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An Applied Pragmatic Perspective of Autism in The Medical Interactions in TV Series: 'The Good Doctor'

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Abstract:

Pragmatics can be defined as is the study of the interaction between contextual factors and linguistic meaning in the interpretation of utterances. Doctors often recognize patterns in people's speech from their utterances. These patterns may affect the medical judgements. In general, this paper presents models for describing clinical contexts and illustrates them with analysis of medical interactions associated with developmental autism disorders.

This paper attempts to examine Applied linguistic impairment through ***(The selected situations in the Season 1, Episode 2)*** of medical conversations in the TV series: (The Good Doctor) in which the main character is 'Dr. Murphy' who is an autistic resident doctor. The pragmatic impairment is spread in the world and there is difficult to identify exact nature of autism. This paper also endeavors to investigate the linguistic and pragmatic concepts of the autism through its definition and identify its scope to achieve the needs of the interactions between the interlocutors. Generally, interlocutor with autism is possibly to exhibit pragmatic troubles along with her/his interactions, but these troubles differ extremely from one person to another. This paper also attempts to shed light the applied pragmatic strategies and devices that can be exploited in three stages: launching, maintaining, and terminating of clinical conversations in the case of autism.

Keywords: Clinical pragmatics, Pragmatic impairment, Autism.

المنظور التداولي التطبيقي لمرض التوحد في التفاعلات الطبية في المسلسل التلفزيوني: الطبيب الطيب

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الملخص:

التداولية هي دراسة التفاعل بين العوامل السياقية والمعنى اللغوي في تفسير الكلام المنطوق. غالبًا ما يتعرف الأطباء على أنماط كلام الناس من خلال أقوالهم وان هذه الانماط قد تؤثر على الأحكام الطبية. بشكل عام، يقدم هذا البحث نماذج لوصف السياقات السريرية ويوضحها بتحليل التفاعلات الطبية المرتبطة باضطرابات التوحد التطورية.

يحاول هذا البحث اختبار الضعف العملي التطبيقي من خلال (مواقف مختارة من الموسم الأول/الحلقة الثانية من المحادثات الطبية في المسلسل التلفزيوني: الطبيب الطيب) حيث ان الشخصية الرئيسية في هذا المسلسل هي د. مورفي وهو طبيب مقيم مصاب بالتوحد. ينتشر الضعف التداولي في العالم ويصعب تحديد الطبيعة الدقيقة للتوحد. يسعى هذا البحث أيضًا إلى دراسة

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المفاهيم اللغوية والتداولية لمرض التوحد من خلال تعريفه وتحديد نطاقه لتحقيق احتياجات التفاعلات بين المتحاورين. بشكل عام، من المحتمل أن يواجه المحاور المصاب بالتوحد مشاكل تداولية حلال تفاعلاته، لكن هذه المشاكل تختلف اختلافًا كبيرًا من شخص إلى آخر. يسعى هذا البحث أيضًا الى تسليط الضوء على الاستراتيجيات التداولية التطبيقية والادوات اللغوية التي يمكن استعمالها في ثلاث مراحل: إطلاق وحفظ وانهاء المحادثات السريرية في حالة مرض التوحد.

الكلمات المفتاحية: التداولية السريرية، الضعف التداولي، مرض التوحد.

1.Introduction

This paper linguistically aims to approach the pragmatic impairment and difficulties. The explicit important of pragmatic impairment is unidentified outside clinical interactions. This paper aims to shed light how many pragmatic theories and analytical framework may be applied in the description, assessment and treatment of communication impairments. Additionally, because its main concern is in the application rather than the theory, this paper exploited eclectic model which integrates between pragmatic theory and clinical practice to understand pragmatic impairment and to evaluate the pragmatic theories. This paper tries to study the linguistic origins of the pragmatic impairments regarding the cognitive and linguistic aspects. Our comprehension of the pragmatic theory can be known and expanded by the study of pragmatic impairment (Perkins,2007:1-2).

Autism is an impairment that causes an inability to interact with others during the communication. Specialists usually diagnoses autism in the early years in the childhood. The major characteristics of autism are an incapability to make social relationships, lack of the speech development, and a trend to perform repeated actions (Marcovitch,2009:59).

This definition reveals that the communicative impairment in the autism relates to the social communication in the area of pragmatics instead of the structural communication in the area of articulation of sounds or words **(**Cummings**,** 2017:59-60). This paper attempts to characterize our knowledge about pragmatic impairment of the autism.

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2.Pragmatic theory and pragmatic impairment

Pragmatic impairment can create an important influence to the investigation of the natural pragmatic behavior which perform the necessary benefits for pragmatic theory. In opposite, the effect of pragmatic theory on the study of pragmatic impairment is widespread. Troubles in the clinical situations of pragmatic concepts have emerged because the terminology and pragmatic tools are formed from linguistic branches such as clinical linguistics, clinical pragmatics, cognition, and so on. These pragmatic tools are always appropriate to the needs of language pathologists and performed a great role in the clinical diagnosis in regard to the nature of pragmatic impairment (Perkins,2007:8).

3. The Theoretical Knowledge of Autism

a. Mey (2001:308) defines **Applied Pragmatics** as "A problem-solving activity with an emphasis on using pragmatic knowledge critically, imaginatively, and constructively in the real-world context of the social struggle, rather than on rehearsing the tenets of canonical pragmatic theory".

b. clinical linguistics is "the application of linguistic theories, methods and descriptive findings to the analysis of medical conditions or settings involving a disorder (or pathology) of language"(Crystal, 2008:80). It utilizes to evaluate, analysis and treat disorders of the production and understanding of spoken language. **clinical linguistics** includes "the application of linguistic description and analysis to the field of speech pathology"(Richards, J & Schmidt, R. 2010:83). Clinical linguists are interested in several kinds of communicative disorders, including autism.

c. clinical pragmatics: is "the study of the various ways in which an individual's use of language to achieve communicative purposes can be disrupted. The cerebral injury, pathology or other anomaly that causes this disruption has its onset in the developmental period or during adolescence or adulthood"(Cummings,2009:4).

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d. Theories of Clinical Pragmatics

Clinical Pragmatics is influenced by linguistic theory (**relevance theory**) and cognitive theory (**theory of mind**) which there is an overlapping between them.

1. Relevance Theory:

It is "an attempt to ground models of human communication squarely in cognitive psychology, it cannot just take advantage of the insights of cognitive psychology, but must also share its weaknesses". (Sperber & Wilson,1995:170)

Relevance theory performs a great role in the utterance understanding since human's interaction through a particular cognitive situation means a set of facts and suppositions which represent a confidence to affect the thoughts of others in partially expectable means. Humans communicate and utter by these linguistic means which are examples of **'ostensive behavior'** which qualify them to call their attention in special means. Commonly, '**ostensive stimuli**' make available approach to the communicator's intention to make it clear to enlighten the listener of something. Stimuli are relevant to a person since they affect cognitive influences for that person. Thus, Relevance depends on a stability between influences and effort, or on the advantages from a special stimulus and the cognitive effect to recover those advantages. (Papafragou,2000:16-17).

Crystal (2008:412) defines it as a "theory of communication and cognition which claims that human cognition is geared to the maximizing of relevance. The theory claims that all communicative acts carry a guarantee of optimal relevance and that they are interpreted in the light of this guarantee".

2.Theory of Mind:

Baron-Cohen et al. (2000:3) state that "the theory of mind is used to infer the full range of mental states (beliefs, desires, intentions,

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imagination, emotions, etc.) that cause an action. In brief, to be able to reflect on the contents of one's own and other's minds".

Cummings (2009:159-164) states that theory of mind includes three theoretical terms: (Cognitive module, Simulation theory, and Construction theory). Thus, theory of mind could claim to be a necessary cognitive ability to understand and expect the human activities.

Practical researches of theory of mind are significant since their results perform an significant role in the theory of mind structure. A group of mental skills that researchers have known as theory of mind are constant with many theoretical terms of these skills which involved:

1. The cognitive module: It forms an individual's capability to assign mental situations to the other's mind. This module is a specific domain because it consists of specific representations which comeback just to the mental skills (Segal,1996).
2. Simulation (imaginative) theory: The mental capabilities are not described by the cognitive module or by the construction theory. Considerably, when people pretend or imitate, they are imaginatively planning from their special mental action (Carruthers & Smith,1996:3).
3. Construction (scientific) theory: It assumes the innate structures are in the systems of the theory-formation. In developmental way, these systems judge and permit the child to form implications of the basic structure which depends on his/her conclusions of occasions (Gopnik, et al., 2000:51).

e. The Scope of Pragmatic impairment

Muller (2000:12-22) recognized between the impairments of language use. Some of these impairments are related to nonlinguistic cognitive dysfunction (primary pragmatic disability), some of them are related to linguistic dysfunction (secondary pragmatic disability), and the others are related to both linguistic and nonlinguistic dysfunction (complex pragmatic disability).

1. The Primary Pragmatic Disability: It indicates a condition in which the linguistic system (i.e. phonology, morphology, and syntax) is basically undamaged, but the communicative act is impaired within the

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central cognitive systems. Indeed, there is an overlap between these systems (for example between theory of mind and social cognition and between theory of mind and executive function.

2. The Secondary Pragmatic Disability: pragmatic impairments are not a unitary issue and involve a variety of linguistic, cognitive and social factors. There are no means of the illustration among pragmatic and non-pragmatic disorders, or among conditions since the impairment in the interaction donates either directly or indirectly to troubles in language use. This topic can be applied to examples of communicative impairment related to linguistic cognitive impairment.

3. The Complex Pragmatic Disability: There are different kinds of complex pragmatic disability. For example, the linguistic impairment in autism is an innate result of socio-cognitive impairment. In addition, the linguistic impairments in children are related to both problems with sequence of verbal memory and auditory comprehension. On the other hand, linguistic impairment may result from a cognitive processing deficit as in aphasia which caused by problems with timing and coordination during syntactic processing. This means that "grammatical competence may be intact but cannot be successfully deployed because of disruption in other cognitive systems".

Table 1. Classification of pragmatic disability (Muller,2000:22)

Type of pragmatic disability	Underlying cause
Primary Pragmatic Disability	Dysfunction of: inferential ability; social cognition; theory of mind; executive function; memory; affect; world knowledge
Secondary Pragmatic Disability	a) Linguistic dysfunction, i.e.: syntax, morphology, phonology, prosody, lexis b) Sensorimotor dysfunction, i.e.: auditory perception; visual perception; motor ability
Complex Pragmatic disability	The Combination of Primary and Secondary Pragmatic Disability

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4.The Concept of Autism

One of the communication impairments is **the autism** which is a brain disorder characterized by impaired social interaction and communication. Some individuals with autism do not develop enough in natural speech to meet daily communication needs, and many individuals have difficulties with complex language and figures of speech (Richards, J & Schmidt, R. 2010:43). The communication disorder is an impairment that affects a person's ability to communicate, either verbally or non-verbally (Richards, J & Schmidt, R. 2010:98).

Asp, E. & Villiers, J. (2010:10-12) stated that "Autism is an umbrella term for a continuum of neurodevelopmental disorders, the causes of which are unknown". It appears during the childhood and affects more than one field of activities. It involves the following impairments: "impairments in socialization and interaction (e.g. lack of shared attention), impaired language and communication (e.g. lack of functional speech), stereotyped behaviors and restricted interests (e.g. a desire for sameness or routine)". These behaviors vary depending on the age and level of an individual's functioning.

5. The Pragmatic Strategies used in The Analysis

The following Strategies are used to create the eclectic model of the analysis:

5.1. Speech Acts

Leech (1983:205-206) divided the illocutionary speech acts into five types:

a. Assertive: It limits the speaker to the truth of the utterance, for example: Trying to convince the hearer that the utterance content is actual as in: inform, assure, argue, or swear acts, As in:

(1) "Chomsky didn't write about peanuts"..

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b. Directive: It indicates that the speaker tries to make the addressee to perform an action, as request, require, or permit acts. For example:

(2) Would you make me a cup of tea?

c. Commissive: It implies that the speaker will do something that could be in the future in the form of promise as in promising or planning. As in:

(3) " I'll be back".

d. Expressive: It deals with the speaker's feelings about a certain situation or occasion as in apologize, acknowledge or confess acts. For instance:

(4) " I'm really sorry!".

e. Declaration: It is due to talking something accomplished with an act as in a declaration of a deal or an agreement. As in:

(5) "Priest: I now pronounce you husband and wife".

5.2. Deixis

Yule (1996:9) defined deixis as "a technical term from Greek that means pointing via language". Thus, referring is used to enable the reader/hearer to recognize anything in the linguistic context or text. Meyer (2009:8) stated that deixis is "the ability of words to refer to points in time or individuals in the external world". The main types of deixis are**:** personal, spatial, temporal, discourse and social deixis.

***a. Personal Deixis*:** Yule (1996:10-11) states that Personal deixis clearly divided into three main kinds typified by the pronouns of first person (I), second person (you), and third person (he, she, or it).

***b. Spatial Deixis*:** Cruse (2006:166) states that "Spatial deixis indicate location in space relative to the speaker". Spatial or place deixis can be shown mainly in locative adverbs as in (here and there) and demonstratives as in (this and that). English has two terms of spatial deictic expression: **proximal** (here) and **distal** (there), such as:

(6) This book is mine.

***c. Temporal Deixis*:** Yule (1996:14) has noticed that the **proximal** form 'now' is used to indicate the time of both the speaker's utterance and the time of the speaker's voice being heard. In contrast, the **distal** form 'then'

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is used to indicate the time of both past or future and the time relative to the speaker's present time.

(7) It is raining now.

d. Discourse Deixis: Levinson (1983:85) observed a number of other ways in which an utterance indicates its relation to surrounding text in the discourse deixis, for example, initial utterance is used to indicate that the utterance that contains it is not addressed to the directly former discourse, but to one or more steps back.

e. *Social Deixis*: social deixis related to aspects of sentences that are determined by certain realities of the social situation in which the speech act occurs such as: Mr., Prof. Dr., President, Prime minister (Levinson,1983:89).

5.3. presupposition

Presupposition is "an assumption by a speaker/writer about what is true or already known by the listener/reader. Therefore, speakers not sentence have presupposition"(Yule**,**1985:130). According to Yule, the types of presupposition are:

***1.The existential presupposition*:** It is assumed to be present either in possessive constructions: your, my, his or in any definite noun phrase as in:

(8) **Your** car is expensive.

***2.The factive presupposition*:** Some words are used to assume the facts as know, realize, regret, as in:

(9) She didn't realize he was ill.

***3.Non-factive presupposition*:** It is supposed not to be true. Verbs like dream, imagine and pretend are used with the presupposition to denote that what follows is not true. As in:

(10) Smith pretended that he was asleep.

***4.Lexical presupposition*:** Verbs such as manage, stop, and start in which the use of one form with its asserted meaning is conventionally

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interpreted with the presupposition that another (non-asserted) meaning is understood, as in:

(11) He stopped smoking.

***5.Structural presuppositions*:** Yule (1996:29) stated that in certain sentences, structures have been analyzed as traditionally assuming that part of the structure is presupposed to be true. An individual can use such structures to give information as assumed to be true and hence to be accepted as true by the listeners. As (wh) forms: when, where, etc. which can be used in this type, as in

(12) When did she travel to Dubai?

***6.Counter-factual presupposition*:** In which what is presupposed is not only true, but is the contrast of what is true. As in:

(13) If John was rich, he would buy a car.

5.4. Implicature

H. P. Grice (1975:44) defined implicature as " indirect or implicit meaning of an utterance that is produced by the speaker". He stated that implicature related to "what a speaker can imply, suggest, or mean, as distinct from what the speaker literally says". It depends on both the words with its conversational meaning and the context in the cooperative principle and its four maxims. There are two types of implicature:

a. Conversational Implicature:

It appears in conversation act. Therefore, the nature of implicature is temporary and non-conventional directly with utterance spoken (Levinson, 1983: 117), such as: Malcolm's reply in:

(14) Charlene: I hope you brought the bread and the cheese.

Malcolm Dexter: Ah, I brought the bread.

b. Conventional Implicature:

According to Yule (1996:45), Grice used conventional to denote an implicature determined by the linguistic meaning, i.e. the meaning that is determined by the meaning of the sentence used. A statement always carries its conventional implicature, as in

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(15) Bob is rich but sad.

5.5. The Maxims of Cooperative Principle

Baker & Ellece (2011:23) stated that cooperative principle is a "general principle of conversation which describes as ‘Make your conversational contribution such as is required, at the stage at which it occurs, by the accepted purpose or direction of the talk exchange in which you are engaged’ ". It is supported by four maxims that developed by Grice (1975). The conversational maxims are as following:

a-The Maxim of Quantity: "Make your contribution as informative as is required for the current purposes of the exchange and do not make your contribution any more informative than is required".

b-The Maxim of Quality: "Do not say what you believe to be false, do not say that for which you lack adequate evidence".

c-The Maxim of Relevance: " Be relevant".

d-The Maxim of Manner: It is used to avoid obscurity of expression and avoid ambiguity, be brief, and be orderly (Baker & Ellece (2011:24).

6. Analytical Framework

The medical communication maintained by the eclectic model in the current paper presents that the pragmatic strategies divided into three stages. The practical part of this paper relates to ***(The selected situations in the Season 1, Episode 2)*** **in the** TV series namely 'The Good Doctor. Precisely, the eclectic model advanced to analyses the data under investigation in three stages of the applied framework by using pragmatic strategies and devices in the following method:

When Dr. Melendez, Dr. Claire and Dr. Kalu walk inside the hospital during the patients diagnosis in their rooms after doing their operations to take care of their health and to be sure that they feel better after the operations. In the morning, they entered an adult patient's room named 'Mitchell'. The components of the analysis will act in the three stages (launching, maintaining, and terminating) which signifies the structure of this episode. These stages are combined with some applied pragmatic strategies and devices that are analyzed as following:

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The Launching Stage:

Dr. Melendez: "Morning, Mitchell. I'm Dr. Melendez. These are my residents Dr. Claire and Dr. Kalu".
Dr. Kalu talks to the patient: "Your surgery went perfectly".
The patient 'Mitchell': "Yeah. Am I ever gonna walk again?"
Dr. Murphy came running and responded: "Yes. Of course".
Dr. Murphy talks to Dr. Melendez: "This is Mitchell Brand. I reviewed his chart. He's 55 years old from Chicago, divorced with two children. There are many possible complications but none related to motor neurons".
Dr. Murphy talks to the patient: "There is no chance, you won't be able to walk".
Dr. Claire talks to Dr. Murphy: "He...he wasn't worried about his legs".
Dr. Murphy: "Oh, yes. There's a significant chance of impotence".

This stage pragmatically composed of two pragmatic strategies: Speech acts and deixis. Dr. Melendez initiated his speech with "Morning, Mitchell. I'm Dr. Melendez. These are my residents Dr. Claire and Dr. Kalu" along with using the personal, spatial, and social deictic expressions (I, these, my, Dr.). All these concepts indicate to speech acts of greeting in "Morning, Mitchell " which represents an expressive illocutionary speech act with (a greeting device). When Dr. Kalu talks to the patient: "Your surgery went perfectly". This expression involves an assertive illocutionary speech act with (an telling device) since Kalu asserts that the surgery went perfectly and supported by a personal deictic expression 'your'. It is also there is an assertive illocutionary speech act with (telling device) when Dr. Murphy answered the patient's question " Yes. Of course" because he asserts the success of the surgery. When Dr. Murphy presents Mitchell's information to Dr. Melendez, he said "This is Mitchell Brand. I reviewed his chart. He's 55 years old from Chicago" which also contained a declaration illocutionary speech act (telling device) along with personal and spatial deictic expressions (this, I, his, he).

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The Maintaining Stage:

Dr. Melendez: "Dr. Murphy, you're late".
Dr. Murphy replied: "No, the bus was late. The schedule was clear. They post it online, but the bus was late which meant...."
Dr. Melendez: "You're late. On your first day, no less. It is your responsibility to be here. if you are not, you have failed in your responsibility, which makes it your fault".
Dr. Murphy replied: "Okay, how can it be my fault? , I did nothing wrong".
Dr. Melendez smiled and said : "Yeah. This is gonna work out great. The board clearly made the right choice in hiring you".
Dr. Murphy said: "Thank you".
In the operation room , Dr. Melendez talks to Dr. Murphy: "The tumor's entirely encased the large abdominal arteries".
Dr. Murphy replied : "That's very bad. If it's in the artery walls, it's going to be impossible to cut out without killing her".
Dr. Melendez: "Thank you".
Dr. Murphy : "You're welcome".
Dr. Melendez: "I was being sarcastic... again".
Dr. Murphy asks : "Yes. But you need me?"
Dr. Melendez: "Yeah, I need you to run down to the lab and hurry them along".

The first stage paved the way to the second stage which involved implicature and the presupposition that represent the second stage. When Dr. Melendez blamed Dr. Murphy to be late in the first day in his work in the hospital, Dr. Murphy as an **autistic** replied that is not his fault, but the fault of the bus which was late. So, Dr. Murphy thought that is not his responsibility to be late. Therefore, Dr. Melendez smiled and said: "Yeah. This is gonna work out great. The board clearly made the right choice in hiring you". Dr. Melendez's expression involves conversational implicature which contains violation of the maxim of quality. Here, Dr. Melendez criticized the board to hire an **autistic doctor** who can't be in the hospital in the exact time because an ordinary accident which is the

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late of the bus and there is a sarcasm in Dr. Melendez speech. Dr. Murphy replied " thank you " because he thought that Dr. Melendez praises him.

In this stage, there is also an existential presupposition and counter factual presupposition by using the possessive pronoun "your" and " if clause" in: "It is your responsibility to be here. if you are not, you have failed in your responsibility, which makes it your fault".

In addition, Dr. Melendez was sarcastic again when he calls Dr. Murphy to the operation room and asked him about what he knows completely in: " The tumor's entirely encased the large abdominal arteries". Dr. Murphy replied Dr. Melendez by mentioning the steps that should be taken in such situations as taking a biopsy to determine where the margins are. Dr. Murphy knows that Dr. Melendez knows all what he said because he is also a doctor. So, there is a conversational implicature and flouting the maxim of quality because Dr. Melendez needs Dr. Murphy to run down to the lab and hurry analytic samples. He doesn't tell Dr. Murphy directly what he needs. At the same time, there is an existential and lexical presupposition in ' the, them' and 'again' when Dr. Melendez said: " I was sarcastic again", this means that Melendez was sarcastic before, and in: "I need you to run down to the lab and hurry them along", where *'the* and *them*' presuppose the existential of someone or something to be found in the lab.

The Terminating Stage:

In the emergency hall , Dr. Claire talks to Dr. Murphy : "Hey. How are you doing?"

Dr. Murphy:" What's the point of sarcasm?"

Dr. Claire replied : "Um... Well, uh...Like, sometimes, it's a way of critiquing people in a way that's funny. So, they don't feel quite so bad".

Dr. Murphy : "Isn't it just lying?"

Dr. Claire replied : "Mm, well, it's not lying, because people know you're lying".

Dr. Murphy : " I'm not good at that".

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This stage finalizes this analysis which contained two pragmatic strategies: speech acts and the presupposition. This stage began with an expressive illocutionary speech act with (greeting device) when Dr. Claire talks to Dr. Murphy: "Hey. How are you doing?". This situation started by a pragmatic marker 'hey' which plays an expressive function and the structure " how are you doing" involves a (greeting device) where Dr. Claire knows what Dr. Murphy suffered from lately. Also, there is a structural presupposition by using 'wh' form when Dr. Murphy asks Dr. Claire: "What's the point of sarcasm?", since he asks about something called ' sarcasm'.

There is also an assertive illocutionary speech act when Dr. Claire answered Dr. Murphy's question in: "well, it's not lying, because people know you're lying". This answer involves a (telling device) and a factive presupposition by using the verb 'know' which means that everyone could recognize a lying when he/she hears it.

6. Conclusions

1. Autism causes applied pragmatic impairments faced by the autistic medical staff when they deal with patients who have some diseases as stammering, lack of memory, physical disabilities, and so on.
2. The difficulties of autism in communication are generally various, such as a lack of communicative behaviors in eye contact, lack of attention. The functional verbal communications with autism do not develop, while others have speech that sounds as being unnatural. The investigations of the interactions of interlocutors with autism concentrate on how specific autistic behaviors are ineffectual when diagnosed in the concepts of the everyday interactional circumstances in which they were created.
3. Some applied pragmatic aims and purposes can mainly be impaired because the applied pragmatic failure.
4. The medical interactions have an impact on people's health especially that some individuals don’t favor to indicate their special information.

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5. The language used by the medical staff tend to be more humanistic and sometimes tend to be more real or shocking especially when it used by autistic individuals since their language is direct and serious.
6. The eclectic model adopted in the present paper exhibits the practical guide of applied pragmatic analysis of medical interactions as it involves effective pragmatic strategies and devices divided into three stages.
7. The major applied pragmatic characteristics of autism are an incapability to make social relationships, lack of the speech development, and a trend to perform repeated actions.

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