Pathological Demand Avoidance and the criminal justice system

Introduction

This article will discuss Pathological Demand Avoidance (PDA) and the criminal justice system (CJS). It will attempt to explore the potential effects of having a diagnosis of PDA during interaction with the CJS.

Before proceeding further, it is important to state that I am writing this article from a position of interest with lots of questions, as opposed to being an “expert” and wanting to share the answers.

Definition

PDA is now considered by many professionals and The National Autistic Society (NAS) as being on the autism spectrum (Christie and Fidler, Daunt 2015). However although there are some similar characteristics to autism, the key factor of this diagnosis is a need to control the environment and to avoid everyday commands and requests. This need is driven by a huge level of anxiety which is exacerbated by demands (The PDA Resource downloaded 2016, Fidler 2016, O’Nions 2013).

“It’s not that she can`t or won`t, but she can`t help won`t” (Sherwin 2015)

PDA and the CJS

When I first heard of PDA it conjured up lots of sinister images and thoughts of unmanageable children and desperate parents: immediately I had preconceived ideas. Then after reading many articles regarding PDA including a mother`s perspective by Jane Sherwin (2015) and of an adult`s experiences (Julia Daunt 2016 [hyperlink to article]), it became very clear what huge anxiety and distress this condition must cause for all involved.
Many professionals working in the field of autism will be aware that a major goal for autism charities, health/social care professionals and individuals, is to educate the public and various institutions such as the police constabulary and the CJS as a whole, about autism and the specific needs of autistic people. After 60 plus years this does appear to be having some impact with the Autism Act 2009 and other landmark progressions.

Perhaps the difficulty with PDA is that it has not been acknowledged as being part of the autistic spectrum for very long (Fidler 2016, PDA Society 2014). The manifestations of PDA are also different from autism, as are the suggested strategies for coping with it (PDA Society 2014). There is also a need for much greater research into this area (Gillberg 2014).

In fact, using standard autism strategies on a child with PDA are often not effective and can, in some cases, lead to an escalation in unwanted behaviours (Sherwin 2015, Davis 2016 and Onions et al 2014). The PDA Society (2014) explain that simple, concise language recommended for autistic children can be seen as confrontational to a child with PDA, whilst humour and more complex language may be helpful. It is also important to be adaptable and show flexibility more often than with an autistic child (PDA Society 2014). Children with PDA may take advantage of predictability and routine, so variety and novelty is very positive (PDA Society 2014).

There is very little research or literature on PDA, particularly for adults. The great majority of the specialists that I contacted for information kindly and generously responded with personal experiences and observations:

Anecdotal observations:

1. “When men lose control, meltdown or demonstrate aggressive behaviour it is perceived as being a criminal justice issue with all that that entails. However when similar behaviour is displayed by women it is often interpreted as a mental health issue”. (Dr J Eaton 2016)

2. “In my professional experience it seems probable that women who present with a PDA profile are more likely to be diagnosed with a personality disorder. It appears to be essential that more research needs to be carried out in this area” (Dr J. Gould 2016)

3. Based upon a yet unpublished study a sizeable number of people on the spectrum who have found themselves in the justice system would be found to have PDA if assessed. (Dr V. Egan 2016a)

4. Understanding of autism is still very new in the CJS. Understanding of PDA is even less. (Dr V. Egan 2016b)

From the anecdotal contributions above the strong suggestion is that the number of people with PDA in the prison population is far higher than is currently being reported. Either they are being mis-labelled with antisocial personality disorder or conduct disorder, or alternatively there are
just not enough clinicians experienced or confident enough to recognise this condition in individuals, especially if it means overturning another doctor’s diagnosis.

**PDA characteristics and the CJS**

Due to the lack of published information in this area, this section examines the characteristics of PDA that could create difficulties for those with the condition who find themselves in the CJS. The most common features of PDA are summarised below and taken from the PDA Resource Information Leaflet and PDA Society 2014.

**Resists all ordinary demands obsessively**

This may mean that the person is labelled as difficult and challenging of authority from a very early age. It may mean that they are attracted to friends who are also seen in the same way so that behaviour escalates. A chance behaviour with the police may escalate as the person is not able to follow instructions. The tone and manner of the police officer’s approach may also result in the situation deteriorating. If the person with PDA finds themselves in a prison or young offenders institution, then having trouble following demands will almost certainly cause conflict with prison staff and other inmates.

**Sudden mood swings which can be excessive**

This may see the person with PDA labelled as being volatile and unpredictable, or maybe even seen as violent or with the potential of being so. This may get the person into legal problems or make their time doing a custodial sentence even more unpleasant that it would otherwise be.

**Obsessive behaviour often directed at people not objects**

Being obsessive to people who do not understand PDA or who find the obsessive behaviour frightening, even if it is understood, may lead to legal action. Obsessive behaviours in a residential criminal setting may also lead to conflict with other inmates or may just mark this person out as being “different” and therefore a possible target.

**Finds role play/pretending comforting**

This can be excessive at times. Again it may mark the person with PDA out as being different or strange and may prevent them from dealing with the reality of a situation which then deteriorates as a result. Some individuals with PDA also appear to have difficulty distinguishing fact from fantasy, and can tell lies. (Dr J Eaton 2016)

**There may be some milestone delay and physical awkwardness**

Being physically awkward may result in conflict through knocking into people by accident which then could lead to an incident. The clumsiness of movement may also lead to difficulties.
because it marks them out as different. This could result in conflict and possible police involvement which might escalate due to other issues.

**Time and space**

Christie and Fidler (2015) recommend giving people with PDA time and space, as well as handling any meltdowns safely in a calm manner. It is unlikely that people who work in the CJS such as police and prison staff are going to have this knowledge or the luxury to take what they would understandably see as a potentially dangerous situation from worsening.

**Conclusion**

This article has attempted to highlight some of the areas of difficulty that people with PDA may experience, specifically when coming into contact with the CJS. It has also highlighted the dearth of information and research in this area. Fortunately, during writing this article I discovered Dr Vincent Egan, Associate Professor and Director of Forensic Psychology Programmes the University of Nottingham who has carried out two recent studies in this general area that will be submitted to academic journals later this year. Hopefully these will not only offer vital observations but will pave the way for further research.

As per my comments earlier, without knowledge of the condition and those with it, Pathological Demand Avoidance may sound rather sinister. Something that potentially conjures up images of people with challenging behaviours frequenting courtrooms and prisons. With this in mind it is difficult to disagree with Gilberg 2014 who calls for a name change and suggests EDA (Extreme Demand Avoidance). Although it will take a lot more than that to enable people with PDA to be understood better by our society as a whole but particularly by CJS professionals.

**Acknowledgments**

When commencing this article my aim was to follow my standard procedures of article writing i.e. find research and literature on PDA and the CJS and write the article from there. However after a while it became clear that there was virtually nothing available that combined the two topics.

I was very fortunate in that I managed, through recommendations, to get responses and support from a number of experts/specialists in PDA and some from the CJS, who were willing to offer support, advice and some anecdotal observations. My thanks goes to Dr Philip Christie, Dr Judy Eaton, Dr Vincent Egan and Dr Judith Gould.

**Reference List**
