INTRODUCTION

Saunders (2019b) has provided incontrovertible evidence for the main cause of autism. In her article she took a balanced approach to describing all family relationships. It included an appraisal of the structure of the family as well as the interactions between relevant members and their impact on the onset of disability using evidence provided by attachment studies to compare with the behaviour of both parents of autistic children. Data were collected through covert participant observation over time and, in one case, was from birth. This differs considerably from previous methodological approaches in attempts to understand cause.

Too often in research, emphasis has been on the role of the mother in child rearing, while ignoring other family members and family structure. Yet al 1 must contribute, as is it inevitable that family numbers and relationship type will change relationship dynamics. In a family, for example, where there are are say, five adults and one child, that child will receive a different upbringing to those in a family in which there is one adult and five children. Moreover, the role of the father is not always fully analysed and evaluated nor is the impact of extended family relationships on the developing child.

In the past, it has also been assumed that only the mother has an impact on child development. Bowl by (1958) wrote of maternal monotropy for example. He thought that children become attached to their mothers due to ‘cupboard love’, that is, mothers feed babies and this causes attachment to take place. He expressed the opinion that when this relationship is inadequate that children become ‘affectionless psychopaths’. This theory was disproved by several studies. Harlow and Zimmerman’s (1959) study of rhesus monkeys showed that attachment is caused by providing comfort not food. Schaffer and Emerson (1964) in their seminal study of Glaswegian families, showed that fathers can be primary attachment figures, that children can develop multiple attachments and therefore the role of the mother is not as pivotal as Bowl by suggested. Due to caring being a learned not inherited skill, men are just as capable of being carers as women. Yet this information does not seem to have percolated down into research into autism.

Previous studies for example, have blamed the mother for cause. This began with Kanner (1943) who was the originator
of the expression ‘refrigerator mother’ and who ignored the impact of the father. Bettelheim (1967) adopted a more psychoanalytic approach but also used the same expression. He too ignored the role of other family member including the father, or the structure of the family in contributing to onset of disability. Describing mothers as being ‘refrigerators’ is misogynistic.

On the other hand, various studies have denied that the mother is at all responsible. Des Lauriers (1967) in particular criticised such an idea and was adamant that mothers are not responsible while Ventola (2017) has stated:

“There is no scientific empirical support for the notion that mothers cause their children’s autism or that they lack reflective functioning and are insensitive to their children’s needs (Deslauriers, 1967; Keen, 2007). Indeed, it is widely accepted that mothers are not the cause of autism in children”.

It is difficult to know which is the more deplorable, the misogyny or the denial of the role of mothers in the onset of disability. Saunders (ibid) has demonstrated that mothers do have a role in the onset of autism, but to suggest that they alone are responsible is incorrect. Indeed many of these mothers were themselves victims of male oppression, as became apparent in her study.

Nonetheless these previous studies have led to a rise in investigation into neurodevelopmental issues as cause while denying the importance of family dynamics. In also enabled Baron-Cohen (2002) to assert that autism is caused by excessive levels of testosterone in the mother’s womb during pregnancy. His theory has arguably had the most support over recent years in spite of a lack of any evidence to support such an idea. He was not able to measure testosterone levels during pregnancy as autism was diagnosed long after the pregnancy ended and therefore such an idea is speculation on spite of him writing an epistle called “The Essential Difference: Male and Female Brains and the Truth About Autism” (2004).

Moreover, all investigations into disability and including mental illness such as schizophrenia, happen after the onset of disability and diagnosis as it is not possible given our current level of knowledge, to be able to predict who will develop which problem. No one has previously achieved an examination of interactions between parents and child from birth for researching cause of autism. Nor has there been any consideration as to what all human psychosocial needs are and examining family dynamics to determine if young children are having those needs met. Yet Saunders (2019a) has achieved a description of all human psychosocial needs for the first time. Although it is partly unproven, it is based on findings from existing studies as well as observations and experience from real life.

In Saunders (ibid) study of cause of autism, because relationships existed for extended periods of time – in one case, over several years - this enabled the detailed examination of family relationships that led to the child rearing practises that caused the onset of this disability. In so doing, Saunders has raised many issues regarding family dynamics and, more specifically, of relationships between men and women.

From previous literature it is clear that there are problems in terms of status and power in adult relationships between men and women in culturally Western European families. For example, Walby (1990) wrote about unequal work place relationships, while Oakley (1972, 1974a, 1974b, 1981) has written extensively about the unequal distribution of power in the household. Indeed, there is a considerable sociological body of work about how women are discriminated against in many spheres of life and issues frequently feature in daily newspapers such as one in the Guardian newspaper (28/10/2019) regarding financial differences between men and women across work life spans.

It is therefore beyond dispute that women are frequently severely disadvantaged in relationships due to male insistence on being dominant and controlling. In so doing women’s psychosocial needs for equality of status and power are being denied. Saunders (ibid) also wrote about equality of psychosocial need between men and women. This means equality of need for equal status and equality of need for being nurtured. Men are sometimes denied enough nurture in childhood relationships while women are denied adequate status and power. It is time that as a society we acknowledge that such inequities exist within the home in particular, and do something about them because in some circumstances it has seriously unfortunate and unforeseen consequences that cause problems for society as a whole.

When women who have been dominated and controlled by men give birth to male children the interactions between mother and child are sometimes inadequate due to several possible reasons, one being the ego defence mechanism of displacement (Freud 1937). Negative emotions that the mother has towards men can be displaced onto the male child. This is often inadvertent; that is, women are not necessarily conscious of what they are doing. But nonetheless it can lead to emotional privation of the child and ultimately, autism. As autism is a permanent condition for the child with consequences for the wider society in terms of need for permanent life-long service provision and therefore public money, this issue needs to be addressed and discussed in order to point out clearly that when men treat women with a lack of respect or integrity as individuals, there can be serious consequences that disadvantage more than a spouse as can be seen from the statistic that there are nine times as many autistic boys as girls in the UK (Brugha et al, 2009). That is, misogyny can damage men as much as women.

Let us examine each case study for supporting evidence. The Brown family came originally from an Asian society that is noted for its entrenched sexist attitudes towards women, and this case study provides excellent evidence of a wife being severely disadvantaged by men in her family of origin. Mrs Brown had no ambitions for herself in terms of career or personal development as she had been raised to believe that women should be subordinate to men, do their bidding and stay at home in order to bear and raise a family. She then married a man who shared such beliefs and who belonged to the same ultra conservative Buddhist sect which reinforced the normative aspect of such relationships. The effect of such attitudes on Mrs Brown was to cause her to become withdrawn and emotionally unavailable. It also legitimised Mr Brown refusing to participate in child rearing and turning to saying prayers in order to further legitimise his refusal to take on any family responsibility. This then further ensured
that any child of the marriage would not receive any emotional contact from either parent, and as there were no other adults in the household to mitigate the effects of such behaviours, the impact on the neonate was severe and Bobbie was severely autistic. There were no subsequent children to the couple.

It was clear from the words and behaviour of Mrs Black that similar attitudes existed in her household. She was in fear of her husband, clearly had low self-esteem that made her behave in a subservient way even to her own autistic teenage son, did not work, and was somewhat hostile to the world. She was authoritarian and did not speak unless there was some sort of instrumental need. She was clearly from a Christian background of some type although religion was never directly addressed in conversations but it was acknowledged that there was some church affiliation. Both parents were English.

Mrs White was somewhat different. She was extroverted, gregarious and charming. However, her attitude towards William was arguably informed by previous relationships with men, including her husband, who was equally charming and gregarious but bossy and refused to participate in child rearing also. Although Mr White was British, Mrs White came from a country that is Muslim, has a history of human rights abuses and where women experience severe discrimination. Her background clearly influenced her attitudes towards William, as she was highly authoritarian, distant and lacked affective content towards him unlike her attitude towards her daughter which was warm and positive. Mrs White worked in a managerial occupation.

The Green family had different dynamics as the father was normal, kind, caring and endeavoured to participate in child rearing in some capacity. However, his job took him away from home for weeks at a time, and this meant that Mrs Green was then solely responsible for George. Moreover, when Mr Green was at home, Mrs Green’s attitude made more involvement with his son, difficult. Mrs Green did allude to a difficult relationship with her father during her childhood and it appears likely that this had an effect on her relationship with her husband and son and caused her somewhat unpleasant attitude. Mr Green did wherever possible take an active part as could be seen when someone canvassing came to the front door and wanted to talk politics. It was Mr Green who took the initiative, called his son and encouraged him to listen and discuss. Mr Green was British while Mrs Green was part British and had a multicultural upbringing. Mrs Green worked in a low status job in a service sector.

It can be seen that the adults in these four case studies were all from different social and cultural backgrounds. This demonstrates that conditions for the onset of autism are not peculiar to any one society or social group, but depend on the nature of the reaction of adults to their specific childhood experiences and what each brings in terms of personality and emotional baggage to the marriage and parenthood. It is clear that in all four of these case studies the mother had had unfortunate experiences with men during childhood, and with the exception of the Green marriage, marital relationships were probably similar in nature to those between parent and child in the mother’s family of origins. However, it may be that there are families in which there is privation due to other reasons.

The two worst affected children had mothers who did not work while the two who were more able to live normal lives had mothers who did work. Although numbers are very small it suggests that when women are able to develop themselves as adults, this possibly lessens the level of disaffected behaviour towards any child. That is, it is beneficial for women and their families to be able to have a life outside of being a parent and spouse through for example, either being gainfully employed or involved in other group work such as for charity or self-development through some sort of further education.

But all adults had little insight into their own behaviours and attitudes towards their children. The author is suggesting that this demonstrates that across society as a whole it is likely that many men are in denial regarding the impact of their behaviour on wives and children while women too are unaware of their own negative feelings towards their offspring. There is a need to raise awareness of attitudes in order to reduce the impact of sexist or misogynistic behaviour towards spouses, and also the consequences of maternal and paternal attitudes towards children because in some instances it leads to a child becoming autistic.

If autism is to be reduced or eradicated, there needs to be a society wide change in attitudes towards family relationships. In this era of households mostly consisting of isolated nuclear families, with a maximum of two adults present, men must not consider it ‘women’s work’ to perform child rearing tasks including ‘talking to’ and making eye contact with a neonate, and must also be more considerate of women’s rights, including being more respectful of, and supportive of, women in general. This is particularly so if there are no other adults habitually present in the home. It would be further helpful for grandparents and even aunts and uncles to cooperate in family child raising in order to relieve the burden on individual mothers and to ensure a range of types of relationships so that autism is less likely to happen. There is an African proverb that says ‘it takes a village to raise a child’. Being mindful of such an edict would be useful for our Western European and individualist societies.

However, this leads into a discussion about relative global levels of autism. There is limited information about international levels of autism as it is not a legal requirement to notify any statutory bodies of autistic children. From the limited information available it appears that there is a difference between collectivist countries and individualist countries (Hofstede 1991). The Focus for Health website has a limited list of selected countries, some statistics of which are not reliable (for Japan, for example), for national autism rates. However, on searching the internet, other information is also available. The information available partly supports the hypothesis that autism rates are higher in individualistic countries than collectivist countries, although some authors (Xiang Sun et al. 2013) suggest this is a level of development issue. The more likely explanation is that adults in such societies are more group oriented and therefore it is more likely that there are more adults involved in the socialisation of children than in individualist countries. The lowest rates are in Poland, Taiwan, Japan and China, all of which are collectivist countries. The highest rates are in the USA, South Korea and Hong Kong. The USA and Hong Kong are individualist countries but South Korea is not.
However there are severe methodological problems in this exercise. There is limited information available for Hong Kong, China and Taiwan, and rates differ markedly across time. Moreover, there is no single universal definition of what constitutes autism thereby reducing reliability and validity of comparative studies.

Nonetheless there is sufficient evidence here to be mindful of such issues and to motivate individualist countries to make more of an effort to provide some sort of assistance to new parents. It would be preferable for other adults in the family to provide assistance, but that is not always possible for a variety of reasons. Sometimes the parents are deceased, or relationships between parent and adult child are severely dysfunctional. Sometimes migration has occurred and the consequence is that parents are too far away to be able to travel to where the young parents live. Nonetheless, this reduced familial assistance and individualist approach to child rearing while at the same time, regarding women as being somehow inferior to men and treating them so, appears to make autism more likely and supports the African idea that it is beneficial to child development for there to be other adults in the household and beyond when a child is born and who can provide assistance to the new parents.

It can be seen that it is a mistake to solely apportion blame to women for the autism of their children. Men are just as culpable due to misogyny through refusing to assist with child rearing, treating wives as though they are inferior and thereby causing mental health issues, while insisting on maintaining male cultural hegemony (Gramsci, 1971). Many mothers of autistic children are the victims of such hegemony. The end result is more damaged humans born to succeed from the beginning to struggling parents whose parenting skills are inadequate and to re-educate the adult child in acceptance of more egalitarian and democratic relationships with the state being obliged to pay for those conditions in adults living in households in England. Report from the Adult Psychiatric morbidity survey, 2007. The NHS Information Centre for health and social care. 2009.


Oakley, A 1972, Sex, Gender and society, Aldershot: Arena.


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### Table 1: National rates of autism in selected countries

<table>
<thead>
<tr>
<th>Country</th>
<th>%</th>
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<tbody>
<tr>
<td>Poland</td>
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</tr>
<tr>
<td>Taiwan</td>
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<tr>
<td>China</td>
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<td>Germany</td>
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<td>Canada</td>
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<tr>
<td>Ireland</td>
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<td>Japan</td>
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</tr>
<tr>
<td>USA</td>
<td>2.63</td>
</tr>
<tr>
<td>South Korea</td>
<td>3.72</td>
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</tbody>
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Source: https://www.focusforhealth.org/autism-rates-across-the-developed-world/


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