

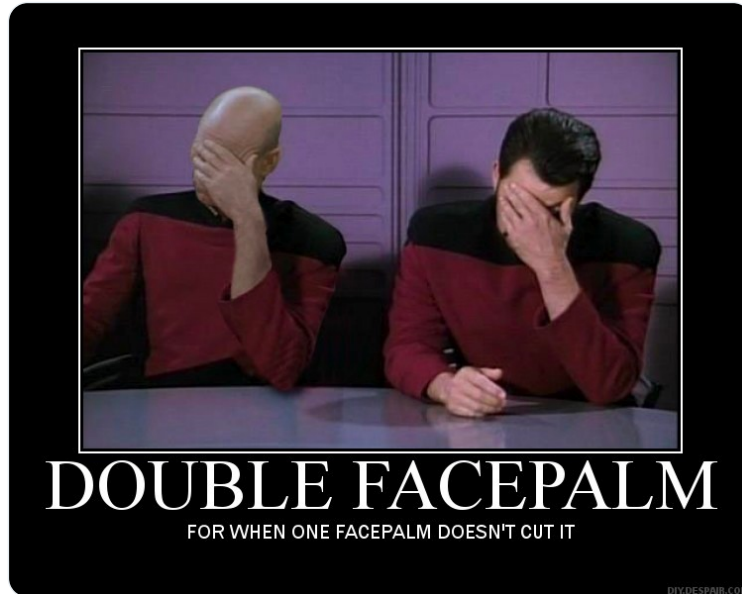


**Richard Woods** @Richard\_Autism

28 Sep · 20 tweets · [Richard\\_Autism/status/1310663414558195714](#)



That moment when you realise the "splitters" (instead of lumpers) are trying to split autism using something that is not autism (PDA).



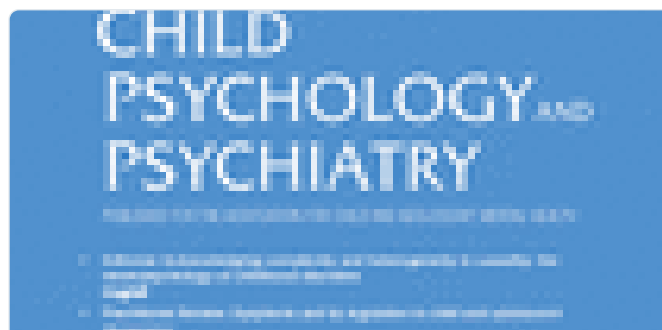
Normally, I would find this ironic, but I am still a bit speechless by realising how arbitrary some some features are assigned.

I have been looking at questions assigned to "Surface Sociability" in EDA-Q & the DISCO.

The intent was to analyse these items to see if any are RRBI's.

I am struck by is just HOW much there is an emphasis on this ONE trait in the tools, compared to Newson's own observations.

There are 9 questions assessing Surface Sociability and lacking pride/ shame/ social identity/ responsibility. In the EDA-Q.



### Development of the 'Extreme Demand Avoidance Questionnaire' (EDA...

Read the Commentary for this article on doi: 10.1111/jcpp.12275

<https://acamh.onlinelibrary.wiley.com/doi/abs/10.1111/jcpp.12149>

individuals fitting the PDA profile over the course of their careers. Three had seen more than twenty.

Clinicians were asked, based on their experience, to rate on a likert scale from 0-5 how commonly reported each item was in PDA, and how specific the behaviour was to PDA as opposed to other childhood difficulties seen in their practice. They were also encouraged to comment on relevance of items and coverage of the profile. Clinicians' feedback emphasised the need to focus question items on observed behaviour. Disagreement over applicability of questions occurred when they tapped untested cognitive-level hypotheses (e.g. anxiety or social insight). Based on clinicians' recommendations, additional items about early history and receptive verbal and nonverbal communication difficulties were included.

Ratings of how common and specific items were to PDA were combined with qualitative feedback and a final 32-item list compiled (See Tables S1-S3). Items 1-30 were rated on a 4 point likert scale: 'Not true', 'Somewhat true', 'Mostly true', 'Very true'. **Items 1-28 measured demand avoidance or social manipulation for the purposes of avoidance or controlling interactions (6 items); insensitivity to hierarchy/praise/need to manage reputation (6 items); lack of responsibility (3 items); need for control (2 items) emotional lability in response to demands or**

© 2013 Association for Child and Adolescent Mental Health.

To put it this way, that is 9 out of 30 questions assessed. From what I can tell all 9 were included in the 26-item EDA-Q.

There are 4 questions out of the revised 11 PDA DISCO questions.



### Identifying features of 'pathological demand avoidance' using the Diag...

The term 'pathological demand avoidance' (PDA) was coined by Elizabeth Newson to describe children within the autism spectrum who exhibit obse

<https://link.springer.com/article/10.1007/s00787-015-0740-2>

Table 5 The main features of PDA outlined by Newson and colleagues [1] and the 11 DISCO PDA items deemed most useful in identifying PDA, organised to correspond with Newson's criteria

Newson's description	Relevant DISCO item description	DISCO item code
Continues to resist ordinary demands with strategies of avoidance that are essentially "socially manipulative"	Lack of co-operation	LACKCOP
Surface sociability, but lack of sense of identity, pride or shame	Apparently manipulative behaviour	MANDEH*
	Awareness of own identity	CIDENI*
	<b>Socially shocking behaviour</b>	<b>SHOCKS*</b>
	<b>Behaviour in public places</b>	<b>BEHAPUB*</b>
	<b>Fantaisying, lying, cheating, stealing</b>	<b>LYING*</b>
Lability of mood, impulsive, led by need to control	Inappropriate sociability (rapid, inexplicable changes from loving to aggression)	CINAPP*
	Using age peers as mechanical aids, bossy and domineering	CPEERAD*
	Difficulties with other people	DIFPEOP
Comfortable in role play and pretending	Repetitive acting out roles	CTROL*
Obsessive behaviour (often social in nature)	Harassment of others	HARAS*
Neurological involvement	None included	
Passive early history	None included	
Language delay	None included	

Items that were included in Wing and Gould's draft 15-item PDA list are designated with an asterisk. Full DISCO item descriptions are given in Online Resource 2

formally compare endorsement of items across the two test, two sided), reported in 73 % of the "substantial"

I also looked at the revised 11 PDA DISCO questions directly:

[https://static-content.springer.com/esm/art%3A10.1007%2F500787-015-0740-2/MediaObjects/787\\_2015\\_740\\_MOESM1\\_ESM.pdf](https://static-content.springer.com/esm/art%3A10.1007%2F500787-015-0740-2/MediaObjects/787_2015_740_MOESM1_ESM.pdf)

It is not stated in the EDA-Q article what questions belong to which trait, so I was having to cross-reference against Newson's descriptions & LWC PDA DISCO paper, which give us two handy tables.

For Child Abused Psychiatry (2014) 20:487-493

Table 1 EDA-Q items that are included within and the closest corresponding DISCO items that were identified

EDA-Q items (18 items)	Corresponding DISCO items (17 items)	DISCO category
Continues to resist ordinary demands	Lack of co-operation	LACKCOP
Has difficulty complying when socially pressured to comply by the need to be oblige	Using age peers as mechanical aids, bossy and domineering	CPEERAD*
Behaves differently when alone	None	ANSDTY
Engages in socially unacceptable behaviour	Repetitive acting out roles	CTROL*
Makes adult mistakes and errors	Behaviour in public places	BEHAPUB*
Shows little sense of embarrassment	Embarrassment towards to public	HARAS*
Goes to getting around others	Apparently manipulative behaviour	MANDEH*
Unaware of differences between self and ability to cope	Awareness of own identity	CIDENI*
Attempts to manipulate others with subtle	Temper tantrums	TANTRP
If provoked to do things, may have a "meltdown"	Challenged mood	MOODCH
Mood changes rapidly	Difficulties with other people	DIFPEOP
Knows when to do or say to upset specific people	Harassment of others	HARAS*
Blames or blames particular people	Blaming other people	BLAME*
Disruptive behaviour, even when caught and handled	Fantaisying, lying, cheating, stealing	LYING*
Obsessive behaviour to get out of doing something	Socially shocking behaviour	SHOCK*
Extreme emotional responses to small events	Inappropriate sociability (rapid, inexplicable changes from loving to aggression)	CINAPP*
Social interaction has to be on their own terms	One-sided social approaches	CONSID

Items that were included in Wing and Gould's draft 15-item PDA list are designated with an asterisk

Table 5 The main features of PDA outlined by Newson and colleagues [1] and the 11 DISCO PDA items deemed most useful in identifying PDA, organised to correspond with Newson's criteria

Newson's description	Relevant DISCO item description	DISCO item code
Continues to resist ordinary demands with strategies of avoidance that are essentially "socially manipulative"	Lack of co-operation	LACKCOP
Surface sociability, but lack of sense of identity, pride or shame	Apparently manipulative behaviour	MANDEH*
	Awareness of own identity	CIDENI*
	<b>Socially shocking behaviour</b>	<b>SHOCKS*</b>
	<b>Behaviour in public places</b>	<b>BEHAPUB*</b>
	<b>Fantaisying, lying, cheating, stealing</b>	<b>LYING*</b>
Lability of mood, impulsive, led by need to control	Inappropriate sociability (rapid, inexplicable changes from loving to aggression)	CINAPP*
	Using age peers as mechanical aids, bossy and domineering	CPEERAD*
	Difficulties with other people	DIFPEOP
Comfortable in role play and pretending	Repetitive acting out roles	CTROL*
Obsessive behaviour (often social in nature)	Harassment of others	HARAS*
Neurological involvement	None included	
Passive early history	None included	
Language delay	None included	

Items that were included in Wing and Gould's draft 15-item PDA list are designated with an asterisk. Full DISCO item descriptions are given in Online Resource 2

Revised DISCO items for Surface Sociability, have descriptions:

"tearing up another person's work, pulling off someone's spectacles"

"A talk about fantasies as if real, or lie, or cheat, or steal?"

1 Minor	2 No problem
2 No problem	
Socially shocking behaviour (SHOCK)	
Does A discuss other people for inappropriate inappropriate actions for no apparent reason? (e.g. tearing up another person's work, pulling off someone's spectacles, taking pants down and urinating on floor, shouting obscenities, etc.)	
0 Marked	
1 Minor	
2 No problem	
Behaviour in public places (BEHAPUB)	
How does A behave when taken into shops, restaurants, other enclosed public spaces? Is it possible for one parent alone to take A into such spaces?	

1 Minor	2 No problem
2 No problem	
Behaviour in public places (BEHAPUB)	
How does A behave when taken into shops, restaurants, other enclosed public spaces? Is it possible for one parent alone to take A into such spaces?	
0 Major problem with outings	
1 Minor	
2 No problem	
Fantaisying, lying, cheating, stealing (LYING)	
Does A talk about fantasies as if real, or lie, or cheat, or steal?	
0 Marked	
1 Minor	
2 No problem	

Revised DISCO items for Lability of Mood, have descriptions:

"use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A?"

1 Some problem	2 No problem
-8 No interaction	
Using age peers as mechanical aids, bossy and domineering (CPEERAD)	
Does A use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A?	
0 Marked, frequent	
1 Minor, occasional	
2 No problem	
Difficulties with other people (DIFPEOP)	
Does A frequently tease, bully, refuse to take turns, make trouble?	
0 Marked	
1 Minor	
2 No problem	
Repetitive acting out roles (CTROL)	

And

"frequently tease, bully, refuse to take turns, make trouble?"

&

"first sight appear to be sociable and friendly but can slip from loving to violent behaviour or vice versa for no apparent reason?"

<p>1 Some problem 2 No problem -8 No interaction</p> <p>Using age peers as mechanical aids, bossy and domineering (CPEERAD) Does A use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A? 0 Marked, frequent 1 Minor, occasional 2 No problem</p> <p>Difficulties with other people (DIFPEOP) Does A frequently tease, bully, refuse to take turns, make trouble? 0 Marked 1 Minor 2 No problem</p> <p>Repetitive acting out roles (CTROL) Does A act out the role of an object, animal, fictional person or real person so that A seems to become the acted role – it is not just pretence? Is this a major part of A's play? 0 Marked 1 Minor 2 No problem</p>		<p>Inappropriate sociability (rapid, unreciprocated changes from loving to aggression) (CINAPP) Does A or B first appear to be sociable and friendly but can slip from loving to violent behaviour or vice versa for no apparent reason? They come both together, e.g. saying "I love you" or a sweet voice while hugging. May hog others too long and too hard. 0 Marked 1 Some problem 2 No problem -8 No interaction</p> <p>Using age peers as mechanical aids, bossy and domineering (CPEERAD) Does A use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A? 0 Marked, frequent 1 Minor, occasional 2 No problem</p> <p>Difficulties with other people (DIFPEOP)</p>	
--	--	--	--

How is "frequently tease, bully, refuse to take turns, make trouble?"

substantially different from

"tearing up another person's work, pulling off someone's spectacles"?

Surely, they can be part of "bullying" anyone?

"Does A use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A?"

<p>-8 No interaction</p> <p>Using age peers as mechanical aids, bossy and domineering (CPEERAD) Does A use age peers solely as aids in own activities, e.g. to collect materials, to assist in building some construction, to take a specified part in a scenario created by A? 0 Marked, frequent 1 Minor, occasional 2 No problem</p> <p>Difficulties with other people (DIFPEOP) Does A frequently tease, bully, refuse to take turns, make trouble? 0 Marked 1 Minor 2 No problem</p> <p>Repetitive acting out roles (CTROL) Does A act out the role of an object, animal, fictional person or real person so that A seems to become the acted role – it is not just pretence? Is this a major part of A's play? 0 Marked 1 Minor 2 No problem</p>	
--	--

Is listed as Liability of Mood, I think because of how liability of mood is due to "need for control". Behaviours are described as using to control an activity.

The "need for control" is a big assumption, like how assuming persons automatically have "Coding" problems due to presenting demand avoidance.

avoidance strategies; many have more than 10.

Of the 18 adults followed up (study C), all were still very demand avoidant: eight "about the same" as in childhood, three more than formerly, and seven less than formerly. Half were still unequivocally described as socially manipulative, eight as somewhat socially manipulative, and only one as no longer manipulative (he would just say "I can't"). Out of a range of nine suggested types of avoidance strategies, 15 used more than two types, 10 used five or more types, and two used all nine.

**Surface sociability, but lack of sense of identity, pride, or shame**

All give an impression of sociability, but 84% show very inappropriate behaviour and social response *over and above* their demand avoidance. Sixty eight per cent show aggression to others, with no sex difference; 60% have extreme outbursts or panic attacks. Eighty two per cent show little sense of status or identity in others, and 86% show no sense of pride, shame, responsibility, or identity in themselves, *in addition* to the lack of this sense which is implied by their demand avoidance. Among the adults, 14 of the 18 can be violent when angry, and five of these are judged by their parents to be capable of "badly hurting someone"; seven have threatened suicide, and two of these have attempted it. Five of these respondents are afraid of their child, and 16 are afraid for her. One adult has "no sense of right or wrong", and in seven cases parents are "uncertain"

If you ignore the "need for control" aspect, how is

"Using age peers as mechanical aids, bossy and domineering" representative of "Experiences excessive mood swings and impulsivity" (NAS's version of Liability of mood)?

It is not.

I am not making this up.

For once, can something just be straight forward with PDA.

I am just at facepalm at the moment.



So the reason I am at facepalm, is there is a heavy emphasis on one trait in EDA-Q & DISCO, that has many arbitrary (value laden) decisions around what features are assigned to each specific behaviour trait.

And it is a trait that is not representative of PDA's core impairment & impairment effect, the demand avoidance from anxiety...

It must be said, these issues around assigning features to specific traits, are a reason

why one should PDA tools with the behaviour profile they are designed for, or you can get some weird results.

[@threadreaderapp](#) unroll please?

...