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Autism as a Controversial Concept. What Kind of Special Educational Needs Can We Find with Autism?

*Autyzm jako koncepcja kontrowersyjna. Jakie specjalne
potrzeby edukacyjne wiążą się z autyzmem?*

Abstract. One hundred years after its appearance on the scientific scene, autism finds its place more and more often in the spotlight not only in clinical and therapeutical psychology – in addition to medicine, psychology and neuroscience, today schools and health services also deal with it widely. However, autism as a concept remains controversial as well as a phenomenon not yet well understood. Psychoanalysis can help to understand how the concept arose within psychology and how it has changed up to contemporary times. In most cases – the famous ones as well as ordinary ones – the autistic child who finds himself at school seems uneducable and avoids close contact. What kind of special educational needs can we find with autism? This paper is based on Freudian discoveries in order to offer a direction that gives an answer to enlighten the subjective desire to be human among humans even in the case of autism.

Keywords: autism; special educational needs; psychoanalysis

Abstrakt. Sto lat po pojawieniu się na scenie naukowej autyzm coraz częściej znajduje się w centrum uwagi nie tylko psychologii klinicznej i terapeutycznej, oprócz medycyny, psychologii i neuronauki zajmują się nim bowiem szeroko także szkoły i służba zdrowia. Koncepcja autyzmu pozostaje jednak kontrowersyjna, poza tym zjawisko to nie do końca zostało wyjaśnione. Psychoanaliza może pomóc zrozumieć, w jaki sposób koncepcja ta powstała w psychologii i jak zmieniła się aż do czasów współczesnych. W większości przypadków – zarówno słynnych, jak i zwykłych – dziecko autystyczne, które trafia do szkoły, wydaje się niewykształcone i unika bliskiego kontaktu. Jakie specjalne potrzeby edukacyjne istnieją w przypadku autyzmu? Artykuł został oparty na odkryciach Z. Freuda, aby wskazać kierunek prowadzący do wyjaśnienia subiektywnego pragnienia bycia człowiekiem wśród ludzi, nawet w przypadku osób autystycznych.

Słowa kluczowe: autyzm; specjalne potrzeby edukacyjne; psychoanaliza

INTRODUCTION

Autism is not a simple disease category. We find that many works in developmental psychology, educational psychology and child psychiatry discuss autism and its implications. Teachers, social workers, health visitors, general practitioners and other front-line service providers are interested in training on the signs and management of autism. Autism awareness is raised even in media and artistic representations.

Nowadays, autism is treated as a matter of inclusive rules and specific laws in the spirit of children's rights in order to be accepted within society. It is for this reason that the growth in diagnoses of autism cannot be regarded as an extension of psychiatric authority, but rather as part of a wider change that has ensured the legal rights of children. "From a historical perspective, the concept of autism has many similarities to the concept of intelligence. The formation of this concept did not merely reveal an aspect of human thought that had lain dormant until that time. It completely transformed the ways in which we think about psychological development. Ever since psychological researchers developed tools to measure autism, these have been used to assess, categorise and sort children within the educational system. Most importantly, the category was used to support the novel idea that children previously considered 'ineducable' could actually be educated" (Evans 2017¹, pp. 15–16).

Autism became a key term used to describe child development, childhood and identity. The definition, diagnosis and meaning of autism affect not only the people diagnosed and their families but also education and social care services and research agendas. The history of the concept of autism is the history of how testing methods manipulated the organisation of educational services for children. One of the most impressive effects of increased interest in autism was the increase of handicap certifications at school for different ages, infant, primary, middle and high school.

AUTISM AND PSYCHOANALYSIS: MAIN CONTROVERSIES ON HOW AUTISM BECAME AUTISM

Manfred Bleuler (1911, p. 568) claims that "framing the disease in a psychiatry manual under psychopathies is a temporary and embarrassing solution". Today the embarrassment that autism arouses in those who work by concepts is the same as at the beginning².

¹ The book presents the meaning of autism in connection with the construction of children's rights in Britain.

² This article draws some materials from a book published recently in Italy: "*Non ci Sono*". *Autismo: orientamenti di guarigione con la psicoanalisi* (Pediconi, Urbinati 2019). Reflections presented in this paper can be considered the extensions of book about the topic autism at school.

Sigmund Freud was the first scientist who explored the infant's mind but autism was not a Freudian concept. When Bleuler coined the term *autism* in 1911, he modified a Freudian term *autoerotism*, twisting its meaning (de Mijolla 2005, pp. 136–138). Freud had used the word *autoerotism* in 1905 to describe a child's early thinking at a stage that prepares the infant's engagement with external reality based on drives. Bleuler followed a completely different pathway. The concept of autism was coined to describe one of the symptoms of schizophrenia in 1911 by the psychiatrist Eugen Bleuler who, at that time, was chief of the well-known the Burgholzi Hospital in Zurich and was in scientific contact with Freud and the psychoanalytic movement. Bleuler claims that autistic thinking is characterised by infantile wishes to avoid unsatisfying realities and replace them with fantasies and hallucinations. *Autism* defined the subjective symbolic world that is not accessible to observers. The meaning of the words *psychotic*, *schizophrenic* and *autistic* became similar and was associated with the lack of contact with a reality of schizophrenic adults.

At the beginning, the concept of autism was not referred to children and their development. Indeed, Anna Freud and Melanie Klein wrote about psychoanalysis and severe psychopathology, but even they were not devoted to treating autistic children. In Britain "the study of 'mental defect' prior to the 1960s was left to medical specialists who had been unfortunate enough to be placed in what were then regarded as provincial backwater deficiency institutions, rather than cutting-edge centres of medical specialism. However, in the 1960s, many child psychologists in Britain challenged the contentions about infantile thought assumed by Bleuler and others and created new methods to validate child psychology as a science, in particular epidemiological studies. 'Autism' was then completely reformulated as a new descriptive category to serve the needs of this new model of child development" (Evans 2017, p. 19).

The restored concept of autism silenced the theories of the infantile unconscious which came from Freudian psychoanalysis. Often new models suggested a direct opposition to psychoanalysis but in the meantime they used their concepts expressed. In other words, if in the first concept of autism we found an excess of fantasy in the new concept of autism we find a general lack of unconscious symbolic life. The word *autism* was used to describe the exact opposite of what it had meant up until that time. Michael Rutter (1972, p. 327), a psychiatrist-researcher who conducted the first genetic study of autism, claimed in 1972 that "the autistic child has a deficiency of fantasy rather than an excess". The meaning of the word *autism* was no longer a description of a subject who fantasised excessively but one who did not fantasise at all.

Based on the opposition we discovered within the definition of autism we can read three controversies that are not only historical but give us the idea of the complexity of autism as a real phenomenon.

FIRST CONTROVERSY: JEAN PIAGET OR LEO KANNER

Most researchers and the majority of publications attribute the origins of the concept to the American child psychiatrist Leo Kanner in 1943. But *autism* was an active word in the understanding of children's psychological development from the early decades of the 20th century. It was introduced by Jean Piaget's model of autism. Piaget had begun his training at the University of Zurich in 1918 where he attended many lectures given by the psychiatrist Eugen Bleuler. Piaget's analytic treatment was conducted by Sabina Spierlein. After collaboration with Theodore Simon in order to standardise intelligence tests for schoolchildren in Paris, Piaget focused his work on the development of children's reasoning abilities (Vidal 1994). It was at the University of Zurich that Piaget was introduced to the concept of autism *via* Bleuler who described *autistic thinking* as "an exaggeration of a physiological phenomenon" (Bleuler 1950, p. 374), that was present in all humans, in terms of *normal fantasies* and *wishes*. Bleuler, on the other hand, linked his concept to Freudian discoveries but Freud claimed that early infantile thought was conceptualised in relation to libido and drives, whereas Bleuler described early infantile thinking as simply not yet in contact with reality. In Bleuler's formulation, there is a misunderstanding of one of the most important Freudian concepts about early thinking: Bleuler used the word *autism* to replace the Freudian *autoerotism*. Freud discovered *autoerotism* as one of the first ways of thinking to master the relation with external reality, whereas Bleuler linked "autistic" or "autoerotic" thought with hallucinatory thinking and an inability to conceptualise the external world.

In 1922, Piaget attended the International Conference on Psychoanalysis in Berlin, with a paper entitled *La pensée symbolique et le pensée de l'enfant (Symbolic Thought and Children's Thought)*, where he presented his theories on how children developed a relationship with reality *via* their everyday interactions with people and objects (Piaget 1923, pp. 273–304). Eugen Bleuler and Sigmund Freud were among listeners when he claimed that the pre-verbal stages of children's thought could be described as "autistic" or "symbolic". During this stage of thinking, children could not follow logical rules and there was a predominance of visual imagery in their minds. Piaget drew analogies between infantile thinking and unconscious symbolism as described in psychoanalytic theory. He claimed that "autistic" and "symbolic" thought were both characterised by distinctive features, as the absence of logic, the dominance of visual imagery over conceptual thought and the lack of awareness of the connections that can be made between perceptions. By demonstrating the relationship between the Freudian unconscious and Bleuler's concept of autism, Piaget linked the concept of autism directly to the child's progressive engagement with reality. He suggested that these attempts to engage with reality could be investigated using psychological tests that measured children's perception and self-awareness.

Piaget's work combined Bleuler's and Freud's ideas and offered a new model for describing early infantile thought fused the theory of child psychological development into a theory of self-awareness or ego development. To match pathological thought in adults with normal infantile thought provides the means to discover the origins of mental illness and to frame a model of the unconscious based on the logic of drives. To describe the development of subjectivity in infants and children we need to know whether, and at what age, one could attribute desires and thoughts to infants and what are the origins of relational thought.

More than twenty years later, in 1943, Leo Kanner's article entitled: *Autistic disturbances of affective contact* was published in the US. Kanner claimed that he had identified a "unique 'syndrome' not heretofore reported", which was "inborn" and characterised by "extreme autism, obsessiveness, stereotypy, and echolalia" in children; these children had not experienced any period of normal development but had "all shown their extreme aloneness from the very beginning of life" (Kanner 1942–43, pp. 217–238). However, he later revised this theory, claiming that "autistic" children were not always "autistic" from birth. Kanner's 1943 article was not based on psychoanalysis or a psychiatric framework, but only on the description of a group of cases that presented similar symptomatology. "There was a marked limitation of spontaneous activity. He wandered about smiling, making stereotyped movements with his fingers, crossing them about in the air. He shook his head from side to side, whispering or humming the same three note tune. He spun with great pleasure anything that he could seize upon to spin. He kept throwing things on the floor, seeming to delight in the sounds they made" (Kanner 1942–43, pp. 219). This group of children used very limited language, they failed to relate to other people physically, even if they were able to progress and develop despite the earlier impression of extreme limitation in the child's ideational content.

Kanner was able to circumscribe a group of child cases and his work, one of the first English-language textbooks on the subject, was important to develop the field of child psychiatry. Kanner's 1943 work has received much attention within a popular understanding of the history of autism research. However, his work was not widely accepted at the time and many other child psychological professionals continued to employ the concepts of autism in conjunction with autoerotism, primary narcissism and symbolic thinking in order to understand infantile psychopathology and problems to develop relationships (see the research on the contribution of Kanner to the conceptualization of autism: Evans 2017).

We can see a contradiction between Piaget and Kanner on autism. Whereas Piaget claims that autism was a normal stage of all child development, Kanner claims that autism was "inborn" in a select group of children. This is a controversy that continues to lead to many confrontations between different disciplines and researchers.

SECOND CONTROVERSY: HANS ASPERGER OR DONALD W. WINNICOTT

Hans Asperger (1906–1980) in 1946 became the director of the Paediatric Clinic in Vienna. He held the post of Professor of Paediatrics at the University of Vienna and later, Innsbruck. He was also the director of the international organization SOS Children's Villages in Hinterbrühl. He is known for having described the syndrome which is named after him.

In the same year that Kanner published his essay *Autistic disturbances of affective contact* (1942–43), in the special pedagogy department of the Paediatric Clinic of the University of Vienna, Asperger activated a real “school in hospital” aimed at children suffering from diseases that involve long periods of hospitalization. Asperger noted that some autistic children are particularly intellectually gifted and obtain excellent and highly specialized professional positions; mathematicians, technicians, chemists, officials and musicians. Asperger presented the case of a six-year-old boy capable of solving the complex task of calculating how many seconds there were in two hours, but unable to answer the question: what is 5 plus 6? The same child, placed on the same calculation, asked about the same calculation, said: “Look! I calculate it in this way: 6 plus 6 is 12, 5 plus 6 is 1 less, that is 11” (Asperger 1944, p. 86). The gaze of his little patients never firmly alighted on things, but on certain occasions their perception and understanding of the world emerged brilliantly and left the observers amazed at the evident contrast with their apparent lack of attention. Facial expressions were poor, facial muscles appeared flabby and body movements were conditioned by stereotypes. The language was mostly anomalous, the voice sometimes shrill, sometimes monotonous or nasal, in any case the language was not natural, and was almost never directed to a speaker, but rather oriented towards empty space, just like the gaze. Asperger described the characteristics of autistic intelligence. While normal children learn through spontaneous imitation and the reworking of what comes from outside, autistic children “know how to produce especially spontaneously, they are only original, and can only learn to a lesser extent, they can only take on mechanical acquisitions with difficulty” (Asperger 1944, p. 81), not being programmed at all to acquire knowledge that is transmitted to them by adults. Their distance from others and impermeability to relationships would favour their conceptual understanding of the world. In cases where the intellectual competences were intact or higher than the norm, their professional services, which were excluded from the majority of individuals, were exceptional. Their unwillingness to pay attention and focus on requests from outside, on the one hand, created serious learning difficulties, on the other hand, enabled them in some cases, to strengthen original ways of solving the problems posed. However, their methods were often long-winded and complicated, therefore more easily exposed to the risk of errors.

Around the 1950s Donald D. Winnicott took on a public role and participated in numerous radio shows for the BBC that commissioned a series of radio programmes

on “The Ordinary Devoted Mother”. Winnicott’s radio work gave popularity to psychoanalysis and promoted the centrality of the mother-child bond to the development of emotional stability in children’s early life. Winnicott began to develop the specific concept of “autistic states” as a defence against the terrible anxieties of the paranoid state at the beginning of psychic life. A child remains in his or her inner world which is not firmly organised until he or she can experience the stability of the external affective world. Winnicott (1953, p. 70) argued that if “emotional development in its primitive or earliest stages concerns exactly the same phenomena that appear in the study of adult schizophrenia”, the autistic state is a sort of “organised defence against confusion and un-integration”. Winnicott used the term *autism* as opposed to *primary narcissism* or *autoerotism*. “I realise that much that I shall say is controversial. Nevertheless, it is necessary to explore the possibility that mental health in terms of a lessened ability to develop schizoid states and schizophrenia is laid down in the very earliest stages, when the infant is being introduced gradually to external reality” (Winnicott 1953, p. 69). Winnicott argued that if one could intervene in infancy, one could therefore prevent schizophrenia in adulthood and overcome the autistic state.

On the need for early diagnosis, Winnicott’s position was against the trend. In his essay of 1966 explicitly dedicated to autism, he stated that “it is artificial to speak of a disease called autism. (...) the invention of the term ‘autism’ was only partly lucky: the advantages are obvious, the disadvantages a little less. I would almost say that once the term was invented and applied, the foundations were laid for something subtly false” (Winnicott 2016). That symptomatology that only once it is fully organized and stabilized can be labeled as autism is composed of tendencies and disorders that at the beginning of affective development are susceptible of a double direction: they can contribute to produce an autistic destiny, or they can result as a step of normal development.

Whereas both Winnicott and Asperger used the term *autism* to describe internal psychic processes, they brought “autism” to the level of everyday childcare and mothering, using it also as tools to criticise parenting and the institutional practices of childcare. Although employed for the purposes of guiding a newborn, needy, flailing welfare state, the concepts therefore became increasingly controversial, not only amongst infighting psychoanalysts, or mental defect specialists, but also amongst the wider public. At the same time, the use of such concepts, and the presumed judgements associated with their use, became increasingly common and pervasive.

Asperger described autism as a stable and unmodifiable condition, but still a special condition. Winnicott, on the other hand, described autism as a flexible condition: it can be transitory or remain as a stable trait based also on the environmental conditions. It is very interesting that Winnicott has encouraged us to be prudent not to diagnose autism too early because of the danger of a label that can become a sort of pathological identity card with no advantage to either the child or his parents.

THIRD CONTROVERSY: AUTISTIC SUBJECTIVE WORLD OR SOCIO-COGNITIVE SPECTRUM

By the end of the 1960s, the initial meaning of the word *autism* had been completely annihilated. A new *autism* was developed that had the exact opposite meaning of that which had prevailed before. It was a transition from autism as an excess to autism as a lack. Whereas autism and its closer conceptual terms – *primary narcissism*, *autoerotism*, etc. – had previously always referred to hallucinatory dreamlike imaginary thought that preceded the establishment of realistic thinking, *autism* from the 1960s onwards was used to refer to a lack of imagination, a lack of hallucinatory thought, a lack of creativity and a lack of dreams. It was a concept that was founded on the absence of imagination.

Now *autism* describes the development of subjectivity in infants and children, yet it also referred to a state of mind that completely lacked any content or any meaning of its own and which gained its meaning only *via* the instruments used to measure it. All of these new ideas about autism were framed around the central claim that it was a kind of “sensory impairment” similar to that seen in children with visual and hearing impairments. Thus began the era of the quantification of autism.

Beate Hermelin and Uta Frith claimed that autistic children often reproduced patterns that were “highly repetitive, predictable and rigidly structured”. As they put it: “The stereotyped, rigid, ritualistic phenomena in the behaviour of autistic children might be regarded as an exaggerated form of pattern imposition. On the other hand, the unpredictable, often inappropriate, and seemingly random responses to environmental stimuli typical of autistic children may indicate an impairment in the feature-extracting process” (Hermelin, Frith 1991, p. 11).

It was *via* the creation of these new models for measuring and managing autism that the meaning of the term *autism* would undergo a radical transformation. The term *autism* had been used by child psychiatrists and psychoanalysts to describe excessive hallucinations and phantasy in infants and children and was regarded as a subcategory of childhood schizophrenia. The generation of epidemiological and experimental autism psychologists in the 1960s and 1970s transformed that meaning. Instead of employing the term to describe a complex fantasy life, they began to use it to describe a lack or deficiency of fantasy life. A new discourse emerged to describe the “impairments” of autistic children based on statistical and experimental accuracy and disregarded the previous descriptive model for representing children’s thoughts.

If *autism* had originally been used precisely to describe ordinary early infantile thought, now researchers focused more and more on the study of language and increasingly regarded autism as a “communication” disorder rather than a psychotic disorder. This was not because they were averse to the idea of hallucinations in infants and children, but rather because such claims would have disrupted the accuracy of epidemiological and observational studies. The centrality of the “cognitive disorder”

of autism enables phantasies to be abandoned and dispels hallucinations. Frith argued that experimental psychology would reveal the details of sense perception in autistic children and the unique way in which they developed conceptual maps that influenced their emotional life. This was a new version of *autism* in which there was no fantasy, no unconscious, but merely the absence of thought.

In 1975, Lorna Wing claimed that the central problem in early childhood autism is an impairment of symbolic function affecting all forms of communication. She aimed to draw a distinction between the retarded and the autistic in order to offer guidance to educational establishments. Wing described autism as characterised by perceptual disorders and abnormalities of language, which caused secondary behaviour problems. She regarded social development as a phenomenon based on intact perceptual, sensory and executive cognitive mechanisms: an infant's thought about other people was defined by their ability to grasp external perceptual experiences. Wing also presented a new model of social development not based on desires and unconscious drives but framed it in terms of a capacity for social interactions. Some infants had this capacity, some had less of it, but it could be measured. The new theory of autism and the autistic spectrum provided new models for thinking about human social development that covered descriptions presented by the psychoanalysts.

What was new was that Wing and the new autism psychologists created new concepts and tools that could be used in the assessment of all children who were brought to the attention of the social services authorities. These concepts and tools were designed to replace theories of the unconscious. Psychological knowledge that had previously been attributed to "unconscious" mental processes that affected mental function, were now reclassified as kinds of "social impairment". The new model of autism provided a quantitative and statistical framework for everything unknown about children's thoughts concerning relationships.

When Simon Baron-Cohen, Alan M. Leslie and Uta Frith (1985) argued that autistic children lacked a "theory of mind" in 1985, they described a general disorder in understanding and coping with the social environment. They used it to describe the ability to attribute autonomous mental states to the self and others so as to predict and explain actions. Autistic children suffered an impairment in the cognitive mechanism required for "mentalising" or representing mental states. "False belief" tasks, in which subjects were tested to see if they could predict the thoughts of others, were employed to test this theory.

The theory of autism, developed in this period, stemmed from the claim that there was a complete absence of knowledge about the nature of early infantile thought and that only the conduct of experimental psychology and epidemiological studies could fill this gap. This is how the theory of autism came to replace theories of unconscious motivations: the ego as the master of the life of drives was replaced with new, standardised, reproducible tests. The new autism psychologists wanted to develop a new theory of mind. Unique "styles of reasoning" that focused on autism as an epidemi-

ological object have shaped our current understanding of autism. Education, health and social care systems have now been built up around this concept of autism and it is hard to imagine how they could now be dismantled.

AUTISM AT SCHOOL: “SUBJECTIVE” EVIDENCE-BASED CASES

In the vast majority of cases, the autistic child who finds himself at school seems uneducable, untreatable, unreachable: it is quite impossible to make close contact. The autistic is a human being who lives in another world, all of his own, inaccessible. What kind of special educational needs can we find with autism? This paper is based on Freudian discoveries in order to offer a direction that gives an answer to enlighten the subjective desire to realize a meeting with the other and become human among humans.

1. Famous autistic people

Temple Grandin (1947–) is one of the first individuals that documented the advantages she gained from her personal experience of autism. She is currently a faculty member with Animal Sciences in the College of Agricultural Sciences at Colorado State University (US).

Grandin can't stand her mother approaching her and touching her, she just let her read books aloud so that she would take her eyes off Temple. The medical advice at the time for a diagnosis of autism was to recommend institutionalization, a measure that caused a bitter rift of opinion between Grandin's parents (see *Interview...* 2006). Her father was keen to follow this advice while her mother was strongly opposed to the idea as it would have likely caused her never to be able to see her daughter again.

At school, she beat her classmates who kept her at a distance. However, Temple considers herself fortunate to have had supportive mentors from primary school onwards. But middle and high school were the most unpleasant times of her life, she said (Grandin 1995).

Social difficulties seem to find a solution when the girl has begun to do some manual activities on the ranch managed by her aunt. Here Temple invented the calves of the farm as her imaginary friends or siblings and has become sensitive to their suffering. It is with the help of one of her professors that she has become one of the most important experts of animal science in the world. Temple Grandin gives us an example of how the destructive drive, always active in autism, was contained through scientific research that allowed her to study a way to slaughter calves that would alleviate their suffering (see Grandin, Johnson 2005).

Supportive mentors from primary school and a brilliant professor from high school were partners of Temple's subjectivity: these educational resources played an impor-

tant part in developing her success, even if at the beginning she had to face autism as a pervasive difficulty.

Donna Williams (1963–2017) was an Australian writer and artist, a qualified teacher and autism consultant, an international public speaker. Her books on autism and her life story are international bestsellers.

In her childhood, Donna was considered insane, retarded, deaf, dumb and even blind. People treated her with slaps because she did not come up to the expectations of those who looked after her: an implacable world to which the little girl responded by crying, screaming and running away; she beat herself, bit herself, tore her hair out. In elementary school, she had very limited language and referred to herself in the third person without ever saying “I”. As a teenager she lived like a vagabond between garages and makeshift shelters, regardless of her hygiene. Her mother, an alcoholic, and her father, often away from home for long periods, had thought countless times of locking her up in an institution.

As a child, her main resource was imitation. “One thing I couldn’t learn was feeling emotions. Robyn’s mother always hugged her before she went out to school and insisted on doing it with me too. ‘Come, I hug you!’ she said one morning after I had slept at their house. ‘I don’t like it!’, I said. ‘You’ll have to learn to like it’, Robyn’s mother insisted. (...) So morning after morning, I learned, frozen as a rock, to bear the hugs. (...) In the beginning, my head was spinning and I seemed to pass out. I let myself be hugged when routine required it and in return, I became her adopted daughter” (Williams 1992, p. 66).

Donna said that she was once seriously reprimanded for drawing graffiti on the walls of the Parliament Building during a trip. “I promised that I would never do it again and ten minutes later they surprised me while I was drawing other graffiti on the walls of the school. In my opinion, I was not ignorant of what they had told me nor was I trying to be witty: but I hadn’t done exactly the same thing I had done before. My behavior baffled them, but their behavior also baffled me” (Williams 1992, p. 64).

Donna Williams has become a successful woman. As she said, she was helped by the discovery of being autistic. When she found out that the diagnosis of autism could be hers, she thought she needed a label to forgive herself and her family. For what should the autistic be forgiven? From the subjectivity of Williams, we can learn that the autistic condition is accompanied by a feeling of guilt. The autistic individual has even very strong feelings, then.

Greta Thunberg (2003–) is a Swedish girl who is very famous as an environmental activist. She obtained international recognition at the ONU for promoting initiatives about climate change. On the media, we saw Greta speaking both in public and to political leaders and assemblies, in which she criticises world leaders for their failure to take sufficient action to address the climate emergency.

Greta Thunberg had just started middle school and was not well. When she had to go to bed in the evening, she cried. She cried on her way to school, too. Also, she

cried during class and breaks, and teachers called her parents almost every day. “We tried to do everything we could, but it was all in vain. It was as if she had turned off the light and gone away. She had stopped playing the piano. She had stopped laughing. She had stopped talking. And then eating” (Thunberg, Thunberg, Ernman, Ernman 2019, p. 27). The only moments of rest were those that Greta spent stroking the dog. The procession of specialist visits began: the school psychologist, where Greta was subject to constant bullying, had speculated that her behaviours were compatible with the autistic spectrum. Tests confirmed the diagnosis: Greta is an Asperger.

It is her mother who speaks: “Without a diagnosis, we could not have made those adjustments with the school that brought her back to health. Without a diagnosis, I could not have given explanations to classmates’ parents, teachers and other people. Without a diagnosis, I could not have continued to work. Without a diagnosis, we could never have written this book. This is the harsh reality. The difference is like that between day and night. But now the diagnosis is there and for her it is a new beginning, an explanation, a compensation” (Thunberg et al. 2019, p. 56).

Greta’s case teaches us that the diagnosis of autism is compensation that is of more service to adults who care for the autistic child than the autistic person *in se*: it consoles adults in their impotence and offers them a new legitimacy to feel useful. But does the diagnosis as a label really offer the means to intimately meet the autistic child in his subjectivity?

2. A successful case: joining school and extra-school resources

Riccardo attends kindergarten, but never plays with other children or looks for them. At the entrance he is approached by his classmates or teachers: he remains motionless, indifferent and silent, but does not cry. Instead, he gets desperate during the hour of music, when his companions sing and play tambourines or other instruments. When others gently approach him, he remains calm and observes, but feels invaded by sounds or others in lively movement.

Riccardo attends the last year of kindergarten. The therapist meets the teachers: frustrated and discouraged, they describe Riccardo as a child without autonomy and impervious to both proposals and requests. The descriptions show the weight of failed educational interventions and personal frustration. Riccardo was a difficult child: when he became aggressive, he experienced the teachers’ educational interventions as real invasions.

The therapist decides to use the book they use at school to prepare for the appointment with primary school³. During the therapeutic meetings, the pages of the book

³ The therapist is Carla Urbinati, the co-editor of Italian book “*Non ci Sono*”. *Autismo: orientamenti di guarigione con la psicoanalisi* (Pediconi, Urbinati 2019). The case of Riccardo is presented within the book in depth.

become sources of stories and fantasy exercises. In addition, the therapist is hosted in the classroom for an observational occasion. Here is what she sees: a little girl takes the marker in Riccardo's case and prepares it for him on the counter, another girl rolls up his sleeves to wash his hands, another classmate pushes him into the row. Riccardo lets them do everything for him, like an automaton. Then Riccardo, the therapist and the coordinator move into another classroom; they take the book they used as a game in the studio and start playing again. The coordinator is incredulous as she sees that Riccardo is present and collaborative. But another surprising thing is going to happen. As they leaf through the book the light goes out. Then the voice of the therapist animates the dark: "The light has gone!". After a while, the light starts working again. This time the voice is Riccardo's: "It's back!". It is the first time that the coordinator has heard Riccardo's voice since the day he entered school. The coordinator is very surprised!

The therapist organises some visits to the school during the summer so that Riccardo can familiarize himself with the places and people he will meet regularly over the following months. As soon as he enters the class he exclaims: "There are letters!". Riccardo knows the letters, they have used them many times to play. Then he writes on the blackboard: "Hi, I'm Riccardo".

The first days of primary school were difficult: in the morning he arrived in the courtyard and began to whine, but once he entered the classroom, accompanied by his favorite classmates, he calmed down. He did not speak and always remained in his place even during breaks. Entry, exit and recreation were the most tiring moments, moreover because they were less structured and were left more to the free initiative of the children.

Riccardo manages to follow the curricular program, he is among the best in Italian and English. After the first few months, he starts talking softly to a girl he knew from kindergarten. She was very skilled in interpreting his nervous moments and often mediates Riccardo's needs and intentions with his classmates and teachers. Towards the end of the first year, Riccardo talks to other children and greets them.

In reality Riccardo today looks at classmates with interest and tries approaches that are sometimes awkward and not very attuned to the movements of his companions. He imitates them by running, reproduces their actions, repeats their sentences, but does not yet take the initiative and does not show reciprocity. If a child embraces him, he lets him do it, but does not correspond with his body in a syntonic way and remains quite rigid.

Riccardo's case teaches us that the success of school placement was made possible by the mediation of the therapist with the teachers. What Riccardo gained from the emotional relationship with the therapist has become transferable to a complex context such as that of the school thanks to the collaboration of the adults involved in the relationship with him.

AUTISM AT SCHOOL: WHEN SPECIAL EDUCATIONAL NEEDS ARE TO AROUSE THE DESIRE TO BECOME REALLY HUMAN

The autistic child at school is undoubtedly a human being, but he or she lives in an isolated world, quite inaccessible. This paper claims that autism is a case in which special educational needs consist in arousing the desire to become a human among humans.

Children with autism seem to have extensive, long-term educational needs that require specific planning, ongoing monitoring of progress, and a wide range of didactic options. Behavioural approaches are widespread in most educational services. Authorities agree that students with autism need individualized and often intense educational services beginning early in life. The most common educational interventions follow evidence-based strategies based on behaviour management (see Parsonson 2012). They are: behaviourally based; carefully planned and monitored by instructions involving task analyses of skills, individualized incentives, goals embedded in routines and activities; planned opportunities for interaction with typical peers; need-based supports and intervention for families; promotion of generalization; curricular contents inherent to different developmental needs; proactive use of positive behaviour support for challenging behaviour. Children with autism typically require the services of special educators and speech therapists; a collaborative team approach is necessary to plan, implement, and monitor the individualized education programs of these students. Educational goals for students with autism usually aim for skills in communication, social interaction, appropriate behaviour and abilities to reduce their dependence on others and extend their functional abilities at home or school. Often critical aspects of interventions remain unknown, including the impact of family factors on outcomes and the relationship between an individual with autism, the appropriate treatment protocol, and the expected outcomes. Finally, there is a vast discrepancy between what is known about effective educational interventions and what is available for children with autism across settings, cultures, and income levels.

Among behavioural approaches, one of the most applied at school is the Applied Behaviour Analysis (ABA). Principles of behavioural therapy – positive reinforcement of desired behaviours – are used to help autistic children develop skills they do not acquire naturally and to reduce behaviours that are harmful to them, like self-injury. But as ABA has expanded and become more common, it has also acquired critics among parents and autism advocates, who take issue with its methods and the way they are used by some practitioners. ABA uses principles of both positive reinforcement and punishment to promote planned skills. There is also a complaint that ABA therapy, which can involve a lot of repetition, is hard on the children, and the skills they learn don't necessarily generalize to other situations (Grey, Honan, McClean, Daly 2005). The emphasis on things like eye contact or sitting still or not stimming – i.e. self-stimulation such as flapping hands – is oriented around trying to create planned habits without considering that different children have different needs. It can be an

indirect way to teach autistic children from a very early age that the way they act, the way they move is fundamentally wrong. However, ABA is based on the premise of manipulating environmental variables to bring about behaviour change. Feelings remain in second place or quite excluded.

To address the conclusion of this paper we present the experience of a psychoanalyst specialized as a child therapist. She also successfully treated cases of autism. She presents some notes from her experience with children and young adults with behaviours included on the autistic spectrum (Colombo 2019). As long as they are infants, their face without mimicry recalls that of painted angels, regardless of the more or less graceful proportions of the features. At the beginning of kindergarten, peers very soon realize that is impossible to play with these children as mates and only in the ways they select. Things seem to improve with the beginning of primary school, when marked and specific skills emerge in the form of excellent school performance alongside other skills that are seriously insufficient. From then on, the autistic person may notice his own social inadequacy. So: either he retires or he gets busy devising communication strategies that will invariably prove to be a failure. They will be improper interventions, fixed themes, an absence of response in conversations, effects of comedy that he himself does not understand: the other children will keep away from him.

Raffaella Colombo tells about the training stage that, during her psychoanalytic training, brought her closer to the reality of autism. It was an institution for children in difficulty founded in 1969 by Maud Mannoni and Robert Lefort on the outskirts of Paris. The experimental school was conceived as an alternative project to institutional psychotherapy. The main feature of the experiment was the dynamic structure of the day. Children and adolescents, partly psychotic, autistic or with intellectual disabilities, did not have the automaton appearance that you can note in other institutions. Even those who did not speak or wandered with their eyes lost in space avoiding a focal point did not seem lost. Nobody objected, nobody ran away, there were almost never outbursts of anger or screams. None of the teachers – all psychoanalysts – required the presence of the children in the classroom nor was it required to learn according to institutional school curricula. Children and adolescents were simply invited to take their seats – and they did. After that, school hours were spent more like seminars than lectures or tutorials. In addition to language, history, geography, arithmetic, geometry, painting and clay lessons, an important space was given to the narration of fairy tales and myths. This latter activity was entirely oral: the myth was reconstructed thanks to the contribution of those present.

There was something in that place that made both teachers and children want to participate. None of the teachers worried about how and how active, focused, attentive the children were. Their ears, however, were very ready to grasp the interventions of some children which, were more or less understandable, happened continuously in such a setting. Something always occurred: in terms of words, parts of sentences, repetition of names, inarticulate sounds. The teachers never solicited such interventions

directly, let alone commenting on the fact that the child had opened his mouth. They did not comment but participated in the speech that was taking place. The comments were made later when the meetings were resumed with the operators in training who had the opportunity to put questions to the professionals.

In this experience it is possible to grasp an evident criterion: those children had no human desires or had too invisible. It was necessary to encourage them and then not nip them in the bud with inappropriate interventions. They barely spoke and if they spoke it was to repeat over and over again the same strings of words, questions, sentences, speeches without logic or even to talk alone in a corner or facing the wall. However, those materials surprised and suspended in the relationship were pieces of desire-in-waiting to be composed and returned as compounds. Bits of desire on which to build relationships that seemed impossible: materials in the hands and on the minds of teachers. Each case we presented in this paper can be read as based on the common “red thread” of desire to be really human: Temple, Donna, Greta, Riccardo.

On the one hand, simple invitations to take part in the relationship without any pressure or conditioning, on the other, a fluctuating but lively attention, ready to collect even the slightest signs of subjectivity. The meeting with an adult, a teacher, who collects the signs of subjectivity even in cases of autism: this is how the special educational needs of autism at school are configured. Autistic subjects are waiting for someone to arouse their desire to become truly human. Teachers should know that it is possible to have close contact with their autistic students.

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