



Richard Woods @Richard_Autism

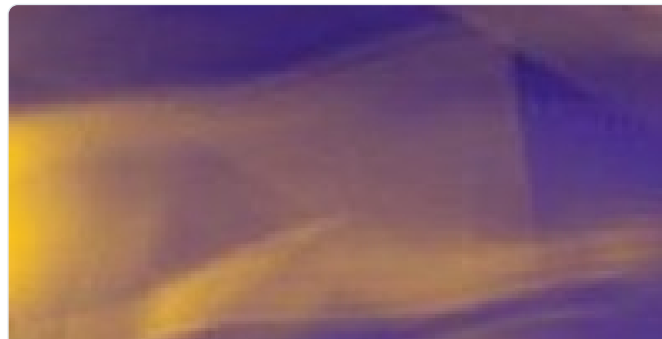
Nov 8, 2021 · 57 tweets · [Richard_Autism/status/1457785155775459333](#)

The I reflect upon this. The more wary I am to think anyone clinic knows what PDA looks like. There are enough examples from autism literature to tell us treat with caution research originating from a single clinic...

... I do not see why we should ignore such warnings with PDA. There are signs in the PDA literature we should not be favouring anyone clinician's views on PDA over another's...

... In relation to autism, many would argue the classic example is that of Asperger's vs Kanner's original clinical descriptions of autism. Many view Kanner as holding back Western understandings of autism by decades by not engaging with Asperger's work...

... We know that clinician's can be biased, & their views can impact who they diagnose autism in, like with autistic females...



Barriers to Autism Spectrum Disorder Diagnosis...

Review Journal of Autism and Developmental Disorders - There is increased recognition that women and girls with autism spectrum disorders (ASD) are underserved by the clinical criteria and...

<https://link.springer.com/article/10.1007/s40489-020-00225-8>

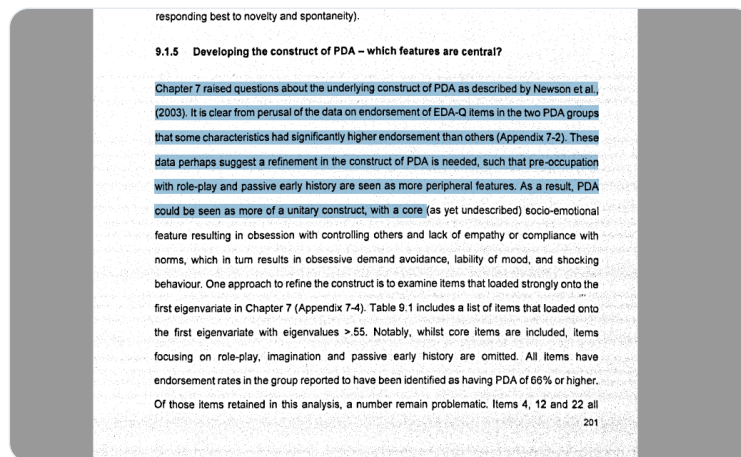
... There is no clinical consensus over what PDA looks & what populations it is present in. It does appear that PDA can be seen in non-autistic persons...

<https://rationaldemandavoidancecom.files.wordpress.com/2021/08/20-june-2021-10-studies-indicating-pda-is-seen-in-non-autistic-persons.pdf>

“having done an absolutely first class job of summarising all the past literature and perspectives on PDA. No one else has done anywhere near as good, or as thorough, a job as you have.” Describing previous blog post, by a pro "PDA Profile of ASD" clinician.

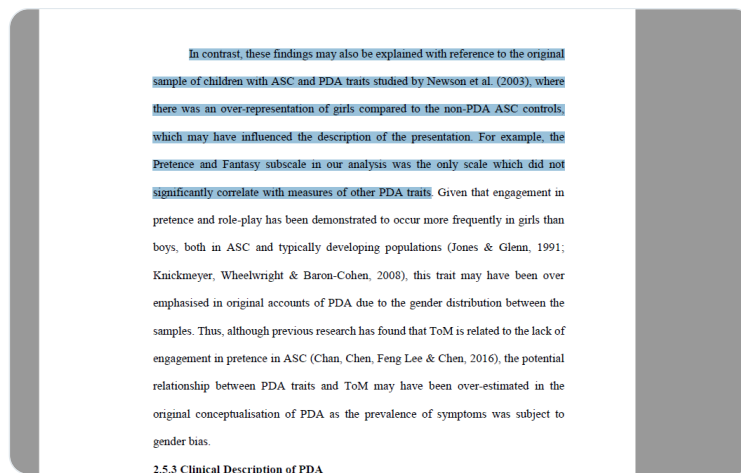
... Newson's clinical accounts of PDA have been critiqued since at least 2013, as in are they reflective of "core" PDA. O'Nions said that at least Passive Early History & Comfortable in role play and pretending seems not to cluster with other traits...

Screenshot of page O'Nions, 2013, p201.



... The result of Comfortable in role play and pretending not clustering with other PDA features was replicated in Bishop (2018)...

Screenshot from Bishop 2018, p109.



... Theoretically, under a transactional based account of demand-avoidance, Comfortable in role play and pretending should cluster with other demand-avoidance traits. Hence, I have been viewing these results due to issues with the EDA-Q...

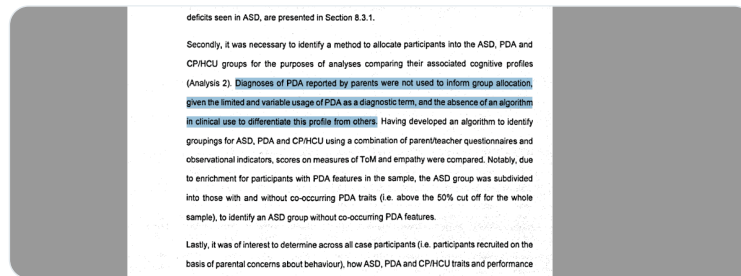
... The EDA-Q views PDA to be a form of autism, & PDA's features are results of deficits located within the person, i.e., not part of a transactional process...

... It is plausible that with tool which views demand-avoidance as a process, Comfortable in role play and pretending would cluster with other demand-avoidance traits...

... There are other things to wary of from the axiology from both PhD theses. O'Nions seems wary of validity of PDA diagnoses, due to their variability & lack of consensus on how to differentiate between PDA & other constructs (while viewing PDA as an ASD)...

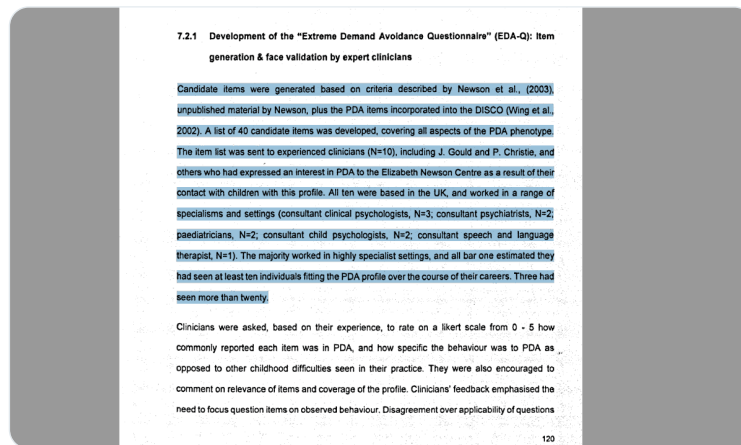
... O'Nions set up their samples intrinsically viewing PDA to be unique to autistic persons, which is a massive assumption considering Newson's cohort seems to have non-autistic persons in it & Newson excluded autistic persons from her cohort...

Screenshot of O'Nions 2013, p140.



... Also worth noting O'Nions asked expert opinion of 10 clinicians, treating their views equally as part of developing the EDA-Q. Which should tell us if it is appropriate to favour anyone clinic's views on PDA...

Screenshot from O'Nions 2013, p120.



... The point I am trying to make, is one cannot be sure if O'Nions results that Passive Early History & Comfortable in role play and pretending not clustering with other demand-avoidance traits is due to limitations of O'Nions axiology & methodology...

"Problems concerning definition and measurement in the reviewed studies currently limit any conclusions regarding the uniformity or stability of the behaviours described, or the characteristics of individuals displaying them." (Kildahl et al, 2021p1).

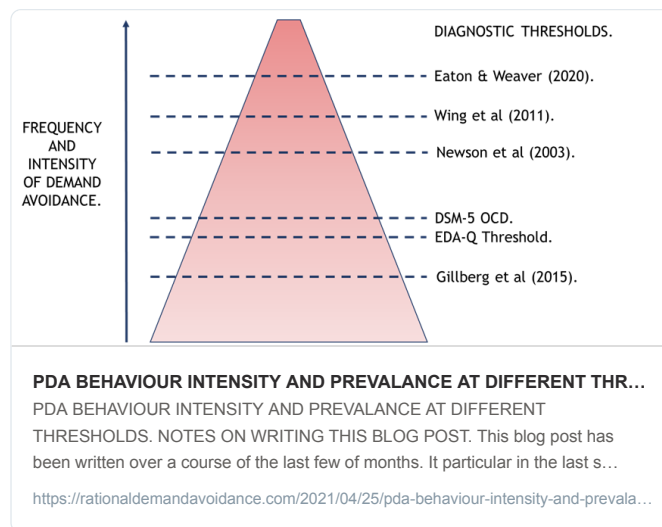
The above quote is from the recent systematic review & is supportive of my comments on O'Nions PhD studies, even though only two of those studies were included in the review due to being peer reviewed.

... Link to recent systematic review.



... I think the comments about O'Nions PhD research limitations in axiology & methodology are applicable to Bishop (2018), who viewed all of Newson's cohort to be autistic, which we now know is a mistake...

... I provide a comprehensive comparison of Gillberg et al (2015) diagnostic threshold vs EDA-Q here...



... Gillberg et al (2015)'s diagnostic threshold is the lowest in the PDA literature. It also seems to provide evidence supporting O'Nions (2013) that developmental features do not cluster with demand-avoidance traits...

... Reason for this is that Gillberg et al (2015) threshold:

“Classic PDA” was defined as Total PDA score of 5 or more and including the presence of socially manipulative or shocking behaviour to avoid demands.” (Gillberg et al, 2015, p981)...

... This threshold does not require much/ many demand-avoidance features to be present in a person to meet diagnostic threshold...

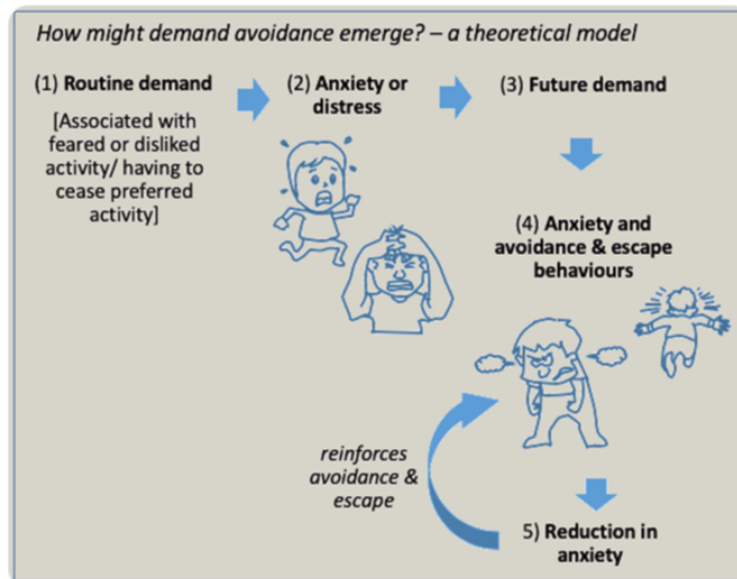
... "The three most frequent PDA symptoms in the PDA group were (1) clumsiness, (2) rapid inexplicable changes from loving to aggression, and (3) repetitive role play, affecting 8 of 9 in the PDA group" (Gillberg et al 2015, 482)...

... "the common trait seen in Gillberg et al (2015) persons with PDA, was Neurological Involvement (along with Lability of Mood and Comfortable in Roleplay and Pretend), which Newson stated it remains to be seen if there is sufficient evidence to include"...

... Above quote is me commenting on Gillberg et al (2015) most common features, it is from the above mentioned blog post...

... The low diagnostic threshold of Gillberg et al (2015) matters, because if there are not sufficient demand-avoidance features present to develop & maintain a negative reinforcement as suggested by O'Nions (2019)...

... From O'Nions & Eaton (2021, p414).



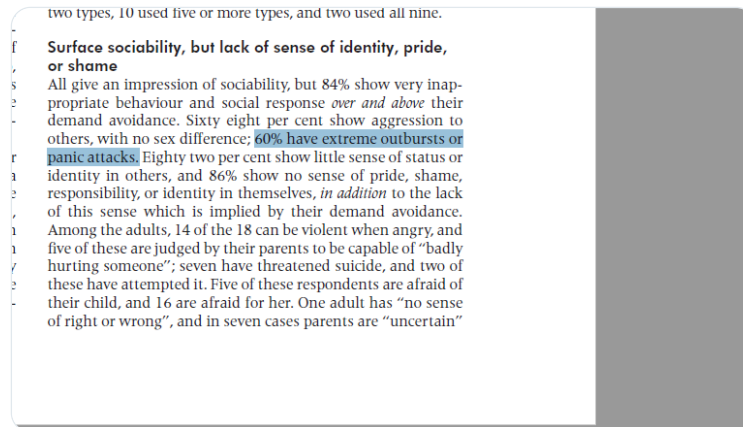
... If there are not sufficient demand-avoidance features present, it is unlikely that a person is not going to develop & maintain PDA from their avoidance features providing relief from aversive demands...

... This would explain why only 1 out of 9 participants met PDA possibly met full criteria for PDA. Hence, that Gillberg et al (2015) seems to provide evidence supporting O'Nions (2013) that developmental features do not cluster with demand-avoidance traits...

... This goes back to my point about being wary of specific clinic's views on PDA. We know Newson had their own problematic biases on PDA, like viewing panic attacks as a social communication issue behaviour...

... "60% have extreme outbursts or panic attacks." (Newson et al 2003, p596).

Screenshot shows the quote is from Social Communication issues based trait.

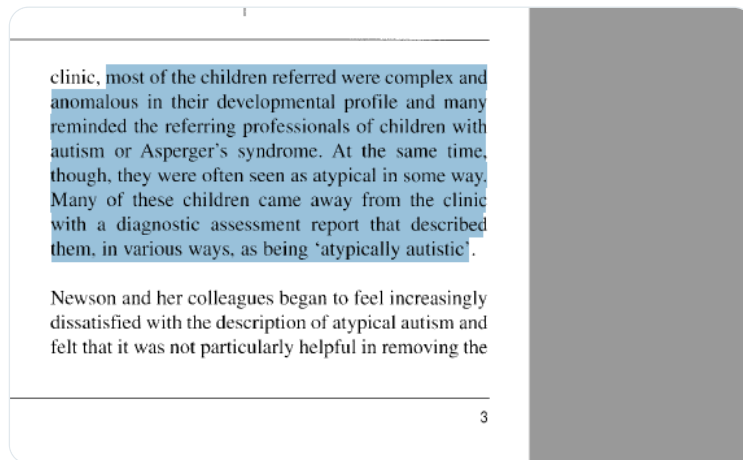


... To be clear, it is not only recently that it is recognised that Newson's cohort had non-autistic persons in...

"...most of the children referred were complex and anomalous in their developmental profile and many reminded the referring professionals of children with autism or Asperger's syndrome...

At the same time, though, they were often seen as atypical in some way. Many of these children came away from the clinic with a diagnostic assessment report that described them, in various ways, as being 'atypically autistic'." (Christie 2007, p3).

Screenshot of the above quote from Christie 2007, p3.



... The point is not all of the referrals to Newson's clinic resembled autism spectrum, like Asperger's Syndrome. Not all of the atypical presentations received an "atypical autism" diagnosis...

... I am coming to the end of this thread. I originally was looking at O'Nions (2013) & Bishop (2018) as examples with problems assuming PDA is a "Profile of ASD". I was struck by issues with Newson's accounts based on their comments...

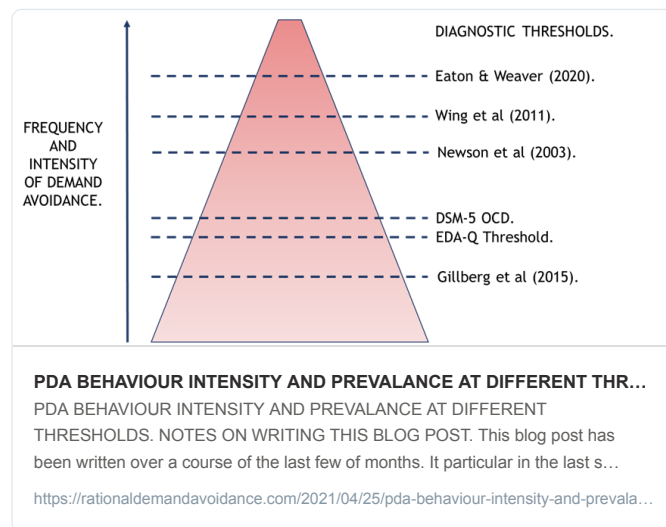
... I was reminded of Gillberg et al (2015).

It should be obvious to anyone, that it is hugely problematic for any clinic to be acting like it has the definitive answers on PDA as it would be disregarding the literature of PDA & autism.

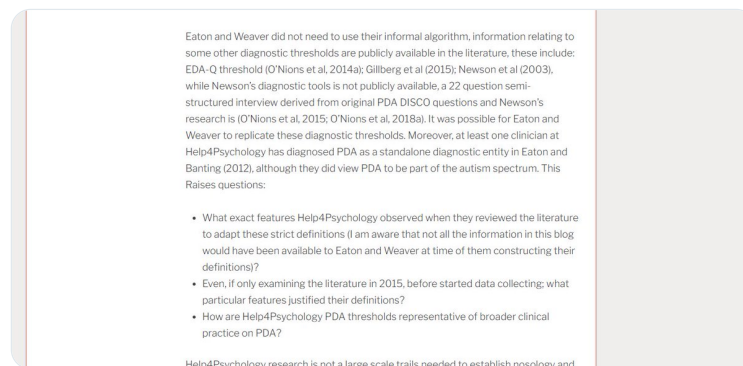
... Many of will know of my concerns over Help4Psychology acting like it is has the definitive answers over what PDA looks like & for them seemingly choosing to place their own views on PDA over PDA literature...

... From what I can tell, it is unclear what features Help4Psychology based their PDA algorithm on when their "examination" of the literature...

... I discuss the apparent issues with Help4Psychology diagnostic threshold, diagnosing it in a dual diagnosis, & my doubts over what parts of the PDA literature they observed to support their algorithm here...



Screenshot of part of where I discuss my concerns on Help4Psychology PDA research.



... There does seem to be an issue with the quality of literature search in Eaton & Weaver (2020), example, they claim there is a new theme of

"ineffectiveness of traditional reward and consequence based parenting strategies" p45...

... "Praise, reward, reproof, and punishment ineffective; behavioural approaches fail." (Newson et al 2003, p597).

So one can view Eaton & Weaver (2020) replicating that result of Newson et al (2003)...

... This is going off on a tangent. The point is that there is a good case to skeptical of any PDA research originating from a single clinic & that is the central theme of this thread. I will end it here.



Richard Woods
@Richard_Autism



Replying to @Richard_Autism

... Just a quick addition to this thread. We know that Newson's clinic did receive a range of autistic persons. From Newson's Study B, including 20 CYP with Autistic Disorder & 20 CYP with Aspergers...

11:09 AM · Nov 9, 2021



1



Copy link to Tweet

[Tweet your reply](#)

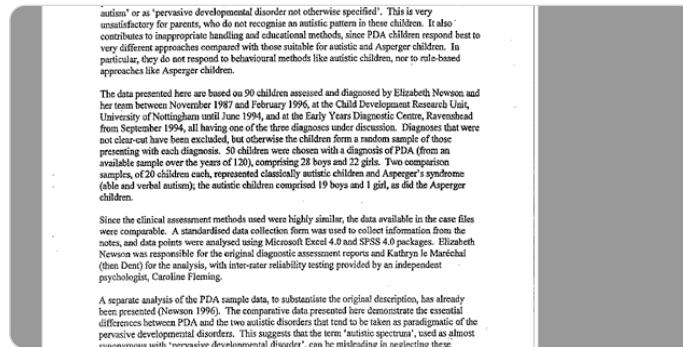


Richard Woods
@Richard_Autism



Replying to @Richard_Autism

Screenshot describing Newson's Study B, from Newson 1998.



11:11 AM · Nov 9, 2021



1



Copy link to Tweet

[Tweet your reply](#)



Richard Woods
@Richard_Autism



Replying to @Richard_Autism

Link to Newson (1998). with their Study B described.
autismeastmidlands.org.uk/wp-content/upl...

11:12 AM · Nov 9, 2021




1



Copy link to Tweet

[Tweet your reply](#)

 **Richard Woods**
@Richard_Autism


Replying to @Richard_Autism

... Newson (1998) also has interesting information on gender ratio in Autistic Disorder & Asperger's groups, of 19:1 males to females; there is a substantial male bias present...

11:17 AM · Nov 9, 2021

♡ 1 ↻ Copy link to Tweet

[Tweet your reply](#)

 **Richard Woods**
@Richard_Autism


Replying to @Richard_Autism

... The 20 Autistic Disorder & 20 Asperger's cases were randomly selected, so can be considered likely representative of gender ratio of Newson's autism spectrum disorder cohort...

11:18 AM · Nov 9, 2021

♡ 1 ↻ Copy link to Tweet

[Tweet your reply](#)

 **Richard Woods**
@Richard_Autism

Replying to @Richard_Autism

... Which then casts further doubts that Newson's cohort has an over representation of autistic females as argued in Bishop (2018)...

11:20 AM · Nov 9, 2021

♡ 1 ↻ Copy link to Tweet

[Tweet your reply](#)

This will be the end of this thread.

[@threadreaderapp](#) please could you unroll again?

Thank you in advance again.

...