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So some reflections which have been nagging about Monotropism Research questionnaire results.

I will not be going into specifics of the results. More discussing potential implications of the study.

About 2 years ago I generate about 50 candidate items for the Monotropism Questionnaire (MQ). Others like [@thewoodbug](#) commented upon them. This list was offered to [@SueReviews](#) as a potential masters project. Hence [@VSMGarau](#) enters the story primarily conducting the study.

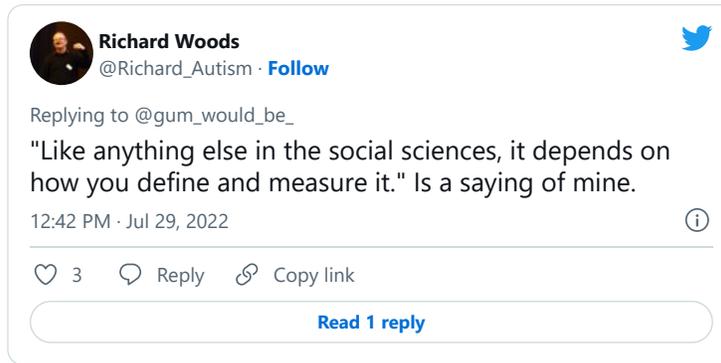
A few months ago the candidate items list was further refined with input from Nick Chown, [@MxOolong](#) & others.

Despite this, the list of candidate items is fundamentally derived from my understanding of monotropism theory & hence my model for monotropism https://www.researchgate.net/publication/332727790_An_Updated_Interest_Based_Account_Monotropism_theory_a_Demand_Avoidance_Phenomenon_discussion

My monotropism model was an attempt to explain PDA in autistic persons. Study's results suggest a number of subscales, some of which are linked to anxiety. I think is generic enough statement about the study's results.

Many autistic persons like Monotropism theory as it does not pathologise persons, it views us as being entirely human. Monotropism does not view autistic persons as a collection of deficits.

The theory's & thus the MQ's underlying assumptions are different to many autism, autistic traits tools underlying assumptions. Hence, it has been suggested that the MQ might not have associations with various autism tools.



I think the above quote is vital, how constructs in the social sciences are constructed & measures is often an important explanation for study results. An example, is how many studies showing differences between high functioning autism & Asperger's is due to circularity in study.

"more than 100 papers comparing those diagnosed with Asperger's Disorder versus 'high-functioning autism', the results were largely negative (no group differences) or circular (differences on variables included in the diagnostic process, such as clumsiness)."

Above quote is from p8 in the below paper by Happe & Frith.

<https://acamh.onlinelibrary.wiley.com/doi/abs/10.1111/jcpp.13176>

Another example on why how a concept is defined & measured matters. Is with PDA. Why are some studies suggesting PDA is a form of autism. Authors have defined PDA as a form of autism & conducted methodology which assumes PDA is a form of autism.

I will not go into specific study's on PDA, I want to stick to reflections on the Monotropism Questionnaire study reflections.

There are hopes that potentially a Monotropism Questionnaire could eventually lead to a paradigm shift in how autism is understood, conceptualised & identified away from a medical model concept based upon deficits.

Why am I sharing these reflections?

I am/ was scared that this Monotropism Questionnaire, that is based upon my own scholarship. Might generate results which undermine my argument PDA is not autism.

As someone who rigidly argues for scientific-method based research. I cannot hide, or escape from that possibility. I need to embrace that, & accept that my own scholarship & research activities might produce results I am potentially uncomfortable with.

It is entirely plausible due to underlying assumptions behind this Monotropism Questionnaire & the say instance the EDA-QA, latter tool views PDA as a form of autism. That a study investigating associations between the two tools might find such associations.

Which takes me back to the importance of how a concept in the social sciences is designed and measured.

There was something I missed which I wish to say.

I think it is possible, even probable that studies with the Monotropism Questionnaire & some autism tools, will find some associations, especially between some subscales on the relevant tools.

I know what subscales are on Monotropism Questionnaire, I have checked the subscales on the RAADS-14. The latter has 3 subscales. I predict that there should be associations between some of MQ subscales & RAADS-14 "Social anxiety" & "Sensory reactivity" subscales.

I am done with these reflections.

I will end by quoting Monique Botha:

"engage reflexively with how their values shape their understanding and construction of autistic people." Botha, 2021, p1.

It is equally applicable to other concepts from the social sciences.

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

Thank you in advance.

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