

I know I am late to party on this paper <u>@DrMBotha</u>. Currently, & reflecting upon it. Already seeing parallels with it, and my own experiences & observations of engaging with PDA literature & agenda to make "PDA an ASD".

https://www.frontiersin.org/articles/10.3389/fpsyg.2021.72 7542/full

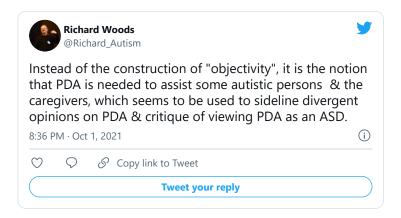
There are parallel processes operating in similar/ same manner to what Monique describes in the paper. First off, there is lack of consideration of it divergent opinions on PDA are welcome or actively embraced.

I know from past experience, of myself & other dissenting voices we tend to be ignored, by "PDA as an ASD" leading experts, while attacked, or excuses made to not take our points credibly.

We know generally that divergent opinion is often not referenced, or even pertinent information is mentioned, let discussed in the PDA literature. E.g., check how often Elena Garralda's article is referenced by Christie/ O'Nions, i.e., ZERO times.

Another example is <u>@HappeLab</u> not discussing issues dividing autism in their (co-authored) PDA articles, despite them often frequently viewing PDA as a form of autism. Yes, there is a conflict of interest in Happe not discussing this.

It is highly telling that ongoing debates about autism, and how diagnose it, i.e., return to subtypes/ transdiagnostic processes, and broader debates around utility of disorders are largely absent from much of PDA discourse.



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I accept that PDA to some extent can be helpful to some autistic persons, & their caregivers. I think it would be foolish to argue against that. That is not an excuse for failing to critically reflect upon what PDA is or to sideline divergent opinions on PDA.

For instance if PDA is likely to help some autistic persons, by explaining certain clustering of features, better than autism does; then it is also likely benefit non-autistic persons by better explaining certain clustering of features.

The last point is important, as "PDA as an ASD" supporters seem to relying on their experience, & perception as justification for lack of critically engaging with nonsensical notion PDA is an ASD.

One of the comments I have had against me, is that as there are thousands of persons in online social media groups who view PDA as an ASD, this is evidence that is a form of autism.

Simple rebuttal to is that there are thousands of persons who think the world is flat, or believe that vaccines causes autism.

Obviously anyone who challenges the notion of "PDA as an ASD" is attacked/challenged by proponents "PDA as an ASD".

I am going to stop & reflect more upon <u>@DrMBotha</u> paper. As it is likely to be important to my talk to the PARC event on the 19th of October, "Demand-Avoidance Phenomena: as a biopower identity".

Just need to make one final point though.

I strongly urge those engaging with PDA to reflect upon how their values, & perceptions shape their understandings & perception of PDA.

P.S. I can show that PDA has been changed to conform to autism understandings.

We know generally that divergent opinion is often not referenced, or even pertinent information is not mentioned, let alone discussed in the PDA literature. E.g., check how often Elena Garralda's article is referenced by Christie/ O'Nions, i.e., ZERO times.

Point here is that Happe seems to have no issues discussing issues dividing in their autism scholarship, but does not mention it in their PDA work. One can argue she has benefitted from it.

I strongly urge those engaging with PDA to reflect upon how their values, & perceptions shape their understandings & construction of PDA.

Heck, there are thousands of persons who think ABA/ PBS is a good thing.

Just because there might be many persons in various groups who think is an ASD, does not mean PDA is part of the autism spectrum.

I am still reflecting upon it, but the article has made me more certain in my position in how "PDA as an ASD" is operating, that to view "PDA as an ASD" is unethical, & probably discriminating against non-autistic persons.

non-autistic persons with PDA

That vulnerable persons are likely being taken advantaged of.

The paper has increased my concerns over what is happening with "PDA as an ASD", that much greater scrutiny of it, is required.

I do not see how the current situation with "PDA as an ASD", as a "culture-bound concept" to the UK is going to end well.

I think one can question if "PDA as an ASD" narrative is hostile to "those engaging with PDA to reflect upon how their values, & perceptions shape their understandings & construction of PDA".

"Debating what DAP could be, distracts from purpose of diagnosing DAP, as an ASD (Christie 2007; Christie et al 2012; Fidler & Christie 2019).

"...maintain the integrity of how the condition is understood..." (Christie 2016; Christie 2018; Christie 2019)."

When "leading" "PDA as an ASD" "experts" take position for over an decade. How exactly one is meant to reflect upon how their values shape their understandings & constructions of PDA. Let alone embrace divergent opinions which undermine notion "PDA as an ASD"