



Is stereotype language? Senses in the therapeutics of children of the autistic spectrum

Estereotipia é linguagem? Sentidos na terapêutica de crianças do espectro autista

Esteriotipia es lenguaje? Sentidos en la terapia de niños con espectro autista

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Abstract

The aim of this research was to investigate the possible relationship between stereotypes and language development in autistic spectrum children. The subjects of this study were three boys with diagnoses of Global Development Disorder, their mothers and the speech therapist responsible for the conduction of the therapeutic process. Films of thirty minutes were made of children in interaction with their mothers or with the speech therapist in free play during the first and tenth month of the therapy. Continued interviews were made with the mothers, too. The data were transcribed and analyzed qualitatively. In all the cases, at first it was observed that the increasing of the jargons, echolalia speech and stereotyped movements occurred more on moments in which the mother acted on a directive form to catch the attention of her son. The subject 1 presented lesser evolution suppression terms of stereotypes due to increasing precariousness of his play and language development established in the beginning of the therapy. In the subjects 2 and 3 there was a great development of the oral language, not only in occupation of discursive positions, concerning a larger grammar domain, as well as a decrease of stereotypes. It was verified the diminishing of stereotypes with the development of language in the three subjects studied, overall in the subjects 2 and 3 that began the speaking. All the subjects showed that the stereotypes were triggered by dialogical situations, that is, though less advanced in expressive terms than other linguistic forms, they were not meaningless.

Keywords: Autistic disorder; child language; mother-child relations.

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Resumo

O objetivo desta pesquisa foi investigar as possíveis relações entre as estereotipias e o desenvolvimento de linguagem em crianças do espectro autista. Os sujeitos deste estudo foram três meninos com diagnóstico de Transtorno Global do Desenvolvimento, suas mães e a fonoaudióloga responsável pela condução do processo terapêutico. Foram realizadas filmagens de trinta minutos com cada uma das crianças em interação com suas mães ou com a fonoaudióloga, na brincadeira livre, durante o primeiro e décimo mês de terapia. Também foram feitas entrevistas continuadas com as mães. Os dados foram transcritos e analisados qualitativamente. Em todos os casos, inicialmente foi observado que o aumento dos jargões, fala ecológica e movimentos estereotipados ocorriam mais durante os momentos em que a mãe agia de forma diretiva para captar a atenção do filho. O sujeito 1 apresentou menor evolução em termos de supressão de estereotipias, o que esteve relacionado à maior gravidade do distúrbio psíquico e de linguagem. Os sujeitos 2 e 3 apresentaram maior desenvolvimento de linguagem oral, tanto em termos de ocupação de posições discursivas quanto em relação ao maior domínio gramatical, bem como diminuição das estereotipias. Verificou-se a diminuição das estereotipias correlacionada ao desenvolvimento da linguagem nos três sujeitos estudados, sobretudo nos sujeitos 2 e 3 que iniciaram a fala. Todos os sujeitos demonstraram que as estereotipias eram engatilhadas por situações dialógicas, ou seja, embora menos evoluídas em termos expressivos do que outras formas linguísticas, não eram desprovidas de sentido.

Palavras-chave: Transtorno autístico; linguagem infantil; relação mãe-filho.

Resumen

El objetivo de esta investigación fue analizar la posible relación entre las estereotipias y el desarrollo del lenguaje en los niños del espectro autista. Los sujetos de este estudio fueron tres niños diagnosticados con Trastorno Generalizado del Desarrollo, sus madres y el fonoaudiólogo responsable de conducir el proceso terapéutico. Fueron realizados filmes de treinta minutos con cada uno de los niños en la interacción con sus madres o con el fonoaudiólogo, en el juego libre, durante el primer y el décimo mes de la terapia. También se realizaron entrevistas continuas con las madres. Los datos fueron transcritos y analizados cualitativamente. En todos los casos, inicialmente, se observó que el aumento de la jerga, del habla con ecolalia y de los movimientos estereotipados ocurrió más en momentos cuando la madre estaba actuando de manera directiva para captar la atención del niño. El sujeto 1 mostró menor evolución en relación a la supresión de la estereotipia, debido a la precariedad de su juego y el desarrollo del lenguaje a la iniciación de la terapia. Los sujetos 2 y 3 presentaron mayor desarrollo del lenguaje oral, tanto en términos de ocupación de posiciones discursivas, cuanto con respecto al mayor dominio de la gramática, así como una disminución de las estereotipias. Hubo una reducción de las estereotipias correlacionadas con el desarrollo del lenguaje en los tres sujetos estudiados, especialmente en los sujetos 2 y 3, que empezaron a hablar. Todos los sujetos demostraron que las estereotipias eran provocadas por situaciones dialógicas, o sea, aun que menos avanzadas en términos expresivos que otras formas lingüísticas, no eran sin sentido.

Palabras clave: Transtorno Autístico; Lenguaje Infantil; Relaciones madre-hijo.

Introduction

Autism has been described as a compromising behavioral syndrome in child development¹, marked by losses in three areas: social interaction; verbal and nonverbal communication; stereotyped behaviors, interests and activities². This condition corresponds to a complex of syndromes, since there is variability in the degree of commitment of the

three affected areas, justifying the adoption of the title Pervasive Developmental Disorders³. It refers, therefore, to a very heterogeneous autism spectrum disorders manifestations⁴.

Among the clinical features described in the tables of the autism spectrum disorders, difficulties in verbal and non-verbal language are always present, with variable degrees of change^{5,6}. The

literature mentions unintelligible jargon, changes in the structure of speech, inappropriate use of prosody, difficulties in grammar and organization of language, repetition, limited use of gestures, no pronoun reversal etc. Often, oral stereotypes are mentioned, in particular echolalia⁷⁻¹¹, and non-verbal, such as, for instance, flapping and rocking¹². Such limitations may not refer to language acquisition, the loss of acquired vocalizations or peculiarities in verbal manifestations of these subjects¹³.

While some studies attribute to echolalic speech the value of repetition devoid of any meaning and sense⁸, others believe that these productions carry senses and suffer interference from the context in which they occur and the person who is interacting with the child¹² or else that their communicative intent appears in certain moments¹⁰. In an article about the acquisition of language in children with autism spectrum disorders, researchers point out that the analysis of non-verbal language of these subjects in the dialogical contexts has been neglected⁷.

Based on the perspective of the Brazilian Interactionism, researchers believe that language acquisition in autistic subjects would be significantly affected and that the effects caused by (re) productions of the autistic subject in another person (interlocutor) denounce their particular position regarding language, exclusion, protection against anxiety^{12,16}. These statements and actions make difficult the interpretation by the speaker⁷, becoming an obstacle in establishing dialogue¹⁶ and often are understood by parents as meaningless, devoid of any significance¹⁰.

Thus, it can be seen that the difficulties involving language in children in the autism spectrum disorders predate the development of speech, when the family began to worry about the non-appearance of verbal language and the speech pathologist was one of the first professionals to be consulted^{3,17}.

One of the speech therapy proposals concerning autistic children is the one that is based on the work by the Brazilian Interactionism^{10, 13}, a perspective adopted in this study. Such theorizing approaches psychoanalysis when considering the constitutional character of language in the subject, the dialogic context, the discursive position occupied by the child in relation to language and the possibilities for change from that position as being

the driving forces behind the construction of the linguistic system¹⁴.

In psychoanalysis, more specifically, in (English pediatrician and psychoanalyst) Donald Woods Winnicott's theoretical thought, great importance is given to his concept of the "holding environment" and the mother's technique of holding for the emotional development of children, as well as in the care of autistic children. Holding is how babies are held by the mother, who protects and presents objects to them. Thus, it consists in the care experiences that provide the possibility for the baby to have experiences integrated with the environment. Physical contact between the mother and the baby are part of this holding, and also the voice and language used to address the babies^{15,16}.

Considering the references mentioned, the aim of this research was to investigate the possible relationships between the stereotypes and the language development of children in the autism spectrum disorders. As specific objectives are the investigation of the relationship between the frequency of stereotypes and the possibility of occupation of new discursive positions and the consequent progress in the grammatical domain. Also, the investigation of whether stereotypes had senses or not, and whether they were triggered by the dialogical context were sought.

Presentation of clinical cases

Behaviors and Methodological Procedures

This study consisted in a qualitative research, in a case study type.

The selected cases were three boys aged two and four and their mothers. Fictitious names were used for the children (Antônio, Mateus and Cauã) and, for the mothers, the letter M followed by the initial of the son's pseudonym (MA, MM and MC).

The criterion for inclusion of the children was that they had been diagnosed with Pervasive Developmental Disorder of the autism spectrum disorders in the continuum between normality and classic autism. This diagnosis was made from neurological, psychological, pedagogical and speech therapy analyses. The neurological and audiological examinations of the three subjects were within the normal biological standards.

The children and their mothers were video recorded during interaction moments in free play, with the participation of speech pathologist / therapist when necessary. Video recording took place in the first month of the speech therapy process and after an interval of ten months, totaling six shootings of thirty minutes each.

It should be noted that the observation of mother-child interactions has been gaining much focus on research covering free play, shared attention and language in subjects with autism spectrum disorders^{17,18}. As a complement, for some authors, the observation of how parents play with the child provides evidence of their relationship with the child, the resources used in communication, the created linguistic environment, and how they perceive their children's playing¹⁸.

This study has also considered the artificial situation that video recording can create, especially for mothers. Therefore, complementary observations were carried out in the initial sessions, which were not video recorded. In these video recordings it was possible to notice a behavior equal to that observed in the video recordings analyzed here.

Toys appropriate to the age of the children were left available in the room, by which they expressed interest in the first session. An Olympus brand digital camera was left in a strategic place that allowed the visualization of much of the room, especially of the spot for which the child expressed a preference.

Transcripts from continuing interviews with the mothers made by the speech pathologist / therapist were also used as analysis data. In their reports, they talked about the development of the children, the family dynamics, how they perceived and stimulated the development of language, among other things.

This research is inserted in the Clinic of Subjectivity project in Delays of Language Acquisition, already approved in process 23081010681/2007-41, with CAAE 01170243000-07. The children's parents were informed about their voluntary participation and consulted about willing or not to participate in this study. All signed an informed consent form.

The collected data were transcribed and qualitatively analyzed, compared to the results obtained at the beginning of the therapeutic procedures and ten months afterwards. This analysis was based on the Interactionist theory for the analysis of the

dialogic procedures, discursive positions occupied by the children for the three operating poles of language (the other's, the language and the speaker/listener) and in the psychoanalytic theory, as in a previously reported study, to observe the types of demand and place occupied by the child in interactions^{14,19,20}.

History of the subjects

Subject 1: Antônio

The boy Antônio, two years and four months old at the beginning of the therapeutic procedure, was referred by the school for speech therapy because of the absence of speech and social behavior. The diagnosis of Pervasive Developmental Disorder was performed by a neurologist when the boy started speech therapy at two years and four months of age.

The mother reported cases of depression during and after pregnancy, accompanied by periods of denial of pregnancy. Initially, the child care was taken by the mother-in-law and sister-in-law, which hampered her attempt to take on the maternal role.

The boy's father speaks little, but shows desire and interest in the development of the child. He has a psychiatric history and a diagnosis of Bipolar Affective Disorder, being in a psychiatric treatment when child care started.

The children education school teachers were the first who realized that something was not as expected in the child development for his age group. The boy had no verbal language, only issued a few sounds, playing was restricted to handling objects, showing stereotyped movements, avoiding eye contact and contact with people.

The diagnosis had a major impact on the family structure and, given the mother's history of depression coupled with the father's problems, in the second half of 2009 both was referred and started individual psychotherapy.

At one point during the interview, the parents told that, by the eighth month, they noticed that the child stammered, stared, responded and sought their attention, putting the little feet and little hands in the father's mouth. However, they observed that after a period marked by a prolonged absence of the father, who was the one who took care of the child in these early months, Antônio stopped

staring, babbling and the exchange interplay as described earlier.

Subject 2: Mateus

Mateus, four years and two months old, was referred to the speech therapy by a neurologist and a special needs educator, with a complaint of delayed speech and a diagnosis in the autism spectrum disorders. The diagnosis was made by a neurologist when the child was three years old.

The mother reported that babbling appeared near the fifth month and the first words near the eighth. However, at approximately one year of age, there was an interruption of speech, which, according to the mother, happened in the same period in which the father became more absent due to his work. He had started basic schooling at one year and eight months of age, during which he would speak some loose words, stopping again at two years and six months of age.

The boy would speak a few single words, having a speech that was difficult to understand. He also presented with echolalia, stereotyped movements, mood swings, aggressiveness and difficulty to stay in the same activity. Although he could understand simple orders, he was selective about the information he received.

In the mother's reports appears the complaint of a difficulty in knowing how to behave towards the child: "I would move heaven and earth to please him and could never... it was always useless to explain, show, request".

Just as in the case presented above, the suspicion about a diagnosis of autism spectrum disorders had arisen at the pre-school education environment and the teachers suggested that the parents sought a medical assessment to investigate what was happening to Mateus. The diagnosis caused a great shock to parents and, when the boy started therapy, the mother went through a time when her thoughts and actions were always aimed to finding information and explanations for autism.

Subject 3: Cauã

Cauã, four years and six months old, referred by a special needs educator, with the chief complaint of difficulty in speech and autism spectrum

disorders. The diagnosis was made by a neurologist and also by a special needs educator, when the child was three years old.

Regarding the development of language, after the sixth month he would babble, and close to a year of age, the first words appeared ("mama, papa, tata"). He would not use personal pronouns and the use of simple sentences was restricted. He would also present with an echolalic speech, jargons and speaking loose words without a context. He was not attending school.

The mother reported that the child would cry for no apparent reason, making her worry about his feelings, because she could not understand what he wanted. Even when the result had been normal at the audiological assessment, the parents would suspect that the child could not hear well.

MA thought that the child did not understand anything and could not understand why he was an autistic, showing doubts about the future, especially regarding how Cauã would behave in school and his independence. After the beginning of the treatment, such concerns continued, even with the apparent visible evolution in development shown by the child. She said she feared "that he would be like before again".

Evolution

Before presenting the evolution of each subject, it should be noted that the examples shown in the tables corresponded to more than 80% of the scenes transcribed in 45 minutes of footage of all subject to the initiation of therapy, and also that during the therapeutic process, children and their parents were observed in joint appointments with the therapist, the spy mirror, by guiding of this work. Therefore, although it were few examples, it were a constant in the observations of both the therapist guiding as the subjects. In terms of final evolution, only Antonio kept as constant initial standard; Matthew and Cauã showed a percentage reversal in behavior, ie the stereotypes practically disappeared in therapeutic sessions, and were replaced by dialogue. This was also reported by mothers and teachers on daily basis, fact ascertained through interviews with parents and continued visits to the school.

Sujeito 1: Antônio

late interactions, the first with the mother and the second with the therapist.

Figure 1 shows excerpts from Antônio's early and

Initial analysis	Final analysis
<p>Episode 1 MA: Look there! How cool. A: Hmmmm. MA: How cool. Look at A. over there. A: Hmm... Tatuuu... aaauuuu. MA: Look at the bubble over there! Look at the bubble over there, A! A: Tatuuiii. MA: Look over there, A., right behind you. There's another one over there. And another one, A. A: Hmmmm, atuum. (Seems angry, walks across the room.) T: You wanna leave? Is that so? A: (Intensifies jargons, apparently showing denial, irritability.) MA: Let's write. Look here... look here. A: Auuiii, tatuuumm</p> <p>Episode 2 A: (Grabs the doll and slams it down on the floor.) MA: This one is mine, look. (Shows a doll.) A: (Grabs Power Ranger (costumed hero) action figure, slams it down on the floor and squeals.)</p>	<p>Episode 3 A: (Hits the ball on the mouth and teeth.) T: What a good ball in A.'s mouth (In motherese) A: (Looks at the therapist.) T: It's good, A.! A: (Repeats the scene.) T: (Silence – repeats in motherese.) How nice! A: (Looks at the therapist and starts playing a game of dropping and approaching the ball, slowly approaching the therapist and looking at her a few times.) T: This ball's Antônio's! It's not mine! Don't take it, T. (Speaking for him.) A: (Approaches the therapist and puts his forehead on hers.) T: How nice! (In motherese.) A: (He walks away and goes back to playing with the coming and going of the ball.) (The therapist takes another ball and plays the same game of the child's while talking.) T: This ball is mine! One over there is A.'s. A: (Smiles and looks at the therapist, watching her game. Stands up and goes play with another larger ball.)</p>

Figure 1 – Evolution of language in Antônio
 Caption: A: Antônio; MA: Antônio's mother; T: therapist; (): scene description)

In Episode 1 of the initial video recording analysis, the mother's effort to draw the child's attention can be observed, by requests or physical contact, to which the child would react with more stereotypes and try to walk away. There was a difficulty in interpreting what the boy showed.

As for Episode 2, the stereotyped movements appear, as well as another strategy from the mother to capture the child's attention. As she sees that the child does not look or seem to listen when called, the mother makes use of toys to try to interact.

In the final analysis, some changes occur (Episode 3), such as the child opening up to the interaction, the translation of sensations by the therapist, the motherese and Antônio's eyes turned to the therapist.

Subject 2: Mateus

Figure 2 shows some selected examples of interactions in the beginning and end of the footage, with Mateus and his mother, and showing his language development.

Initial analysis	Final analysis
<p>Episode 4 MMM: The blue one now? Can you open it? M: Blue MM: Blue. (Turns to the therapist willing to have an advice.) M: Jump, jump, jump, jump, jump, jump... (Tapping the brush on the paper without paying attention to the painting. This is repeated for several minutes.)</p> <p>Episode 5 MM: You want it? Go to granny's home to shower with a hose. M: Ello. (Hello) MM: No? M: Aamm MM: What about Mickey Mouse's cartoon, do you like to watch it? M: I on't (I don't) MM: You not speaking. M: Uhm, im... OK, eh. MM: And what about the numbers that are on the phone? What are they, then? Is it 1, 2, 3... which other is there?</p>	<p>Episode 6 M: I don't want it, T. (Continues playing with the saucer and spoon.)</p> <p>Episode 7 T: Boo (scaring M.!) May I come in? M: You can come in, T.! MM: Come in, T.! M: Come in, T.! (He pulls the therapist's arm.) T: Oh, thank you very much then!</p> <p>Episode 8 M: (Holds the ball over his head, looks in the mirror and then throws the ball.)</p> <p>Episode 9 MM: Look at the milk, how nice! M: ...cool.</p>

Figure 2 – Evolution of language in Mateus

Caption: M: Mateus; MM: Mateus's mother; T: therapist; (): scene description)

In the initial analysis, it can be seen that the motor and verbal stereotypes arise in scenarios of irritation, maternal neglect, or when the mother asks many questions (Episode 4).

As for Episode 5 of the same analysis, the mother's difficulty in understanding what the child says can be noticed and also that she fills all shifts with her speech. When addressing M, there is no room for starting a dialogue.

In the final footage, Mateus starts to request what he wants, addresses people and his statements also denote that there is a subject in the speech

when he conjugates the sentence in the first person (Episode 6). The opening up for contact with other people (Episode 7), recognition of body image (Episode 8) and the specularity in the child's speech (Episode 9) can also be seen.

Subject 3: Cauã

In Figure 3 are provided dialogic episodes snippets, considered exemplary for the understanding of language development for Cauã.

Initial analysis	Final analysis
<p>Episode 10 MMC: So, tell me, what color is this one over here? What color is this? C: Thi "C". MC: The "C"! And "C"'s color, which is it? What is the color of "C"? C: The "C". MC: What color? Which one is it equal to? What color is that? C: "C". T: "C", and what color is it? C: (Speaks in jargons and unintelligibly.) (Soon afterwards, C. throws a tantrum, shaking and throwing himself on the floor.)</p>	<p>Episode 11 CC: Hmmm. It looks like a ball. (Looks at the little letter that is round, with a drawing of a butterfly inside.) MC: It looks like a ball because is inside a ball. C: ... is inside a ball. MC: It is... how beautiful! Look here, son... and it is also inside a flower. It looks like... look at the butterfly. C: Hmmm... no, it is not a butterfly. All right, the butterfly. MC: Uhm! C: Hey, do you know what a butterfly is?</p> <p>Episode 12 MC: Look, son. Put it here, son... your... C: Puts, I put... huhuuuu</p>

Figure 3 – Evolution of language in Cauã

Caption: C: Cauã; MC: Cauã's mother; (): scene description

In Cauã's initial analysis, there was the presence of an echolalic speech and also jargons due to the pressure felt by him as distressing (Episode 10). The child also seeks to isolate themselves and often ignores the calls and requests, seeming to not be listening.

During the subsequent shooting, the results show, in the dialogue between mother and child, that the repetitions made by the child from the mother's talks are specular characteristics (Episode 11). He repeats and then reformulates what he said, making the pronoun reversal, and the first person singular appears (Episode 12).

Discussion

By means of the analysis of the results obtained in the initial and final video recording of the three subjects in this study, different aspects involving stereotypes, changes in language and interactional context could be verified.

In all cases, initially it was observed that the increase in jargons, echolalic speech and stereotyped movements occurred more during the times when the mother behaved in a directive way to get her son's attention. These characteristics were therefore related to the interactional context, that is, they were not meaningless.

As for subject Antônio, the mother's effort to seek interaction with him is emphasized, for example, when she realizes that he does not look or respond to her callings and she starts to use toys to get his attention (Figure 1, Episode 2). In this effort, the mother's difficulty is observed when she tried to understand what the child wanted (Figure 1, Episode 1).

Episode 3 (Figure 1) of Antônio's final analysis reveals a therapist's movement to seek attention and build a bond with the child, when she mirrors the ball hitting on the teeth and interprets sensations using motherese²⁰. This movement from the therapist draws Antônio's attention, who starts to watch her.

The boy is invoked, called by the voice of the therapist²⁰ at the times when she interprets and gives meaning to actions, and speaks for him (This ball is Antônio's! It is not mine! Don't take it, T!). The therapist is giving meaning to his back and forth ball game, that is, she interprets the child's action as a demand for it (to not catch the ball). This attribution of meaning to Antônio's actions

was instrumental to establish a dialogic activity between him and the therapist. Although he does not speak yet, Antônio begins to hear the therapist and respond nonverbally to some requests. This fact demonstrates an early linguistic requirement in terms of understanding, which will be crucial so that he has some potential for talking. For now, he is beginning to take a pole position on the other, what can already be considered an important discursive evolution.

Also, in Episode 3 (Figure 1), when interpreting/offering significant when Antônio was handling the ball, or when mirroring his movement with the ball, the therapist offered him a (Donald Woods Winnicott's theoretical thought) holding environment with her body and her voice. This action creates a potential space in which symbolic playfulness and linguistic requirements may arise^{15,16}.

Another noticeable aspect is that the stereotypes decrease when Antônio feels understood by the therapist. In the transcript that generated Episode 3, there is a gradual decrease in swings and vocalizations that accompanied them, in favor of paying attention to what the other is saying.

In the case of Antônio, who does not have verbal language yet, speech development can occur, but it will be a little more toilsome than in situations in which intervention is made early (in the first year or months of life)²¹. However, the fact that he started to hear the human voice²⁰ is an important sign that it may be possible for him to talk.

Subject 2, Mateus, when insistently repeating the word "jump" (Figure 2, Episode 4) while moving the brush in a stereotyped way, is talking, but the mother, absorbed by all her anxiety, does not seem to be there to listen and pay attention. The word "jump" is used as a defense against anxiety. The same happens when, while playing with the telephone (Figure 2, Episode 5), Mateus answers the mother's questions; however, as the speech is convoluted and difficult to understand, she cannot interpret what he says, and does not recognize the boy's production as a speech when he says, "*you not talking*".

The therapist does a movement of attribution of sense to this jump, recognizing a sign in it. This recognition places the subject as the author of his speech and realizes there, where the mother did not understand, Mateus's functioning in the language.

This recognition allows Mateus to be able to occupy the discursive position of speaker/listener¹⁴.

The concept of self-experience in playing¹⁶ can be shifted to the concept of development of self-experience in the language. That would be the speech therapist's key role: allowing the subject to build this experience, which would give him the authorship needed to occupy the position of speaker/listener.

Similar facts were observed in the case of subject 3. In Cauã's interaction (Figure 3, Episode 10), it had been some time since he was showing that he wanted to play with the train; however, the mother kept insisting that he named the letters of the alphabet and then he started echolalia, afterwards talked jargons and finally reacted by throwing a tantrum. In this report, it is also possible to realize the difficulty in interpreting/understanding what the child intends to show/talk.

The final analysis of the video recording of Mateus and Cauã indicates significant changes in language development of these subjects such as the absence of stereotypes and the tuning movement among the subjects and their mothers. There was therefore a process of building self-experience in language and in playing, which allowed important advances in the occupation of discursive positions from subjects Mateus and Cauã.

Cauã's speech provides evidence that he may already simultaneously occupy the language pole discursive positions and the speaker/listener pole, the latter being intensified. In the dialogue with his mother in Episodes 11 and 12 (Figure 3), specularity is observed when he repeats the mother's speech, analyzes it and reformulates it, as seen in cases reported by Moro et al.¹⁴. By reformulating and correcting his speech in Episode 12 (Figure 3), he makes the pronoun inversion (I place), making clear the speaker/listener position occupied by the subject, which denotes a concern in being heard and understood by the person to whom he addresses the statement.

As for the language development in Mateus, this is in the discursive pole of language. In Episode 8 (Figure 2), Mateus shows that he masters the exchange of personal references when the therapist asks "Can I come in?", and he answers, "You can come in, T". This change demonstrates the construction of personal reference and verbal inflection systems, which are important evidences to show that the child is building the grammatical

system, that is, he is occupying the language pole and it is no longer just about a non-analyzed talk, according to what is proposed by Claudia Lemos, displaced to the autism clinical scenario¹⁴. Another possible reading would be to think of the passage from speaker to subject from the linguistic appropriation and from an expositive perspective¹⁹, because it is not just about talk but about power in the dialogue, to combine the semiotic domain to language semantization process.

In turn, by saying "(I) do not want, T" in Episode 6 (Figure 2), the child reveals his wish and uses a subject in the wording of the sentence in the first person singular, as well as showing the acquisition of the grammatical knowledge. The use of the pronoun I as a reference to himself (Figure 2, Episode 6), as well as the moment when he looks in the mirror (Figure 2, Episode 8) indicate self-awareness. In autistic children, recognition of body image as a whole²² and the recognition of each other²³ are mentioned as capabilities that would be harmed. Therefore, this recognition shows Mateus' evolution in terms of being on a path to a neurotic structuration.

A study about the quality of mother-child interaction and the recognition of their image in autistic children has revealed a significant relationship between the mother's behavior of topic of sharing and self-recognition. It has also found a lower rate of child behavior of joint attention in autistic children than in children with typical development. The findings of this study indicate the important role the mother plays in the development of self-recognition in autistic children²³. From the moment that Mateus's mother came to share the topic with him, it is observed that the boy's search for looking in the mirror had intensified and also the use of the first person singular.

Another relevant aspect is Mateus' opening up for contact with other people (Figure 2, Episode 7), suggesting the beginning of an independence process from the maternal figure. Therefore, during the therapeutic process, it can be said that there was a resumption of relative dependence with another quality, namely, with greater harmony between Mateus and his mother, provided by playing together. From there, he follows his development, heading for independence¹⁶. This independence, observed by the beginning of socialization, was made possible by modifying the relationship with the mother from the work done on the playing and

the functioning of language in the mother-subject dyad.

The baby's dependence to the mother's figure and care takes place in three types: absolute dependency, relative dependency and moving toward independence¹⁶. Such types of dependency can be aligned to the interactionist view proposed by Claudia de Lemos and used by Moro et al.¹⁴ in therapy with children in the autism spectrum disorders, in which the changes in the speech are understood as effects of language produced in their interaction with the adult interlocutor.

As for Cauã's utterances, predominantly with the speaker/listener pole, they indicate an independence process from the maternal figure. With the increased ability to have consideration for the other, as observed^{15,16}, the possibility of reorganizing their own speech to meet the convention of more mature speakers of their linguistic community^{14,19} is increased.

Regarding the quality of the mothers' interaction with the subjects, in the final analysis of the footage important differences were observed in the three cases. The mothers began to shift to open up dialogues with their children, decreased the directive behavior, as well as the difficulties in interpreting what was said by the children. As the quality of mother-child interaction improved, there was an evolution of language and the stereotypes no longer appeared (Mateus and Cauã) or even decreased (Antônio).

It is believed that the moments of ongoing interviews, offering a space for welcoming, listening to the parents' expressions of anxiety and guiding about instrumental and structural aspects²⁴ have helped these mothers in their relationship with their children. The family's inclusion and collaboration with the therapeutic process is a determining factor for the evolution of the development not only of the children in the autism spectrum disorders, but of all children. Such inclusion is central to the subjective structuration, as pointed by Winnicott¹⁶ in his work. The author reports several cases where, within a few sessions with children and precise guidance to parents, he made an important progress in their subjectivity.

Childhood autism is an intriguing psychopathology in several aspects, both for the researcher who is committed to study it, and for people living with ASD children. Among the clinical

characteristics presented in different proportions by subjects with autism, stereotypes stand out, especially due to the feelings of impotence and estrangement caused by these (re)productions that often seem to have no meaning and to be out of context.

Therefore, some questions that seemed fundamental to the beginning of this investigation can be answered: *Are the stereotypes some form of less developed language? Would stereotypes decrease or be eliminated as there were an evolution of language? Are the stereotypes reinforced according to the context?*

In this study, the relationship between stereotypes and the context in which they occur was seen. In the three subjects, there was an increase of stereotyped behaviors in situations experienced as distressing. This constitutes a clue about the child's entrance in language, even if in a very primitive form. Thus, it is believed that the (re)productions from subjects of the autism spectrum disorders must be considered as meaningful and capable of being signified by the interlocutor. It is possible, therefore, to say that the stereotypes are a form of language functioning, particularly in autism, as they were the starting point of the speech therapy, since they assigned meaning to it. To the extent in which this functioning proceeds to using more advanced forms, they will no longer be the most frequently used, or will even be eliminated.

Final Comments

From the analysis of the data, it can be seen that there was a reduction of stereotypes correlated to language development in the three subjects studied, especially in subjects 2 and 3, who showed a higher grammatical domain in their speech.

All subjects demonstrated that stereotypes were triggered by situations that arose in dialogue with the mothers, that is, although less advanced in expressive terms than other linguistic forms, they were not meaningless.

Also, the importance of providing a space for listening and welcoming the parents is emphasized. As noted in this study, the continued interviews with the mothers, and their inclusion in the therapeutic process, were key aspects to help the mother-child language interactions.

Referências Bibliográficas

1. BOSA C. Autismo: intervenções psicoeducacionais. Rev. Bras. Psiq. 2006; 28 (1): 47-53.
2. APA - Associação Psiquiátrica Americana. Manual diagnóstico e estatístico de transtornos mentais. 4. Ed. Porto Alegre: Artes Médicas; 2002.
3. Gadia CA, Tuchman R, Rotta NT. Autismo e doenças invasivas de desenvolvimento. J. pediatr. 2004;80(2):83-94.
4. Ortega F. Deficiência, autismo e neurodiversidade. Cienc. saude colet. 2009; 14(1):67-77.
5. Luyster RJ, Kadlec MB, Carter A, Tager-Flusberg H. Language assessment and development in toddlers with autism spectrum disorders. J. Autism Dev. Disord. 2008;38:1426-38.
6. Balestro JL, Souza APR, Rechia IC. Terapia fonoaudiológica em três casos do espectro autístico. Rev. Soc. Bras. Fonoaudiol. 2009; 14(1):129-35.
7. Delfrate CB, Santana APO, Massi GA. A aquisição de linguagem na criança com autismo: um estudo de caso. Psicol. estud. 2009; 14(2):321-31.
8. Oliveira MT de. Reflexões sobre as falas ecológicas e a interpretação fonoaudiológica a partir da discussão de dois casos de psicose infantil. Distúrb Comun. 2006; 18 (3):335-44.
9. Watt N, Wetherby AM, Barber A, Morgan L. Repetitive and stereotyped behaviors in children with autism spectrum disorders in the second year of life. J. Autism Dev. Disord. 2008; 38:1518-33.
10. Carvalho GM, Rêgo FL, Lima DM. Aquisição de Linguagem e a Verbalização Ecológica do Autista. Psyche. 2003;7(12):159-74.
11. Saad AGF, Goldfeld M. A ecolalia no desenvolvimento da linguagem de pessoas autistas: uma revisão bibliográfica. Pró-Fono. 2009;21(3):255-60.
12. Dobbins S, Perkins M, Boucher J. The interactional significance of formulas in autistic language. Clin. linguist. phon. 2003; 17(4,5):299-307.
13. Rêgo FLB, Carvalho GMM de. Aquisição de linguagem: uma contribuição para o debate sobre autismo e subjetividade. Psicologia: ciência e profissão. 2006;26(1):12-25.
14. Moro MP, Mezzomo CL, Ramos-Souza AP. O brincar e a dialogia na terapia fonoaudiológica de casos do espectro autístico. In: Fernandes CM, Rassial JJ (org Crianças e Adolescentes: encantos e desencantos, 1ª ed. São Paulo: Instituto Langage, 2012, p. 167-176.
15. Winnicott DW. O ambiente e os processos de maturação. Porto Alegre: Artmed; 1983.
16. Winnicott DW. Da pediatria à psicanálise: obras escolhidas. Rio de Janeiro: Imago; 2000.
17. Hedenbro M, Tjus T. A case study of parent-child interactions of a child with autistic spectrum disorder (3-48 months) and comparison with typically-developing peers. Child Language Teaching and Therapy. 2007;23(2):201-22.
18. Wachtel K, Carter A. Reaction to diagnosis and parenting styles among mothers of young children with ASDs. Autism. 2008; 12(5):575-94.
19. Ramos-Souza APA linguagem em uma perspectiva enunciativa: análise de um caso do espectro autista. In Schimdt C. (org) Autismo, educação e transdisciplinaridade. Papirus, Campinas, 2013, p. 105-124.
20. Catão I. O bebê nasce pela boca: voz, sujeito e clínica do autismo. São Paulo: Instituto Langage; 2009.
21. Laznik MC. A voz da sereia: o autismo e os impasses na constituição do sujeito. Salvador: Algamma; 2004.
22. Fernandes FS. O corpo no autismo. PSIC – Rev. Bras. Vetor Ed. 2008; 9(1):109-14.
23. Di Napoli FO, Bosa CA. As relações entre qualidade da interação mãe-criança e o reconhecimento da imagem de si em crianças com autismo. Rev. bras. crescimento desenvolv. human. 2005 dez; 15(3):11-25.
24. Moro MP, Ramos-Souza AP. A entrevista com os pais na terapia do espectro autístico. Rev.CEFAC, 2012; 14(3):574-87.