus:

- I examined the role of talk in the production of autistic subjectivity in clinical environments.
- In this context, I began asking 'how the socially influential ways of describing autism informed the clinical 'talk' and further 'how this discursive formulation of the subject could influence the delivery and conduct of therapy'.
- This was also extended to the notion of positioning (Davies & Harre, 1990; Törrönen, 2001) that could partially explain the way that alternative subjectivities get done, or remain unexplored and unformulated in therapy.
- My curiosity was also directed to the way that the therapist engaged in interpreting activities. I considered insight and interpretation to be central therapeutic activities, through which meaning is constructed and then enacted in the therapeutic dialogue.

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[4] Discursive devices are defined by Wiggins (2017) as the core analytical tools of DP that enable the examination of psychological and social actions.

The idea was that language could play a central and primary role in the therapist's understanding of the client's material and their creative gestures. A discursive psychological view of therapy and language could open up new readings of psychoanalytic terminology in ASD and the concepts that inform its practice (e.g., autistic shell, primitive agonies, internal phantasy, and others), (Potter, 1996). These could be seen not as pre-formed psychological states waiting to be revealed by the therapist, but as situated accomplishments of the therapist's discursive activity.

- Further, I considered that through the constructed and constructive role of language, there could be a mutually influential regulation of subjective states that constitute the core of what takes place between the client and the therapist. In this way, change on the therapist's discourses could affect the subjective experiences of the client in a mutual intersubjective "dance". For example, the idea of the child as been enclosed in a 'hard shell', could offer specific ways of being for the child and the therapist who then try to fight or resist against this discursive framework. This could be seen from the perspective of broadening of relational scenarios (Gergen, 2009; Levenson, 1972; Shotter, 1993) and forms of life that develop during a therapeutic meeting.

- Finally, I tried to locate talk about affect and emotion as particularly relevant to the construction of the autistic subject and their material-corporeal-discursive products (Denzin, 2017; Wetherell, 2008). In this way, I attended the way that the participant has used emotions as language tools that achieve certain functions on the interactional level. For example, I tried to see how emotional language was used to build the factuality and accountability during the interviews.

7.2 Constructing the method

7.2.1 A critical discursive psychological framework for studying autism

There are now essential voices that support the social construction of autism (Nadesan, 2008; Hacking, 2009a). These accounts argue that the individual lives of autistic people have been in constant interplay with their social, institutional contexts and therapy has been no exception to this (Alvarez, 1992; Nadesan, 2005). Therapy is considered in many respects a process that takes place in the relative isolation of the clinical setting, in which both the client and the therapist are moved by forces that do not solely reside in their interiors, but also stem from their social worlds (Layton, 2008). In this respect, Dimmen (2011) in line with constructionist accounts, claimed that individual lives are always saturated by broader meanings that are on offer in every present and past society.

Wetherell (1999) articulated critical discursive psychology CDP as the 'capturing of the paradoxical relationship that exists between discourse and the speaking subject' (p. 4). I decided to rely on CPD's method to capture the combination of the 'every day and the cultural' (Wiggins, 2017, p. 44). I remained open and sensitive to the performance of autism as an interactional accomplishment while staying vigilant to the cultural resources used by the participants (Lester, 2011, Unpublished Theses).

7.2.2 Description of the critical discursive psychological (CDP) approach

CDP originated in the work of Wetherell, Potter and Edley (Mc Avoy, 2007). As Wiggins (2017) stated, CDP research acts as a bridge between the micro-analytic study of text and wider new analytic activities. With a predominant focus on the role of broader repertoires in shaping the discourses of participants, CDP distances itself from traditional discursive psychological concerns about talk. Taking a broader view of the function of context, CDP does not only try to understand language inside the limited interactional template

(Schegloff, 1997). On the contrary, it serves as an explanatory framework of how historical and cultural knowledge becomes embroiled inside conversations decisively affecting the process of meaning construction in the here and now (Edley, 1999; Wetherell, 1998; Wiggins, 2017; Willig, 2008).

The defining features of CDP originated in Wetherell's original paper (Wetherell, 1998). In this paper, she argued for a less polarised functioning of discursive research. Therefore she rejected the distinction between the micro and the macro-analytic approaches, advocating for an analysis that could combine both analytic frameworks. Finally, she argued for an analysis that is sensitive to what transpires at the local interactional context and also the wider social and cultural conditions (McAvoy 2007; McMullen 2018).

7.3 Research procedures

7.3.1 Accessing psychoanalytic data

Since the beginning of this project, the generation of data has been a challenging enterprise. Starting with a broad interest in psychoanalysis and autism, I tried to engage with the topic reflexively. Initially, I set several priorities with regards to the research agenda and the questions that informed the research. I started by contacting the local psychotherapy establishments in order to examine the possibility of generating data within Greece. Having worked as an occupational therapist and a music therapist in several clinical placements, I was aware of the domination of neuro-psychologically defined paradigms about working therapeutically with autism. Although I located a small number of psychotherapists, who were trained psychoanalysts, it turned out that they did not treat autistic individuals through this method.

Several times during this phase I was strongly discouraged by the relative lack of responsiveness of psychotherapists to my research requests. The reluctance to participating

in research designs is not something that the community of psychoanalysis has adequately addressed. The strong reliance on this discipline on individual publications using the case study method has obscured the development of alternative methods that could enhance the overall psychoanalytic knowledge field.

After considerable engagement with the psychoanalytic terrain, I tried to make a list of all possible institutions that could be interested in this kind of research. During this phase, I expanded the search strategies by incorporating most of the English speaking countries. I also build a backup plan by attending to the possibilities of finding alternative material that could provide thick descriptions of working psychoanalytically with autism. In this sense, I tried to access NHS (National Health System) records by obtaining ethical approval from this institution, a schedule that was later abandoned. Finally, I tried to access other types of material, such as documentary films or published case study papers that could provide me with a description of the psychoanalytic approach to autism. While these sources could stand as legitimate research data, I still considered the possibility of locating a considerable number of therapists who could provide first-hand accounts.

7.3.2 Recruitment and participants

The recruitment of research participants was a slow and challenging procedure. In order to counter the relative scarcity of research participants, I designed a multi-phase procedure. The principal strategy consisted of sending emails to the main psychoanalytic societies in Europe, asking them to circulate the invitation to their members. I also tried to approach more global organisations such as the International Association for Relational Psychoanalysis and Psychotherapy. A second strategy employed a more direct approaching of potential participants. To do this, I obtained email addresses of people who published autism-related papers in the main psychotherapeutic journals. My reasoning was that by approaching some of the most recognised authors, I could more easily acquire access to potential participants.

In this respect, I contacted at least 30 English, French, Greek and Italian speaking therapists. As part of the recruitment strategy, each of the therapists approached received an email containing the 'Invitation to participant's letter' which explained the main points of the research (see appendix 2).

In the early stages of recruitment, my selection criteria were quite vague. 1) The participants should have been able to talk fluent English either as their first or their second language. 2) They should have an academic background relative to psychoanalytic psychotherapy. 3) They should also have a clinical experience of more than two years working with children or adults. 4) In case they did not currently work with autistic individuals, they should still retain an active role in the area such as supervision. 5) I decided not to include trainees of psychoanalytic programmes because of their shortage of experience and their mainly theoretical approaching of autism.

In the beginning, I did not set up a time framework for recruitment. However, due to its relatively unpredictable nature, I had to place a limit of no more than two years from the beginning of the recruitment strategy. Although I contacted many individual or collective sites, I did not manage to get more than fifteen responses to my initial invitation. From those interested in being interviewed, three never contacted me after my second approaching. Two of them were not practising analysts but were having an analytic background. One of them was rejected because their past experiences with autism did not involve practising as a psychotherapist with autistic people. Another one did not manage to provide a face to face interview because of personal reasons.

At the end of the recruitment phase, I managed to recruit eight experienced psychoanalytic psychotherapists, which I evaluated as a worthwhile sample size for a labour-intensive methodology, such as DA (Willig, 2008). The final sample did not include any male therapists. It included eight qualified child psychotherapists who had a wide range of

professional experience, and their age range was from 35 to 70 years old. Among them, two of the therapists worked for less than ten years, while the rest worked with autistic individuals for more than fifteen years. All of the therapists worked within the European Union region and practised both in private and public placements. Three of them did not currently conduct sessions with children, although they used to do in the past but were involved in alternative ways with the therapy of autism.

The next phase of the recruitment consisted of sending the 'consent form' (Appendix 3), which clearly described all the essential information about the research and which needed to be completed before their participation. At the final stage, each participant was asked to provide a space of his own choice and indicate a time where the interview could take place. All interviews were conducted by me and were recorded in two digital audio recorders. Although I did not offer the opportunity of giving an interview through skype or any other digital media platform, most of the participants felt more secure to be approached in face to face meetings.

All participants were recruited from personal email communication. Therefore, they all participated in the research under their personal opinion framework and not through not directly representing the agencies they were employed at the time of the interview. In particular four of the researchers were contacted through their email addresses obtained by their autism related papers while the details of the rest were located form the initial four subjects.

7.3.3 Ethical considerations

The research study was reviewed by the University of Hertfordshire Health and Human Sciences Ethics Committee with Delegated Authority (ECDA) and received an affirmative protocol number (appendix 1). In order to ensure anonymity and confidentiality for the

participants, all names were changed, and pseudonyms were used. As such, the replacement of the therapist's names with ordinary European ones will ensure that the identity of the participants will be kept safe. Finally, all other relevant details such as placement names, and supervisor details and other easily identifiable information will be kept secret since their disclosure might jeopardise the ethical considerations of this project.

7.3.4 Theoretical grounding of the interviews

My thinking about interviews took place around the debate of naturally occurring or research generated data. I coincided with those authors who considered the interview as one of the most productive ways of crafting the self (Gubrium & Holstein, 2002) and thus did not understand it to be a less 'naturalised' source of qualitative data. I reflected on several crucial issues that could allow me to bypass my research agenda as several authors have articulated (Antaki et al., 2003; Potter & Wetherell, 1995). Thus I concurred with McAvoy (2009, Unpublished theses), who took interviews as: 'sites set up by the interviewer, but the resources interviewer and participants bring do show something of the meaning-making resources available, and the pattern of deploying them, and orientations to trouble and dilemma.' (p. 128).

The construction of the interviews in an unstructured format facilitated an open-ended description of the phenomenon of autism as experienced by psychoanalysts. Although I found Harper's (2012) idea about acting like a 'devil's advocate' quite helpful, this was one of the most challenging parts of the interview procedure. It appeared that in most cases, I empathised with the views of the psychotherapists. For example, I found it particularly difficult to raise a counter position when psychotherapists employed a pathological repertoire to construct autism. Of course, my alignment with the discursive trajectories of the therapists could also reflect the dominant pathology-laden view that I hold about autism as an active member of the therapeutic community.

7.3.5   The construction of the interviewing procedure

The conceptualisation of the interviews stemmed from three areas of thinking. The first area related to oral history traditions in research. According to oral history, the interview procedure is seen as a creative act of imagination. In this approach, the choreography metaphor is used to indicate that both sides in the interview move towards the activity of completing the dance that is the interview (Janesick, 2010). In the second area, the interview structure and attitude were informed by the ideas of Wilfred Bion that relate to the stance of getting involved in the interview relationship without memory and desire (Symington & Symington, 2002). I understood this position as standing at the centre of the interview logic that is to elicit narratives that are not infected by personal theoretical biases. Finally, the third strand that informed the interview attitude came from the Free Association, and Narrative Interview method FANI (Hollway & Jefferson, 2000) that is an approach to interviewing that tries to elicit meaningful personal stories.

In this vein, I understood my role within the interviews both as a facilitator and an interventionist so that a complete elicitation of repertoires could become possible (Potter & Wetherell 1995). My role consisted in: a) generating open-ended questions or statements that could provide a storied narrative (e.g., can you talk about your experience of autism), b) avoiding why questions that suggested mechanistic discourses, c) reformulating the respondent's utterances, so that we did not drift from the meaning frames used by him/her, d) allowing for free association that could provide narrations that are informed from the unconscious logic, e) and challenging of themes that related to issues of domination and hegemony so that a fuller picture of the role of power could become evident (Hollway & Jefferson, 2010).

In this framework, each face-to-face interview took place in the environment that the participant indicated, providing a diverse set of social sites. In terms of the setting, it was

preferable that the participant could indicate this in order to secure issues of power, safety and familiarity. For example, one participant requested that we meet in a noisy coffee shop which deteriorated the reception of the sound and the ability to converse.

The interviews lasted for approximately 60 to 90 minutes, and each participant was offered the opportunity to give an extra interview in case he/she felt that he/she needed to address additional issues. On the whole, the interviews were structured in a collaborative fashion which offered the opportunity for a joint discussion. The interview method was inspired by Hollway and Jefferson (2010) and also by Janesick (2010). It was crafted as a broad framework that relied on a set of guideline questions. In this sense, it included four types of questions.

- Opening questions included a short description of the reason for the interview, followed by a simple question such as 'So would you like to share with me some of your past experiences with autism?'

- Descriptive questions that tried to elicit stories about the therapist's understanding of autism as in 'could you describe the way you understand change in autism?'

- Clarifying questions were used to delineate some thorny issues. In asking the therapists question of the type 'You seemed to imply x but could you elaborate more on this?, I tried to evoke further details on issues that appeared less narrativised.

- Confrontational questions were phrased in order to provide power-related descriptions. For example, in trying to challenge some of the dominant ideologies of autism I tried to pronounce the opposite opinion frame as in 'But isn't this what people with autism are trying to advocate for?'

- Finally, closing questions tried to provide the therapist with an opportunity to elaborate on any remaining thoughts that could add to the data sample. An indicative question of this type would be 'Is there anything else that you consider important and has not been addressed by our discussion so far?'

7.3.6 The use of interviews in discourse analysis

There is some controversy about the use of interviews in discourse analysis. The debate concerns whether interviews should be considered unproblematic means of data gathering. Those who react skeptically against the use of interviews seem to favour naturally occurring data generation activity. Among them, Potter and Hepburn (2005) developed a strong opposition to using interviews, highlighting a wide number of problematic areas. In their detailed critique they underlined the role of possible factors that impede the interview technique such as the role of the researcher, the conventions of social research and the lack of information with regards to the interview set-up. They also discounted interviews on the basis on more crucial factors. The most important of them seemed to be the interviewer's motivations, the repetition of cognitive concepts and the various conventional positions between the interviewer and the interviewee.

While this strand of critique has been substantially useful for the development of alternative sources of data in qualitative research, the supporters of the opposite camp propose their own agenda concerning the issue. Hollway (2005), for example, has rejected the arguments of Potter and Hepburn as narrow and unproductive. According to this author, the interview situation could lead to a fruitful analysis if one attends to the principle of understanding the interview as a whole relational event and not solely as a linguistic exchange. On this ground Hollway (2005) added that even a very detailed transcription of the data could not lead to a proper analysis if not understood as a meaning-making scenario which gives adequate evidence for the subjective states of the dyad. In a similar vein, others argued that even if

the interview is inevitably contaminated by the researcher's motivations it can always lead

to a dialogic generation of meaning provided that the researcher can attend to his/her active

role as an interventionist who tries to trouble and enhance the process of meaning

generation (McAvoy, 2009; Potter & Wetherell, 1995; Taylor & Leittleton, 2006)

7.3.7   Transcription of the data

A common truism of discursive research is that analysis begins with the transcription of the

data (O'connel & Kowal, 1995). It is an indispensable part of the analytic process, which

reflects the theoretical principles that inform the research (Lapadat, 1999; Ochs, 1979).

Whereas in the early phases transcription was taken as an unproblematic and transparent

medium of entextualisation[5], later it was seen as a reflection of the researcher's interpretive

choices. The discourse analytic community could be seen as being divided with regards to

the way researchers should use transcription. Instead of renouncing this debate, I suggest

that it would be more useful to deploy my way of transcribing which mainly builds on Kvale's

(1996) suggestion that rather than targeting an idealistic type of transcription the researcher

should ask: 'What is a useful transcription for my research purposes?' (p. 166).

Following the pragmatic orientation to transcription I decided to engage in a transcription

process that would ensure my analytic commitments (Taylor, 2013). In a way similar to

McAvoy (2009, Unpublished theses), I viewed the more exhaustive transcription system as a

kind of analytic pitfall that overshadows the research process. Therefore, I engaged in a

transcription activity that would neither strive for higher objectivity of language (Parker,

2004), nor a kind of dominance of words and symbols over the actual analytic material.

The choices were influenced by a need to understand the material through recursive

entextualisation. Initially, I conducted an orthographic style of transcription in order to

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[5] Entextualisation is defined as the process of detaching language from its original context and transfer
    it in a different one (Jones, 2015)

capture the whole context of the interviews and also allow for better readability. After

repeatedly listening to the material and also drafting and redrafting the original transcript, I

took a close look at the interactive aspects of the interviews. Having selected pseudonyms

for my participants, I tried to listen to the interviews in as many ways as possible. In order to

achieve greater flexibility in using the audio material, I used 'Audacity' open-source

computerised software. The software allowed me to listen to the audio recordings in several

modalities, playing with the features of the sound and talk.

In these early phases of the transcription, I was more interested in capturing the language of

the discussion and not the para-linguistic features. However, as time went by, I also

developed an additional interest in the dynamic aspects of communication such as pauses,

intonation and accelerated speech. These features provide additional information for the

researcher that strengthens the analytic claims by noticing the interactional features of the

interviews (Hepburn & Wiggins, 2007). Thus, I found that a more analytic transcription

became important since it complemented the discursive resources that the participant used

in variable ways. However, for reasons of time management, I decided to transcribe in more

detail the parts of the text that have been selected for analysis from the data.

The summary of transcription notation that is included in Appendix 5 is an appropriation of

the conventional system introduced by Jefferson (2004). I organised my transcription

notation system by using some of the widely used symbols of punctuation that helped me

record the varieties of linguistic features. After detailed and generic scrutiny of the research

material, I focused on a wide variety of excerpts, based on 'intuitive hunches' (Harper, 2006)

and also on the displacement of my research questions on the audio and transcribed text.

The use of a limited number of symbols to indicate pauses, the pace of talk, the increased or

decreased emphasis of speech, and other features of the text were included as augmenting

the details of the interactional landscape. Although due to methodological commitments I

was not required to include much detail in the text, I decided to include those details not only for committing to a more fine-grained analysis but to allow the reader to attend to the broader interactional field as this occurred through my transcription. In this sense, I personally transcribed approximately 10 hours of interview material.

7.3.8 Selecting interview excerpts for analysis

All interview excerpts were selected by a long and iterative reading of the transcripts (Werzt et al. 2011). The process involved a circular process that included three main steps. First I read carefully and repeatedly the text, making notes on the side of the page with regards to features of the text. Then I allowed some time and got back into reading the text again and again trying to make additional notes in the identified sections. If a contradiction occurred between my first reading and the second I tried to reflexively attend to this tension, wondering which features of the text might provoke this phenomenon. I then openly questioned the labels inserted in the margins by trying to examine other possibilities. If a particular text produced a strong emotional reaction I tried to reflexively attend to it, by carefully scrutinising it relation to my everyday experiences with autism. As I have struggled for years to remediate autistic children, some ideas were more meaningful than others. For example, I found the notion of "nothingness" as emotionally resonating since it contextualized many of my earlier experiences. As part of this process I tried to read particular segments with other people (not necessarily clinicians) in order to listen to other potential interpretations of the text. During this time I had the opportunity to become more immersed in the text and also grasp a wider understanding of the discourses that seemed to operate within it. Finally after I allowed for a considerable time I moved the specific sections to a different word file and tried to group them together so that I could start the more precise analysis of the material.

7.3.9 Analysing data using critical discursive psychological methodology

In this section, I will outline the twofold analytic strategy of this research. In the first part, the strategy borrowed from the mainstream literature that although opposed to a 'cook book' guide to analysing research data, gives indications of how to conduct such analysis (Potter, 2003). Some authors, however, warn the prospective researcher against understanding this approach in a stringent manner (Wetherell, Taylor & Yates, 2001b). Thus, even though they provide and describe the analytic process as a stage-based approach, they suggest that the researcher build his craft skills for the analysis of projects that rely on DA. In this vein, the analytic strategy followed is presented below. This was revised from Billig (1997) and Potter (2003), and included the following steps:

1. Having decided on the topic that I want to study, I settled on research data.

2. The data consisted of eight transcribed interviews obtained through Free Associative Narrative process (Hollway & Jefferson, 2010).

3. Interviews required careful and consistent transcription.

4. The analysis commenced by listening to interviews for familiarity and transcription.

5. Transcription began as soon as recordings of the data were obtained. Potter (1998), suggested that the analysis of data starts directly from transcription because in writing and transcribing, you immerse yourself into the data.

6. After finishing the transcription procedure, I checked the transcript consistently against the recorded material.

7. I then began reading carefully in order to familiarise myself with the data.

8. I engaged in circular reading while looking for interesting features or what Harper (2006), calls 'intuitive Hunches' (p. 50).

9. Then indexes and features of discourse were identified according to my main analytic sentiments. Notes and preliminary codes were inserted within the text to allow for identifying recurrent themes and discourses.

10. More circular reading helped identify key discursive features such as oppositions, recurrent terms, particular phrases, metaphors and subject positions. At this point, the selection of excerpts from the data was decided in order to start organising the analytic repertoires. The selection of the excerpts was a circular process. It involved the activity of looking at the data through the research questions and making notes about recurrent themes and linguistic features.

11. At this point, I started drafting my preliminary analysis, while being critical, and began thinking about the features, effects and contexts of discourses.

12. Drafting and redrafting the analysis took place as an iterative process, which consisted of comparing extracts. Several times during analysis I strongly identified with Poter & Wetherell (1987), who contended that the analyst should be prepared to abandon themes that might initially seem significant. This was a particularly daunting procedure since it occurred several times during analysis.

13. Recurrent, analysing, thinking, reading and writing took place until more satisfactory text appeared.

14. At this step, I was prepared to go back to stage one, as Potter (2003) suggests.

I have also identified five levels of interpretation with regards to discourse that provide me with the content of analysis. Specifically, I relied on Georgaca and Avdi (2012), who conceptualised discursive research as unfolding through five main templates. Thus, I studied the language produced in the data as:

- *Constructive*. This allowed me to focus on variable constructions of autism in the text and then examine how these constructions were connected with wider discursive resources.

- *Functional.* The focus here has been placed on the organisation of accounts and the parallel strategies used by speakers, in order to achieve interpersonal goals in the context of the interview. The participants' orientations included the purpose of presenting himself/herself as a reflective analyst, or presenting his account as credible, truthful or legitimate.

- *In terms of positioning.* Using the notion of positioning allowed me to identify the way the therapists created competing subject positions for themselves and the autistic individual. According to Torronen (2001), the notion of subject position has a relational value since the positions created from the speaker withhold rhetorical effects which silence alternative ones.

- *In terms of power and practices.* This strand of analysis took me further in the role that discourses play in this piece of dialogue, either for challenging or maintaining power relations, hegemonic institutions and regulatory practices.

- *In terms of subjectivity.* This last stage played a significant role because it registers the questions of discourse and subjectivity imposed earlier. Discourses entail subject positions and 'kinds' of subjectivities in them, and this has implications about the way that subjects think, understand, relate and experience situations. This is the part of the analysis that would examine the derivatives of certain positioning for autistic lives (Avdi, 2012; Harper, 2006).

7.3.10   Exploring the warranting claims of this research

The warranting of discourse analytic research does not rely on positivistic claims of validity and reliability. Many authors have addressed the issue of applying a set of criteria that could enhance the trustworthiness of the analytic claims and interpretations. In order to provide my research with greater validity and reliability, I drew on several authors and examined the way they applied their criteria (Georgaca & Avdi, 2012, Harper, 2006; Potter & Wetherell, 1987; Wood & Kroger 2000). These criteria gradually became part of my developing discourse analytic skills, influencing my interpretation of the data and also the reporting of them. Thus, as I proceeded with my analysis and writing the report, I followed the following steps:

1) Initially, I started by trying to provide a sound analysis inside my research report which relied on a consistent and detailed deployment of the excerpt followed by my analytic claims as I worked them through the analytic steps. A sound discourse analysis regularly makes use of a detailed description of the analytic process. In order to ensure the trustworthiness of the research, I provided considerable details with regards to how I reached my analytic claims instead of just reporting my analytic interpretations (Wood & Kroger, 2000).

2) I also tried to provide a coherent account for the reporting of my results so that the reader could access my analytic claims as a coherent storyline. In this respect, I have written my analysis in a way that does a coherent reading without imposing on the reader any need to accept it as the only interpretation. The idea behind this is that by a thorough and detailed analysis the reader can have enough space for examining the analytic claims while making his judgments (Potter, 1996).

3) Further, I was alert to the possibility of committing analytic pitfalls, such as those that are addressed by the discourse analytic community (Antaki et al., 2003; Burman, 2004). Indeed, through the recursive approaching of the data, I realised that discourse analysis should consist of careful exploitation of the ways that analytic conclusions were retrieved from the selected excerpts. Therefore, I tried to make my analytic interpretation as transparent and situated as possible. In this way, I opened the reader to the possibility of evaluating my claims through his immersion in the quoted text (Potter, 1996).

4) Additionally, I resorted to a reflexive process when interacting with the data in order to understand my own biases towards the themes that emerged. One of the main problems that I encountered was the fact that my supervisors and I are members of the therapeutic culture with long and established vocational careers and this made it particularly challenging to converse about the findings through transcending our hegemonic views about autism in a pathological framework. Thus, I incorporated reflexive comments in several parts of the thesis by trying to maintain a high degree of relational ethics with the readers and research participants (McMullen, 2018).

5) The usefulness of this study for the broader area of knowledge appeared as a final warranting criterion. I saw this research as addressing some very contemporary topics with regards to autism, disability and therapy. The findings of the research provide originality and novelty to the current debates around autism and could, therefore, stimulate new questions about research into disability. They could also provide a new array of discourses that produce novel explanations about autism and therapy (Potter & Wetherell, 1987).

6) Finally during analysis I tried to attend to the unfolding dialogue as having variable and shifting meanings (Potter, 2004; Wood & Kroger, 2000). I tried to

locate inconsistencies within the talk seeking out deviant cases in the total sample (Potter & Wetherell, 1987). Similarly to Potter and Wetherell (1987), I attended to inconsistency and diversity as a general characteristic of talk. Such inconsistencies were taken as framing the borders of the different repertoires identified but also as a kind of validation of the analysis (ibid.).

CHAPTER EIGHT

Results of study one

This study aims to discursively capture the psychoanalytic therapist's use of language in their encounters with autism. Autism has been associated with the views of a limited number of analysts, producing adverse reactions. The review of the literature of psychoanalysis showed that psychoanalysis offers an intertextually rich corpus of theories in order to account for the lives of people with autism (Georgiou, 2014). These discourses and ideas have been, as Broderick and Ne'eman (2008) noted, part of the mythologising past, present and possibly the future of autism. They have contributed, to the reification of autism, causing considerable critique, discredit and scepticism (Nadesan, 2005).

Psychoanalytic discourses pronounced a hegemonic voice, which gave life to acts of resistance from those populations that found themselves mesmerised by them. In the opposite directionality, we have witnessed and continue to do so what Yergeau (2017) noted as a series of 'coalition histories' (p. 179), an arrangement of the opposite forces that came to craft the meaning of autism away from the premises of the clinic. This chapter captures some of these stories and the way that they currently fabricate autism inside the premises of the clinic.

Despite being among the treatment options for people with autism, psychoanalysis followed a declining trajectory in terms of its popularity in ASD. The public has been receptive to behavioural and neuro-psychological treatments that strive for the modification of problematic behaviour, instead of trying to understand or reason against the psychic underpinnings that might contribute to the autistic phenotype. The apparent marginalisation of psychoanalysis as a treatment modality for autism can partly be investigated in the context of this discursive constructionist research (Potter & Hepburn, 2008).

The analysis will orient towards a layered exploration of the therapist's language, springing from the notion of interpretive repertoires. Defining repertoires as unique ways to talk about a social phenomenon, I will investigate how the therapists interviewed drew on these clusters of meaning in order to negotiate the fluctuating constructs of autism. I will also attend to the constructive dimension of discourse inquiring the versions of autism that are made relevant within the discussion. Thus I will ask, 'how is autism assembled inside the talk of the therapists?' In doing this, I will try to show what is achieved by the rhetorical organisation of these accounts and explore the linguistic devices that foreground the therapists' talk. Further, I will attend to the fluctuating, momentary and always developing subject positions that are made relevant within the interview interaction, watching the way they gravitate towards the socially induced meanings that fabricate autism and psychoanalysis (Georgaca & Avdi, 2009). On the one hand, I will ask: 'how do specific subject positions serve functions on the level of the text?' On the other hand, I will explore the role of broader discourses in the articulation of such positions. A politically informed analysis will orient to questions of ideology, power, and 'voices' while examining the consequences that they have regarding autism. The analytic findings will be presented across four different repertoires of language that, to paraphrase Wetherell (2003), arrange the talk about autism held with the therapists.

8.1 Repertoire 1: 'Who knows what autism is?': Autism as a heterogeneous 'unknowable' construct

The first excerpt arrives early in the therapist's talk. Previously this therapist had been referring to her vocational and educational history at a public clinical placement that offers long term treatment to children with autism. My interpretation of the text in terms of its functioning relates to the fact that the author crafts a valued vocational experience that could secondarily strengthen her account about autism. The discourse of diagnostic

heterogeneity further provides her with a higher degree of flexibility and freedom in order to build the rest of the interview.

Extract 1.1 Therapist Hanna

1 R: So (.) in terms of my wo:rk actually with each individual patient (.)

2 it:s very different /

3 So I think my experience of autism as a kind of catchpole (.)

4 cause I don't really believe that the thing called autism in the singular sense (.)

5 is you know kind of I sup:pose (1.5)

6 in the (.) that in a lot of the children that I worked happened to have a diagnosis of autism

7 is probably what I would think of (1.5)

8 Em (.) but within that service we have um (.) you know some very specific work to do

9 and a lot of the children we get referred to

10 psychoanalytic psychotherapy (.) is where this eh eh issues really around anxiety and depression (.)

11 rather than necessarily an idea that there is some developmental work to do /

12 although we feel that (.) that's also where we are contributing to

13 I: Aha

14 R: E:rm so it's yeah it's really intriguing, huge huge variations of patients.

In this small piece of talk, the therapist is provides a construct of autism as variable and thus not easily detectable. This is initially worked as a derivative of individuality in the context of

therapeutic encounters. The therapist's statement (line 3) 'So I think my experience as a kind of catchpole[6]', provides a metaphor for perceiving the therapist as charged with the difficult business of diagnostic gleaning. By using this metaphor, both the therapist and the person with autism are placed in a very delicate position, which mainly connotes two things. One thing relates to the fact that autism is portrayed implicitly as an entity with apparently undisciplined, 'feral' qualities, someone who needs to be legally approached. This kind of representation associates with early historical accounts of autism that emphasised the primitiveness of the condition but also more recent ones that represent autism in terms of its disabled features (Freeman & Loftis, 2015; Waltz, 2004). The second thing is perhaps allied to the role of the therapist as having a legal responsibility to be able to distinguish among children with autism and children that could be offered an alternative diagnosis.

As the therapist continues, the metaphor becomes more clarified. Initially, she weakens the diagnosis of autism by saying 'the thing called autism' (line 4). Then she builds on this template by moderating the strength of the argument. At first she is using a quantifier of the autistic society as in 'a lot of the children' (line 6) and then returns to the issue of diagnosis using passive voice, 'happened to have a diagnosis of autism' (line 6), ultimately closing the argument with a kind of hedging 'is probably what I would think of' (line 7) followed by a long pause.

The participant seems to be torn by the diagnostic vagueness of autism. On the one hand, she enacts a 'catchpole' role in order to capture autism, but on the other, she avoids diagnostic determinism offering a less barren therapeutic service. The polarisation that is exemplified by the use of the variability discourse is rhetorically dissolved when the therapist talks about the 'real' job that takes place in the placement that she used to work.

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6   Source: www.dictionary.com. 'A catchpole is a petty officer of justice, especially one arresting persons for debt. According to the Collins dictionary a catchpole is a medieval officer who arrested nonpaying debtors' [accessed 03 March 2019].

She specifies three main facets. a) The fact that in the service they have 'some very specific work to do' (line 8), b) that children 'get referred' to the service for this specific work (line 9) and c) that there are very specific issues at work 'issues really around anxiety and depression' (line 10).

This kind of positioning allows the therapist to present herself as a practitioner or expert in diagnostics that has the task to help the child with his/her emotional challenges. By drawing on a psychotherapeutic discourse, she manages to annul the medical repertoires that are crafted by diagnostic language (Avdi et al., 2000a). This might indicate the therapist's appeal to avoid negative accountability relating to posing harmful discourses against autistic people. By being vague, she also commits a political statement against the cumulative damage that has been exerted on parents of autistic children.

The next participant provides an outline of her work with children on the spectrum, as a response to my question, which appears in line 1. Her response concerns the role of the therapist as an investigator. This excerpt favours an empirical understanding of autism. One of the accomplishments of its rhetorical organisation is to counter alternative versions of autism such as the diagnostic ones that could be criticised for falling into a crude disablism. By embracing the repertoire of variability she initially, discounts medicalised diagnostic representations of autism and then populated this discursive void through psychotherapeutic language.

Extract 1.2 Therapist 2 Simone

1 I: So (.) <u>how</u> could you describe this process (.)

2 in terms of relating to to a child with autism?

3 R: Well (1.3) I think that (.) I I slightly think em (.)

4 that the diagnosis is is so broad and the different types of children

5 and different presentations called or <getting started (.) so called autism

6 is so huge u;m (.) that I th:ink (.)

7 the presence in some ways is different for different ones /

8 For instance (.) in a working with a little three year old boy

9 who is **just** been diagnosed (.) who is very more in the Asperger's end (.)

10 who is more um very sort of withdrawn and needs drawing out of himself and doesn't play

11 and is very rigid lining trains up and down for instance (1.8)

12 compared to an adolescent who she looks like a learning disability autism (.)

13 who was very ex:plosive and her **anxiety (.)** rather than making her

14 particularly withdrawn

15 she would withdraw into her fantasy world (.)

16 but rather than withdrawing with the same way he did (.)

17 would become <u>very</u> **explosive** and she is one different type of approach /

18 but I sort of think that actually working psychoanalytically with children with autism

19 I think other people don't necessarily think this

20 isn't so different from working psychoanalytically with <any other children that> you know (.)

21 what you are doing is trying to understand the world a bit from their eyes /

22 I: Understand sorry?

23 R: The world from their eyes/

24 you are trying to see the **meaning** in behavior and communication (.)

25 that might appear to be **utterly** meaningless /

26 Em I mean I think the (.) where the differences may be

27 are that for instance and also be making a little girl who's got no language at all

28 that um I be you know and you're saying (.)

29 such as Anne Alvarez she talk: s about more actively drawing out (.)

30 children perhaps than you might traditionally in some child psychotherapy approaches /

31 Um basically it feels like it's about trying to make an emotional connection

32 and try to notice '**when do they with: draw**'? /

33 'at what point do they suddenly go to trains

34 as opposed to something a bit more communicative'? /

35 Um '1.2) 'What does it feel like'? =

36 =You know (.) all those sort of questions I guess.

The question posed here could be seen as a precursor to the answer given. The question invites the participant to describe actual experiences of relating to autism. While 'this process' (line 1) is roughly detailed, it orients to a previous line of argument where the participant described her involvement within the team as related to 'highlighting emotional factors'. Beginning with the discourse marker 'so' (line 1) it certainly functions as a definite break from the previous talk which moves the discussion to a notably more privileged area of experience in psychoanalytic psychotherapy that concerns the raw experiences of the

therapist with his/her clients. While it deviates from the kind of free association type of interview style, it could be said to provide only a generic framework that does not patronise the participant.

The repertoire of variability fabricates the therapist's answer to the opening question. The therapist's introductory script signifies the struggle to fight against diagnostic imperatives, leading to extensive use of hedging as seen in line 3, 'Well I think I slightly think' where the questioning of autism as a medical category is initially deployed without any questioning. The same device is repeated in other parts of this vignette such as in line 18 'but I sort of think' and in line 19 'I think other people don't necessarily think this'. The repeated use of hedging is treated here as an indication of the delicate, defensive, tentative and utterly hypothetical function of talk (Harper, 1999; Wiggins & Potter, 2003). This can be a useful strategy to defend against any potential criticism through the personal opinion frame that pertains to this statement.

This workup is particularly interesting since it connects with other parts of the narrative, allowing the therapist to build a notion of autism as reified as 'so-called autism' (line 5). This is telling of the orientation of talk, as foreclosing the normative descriptions of autism. This formulation moves closer to those social languages that speak of the need to abandon the diagnostic category of autism (Waterhouse & Gillberg, 2014), or others that pronounce an understanding of autism as a constructed phenomenon framed by discrete bio-markers (Nadesan, 2005).

Through the variability repertoire, the therapist incorporates a psychotherapeutic discourse that defines autism as two types of social withdrawal that are discriminated on the grounds of distinct symptomatology. The first type is described in lines 10-11 'who is more um very sort of withdrawn and very rigid lining trains up and down for instance' and the second one line 12-17 'compared to an adolescent who she looks like autism who was very explosive […]

she would withdraw into her phantasy world rather than withdrawing with the same way he did would become very explosive'. The kind of discourse that is espoused here is indicative of what Harper (1999), Edwards and Potter (1992) and Potter and Hepburn (2008) define as category entitlement. The use of these two categories of autism is articulated as a pervasive form of embodied participation (passivity, lack of play and explosiveness) that while they do not require a diagnostic labelling, they become particular ways of being autistic, signifying notably problematic areas of activity and interaction.

In the previous extracts, the idea of autism as a unified construct was put into question. The next extracts show how this repertoire saturated the conversation between the therapist and the interviewer. During this extract, the interviewer reasserts the problem of definition, pronouncing a conclusive argument. The respondent aligns with it, launching an answer that resides in an anti-psychiatric, activist discourse (Fee, 2000). The argument is enacted as an accusation against the diagnostic regime of autism. The accusation is quite strong at the beginning of the extract, but it degenerates progressively through inconclusive sentences, script formulations and the use of mentalistic concepts. This kind of discourse dynamic appears to be revealing of the way power works inside people's talk in order to equip the participant's conversational methods (Antaki & Widdicombe, 1999). In a cultural terrain that is mainly dominated by the authoritative logic of psychiatric fundamentalism and realism, its resistance is performed through discursive construction, involving a high degree of contrast and oscillation (Hook, 2007; Rose, 2007).

Extract 1.3 Therapist Heather

1 I: Uh:r (2) I **think** you are describing **very** clearly (.)

2 that from the beginning of the conversation (.)

3 that <what might be a problem> is (.)

4 the way that the actual definition of autism=

5 =it includes so many clinical presentations and so many forms of acting in this word (.)

6 into the world that perhaps this is the main problem (.) in

7 U: I think that more and more that might quite be (.0 because

8 I've been involved in the diagnostic process (.) em that feels **quite cru:de**

9 and which may not be all the terms always meant=

10 I: =Crude in in in w:ha:t ways?

11 R: Well how you end up (.) giving a diagnosis (.)

12 how you end up scoring the the the process which which you use /

13 Does the child e:Rm you know (.) there is lots of different aspects/

14 Does the child em (.) say (2.4) you don't look familiar with any of the diagnostic tools /

15 so the ADOS r:hm does the child have very stereotypical language (2.1)

16 so you might score in that a child that says em (.) 'This was absolutely marvellous' several times

17 because it sounds a bit proffesorish yeah (.)

18 but it feels like that could be so many reasons why the child saying that/

19 I: So no reason is registered in the process of diagnosing/

20 R: I mean I am being a bit I am (.) I am **you know** is a bit tight

21 that I am being crude in my description of it (.)

22 but I think there is something of that /

23 and then we have here what's called the ICD-10 (.)

24 I don't know what you have in Greece em and one of the

25 and then you have to score in the three domains of autism

26 and one of the questions is does the child something like that

27 I can't think the wording does the child the (.) the distant is (2.1)

28 do they behave in ways that sometimes that are not that

29 do they have difficulty regulating their behavior

30 according to the <context for instance> and that is it

31 and everything one of that has to receive scores yes to that question/

32 (2.3) Working in a CAMHS team trauma kind of child service team (.)

33 all children would get that (.) regarding of autism you know /

34 so this this just questions like that feel em yeah

Extract 1.4 Therapist Heather

1 R: Well I guess it's hard to know how else you do it in some ways

2 I: Yeah, you need to have a

3 R: Yeah diagnostic criteria, but I think that given that it it it ends up quite, I am sorry.

The discursive activity of the interviewer marks the beginning of this extract (1.3). Before this statement, there was a lively discussion that elicited a wide range of topics. The stretch of talk in line 1-4 : 'I: Uh:r (2) I **think** you are describing **very** clearly (.) (line 1) that from the beginning of the conversation (.) (line 2) that <what might be a problem> is (.) (line 3) the

way that the actual definition of autism=' (line 4)' provides some sort of condensation of the previous talk in order to switch to another topic that would inform subsequent talk. By formulating this statement within a problem-saturated talk (Avdi et al., 2000b), the practice of language could be seen as announcing a subject position similar to that of the therapist who subscribes to a causality discourse.

The interviewer launches this statement performing a contrast when stating: 'I think you are describing very clearly' (line 1). This could be indicating the researcher's attempt to make clear the stake that is negotiated between the therapist and the interviewer and also to make the therapist assume a more robust position against this. Note how this is introduced in a way that agency is distributed between the two, through pronoun shifting. The fact that this clause does not include any specific question but is articulated as a reformulation of the talk of the therapist makes it difficult to be rejected by the other speaker. For example, if I had simply asked the participant 'do you claim that the definition of autism is wrong?' it would have been easier to get driven into a kind of dispute.

The generic structuring of this argument helps the respondent to align with the content of the clause. The therapist is drawn into this kind of thinking, expressing strong agreement, 'I think that more and more that might quite be' (line 7), which leads to a further doubt of the diagnostic practice 'because I've been involved in the diagnostic process em that feels quite crude' (line 7-8). By framing the diagnostic process under the 'feels crude' qualifier, she provides a negative valuation relying on a concept that assumes a somewhat mental quality. I then pose an elaborating question, asking the participant to extend her previous statement. The question, 'crude in what ways?' (line 10) sounds surprising, the consequence of it being a further justification of the previous comment.

Perhaps the question is also heard as potential criticism by the respondent, who fabricates the answer in a more epistemic discourse (line 15). In order to strengthen and authenticate

her argument, the therapist positions herself as an expert in 'I've being involved' (line 8), without providing any further information about the nature of her involvement. Apart from the interactional trouble that seems to be exemplified through the appearance of a long pause before the statement in (line 14), the expert subject position is also established by placing the researcher in a somewhat discredited counter-position as shown by the definite assumption, 'you don't look familiar with any of the diagnostic tools' (line 14). She then elicits further authentication of the kind of expertise advocated through exemplifying knowledge of technical jargon, 'so the ADOS em does the child have very stereotypical language' (line 15).

What is striking in the remaining text is that instead of producing a list of items to exemplify her expertise, the therapist engages in a to and fro discursive manoeuvring. On the one hand, she appears critical of diagnosis, occupying a rather anti-psychiatric position while on the other, she seems to be defending the diagnostic regimen. As a consequence, the therapist initially constructs herself as 'being crude in my description' (line 21) occupying a rather fixed self-reflexive agentic position, while secondarily she offers impersonal arguments that tacitly position her in the opposite camp as in line 32-33, 'working in a CAMHS team trauma kind of child service team, all children would get that regarding of autism you know'. The discursive activity of the therapist in this section presents as an oscillation between two distressing positions that foster a third one that I discuss in the next paragraph.

The therapist in line 1 of the extract (1.4) responds to the researcher by a pessimistic statement utilising the device of script formulation. The participant argues that: 'well I guess it's hard to know how else you do it in some ways' (line 1), offering a rather generic clause about the topic. This talk is typical of incorporating a script formulation in order to navigate on the burning topic of diagnostic variability. It announces a kind of expected normative

reaction to the issue of diagnosis, resembling parlance of 'everybody does it this way' (Edwards 1995). This sort of talk reflects the participant's effort to move to final closure in the unfolding topic under discussion, inviting the interviewer to come to an end of this delicate subject.

The participant in the next excerpt privileges the experience-driven definitions of autism. By carefully placing the diagnostic language against her experiences, she moves along a more precarious definition of autism. She inhabits the repertoire of heterogeneity to support her unfolding claim, without sounding dismissive or ignorant. In her study of therapists' talk about autism, Lester (2011, Unpublished Theses) indicated that the definition reached by her participants was placed against normative meaning frameworks while favouring the more subjective ones. As in my research, she reported feeling surprised by the fact that most of her participants did not elicit any of the mundane definitions to represent autism but on the contrary tried to construct autism as an emergent, highly situated phenomenon. The majority of the therapists interviewed opposed the common sense ways of defining autism, relying instead on the repertoire of variability to engineer an experience-related version of autism.

The participant in the following extract foregrounds a notable dilemma with regards to knowing what autism is, setting up what Edley (2009) has eloquently described as an ideological battlefield. Drawing on Billig's (1996) work on rhetorical commonplaces, I investigate the enigmatic nature of autism as staged in the dilemma of diagnostic vs experiential understanding of autism. This particular dilemma is worked in such a way by the therapist that it raises serious concerns about the effectiveness of diagnostic principles. It implies a range of contradictions, ultimately leading to a blurring of the 'real' picture of autism by disorienting the therapist's clinical judgment.

Extract 1.5 Therapist Sofia

1. R: Emm do you want to know more about how I got in ur?

2 I: Whatever comes to your mind actually.

3 R: whatever comes to my mind >

4 So my experience of those two boys (.) I think they were

5 both what I understand as autism from my point of view/

6 because for me if you ask me what autism **is** (.) or how I understand it

7 I can honestly tell you **I don't know**

8 if I have to go by diagnosis /

9 because the children that I have seen (.) and were diagnosed by pediatricians and psychiatrists er (0.8)

10 were so different and the level over which they were reaching you know (.)

11 the level of the three diagnostic <I don't know what the word is>

12 but you know that is actually communication language and in the area of imagination (.)

13 that was probably true to an extent

14 that on the basis that they would get their diagnosis (0.7)

15 but in terms of what for <me is important> (.)

16 the possibility to make a **real** emotional connection with the child

17 was worthily different and that the child =

18 =and that with some children on the diagnosis (.)

19 I <u>really</u> can't feel that they don't want contact

20 that they withdraw that they try to avoid it

21 that it feels uncomfortable or even painful for them /

22 and I have seen children in therapy you know (0.9) with the diagnosis

23 who really want to make a connection

24 who engaged with me (0.6)

25 which to me I don't think it's autistic /

26 but because they have severe sensory integration problems

27 in terms of you know (.) couldn't bear noises and have a problem with (.)

28 or have a kind of stereotypical behavior (.)

29 very repetitive and may have some difficulties with social communication (0.7)

30 they would still get the diagnosis but the quality of em (0.6)

31 the way they could relate was very different /

32 so for me (.) that makes it very difficult to say what autism is (0.9)

33 because my sense of what autism is (.)

34 is very different from necessarily from a medical perspective

35 that would tick all the boxes and > get the diagnosis>.

This extract was initiated by my invitation to the participant to talk about 'whatever comes to your mind' (line 2). While this statement is at risk of evoking a defended response from the participant (Hollway, 2009), in the context of this dialogue it is met with a repetition of

the exact words signifying a kind of introspective attitude and also a take on the challenge to free-associate 'whatever comes to my mind' (line 3). After that, the participant moves into building an argument which implies a troubled positionality which extends over the definition of autism. This is expressed in: 'Because for me if you ask me what autism is I can honestly tell you I don't know if I have to go by diagnosis' (line 6-7). On the macro-level, this talk aligns with the voices of those groups that overtly try to question the diagnostic practices of autism while trying to resort in the discourse of functionality (Murray, 2010).

The interviewee borrows this type of discourse to discredit diagnostic activities. She nominates the group of people who are charged with this task, 'the paediatricians and the psychiatrists', marking their activity as different from her own. Having categorised them as experts, the therapist provides an unfinished index of diagnostic features which on the whole she marks as insignificant for her, securing this action through the frequent use of 'I don't know' (lines 7, 11). By consistently providing a cognitive flavour to her criticism, by the repeated use of 'I don't know' and it's equivalent 'I understand', she also prepares the ground for her core argument in lines 22-23-24-25, where the participant launches a step by step rejection of the diagnostic logic. Qualifying her statement as emotional through the use of 'that feel', she announces a four-part list to stabilize and strengthen her overall rationale. As such, she claims that 'I can't feel they don't want contact that they withdraw and that they try to avoid it that is feels uncomfortable or even painful for them' (line 19-20-21).

Within this positive assessment and the statement that follows, 'And I have seen children in therapy you know who really want to make a connection who engaged with me which to me I don't think it's autistic' (lines 22-23-24-25), it becomes clear that the participant discounts the language of diagnosis for understanding autism. With the next move, she further establishes the apparent dichotomy between the normative understanding of autism as prescribed by diagnosis and her own by fabricating her talk through a mixture of

physiological and neurobiological and behavioural discourse, (lines 29-30-31-32-33). Her concluding comment in lines 35-36 moves across the same discursive field while returning to the idea of variability as in 'the way they could relate was different', (line 31).

What also seems to be happening in this passage is that the therapist unintentionally reproduces the apparent dichotomy that currently frames the social terrain of disability and autism (Grue, 2011). While the therapist claims a definitive dispute towards the treatment of the autistic subject in the context of a diagnostic argument, this arrangement is also informant of the new construction proposed by her (Samuels, 1993). Indeed, by drawing on the highly polarised pathology/normality discourse, she provides a view of autistic subjectivity that mainly attempts to bring to light the inherent potentialities of the child. The participant distances herself from the mundane medical regimen, proposing a representation of the children that she treated as of a different kind.

The text is full of modernist assumptions about individuality and selfhood. The therapist's articulation of the child as 'really want to make an emotional connection with me' (line 26), could be taken as securing his/her subjectivity in a modernist ontological framework. To construct the child across his/her normal ability to build emotional ties with others is to situate him/her as a particular kind of human subject that can be the object of legitimate psychoanalytic scrutiny.

8.2 Repertoire 2: 'Comfortable in their autism/damaged in their lives'. Autism as a defence/safety life-world

The second repertoire operated within the unfolding dialogue as a negative marker of autistic life. The therapists regularly attended to autism as involving an agentive positionality, which is formed as a kind of defensive reaction towards the external environment. This conclusion implies a common sense understanding of psychodynamic

health/disease related construction of the subject (Willig, 2000). While autism in literature is described as a spectrum of social impairments (Thomas & Boellstorff, 2017), it is depicted here as a having a particular kind of sociality which provides security for the person.

The therapists embed this version of sociality in a defensive dynamic that a) builds on the modernist division between the public and the private sphere (Clarke et al., 2009) and also b) a view of modern subjectivities under the overarching theme of their problematic nature (Sloan, 1995). In this manner, the defence/safety repertoire could be seen as originating from the wider discourses that frame children's subjective worlds within the 20th century (Nadesan, 2010).

The first three extracts are grouped, since they all prescribe autism in a seemingly relational framework. The therapist appropriates the role of defence inside autistic lives, providing a vivid description that highlights the interactional features that characterise autism. By totally subscribing to the past tense the therapist offers a detailed view of the interaction between the two of them. Historicising this event as a kind of granular, moment to moment interactive episode provides a sense of authentication to the overall discussion

Extract 2.1 Therapist Muddy

1 R: He could imagine being a school teacher (.)

2 and I was the student (.)

3 and I got punishments for writing the same thing many many hundreds of times when I did wrong things

4 And the wrong things were talking to him about things I shouldn't talk about /

5 I: Like what?

6 R: like gaps (.) like why he always had to have a calendar (.)

7 like why we had to play the same boring game

8 every time we didn't do anything new (.) and like when he put a notice up he said (1.7)

9 **you** r going to do handwriting **practice today** (.)

10 so his unconscious was working (.)

11 I've said 'ok', you said your tape he said

12 to remind a sentence (.) **children and pet animals are not allowed out on bonfire night**.

 13 Uh bonfire night in England is the fifth of November (.)

14 when we celebrate by burning somebody (.) called Guy Fawkes on a bonfire

15 and we have fireworks that he tried to blow up the houses of parliament and he failed (.)

16 in sixteen ow two I can't remember some it can be, very near after Queen Elizabeth died

17 with King James the first of England and he was a Catholic (.)

18 trying to get the Catholics' king back on the throne and it's (.)

19 bonfire night and he put an 'R'/

20 so I said, 'I think born is when people are born and I think you are saying (.)

21 people aren't allowed to be born they are not allowed to go out, it would be dangerous' /

22 I think (.) I was a bit direct about it (.)

23 that you are not allowed to come out into a different sort of world when you talk to me

and we can play (2.5)

24 and he said now you have to write that up nineteen nine hundred times (1.3)

26 I: Hm (laughter) (.) so **this** is your punishment /

27 R: and there is to be no <u>change</u>, there is to be no <u>change</u>

28 he then said, you are not allowed to go out to play

29 so I begun to see that there was some kind of structure in him (.)

30 which did not allow certain things which were too dangerous

31 and he was also <u>very interested</u> in narrow things

32 he liked particular kind of pig which his parents also like to go and visit (.)

33 and he liked the top floor of red (.) London (.) buses (1.1)

34 of a particular make called Daimland Route Master (.)

35 and he liked to be interested in the pattern of the upholstery of their chairs (.)

46 and his parents very foolishly bought him a bus conductor's ticket machine=

47 =a real one so he brought back to show me as well and we had very boring time /

48 nobody was interested in where the bus was going or what went out of the windows (.)

49 only in the ticket machine /

50 **so** <u>he</u> is my introduction

At the beginning of this long extract, the therapist conflates a general framework for her experience with the child. The therapist indexes the child in terms of his/her ability to engage in this type of play using the modal verb 'could' (line 1), offering a developmental assessment. She foregrounds the developmental language so that the next comment is heard in this context. By doing so, she provides sufficient details for the audience to

understand the social participation as belonging to a higher functioning child. Having contextualised the broader interaction, she can now craft the dialogue across the dimensions of safety, punishment and control.

The child is depicted as assuming a role that is rather controlling and punitive. He is engaged in a fictional/symbolic scenario that treats the therapist as a source of danger, 'and the wrong things were talking to him about things I shouldn't talk about' (line 4). My immediate question, 'like what?' (line 5) is heard by the participant as an invitation to further elaboration. In response, the participant turns to a vivid representation of her engagement with the child that on the whole is phrased in a confessional contour.

A three-part list device (line 6-7-8) is presented as a justification of the child's motivation for setting punishments inside the session. The explanation elicits a troubling position for the child that frames him within the hegemonic psychological ideology. Autistic people are treated as reacting strongly to change and unpredictability (Singletary, 2015). Although the participant avoids any direct reference to this being a defensive strategy on the part of the child, this is implied as in inter-subjective strategy. Perhaps if the attitude of the child was overtly named under the defence terminology, it would be more likely to place the therapist as a person that intrudes in the child's private space. The psychological notion of defence is reworked in this example as an interactional accomplishment with live consequences rather than a pre-existing mechanism that the person with autism intentionally utilises (Potter & Wetherell, 1988).

In terms of its action orientation, the text resides in three interacting discursive devices in order to build a credible account and also an 'eye witness' layout (Potter, 1996). Through the interplay between a) pronoun reversal, b) reported speech and c) emphasis on the detail versus vagueness of talk, the participant provides direct and uninterrupted imagery of what 'really' happened between her and the child. In the beginning of the statement the

participant declares that, '**you** r going to do handwriting **practice today** (.) (line 9) and then she switches to 'I said ok' (line 11) and again turns to the child noting the 'he said' to recall a sentence 'children and pets-animals are not allowed out on bonfire night' (line 11-12). This continues further down the argument when the therapist offers a detailed script of the interaction. The rhetorical structuring of these consecutive utterances is entwined here not as 'slippery' memory recollections, but as uncontaminated samples of the 'real' engagement.

Through the interplay between the devices outlined above and the action orientation of talk, the therapist efficiently conflates the defence/safety repertoire. Within the polarised subject position created inside it, it is only the child that appears defensively reacting towards the therapist's inputs. The institutionally inscribed roles of the defensive patient and the self-reflexive therapist are reproduced within the text. This is eloquently portrayed in the last part of the passage when the therapist utilises reported speech to reproduce the patient/therapist dynamic further. At first, the therapist offers an interpretation against the patient's discourse saying, 'I think born is when people are born and I think you are saying people aren't allowed to be born (.) they are not allowed to go out (.) it would be dangerous' (line 20-21). Then she performs therapeutic self-reflexivity by stating 'I think I was a bit direct about it' (line 22) and finally quotes the child's linguistic response as follows 'and he said now you have to write that up nineteen nine hundred times'(line 24).

In the end, the participant elicits another claim that further supports my analytic claims. This statement epitomises the repertoire of defence/safety repertoire. Specifically, in line 27 the therapist states that 'And there is to be no change (.) there is to be no change' and later 'so I began to see some structure inside him that would not allow certain things which were too dangerous' (line 29-30). While I interpret these two statements as forging the child inside the defence/safety repertoire, I additionally take them as indicative of their ideological

effects. I suggest that this way of talking produces a way of being for the autistic client that is crafted based on his/her behavioural stagnation. By being animated as evasive, controlling and punitive the child's subjectivity is regulated in a defective colouring which radically challenges the mainstream imperatives that construct child normative development. To think of the child outside this ideological system seems rather ineffectual and also inappropriate for the particular psychoanalytic context.

It is this particular ideological field that organises talk in the two following excerpts. Endorsing from the logic posed by the institution of therapy, the participant repeats her idea of autism being a defensive reaction to social relationships. While this could be thought of as a nodal point of her account (Jongersen & Phillips, 2002), it could also be interpreted as placing autism within the mid-20th-century discourses that pronounced a different rationale for the rearing of children (James & James, 2008). Within these new public imperatives, children were mostly fabricated in the context of newly developed social anxieties brought by the post-war social organisation.

Extract 2.2 Therapist Elisabeth

1R: I can:no see (.) <u>how</u> (1.1) you cannot have a relationship

2 I can see how you can withdraw from it /

3 n >I can see< **how** you can wit:hdraw from it because of physical trauma (.)

4 because of being born too early (.)

5 of being left in an incubator

Extract 2.3 Therapist Hanna

1 R: N:o^ I think that (.) the (.) that we know (.)

2 from very small children that the unconscious makes contact makes meaning/

3 I haven't I have me across some very cut off children (.)

4 who don't want to make contact (.)

5 but I think then they are very actively resisting.

6 I: H:mr isn't there (.) e:rh sometimes the case (.)

7 that from the outside the team might want the behaviour to change

8 but the child has his or her own view

9 about what the behaviour change might be?

10 We are asking things that the child might not be able to give?

11 Or might not be wishing to achieve Or?

12 R: Definitely (1.3) and **also** behaviour has meaning

13 and I suppose there might be something to understand

14 from the behaviour, em (.) definitely.

Through the circulation of the autism as defence/safety repertoire, Hanna (extract 2.3) locally reproduces the well-rehearsed subject position identified earlier. By framing her statement using an extreme case formulation as in 'some very cut off children' (line 3) and then 'that very actively resisting' (line 5) she colonises the entire spectrum of autism through the repertoire of defence. It is as if there is no exception to this generalised view of the child

as being agentively departed from his/her meaningful relationship. What becomes quite intriguing is my response to Hanna's argument. While I pick the first comment as an attempt to provide a stretched and superficial account of autism, I concurrently try to examine this discursive achievement critically. This is done mainly by crafting defence as a derivative of the child's wish to change. I recreate the social world of autism and therapy as less straightforward and also as located outside the person line (6-7) 'isn't there (.) e:rh sometimes the case (.) that from the outside the team might want the behaviour to change'. By placing my emphasis on the outside-inside distinction I seem to imply the divide that exists between the therapy of autism and those that advocate against it.

Participants in the previous extracts fabricated their talk through the repertoire of defence/safety in order to mould autism as a relational disorder. In the following extract, I ponder on a different kind of appropriation of this resource. Autism not only involves practices that take place on the therapeutic level but is also informed by a broader social dynamic existing in very diverse institutional settings. This logic then could be seen as potential colonisation of the discourse of autism inside other cultural terrains.

Extract 2.4 Therapist Muddy

1 I also think that (.) <you know> the facebook <you know>

2 communication world is actually a world that promotes autism.

3 I: Ye:ah

4 R: So it's lots of things about it

5 I: Yeah, you mean new ways of communicating and interacting and

6 R: I think they don't interact (.) I (.) thin:k you **think** you are interacting (.)

7 when you are doing something that

8 I: Yeah, somebody said (.) we don't have interactions

9 we have transactions in the modern or post-modern culture

10 R: Exactly (.) from a **very** safe (.) isolated place

11 Of course (.) is very bad for young people very bad for people with autistic tendencies/

12 so I know I am writing a paper (.) for at the moment (.)

13 I think I forget the time (.)

14 I forget doing lunch (.)

15 I can find I am getting very cold and I forgot to put the heating up (.)

16 this sort of thing /

17 You know (.) it's quite interesting from that point of view.

While the first extract was selected for its dramatic effects upon the therapist's being, the next ones (extracts 2.2, 2.3, 2.4) were incorporated to indicate the pervasiveness of the defence/safety repertoire within the interview context. The notion of autism as a negative relational framework is worked inside the 2.4 extract as a derivative of the broader social field. This logic is induced in the therapist's comment in line, 'I also think that you know the facebook you know communication world is actually a world that promotes autism' (line, 1-2). Muddy very carefully avoids the delicate issue of causality using the indexical 'promotes' (line 2) which on the whole is devoid of intentionality. Embracing a wider logic of causality in autism, the therapist rhetorically ignites a sociological framework for thinking of autism. This expanded view secondarily becomes embroiled inside the interactional sequence producing a notable alignment between the interviewer and the therapist.

In the analysis of this extract (2.4) I reflexively tried to question my assumptions about autism concerning those of the therapist. My reluctance to make an opposing or critical comment is taken as an effort to echo the position assumed by the participant and establish a relational alliance with her. My comment, 'yeah somebody said that said we don't have interactions we have transactions in modern or post-modern culture' (line 7-8) is indicative of my relational scenario that is comprised of my orientation to complement the therapist's concerns.

Thereby, in my analysis of this piece of talk I attend to how this variant of the defence/safety repertoire was mobilized by the participant to provide a social-motivational 'reading' of autism and how by concurring with the unfolding idea of the social roots of autism, I ultimately positioned myself in the same camp. The therapist does not explicitly state that environmental causes create autism, but accounts for the defensive nature with regards to equally unhealthy environmental practices. Notions of the historical nature-nurture debates that surround autism are considered significant here, since they seem to delimit the discursive pursuits of the discussants.

Extract 2.5 Therapist Hanna

1 R: Well (.) it's interesting from my point of view

2 and I I think (.) it's not uncommon to think

3 that there are barriers or boundaries in autism (.)

4 because of course <you know> the very nature of the problem is (.)

5 that the autism <u>it:self</u> or how <u>happen</u> to understand (.) that

6 the autism really is a manifestation of a kind of defence system (.7)

7 where there is anxieties about being in contact /

8 so if you are anxious ab out being in contact obviously (.)

9 you are trying every way which possible not to be in contact (.7)

10 um in order to protect yourself/

11 so I suppose those are the boundaries

12 or those are the barriers to communication /

13 but in my **actual** experience em I don't perceive I suppose

14 I enter into a relationship with someone

15 with very little expectation of what's required for communication

16 and it think that's one of the things that has meant that

17 I would with the autistic children because my expectations are very low

In the last extract (2.5), the therapist launches a contrast between the widespread view of defence and a more subjective one. By first providing a script formulation as in 'the very nature of the problem' (line 4) and then revising this formulation as personal opinion, 'how happen to understand the autism really' (line 5), Hanna indicates that she is split between the official view of defence and a somewhat modified view. While Hanna appears to subscribe equally to both definitions, her subsequent talk privileges the personal construction of defence through linguistically repressing the first version for the sake of the second. She claims that 'in my actual experience em I don't perceive I suppose I enter into a relationship with someone with very little expectation of what's required for communication and it think that's one of the things that has meant that I would with the autistic children because my expectations are very low' (lines 13-17). Hanna then introduces a theme that is

unique to the sample that I obtained. In describing herself as someone with 'low expectation', she fabricates a somehow vague template for her relational attitude as this is anchored by her expectations. To be able to disentangle this vague statement would be to search for its expression through the rest of the text. Instead, in its local framework, it seems as if she secures that her view of autism as defence would not be easily contradicted as being too specific and narrow.

Not every participant performed the autism as defence/safety repertoire in this vague manner. When Muddy (extract 2.6) returned to the same topic in her familiar story-line, she went to articulate it as a barrier with detrimental interpersonal derivatives. Muddy relied on the use of adjectives such as 'harder' and 'louder' and also on quantifiers such as 'more' in order to construct autism as a barrier against the external social world. In order to instigate this representation, she built an analogy between autism and deafness. While this analogy could be thought of as blunt and restrictive I received it as signifying a physical attack on the body which appears in my conclusion 'it seems to imply to entail some pain as well' (line 4). Autism was crafted as a very fragile kind of being, characterised by its tendency to register the social as 'dangerous' (line, 13) and thus unsafe. Her comment, 'their phantasy, that they are going to be pushed around they are going to be invaded they are going to be put into danger, they are going to be pushed out into the world they are going to be made to feel separate because of course a lot of autism is about not being separate' (line 10-16), placed them inside a disabling ideology envisaging cultural imperatives brought to life by the mental hygiene institutional settings. Restricting them to this disabling accounting is to embed their agency and stake in a seemingly discounted place where their reception of the world is faulty and in need of restoration.

Extract 2.6 Therapist Muddy

1 R: Because their (.6) you can't get through/

2 So you try harder and you do more and you say more and you

3 shout louder and it's like shouting at somebody who is deaf.

4 I: You seem to imply that this might entail some pain as well.

5 R: I think it:s e:n (.) it:s entails pain for the child (.)

6 because they don't feel the attunement/

7 so one might think about that (.) in terms of their object

8 not necessarily because that's the real paternal maternal object of them (.)

9 if you like the mother in their mind let's say

10 but it might be because that's (.) their (.) phantasy/

11 that they are going to be pushed around (.)

12 they are going to be **invaded**

13 they are going to be put into danger

14 they are going to be pushed out into the world

15 they are going to be made to feel separate

16 because of course a lot of autism is about not being separate.

Another variant of the autism as defence/safety repertoire is discussed in the next turn of talk (extract 2.7). Similar to other instances, the dialogue between the therapist and the interviewer moves inside the subject of change. Change, growth and maturation are

concepts that have decisively rearranged the concept of the proper childhood (Hendrick, 2003). The public imagination was inevitably being immersed into these cultural imperatives that mainly understood the ontology of childhood as a process of uninterrupted developmental progression. The permanent or momentary freeze of this process is rendered problematic in experts' language. Within this fatalistic rationale, to become a person who does not conform to the societal needs for change would indicate a pathological subject position that would then require professional treatment.

Extract 2.7 Therapist Christine

1 I: So what would you think that is the (.)

2 what takes for an autistic child to change?

3 Because we know that sometimes (.) we feel (.) they don't have any willingness to change

4 they don't want to move from the place they reside

5 So if we come across this state how can we manage this (.)

6 where are we going from this place on.

7 R: […] Well I am just thinking about these two cases I heard this week/

8 I don't know if I can remember the second one well enough but (1.1)

9 Em with some (.) well th:ere are <different sorts of autistic children>

10 I know I am sup:posed to say children with autism but <anyway>

11 are very comfortable in their autism (.)

12 not distressed mostly quite comfortable

13 and you may have to er he may have (.) P[7] wasn't comfortable

14 he was lost in a >much more< <u>distressed</u> sort of way (.) so gone beyond despair.

In extract 2.7, both the interviewer and the therapist seem to draw from the discursive reservoir of defence/safety. In the opening question, the researcher poses a direct question asking 'What takes for an autistic child to change' (line 2). The generic format of this statement and also the one that follows 'Because we know that sometimes we feel they don't have any willingness to change, they don't want to move from the place they reside', (line 3-4), depicts the unwillingness to change as a personal attribute of the autistic child built on inherent motivation and that thus is characterized by a wish to be immobilized. Note here how the concept of immobility is given a kind of negative assessment. It seems that in a mobile culture, the flow of any kind becomes a primary signifier of health, welfare and progress (Nadesan, 2010). Ranging from 20st century economic cultures to human ones, society has been assumed to develop under a boundless flow of movement. In the discussion about change and autism both Christine and myself orient to this notion to connote resistance to change as a rather pathognomonic element which on the whole reproduces the 21st-century bio-political agenda (Nadesan, 2010; Tremain, 2006).

A more careful appropriation of change is being developed in the therapist's response that sets the ground for crafting change across the defence-safety repertoire. By drawing on the language of variability/heterogeneity and sticking to past tense, Christine assembles her argument as a recollection of memory and cognition: 'I am just thinking about the two cases I heard this week', (line 7). Likewise, she communicates that what she is about to say is stemming from experience and should thus be heard as a truthful accounting. By relying on the verb 'heard' perhaps the therapist distributes accountability between herself and also

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[7]   I include the letter P to anonymize the child and also limit the risk of the therapist's disclosure

those social agents that are not explicated as part of the social world. She then moves, showing political correctness when stating that 'there are different sorts of autistic children (.) I know that I am supposed to say children with autism' (line 9-10), putting her final accent on this topic with eliciting a contrast between two kinds of children with autism. She subsequently performs two equally pathological positions for children with autism. As part of this construction the children are seen as either 'being comfortable in their autism' (line 11), showing no signs of disturbance and on the other hand they are taken to be severely damaged by their autism as in 'he was lost in a much more distressed sort of way so gone beyond despair' (line 14). As a discursive act, this set of talk makes me wonder about its depiction of autism in an impersonal manner in the first part and then in a more personalised factually driven second representation. Through the rhetorical agenda sustained in this talk, the therapist prioritises the second type of dysfunction as a relatively unexplored area of knowledge in psychoanalysis.

Christine does not abandon the notion of autism as comfort as she further tackles this issue in the preceding extract (2.8). The issue of comfort is worked against the therapist's active technique in two main instances. The first of them is part of a longer description where the therapist discusses her work with a passive, comfortable child. As part of this talk, she elicits an argument that emphasises the aspect of being able to respond quickly as in 'you have to be very quick offering a third option between autism and emptiness (.) um or sensuality' (line 15-16). Autism is portrayed as the antipode of emptiness and sensuality, while the subject position created for the therapist is the facilitator of change. Note, therefore, how the therapist unwittingly conceptualises autism as a devalued way of being. The choices for living in this sort of elaboration are taken to be i) a return to the refuge of autism, as a way of defensive living, ii) an exit to a dangerous void described as 'emptiness' or sensuality or iii) finally the possibility of surrendering to the therapist's health and growth-promoting intervention.

Extract 2.8 Christine

1 C: <u>but</u> in order to get him **off** my lap (.)

12 I had to have a chair <right <u>the:r</u>>

13 because if I left it too long (.)

14 he just got rejected and went back to autism /

15 so (.) you have to be very quick

16 offering a third option between autism and emptiness (.) um or sensuality

There is then a final appearance of the same theme a few moments after the previous one, where Christine again emphasises the role of the therapist in not allowing the child to become immersed inside autism. Change as a theme then is negotiated not only on the level of the therapeutic engagement but also as a particular area of concern for people on the autism spectrum.

Extract 2.9 Therapist Christine

1 R: So you need to know (.) wh:en to be >firm< (1.2)

2 and when not to be (.) too sympathetic /

3 **cause** they might be quite too <u>comfortable</u> in their autism (.)

4 and that's what (.) I was talking about children=

5 =who find it quite convenient

6 and get just enough of their need to satisfied by being autism (.)

7 and that's were some of the criticisms have come from autistic adults (.)

8 >we do:n:t <u>want</u> <u>to</u> <u>change</u><.

In this extract (2.9) the therapist begins by providing two broad category entitlements for the psychoanalytic psychotherapist. She uses the word 'firm' (line 1) and then the word 'sympathetic' (line 2) to distinguish between the two, talking with the generic 'you' in order to address the subject of her statement. Christine addresses firmness with a positive framing 'when to be firm' (line 1) while doing the opposite with the idea of sensitivity 'not to be too sympathetic' (line 2). I examine these two comments concerning the argument that Christine makes at the end of the extract, 'that's were some of the criticisms have come from autistic adults (.) >we do:n:t <u>want</u> <u>to</u> <u>change</u>< (line 8).

I argue that the second utterance acts as a context for the first one. Christine defends her two category entitlements in the face of the criticism that is directed towards psychoanalytic psychotherapy. Firmness and sympathy in this sense are two lexical choices that might be taken as forging the two extremes of legitimate therapeutic practice. By strictly framing the boundaries of these two attitudes, the therapist no longer risks been discredited as insensitive or weak. On the contrary, by advocating expert knowledge about when to be firm or be sympathetic, she becomes less inclined to listen to those critical voices that practice resistance against change. Apart from the action orientation of this speech, the therapist's preferred subjectivity is outlined here. By 'being firm' and 'not too sympathetic' the therapist is offered a generic structure from where to think her way of being with the other. Not complying with this way of being or acting outside this framework entails a way of being out of the range of psychoanalytic practice which impedes the child's change.

8.3 Repertoire 3: **Autism as a malignant state of being**

The representation of autism as a somewhat damaged entity, a compromise to life and to meaningful relationships was quite pervasive inside the data set. Discourses of health/illness and normality/pathology are quite common in psychoanalytic literature. My recursive reading of the data, apart from being revealing of their immense complexity and richness, was also telling of the fact that the majority of the therapists interviewed employed some version of the repertoire of malignancy that I will try to develop in this section. While malignancy was initially selected for its apparent life-threatening connotations, later it became clear that it also related to an alternative construction of autism as being a rather agentive, destructive, stagnant and deficient way of being if left untreated and unchallenged.

By terming this repertoire using the figurative malignant, I emphasise a) the construction of autism as disturbing the natural progression of life, b) the use of this language to cast autism as resembling the detrimental effects of autism on life which notably resemble those of the medical malignancy observed in patients suffering from terminal illness. As in Tantam (2009), who relied on malignancy as a conceptual resource to describe the faulty cognitive functioning of the autistic mind, I draw on this concept to provide an imaginary template for the way therapist's depicted autism. Malignancy and its more harmful effect, metastasis, could be seen as highly infectious not only for the autistic body but also for its social surroundings.

Autism as a malignant and socially dangerous construct can become a useful language resource for therapists who utilise it in order to highlight the triumphant role of therapeutic intervention. Drawing on this notably emotionally charged repertoire enabled the therapists to advance their therapeutic agendas and also their discrete healing identities. While the children were placed in fragile subject positions, the therapist's counter-positions revealed

a high degree of power that, on the whole, reproduced the familiar relational dynamic between the doctor and the patient. This fact should not be seen as incidental since the medicalisation of modernity is rife with life-saving exemplars. It, therefore, causes no surprise that psychoanalysis has been heavily invested with these paradigms. As a result, it has become synagonistic to those objectivist sciences that subscribe to utopian theoretical and clinical ambitions. While psychoanalysis as a clinical template placed great emphasis on the notion of omnipotence, it masked the therapists' omnipotent ambitions, as these are exemplified in the context of this repertoire.

In the first extract (3.1) Muddy enters a steep descriptive terrain. When I first encountered this specific passage, and during my consecutive readings, I was intrigued by the use of the emotive concepts. Following transcription, I made notes considering the way I read this passage. Things like 'what an interesting description' or 'I know what you are talking about' appeared on the margins of the page. This small chunk of talk elicited an intense emotional experience while reading it that I mostly interpreted through my identification with her. I was inevitably driven into questioning the discursive underpinnings that helped the speaker achieve this affectively charged action (Wood & Kroger, 2000). I generally wondered about the "real" effect of this discursive organisation, which made me react in such a way. It seemed like a kind of talk, becoming flesh and memory (Altman, 1995). Characteristically, the use of emotional discourse, attached vividness to what has been presented as a verbal recollection of memory (Edwards, 1999). Thus, I aimed to understand the usages and the implications of drawing on this emotive language for the construction of autism, instead of receiving these features as discrete happenings of the emotional lives of the therapist and the child.

Extract 3.1 Therapist Muddy

1 I <thought <u>he was cold</u>> (.)

2 < I thought > he was a <u>bit nasty</u> (.)

3 he was <u>horrible to his parents</u> and

4 he was very horrible to me (.)

5 but then (.) I <u>represent</u> a dan'ger (.) and I had to be (1.2)

6 I <u>gradually</u> came to understand what was split off from him projected into me

7 was what I was not allowed to do (.)

8 <was> (.) have (1.4) there is more than one parts of his mind

9 and one part of his mind was interested in adventure (.)

10 and another part was <u>saying</u> you stay in this dead dead deadly world (.)

11 of **buses** and <u>pigs</u> and

In the above extract, the child is described by a series of concepts that carefully mark him as malign. Words such as 'cold' (line 1), 'a bit nasty' (line 1) and 'horrible' (line 3) elicit a rather indexical categorisation constructing him as a very 'difficult' let alone provocative child. The first two speech units are presented as belonging to the therapist's thinking apparatus, being a result of the cognitive elaboration of her experiences: 'I though he was cold', (line 1), and then 'I though he was a bit nasty' (line 2). Inside them, these entitlements are worked as permanent character qualities that have become part of the child's behavioural repertoire. In the next clauses, however, the therapist indicates these negative qualities as part of the child's social interaction with herself and her parents. The discursive moves included in 'he was horrible to his parents' (line 3) and 'he was horrible to me' (line 4) could

be seen as providing the previous construction with a more robust, and also contextualised register of the behaviour.

The language of child psychoanalysis from its early origins until its more recent formats has been associated with negative and positive attributes of the child's inner worlds similar to the one offered here. For instance, Klein was one of the first analysts who overtly tried to theorise the child on the grounds of its negative attributes that were largely embodied in the child's hatred for the mother's body. Attacks towards the outside environment have been seen as deriving from the child's destructive phantasies, that were perceived as paranoid interpretations of the external world. In particular, Klein's ethical discourse brought to the fore a somewhat all-encompassing modular logic for categorising and governing children's conduct[8]. By placing an emphasis on the paranoid position, which corresponds to the most primitive and also destructive functioning of the child, and the depressive one, that depicts a more idealized, interpersonal functioning, she shows how the understanding of experience is always mediated by the internal psychic configurations of the child, which always acts upon the 'reality' formation. In this sense, the child's relationship to the outside world is mediated, partly in a similar but not identical way to that of social constructionism (Wetherell, 2003).

Borrowing from this social language, Muddy seems to exclusively utilise the premises that become available to her by these theoretical reservoirs. Devising her next statement within a theoretical language as in 'I gradually came to understand what was split off from him projected into me was what I was not allowed to do' (line 6) could be seen as a discursive activity that allows her to ground her previous and subsequent comments in her epistemic framework. This statement then provides a rather psychoanalytically driven explanation of the child's behaviour. For Muddy then, being able to structure her talk on the rhetorical

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[8] For a discursive comparison of Kleinian positioning theory see Wetherell, (2003)

premises of her theoretical interests acts as providing a signature to her epistemic inclinations. Also, by inscribing the child's behaviour inside this figurative discourse, which mainly relies on the privatization of psychological life (a split occurs in the child's private world transferred on the outside), allows her to construct herself as harshly being manipulated by her client, further supporting the construction of the child as malign and as socially deviant.

Rather than just describing the child as nasty and horrible, Muddy constructs the child as being gradually accountable. His behaviour is something that can be explained with psychologically motivated reasoning and also inside a detectable relational scenario (Gergen, 2009). Muddy positions herself as a person, who can perform a kind of endoscopy into the child's mental world based on her specialised knowledge. This formulation allows her to offer a dualistic construction in order to stratify this initially masked world. By exemplifying specialised knowledge about the object of the 'mind', she constructs the mind as a legitimate and also visible object that is located within the child. If she can claim visibility of the diseased mind, then it is easier to provide the means to cure it. Not only does the therapist exemplify the individualisation of pathology through the practice of scientific authority but she is also able to localise it with great detail.

Muddy uses language in order to equip the mental with an agency of its own as in 'There is more than one part of his mind and one part of his mind was interested in adventure and another part was saying you stay in this dead dead deadly world of buses and pigs and' (line 8-11). The therapist highlights issues of life and death. By lending anthropomorphic qualities to the mind, she constructs the mind of the child as talking a dictatorial voice. Two things could be derived from this discursive layout: A) The contrast between the two parts illustrates that by not having a voice the first part inevitably is less likely to provoke positive and perhaps healthy living. B) the intensity of the second as crafted within the repetition of

the word 'dead' and 'deadly' allows it to come to an extremity. In this way, it is more likely to subordinate the child in terms of his propensity towards defective and also unproductive life. In general, this could be seen as a kind of undesired life as it has been crafted in industrial and post-industrial societal discourse, where the ability to engage in productive activities is in a sense equated with individual growth and personal success.

The version of autism that is put forward in this account is that of the divided individual who has not been able to find an adequate equilibrium between his/her desire to live an adventurous proper life, folding into a rather unfulfilling, damaged way of being. I can see how this discourse seems to delimit autism in a predominantly Freudian positionality where individuals are seen as occupying the two inescapable living polarities, the pole of life as opposed to the pole of death. These instinctually determined frameworks are described as the two inescapable all-encompassing living frameworks that can be applied in order to evaluate the psychological livability of human populations. Being on the death pole instead of the life one automatically translates in predominantly pathologic states and in need of psychoanalytic remediation.

While this extract resides in a very elaborate psychoanalytic language to devise autism as malignant, the next two take a more up-front metaphor to frame autism as a medical emergency state of being. The blending of the vernacular (e.g., terribly changed and lost line 2) with the more Latinate language configuration (e.g., psychic death line, apathy line 3,5) works in the direction of building an everyday accountability inside this case. One way to investigate this language effect is to engage playfully with the text, as Wood and Kroger (2000) suggest, in order to be able to decide the action orientation of this account. During analysis, I tried to read the text aloud and silently, to omit or change some word only to become more cognizant of the role of the particular features of the text. What I noticed then apart from the above-unexpected features was that by subscribing to metaphors that

provide spatial analogies between the psychoanalytic placement and that of the modern emergency hospital ward, the therapist induced rather anxiety-provoking imagery in her account.

The description of this case becomes so vivid that it sounds like narrating an incident of life and death. It is not only the content of the text that makes this achievement possible. By combining several discursive features but also residing in the relevant life-threatening discourse, the speaker offers an impressively risky account in terms of not being a kind of evidence-based type of account. Inside it, she manipulates autistic life using a metaphor that on the one hand denotes a miraculous, unexpected recovery but on the other, she tries to balance the uncontrollable nature of this recovery by providing a rather detailed interaction. In this sense being autistic is to be placed across the edges of life 'proper' where on the one hand you risk either to succumb to autism or on the other to miraculously escape this destructive unfortunate fate.

Extract 3.2 Therapist Christine

1. I came back just on a once a month basis just to see him

2 and I found him terribly changed and lost

3 and I felt he was really in danger of psychic death

4 I just couldn't not reach him> /

5 It was like he's gone beyond despair (.) to a kind of apathy empty place /

6 And then it was a session in July and I knew I wasn't going to see him for two months (.)

7 because I only saw him once a month anyway and I was taking an August off

8 and I was so upset I could not get any contact for him at all (.)

9 so then um um I I did something quite spontaneously (.)

10 I got out of my chair put my face very close to his (.) about nine inches

11 and and called his name with great urgency (1.5)

12 I was <u>absolutely</u> desperate (1.5)

13 and he surfaced from somewhere like a drowning man (.)

14 surfaced and >looked< at me and said hello (.)

15 as if we haven't seen for some ten years

Extract 3.3 Therapist Christine

16 in the beginning it was like in a casualty department (.) it was intensive care (1.5)

17 no (1.7) >first< it was in a casualty department in an emergency hospital (.)

18 as it were (.) emergency ward

19 after (.) that I had to work still very differently from with ordinary patients (.)

20 from the way I worked with ordinary patients (.)

21 and that even very ill patients (.)

22 that it was like in intensive care ward with somebody at a coma (1.7)

23 and I think that is true /

By referring to her coming back in line 1, Christine provides a temporal framework for the episode but also clarifies that she 'came back just on a once month basis' (line 1) in a way to manage negative accountability. This is indicative of the two consecutive uses of the adjective 'just' (line 2), which make use of the device of extreme case formulation. The uses

of such formulations in talk have widely been investigated as part of the interaction (Edwards, 2000). While in many cases it has been noted that a speaker makes use of this device to exaggerate or to point to a somewhat particular interest, in this phrase it seems that Christine tries to elaborate on this episode as an unexpected life experience, a rich exception that is really 'one of this moments' in someone's professional life. Providing an emphasis in 'I came back just on a once month basis just to see him' (line 1) expresses her serious past concerns about the psychological being of this particular child. By presenting this case as an exception, I believe that the speaker fabricates this episode with extreme importance, something that does not take place every day, which can be heard as a disclaimer of her responsibility for his psychological deterioration.

This could be examined in relation to the emotional tension that the speaker builds throughout this passage, which dissolves momentarily when she goes on to describe her meeting with the child as a kind of disaster. Stating that 'and I found him terribly changed and lost' (line 2) seems to be a worst case scenario marked by the word 'terribly', which again makes use of an extreme case formulation (Pomerantz, 1986). Sounding like a prognostic evaluative comment, it is then subjected to the therapist's own judgment that comes in 'I felt that he was really in a danger of psychic death I just couldn't reach him' (line 3-4). The use of this second clause moderates the intensity of the previous comment by allowing some more optimistic evaluation of the child's state which is mainly achieved through the use of the word 'danger' (line 3). The final comment, 'it was like he's gone beyond despair to a kind of apathy empty place' (line 5), could sound like a final announcement, similar to those that doctors launch when wanting to announce the death of a patient. It comes as the actualisation of one's biggest fears, an announcement of the patient being brain dead.

What is assumed through the three-part formulation is the participant's effort to present this 'exceptional', let alone success, story as not easily debatable by critics. Antaki & Wetherell (1999) studied the use of tripartite structures as part of the participants' rhetorical interests. According to their elaboration that was part of their study of concession practices during conversation, these authors underlined the way that speakers draw on this tripartite structure to reinforce their position without allowing too much room for countering it. In this sense, they underline the duality of this particular device as lying both on an offensive and defensive rhetoric (Potter & Wetherell, 1987). What can we then make out of this similar rhetorical layout set up by Muddy in the context of this conversation?

The three distinct sentences, A) 'I came back just on a once a month basis just to see him and I found him terribly changed and lost, and I felt he was really in danger of psychic death I just couldn't not reach him (lines 2,3). B) and I felt he was really in danger of psychic death I just couldn't not reach him (line 4) and c) it was like he's gone beyond despair, to a kind of apathy, empty place (line 5) provide a very concise stratification to the participant's ends. The therapist constructs her argument in a more descriptive rather than causal form, possibly in order to avoid imposing unjustified clinical conclusions. It feels then more secure if she authenticates this 'miraculous' event as a series of descriptive statements. One cannot challenge the factuality of description, but on the contrary, the facticity of a causal explanation can be brought into a state of rejection. Having discursively stretched the ground in a kind of 'this is a lost case' parlance, the therapist offers a description of the "miraculous" event. The degree of complication and emotional upheaval through which this case is invested indeed acts as a preparation of the subsequent presentation that shifts the attention to a very successful encounter with the child.

The participant also draws attention to the details of his encounters with the child that ultimately lead to what is described as a radical recovery. This passage employs a three-part

index of therapeutic pro-activeness to show how change in this very 'lost case' arrived. The therapist's reporting of this incident relies on a) the use of detail, b) the consistent use of the personal pronoun 'I', c) the past tense and also d) the use of a metaphorical vocabulary that builds on the image of a half-lost child. By stating that 'I did something quite spontaneously' line (9) the therapist tries to emphasise the creative and unpredictable character of her therapeutic attitude which is then carefully detailed in order to avoid being seen as a kind of random incident. Her phrase, 'I got out of my chair put my face very close to his about nine inches and called his name with great urgency' (line 10,11) and indeed the way she attends to the detail of the interaction allows for implying a sense of control over her action. However, she further reports this action as fueled by her desperation: 'I was absolutely desperate' (line 12). While this kind of acting might have exposed her in terms of her unconventional reaction (something that in the technical language of psychoanalysis is described as acting out and reflects a kind of erroneous therapeutic reaction), it is then formulated as the cause of her positive contribution to the child's positive change. The dilemmatic nature of psychoanalytic practice seems to be masked under the urgency of the child's condition. Moreover, this is rhetorically achieved on the grounds of the sinking metaphor in line 13 'and he surfaced from somewhere like a drowning man'. It is clear then that the case presented is linguistically worked as a kind of emergency call that if not responded to could result in the child's 'psychic' death.

This metaphorical conception of autism continues even further in extract 3.3, where Christine pictures her work as taking place in the emergency department, crafting in this way the familiar subject positions of the doctor/patient. Within this, she resorts to a spatial metaphor to locate herself as working in a 'casualty department' (line 16), 'an emergency hospital' (line 18), 'emergency ward' (line 17) and 'intensive care' unit (line 16). This then positions the child in a 'terminal' patient position 'with somebody at a coma' (line 22) and

also along the lines of severe illness. This allows her to further articulate her argument by positioning herself in the counter-position of the doctor.

Initially situating her practice along the normative doctor-patient power relations, she becomes able to launch yet another poignant argument that performs resistance to the dominant psychotherapeutic practice guidelines 'I had to work still very differently from ordinary patients' (line 19). This statement carries unspoken assumptions for the unorthodox practices that a therapist has to rely on in order to 'save' his patient. It elicits a view of therapeutic practice outside the moral grounds of the profession. It draws attention to the current dilemma circulating in psychoanalytic literature that tries to sketch psychoanalytic work with children on the spectrum as involving a kind of modification of the classic technique that will more efficiently suit the needs of this particular population (Alvarez, 1996).

The clinician is more easily recognised as practising a kind of revolt against the power brought on him by the professional regimen. By eliciting this rhetorical manoeuvre, she could be seen as serving two main social actions. First, she legitimises her deviant 'anarchist' professional practice, while second, she negotiates a less dominant position about her patient by not subscribing to a uniform, theory-driven decision-making therapy practice. She is therefore not to be seen as an un-reflexive practitioner of the theory of psychoanalysis but as acting in the patient's interests. From a Foucauldian point of view, the employment of this repertoire very efficiently counters the subordinate role of psychological practices by disguising their primary regulatory role. Also, this is done under the popular fabric of patient-centred logic (Foucault, 1973; Milton, 2018).

Like the previous participant, the one in the next excerpt engages in a description of what she takes to be a 'paralysing' effect of autistic children on the therapist. While Sofia has previously talked excessively and rigorously about autism, engaging in a very confessional

type of free association, this extract is produced near the end of the interview. Before this extract, Sofia was talking about the notion of being more active when working with autistic children. During the last part of the interview, we seem to focus on the therapist's practice as to how therapists do autism. This extract then appears to be oriented to two of my questions a) 'So do you choose to be active when you work with children with autism?' and b) 'So how much can you wait? As a response to these open-ended questions, Sofia provides the following talk. Rather than constructing autism as a life-threatening condition, triumphantly salvaged by the therapist, she puts forward a description of autism as toxic. While resorting to the repertoire of malignancy, she gives a more relational flavour to her description, ultimately constructing herself as being in a state that 'can't think of anything active to do' line. Change is described here as a 'fortuitous happening' (line 27) that completely altered the course of therapy.

Extract 3.4 Therapist Nicky

1 R: and (.) em (.) **h** h

2 some children on the spectrum can have a **very** paralyzing effect on the therapist actually

3 I mean I remember> the worst one I ever had (.)

4 was somebody [laughs] where I'd go along (.)

5 and open his box and he'd come along and shut his box (.)

6 and that was that was that and for quite time/

7 I mean (.) I you know I'd try and do this and I'd try and do that (.)

8 but basically that was <that was the emotional atmosphere> of the session (.)

9 and that could be quite discouraging <it has to be said> (.)

10 and you'd try to interpret about discouragement (.)

11 and about being in charge and about this and about (.)

12 Ok fine he does it anyway /

13 And, one day uh I> (.)

14 had a (.) a completely fortuitous happening (.)

15 <because I <u>couldn't</u> find the key to his box (.)

16 so I was looking around in here and he was getting really to walk over and slam the lid down (.)

17 and while I was standing still was looking for the key for his box (.)

18 and uh I eventually found it (.) in a different pocket from the one that I usually put it in (..)

19 **so** I got moving again and I was **<u>absolutely staggered</u>** when I realized (.)

20 that he'd been standing there **watching like this>** until I started moving again (.)

21 and then he moved (..)

22 and I thought **<u>my goodness</u>** this is felt s**<u>o controlling</u>** and so such a prohibition (.)

23 that actually this child is completely geared to me /

24 And I th o you know I mean he waited while I waited and he moved a bit when I moved

25 and I thought my goodness (.)

26 this is a completely different experience from how I've been interpreting it /

27and that was quite fortuitous you know (.)

28 and after that I would have started talking to him <quite differently probably> (.)

29 but I think the important thing would have been that I felt very differently towards him /

30 I mean he wasn't a little daemon anymore (.)

31 who if I opened the box that said 'whoof' you know and I realized he was doing that (.)

32 but that it was actually probably quite self-projective and it makes you feel different and then you

33 can carry on trying new things /

[…]

34 A lot of them you see (.)

46 do have that effect on you (.)

47 because since you are talking about being active

48 in order to be active you have to think of something active to do (.)

49 and some of them have this effect on you that you <can't think of anything whatsoever at all>

50 you know /

The opening of this extract is quite informative and also directive of the discursive work of Nikki, who immediately provides a negative appraisal build on an embodied metaphor 'paralyzing effect on the therapist' (line 2). By trying to engage in what Sacks (1984) identified as 'doing being ordinary', Nicky displays herself as a person that is 'not prone to tell tall stories' as Edwards (2007, p.33) notes. By building on the kind of routine accountability, then she goes on to describe her experience of the paralysing subjectivity in such terms.

The therapist's initial introduction is about offering a rather vague let alone ordinary idea of autism as paralysing. The openness of this statement crafted by its generic structuring seems to help the therapist devise herself as being open-minded. In this way, she can counter alternative views about her that could undermine her subjectivity or the articulation of her account. Imagine, thus, the implications of a different phrase about his subjectivity, such as 'children on the spectrum have a very paralysing effect on the therapist'. This second case cannot act in the same way as the first one. It makes the therapist sound rather authoritative and thus narrow in his opinions.

Having first built the child as 'having' a paralysing effect and not just being 'paralysing' which would place him in a negative accountable position, the therapist launches an extreme case formulation, 'the worst one I even had' (line 3), in trying to bind together her indexing of the child's paralyzing effect with the description of it. The subsequent description of the interactive event builds on the two principal concerns of the therapist a) the paralysing relational ontology of the child and b) the justification of this being the worst one that the therapist ever encountered.

In this vein the therapist builds her recollection of the interaction on using considerable detail of the actor's embodied actions 'I'go along and open his box and he'd come along and close his box' (line 4-5), giving primary emphasis on the repetitiveness of the interaction but also the controlling character of their dialogue. She then goes on to mark this as an emotional atmosphere rather than embodied interplay, conditioning it at the same time as having negative implications: 'could be discouraging' (line 9). In this rather pessimistic view, then the therapist talks about trying 'to interpret about discouragement and about being in charge' (line 10-11), producing a sense of helplessness for herself.

So far, Nicky's account has concerned the recasting of the child in terms of his negative impact upon the therapist, producing two kinds of situated subjectivities. On the one hand,

the child is being shown as controlling and infectious while on the other, the therapist is seen as a powerless victim. This is particularly evident by the way the therapist refers to her therapeutic practices in line 10-11 'and you'd try to interpret about discouragement and about being in charge and about this and about ok fine he does it anyway'. Within this phrase, the disposition to being weak against the powerful subjectivity of the child is made relevant through the shift to the generic 'you' instead of the more personal 'I' and also the hedging that occurs in the finale 'he does it anyway'. Through pronoun shift and its corresponding subject positions, the therapist evokes a social world were both participants try to communicate using different languages.

Muddy employs another version of the repertoire of malignancy in the next extract. Previously Muddy talked in variable ways and as a result constructed several versions of autism. Her following account is chosen to exemplify the cohabitation of the repertoires of heterogeneity, defence and malignancy (O'Driscoll et al., 2017), which is structured rhetorically in order to silence the culminating versions of autism as a kind of asocial being. Instead, the construct of autism put forward in this passage is more intersubjectively related. On the whole, Muddy flexibly moved from one repertoire to the other in order to restrain or potentiate the construction of autism as an 'attack' on life per se.

Extract 3.5 Therapist Muddy

1 I don't think that such things are pure autism (.)

2 I've never seen it (2.5)

3 I've seen a lot of children who don't want anything to do <u>with life</u> (.) <u>sorry</u> (.) relationship

4 they seem quite dead (.) and they seem quite comfortable and untouched by life **but** (1.7)

5 **this** boy that I was talking about (.) the Thomas (.) used to look impassive (1.8)

6 he would come near me sometimes (.)

7 and he would **suddenly** do (.)

8 as if all the blood have come out of his face /

9 He would go grey and I thought 'he is going to faint' (.)

10 and he would sway a bit (.)

11 I think he could do that physically to himself (.)

12 it was a very peculiar feeling /

13 there was something else he could do as well that was physical (.)

14 when he went like that he was pulling every bit (.) every part of himself (.)

15 away from making any kind of connection (2)

16 the blood even wasn't going to circulate (.)

17 it felt like an act of will

18 I: It sounds as as a different >form< of life (.) like other organisms behave.

19 R:yes lik:e (.) it could be like a sort of hibernation or a kind of yeah (.0

20 but he would er he had to work very hard at it /

21 one day he spoke to me (.)

22 he spoke apart from the Thomas the Tank Engine (.)

23 he was interested in a friction car I have **Vroum Vroum** (1.1)

24 and he said to me in a pe:rfe:ctly ordinary voice (.)

25 '**What makes it make that**?' and then he stopped /

26 and then he took huge pleasure in refusing to say the next word (.)

27 Just the last of the sentence the word would have been noise /

28 I knew it, I think he knew It too (.)

29 I said I thought you were going to say 'What makes It make that noise, But you decided not to'.

At the beginning of this extract, the participant denies the well-articulated story of the medical culture by subscribing to the heterogeneity repertoire. Without clearly stating the variability of autism, she prefers to assemble autism by marking it as in 'I don't think that such things are pure autism' (line 1). This appears to serve a dual function inside this text that, is a) to bring together the previous cases that she mentioned with the one that will take place in the following passage and provide structure and coherency to her interview. b) To allocate autism across the dualism 'pure' and 'not pure' autism, which then would enable her to make room for presenting this as a deviant case of autism that does not qualify for the way it has normatively been addressed.

Psychoanalytic theory in autism is full of cases that attempt to study the subjective worlds of children on the spectrum. Through paying attention to the phenomenological aspects of the children's lives, analysts resort to the discipline's elaborate theoretical tools to advocate for the way subjects position themselves about the outside social reality. Indeed, at the peak of her account, Muddy employs the repertoire of malignancy to secure her view of autism as 'dead' (line 3), 'comfortable' and finally 'untouched by life' (line 4). In this sense, she could be thought of as drawing on a rather dominant, deficit-laden language that treats autism as an impairing way of being. Autism is cast as a highly problematic way of being that resists the 'healthy' flow of life.

The participant also provides a more sociable subject position in negotiating the notion of autism. In lines 3-4 she formulates this construct inside the statement that 'I've never seen it (.) I've seen a lot of children who don't want anything to do with life sorry relationship (.) they seem quite dead (.) and they seem quite comfortable and untouched by life'. This mixing of the extreme case formulation (Pomerantz, 1986) 'I never seen it' with the subsequent maximisation of quantity 'I' ve seen a lot of children' could be thought of as an effort to warrant the clinical view outlined (Potter, 1996). The reporting takes place mostly through passive voice and past tense and also the frequent use of modals in the rest of the extract 'this boy that I was talking' (line 5), 'used to look impassive' (line 5), 'he would go grey' (line 9). These devices allow the therapists to address her talk not as a personal view but as a sort of legitimate clinical reasoning. This action is also fostered by the use of vividness, which is secured by the use of reported speech 'I thought 'he is going to faint' (line 9).

Muddy makes considerable effort to construct autism as unaffected by life. In the lines that follow she abruptly takes a shift in her rhetorical agenda using the conjunction 'but' (line 4), which announces her will to depart from the normative view of autism as 'asocial' 'and they seem quite comfortable and untouched by life but'. Perhaps then the small pause and rise in intonation that accompanies the use of 'but' announce the arrival of this contrast, a brake from what has been talked by her as part of other normative voices. This signal within the flow of talk calls for unique and also a different kind of attention. It resembles a kind of confessional accounting that relies on the personal experience and specialised knowledge of the therapist.

Note then how in the reporting of this case the medicalised and biological discourse predominates. Muddy draws on them to pronounce her view of autism as an 'impassive' (line 5) form of life which associates with the social functioning of the child. It seems that

Muddy here works on a provocative account and her choice to resort to these wider discourses provides legitimisation to her claims. Drawing on the empiricist discourse (Gilbert & Mulkay, 1984) and also figurative language, her rhetorical move could be understood as sustaining the credibility of this risky account. Through empirical and figurative discourse it is also accepted as factual and not as a harmful social deterministic account. As such, I attend to is as if she builds this case on two physical symptoms that are related to the relational world of the child. At first she states 'he would come near me sometimes (.) and he would **suddenly** do (.) as if all the blood have come out of his face / He would go grey and I thought 'he is going to faint' (.) and he would sway a bit (.)' (line 6-10) and then 'he went like that he pulling every part of himself away from making any kind of connection (.) the blood even wasn't going to circulate' (line 16).

My response to Muddy accommodates autism as a different form of life 'it sound's as a different form of life (.) like other organisms behave' (line 18). By fabricating the utterance by the 'dummy' it (McMullen, 2011), I disclaim responsibility for its content. This statement provides a dehumanising language that alienates autism, which the therapist did not choose to follow. On the contrary, she re-locates autism as an agentic state of being. Muddy's further supply of case material might be indicative of orienting to my comment as a departure from her 'malignant' meaning framework. Her claim then 'it could be like a sort of hibernation or a kind of yeah (.) but he would er he had to work very hard at it' (line 19-20) appears as partly renouncing my formulation but then recasting it in her own framework 'but he would have to work very hard to it'.

8.4 Repertoire 4: **Autism as disabled embodied materiality**

Within this final repertoire, most respondents turn to the body as a unique point of interest with regards to autism. In the first two extracts, the autistic body is worked under the concept of un-integration (Alvarez 2006). Metaphoricaly, the idea of unintegration encapsulates the assumption that developing children should be able to bind together the body as a whole in order to attain the desired state of bodily experience. In the next two examples, the body of autism is depicted as failing to develop social regularities, exceeding the boundaries of normative bodily behaviours. These are the bodies whose practices fall outside everyday common sense functioning reasoning. Going outside of the behavioural limitations of the body, moving outside the ordinary cultural expectations of the body is seen as behaving 'madly'. Finally, within the fifth extract, I present a short, but alarming text of what I call the unavoidably 'docile' body. In this short piece of talk, the infant's body is approached as unable to reach the outside world, as devoid of any desire to move beyond the subjective realm and into the outside world.

Extract 4.1 Therapist Simone

1 R: Um (3.1) I don't know (.)

2 I <think> there is something about children with autism as well (.)

3 we feel them so fragmented sometimes (.)

4 e:m that you have to al:most uh sorry (.) you have to almost be able

5 to somehow again touch that little bit yourself [interruption] (.)

6 em sometime you know it's I think you have to somehow be aware

7 of how separate you know one <hand feeling **here**> (.)

8 compared to another hand feeling **there** can be

9 and seeing the lights were the door there

10 compared to you know all these different >sensual experiences<

11 can feel co:mple:te:ly not joined up /

12 and you have to do something about finding a little bit of a place in yourself).)

13 that often can (.) em (.) somehow pick some of that up

14 without losing your own integration /

15 em I don't know I haven't thought about this process before I haven't articulated it

16 I don't know if you know um Meltzer's idea about dismantling (.)

17 in a funny way I think you have to be able to get in touch with what that feels like

18 compared (). um and go to somewhere sometimes really quite weird.

19 I: >Yeah< (.) the way you describe it is quite vivid (.) yeah

20 R: And but also to be able to draw back

21 I: E:hr (2.1) is it easy for (.) for a neurotypical individual

22 such as a therapist or another person (.) the mother (.) the father

23 to empathise with this sort of sensual registering of the world?

24 R: I don't know /

25 I sort of feel like we all have (.)

26 I sort of feel newborn babies maybe have some of this

27 as well as you might see by the infant observation /

28 and then maybe some you know the idea of the autism spectrum

29 and that everybody might have bits of em (1.2)

30 I mean it to me it can be difficult and of course (.)

31 you can never know exactly what it feels like to be anybody else

32 whether they are in the trouble of autism or not /

In the beginning of this extract (4.1) the participant engages in a narrative which emphasises the aspect of fragmentation of the autistic body. Instead of going through a technical jargon she chooses to articulate this statement within a rather everyday language, 'of how separate you know one <hand feeling **here**> (.) compared to another hand feeling **there** can be' (line 7-8). She expresses the delicate business of articulating the autistic body with the frequent use of the personal pronoun which systematically places this thought into a personal-subjective rather than a universal-objective position as in 'I don't know' (line 1) and 'I think' (line 2). At the same time, she regularly resorts to qualifiers such as 'something' (line 2), 'sometimes' (line 5), 'somehow' (line 6) which moderate the force of the articulated assumptions.

When the therapist claims 'it's I think you have to somehow be aware of how to separate you know one hand feeling here compared to another hand feeling there' (line 6-8) she seems to draw on a wider marker of autistic pathology which is called the weak central coherence deficit of autism (Happe & Frith, 2006). Instead of articulating this as a psychological construct, she works this as part of her interactional business. This is built in line (12-14), when she claims that 'you have to do something about finding a little bit of place in yourself that often can em somehow pick some of that up without losing your own

integration'. The therapist rhetorically formulates this not only as a property of the autistic body but also as a universal property of all bodies. Through this script formulation device, she manages to potentiate her view as something that can be taken for granted.

The fact that she initially scripts her formulation in a lay fashion generates a notable dilemma in line 16 where she makes a shift in her discursive activity, stating that 'I don't know if you know um Meltzer's idea about dismantling yeah that um'. While overtly questioning my knowledge state, she also negotiates stake, by merely reporting the name of a recognisable psychoanalytic figure. This continues further when by marking this process as 'in a funny way' (line 18) or 'quite weird' (line 19) she assumes a less agentic position.

The effects of this language construction for both subjectivities are manifold. Examined from a macro perspective, the therapist launches a rather old-fashionable psychoanalytic developmental idea which considers autism to be a universal experience of infantile life (see literature review). Inside it, she conflates her subjectivity with that of the autistic child, which however conveys a sense of danger: 'pick up some of that without losing your own integration' (line 14). Examined in relation to the negotiation of autism as an unintegrated embodied state, this comment offers a strictly developmental view of the child, which is reprised in terms of its failure to achieve a normal developmental milestone. The child's body, on the one hand, is placed under a defective meaning while on the other, it is marked as a potential threat to the integrity of the therapist's body.

The autistic body is caught inside the dominant neuro-developmental discourse which constructs the child as being abnormal. Within this, the participant draws on an understanding of the body that originated in the Cartesian ontology, which puts forward the idea of the body as being separated from the mind. In such terms the autistic body is pictured as broken, countering the dictum of the ontological framework of modernity which understands the human body as the body of corporeal, spatial and temporal continuity.

Failing to adhere to this teleological view of the body, the purpose of which is to achieve a

high level of continuity and integrity would be detrimental for the developing child. It is this

failure that secures him/her for being a candidate for specialised treatment.

Extract 4.2 Therapist Sofia

1 R: Well I mean simply (.) I suppose very simply (.)

2 they don't feel (.) a lot of them (.) <that they can rely on their body> (.)

3 to stay together in one piece /

4 um and it can feel as though a bit just come off you know (.)

5 and particularly if they are separated from (.)

6 people now know (.) Tustin wrote a lot about that (.)

7 there is a French analyst called >Genevieve Haag< (.)

8 who has explored <u>that</u> in very interesting ways indeed (.)

9 but just to give an example from my own experience say (.)

10 with a child who was very verbal who was Asperger's

11 she always used to drag one leg behind her

12 when we were going back to the waiting room

13 and one day I said what's wrong with your leg

14 and she said <u>it's come off (.)</u> and she wasn't joking (.) she meant it /

15 I mean of course it hadn't **come off**

16 but the >point is< she kept> (1.1) she didn't feel it (0.9) was really her (.) her emotional possession

17 and that's the thing /

[...]

Fabricated by a different therapist, the above extract (**4.2**) provides a much more negative assessment of the child's body functioning. By emphasising the precarious nature of the embodied subjectivity (line 2), 'They don't feel a lot of them that they can rely on their body to stay together in one piece' she crafts a 'damaged' metaphor (Waltz, 2008) for the autistic subject. Two aspects become apparent inside her account. First, the child is assumed as unable to act autonomously and effectively because of his/her inability to 'rely' on his/her body and second by being unable to stay 'in one piece' (line 2) the child is made completely dysfunctional since it fails to become integrated to become a unified whole. The child's body is seen through the modernist imperative for a permanent and somewhat integrated body which can provide a sense of continuity in the being of the person. Being opposite is being useless.

The therapist resists post-modern theorisations, which view the body as much more fragmented and flexible (Burkitt, 1999). She administers the body in a way that places it under the authority of external surveillance and most importantly depicts autism as having reduced agency over its body, 'she didn't feel it was her emotional possession' (line 19). In this case, disability is administered as a property of a dysfunctional body which incorporates a sort of biological reductionism. By placing the disabling features inside the autistic body, a rhetorical facade is manufactured that efficiently masks the oppressive activities of people identified as experts.

What is at stake here is the oppressor's reluctance to reflexively acknowledge their participation in the biomedical reduction attem pted, which notably fails to fathom the disabling nature of the talk. Turner (1994) sounds apocalyptic when framing the notion of a

'somatic society'. He claims that what has become paramount in our society is 'how to regulate bodies within space, how to monitor the surface of the bodies, how to regulate embodiment' (p. 28). In similar words, it is the effects of bio-power over the lives of autistic people that authorise external forces to regulate their bodily function and their bodily contact (Hughes & Paterson, 2006).

In the third extract, another participant returns to a previously developed case in order to provide some additional justification to her autistic embodiment claims.

Extract 4.3 Therapist Elisabeth

1 R: Well (.) I mean for instance (.)

2 this boy that I was telling you who used to stagger when we came down the stairs (1.3)

3 um^ (.) if we met somebody if we were going through a door

4 and would see a man coming in the opposite direction (.)

5 he covered his ears like **this** [moves both hands over the ears] (.)

6 so I mean as though somebody coming **at** him

7 and coming close was somehow something that felt like very (1.2)

8 a sensitivity in his ears that he had to protect /

9 and after I finished working with him

10 I heard (.) <I heard> through somebody who was basically (.)

11 who was looking after (.) a **doctor** that he'd be referred to (.)

12 because he was complaining about his ears

13 just said that he looked at his ears and there is >nothing wrong< with his ears

14 and you know it wasn't that was something physically wrong with his ears

15 but he very often experienced his ears

16 as being under threat of invasion when he was emotionally upset or something /

Three main constructions of autism can be located in this material (**extract 4.3**). First, the body is represented as a rather private entity rendered defective through its symptomatology 'who used to stagger when we came down the stairs' (line 2). Second, the body of the child is also seen as failing to respond to the social cues in an expected way 'If we meet somebody if we were going through a door and would see a man coming in the opposite direction he covered his ears like this' (line 3-5). This line of thinking continues as the participant crafts an explanation for the child's unexpected gesture as in 'he often experienced his ears as being under threat of invasion' (line 15-16) which also cast the child as perceiving the social environment as hostile and dangerous. Third, there is a regulation of the body in a medicalised fashion 'said that he looked at his ears and there is nothing wrong with his ears' (line 13).

Elisabeth's talk echoed the high degree of social anxieties in the 20th century. The child's developing body has become an object of systematic scrutinisation through the exertion of external monitoring. Its bio-medicalisation through the new authorities consisted of providing early screening and identification on the grounds of crafting idealised forms of child-rearing. Not only have autistic bodies been invaded by external authorities, but also childhood has become an object of knowledge colonisation through the regulation of bodies.

The next two extracts are considered together for their emphasis on the aspect of a social embodiment. Autism in these pieces of talk is cast mainly as an undisciplined body, exerting

loss of coordination with regards to the social environment. In this sense, the body becomes a primal metaphor for rendering the child's conduct as nonsense. The undisciplined body then is performed through two inconsistent ways of talking that imply a) a sensible internally driven reaction and b) a non-sensible irrational one.

Extract 4.4 Therapist Sofia

1 I mean they were autistic and they were psychotic (.)

2 people don't say psychotic now (.)

3 but (.) u:m (0.9) I mean (.) I remember one little girl

4 who would be sitting in the circle on the mat

5 and she just suddenly screamed and get up

6 and go crouching the corner and urinate for no reason

7 it was (0.8)

8 I mean of <course> there is rea:son (.) that was to do with what was happening inside her

9 not anything to do with what was happening in the room /

Extract 4.5 Therapist Heather

1 Em (.) I (.) me:an (.) it was one boy who

2 was ab:>out< (.) he might have been around eight

3 but he looked like five /

4 he was incredibly small for his age

5 and er (.) no language

6 and walked around in circles

7 and er the thing he did (.) he had some kind of toy

8 that was lit:erally like a stream with something tight on the bit

9 and you know (.) he would just throw it away from me and back

10 and throw it away from me and back (.)

11 or spin it in a round and round and round /

12 so really he didn't want contact just wanted this repetitive kind of thing

13 that probably calming down or self soothing or whatever kept himself together/

14 Um and then (.) he would as if something happened inside him (.)

15 there was not necessarily any external prompt (.)

16 he would u:m (.0) either become very manic and giggled

17 and you know jump on the table

18 and throw the chair and you know become quite like that

19 and struck toward the toys

20 and if I would try to stop him he would go for me

21 and he would try to bite me try

22 and kick me

23 and if he couldn't (.) because he was so small=

24 I mean I didn't allow him to hurt me

25 and I could just if you like kind of keep him at bay/

26 and were he really resort was that he would either wet himself (.)

27 or would have instant diarrhoea and put his hands in his pants and smear/

28 so there was a way of communicating, em just terrible states from inside, em.

The two extracts (4.4 and 4.5) quoted are variable presentations of the repertoire of disabling embodied materiality. They differ much in terms of content, style of talking and narrative structure. As seen in the first exemplary (4.4), the therapist provides a generic report of an embodied event. Casting her report as a derivative of her memory, she claims that 'I remember one little girl who would be sitting in the circle on the mat and she just suddenly screamed and get up and go crouching the corner and urinate for no reason' (line 3-6). Having already launched in the first two lines an instant articulation of the psychiatric classifications of psychosis and autism, she clarifies that 'people don't say psychotic now' (line 2), showing perhaps awareness of the phenomenological and historical affinities of the two classifications. By adhering to this historical asymphony she does not provide any clarification of her position against this idea, leaving room to appear as sympathetic to this idea. Her choosing not to specify a particular social category when she refers to 'people' could point to a discrediting of these social partners.

The therapist goes on to articulate her main argument, that is the dysfunctional embodied subjectivity of the child. She triggers turbulent accountability, which presents the child's behaviour as unreasonable 'and she just suddenly screamed and get up and go crouching the corner and urinate for no reason' (line 5-6) while immediately softening this statement in 'I mean of <course> there is rea:son (.) that was to do with what was happening inside her not anything to do with what was happening in the room /' (line 8-9). By articulating such inconsistencies in her talk, the therapist gets caught into the delicate activity of trying

to find meaning inside autistic behaviours. Although she resists positing a completely subordinate view of autism as meaningless, she offers an equally dysfunctional view of autistic subjectivity.

In a similar vein, the 4.5 extract is flawed by such negative clothing of the child's subjective world. From the beginning, the therapist strategically invests in a disabling discourse that treats the child as being deficiently different. Within the consecutive negative assessments of the child's physical appearance, 'e was incredibly small for his age' (line 4), or cognitive abilities 'er no language' (line 5), or limited purposeful activity, 'would just throw it away from me and back' (line 9), or his aggressive character, 'he would try to bite me try and kick me' (line 21-22), this therapist works autism in such a way that she leaves no room for positive depictions. By crafting a strong agentic malignant positionality, the therapist can build a factual report on the grounds of heightened consensus and corroboration. Horton-Salway (2001) has shown, that participants use strategies of vivid description and repetition to build their accountability in talk.

In the final extract (**extract 4.6**) another performance of the repertoire of disabling embodied materiality is articulated. While other therapists allocated the disabling features of the autistic body as segregation between the subject and its social environment, this new account forwards a relational understanding of the embodied challenges that the child faces. The child is presented as secluded from her social world, an idea that implies reduced aliveness (Turner, 1992).

Extract 5.6 Therapist Muddy

1 R: It was terrible because he was never felt separate from her

2 They were always together (.) <u>clinging</u> to each other

3 There was no adventure (.) no curiosity (.) no and she didn't know

4 like many people you know when (.) you got a very good quite passive baby you think they

are lovely.

5 I: Yes of course this is a this a trap that we come across a lot.

6 R: They smell lovely they

7 and they feed very sensually

8 and they want to be weaned/

9 So they don't care that they don't look (.)

10 or they don't talk or

11 they don't point (.) because there is no space out there for three.

The therapist initiates her argument by providing a diminishing comment, 'It was terrible because he was never felt separate from her' line (1-2). She marks the child's bodily functioning as 'terrible' by using the impersonal 'it', perhaps in order to modulate the force of this negative assessment. She then continues offering factual data in terms of the child's failure to show the standard signs of normative development, which lie in his ability to separate from the mother figure. As a result she elicits an incomplete list of dysfunctional behaviours carefully prescribed to the child, indicating the failure of the maternal environment to identify them as early markers of autistic predispositions, 'and she didn't know like many people you know when (.) you got a very good quite passive baby you think they are lovely' (line 3-4). My response in line 5, 'Yes of course this is a this a trap that we come across a lot', situates as a verification of the therapist's argument. The comment functions on two levels. First, it positions me into a generic ensemble of social actors such as parents, therapists and the like who embody the ambiguous role of child-rearing and

monitoring of abnormal development and second it acts as a further invitation for the therapist to develop her argument.

Both the therapist and the interviewer could be seen as co-constructing a representation of the social development of the child as an uncharted 'minefield'. This construction is rhetorically built through figurative language. On the one hand, the child is pictured in an onerous framework, 'they smell lovely they and they feed very sensually and they want to be weaned/' (line 6-9), that depicts the guardian in an ignorant subject position. Inside it, the risk is that the parent can become less vigilant in order to attend to other features of the embodied sociality of the child, 'So they don't care that they don't look (.) or they don't talk or they don't point (.)' (line 9-11). By marking the parental response in terms of 'they don't care' sounds offensive. This discursive account devalues the parents in terms of their expected role of being aware of certain developmental signs. What is achieved in terms of the therapist's position is the idealisation of their role in terms of having the authority and the knowledge to locate those early signs that could subsequently categorise the child as developmentally disordered.

8.5 Summary of study one

In this chapter I outlined the four interpretive repertoires that were identified through the discourse analytic framework. The chapter elucidated the way therapists negotiated the different notions of autism in their free associative interviews. The presentation of the findings provided a discursive framework where autism mainly assumed negative attributes. The analysis indicated that the four distinctive interpretive repertoires are orchestrated in such a way that primarily constructed autism as a pathological-medicalised entity. Setting off from the repertoire of unknowability, the therapists' discourses operated through distinctively medicalized subject positions which delimited and also constructed autism as a deviant form of life. A number of discursive devices were recognized through the analysis of

the selected excerpts to show how the therapists utilized specific discursive features and the psychological discourse in order reach certain interactional achievements such as the legitimization of their interventions and the presentation of their accounts as credible.

CHAPTER NINE

Method study 2

Construction of the second study, using a hybrid multimodal discourse analysis

9.1   Rationale for study two

With autism marking a uniquely challenging terrain, there is a necessity to re-examine the everyday interactional phenomena that are conducted by people within autism. A multimodal method of investigation is proposed, which is designed to pay attention to the normative communicative practices between people and their social environments. A brief review of the different multimodal schools (Adami, 2017: Jewitt, 2009), shows that apart from limited exceptions (Zidjaly, 2015; Doak, 2019), the endeavours undertaken inside this field, assume a relatively unproblematic view of the relational events among people.

The flourishing of multimodal methods has enriched disability studies. Zidjaly (2011, 2015) implemented a multimodal design to capture the interplay between discourse, technology and disability. The author illustrated that multimodal methods designed to investigate the digital practices conducted by the participant highlighted the role of the visual in reclaiming agency. The use of multimedia by citizen activists could lead to a democratisation of disability, promoting the idea of truth to the idea of perspectives (Al Zidjaly, 2019a; Al Zidjaly, 2019b).

Despite the growing popularity of 'social media' activism, in recasting disability (Bumiller, 2008), there has been a lack of studies that specifically examine the use of such means by people with autism. This is indicative of the domination of positivist designs within autism research, with an emphasis on neurobiological factors. If a neuro-developmental condition is seen as fixed in its expression (a phenotype) because of controlling genetic factors (genotype) and not subject to change from social factors, then it could be predicted. The

shift from the very damaging 'cold fish parent' hypothesis to a more benign, genetic account (when it is not the parent's fault) has advantages but leads to significant drawbacks with the scientific accounts of the phenomenon becoming flexible and not subject to any influence. A shift in focus in understanding autism as an interactional, multimodal phenomenon, could lead to new insights with regards to autistic interactional activities and also with the way this field expands into new areas of investigation. This may entail a departure from the biomedical model of disability into the post-social (Schillmeier, 2010) one, where the focus is on understanding disability as an interactional, culturally contingent empirical framework.

9.2   Disability studies and Multimodality

A current empirical example published in the Journal of Qualitative Research demonstrated the pragmatic value of an enriched multi-perspectival understanding for analysing interactional events between the child and his caregivers inside the school setting (Doak, 2019). The author, argued for a blending of conversational analysis, with ethnographic research and multimodal (inter)action analysis in order to study classroom interaction and communication for a child with ASD. She thus showed how a child with autism with limited verbal ability, performed several higher-level actions during lunchtime.

Multimodal methods could decisively enrich the understanding of digital practices by highlighting the meaning potential that is communicated through them. The study of multimodal actions of people with autism could be revealing for understanding the identity elements that fleet inside moments of social participation. Norris (2008) shows how participants utilise several semiotic means in order to build several identities. Taking mediated action as a unit of analysis, she develops a heuristic framework for the study of situated identities.

The video posted by an autistic activist on the popular social media platform of YouTube is subjected to a multimodal analysis. In order to sidestep the normative explanations about the state of sociality in autism, this video is approached by using the idea of a 'semiotic landscape' (Kress, 2005). The notion of semiotic landscape as appropriated is taken from Kress and van Leeuwen (1996) denoting a visual field synthesised both by semiotic materials sometimes referred to as modes and also their cultural-historical articulation. Putting together a video and uploading it to the YouTube platform is seen as framing a rich semiotic landscape that creates meaning through the polyphony of its cultural signs.

It is not only this mode informed view that guides the analysis of the video. The producer of this video actively engages in a series of social actions, all of which are mediated through means and modes which situate inside a time-social-history framework (Norris, 2004). The emphasis is not to what happens among individuals, but to what happens as part of the private life of the protagonist as this is developed in her material embodied practices. This there-being (Heidegger, 1973) allows the viewer access to the embodied experience of this autistic person, how they experience themselves outside the symbolic interactionism of language. Their embodied acts allow us insight into the full panoply of autistic thought and expression. This type of analysis is surely what Giorgi (1970) means when he talks about Psychology as a Human Science-fully expressed verbally and non-verbally.

The primary focus of this study is to examine the identities made visible by the social actor through the means of filming and posting a video on a social media website. Apart from just posing the prosaic question 'who is depicted in this amateur film?' I am also implementing a critical and political analysis, on three different layers. Firstly, the expanding frame advocated will centre on the critical stance, as this is strategically articulated in many sections of this thesis. Secondly, it will further highlight the catalysing role of the public sphere upon the fluctuating momentary identities produced in the situated context. Drawing

on Scillmneier's (2007) re-articulation of disability as an assemblage of local non-human practices that forcefully re-arrange the domination of the social into the local order of the body, the sense and the surrounding things, it will offer a different exemplary for disability and identity as this is pronounced inside the video. Finally, it will become sensitive to issues of 'voice' as these are appropriated within the field of mediated discourse analysis (Bloomaert, 2005; Norris & Jones, 2005; Scollon & Scollon, 2004).

Through the employment of the logic of 'voices' as enacted in mediational means, I will argue that people are always in a dialogic relationship with their environments through a profound heteroglossia (Morris, 1994). The language that prescribes their semiotic meanings is never wholly their own. Language conventions involve some neurotypical 'agreements' to promote communication. People with autism may see this as much less a priority over 'just getting out what head and body are telling me to do'.

9.3   Commonalities in methods between study one and study two

I am asserting that there exists common ground between the multimodal method discussed here and the critical discursive psychology approach utilised in the first study. Primarily, this is conceptualised as the act of trying to understand the interplay between the local context of the phenomenon and the societal one. The principal idea is that identities come to fruition inside the film, not as pre-formed ways of being. On the contrary, they are catalysed by attempts at the social, as this saturates the way these identities can be crafted on the local interaction order. It is this joint complementary dialogue (Shotter, 1993) that allows the actor to fertilise, master, cultivate and finally appropriate the publicly recognised, neurotypical versions of autism, as these are occasioned on the local discourse and the local action. In order to understand a perspective, one has to look at further discourses on the topic which are practically and phenomenologically different.

Jones & Norris (2005) suggest that, 'The most pressing social problems in the world must be understood not as a matter of the dealings of large institutions (governments, corporations) and abstract ideas (justice, democracy) but, rather, as a matter of our individual actions within the semiotic aggregates (Scollon and Scollon, 2003) that institutions and ideologies produce.' (p. 11). This is predicted by chaos theory-large amounts of small, local events can have substantial consequences. There does not have to be a single organising principle in our post-Newtonian universe.

Identities crafted by social actors are both saturated and re-inscribed by institutional requirements within the inevitable force of ideology. There are limitless alternative possibilities which might be present in the text, which could never be fully captured. While the terrain of autism is mainly sketched out through the expression of activism and the action of resistance against hegemonic biomedical practices, it could also be seen as mutually dependent upon them (Runswick-Cole, 2014). This process impacts autistic identities by locking them within a discursive multimodal spiral.

Schillmeier (2010), prompted us to re-think the social origins of disability by devising a new way to understand the social as 'the changing relations that are configured by and (re)-configure bodies, minds, senses and the things'. (p. 6). Thinking about disability does not merely mean locating it in places like the social, the individual, or the psychological but on the contrary utilizing the non social elements like the body, the senses and the things in order to arrive to a different set of social relations announcing a decisive break from modernist assumptions of disability (Schilmeier, 2007).

Fighting the historical determinants of the definition of autism inside a culture of psychologically 'minded' people does not lift the political constraints, but on the contrary, it potentiates them. It gives life to an unproductive, and negative discourse cycle, offering only a minimal range of identities and positions for autistic subjects to adopt. Others almost

wholly define these identities. Most of the hybrid identities crafted more or less appear as a repetition of the past, always moving intertextuality along the lines of disability discourses.

This study allows for engineering alternative identity formulations that might potentially compromise the idea of activism, providing ways of being that decisively re-arrange the distribution of meaning in the lives of autistic individuals (Leveto, 2018). The main idea is that while it can be relatively easy to identify normative cultural constructions of autism, one also needs to stay alert to the possibility that the identities anchored inside the video could also be telling for silenced constructions which I may call latent identities.

This study tries to inquire if and what lies among, beyond and within this sociological habitat in what I heuristically call a 'nexus of possibility'. I thus navigate with the spirit of mapping but overcoming the unproductive binary that divides neurotypical and autistic populations (Maynard et al., 2019; Ruthswick-Cole et al., 2016). The approach will be initiated through the illumination of hidden structured ways of being that situate in the actions filmed.

The fundamental question posed in disability and autism politics is voiced as a very contemporary debate (Pitney, 2015). The disorder Vs difference dichotomy in autism activism sounds like a fraudulent attempt to activate autistic lives against the critical, deficit-ridden, dominant narrative. It raises severe existential issues since autism as a phenomenon cannot be thought about without any reference to its articulation through modern psychiatry and psychology. The action of maintaining autism's dual representation, as in disorder or difference, offers a bio-political agenda that attenuates differences through 'polemic' rhetoric (Nadesan, 2013; Ortega, 2013). People with autism want equality, but they do not want to be neurotypicals. They want the right to equality and difference.

9.4 Description of the method and research questions

My methodological concerns primarily derive from the developing field of multimodal analysis of (inter)action, as this is described by Norris (2004, 2014, 2019). The analysis commits to the study of mediated actions and the way that these are distributed across the activity of video. The analysis attends to the way that the site of engagement[9] is sustained through the (re)production of the video and also the participation of the video in the web page creates its social actor treats an account for the way autism. The idea of a nexus analysis (Scollon & Scollon, 2003) could be particularly useful here to signify the shared analytic attention given to discourse. I will be investigating the relationship between discourse and the way it flexibly structures the semiotic choices of the actor during filming. I will also pay attention to the 'top-down' functionality of discourse, which corresponds to bringing inside the action, the social and cultural signs that surround autism. Finally, I will incorporate a critical attitude to the text that should allow me to investigate how power, history and ideology influence the semiotic choices of the film and the inter-semiotic relationships that ultimately allows for shaping meaning throughout the video.

This methodological 'superstructure' crystallises in the following research questions that provide the focus and guidance for the proposed analysis:

- How does the social player strategically organise the social actions through the video, managing, and simultaneously producing multiple identities? Do they, or is it just individual actions that have a random but significant event? Chaos Theory would predict that, rather than some organised response. We assume central organising principles of data, but this might be an empiricist mistake. Maybe things randomly combine to produce meanings.

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[9] The site of engagement is a window of interaction that initiated through practices that open up the possibility for mediated actions (Scollon, & Scollon 2004, Norris, 2019). In our framework the video posted on the YouToube could be thought of as a site of engagement.

- What is the interplay between the identities crafted in the video as these are theorised by Norris (2011)?

- How do the modes and cultural tools shape the meaning potential that makes particular identities more visible than others?

- How is power exercised so that particular 'voices' become more or less silenced or more pronounced within the semiotic solution?

- What is the rhetorical organisation of the text in terms of perpetuating, destabilising or breaking the apparent verbal and non-verbal structures that underpin the social world of the person with autism?

- What kinds of latent identity elements become visible through the multiple sequences of actions depicted inside the video? Equally important is the periphery of it, and the possible bracketing of the customary positions adopted in everyday society by the disorder difference dichotomy?

- How do modalities of meaning such as the body, the senses and the things become vehicles of disability inside the social activism film?

9.5   Data selection

Researchers around the world are currently scrutinising the internet for designing and implementing rigorous qualitative research itineraries (Blume 1997; Hacking, 2010). Research that utilises online data is thought to be more naturally driven, and its data are considered participant-generated. Apart from its practicality, this kind of data generation strategy could be thought of as doing more justice to the participant's voices (Denzin, 2017; Sacks, 1992). In this line of thinking, Lester and Paulus (2012) suggest that this type of naturally born data can prove more efficient when trying to understand the performative and constructive facets of people's lives.

The same trend saturates the field of mental health research (O'Reilly & Parker, 2014). Research investigations that fall under this category are utilising the new tools of digital data production, such as recorders and video cameras and on the whole ground on relatively small data samples that differ from traditional materials. Scholars have tried to delve into the online placements where people with disabilities currently formulate their social communities, offering some very unique research examples.

Brownlow and O'Dell (2006) tried to show the way people with autism can raise their 'voice' in online discussion groups. They suggested that the internet enables communication for people with autism by allowing their opinions to be framed in synchronous or asynchronous discussions. Autism online cultures, are therefore becoming increasingly potent and diverse for the investigation of first-person narratives (Davidson, 2008). Most of the first-person accounts that take place in online environments indicate that autistic people are pretty keen on establishing their 'reality' inside the web, in a way that can forward their customary selves and bio-political interests (Blume, 1997).

The second study was selected based on the logic of complementarity, multiperspectivism (Jorgensen and Phillips, 2002) and also the logic of data triangulation which has become a common trend in qualitative social research (Denzin, 1978; Patton, 1999). Two main lines of thinking influenced this decision. First, having already devised an interview procedure for the first study, I wanted to use a different strategy into the second that would pay attention to the everyday occurrences of autism. For this, I placed high on my logic the emphasis on generating data that would not be influenced by my presence. This was done both for reasons having to do with the state of data, but also for reasons of practicality which build on pragmatic limitations. Having, done an extensive review of the literature, I was cognizant of the relevant field and also the preference to rely on unbiased research data in autism

research (Raymaker & Nicolaidis, 2013). Second, having a large sample of what I understood as clinical representations of autism, I wanted to go opposite so that to investigate the condition from within the people that are affected by it.

In this respect, I constructed a layered strategy in locating the relevant data. I have placed a maximum requirement for generating material through an online search, based on three basic tenets. A) The second study acted as an equally important complement to the first one. B) Knowing that tracking research material could be a time-consuming process, I aligned with those voices within the academic field that talk about manageability when designing a PhD project (Williams et al., 2011). C) Finally, I attended to those accounts that portray discourse analysis as a labour-intensive research procedure (Willig, 2008).

In this sense, I oriented to a small scale project that could be integrated with the first one. The scope of this research was related to both breadth and depth, which mainly reflected the way these two concepts have been discussed by Phakiti et al. (2018). Borrowing from their camera metaphor, I wanted to capture both the broader landscape of the visual and the local one, as constituted by its local grammar. In this vein, I started locating materials that would talk through self-narrative, and that would portray autism through a diversity of modes. Thus, I narrowed my search strategy in the most popular and also easy to access social media.

At the beginning of the data skimming, I anticipated that only by searching for 'autism' in popular platforms such as Instagram, Facebook, YouTube and other's would reveal a vast number of results. Only in the popular platform of Instagram, more than ten million results were associating it's content with autism. In order to delimit these massive numbers, I decided to frame my 'search strategy' using other variables. In this regard, I implemented

criteria for 'age', 'specific social media platform', 'unofficial instead of official account' meaning a video that was produced by an amateur subject instead of an organized agency, 'public' instead of 'private', 'online interactivity' (Adami, 2015), 'popularity' and also 'durability'. In terms of this last component, I wanted to locate material that would have been posted online for a considerable time, placing the limit from ten to fifteen years.

This straightforward logic led me into the video hosting platform of YouTube, where I selected a video posted by a young woman more than a decade ago [silentmiaow]. (2007, Jan 14). *In My Language* [Video file]. Retrieved from https://www.youtube.com/watch?v=JnylM1hI2jc. The video was viewed by more than a million viewers, becoming 'viral' as people in social media quite often say. The video pictures a young woman engaging in a number of different embodied actions. There are not many information's during the presentation of the video in terms of the identity of the woman. However the social identity of the autistic woman is publically available both from her private channel in YouTube (https://www.youtube.com/user/silentmiaow) and also by the blog that she maintains in the web (https://ballastexistenz.wordpress.com) from 2005. When I accessed both of them I understood that the woman is very active in defending the rights of people who have been diagnosed with autism and related mental health conditions.

The particular video qualified for most of the criteria staged beforehand, while also being a quite indicative sample of the growing, participatory culture of autism activists. By utilizing a wide range of semiotic modes but also incorporating the logic of amateur filming culture, I decided to attend to this film as offering a rich sample of the local and broader context of autism, while paying attention to the way the societal and the everyday accountability of the person inter-played in unforeseen and mutually influential ways.

9.6   Ethics of online research

The ethical concerns regarding online electronic data have been an issue of considerable thought and scrutiny throughout the conduct of the second study (Moreno et al., 2013). With the increment of internet methodological designs, there has been a rise of concerns over the policing of these explorations by the different authoritative boards. Sveningsson (2004) suggested that there are opposing views with regards to ethical guidelines, this being the result of the new regime about the public and private that the internet has brought inside life. There seem to be those that sustain a stringent view about the confidentiality of data obtained by the web. They claim that even if something appears to be online, this does not immediately make it legible to academic research (Bruckman, 2002). On the contrary, those who counter this logic follow a less 'puritan' ethical route. Within their rationale ethics inside online research should be quested based on pragmatic questions. Researchers that are researching the field should always question their motives by overtly asking whether their research would cause harm to those involved and whether the discussion that occurs through it could significantly impact the lives of participants.

McKee and Porter (2009) frame this issue over several different musings. They contend that, when researching the internet, it is crucial that the researcher questions several cardinal facts. Following their grid (see appendix 7), I locate this study's ethical extensions according to their four stages model as this appears below:

1) On the level of private/public axis, I recognise that the video is hosted online for several years and is therefore publicly accessed by the members of the YouTube community. The video is not protected with any password, and there is no indication that the author of the video wishes to foreclose her identity for any reason. It is

even indexed inside the private channel and blog that the author maintains. By the numerous comments posted as a result of the video, I conclude that it is used as a way of building communication and interaction with others inside YouTube. Visual shots that include the face of the protagonist are included with no reservation in the original footage. I assume that the author of this video voluntarily has posted the accessed material on the public domain of the platform. However, for reasons of confidentially and within the attitude of protecting the physical identity of the protagonists, I will cover her face with a visual mosaic.

2) On the second level, McKee and Porter (2009) advice that we attend to the sensitivity of the topic studied. While a mental health topic such as autism could be considered a matter of high sensitivity, the context of the video and also the way the person talks about this condition makes it hard to locate whether this video should be placed on high or low sensitivity. I credit that because of the activist character of the video, the author of it does not consider her autism to be a highly sensitive issue.

3) With regards to interaction axis, I claim that the researcher is non-existent. Examples of increased interaction would include the researcher's involvement with the participant through emails, Skype conversations or other synchronous or asynchronous communicative experiences.

5) Finally, with regards to the vulnerability of the subject, I believe that since all information that is discussed through the analysis and dissemination of the research are part of the online environment, there are no issues that could expose the person's vulnerability. Multimodal discourse analysis by its reliance on studying

overt and thus visible actions could be valued as particularly paying no risk to the subject. For example, no mentions to underlying states, or emotional concepts will be attempted during transcription and analysis. By relying on this ethical strategy, I credit that it becomes apparent that this study presents no particular threat to the individuals participating. Therefore, I find no reason to obtain consent from either the author of the video or another guardian that relates to her.

9.7   Multimodal Transcription

Beyond early considerations, that followed an unproblematic logic with regards to transcription, I decided to take a fine-grained approach to convert multiple data into text. Baldry and Thibault, (2006), Hammersley (2010), Norris (2019) and Ochs (1979), advocate for a transcription method that comes as a process of active choices which on the whole are driven by the motivations, theoretical origins and aims of the researcher. O'Reily and Parker (2014) noted, echoing Hammersley (2010), that this decision-making process could be divided in a number of essential granules that try to capture matters such as the level of detail in description, the emphasis on verbal and non-verbal aspects, paralinguistic details or even issues that relate to the presentation and design of transcription.

 After considerable reflection on transcription procedures, I centred on an approach which viewed language as an indispensable part of the intermodal landscape. The new rationale was rooted in the literature of multimodality (Pirini, 2016; Pirini, Doherty & Norris, 2018) and mediated discourse analysis (Scollon & Scollon, 2003). I coincided with Jones (2011) who urged the researcher to encounter transcription as a process that 'best promotes one's theory' (p. 10). I understood transcription as more than a theoretical problem, which is molded into a kind of situated practice that takes place in a particular sociohistorical-cultural-material world. The transcription technique then relied on three major tennets:

A) The first issue derived from viewing transcription as a kind of practice, which was examined against the main drives of the study. This, related to a capturing of the macro and micro level of the social actions as these were filmed and subsequently montaged by the author of the video. It associated with transcription methods which attended to the exercise of power on many levels. Within this critical framework, I become aware of the fact that in producing language descriptions to those behaviours exemplified in the video, inevitably placed me on the same societal trajectories that provide the vocabularies of autism. One particular example was that in trying to describe the continuous non changing the action of the protagonist, I resorted on the uses of the word 'repetitiveness'. In the language of autism, such word is negatively connoted since it sketches the behaviour across the discourse of disorder, placing the phenomenon within the biomedical discourse. As a response, a rather descriptive vocabulary was chosen in order to avoid predetermined negative associations of autism provided. While it was inevitable to provide a comprehensive description, I relied on this genre of discourse in order to provide more room for more in-depth data analysis.

B) The second issue related to the dynamicity of the film material that I had decided to analyse. As Bezemer and Jewitt (2010) argue, video is a quite dynamic material and this need to be taken into consideration in the process of entextualisation. For me, this had to be translated into a 'Dynamic transcription narrative' that could accommodate all these film movements that could not be captured otherwise. By being dynamically produced, the narrative of description relied on a less temporally driven method. On the contrary, it adopted a saliency principle where I prioritised the most foregrounded modes of the film within their inter-play.

C) Finally, one of the major concerns in the transcription strategy revolved around the identification of modes that build up the multimodal landscape. Drawing from the theoretical discussion which treats mode as a social-cultural artefact (Kress, 2010) I tried to identify different modes as constructive, situated resources for meaning-making that are manipulated by the social actor in the context of particular interactions and within specific social environments (Norris, 2019; Pirini & Norris, 2018). I entered in a recursive reading of the audio-visual material, in order to initially become accustomed to the overall layout of the film. I viewed the video in as much as possible ways in order to become more immersed to the different modes that the actor utilised. This included watching with eyes closed, in muted mode, in expanded or shortened windows, with or without headphones but also in as many devices as possible.

During this procedure, I was taken by the modal variability that was revealed, taking notes which provided cues against the aims and the questions of the research. I then read widely against the separate modes, to become as much cognizant as I could about the historical articulation of each mode and the way that it has been used in different cultural spaces. This way, I started having an idea about the way that meaning was constructed as a result of the intermodal arrangement, which was part of the social actions portrayed inside the video. Finally, in transcribing a mode such as the vocal one, I resorted on my musical background as a way to over-score this medium. This strategy appeared to be utterly helpful in trying to understand the way meaning was done across a mode that could not be entirely transcribed linguistically. As a result, a musical score was embedded under the image plate in temporal synchronicity, to offer a close reading of the musical and the visual dynamics.

Many authors have already highlighted the role of transcription in capturing the intermodal landscape (Flewitt et al., 2009). Goodwin (2001) discussed the close interplay between the transcript and its analysis pointing to different types of transcript layouts according to the analytic emphasis. Through a detailed and close transcription phase, I was already beginning to form an analytic framework that attended to the way that the author of this video navigated the interactional environment, through a multiplicity of modes.

CHAPTER TEN

Results of study 2

10.1   Description of the discursive framework

The presentation of my analytic claims will be arranged in a way that the reader can access the three-fold strategy, which guides analysis as described in this chapter. I will orient towards the explication of the identities made relevant, through the interplay of semiotic modes, social actions and the identity elements that are 'voiced' by the participant. Moreover, I will offer the reader the opportunity to attend to the mutual deployment of identities in the micro-level of the video but also on its broader social-historical and political context. Finally, I will be attending to the grammatical and rhetorical organisation of the material but will do this in a way that makes mediated social action the basis of my analysis.

My analytic claims will reflect a meta-theoretical approach towards the data, as forming distinctive practice nexuses. This idea will build on the modification of the notion of the 'nexus' as initially defined by Scollon & Scollon (2004) [10] Although I am less interested to the application of nexus analysis as fully articulated by them, I am using this concept to frame the analytic claims. People are engaged in socially mediated actions by using objects and ideas that are enabled or constrained through political, historical and cultural specificity. Different nexuses are constructed through different discourse and semiotic choices which correspond to variable identity elements.

10.2   Presentation of analytic nexuses

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[10] Scollon & Scollon (2004) define nexus as the way that 'historical trajectories of people, places, discourses, ideas, and objects come together to enable some action' (p. viii).

10.2.1 Nexus of resistance and the unfolding identity

In the first part of the analysis which is called the 'nexus of resistance', the emphasis is placed on social actions that are included inside the film and that overtly draw from the discursive reservoir of activism. The 'nexus of resistance', will be exemplified as a range of local actions which are marked by the outer layers of discourse providing general identity orientations for the social actor. Through these circulating social representations, specific repertoires of social 'languages' appear to influence the production of identity elements. Foucault (1977) defined resistance as a productive political re-action against the pitfalls of everyday power dynamics. The task is to attend to those moments of mediated action inside the video that are more salient for features of 'resistance'.

The first excerpt is quite telling in the way the actor introduces her identity to the YouTube audience. By concentrating on the mode of text and also through the grammar of the sentence, a disability-free identity is highlighted. Through a complex aggregate of semiotic modes overtly denoting authority and independence other than the accompanying text and language, a valued identity is actively propelled. The analysis examines versions of identity that seem to float within the same discursive apparatus, providing the necessary accompaniment to the disability-free general identity element (Norris, 2011). The identity of the activist is built as a general element that is incorporated in a 'top-down' fashion.

10.2.1.1 Language, material objects and disability-free identity

The beginning of the video, as shown in Fig 1, marks the opening of the site of engagement for the window of interaction that is sustained throughout the video [11]. The opening frame

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[11] A site of engagement is an important notion which falls into two broad definitions within multimodal discourse analysis (MMDA). According to Scollon (2001), a site of engagement is understood as a focal point within an interaction, a definition that emphasizes the minutiae of communication. In contrast, Norris & Jones (2005b) develops a less narrow definition. The site of engagement should incorporate extended actions that might override the local temporal context.

of the video introduces the higher-level action of film-making through the utilisation of several inter-connected modes. The modes of print, font, written language, ethnic language and also the utilisation of black and white contrasting colouring co-create an atmosphere that appears professional and educational. The written message is displayed clearly in the centre of the screen and is carefully fore-grounded against the contrasting moving text that rolls in opposite directions on the background of the visual plane, possibly disclaiming hesitation and uncertainty.

Through the frozen actions entailed in the opening frame and also the modal complexity orchestrated by the actor, several identity elements are made visible here. A careful analysis of the interplay between the multiple semiotic modes featured inside the higher-level action of starting the film shows that there is an array of interwoven identity elements which on the whole foreclose and eventually 'silence' the autistic identity. The filmmaker actively engages in this initial action through interacting modes that preserve identity elements, which are disability-free.

Fig 1 'Introduction'

=/   =/
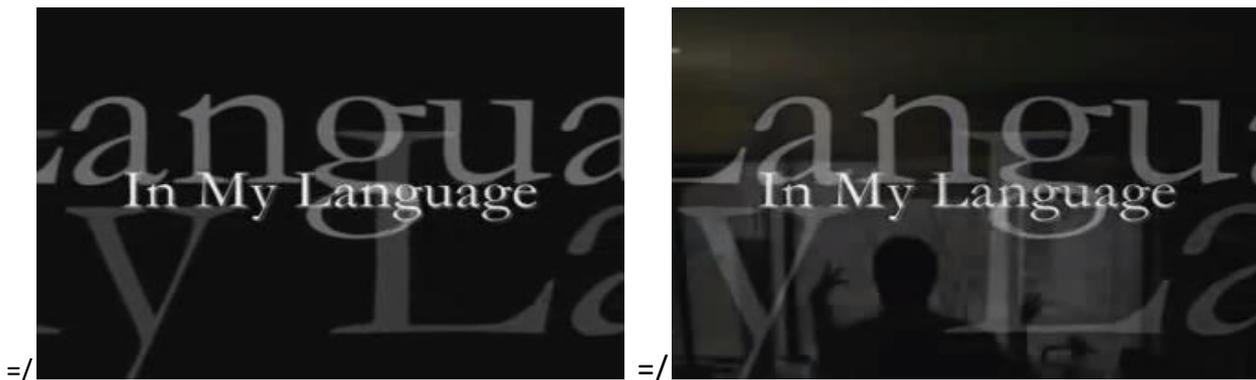
Plate 1a   0.1sec   Plate 1b 0.2 sec

Dynamic narrative transcription

The opening of the film is a visual representation of the title given by the creator. The viewer can read a still message on the foreground while separate words of this message are mirrored in the background. The words roll in opposite directions creating a kind of 'highway effect'. The letters are all in the same regular Palatino Linotype font style but they differ in terms of their size, producing a certain three dimensional visual sensation. The complete message is written in the smallest font size and upper-case letters are selected for the first letter of each of the three words. A visual contrast is created between the black surface and the written words. The reader can clearly read the clause in the middle of the screen but this is not happening with the rolling words that allow only for small bits of them to be read. No sound is added during the first second

New inputs are introduced in the 0.2sec of the video. The first thing to be added is the vocalization aspect which seems to be brought abruptly. This is followed by the progressive fading in of the visual image that pictures a woman facing towards the wide window. The visual frame is relatively distant allowing for several environmental attributes to be recorded. We see a place that looks like a room that has a wide window in one of its outside walls. There are objects that cannot be clearly distinguished due to the blurring image created by the fade-in effect. The room seems to be situated within an urban district with some buildings appearing opposite on the right side. There are also some features that seem to correspond to a more rural landscape like trees. The absence of leaves on the trees and the relative darkness indicate that the recording must has taken place in late autumn or winter. No special lighting is used inside the room creating a rather dark, folk, amateur, black and white, candid-camera aesthetic. The person inside the frame is wearing a simple jumper with dark colors and no other visible characteristic on it. The hair of the person or the anatomy shown

	cannot indicate whether it is a man or a woman. Generally, the corporeal information visualized are relatively few since the person appears more like a shadow and only an idea of the upper extremities is given through the video. There is certainly a polyphony of information which progresses with an accelerated tempo.

The mode of print, as pictured in Fig 1 Plate 1a-1b, is central in two main respects. First, it encapsulates an embodied action without making any visual reference to the actor. This choice is particularly indicative of the filmmaker's intention to introduce her identity on the level of written language and not through an iconic picture of herself. The frozen action[12] entailed inside this first frame particularly illustrates a digital identity crafted on the ability to perform sophisticated embodied actions in order to upload a video on the social media platform such as YouTube. The same action also promulgates a competent language user that can adequately deal with the material components of a computer keyboard and the linguistic structure of English language. The choice of English language showcases a global identity appealing concurrently into several audiences that extend beyond national boundaries and reaches audiences that could have not been reached through another language. Accessibility is achieved through the use of written text that can be accessed by other excluded populations such as hearing-impaired people allowing them to participate in an important cultural site that proposes a political identity crafted on the practice of equal rights. What could also be happening here is that the author is trying to mediate or change the inevitability of the visual first impression which is a classical neurotypical sway of

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[12] The term frozen action is used to describe latent actions that are entailed in material objects (Jewitt, 2009). For example the video as seen in YouTube entails many frozen actions such as the video recording, the editing etc.

beginning in social media-e.g. a lot of NT films in social media start out with 'Hi, I'm X and I'm'. Identity and purpose then are central and are mainly used to focus the viewer's views about the viewed. This might also function as a way to control the first impression of the viewer.

Print arrives on the screen exemplifying high modal density through the intensity placed on this medium and also the attention that has to be invested in it. The layout of the introduction along with the clear print, the black and white contrasting colours and the documentary tone of the introduction, asks the viewer to pay attention to its central title and the message that it carries (Kress & Van Leeuwen, 1996; Van Leeuwen & Jewitt, 2001). With white being the preferred colouring modality for the written text, the author tries to create a multi-dimensional layout based on colour, font size and the back-ground fore-ground of the picture. As such, the central message is getting amplification by discounting other background information that appears fragmentary and fleeting. This effect is sustained though utilising modes such as grey font colours and horizontally rolling words that appear sliced and partial within the visual frame.

The author asks that the viewer attends to the bright (white) and not the 'muddy' grey and black areas of this film. Black and white could be as more wanting to establish a serious genre or a stable past to establish a document. This is how contrasting visual environments are often used by commercial filmmakers, such as advertisers (Vestergaard & Schroeder, 1985). Black and white have been a primary mode that was and is still used in multimodal educational settings, exemplifying teaching practices and framing identities such as those of instructor and student (Sinclair & Couthard, 1975). Some comedians have used the previously assumed authority of 1940s black and white UK Government information films to lampoon and critique modern-day politics (e.g Harry Enfield and his spoof Cholmondley-Warner films). Meaning as already stated should be found in the foreground of this figure

and through the colourful contrast semiotised here through blackness, greyness and whiteness. There is then a three-dimensional transgression from the dark black colour on the background, to grey fonts in the mid-ground and then to the whiteness of the fore-ground that also. This dynamic relationship of the image connotes a specific orientation of the actor towards the most 'bright' features of the frame that is the text message in the centre of the screen.

The mode of written language is significant for the production of simultaneous identities for the actor since it features as the title of the film. The choice of titles in social media videos is considered paramount for securing popularity when examined along with the video content (Lakkaraju, 2013). The title of this video involves a short and generic language which is constructed as a noun clause. The title 'In My Language' denotes several versions of the person but most importantly, it fore-grounds a verbal identity that is individuated through devising a language.

Authorship and agency are built by language ownership, as this is achieved thought the deictic 'in my'. Individual identity, as celebrated in this visual frame, is closely related to the notion of having a language as a personal attribute. This way, individuality and subjective experience are both prioritised for the author, folding the identity into a neo-liberal ideological field which advances the individual experience over the collective one (Loewenthal, 2015). The individualist ontology articulated here 'voices' neo-liberal concerns, reflecting issues of personal ownership through the ideology of the free market. Engineered mostly by the discourse of capitalist material economy and global trading, identity is framed as a linguistic capital. It is pictured as a kind of trademark, an i-language that co-exists with other languages in a global linguistic marketplace (Bouvier, 2015).

While the grammar of this title is uncomplicated and straightforward, what is striking is the fact that the author strategically omits any direct reference to autism. This could be

informed by her portraying a preferred identity, one that does not make room for autism and disability, and that is crafted on the premise of articulating a kind of subjective language. This kind of identity fore-grounding, through functionalisation, is discussed by Manchin and Mayr (2012), who claim that identities can be more valued when pictured through their activity.

By foreclosing the element of autism, and also by functionalizing the subject as a language user, the author chooses to actualise an identity that is not denigrated by the autism referent, but on the contrary, is build through other signifiers that could provide more valued subject positions. The author carefully mutes the medicalised clinical discourses which take language as a sign of impairment for people with autism, without having to make any direct reference to them (Perkins and Howard, 1995). On the contrary, by exhibiting language ability through authorship, she builds a more competent let alone robust identity without having to address the diametrically opposite unwanted identity elements verbally. It, therefore, appears that all semiotic aggregates seem to align with each other so that competency, authorship and more average humanity can be pronounced for the protagonist.

10.2.1.2 Autism as authentic disclosure and idiomatic object handling

Through the next visual frames, I try to outline how the author strategically binds together a series of frames that display her handling a set of everyday cultural objects. Normalisation of actions is mainly attempted by connoting them as constituents of an idiomatic let alone vernacular language.

Fig.2 'Handling the keyboard'

= Plate 2a, 0.34sec   = Plate 2b, 0.41sec

e^^^^^^^^^^^eae^^^^^^^^^^^^^^^^^^^^^^^^^^^   (..)   t^s^e^^^^^^^^^^^^^^^^^^^eeeeeeeee

Fig. 3 'typing on the computer'.

Plate 3a, 5.01sec

1. As you heard

2. I can sing along with what is around me. (..)

3. It is only when I type something in your language

4. that you refer to me as having communication. (.)

[the voice is heard from the speakers of the pc. It is not embedded in the video]

Plate 3b 5.13sec

The analysis starts by focusing on a couple of interlocking dynamic frames taken from different locations in the video. The idea of 'mediational-binding' is introduced to describe the way distant locations in the same film narrative, can cross-reference creating a kind of dialogical interactional field. Through this cinematic device, the director of this film a) expands the meaning potential by resimiotising similar visual-semiotic landscapes (Iedema, 2001, 2003), b) strengthens the overall rhetorical agenda invested inside the visual text and c) provides coherence to the whole film narrative through recycling nodal semiotic points.

Plate 3a (Fig 3) shows the actor engaging in the higher-level action of 'handling a computer keyboard'. This action is introduced in a quick succession substituting a previous caption, creating an effect of unpredictability and surprise for the viewer. It is placed high on the foreground-background continuum, while the long term social action of the video making is

displaced on the background of it (Norris, 2007). A third asynchronous higher-level action is also present in this part of the video that could be described as 'voicing a chant'. This action is featured on the back to mid-ground of the continuum, as the actor pays little attention to it during the whole second movement of the video that extends from 0.3 sec until 3.04 sec. Within this action, the protagonist of the video, musically anchors the action postulated.

Presumably, the fact that this action is omnipresent inside the non-verbal part of the video acts like baseline plot which binds the successive cinematographic events, through the features of slow tempo and simple melodic line. The score under the screenshots of the video, includes some musical notation to show how the author mediates this action utilizing the mode of voice, musical dynamics, tonality and vocalisation. Voiced at such a narrow mid-range pitch, which varies by no more than the semitone, it might be credited as an expression of anguish (van Leeuwen, 1999). The expression of anguish though is not only semiotized through singing, it is also fueled through a) the partial disclosure of the body part against the camera, b) the slow, trembling movements of the camera and c) the quick and cut type successions of the non-verbal filmed actions.

Even though no visual reference of this action is included in the montage, the action of vocalising acts as a constant reminder of the natural 'voice' of the person. The semiotic potential of this action is varied and manifold. By closely imitating the religious musical form, the person denotes an exceptional and uncontested identity, connoted for its power within a given social-historical domain (Machin, 2017; Tan et al., 2010). Even though the action of vocalising is not fore-grounded inside the visual representation, the actor announces an immediate identity that depicts a unique position which simultaneously incorporates a high degree of power and spirituality. In this case, empowerment is enacted through a mid-ground social action which within a traditional discourse analysis would have escaped the researcher's attentions (Cobussen, 2017).

The foregrounded action of computer handling is made from high modal intensity concentrated upon the mode of touch. Medium modal complexity is also compounded through the modes of material object, proxemics, hand gesture, cinematic arrangements that include the grammar of the shot signified by the vertical angle of the camera and the extremely close-up shooting, combined with the short trembling hand-hold visual frames and the underline sound of the caressed keyboard (Fig 2). Low-level actions that are short and repetitive such as the small tremble of the camera, the rolling hand movement, the flying hand movement and the landing on the keyboard movement provide some circularity on the action of object handling. The ending of this visual frame is again unexpected and abrupt.

Plates 3a-3b, are on the other hand located in a successive point inside the video which for analytic purposes I name 'Movement Three'. The action of typing arrives in high modal density which is maintained through modal complexity. The stationary camera placed slightly behind the actor's left shoulder, frames a medium-long shot, providing a broader idea of the environmental layout. The left-from-the-shoulder shot, along with the horizontal axis of the camera allows for getting an idea of the wider attentional perspective of the actor. The physical layout is composed both from animate and inanimate components, which Norris (2011) has described as frozen actions. The disorganised desk, the messy arrangement of the multiple small objects, the computer screen that pictures the adaptive equipment, the printer on the right with the speaker next to it give sufficient visual details while structuring the syntagmatic organisation[13] of the frame (Wildfeuer, 2014).

Two additional elements are considered that provide intersemiotic complementarity (Royce, 2007). Initially (plate 3a) the actor is filmed while typing a sentence in a profoundly skilled manner. Following the completion of typing the director allows for the natural style sound to

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[13] This term is borrowed by Wildfeur (2014) to refer to the analysis of the syntax of the film

be embedded on the visual track, producing an authentication to the action fore-grounded. The clause in line 2 'I can sing with what is around me' is captured in a naturalistic sound mode, bringing the viewers' attention to the here and now of the action. The actor provides a rather artistic layout to the modes selected that can indirectly counter those voices that might dispute the action as unreal and pretentious. As an act of resistance, this action is rhetorically organised at the level of 'proofing' through the means of authentic disclosure, and semiotic transparency.

If examined in isolation, both captions signal some very distinctive insights about the multimodal life of the actor. The image in Fig. 2, illustrates the proliferation of the idiomatic gestures of the protagonist against a cultural object whose technofunction is very well established within the history of humanity. It also illustrates a very intimate moment that takes place in what seems to be a home facility.

The two vignettes grossly frame the actions practised, within the apparent abnormality-normality discourses, which historically have been the most common-sensual ways of representing autism (Murray, 2008). In both actions, the person tries to engage in the practice of 'reframing' which could be vaguely described as the activity of turning oppressive discourses into more liberating ones (Lester & Paulus, 2014). 'Reframing' then, as an activist related activity might be seen as unlocking the identity of the performer inside the discursive milieu that is framed by the health/disease dichotomy. The textual organisation of this film is permeated though the idea of resimiotization of these interlocking frames (Adami & Kress, 2014; Iedima, 2001).

10.3   Nexus of disability

10.3.1   Disabling scenarios. Locating 'autistic' identities in person-object lived (inter)actions

I have already stated that mediated actions in this study are taken as the primary unit of analysis. This means that in trying to answer the research questions posed earlier, I mainly ask 'How is this person doing identity through mediated actions and how is disability implicated inside captions that display the use of everyday cultural objects?'

I see mediated actions as more than a unilateral communicative practice. They are intuitive, bilateral units, which are interactively entextualized (Baldry & Thibault, 2006). As much as a person performs a range of activities within a site of engagement, this particular act is carried through objects and by his/her interaction with them. Material objects could be seen as less disentangled means, since in a multimodal interactional framework they can be read for their talking through us, to us and with us. They afford a pomocentric logic, where people and objects mutually affect their trajectories, co-creating disabling or enabling situations. They also inscribe power within their constitution, making certain functions more available, desirable and meaningful than others.

Objects in their extended timeline become components of everyday social actions, starting from their place in history, the time of their production in the factory and up to the moment of their usage, ultimately occupying a heightened socio-cultural significance. Like people, they dovetail their stories bringing together a blend of origins, the repertoire of actions they entail and also a colonisation of the social world through global networks of economy. Some productions become iconic to the point where their very games are incorporated into our cultural expression. E.g. the term 'hoovering up' to mean using a vacuum cleaner or even enthusiastic eating at a meal. Thus, objects are not only ours they become us. Similar to talk

and language, objects continually frame the inextricable vocabularies of our everyday social lives also framing the elements of our identities. This way, people and objects remain always at flux, constantly reshaping their unfolding 'dialogue'. We cannot think of ourselves outside them.

The next three video excerpts show how the actions taken by the protagonist critically circulate within a discursive cycle of disability, domesticating the socio-cultural objects we live by. I undertake a view of disability that resonates with Schillmeir's, when attempting to provide a breakthrough from the current modular models of disability (2007, 2010). Disability should no longer be viewed as a passive inscription of broader dis/abling repertoires and perspectives. On the contrary, it should be understood as a derivative of interactional practices that re-arrange the interplay between bodies, senses and things (Schillmeier, 2016). As Schillmeier (2010) notes: 'Rather than defining the social in separation to the non-social (individual, biological, etc.) the social gathers the non-social into dis/abling things' (p. 82).

A disabled social identity may initially define the person, but this radically changes when one studies the actions exemplified through the 'gathering' that is articulated by Schillmeir (2010). According to it, disability has been erroneously theorised through a set of either/or conditions which split human populations as 'us and them' (Oliver & Barnes, 2012; Ruthswick, 2014; Schillmeir, 2016). Instead, the analysis should return to an empirical, practice-based paradigm where we could explore the way the disabled body is fabricated as an assemblage of the social and into everyday actions.

The social action in Fig. 4, is mediated by an everyday object which 'talks' to the protagonist in a very sensory dominated way. Failing to become a vector of its socio-historical functionality, the book becomes the vehicle of disability for the actor. Inside the next vignette Fig. 5, the purpose is to highlight how domestic furniture designed to contain and

organise things such as clothes, places the actor within the endemic discourse of disability. Build by the cultures of home designers, this object is taken to address people's consumer identities, satisfying their needs for decoration, social status, tidiness and organised housing environments. Instead, the actor's attention shows how telling is the smoothness of the knob for her, explored by the circular movement of the hand. By not being able to conform to the object's technofunction, a disabled identity is brought into being. Alternative identities become visible when I decide to leave the foreground of the actor's attention. The final visual frame, Fig. 6, pictures a woman's necklace used in a kind of percussion-pendulum mode. During this action, the actor distance herself with regards to the gender properties tacitly encapsulated inside the object. The question slightly turns on how gendered specific objects can talk differently to people, who like the actor of this video become 'blind' to the gendered qualities of the object. Signs of disability then mitigate the failure to showcase a gender-related social action. Being 'blind' to cultural significations turns out to be a shared 'reality' and not a longing of the person's constitutional realm. As Scilemeier (2010) notes then, 'blindness' in a culture of light and sight should be examined as a deployment of everyday interactions, that are talked through our bodies, senses and material possessions, calling for different levels of competence and ability.

Fig. 4 'handling the book'

Plate 4a   Plate. 4b   Plate. 4c

2.21sec   2.36sec   2.39sec

e^^^^^e^^^^^e^^^^^^^e^^^^^e^^^^^e^^^^^^e^^^^^e^^^^^^e^^^^^e^^^^^^^^^^^ (.)e^^^^^e^^^^^^^

Dynamic transcript narrative.

This is the longest shot of the second movement. The first image shows the woman looking at a book. We only get a flavour of the back page of it. The image on the page does not appear very clear. The size is quite large so it might be a magazine. From the way the book is manipulated we can infer that the book cover is not that soft. The woman is sighted. We can now get an image of her facial appearance. She is a bit corpulent. Her hair is black and is quite short. Throughout this vignette, the woman rocks back and forth while diving inside the book and touching her face trough the pages. She does not stop at any time but consistently makes circular movements with her head. When her face distances from the book, she riffles quickly using her thumbs. On the background, we get another view of the room. We see the two doors on the right. The first door is opened inwards and is the one that appeared in previous excerpts. It is clear that this is the outside door, but we see not lock on it. Perhaps this is a residential placement, and for reasons of

security, there are no locks on the doors. Behind this door, a similar one appears, but we see that this opens outwards. It is not clear, however if this door leads to a bathroom or another facility in the room. On the left side, we locate the dresser, but now we get a much more comprehensive picture of it. There are still clothes on it so we cannot say if the video is shot in one day or more. Next, to the dresser, there is a white laundry basket with no cloths in it. There is also a floor lamp which is not switched on. Behind this lamp, we see the tall bookcase with several books on top. The books are arranged carefully. Other objects and boxes in the bookcase are not so well placed. There is also a wheelchair on the right side of the visual frame.

The first triad of screenshots illustrated in Fig. 4, show a young Caucasian woman interacting with a book. This action is one of the longest in the video. During 29 seconds, it gives a detailed view of the protagonist inside this domestic setting. Unlike the previous figures, this one displays the actor being seated inside a different location in the room. Although the camera is placed on the right side of the actor, it allows only for a partial view of the body. While being static, the visual frame is composed of several animated and inanimate features. The animated features, strictly emphasise the woman's upper region allowing the head, chest and hands to appear on camera. The emphasis is on the action of handling the book, which is mainly employed through the senses of sight, touch and vision.

The action showcased, could artificially be split into three locomotive phases corresponding to the actors head movement. At first, the actor's head disappears into the interior of the book, as shown in Plates 1a and 1b. Inside Plate 1c the head assimilates a rather 'appropriate' reading distance, with the body leaning slightly against the book in a gesture that possibly denotes increased attention towards the interior of the book. There is a fleeting reader identity that makes its appearance here but instantly disappears as soon as the actor makes another intuitive gesture towards the book.

Many different semiotic modes compose this figure. Even though the moving body occupies the biggest part of the visual landscape, background information is also becoming essential for the overall interchange. Modes such as the layout of the room, the type of domestic furniture that appears in the background like the book case that contains several items, the wheelchair facing the protagonist, the lack of interaction with the camera lens but also the casual clothes and the gaze of the participant are arranged in a complex manner. The modal complexity though that is structured through the modes of the camera, the hand gestures, proxemics and the direction of the head and gaze undeniably provide higher modal density to the action of book handling.

What kind of identity element does this action reveal? We have already seen that a reader identity is only temporarily taken by the actor when her body, gaze and hand assume a reading positionality. Attending to the obvious and the anticipated, to utilise Norris' identification strategy, would further lead to locating a 'disabled' identity for the actor. Despite the two apparent versions produced therefore by the actor, I will now try to suspend this kind of understanding, in order to evidence the disabling character of the action providing further grounding for the identity nominated. Thus, I will claim that to attribute a disabling identity to the person acting, requires more than purporting a categorical name to it. It requires analysing the action itself that would take into account the way the body, the senses and the object utilised, get caught inside a mediated practice of dis/ablement.

Fig. 5 'Handling the drawer knob'

Plate 5a 2.04sec   Plate 5b 2.10sec   Plate 5c   2.21sec

e^^^^^^^^^^^^^^^^^^^^e^^^^^^^^^^^^^^^ (..)   e^^^^^^^^^^^^^^^^^^^^e^^^^

> The visual focus now shifts on the interior of the room. The protagonist uses the left hand to touch the knob of a dresser. It contains two drawers. The drawers are opened and allow a partial view of their internal contents. Although most of the clothes are irregularly organized, we can see the upper part of a woman's underwear in a light blue colour. Should this be an indication of the gender of the protagonist? Unless we are shown that she is sharing this room with other individuals, we can probably infer that the protagonist is indeed a woman and could now refer to her as such.

The study of the **'**Handling the drawer knob' action (Fig. 5) is a challenge. By being structured as a very sensory dominated activity, the object and the subject executing the action are mutually transformed. This transformation mainly occurs inside the multimodal interaction filmed, and also through the inscription of the action as laying outside of the theoretical and actual meaning potential of the means used (Van Leeuwen, 1991). A notably non-identifiable

action is performed by the protagonist highlighting a disabling relationship with the object that she engages. As in the case of the book, there is a disabling discrepancy between the cultural affordances of the object and the way that is handled by the protagonist. Pathological discourses become highly relevant due to their articulation of the autistic person's tendency to prioritise the sensory dominated aspects of experience (Barnes, 2016). Again, the fabrication of the drawer as a cultural object reveals a meaning orientation that assembles the woman's body and the sensory apparatus, in a way that spotlights her disabled self.

The action, as figured is built through a multimodal framework that heavily resides into several different modes. Music, sound, the image through the visual template, the camera frame, the body and also the non-human environment create a multimodal semiotic landscape which offers opportunities for constructing meaning and identity. By attending to the dynamic flow of the visual, one notices the repetitive nature of the hand movement, a genre of embodied activity that has been traditionally associated with the disorder of autism. The extremely close caption of the camera seems representative of a dysfunctional visual perception, an area of knowledge that is populated by medical and psychological discourses (Van Leeuwen, 1985). Along with the trembling quality of the camera that is manipulated by the actor an identification with the visual perspective of the woman is built. The caption then could imply a different way of perceiving the social environment.

There is an overall dramatic, agonising quality surrounding the action build through multimodal means. Both the repetitiveness of the motion, the lack of purpose and directionality of the movement, the metallic style of the voice with

the intensive musical dynamics and also the trembling effect of the picture create a sense of loss of orientation for the viewer. This style seems to be repeated in several actions along the non-verbal part of the video an effect that is intensified by the style of montage, which is also irregular, non-predictable and abruptly sequenced. As a result, all of the different actions are sequenced in a somehow unpredictable logic. From a cinematic rationale, this seems to work against coherency and structure. This seems to correspond to Deligny's idea of the 'camering' which defined a state of autistic consciousness that does not rely on the cinematographic plot (Milton, 2016).

The agonising style is amplified by the semiotic choices which entail a close visual framing of body parts, and the resulting exclusion of others such as the face, or the lower limbs. By providing a fragmented picture of herself, the viewer is deprived of embodied referents that could help him/her place the action in different interpretive frameworks. For example, it is suggested in developmental psychology literature that the area of the face is one of the essential body parts for regulating interpersonal communication (Meltzoff, 2002). Also, developmental research has emphatically stated that people with autism fail to orient to the area of the eyes for understanding others and this is unhelpful for developing satisfactory social adaptations (Jemel et al., 2016). By showing an unknown type of action, the author is bringing attention to a notably autistic perceptual 'reality' offering a window a) into the actor's autistic view of the physical world while b) at the same time asking the viewer to empathise with this insider's view.

Even though the central higher-level action as analysed above reveals an identifiable activist identity element and also an autistic identity proper

organised by the big Discourses (Gee, 2018) brought by the social model of disability, the overall constitution of the semiotic landscape could further imply other possible latent identities. By paying attention to other modes that are placed lower on the attention/awareness continuum and also through frozen actions that exist inside the bigger picture, we can acquire a broader view of the identity pallet included in this site of engagement.

As a cultural object, the drawer might include several historical perspectives stemming from architecture, interior-material design and also the broader consumer ideologies. Apart from their functionality, they articulate how people actively or passively, collectively or individually rely on furniture in order to sustain housing organisation, achieve social status through designer's furniture or also communicate a lifestyle to others through their domestic placements. The functional and consumer's perspectives are denounced and silenced in Fig.5. On the contrary, the style of the furniture, as in being old and utterly messy portrays a kind of 'bohemian' identity. This kind of identity element, positions the protagonist in the orbit of popular and mass culture, aligning her with other bohemian figures and artists pictured in books, magazines and social media. The actor then could be seen as artfully trying to craft disability at the merits of a bohemian lifestyle, which as Wilson (1999) states has been associated with a kind of cultural protest against the mainstream social elites.

Fig. 6 'Handling the necklace'

Dynamic Multimodal transcription

Plate 6a 0.42sec   Plate 6b   0.51sec   Plate 6c 0.55sec

Hee^^^^^^^^e^^^^^^^^   (..)   e^^^^^^^^^e^^^^^^^^^^^^^^^^^^e^^^^^   (..)   e^^^^^^^^^^^^^

Dynamic Narrative Transcritpion.

Again the shift from one image to the other is quick and sudden. We now see a different topology of the room most likely the left side, next to the wide window. Starting from the background material and from top to bottom, we can first see a large poster hanging on the wall. Towards the end of this vignette, the light changes and the poster can be seen a little bit clearer. First of all, it is clear that the poster is placed on the wall with duck tape and it is perfectly aligned horizontally. The content of the poster is a rural site with some trees. It is made of dark green colours but is very difficult for someone to precisely tell what the exact content of this picture is. On the left side of the visual scene there is wooden furniture that looks like a closet that is connected into a desk like construction. The desk that is located under the poster contains several stuff on it. Again it is not clear what these objects are but some of

them look like fabrics and cloths. Some are grey, others are black. One of those fabrics

is placed in such a way that it looks like a grey cat on top of things. It is, however clear

that this is not a cat. In front of this structure, there is a chair facing against the wall

withholding a large grey carpet. The inside surface of the carpet is white and empty.

Under the carpet, other objects feature with a small beige box being the only one that

can clearly be perceived. In terms of the interaction shown, the woman now utilizes

both hands to engage with a necklace playfully. The protagonist holds the necklace with

the left hand. The camera frame captures only a tiny part of the left forearm. The other

hand hits the hanging object rhythmically, making it look like a pendulum. The action

makes the necklace move in all directions either in a linear, a circular or an irregular

orbit. The right-hand does not entirely disappear from the visual frame, but since the

movement is quick and unpredictable, sometimes it is appears blurred. The camera is

quite still this time, and it is vertically positioned facing towards the poster. There is

light coming from the right, and this indicates that the shot must have been taken in

the daytime as in the previous parts. During the end of this passage on the 0.56sec, we

observe that the person intentionally stops the action while making a right turn,

perhaps in order to switch off the camera. While the action stops leading to the next

caption, it is interesting that the vocalisation does not follow this closure, but on the

contrary, it escalates making a glissando towards the end. Interestingly no sound is

recorded by the camera from striking the object. The caption ends with the person

disappearing from the frame as if going to stop the camera from recording.

Similar to previous vignettes, this one is also introduced through a "visual latching"

technique[14], a kind of breathless, uninterrupted visual editing of the actor's embodied

activity. The device of latching in discourse studies has been mostly associated with the

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[14] I use the '=' sign to indicate the move one visual image to another in a quick mode.

speaker's disavowal of hesitation and indecisiveness within a given conversation (Hepburn and Bolden, 2013). Latching here also seems to scaffold the stylistic choices informing the non-verbal part of the film in order to stand as an insider view of autistic experience. The quick and disconnected organisation of the film's captions is a cinematic analogy of the person's everyday phenomenological social/visual attention as this occurs inside interactional contexts.

By relying on aesthetic principles that overtly pronounce a dynamic of sensory overload, the filmmaker constructs a representation of the social perceptual world on the grounds of neuro-psychological discourses that crucially domesticate neurodiversity language. Neurodiversity discourse claims that due to the diverse wiring of the autistic brain, the subject fails to respond to the course of everyday sensory experiences adequately. In this way, a positive explanation is built, overpowering the discourses of disease. This explanation mainly connects the brain's underline architecture on the one hand and the nature of the person's overt behaviour on the other, in order to discount for the impaired and dysfunctional character of autistic actions. By placing autism inside the realm of the body-brain continuum, automatically denounces other harmful explanations of the condition that rely on environmental causal explanations.

The person in Fig. 6 provides an image of a dynamic action that might initially count as meaningless for the neurotypical viewer. Despite its apparent simplicity the complex configuration of the multiple semiotic modes, actualise a disability scenario which is crafted on the grounds of a gendered saturated object. Theorised as a matter of gender 'blindness', the higher-level action could be seen as staging a profoundly disabling location for the protagonist based on metaphors of blindness and current theories of autism articulated in the extreme male hypothesis (Baron-Cohen, 2002, 2003). This contingent person-object scenario is particularly telling for the way the local identity is built, mostly as an 'invisible'

affordance of the material object. A kind of 'nongendered' identity is subsequently performed, which could be seen as rooted inside this exponential neologism currently in use, and also deriving from gender talk within the autistic community (Jack, 2014).

Plate 6a introduces the beginning of the necklace action. Through a series of lower-level actions that are oriented towards the necklace, an oscillating irregular movement is produced. The actor sometimes engages the action playfully while at others, the attacking character of the movement implies a more aggressive attitude. She performs the strike and retreat movement more than twenty times within 15 seconds. At the end (Plate 6c) of the caption, the intentional character of the action is revealed since the actor purposefully takes a right turn against the camera as if intending to stop filming.

Within this action, the majority of the semiotic choices are a repetition of previous ones. The multiple modes are overlaid in an orchestrated manner synthesising the higher-level action of handling the necklace. There is a layered production of multiple identities starting from that of the 'filmer', which is rather continuous during this video. The identity of the 'insider' is also built by a chain of lower-level actions such as those included in the first-person style of camera shots. The identity of 'solitude' is implied here through the mode of proxemics and body posture. This is apparent in most shots where the person is shown in isolation from the external environment and also from any interpersonal human to human interaction. The background materials included in the video, are composed by the small cupboard on the left of the image, the various objects that are 'thrown' in a messy way upon the chair and the hanging poster on the wall that imply an identity of independent living. This identity is relative to the bohemian identity also pronounced in the previous excerpts which as I commented was crafted as the preferred lifestyle of the actor.

A gendered identity is also performed through the action in Fig. 6. In order to show the way it is produced I will rely on yet another idea illuminating discourse analysis that is the idea of

synchronisation and layered simultaneity, which is brought by Blomaert (2005). Synchronisation and simultaneity take discourse to be artificially and harmfully reduced in a unitary, single laden meaning, where there is such a denial of its complexity its place in history that a rather flat and artificial account is produced. Al Zidjaly (2005, 2007) operationalised this idea by accommodating it inside disability studies. She pointed out that attending to synchronisation and simultaneity can be revealing of silenced and even concealed 'discourses, voices and agendas' (p. 200). By synchronising all the semiotic aggregates included in this analytic vignette within the dominating discourse of activism, the voice of gender and its corresponding identities are overshadowed.

The actor produces a kind of non-gendered identity. This type of identity is recently phrased in the memoirs of various autism advocates. According to this logic, it is sometimes difficult for the person with autism to be able to position the self as falling into a hetero-normative gender. However, as many of the activists claim, it is not that they can place themselves in any of those gender-related categories that overtly discount the binary between male and female. A kind of an a-sexual, non-gendered identity then is pronounced as an escape from gender indexicality, and some even try to advocate for a gender-free life. For example, the activist blogger Forest Vivian, poignantly states that: 'I'm upset because I feel like there's no word to describe my gender expression and the gender expression I'm attracted to. It's probably silly to be upset about not having a word for something, but because I don't feel represented in either the straight or queer communities, I do have a desire to articulate what it is that I am' (as cited In Jack, 2014; p. 186) As such while the person of the video shows the manipulation of a gendered object, she carefully advocates for such a gender-free identity.

10.4 Nexus of emergence. 'Flat', Indigenous and Protesting identities

The last section of this study offers a new arrangement of the interactional activity of the actor. Engineered through a multiplicity of modes, and also by foregrounding language against other mediums the protagonist launches yet another social action, which could be recognised as 'making a cinematic manifesto'. Language, as in it's written and spoken forms appear high on the foreground-background continuum while it complements with other semiotic means that on the whole compose the complex modal configuration.

The analysis takes place on two levels. On the first level, Norris's (2019) methodological toolkit, is utilised to locate the identity elements produced. Three essential facets will be attended. The first concerns the analysis of transitivity or else the analysis of how the action of the protagonist is linguistically represented and thus explained in order to account for a kind of non-mentalized two-dimensional identity (Machin & Mayr, 2012). The second relates to how language is treated in the text as a concrete object that saturates the life of the participant, providing an 'indigenous' identity for her. The final facet will deal with how social others are strategically marginalised out of the visual dimension of the film, localised inside the modes of written and spoken language. By this arrangement, social others are mainly pictured as 'rivals' that need to be kept outside the visual field. Delimiting social other's solely within the actual text is quite telling for the kind of identity that the author tries to fabricate. By treating other's as being malign and distrustful, the author can then legitimise her propensity and preference towards the non-social world. A notably protesting identity is build-out of this rhetorical organisation.

The overall structuring of the video is telling for the social world constructed by the protagonist. By placing the non-verbal part at the beginning of the film, the author tries to foreground the non-verbal actions as being more significant than their subsequent translation. This kind of structure addresses the third part of the film as a subordinate clause

and thus backgrounded. It is treated, as Richardson (2007) argues as context to the primacy of the first clause, providing the additional footing for the action that takes place in the subordinate part. The filmer seems to state that: 'the real action is on the second part, and this is my language. Providing 'A translation' is for you to understand 'my language'. Therefore, 'A translation' is only necessary for those in the audience that do not speak the language that the protagonist speaks. An initial split is introduced in the social world that the protagonist occupies and this is perhaps an indication of what will follow inside the rest of the film.

The notion of translation is also crucial for the kind of 'truth' that the actor of this video wants to put forward. As Rose (1999) notes, truth is a complicated issue since it employs a discussion about the regimen of 'reality' which always entails a battle of persuasion and subjugation. Truth is closely allied with the act of translation that as Callon and Latour (2014) note, 'is a process of networking, an alignment of different agents over a kind of knowledge that makes their interests come together' (p. 281). In other words, truth and translation are deemed to create a community of meaning and further a community of practice organised over a complex nexus of activities that incorporates researches, acts of persuasion, mutual bargains and others. Power is so vibrant inside the act of translation that as in the case of the video, many of the actions and 'truths' pictured are normalised through generating multimodal knowledge but also through masking their interests.

10.4.1   'I am just interacting with the water as the water interacts with me'. The 'language' of actions and flattened identities

In the mediated actions that follow, the protagonist puts forward a conceptualisation of identity, which is non-mental, two-dimensional and on the whole flattened. As shown by the first image, plate 1 (p. 210), the protagonist initiates the higher-level action of articulating a translation of her actions. The action is constructed through high density that is achieved by

high modal complexity. One can notice again the grammar of the shot, which is composed of extreme close-ups of the white sink and the running water tap allowing only for a partial view of the first. The overpowering directionality of the camera, which is signified through its almost vertical angle, places the action high on the attention of the actor. The actor's hand is placed under the running water and engages in small consecutive finger movements that resist the flowing of the water. The action is physically dominated since it does not include any other embodied cues that could help the viewer understand the action from another perspective. There is a natural sound coming from the way the water flows from the tap, into the hand and the sink. The saturated colours of the display along with the low light of the image, portray the amateur genre of the film. Yellow subtitles in a clear small font are placed on the bottom of the picture. The colour and the size of the fonts, signify a kind of ambiguity. On the one hand, the protagonist highlights the written message, but on the other, its relative smallness communicates a kind of insignificance related to the visual field.

The synthesised voice that the protagonist selected to read the language statement lacks colour and intonation, providing a rather mechanical non-human pronunciation. The voice chosen is female, and this could be indicating a gender identity element. In comparison with our previous discussion on gendered practices, this gives a clear indication of such a practice but creates a discontinuity and tension if contrasted with the action of handling the necklace when the protagonist disclaimed a female identity. The modes of written and spoken language are both placed high on the attention/awareness continuum of the actor. The higher-level action of translating the physical activity would have been entirely different if this mode was missing. The way it is incorporated inside the inter-modal landscape places the protagonist in an orbit of psychologically minded identity that can provide explanations about behaviour, showing reflexive functioning. This sets up a contrast that works to undermine the subject as articulated in modernity through the discipline of psychology, that is the unitary, non-rationalised subject with a hidden interior life, which presupposes the

existence of an internal mind that helps the person navigate the external reality. The unquestioned, self-enclosed mind is discounted here, and this is done by the means described above but also by the way actions are treated linguistically within the following text. A seemingly flat social world is constructed through the interplay of different modes.

1 Plate 1 3.14sec

2. The previous part of this video

3. was in my native language.

4. Many people have assumed that

5. when I talk about this being my language

6. that means that each part of this video

7. must have a particular symbolic message within it

8. designed for the human mind to interpret.

9. But my language is not about

10. designing words or even visual symbols

11. for people to interpret.

12. It is about being in a constant conversation

13. with every aspect of my environment.

14. Reacting physically to all parts of my surroundings.

15. In this part of the video

16. the water doesn't symbolize anything.

17. I am just interacting with the water

18. as the water interacts with me.

Inside the text, there are two categories of social actors with apparently opposing motivations. The first category is pronounced with a slippery quantifier as in 'many people' (line 4), allowing the author to suppress their precise origins. While they can be quantified as a large group of people, their identities are masked through collectivisation and aggregation, and this is perhaps done as a way to devalue their ideas and their opinions while developing a detailed argument (Machin & Mayr, 2012). Instead, if the author has chosen to present them as a nominal category such as the 'psychiatrists' or the 'psychologists', then it would have probably been more difficult to counter their judgments, because of the relative power that they seem to have in regulating and identifying the autistic population. By including the meta-prepositional verb 'assumed' (line 4), the author makes another negative evaluation of those participants, which could then be seen as a community of people with subjective and questionable beliefs.

The rhetorical agenda of the author as revealed through the above transcript is to first discredit the 'voices' of the other social actors while devising a personalised language for her everyday accountability (Wetherell, 2005). The language of others is one that dictates, a universal, all-encompassing functionality, that works through 'particular symbolic messages'

(line 7) which are 'designed for the human mind to interpret' (line 8). While this view of language emphasises its representational dimensions, it is not the one that the actor wishes to put forward because this definition creates a symbolically-laden language system. On the contrary, the actor's language is constructed as a new kind of language that only attends to the physical happenings of the world without having to go beyond them.

The lexical choices made by the author include words like 'symbolic message', 'human mind', 'conversation', 'interacting', 'purposeless' which particularly connote a vibrant psychological ecosystem. By the use of such discourse, the protagonist exhibits knowledge of the psy-complex on the one hand but tries to reject it on the other. The use of contrast, in this case, is made to secure the actor's preferred identity. At the end of this argument, an extreme case formulation is also used, portraying the limits of her actions. This is entextualised by the clause 'just interacting with the water' (line 17). The author strategically constructs a social environment that can be explored and thus lived through intentional actions, but this is where experience centres. There is no meaning beyond this physical point, no symbols and of course, no cultural field where objects and people co-construct their meaning.

53. Plate 7. 5.14sec =/

54. I smell things (..)

55. Plate 8. 5.20sec =/

56. I listen to things. (..)

57. Plate 9. 5.28sec =/

58. I feel things.

59. Plate 9. 5.38sec =/

60. I taste things. (..)

61. Plate 10. 4.48sec =/

I look at things.

62. I look at things. (..)

A further set of visual captions is used to sustain this view of the social world. In particular, the plates 7, 8, 9 and 10 as are included in the transcription, are mediated through synchronisation of the visual image with talk and writing, providing an index of behavioural abilities of the person. The abilities shown, are punctuated with talk in an 'I can do this, and I can do that' fashion overtly announcing a potent identity. The intermediate pauses between the successive shots seem to animate confidence around the content, securing its strength and credibility. As such, in the first plate (plate 7) the actor shows the behavioural action of smelling her hand, then in plate 9 she enacts taste through the object of pen and then she performs a sight by turning her head side-ways and gazing in a very un-directed style. Through these enactments, the author of the video strategically pictures herself as a person that can smell, listen, feel, taste, and look. Being able to exemplify these sensory-motor actions, she provides herself with access to the physical and phenomenological universe.

By articulating these actions though, as seemingly behavioural processes (as in I look) rather than mental one's (as in I see), the protagonist's ability to perform a proper psychological identity is compromised. There are two different types of identities in this respect. A) The person assumes an ontological position which is constructed as a non-mental identity as in the examples shown above. B) On the contrary, when the actor addresses other's in her talk,

228

she switches on a mentalistic discourse. This is indeed the case in the argument in lines 96-100.

96. In the end I want you to know

97. that this has not been intended

98. as a voyeuristic freak show

99. where you get to look at the bizarre workings

100. of the autistic mind.

Even though a range of abilities has been multimodaly semiotized as part of the translation action, these conceal current psychological identities. At the core of these identities lays the ability to create a meta-representation reasoning of the physical world, going beyond the teleological level of the actions. For, it is not enough to be able to plan and execute a physical action, one also needs to be able to attend to the mental underpinnings of his/her actions, which in the language of modern psychology is described as an act of reflective functioning. In the case of the action studied, identities can no longer be viewed as involving a three-dimensional cartography. Far from being deficient, the flattened identity defended can then be seen as a part of a legitimate culturally bounded group, that is characterised by a cohesive set of objective characteristics such as those presented in the above actions (Blot, 2003).

10.4.2 'In my native language'. Indigenous people against foreign invaders

In the last part of this study, an indigenous identity is fabricated for the protagonist. The filmer in this part uses the various mediums in order to device a minority social group. To do this, the activist produces a dualist representation of language. Language in both senses secures membership into a unique social group formed by those that speak the same kind of

language (Gumprez, 1992). Language is taken to induce solidarity between people who are united by the same vocabulary, producing indigenous identities. The argument raises a protesting voice by sounding as a practice of emancipation from the oppressive powers of others. In the end, the wish for freedom and a way of living, powered by desire and self-determination is voiced inside a bio-political field that tries to administer the lives of people, by framing their moral trajectories (Nadesan, 2010).

The multimodal analysis synthesised here will be deployed on two main levels. On the first level, I will attend to how social others are demised as anonymised aggregates of rivals. On the second level, I will note that in order to craft her indigenous identity, the author espouses a notion of language that enfolds an either-or logic. In this sense, the boundaries between 'your language' and 'my language' are more or less impenetrable and dense. The organisation of the linguistic arguments along with the images function as a kind of mapping of the territorial distance between the social players. This is particularly stated in the closing statement of the language narrative where the actor argues that:

108. And in a world in which those determine

109. whether you have any rights

110. there people being tortured, people dying

111. because they are considered non-persons

112. because their kind of thought

113. is so unusual as to not be considered

114. thought at all.

115. Only when the many shapes of personhood

116. are recognized will justice and human rights be possible.

By orienting to a discourse of cruelty and human rights, the protagonist constructs a social 'reality' that is marked by the imagery of violence, invasion and genocide. Within this world, social other's are treated as cruel invaders, whereas people belonging to the social group of the participant are becoming victimised, devoid of their ability to acquire a sense of personality.

The presentation of other's within the text is particularly telling not only for their state of being but also for the way the author is molded as a person. As Machin and Mayr, (2012) argue, the articulation of social agents inside accounts, entails the attitude of making choices on the semiotic and on the linguistic level having consequences for the way they are built. Most importantly, the way a person talks about others could be interpreted as the framing of his/her subjectivity (Ruffolo, 2016).

Butler (2005) is particularly telling when discussing this topic resorting to the philosophy of Levinas and Bakhtin. She claims that there exists a dialogical inter-dependency between the way the 'other' is addressed in talk and the corresponding formulation of the personal field. Her view is that 'I speak as an "I," but do not make the mistake thinking that I know precisely all that I am doing when I speak in that way. I find that my very formation implicates the other in me, that my own foreignness to myself is, paradoxically, the source of my ethical connection with others' (p. 84). Butler could enlighten our analysis offering a bi-personal articulation of talk as it occurs through the use of the opaque 'I' personal pronoun. The author of the video uses the discourse of the other to produce a subjugated and also defended identity (Howard, 1998) that is crafted by the discourse of the other. As such, she constructs herself, as being under the siege and shadow of the other (Benjamin, 2013).

The language and the cinematographic details of the video frame social others in two ways. The first one takes place through an overexicalisation (Halliday, 1978) of social actors as being kinds of people. Others are talked as being judgmental as in "people claim, 'that I am not opening up to true interaction" (line 30-31) and in "people doubt that I am a thinking being" (line 69). They are also credited as being unreliable as in 'many people have assumed that when I talk about this being my language' (line 4-5). They are represented as being hostile and critical as in the clause "they judge my existence, my awareness and personhood" (line 32). Through mental health discourse finally, others are rendered paranoid, distrustful and mocking as in line 75-77 "I would like to honestly know how many people if you meet me on the street would believe I wrote this.'

By providing a gross dichotomy of the social reality, this discourse provides a simplification of the social world that Van Dijk (1993) called 'Ideology Squaring'. People often resort in this kind of oppositional referentiality as a way to simplify meaning. The author provides such squaring, not only through the mode of language but also through the cinematic realism (Stam, 1992) of the visual frames. The primary means of this framing could be located in the way others are omitted from the whole topography of the text. What is left is an indigenous world, mastered by the authors' semiotic units that are becoming idiomatic, monological announcing that 'this is my world'.

The author's discursive pursuit fabricates her indigenous social group as grounded in what Stommel (2009) defined as "one of us". It is achieved by placing others in the opposite moral order, which then demarcates the author's society as an identifiable group of people who are deemed in a subordinate let alone defended position. It is also achieved by the incorporation of an abundant filmic realism that floods the iconographic landscape, trying to denote a strong sense of authenticity for the actions recorded.

The author resorts in an oppositional conceptualisation of 'language' to deepen the binary between herself and other social actors. This type of strategy penetrates the whole video. The introductory title works as a nodal point where other floating signifiers could secure their meaning. The syntagmatic organisation of the film not only implies that this language is native to the actor but is also a proper language, which she needs to translate to her audience. As a native person, then the author implements the translation to construct her indigenous identity further. This action comes as the capstone of this identity. The actor not only defines this 'native language' but she carefully gleans between this and other types of language.

Language as longing and ownership is a central tenet within the discourse of the actor. Endorsing from a seemingly deterministic view of language, the author begins her statement emphasising that 'The previous part of the video was in my native language' (line 1). Through the grammatical organisation of this sentence, she strives to define language as a physical thing, a material object, something that can belong to somebody. The possessive 'my' is attached to the object of 'language', which is designed to fit the actor's identity. What is striking in this sentence is the fact that language is given the qualifier 'native', which shifts the meaning of language across the geographical dimension. This means that the person that has acquired this type of language is now placed along the dimensions of a national identity that resembles the identities of American, Spanish, Greek etc. By putting herself along this axis, the person can form spatial arrangements with other people that are located on the same language geography and more significantly to be able to differentiate from those that they do not.

Language becomes a matter of social dispute and discrimination. Social dispute is at the centre of current debates inside autism politics. With the community of autistics becoming more and more inaugurated with this field, the polemic climate has escalated, with some

activists now demanding active participation in decision making. Inside the text, this is voiced mainly through the contrasting representation of language which is discussed by the possessives 'my' against 'yours'. In this frame, the author associates her language as a positive attribute as in the argument:

9.   But my language is not about

10. designing words or even visual symbols

11. for people to interpret.

12. It is about being in a constant conversation

13. with every aspect of my environment.

On the contrary, when the author refers to the language of the rival social actors, she negatively molds this language. Predominantly the negative valuation of this language derives from a failure to talk in the non-native language, which is then taken as a sign of 'rivalry'. This is evident when the author writes:

40. However the thinking of people like me

41.   is only taken seriously

42.   if we learn your language,

43. no matter how we previously thought or interacted.

44. Plate 4, 4.59sec

The author does not rely only upon the text in order to frame her argument. While she talks about the conditionality between a valued relationship with others and learning their language, she chooses to foreground this with an image that denotes a meaningful relationship. As such the lying dog on the background of the image, along with the protagonist gazing outside the window visually contextualises what is stated on the linguistic level, providing a proofing of the interpersonal identity of the actor.

The author suppresses her autistic identity while attempting to potentiate the indigenous identity. This is done through the relative absence of the word autism in any of its forms and also the lack of any recording footage that would imply autistic features for the protagonist. I hypothesise that if the person has placed the same actions in another interactional template, it would be relatively easy to semiotise it as an autistic way of being. However, in this film, the lack of any human to human interaction does not leave any traces of social impairment. The fact that the actor engages in a participatory activity such as the sharing of a video renders her apparently social and overly capable of sustaining a valued life. Overall the grotesque film representation embraced here, unfolds as an outcome of the discourse of disability which crystallises upon the parlance 'I am a proud autistic' (Grue, 2011).

10.5 Summary of study two

In the second analytic chapter I presented the results of a hybrid multimodal discourse analytic framework. The arrangement of the analytic findings through the idea of three distinct nexuses allowed for a layered presentation of the concurrent identities of the activist while paying attention to a wide array of available social materials. Further, the analysis has been sensitive to issues of identity construction and meaning making through the use of different semiotic tools and alternative communicative modalities. The findings pointed to an intriguing palette of identities that is constituted through a number of socially recognizable discursive resources. Overall, it has been shown that the activist not only tried to unfold a positive identity for herself, but she did that under the siege of the clinical viewpoint. This notable dilemmatic and oppositional framework sharpened through the activist's repeated attempts to disavow the unwanted characteristics of her identity. It also became increasingly voiced in her effort to pronounce her preferred identity which was then placed against social others.

CHAPTER 11

Discussion

11.1 Introduction to the main findings: repertoires and nexuses

The main aim of both studies has been to explore the discursive construction of autism by psychotherapists and the autism activist. A critical examination of the literature showed that autism had been conflated with the language of disorder (Foucault, 1997, 2000; Nadesan, 2008, Rose 2007). The discursive analysis of the therapist's talk has offered the general template for this phenomenon.

Psychoanalytic talk developed as a discursive agenda, which tried to conceal the presence and deployment of power. Its progression began by seemingly denigrating the diagnostic imperialism about autism (as in the first repertoire). It then proceeded by substituting it with an alternative but equally disordered range of language repertoires. Inequity seemed inevitable for the autistic subject, which was segregated by damaging discourses. There seemed to be no escape from this diminishing position unless one decided to surrender to the doctrine of the analyst. This knowledge was disguised under a state of curing and alleviating the malleable attributes of autism (McGuire, 2016).

The study of the discourse of the activist came as a later development of this project. It derived from the need to provide a dialogical plateau for autism. It sprung out of the broader consideration of the literature, which pointed to the need to re-think autism (Waterhouse, 2013). The second study explicated the ideological battle for truth between the establishment of psychoanalysis and that of the activist's. It was conducted and became characterised as the remaking of this "battle" for representation, discursive colonisation

through the desire of the activist to obtain recognition, authority and self-validation (Thomas & Boellstorff, 2017).

Goodley (2011) specified similar concerns about autism, by the use of questions such as: 'Why is the talk of disability so pathological? What possibilities are there for disrupting these ideas and offering more enabling alternatives?' (p. 103). In a more unsettling muse, Yergeau (2018) seemed to reframe this question by asking 'Who defines better? To whom do we listen, the autistic or the non-autistic?' (p. 4).

My take upon this question became a bit refined asking: 'Why do the languages of the clinic and the activist became so dependent but also so impenetrable to each other? Who benefits from this arrangement of discourse, and why do the two worlds appear so irreconcilable?' Is there a need to bridge these two worlds, or is it that one should embrace the divide without a need to mitigate the differences? What is it that the therapists' desire and correspondingly what is it that the activist desires from the social others? How do they craft their concerns within the discourse and how does discourse operate in concealing the rhetorical ambitions of the other?

The above questions indicate the extensive dichotomies that mark autism. Hacking (2009c), in his 'Humans, aliens and autism" paper, underlined this contrasting dynamic with the idea that opposites or 'contraries', serve as illuminating factors that provide a counter-position for those getting defined. Hacking seemed to imply that in order to understand what autism is, one needs to turn to what it is not. He was interested in what autism could reveal about the average human persona.

Understanding the way 'contraries' function is crucial to exit from this unproductive dichotomy. Dickerson (2000) resembled this argument in his examination of the functional role of contrasts during verbal interactions. He proposed that contraries are used by

speakers to secure the preferred identity elements. The therapists interviewed made use on the feature of contrast to produce autistic identities dominated by disorder and disability.

Contrasts also become valuable resources on the macro-level of the talk (Dickerson, 2000). The post-structuralist theorisation of contrasts echoes the political influence of contradictory formulations, as pronounced by Foucault (1982). Dichotomisations of this kind in Foucault's reasoning float as political strategies which take place in the context of the society. Through discipline and control, power and knowledge, they provide discursive spaces for individual becomings (Shotter, 1997).

The literature of disability relies on the use of such contrasts to explore the way people organise their individual lives. As a result, the disabled person is required to be at one position or the other intellectually. Goodley (2016) argued: 'Ability needs disability to be by its side in order to speak of what it is not' (p. 23). He continued by saying:

> 'Similarly when I think of autism, it is always haunted by the spectre of the human. Is autism antithetical to humanness? Is autism one expression of humanity? Does autism permit us to think again about the human? Or is autism a boundary category constructed by those who obsessively, rigidly and carefully guard the borders of what they consider to be human? (p. 133).

The findings of both studies have shown that the discursive location of clinicians and autistic advocates are structured in a conflictual, militaristic framework that conceals any possibility for crafting a new version of autism that would lie outside these dichotomisations. The logic of cultural violence and war seemed to repeat itself in the data similar to that advocated by McGuire (2016). The image of society that 'understands itself living with autism but that wishes to-and works to-live without it' (p. 453), became the backdrop to the findings.

Many contemporary disability scholars contended that disability arrived at a critical plateau, formed by these dichotomisations (Goodley & Runswick-Cole, 2012; Milton, 2018). In order to move forward, the new 'disablism' has to overcome its apparent rivalries and subsequently pronounce an alternative kind of thinking that anchors disability outside the stratification of these models. A break from the counterproductive logic of models and its corresponding binaries could steer us towards a new imaginative template with regards to disability and autism (Runswick-Cole, 2014).

The discussion develops upon the interlocking effects of the clinical and the advocacy template, contributing both to the ideas of autism advocacy and the psychoanalysis of autism. Its assumptions offer an opportunity to consider the way autism is negotiated both inside and outside the dominant psychologised discourses. With regards to psychoanalysis, the discussion provides the opportunity to explicate the limiting of the autistic subject in ways of being that are mainly in need of repair. These subject positions are entirely problem-dependent. The final section of this chapter tries to evade the dominant positions by eliciting a more democratic re-negotiation of autism, a leap forward.

11.2 Repertoires

In the first study, I have discursively analysed research data from my discussions with eight psychoanalysts using data from Free Associative Narrative Interviews (Hollway & Jefferson, 2000). The interview situation was approached as an unstructured process that did not rely on a preset of questions. During the actual interview situation, I became aware of the difficulty to resist the influence of some of the dominant ways of structuring the conversation about autism.

As part of the initial conceptualisation of this research, I relied on an eclectic discursive methodology in order to provide a rich understanding of autism as a situated and socially

constructed phenomenon. This structure echoed the work of Wetherell (2008), who advocated for a combination of the micro and macro-analytic choices in understanding the way discourse frames the identities of individuals (McAvoy, 2016).

The research questions were phrased in two main ways, one that oriented towards the macro-analytic sentiments and the other emphasising the local context of meaning negotiation (Avdi & Georgaca, 2018). Although this division of labour could sound slightly artificial, it was adopted as a way to enhance the clarity of analytic interpretations, while allowing the reader to evidence the suppositions about the continuity between the local and the broader interactional field (McAvoy, 2007; McMullen, 2018).

I saw that the participant's orientations inside the broader set of research data were one of eliciting an inconsistent discursive field. On the one hand, the data promoted a homogeneous discursive construction of autism as pathological, which on the other was contrasted by the dialogically opposite representation of autism as a variable and unknowable construct. This kind of understanding provided tentative answers on the first aggregate of questions that overtly tried to deconstruct the text while exposing its rhetorical structure.

A possible interpretation reached during analysis was that the participants drew on these rhetorical schemata to secure their views about autism. They pronounced accounts that could count as factual, without being countered as biased or even falsified. Billig et al. (1988) explored this contradictory accounting about issues of health and illness, by what he thought of as the 'attitudes of the healthy toward the ill' (p.94). He suggested that specific moral necessities are put forward for those belonging to the healthy population that the person living with the illness must necessarily accept in order not to put in the margins of society.

This sort of moral accounting seemed evident in the talk of the therapists, which mainly pointed to a psychologisation of the symptoms of the autistic person, ultimately providing a homogeneous rather ill-informed construction of ASD. Although homogeneity was carefully avoided in terms of talking about autism being a variable construct (repertoire 1), it was then discounted when the therapists reduced autism in a rather problem-saturated logic through the next three repertoires.

This could be most telling if understood in its micro and macro dimensions and also as part of the therapist's rhetorical discursive agenda. The question seems to move from the range of repertoires and into the idea of versions of self that seemed to be pronounced inside the research material. One of the most important conclusions is that homogeneity is crafted in order to conceal the painstaking dilemma's that inform everyday talk. This is pertinent in the area of health/illness where people are subjected to these highly instantiated and most of the times, ambiguous rhetorics (Billig, 1988). The discursive choices of the therapists point to the opposite direction, and this is particularly telling about the role of such discourses in the context of therapy.

A compelling set of questions derived from the opposite logic. What would the implications be for the person with autism should the therapist chose to suspend the highly pathological language as in talking about the abilities of the person rather than his/her impairments? Would it be possible for the therapists to etch another trajectory without troubling their role as experts of human nature, which provokes resistance to the autistic population? Would there even be a role for therapists, and what could this role be?

11.2.1 Autism as an "Unknowable" construct

Most of the therapists offered descriptions of autism, implying that one of the major concerns when working therapeutically with autism was the difficulty to provide the subject

with ontological clarity. This talk revealed a common concern about autism as an enigmatic category. As Murray (2008) opined, autism has regularly been portrayed as a kind of unsolved puzzle. In a similar vein, Roque (2010) and Waltz (2005) studied the way autism has been treated as a kind of mystery in Western society.

The first repertoire secured to the therapist's political agenda. By deconstructing the official diagnostic classification, the therapists tried to advance their privileged view about autistic subjectivity. The incorporation of this way of speaking at the beginning of conversations allowed them to position autism in their preferred discursive spaces. It would have been more difficult to voice their versions of autism without first discrediting the official diagnostic framework.

The psychotherapists' attack on the concept of diagnosis was also explored through its potential to produce an ambivalent subject position. While it could be taken as a democratic move on behalf of the therapist, the overall discourse dynamic, pointed to a less benign evaluation of autism. The only subject position created by the unknowable discourse offered a stigmatising space for the individual with autism. It also revealed the therapists' torment between trying to enact a more egalitarian role instead of an authoritarian one (Avdi, 2000b).

The first repertoire provided a different view of autism in the therapist's talk if compared to other studies. Lester (2011, Unpublished Theses), concluded that when parents and therapists of autistic children drew into such discourse, this seemed to provide children with a range of positive attributes. Contrary to Lester's findings, most of the therapists in the first study worked the variability of autism as a negative/perplexing factor. By associating variability with unknowability, they seemed to provide a rather precarious and delicate way of being for the autistic individual.

A political reading of this repertoire could make use of the work of Samuels (2015). His dispute theory describes the way different schools of psychoanalytic thinking negotiate their differences in order to achieve consensus and integrity. Samuel contents that: 'These diverse viewpoints have a great deal in common...differences of opinion *constitute* and define a field just as they divide it' (p. 265, italics in the original). The antithesis created in the first repertoire between psychoanalytic and psychiatric discourse occurred in order to conceal their similarities.

Autism as "unknowable" was built on the antithesis between the dominant psychoanalytic and psychiatric understandings. One of the major complications of being unknowable was that it legitimised "knowledge authorities" such as psychoanalysis, to provide expert knowledge applicable for treatment. It legitimised these authoritative voices, to alleviate the fear that is produced by the lack of positionality of the person. Storying the "unknowable" provided a sense of restoration of the lost personhood of the subject as Guilfoyle (2018) opined. The most important conclusion, therefore, related to the tendency of the talking to theorise the individual with autism in relatively 'unknowable' positions that waited for the therapist's specialised knowledge as part of the illumination process.

The 'powerless' subject position offered in this plot, sustained a barren view of autism. It subordinated the populations that feel into this social category. Being powerless and unknowable in a society of knowledge and power is about losing authorship of one's embodied subjectivity (Yergeau, 2018). As Yergeau figuratively stated, 'These shitty narratives persist, I argue, because their rhetorical power derives from the figure of the autistic as unknowable, as utterly abject and isolated and tragic, as a figure whose actions are construed less actions and more like neuronally willed middle fingers' (p. 3).

11.2.2 Autism as defence/safety

Although, the first repertoire depicted autism as an enigmatic form of life the second one envisioned autism in a different trajectory. It mainly stemmed from the therapist's view of autism as being disorderly social rather than a-social. By highlighting the interpersonal characteristics of autistic functioning, there was a pervasive representation of it as an adverse reaction to the external environment (Rhode, 2018). The coercion of autistic subjects into this delimiting discourse provided a powerless position for people with autism. As Guilfoyle (2014) attested, this could be understood as governing autistic lives through a particular set of knowledge.

Inviting autism into this discursive location provided two under-connected versions of autistic life. At first, the child was seen as performing autism as an interactional barrier. The focus was on the tendency of the autistic subject to engage in repetitive activities that were secondarily evaluated as ways of resisting and actively controlling the reciprocal communicative environment. Not only, autistic children were actively imposing interactional barriers, but they also enacted those barriers by trying to control the therapist's behaviours. Secondarily the child was seen utilising autism as a comfort zone. An intentional debilitation of the child's social potentialities followed the collapse of ideal forms of social attention (Waltz, 2005).

An important implication of this formulation is that it offered a paradoxical view of the interactional field between children and therapists. Some of the therapists placed significant emphasis on the idea of being manipulated through mechanical and patronising relational enactments. This type of victimisation was mainly moulded through the emphasis in repetitiveness and reluctance to change. The children's "allergy" to change was consequently marked as a negative attribute of autistic ontology and also as one that epitomised the defensive functioning. However, this formulation seemed to counter the

explanation given for the defensive activity of the children. In it, the victimisation was displaced towards the child where it has been conceived as acting through the threat of invasion by the therapist. Notions of attack and control seemed to be paramount.

The second form of accommodation of the defence/safety repertoire provided a much more passive assessment of dysfunctional sociality. Mentioned by a minority of therapists, it denoted a less active but equally detrimental way of being and relating. Autistic sociality in this second version implied a reduced agency for the subject. Autism was seen as offering a "dream-like", dormant position which acted as a barrier to the canonical view of the relational subject as this has been formed during the 20th century. Even though ideas of shelter and fortress were lexically suppressed in these accounts, they could still be seen as providing the historical soil for these discourses. These ideas have never stopped saturating the thinking about autism in psychoanalysis (Waltz, 2003). They thus tend to play a definite role in the organisation of the therapists' discourse.

11.2.3 Autism as malignant

The third repertoire deepened the sense of disorder and disorganisation of autistic life. It was crafted upon metaphors of urgency and life/death through a medicalised discourse. It was also grounded upon a view of the subject as being toxic for those around him/her. A notion of the person living near a "psychic coma" permeated the language of the therapists who were intervening under a sense of urgency. The child's frailty complemented the whole organisation of this repertoire, providing a sense of a person under dissolution. However, frailty was not associated with a "real" danger of loss of life, but on the contrary with the danger of succumbing to a sub-human position.

Malignancy became a succinct metaphor that operated on two levels within the discourse of the therapists. The first reflected a risk for the child's life. The second appeared as signalling

danger for the therapists. It worked autism as a toxic contaminant that spread across social life. Lexicalising malignancy as "cold, nasty or horrible" gauged negative attributes to the subject who both suffered but also caused suffering. Autism, a threat to the child and the social other, provided a figurative language inside the broader social world. Waltz (2008), referred to the discourse of monstrosity that saturated the literature of psychoanalysis. It defined the borders of humanity with that of animal life. Autism, of course, has deep and profound roots in the carnal ways of being (Siegal, 1999).

The repertoire of malignancy drew on discursive reservoirs that depicted autism as a medicalised phenomenon in need of a cure. Public imagination is flawed from stories that communicate the defeat of autism (Fitzpatrick, 2008). In these stories, normative humanity is endlessly oriented to provide relief from the burden of autism. Therapists are healers and expect people to get better in most cases. As Rocue (2010) supported, there are historical trajectories that build on this discursive arrangement. There is always a battle to be taken against the plague of autism. Psychoanalysis is not an exception to this ambition, that first appeared in the discourse of Bettelheim (1967) and is still prevalent to the language of contemporary analysts.

Dehumanising metaphors of autism such as those that synthesised the third repertoire are stigmatising for people with autism. They built on the grounds of cultural anxieties fueling a profound sense of aversion towards these populations. Behuniac (2011), in a constructionist template, argued that people who have dementia are represented as zombies both in popular media and in the clinical domain. In ways similar to autism, the colonisation of these conditions by pathology discourses invokes fear, prejudice and harmful understandings of people living with impairing conditions. It also assuages the therapist's guilt about not understanding or empathising with these clients.

In the case of autism, zombification is rather pertinent for the self and those around (Siegal, 1999). The child is discussed as half-living half-dead, split by the deadening effects of a terminal illness. As one therapist posited 'one part of him was interested in adventure and another one said you stay in this dead deadly place'. Autism then as a kind of metastatic cancer cell can compromise any reaming signs of health and humanity, turning the subject into a terminally diseased body.

11.2.4 Autism as disabled embodied materiality

The fourth repertoire galvanised the discussion of autism on the grounds of impaired embodied materiality. The emphasis was displaced on discrete scenarios of embodied disablement. While the body of the autistic subject was a locus of disconcerting corporeality, it also became an exemplification of deviant embodied sociality. Upon this body, most of the therapists were excreting their ideological imperialism, offering a notoriously broken bodily image. In this sense, their working of the autistic corporeality could be taken as Hughes and Patterson (2006) claim 'a politics of proprioception' (p. 115).

The relationship of disability and the body is in such terms a matter of articulating the deviant characteristics of the body as Thomson (1997) argues: 'A matter of cultural rules-about what bodies should be or do' (p. 6). Moreover, it is not a matter of what the body is doing in its intuitive practising, but on the contrary, a pre-fixed network of moral obligations that are in circulation in every society and its forms of cultural signification. In this sense, the role of power over the autistic body is a disciplinary one, which functions through a eugenic logic.

The power of discourse is both a power of identificatory practices, (Pfeiffer, 2006) a power of limitation and inscription of the late modern idealisation of the social-locomotive aspects of children's lives (Newnes, 2016). Indeed, we need not forget that autism classification is far

and foremost a languaging of the body's failure to exhibit certain types of stereotyped embodied sociability, paving the way to the language game of psy-complex[15] (Ingleby,1985; Rose, 1985).

There are conventional ways within every society, for implementing the normative body. These constitute ordinary scripts for organising chaotic sensational embodied happenings. The society provides the recognisable backdrop for understanding such performances under specific labels such as gender, religion, disability and others. When this process fails or deviates, as in the case of autism, development is seen as going awry, placing the individual in a rhetorical void. The gap is viable for rhetorical rehabilitation, provoking a "violent" superscription. As Yergeua (2018) claims, it is the implementation of such a rhetorical force that makes the autistic body disappear. In her articulation, 'Tie me to a gurney. The gurney is more material than I am' (p. 523).

Falzon (1993, 1998), invokes Foucault to describe a living body that precedes the force of the social. As Guilfoyle (2014) states:

> 'Power does not produce the living body, but orchestrates its pre-existing energies and movements to make it more useful to the particular society in which it finds itself. The living body comes first. Power then influences what shape it will assume, and invests it with particular subjectivities, identities, or senses of self. We are also interpellated in the process, and so we come to participate in the discursive shaping of our bodies and their conduct' (p. 112).

The weaving of the autistic body as talked by the therapists, pronounced two main varieties of disabled embodiment. A) The first type built on the fragmented embodiment to place the subject as a very precarious let alone undeveloped body. Universal theories of central

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[15] The prefix 'psy' most commonly denotes the group of sciences such as psychology, psychoanalysis, psychiatry etc.

coherence became dominant in the psychological narrativisation of autism (Frith, 1989b; Happe & Frith, 2006). Milton (2018) argued that Western society has been rooted in theories of coherence and body continuity. Sampson (2003) defined the Western body as one that is founded upon independence, uniformity and unity.

Theories of unintegration and "dismantling" are pertinent in the psychoanalytic theorisation of autism (Rhode, 2018). Infants are thought to start life with a rudimentary embodied ego, which gradually organises the sensory world through the mother's ministrations. They gradually become more capable of extracting familiar patterns of embodied experience that offer a continuity of being and a relief from the terror of bodily annihilation. Autism, in the therapists' talk, represented deviance of normative development, an inability to 'stay in one piece' as one therapist argued.

B) The second notion of embodiment emphasised the disciplinary role of the body. Depicted as a kind of reduced social embodiment and coordination, it seemed to rely on the sentiment of embodiment as bodily grounded intersubjectivity (Samaritter & Payne, 2003). The idea of deviant social referencing was quite pertinent here. The child was mainly described as failing to provide the expected social embodied behaviour. The autistic body was split between individualist notions of lived-body and more social ones.

11.3 Nexuses

11.3.1 Nexus of resistance and the unfolding identity

The nexus of resistance will be discussed under the plea of moving beyond the apparent binary within which autistic identities grow and populate the world. It will offer a re-imagination of autistic life in the post-activist, post-social-individual era (Oliver, 2013). What has replaced autism activism? Have people with autism been accorded full citizenship

rights? Is the dangerousness of difference presentation presenting a more substantial risk of social exclusion due to 'obvious otherness?'

Bio-ethnic theories of social grouping would predict that people breaking the norms of the group would be ostracised and possibly be rejected from the group. However, some modern evolutionary psychology accounts are now challenging this orthodoxy, indicating that heterogeneous social competence in a group can be creative, e.g. Stewart- Williams, (2018) and Rippon (2019). In the case of activism, this requires no less than having to re-invent autism through a new vocabulary, novel relational practices and new forms of being and relating. A re-thinking then in terms of participation of autism would inevitably involve all spheres of cultural life, securing multiple accountable new identities.

One of the first ideas expressed during the analysis was that the director of the video resisted the label of autism by doing actions that were disability-free. By trying to direct the viewer's attention in terms of his/her first impressions, the activist constructed a multimodal environment that attempted to overshadow her autistic identity while providing a positive identity. Brownlow (2010), has found that activism on the internet is associated with the individual's attitude to establish a more valued self. Bummiler (2008) emphasised the normalisation strategies that fertilised autism advocacy, which mainly stemmed from the civil rights movement in the United States.

The online environment is receiving great importance from autism activists. (Davidson & Orsini, 2013). The literature suggests that it is becoming an area where people with autism can craft their online communities. Singer (1999), contended that the internet offers communicative possibilities to the autistic person, similar to those offered by sign language for the community of the deaf people. In this template, Davidson and Orsini (2013) concluded that against fears of further social segregation and addictive behaviours, their study showed that the internet provided positive relational encounters for autistic people

reversing their sense of exclusion. Not only it broadened their communicative attitudes, but it also provided them with a sense of dignity and value.

In a similar vein, the activist in the YouTube video attempted to produce a range of positive identities through emphasising normative actions. By assimilating the identity of the NT language user, she tried to foreclose signs of pathologic identity. The individualist ontology assumed, 'voiced' cultural concerns about issues of language ownership evident in the title of the video 'In My Language'. Engineered mostly by the discourse of the free market economy and capitalist ideology, her identity was framed as a linguistic capital. It was pictured as a kind of trademark, an I-Language that co-existed with other languages in a global linguistic marketplace.

Resistance in the first nexus seemed to be progressing along two levels. On the first level, which followed the entitlement of the film, the actor attempted to re-invent materiality by pronouncing alternative affordances for everyday objects. Skibo's and Sciffer's (1992) tripartite functionality of material objects can illuminate the discussion here since according to Preston (2000) it could help decipher 'those performances which constitute a thing's function from those performances which are accidental or adventitious' (p. 24). The idiomatic punctuation of objects provided an expression of ideofunction (Shiffer, 1992) embodied in the higher-level actions called 'handling objects'.

 The ideofunctions exemplified, could serve as weakening the 'voices' that pathologise autistic actions by accentuating the sensory properties of objects. For example, the choice to represent these actions in the actor's private placement, instead of another environment made it difficult to discount them as 'disabling' or out of context. The author also disclaimed the disabling identity a) by showing how ideofunction can prevail against technofunction and b) by connoting the activity of the protagonist as an active choice driven by preference.

The dynamic captions were permeated by the idea of private disclosure as a new cultural arena framed by amateur and celebrity filming (Redmond & Holmes, 2007). This offered an opportunity to analyse the images using two main arguments. First, the act of disclosure mainly worked as a way to conflate an authentic identity, on the broader context of a do-it-yourself (DIY) citizenship (Bateman et al. 2018; Ratto et al., 2014). The authenticity of the self was crafted on the grounds of being able to evidence the person's workings inside her private life, experiencing autism from an emic rather than an etic perspective (Lester, 2011, Unpublished Theses). Second, she exemplified resistance against discourses that possessed a reduced agentic positionality by eliciting self-definitions. She thus intentionally magnified the voices that spoke through 'real' life events.

Endorsing from a position that pronounced a Cartesian ontology using an 'iTube, therefore, I am' parlance (Smoliak & Strong, 2018), the actor constructed an ordinary domestic life, by bringing attention to several aspects of her agentic 'true-self'. The idea of presenting herself as a monologue could be seen as a dangerous tumbling, in the sense that it is presenting a situation that wants to fight since it seemed to reproduce the most salient diagnostic markers of autism such as isolation and aloneness (see also on the 'nexus of disability). However, the overall autobiographical grammar of the film and the interactivity of the social media platform discounted such negative evaluations.

The non-verbal material elicited in the first nexus was carefully shaped for connoting things like true nature and native land. Its reliance on written and spoken discourse mostly showcased the ability of the activist to participate through cultural means inside what could be thought of as popular and mainstream culture. The author's activities could be interpreted as communicating 'weird' material (an Autistic inner world) in an accepted format (a social media post). What is then hinted from the juxtaposition of the contrasting frames included in the visual material (see Fig. 3) is the act of preference. It is the crafting of

the nonverbal sensory action as a choice, permeated by the actor's natural language. The onus is often on Autistic people to explain themselves and activism rails against this, saying that NT should put the effort to 'learn the language' instead.

11.3.2 Nexus of disability

As shown in the analysis chapter, the second nexus was comprised of several actions that reproduced the disabling imago of autism. The concept of disability was not, however, allocated to the individual. On the contrary, it was analysed as enacted through a series of disabling scenarios and actions were the protagonist failed to exhibit the culturally prescribed function of these objects.

The first of these actions was related to reading a book. The disablement of the activist identity related to the way print cultures strategises the human body on the ground of literacy skills (Love, 2008). Reading, indeed, is not a recent discovery. Originated in the first organised agricultural societies as a way to protect the landowners, and up to the current digital era, it radically altered the core of human social relations.

Wolf (2017) noted, 'we were never born to read' (p.3). Even so, reading and its connected activity writing have become one of the most taken for granted and ordinary abilities of modern society. Reading and writing represent a) the passing from an oral culture to a print one, b) a transition from literacy skills to print, c) and a shift from hand-writing to computer writing (Finkelstein & McCleery, 2012). Through the proliferation of the massive print culture accelerated by the typographical revolution, people were asked to depart from an orally mediated world in order to arrive at a different one that shifted the patterns of social interaction by driving people into a more individualist activity (Muller, 2002).

The impact of the printed word on many cultural forms has been massive, and it has decisively re-engineered the social life of modernity. The new cultural imperative voiced

through the hegemonisation of written language demanded that the distal senses and gross-motor bodies stayed in a dormant situation, allowing for other sensory channels to take over. By becoming a property of the vision and the auditory, reading regulated the locomotive mechanisms, the musculature of the eyes and ears in order to bring them on the two-dimensional space of objects like the printed page, the book, the vertical blackboard and finally the computer screen to name a few.

What happens then to bodies that cannot function according to this relatively contemporary visual logic, demanded by literacy practices? The answer to this question is that this is the moment that a split occurs in dis/ability practice. At this moment, the actor displays a sighted attitude towards the object (Fig. 1-2-3) that is not articulated from the perspective of normative functionality of the body, the senses and the objects. It is within this moment that a break in body/culture/object continuity happens. The activity of reading, collapses, leaving an empty semiotic space, with no name to attach into the displayed action. This 'no sensible words' state is often seen as central to psychosis.

The tripartite arch of the body, the senses and the material object, have failed to reciprocate each other demands. Instead, they have got caught in an action that deprives the person of the ability to become literate. This action then reveals how an everyday object such as the book, has excluded the person not because she belongs to a specific group of people called 'people with autism', but because it talks to her body and her senses in a precise manner. The book has become a vector of ability/disability, materialising the body across this dimension. In this respect, every single body that participates in the social world is always half-abled, half-disabled.

The action of 'handling the drawer', displayed the affinity between the ideofunction of the object and the production of the disabled identity. The different modes that participated in the construction of this frame created a multimodal landscape that reflected the perceptual

abnormalities of autism. The amateur and 'reality' structure of the visual landscape seemed to align with most of the auto-biographical discourses of people with autism, which rely on a confessional self-disclosed practice.

As part of the neurodiversity movement, many autism advocates, appear willing to self-disclose, in order to exemplify the way their lives significantly differ from the lives of most neurotypical people. With Sinclair's (1992) 'Don't mourn for us' article, this social movement went mainstream in the developing cultural field of autism. Motivated by self-advocates in diverse cultural fields, but also trying to 'voice' a language of their own they widely talk and write in an attempt to legitimise their lived-experience. Framing a political agenda across the parlance of 'Nothing about us, without us' (Charlton, 2000) self-advocates then fight against a world that continuously counters their collective ideological interests.

The action of 'handling the necklace', worked inside the video in a dual fashion that is: a) as been affected by disability but also b) as affecting the lives of people with disabilities (Gerschick, 2000). The first one draws on the idea of gender as being performatively assembled (Butler, 1990; Whetherell, 2008). The theory of performativity suggests that people become gendered through a process of subjectification based on their everyday material-political interactivity.

Gendered discussions about autism could be categorised as being two separate but interdependent camps. The first camp consists of neuroscientific evidence that treated gender as a kind of pre-given spectrum of heteronormative relationships. Baron-Cohen (2003), who is the major proponent of this camp, favours a gender-specific explanatory account of autism. Lai (2017) claims that it is legitimate to associate between male predominance in autistic people and their neuroscientific evidence that shows a higher propensity of the male brain towards systematisation. On the contrary, the female brain is hardwired mainly towards empathy, and this explains both the lower ratio and also the

lower incidence of autism in girls. This neuro-dialect has yield wider criticism by feminist disability activists, who proclaim a view of gender as build-out of social forces and that try to fight against gender-specific etiologic explanations of autism.

In contrast, the proponents of the second camp endorse from a constuctionist view of gender, providing a different rationale to what means to them to be a man or a woman. Jack (2014) offers an opportunity to examine the apparent modifications on autism gender from this philosophical framework. According to her, autism's gender practices are part and parcel with how autism has been defined and construed and also issues of politics. Jack (2014) divides into what could be considered a commonplace for gender and autism, which is a distribution of talk across the hegemonic dimension of male and female and the departure from it which corresponds to a less predetermined understanding of gender that overrides the apparent female/male dichotomy and opens up a space of diversity and situated construction.

This author found that people with autism as many others would have done so, engaged in self-labelling through a range of gender nominating words that deviated from the normative male/female continuum. Although there were instances where the traditional indexicals were taken unproblematically by people with autism, the author noted that in general people with autism engaged in a gender invention activity where the effort consisted in trying to appropriate their gender identities. In the author's own words 'gender characters then serve an inventive purpose for autistic individuals: as disidentification, of as a social code, as a performance of a role and as an idiosyncratic identity' (Jack 2014, p. 184).

The action of the 'handling the necklace', falls into the kind of phenomena that Jack (2014) categorised as gender inventing. The action of manipulating the necklace as nothing but a piece of sensory equipment is a radical negation of its gendered semiotic potential. As a matter of fact, within this particular action the protagonist seems to be reproducing a queer

discourse were she proclaims a body that displays a kind of detachment from the weaving power of the piece of jewellery (Russel, 2012).

Two things seem to be happening during this action. A) The first one entails a kind of 'blindness' towards the cultural significance of the object handled, an assumption that places the actor inside the orbit of disabling discourses. B) The second deals with the way this perceptual blindness, produces a gendered identity that actively departs from the dual topography of male Vs female pronouncing a hybrid identity.

In the first analytic layer a disabling scenario takes place. This is principally understood by the way social power is distributed on the non-social features of everyday actions (Schilmeir, 2010). This is a novel approach which attends to the way that everyday actions entail dis/abling conditions that the person re-enacts. For example the way the actor presents herself in front of the camera shows that artefacts like the necklace cannot be counted as signifiers of a female identity since there is an apparent perceptual void that the person exhibits. Not only then the person appears to weave a gender-inappropriate action towards this object but also highlights a disabling identity on the grounds of 'blindness'. The metaphor of blindness then becomes particularly telling for people with autism since it entails a rather uncanny identity for them. Failing to see the gendered object as such, entails a failure to respond to the ordinance of the sensory quality of an everyday object (Russell, 2010).

11.3.3 Nexus of emergence, 'flat' and indigenous identities

The third nexus appears telling about the state of power in the final part of the video. The documentary, case study layout adopted in the video was an attempt to empower the suppressed voices of autistic people, through translation and 'truth'. Similar to previous non-verbal material where an insider identity was made clear, in this part, the protagonist asks

that her 'voice' is heard. She particularly asks though structure, form and the overall layout, that the audience orients to the pronounced and thus favoured way of being in the world.

The YouTube audience, as part of the interactional landscape (Adami, 2009), is placed under a moral dichotomisation which divides them through the dilemma 'are you with me or against me?' It creates a dualistic framework of the social world, where people are marked through their political stances and inherent ideologies (Finkelstein, 2001). This dynamic is not only endemic to the action of posting the video, but it also concerns the way that the YouTube page asks people to assess the video in a dual formality actualised by the like and dislike interactive options that are normatively placed under the video plate (Bourgess & Green, 2009)

The author strives for a rather fixed position where if one identifies with the opposite ideology, he/she risks being rendered unfriendly or even considered an enemy (Finkelstein, 2001). It is this dynamic that is pronounced through the semiotic organisation of the text that I call 'the micro-fascism of the film' following Evans and Reid (2013). By explicating this dynamic, I do not attempt to claim that the protagonist is moulded into a kind of historical fascism ideology, but on the contrary to indicate that she is caught inside the prevalent discursive dynamic of the autism activism world that is articulated through oppositional polemic rhetoric (Waltz, 2005).

The human desire for power and also freedom prescribed a micro-fascistic relational scenario to the life of the actor that as Evans and Reid (2013) declares 'For life to be lived freely, it cannot fully exorcise the impulse towards the desire for power' (p.1). It is through her idea of living under a kind of 'freedom' enslaved inside the second and third movement of the video that the protagonist protested against the social forces that are considered rival. This will be explored in further detail in the following discussion of the clinical and the outside the clinic discourse.

11.4 Irreconcilable languages and the 'Us and Them' of the autism-clinic battlefield. Time for new discursive diplomacy?

McGuire (2016), sounds apocalyptic in her articulations about the relationship between culture and autism. Autism, she argues, provokes normative violence in a state of war against it. According to her examination, society in the 21st century has become a vector of the discourse 'against' autism. Fighting autism raised a cultural imperative, fertilised by a robust militarist doctrine. It has established a dominant political ideology in the Western world.

There is now a community of authors and self-advocates that critically examine the logic of war against autism. Fitzpatrick (2001) for instance, a Medical doctor and a father of an autistic child himself, rejected the stance of 'defeating' autism by rendering it dehumanising for children and f amilies. Falling into the same imaginative template, Fitzpatrick (2001) and McGuire (2013) provided a different approach to the critical elaboration of autism. Runswick (2014) questioned the logic of this conflictual deployment of self-other-knowledge by pronouncing the unproductive dichotomous storyline that it offers.

Drawing from this literature, I would like to put forward an additional argument as to how the conflictual development of the growing culture of autism, figured in the two sets of data examined. In a similar way to McGuire (2016), I understand this, as a discussion that places centre stage the discursive locations that were assimilated by the participants. It places centre stage the interlocking establishment of both realms. It is this mutual interactivity that gets expressed in the configuration of the discursive worlds. As McGuire (2016) advocates, 'the discursive tie connecting autism and autism advocacy goes both ways' (p. 546/6481 kindle location).

The notion of war gravitates towards the figurative image of the discourse dynamic built by the language of autism advocates. While this could be understood as a politics of autism annihilation, there is another way to examine the extension of war inside autism. Drawing from the elaboration of Foucaldian and Deulezian notions of war and security as described by Evans and Reid (2013), we could see how discourses of psychoanalysis and autism activism, co-ordinate in order to sustain a 'peaceful' equilibrium. In this vein, both war and peace, in modern life could become mutually dependent. As Evans (2013) poignantly says, drawing from Dillon (2008) 'peace is the extension of war by other means…sanctioned, justified, articulated and made real on account of their prevalence within a war/security/life triangulation that mobilises the social body against whatever threatens the progressive imaginary of a peaceful settlement' (p. 46).

The dialogic relationship between the two discursive realms is central from this angle. Far from being artificial, the talk about autism becomes a site of social configuration, a place that is crafted by a multiplicity of discursive positions that fall into a political and historical habitus (Bordieu, 1977).

Avdi (2012), discussed dialogicality as a conversation between voiced positions and counter-positions. Torronen (2001), crafted subject positions as a relational construct that calibrate the relative localisation of people in discourse. The stories told, in other words, by analysts and the activist, which established cultural locations for people to inhabit. The question then that propelled this part of the discussion was 'how do the findings of this research, account for the deepening oppositional dialogical field between the two audiences?

The answer is given as part of a two-fold conversation. A) Autism as talked by the psychoanalysts and the autism-activist revealed a high degree of 'desire' for power which in the case of the analysts was naturalised as part of their psychoanalytic practices, while in the case of the activist was exemplified by resisting the oppressive regime and the presenting of

a real and authentic self. B) The notion of autism grew within a discursive framework where each population occupied the remaining position of a dilemmatic framework. Subject positions arranged people as binary constructions such as the oppressor/oppressed, the perpetrator/victim the master/emissary. Such is the security fostered by these binaries, that both psychoanalysts and the activist inflexibly fixated to them, driven by their prescribed roles, duties, ways of being and relating (Ruffolo, 2016).

Dichotomous representations are cardinal in the data selected from both studies. Dichotomy accompanied autism since its initial conception. As previously stated, 'Autism started life as two professional voices separated by a war'. To paraphrase Milton (2012) the relationship between autism and clinical world is about not being able to attain a double empathy. Both sides fail in offering a relational opportunity that could help them experience their being-in-the-world with a sense of becoming a social milieu (Foucault, 1980), navigating among uncertain conversational realities (Chown, 2014).

11.4.1 The first axis of irreconcilability.[16]

Psychoanalyst: 'Sometimes it is difficult to say what autism is, it is like an enigma.'

Activist: 'I am not a conundrum, not even a jigsaw puzzle that you need to demystify. I have a life and this is My Language.'

There is a deep and profound truth about the unknowability of autism from a post-modern perspective. According to it, the subject becomes decentered and dissolute at the face of multiplicity and constant becoming. It seems to dispel in post-structural fieldwork where clinicians try to build mental structures which for the subject with autism appear desolate. To be autistic is to live and to lie in a between space. (Yergeau, 2018, p. 176). It is about slipping categorisation and escaping knowledge. To remember Scott's monumental phrase

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[16] I have decided to introduce the idea of adjacency pair over each site of irreconcilability in order to show the mutual dependence of the two languages. An adjacency pair in conversational analysis is a unit of communication in which a single person speaks and a second person replies to the first speaker's utterance Sack et al. (1974)

which established the unknowability of autism: 'Autism is like a snowflake' (as cited in Waterhouse, 2013, p.3).

The repertoire of unknowability as talked by the psychoanalytic therapists is unlikely that would alleviate the pathology-laden subject positions created by the hegemonic culture. Autism would still be a conundrum that would require more research and further psychologisation to its understanding. In many cases, the government of the neo-liberal regimes works on this constant reshaping of individuality (Deleuze, 1995). It is a strategy which posits life as a constant becoming, in an environment structured and controlled by bio-power (Nadesan, 2010).

In this sense, the therapist's apparent uncertainty about what autism is offers a new imperative, evidenced by the proliferation of control societies over the disciplinary ones (Rufollo, 2016). The distinction is vital to understand the way autistic life is governed through a constant reshaping of knowledge. As Rufollo (2016) contents, 'control societies no longer *individualise* bodies through disciplinary mechanisms that confine bodies to specific spaces and tasks but they instead *dividualize* bodies through control mechanisms such as information and communication' (italics included on the original p. 94).

The opposing dialogicality contained in the three nexuses entails energetic fighting back of this subordinating discourse. Goodley (2005) argues that this is an effort to craft a resilient identity by placing the self inside the dynamic of conflict. This is also a desire to establish a new regime of truth that could fight the hegemony of the psy-knowledge (Evans, 2013). This new relationship to the outside world passes through the repression of the psy-knowledge and the concurrent wish to voice against it. For this to take place, the author must perform a thousand 'valued' identities so to foreclose the disordered one.

Conflict invokes power. It also invokes a self that through acting becomes empowered. Certain aspects could be perceived as counter-responses to the assault made by unknowability discourse. First of all, there is a fusillade of everyday identities that are produced during the video — stemming from a literate to a global identity, a non-disabled identity, a non-gendered identity, an IT identity and many others all attempt to diminish the slightest possibility of devaluing the person. By emphasising aspects of autonomy, authority and expertise, the author carefully overshadows those 'voices' which treat autism as a kind of 'ballast' (Baggs, 2007). Overall, the resilience of identity is performed by the video maker, based on battling the notions of unknowability.

11.4.2 The second axis of irreconcilability

Therapist: 'You are hiding, in your isolated castle celebrating your sovereignty and building fortifications. But your Kingdom is damaged. We will come after you and lift the gates'

Activist: 'I am not hiding, I am constantly interacting with what is around me and my activities are not evidence of my defence to the outside world. They are just an act of preference and desire. My video is an act of disclosure, allowing others to witness 'My language, My life'.

A desire for security predominates in the lives of autistic children, claimed the therapists. Security, as talked by them, damages their lives. Their sense of comfort, their idiosyncratic relating to the world around them, their need to defend themselves by building panoply of 'defensive' activities, the world of sameness, repetitiveness predictability all become particles of the child's damaged life.

There is nothing hidden in the way I live, the activist stated. This is my home. This is my language which is predominantly different from yours. I invite you to witness it. This is what I like to do with the objects that surround me. I will keep you away not because I am afraid of

you but because you want to come closer to me only to invade me and populate me with your 'expert' knowledge.

The second irreconcilable scenario is not only created by the analyst's talk but is again feed and sustained by both sides. It resides in ways of talking about autism that create two oppositional 'forms of life'. The child and the therapist appear locked into a relational scenario (Gergen et al., 2001) made of two actors who impact on each other. Ogden (1994), from a psychoanalytic perspective, identified this phenomenon as offering only two sets of choices. You either succumb to the other's desire or enact resistance to avoid being done-to. Benjamin (2017) argued that social actors become enslaved in this interpersonal fight, which is built on the premises of exerting one's power on the other. Both social actors could be seen as oppressors and oppressed, as victims and perpetrators. They seem to be relating through the language-game of fundamentalism. Power relationships, similar to politics, always rely on such practices that cannot do otherwise than to be fascist (Evans, 2013). Renouncing Evans 'Politics demands of us that we not only desire but love power. Such a love cannot be acclaimed non-fascistically' (p. 4).

Shotter (2015) could enlighten the discussion about this type of imagined irreconcilable scenario. Considered through his idea of dialogical becoming, the two languages are knitted together in a way that creates relational 'realities' that are unbridgeable and stilted. Words and signs can mobilise people for good or worse. Through words, utterances, and conversations, people are offered the opportunity to join in the material background of talk, to resist talk, to open or close possibilities for new forms of life. This I argue, is not the case here, since both languages seem to draw from the inescapable position to empower and control knowledge, control subjectivity, control otherness.

A particular example of it could be spotted when the therapist talked about being under the absolute control of the autistic child, providing a victim subject position for herself. On the

contrary, when the activist protested against being treated as living on an isolated castle, she launched an uncensored disclosure of her non-verbal private moments. The rhetorical network established seemed to be fashioned around complementary and coercion (Benjamin, 2017). The therapists practising upon the child as a defensive form of life was countered by the opposite party, which reacted to it as an act of invasion and discursive colonisation.

11.4.3 The third axis of irreconcilability

Therapist: 'You are a living dead, a Zombie intoxicating human life.'

Activist: 'I am fully living, where you displaced me in order not to see me. And I have become a minority, speaking from my indigenous language that you cannot even attempt to know and learn.'

An additional irreconcilable difference is set up between the two social actors on the grounds of malignancy talk. The robust pathological flavour of this repertoire has been paramount for the therapists' talk. By questioning the livability of autistic life, and also providing 'miraculous' stories concerning its recovery, the therapists inscribed a 'zombie' position for their audiences. While the micro-implications of this positionality were important for positioning themselves in highly appreciated cultural locations, its broader implications could inflict frustration to the targeted populations (Thimbault, 2014). One of the critical questions that seem to escape the therapist's attention is 'what broader implications might the talk about malignancy provoke in terms of asking people to live their lives under the threat of zombification? Once more, the choices for the afflicted population seem to split into a) enacting the form of life attributed by this discourse or else b) trying to resist by shifting to another ideological template (Ogden, 1994).

A doer-done-to scenario (Benjamin, 2017) was elicited by the way the activist responded to this diminishing discourse. The conflation of this discourse produced a palette of identities for the person acting inside the video potentiating her sense of self. In her rhetorical retaliation, the activist was motivated by a need to voice a legitimate let alone segregated form of life. This appeared several times during the three nexuses. Firstly, the activist voiced her aliveness through her authentic disclosure and the material embodied activity. Then she relied on the style and the content of the video to provide an allegory over the idea of being less creative and thus dead. She denied any inferiority by announcing her indigenous identity, which was crafted through a native language. Finally, she continuously discounted the other social group by emphasising their unwillingness to learn her native language and also by categorising them as enemies and invaders.

One of the phrases that epitomised the rhetorical agenda of the activist is the one quoted in the title of the 9.4.1 section of the second study 'I am just interacting with the water as the water interacts with me'. In it, the activist attempted to crystalise her view of identity as one that does not follow the conventional symbolic understanding of the person. The protest of the activist then sounded as blasting upon the roots of Western philosophy, which places symbolic activity as one of the distinguishing features of human ontology.

The activist presumably did not try to surface from an intra-psychic abyss, which is similar to the one phrased by psychoanalysts. On the contrary, she tried to emerge from the discursive 'apartheid' that the culture of the majority localised her. Finklelstein's (2001) figuration of people with disabilities as experiencing the most robust form of apartheid amongst civil population sounds current from this respect. The activist's 'emergent' identity is performed through countering the idealised form of subjectivity, which is crafted on the ability to move from a sensory dominated world to a symbolic one. It remains unsure, however, as

Finkelstein (2001) states whether, through such means, she would be able to 'engrave her signature into the fabric of society' (p. 6).

Deligny (2015) could state the type of subjectivity that the activist advocates. His ideas surrounding autistic subjectivity, deviate from conventional conceptualisations. As Wiame (2016) contents, Dellingy has been questing for a new type of subjectification. Paramount to this journey was his distrust to language 'proper', which he saw as difficult to escape. Similar to the activist's logic, he advocated for a world constructed by images and traces, leading to a cartographic type of consciousness (Milton, 2016). Moving further out of the stereotyped ways of viewing autistic people, he talked about camering as being the autistic children's' preferred way of experiencing the world. By attending to types of thinking and acting that do not succumb to the supremacy of a language, the activist's talk can be interpreted differently.

From Deligny's (2015) and the activist's point of view, there is nothing more demarcating and deadening than the enforcement of a symbolically driven type of consciousness. As the activist claims inside the video, the common sense understanding of elements such as the language or interaction has completely reprised in the autistic ways of being. Both Deligny and the activist, strive for an alternative understanding of the social environment, which takes place as a pre-individual, pre-subjective type of enthusiasm[17] (Wiame, 2016). In this respect, there is nothing dead about the person acting. What comes to demise is the hegemonic type of archaeological approach to life and its meaning, which was put forward by Freudian psychoanalysis. What comes to life instead is the cartographical variant of subjectivity which, as Wiame claims 'is not a matter of persons, but of milieu' (p.52). (Milieu is the space of life where uncertain events unfold).

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[17] For Wiamme (2016), 'The performance and the very agency of the autistic lie there, in the shaping of enthusiasm, in the opening of possible worlds held in the pre-individual, affective field of experience' (p. 51).

11.5 Research Implications

This research study was designed to investigate the two founding social establishments that currently breed autistic forms of life, the clinical and the outside of the clinic. Approaching both realms under a multi-perspectivist configuration allowed for a productive understanding of autism as built through discourse and multimodality. It explicated the ways that the broader systems of meaning-making allowed the participants to frame the autism phenomenon in momentary and fleeting spaces.

In this section, I was faced with the following challenging dilemma. I would either go on dividing the clinical and the outside of the clinic as two distinct social spheres creating what Foucault (2007) named dispositif[18], or I would try to work them together to evade the futile perpetuation of this binary. I decided to implement the main finding of this research, namely the fact that both the analysts and the activist constrained their ideas of autism in a place limited by hegemonic power, conflict and discursive irreconcilability and follow the first path.

The issue therefore at this point is to reverse this dualist delimitation by trying to lift the boundaries to what can be seen, felt experienced, licensed through a re-arrangement of the diplomacy of autism. The new diplomacy requires a courageously new politics for autism, in what could be thought of as a new social milieu.

11.5.1 Disturbing the 'Us and Them' Universe

The notion of 'Us and Them' in the autism-related literature is no more a scarce commodity (Runswick-Cole, 2014). As this study revealed the ontological differences of the 'Us and Them' dynamic, is a recursive ideological battlefield, asking whose discourse is going to prevail at the end. As Benjamin (2017) said: 'only one can live' (p. 5704/8708 kindle version).

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[18] The creation of an arrangement so that life can be made to live (Foucault, 2007)

The identities produced inside this conflict are connected to the rhetorical pursuits of each social group. Both participants utilised a wide range of discourses and semiotic modalities, in order to persuade, empower and also foreclose possibly unwanted identity attributes. They resorted in sophisticated 'linguistic' and multimodal armouries which reciprocated each other, regulating autistic subjectivity in polarised positions. The protest made on behalf of the activists could almost be seen as half-pronounced by the therapists. In a discourse analytic viewpoint, the activist's discourse was intertextually contaminated by the language of the clinic.

Runswick (2014), Ramlow (2006) and Thimbault (2014) critically elaborated on the 'Us and Them' politics of autism in order to challenge its future. In different degrees, these authors questioned the establishment of the current political template, pointing to a need to move towards a post-neurodiversity, post-dichotomous era. They mainly asserted that the idea of neurodiversity had reached a critical plateau since it mainly confined the person with autism in the neo-liberal framework of individuality.

This framework could be charged with maintaining the fixed positions of the neurodiverse and the neurotypical. It allowed the community of autism to protest on the grounds of autism as being a variant of the human genome and human wiring, providing an act of conscientisation[19] (Hook, 2004). It also raised greater cultural awareness and visibility about the oppression suffered by autistic populations while also creating alliances between autistic people within the conventional lines of resistance (Hook, 2007b). However, where do we go from this point?

Finkelstein (2001), discussing the history of disability activism, argued that any reference to activism should attend to the great achievements that have occurred to its recent history. In the case of autism activism, the construction of autism as part of human diversity exerted

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[19] Conscientisation: political strategy of resistance in which an attempt is made to develop a heightened awareness of oppressive political conditions of existence. From Hook, (2004, p. 105)

significant influence on raising an autistic voice in the context of a new type of consciousness. It helped to develop resistance to the colonising ambitions of psychological knowledge. As in the case of black consciousness however, it has not yet created a decisive break from a futile quest for normative acceptance (Hook, 2004). As Runswick (2014) noted, it fixed autistic populations in terms of fighting for acceptance from the neurotypical majority.

One of the main findings addressed by this study is this: 'The clinical and the extra-clinical', the 'autistic and the non-autistic', the 'the human and the non-human', 'the normative and the disordered' provide the boundaries of individual subjectivity. These boundaries function like fencing the talk about autism, segregating the population as 'Us' and 'Them'. It becomes unthinkable to conflate autism outside these dilemmatic configurations. One can either inhabit the discursive universe of pathology or pretend to depart from it by understanding autism as a universe of difference. The hallucination of becoming neurotypical would always ghost the autistic person phrasing the dilemma 'should I strive for normality or should I die instead?' (Fanon, 2008).

This tyrannical compulsion marks the autistic universe by repeating itself in the talk of therapists and activists. The tyranny lies on the development of autism and activism through the use of pronouns such as 'Us' and 'Them' that creates a representation of autism as being opposite to normative humanity (Fairclough, 1989; Harre & Dadaic, 2012). The need to engage in a pronoun-free politics of autism is now more apparent than ever.

Several questions derive from this pre-occupation. How do we go to disturb this universe? Do we even dare to disturb it? Do we dare to silence our mouths in order to witness the Other in Us and Us in the Other? Do we dare to negotiate our professional expertise, our playing safely by with-holding the power to ourselves? Alternatively, do we, to paraphrase Benjamin (2017) dare to go first in order to change the rules of the game in a

Wittgensteinian sentiment? How do we go building a new type of citizenship that transcends the current neoliberal imperatives of normativity avoiding the atrocities that affected those that do not fall into the category of the majority?

I touch upon these questions as broad accompaniments of this study. The first task is to combat the winds of micro-fascism that reside in all of us, turning our gaze towards post-queer politics in autism. Then the second is to fight the divisions between Us and Them and allow ourselves to surrender (Gent, 1990) to the Other as an act of mutuality and unprecedented relational engagement. Finally, by turning to a pre-individual, cartographic mode of consciousness would allow us to grapple our hegemonic ways of being, paving the way to a more plural and colourful society. The need for a disruptive innovative politics is evident so that the universe of autism moves into a more democratic and thus emancipating trajectory.

11.5.2 Problematising the passion for micro-fascism in all of us. Embracing the post-disciplinary in autism politics

There is something utterly ruminating about the way fascism emerges in life as we read in Evans and Reid (2013). Fascism, in all its forms, is life's most apparent clothing, which tends to be utterly irreversible. There is no reason that one should argue that an anti-fascist rationale can defeat fascism. The idea behind the untreatability of fascism makes it a necessary consortium of neoliberal life. It is something that coexists with our everyday practices and the distribution of power around us. Liberal forms of fascism saturate our conventional practices, and the only thing we can do is neither sidestep nor fight it as something that can be lost or change.

There is something utterly pessimistic about the micro-fascism of the clinical and the activist universe, as advocated by this study, which finds expression in the words of Evans and Reid

(2013): 'Fascism is a problem for us, but that does not turn it into a problem we believe we can 'solve'. The worst fascisms arise in response to problems that are poorly understood, and on the back of trite if well-meaning solutions. We are not problem-solvers of fascism. Fascism has no ready-made solution, for power and life have no ready-made solutions.'(p. 11)

If fascism dictates our everyday practices, how do we then go problematising its impact on us? May (2001), could sound apocalyptic about the problematisation of common practices. His idea of fascism incorporates the everyday practices of people providing fascism with a very ordinary fabric. Understanding the clinical and the activist universe through this framework would mean to understand the way the practices of both groups are fabricated through unquestioned significance. The slightest resistance to those practices can induce a threat to the population.

Runswick (2014), contended that in order to re-imagine autism in the mainstream culture, we need to turn to a politics of identity, as Ruffolo (2016) suggested. The new politics should depart from notions of subjectivity which crafted individuality in disciplinary societies. What matters in this template is not the fixed type of subjectivity that saturates political fights in disciplinary societies. It is not even a matter of becoming a majority by constructing new lines of fight or new politics about identity. Instead, it is a matter of understanding life and politics as involving a fluid dialogical becoming of identities. In Rufollo's (2016) own words: 'it is not a matter of implementing a politics based on identities where the identities remain the same while political strategies change. On the contrary, it is critical that we re-imagine life itself and the materialities inherent to it so as to come across more creative and equitable ways for thinking about democracy' (p. 93).

We can attempt to operationalise this view by turning to Deleuze and Guattari (2005) and their game of chess and Go. We can conceive the 'game' of autism as part of an activity that

develops in two realms. On the first one, the realm of chess the game develops as a proper war. It involves the institutions of the clinic and involves all the orthodox actions that can take place inside it. It involves a disciplinary limitation of the players' actions. On the contrary, the game of Go could be a war without fights and strategies. It could be a decisively open, emergent process or as Ruffolo (2016) argues: 'a question of arraying oneself in an open space, of holding space, of maintaining the possibility of springing up at any point' (p. 116). The players in the game of Go are interconnected so that every player cannot function autonomously but only by relating to others. They develop as dialogical voices and not as unitary autonomous entities.

11.5.3 'who will go first?' Surrender to the wind of thirdness. From 'Us or them' to the 'Us with Them' and vice versa

Benjamin (2017) in the opposite direction from Evans and Reid (2013), advocates for a world where the polarised deployment of social life can be overcome. What incubates our unwillingness to function in less dichotomous ways is the dynamic of 'only one can live' that exists in complementary relational scenarios. The social world is built on a phantasy were a paranoid connection between life and death predominates. Within this dynamic, there are two leading subject positions. The first is the position of the salvaged and the secured, while the second refers to its counter-position which is about the loss of life and indignity. In a complementary constructed universe, these two ways of being appear irreconcilable. They become two sets of 'truth' fighting for recognition. As Benjamin (2017) states a spiral of violence is activated when the truth becomes a place of mutual annihilation.

A psychoanalytic view of thirdness can facilitate the new diplomacy of autism. The 'moral third' could become the point of departure from current dichotomous views of the clinic and the activist. It could provide the exit from the only one can live dialogical background, to the alternative 'all deserve to live'. What is needed for this to happen is not an imagination

concerning where do we go from here but instead that someone accepts the challenge to question the current status-quo and declare 'I will go first'. This is an act of openness and dialogical faith that as we advocated beforehand can problematise the micro-fascist, complementary, hegemonic ways of fabricating the autistic universe. It is an act of deconstruction (Parker, 1995) where the therapist disturbs the role of power in psychotherapy by understanding his/her practices as securing the priorities of the current state apparatus (Gaitanidis, 2015; Loewenthal, 2015).

11.5.4 Turning to the pre-individual, pre-subjective state of consciousness

It is highly improbable that the idea of autism as neurodiversity could lead to cosmogenic ruptures to the divide that it tried to foreclose. By relying on neuro-realism, the political stream of neurodiversity attempted to fight the normative assumptions which saturated autism resorting thus to an essentialist view of self-hood (Vidal & Ortega, 2017). The autistic subject called for recognition through active segregation and 'angry' protest. The current neuro-politics are not intending to evade their ambitions to foster social security by further attempting to extinguish the autism phenotype form the human genome in a way similar to the one that offered the extinction of the Down-syndrome in earlier years. The idea of neurodiversity cannot adequately mask the activist's willingness for a different type of normative existence. The signs of neuro-diversity afford traces of a hegemonic culture that tries to mask its inequities and the guilt which originates on Us being the healthy and Them being the disordered ones. Autistic people are represented as a caricature of the 'humans-that-we-are' (Deligny, 2017), so that societal guilt becomes moderated.

Neuro-diversity may not have resolved the tensions built in autism, but has made a strong statement about the way people with autism register their life. As Wiame (2016) and Milton (2016) content, there is no division between autism and the world. Autism is the world. There is no distinction between being in the world and being the world. Being the world is

structured through a pre-symbolic, sensory-laden, cartographic type of consciousness that Deligny (2017) advocates. It consists of an aggregation of lines and traces that map the world while the autistic person attempts to weave its own performative 'arachnean' network. For the network to establish its presence in contemporary autism politics, both neurotypical and autistic actors should attend to 'voiced' experiences that are predominantly unusual but not irreconcilable. Sinclair (1992) seemed to have paved the way into a similar logic several years ago when he stated: 'Grant me the dignity of meeting me on my own terms … Recognise that we are equally alien to each other, that my ways of being are not merely damaged versions of yours. Question your assumptions. Define your terms. Work with me to build bridges between us.' (p. 18).

11. 6 Contribution to practice and knowledge.

This piece of research contributes both to the current state of knowledge and to the clinical practice in autism. The four repertoires indicate that the construction of autism is located in a very intricate ideological dilemma. It is depicted either on the level of shadow subjectivity[20] or a very ill-informed one. The autistic subject in the therapists' discourse is mainly positioned as an unknowable subject or a disordered one. In this sense the discursive climate that is portrayed in the interviews analysed is dominated by the voices of the hegemonic culture. Although most of the therapists discursively tried to evade this reality by placing themselves on a different rhetorical axis, their consequent discursive practices seemed to reproduce the dominant view about the pathological organisation of autistic life.

While the contributions to practice could be varied, it should be emphasised that one of the important conclusions of this research draws our attention to the overtly stigmatizing role of the clinical discourse upon the autistic population. As stated by this research autistic people occupy a very distinctive place with regards to the health-disease continuum inside the

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[20] The constellation of non-living subjective states of autism.

human society. On the other hand, the regulatory character of psychoanalytic treatment forecloses even the most genuine attempts to provide a more democratic character to our therapy room (Democratizing psychoanalysis). Therapists, including myself, remain torn between their culturally prescribed positionality and a need to act outside that, for the benefit of the individual. As this research shows, it requires a leap of faith and perhaps an act of rebellion if one wants to escape the normative character of the helping professions. Even in the most simple but core facets of life we have been trained to monitor for deviant symptoms, to reach for positive change and to strive for restoring things to their normative appearance. For this one needs to ask profoundly "who defines then?" and "whose voice is to be heard?"In particular, therapists could develop new instruments of self reflexivity based on the use of their discursive practices. By drawing more attention to the way culture saturates their thinking and acting they could possibly extend their practices beyond their fundamentally normative character. In this way they could catalyse the lives of autistic subjects in less subordinating ways.

11.7   Future directions for practice and research. Discourse and participatory research and autism

This research endeavour started with a deep and profound need to unlock the mysteries of autism. In psychoanalytic terms this echoed Alvarez (2012) when she talks about trying to amplify the non-autistic part of the child's personality in order to bring him/her closer to the universe of normative functioning. I can now say that I have not been less "violent" and oppressive than any other member of the normative group of people that are called therapists.

My introduction to autism took place through the language of psychology, psychoanalysis and neuroscience, which imposed the normative wisdom to children that appeared variable, puzzling and developmentally disordered. Even in a moment of non-verbal interaction, I

found myself leading the child to places and practices that while attempting to match them inside their "natural" habitat they purposefully tried to make them fit the neurotypical way of seeing and doing things. Even when the child had chosen to oscillate endlessly on a swing, my therapeutic logic would be to produce a response that could verify the child's ability to exit his world in order to enter mine. My worldview seemed to be more salient than his/her. In this respect, what was most significant was to try and restore the lost humanity of the child by offering a less autistic subject position for him/her.

The walls of my office and the words of my mouth have trained me so that I see the autistic subject through the looking glass of neo-liberalism psychology, where what does not fit the normative needs to remediate to meet the standards. Therapy in this sense is a tool of normative culture which secures the motives of the status-quo. The exit from this distressing position for me is still unknown but is strongly related to this research project. As a member of the majority but also as a clinician that is now motivated by a need to deconstruct his practices and understand the role of power in the therapy and construction of autism I am still troubled about the way forward of my practice. The first step forward I think is to acknowledge the dissociation that therapists suffer when meeting with autistic children and individuals. There is nothing more illustrative from the words of one interviewee who claimed 'one part of him was interested in adventure and another said you stay in this dead deadly place'. The discursive exploration of experience I believe can moderate and also neutralise the polarities experienced in being either dead or alive.

As shown by this study, the combination of autism and psychotherapy through multimodal and discourse analytic methods could help alleviate and also illuminate the role of the 'text' in shaping autism. The future of autism and psychotherapeutic research could become more democratic through:

a) Extending discourse analytic research into the study of extra-discursive aspects of interaction. As this project has shown, multimodal methods could decisively help to illuminate the experience of people with autism by attending to the way multiple semiotic means offer meaning-making potentials to the participant. The more systematic exploration of the extra-discursive elements of positioning in therapeutic encounters could provide a more comprehensive idea of the therapy process and also of the way autistic clients could evade being positioned in relatively hegemonic and thus oppressive cultural location. The role of therapy in this framework, as Avdi & Georgaca (2018) noted is to provide the individual with a range of flexible and thus variable subject positions offering him/her a pluralist template of relational scenarios. In this sense, autism therapy research could utilise discourse analysis as a research method that illuminates the way people conflate wider discourses extra-discursive aspect to place themselves or the other in specific subject positions during therapy.

b) Utilising, conversational analytic, and multimodal methods for studying autism as an interactional phenomenon and attending to the moment to moment interactions between children and therapists. This innovative approach could decisively enlighten our view of autism-therapist interaction as this occurs in the here and now of therapy, without imposing disabling discourses for the child. Understanding therapy as a conversation could inform therapists understanding of autism as a situated interactional accomplishment. This could be interpreted in designs that develop an understanding of the sensory-embodied dialogue between the child and the therapist.

c) Emphasise the need to engage in participatory research to shape the future of autism (Goodley & Runswick-Cole, 2011). The idea of participatory research stems from the notion of incorporating the ideas of the autistic community into the type,

content and application of research undertaken for ASD (Watson et al., 2018). This approach to research is still in infancy, but the proponents of this new paradigm, who come from the *Shaping Autism Research* seminar focus on three main areas that relate a) to changes of the descriptive language of autism, b) the modification of environments to facilitate autism participation in research and c) the construction of an autism-friendly academic environment. Participatory research strives to bring changes to the way public and private monetary resources are spent on autism research. While most of the funding goes to studying the causality and treatment of ASD, the new agencies such as the AASPIRE (Academic Autism Spectrum Partnership in Research and Education) claim to channel more funding to Community Based Participatory Research (Raymaker & Nicolaides, 2013). The future of autism research could then be more democratic if stakeholders, therapists and people with autism cohabit in mutual academic and cultural spaces to weave the autism universe together.

d) Re-thinking the priorities of autism research in order to replace the neurotypical priorities of autism research. In this respect as Leatherland (2018) suggests, research funding from public agencies should break from current designs that orient to the elimination of the autistic genome and strive for research that improves the daily lives of autistic people.

11.8   Limitations of the project

The limitations of this research relate to the methodological tensions that characterise DA and multimodal DA and also the material-embodied constraints that were affected by my subjectivity as a clinician and a researcher.

One possible limitation of the first study relates to the homogeneity of the research subjects. Endorsing from comparable theoretical and clinical backgrounds, most participants seemed to draw from neighbouring discursive fields to produce their free-associative narratives. This might have created a homogeneous data sample. The implications of this limit are not considered important, because DA focuses on language variability. Even people belonging to the same group are expected to produce variable accounts, which reflect the flexible ways of language use.

My clinical and theoretical biases imposed limitations to the data selection. As a member of the Western clinical tradition, I can recognise my ideological inclinations towards the object relations language. This might have influenced my choices of sampling in ways that might have limited the recruitment of participants. The question, therefore, is 'how did my own biases created a specific data sample or delimited the possibilities of acquiring a more complex discursive data sample?' Although I believe that the selection of the data echoed my clinical inclinations both the design of the interviews and also the openness of the discursive method to a range of analytic sources did not harmfully limit the data sample. In great extent practical limitation intervened in the recruiting procedure. Even though my recruitment strategy attempted to gather a more intercultural sample of participants, such participants are scattered in remote places and could not be efficiently approached. A future extension of this project could, therefore, incorporate a different recruitment strategy to provide a more intercultural range of research participants.

There were also emotional limitations that I faced during the research journey. Indeed, engaging autism through a critical perspective related to the ability to regulate some very painful feelings relating to therapy practice, the delivery of therapeutic services and also the ability to critically challenge the accounts of therapists with whom I identified. For example, while I found the idea of autism a dichotomy between life and death quite pertinent to my

past interactions with ASD children, I had to bracket these taken-for-granted assumptions to study their rhetorical, ideological and discursive effects.

I can see that the making of analytic choices and interpretations as part of this research was always a process of being able to weave my subjectivity in emotionally uncomfortable places that disturbed my own clinical and theoretical thinking. At times and again, I felt torn between the need to stabilise and defend my therapeutic identity or destabilise it by familiarising myself to the activists' talk. It is important to state that given the delicate nature of the interview schedule and the fact that free association entails a degree of disclosing emotionally significant events, some of the participants might have limited their talk in order not to reveal details that might have been uncomfortable for them or their client.

The practical limitations of this research correspond to the challenges of applying its results to the field of psychotherapy and activism. In the first case, these limitations are grounded in the epistemological discrepancies between psychotherapy and DA research (Avdi, 2008). While psychoanalysis holds a view of the autistic person as an intentional actor driven by intra-psychic determinants, CDP offers a less individualist perspective. By shifting attention to the interactional negotiation of meaning, it could provide an interesting set of assumptions with regards to the making of the autistic selves through talk and language resources. Autism in this respect becomes less than a stable construct awaiting the therapist intervention to develop and flourish. Instead, autism becomes a situated interactional accomplishment that becomes livable by the routine ways of be talking and negotiating meaning.

Discourse analysis can counter the traditional methods which often produce monolithic interpretations and analytic accounts. The aim therefore of a competent analysis is to counter the dominant interpretive schemata by explicating the way dominant categories

function. By offering potential and also alternative interpretations the analysis can contribute to the improvement of analytic diversity. In this way the approach could explicate inherent tensions in the phenomena under study and produce new theoretical and practical understandings (Harper, 2012).

The pathological flavour of the therapists' discursive activity could be seen as an occasioned phenomenon creating an interactional dynamic that exists in the therapy of autism. The research findings do not attempt to claim that all therapists and therapeutic encounters would fall into the same discursive territory. On the contrary, it points to a political and social dynamic that could be taken into consideration when therapists engage people with autism, framing their thinking and practice through the resources available to them. The generalisability of the research findings, therefore, does not imply a new universal arrangement of the knowledge of autism, but on the contrary, it alerts us towards a hegemonic arrangement of autism among the clinical and the extra-clinical domain.

The findings of this study also cannot explain why the participants used the language resources in this way but on the contrary point to show the effects of the usage. The research findings should not be taken as a personal criticism to the participating therapists or sympathy towards the autism activist. Instead, they should be seen as an opportunity to enrich therapeutic and activist practices in light of a more ideologically informed reflexive engagement. They should be seen as an indication of the demarcated positionality of autism in therapeutic accounts and should point to actively trying to understand this phenomenon as it occurs during therapy. In this sense, psychoanalysis and autism could enlighten each other in democratic and mutually enriching ways.

The limitations of multimodal research often refer to the 'impressionistic' (p. 26) character of the approach (Jewitt, 2009). The question that the critics pose is 'how do you justify the meaning of mediated actions and semiotic units?' With its objectivist and essentialist

makeup, this question reflects the concerns about 'ontological gerrymandering' of the constructionist approaches. My answer thus is that the social constructionist epistemological background of this research does not fall into this sort of realist claims. Instead, it claims that the assumptions articulated throughout this research fabricate a new reading of the clinical and the outside the clinic in a way that might not be truer than others but might be better than others (Harper, 1999).

Finally, an ontologically informed limitation of this research is located in the following question: 'Can autistic subjectivity be explained though attending to language and discourse only?' There is a lively debate about the status of subjectivity in discursive psychology and post-structuralist discourse analysis. The lack of the person in the first approach and the passive uncomplicated conflation of the subject in the second are the most common criticisms that produce limitations to what can be known about the subject through these methods (Harper, 1999; Parker, 1997; Willig, 2008). My take upon this is reflected in my implementation of two parallel studies that show how analysis could inform our understanding of the makeup of subjectivity by discursive and extra-discursive methods. In this sense, I argue that the turn to a multimodal understanding of autism and therapy could enhance our conceptualisation of what takes place among therapists and their autistic clients, but also allow for a more open and semiotically enriched reading of human interaction. In this trajectory, my future research concerns, lie on the designing and implementation of multimodally informed studies that could capture the unforeseen and complex negotiations of meaning between autistic subjects and their therapist. In this respect, the multimodal capturing of the non-verbal elements of autistic life could provide a better understanding of autistic life and perhaps a more democratic employment of their versions of the self that need not rely solely on the dichotomisation between normality and pathology.

11.9 Summary and concluding remarks

Ever since the conception of this research endeavour my focus has been to understand and open up the possibilities of a more democratic deployment of the clinical language upon autism and vice versa. In line with current attempts to democratise the clinical practice (Orbach, 2008), I tried to provide a discursive reading of the psychoanalyst's thoughts about autism. At the same time, by conceiving psychoanalysis as a social practice that re-enacts the hegemonic pathological views about autism, I launched a parallel study to complement these initial findings. Both studies contributed to the understanding of the clinical and the non-clinical universe of autism.

The analysis of the psychoanalysts' talk in eight seven revealed the orchestration of discursive repertoires in trying to account for their experiences with autism. The analysis showed that the therapists operated through a notable dilemma expressed by the antithetical organisation of the repertoires. While they downplayed the identificatory practices of autism by using a repertoire of variability, they concurrently mobilised pathology saturated discourses to legitimise their therapeutic motivations. The pathology laden subject positions created inside the three consecutive repertoires were characterised by diminishing states of being that propelled the idea of intervention and restoration from the therapist.

In a similar vein, the multimodal analysis conducted in chapter ten has made a vital contribution to the understanding of the activists' world. By paying attention to the wider array of semiotic modes and by scrutinising the multimodal landscape of the video, this study revealed the inter-dependency of the activist's produced identities and the disabling discourses that permeate autism. The three analytic nexuses presented revealed a wide range of mediated actions that produced a countable number of identities. The identities produced were organised across the protesting nature of the video, which was enacted

through the activist's ideological concerns. One of the most important contributions of the second research was the fact that it produced a different kind of reading of the multimodal environment by emphasising on the way a complicated arrangement of semiotic modes synthesised meaning. In this sense, it paved the way for crafting alternative ways in understanding the way the autism activist woven her non-verbal activities in the multimodal environment.

In discussing the findings from study 1 and study 2, I elaborated on their findings to consider their interplay and also their relationships with the broader literature of autism and therapy. In relation to the broader literature, the first study built on the current attempts to understand therapy as a discursive accomplishment. The pathological subject positions that were put forward by the therapist across the data were presented as a way to negotiate stake and accountability. The discussion of the second study focused on the construction of the different identities in the YouTube video. The discussion addressed the three nexuses by utilising a social semiotic analysis of the mediated actions. The final part of the discussion attempted to read across the two studies based on the irreconcilability aspects of the two worlds. A political understanding of the two social sites was conducted as a way to move forward from the current social dynamic of autism.

By relying on a traditional discourse analytic method and a more innovative multimodal type of discourse analysis, this thesis illustrated the interlocking discursive dynamics that saturate the autism universe at this historical point. It showed how the clinical and the outside the clinic, social terrains have become irreconcilable to each other not because of their inherent inconsistencies but on the contrary due to their mutual discursive interpolarities.

Both the clinical and that which is outside the clinic have become repressed forms of dilemmatic languages. They became ways of fixing meaning so that rival descriptions cannot thrive. Jongersen and Philips (2002) content that:

'Two discourses can collide in an antagonistic relationship to one another when they try to define the same terrain in conflicting ways. Antagonisms are dissolved through hegemony, whereby the one discourse conquers the terrain and appears as the objective reality; the objective being that which has become taken-for-granted, that which we forget is contingent. The taken-for-granted emerges, then, when alternatives are pushed out of our vision' (p. 130).

A future possibility for this type of research could be interactive disclosure of the research findings to the participating populations, which could lead to new challenging insights. More research that targets the interplay between the clinical and the outside the clinic discourse should be conducted. Future research in this field could be enhanced with the use of multimodal techniques which advance the embodied, extra-discursive aspects of autistic subjectivity. It is recommended that more combined research programmes could lead to a better understanding of the divide between autism and the clinic.

This research ultimately provided a combination of heterogeneous elements in order to account for the creation of the autism universe. It crafted a different story about the clinic and autism as a new 'political myth' as Harraway (1991, p. 157) would say. The criticism placed on the current dichotomisation of autism could be seen as offering the opportunity to provide a new political mythology for the future of autism. In this sense as Jongersen and Phillips (2002) advocated borrowing from Harraway: 'research like our identities, can never be completely 'pure'; it is destined to navigate in a world that is already structured in many different ways. But what it potentially can do is disrupt our understandings and reassemble them in new ways.' (p. 195)

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Appendix 1 Ethical approval of the thesis

UNIVERSITY OF HERTFORDSHIRE

HEALTH & HUMAN SCIENCES

ETHICS APPROVAL NOTIFICATION

TO	Georgiou Konstantinos
CC	Professor David Winter
FROM	Dr Richard Southern, Health and Human Sciences ECDA Chairman
DATE	27/01/15

Protocol number: **LMS/PG/UH/00318**

Title of study: A Discourse Analysis of the Psychoanalytic Psychotherapist's Use of Language with Autistic Children.

Your application for ethical approval has been accepted and approved by the ECDA for your school.

This approval is valid:

From: 27/01/15

To: 30/12/15

Please note:

Approval applies specifically to the research study/methodology and timings as detailed in your Form EC1. Should you amend any aspect of your research, or wish to apply for an extension to your study, you will need your supervisor's approval and must complete and submit form EC2. In cases where the amendments to the original study are deemed to be substantial, a new Form EC1 may need to be completed prior to the study being undertaken.

Should adverse circumstances arise during this study such as physical reaction/harm, mental/emotional harm, intrusion of privacy or breach of confidentiality this must be reported to the approving Committee immediately. Failure to report adverse circumstance/s would be considered misconduct.

Ensure you quote the UH protocol number and the name of the approving Committee on all paperwork, including recruitment advertisements/online requests, for this study.

Students must include this Approval Notification with their submission.

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PARTICIPANT INFORMATION SHEET

Title Registered with the Department of Research at the University of Hertfordshire:

 "A Discourse Analysis of Psychoanalytic Therapist's Use of Language in their Work with Autistic Individuals. "

Brief Description of the Study.

Psychoanalytic explorations with autistic populations have now travelled a long way into a laborious and 'undemocratic' terrain. Early theories about psychogenic mothering have been replaced by new 'aetiology-free' accounts that apparently situate in the borders of the mainstream psychology of autistic disorders. However, recent publications around the issue indicate either a move towards cross-fertilization of the traditional discourse with others stemming from neuro-cognitivism, or a considerable modification of the classic technique. Through this process a new hybrid discourse is generated. In this case it seems that psychoanalytic thinking around autism strives to speak its 'voice' into the institutional-political domain of autism suggesting its own version 'reality'. This new thinking should be welcomed as an alternative 'mythology' governing autistic lives and not as a new hegemony trying to oppress, remediate and regulate the lives of autistic individuals.

Within this fluid ground and strongly motivated by our own relational practices with autistic individuals, we conceived the idea of examining aspects of the psychoanalytic 'realities' with autism. Indeed, psychoanalytic texts fuelled our interest mainly through their rhetorical plurality but also with their insistence on understanding autism from the perspective of multiple perspectives, vitality, intersubjectivity and play. It should be made clear, that this project is not aiming to question the suitability of the psychoanalytic technique in the autistic

condition. Instead, its focus lies on the way that analysts construct autistic subjectivities in their therapeutic encounters and within their discursive attitudes.

A core attitude informing this project is to re-think the existing psychoanalytic views not as indications of a mental reality enclosed in the isolated mind of the individual, but as distinct rhetorical moves in the therapist's relational journey towards constructive meaning, clinical understanding and theory building. This is portrayed in the following indicative questions:

- How does the therapist discursively constructs his 'reverie' while interacting with his autistic clients?

- How does the therapist categorize autistic functioning in his talk?

- What are the available subject positions that the child can inhabit?

- What forms of 'life' are constructed through the therapist's discursive repertoires?

- What types of wider discourses do they draw upon in order to depict his accounts?

It follows that the core idea informing this inquiry is the relationship between language and the notions of selfhood and subjectivity. It is suggested that it is not only clinical theories that maturate through their saturation with autistic persons but also the lives of these subjects. Therefore, autistic individuals are offered in the context of a therapeutic relationship new 'discursive possibilities' and therefore new interactional grounds to develop and flourish. Overall, this line of thinking tends to support the intersubjective view of the psychic development through the co-construction of meaning, in antithesis with the more traditional views of the self.

CALL FOR PARTICIPATION.

The geography of this research project is not predetermined and also not definite. Its final structure will emerge through the data processing. This means that the researcher will device his own analytic strategy upon the data, on the basis of current literature and thinking in the area of qualitative post-modern research. From this, it follows that all the data generated by the interview process will be transcribed in written format before analysis can begin. Further, a copy of this transcription will be send to each participant. The material produced by the research procedure will be kept in a safe place and no one except the research team will have access to it. Finally, confidentially arrangements will take place to ensure anonymity of the research participants.

Within this adventurous spirit, I would like to invite psychotherapists working with autism from a psychoanalytic psychodynamic point of view, to consider the possibility of sharing their clinical experiences for the purposes described above. The data will be generated through an interview process that would utilize a modified version of the FANI (Free Association and Narrative Interview) method, originally introduced by Professor Wendy Hollway and her associates. The duration of the interview will range from 60 to 75 minutes and will include open ended questions that will target a rich oral history of the therapists experience with autistic individuals.

On my behalf, I would like to thank you preliminary for reading this letter. I wish that you have found this area of research intriguing and thought stimulating and be willing to share some material for the purpose of unfolding our theoretical and clinical descriptions of the psychoanalytic approach with autistic populations. This is a formal invitation. However, in

case you want to ask further questions you may send your reply message (**Consent Form**) to the contact details cited at the end of this letter.

Konstantinos Georgiou

University of Hertfordshire

gioukon@gmail.com

University of Hertfordshire

CONSENT FORM FOR STUDIES INVOLVING HUMAN PARTICIPANTS

I, the undersigned *[please give your name here*, *in BLOCK CAPITALS]*

……
.

of *[please give contact details here, sufficient to enable the investigator to get in touch with you, such as a postal or email address]*

…..……
..

hereby freely agree to take part in the study entitled *[insert name of stu*dy *here]*

"A Discourse Analysis of the Psychoanalytic Therapist's Use of Language, in their Work with Autistic Individuals. "

1 I confirm that I have been given a Participant Information Sheet (a copy of which is attached to this form) giving particulars of the study, including its aim(s), methods and design, the names and contact details of key people and, as appropriate, the risks and potential benefits, and any plans for follow-up studies that might involve further approaches to participants.   I have been given details of my involvement in the study. I have been told that in the event of any significant change to the aim(s) or design of the study I will be informed, and asked to renew my consent to participate in it.

2 I have been assured that I may withdraw from the study at any time without disadvantage or having to give a reason.

3 I have been given information about the study and concur that no risks, suffering harm or adverse effects could derive as a result of my participation to this study.

4 I have been told how information relating to me (data obtained in the course of the study, and data provided by me about myself) will be handled: how it will be kept secure, who will have access to it, and how it will or may be used.

5 I have been told that I may at some time in the future be contacted again in connection with this or another study but withhold the right not to accept any additional invitation.

Signature of participant………………………………………………………………………………Date…………………
……….

Signature of (principal) investigator……………………………………………………
Date…………………………

Name of (principal) investigator *[in BLOCK CAPITALS please]*

GEORGIOU KONSTANTINOS
……………………………………………………………………………………....

Appendix 4 Url for the Video

https://www.youtube.com/watch?v=JnylM1hI2jc

Appendix 5 Transcription Conventions for study one

The transcription conventions were adapted by Jefferson (2004) to fit my transcription sentiments for this research study.

↑ Upward arrows represent marked rise in pitch.

↓ Downward arrows represent a downward shift in pitch.

> < Text encased in greater than' and less than' symbols is hearable as faster than

the surrounding speech.

< > When turned greater than' and less than' symbols encase speech, the speech is

hearable as stretched or slower than the surrounding speech.

= Equal signs at the end of a speaker's utterance and at the start of the next

utterance represent the absence of a discernable gap.

 [ ] Extended square brackets mark overlap between utterances.

(1.7) Numbers in parentheses indicate pauses.

A period with no number following (.) indicates a pause which is hearable, yet too short to

measure.

A column (:) symbol indicates that the world is pronounced through extensive brake

Underlined words (<u>therapist</u>) indicate that emphasis is placed on the specific spoken word or section

Bold letters (**word**) indicate that the word or phrase is talked in increased volume with regards to surrounding text.

/ slash indicates a full stop of talk

Appendix 6 Transcription examples of study two

Multimodal transcript of Movement 3 A Translation

1 Plate 1 3.14sec

2. The previous part of this video

3. was <u>in my native language</u>.

4. Many people have assumed that

5. when I talk about this being my language

6. that means that each part of this video

7. must have a particular symbolic message within it

8. designed for the human mind to interpret.

9.   But my language is not about

10.   designing words or even visual symbols

11.   for people to interpret.

12. It is about being in a constant conversation

13. with every aspect of my environment.

14. Reacting physically to all parts of my surroundings.

15. In this part of the video

16. the water doesn't symbolize anything.

17. I am just interacting with the water

18. as the water interacts with me.

19. Far from being purposeless, the way that I move

20. is an ongoing response to what is around me.

21. Ironically, the way that I move

22. when responding to everything around me

23. is described as "being in a world of my own"

24. Plate 2, 4.13sec

=

25.   Plate 3, 4.14sec

26.   whereas if I interact with a much

27.   more limited set of responses

28.   and only react to a much more

29.   limited part of my surroundings

30.   people claim that I am

31. not ''opening up to true interaction with the world''.

32. They <u>judge</u> my existence, my awareness, and personhood

33.   on which of a tiny and limited part of the world

34.   I appear to be reacting to<u>.</u>

35. The way I naturally think and respond to things

36. looks and feels so different from standard concepts

37.   so even visualization

38. that some people do not consider thought at all

39. but it is a way of thinking in each own right.

40.   However the thinking of people like me

41.   is only taken seriously

42.   if we learn your language,

43. no matter how we previously thought or interacted.

44. Plate 4, 4.59sec

=/

45. plate 5 5.01sec

46. As you heard

47. I can sing along with what is around me. (..)

48. It is only when I type something in your language

49. that you refer to me as having communication. (.)

50. [the voice is heard from the speakers of the pc is not embedded in the video]

51. Plate 6, 5.13sec =/

53. Plate 7. 5.14sec =/

54. I smell things (..)

55. Plate 8. 5.20sec =/

56. I listen to things. (..)

57. Plate 9. 5.28sec =/

58. I feel things.

59. Plate 9. 5.38sec =/

60. I taste things. (..)

61. Plate 10. 4.48sec =/

62. I look at things. (..)

63. Plate 11. 5.51sec =/

64. It is not enough to look and listen

65. and taste and smell and feel,

66. I have to do those to the right things

67. such as look at books

68. and fail to do them to the wrong things

69. or else people doubt that I am a thinking being

70. and since their definition of thought

71. defines their definition of person-hood

71. so ridiculously much

72. they doubt that I am a real person as well.

73.

Plate 12. 6.14sec =/

74.

Plate 13. 6.17sec =/

75. I would like to honestly know how many people

76. if you met me on the street

77. would believe I wrote this.

78. I find it very interesting by the way

79.   Plate 14. 6.26sec =/

80. I find it very interesting by the way

81. that failure to learn your language

82. is seen as a deficit

83. but failure to learn my language

84. is seen as so natural

85. that people like me are officially described

86. as mysteriously and puzzling

87. rather than anyone admitting

88. that that it is themselves who are confused

89. not autistic people or other cognitively disabled people

90. who are inherently confusing

91. We are even viewed as non communicative

92. if we don't speak the standard language

93. but other people are not considered non communicative

94. if they are so oblivious to our own languages

95. as to believe they don't exist.

96. In the end I want you to know

97. that this has not been intended

98. as a voyeuristic freak show

99. where you get to look at the bizarre workings

100. of the autistic mind.

101. It is meant as a strong statement

102. on the existence and value of many different kinds

103. of thinking and interaction

104. in a world where how close you can appear

105. to a specific one of them

106. determines whether you are seen as a real person

107. or an adult or an intelligent person.

108. And in a world in which those determine

109. whether you have any rights

110. there people being tortured, people dying

111. because they are considered non-persons

112. because their kind of thought

113. is so unusual as to not be considered

114. thought at all.

115. Only when the many shapes of personhood

116. are recognized will justice and human rights be possible.

117. Plate 15. 7.49sec =/

118. Plate 16. 7.50sec

**Appendix 7 Online Research ethics grid**
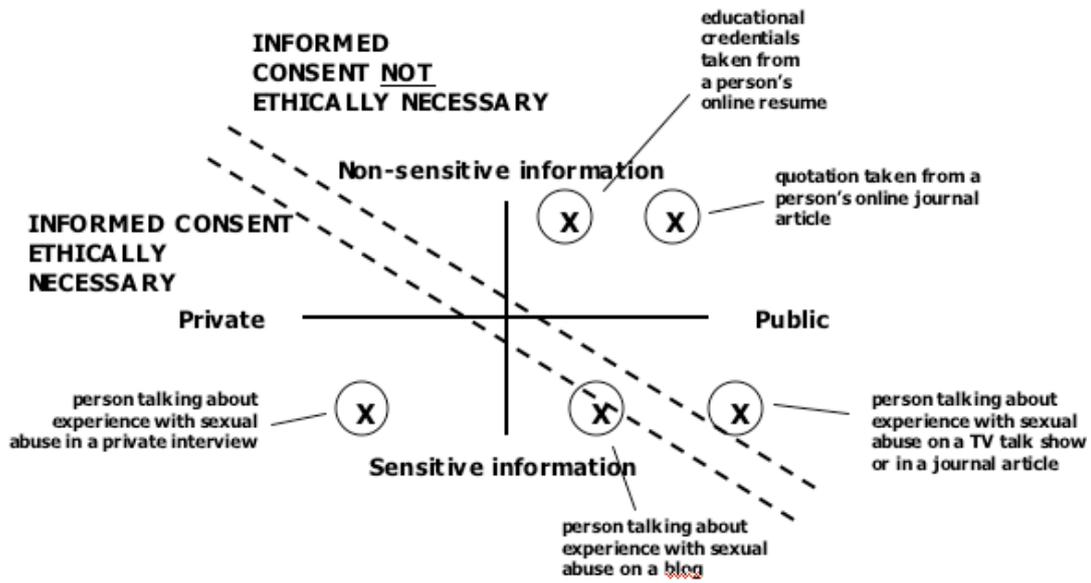
FIGURE 1. Mapping types of interactions with research participants (adaptation of Sveningsson) (McKee & Porter, 2008, p. 732)
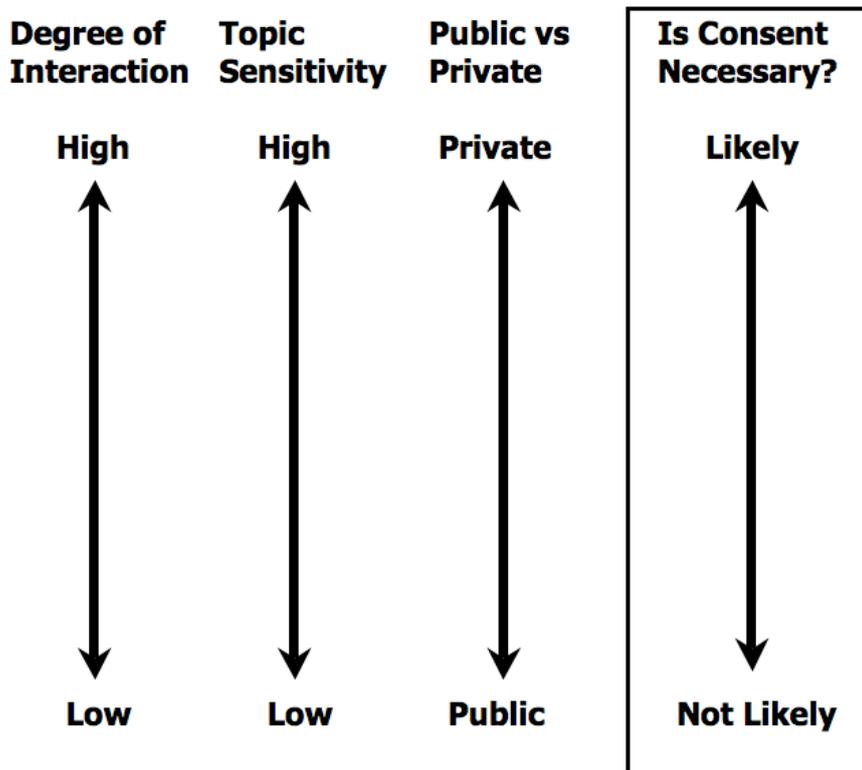
Key variables influencing decision about informed consent

Appendix 8   keywords used in literature search

Psychoanalysis autism, psychoanalysis AND autism, autism psychoanalytic treatment, autism psychoanalysis therapy, autistic disorders psychoanalysis, autism children psychoanalysis, autism AND children AND psychoanalysis, autistic states in children, autism disability psychoanalysis, autism psychoanalysis discourse, autism research psychoanalysis, psychoanalytic psychotherapy autism, social constructionism autism, discourse analysis autism, communication disorders psychoanaly* (this symbol allows different combinations of words), emotions psychoanalysis autism, autism family psychoanalytic treatment, autistic conditions psychoanalysis, psychotherapy with autism, psychotherapy autism children, autism activism, autism neurodiversity, autism advocacy, autism social construction, disability autism politics, autism culture, autism societ*, autism discourse psychoanalysis.