

**ДИСКУССИИ И ДИСКУРСЫ**  
*DISCUSSIONS AND DISCOURSES*

Научная статья | Original paper

**Response to Commentary**  
**“Cultural-Historical Neuropsychology and ADHD”**  
**by Prof. Tatiana V. Akhutina**

**Athanasios Koutsoklenis<sup>1</sup>, Yulia Solovieva<sup>2, 4</sup> ✉, Luis Quintanar Rojas<sup>3</sup>**

<sup>1</sup> Democritus University of Thrace, Alexandroupolis, Greece

<sup>2</sup> Autonomous University of Puebla, Mexico;

<sup>3</sup> Autonomous University of Tlaxcala, Mexico;

<sup>4</sup> Federal Scientific Center of Psychological and Multidisciplinary Research, Moscow, Russian Federation

✉ [aveivolosailuy@gmail.com](mailto:aveivolosailuy@gmail.com)

**Abstract**

The present short review contains the authors response to Commentary “Cultural-Historical Neuropsychology and ADHD” by Prof. Tatiana V. Akhutina (Akhutina, 2025) for the article “Diagnosis from the Perspective of Cultural-Historical Neuropsychology” (Koutsoklenis, Solovieva, Quintanar, 2025). The Commentary by Prof. Tatiana V. Akhutina was published in the same issue of the Journal. The present response is relevant for understanding of the authors’ theoretical position on the topic of ADHD and cultural historical approach.

**Keywords:** Attention-Deficit/Hyperactivity Disorder, ADHD, diagnosis, cultural-historical theory, cultural-historical neuropsychology

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**Ответ на комментарий**  
**«Культурно-историческая нейропсихология и СДВГ»**  
**профессора Т.В. Ахутиной**

**Афанасиос Куцокленис<sup>1</sup>, Юлия Соловьева<sup>2, 4</sup> ✉, Луис Кинтанар Рохас<sup>3</sup>**

<sup>1</sup> Фракийский университет имени Демокрита, Александруполис, Греция

<sup>2</sup> Автономный университет Пуэбла, Пуэбла, Мексика;

<sup>3</sup> Автономный университет Тласкала, штат Тласкала, Мексика;

<sup>4</sup> Федеральный научный центр психологических и многопрофильных исследований,  
Москва, Российская федерация

✉ [aveivolosailuy@gmail.com](mailto:aveivolosailuy@gmail.com)

**Резюме**

Данный краткий обзор содержит ответ авторов на комментарий “О культурно-исторической нейропсихологии и диагнозе СДВГ” профессора Т. В. Ахутиной (Ахутина, 2025) к статье “Диагностика СДВГ с позиций культурно-исторической нейропсихологии” (Куцокленис, Соловьева, Кинтнар, 2025). Ком-

ментарий профессора Т. В. Ахутиной был опубликован в том же номере журнала. Настоящий ответ важен для понимания теоретической позиции авторов по теме СДВГ и культурно-исторического подхода.

**Ключевые слова:** синдром дефицита внимания и гиперактивности, СДВГ, теория культурно-исторической психологии, культурно-историческая нейропсихология

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We would like to begin by expressing our sincere gratitude to the *Journal of Cultural-Historical Psychology* for the opportunity to publish our article, “*ADHD Diagnosis from the Perspective of Cultural-Historical Neuropsychology*” (Koutsoklenis, Solovieva, Quintanar, 2025). We are particularly appreciative of the journal’s openness to addressing Attention Deficit Hyperactivity Disorder (ADHD), a topic not commonly featured within its pages. We view this inclusion as an important step toward integrating clinical neuropsychology into the broader framework of cultural-historical psychology, as originally envisioned by Luria and his followers.

We are equally pleased to note the publication, in the same issue, of a commentary by our esteemed colleague and friend, Professor Tatiana V. Akhutina, titled “*Cultural-Historical Neuropsychology and ADHD: Commentary on the Article ‘ADHD Diagnosis from the Perspective of Cultural-Historical Neuropsychology’*” (Akhutina, 2025). It is likely that Prof. Akhutina was among the reviewers of our article — a possibility we regard as both an honor and a valuable opportunity for academic dialogue.

In this response, we would like to address several important points raised in her commentary. We are encouraged by Prof. Akhutina’s affirmation of our shared theoretical and methodological foundations, grounded in the work of Vygotsky and Luria. We believe it is essential for scholars from diverse national and academic contexts to engage in meaningful cross-cultural dialogue regarding the clinical application of these theories — particularly in complex areas such as the diagnosis of attentional difficulties. At the same time, we recognize that theoretical principles may be interpreted and applied differently in academic, clinical, and research settings, as evidenced by practices in our respective countries of Greece and Mexico.

In our article, we argued that the concept of Attention Deficit Hyperactivity Disorder (ADHD) does not constitute a valid or useful diagnostic category within the framework of cultural-historical neuropsychology. Rather than identifying a coherent syndrome, the term functions as an umbrella label that aggregates heterogeneous symptoms and diverse neuropsychological syndromes into a single, overly generalized classification. In light of this, we were somewhat surprised to see that Prof. Akhutina appears to support this categorization.

Empirical research (Solovieva et al., 2016a; Solovieva et al., 2016b) demonstrates that children diagnosed with ADHD frequently present with varied neuropsychological profiles, each grounded in distinct functional mecha-

nisms — or what Luria (Luria 1973; Luria 2002) referred to as neuropsychological factors. These mechanisms involve specific deficits in cortical and subcortical regulation and are substantiated by both neuropsychological assessments and neurophysiological findings. From this standpoint, a singular diagnostic category such as ADHD conceals the functional diversity of these cases rather than clarifying it.

We are particularly concerned that psychiatric classifications endorsed by institutional authorities — such as the American Psychiatric Association — and reinforced by the pharmaceutical industry may undermine the specificity and explanatory power of diagnoses rooted in cultural-historical neuropsychology. The consolidation of multiple, distinct functional syndromes under a single diagnostic term fails to reflect the complexity of neuropsychological dysfunctions, ultimately weakening the diagnostic and therapeutic processes central to cultural-historical methodology.

Prof. Akhutina suggests that rejecting the concept of ADHD might hinder future research. On the contrary, we argue that moving beyond this generalized category opens the door to more productive inquiries into the biological and social origins of attentional difficulties. A proper clinical investigation must encompass multiple levels of analysis — including psychological, neuropsychological, neurophysiological, and social dimensions. While we do not propose that every child be subjected to neurophysiological or electrophysiological testing, such procedures can enhance the precision of neuropsychological assessments. Collaboration between neuropsychologists and electrophysiologists is a promising avenue for more effective, multidisciplinary evaluation of developmental disorders.

We are in full agreement with Prof. Akhutina’s assertion that neuropsychologists must be highly qualified. However, we do not consider this a weakness of our critique. Neuropsychology, as a rigorous scientific discipline, requires training that goes beyond symptom identification based on behavioral checklists that are ambiguous, redundant, and arbitrary, such as those found in DSM (Honkasilta, Koutsoklenis, 2022). A truly diagnostic approach must move beyond surface-level descriptions to uncover the functional syndromes responsible for a child’s difficulties. In this regard, our critique aligns with Luria’s warning (Luria, 1973) that clinical assessment should not be limited to listing observable symptoms of isolated ‘functions’ (e.g., attention, memory, language).

Another point of disagreement concerns the role of the ‘social situation of development’ in diagnostic practice.

Prof. Akhutina claims that this concept is unrelated to ADHD diagnosis. We firmly disagree. As we argued in our article, a child's social situation of development — structured by the attitudes and expectations of adults — has a profound effect on their psychological growth. While we acknowledge that diagnostic labels such as ADHD may, in some cases, offer individuals a framework for understanding their experiences and accessing resources (thus serving an empowering or humanizing function), such labels also carry the risk of distancing individuals from perceived 'normalcy' and imposing lasting stigma (Honkasilta, Koutsoklenis, 2022). We reiterate that our rejection of the ADHD concept does not imply a rejection of neuropsychological diagnosis or research. On the contrary, we advocate for diagnoses grounded in functional neuropsychological syndromes, as outlined by Luria (Luria, 1973). External symptoms — such as inattention — may result from different functional deficits (e.g., of general brain activation or of programming and regulation), which must be distinguished through detailed analysis. We argue that the purpose of diagnosis is to reveal the

core neuropsychological factor responsible for a pattern of symptoms, rather than to merely catalog those symptoms. From this standpoint, the ADHD concept lacks internal consistency and neuropsychological validity. It is disconnected from materialist-dialectical thinking, which underpins cultural-historical psychology. Luria (Luria, 2003) described voluntary actions as the product of coordinated activity across cortical and subcortical brain zones. This principle underlies our diagnostic methodology, which emphasizes functional complexes over static identification of so-called 'attention functions'.

In our view, the diagnostic entity of ADHD, represents a theoretical stagnation within contemporary neuropsychology and a significant departure from the foundational principles of cultural-historical psychology. Despite this, we sincerely appreciate Prof. Akhutina's thoughtful engagement with our article and fully agree that attention-related difficulties remain a vital area of inquiry within the cultural-historical framework. Continued dialogue and critical examination are essential for advancing both theory and practice in this domain.

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### Information about the authors

Athanasios Koutsoklenis, PhD in Special Education, Assistant Professor, School of Education, Democritus University of Thrace, Alexandroupolis, Greece, ORCID: <https://orcid.org/0000-0001-9741-3941>, e-mail: akoutsok@eled.duth.gr

Yulia Solovieva, PhD in Psychology, Professor and Researcher, Autonomous University of Puebla, Mexico; Autonomous University of Tlaxcala, Mexico; Federal Scientific Center of Psychological and Multidisciplinary Research, Moscow, Russian Federation, ORCID: 0000-0001-5610-1474, e-mail: aveivolosailuy@gmail.com

Luis Quintanar Rojas, PhD in Neuropsychology, Professor, Autonomous University of Tlaxcala, Mexico, ORCID: 0000-0002-9758-1467, e-mail: ranatniyu@icloud.com

### Информация об авторах

Афанасиос Куцокленис, Фракийский университет имени Демокрита, Александруполис, Греция, ORCID: <https://orcid.org/0000-0001-9741-3941>, e-mail: akoutsok@eled.duth.gr

Юлия Соловьева, Автономный университет Пуэблы, Пуэбла Мексика; Автономный университет Тласкала, штат Тласкала, Мексика; Федеральный научный центр психологических и мультидисциплинарных исследований, Москва, Российская Федерация, ORCID: <https://orcid.org/0000-0001-5610-1474>, e-mail: aveivolosailuy@gmail.com

Луис Кинтанар Рохас, Автономный университет Тласкала, штат Тласкала, Мексика, ORCID: <https://orcid.org/0000-0002-9758-1467>, e-mail: ranatniyu@icloud.com

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