

CHAPTER 1

INTRODUCTORY ORIENTATION, STATEMENT OF THE PROBLEM, AIM AND PLAN OF STUDY

1.1 INTRODUCTORY ORIENTATION

1.1.1 The breakthrough of educating and teaching in intervening with the autistic child

The mistaken idea that autistic children are uneducable, unteachable and unreachable and therefore are referred to lifelong *institutional care* today is quickly disappearing. From a psychopedagogical perspective autism is viewed as a handicap with far-reaching educative implications while from a psychiatric point of view it is designated as a state of disease, a syndrome—a complex of outwardly manifested symptoms. The opinion that autism as a phenomenon is the study-, work- and interest-terrain of only psychiatry today is quickly disappearing because of the realization that the basic need of such a child is for *educative teaching*.

Since 1945, the psychoanalytic view that autism is the result of extraordinary affective neglect has enjoyed almost worldwide recognition in psychiatric circles (when Leo Kanner described it in an article and tried to offer an explanation of its cause). For years it was believed that the “emotional disturbances” of autistic children could only be eliminated by long- term psychotherapeutic intervention on a psychoanalytic foundation. This notion is still held today in certain professional circles (1 p 234). Until the 1960’s there also was the belief that psychiatric treatment was an undeniable precondition for teaching these children (2 p 7). Intervening with autistic children, in whatever form, in some circles still has a strong medical, psychiatric, psychological and therapeutic flavor and often there is still talk of a *patient* who must be *treated* and not of a *handicapped child* who has a need for *orthopedagogic-orthodidactic intervention*. It is often viewed as a mental deviation that clearly requires psychiatric treatment of one type or another and following from this assumption an autistic child must be treated in one or another hospital, clinic or institution. Orthopedagogic-

orthodidactic intervention was even held in contempt and viewed as an inferior form of therapy or treatment in certain psychiatric and medical circles. Especially there was the belief that only a trained psychotherapist is in a position to achieve any success worth mentioning in helping such children. During the 1960's a number of journal articles appeared about the so-called success achieved in "treating" autistic children, but according to Wing (3 p 7) there was not yet an established tradition of special education for them. To the extent that it seemed that psychotherapeutic treatment of autistic children had few fruitful effects and that the parents became more dissatisfied with the accusation of psychoanalytically oriented psychiatrists that as a consequence of their affective neglect they are responsible for their children's autism, the need for organized educative teaching for these children became more obvious. During the previous fifteen years (with an accelerated increase since 1970) more and more schools for autistic children were established overseas and an important breakthrough occurred regarding the continuous intervention with these children. Since 1970, the continued intervention with autistic children in countries such as the USA, England and even in the Republic of South Africa became the responsibility of education authorities. The necessity for educative teaching is finally realized and various organizations began their campaigns for the foundation of schools for these children. A number of schools for autistic children consequently have already been established throughout most of the world.

1.1.2 The concept "autism" and the name "autistic child"

Autism is certainly one of the most enigmatic, most disconcerting and most serious handicaps a child can have. The word "autism" is derived from the Greek word "autos" that means "self" (4 p 231). Regarding its definition, Kaufman noted the following: "Autism is an illness not defined by origin or cause, but by a collection of associated symptoms or behavior" (5 p 15). It is also obvious that its most conspicuous characteristics, i.e., the persistent, excessive and almost constant self-involvement, or an existing only for himself form the starting point of practically all descriptions of autism as a type of handicap. Prick and Calon (6 p 154) explain this conspicuous characteristic of an autistic child as follows: "Het geheel op het eigenzelf betrokken zijn, het leven in een eigen wereldje,

waar zij niet uit te halen zijn en waarin een buitenstander haast niet binnen kan dringen; dit op-het-eigen-zelf-betrokken-zijn verklaart ook de naam van dit ziektebeeld (autos=zelf)”. Definitions and descriptions usually have a connection with such a child’s extreme ways of behaving and, therefore, especially refer to what such a child is able or not able to do; what he is or isn’t and how he continually distinguishes himself from normal children with respect to these qualities and inabilities. Chaplin describes an autistic child as follow: “Autistic children show symptoms of their handicaps from the beginning of life. These symptoms include extreme isolation and a strong desire to avoid change. In all such children there is a disability from their earliest days to relate to people or to situations. There is a rejection of reality, and a tendency to indulge in repetitious activities and to brood” (7 p 26). In the foreword to the Murray report on autistic children preference is given to the term “early child autism” that is defined as follows: “Early child autism forms a recognizable syndrome that begins before the age of three and is characterized by self-involvement and preoccupied behavior, language disturbances and ritualistic, compulsive phenomena” (8 p viii). Since the particular ways of existing, characteristic attributes and unusual ways of behaving are explicated more fully in this study, for the sake of conceptual clarity the following preliminary description will suffice: The autistic child is described as a not-yet adult completely involved in himself and, therefore, does not encounter his fellow persons, does not stand open to the appeal from the surrounding reality, is not directed to giving meaning to reality and thus does not step up to reality in an exploratory way. Thus, such a child answers “no” to the appeal from the surrounding reality to himself proceed to establish a world full of confidence and in doing so to make himself at home in a joint or communal world. As a dweller in an anxiety provoking, incomprehensible, chaotic world, such a child is not only insecure and uncertain, but generally lacks adequate speech and language, is thrown back on and imprisoned in his own body, but he also holds fast to a familiar little world and shows a particular order and persistence, often with stereotypic, compulsive and ritualistic behaviors. A later fathoming of the psychic life of the autistic child-in-education can open possible perspectives that can modify this preliminary description.

1.1.3 Criteria for identifying autism in children and the recognition of autism in practice

a) General

Autism is such a comprehensive handicap that in general it is identified by means of lists of a number of criteria. Leo Kanner, an American psychiatrist, in 1943 attributed the term “autism” to this phenomenon and was the first compiler of a list of criteria for identifying autistic children. This first identification list has previously been qualified by a number of investigators, described differently and expanded but the core idea remains unscathed. Since then, researchers have not succeeded in adding important improvements to Kanner’s original list (9 p 16).

In using any group criteria it must always be kept in mind that the degree of being handicapped *differs from child to child* and a particular child is not necessarily burdened by all aspects of autism. Thus, each child has his own characteristic pattern of handicaps (10 p 23).

In addition, it must also be kept in mind that positive changes occur in most autistic children after a period of genuine orthopedagogic intervention. In this respect, Wing (11 p 23) writes the following: “A child who was mute, withdrawn and extremely difficult in behaviour at the age of four may, by the age of ten, be affectionate, competent in self care, able to talk in a simple fashion and reasonably well behaved in familiar situations. Thus general statements about the severity of the syndrome are likely to be wrong and they can be harmful”. Applying thoughtless generalizations and absolute pronouncements with respect to an autistic child’s handicaps and potentialities must be avoided, especially with preschool autistic children.

b) Criteria for identifying autism as compiled by Kanner

Wing (12 p 15) refers to the following criteria of Kanner that must be taken into account whenever autism is diagnosed in a child:

- “1. A profound lack of affective contact with other people.
2. An anxiously obsessive desire for the preservation of sameness.
3. A fascination of objects, which are handled with skill in fine motor movements.
4. Mutism, or a kind of language that does not seem to be intended to serve interpersonal communication.
5. The retention of an intelligent and pensive physiognomy and good potential, manifested, in those who can speak, by feats of memory and, in the mute children, by their skill on performance test, especially the Sequin form board.”

c. The fourteen diagnostic criteria of Clancy

An Australian, Clancy, has compiled a particularly useful schema for diagnosing autism that, without much modification, can be transformed into a questionnaire. Indeed, this schema is used by child psychiatrists in the Republic of South Africa. The fourteen ‘core’ symptoms as espoused by Clancy are (13 p 13):

- “1. Great difficulty in mixing and playing with other children.
2. Acts as deaf. No reaction to speech or noise.
3. Strong resistance to any learning, either new behaviour or new skills.
4. Lack of fear about realistic dangers, e.g., may play with fire, climb dangerous heights, run into busy road or into the sea.
5. Resists change in routine. Change in the smallest thing may result in acute, excessive or seemingly illogical anxiety – e.g., child rejects new or all but a few foods.
6. Prefers to indicate needs by gestures. Speech may or may not be present.
7. Laughing and giggling for no apparent reason.
8. Not cuddly as a baby. Either holds himself still or clings limply.
9. Marked physical overactivity. Child may wake and play for hours in the night and yet be full of energy the next day.
10. No eye contact. Persistent tendency to look past or

- turn away from people especially when spoken to.
11. Unusual attachment to a particular object or objects. Easily preoccupied with details or special features of this object, and has no regard for its real use.
 12. Spins objects, especially round ones. Can become totally absorbed in his activities and distressed if interrupted.
 13. Repetitive and sustained odd play, e.g., flicking pieces of string, rattling stones in a tin, tearing paper.
 14. Standoffish manner. Communicates very little with other people. Treats them as objects rather than people”.

d) Some observations about the different criteria for diagnosing autism

The first conclusion arrived at when the different criteria are listed is that autism is recognized in particular symptoms, especially in the extreme behavior of such a child. That is, this has to do with the activities that such a child cannot carry out and peculiar, unusual activities and the manifestation of *giving inadequate meanings* to and defective order to his life world. This child's inability to encounter and establish affective bonds with fellow persons are certainly the most conspicuous characteristics of autism. The fact that he is not directed to giving meaning “normally” and does not associate meaningfully with reality also explain his attachment to the unchangeable, his resistance to change and peculiar ways of handling objects and ways of behaving that are extremely unstable, displays an unordered emotional life as well as a handicap in adequately actualizing his cognitive potentialities.

The most debatable criterion for identifying autism is Kanner's notion that as a rule he has good intellectual potentialities. It appears that such a position largely amounts to a thoughtless generalization based on misleading and isolated cases of achievement in the intellectual domain that such children sometimes show (14 p 18). As a counterargument it is mentioned that a number of autistic children, despite many years of educative teaching still show the image of a genuine mental handicap although they can be very dexterous with jigsaw puzzles, form boards or other simple construction work and work assignments that merely require mechanical memory and manual dexterity

(15 p 53). As a rule such autistic children do not have a good intelligence characterized by transferrable insights. It is important to keep in mind that autism can arise in a child irrespective of the nature and degree of his innate and actualized intellectual potentialities (16 p 289). Therefore, to contend that *all* autistic children have particular intellectual potentialities does not appear to be true. Because even to this day meaningful changes have not been able to be made to Kanner's schema for identifying autism, it still enjoys worldwide acceptance.

e) Identifying autism in practice

Since 1960, knowledge about autism has increased greatly and this phenomenon has become known to increasingly more physicians, psychiatrists, teachers and educational planners. However, it is obvious that today there still is lots of ignorance and many errors of judgment made about autism by many physicians that arise as a consequence of neglecting to acquaint themselves with the latest literature on autism and specialized intervention with such children (18 p 273). Schopler mentions that he often runs across parents who have already taken their child to various clinics, family doctors, hospitals and specialists for examinations only to become confused and more anxious about their child's future because of inconsistent findings and conclusions. Inappropriate advice given to the parent and errors of judgment about the outlook of their autistic child in the Republic of South Africa are especially given by such physicians. Physicians are sometimes of the opinion that an autistic child is mentally disturbed or has brain damage or that such a child ought to be summarily placed in an institution (19 p 274). According to Murray (20 p 70) such diagnosis requires particular knowledge of, e.g., child psychiatry, the ways autism manifests itself, the preconditions for harmoniously becoming adult as characterized by a normal flourishing of the affective and intellectual life of a child, and of the influence of neurological and physiological defects, as well as broad knowledge of the child's physical development and becoming adult (21 p 70).

In the Republic of South Africa autism is diagnosed by qualified child psychiatrists at the Red Cross Children's Hospital in Cape Town and at the Transvaal Memorial Hospital for Children in

Johannesburg. Children are usually referred, by a general practitioner, pediatrician or the head of a school for autistic children, to one of these two examination centers for diagnosis and a final qualification as autistic.

Child psychiatrists have the task of carrying out a diagnostic examination in which the child and his parents are involved. Because such a child is usually unable to participate in an interview, an auto-anamnesis is not practicable. However, the child's appearance and ways of behaving are closely observed during. During such an examination, the child psychiatrist is in an excellent position to compile the interview data about the child provided by his parents (hetero-anamnesis). With the help of this conversation and especially the use of Clancy's fourteen diagnostic criteria the essence of the child's manifested psychic-spiritual activities are described, analyzed and explicated and in this way a person image of such a child can be formed.

To supplement and confirm the child psychiatrist's findings use also is made of medical reports from neurological, pediatric, as well as audiological, ophthalmological, orthopedagogical-orthodidactical reports from school personnel as provided after a period of observing such a child in a school for autistic children. After completing such a comprehensive examination, the child psychiatrist compiles a complete person image of the particular child, and when he no longer has any doubt about the presence of autism the child is formally qualified as "autistic". After consulting with the parents as well as the head of the school for autistic children, the child is admitted to such a school to receive specialized educating and teaching.

1.1.4 The causes of autism

Today autism is still as much a mystery as in 1943 when Kanner described this phenomenon in children. There is still no generally acceptable explanation for the emergence or origin of autism and therefore there are widely diverging, contradictory opinions about this (22 p 424). "Discrepancies are great among the opinions of what causes autism, and of whether or what the parents contribute".

First is the so-called psychogenic hypothesis according to which autism is viewed as the manifestation of unusual emotional disturbances. The proponents of this theory contend that the autistic child's emotional flatness, aloofness and inability to enter social bonds are attributed to extreme affective neglect by so-called "cold", unloving parents.

Second there are those theories that espouse biological deviation as a causative factor for autism. Such theories attribute this handicap to genetically inherited factors, metabolic disturbances, trauma, damage or the malfunctioning of one or another area of the brain or central nervous system, or an unusual intellectual deviation and its correlated consequences (23a p 130; 23b pp 77-78; 23c p 25; 23d p 272).

With respect to the influence of serious affective neglect on the child's becoming a person, it is mentioned that it often can give rise to a restraint in becoming that can create the appearance of autism. However, this state, known as pseudo- or apparent-autism, can be successfully eliminated when such a child is removed from his family home and is placed in foster care where favorable educative situations exist (24 p 45). If serious affective neglect does indelible damage to the child's personal becoming and results in an almost permanent handicap such as autism, the quick improvement seen in foster children is not possible. Because most investigators today hold the view that autism as a handicap is too comprehensive and complicated to be designated as the result of affective neglect, there can be agreement with Wing (25 p 34) when she calls the so-called psychogenic hypothesis as "unlimited speculation".

Although the cause of autism so far cannot be indisputably shown it seems that the origins in biological and neurological brain abnormalities appear to be most credible and likely (26 p 47). Children who qualify as brain damaged usually do not show the typical ways of behaving and associating with reality that are peculiar to autistic children. Here one especially thinks of the autistic child's inability to encounter a fellow person or be directed in a meaning-giving way to reality and to establish a stable life world, an extremely inadequate realization of the modes of learning, particular problems regarding the acquisition of spoken language,

peculiar, stereotypic and ritualistic behaving, as well as inappropriate bodily movements. On the other hand, it is obvious that a number of autistic children, in addition to their typical autistic behaviors, to a greater or lesser degree manifest lived experiences, motor and neurological-physiological deviations similar to those usually associated with brain damaged children. Thus there is often an overlap in the symptoms of these groups of handicapped children. That is, autistic children also show behavioral and/or bodily deviations that are peculiar to brain damaged children (27a p 60; 27b p 292; 27c pp 66-69). In the previously mentioned context, the following are often obvious: excessive fluctuation in attending, a short attention span, defective concentration, excessive distractibility in attending, perseverations (attachment to or possessiveness of objects that are of particular personal interest), dominance [laterality] disturbances, weak gross and fine motor skills (respectively with respect to bodily/physical control and hand- and finger-use), hyperactivity (“Hyperkinesis”) or unusual passivity (“Hypokinesis”) or in a few cases, spasticity (uncontrolled muscle movements and extremely flexible joints) or epileptic and abnormal cortical activity as shown by electro-encephalogram examinations. In addition to the fact that in certain cases brain damage can clearly be shown, a number of autistic children as babies and toddlers show unusual problems sleeping, problems with eating because they suckle with difficulty as well as cry almost continuously, all phenomena that can point to some kind of brain damage (28 p 24).

Although the theories that propose one or another form of brain damage still cannot be irrefutably shown experimentally, it indeed appears that this is the direction in which an explanation of the phenomenon of autism must be sought.

1.1.5 Prognosis

Because autism is still not completely understood and explained, it seems that today it is still not possible to “cure” it in one way or another. Success in treating autistic children has not yet been found in the fields of neurosurgery, pharmacology and psychotherapy (29a p 7; 29b pp 5 81). Just as little as what can be useful to medical science for children with nerve deafness, at the

present moment, just as little can this be of service for autistic children. Special educative teaching is the only way in which the autistic child can be supported to a way of existing more worthy of a human being and characterized by socialization, the acquisition of spoken language and the mastery of cultural systems. Because each individual autistic child has his own unique nature and degree of handicap and intellectual potentialities and is burdened by a distinctive combination of handicaps, it is very irresponsible to draw general conclusions about the extent to which an autistic child will succeed in making progress in any terrain (30a p 24; 30b p 67).

A number of researchers are unanimous that an autistic child's spontaneous readiness and ability to acquire language before the age of five is a very important indication of his slumbering potentialities to eventually learn to adequately master language, to have inter-human encounters and be able to make scholastic progress (31a p47; 31b p277; 31c pp 121 132). Wing views the nature and degree of the intellectual potentialities of autistic children as a very important prerequisite for acquiring language and also as an indication of the expected level of scholastic progress that they ought to reach, and she states this matter as follows (32 p 300): "Autistic children with normal intelligence can learn academic skills and a few may eventually become independent. The mildly or moderately retarded autistic children are likely to be able to learn practical and domestic skills to a reasonable level and some reading and writing and number work for very simple practical purposes. They will however, need sheltered work and accommodation but can be usefully employed within these limits. For the severely retarded autistic children the aims are to improve self care and to capitalize on any other isolated skills that may be present".

From the research of Rutter, De Meyer, Lotter and Kanner it appears that about half of the autistic children have had an unfavorable prognosis at later ages (12-18 years) (33 p 276). Specialized educative teaching where the autistic child receives a great deal of individual attention from a trustful teacher appears to make the best results possible regarding scholastic progress.

1.2 STATEMENT OF THE PROBLEM

1.2.1 Preliminary statement of the problem

The teaching of autistic pupils in the Republic of South Africa as well as in countries such as England and the USA today [1979] is still in its infancy. In contrast to the case, e.g., of teaching the deaf and the blind, today there is still no established teaching tradition for autistic children. Although a large number of works on the autistic child have appeared especially from a medical, psychiatric and psychological perspective, there still is a need for pedagogically founded works on the *psychic life, educating*, as well as the *theory and practice of teaching* this child. The literature on the autistic child is characterized by the fact that psychiatrists often appear as authors or editors of such works. Generally they contain detailed explanations of the “psychic life” of the autistic child in which the concentration is on his outwardly perceivable behaviors. The educative situatedness of the child is not centrally placed and there is no explication of his psychic life and its actualization within the educative situation. The existing literature on autism reveals an undeniable stamp of psychoanalytic and behaviorist views of the nature of “psychic life”, “educating” and “teaching” of this child. Often the author is blinded by the outwardly observable, symptomatic behavior of such a child and the interdependence of a person’s (child’s) emotional, willing and intellectual life is not properly understood. The influence of emotional, willing, cognitive and normative accompaniment (educating) on the actualization of the child’s psychic life, e.g., is seldom broached. Besides this the deeper significance of a stabilized emotional life and the mastery of language in the autistic child’s becoming adult clearly are not understood and explicated.

Because these authors are often adherents of psychological directions of thinking such as psychoanalysis and behaviorism, it is not at all surprising that behaviorist principles such as “behavior modification” and instrumental conditioning (“operant conditioning”) are even applied in the practice of this teaching. In a publication titled “The Autistic Child: Language Development through Behavior Modification”, Lovaas (34) provides a detailed explication of a language teaching program in which use is made primarily of instrumental or learned conditioning (“operant

conditioning”) as a method. By means of extensively making use of rewarding and confirming, the autistic child is enticed and prompted to positive behavioral change and the acquisition of language.

Thus, from the above it is concluded that there is a pressing need for literature with a psychopedagogical perspective on the autistic child in order to be able to provide the reader a better understanding of the actualization of the psychic life of the autistic child-in-education.

1.2.2 More precise statement of the problem

a) A description of the psychic life of the autistic child-in-education as a task for psychopedagogics

1 General

In the previous sections a need for a [phenomenological] fathoming of the psychic life of the autistic child was indicated. At this stage a reflection on the concepts “psychic life” and “child-in-education” seems to be necessary.

To be able to accomplish this, it is necessary to choose an area of science that specifically concerns itself with the *psychic life of the child-in-education*. If this would only involve the psychic life of the child, psychology would have to be the appropriate area of science, but the qualification “child-in-education” necessitates entering pedagogics as a science and, as far as this study is concerned, it seems to be unavoidable to select psychopedagogics, as a part-perspective of pedagogics, as the terrain of study.

2 Psychopedagogics as part-perspective

(i) The concept “part-perspective”

Because of the complex nature of the phenomenon of educating, the area of study of pedagogics (the science of education) requires a sharper illumination of a particular aspect of the reality of educating and the differentiation and study of a few independent

perspectives within the framework of an autonomous pedagogics as a comprehensive whole. The following are some of the part-perspectives distinguished within pedagogics and accepted as independent part-disciplines: fundamental pedagogics, didactic pedagogics, psychopedagogics, historical and comparative pedagogics, sociopedagogics, vocational orientation pedagogics and physical pedagogics.

(ii) Psychopedagogics: its name and area of study

Of all of the pedagogical part-disciplines just mentioned perhaps psychopedagogics has had the most difficult struggle in being able to proclaim its identity. Until recently this part-perspective was known as educational psychology, a name attributed to this area of study during the 1920's by E. L. Thorndike, a behavioral psychologist (35 p 22). Thorndike and his followers view educational psychology as an area of psychology applied to educating and teaching a child. Although educational psychology and what it contains has already been called untenable and unacceptable by Sonnekus and his co-workers (36) there is still a desperate adherence to this name in certain Afrikaans and English speaking universities in the Republic of South Africa. At the University of Pretoria, preference is given to the name psychopedagogics because of the conviction that the psychic life of a child can best be described as it is manifested in the educative situation. As will become clear later, psychopedagogics is concerned with the psychic life of the child, called psychic moments by some authors (37 p 8). Sonnekus (38 p 27) has traced the concept "psyche" back to its etymological origin and offers the following explication: "In its Old Indian origin, psyche means "breath that travels". The word "travel" (vaar) that is coupled with "experience" (er-vaar) means to move, to go to and in moving to reach something and to undergo. In its Greek origin "breath" means life or psyche as "bearer of lived experiencing as awareness". The word psychic means "belonging to the psyche" and psycho means "of the psyche".

Against the background of the etymological explication of the words *psyche*, *psycho* and *psychic* it is now important to emphasize that the name psychology as a science shall refer to the totality of

everything that appears regarding the psyche, and delimits the terrain of psychology. In psychopedagogics, the concern is with the totality of everything that appears regarding the psyche of a child *as this becomes actualized in the pedagogical situation*. Thus, psychopedagogics means the *pedagogics of the psychic life of the child, with the psyche as bearer of lived experiencing as awareness* (39 pp 9-10). The combination “psycho-pedagogics” refers to that science which studies the child’s psychic life in terms of ways of experiencing, lived experiencing, willing, knowing and behaving as realized in the educative situation (40 p 28). Against this background, the area of study of psychopedagogics is briefly indicated below.

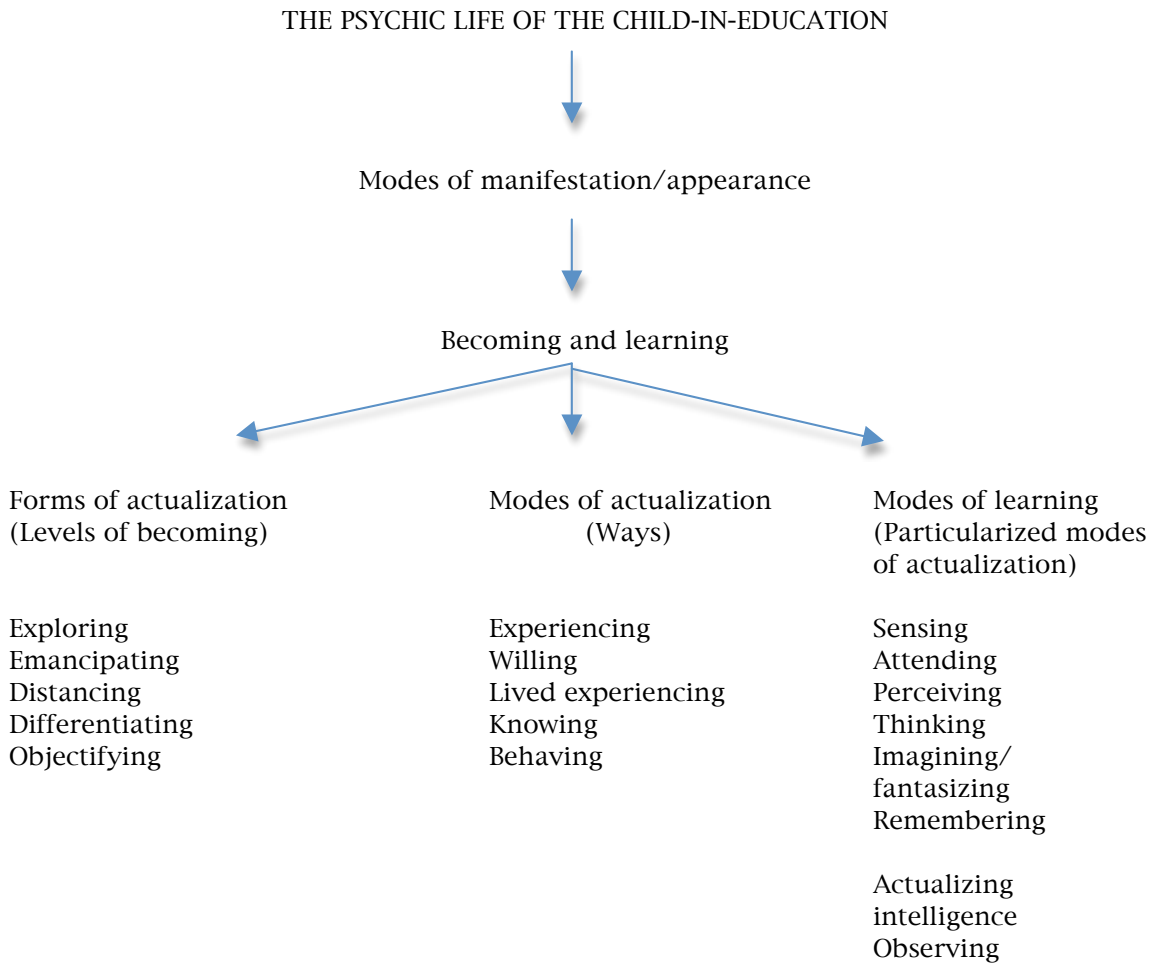
As far as the *area of study of psychopedagogics* is concerned, it must first be emphasized that a child must always be related to within an educative context and consequently the realization of his psychic life must also be considered from this perspective. It is precisely in this respect that there is the greatest difference between the ways psychology and pedagogics approach the child. Also, with respect to the manifestation and actualization of the child’s psychic life, the pedagogical thinker is continually aware that such matters must progress in the direction of proper adulthood. Viewed from a pedagogical (i.e., psychopedagogical) perspective, the realization of a child’s psychic life is a normative matter, a task given with child-being, as well as a task that demands the child’s active participation and that places a particular responsibility on the shoulders of his educators. In psychopedagogics this always involves the question: How is the psychic life of a child adequately or inadequately actualized? This can be represent schematically as follows (41 p 26):

in the direction of adulthood. On the basis of his resolve and initiative to learn, the child thus actively involves himself in his becoming. For the proper figuring forth of these initiatives to learn and to become, however, the child is dependent on adequate accompaniment, i.e., educating and teaching. These initiatives, as an active participation of the child in his becoming and learning, immediately draws attention to the particular ways in which his learning and becoming are realized.

2 Essences in the childlike psychic life by which his learning and becoming are realized within the pedagogical situation

A closer consideration of the actualization of his psychic life by the child-in-education brings to light the fact that this event occurs in particular ways. These ways of realizing (actualizing), i.e., experiencing, willing, lived experiencing, knowing and behaving are closely interrelated and are particular essences of learning and becoming (45 pp 14-40). These essences of the psychic life of the child-in-education are elevated to categories by Sonnekus (46 p 7), i.e., to illuminative means of thinking in terms of which he describes the realization of the child's learning and becoming. The essences in the childlike psychic life by which learning and becoming are realized have been worked out in finer detail by Sonnekus, Ferreira, Van der Merwe, Pretorius and Bondesio. These modes of actualization will be applied as categories during the further course of this study to interrogate the actualization of the psychic life of the autistic child in education, and indeed in terms of the actualization of *learning* and *becoming* as modes of manifestation of psychic life potentialities.

In order to form a concept of this particular psychopedagogical perspective and of the later application of the mentioned illuminative categories, a preliminary synthesized ground structure, as compiled by Van der Merwe (47 p 92), is reproduced [slightly modified by G.D.Y.]:



3 An interrogation of the realization of the psychic life of the autistic child-in-education with special reference to learning and becoming as modes of manifestation

In order to be able to fathom the question of accompanying to the self-actualization of learning and becoming by the autistic child, it is necessary to briefly describe becoming and learning as ways in which the psychic life is manifested. In addition, it is equally necessary to continually refer to the demands that the adequate actualization of learning and becoming place on the child with the aim in view of being able to interrogate the adequacy or

inadequacy, the differentness or possible under-actualization of them by the autistic child.

An essence view of a matter such as childlike becoming, a mode of manifestation of the psychic life of the child-in-education, a la Sonnekus and Ferreira (48 pp 142-145, 192-219), brings to light that:

- becoming and learning are inseparable from each other and as such are realized as a *unitary event* in the child's becoming adult;
- a child has *psychic-spiritual potentialities at his disposal* (among which are cognitive, knowing or intellectual potentialities) *as well as potentialities for becoming* that must be realized;
- the child is not passive but is an *active participant* in his becoming;
- becoming is also a *matter of willing* by the child and is propelled by a positive, powerful will;
- a child must be *emotionally stable* and must live in a genuine emotional bond with a trustworthy adult, by which he will *open* himself in order to have a part in his becoming;
- adequate *accompaniment* (educating and teaching) by an adult is a requirement for first-rate becoming by a child;
- a child can reject the accompaniment of the educator and consequently his becoming does not get started or *go awry* and can lead to a degeneration or inadequate learning and becoming;
- in realizing his becoming and learning the child is somewhere along the path to *proper adulthood*;
- becoming is a matter of propriety, i.e., is primarily *normative* in nature;
- proper adulthood as indicator of the course of childlike becoming necessarily implies a striving for and realization of an *educative aim* by the child;
- becoming implies continual change or *becoming different* and correspondingly, continually higher demands are placed on the child in realizing his becoming;

- becoming implies an *elevation in meaning*, i.e., to the extent that a child becomes adult he continually attributes additional and higher meaning to reality and the contents of reality;
- particular *modes of becoming* such as exploring, emancipating, distancing, differentiating and objectifying manifest themselves in the actualization of the psychic life of the child;
- becoming is continually characterized by *cognitive unfolding*, e.g., as evidenced in *increased* ordering by the child;
- a child's level of becoming is reflected in his *behaving*;
- criteria or *yardsticks* for becoming adult can be listed (among which are responsibility, moral self-independence, morality, propriety, and stated generally, an adult, humanly dignified way of living); and
- actualizing the psychic life in terms of becoming can be realized *on different level of behaving* (i.e., senso-pathic, senso-gnostic, pathic or pathic-gnostic, as well as affective-cognitive levels).

The following are some essences of childlike *learning* as a genuine human phenomenon as well as a way the psychic life of a child-in-education is manifested (49 pp 102-109):

- childlike learning is an *original way of living* in which the child finds himself as a person in the world;
- learning is a *human potentiality* that is given with the psychic life and that the child must continually *actualize*;
- learning is an *intentional phenomenon* that is confirmed by the child's openness for and directedness to fellow persons and the things around him;
- the phenomenon of learning is rooted in the so-called *principle of emancipation* (Langeveld) that amounts to the fact that the child is someone who wants to be and become someone himself (i.e., an *impetus* grounded in his *willingness to learn*);
- learning has the *character of a gift* and thus requires the child's own *initiative* and *active participation*;
- learning is indeed the child taking a *personal position* that is a totality act;

- learning is a *purposeful activity* of the child and as such it is a matter of seeking, giving and experiencing meaning;
- the proper actualization of learning without adequate *accompaniment* (educating and teaching) by an adult is almost unthinkable;
- effective learning can only occur if there is adequate *affective, cognitive and normative* (meaning-giving) *accompaniment* in pedagogic situations within which the pedagogical *relationship structures* are realized;
- childlike learning occurs because of a participation in a *situation* on the basis of the child's experience of the meaningfulness of the involved learning content;
- childlike learning is grounded on *emotional stability, positive willfulness and intellectual effort* (matters that show an interdependence).
- childlike learning is characterized by a particular *course* and that it occurs in various *ways*;
- effective learning is reflected in childlike *behaviors* that continually undergo *positive changes* to the extent that his possessed experiences expand;
- (Viewed from a psychopedagogic perspective) learning occurs on the basis of the *realization of the different essences of the psychic life*, i.e., experiencing, willing, lived experiencing, knowing and behaving; and as already mentioned
- learning is basically a *phenomenon of becoming* because it is a precondition for becoming.

In light of the above the question can now be asked about *how* the psychic life of an autistic child-in-education is actualized with respect to *becoming* and *learning*, or possibly inadequately realized? Stated differently, what is the autistic child's own role in [actualizing his psychic life] and how is it realized in the learning and becoming events as matters of becoming adult? Also it can be asked what this child's role is in making his own, appropriating or giving meaning to the accompaniment by his educators. A question that necessarily must be answered is how the role of the autistic child ought to appear in the becoming and learning events to his "becoming adult" as a task in order that such a child is offered the maximum support to adequately "become adult" (if possible). These questions are considered in the second, third and fourth chapters of this study.

c An orthopedagogical perspective

1 General

The fact that specialized intervention with the autistic child has already become the terrain of special education points to the presence of a problematic educative and teaching situation and to a possible *inadequate course of becoming and learning* by such children, on the one hand, and to the necessity for intensified educating (orthopedagogics) and teaching (orthodidactic intervention) of them, on the other hand. As soon as inadequately realized psychopedagogical and other pedagogical essences arise, the terrain of orthopedagogics is entered. When the orthopedagogical field of study and of work is entered from a psychopedagogical perspective, there is mention of *psycho-(ortho-) pedagogics*. When this psycho-(ortho-) pedagogical perspective is implemented with respect to the autistic child-in-education, it has to do with an illumination of the inadequate, different or under actualization of his psychic life in an educative context. In light of the aim of this study it is now necessary to briefly explicate the terrains of orthopedagogical theory (orthopedagogics) as well as orthopedagogical practice (orthopedagogy).

2 Orthopedagogics and orthopedagogy

The question about the determination of the possible field of study of orthopedagogics, i.e., the delimitation of the terrain of orthopedagogics, within pedagogics as a comprehensive science, enjoyed considerable attention in previous years. Vliegthart (50 p 31) describes orthopedagogics as that science that “tot object heft de opvoeding van kinderen wie door zeer verschillende oorzaken blijvend of gedurende lange tijd zo ernstige belemmeringen voor het verloop der opvoeding aanwezig zijn, dat de in een cultuurgemeenschap voor de grote massa van die jeugd gebruikelijke opvoedingsvormen niet tot een voor die kind en/of voor de gemeenschap aanvaardbaar resultaat voeren”. Orthopedagogics as a science is systematic knowledge of a phenomenon, i.e., the problematic educative situation (53 p 13), and as such is a part-discipline of pedagogics. For Vliegthart (54

p 23) this has to do with ... “de leer van het opvoedkundig handelen ten behoeve van het kind, dat op grond van eigen psychische en organische structuur aan de gangbare opvoeding ernstige belemmeringen biedt”.

According to Van Niekerk (55 p 20) necessarily, the orthopedagogue has to gauge in their essentials the *pedagogically achieved and achievable* so that one can determine with confidence what the *gap in becoming adult* includes, i.e., the nature of the particular child's problems in becoming adult. More particularly, this amounts to determining, penetrating or understanding the child-in-education's inadequate actualization of the potentialities of his psychic life and his becoming and thus there is a search for the essences of the child's different experiencing, different actualization of willing, different lived experiencing, etc. The question continually remains about how the child has or hasn't progressed in his becoming adult thanks to educating and with this his being in relationship to that which is achievable by the particular child. The nature and intensity of the miscarriage of the child's becoming adult as well as factors that give rise to this must be determined with the aim of linking up with them during providing help in “accelerating his becoming adult (56 p 22)”.

Children who because of the inadequate actualization of learning and becoming come under consideration for specialized orthopedagogic and orthodidactic intervention, are usually qualified as either handicapped or impeded. The use of the terms “handicapped” and “impeded” necessarily ask for conceptual clarification. A handicap in a child refers to an *unchangeable defect* with respect to his given potentialities (i.e., a physical, cognitive, sensory or neurological defect). Because these handicaps cannot be eliminated by an operation or other means, and the child's actualization of learning and becoming are kept in check by them, there is mention of *aggravating circumstances* regarding the realization of his learning potentialities. However, this does not imply that the child still cannot adequately realize his learning potentialities in spite of these aggravating circumstances. These aggravating moments can qualify as specific learning handicaps because they continually can be pointed out or are undoubtedly too specific, according to Van Niekerk (57 p 5).

In teaching practice there is special teaching and provision made for particular orthopedagogic and orthodidactic ways of attack in order to work against the effects of these handicaps, as aggravating circumstances, and to support the child to indeed adequately realize his available learning potentialities. Also the specific learning handicap always determines what form of special teaching the child is dependent on and by means of specially designed orthodidactic measures (e.g., Braille as writing for the blind and speech- [lip-] reading in the case of the deaf) the educator tries to avoid or cope with the obstacles that the concerned child experiences in actualizing the learning event.

A *restraint or impediment* in a child does not refer primarily to an aggravation in the realization of his personal potentialities but rather to its delayed or slower course. Thus, a learning restraint implies that the actualization of learning is disharmonious and progresses slower than how it can and ought to occur. Moreover, the learning restraint always includes the possibility of its *elimination* while this is very seldom the case with respect to a learning handicap.

It is precisely the *eliminability of the gap* between the learning a child has achieved and what is achievable that makes orthopedagogic and orthodidactic intervention necessary with a learning restrained child in contrast to sustained special teaching in the case of a learning handicapped child (58 p 6).

Orthopedagogy or orthopedagogic intervention is viewed as scientific, i.e., a specialized approach to coping with concrete problematic educative situations (59 pp 12-13). Thus, orthopedagogic intervention is special educating characterized by greater *deliberateness* in creating and using more *intense, more condensed and concentrated pedagogical measures* in order to adequately realize the concerned child's educability with which his learning and becoming potentialities are implicated. Orthopedagogic intervention, as an activity, is the accountable provision of help and support, via specialized measures, to all children who are restrained or who have become derailed from

being=on-their-way to adulthood, i.e., to all children in educative distress (60 p 3).

3 The right for a psycho- (ortho-) pedagogical perspective to exist with particular reference to the autistic child-in-education

In linking up with Van Gelder's reflection about the question of orthopedagogics, Pretorius (61 pp 90-93) paved the way for connecting the psychopedagogic question to Van Gelder and gave particular prominence to the problematic lived experiencing of the particular children-in-education under discussion. For Pretorius orthopedagogics also involves the problematic of the lived experiences and the experiential world of these children whose educability is limited. For him, this implies:

- 1 an analysis and fathoming of the handicapped child's sensory, gnostic and normative ways of lived experiencing;
- 2 the design and refinement of methods and media for exploring such a child's experiential world in order to be able to acquire an image of his lived experiencing;
- 3 a reflection about the particular orthopedagogic tasks that this particular child presents with the aim of an adequate realization of his (sometimes defective) potentialities for lived experiencing;
- 4 that the phenomenon of educating itself, and more specifically the moments of realizing the psychic life must be taken as the point of departure; and
- 5 the disclosure of stagnations in the child's actualization of potentialities for lived experiencing as well as the re-establishment or correction of them, and a guiding of the child, via his lived experiencing and re-lived experiencing, to full-fledged adulthood (62 pp 91-92). Pretorius' views in the above context show a particular emphasis on the *problematic lived experience* of the whole matter but also the problematic of experiencing, willing, knowing, or exploring, and behaving of the child who is in educative distress that can be placed within the framework of the problem area discussed. Thus, it would be advisable to make central a comprehensive concept,

i.e., *disturbed world relationships*, of such a child or indeed the psycho- (ortho-) pedagogic question.

Following Bondesio (63 pp 28-31 and Van Niekerk (64), the orthopedagogic field of work in its totality (which includes a psychopedagogical perspective on the inadequate actualization of the psychic life potentialities of the concerned child) can be designated as a three-fold matter:

- 1 In the first place, this has to do with identifying the problematic educative situation, educative distress, disturbed world relationships (experiencing, lived experiencing, willing, knowing and behaving) of the child or children of concern;
- 2 Secondly, this involves understanding, clarifying and reflecting on the identified problematic;
- 3 Thirdly, this has to do with reflecting on and putting into action a particular accompaniment of or giving help to the concerned child or children for the prevention, elevation or improvement of the child's inadequate becoming adult, as a question of educative distress characterized by various disturbed world relationships.

With respect to the autistic child-in-education, the psycho- (ortho-) pedagogical question embraces the following sub-questions:

- 1 If present, how are an inadequate educative situation and the educative distress of such a child constituted?
- 2 How does the course of learning and becoming of the autistic child progress such that it can qualify as disharmonious?
- 3 How must the adult (orthopedagogue) support and accompany this child so that once again he will give positive meaning to his disturbed world relationships (experiencing, lived experiencing, willing, knowing and behaving) on the way to harmoniously becoming adult?

Because in this study the spotlight also falls on the accompaniment (teaching and educating) of the autistic child, in the following, attention must also be given to the concept *accompaniment*.

d A pedagogical accompaniment perspective on the

present problematic

Because the phenomena of psycho- (ortho-) pedagogical moments are anticipated in the educative situatedness of the autistic child, it is important to briefly elucidate the essences of educative accompaniment as fundamental structures and the essences that must be realized in the educative situation of such a child.

Regarding the essence of educative accompaniment, or educating, it is necessary to emphasize that the phenomenon of educating is anchored in the fact that a person directs his life in terms of aims and in doing so gives it a particular form. Although on the basis of wonderful gifts a human being is admirably endowed to be able to realize his humanity, he is also dependent on others for supplementing and filling out his existence. In spite of his initial helplessness he succeeds in realizing his becoming a person because he not only is endowed with psychic-spiritual potentialities but also stands open for and directed to the world, can direct himself to seek meaning, can actively participate in his becoming, is educable and becomes educated. It is through this openness-for and directedness-to that a person lives and lived experiences and gives meaning and in this way establishes a meaningful world. An additional essence of this human openness is that a person continually establishes relationships with himself, things, God and fellow humans. An inclination for interpersonal involvement, bonding and encountering are thus fundamental essences of being-human that also are preconditions for encountering and bonding in living together. Educative accompaniment by the adult that leads to the child becoming adult can only occur if the adult and child encounter each other as well as live and act within a bonded living together.

In light of the above anthropological-pedagogical reflection, the phenomenon of educating can also be viewed as an essential characteristic of being human. In this context, Langeveld (65 p 158) writes: “Dat de mens een wezen is dat opvoedt, opgevoedt wordt en opvoeding is aangewezen, is een van de fundamenteelste kenmerken van het mensbeeld”.

Thus, the sense of educating is that the educator provides direction-giving support to (accompanies) the child in order that the latter acquire a grasp of life reality such that eventually he can meaningfully achieve his life task [of adulthood]. This implies a skillful grasp, an intellectual grasp, the respectful “living out” of the norms furnished by this and a philosophy of life in terms of which he can contribute to his unfolding of meaning (66 p 270). Educating, that essentially is a normative matter, means the educator’s purposeful intervention in the life of the child in order to support him in reaching full-fledged adulthood that is characterized by human dignity (67 p 26).

Educating not only requires reaching *aims* but it is also co-determined by the quality of the *relationships* that are established and maintained between child and educator within a pedagogic situation. In addition, educating occurs in accordance with a particular *course* or *sequence* and it is characterized by certain *activities*. Thus, educating is characterized by realizing pedagogical relationship, sequence, aim, and activity structures (68 pp 158-239).

The fundamental pedagogical structures of the pedagogical situation are:

1 The pedagogical relationship structures

- a) The pedagogical relationship of trust.
- b) The pedagogical relationship of understanding.
- c) The pedagogical relationship of authority.

2 The pedagogical sequence structures

- a) Pedagogical association.
- b) Pedagogical encounter.
- c) Pedagogical engagement or taking responsibility for interfering.
- d) Pedagogical interfering: (i) intervening and (ii) agreeing.
- e) Return to pedagogical association.
- f) Periodical breaking away from the pedagogical association.

3 The pedagogical aim structures

- a) Meaningful existence.
- b) Self-judgment and understanding.
- c) Respect for human dignity.
- d) Morally independent choosing and responsible acting.
- e) Norm identification.
- f) Philosophy of life.

4 Pedagogical activity structures

- a) *Giving meaning* (the child must be helped to attribute meaning to life reality with increasing responsibility);
- b) *Exerting* (the child must be helped to be willing and prepared to gradually break away from a lack of exertion in the direction of effort that is expected of an adult);
- c) *Exemplifying norms* (the child must be helped to live in accordance with particular demands of propriety (norms));
- d) *Venturing* (the adult must help the child to venture in trust with him on the way that the adult already knows, i.e., proper adulthood);
- e) *Gratitude* (the child must be helped to be thankful for the security that the adult offer him);
- f) *Responsibility* (the child must be helped to increasingly be accountable for his part in accepting responsibility for educative relationships so that eventually as an adult he will be accountable and responsible for all of his relationships with other persons);
- g) *Hope* (the child is helped to yearn for future adulthood that will then lead to a more proper living of adulthood);
- h) *Actualization* (the child must be assisted with designing his own human potentialities in order to reach full-fledged adulthood);
- i) *Realization* (the child is helped with reaching his destination, i.e., adulthood as an independent and responsible way of existing);
- j) *Dignity* (the child is helped to increasingly respect or have regard for his own human dignity and that of others until respect for human dignity is independently lived out);

- k) *Self-knowing* (the child is helped to increasingly understand and judge himself so that eventually as an adult he can choose and act with independent and responsible self-judgment); and
- l) *Freedom* (that the child is helped to conquer responsible freedom educative accompaniment implies that he must be helped to do in educative situations what later he ought to do independently and on his own responsibility).

Viewed from a psychopedagogical perspective, educative accompaniment implies the active involvement of the adult (educator) as well as the child (becoming adult) and there is mention of a two-fold actualization of the educative event. By this is meant the self-actualization of the potentialities of his psychic life as the child's part and the accompaniment to this as the educator's (parent and teacher) role. Accompanied self-actualization of the psychic life of the child implies that the adult will support, accompany and teach him to realize his psychic life potentialities continually more adequately. "He must be supported to more adequately experience, will, lived experience, know and behave such that the quality and scope of his experiencing will also show an increase in level. Then it will become possible for the child to carry on a more comprehensive dialogue with his world such that via sensing, perceiving, thinking, imagining and fantasizing as well as remembering he will come to a higher level of exploring, distancing, differentiating, objectifying and emancipating" (69 p 78).

Viewed from a psychopedagogical perspective, three ways of educating are distinguished, i.e., *affective* or *emotional*, cognitive, knowing or *understanding* and *normative educating* (accompanying), and it is accepted that there is a particular interdependence among these three ways of accompaniment.

Concerning the educative accompaniment of the autistic child, on the one hand, possible stumbling blocks on his path must be reflected on as well as on appropriate measures for realizing the mentioned fundamental pedagogical structures, and, on the other hand, there must be reflection on the successful psychopedagogical accompaniment of this child to the self-actualization of his psychic life potentialities in terms of affective, cognitive and normative

accompaniment with the aim of affective, cognitive and normative self-actualization.

As far as *teaching* the autistic child is concerned, there must especially be reflection on a meaningful, comprehensive *teaching practice*, designed against the background of the mentioned typical characteristics of the autistic child. Mindful of the fact that such a child indeed is handicapped by unusual aloofness/indifference, unsociability and an unwillingness to explore the surrounding reality with interest and give it meaning, it is obvious that such a teacher hardly can begin with formal teaching and the intellectual forming of such a child or even can practice teaching. Other than in the case of a school for normal children where in many respects the activities in the school are an extension of those that have already begun in the parental home, in all respects there must be a start from the beginning regarding the educative teaching of the autistic child in school. Because the autistic school beginner's life world appears to be extremely attenuated and chaotic, by specialized guiding, his teacher must help him build up and master stone by stone, as it were, a life world for himself. The problematic for the teacher of the autistic child, and indeed with teaching the autistic school beginner, is that there must be measures taken for:

- 1 Awakening his learning readiness, directedness and activities.
- 2 Awakening his facial-, voice- and visual-directedness as well as his attending.
- 3 Filling his need for a means of communicating as a requirement for meaningful orthopedagogic and orthodidactic intervention.
- 4 Specialized speech instruction and speech therapy for such a child (during which the classroom teacher and trained speech therapist cooperate closely).
- 5 Measures for promoting his gross and fine motor movements. Here support is given to promoting the autistic child's muscle coordination and control, eye-hand coordination, spatial perception and sense of balance, etc.
- 6 Measures for promoting his mobility, control of rhythmic bodily movements and play activities.

- 7 Measures for making his aware of his own body, body scheme, body knowledge and letting him master knowledge of body use.
- 8 Measures for promoting his independence (basic self-care, etc.).
- 9 Measures for promoting his association with others and self-maintenance in a social context.

To the extent that the pupils show progress in the mentioned teaching aims, that their affective formedness and interpersonal involvement are realized, and that they have largely abandoned stereotypic, ritualistic and peculiar behaviors as well as bodily movements and have learned to talk, chat, write, calculate (do sums) and read, as far as possible, provision must be made for the teaching of formal school subjects such as the mother tongue, mathematics, social studies, natural science, geography, history, etc.

1.3 AIM OF THE STUDY

Implicitly stated, the present study is concerned with the problematic regarding the actualization of the psychic life of the autistic child-in-education and there is an attempt to explicate and to interrogate everything that this includes. Stated more explicitly, the aim of this study is:

- 1 To think through and descriptively analyze the actualization of the psychic life of the autistic child with respect to learning and becoming, as the modes of its manifestation, in terms of psychopedagogical categories, with the eye to a better understanding of these phenomena.
- 2 To determine if and to what extent the actualization of learning and becoming by such a child is different from that of the “normal” child and, if so, to offer an explanation of why.
- 3 To determine what tasks are included in this possible different actualization of learning and becoming for educating and teaching these children such that these matters can occur as adequately as possible.
- 4 To provide guidelines with the aim of establishing measures focused on the more adequate realization of a world

relationship and becoming adult of the autistic child if they are progressing inadequately.

1.4 THE PLAN OF STUDY

In the *second chapter*, the actualization of learning by the autistic child is explicated and in this respect, the emphasis indeed is on the difference in this matter compared with its course in the normal child.

In *chapter three*, the becoming of the autistic child-in-education is evaluated from a psychopedagogical perspective in terms of a categorical structure.

In *chapter four* there is reference to establishing a psychopedagogical perspective on the orthopedagogical as well as the orthodidactical accompaniment of the autistic child in the educative situation at home and in school.

In the *fifth chapter* are a *summary* of this study along with findings, recommendations and the presentation of a perspective on the future.

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