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Recovering Disability in Early Modern England

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The Book of Common Prayer, Theory of Mind, and Autism in Early Modern England

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Recent conversation about disability in the early modern period has largely concerned overt representations of disability, those for which Western culture has had a long taxonomic history—cultural historians using familiar terms for familiar conditions. This work has without question been useful to our understanding of nonstandard bodies and minds, but its tendency to identify and define according to familiar terminology has perhaps also limited the development of a disability heuristic that would otherwise allow for a more inclusive model for theorizing disability. In this emerging investigative field within early modern studies, a disability studies¹ of the English Renaissance, Carol Thomas Neely's work has become the most notable example.² Neely shows that madness, figured in the various discourses of the Renaissance as "distraction," exemplified a fluidity and, sometimes, subtlety that study of Shakespeare's plays in particular and early modern subjectivities more generally ought to include. Neely argues that "early moderns drew on the traditional humoral discourses of Galen and Aristotle to rethink the parameters of the human by reimagining madness" and that "discourses of madness flourished because they were useful in reconceptualizing the boundaries between natural and supernatural, masculinity

I would like to thank my colleague Wayne Norman in the Department of Psychology at Simpson University for directing me to several valuable resources on the subject of the autistic brain.

and femininity, body and mind, feigned and actual distraction.”³ In stark contrast to modern conceptions of madness that inform how we look at such cognitive disability, her investigation of the discourses that articulated the theorized sources and observable symptoms of madness and her close reading of its textual history in fifteenth- and sixteenth-century England evidences, as she claims, that early modern “discourses did not yet dehumanize distracted persons, as the concept of ‘insanity’ later would do.”⁴ Neely’s work is inclusive of a range of discourses (medical, theological, literary) that converge and overlap to construct representations of early modern subjectivity and madness on the stage and is an example of how attention to nuanced discursivity can enable modern readers to attend more sensitively to historical constructions of difference and disability.

Yet for all of its sensitivity to the differences that characterize the historical distance between early modern and modern subjectivities, Neely’s approach does at times overly rely for its identifications of “distraction” upon textual signifiers of difference: words that would act as labels or diagnoses for madness within a specific discursive history. And though Neely shows how “Shakespeare’s tragedies . . . invent a new language for the mad, a stylistically italicized and culturally inflected speech peculiar to distracted characters,”⁵ the inflection and italicization are nonetheless evidenced through language used by figures in the plays. Examples include a look at the anonymous Gentleman’s description of Ophelia in *Hamlet* 4.5.6–8, in which her speech is described, for example, as “but half sense” and “nothing,” and finally as “unshaped.” And Neely’s careful reading of period medical treatises also focus upon a writer’s use of some native form of terminology to describe maladies that afflict body or mind (or both in some cases). She cites Timothy Bright’s *Treatise of Melancholie* (1586) in which Bright discusses “the terrour of the afflicted minde.”⁶ Neely’s work is illuminating, but it is also limited by its core methodological focus upon the linguistic sign.

Methodological logocentrism is not uncommon in the study of literary history, so concerned are scholars with material evidence in the form of a textual, if not often strictly linguistic, record. But as I hope to show, omissions in the textual history of a culture can also signify the presence of the scholar’s topic of interest. The wider cultural and social uses of a specific text might overlap with possible therapeutic uses of that same text, so that a devotional text, for example, could be read as a behavioral script that ushered those of atypical cognitive development into corporate religious and social life. Scholars would thus practice a very different kind of logocentrism, one that focuses upon a text’s uses as a sign of its participation in an early modern discourse of disability. And while attention to actual language enables scholars to trace

out the various discursive locations that collectively speak of madness, for instance, as difference, it may also prevent them from noting silences or omissions in a discursive history that nonetheless would speak of forms of difference and disability that are present in a culture's historical record.

Stephen Dobranski has argued, for example, that a particular kind of Renaissance textual omission, one that "differ[s] from other unfinished or censored Renaissance works because their authors and/or publishers seem to want readers to notice the imperfections," acted for early modern readers as "ostensive stimuli," inviting them into "a cooperative relationship between writers and readers."⁷ Dobranski's study contributes to the body of literature known as reception studies, but his insights into the cultural function of the textual omission in early modern England are suggestive for how we might also read omissions in the historical record, or for how we might again see, in Louis Montrose's famous formulation, the textuality of history.⁸ The Elizabethan Book of Common Prayer functioned as a communicative mode that uniquely made accessible to those in the pews the emerging theological system of belief and the physical movements and utterances that comprised the church's liturgical service, despite the absence of commentary in the historical record concerning parishioners with receptive or expressive language differences.

Departing from the work done by some early modern disability studies scholars, the present essay considers the Book of Common Prayer in light of modern cognitive theory in an effort to explain more specifically how the prayer book functioned as a mechanism for wider social access for those with cognitive disabilities of a specific kind. In its capacity to standardize reformed rites within the church, the Book of Common Prayer simultaneously enabled willful, cognitively and socially atypical, prayer book conformists⁹ to enter into broader normative participation in the larger social sphere. For these individuals, specific cognitive differences influenced their development of what modern cognitive science calls Theory of Mind, a term that refers to an acute inability "to take the perspective of another person" or the inability "to understand the different perspective of others."¹⁰ Without this capacity, an individual is essentially locked within a perpetual state of egocentrism. To exhibit atypical Theory of Mind development meant that these individuals would also have been different in terms of their wider social acceptance. This would have been especially so in early modern England, since, as Christopher Haigh, Judith Maltby, and Ramie Targoff have shown, conformity to nominal religious practice also meant acceptance into the wider social fabric of a community,¹¹ especially after the passing of the

Act of Uniformity of 1559. For those individuals with limited, impaired, or simply atypical Theory of Mind, and for those with nonstandard language receptivity, the Book of Common Prayer functioned, quite literally, as a religious script and story that could be read and memorized, a script that detailed expectations for the church year, including all the relevant rites and ceremonies that constituted church life. This script/story enabled these individuals to be more than merely outwardly identified by members of their congregation as devotees of the faith, but ultimately, and more significantly, as self-identified and self-understood adherents to the faith and participating members in the wider social world of early modern England.

Cartesian Theory of Mind, Modern Cognitive Science, and Autism

While the term Theory of Mind has a long history, dating back to the writings of Augustine and, even earlier, Plato, the origins of the modern conception of Theory of Mind are found in the writings of René Descartes. In his now famous letter to Gibieuf, dated 19 January 1642, Descartes makes a rather auspicious claim that is the result of several years thinking and writing on the subject of human cognition, specifically its location, function, and capabilities. He writes:

I am certain that I can have no knowledge of what is outside me except by means of the ideas I have within me; and so I take great care not to relate my judgements immediately to things, and not to attribute to things anything positive which I do not first perceive in the ideas of them. But I think also that whatever is to be found in these ideas is necessarily also in the things themselves.¹²

Locating the core of the human sense of self outside of the confines of the material body, Descartes argues that the mind is inherently immaterial, disembodied, and ineluctably separate from the corporeal. The theory of mind at the heart of modern cognitive science owes much to this formulation of the relationship of the mind to the body that also forms the core of Descartes' philosophical (or neurophilosophical) project. Yet he also nonetheless acknowledges that there is something like an interanimation of these, or that the mind and body echo one another's existence, so that neither one can be said to exist without the copresence of the other. He goes on to state,

We cannot have any knowledge of things except by the ideas we conceive of them; and consequently, that we must even think that whatever conflicts with these ideas is absolutely impossible and involves a contradiction.¹³

Arguing further, and by analogy, Descartes claims:

Thus we have no reason to affirm that there is no mountain without a valley, except that we see that the ideas of these things cannot be complete when we consider them apart; though of course by abstraction we can obtain the idea of a mountain, or of an upward slope, without considering that the same slope can be travelled downhill.¹⁴

For Descartes, and for the emerging early modern medical discourse, the psychological inheres in the physiological, though each remains distinct. In contrast to Augustinian theory of mind, Charles Taylor has argued that for Descartes reality is a product of perception. “A representation of reality now has to be constructed,” Taylor writes, so that “As the notion of ‘idea’ migrates from its ontic sense to apply henceforth to intra-psychic contents, to things ‘in the mind,’ so the order of ideas ceases to be something we *find* and becomes something we *build*.”¹⁵ No longer should the individual struggle to orient himself or herself toward some identifiable cosmic order; the individual should instead recognize the impossibility in the first place of such an order ever existing outside of the mind whose sole purpose is to impose order upon the otherwise chaotic, to call order into existence. In his widely referenced analysis of what he calls Descartes’s “Disengaged Reason,” Taylor argues that “The order of representations must thus meet standards which derive from the thinking activity of the knower.”¹⁶ In his analysis of the sources and function of Descartes’ *cogito*, Taylor finds that rationality results from following an internally defined set of procedures used to order what exists outside the individual’s mind; thus, rationality results from employing a method for imposing the ordered self upon a disordered cosmos.

Reconsidering and responding to Taylor’s analysis of Descartes’ “source of the self,” John Sutton has argued that the separation of the mind from the body-as-material accredited to Descartes in Western philosophy since the mid-seventeenth century is probably overstated. Sutton traces a thread of Galenism in more modern medical theory’s understanding of mind through as late as the nineteenth century. He notes that the older “psychophysiological . . . frameworks were dynamic in the sense that they assumed the importance of what modern . . . cognitive science call[s], ‘continuous reciprocal causation.’”¹⁷ Citing the work of Andy Clark, Sutton points out that a

resurgence of interest in “embodied cognition is particularly suggestive in the light of . . . the old fluid physiologies.”¹⁸ The mind may not be entirely disconnected from the body according to modern medical observation and theory. “As in jazz improvisation,” Sutton writes, citing Clark, “the behavior of every part of the system changes continuously as the patterns of input within a dense web of causal complexity alter.”¹⁹ These scientists and researchers might even agree with literary and cultural historians of the early modern period such as Michael Schoenfeldt that “the lexicon of Galenic medicine has survived the demise of its intellectual framework in part because of its cogent experiential basis and its profoundly sentient terminology,”²⁰ recognizing the abiding explanatory potential of a pre-Cartesian theory of the mind as embodied. Gail Kern Paster, in writing about “embodied passions” in early modern England, has similarly shown that “For the early moderns, emotions flood the body not metaphorically but literally, as the humors course through the bloodstream carrying choler, melancholy, blood, and phlegm to the parts and as animal spirits move like lightning from brain to muscle, from muscle to brain.”²¹ Modern cognitive science, as Sutton and Clark show, may be returning to an earlier, ancient notion of mind/body interinfluence and moving away from the sharp division postulated by Descartes.

In modern cognitive science, neurobiology, and psychology, Theory of Mind (conveniently differentiated now from earlier conceptions of the term by the acronym ToM) is once again, as it was for Descartes in the early modern period, an *au courant* area of investigation, and while the modern ToM remains a hypothesis, it is a highly well-regarded one often cited by developmental psychologists and neuroscientists alike as an explanation for why the vast majority of individuals with significant language deficits, especially receptive language, demonstrate a profound unawareness of what others might think and feel.²² Researchers such as Simon Baron-Cohen have found that ToM deficits are primarily typical of individuals with autism spectrum disorder (ASD). Baron-Cohen, an evolutionary psychologist at Cambridge University, describes ToM as the ability to infer “the full range of [another individual’s] mental states from [observing his or her] behavior,” and a key developmental feature that allows a person to distinguish between true and false belief.²³ The beginning of ToM, as Michael Tomasello’s research would show, occurs in infancy, a point in an individual’s development of intersubjectivity when intentionality is ascribed to others and to self.²⁴

ASD is defined in the most recent edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV) as “The presence of markedly abnormal or impaired development in social interaction and communication and

a markedly restricted repertoire of activity and interest”; the definition adds, “Younger individuals may have little or no interest in establishing friendships,” and, further, “Older individuals may have an interest in friendship but lack understanding of the conventions of social interaction.”²⁵ Regarding the ability to communicate effectively, the DSM-IV entry states, “The impairment in communication is also marked and sustained and affects both verbal and nonverbal skills.”²⁶ The term “autism” was coined by Leo Kanner in 1943, yet he and many psychologists before him had noted peculiar inabilities in some individuals to access the social world that existed around them. Histories of the disorder note that in earlier times the disorder would have been categorized as profound emotional distress or “retardation.”²⁷

The causes for ASD and the attendant failure to develop ToM are currently hotly debated by a wide spectrum of specialists, including neurologists, neurobiologists, social psychologists, environmental biologists, and, most notably in recent years, immunologists. And although researchers presently do not agree on the causes of autism, there is wide agreement that so-called impaired social cognition and receptive and expressive language differences, characteristics of ASD that are comorbid with lack of ToM, result from problems with the interactivity between the superior temporal gyrus (STG), the amygdala, and medial prefrontal cortex.²⁸ As Bigler et al. explain, “In autism . . . the interplay between impaired social cognition and deficits in communication, including verbal and nonverbal aspects of social communication, comes via a link between the STG and the amygdala, and other frontotemporolimbic connections. Dysfunctions in this neural circuitry could easily contribute to . . . impaired language.”²⁹ It is also widely held that the use of social scripts enables an individual with ASD and notably atypical ToM to begin “rewiring” his or her brain so that medically and socially defined normative social interaction is increasingly possible. Yet it should be noted that like ToM itself, the neurological substrates of this rewiring have not yet been identified.³⁰ Changes in an individual’s behavior that are said to result from the intervening use of specific cognitive therapies, especially in children below the age of five, are cited as evidence that key neuropathways in the brain have undergone some fundamental alteration.

In the late decades of the twentieth century, researchers in autistic brain function designed therapies and strategies for increasing these individuals’ awareness of pretense, but the longitudinal study of patients with ASD or those who exhibit atypical ToM development has revealed that this cognitive difference tends to remain pronounced throughout their lives.³¹ Those who exhibit variable ToM often require visual modes of communication in order

to compensate for nonstandard language reception if they are to understand what others may expect of them or how they are to complete a series of steps in a process.³² And research into this inability to understand the motivations, perspectives, beliefs, and emotions of others has revealed that “initial impairments in theory of mind may be further exacerbated as time goes on by poor expressive and receptive language abilities,” which then progressively limit their ability to engage in a wider social world.³³ For these individuals, mechanisms must be identified that will allow them to compensate for atypical neurology, a neurology that results in their identification, and categorization within the prevailing medical discourse, as cognitively disabled.

The primary cognitive therapy that interventionists use to catalyze the development of ToM is known as social skills training, and the main techniques used are the social script and the social story.³⁴ A social script is a written text that involves the individual with ASD in a scenario of verbal exchange, a back-and-forth conversation, matched to appropriate nonverbal communication such as appropriate hand gestures and predictable eye contact. Such scripts typically engage individuals in a customary conversation that allows him or her essentially to practice interacting with another person along fairly predictable patterns of verbal exchange. The effectiveness of the social script technique stems from the very predictability of future social interactions that directly imitate or are strongly reminiscent of the scripted version. Individuals are taught how to socialize through this experience and are encouraged to generalize the pattern of exchange to include future such encounters. Socializing becomes conventional. Like the social script, the social story is a written text but a narrative that depicts common social situations, such as the most acceptable way to greet someone, the proper way to respond when someone is upset, and what behaviors are involved in attending church. Because those with ASD and/or atypical ToM “struggle to read, interpret, and respond . . . to their social world,” social stories are used by therapists to map out the kinds of interactions that are nearly autonomic for individuals who are neurotypical.³⁵ Social stories break the social world down into micronarratives that can be learned the way one learns, for example, about genre (or, in this case, genres of social interaction). The genre of lyric includes a variety of more specific poetic forms, or microgenres, such as the sonnet and the ode, with the sonnet exemplifying a more rigid form than the ode, which is defined more by tone and purpose than it is by line length, stanzaic pattern, and meter. Yet for all the differences between the various microgenres within the larger genre of lyric, it is nonetheless possible to learn to identify each as distinct, and, perhaps most importantly, one can learn the basic features of each in order to reproduce them.

The Early Modern Book of Common Prayer as Cognitive and Social Therapy

With its tripartite narrative design composed of an interweaving of the calendrical, doctrinal, and theological religious scripts that contain the story of the church, the Book of Common Prayer functioned for early modern individuals with atypical ToM (as well as for those who were neurotypical) as a macrosocial story, a collection of micronarratives that included the church's calendar, the litany (doctrinal instruction and statements), collects (a combination of basic theological tenets and prayer instruction),³⁶ and scriptural passages from both Old and New Testaments. To learn to participate in the common prayer service necessarily involved one in the larger social life of the church community, since the basic patterns of church life were outlined and scripted in the Book of Common Prayer, the communal touchstone that bound individuals together. John N. Wall notes on this subject "Aggressively linear, prayer book worship links past and present in terms of the promise that [parishioners] share a common future; it enables ancient texts to become what makes possible the saying of something vital to the present and to glimpse an as yet unsayable future while it also enables modern texts to become facilitators of such interchanges."³⁷ The prayer book, in other words, serves the people as a historical narrative of their theological identity, linking, as Wall points out, the past to the present. For those exhibiting atypical ToM, a historical narrative aids them in constructing a reasonable and longitudinal understanding of where they came from in a historical sense and what the larger community of which they are a part expects to do in the future, thus eliminating some confusion regarding who they might be within a larger body of believers.³⁸

Thomas Cranmer, the primary architect of the Book of Common Prayer, was convinced that a prayer book and accompanying liturgy could unite English devotees of the Christian faith even as it spiritually transformed them. Cranmer believed that an ordered and theologically coherent narrative could standardize religious practice, a belief that reflects at least a nascent understanding of the formative power narrative held for shaping cognition and identity.³⁹ This point about early modern English reformers is too often neglected. Critical neglect of this kind may be a result of scholars' common assumption that individuals in the Elizabethan Church of England used the prayer book in merely a perfunctory manner. If scholars demonstrated instead that many individuals found the prayer book to be devotionally efficacious, then they might also come to acknowledge its larger social function for the cognitively disabled within the church and wider community.

Ramie Targoff notes, for example, “Despite the prominence of the liturgical reforms that the prayer book introduced, their impact on early modern religious culture has often been underestimated,” and that “when historians have acknowledged the extent to which the prayer book sought to standardize the devotional voice of both the laity and clergy, they have frequently represented this commitment to uniformity in terms of the religious establishment’s political, and not devotional, motivations. . . . Those sympathetic to ‘traditional religion’ have regarded common prayer as a superficial practice that had no real meaning for most English worshippers.”⁴⁰

Citing Patrick Collinson’s *The Religion of Protestants* as one well-known study of early modern reformed prayer book religion, Targoff notes that Collinson acknowledges how use of the prayer book resulted in greater religious conformity, though he “never imagines” that prayer book conformity no doubt fundamentally remade congregants’ devotional lives.⁴¹ Collinson does not conceive of prayer book conformity as desirable for many people, that is, or as a positive influence upon their personal—and not merely politically and socially expedient—faith commitments. In contrast, however, to this earlier work on Elizabethan prayer book religion, Judith Maltby treats the prayer book as “the most pervasive agent of change . . . in the religious consciousness and even affections of the English laity. Its success may be explained in part by the element of continuity it gave its users along with innovation.”⁴² Maltby’s central claim is that the prayer book “succeeded as an agent of change as well as of continuity from the middle of Elizabeth’s reign onwards,” evidencing a widespread commitment to its use as an efficacious devotional aid and not merely as a means of state-imposed conformity.⁴³ While historians of early modern England continue to debate the relative devotional significance of the Book of Common Prayer for those who were expected to make use of it, their critical discussion of its reformative effects upon parishioners, with few exceptions, continues to overlook the cognitive influence of its overarching narrative.

In the 1559 edition of the prayer book is a section titled “Proper Lessons to be Read,” which details in the form of a chart, a kind of early modern spreadsheet or desk calendar, exactly which Old and New Testament passages, including the Proverbs and Psalms, were to be read on each day of the year. This was a programmatic approach to scripture instruction and one that, in its starkness (no textual commentary weaved either into the readings or in the form of notes at the bottom of the printed page), put readers into direct contact with the holy scriptures. And so, in addition to this section serving as the calendar for the church year, it exemplified a basic Reformation theological conviction that laity should be given direct access to scrip-

ture. The calendar readings also usually coincide with the remembrance of a particularly significant figure in the history of the life of the church; they marked the beginnings and endings of elongated purification rites (such as fasts) and compelled laity to celebrate Christ's birth, death, and resurrection. This calendrical narrative situated the passing of the days of the year within the larger symbolic history of the church and within the additional frameworks of biblical knowledge and Reformed theological conviction.

The church calendar is followed by scripted morning and evening prayers and then by the Litany, or the basic script for the church service that laity were to recite (or read) as a corporate body, thus subsuming individuals' voices within the larger communal one. The Litany begins with the solemn recognition, "O God the Father of heaven: have mercy upon us miserable sinners. O God the Father of heaven: have mercy upon us miserable sinners."⁴⁴ This structure of repeated lines is sustained throughout the Litany and would have been no doubt particularly effective at not merely reminding laity of their need for God's mercy and grace but also uniting them in an act of scripted contrition, especially memorable for the cognitively disabled who required reminding and verbal, if not experiential, reinforcement, the kind that actively shaped one's religious and social subjectivities.

The Collects, Epistles, and Gospels immediately follow the Litany and were to be read in accordance with the church calendar. These collects were intended by Cranmer to involve the laity in a kind of second layering of prayer that logically should follow the laity's corporate admission of sinfulness found in the Litany. But they were also micronarratives that piecemeal contributed to the prayer book's construction of the larger Christian narrative, and some even were intensely compressed narratives that would contain the entire story of Christ's sacrificial redemption of humankind. In the first collect, for example, it reads: "Almighty God, give us grace that we may cast away the works of darkness, and put upon us the armor of light, now in the time of this mortal life (in the which thy Son Jesus Christ came to visit us in great humility); that in the last day, when he shall come again in glorious majesty to judge both the quick and the dead, we may rise to the life immortal, through him who liveth and reigneth with thee and the Holy Ghost, now and ever. Amen."⁴⁵ For individuals with less acute ToM, this collect, repeated many times throughout the lifetime of the faithful, dutiful user of the prayer book, is an essential religious story that once learned marked the cognitively disabled person as a member of the larger social world accessed only through a corporately, publicly understood and privately embraced religious identity.

A careful reading of Cranmer's writings in the 1540s and 1550s on the topic of the prayer book's cognitive influence upon the people reveals that in his own thinking he made an important distinction between "heard" and read prayers, a distinction that further helps us understand the role of liturgy in the lives of individuals with cognitive disability. Cranmer's belief in the efficacy of narrative was limited to the hearing of it and not the reading of it.⁴⁶ His preface, for example, to the English litany of 1544, a precursor to the vernacular liturgy, makes clear that the laity's understanding should result from what "enters in at their ears,"⁴⁷ noting later in his Preface first added to the prayer book of 1552, "Whereas St. Paul would have such language spoken to the people in the church as they might understand and have profit by hearing the same, the service in this church of England (these many years) hath been read in Latin to the people, which they understood not, so that they have heard with their ears only: and their hearts, spirit and mind have not been edified thereby."⁴⁸ Cranmer does not appear to have been convinced that the practice of reading the church service was more effective at "edifying" congregants. He privileges the heard prayer over the written and read. Returning to the preface of his Litany of 1544, Cranmer had written then, "These holy prayers and suffrages following are set forth of most godly zeal for edifying, and stirring of devotion of all true faithful christian hearts: so it thought convenient in this common prayer of procession to have it set forth and used in the vulgar tongue, for stirring the people to more devotion: and it shall be every christian man's part reverently to use the same."⁴⁹ Cranmer's primary concern for prayer book use was that the congregation prayed as if with one voice: this was the source of the book's spiritual efficacy. Its power to "stir" primarily derived from hearing and not reading, from corporate voice that subsumed the individual. Conformity was key, and his comments regarding common prayer in the preface to his Litany and in the preface to the Book of Common Prayer demonstrate his belief that the aural was of greater value than the written and read.

For those congregants who could not access the aural as successfully because of their varied (or different) mechanisms for language reception, this would have often presented a problem, one that might even constitute a threat to the conformity Cranmer sought to establish among the laity. Yet since Cranmer did not inveigh against the practice of prayer book reading during a service, the possibility still existed for those who could read to access the larger subjectivity-shaping narrative that the prayer book represented. Moreover, one could also argue that because the reading of common prayer occurred within the context of the recitative church body, reading

was a means of attending to the aural in a manner that would not otherwise be possible, thus fulfilling Cranmer's most basic goal for the use of common prayer.

I HAVE COMMENTED on important findings in neurobiology that offer scholars of the early modern era important insights into the role the Book of Common Prayer played for laity who were cognitively disabled. Yet the sciences are not the only disciplines to offer such insights. Scholarship in the field of narratology offers mutually confirming conclusions about the influence narrative has upon cognition and subject formation, whether an individual is neurotypical or struggling with language acquisition or related cognitive difficulties. This disciplinary interplay has rich potential for future investigations of cognitive disability and difference in the English Renaissance, and some theory of mind approaches to the study of literary texts and the reading experience are already under way.⁵⁰ Jerome Bruner argues that for the study of narrative and its effects upon the mind, "The central concern is not how narrative as text is constructed, but rather how it operates as an instrument of mind in the construction of reality."⁵¹

How might the early modern religious subjectivity of the cognitively different have been shaped by the narratives woven together in the Book of Common Prayer? This is at core a structural question. Bruner would respond that "the best hope of hermeneutic analysis is to provide an intuitively convincing account of the meaning of the text as a whole in the light of the constituent parts that make it up."⁵² Combining calendrical, doctrinal, and theological narratives in a single text, and one to be used daily by nearly all those one knew, the early modern prayer book linked Protestant religious narrative to an individual's identity. But this religious narrative also served as a social story that invited the cognitively disabled into fuller public existence. On the role of narrative in this sense, neuroscience and narratology seem to agree, mutually confirming a similar, if not the same, conclusion via seemingly unrelated methodological and analytical approaches.

The argument I have offered here—that the early modern Book of Common Prayer functioned simultaneously as a religious and social script and story and, by extension, an enculturating textual mechanism for parishioners with atypical neurology—has much to suggest to modern historians of early modern England. It may be, for example, that theological statements and systems communicated in a homily or sermon were not enough to create points of access to religious life for those who exemplified noticeable cognitive differences in their undirected or spontaneous social interactions.

Some individuals may have also required a concrete religious script, one that would have facilitated in the form of printed words in a handheld book content that also communicated larger social expectations, a point that Thomas Cranmer's writings indeed suggest. A "social script" (to use the language of modern cognitive therapy), because it catalyzes comprehension in a way that the strictly aural cannot, may have been for early modern parishioners with variable ToM development the only effective means by which the abstract dimensions of public religious practice and private belief could be accessed, functioning then also as a primary facilitator of participation in the larger social sphere that was characteristically recognized, in the medically defined language of early modern England, as normative.

Written and circulated in parishes nearly one hundred years before Descartes formulated his famous phrase and theory of mind, the Book of Common Prayer nonetheless functions as a projection and materialization of the power of reason to impose itself upon scattered theological writings, church creeds, calendars, and rites. In the same way that institutions of all kinds commit to print their basic policies and procedures for self-governance, creating what might be usefully termed a paper infrastructure, the prayer book functioned as a paper infrastructure of the religious mind. It was, in other words, a textual apparatus that recorded the ordering capacities of human reason and reflexively and habitually, through repeated use, influenced the continued ordering of the mind and self, making no distinction between the mind of persons who were cognitively atypical and those defined by early modern medical discourse as "normal."

Notes

1. I take my definition of this phrase from James C. Wilson and Cynthia Lewiecki-Wilson's essay, "Disability, Rhetoric, and the Body," in *Embodied Rhetorics: Disability in Language and Culture*, ed. James C. Wilson and Cynthia Lewiecki-Wilson (Carbondale: Southern Illinois University Press, 2001): "Disability studies seeks to advance the cause of the disabled and promote social change by analyzing the present social formations that contribute to maintaining the walls of exclusion. Disability studies is thus a situated discourse and expresses a particular standpoint—that of the disabled" (9). Wilson and Lewiecki-Wilson's description of the aims of disability studies includes a careful recognition that such aims are political.

2. Neely, *Distracted Subjects*.

3. *Ibid.*, 1–2.

4. *Ibid.*, 2.

5. *Ibid.*, 23.

6. *Ibid.*, 16.

7. Stephen Dobranski, *Readers and Authorship in Early Modern England* (Cambridge: Cambridge University Press, 2005), 2–3, 15, and 11.

8. Louis A. Montrose, “Professing the Renaissance: The Poetics and Politics of Culture,” in *The New Historicism*, ed. H. Aram Veeser (New York: Routledge, 1989), 15–36, and 20.

9. My emphasis here upon those for whom prayer book use resulted in authentic personal, devotional change is in contrast to Christopher Haigh’s use of the term “parish Anglicans,” those whom Haigh sees as essentially crypto-Catholic: individuals who focused upon remnants of the old faith in reformed liturgical service and rite. For a fuller discussion and definition of the term, see in particular Haigh’s *English Reformations: Religion, Politics, and Society under the Tudors* (Oxford: Clarendon Press, 1993), 291–93.

10. Laura Schreibman, *The Science and Fiction of Autism* (Cambridge, MA: Harvard University Press, 2005), 111.

11. Christopher Haigh, *Reformation and Resistance in Tudor Lancashire* (Cambridge: Cambridge University Press, 1975); Judith Maltby, *Prayer Book and People in Elizabethan and Early Stuart England* (Cambridge: Cambridge University Press, 1998); and Ramie Targoff, *Common Prayer: The Language of Public Devotion in Early Modern England* (Chicago: University of Chicago Press, 2001).

12. *The Philosophical Writings of Descartes, Volume III: The Correspondence*, trans. John Cottingham, Robert Stoothoff, Dugald Murdoch, and Anthony Kenny (Cambridge: Cambridge University Press, 1991), 201.

13. *Ibid.*

14. *Ibid.*

15. Charles Taylor, *Sources of the Self: The Making of the Modern Identity* (Cambridge, MA: Harvard University Press, 1989), 144.

16. *Ibid.*, 145.

17. Sutton, *Philosophy and Memory Traces*, 40.

18. *Ibid.*

19. *Ibid.* See Clark’s quotation in its original context in Andy Clark, *Being There: Putting Brain, Body, and World Together Again* (Cambridge, MA: MIT Press, 1997), 163.

20. Schoenfeldt, *Bodies and Selves*, 6.

21. Paster, *Humoring the Body*, 14. See also her *Body Embarrassed* and Paster et al., *Early Modern Passions*.

22. It also should be noted, as Karen Zelan points out, that not all researchers into the autistic mind agree that ToM is a theory that should ultimately be confirmed as a definitive function. Citing the work of psychologist James Russell, she notes, “Russell and colleagues assert that it’s not so much that a young autistic’s mind misses a theory of itself as it is that he cannot always act upon what he knows. It is the executive function that is impaired—the autistic’s control over action generally.” See *Between Their World and Ours: Breakthroughs with Autistic Children* (New York: St. Martin’s Press, 2003), 156. Russell’s contention would direct researchers’ attentions toward better understanding the substrates of executive function impairment and away from a theory that can be confirmed only by the fact of its absence in neurotypical individuals.

23. Simon Baron-Cohen, *Mindblindness: An Essay on Autism and Theory of Mind* (Cambridge: MIT Press, 1995), 51. For a fuller discussion of the relationship between ToM and the autistic brain, see especially chapter 5.

24. See Michael Tomasello, "Having Intentions, Understanding Intentions, and Understanding Communicative Intentions," in *Developing Theories of Intention: Social Understanding and Self-Control*, ed. P. D. Zelazo, J. W. Astington, and D. R. Olson (Mahwah, NJ: Erlbaum, 1999), 63–76.

25. *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. (DSM-IV) (Text Revision) (Washington, DC: American Psychological Association, 2000), 70.

26. *Ibid.* The full entry on autistic disorder is found on pp. 70–75 of the DSM-IV.

27. According to Majia Holmer Nadesan in her essay "Constructing Autism: A Brief Genealogy," in *Autism and Representation*, ed. Mark Osteen (London: Routledge, 1998), 78–95, misdiagnoses like these persisted even up through the late 1970s and early 1980s in the United States, and autism as a term did not achieve wide use in the medical community until the mid- to late 1980s. These facts concerning the diagnostic history of ASD are given further and provocative consideration in the collection *Foucault and the Government of Disability* (Ann Arbor: University of Michigan Press, 2005), edited by Shelley Tremain, in which a Foucauldian critique of the humanist subject is extended to the history of the disorder; see especially Nirmala Erelles, "Signs of Reason: Rivière, Facilitated Communication, and the Crisis of the Subject," 51–52.

28. Erin D. Bigler et al., "Superior Temporal Gyrus, Language Function, and Autism," *Developmental Neuropsychology* 31 (2007): 218.

29. *Ibid.*, 219.

30. Schreibman, *Science and Fiction*, 115.

31. *Ibid.*, 115–16.

32. The fulfillment of steps in a process toward the completion of a task or plan is known in cognitive science as executive function. Individuals with ASD often demonstrate a marked lack of this ability and require visual aids to help them complete a great variety of tasks. Depending upon the severity of their ASD, and as these individuals age and mature, they may require less and less use of visual aids in order to complete tasks or to reach goals.

33. Patricia Howlin, *Autism and Asperger Syndrome: Preparing for Adulthood*, 2nd ed. (London: Routledge, 2004), 133.

34. *Ibid.*, 128–29.

35. Carol Gray, *The New Social Story Book* (Arlington, TX: Horizons, 2000), v.

36. In modern liturgical practice, a collect is a carefully scripted back-and-forth exchange between the priest and the people. In the prayer book of 1559, for example, the collect is a short petition to God that is spoken by all the people, though there is no response from the priest.

37. John N. Wall, *Transformations of the Word: Spenser, Herbert, Vaughan* (Athens: University of Georgia Press, 1988), 27.

38. Charles Taylor has addressed this issue as well, noting "there are three things that get done in language: [1] making articulations, and hence bringing about explicit awareness; [2] putting things in public space, thereby constituting public space; [3] making the discriminations which are foundational to human concerns, and hence opening us to these concerns"; see *Philosophy and the Human Sciences: Philosophical Papers (Vol. 1)* (Cambridge: Cambridge University Press, 1985), 263.

39. For the most exhaustive and recent study of the compositional history of the Book of Common Prayer, see Diarmaid MacCulloch's *Thomas Cranmer: A Life* (New Haven, CT: Yale University Press, 1996), esp. 221–26, 410–53.

40. Targoff, *Common Prayer*, 17.
41. Ibid., 134n13.
42. Maltby, *Prayer Book*, 17.
43. Ibid.
44. John E. Booty, ed., *The Book of Common Prayer, 1559: The Elizabethan Prayer Book* (Washington, DC: Folger, 1978), 68.
45. Ibid., 77.
46. For more on this distinction, see Targoff, *Common Prayer*, chap. 1.
47. J. Eric Hunt, *Cranmer's First Litany, 1544 and Merbecke's Book of Common Prayer Notes, 1550* (London: SPCK, 1939), 86 (qtd. in Targoff, *Common Prayer*, 23).
48. Booty, *Book of Common Prayer*, 15.
49. Hunt, *Cranmer's First Litany*, 86 (qtd. in Targoff, *Common Prayer*, 23).
50. See, for example, Mark Turner, *The Study of English in the Age of Cognitive Science* (Princeton, NJ: Princeton University Press, 1991), and Sutton's *Philosophy and Memory Traces*.
51. Jerome Bruner, "The Narrative Construction of Reality," *Critical Inquiry* 18 (1991): 5–6.
52. Ibid., 7.