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# Volume 1. No. 2 ‘FILLING IN THE GAPS’: A MICRO-SOCIOLOGICAL ANALYSIS OF AUTISM

October 15, 2013

By Damian E M Milton

Abstract:

When reviewing research related to autism, it is clear that it is dominated by biological and psychological concerns, with autism being defined as a developmental deviance, dysfunction, and deficit. Much of this research assumes a functionalist philosophy regarding deviations from statistical norms as pathological and in need of remediation. This research feeds into a hegemonic view of what constitutes ‘normalcy’, with critical social explanations being lost under the sheer mass of research from this viewpoint. Despite the

ascendency of this functionalist philosophy, there is a growing concern regarding listening to ‘autistic voices’ from a phenomenological perspective (Biklen, 2005) and with regards to the wider social construction of autism (Nadesan, 2005; Timini et al. 2011). However, the study of autism on a micro-sociological level has been given precious little attention. This paper utilises the theories of Garfinkel (1967) and Goffman (1955, 1959, 1963, 1974) in particular, in order to question current ways of perceiving autism, highlighting issues concerning social interactions involving autistic people, and the stigma of autism, as well as deconstructing the ‘myth’ of a ‘lack of empathy’ (Baron-Cohen, 2008; 2011).

# ‘Filling in the Gaps’: A Micro- Sociological Analysis of Autism

### By Damian E M Milton

## introduction

A currently popular model for researching health issues is the ‘biopsychosocial’ (BPS) model of health (Engel, 1977). This model attempts to move beyond the traditional biomedical model of health that framed health and illness in terms of a biological deviation from ‘normal’ functioning, due to pathogens, developmental abnormalities, or injury. The BPS model looks beyond this reductionist framework to include psychological and social factors that affect health, with each factor interacting and impacting on each other. The model has been criticised however, for a lack of theoretical integration between these factors, and for simply stating an obvious fact (Pilgrim, 2002). Pilgrim (2002) also states that the BPS model has not been fully realised and that the biomedical model is still dominant.

When reviewing research related to autism, it is clear that it is dominated by biological and psychological concerns, with autism being defined as a developmental deviance, dysfunction, and deficit. Much of this research assumes a functionalist philosophy regarding deviations from statistical norms as pathological, and in need of remediation. This philosophy is taken for granted when looking at the social context of autism, in which autistic people are perceived to be socially abnormal and dysfunctional, with much policy related research taking an economic perspective of the ‘cost of autism’ (Knapp et al. 2009). This research feeds into a hegemonic view of what constitutes ‘normalcy’, with critical social explanations being lost under the sheer mass of research from this viewpoint.

“Although there is a biological aspect to this condition named autism, the social factors involved in its identification, representation, interpretation, remediation, and performance are the most important factors in the determination of what it means to be autistic, for individuals, for families and for society.” (Nadesan, 2005, p. 2).

In the ‘Ecological Systems Theory’ developed by the psychologist Urie Brofenbrenner (1979), rather than examining the inner environment of the child, psychological development is seen within a context of wider social systems working at four levels: the microsystem (the immediate social environments that people inhabit), the mesosystem (where two microsystems interact), the exosystem (a broader social context which indirectly influences development), and the macrosystem (the wider social context). This theory forms a framework within which one can examine various levels of social context in the study of autism. Within the field of autism, there is a growing concern regarding listening to ‘autistic voices’ from a phenomenological perspective (Biklen, 2005) and with regard to the wider social construction of autism (Nadesan, 2005; Timini et al. 2011). However, the study of autism on a micro-sociological level has been given precious little attention. This paper utilises the theories of Garfinkel (1967) and Goffman (1955, 1959, 1963, 1974) in particular, in order to question current ways of perceiving autism, highlighting issues concerning social interactions involving autistic people, and the stigma of autism, as well as deconstructing the ‘myth’ of a ‘lack of empathy’ (Baron-Cohen, 2008; 2011).

### Ethnomethodology and Autism

The ethnomethodological perspective was first formalised by Garkinkel (1967), as a development from phenomenological theory. The term ‘Ethno’ referring to the stock of commonsense knowledge available to a member of a society (e.g. the rules of a game of noughts and crosses), and ‘Methodology’ in this instance referring to the methods or strategies that people employ in different settings to make their

intended meanings understandable (e.g. turn-taking in conversations). An ethnomethodologist suspends or abandons the belief that an actual social order exists, but rather, suggests that social reality is accomplished and continually constructed by ‘skilled social actors’.

Through his ‘breaching’ experiments, Garfinkel (1967) deliberately violated social reality, in order to shed light on the methods used by people to construct and maintain social reality. Garfinkel (1967) argued that social reality was fragile in nature, and when the ‘natural attitude’ (the belief that everything is how one thinks it is and others perceive things in much the same way) is ‘breached’ people are put under a state of stress and do everything in their power to repair the breach. Reactions to breaching can be extreme, yet this also shows the importance people place on maintaining order in their views of the social world.

Rather than lacking a ‘theory of mind’, it is argued here that due to differences in the way autistic people process information, they are not socialised into the same shared ‘ethno’ as ‘neurotypical’ people, and thus ‘breaches’ in understanding happen all the time, leaving both in a state of confusion. The difference is that the neurotypical person can repair the breach, by the reassuring belief that approximately 99 out of 100 people still think and act like they do, and remind themselves that they are the ‘normal’ ones. For McGeer (2004) the ‘theory of mind’ deficit model of autism is a one-sided asymmetrical view of two people failing to understand one another, with the personal accounts of those diagnosed showing that the supposed lack of subjective awareness of self and others is simply untrue.

### The Myth of Empathy

Ethnomethodologists such as Garfinkel (1967) and Cicourel (1974) suggest that interactions between individuals involve assumptions of ‘normalcy’, such as the assumption that others will behave in expected ways, and that when ambiguous meanings are found, they will either be deemed irrelevant to the interaction, or will be immanently explained. Such ‘interpretive procedures’ involve an inductive logical process, without which an individual would be uncertain of the meaning of the interaction, what was to happen next, and perceiving how others may be experiencing the interaction. According to Durig (1993), the impairments and abilities associated with autism can be seen with regard to the use of deductive and abductive reasoning, rather than inductive logic. For Durig (1993), deductive intellectual activities involve ‘if-then’ rules, especially those with a guaranteed outcome, such as numerical calculation, memorising information, or collecting objects, whilst abductive activities involve creativity and imagination. Durig’s (1993) classification of autism as a preference/reliance on deductive logic (in particular) as opposed to inductive inference, gives an alternative way to conceptualise Baron-Cohen’s (2008) ‘empathising- systemising’ theory. Rather than a lack of ‘theory of mind’ or ability to empathise, Durig (1993) suggests that an apparent inability in this area comes from a different way of processing information, which does bear a resemblance to Baron-Cohen’s (2008) conceptualisation of autistic strengths coming from an ability for ‘splitting’ and ‘systemising’, yet does not involve the need to use a concept of empathy. This formulation would also suggest that rather than being a ‘core deficit’, the appearance of a lack of ‘theory of mind’ would be a potential consequence of an individual processing interactions with others using deductive, rather than inductive logic.

According to Baron-Cohen (2011), a lack of intent to cause harm can co-exist with ‘zero empathy’, and suggests that this is the pattern found with autistic people, suggesting that they are ‘zero positive’, rather than ‘zero negative’ (as he suggests is the case with other neurological labels of pathology). This line of thinking however implies that a lack of empathy does not in and of itself lead to criminality or cruelty to others, but the intent to cause harm to others. Thus, if one were able to banish a lack of empathy, one would not banish cruelty. The formulation of ‘zero negative’ (and thus ‘zero positive’) does not make sense however, as the intent to cause harm would require some sense of understanding regarding the existence of others outside of oneself, as well as notions of cause and effect regarding one’s actions on others. In other words, cruelty requires ‘cognitive empathy’ which is said to be lacking in the case of ‘zero negative’ individuals.

The amount of apparent ‘empathy’ expressed by an individual (autistic or not) will vary depending on who they are interacting with, and the wider social context, on both their ability to understand the attention of others, and in emotional reactions to this information. It is argued here that ‘empathy’ is a convenient illusion, and the phenomenon that people speak of when referring to it has more to do with language and a sense of ‘shared’ cultural meanings/symbols (or their ‘ethno’). It can be argued that neuro-typical people have no better understanding of how autistics think, than vice versa (McGeer,

2004). The philosopher Thomas Nagel (1981) wrote about the impossibility of understanding what it may be like to be a bat, yet this could be expanded to all other creatures, including humans. By looking at the breaching experiments of Garfinkel (1967), one can see the fragile nature of the social reality that people inhabit. Garfinkel argued that people have a tendency to ‘fill in the gaps’ in their perception in order to gain what they think is a full or whole picture. Due to differences in the way autistic people process information (whether it be monotropism, a weak drive toward central coherence, a lack of mirror neurons, or a lack of long-range connectivity in the brain), this ‘filling of gaps’ tends not to occur (at least to the same extent). Autistic people have a tendency to be more literal, and work upon what is tangible and present, thus conclusions are reached through available information (without ‘filling in the gaps’). It is also interesting to note that these issues may well have been partly recognised in the work of Hans Asperger:

“Asperger may have believed that his patients lacked the natural attitude that constitutes the socially shared lifeworld, as understood phenomenologically.” (Nadesan, 2005, pp. 76).

It has been suggested that a ‘theory of mind’ and empathy are essential to that which makes humans what they are. Thus, the characterisation of autistic people lacking such abilities suggests that they are somewhat less than fully human (Lawson, 2010), and when also linked to criminality and cruelty to others, brings back notions of the ‘atavistic criminal’. It is argued here, that depicting autistic people as ‘lacking empathy’, is an inaccurate and potentially highly dangerous narrative to pursue.

### ‘Us’ and ‘Them’

People have a tendency to align themselves to others within their ‘in-group’ and increase this bond through the denigration of ‘out-groups’ (Tajfel and Turner, 1979). Within interactions with others of an in-group, it can be easily shown that people have little compassion (or ‘affective empathy’) for ‘outsiders’. Tajfel and Turner (1979) utilising ‘minimal group experiments’ found that this denigration also occurred, even when distinctions between groups were arbitrary.

According to the ‘Social Identity Theory’ of Tajfel and Turner (1979), individuals increase their self-image by identifying positively with a group to which they belong, but also by discriminating against the ‘out- group’. Tajfel and Turner (1979) suggested that stereotyping others was a normal cognitive process, in which there is a tendency to group phenomena together. In doing so, the differences between groups are exaggerated, along with similarities to those within the ‘in-group’, through a process of categorisation, identification, and comparison.

Link and Phelan (2001) suggest that stigma occurs through four social processes. Firstly, by human difference being labelled, secondly by dominant cultural ideology linking labelled individuals to undesirable characteristics, or negative stereotypes, thirdly a dislocation between groups establishes a distinction between ‘us’ and ‘them’, and lastly labelled individuals experience discrimination and a loss of status. In this conceptualisation, stigma is contingent upon differentials of social power.

### Stigma and Autism

Durkheim (1895) was the first sociologist to consider stigma as a social phenomena:

“Imagine a society of saints, a perfect cloister of exemplary individuals. Crimes or deviance, properly so- called, will there be unknown; but faults, which appear venial to the layman, will there create the same scandal that the ordinary offense does in ordinary consciousnesses. If then, this society has the power to

judge and punish, it will define these acts as criminal (or deviant) and will treat them as such.” (Durkheim,

1895).

In this early functionalist formulation of stigma and deviance, both are viewed as inevitable within human societies, and indeed functional for society in terms of maintaining a moral code of values, supporting the social norms of a society and the stability of society as a whole. Although this view has been criticised from a number of perspectives, it is interesting to note that Durkheim also argued that another function of deviance in society was to challenge society and open up possibilities for social change. For Durkheim, a society with an overly strict moral code of behaviour would be just as dysfunctional as an anomic society with a lack of such a ‘consensus’, an idea sadly lacking in much subsequent functionalist or New Right sociological theory (Parsons, 1951; Murray, 1990).

In the field of autism, such a functionalist view of society and an individual’s place within it, are often taken for granted, depicting autistic people as a financial burden in need of correction and ‘normalisation’. As Timini et al. (2011) argue, being viewed as ‘normal’ has become progressively harder to achieve:

“The desire to control, amend or even extinguish human behaviours that depart from an increasingly narrow stereotype of normality has bedevilled the history of psychiatry.” (Timini et al., 2011, p. 8).

Lawson (2008) suggests that the discipline of psychology has largely conditioned social concepts of what it

is to be ‘normal’, yet also highlights the role of media and big business in maintaining these

concepts. Lawson (2008) calls for an expansion of what is considered ‘normal’, and suggests that society is intolerant and non-inclusive of difference, preventing the healthy development of a wide population of people. This can be seen as an attempt to reduce the social stigma attached to autism and difference more generally, yet without the abolishment of the label, as is suggested by Timini et al. (2011). Indeed, it is argued here that such a move would not extinguish discrimination against those currently deemed autistic. This can be shown by a recent study into autistic epidemiology in adults in England (Traolach et al., 2011), which found that of those exhibiting autism, none were formally diagnosed. Yet in comparison to non-autistics, were likely to have a lower level of education and employment, and to be more likely to be living in government housing.

According to Cottrell (1942, 1978), an interaction between two individuals involves each participant taking on the role of the other, and adjusting their behaviour to the responses of one another. Thus, an individual needs to both process incoming information, as well as developing a strategy of how to present themselves in a meaningful way. From Plato to Shakespeare, it has often been remarked that human social life is analogous with that of actors on a stage. This dramaturgical analogy was theoretically applied by Erving Goffman (1955, 1959, 1963, 1974) to the study of human interactions. Through this formulation, Goffman (1955, 1959, 1963) argued that social actors were involved in a continuous management of the impressions they give to others. For Goffman (1959, 1963), the ability to manage such impressions is fundamental for an individual to be considered ‘normal’ by others. Hence, those that exhibit autism, whether diagnosed or not, are likely to be considered abnormal and subsequently stigmatised.

To Goffman (1963), a stigma is an attribute, behaviour, or social category that is socially discrediting to the individual. Goffman (1963) described stigma as the gap between the actual social identity an individual inhabits in lived reality, and the ‘virtual social identity’ expected of them by an idealised social norm. Those who occupy such a social position can be classified as either ‘discredited’ or

‘discreditable’. Those ‘discredited’ being those who have had their stigma revealed to others, or who are openly visible. The problem here in terms of impression management, is how to manage social interactions when one knows they are known to hold a stigmatising attribute which can affect interactions with

others. For the ‘discreditable’, the stigma is not known about, and therefore impression management involves the concealment of stigma (known as ‘passing’), and when to reveal information about the attribute and to whom. Goffman (1963) suggests that the stigmatised may well see themselves as ‘normal’, yet at the same time will realise that they are ‘different’ within the presence of ‘normal’

people. An identity that can cause social shame, and when internalised through a ‘self-fulfilling prophecy’

(Becker, 1963) can lead to low self-esteem and even self-degradation. In the case of autism, amongst other perceived differences, it is the very ability to manage impressions that is viewed as abnormal and not meeting social expectation. Even those deemed ‘high-functioning’ and who with a great deal of conscious effort are able to ‘pass as normal’, can then be stigmatised as ‘falsely’ claiming their autistic status, and further disabled by not having their difficulties recognised.

Jones et al. (1984) expanded Goffman’s ideas on stigma to six dimensions: the extent to which a stigma is concealable, whether the stigma becomes more prominent over time, the degree to which the stigma disrupts social interactions, the aesthetics of other’s reactions to the stigma, the origin of the stigma (birth, accidental, or deliberate), and the danger perceived by others on how the stigma may affect

them. Although all of these dimensions can affect autistic people to greater or lesser degrees, two of them are of particular interest: obviously, stigma that disrupts social interactions, yet increasingly, the stigma of perceived danger which can be linked to notions of a ‘lack of empathy’.

### Concluding Remarks

This paper has examined aspects of what it is to be autistic from a micro-sociological perspective, highlighting issues of social interaction and stigma. In so doing, it has shown some of the inadequacies of ‘outsider’ approaches that objectify the autistic subject from normative/functionalist perspectives, in particular the pernicious view of autistic people lacking ‘empathy’. It is also anticipated that such reflections could lead to research utilising micro-sociological perspectives in conjunction with phenomenological and discursive methods.

### Bibliography

Baron-Cohen, S. (2008) *Autism: The Facts.* London: Open University Press.

Baron-Cohen, S. (2011) *Zero Degrees of Empathy: A New Theory of Human Cruelty.* London: Penguin. Becker, H. (1963) *Outsiders: Studies in the Sociology of Deviance.* New York: The Free Press.

Biklen, D. (2005) *Autism and the Myth of the Person Alone.* New York: New York University Press. Brofenbrenner, U. (1979) *The Ecology of Human Development.* Cambridge: Harvard University Press. Cicourel, A. (1974) *Cognitive Sociology.* Harmondsworth: Penguin.

Cottrell, L. (1942) “The Analysis of Situational Fields in Social Psychology”, *American Sociological Review.* Vol. 7, pp. 370-382.

Cottrell, L. (1978) “Mead G. H. and Sullivan, H. S. – Unfinished Synthesis”, *Psychiatry.* Vol. 41(2), pp. 151-162.

Durig, A. (1993) “The Microsociology of Autism”, cited at http://www.autism- resources.com/papers/microsocialogy\_of\_autism.txt, accessed on 14/04/11.

Durkheim, E. (1895/1982) *Rules of Sociological Method*. New York: The Free Press.

Engel, G. (1977) “The need for a new medical model: A challenge for biomedicine”, *Science.* Vol. 196, pp. 129-136.

Garfinkel, H. (1967) *Studies in Ethnomethodology.* Englewood Cliffs: Prentice-Hall.

Goffman, E. (1955) “On Face-Work”, *Psychiatry.* Vol. 18(3), pp. 213-231. Goffman, E. (1959) *The Presentation of Self in Everyday Life.* New York: Doubleday.

Goffman, E. (1963) *Stigma: Notes on the Management of a Spoiled Identity.* Harmondsworth: Penguin.

Goffman, E. (1974) *Frame Analysis – An Essay on the Organisation of Experience.* Cambridge: Harvard University Press.

Jones, E., Farina, A., Hastorf, A., Markus, H., Miller, D., and Scott, R. (1984) *Social stigma: The psychology of marked relationships*. New York: Freeman.

Knapp, M., Romeo, R. and Beecham, J. (2009) “Economic cost of autism in the UK”, *Autism*. Vol. 13(3), pp. 317-336.

Lawson, W. (2008) *Concepts of Normality: The Autistic and Typical Spectrum.* London: Jessica Kingsley. Lawson, W. (2010) *The Passionate Mind: How People with Autism Learn.* London: Jessica Kingsley.

Link, B. and Phelan, J. (2001) “Conceptualizing Stigma”, *Annual Review of Sociology*. Vol.27, pp.363-385.

McGeer, V. (2004) ‘Autistic Self-awareness’. *Philosophy, Psychiatry and Psychology.* Vol. 11, pp. 235- 251.

Murray, C. (1990) *The Emerging British Underclass.* London: Institute of Economic Affairs.

Nadesan, M. (2005) *Constructing Autism: Unravelling the ‘truth’ and understanding the social.* Abingdon: Routledge.

Nagel, T. (1981) “What is it like to be a bat?” in D. Hofstadter and D. Dennett (ed’s) *The Mind’s*

*I.* London: Penguin.

Parsons, T. (1951) *The Social System.* New York: Free Press.

Pilgrim, D. (2002) “The biopsychosocial model in Anglo-American psychiatry: past, present and future”,

*Journal of Mental Health.* Vol. 11(6), pp. 585-594.

Tajfel, H. and Turner, J. (1979) “An integrative theory of intergroup conflict”. In W. Austin and S. Worchel

(ed’s) *The Social Psychology of Intergroup Relations*. Monterey: Brooks-Cole.

Timini, S., Gardner, N. and McCabe, B. (2011) *The Myth of Autism.* Basingstoke: Palgrave. Traolach S., McManus, S., Bankart, J., Scott, F., Purdon, S., Smith, J., Bebbington, P., Jenkins, R., and

Meltzer, H. (2011) “Epidemiology of autism spectrum disorders in adults in the community in England”,

*Archive of General Psychiatry.* Vol. 68(5), pp.459-465.