As John walked among the trees and bushes he stopped often and placed his fingers on the leaves to stroke them. On one occasion he took my hand. Placing two fingers on the leaf he moved them up and down in a gentle stroke. He said not a word, nor did he look at me.

I took him up to bathe him and as he climbed into the bath he lifted out several foam letters and numbers, naming each accurately. I was stunned. He rarely uttered a single word and I pondered on his learning.

I had thought that I had a reasonably good understanding of learning and development in its various forms, both from a psychological and a social perspective. John’s behaviour was causing me to question this. I had known he was different well before his second birthday.

John was a very easy baby. He seldom cried and was happy with his own company. When he went to a play park with his older brother he avoided the company of the other children, preferring to run up and down the perimeter fence, up and down, up and down, steadfastly avoiding the gaze of anyone who looked his way. When he was not running up and down, he would jump up and down, flapping his arms in a tireless way for great lengths of time. He still does this wherever he is and also now jumps tirelessly on his trampoline.

He has fixations for sameness and, for a period, would always take two toys out with him and always of the same colour—or it might change and then, for a prolonged period, they would always be of the same two preferred colours. If one became mislaid he would be inconsolable. Another would not do. He made no effort to relate to those around him unless he wanted something, and then he would often take a hand and move it to what he wanted. His mother once said, ‘I’m sure he can hear me, but it’s as though he just doesn’t understand’. He did, however, have ways of making his desires known, especially to his mother.

At meal times, for example, he would eat exactly the same for each breakfast, day after day, and the same applied to lunch and tea. His diet was severely limited and, if at lunch time she put something on his plate that should have been for tea, he would not touch not only that item, but everything else on the plate—even though that same item could be eaten for tea. At Christmas he ate exactly the same as always for lunch, choosing to sit separately from everyone else and creating a boundaried area for his play. He was generally a happy boy, unless routines were changed and there were unexpected occurrences.

Before his fourth birthday John had been diagnosed with classic autism (APA, 2000), manifesting the key diagnostic features of significant social communication difficulties, narrow interests and repetitive actions, and language delay. Language delay is defined as not producing single words by the age of two, or
phrase speech by the age of three. In classic autism, IQ can be anywhere on the scale and, as he develops, it will become clearer where John’s lies. In contrast, an individual diagnosed with Asperger syndrome would share the first two key features but show no language delay and have at least average intelligence. For further, more detailed profiles of individuals with autistic spectrum conditions read Baron-Cohen (2008), Frith (2008), Notbohm (2005).

In both autism and Asperger syndrome, aspects of learning and development are atypical. Before moving on to look more closely at autism spectrum conditions (ASCs), a few salient points from Jarvis’s work on learning are highlighted here and returned to at the end of this chapter in light of the issues raised. In his early work, Jarvis defined learning as ‘the transformation of experience into knowledge, skills and attitudes’ (1987: 8). This then broadened to ‘the combination of processes throughout a lifetime whereby the whole person – body (genetic, physical and biological) and mind (knowledge, skills, attitudes, values, emotions, meanings, beliefs and senses) – experiences social situations, the content of which is then transformed cognitively, emotively or practically (or through any combination) and integrated into the person’s biography resulting in a continually changing (or more experienced) person (Jarvis, 2009: 25). In his current work Jarvis reconceptualises learning as ‘the way that beings respond to their wider environment’. Critically, he goes on to argue that, ‘all learning must be conscious but what is recognised is that the level of awareness of the situations in which learning takes place can differ and different levels of awareness might produce different learning outcomes’. Jarvis concludes that ‘learning is the processes whereby a being consciousness experiences and responds to the wider environment’ (Unpublished paper). A key distinction that he makes in his elaboration of learning, based on the work of Tomasello (1999): is that between imitation and emulation. Imitation, he suggests, is not simply copying behaviour, but is an attempt to ‘copy the adult’s intentions and the methods by which these are fulfilled’, whereas emulation ‘does not require that the learner seeks to understand the intentions of the person being copied. …’ (Jarvis, Unpublished paper – personal communication 2010). He concludes that, during the first three years of life, there are considerable changes in the brain and that this is the period when the social brain is built as a result of the infant’s involvement in culture.

Three key elements of Jarvis’s work are of particular interest in relation to autism – first, learning as a response to the wider environment; second, that learning must be conscious, but the level of consciousness can differ, leading to different learning outcomes; and third, the distinction between imitation and emulation, with the latter not requiring understanding of the intentions of the person copied. Implicitly and explicitly recognition is given to the importance in learning of the ‘social brain’ and involvement in culture.

What we know about autism and Asperger syndrome

There is no longer any doubt that autism spectrum conditions are biological in origin and there is strongest evidence supporting the genetic theory … . Theories suggesting that autism is caused by purely psychological factors have been refuted by a large body of biomedical research revealing a large set of differences in the autistic brain.

(Baron-Cohen, 2008: 85–86)

Baron-Cohen also states that autism runs in families, with the chances of a second sibling having an autism spectrum condition being about 5–10 per cent and he clarifies that there is no credible evidence that autism is caused by vaccination damage.

The incidence of autism in Britain would appear to have increased dramatically over the last 30 years, rising from 4 in 10,000 to 1 in 100 today. Thirty years ago autism was little known and few diagnoses were made. Also, a categorical definition of autism was used, and only extreme cases were given the diagnosis. Today it has been recognised that the attributes of autism fall on a spectrum or continuum,
which also includes Asperger syndrome and milder forms of autism (Wing, 2003; Frith, 2008; Baron-Cohen, 2008). Many of us in the population show some of the traits of autism – it is not a category of symptoms that sits outside of and separate from the ‘normal population’. It is clear, however, that the symptoms manifest by many in the population cause them distress and disadvantage in very many ways.

To assist in making an autistic spectrum diagnosis a number of screening measures have been developed, based on the criteria found in the Diagnostic and Statistical Manual of Mental Disorders IV (APA, 2000). A number of tests devised by the Autism Research Centre and used in their research can be found at www.autismresearchcentre.com. A diagnosis of classic autism is made for four males to every one female and of Asperger syndrome for nine males for each female. This suggests that sex-related biological factors are linked with the manifestation of autistic traits, possibly connected to pre-natal testosterone levels, but further research is needed before we can move from speculation and theory to a real understanding of the male:female ratio (Baron-Cohen, 2008).

Following a diagnosis of autism or Asperger syndrome (the latter does not usually occur until six years of age and frequently very much later) it is important to keep an open but positive mind regarding potential learning and achievement and not to create ‘glass ceilings’ that serve to inhibit an individual’s development and life chances. These can easily occur due to a lack of understanding of the strengths and difficulties associated with ASCs.

The social difficulties reflected in the diagnosis of autism are likely to include extreme lack of interest in others and a preference to be alone. Linked to this are significant difficulties in knowing how to understand others in terms of their thinking, motivations and moods, that is to say, understanding others as intentional agents. Tomasello (1999) speaks of the nine-month revolution, at which time human infants begin to demonstrate early understanding of the social aspects of their world, and in particular to engage in joint attentional activities, such as following the gaze of another and pointing. Children with autism have difficulty with joint attention and perspective taking and engage very little in symbolic or pretend play.

Both of these require an understanding of others as intentional agents. This lack of understanding makes it very difficult for autistic children to culturally learn from others, which inevitably impacts on how they learn to relate to others and also learn to think about themselves. A range of behaviours may be manifest, reflecting the social and cultural difficulties summarised above. Eye contact may be non-existent or invasive and the capacity to understand and comfort another may be lacking or lack spontaneity. There is also likely to be difficulty in, first, understanding and second, accepting another’s perspective. In terms of language, in addition to the delay in classic autism, there will be a strong tendency to literal understanding of speech; speech may be considered inappropriate to the social context; phrases used by another may be echoed (echolalia); and idiosyncratic words, rather than conventional names for things may be used (neologisms). The latter two are more common in classic autism (Baron-Cohen, 2008).

Repetitive behaviour and narrow interests are common in Asperger syndrome and classic autism, although behaviours such as repetitive jumping and arm flapping such as shown by John, described above, are more common in classic autism. Obsessional interests and highly repetitive behaviour are common and may include watching the same part of a film over and over, putting things in neat lines, collecting very narrowly focussed articles and becoming totally immersed in the activity of the moment. An autistic person may have tantrums or extreme distress if confronted by unexpected changes, or if they are prevented from engaging in repetitive and obsessive behaviour. On the positive side, the capacity for concentration and accuracy relating to very focussed and repetitive tasks is considerable and could be an asset in many situations. Memory can also be unusually good, very often in specific areas such as numbers and dates, names and events. It is interesting to note, however, that the ‘Cognitive Interview’, which is a particular approach to interviewing witnesses to crime that has been demonstrated to effectively increase the number of correct details recalled, has the reverse effect when the witness is on the autistic spectrum (Maras and Bowler, 2010). This is likely to reflect the different information processing and learning styles of those with an ASC compared to neurotypicals.
In addition to the above, many with ASCs have increased sensitivity to smells, tastes, sound, touch and temperature. It is easy to overlook these, yet the distress caused by enhanced sensitivity can be considerable. John went to a pantomime and thoroughly enjoyed the first half, but then the music grew louder and there were loud bangs and explosions. At this point he buried his head in his hands, covering his ears tightly crying ‘turn it off, turn it off, it’s hurting my ears’. He chose to leave, with his mother, having enjoyed the first part of the show. He still talks with great enthusiasm of his trip to the theatre and can’t wait to go again. His sensitivities were taken seriously and he was empowered to manage them. Having his hair cut has also always been an ordeal, especially at the hairdresser. Clippers terrified him, both the sound and the feel, so haircutting happened at home, in an amateur way, but in a ‘John-friendly’ way. True, he looked a little scruffy, but he happily communicated ‘John likes scruffy hair’. When he was ready, he chose to go back to the hairdresser and he was prepared in advance by knowing where he would sit, who would cut his hair and what they would use. The hairdresser was also fully briefed and allowed plenty of time for this particular cut. Communication, the magazine for the National Autistic Society, has published an excellent guide for parents/carers and hairdressers (Seyedi, 2010: 41).

These examples are important. It is very easy for neurotypicals to be judgemental about the lack of understanding and awareness of others shown by those diagnosed with autism, but neurotypicals, who neurologically have a greater capacity to understand the world of another, frequently do not make the effort to understand those with an ASC. There can be an unspoken rule that others should be like us and that any help and opportunities for learning are designed to ‘make the autistic person more like us’. There may be no, or very little, attention given to understanding the world of the autistic person. Baron-Cohen (2008: 46–48) draws attention to the difficulties that may be experienced by a university student with Asperger syndrome whose learning style is more suited to private study using journals, books and electronic media than to lectures and seminars. The latter will involve social groups of varying size, noise and other distractions. They will switch topic and room frequently and require the student to record in edited form what is being said. The student with Asperger syndrome may prefer to work in silence and away from distractions, focus for hours on end on one topic, become very anxious at taking only limited notes and become irritated and anxious by a very social and informal approach to learning. Those with Asperger syndrome will be discriminated against if their style of learning is marginalised in favour of group work, shared experiential learning and other social learning experiences. Wherever possible, those with ASCs should be supported in meeting course learning outcomes in ways that draw on their strengths and complement their personal learning styles. An article in Communication by Rob Crowe (2010: 34–35), a third-year politics student with Asperger syndrome, draws on his experience and outlines for others with an ASC how to deal with and survive freshers’ week, which he describes as the biggest single challenge he experienced socially at university. Crowe demonstrates considerable insight when he draws attention to the importance of knowing your enemy, knowing the rules and knowing how to cope and socialise. In particular, he states that ‘in order to deal with the typical fresher student, you need to understand his/her mindset’ – sound advice not only to those with an ASC, but also to the many other students who find freshers’ week a terrifying ordeal.

Notbohm (2005) published ‘Ten Things Every Child With Autism Wishes You Knew’. The mother of a son with autism, her writing speaks with a child’s voice. She brings to life the many characteristics of autism but adds the additional dimension of the ‘whole child/self esteem issue’. Successes, she writes, are:

firmly rooted in that solid sense of self esteem. Every last person on the planet is a package deal. We want to be accepted and appreciated for what we are as a whole, not a bundle of traits and quirks to be cherry picked at will by others. The child with autism does need skilled guidance to achieve a comfortable place in the larger world, but working towards that goal with positive energy and optimism is not the same as ‘fixing’ the child. They already possess much that can be celebrated: we must
now go out and live and guide them with the same acceptance of whole self that we want for ourselves.

(Notbohm, 2005: xviii)

Notbohm says that, when neurotypicals frame the challenges of autism in neurotypical terms, they unwittingly close the door to the alternative thinking that has everything to do with how far those with ASD can go (Notbohm, 2005: xiii).

She asks us to focus on what the child can do, rather than what they can’t do, reminding us that no child can learn in an environment where they are constantly made to feel that they are not good enough and need fixing. We are asked to view autism as a different ability rather than a disability – for example in regard to the capacity for attention to fine detail and extraordinary focus. In the child’s voice she writes, ‘I might be the next Einstein. Or Mozart. Or Van Gogh. They had autism too.’ (Notbohm, 2005: xxxi).

In looking at learning and autism it is important to consider learning in its widest context, including very particularly learning for healthy and happy living. Autism is a biological, not a mental, health condition, but, because of the nature of autism, it is all too common for individuals to develop mental health problems. Some 70% of children with autism develop mental health problems (Kemp, 2010).

Psychological theories of autism and Asperger syndrome

Although it is now recognised that autism is a neurobiological condition with genetic routes, it is also recognised that social and psychological factors can combine with the predisposing genetic factors to influence the actual manifestation of the condition. It is also likely that other factors such as nutrition and environmental factors have a part to play in exacerbating or relieving symptoms. However, much at this stage is speculation rather than proven.

A number of psychological theories have been put forward to explain the major behavioural characteristics of ASCs, but before elaborating further it is important to remember that these are just theories, not proven facts. In some ways the theories are more like descriptive models, emphasising different aspects of the social and psychological manifestations of ASCs. They do, however, provide a number of useful insights that can help us understand better some aspects of behaviour commonly linked to ASCs. In Kellian terms (Kelly, 1955), these models enable us to behave ‘as if’ they are true – constantly testing and refining our assumptions about autism in the light of our ability or failure to successfully understand and predict the behaviour of those with an autistic spectrum condition. As well as it being important to link these theories to neurophysiology, it is equally important to develop linkages to learning theories and models. A number of links are made in the remainder of this chapter, but considerably more work is required in this area.

The mindblindness theory of autism (Baron-Cohen, 1997) has a particular focus on the social and communication difficulties central to ASCs and proposes that children with ASCs are delayed in developing a theory of mind. As already outlined earlier in this chapter, this means they are unable to put themselves in another’s shoes and to imagine what the other person may be thinking or feeling. This has serious consequences for predicting the behaviour of others and also for managing self in relation to others. The behaviour of others is frequently seen as unpredictable and frightening, whether occurring in real life or in books and films. In contrast to the mindblindness theory, the weak central coherence theory takes account of the narrow interests and restricted behaviour common in ASCs, acknowledges the preference and strengths shown in very detailed information processing and understanding of the parts of something, but also draws attention to a weakness in understanding the wider context or Gestalt. The executive dysfunction theory focuses on the ‘getting stuck in a routine’ behaviours, as well as the lack of inhibition that can occur. It suggests that there is a fault in the executive, high-level decision-making part of the brain found in the frontal lobes which impacts on the capacity to change from routine activity to mindful, carefully thought-through, situationally appropriate activity. Among other things, this can result in a lack of mental
flexibility. Frith (2008) links the various models by suggesting a mismatch between ‘top-down and bottom-up processes’. The ‘bottom-up’ element, she suggests, refers to the delivery or action system and is led by the back part of the brain, but, to be effective, it relies on the ‘top-down’, front region of the brain to make decisions, plan action and to communicate this effectively to the back-end delivery system. The top-down element she likens to the self, suggesting that in autism there is an absence of self. Bearing in mind, however, the perspective of autistic conditions being on a spectrum, then presumably there are varying degrees of absence of the self.

An alternative, but not mutually exclusive, perspective is encompassed within the empathising–systemising theory (Baron-Cohen, 2008), which aims to link the non-social elements of strengths and to broaden the concept of theory of mind to include an emotional reactivity element. This theory attributes social and communication difficulties in ASCs to delays and deficits in empathy, but proposes that intact or superior skills in systemising are reflected in areas of strength. The Empathy Quotient (EQ), established through completion of a questionnaire that has adult, child and adolescent versions (www.autismresearchcentre.com), takes account of cognitive and affective empathy. A further questionnaire is used to establish the systemising quotient. It is the discrepancy between E and S that signals a likelihood of autism or Asperger syndrome. Systemising relates to the capacity to analyse and construct systems. Baron-Cohen suggests that ‘just as a spider cannot help but spin webs – that is what they are evolved to do – so (according to this theory) the person with autism or Asperger syndrome just has to systemize everything. That is how their brain works. The content of their narrow interests reflects how they are strongly drawn to systemizable information’ (Baron-Cohen, 2008: 69).

The empathising–systemising theory reconceptualises repetitive behaviour and narrow interests, seeing them as intelligent and purposeful behaviours and potential strengths. Central to this is a reconceptualisation of ‘learning style’ and cognitive style in ASCs. Those with ASCs have different, but equally valid, learning and cognitive styles. The empathising–systemising theory predicts that, over time, given the opportunity to observe and control all of the variables in a system, excellent understanding of the whole system can be achieved. ‘Seen in this light, it is the neurotypical person who has a difficulty, skating over differences that might be very important. … Premature generalizing is a sign of an unsystematic mind’ (Baron-Cohen, 2008: 70–71).

The empathising–systemising theory can also encompass the extreme male brain theory of autism, since there are clear sex differences in empathising (females perform better) and in systemising (males perform better). Autism and Asperger syndrome can be conceptualised as reflecting the extreme end of the typical male profile (Baron-Cohen, 2008), that is to say, showing a particularly high score on the systemising scale and low on the empathising scale. This may also account for why more males develop ASCs than females.

In keeping with the focus on strengths, the ‘Single Attention and Associated Cognition in Autism’ theory (SAACA), developed by Lawson (2011), focuses on the capacity of AS individuals to focus exclusively and for long periods on a single object or activity. She sees this as a strength, but also believes that it is not a choice for AS individuals to do this, rather it is the way their brains are wired. They have to do it. She distinguishes between the monotropism – single interest and attention – of AS individuals and the polytropism – capacity to focus on multiple things at the same time – of neurotypicals. She believes that the products of monotropism are literality, thinking in closed concepts, lack of appreciation of context and scale, difficulties with timing, sequencing and forward thinking, and inappropriate non-social priorities. She suggests that, as a result of SAACA, individuals learn differently and that to teach them as though they learn in the same way as neurotypical individuals is likely to cause more confusion. ‘The more parents struggle to assist their AS individual in typical ways the more demand the individual may perceive and the higher the distress levels become for all concerned’ (Lawson, 2011: 163). There is a considerable need for research that elaborates further on the specific learning styles of AS individuals and identifies the most effective ways to help them learn.
Many interventions have been developed and publicised for supporting and working with those with an ASC. Some of these will have a good track record in terms of effectiveness and evidence to support this. Others will not and may even be harmful. The charity Research Autism has created a website (www.researchautism.net) that lists interventions, giving each a rating based on rigorous evaluation. The list includes interventions such as art and music therapy, speech and language therapy and a wide range of educational services. These include intensive behavioural interventions such as ABA (Applied Behavioural Analysis); TEACCH (Treatment and Education of Autistic and Communication-Handicapped Children); social skills teaching; and mindreading. A particularly popular approach to teaching mindreading to children is the use of The Transporters DVDs, in which the main characters, vehicles that move in systemised ways, each have facial expressions of emotions (Baron-Cohen, 2008). Much has been written by Attwood on the development of skills by those with ASCs. One particularly important area that he addresses is those skills needed for the development of friendships (2002).

What the above models show us is that the challenge to learning theorists is to develop theories and models of learning that take account of individual differences, including the extreme differences in learning and cognitive style manifest by those with an autism spectrum condition. Such models, as well as being inclusive of the autistic population, are also likely to take better account of the vast differences among neurotypicals. Experience tells us that we all sit somewhere different on the theory of mind continuum as we do in relation to information processing, analytical and critical thinking and system building, for example.

Maximising learning

To maximise the learning opportunities for those with an ASC requires that good services are available and that the underpinning mindset of carers, educators and the wider community is inclusive and non-prejudiced. Inclusive in this context does not mean that all with an ASC should go to mainstream schools rather than have specialist facilities available – it means that the approaches to learning and teaching adopted, including the philosophical, social and psychological underpinnings, should take account of the needs and strengths of those with ASCs. It also means that the models of learning developed by educators should have equal meaning and worth to those with an ASC as to neurotypicals. This should apply to learning opportunities in all contexts, not just formal school, college and university education and should, for example, include workplace learning, of both a formal and informal nature. In a work setting, as in others, it is important that learning opportunities should be designed to bring out the best in everybody – to play to the strengths of individuals rather than their weaknesses. Everyone needs to be valued for who they are and what they can contribute, and appropriate learning opportunities, including appropriately tailored coaching, should be available for those on the autistic spectrum (Barnett, 2009).

In 1922 Rudolph Steiner (2004) gave a series of lectures at Mansfield College, Oxford relating to the ‘Spiritual Ground of Education’. On August 31st, after the conference was over, The Guardian reported:

Dr. Rudolf Steiner’s lectures, for which we express our very special thanks, brought to us in a very vivid way an ideal of humanity in education. He spoke to us about teachers who, freely and unrestricted by external prescriptions and regimentation, develop their education methods exclusively out of thorough knowledge of human nature. He spoke to us about the kind of knowledge needed by the teacher, a knowledge of the being of man and the world, which is at the same time scientific and also penetrates into the most intimate inner life, which is intuitive and artistic.

(Steiner, 2004: vii)

In his lectures Steiner spoke of the kind of knowledge that assures genuine insight into the inner texture of childhood life, suggesting that devoted, unprejudiced observation of life goes a long way in bringing about
such understanding (2004: 5). His words will resonate with many educators, but, in terms of inclusiveness, they must apply equally to all children, including those with ASCs, wherever they may be learning. Children and adults with ASCs are likely to have learning styles that do not conform to the average and in many cases they will be sufficiently extreme to be unfamiliar to the teacher. Personal conversations with teachers providing special support to those with ASCs suggest that there are still far too many teachers who have no special knowledge or patience with these pupils and who believe that their standard approach is acceptable for all children, including those with ASCs, who must conform and adapt to this.

Positive psychology

Nothbohm reminded us of the importance of self esteem for learning. This is reinforced by Goodchild (2009), who in a captivating way describes his own journey as a ‘soul with autism’. He brings to life the tragic consequences of late diagnosis (he was not given his diagnosis of Asperger syndrome until in his 40s), suffering, being humiliated and permanently feeling an outsider with his parents, at school and every other walk of his life. He learnt to ‘act’ normal when with others, taking on the persona of others, but the mental and physical exhaustion this produced led him to the verge of suicide. Mental health problems scarred him physically and mentally, and it was only after his diagnosis, when he learned that he had a valid personality type and learning style and that he was not alone with this, that he could start to celebrate who he truly was. Socially and psychologically Goodchild’s experience of life was tragic and avoidable. The positive psychological experiences that research (Seligman, 2002) has shown us we all need were sadly lacking to the extreme in his life. We all need these positive experiences, but the challenges to achieving them through living and learning for those on the autistic spectrum are multiplied. They need parents, carers, teachers and others, including those they meet in a casual day-to-day way, who accept them, value them and help to promote their learning, both formal and informal, in constructive and humane ways.

Many prominent psychologists have focussed on what is now the subject matter of positive psychology. An excellent review can be found in Boniwell’s book, Positive Psychology in a Nutshell (2008). Positive psychology is a distinct move away from the predominant focus for many years on abnormal psychology and mental illness. Instead, it researches the value of nurturing strengths and positive experiences, which can have a long-lasting effect on our personal growth and development (Fredrickson, 2001; Seligman, 2002). Optimism, hope, self-acceptance, autonomy, positive relationships and a purpose in life can all contribute to a sense of personal wellbeing and happiness and act as buffers against the difficulties in life that put us at risk of mental and other illnesses. They can open the door to positive learning experiences, but, most importantly, they can also be the outcome of them. There is still much to be learnt regarding how to live our lives in a psychologically positive way, and those with ASCs need particularly skilled help in doing this. There is a need for further research and training that can be applied by all those involved in supporting the learning of those on the autism spectrum.

Raising children, I knew now, was far more than just fixing what was wrong with them. It was about identifying and amplifying their strengths and virtues, and helping them find the niche where they can live these positive traits to the fullest.

(Seligman, 2002: 28)

Living in flow

Core to positive psychology is the concept of ‘flow’. Initially researched and written about by Csikszentmihalyi (1992), it was later widely publicised and applied by Seligman to the achievement of positive emotions and happiness.
The state of flow occurs when we find ourselves doing exactly what we want to be doing and never wanting it to end. Challenge and skills are well matched, so that we are neither bored nor anxious. We have deep and effortless involvement requiring our full concentration. We have a sense of control, our sense of self vanishes, and time stops. Salient by its absence on the list of essential components is positive emotion. Whilst these may be mentioned in retrospect, during a flow experience there is an absence of emotion and any kind of consciousness.

Gratification dispels self-absorption, and the more one has the flow that gratification produces, the less depressed one is. (Seligman, 2002: 119)

Jarvis also refers to the state of flow – ‘In the state of flow individuals are in such harmony with their external world that they do not need to worry about it – they feel “at home” – and so they can concentrate entirely on their immediate tasks’ (2010 unpublished paper – personal communication). One way of construing the habitual and repetitive behaviours common to those with ASCs is to consider them to reflect a state of flow. Flow experiences are gratifying and can have very positive outcomes, but can have addictive qualities.

However, Csikszentmihalyi (in Boniwell, 2008: 28) was aware of the dangers of flow and wrote ‘enjoyable activities that produce flow have a potentially negative effect: while they are capable of improving the quality of existence by creating order in the mind, they can become addictive, at which point the self becomes captive of a certain kind of order, and is then unwilling to cope with the ambiguities of life’.

For individuals who experience acute ambiguity and confusion in their everyday living, flow-inducing activities will be likely to play a critical role. They have a purpose and to overlook these in an attempt to remove what could be construed as purposeless and unsociable behaviours could put at even greater risk already very vulnerable individuals. This comes through very strongly in Goodchild (2009) when he describes his huge need to engage in behaviours that he knew were totally unacceptable to those around him.

Concluding thoughts

Finally, returning to Jarvis’s definition of learning and the three key points raised earlier, we can see that it has relevance for understanding and working with those with ASCs, taking account of a wide spectrum of similarities and differences. Like the definition of autism now being seen not as a definitive category of ‘being’, but a wide spectrum of personality and learning type, the same applies with learning. The criteria outlined by Jarvis create a wide spectrum on which we can all be placed. Our level of consciousness/awareness of different situations will vary and this can be biologically as well as socially influenced. Likewise, the level of social development and knowing will vary. To imitate rather than to emulate another person becomes very difficult when you are unable to understand the intentions of the other, so there is likely to be greater emulation – as seen in echolalia for example – shown by those with ASCs than by the wider population. Returning to the life of Goodchild (2009), he had become a very skilled emulator, but at great personal cost. A superficial, behavioural fix-it approach to learning provided short-term utility, but taken alone was limited in value and even dangerous. As we have seen above, construing those with an ASC as being in ‘flow’ in respect of many of their naturally occurring behaviours indicates the care that must be taken in understanding these and in seeking ways to help the individual to select and learn safe and fulfilling alternatives. This must be done in the context of recognising and valuing an individual’s strengths and building on these, whilst paying attention to the whole person and working positively to support the development of a happy and fulfilled individual.
In conclusion, the words of Gillibrand (2010) are turned to. Gillibrand is the father of a son severely disabled with autism and in his book on the implications of autism for philosophy, theology and politics he challenges Feldman’s statement and vision of what humanity is – ‘The belief in human beings as social individuals, beings for whom both sociability and individuality are essential parts of their make up, is ultimately a deontological belief (Feldman, 2002 in Gillibrand, 2010: 172). ‘This notion is totally alien to Gillibrand, who states that it belongs to a different world to the one that he inhabits. Bearing in mind that Feldman’s statement was made in the context of ‘human rights’, it is perhaps not surprising that Gillibrand should draw a sharp distinction between that which disables his son and that which belongs to his disability.

In the foreword to the book, Dr Rowan Williams (2010: 9–10) states that:

‘This is a book about living at the edge of what makes sense. … much of our language about human dignity and human value still carries a coded assumption about what a human being ‘really’ is, … refusing to accept our failure to make sense is what damages our thinking and feeling about people like his son, Adam. … we jeopardise human dignity most when we try to bind it to the characteristics we can recognise and value and understand as mirroring only our own faces. … The harder labour is seeing ourselves in the person who is genuinely and painfully other.

As educators and learning theorists, it behoves us all to remember this.

Notes
1 John’s name has been changed. Thank you, John’s parents, for allowing me to use this information.
2 When using my own voice, I use the term autism spectrum conditions (ASCs), as used by Baron-Cohen (2008), in preference to autism spectrum disorders. It feels a presumption and a value judgement to consider all on the spectrum to be disordered. Reference to a condition is a more neutral statement.

References
Mary Watts


