IV

METHOD

Sample: For the purpose of the present study a sample of 35 medical doctors, working in government hospitals and private clinics have been studied.

Another comparative group of 35 nuclear and defence scientists has been studied.

The total sample comprised of 70 subjects, between 25 years to 63 years of age. The work experience ranged from 5 years to above 30 years. The qualification of the entire sample ranged from post graduation to various super specializations and degrees.

Test and Tools Used: Case histories have been used to understand how the scientists and doctors view their inner and outer reality and what meaning they attached to their life events.

To support the case histories a detailed set of 162 open-ended questions have been prepared. The questions are framed on the basis of the characteristics that symbolize an autistic personality. Not all the characteristics of a clinically full blown syndrome of autism have been taken but only those that to some extent would have to be a part of one's life to ensure survival in the institution or profession. The questions further represent the various aspects of an individual's life from his personal attitudes, his childhood etc. to his work relations, his family, his friends, his attitudes on religion, his social life and his views on various social issues and the society as a whole. An effort is also made to frame questions in such a way that the questions on each trait of autism studied represented and tapped all the areas of a person's life from his inner self, his feelings about himself, his life experiences to his work, his family, his social relations etc.

Summarising earlier researches on autism the following traits have been identified as being characteristic of the clinical syndrome of autism. They are

1) Affect isolation
2) Unrelatedness to others
3) Twiddling behaviours
4) Inconsistent developmental continuity
5) Self-destructive behaviour
6) Temper tantrums - anxiety
7) I/You apparent confusion.
8) Concrete thinking - lack of imagination
9) Perpetual inconsistencies
10) Echolalia
11) Orderliness - Psychological rigidity
12) Physical incordination
13) Language lacks
14) Excessive activity
15) Inappropriate effect
16) Communication failure or symbolic deficiency

Out of the above traits, in the present research the following nine traits are studied.

1) Aloofness being withdrawn, at a distance detachment, interpersonal and objective withdrawal.
2) Affect isolation implies a tendency towards emotional aloneness, unrelatedness to others.
3) Indifference to people or a lack of inclination, interest in people, an unconcern for people.
4) Impairment of emotional relationships with family, friends in work and towards society at large.
5) Inappropriate emotions refer to emotional narrowness and perpetual inconsistencies regarding responses to emotional situations, etc., fear unknown, etc.
6) Social cogitation lacks which indicate an incapacity to form social relationships, lack of empathy and a failure to perceive other people's feelings, etc.
7) Resistance to change - insistence on sameness, etc.
8) Psychological Rigidity - a tendency to maintain orderliness etc within the rigid and limited patterns of behaviour, lacking variety.
9) Scienticization and professionalisation, imposition of logical structure on everything professional, insulation etc. has been included since in the present times the scientific way of looking at and understanding events no longer represents an alternative to the earlier perspective like the religious one that preceded it, but has become a protective mechanism against any kind of novel and unexplained phenomena, and anything that does not fall under its purview is either backward, ignorant or non-existent. This abeyance, and blind trust in the scientific logic, rationale etc. is what makes it fall into a grey area, delicately
balanced between normality and abnormality since it is an example of the tendency to structure information according to one's inner security needs, to create a stable, non changing world, predictable and thereby controllable world, a need very similar to an autistic person's. And the scientific training inculcates in the individual this attitude of scienticization.

The nine categories or traits are not mutually exclusive but overlap amongst themselves. The distinctions are very fine and it is not possible to assign characteristics to any one trait exclusively. But the overall essence that one gets clearly illustrates certain aspects of development of autistic tendencies and life patterns.

**Case Study:** The case study method in its simplest form is carefully recorded observations. It is essentially exploratory in nature, it focusses on the individual and it aims primarily at discovering and generating hypotheses.

Frederic Le Play (1806-1882) is reputed to have introduced the case-study into social science. Hebert Spencer, an English philosophicaal sociologist (1920-1903) was the first to use case materials in his ethnographic studies. Dr. William Healy, was among the first psychiatrists to adopt the case-study method in his work on juvenile delinquent. Freud, Preyer (1892), Bechterew (1925), Gesell (1925), Blueler (1935), Piaget, Stern (1925) etal were amongst the people to use the case-study method in their researches. But the actual credit goes to Thomas and Znaniecki's the Polish peasant in Europe and America (1924), for the scientific use of life histories in their publication.

The case history by definition, is the story of one person. The scientific value of a single person as Allport (1942; 1955; 1961) states, is his uniqueness. He represents the idiographic point of view, which claims that each single life is lawful and that lawfulness does not depend on the frequency with which an event occurs in different individuals. Understanding, not dissecting should be the goal of psychology.

The data of the case study are characteristically communications or observations of events which were not planned or intentionally altered by the investigator for the purpose of research. All elicited data whether collected in face-to-face situations, such as interviews or projective tests
or indirect communication such as autobiographies etc., have the advantage of greater completeness and of being clearly related to a definite area of exploration. The biographical details of the person, his inter-personal relations; his sexual patterns; his feelings, thoughts, fantasies, conscious attitudes, early memories, dreams, interest, goals, plans, values, his intellectual, emotional, physical and social resources, his conflicts and ways of solving them, and any other behaviour relevant to the study.

Summarizing then, it may be assumed that the identity of human nature persists, by and large in a variety of circumstances, even though human conduct changes, and a case history is the best means of exploring and capturing the personality dimensions.

Some of John Dollard's criteria for the life history have guided this work. The criteria are-

1) The subject must be viewed in a cultural series (That is, even though he is singled out for individual study, he must be regarded as a member of culture groups or community. Community values, standards and way of life can be studied only through life or case histories of persons.

2) Behaviour of individuals must be viewed as socially relevant (that is, behaviour should be seen as arising in response to definite social stimulations).

3) The family of the subject of study must be viewed in its role of submitting the culture and way of life of the group through its individual members.

4) The specific method of elaboration or organic materials into social behaviour must be shown.

5) The "social situation" must be studied in order to learn the kind and degree of social pressures, social forces, social participation or abstention, exercised by the subject.

6) The life history material must be organized and conceptualised.

Case-study method, therefore, deepens our perception and gives us a clearer insight into life. It gets at behaviour directly and not by an indirect and abstract approach.

A total of eight cases have been described in detail, four doctors and four scientists and an attempt has been made to show the psychodynamics involved in development and adaptation of a person to his/her environment and life events.
Statistical Analysis

The data has been subjected to a statistical analysis to show the trend of responses for the entire sample. Statistics have been used here as augmentary to the case history. They are not the main tools of analysis.

1) Not all the questions have been subjected to statistical analysis, only those that are viewed as relevant to the nine characteristics of autism studied are used. The distribution is presumed to be a non-parametric one, hence non-parametric statistics is used.

2) Each question chosen is treated as an independent variable and on the basis of the responses given by the subject, a content analysis of the data has been done.

3) For each question, from the responses given by the entire sample, the possible choices that emerged have been a maximum of eight alternatives and a maximum of two alternatives that by the respondents gave to any particular question.

4) Then the respondents answers have been further subjected to forced choice of (yes, no and Both/Unsure) three alternatives.

5) Chi squares of the significance of the difference between the responses of doctors and scientists have been computed and a comparative analysis done.