



Richard Woods @Richard_Autism

12 May · 12 tweets · [Richard_Autism/status/1392595392890605569](#)



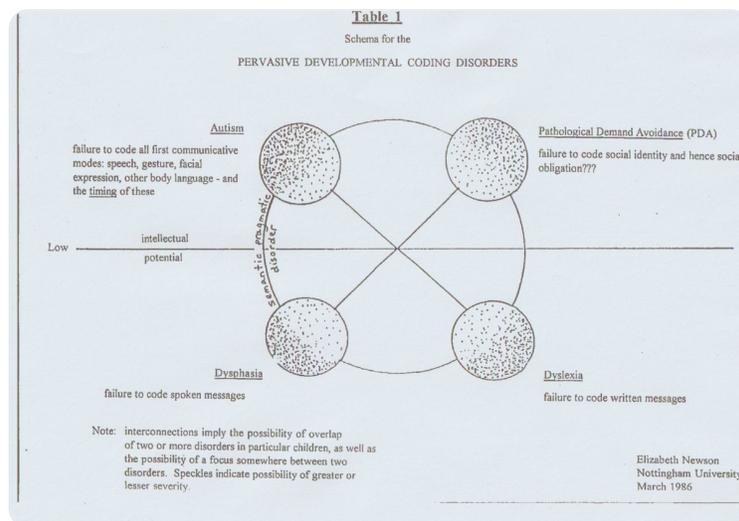
[@realdollo3](#) There are many issues with it.

I think it never should have been included in autism to begin with. I think it is demonstrable nonsense, that is harmful and discriminatory to view PDA as an ASD. A huge issue, is a lack adequate engagement with Newson's work.

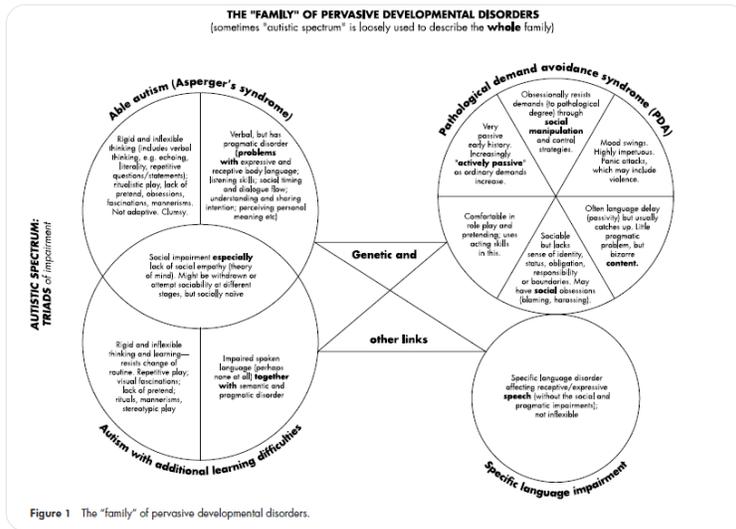
[@realdollo3](#) I have seen many mental contortions to view PDA as an ASD. Like Pervasive Developmental Disorders are not practiced anymore only ASDs do. Issue there is that Newson's PDDs, are NOT the same as DSM-4 ones.

[@realdollo3](#) PDA not conforming to DSM-4 PDDs understandings were not considered by the committee that set the DSM-5 autism criteria. How PDA has to be autism as it social communication issues and RRBI's.

[@realdollo3](#) No, it does not, one, we can remove social communication issues, as others removed the Developmental Traits. Two, we can create a new diagnostic grouping for PDA to go into, afterall Newson has already done for that PDA herself in 1986 - 1996.



[@realdollo3](#) If one engages with Newson's work, she consistently argued her PDDs needed to have Coding issues. All she really did was repackage her Pervasive Developmental Coding Disorders group into this diagram.



[@realdollo3](#) I think it very much remains to be seen if PDA even has Coding issues. There are far too many issues with the assumption there are Coding issues in PDA.

[@realdollo3](#)

 **Richard Woods**
@Richard_Autism

Replying to @Richard_Autism

I have been reflecting on the problems with proposed coding issues in PDA. Blog post by Donna Williams is important, as it explains rationale behind proposed deficits in social identity/pride/shame. I have updated the slides again.
blog.donnawilliams.net/2008/06/17/exp...

<p>DEFINITIONS DEFICITS. Coding Issues.</p> <ol style="list-style-type: none"> 1) Psychological, not chemically driven (contradicted by some recent literature). 2) Social identity/ pride/ shame deficits, demand avoidance is by choice; persons highly motivated by obsessive demand avoidance. 3) How do these deficits cause these features, e.g. panic attacks? These deficits do not... 4) Highly aroused/ compulsive demand avoidance unlikely caused by such deficits. 5) Driven by anxiety, which in turns can cause proposed deficits (Williams 2008). <p><small>Autismcheckup 10/07/2021 26</small></p>	<p>DEFINITIONS DEFICITS. Coding Issues.</p> <ol style="list-style-type: none"> 1) Surface Sociability trait features hard to measure (Garralda 2003), e.g. sense of right from wrong (whose perspective?). 2) Or, are RRBIs, e.g. panic attacks. 3) Newson questioned its coding issues in 1986, before profile was reified in 1988 (1996). Hence, Newson needed DAP to have coding issues to fit into their created diagnostic group. Are these deficits an arbitrary invalid social construct? <p><small>Autismcheckup 10/07/2021 26</small></p>
<p>DEFINITIONS DEFICITS. Coding Issues.</p> <ol style="list-style-type: none"> 1) Debate over manipulative vs strategic social demand avoidance, e.g. see (O'Nions & Eaton 2021). 2) No ToM deficits (Newson et al 2003; O'Nions et al 2015), PDA Traits are not associated with ToM, but autism is with ToM (Blishop 2018). 3) EDA-Q views PDA behaviours to be manipulative (O'Nions et 2014a). 4) Other PDA tools view actions to be done with intent (Gillberg et al 2015; O'Nions et al 2015; O'Nions et al 2016; Egan et al 2019). <p><small>Autismcheckup 10/07/2021 27</small></p>	<p>DEFINITIONS DEFICITS. Coding Issues.</p> <ol style="list-style-type: none"> 1) Social communication issues are common in CYP (Wilkinson 2017); can make trait optional (Christie et al 2012). 2) Social communication differences are covered by autism, why are we pathologizing such features twice? 3) Entirely autistic population samples, are issues from autism, or does autism contribute? 4) Non-cogent accounts. <p><small>Autismcheckup 10/07/2021 28</small></p>

5:04 PM · May 12, 2021

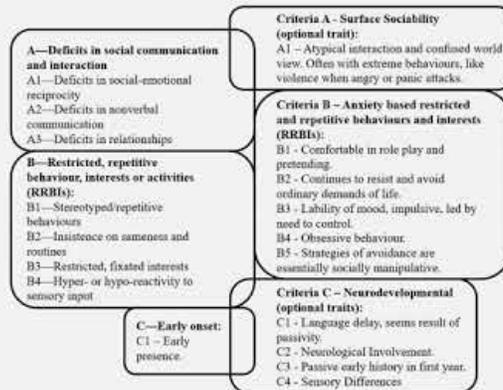
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[@realdollo3](#) Where am I going with this. Simple, it is a fallacious argument, to claim PDA has to be autism, because it was viewed a Pervasive Developmental Disorder, and it does not account for many different things.

[@realdollo3](#) I set out the main reasons we cannot assume PDA is autism from Newson's work here:

TIME TO PROFILE YOU.

Autism (left) + PDA Traits (right), my view.



Aut|medes

PDA is not an ASD.

5

<https://www.youtube.com/embed/GSIdMzDMC-w>

[@realdollo3](#) There are other important factors why PDA is viewed as an ASD, another one is that Wing and Gould prematurely critiqued Newson's work in 2002, without apparently properly engaging with it.

[@realdollo3](#) Newson's article was published in 2003. I fully accept that much of Wing and Gould's critique of Newson's work is valid, such as Newson did not validate PDA and that PDA features are not specific to it.

[@realdollo3](#) [@threadreaderapp](#) Please could you unroll.

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