**Chapter 2**

**LANGUAGE GAMES USED TO CONSTRUCT AUTISM AS PATHOLOGY**

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**Abstract**

Following the work of Ludwig Wittgenstein, we risk misunderstanding something as a result of failing to notice logical errors in language used to describe it. In this chapter I introduce and discuss examples of errors that appear to have been difficult for neurotypical people to identify. I argue that an autistically neurodivergent perspective on language use is valuable in identifying the logical errors in language that concerned Wittgenstein. I also argue that a failure of neurotypical society to appreciate that societal language games are, by definition, neurotypical language games can have adverse consequences where autism is concerned because of the inevitability of cultural biases in favour of neurotypicality. Some of these adverse consequences relate to ethical consideration of research to cure/prevent autism.

Ludwig Wittgenstein counselled against the bewitchment of our intelligence by means of our language, by which he meant that we risk misunderstanding something as a result of failing to notice logical errors in language used to describe it. Some scholars believe that autistic thinking is more individualistic and less likely to be stuck in the rut of conventionality. So an autistically neurodivergent perspective on language use is valuable in identifying the bewitchment of intelligence that concerned Wittgenstein. I also argue that a failure of neurotypical society to appreciate that societal language games are, by definition, *neurotypical* language games has adverse consequences for autistic people because of the inevitability of cultural biases favouring neurotypicality. The philosopher Sandy Grant has written that ‘as long as there is language it will bewitch us, we will face the temptation to misunderstand. And there is no vantage point outside it. There is no escape from language-games then, but we can forge a kind of freedom from within them’[[1]](#footnote-1). Might it be possible for an autistic person to escape a neurotypical language game – and all language games *are* neurotypical – and observe it from an external vantage point?

Wittgenstein introduced the concept of language games. Various of his ideas - including the language game concept – are relevant to an understanding of autism. A language game is the language associated with a particular activity which gives the activity its meaning. For example, the job interview is an activity where language is used in special ways. When an interviewer asks an interviewee to talk about their weaknesses, both parties should know that the response has to demonstrate self-awareness on the part of the interviewee; to provide a detailed description and analysis of weak points would be to misunderstand this particular language game. It is my view that the term “language game” does not do full justice to Wittgenstein’s intention because it implies a sole focus on language rather than the social interaction of which language is a part (albeit a very important part). Szasz refers to the ‘game-playing model of human behavior’ (Szasz, 2010, p. 250) and to the importance of ‘rules’[[2]](#footnote-2) in human social interactional game-playing. I believe this is what language games are about.

While neurotypical language relating to autism inevitably reflects neurotypical perspectives on autism, societal understandings of autism will benefit from autistic perspectives which reflect the lived experience of autism. For instance, many autistic people consider that the monotropism theory of autism – developed by two neurodivergent scholars – describes what it is like to be autistic better than any other theory (Murray, Lesser and Lawson, 2005). And the double empathy hypothesis (Milton, 2012) – which draws attention to the bi-directional nature of the difficulty autistic and non-autistic people often have understanding each other – was also developed by a neurodivergent scholar. In addition to the language game concept, I draw attention to Wittgenstein’s counsel against bewitchment of our intelligence through misuse of language. On occasions, and perhaps due to the subtlety of language, we draw conclusions that appear sound but that on investigation are found to be illogical. For example, the concept of the broader autism phenotype – which is thoroughly embedded in medical understandings of autism – is based on the illogical assumption that a cluster of traits used to screen for autism, and that any human being may present with, are somehow “autistic traits” indicative of a sub-clinical presentation of autism in the general population known as the broader autism phenotype (Chown, 2019). This chapter begins a Wittgensteinian analysis of aspects of societal language use to demonstrate the value of a neurodivergent perspective in the identification of researcher misunderstandings of aspects of autism with the potential to influence ethical consideration of research to cure/prevent autism adversely.

Firstly, it will be demonstrated that a failure to appreciate that societal language games are *neurotypical* language games can have adverse consequences where autism is concerned because of the inevitability of cultural biases in favour of neurotypicality. Secondly, it will be demonstrated that misuse of language can give rise to false beliefs about autism that may become embedded as received opinion in language games. In the first situation, the value of ‘missing’ neurodivergent perspectives will be shown directly. In the second situation it is contended that more individualistic (and possibly also more logical) thinking styles in autism may enable identification by autistic scholars of language misuse that might otherwise remain hidden as the thought processes of autistic people are less likely be influenced by pre-existing conceptual frameworks.

A substantial amount of autism research and its associated funding and publicity is focused on genetics, neuroscience, and the search for a cure (Pellicano, Dinsmore, & Charman, 2014). Although there has been considerable discussion of ethical matters in the autism research literature, most of this discussion refers to what one might call “micro” ethical subjects such as informed consent and anonymisation. These subjects are important but of no relevance to an investigation of the ethics of research to eradicate autism. This is because discussion of "micro" ethical subjects presupposes that the research being undertaken is research that is ethically valid. I describe a fundamental issue, such as whether a particular type of research should be undertaken at all, as a "macro" ethical subject. Researchers rarely, if ever, discuss their justification for undertaking their study. There has been very little discussion of the ethics of autism cure/prevention in the literature (Bovell, 2015). Virginia Bovell’s work is one of only two thesis-length discussions of this subject. She notes that there has been very little attempt to define the terms “cure” and “prevention” in relation to autism. Pursuance of a cure for autism has been problematised on ethical grounds by only a limited number of scholars. For instance, Majia Holmer Nadesan has written of the ‘latent dangers lurking in a geneticization of autism devoid of environmental mediation’ as well as the ‘potential for … prenatal testing potentially ushering in a new eugenics’ (Nadesan, 2013, p. 137).

Wittgenstein’s view of moral justifications is summed up well in the following quotation:

Nothing we can do can be defended absolutely and finally. But only by reference to something else that is not questioned. I.e. no reason can be given why you should act (or should have acted) *like this*, except that by doing so you bring about such and such a situation, which again has to be an aim you accept.’

(Wittgenstein, Culture and Value, op. cit., 16, author’s italics)

If, like me, you believe him to be correct that there are no categorical imperatives or deity-given moral compasses, and therefore no absolute and final justification for what one does (and doesn’t do), you will also agree with me that those who advocate eradicating autism must accept its eradication as a justifiable aim *per se.* This is presumably because in their view it is a disorder, and disorders are, by definition, harmful, and thus at odds with living a good life. It seems that most of those who would eradicate autism if they could, undertake their research on the basis of an aim they accept as a “given”, or at least without being willing to be transparent about their justification. Pellicano and Stears (2011) tell us that scientists defend the spending of the vast majority of autism research funds on research into genetics and neuroscience on the basis that: (1) identifying children at risk for autism before they show signs of autism will enable much earlier intervention than is currently the case, and (2) there will be medical benefits to improve the health of autistic individuals. If, indeed, these are the main defences used to justify such research, they appear disingenuous. This is due to the apparent focus on benefiting autistics being in clear contrast to the emphasis on seeking a cure for autism – sometimes expressed as “prevention” – of funding bodies such as the National Alliance for Autism Research, Cure Autism Now, and Autism Speaks. Bovell (2015, p. 49) writes that ‘sometimes the purpose of [autism] investigations falls short of any kind of articulated explanation beyond a “knowledge for knowledge’s sake” perspective’ which holds that ‘potential benefits are somehow self-evident’ (ibid., p. 50). She concludes that much autism research is based on autism being a “bad thing” and cure a “good thing”.

Where scientists justify research with the potential (if not the specific aim) of eradicating autism or other categories of neurodivergence, on a simple belief in the importance of seeking a cure for diseases and mental disorders, the issue is that it is not at all clear that these categories *are* mental disorders or are *always* mental disorders. Many autistic self-advocates and others have put forward a case that autism is neurological difference coupled with societal oppression as understood by the social models. Whilst the language game associated with the “cure” of diseases and disorders is uniformly positive, as indeed it should be, the inclusion of a phenomenon within the diagnostic manuals giving legitimacy to the search for a cure, is a matter for both political and scientific debate (Kapp, 2019). This can lead to the inclusion of diagnoses in the manuals that are categorically *not* diseases or disorders, with all the adverse consequences of such bad decision-making. One only has to consider the situation regarding gays and lesbians to appreciate that inclusion of a so-called disorder in a diagnostic manual can be problematic. Certain sexual orientations were included in the Diagnostic and Statistical Manual of Mental Disorders until as recently as 1987 and it was another three years before the World Health Organization removed the same orientations from their International Classification of Diseases (ICD-10). Debates about sexuality then shifted from psychiatry into the moral and political spheres as institutions could no longer justify discrimination against gay and lesbian people on the basis of (supposedly) scientific arguments used to pathologise them. Drescher writes that ‘Most importantly, in medicine, psychiatry, and other mental health professions, removing the diagnosis [‘homosexuality’] from the DSM led to an important shift from asking questions about “what causes homosexuality?” and “how can we treat it?” to focusing instead on the health and mental health needs of LGBT patient populations’ (ibid., p. 572). Neurodiversity advocates would like to see similar developments in relation to autism. Whilst many advocates support the search for a cure for conditions co-occurring with autism (co-morbidities) such as anxiety, gastrointestinal disorders, sleep disorders, and epilepsy (ibid.), that is because – unlike autism itself – they do not regard these as being core to the very nature of their being.

There have only been a limited number of investigations into the ethics of eradicating autism to date (e.g., Anderson, 2013; Barnbaum, 2008; Barnes and McCabe, 2011; Bovell, 2015; Chapman, 2019b; Pellicano & Stears, 2011; Walsh, 2010). These authors all take an anti-discriminatory, anti-eradication stance except for Barnes and McCabe[[3]](#footnote-3), whose work is an investigation of the issue of choice (whether a cure should be made available for those who want one), and Barnbaum who writes that there is ‘something intrinsically limiting in an autistic life’ and appears to support the eradication of autism (Barnbaum, 2008, p. 154)[[4]](#footnote-4). Anderson considers autism to be a valid identity and possibly even to have given rise to a culture. Walsh has challenged those who would prevent disability coming into the world, pointing out that preventing Asperger syndrome would of necessity mean that the exceptional abilities associated with it would be lost to society. Liz Pellicano and Marc Stears set out an ethical objection to cure and prevention of autism but, importantly, one that only applies in the context of *living individuals*. Robert Chapman challenges the assumption underlying the dominant view of autism that it is inherently at odds with the ability to lead a good life. He concludes that there is no ‘decisive reason to think that being autistic, in and of itself, is at odds with either thriving or personhood’ (Chapman, 2018, p. 1). Bovell considers that research to cure/prevent autism is ethically indefensible. After unpacking the issues surrounding the ethics of curing/preventing autism she concludes that ‘reference to prevention and/or cure as a desirable *general* goal[[5]](#footnote-5) is neither clinically/scientifically coherent nor morally legitimate’ (Bovell, 2015, p. 364, author’s italics). Her point that ‘To talk in approving terms about prevention and cure implies that a world where there are no more autistic people would be a better world’ (ibid., p. 364) is the thinking that lay behind the call for scientists engaged in research to cure and/or prevent autism to justify the ethical validity of their work (Chown and Leatherland, 2018)[[6]](#footnote-6).

As already stated, the fundamental point here is the vexed question as to what autism is; is it a mental disorder or disease or a natural human difference. Bovell calls this the “analogy challenge” as both positive analogies and negative analogies have been drawn in relation to autism. There is no definitive answer to this question as yet. Many autistic scholars believe that no researcher should ever assume that it is appropriate to seek to destroy any aspect of humanity without societal acceptance of the justification for their work, an acceptance that must be based on the most thorough of investigations and debates because the very survival of a category of people depends upon it. My aim here is to indicate how a Wittgensteinian grammatical perspective can uncover hidden instances of language bewitchment of relevance to the undertaking of autism cure/prevention research. The relevance arises from the risk of misleading our attempts to understand what autism is. This can lead to situations where issues become separated from concerns about their morality. Baumann refers to such separation as “adiaphorization” which he defines as ‘stratagems of placing, intentionally or by default, certain acts and/or omitted acts regarding certain categories of humans *outside* the moral-immoral axis – that is, outside the “universe of moral obligations” and outside the realm of phenomena subject to moral evaluation’ (Bauman, 2013, p. 40, author’s italics). He says that exemption of adiaphoric acts from ethical consideration due to social consent enables those acts to be committed without those involved facing any moral stigma or needing to worry their consciences about them. Scholars’ failure to discuss the ethics of their research, and society’s failure to call scholars to account for their failure, is adiaphorization. The ethics of autism research must be brought into the “universe of moral obligations”. Wittgenstein argued that certain aspects of language use can bewitch our intelligence. This chapter discusses examples of language misuse giving rise to false beliefs about autism.

## Wittgensteinian grammatical investigation of autism language

By taking steps to avoid language-games “bewitching our intelligence” we will be in a better position to see concepts for what they really are, not what they appear to be when language clouds the understanding. A Wittgensteinian grammatical investigation [[7]](#footnote-7) involves an exploration of a language game and the rules governing it, not an investigation of language structure. His primary focus was on the confusions that misuse of words can cause. This chapter discusses examples of language confusion that impact upon debates relating to the ethics of autism because they give rise to false beliefs about autism: neurotypical[[8]](#footnote-8) language games[[9]](#footnote-9); illogical language moves; and confusing language.

### Neurotypical language games

Milton’s double empathy hypothesis argues that communication difficulties between neurotypical and autistic people are bi-directional in nature. Hughes (2019) refers to such difficulties as reciprocal misunderstandings. If arguing that misunderstandings on the part of autistic people arise from a cognitive defect associated with autism, it could be argued on the basis of double empathy that the difficulties neurotypical people have understanding autistic people is due to a cognitive defect in neurotypicality. Alternatively, the difficulties autistic and neurotypical people have in communicating with each other could be due to society’s language games being neurotypical language games based on neurotypical understandings of autism.

Firstly, let us consider an issue arising from a medical language game taken from Bovell (2015, p. 280). She writes that ‘engaging with the community of people who are most affected and able to reflect on [intervention practices] is likely to be essential, given the sorry history of autism having been drastically misunderstood by “outsiders” in the past’. Examples of misunderstandings include autism being caused by poor mothering (Kanner/Bettelheim); autism involving social isolation (Kanner); autism only affecting children (Kanner); autistic people being intellectually disabled; autistic individuals being unable to feel or express emotions; all autistic people lacking empathy and/or theory of mind. There are many more myths and misunderstandings, and they have probably all been perpetuated by non-autistic scholars who have just as much difficulty empathising with autistic people as vice versa[[10]](#footnote-10) (Chown 2014; Milton, 2012). Milton and Bracher (2013) argue that the absence of autistic voices from work to generate knowledge about autism results in both epistemological and ethical problems as non-autistic people cannot have lived experience of being autistic. Unless and until medical language games of autism are allowed to develop with contributions from autistic scholars, they will remain prone to perpetuating misunderstandings about autism that impact theory and practice.

Let us now consider a cultural language game. Sarah Pripas-Kapit (2020, p. 25) writes that whilst ‘authors such as Temple Grandin and Donna Williams introduced mainstream audiences to the concept of autistic people narrating their own experiences, their works still relied on ableist ideas about autism promoted by non-autistic scientific “experts” and parents. They positioned autism as a tragedy’. She points out that Sinclair, who had a thorough understanding of parental perspectives on autism, challenged the assumption that autism is always tragic and that parental grief for the “loss” of the expected child is the inevitable result of autism. The “autism as tragedy” trope is an example of a cultural perspective on autism inextricably linked with neurotypicality[[11]](#footnote-11), and with which most autistic self-advocates would disagree. Parents of autistic children have contributed to the development of the neurodiversity movement, and some autistic individuals agree with the tragedy trope, so it is wrong to speak of necessarily opposed neurotypical and autistic attitudes. However, with cultural attitudes towards autism having developed in a neurotypical society where cure and prevention discourses are prominent, the language games of autism have inevitably developed in accordance with neurotypical society’s cultural biases. Autistic self-advocates and the developing autistic online culture are effecting some change to this situation but unless and until autistic viewpoints are accepted as valid this cultural bias will continue[[12]](#footnote-12).

### Illogical language moves

It is argued that those who believe in the existence of a broader autism phenotype (BAP) are led astray by misuse of language (Chown, 2019). Human traits indicative of autism are included in a screening cluster for a good reason – that there is a strong indication of autism if an individual has the cluster traits – but scholars then generally make the unjustified leap into thinking that having some of the cluster traits implies the existence of a broader autism phenotype of individuals who do not justify a diagnosis of autism but have a sufficient number of its features to be … what? The BAP concept appears so nebulous that it is difficult to devise a suitable descriptor for people supposedly in this category other than “member of the BAP” which says nothing. How many of the criteria in an autism screening cluster would a person need to qualify for membership of a BAP rather than them being undeniably non-autistic, and what would the cut-off point be for actually being autistic? Including certain traits in a diagnostic cluster for autism does not mean that individuals with some, but not all, of these traits are in a “somewhat, but not fully, autistic” category. Those who believe this have been bewitched by the hidden transition from “human trait associated with autism” to an “autistic trait” that implies a degree of autism[[13]](#footnote-13), whatever this may mean. Human beings can present with any combination of human traits. So human traits in a diagnostic cluster for autism may be seen in non-autistic people. This does not imply that these individuals are not autistic enough to justify a diagnosis of autism, whatever this may mean. It is simply that they have some of the human traits used to diagnose autism because at present we have no better means of diagnosing autism than by using (a cluster of) behavioural criteria (ibid.).

### Confusing language

Here again, let’s consider two examples. Firstly, there is an example of the reification of a piece of confusing language in autism that Bovell has discussed. She points to the crucial distinction between treating a co-morbidity and treating autism itself, writing that ‘in the treatment vs acceptance debate, much of the defence of the pro-treatment group rested on their emphasis on co-morbidities that could/should be treated, and their rejection of the idea that painful co-morbidities should be “accepted” rather than challenged’ (2015, p. 275). As mentioned earlier, this position would be accepted by most autistic advocates. Pro-treatment groups usually call for treatment of associated health needs, not autism itself. But “treating autism” is a far handier descriptor than, say, “treating medical conditions associated with autism”. In other words, what began life as a headline-grabbing form of words designed to attract attention, can become something it was never intended to be i.e., a statement that autism *itself* should be treated. Of course, “treating autism” may mean exactly that in some cases; my point is that it sends a wrong message when it does not mean what it says.

The second example is also sourced from Bovell and is an example of how crude language can over-simplify debate by concealing its underlying complexity. In relation to the impact of the problematic aspects of autism on families such as sleep deprivation and challenging behaviour[[14]](#footnote-14), she stresses that ‘Given the heterogeneity of autism, and indeed of families, there are multiple different narratives in which problems …. either do not feature, or feature only at a particular point in time, and which in any case are perceived as being compensated for by some of the benefits that an autistic family member will bring’[[15]](#footnote-15) (ibid., p. 288). She refers to the crude “disabled vs non-disabled” debates relating to autism which serve to conceal the complexity resulting from such heterogeneity. In the same way that I have drawn attention to the complexities between NT and autistic perspectives on autism, scholars should avoid crude binaries which cannot reflect the heterogeneity of attitudes to autism.

## Conclusions

Overcoming ‘an instance of moral blindness – when one comes to see the moral salience of something one did not see before’ – requires moral perception (Wisnewski, 2007, p. 123). Baumann (in Baumann & Donskis, 2013) refers to situations where issues become separated from concerns about their morality which enables acts to be committed without those involved facing any moral stigma or needing to worry their consciences about them. It is my contention that the failure of most scholars working towards the cure/prevention of autism to openly discuss the ethics of their research, and the failure of society to call these scholars to account, is an example of both the separation Baumann refers to and a failure of moral perception. University ethics committees should cover the macro issue of whether or not curing/preventing autism is morally acceptable as well as the usual micro issues. Society should insist on full debates about *all* ethical issues relating to autism research.

No valid case has yet been made that the health of the social body requires the amputation of the autistic parts of the body (c.f. Bauman & Donskis, 2013). Work to remove autism from the social body should not proceed in the dark space of a moral vacuum; such a fundamental issue must be brought out into the clear light of day. To ensure ethical matters in autism research are given the attention they are due, I recommend that:

1. all autism research projects should undertake an ethical impact assessment (EIA) for consideration by the university’s ethics committee;
2. university ethics committees should make these impact assessments, and their deliberations on them, publicly available.

These recommendations are in line with the approach taken to ethical matters by the Human Brain Project (HBP) which ‘Recognizing that its research may raise various ethical … issues, the HBP has made the identification, examination, and management of those issues a top priority’ (Salles et al., 2019, p. 380). The issues referred to include the values that inform, and the *ethical permissibility* of, research.

Virginia Bovell (2015, p. 86) writes that ‘a crude perspective on autism, either as something that is bad and should be eliminated, or as something that is good that should be celebrated, does not do justice to the complexity of human experience’. The challenges faced by some autistic people, and their carers, must not be ignored. But we should also reflect on the fact that non-autistic individuals can pose serious challenges. In the same way that I have no qualms in saying out loud that the apparently non-autistic Donald Trump presents a clear and present danger to civilised society, I consider the campaigner Greta Thunberg[[16]](#footnote-16) – who has spoken[[17]](#footnote-17) of the autistic strengths which she believes have enabled her to take on a climate change activist leadership role at a young age – to be a wonderful asset to society.

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## References

Anderson, J. L. (2013). A Dash of Autism. In J.L. Anderson & S. Cushing (Eds.), *The Philosophy of Autism* (pp. 109–142). Plymouth: Rowman and Littlefield.

Barnbaum, D.R. (2008). *The ethics of autism: Among them but not of them*. Bloomington, IN: Indiana University Press.

Barnes, R.E., & McCabe, H. (2012). Should we welcome a cure for autism? A survey of the arguments. *Medicine, Health Care and Philosophy*, *15*(3), 255-269.

Bauman, Z., & Donskis, L. (2013). *Moral Blindness: The Loss of Sensitivity in Liquid Modernity*. Cambridge, UK: Polity Press.

Beardon, L. (In press). *Autism and Asperger Syndrome in Children*. London: SPCK Publishing.

Bovell, V. (2015). *Is the prevention and/or cure of autism a morally legitimate quest?* (Doctoral thesis, University of Oxford).

Chapman, R. (2018). *Autism, Neurodiversity, and the Good Life: On the Very Possibility of Autistic Thriving* (Doctoral thesis, University of Essex).

Chapman, R. (2019a). Autism as a Form of Life: Wittgenstein and the Psychological Coherence of Autism. *Metaphilosophy*, *50*(4), 421-440.

Chapman, R. (2019b). Neurodiversity Theory and Its Discontents: Autism, Schizophrenia, and the Social Model of Disability. In R. Bluhm (Ed.), *The Bloomsbury Companion to Philosophy of Psychiatry* (pp. 371–390). Bloomsbury Academic.

Chown, N. (2014). More on the ontological status of autism and double empathy. *Disability & Society*, *29*(10), 1672-1676.

Chown, N., & Leatherland, J. (2018). An open letter to Professor David Mandell, Editor-in-Chief, ‘Autism’ in response to the editorial ‘A new era in autism’. *Autonomy*, *1*(5).

Chown, N. (2019). Are the “autistic traits” and “broader autism phenotype” concepts real or mythical? *Autism Policy and Practice, 2*(1).

Drescher, J. (2015). Out of DSM: depathologizing homosexuality. *Behavioral Sciences*, *5*(4), 565-575.

Forster, M.N. (2009). *Wittgenstein on the Arbitrariness of Grammar*. New Jersey: Princeton University Press.

Hacking, I. (2010). How We Have Been Learning to Talk About Autism: a Role For Stories. In E.F. Kittay & L. Carlson (Eds.), *Cognitive Disability and Its Challenge to Moral Philosophy*. Wiley-Blackwell.

Hart, B. (2014). Autism parents & neurodiversity: Radical translation, joint embodiment and the prosthetic environment. *BioSocieties*, *9*(3), 284-303.

Hens, K., Peeters, H., & Dierickx, K. (2016). Shooting a moving target. Researching autism genes: an interview study with professionals. *European Journal of Medical Genetics*, 59(1), 32-38.

Hens, K., Peeters, H., & Dierickx, K. (2016). The ethics of complexity. Genetics and autism, a literature review. *American Journal of Medical Genetics Part B: Neuropsychiatric Genetics*, 171(3), 305-316.

Hughes, J.M.F. (2015). *Changing conversations around autism: A critical, action implicative discourse analysis of US neurodiversity advocacy online* (Doctoral thesis).

Kapp, S.K. (Ed.) (2020). *Autistic community and the neurodiversity movement: Stories from the frontline*. Palgrave Macmillan.

Little, M.O. (2001). Wittgensteinian lessons on moral particularism. In C. Elliott (Ed.), *Slow cures and bad philosophers: Essays on Wittgenstein, medicine, and bioethics*. Durham: Duke University Press.

Milton, D.E. (2012). On the ontological status of autism: the ‘double empathy problem’. *Disability & Society*, *27*(6), 883-887.

Milton, D.E. (2014). Autistic expertise: a critical reflection on the production of knowledge in autism studies. *Autism*, *18*(7), 794-802.

Milton, D., & Bracher, M. (2013). Autistics speak but are they heard? *Medical Sociology Online*, *7*(2), 61-69.

Murray, D., Lesser, M., & Lawson, W. (2005). Attention, monotropism and the diagnostic criteria for autism. *Autism*, 9(2), 139-156.

Nadesan, M. (2013). Autism and genetics profit, risk, and bare life. In J. Davidson & M. Orsini (Eds.), *Worlds of Autism: Across the Spectrum of Neurological Difference* (pp. 117-142). Minneapolis, MN: University of Minnesota Press.

Pellicano, E., Dinsmore, A., & Charman, T. (2014). What should autism research focus upon? Community views and priorities from the United Kingdom. *Autism*, 18(7), 756-770.

Pellicano, E., & Stears, M. (2011). Bridging autism, science and society: moving toward an ethically informed approach to autism research. *Autism Research*, 4(4), 271-282.

Pripas-Kapit, S. (2020). Historicizing Jim Sinclair’s “Don’t Mourn for Us”: A Cultural and Intellectual History of Neurodiversity’s First Manifesto. In S.K. Kapp (Ed.), *Autistic Community and the Neurodiversity Movement*. Palgrave Macmillan.

Salles, A., Bjaalie, J.G., Evers, K., Farisco, M., Fothergill, B. T., Guerrero, M., ... & Walter, H. (2019). The human brain project: responsible brain research for the benefit of society. *Neuron*, 101(3), 380-384.

Sinclair, J. (1993). Don’t Mourn for Us. *Our Voice*, 1(3). URL: (Retrieved December 2019) <http://www.autreat.com/dont_mourn.html>

Stenning, A. (2020). Autism and cognitive embodiment: steps towards a non-ableist walking literature. In D. Borthwick, P. Marland & A. Stenning (Eds.), *Walking, Landscape, and Environment*. Routledge.

Szasz, T. (2010). *The Myth of Mental Illness: Foundation of a Theory of Personal Conduct*. New York: Harper Perennial.

Walsh, P. (2010). Asperger syndrome and the supposed obligation not to bring disabled lives into the world. *Journal of Medical Ethics*, 36(9), 521–524.

Walsh, P., Elsabbagh, M., Bolton, P., & Singh, I. (2011). In search of biomarkers for autism: scientific, social and ethical challenges. *Nature Reviews Neuroscience*, *12*(10), 603.

Wisnewski, J. J. (2007). *Wittgenstein and Ethical Inquiry: A Defense of Ethics as Clarification*. London: Continuum International Publishing Group.

Wittgenstein, L. (2005). *Philosophical Grammar*. Berkeley: University of California Press.

Wittgenstein, L. (2009). *Philosophical Investigations*. Hoboken, NJ: John Wiley & Sons.

1. https://aeon.co/ideas/how-playing-wittgensteinian-language-games-can-set-us-free [↑](#footnote-ref-1)
2. Rules of social interactional game-playing are not codified like the rules of cricket or chess. They are subtle, complex and generally learned via osmosis during the formative years. [↑](#footnote-ref-2)
3. Barnes and McCabe (2011, p. 268) ask their readers to ‘reflect on whether the world is better with or without a cure [for autism]’ which suggests that the incidence of autism also concerns them. [↑](#footnote-ref-3)
4. One of few statements in Barnbaum’s book that suggests she may not support the full eradication of autism is her reference to certain studies that ‘locate – a moral sense in persons with autism’ (Barnbaum, 2008, p. 111). This quotation is of particular interest to me because she appears to recognise that the ability to recognise moral questions is not a matter of neurotype. [↑](#footnote-ref-4)
5. It is a general goal as she reserves the right for a mother to have the final decision on whether or not to give birth. [↑](#footnote-ref-5)
6. The *Autonomy* journal has published the letter under Julia Leatherland’s sole name. [↑](#footnote-ref-6)
7. Wittgenstein did not use the term “grammar” in accordance with its dictionary definition. His definition of this term refers to the rules that govern word usage. He wrote that ‘“grammar . . . has somewhat the same relation to the language as . . . the rules of a game have to the game” (PG, I, 23). [↑](#footnote-ref-7)
8. I use the term “neurotypicality” simply to draw a distinction between majority cognition and autism. [↑](#footnote-ref-8)
9. Wittgenstein intended the language game concept "to bring into prominence the fact that the speaking of language is part of an activity" (PI 23) which gives language its meaning. [↑](#footnote-ref-9)
10. The bi-directional difficulty in understanding was named “double empathy” by Damian Milton. [↑](#footnote-ref-10)
11. Some parents are involved in the neurodiversity movement and some autistic individuals support the search for a cure for autism. But the “autism as tragedy” trope *is* a neurotypical concept. [↑](#footnote-ref-11)
12. One reason for this is that many autistic people do not disclose their autism because of the stigma still associated with autism and the risk of damaging their professional careers. [↑](#footnote-ref-12)
13. The DSM-5 has introduced the concept of the severity of autism. The extent of the autism-friendliness of an environment influences the apparent severity of autism presentation. [↑](#footnote-ref-13)
14. Sleep deprivation and challenging behaviour are not restricted to autistic children. [↑](#footnote-ref-14)
15. As was pointed out to me by Joanna Baker-Rogers, these benefits (which can apply in the case of children with many different labels) include the love they inspire in their family, friends, and carers. [↑](#footnote-ref-15)
16. I do NOT argue that autistic people are only ‘acceptable’ to society if they have social utility. [↑](#footnote-ref-16)
17. https://edition.cnn.com/videos/tv/2019/02/01/amanpour-greta-thunberg.cnn [↑](#footnote-ref-17)