On the way to an autism theory

I. Preface

The main thesis of the following article is that one can only understand autism under a dynamic, developmental, and social psychological perspective.
Every human development, including that of autistics, needs interaction and communication - and these always take place in a socio-cultural environment.
In the respective socio-cultural environment, different "common grounds" are created as the basis for communication and the possibility of mutual understanding.
Through the discussions with Prof. Dr. Vadim B. Khoziev the difference between German and Russian "common ground" became very clear to me. Thus it took some time before I had understood the very reserved allusion of Prof. Dr. B. Khoziev to write this article. In Germany this would have been much more directly expressed - in Russia, so my assumption, such a directness would be perceived as unfriendly.
The biggest difference between scientific discourse and normal exchange is, in my opinion, a continuous constructive (self) critical dialog, which constantly tries to explore and eliminate the limits of one's perception, of one's own "common ground".
The following explanations are based on a German and Anglo-American basis, and this is always taken into consideration. And my greatest hope, my greatest wish would be a continuous exchange with the Russian perspectives, of which unfortunately I have far too little knowledge.
Difference, however, does not in any case entitle to the acceptance of superiority or inferiority.
And, in addition to the possible problems and disturbances, the special abilities of autistics must also be considered.
A purely deficient view and limiting the autism spectrum solely to diagnosed autistics, takes too short and prevents real understanding.
So it is a central concern of me that the difference of autistics is not considered as illness or inferiority, but is accepted as otherness.
In the following, I will show that autism is above all a higher vulnerability to unsuitable socio-cultural environments. And that this vulnerability can lead to disturbances in development - but not necessarily has to.
(Vulnerability = Before the invention of electronic warning systems miners took canaries under ground because they are sixteen times more sensitive to toxic gases than humans.)
If you are trying to imagine a monastery, the calm of the place, the lack of language communication, the highly structured and ritualized daily routines, the possibility to withdraw, many synchronous activities such as chanting, it is not difficult to see that in this environment autism will be noticed at all.
The perception of autism is always dependent on the socio-cultural environment!

The article is essentially a summary of my books from the series "Autistic and Society - An angry change of perspective": Volume 1 "Understanding Autism", Volume 2 "Support for Autistic?", and the books together with Dr. med. Andreas Ganz, Specialist for Psychiatry and Psychotherapy, "Plaintext compact. The Asperger syndrome - not only for psychotherapists" and "Plaintext compact. Early-childhood autism - understanding = helping".
In 2014, I asked myself about the causes of the many problems and peculiarities in my life, but also my abilities. Reading a book by a leading German autism researcher about autism in adulthood did not answer my questions, but motivated me to do independent research.
The theory presented in the following is the result of this comprehensive as well as independent research. But first the current "theories" are to be subjected to a critical consideration.

II. Brief critical review of existing “theories”

Already some years ago Lynn Waterhouse with her article ‘*Autism Overflows: Increasing Prevalence and Proliferating Theories*’ [Waterhouse (2008)] provided substantial criticism of autism-research. Five years later in ‚*Rethinking autism - Variation and Complexity*‘ [Waterhouse (2013)] she published a comprehensive book on the many different, often mutually contradictory autism-theories. She comes to the conclusion that the central problems of autism-research up to today have not been solved. But both, the article as well as the book actually remained largely unnoticed!

Unimpressed research is continued ‘as usual’, as long as research funds flow.

And consequently basic problems have not changed – in spite of or even because of a rapidly increasing number of publications.

According to Waterhouse (2013) even after 70 years of autism-research the following problems remain unsolved:

1. No unified Autism-Theory.

‘Although theory competition, orphaned hypothesis, and disconfirmed theories are a normal part of scientific process, it is not normal science that autism research has developed no standard model. It is not normal science that 70 years of refinements to the diagnostic criteria, and seventy years of autism research have done nothing to synthesize competing autism subgroup proposals into a standard set. It is not normal science that the competing theories of autism deficits and causality have not been synthesized into a standard explanatory framework.’

2. No sufficient explanation for the growing number of autism diagnosis.
3. No valid criteria for diagnosis. (This will not be changed by the new definition in DSM-5– s. Waterhouse (2013) – on the contrary).
4. No explanation for the heterogeneity of humans in the autism spectrum.

These criticisms, however, are largely ignored. In addition, they are accompanied by massive violations against methodological rules.
In the case of samples which are far too small (sample smaller than 25, not randomized ...) and a heterogeneous group, statistical methods are actually prohibited.
Qualitative research approaches, on the other hand, are falsely regarded as "unscientific".
The basic problem, however, is that autism research is without a "unified theory" on a protoscientific level (Thomas S. Kuhn, The Structure of Scientific Revolutions).
Thus different symptoms are described from different perspectives, but the path from the symptom to the explanation is often blocked. Even the clear categorization of the symptoms must fail in this condition.
Without a "unified theory", autism research is trapped on a phenomenological-descriptive level.

III. New Theory – new perspectives

a) Social-psychology

Interaction and communication always take place between at least two partners. If there is a "disturbance of interaction and communication", both sides can be part of this disturbance.
Nevertheless, autism as a "disorder of social communication" has so far only been considered in isolation.
The basic prerequisite for the understanding of autistics, autism and possible disturbances of communication and interaction is above all the understanding of the Neurological Typical people (NT humans, i.e. without autism) and their communication.

Even if the results of social psychology are anything but pleasing, they show clearly that the communication of NT people is to a lesser extent as conscious and rational as we gladly accept.
Most of the communication and interaction of non-autistic people, on the other hand, is unconscious and group-related. Over mimic, gesture and imitation of the counterpart, small talk ..., Group membership and the hierarchy within the group is communicated.
Language serves only to a small part for the conscious communication of material contents, but to a large part of the unconscious communication of group affiliation via dialects, imitation of the speech melody of the conversation partner etc.

Dunning (2005) shows, which manifold causes prevent man from self-awareness, which mistakes man is subject to.
And Bargh (2014) highlights, that not only simple functions of man work unconsciously, but many, indeed most of the higher mental processes.

The merit of the social psychology is even and just to explore the unflattering and subconscious part of man. The biggest mistake, however, social psychology has committed so far is to have not seen autistics.

But it is especially the comparison between AS-human (People in the autistic spectrum) and NT-humans (people without autism) which certainly would be an asset for social-psychology. A first approach to a social-psychological perspective on autistics is a study of Yafai et al. (2014) on 'conformity' in autism.

For the understanding of autism the distinction between "unconscious group communication" and "social communication" is of crucial importance!

Considering a part of the symptoms of autism, namely, the widespread absence of
- Facial expressions and gesturing
- Imitation
- Modulation of the voice
- Understanding of the facial expressions and other people's gestures
- Small talk as "grooming" - see Dunbar (2004): Gossip in evolutionary perspective.
- ...

autism can be defined as:
The lack of unconscious group communication!

Because of the missing "unconscious group communication", autistic persons are often excluded from "social interaction" and are at high risk for bullying.
But social interaction is of central importance for all people. Without social interaction no development! At the same time, traumatic experiences such as bullying can lead to the development of mental disorders.

a.1) Anxiety and group behaviour
One of the most important tasks of groups is the reduction of anxiety among their members. Without "unconscious group communication", autistics are often excluded from groups and have to deal with their fears alone.

To consider fear as 'anxiety disorder' and 'co-morbidity' of autism is one of the biggest mistakes in autism research. This follows the adoption already shown to be false of humans as individuals that exist alone and outside groups, as AS-Human as well as NT-people. But fear is one of the major energies and influencing factors of human existence.

It is an integral part of cooperation in groups. And it also refers to the mechanisms underlying human being in principle.

Indeed, a large part of group behaviour refers precisely to 'anxiety avoiding', e.g. illustrated by Wetherell (2009) in the chapter '*The functioning of social systems in organizations as a defence against anxiety'*

Tantam (2003) is ahead of his time, when writing:

'Anxiety is perhaps the most universal and persistent disorder associated with all of the PDD´s, so much that it has been suggested in the past that it is a cause of autism. The author does not believe this, but anxiety is strongly linked to PDD from early age. The author´s view is that people with AS live in a world that is more unpredictable and uncertain than it is for others whose intact nonverbal communication enables them to pick up patterns in social behavior. It is this uncertainty that produces anxiety, and not anxiety that causes AS. But it is certainly true that anxiety increases the social impairment that AS produces, by decreasing social skill performance and by increasing the frequency of any dysfunctional means that a person with AS might use in the face of anxiety. Repetitive questions, slowness, ritualizing, making social blunders, and aggression or irritability are all likely to worsen when a person with AS becomes anxious.'

He overlooks, however, the parallels between the behaviours resulting from fear of NT-people and AS-people. Fear is set equal as 'anxiety disorder'. And anxiety in NT-people is hidden.

Isabel Menzies Lyth (1960) describes the following behaviours resulting from anxiety avoidance:

1. 'Ritual acquittal'
2. 'Reducing the burden of responsibility in making decisions through checks and balances'
3. 'Prevention of change'

What sounds like the description of normal autistic behaviour patterns, however, is the list of the behaviours of nurses in a hospital.

Menzies Lyth (1960) further:

'The greater the anxiety the greater the need for reassurance in rather compulsive repetition.'

and

'Avoidance of Change: Change is an excursion into the unknown. It implies a commitment to future events that are not entirely predictable and to their consequences, and inevitably provokes doubt and anxiety. Any significant change within a social system implies changes in existing social relationships and in social structure, which implies in turn a change in the operation of the social system as a defense system … In order to avoid this anxiety, the service tried to avoid change wherever possible and to cling to the familiar, even when the familiar has obviously ceased to be appropriate or relevant.'

From a social psychology perspective, it becomes clear that some allegedly autistic symptoms are ultimately signs of anxiety and / or their degradation, like
- Withdrawal
- Stereotypes
- Rituals
- Insistence on sameness
- Avoidance of change
- ...

These symptoms can be found in groups as well as in (autistic) individuals. They are less noticeable in groups because they are part of group behavior.

a.2) Autopilot

An important function of the "unconscious group communication" is the orientation on the group. This has the function of an "autopilot".
Social psychology demonstrates how strongly the (unconscious) orientation of the group is. This saves the group participants a lot of energy because no conscious decisions have to be made.
The group has an important function especially in situations where external orientation is absent.
Without "unconscious group communication" autistics lack this autopilot. That is, autistics must always consciously orient themselves and decide.
This clearly explains why for autistics a clear external structure is important for orientation.
And why autistics quickly reach the limit of resilience and need a lot of recreational opportunities.
The meaning of the autopilot, including the effects of the absence of the unconscious group communication is dependent on the socio-cultural environment!

In a rapidly changing society that is marked by the resolution of clearly defined structures and rituals, the presence of the autopilot as unconscious group orientation is of central importance.

Without autopilot, however, such an environment seems to be not understandable and not predictable - so as uncontrollable both in the sense of Seligman (1975) as well as Antonovsky (1997).

a.3) Stress

In many studies, high stress levels have been demonstrated in autistic patients.
Two sources are cause for stress among autistics:
On the one hand through the already described fear among other things due to the missing autopilot.
On the other hand, by frequent hypersensitivities.

Autistic perceive their environment usually much more intense, even painful. On the one hand the perception is much more sensitive, e.g. the auditory domain as by a too loud adjusted hearing aid. Secondly, however, disturbing stimuli are not automatically hidden also mainly due to lack of perception-filters. The "party filter" through which the voice of the conversational partner is filtered out of the ambient noise, is missing as well as the ability, e.g. to distinguish the teacher's voice against any existing class noise.
This hypersensitivity can be found both in the auditory, olfactory, visual as well as tactile perception.

Example consultancy:

In physical education a shirt remains. A student with Asperger syndrome assigns the shirt clearly and correctly to the owner solely by smell.

Unfortunately the possibility that this hypersensitivity is a possible cause of phobias, so far hardly has been taken into account. But because of the very strong, painful and overwhelmingly perceived stimulus a unique experience can already cause a "little Albert" effect.

Example consultancy:

A six year old autistic after a single inhalation of the vapors of a sharp vinegar at the table from there on denied eating at the same table.

Many behaviors especially of autistic children can be understood as response to stimuli around perceived as painful!

Example:

A one-time visit in a department store due to an overwhelming painful sensory experience in auditory, visual as well as olfactory area henceforth can result in denial of entry.

According to Seligman (1975) the unpredictability and the repeated experience of uncontrollability of stimuli lead to the "learned helplessness" and hence to anxiety and stress.

Firstly, anxiety and stress can be the causes of stereotyped and repetitive behaviors, which were previously seen as symptoms of autism.

Secondly, however, the permanent experience of anxiety and stress, and thus of helplessness especially leads to impaired motivation, cognition and emotion (Seligman 1975)!

b) Development Dynamic Model

Despite the previous definition of autism as "pervasive developmental disorder" autism and the resulting problems were regarded statically instead dynamically. But development always is a dynamic process dependent on many factors.

Development Dynamic models have so far been applied to people with mental disabilities, but not to autistic, although autism previously erroneously has been defined as a disability.

"The emergence of special mental health problems of mentally handicapped is developmentally examined, last but not least because in the previous decades, the step from the defect model to development model has taken place. This new way of looking ascribes mentally disabled people the opportunity to develop, with the development steps, phases, and sequences not different from non-disabled."

[Source: de.wikipedia.org „Geistige Behinderung“]

In order to understand autism and to assist autistic therapeutically, it is necessary both to say goodbye to the defect model, as set forth, as well as a development dynamic approach. Without unconscious group orientation, i.e. without autopilot, autistic will develop very differently, so show a large heterogeneity.
In addition, the importance of the socio-cultural environment is made clear by the social-psychological perspective. Thus, a development dynamic perspective is necessary even and especially in autism for understanding the effects of interaction with the environment.

„A development dynamic approach includes mental impairment that can be caused by a malfunction of the social environment." [Source: de.wikipedia.org „Geistige Behinderung"]

Only by means of a dynamic view can ever become obvious how in autism psychological problems arise due to the peculiarities of sensory perception and communication.

Development dynamics perspective

All children develop through different levels. For decades this has been investigated by developmental psychology and various development models exist for explanation. So far for children with and without intellectual disability, but not for Autistic children.

The understanding of the peculiarities of the perception, communication and interaction of autistics as well as a comprehensive support is decisive.

Without fully embracing different developmental psychological theories, there are four areas from which the development of a human being, autistic or NT person. What applies to the development of NT people also applies to people with intellectual disabilities - and also applies to autistics!

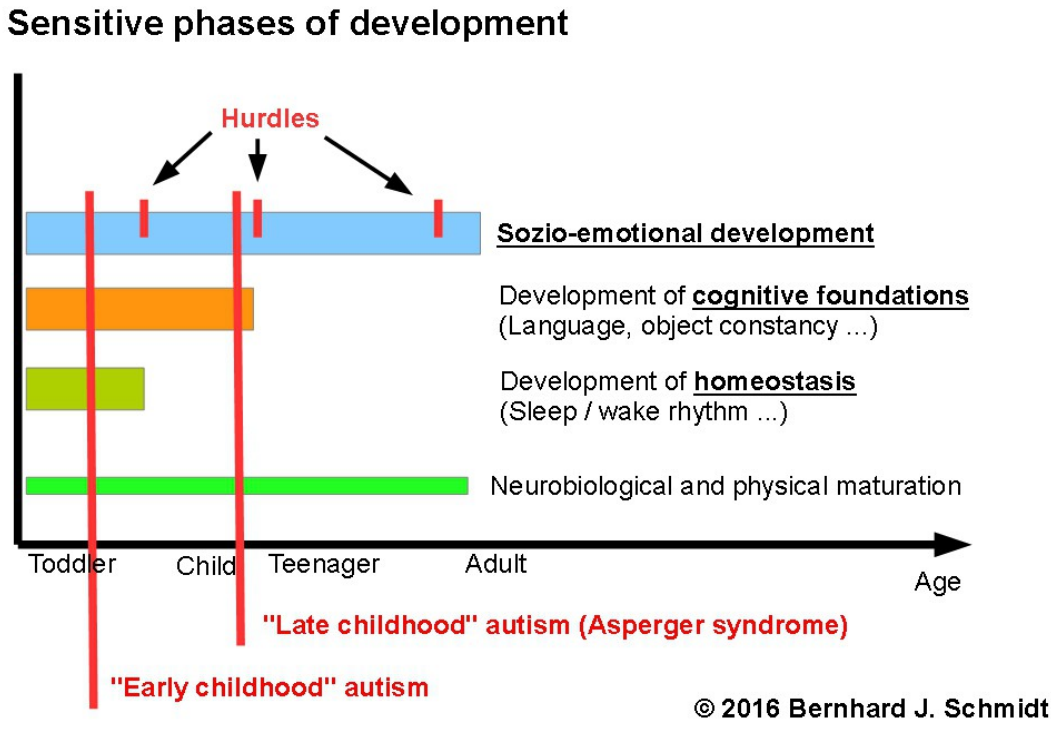
Four strands of development

Both the interaction with the environment and the development of a human being are already beginning in the mother's body.
And the development of a person is never quite complete, even if at different times in intensity and flexibility.
This also applies to autism.

The four strands of development are:

1) Neurobiological and physical maturation
2) Homoeostasis
3) Development of the cognitive basis
4) Socio-emotional development

These start all at the same time, but they last for different periods of time. And all four strands need a successful interaction with the environment for successful development. It is clear from the graph that, depending on the time of the occurrence of a disturbance of the interaction, different developmental strands are affected and therefore the effects can also be very different.



Neurobiological and physical maturation
The basis of all other developmental processes is neurobiological and physical maturation. It is only through the creation of the necessary neurological and biological conditions that the child is enabled to learn, for example, grasping, walking, talking. In doing so, several development strings are often required at the same time, for example when acquiring the language. In children of deaf-mated parents who communicate by means of sign language, it has been established that they already have language before the physical maturation of the speech tools is completed. Just because a child does not speak, this does not mean that there is no language (developed)!

Homoeostasis
The development of homeostasis, ie physical balance, is the beginning of development. These include exactly those areas with which autistic children often have problems, e.g. The regulation of digestion, the sensory integration and the sleep-wake rhythm. The development of homeostasis also depends on the interaction with the environment. Without the unconscious orientation to and imitation of behavior of other people, autistics are already hard here and need a good external structure - even more than children with a mental disability.
The development of homeostasis is normally completed in the transition from the infant to the child.

Cognition
And when children learn their life long and develop themselves intellectually, the childhood has to create the foundations for this. These are mainly learned through the interaction with the environment and in the beginning in the form of games.

If there is a disturbance of the interaction, there is also a disturbance of the development of cognitive foundations!

Starting with the formation of (sensory) perception and sensory integration in all areas up to the complex acquisition of the language.

On the one hand, the development of the cognitive fundamentals also has a strong influence on the socio-emotional development. On the other hand, it must also always be taken into account that the

interaction underlying the development or its disturbance is strongly influenced by the expectations of the interactive environment!
In the central points, the development of the cognitive fundamentals during the transition from the child to the adolescent is completed.

Socio-emotional development
Due to the culturally determined one-sided focus on cognitive development, the importance of socio-emotional development has largely been overlooked. As a result, e.g. Dissociative personality structures in autistics (with normal cognitive and incomplete socio-emotional development) are falsely equated with autism.

The socio-emotional development is also the longest and there are three obstacles in the way that must be overcome.
There are the transitions from
1.) toddler (with the mother as main reference person) to the child (with the family and its surrounding environment as interaction environment);
2.) Child to the youth, with the growing out of the family and the new orientation to Peers;
3.) adolescents to the adult, with the extension of the interaction environment from the peers to the "world".
If these transitions are already difficult for NT people with "autopilot", that is, unconscious orientation on the group, the more problematic are these obstacles understandably for autistics.
For autistic boys, however, they are much more difficult than for autistic girls because of other gender-specific interaction patterns and role expectations.
Three influencing factors
All strands of development are influenced by three factors:
1.) By the age,
2.) the socio-cultural environment and
3.) the interaction.

Age
Even if it may seem trivial, especially in the field of autism, it is necessary to point out that development is a dynamic process. And that a "developmental disorder" is always a disturbance of the development and thus the disturbance of a dynamic process. And this 'dynamic' process takes place on a time axis in which "age" describes a point on the time axis.
Although the development can sometimes go faster and slower (development delay called) - but ultimately it follows automatically a continuous sequence of steps to build up to a large extent on each other. Thus, a conscious and targeted grasping can take place only when the bone skeleton and the musculature are designed accordingly.
In the course of development, there are always "sensitive phases", which offer a possibility window for the development of certain abilities.

Sensitive phases are both possibilities for the fast acquisition of important abilities, but at the same time also represent, as the name implies, particularly vulnerable areas.
The successful interaction with the environment is always necessary to develop the abilities and lead to disturbances of the interaction to massive problems.
As the age progresses, the development and training of skills slows down more and more - until it goes into the reversal, namely the increasing loss of skills.
This also means that people are becoming more and more "hardened" with progressive development and thus become less susceptible to disturbances of interaction with the environment.

Socio-cultural environment
The second major area of influencing the development lies in the socio-cultural environment.
Development never takes place in a vacuum, but requires the interaction with the respective environment.
As a result, human beings are adapted to their own environment in their development - as long as there is no interference with the interaction.
The socio-cultural environment is stretched from the general (partly gender-specific) expectations, assumptions and demands of culture to the extent of the technical change of the environment to the living and living conditions of the family, in which the development of the child takes place at first .
Depending on the particular culture, the expectations of the behavior of and the interaction with an individual can differ drastically.

And the gestures and facial expressions used for communication have different meanings in different contexts. By the early imitation of the
Behavior of the environment, NT people adapt automatically to the respectively valid rules and behaviors of their own culture, of their own environment.
In addition, the sensory environment is also strongly influenced by the partial massive technical changes in the once-natural environment.
At the same time, the socio-cultural environment has an impact on families. Affects the values, structures and expectations of the family members. And also affects the sensory configuration e.g. the apartment.
All these points have a massive impact on the development of the individual.
It is important to note that the socio-cultural environment at least has turned dramatically towards the bad for autistics in recent decades, which can at least partly explain the strong rise in autism diagnoses.
Is on the one, neutral, side of a socio-cultural environment e.g. the Buddhist monastery with low sensory disturbances, structured daily routine, ritualized sequences, little verbal communication ... we find on the other, for autistic negative, a delirious prosperity society characterized by the loss of fixed structures and rituals.

Social interaction
Development does not take place not only in the vacuum (but in a socio-cultural environment), but also always needs (!) the social interaction. Attempts to grow children without social interaction, e.g. the "original language" always ended with the death of the children. And "hospitalism" also shows impressively how much people are dependent on social interaction. This also applies to autistics!

Autistics can, want and must participate in successful (!) social interaction!

It is the basic mistake in the understanding of autism, which is already reflected in the name, that autistics do not need communication and interaction, do not want it and are not capable of it.
And has its cause in a misinterpretation of autistic behavior based on a purely phenomenological-descriptive basis.

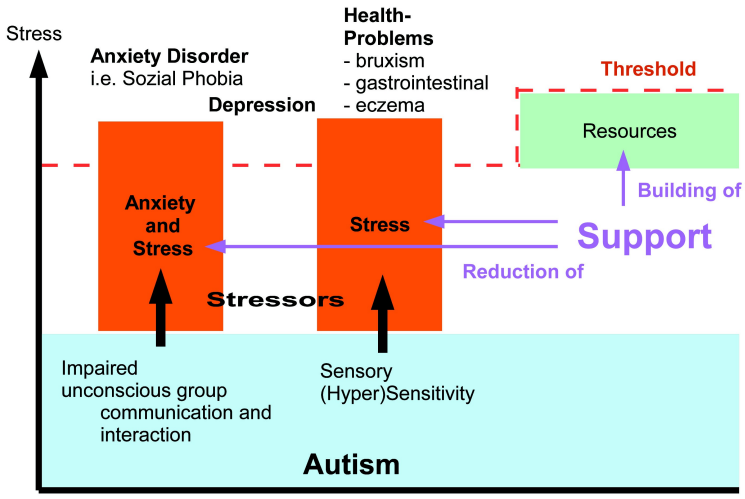
And the "disturbance of social interaction and communication" must not be viewed as static and isolated as before, but is always a dynamic process of interactions between the individuals involved in the interaction.

IV. Applications

a) Reduction of anxiety and stress

The most important finding of the presented theory is that the reduction of anxiety and stress among autistics must have the highest priority.
So the described behavior of autistics, which serve the individual anxiety and stress reduction, can be useful as an indicator.
The goal should be to make the environment so that autistics can feel safe and relax. And thus show less anxiety-reducing behaviors.

The reduction of anxiety and stress is especially important because these can lead to physical as well as mental illness, as for example
- Dental problems caused by teeth grinding
- Migraines and headaches caused by muscle tension
- Skin problems like neurodermatitis
- Gastrointestinal problems
but also
- anxiety disorders
- Depressions
- ...



A large Swedish study has recently shown that autistics are at a greatly increased risk for
- a low health-related quality of life
- premature mortality
- Suicide.

[Premature mortality in autism spectrum disorder; Tatja Hirvikoski, Ellenor Mittendorfer-Rutz, Marcus Boman, Henrik Larsson, Paul Lichtenstein, Sven Bölte; The British Journal of Psychiatry Nov 2015, DOI: 10.1192/bjp.bp.114.160192]

b)Restore of communication and interaction

If it is understood that even autistics need a successful social interaction for their development, the restoration of the interaction as a intervention program is at the forefront.
Since interaction as shown always between at least two parts, with autistics mainly within the family takes place, the work with all family members is necessary.
Although widely ignored by German and Anglo-American scientists, there have been special child-centered support programs for many years.

Even though each support program is somewhat different, the common foundation of the four approaches is the same
1. AuJA — Accept autism and act, Döhler / GERMANY
2. Floortime / DIR®, Greenspan / USA
3. Mifne ('turning point' in Hebrew) / ISRAEL
4. Son-Rise-Program®, Kaufman / USA

the "child initiated communication".

"*The children show us the way [to them], and then we show them the way out.*"
[Kaufman, Raun K. (2015)]

In all approaches the autistic child is in the foreground, the behavior of the child is considered as from the perspective of the child sensible and at the same time as an interaction attempt - and not as otherwise as negative. All approaches are also based on a development dynamics perspective.
The central points of three approaches - Floortime / DIR®, Son-Rise® and AuJA - are briefly described below using the example of Floortime / DIR® . This presentation of the most important points can not, of course, be a complete reproduction of all aspects of the respective intervention programs.
The book by Raun K. Kaufman (2015) "Autism breakthrough", which is coherent and well-readable, offers an insight into the phenomenon of autism and the practical treatment of autistic children on an intuitive basis.

b.1) Floortime / DIR®

„*The DIR Model*
In the name "developmental, individual-difference, relationship-based approach,"developmental" refers to the six stages or levels, "individual-difference" refers to the unique way a child processes information, and "relationship-based" refers to our understanding of the learning relationships that enable a child to progress in his development. The DIR model builds on the three insights articulated above to create

intervention programs based on which of the six developmental levels a child has reached, on her individual processing profile, and on the interactive relationships that best support her development. The DIR method of analysis thus enables parents, educators, and clinicians to make assessments and plan treatment programs tailored to individual children with ASD."
[Greenspan, Stanley I.; Wieder, Serena (2006)]

Floortime / DIR® is, on the one hand, a development-dynamic approach, which also analyzes the individual differences of the children and makes them the basis for further advancement.
Also, the emotional relationship with the child and not the cognitive development is emphasized. Because the (positive) emotion is at all the basis for learning. It is always the child and its development - and not the expectations of parents or society.

„*The most basic difference between the major approaches is in their goals. Developmental approaches such as DIR/Floortime strive to help children build healthy foundations for relating, communicating, and thinking. In contrast, behavioral approaches (the most intensive of which is ABA-Discrete Trial, developed by Ivar Lovaas) work on changing surface behaviors with structured tasks. In the most recent study of behavioral approaches—the only one to use a true clinical trial design (randomly assigning children to different interventions)—Tristram Smith (a colleague of Lovaas) showed that these approaches produced only modest gains in educational areas and little to no gains in emotional and social areas, compared to control groups. And even in terms of the structured educational gains, only 13 percent of the children studied achieved the high-level educational outcomes that were claimed for much higher percentage in earlier studies (see Smith, Groen, and Wynn, 2000, in References). Also, a review in 2004 of all studies on ABA approaches by Victoria Shea showed that the original claims for their effectiveness have not been replicated (Shea, 2004, in References). Behavioral approaches, when successful, may change specific behaviors, but because they rely on repetition and highly structured learning, most children who learn tasks with this approach may perform the tasks only in the way they practice them. Therefore, they may not develop fundamental cognitive, language, or social capacities. contrast, what are broadly termed "developmental relationship approaches" tend to use naturalistic learning—that is, learning through interaction and discovery. The results are improvements in social interactions—engaging in imaginative play, forming friendships, getting comfortable with dependency and warmth, and the like—as well as advances in thinking abilities. This is not surprising, because these approaches tend to work with foundation skills such as engaging, relating with others, and reading social signals, and to practice these in spontaneous learning interactions.*"
[Greenspan, Stanley I.; Wieder, Serena (2006)]

The aim is to help the child with his or her special needs to increase the six levels of his development.

These are after Greenspan & Wieder:

1.) divided attention and regulation
(Starts at 0 - 3 months)
2.) Commitment and relationship building
(Starts at 2 - 5 months)
3.) Targeted emotional interaction
(Starts at 4 - 10 months)
4.) Long chains of reciprocal emotional signaling and common problem solving (starts at 10 - 18 months)
5.) Creation of ideas (starts at 18 - 30 months)
6.) Building bridges between ideas: logical thinking (starting at 30 - 42 months)

"Floortime" means that the mother / parents ... go to the child's level, that is to say, the ground and play with the child the most important form of interaction to this development point - play! And this according to the supposedly comical rules of the child!
By engaging in the child's play, not only is interaction but also trust and an emotional bond established.

„*Why do we follow the child's lead? After all, historically, educators have long held that adults can't just allow children to do what they want to do, because children are creatures of instinct who would never become socialized if we just followed their lead. But in Floortime, we take our cue from die child because a child's interests are the window to her emotional and intellectual life. Through observing the child's interests and natural desires, we get a picture of what she finds enjoyable, what motivates her. If a child is staring at a fan, rubbing a spot on the floor over and over, or always walking on her toes, these might*

seem actions that we want to discourage. But something about the behavior is meaningful or pleasurable to the child. Therefore, we always start off by asking the question, "Why is my child doing that?" To say simply that it's because he has this or that disorder doesn't answer the question. ***The child may have a disorder or a set of problems, but he is not the disorder or set of problems. He is a human being with real feelings, real desires, and real wishes. If children can't express their desires or wishes, we have to deduce what they enjoy from what they are doing****. So in Floortime we begin by following die child's lead and joining him in his own world.*"
[Greenspan, Stanley I.; Wieder, Serena (2006)]

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This is a short version of an article, which together with notes and an article by Prof. Dr. Vadim B. Khoziev, was published both in Russian in the journal of the University of Dubna / Russia and as a book in German under the title "Auf der Suche nach einer Autismus-Theorie. Ein Russich-Deutscher Dialog ".