

What Looks Like Autism But Isn't: 10 Conditions Similar To Autism



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Obsessive-Compulsive Disorder (OCD)

OCD thrives on intrusive thoughts and repetitive actions. Picture this: an individual washes their hands repeatedly, besieged by the thought that they're contaminated.

How It Differs From Autism

- **Focused Anxiety:** OCD centers on specific anxieties such as cleanliness or symmetry. Autism, however, encompasses a more extensive range of social and behavioral complexities.
- **Awareness Level:** Children with OCD often grasp that their thoughts are unfounded and their actions irrational. In autism, this level of self-awareness may fluctuate.
- **Compulsion vs. Pleasure:** In OCD, compulsive behaviors are actions individuals feel they must perform to alleviate anxiety. Contrastingly, repetitive behaviors in autism often bring comfort or even pleasure, lacking the anxious undertone seen in OCD.

Diagnosis of OCD

Diagnosis usually involves psychiatrists or psychologists and employs a blend of clinical interviews, specialized questionnaires, and possibly brain scans.

Common Misconceptions

- **A Cleanliness Fixation:** Not every obsession or compulsion revolves around sanitation.
- **Just a Personality Quirk:** This notion minimizes the life-altering anxiety and distress constituting OCD.

Sensory Processing Disorder (SPD)

Sensory Processing Disorder (SPD) is the brain's inability to sort, interpret, and respond to sensory input. In everyday language, it means struggling to make sense of the world through the five senses: sight, smell, touch, taste, and hearing. Picture this—you walk into a room, and suddenly, the texture of the carpet feels like needles against your skin. Sounds chaotic, right?

How It Differs From Autism

- **Social Interaction:** SPD primarily revolves around

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- **Social Interaction:** SPD primarily revolves around sensory challenges, unlike autism, which involves significant social interaction and communication impairments.
- **Interest in Social Reciprocity:** Children with SPD usually seek out social interactions but may find them draining due to sensory overload. Conversely, those with autism often lack the intuitive ability to engage in social reciprocity.

Diagnosis of SPD

Diagnosing SPD usually involves occupational therapists conducting an evaluation. Parents often notice the symptoms early on, though sometimes they may mistakenly assume their child is merely 'fussy' or 'difficult.'

Common Misconceptions

- **It's Just Bad Behavior:** Some might think that the child is acting out when, in reality, they're struggling with sensory overload.
 - **It's Not Real:** SPD often lacks visible symptoms, so some question its legitimacy.
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Antisocial Personality Disorder (ASPD)

Antisocial Personality Disorder isn't about shunning social activities; instead, it's a psychological condition characterized by a consistent disregard for societal norms and the feelings of others.

How It Differs From Autism

- **Empathy Levels:** While autistic individuals often find it challenging to understand social cues, they usually possess empathy. ASPD individuals often lack empathy and may manipulate or harm others without remorse.
- **Intentions:** Children with ASPD frequently have ulterior motives, unlike autistic individuals who generally act without a hidden agenda.

Diagnosis of ASPD

The diagnosis of ASPD generally requires psychiatric evaluation, often initiated due to legal issues. It's usually diagnosed in adulthood.

Common Misconceptions

- **All ASPD Individuals Are Criminals:** While some may violate laws, not everyone with ASPD is a criminal.
 - **It's a Choice:** ASPD isn't something one chooses. It's a complex psychological condition.
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Attention Deficit Hyperactivity Disorder (ADHD)

ADHD is a neurodevelopmental disorder affecting both adults and children. Symptoms include difficulty maintaining focus, hyperactivity, and impulsive behavior. Imagine feeling like you have eight TV channels playing in your head, all at the same time. Overwhelming, isn't it?

Also Read: [ADHD in Children: Symptoms, Diagnosis, and Treatment](https://wohum.org/attention-deficit-and-hyperactivity-disorder-adhd-in-children-symptoms-diagnosis-and-treatment/) <<https://wohum.org/attention-deficit-and-hyperactivity-disorder-adhd-in-children-symptoms-diagnosis-and-treatment/>>

How It Differs From Autism

- **Social Interactions:** Children with ADHD may disrupt social norms due to impulsivity, not a lack of understanding or interest in social interaction.
- **Focus Levels:** While autistic individuals might fixate on specific subjects, Children with ADHD generally struggle to focus on anything for prolonged periods.

Diagnosis ADHD

Diagnosis usually involves behavioral assessments and may start with a teacher or parent noticing attention issues in a young child.

Common Misconceptions

- **ADHD Is Just Laziness:** Many believe ADHD symptoms boil down to laziness or lack of discipline, which isn't the case.
- **It Only Affects Children:** ADHD can and does affect adults as well.

Intellectual Disability (ID)

Intellectual Disability, formerly known as mental retardation, encompasses limitations in intellectual functioning and adaptive behaviors. Simply, grasping new skills or concepts is an uphill task. Imagine being stuck in a dense fog while

navigating daily life activities.

How It Differs From Autism

- **Cognitive vs. Social Impairments:** ID primarily affects cognitive abilities and everyday social and practical skills. Autism often has a broader range of symptoms, including significant social interaction and communication difficulties.
- **Adaptive Behaviors:** Children with ID struggle with adaptive behaviors, like social skills and taking care of themselves, while this isn't always the case for those with autism.

Diagnosis of ID

A psychological assessment is critical for diagnosis, usually involving IQ testing and evaluating adaptive behaviors.

Common Misconceptions

- **Uneducable:** Many think individuals with ID can't learn, which is false. The learning pace is slower but has yet to grow.
 - **ID Equals Illiteracy:** Being intellectually disabled doesn't automatically mean one can't read or write.
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Speech Delay

Speech delay is a condition where a child develops verbal abilities slower than typical for their age group. This may involve delays in using words, forming sentences, or understanding spoken language.

Explore related article: [Language Skills for 3-Year-Olds: Speech Milestones & Checklists](https://wohum.org/language-skills-for-3-year-olds/) <<https://wohum.org/language-skills-for-3-year-olds/>>

How It Differs From Autism

- **Communication Focus:** Autism involves a broader spectrum of communication challenges, from nonverbal cues to complex dialogues. Speech delay is more localized, affecting mainly verbal expression.
- **Reciprocal Interaction:** While kids with speech delay may struggle with articulation, they usually don't have issues with the back-and-forth nature of conversation

as many kids with autism do.

Diagnosis of Speech Delay

Speech pathologists generally handle the diagnosis, often using a variety of speech and language tests. Parents should also note that excessive screen time can lead to speech delay—a sign often associated with Autism.

Common Misconceptions

- **Will Just “Grow Out Of It”:** While some kids might catch up, others require professional intervention.
 - **Speech Delay Is Laziness:** It’s not a lack of effort but a developmental issue requiring intervention.
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Selective Mutism

Selective Mutism is an anxiety disorder characterized by an inability to speak in specific settings. Picture feeling a wall go up between you and the ability to articulate, but only in particular situations.

How It Differs From Autism

- **Anxiety-Based:** The core issue is anxiety, not a lack of understanding of social interaction or communication.
- **Situational:** Unlike autism, where communication struggles are generally consistent across settings, selective mutism occurs only in specific environments.

Diagnosis of Selective Mutism

A mental health professional often diagnoses selective mutism, usually initiated by a parent or teacher who notices the child’s inability to speak in specific settings.

Common Misconceptions

- **Stubbornness:** Some think the child is merely defiant, which is false.
 - **Rare and Untreatable:** While less common, treatments like cognitive behavioral therapy can be effective.
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Cognitive Developmental Delay

Cognitive Developmental Delay implies slower than typical development in intellectual and adaptive abilities. Think of a child who struggles to keep up in class or takes longer to grasp new skills.

Also Read: [Recognizing Developmental Delays in Children](https://wohum.org/recognizing-developmental-delays-in-children-key-signs-to-watch-for/)
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How It Differs From Autism

- **Limited Scope:** Unlike autism, the delay affects explicitly intellectual skills and perhaps socialization, but not necessarily communication skills.
- **Temporary vs. Permanent:** Children with cognitive delays often catch up to their peers, whereas autism is a lifelong condition.

Diagnosis of Cognitive Developmental Delay

Early intervention specialists and developmental pediatricians usually lead the diagnosis, involving screenings and developmental evaluations.

Common Misconceptions

- **Incurable:** Many believe it's a lifelong problem. However, early intervention often allows children to catch up.
 - **Due to Bad Parenting:** This is a biological issue, not caused by parenting styles.
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Anxiety Disorders – Social Anxiety

Social Anxiety Disorder (SAD) manifests as excessive anxiety in social situations. Imagine an internal alarm that incessantly

social situations. Imagine an internal alarm that incessantly rings when faced with social interactions, even simple ones like ordering a cup of coffee.

Explore: [Understanding Anxiety in Children: Signs and Symptoms](https://wohum.org/understanding-anxiety-in-children-signs-and-symptoms/) <<https://wohum.org/understanding-anxiety-in-children-signs-and-symptoms/>>

How It Differs From Autism

- **Anxiety-Centric:** While both disorders can result in social isolation, the root cause for SAD is anxiety, not difficulties with social skills or communication.
- **Absence of Repetitive Behaviors:** Autism frequently includes repetitive behaviors or interests, rarely seen in SAD.

Diagnosis of Anxiety

Mental health professionals usually diagnose it through interviews and questionnaires.

Common Misconceptions

- **Simply Shy:** It's not mere shyness; SAD severely impairs normal functioning.
 - **Selective Socializing:** People think it only applies to specific people or settings but is usually broader.
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Reactive Attachment Disorder

Reactive Attachment Disorder (RAD) is a rare but severe condition arising from unmet basic needs for comfort, affection, and nurturing from caregivers. It's as if the safety net caregivers should provide has gaping holes.

How It Differs From Autism

- **Caused by Neglect:** RAD typically occurs in children who've suffered severe neglect or abuse, which is not the case with autism.
- **Attachment Issues:** While kids with autism may show indifference, those with RAD actively resist comfort and support.

Diagnosis of Reactive Attachment Disorder

A comprehensive evaluation by child psychologists or psychiatrists, often involving interviews with caregivers, is necessary for diagnosis.

Common Misconceptions

- **Just Needs Love:** Love alone won't cure RAD; specialized treatment is often needed.
 - **Permanent:** Some believe RAD is lifelong. However, with early intervention, children can develop more secure attachment styles.
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Conclusion: Dissecting Autism-Like Symptoms and Their Underlying Conditions

Understanding the nuances of conditions like Sensory Processing Disorder, Antisocial Personality Disorder, ADHD, and others helps avoid mistaken diagnoses and sets the stage for effective treatments. Awareness and education remain the building blocks for dispelling myths and fostering empathy. It's not just about labels; it's about lives. From tailored therapies for ADHD to specialized care for Reactive Attachment Disorder, identifying the actual issue is the first step toward meaningful progress.

With this comprehensive guide, you can discern the subtle differences that distinguish autism from other conditions that may seem similar on the surface but are **fundamentally different**.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6037572/>

Knowledge is power, and in the realm of mental health, it can be transformative.

Explore related resources:

- **Early Signs of Autism** <https://wohum.org/what-are-the-early-signs-of-autism-recognizing-symptoms-and-getting-help/>
 - **Understanding Stimming in Autistic Children** <https://wohum.org/understanding-stimming-in-autistic-children-and-teenagers-what-it-is-and-how-to-support-them/>
 - **Hitting and Laughing Behaviors in Autistic Children** <https://wohum.org/hitting-and-laughing-in-autistic-children/>
 - **Autism & Sleep** <https://wohum.org/autism-sleep-tips-for-improving-sleep-patterns-in-children-with-asd/>
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FAQs: Simplifying Autism Lookalike Conditions

Can trauma (PTSD) look like autism?

PTSD symptoms like social withdrawal and repetitive behaviors can mimic autism. However, PTSD usually stems from a traumatic event, unlike autism, which is a developmental

disorder.

Can trauma look like autism?

Indeed, traumatic experiences can lead to behaviors like social isolation or communication difficulties, resembling autism. Nonetheless, the root causes differ substantially.

Can OCD look like autism?

Yes, the repetitive behaviors in OCD can resemble the repetitive or restricted behaviors in autism. But in OCD, these behaviors are anxiety-driven, whereas in autism, they might offer comfort.

Can bipolar look like autism?

While both can involve mood swings and social difficulties, they are fundamentally different. Bipolar disorder revolves around extreme mood shifts, which isn't a core characteristic of autism.

Autism typically manifests in early childhood, often around the age of 2, whereas bipolar disorder is usually diagnosed around the ages of 20 to 30.

Does ADHD look like autism?

There's overlap, particularly in social awkwardness and attention issues. Yet ADHD lacks the restricted, repetitive behaviors that are hallmark traits in autism.

Can borderline personality disorder (BPD) look like autism?

Both can involve emotional instability and issues with interpersonal relationships. However, BPD frequently manifests as intense mood swings and fears of abandonment, which aren't typical autism traits.

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