Autism and atypical individuation

Ceres Alves de Araujo* Francisco Baptista Assumpção**

Abstract

The article aims to discuss the individuation process of people with autism, which are classified as autism spectrum disorders (ASD). Autism is a behavioral syndrome with multiple biological etiologies and evolution of a neurodevelopmental disorder with cognitive impairment characterized by deficits in social interaction and relationships with others, associated with language and behavioral changes. People with autism do not follow typical paths of human consciousness structuring. In autism, there may be an agenesis of the structuring function of the Matriarchal Ar-

** Childhood and adolescent psychiatrist, full professor at FMUSP, associate professor at IPUSP. Member of the Academia Paulista de Medicina (chair 103) and member of the Academia Paulista de Psicologia (chair 17). ORCID 0000-0002-3446-8221 Email: cassiterides@bol.com.br chetype, a development without Eros. The *daimon* acting in a state of chronic deficiency would be the Archetype of the Invalid. ■



Keywords autism, ASD, analytical psychology, archetypes, atypical development.

^{*} Psychologist from PUC-SP, master's degree in clinical psychology from PUC-SP and PhD in Human Communication Disorders from Unifesp. Jungian analyst at SBPA and coordinator of seminars for the SBPA Analyst Training Program. Member of the Academia Paulista de Psicologia (chair 39). ORCID 0009-0003-2946-4757 Email: ceres.ceresaraujo@gmail.com

Autism and atypical individuation

Introduction

The individuation process of people with autism is an atypical process, usually difficult, almost always painful, from the beginning to the end of life. People with autism do not follow the typical paths in the structuring of human consciousness. They have a different way of structuring their minds and show atypical patterns of processing information, feeling, thinking and behaving. These individuals face a titanic struggle, given their conditions, to survive in the world of others.

Autism entails a particular deficit in self-perception and theory of mind. It is possible that, from the beginning of life, individuals with ASD have been unable to engage in those social interactions that promote the acquisition of self-knowledge. They lack awareness of their own behavior and often have difficulty with adaptive forms of emotion regulation, both voluntary and involuntary. The possibility of experiencing different forms of love in the relationship with oneself, others and the world is altered in people with autism, constituting a major impediment to the individuation process.

Kanner (1942) described, under the name "autistic disorders of affective contact", a condition characterized by extreme isolation, obsessive behaviors, stereotypies and echolalia.

Currently, autism is understood as part of a *continuum* of characteristics that are typical of a spectrum with biological and congenital causes. It is a nonspecific condition resulting from the multiple causation of nonlinear factors, which explains the immense variety of its manifestations. It is extremely complex, which requires multidisciplinary approaches, aiming at the possibility of prognosis and effective therapies.

The quality of life and well-being of people with autism depend on appropriate emotional

and financial support from family and society at the beginning and, in most cases, throughout their lives. Significant difficulties with interactive and social behavior further aggravate isolation and discrimination, and the autistic adult, who is generally not very autonomous, not very flexible, even if intelligent, experiences difficulties in joining work teams. Disorientation and suffering accompany the atypical individuation process of these individuals.

Today we see a romanticized view of autism. Famous people, such as scientists, artists and specially gifted sportspeople, are often labeled as autistic. Consequently, having this diagnosis can confer a positive validation to the pathology itself.

Supporters of the "neurodiversity paradigm" argue that any neurological variation is part of human diversity. Thus, people with autism, although they have been considered through a pathological paradigm, would only represent the natural diversity within the general population.

It is also possible that some people are being overdiagnosed with level 1 autism, known as mild, high-functioning autism or Asperger's syndrome. Some of the signs present in autism are also found in many other nosological conditions, without the diagnosis of autism being justified.

Presently, a considerable number of people have been self-diagnosed as autistic and neurodiverse in adulthood and old age. A late diagnosis may be accurate in cases of level 1 ASD, where the signs are more subtle, the intelligence is preserved, and the prognosis is better. Indeed, they might not have been diagnosed 20 or 30 years ago. However, the frequency with which people have discovered they are autistic seems exaggerated. This exaggeration in the number of self-diagnoses of autism leads to a romanticized view of autism in general, fostering the belief that it is a mild form of neurodiversity rather than a complex and serious condition.

Autism: general aspects

Autism is a behavioral syndrome with multiple biological etiologies and evolution of a developmental disorder with cognitive impairment, characterized by deficits in social interaction and relationships with others, associated with changes in language and behavior (Gillberg, 1990).

The deficit in social interaction, a core factor in autistic disorders, implies a deficit in essential skills for the individual to deal with the demands of their social environment (Del Prette; Del Prette, 2005), which leads to marked adaptive damage. These aspects are crucial, since any behavior that implies an evolutionary advantage is reinforced by the selection of genetic determinants, with behavior being the pacemaker of evolution, with fundamental role in the adaptive and survival process.

Since communication with others does not follow a set of immutable rules as in the natural world and for survival, the individual must learn to deal with divergent objectives, complex coalitions and envious rivalries—all of which are very difficult to access for autistic individuals, who, without the capacity to differentiate between intentional and unintentional actions, have a very limited ability to predict future acts of coexistence of other people, that is, to foresee the other person's behavior by understanding their reasoning and objectives.

Descriptively, based on these conceptual aspects, ASD is characterized in the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5), by the following criteria:

The diagnosis must meet criteria 1, 2, and 3 below:

1. Clinically significant and persistent deficits in social communication and social interactions, manifested by all of the following ways:

a. Expressive deficits in nonverbal and verbal communication used for social interaction;

b. Lack of social reciprocity;

c. Inability to develop and maintain appropriate friendships for the developmental level.

2. Restricted and repetitive patterns of behavior, interests, and activities, manifested in at least two of the following ways:

a. Stereotyped motor or verbal behaviors, or unusual sensory behaviors;

b. Excessive adherence to routines and ritualized patterns of behavior;

c. Restricted, fixed, and intense interests.

3. Symptoms must be present from early childhood, but may not fully manifest until social demands exceed the limits of their capabilities. (American Psychiatric Association, 2013, p. 50)

Descriptively, the ICD-11 refers to autism spectrum disorder as characterized by persistent deficits in the ability to initiate and maintain reciprocal social interaction and social communication, as well as restricted, repetitive, and inflexible patterns, behaviors, and interests. Its onset occurs during the developmental period, usually in early childhood, but its symptoms may not fully manifest until later, when social demands exceed the individual's limited capabilities. These deficits are sufficiently severe and cause impairment in personal, family, educational, occupational, social, and other areas of life, and it is a generalized characteristic of this individual with observable functioning in all environments. although they may vary according to the context.

According to this classification, it can be subdivided into different categories, although the media favors what we call high-functioning autism, which gives the erroneous idea that it is accompanied by high abilities, superior intelligence and genius—which is not the case in reality.

Its signs and symptoms appear before the age of 3 and, out of every 10,000 children, four to five have the disorder, with a predominance in males (3:1 or 4:1).

In recent decades, the incidence of autism has increased, according to the Centers of Disease Control and Prevention (CDC), citing that one in 54 children would have this ASD diagnosis by age 8 in 2015 (an increase of almost 10% compared to 2014 – 1:59) with no differences in prevalence rates between black and white children, also according to the CDC. The number of children who underwent a developmental screening at age 3 increased from 74% to 84% (potential progress towards earlier and more consistent screening by health professionals or, in our view, towards a more superficial diagnosis, with boys being four times more likely to be diagnosed than girls), remaining stable on previous reports (Maenner et al., 2021).

Other authors, such as Burack (1992), reinforce the idea of cognitive deficits, stressing that autism should be approached from a developmental perspective, being related to intellectual disability, with around 70% to 85% of individuals with autism being intellectually disabled.

In ASD, comorbidities, whether genetic or environmental, are detected in around 20% of individuals in unselected samples, with different factors associated with it: prenatal exposure to teratogens, prenatal complications such as prematurity, anoxia, infections or other conditions, as well as chromosomal or genetic syndromes, with the greatest comorbidity being represented by genetic syndromes (Garcia, Viveiros, Schwartzman, Brunoni, 2016).

The occurrence of comorbidities increases or decreases according to the age of the first evalu-

ation. They are common and range from genetic alterations and intellectual disability to different types of behavioral alterations (sleep disturbances, aggressiveness, impulse control), as well as specific psychopathological conditions such as mood disorders and intellectual disability, which shows their great variability and extreme nonspecificity of concepts and associations.

Therapeutic projects will generally be guided by the severity levels of ASD, according to the DSM-5 (APA, 2013), since level 3 indicates the need for very substantial support; level 2 requires great support; and level 1 requires support.

Autistic disorders can be thought of from the point of view of personal development, considering not only the peculiarities arising from the condition itself, but also those arising from the main comorbidity, i.e. intellectual disability. It is estimated that three quarters of the population with autistic spectrum disorder have some degree of intellectual disability, which means that only 25% have typical intelligence (Barbaresi, Katusic, Colligan, Weaver, 2005).

Development: an undifferentiated state

People with autism do not follow typical paths in the structuring of human consciousness. They seem to be deprived of the individuation process, which is the development of the individual as a distinct essence from the collective psychology. There is an atypia of development.

Different theoretical approaches in psychology seek to understand the genesis of this very distinct form of psychic development. The languages of the different theories, which today are more complementary than discordant, point to alterations from very early stages of life.

According to Lacanian authors such as Berlinck (1999), autism is considered to be a primitive ontogenetic and phylogenetic state, the limit between the natural and the human. Autism is a condition where the human seems unable to transcend nature towards culture. It is a contemporary state to the constitution of the psychic apparatus, as it is autistic during its phylogenetic formation. Since the psychic apparatus pertains to the realm of subjectivity and manifests through desire, autism testifies to an absence of the psychic apparatus.

From an ontogenetic perspective, autistic children are conceived as "natural children," remaining connected to nature, that is, to a world without representation. From the phylogenetic perspective, autism would be a state in which, because it is inaugural for the species, there would be no possible regression. Despite the animalistic aspects of humanity, the species does not allow a return to the pre-human state (Berlinck, 1999).

According to this author, autism is a mutation that coincides with the phylogenetic constitution of the psyche, which, in turn, is organized according to the autistic paradigm. Autism is therefore, for the author, the paradigm of the psychic apparatus, insofar as it is the narcissistic organization of emptiness. The psychic apparatus, in this view, operates on the principle of narcissism understood as a libidinal movement, in which energy is not directed towards the object, but remains in the body where it originated.

Bleuler introduced the term "autism" in 1911 by subtracting the "eros" from the expression "aut(ero)tism" (apud Berlinck, 1999). In autism, the presence of Eros, which refers to the human capacity to form connections, is not observed. The maternal function gives way to autochthony, to the natural child, revealing the absence of the object, the cause of desire. According to Berlinck (1999), the autistic individual has a mother, but no maternal function, as they are the natural child, and there is an absence of a mother as an object of desire. Libido, being non-pulsional and non-erotic, does not establish connections. There is no Eros. The drive does not intertwine with objects to constitute mental representations. There is no maternal function. There is no interlocutor.

In autism, there is a silent world, wordless, noiseless and balanced, with repetitive and standardized movements. Echolalia, a characteristic of autism, would testify to the existence of a resonance inherent to an organization of emptiness, in which the sound of words does not find Eros, but finds Echo, since the former only exists in the human realm.

Tustin (1995) abandons the idea that autism involves regression, instead conceptualizing it as primitive, referring to a boundary between the natural and human states, both phylogenetically and ontogenetically. In her final work, titled *A perpetuação de um erro* ["The perpetuation of an error"], she declared that there is no such thing as a childhood autistic stage in normal development to which childhood autism could be considered a regression.

Fordham (1976) considers that autism is determined by a failure in the process of de-integration of the Self. The process of de-integration either does not occur or occurs partially. The child with autism does not receive the flow of stimuli from the Self and the external world to organize perception, causing alterations in the development of the internal world. When this internal world develops, it hinders the possibility of fantasy and symbolic capacity.

The possibility of developing consciousness is shared by humans, chimpanzees, monkeys, and other animals. However, what is characteristic of human beings is the abilities to intentionally manipulate consciousness and process information.

Prenatal development is important for the structuring and functioning of the brain-mind system. Schore's (2003) attachment/regulation theory shows that the relationships established as a result of the first mother-baby interactions begin to build neural networks, and this process starts in the womb.

The mind, with its potential for symbolic function, emerges in the process of development, from the experience of early interpersonal relationships. The constellation of archetypes in the early stages of psychic development forms the basis for the development of central meanings for life. Gradually, mental models about the surrounding world are built, organizing everyday experience into patterns that direct life's expectations in all aspects. The mother-baby interaction, from the womb onwards, is a relationship that is built on the dynamics of Eros and involves relational, loving and erotic exchanges.

The dynamics of Eros do not seem to manifest in the interaction between the mother and the infant with autism. At birth, the baby begins to show itself differently, as they do not follow typical human patterns and exhibit alterations in basic instincts, including self-preservation. There is atypia and disproportion in reactivity to stimulation. Crying cannot be understood and the child cannot be soothed. Their gestures do not become functional. They tend to repeat automatisms devoid of meaning. Only isolation and incommunicability become increasingly apparent.

Unlike typical children or children with other disabilities, autistic children live in another world. Mother and child are in separate worlds, with no possibility of communication. The maternal relationship does not conform to the standards of the human species.

The maternal instinct is realized in the action of physically and psychologically nurturing the child and, when the function of motherhood is impeded or rejected, there is a predisposition to nonconformity and depression.

Thus, it can be assumed that the archetype of the Terrible Mother presides over the autistic person's world—an archetype connected with death, destruction, aridity, hunger, nakedness, cold, poverty. The principle of Eros is not manifested, and there is no integration between the child as ego and the "I" as body, Self, other and world.

In autism, one can observe an agenesis of the structuring function of the Matriarchal Archetype (Araujo, 2000), a development without Eros, considering Eros to be a force or power that unites the elements of the intrapsychic world. The daimon acting in a chronic state of deficiency would be the Archetype of the Invalid. Guggenbühl-Craig conceptualizes the Archetype of the Invalid, considering that invalidity is archetypal in nature. According to him, "wholeness and invalidity are two aspects of the Self, representing basic polarities in our psyche" (Guggenbühl-Craig, 1998, p. 19).

"As the brain occupies a central position in the physical and emotional functioning of the human being, there is a vast spectrum of disability in relation to this organ" (Guggenbühl-Craig, 1998, p. 9). This assertion is consistent with the multiple biological etiology of autism and its presentation within a spectrum (Guggenbühl-Craig, 1998, p. 19).

The Archetype of the Invalid emphasizes the absence of Eros, growth, independence and healing observed in autism. This archetype should not be confused with the Archetype of the Child, because the child, like the invalid, is fragile, dependent and lacks the qualities of adults. However, the child grows, changes and becomes an adult, having a future and being only temporarily weak. The Archetype of the Invalid emphasizes the unilateral dependence of the individual and counterbalances the archetypal image of the Hero, which is not present in this population.

The Archetype of the Invalid should also not be confused with the Archetype of Illness, because illness has a future and leads to either death or health. But the Archetype of the Invalid does not lead to anything—neither death nor health. It represents a chronic, lasting deficiency.

In autism, we observe an alteration, a chronic disharmony in the development process, not merely a delay. And, to this day, although autism's symptoms may be alleviated in some cases, it does not have a cure.

The first half of life

Children, adolescents and adults with autism develop very differently from the human pattern, once the peculiarities resulting from the condition itself, the level of severity and the support from the environment are taken into account. The first half of life is characterized by goals such as heroic achievement, procreation, and the propagation of the species—goals that are particularly challenging for individuals with autism.

In early life, when the Self undergoes de-integration, the dynamic systems observable before birth begin to function. The baby's ego blossoms and is structured through the processes of de-integration-integration, starting from the primary Self. The individuation process begins very early in intrauterine life and continues after birth, with the child existing as an individual psychological being, separate from its mother. States of identity with the Self and states of awareness of this separation seem to coexist and alternate. Initially, states of identity predominate alongside the growing ability to intuit the mother's emotional state.

In the autistic individual, fragments of the Self are installed as unintegrated, disrupting the process of differentiation of the Self. Egoic functions such as control over mobility, perception, reality testing, memory, organization of mental content, communication, use of defenses, and the ability to recognize limits are all impaired.

In autism, sensoriality is altered. It is two-dimensional and is manifested by presence/absence. The absence of the object does not produce a sense of loss, does not lead to sadness, nor does it give rise to the psychic production of images related to the absent object. Transitional objects are not created. This two-dimensional sensoriality of surfaces and edges is constituted thanks to a primitive narcissism where there is no driving force aiming at connections, which would have representations as a goal (Magalhães, 1985). In this primitive narcissism, prior to primary narcissism, there is a lack of libidinal connections, which would be caused by the absence and then, consequently, by the desire for the missing parental object, which does not occur.

In autistic babies, there is already a lack of desire for others, leading to difficulties in ac-

quiring self-perception and perception of others throughout their lives. There is no room for intersubjectivity. This baby is going through the process of biological maturation related to its survival needs and shows attachment behaviors, but the attachment seems to be only for security, not for affiliation.

At birth, the child is faced with an established and immutable physical and biological world. Through contact with this world, the typical child perceives themselves as well as the limits that such belonging causes, gradually realizing that disrespecting these limits causes pain and suffering. When they come into contact with the social world, as a gregarious animal, they are once again confronted with a structured world, with pre-established barriers and limits, having to realize once again that transgressing its rules and limits leads to sanctions and punishments established and organized for them. Limits and prohibitions are fundamental organizers of psychic life.

The increase in the baby's notion of reality is simultaneous with the structuring of body consciousness and also with its ability to construct its inner world. The gradual progression towards symbolic representation is promoted through the formation of transitional objects. Thus, as they grow, they are able to separate more and more from their mother, establishing their personality from their own body (Alvarenga, 1997).

In autism, the self is structured in terms of other encodings, isolated and deprived of primordial relational experiences. Children with autism show deficits in basic affective-social processes from a very early age and lack the social cognitive skills necessary for a theory of mind. The difficulty in acquiring a theory of mind is the result of a deficit in basic interaction capacity.

People with autism and preserved intelligence, who are deprived of the relational and affective function, typical of matriarchal dynamics, may structure their consciousness through patriarchal dynamics. The constellation of the Father archetype tends to order the world of children with autism. They seek routines and situations that allow them to decode, because the possibility of anticipating what will happen will give them greater control over their anguish. Literalism tends to dominate their thinking and determine their actions. Many children with autism exhibit prodigious memory, as, due to the compromised integrative function of the mind and the lack of central coherence, events are programmed according to atypical patterns, devoid of the emotional quality of the moment. This facilitates the detailed recall of events, hence the prodigious memory.

Parents, humanizers of the Father archetype, have the possibility of helping to order and organize the autistic child's knowledge of the relationship between the external world and the internal world. The growing development of mental representations helps adaptation; however, it is a partial adaptation. The other person, in the relationship, is only considered insofar as they meet the specific interests of the child. Regarding social behavior within groups, the child with autism tends to remain in a marginal position relative to the reference group.

Under the aegis of the Father archetype, parental roles are formed and the role of the child in other words, the role of "father's child"—is acquired. In adulthood, however, there is often an overreliance on the role of the child, sometimes persisting throughout the individual's life, due to difficulties in achieving autonomy. The "father's child" tends to perpetuate itself, compromising work, social, and romantic relationships.

The typical human being, through the process of individuation, gains the possibility of a symmetrical relationship. They acquire roles related to friendship, fraternity and conjugality; they experience a form of love that implies loving the other as oneself, with the dynamics of otherness being exchange, dialectic, fascination and passion. The Anima-Animus archetype is constellated, which is the archetype of agape and communion. In autism, even in high-functioning cases, only the patriarchal archetype predominates, and the others remaining unexpressed. The autistic person is unable to experience a passionate experience, or to reach a state of ecstasy caused by passion. This passion will never be projected onto another person; thus, the search for such an object occurs remains, but unfulfilled and never idealized, as the remote experience of life itself—maternal experience—has not been adequately processed.

It is hard to believe that otherness is possible for people with autism. In adulthood, the theory of mind may already be developed in its cognitive component, but the affective component—spontaneous and natural attunement to the ideas and feelings of the other, understanding the reactions of compassion and mercy—is lacking. What is observed is the persistent and overreliance on the role of the child, which hinders the development of altruism, friendship, fraternity, and conjugality.

In adulthood, one partner's expectation of the other is that they fulfill the roles assigned to them in culture, which generates constant and growing tension in the unconscious. In autism, when these roles are not fulfilled, these elements of the unconscious can lead to intense conflicts, favoring the emergence of rigid and dominating structures that are inflexible and incapable of creating alternatives. This, in an almost despotic way, restricts the individual with autism, as they do not tolerate particularities or an individual character, only being able to appreciate what they can fully control. Present in autistic people, the need for control, for the distancing from the individual and for the rejection of singularity clearly hinders the establishment of interpersonal relationshipswhen they do occur, are based on attitudes of rigidity and little creativity.

This can be seen in autistic adults through their tendency towards systematization, which gives them a way of looking at the world in a linear way, based on the premise that it is structured in systems. This approach is useful when dealing with technical situations, but fails when dealing with people—at which point empathy skills (which are deficient in them) should be preponderant. Such behaviors are associated with repetitive and stereotyped actions, as well as restricted interests, which, by functioning as systems, enable them to perceive the world as controllable and predictable.

Even when intelligent, individuals with autism often struggle to form complex, elaborate, and precise representations of their personal attributes, which are essential for self-knowledge and communication with others.

The Father shapes the collective consciousness through the masculine archetype, which is usually experienced in situations of authority (Boechat, 2009). When taken to its ultimate consequences, it leads one to live according to norms and renounce individual existential adventure. This is the model of education that is provided and that favors the individual with autism, who almost stagnate at this stage, becoming a prisoner of rules and habits.

For a person with typical development, this exercise of duty becomes tedious and empty, constituting a daily routine that often leads to dissatisfaction. Dissatisfaction provides a fertile ground for those who, due to their creative and affective characteristics and the moment of their development, have the possibility of finding something of value in their daily lives, thereby altering a monotonous routine.

This does not occur in individuals with autism, whose inauthentic life makes it impossible for what we would call a crisis to emerge, that is, a time of renewal for a life lived in an imperfect and inauthentic manner. There is an obstacle to the individual relationship, as there is no possible relationship, since this usually stems from unconscious motivations that make one assume a similar psychic structure in the other, as described by Jung (2015), which is not observed in autistic people. Thus, maintaining an interpersonal relationship is a painful task and the destructiveness of this dynamic is clearly associated with blocking creativity. The personification of an image that threatens the relationship is so frightening that the individual usually prefers to stick with what, although often unpleasant, is familiar, routine and stereotyped (Kast, 2011).

For the autistic person, the encounter with others does not transcend mere everyday situations; complicity is not established from the knowledge of what each person can expect from the other, and a true relationship is impossible to build unless it is institutionalized and protected.

In such a relationship, neither the idealized inner man nor the idealized inner woman meet and, consequently, what Hillman (1985) refers to as the encounter with one's own anima, with the self, the relation with this unconscious and the mediation with one's own unknown does not happen. There are no projections or fantasies, nor is there an encounter or passion, which results in a static state without personal changes and leaves a sense of incompleteness.

The second half of life

In the process of individuation, the human being builds upon their possibilities and limitations, establishing personal meanings that motivate and direct them towards an existential project of their own making. In order to achieve this, it is necessary to face the challenge of deepening self-knowledge—not only in those aspects that were taught and are socially accepted, but also in those that are much more personal, often dark and hidden.

The path to individuation leads towards otherness and a future of merging with the Absolute in solitude. Otherwise, the individual remains trapped in the past and in the primitive and chthonic forces that keep them chained to instinctive and mundane issues or to social forces that uphold conformity. Thus, this development has different purposes, the first being a biological purpose aimed at giving rise to another similar being. Subsequently, a relational purpose is established that must fulfil a sociocultural objective that fosters the humanization of the individual's relationships with others. Finally, in a third phase, a spiritual purpose is formed, reconnecting the individual with themselves and culminating in a cosmic purpose that transcends and leads them to perceive themselves as belonging to the greater whole (Alvarenga, 2010).

In this way, human beings are constantly progressing, and the goal of this development is self-realization as differentiation (which allows one to know who they are) and a fuller and more complete harmonious fusion between all aspects of one's psyche.

On this journey, the individual consciously and inevitably separates themselves from the indeterminate and unconscious mass and nothing prevents them from feeling alone—neither successful adaptation, nor incorporation into the environment, nor family, nor society, nor social position. This pushes them to choose their own path and to rise above the identity with the mass of humanity, starting from an impulse that compels them to emancipate themselves from the gregarious mass and its ways. As this happens, the personal sphere widens with willpower, increasingly aligning with the purposes offered by the nature of unconscious motives (Jung, 1981).

The individual feels different and isolated from everyone, since they have obeyed the inner voice of which only they are aware. Thus, they establish "their law" that sets their path above all others, above the conventions that distance them from themselves, massify them, and prevent them from creating. Solitude and awareness of solitude are perhaps the first steps towards listening to the inner voice.

From this perspective of development in the second half of life, how would we conceptualize the developmental pattern of an autistic individual?

For Whitmont (1990), the shadow is an archetype, an essential part of the construction of the human personality. Confronting the shadow is necessary for the development of self-knowledge. "The shadow refers to the part of the personality that has been repressed due to the ideal ego. Since everything unconscious is projected, we encounter the shadow in the projection, in our perception, of the other person" (Whitmont, 1990, p. 144).

The bond established between parents and children is of fundamental importance for the development of the shadow. From the beginning of life, the child needs an emotional bond with the mother and/or father or substitutes who can act as role models. In this way, a foundation for moral life is created, since moral life is the result of a person's past and connections. In the development of people with autism, in which the ego is structured in isolation, deprived of primordial relational experiences, how can we think about the development of the shadow?

Morality must go hand in hand with personal knowledge of the shadow (Sanford, 1988). When moralistic scruples survive solely due to existing sanctions and the person lacks self-awareness, they have a morality only at the collective level. Could a person with autism, given their unique developmental peculiarities, achieve a personal morality as a result of self-knowledge of their shadow? To what extent could a moral conscience develop in a person with autism?

Piaget (1994) shows that, in the primitive stage of egocentrism, the child recognizes and follows norms only when they respect and fear the authority figures who impose them, and that only at a later stage, through peer cooperation, that rules start to impose themselves independently, leading to the development of moral autonomy.

What can be observed in people with autism is the difficulty of reaching this later stage towards moral autonomy. They have no curiosity about the principles that underpin the rules. Instead, they seek to rigidly follow the precepts taught to them and show anxiety for fear of making mistakes or not understanding the situation created.

In the second half of life, individuation should be seen as a "moral realization" in Jungian terms. According to Barreto (2012), the moral factor is rooted at the heart of Jung's psychological conception and constitutes one of the irrefutable foundations, characterizing the ethical dimension of analytical psychology. Jung (1977) considers moral fulfillment to be a loyalty to oneself, stating that, faced with the need for individuation, the inner voice of the Self often collides with the collective moral code, creating an ethical conflict that needs to be addressed.

It is known that loyalty to oneself implies the freedom to live one's life with the meaning that is most genuine to them. Often, the possibility of freedom comes into conflict with society's collective rules, bringing feelings of guilt and suffering, indicative of the ethics of individuation. With the drive for individuation, a paradox is created for the ethical subject, and the implied transgression will be experienced by the subject as a painful necessity. The possibility of transgression implies freedom and absolute responsibility for it.

The possibility of transgression is inconceivable for people with autism, who face significant challenges in achieving moral autonomy, or "moral fulfillment" in Jungian terms. The atypical development, the alteration in the primary bond between the child and their parents, already compromises the development of their own shadow, as the autistic individual remains only a follower of the rules extrinsic to them, without achieving moral autonomy.

Conclusion

The development of babies, children, adolescents, adults and the elderly with autism takes place in a very different way to the human pattern, and the peculiarities that arise from the condition itself, the level of severity and the support of the environment must be taken into account. The self can be structured in terms of other codifications, but in isolation and deprived of primordial relational experiences.

Individuals with autism, particularly those with preserved intelligence, who are deprived of the relationship function and the affective function, which are specific to matriarchal dynamics, can acquire a structuring of consciousness via patriarchal dynamics. However, the dynamics of otherness are prevented. Although in adulthood the theory of mind may already be developed in its cognitive component, the affective component—which is the spontaneous and natural attunement to the ideas and feelings of the other-is missing. Symmetrical relationships do not emerge, and what we see is the permanence of an abusive role as a child, preventing altruism, friendship, fraternity and conjugality. What remains is a sense of incompleteness, as projections and fantasies are not made, nor is the encounter with the other, and passion is not experienced.

If, in the second half of life, individuation for neurotypical individuals is viewed as "moral fulfillment" in Jungian terms, what we see in people with autism is the difficulty in reaching this later stage aiming for moral autonomy. Individuals with autism who have preserved intelligence face a titanic struggle to adapt to the world of others, to study, to find a profession and to work. Many undertake a heroic struggle for the right to exist in this world, as people who are so different.

In terms of analytical psychology, it can be posited that in autism an alteration in the process of de-integration of the Self might suggest a disturbance from the intrauterine stage, when matriarchal experiences are not constellated. However, as the organization of development is archetypal, the structuring function of the patriarchal organization becomes dominant. Individuals with autism have their dual affiliation roles altered and are seen as children of a Woman-Father and a Man-Father. Under the ordering of the Self as a principle of totality, it is believed that they can have the integration of the other archetypes among themselves through a peculiar process of individuation, even with the failure of the humanization of the archetype of the Great Mother.

The principles of centroversion and automorphism, which operate under the patriarchal organization, direct the processes of expanding consciousness and integrating the personality, encompassing the relationships between the conscious and unconscious systems. It is a personality that, by structuring itself on other bases, has the possibility of experiencing an atypical process of individuation.

Received: 12/19/2023 Revised: 10/06/2024

Resumo

Autismo e individuação atípica

O artigo busca discutir o processo de individuação das pessoas com quadros de autismo, que são classificados como transtornos do espectro autista (TEA). O autismo é uma síndrome comportamental com etiologias biológicas múltiplas e evolução de um distúrbio do neurodesenvolvimento com prejuízo cognitivo caracterizado por déficit na interação social e no relacionamento com os outros, associado a alterações de linguagem e comportamento. As pessoas com autismo não seguem os trajetos típicos da estruturação da consciência humana. No autismo, pode-se constatar uma agenesia da função estruturante do Arquétipo Matriarcal, um desenvolvimento sem Eros. O daimon agindo no estado crônico de deficiência seria o Arquétipo do Inválido. =

Palavras-chave: autismo, TEA, psicologia analítica, arquétipos, desenvolvimento atípico.

Resumen

El artículo busca discutir el processo de individuación de las personas con autismo, las cuales se clasifican como Trastornos del Espectro Autista (TEA). El autismo es un síndrome conductual con múltiples etiologias biológicas e la evolución de un transtorno del neurodesarrollo com deterioro cognitivo, caracterizado por déficits en la interacción social y las relaciones com los demás, associado a cambios en el lenguage y la conducta. Las personas con autismo no sieguen los caminhos típicos de estructuración de la conciencia humana. En el autismo se aprecia una agenesia de la función estructurante del Arquetipo Matriarcal, un desarrollo sin Eros. El daimon que actúa en un estado crónico de deficiencia sería el Arquetipo del Inválido.

Palabras chaves: autismo, TEA, psicologia analítica, arquetipos, desarrollo atípico.

References

Alvarenga, M. Z. (2010). A paixão e seus propósitos. Junguiana, 28(1), pp. 16-17.

Alvarenga, M. Z. (1997). *O Graal: Arthur e seus cavaleiros*. Belo Horizonte: Dimensão.

American Psychological Association (2013). *Manual de Diagnóstico e Estatística do DSM 5*. Artmed.

Araujo, C. A. (2000). *O processo de individuação no autismo*. Memnon Edições Científicas.

Barbaresi, W. J., Katusic, S. K., Colligan, R. C., Weaver, A. L., & Jacobsen, S. J. (2005). The incidence of autism in Olmsted County, Minnesota, 1976-1997: Results from a populationbased study. *Archives of Pediatrics & Adolescent Medicine*, 159(1), pp. 37-44.

Barreto, M. H. (2012). Pensar Jung. Edições Loyola.

Berlinck, M. T. (1999). Autismo, paradigma do aparelho psíquico. *Estilos Clínicos*, 4(7), pp. 30-42.

Boechat, W. (2009). *A Mitopoese da Psique: mitos e individuação*. Vozes.

Burack, J. A. (1992). Debate and argument: Clarifying developmental issues in the study of autism. *Journal of Child Psychology and Psychiatry*, 33(3), pp. 617-621.

Del Porto, J. A., & Assumpção Jr., F. B. (2023). Autismo no adulto. Artmed.

Del Prette, Z. A. P., & Del Prette, A. (2005). *Psicologia das habilidades sociais na infância: Teoria e prática*. Vozes.

Fordham, M. (1976). *The self and autism*. William Heinemann Medical Books Ltd.

Garcia, A. H. C., Viveiros, M. M., Schwartzman, J. S., & Brunoni, D. (2016). Transtornos do espectro do autismo: avaliação e comorbidades em alunos de Barueri, São Paulo. *Psicologia: Teoria e Prática*, 18(1), pp. 166-177.

Gillberg, C. (1990). Autism and pervasive developmental disorders. *Journal of Child Psychology and Psychiatry*, 31(1), 99-119.

Guggenbuhl-Craig, A. (1998). *Eros de muletas: reflexões sobre amoralidade e psicopatia*. Editora Corsária.

Hillman, J. (1985). *Anima: anatomia de uma noção personificada*. São Paulo: Cultrix.

Jacobi, J. (2013). A Psicologia de C. G. Jung. Vozes.

Jung, C. G. (1977). *Two essays on analytical psychology* (Vol. 7). Princeton University Press.

Jung, C. G. (1981). *O desenvolvimento da personalidade*. Vozes.

Jung, C. G. (2015). Sobre el amor. Trotta.

Kanner, L. (1942). Autistic disturbances of affective contact. *Nervous Child*. v. 2, pp. 217-250.

Kast, V. (2011). O amor nos contos de fadas: o anseio pelo outro. Vozes.

Maenner, M. J., Shaw, K. A., Bakian, A. V., ... & Spivey, M. H. (2021). Prevalence and characteristics of autism spectrum disorder among children aged 8 years: Autism and Developmental Disabilities Monitoring Network, 11 Sites, United States, 2018. *Surveillance Summaries*, 70(11), pp. 1-16. https://www.cdc.gov/mmwr/volumes/70/ ss/ss7011a1.htm

Piaget, J. (1994). O juízo moral na criança. Summus.

Sanford, J. A. (1988). *Mal: o lado sombrio da realidade*. Paulinas.

Schore, A. N. (2003). Affect dysregulation and disorders of the Self. W. W. Norton & Company.

Tustin, F. (1995). A perpetuação de um erro. *Letra Freudiana*, 14(4), pp. 63-79.

Whitmont, E. C. (1990). A busca do símbolo. Conceitos básicos de Psicologia Analítica. Cultrix.

World Health Organization. International Classification of Diseases for Mortality and Morbidity Statistics, Eleventh Revision: ICD-11: Reference Guide. https://icd.who.int/ icd11refguide/en/index.html#1.2.4GeneralfeaturesofICD-11