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2 Emotion

3 Sander Begeer
4 Developmental Psychology, VU University
5 Amsterdam Autism Research Amsterdam,
6 Amsterdam, The Netherlands

7 Definition

8 Emotions are a complex set of behaviors pro-
9 duced in response to some external or internal
10 event that serve to motivate and direct thoughts
11 and actions. The word “emotion” stems from the
12 Latin e- (out) and movere (move). Emotions are
13 generally thought to be processes, rather than
14 states. Emotions are not equal to feelings. Feel-
15 ings are the subjective representation of the emo-
16 tional process. Emotions refer to the range of
17 chemical and neural responses that are produced
18 by the brain in response to a relevant stimulus.
19 Emotions are comprised of a broad array of com-
20 ponents including subjective experience, verbal
21 description, physiological response, motivational
22 influences, and behavioral expression. Emotions
Aut 23 are often understood as social processes (Salovey,
24 2003). Throughout the lifespan, most emotional
25 experiences and responses are contextually
26 anchored in social relationships, and emotions
27 become meaningful in the interaction with other
28 people (Ekman, 1992; Frijda, 1986). Vice versa,
29 emotions serve to regulate social interactions, and
30 the way emotions are exchanged defines our
31 social relationships. In short, emotions are

dynamic processes that create and are created by
the relationships with others. A general differen-
tiation is made between basic emotions (happi-
ness, sadness, fear, and anger, sometimes
completed with disgust and surprise) and second-
ary emotions (also referred to as complex, cogni-
tive of self-conscious emotions), including pride,
shame, guilt, and jealousy. Secondary emotions
require the awareness of others’ perspective on
your situation. For instance, experiencing shame
is related to seeing oneself through the eyes of an
audience, which could be real or imagined.

Historical Background

Historically, emotions are often contrasted with
cognition or rationality. Over 2,000 years ago,
Stoic and Epicurean philosophers even argued
that emotions are damaging to humans because
of their irrational nature. This perspective is still
apparent in contemporary sayings like “let’s be
rational” or “don’t get all emotional.” The con-
trast between emotion and rationality or cogni-
tion has been debated since the writings of
Aristotle and medieval rationalist philosophers
to Darwin and Freud. More recently, the discus-
sion revolved around the issue whether emotions
precede cognition or vice versa. For example,
during the encounter with a bear, do we become
frightened because we know the animal is dan-
gerous, or do we feel our fear and then realize the
animal is dangerous? James (1884) argued that
the stimulus (the bear) elicits a physical arousal

63 that causes the feeling of fear. Later, Arnold
64 (1960) argued that one infers (“appraises”) that
65 the bear is dangerous, which causes a tendency
66 to run away resulting in the feeling of fear.
67 Cognition precedes emotion. Subsequently, this
68 cognitive approach to emotions was invalidated
69 by an experiment that ingeniously showed that
70 emotional preferences can occur without the
71 cognitive appraisal of a stimulus (Zajonc, 1980).

72 Scientists are increasingly skeptical about the
73 possibility to untangle emotional and cognitive
74 processes. Damasio (1994) argued that the anat-
75 omy and functionality of emotions are strongly
76 related to physical and rational processes. This
77 perspective is widely embraced in field of affec-
78 tive neuroscience (Davidson, 2000). In this con-
79 ception, emotions become an important drive
80 rather than a damaging force to our rationality.
81 One of the first to argue for the functional nature
82 of emotions was Darwin and Ekman (1872),
83 reflecting on the animal sources of human emo-
84 tions. In line with his conception, Frijda (1986)
85 defined emotions as states of action readiness or
86 inborn behavioral programs, which allow flexible
87 adaptation to a rapidly changing environment.
88 For example, aggression can motive us to remove
89 objects that prevent us from achieving our goals.
90 Sadness helps us to abandon goals that are out of
91 reach. Fear enables the body for a fight or flight
92 response, and happiness increases cohesion and
93 prolongs favorable situations.

94 Research on emotions in autism has increased
95 dramatically during the last two decades. While
96 the second half of the twentieth century started
97 with an emphasis on psychoanalytical aspects of
98 autism, much research was consequently focused
99 on autism as an information processing disorder.
100 While this cognitive approach led to a fruitful line
101 of research, emotional aspects of the disorder
102 were neglected until emotion became an impor-
103 tant topic in psychology in the 1980s and the rise
104 of affective neuroscience in the 1990s.

105 **Current Knowledge**

106 Below, a snapshot of current knowledge regard-
107 ing emotions and autism is described with respect

108 to the following broad domains: diagnostic
109 criteria, expression, experience, perception,
110 responding, understanding, psychophysiology,
111 and neuroscientific findings.

112 *Diagnostic Criteria.* It is generally agreed
113 upon that individuals with autism spectrum dis-
114 orders (ASD) are characterized by abnormalities
115 in their interaction and communication with other
116 people and their flexibility in thought and action,
117 all present from early childhood. Emotions play
118 a pivotal role in the definition, the diagnostic
119 criteria, the etiology, the development, and the
120 possibilities for treatment in autism. Leo Kanner
121 even defined autism as an inability to “form
122 affective contact with people” (Kanner, 1943,
123 p. 250). The diagnostic criteria for ASD as
124 described in the diagnostic manual for mental
125 disorders (DSM-IV-TR; APA, 2000), the
126 International Classification of Diseases-10
127 (Sponheim, 1996), and leading assessment tools,
128 such as the Autism Diagnostic Interview-Revised
129 (ADI-R) (Rutter, Lecouteur, & Lord, 2003) or the
130 Autism Diagnostic Observation Scale (ADOS)
131 (Lord et al., 2000), all include emotional prob-
132 lems as a *possible* aspect of the qualitative
133 impairments in autism. The proposed criteria for
134 the new DSM-5, to appear in 2013, will include
135 emotional problems as a *necessary* criteria for
136 autism: “Deficits in social-emotional reciprocity;
137 ranging from abnormal social approach and fail-
138 ure of normal back and forth conversation
139 through reduced sharing of interests, emotions,
140 and affect and response to total lack of initiation
141 of social interaction.”

142 *Expression.* The expression of emotions can
143 be conceived as the first communicative action of
144 newly born infants. From the beginning of life,
145 expressing emotions has a strong impact on the
146 development of social interactions and social
147 relations. Emotional expressions evoke reactions
148 from the social environment (e.g., a crying baby
149 evokes caring behavior). This behavior informs
150 others on the subjective state of an individual but
151 also serves to maintain emotional reciprocity and
152 attachment. Typically developing children rapidly
153 adapt emotional expressions to their social
154 environment. Only a few weeks after birth, they
155 are able to modify their expression to the

156 responses of their environment. While the com- 204
157 ponents of expressing emotions seem to be pre- 205
158 sent at birth, at 4 years old, typically developing 206
159 children are able to express emotions at the same 207
160 level as adults. Research on the early develop- 208
161 ment of emotional expression in ASD is limited 209
162 because most children receive their diagnosis 210
163 later. However, various studies have analyzed 211
164 video material of infant period in children who 212
165 were later diagnosed with ASD (Baranek, 1999). 213
166 Surprisingly, the expressiveness of infants later 214
167 diagnosed with ASD does not seem to differ 215
168 much from typically developing comparison 216
169 groups. At school ages, in particular, cognitively 217
170 delayed children with ASD show more neutral 218
171 and idiosyncratic emotions. They may be 219
172 laughing during inappropriate situations and 220
173 seem less aware of their social context. Normally, 221
174 intelligent individuals with ASD (high function- 222
175 ing ASD, HFASD) are generally found to show 223
176 adequate emotional expressions, though compar- 224
177 ison groups showed more positive affect (Capps, 225
178 Kasari, Yirmiya, & Sigman, 1993). In general, 226
179 most research on emotions highlights the percep- 227
180 tion of or responses to emotional expressions by 228
181 others. How individuals with ASD express their 229
182 own emotions has been studied less often. 230

183 *Experience.* A persistent misconception on 231
184 individuals with ASD is they experience less 232
185 emotion than typically developing individuals. 233
186 Though it is not possible to directly measure 234
187 differences in experience (the qualia problem), 235
188 indirect measures of behavior, retrospective, ver- 236
189 bal, and observational outcomes indicate that 237
190 individuals with ASD are highly emotional but 238
191 likely express their emotions in atypical manners. 239
192 One line of research has highlighted alexithymia 240
193 in autism. Alexithymia refers to the inability to 241
194 differentiate and describe one's own subjective 242
195 feeling state. A lower awareness of one's own 243
196 emotions has been reported in several studies, 244
197 but there is no consensus that autism overlaps 245
198 with alexithymia. 246

199 *Perception.* Typically developing humans 247
200 show a strong preference for social stimuli from 248
201 birth. During infancy, they rapidly increase in 249
202 their ability to recognize human stimuli and dif- 250
203 ferentiate between the emotional states of others. 251

Evidence for impaired emotion perception skills 204
in ASD is conflicting. Abnormal perception of 205
emotions has particularly been shown with 206
respect to facial stimuli. In particular, reduced 207
attention to eye regions, poor memory, and 208
abnormal emotion processing were shown. 209
Impaired perception was also found in other sen- 210
sory modalities, like voices or bodily gestures. 211
However, cognitive ability and test conditions 212
play an important role (Begeer, Koot, Rieffe, 213
Terwogt, & Stegge, 2008). In general, given 214
structured situations and average or above cogni- 215
tive abilities, basic emotions are perceived in 216
ASD at equal levels as comparison groups. How- 217
ever, cognitive delay and unstructured dynamic 218
real-life settings generally result in less adequate, 219
delayed processing of perceptual information. It 220
should be noted that scientific research is often 221
conducted under strict, standardized, and 222
straightforward conditions, to ensure validity 223
and reliability of findings. A strong disadvantage 224
of this approach is that it creates an optimal 225
situation for individuals with autism. Their 226
capacities in the psychological laboratory may 227
overestimate their daily life skills. 228

229 *Responding.* Typically developing children 229
show reciprocal or empathic responses to others' 230
emotions during infancy. Around their first year 231
of life, children start to alter their behavior based 232
on emotional responses of others. For example, 233
they alter their approach of an object based on the 234
emotional response of their caregiver. This 235
shared or joint attention with another person 236
toward a third party, which may be another 237
object, event, or person, is associated with posi- 238
tive affect in typically developing children. When 239
the child monitors the affect of another person 240
toward a third party, this is called "social 241
referencing." While impaired responsiveness to 242
emotions in others is an apparent criterion of an 243
ASD diagnosis, responding to others' emotions 244
strongly depends on age and intelligence. Struc- 245
tured observations indicated that infants with 246
ASD (with mixed IQs) were less oriented to 247
others than control infants (Baranek, 1999; 248
Palomo, Belinchon, & Ozonoff, 2006). While 249
responses to other's emotions are certainly not 250
absent in the early life of individuals with ASD, 251

252 they generally respond less empathically ade- 300
253 quate. Their attention to negative emotions or 301
254 distress in another person is generally lower, 302
255 and they show less change in their own affect in 303
256 response to other people's distress (Hutman et al., 304 ^{Au2}
257 2010). Measuring physiological responses seems 305
258 a promising way to examine automatic 306
259 responding to emotions, but results so far have 307
260 not indicated cohesive impairments in ASD. Age, 308
261 IQ, motivation, and the explicitness of task 309
262 demands improve the performance of children 310
263 with ASD. It seems particularly important to 311
264 stress whether responses are based on isolated 312
265 explicit requests in structured situations, which 313
266 is generally the case in empirical research, or 314
267 informants' observations of spontaneous behav- 315
268 ior in unstructured situations, as generally relied 316
269 on in diagnostic assessment procedures. 317

270 *Emotion Regulation.* Emotion regulation will 318
271 be discussed as a separate entry in this 319
272 encyclopedia. 320

273 *Understanding.* Diagnostic criteria focus on 321
274 behavior rather than cognition. However, many 322
275 related assessment tools such as the ADI-R 323
276 (Rutter et al., 2003) or the ADOS (Lord et al., 324
277 2000) also rely on children's abilities to describe 325
278 and explain emotions. This can be problematic 326
279 because children's adequate understanding of 327
280 emotions thus decreases the likelihood of an 328
281 ASD diagnosis. Recent years have seen a vast 329
282 increase in studies on the understanding of emo- 330
283 tions in ASD. Individuals with ASD and average 331
284 or above intelligence were often shown to display 332
285 adequate levels of emotional understanding. The 333
286 understanding of emotions in others is strongly 334
287 dependent on the ability to attribute subjective 335
288 states to others. This ability relies on imagination 336
289 and perspective taking or theory of mind, skills 337
290 that are known to be impaired or atypical in ASD. 338
291 Indeed, intellectually disabled individuals with 339
292 ASD fail to show an understanding of emotions 340
293 beyond the simple acknowledgment of prototyp- 341
294 ical causes. Where typically developing children 342
295 may gain a better understanding of emotions 343
296 through experience, intellectually disabled 344
297 children with ASD show little progress during 345
298 the preschool years. In contrast, individuals with 346
299 ASD and average of above average IQ do acquire 347

skills to provide theoretical responses to emo- 300
tions, even though their explanations can at 301
times be idiosyncratic, superficial, or scripted. 302
Unsurprising, their emotional understanding is 303
often correlated to their cognitive skills (Capps 304 ^{Au2}
et al., 1993). The understanding of mixed emo- 305
tions, i.e., feeling angry and sad simultaneously, 306
is relatively poor (Rieffe, Meerum Terwogt, & 307
Kotronopoulou, 2007). Emotional display rules, 308
the social guidelines for expressing behavior are 309
generally known in school-aged children with 310
HFASD (Begeer et al., *in press*), though they 311
may be applied less. The understanding of sec- 312
ondary emotions like shame, embarrassment, or 313
jealousy is poor, which is related to impaired 314
perspective taking and poor imagination. For 315
example, a child may feel hurt or sad when falling 316
down, but to feel embarrassed about the situation, 317
it needs to image how others perceive that situa- 318
tion. To improve diagnostic procedures of 319
children with HFASD in particular, a strong 320
focus on the analysis of the reasoning process 321
that results in children's responses about emo- 322
tions is necessary. 323

324 *Neuroscience.* With the rise of interest in 324
affective neuroscience, the focus on brain imag- 325
ing studies related to the processing of emotions 326
took a sharp rise in autism. A coherent overview 327
of neural underpinnings of autism is not available 328
yet. Findings are often not integrated into 329
a framework, and the heterogeneity of the autism 330
spectrum complicates the search for common 331
underlying neural mechanisms, which may in 332
turn be diverse. To further complicate the field, 333
inconsistent findings can also be explained by the 334
use of different methodology. Therefore, a short 335
overview of main topics is presented here. Brain 336
mechanisms that are related to emotional func- 337
tioning in autism are mainly studied by neuroim- 338
aging studies. Neuroimaging is a technique that 339
can measure volume, structures, and functioning 340
of brain areas. The neural underpinnings of emo- 341
tions include systems at different levels, ranging 342
from the regulation of core somatic circuits to 343
regulate the interaction with others (Herbert, 344
2004). Anatomical abnormalities have been 345
found in a number of brain areas that are related 346
to emotional functioning, in particular the 347

348 cerebella and limbic systems. Links between
 349 brain activation and performance on emotional
 350 processing tasks (e.g., judging other’s emotions)
 351 have been reported in autism, but the findings are
 352 not consistent. It has been suggested that individ-
 353 uals with ASD use different neural networks and
 354 strategies when processing emotions (Wang,
 355 Dapretto, Hariri, Sigman, & Bookheimer, 2004).

356 *Mirror neurons.* A topic that raised consider-
 357 able interest is the idea that autism may be related
 358 to impairments in a “mirror neuron” system. Mir-
 359 ror neurons fire both when an individual executes
 360 an action and when the individual observes the
 361 same action performed by somebody else
 362 (Rizzolatti & Craighero, 2004). This may provide
 363 a system that, among other things, may facilitate
 364 the understanding of emotions in others. It has
 365 been put forward as the neural substrate of empa-
 366 thy (Bastiaansen, Thioux, & Keysers, 2009).
 367 Abnormal functioning of the mirror neuron sys-
 368 tem has been suggested for individuals with ASD
 369 (Hadjikhani, Joseph, Snyder, & Tager-Flusberg,
 370 2006). However, others challenge this assump-
 371 tion (Fan, Decety, Yang, Liu, & Cheng, 2010),
 372 and recent findings suggest a delay rather than an
 373 impairment of mirror neurons in ASD
 374 (Bastiaansen et al., 2011).

375 Future Directions

376 Increasing the coherence of findings on many
 377 domains of research on autism and emotions is
 378 an important task for future studies. The use of
 379 large scale and longitudinal data collections, fol-
 380 lowing young infants through their course of life,
 381 can provide a clearer perspective on many
 382 domains (Harms, Martin, & Wallace, 2010). In
 383 addition to these general directions, various new
 384 approaches may be worthwhile pursuing,
 385 although it should be noted that new findings
 386 often tend to be interpreted with too much enthu-
 387 siasm. The focus on mirror neurons has been
 388 discussed before, and research teams around the
 389 world currently pursue this topic. More recently,
 390 the use of oxytocin, a hormone related to female
 391 reproduction, has been suggested to improve
 392 social functioning, including emotion recognition

(Guastella et al., 2010), in autism. This topic is
 393 gaining considerable attention and will be on the
 394 agenda of many research groups. The use of
 395 virtual reality and other technological innova-
 396 tions, like robotics, to study and intervene in the
 397 emotional functioning of individuals with ASD
 398 may provide further fields of research. However,
 399 delineating which individuals with ASD are
 400 impaired on what specific domains, specifying
 401 age, IQ, and research context, in order to provide
 402 treatments that fit specific needs in specific indi-
 403 viduals remains the main challenge for future
 404 research.
 405

See Also

- ▶ Affective Development 407
- ▶ Emotion Regulation 408
- ▶ Emotional Intelligence 409

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