

Strategies

Strategies that support children with a 'typical' autistic profile are often not effective.

Choose Priorities: be realistic, highlight a few key areas e.g. positively entering the school.

Invitational Approaches: is a key strategy. Encourage participation rather than direct or request. Appeal to interests, and give children a sense of control in the negotiation.

- 'when you have a minute I wonder if....'
- 'If only someone could help me with...'
- 'I just can't do...on my own, I am really struggling....'
- 'Let's talk about.....whilst we look at this sheet?'

Think out loud: posing yourself rhetorical questions, 'I wonder if there are any volcanoes in England, how can I find out?'. Useful for modelling problem solving skills.

Make Deliberate Mistakes: very effective for younger children.

Be Indirect: with a balance of **flexible** structure to reassure and reduce anxiety.

Personalised Space: sitting next to or slightly behind will appear less demanding.

Use Socially Complex Language: Hide the demand within conversational language.

Routines: Use predictability rather than a demanding routine, allow them some degree of control over this.

Adapt Visual Strategies & Role Play: Useful if presented in a flexible and indirect way. Role play creates a distance from reality and reduces the demands associated with social engagement.

Extra Processing Time: will be needed for social, emotional, sensory and curriculum areas. Behavioural responses will also require processing time, can they cope with the request?

Manage Meltdowns: a response to being overwhelmed. Allow for recovery time, and reflect—'why?'.

Avoid Unnecessary Confrontation: focus on priority behaviours only. Recognise that any negative interaction will be mirrored.

- Adjust expectations
- Distraction
- Planned Ignorance
- Legitimising the behaviour
- Choice and alternatives.

Promote Self-Awareness and Emotional Well-being: Ensure this is an outcome in a Personalised Plan

Adjust Rewards and Sanctions: Be aware that praise can be an uncomfortable experience. Indirect praise e.g. commenting to another adult about the good work, or coded meanings. Children won't always make the link between their own actions and consequences. Talking through with visuals e.g. flow charts might support this.

Other:

Stay Calm: think of a melt down as a 'Panic Attack' and try to come across as calm—even if you don't feel it.

Assess the Risk: environment and situation. What are the likely outcomes of what you are, or are not doing?

Communicate: with other adults to ensure that you co-ordinate agreed strategies. Who is best to be involved, when should another adult intervene?

Is Safety Challenged?: follow the school's policy for physical interventions with parental consultation, and safeguarding. Ensure debriefing opportunities.

References

Christie, P & Fidler R. (2019) *Collaborative Approaches to Learning for Pupils with PDA*. London: Jessica Kingsley Publishers.

Christie, P, Duncan M, Fidler M, & Healy Z, (2012) *Understanding Pathological Demand Avoidance Syndrome in Children* London: Jessica Kingsley Publishers.

Scott, L & Westscott R. (2019) *Can You See Me?* London: Scholastic



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PDA

Pathological Demand ~~Avoidance~~

Anxiety



'She can't help won't' *

Specialist Teaching
and Learning Service
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* 'she *couldn't* help the fact that she *wouldn't* do something at that particular moment' - parent quote taken from 'Collaborative Approaches to Learning for Pupils with PDA'

What is PDA?

“anxiety-driven need to be in control and avoid other people’s demands and expectations.” Understanding PDA in Children.

Christie, Duncan, Fidler & Healy (2011)

- ◇ A neurodevelopmental disorder widely considered as a distinct profile of the Autistic Spectrum.
- ◇ An **anxiety-driven** need to be in control and avoid other people’s demands and expectations. This behavior is extreme and consistent.
- ◇ Shared patterns of behaviour with other people on the Autistic Spectrum, however there are key identifiable differences.
- ◇ A child will be diagnosed with ASD but this does not quite fit their presentation.
- ◇ Sociable on the surface but lack of social identity, pride or shame.
- ◇ Requires more flexibility, negotiation and a less direct style of support.
- ◇ Children will often spend longer on working out how to avoid the demand they would have done completing the request.

‘There hasn’t been enough research for PDA to be used as a diagnostic term, but some clinical diagnostic teams do describe it as a profile that they recognise within the Autism Spectrum’,

*National Autistic Society
www.autism.org.uk*

Main Features

- * Avoiding and resisting the everyday demands of life: any suggestion can be seen as a demand, resulting in extreme anxiety, even when a child is keen to participate.
- * Able to use social manipulation in attempts to avoid perceived demands: distracting, negotiation, refusal to move, withdrawing into a fantasy world.
- * Outburst and aggressive behaviours are a panic response to the demand and anxiety.
- * Behaviour can be seen sudden and dramatic and without the cause being apparent to the observer.
- * Appear ‘people orientated’: polite, good social skills, but can be over confident and misjudges socially appropriate behaviour. Difficulty with taking responsibility for actions.
- * Excessive mood swings and impulsivity: switching of moods described as quick as a light bulb and often driven by the need to be in control. Very unpredictable.
- * Enjoys role play which can become obsessional and a way of opting out: copies the roles of those around them, dominant in play situation, blurred boundaries between fantasy and reality.
- * Obsessive behaviours: fixation on characters, or people they are around. Peer relationship difficulties.

Remember: The avoidance is not being ‘naughty’. Look past the behaviour to see that underneath is a vulnerable & anxious child.

Implications for Teaching and Learning

- * The need to be in control of activities.
- * Unable to accept direction and instruction, and find it hard to compromise or accommodate other peoples wishes.
- * Explosive behaviour / meltdowns when anxiety is too high and unable to adapt this response.
- * Some might be ‘Missed children’ due to their ability to role play at being the ‘compliant child’ - anxiety might be hidden by making themselves busy.
- * Threatening violence, use of obscene, shocking language, which is hard for adults to ignore.
- * Lack of permanence in their learning.
- * Wants to be social but tries to take charge with an ‘obsessional’ feel to the relationship.
- * We need to help them become less anxious and more tolerant of accepting requests from others.
- * Difficulty for those around them to understand that pupil avoidance is not willful or deliberate, and imposing their choice and belief on a pupil will not work.

Secure and trusting relationships with adults are key to ensuring progress in all areas.