Richard Woods @Richard_Autism

Jan 5, 2022 • 14 tweets • Richard_Autism/status/1478863713276940290

So I am reading my ADHD referral letter for an assessment. I am struck by the language used in it. Also its descriptions of what I consider to be my "normal" way of communicating, that my communication style seems to be substantially impacted by ADHD features.

So where am I going with this, well surely these ADHD features could be viewed as being social in nature, as they mainly expressed when I am interacting in a social context with others? Yet, they are not intrinsically viewed as such under DSM-5 ADHD criteria.

Yet, DSM-5 ADHD criteria states:
"There is clear evidence that the symptoms interfere with, or reduce the quality of, social, academic, or occupational functioning." APA 2013, p60.

The point here is that the ADHD features which seem prevalent in my communication style are OK not being interpreted by social in nature, but would be covered part D of the DSM-5 ADHD criteria.

It is worth mentioning that Part D of the DSM-5 ADHD criteria is reflective of the DSM-5's approach to behaviours profiles. That features must impact some form of functioning, including social.

Even Autism criteria has a similar line as part of its Category D. Similar lines are present in other Disorders in the DSM-5, partly to meet the book's Disorder definition. Also because it is often problematic establishing if a feature meets threshold of a being a Disorder.

So, where am I going with this? Predictably... PDA.

Why Richard are you critiquing PDA again? Some avoidance features are being viewed as inherently social in nature. I am wondering if we need to inherently do that?

Instead primarily focus upon the demand-avoidance, how it operates (is experienced) in a person?

For me I am separating the demand aspects from the avoidances aspects. They are linked. Hence "demand-avoidance". It is not a monolithic unitary characteristic.

Which means that HOW the demand-avoidance expressed by a person impacts their social functioning is covered by a Category D type statement.

Off the top of my head, I think there is some efforts to move away from focusing on demand-avoidance in social contexts with PDA.

Adopting the approach I mention above would support such efforts mentioned above. It would also mean stopping pretending PDA is a "Profile of ASD".

However, I suppose one could also restructure & reframe autism criteria to remove the social communication/ interaction aspects (Category A) being seen as deficits. Instead focus on specific features & how they impact social functioning.

AKA Turn autism criteria into something resembling ADHD, or how I am suggesting PDA could be described as a Disorder. One could argue this should happen due to double empathy problem research.

(Some people think I am closed minded on PDA).

I will end these musings here. Certainly, requires some refinement in conceptualisation, and it is possible to conceptualise PDA differently to how it presently is within accepted paradigm of the DSM-5.

@threadreaderapp Please could you unroll?

Thank you in advance.

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