

Support Strategies at School

for autistic students with a
Pathological Demand Avoidance (PDA) profile



KEY FEATURES OF PDA

- Pathological Demand Avoidance (PDA) is described as an 'atypical' presentation or profile of autism
- Students with a PDA profile show extreme resistance to, and avoidance of, the everyday demands of life, caused by a substantial, anxiety-driven need for autonomy, or self-governance (*Christie et al, 2011*)
- Emotional regulation difficulties, with sudden or extreme mood swings, which can lead to meltdowns, shutdowns or seemingly "uncooperative" behaviour (or may manage tasks temporarily by "masking")
- **"Explosive" behaviour** best viewed as **panic attack** (anxiety ↑ = tolerance for demands/expectations ↓)
- Ambivalence towards success; rewards, praise, punishment, withdrawal of desired items are ineffective & substantially ↑ anxiety (therefore even less likely to attend, co-operate, participate, engage & learn)
- Perceive self as equal to all adults due to impact of PDA on understanding & acceptance of social hierarchy
- Low self-worth despite the appearance of confidence, bossiness or "playground policeman"

KEY POINTS FOR EDUCATORS

- 70% of students with PDA struggle to attend school or don't attend (*UK PDA Society*)
- **Quality of relationship between teacher and child absolutely fundamental** - take the time to build warmth, trust, respect and connection - it will make an enormous difference!
- The child or young person needs to **feel they have choice & control** as much as possible
- Issue is an **incapacity**, NOT wilful disobedience or naughtiness (it is NOT that they WON'T do the thing, it's that they **CAN'T at this time**)
- **Flexibility** by adults around them is critical (eg seating, tasks, subjects, expectations)
- Usually don't respond to conventional teaching approaches (schedules, timers, rewards)
These may **add to anxiety, agitation** and consequent **distressed behaviours**
- Believing, supporting and **working closely with families & therapists is key to success**

Thank you for
ALL you do to
support our
children...

They REALLY need it
& we REALLY
appreciate it!

WHAT WORKS - IDEAS TO TRY

- Critical to choose **priorities & reduce demands** wherever possible (let go of ALL the less important things)
- Constantly adjust demands to suit child's tolerance level - which changes often - think of two dials that need to be kept in parallel and ↑ or ↓ your 'demands', requests and expectations to suit child's fluctuating tolerance
- Use of **humour & distraction** can be helpful; as can **novelty** & variety
- **Depersonalize** & avoid directive language like "You need to go there now". Try **declarative** or indirect language (see Declarative Language Handbook, L.K. Murphy) instead of: "walk over there", try "there's some Lego there"; instead of "can you carry this?" try "gosh this is so heavy"; instead of "do it this way" try "I can't quite work this out"; "I wonder what they're doing over there?" or "that looks like fun". Comment on your observations without any expectation (like a sports commentator), not to manipulate child into action - then move away / **STOP** talking to allow more processing time!
- Regularly offer opportunity to **make own choices** - BUT NOT when child agitated / highly anxious / angry
- Best when **invited to participate**, but not pressured to participate (*this includes choice to participate or not*)
- **Extra time** and support for processing, and for transitions between lessons or classrooms
- **Heavy work** helpful for sensory and emotional regulation - push, pull, carry, dig, lift (ask OT for other ideas)
- Notify ahead of time of big changes to usual program, **plan ahead** - anticipate potential triggers
- **Reduced schedule** can be helpful (eg exemption from 2nd language / music / drama / activities which appear to exacerbate anxiety - should be done in conjunction with parents and treating health professionals)
- **Collaborate** with parents, regular communication makes huge difference - they may know helpful strategies
- Use of drama & **role play** (characters, animals) can be effective to involve child, especially if a special interest
- Without isolating, allow them to be on the fringes, gives opportunity to **learn by osmosis**

- Provide lots of opportunities for relaxation, physical exercise, fidget toys, soothing music, yoga, gym balls, **nature+**, meditation, rest, ask for ideas from OT/psych/parents. **Sensory breaks** and **movement breaks** are useful
- Your **expectations** of your other students can be very **different** from those with PDA – that's ok!
- Verbal/auditory **comprehension** can be noticeably less than verbal **expression**/ability (which is often very strong)
- Use **interest-driven** tasks best whenever possible
- Always **avoid power struggles**; use **neutral** posture, voice & facial expression (relaxed face/body language, monotone voice, consider your tone, pace, pitch & volume). Can tell if you say you're calm, but you're not!
- Safe, **calm space** (physical and psychological "refuge") & **safe, calm mentor** or time away as needed
- **Negotiating** amount and type of work with student – some days little or no work will get done – that's ok!
- Easier for parents than teachers, as parents have more opportunities to trial and see what works and what doesn't (this changes frequently!), however, remember parents deal with these issues 24/7/365, every year – **exhausting**
- When PDA kids are harder to like, that's when they need **your support** the most!
- Overriding feeling towards school for PDA child is **MASSIVE ANXIETY** – once the anxiety is reduced adequately, *then* you can increase their engagement & participation in learning – BUT NOT until then!
- Remember these ideas work some days and not others, so are worth **revisiting** and having a range on hand to trial

WHAT DOESN'T WORK

- **AVOID** using the words "No", "Can't" and "Don't"
- **Loud voice**, agitated or **angry tone**, dominating body language, physical **restraint**, attempts to be "in charge" of child or **exerting control** (generally do not confer automatic respect to "authority" figures, as see themselves **equal to adults**, due to impact of PDA on understanding of social hierarchy)
- Viewing or describing the child or young adult as **defiant**, manipulative or purposely **oppositional** is very **unhelpful** and likely to increase behaviours of distress



COPING STRATEGIES FOR ADULTS SUPPORTING PDA-ERS

- Parents of PDA-ers deal with daily challenges by getting educated on PDA (some great books above), exercising regularly, counselling, reading, Netflix, chocolate, music, journals, yoga, meditation, work or volunteer work, face-to-face and online Facebook support and interest groups, gratitude journal or 3GT, respite or breaks when possible
- Need to look after yourself well first, then you can support the child well
- Don't take things personally – especially anger or aggressive behaviour – your student is communicating to you that they aren't coping – it's not about you – may need to develop thick skin!
- All research points to an **early understanding of strengths & needs, together with provision of appropriate support**, being the key to **positive long term outcomes** (PDA Society UK 2023)

PROFESSIONAL RESOURCES, HELP & FURTHER INFO

- **PDA Society** (pdasociety.org.uk) for strategies & excellent resources for educators, health professionals & families
- Local Perth/WA support & info on Facebook **PDA Perth WA Interest Group for Educators & Health Professionals**
- Free, confidential counselling from **Employee Assistance Program** may be available via your employer for self & family
- In-person & online PDA support & resources – Amanda Diekman (online, USA) Amherst Psychology (telehealth & in-person, Perth, WA), At Peace Parents (online, USA), Kidd Clinic (telehealth & in-person, Perth, WA), Kristy Forbes (online, Vic), The PDA Space's PDA Summit (online) & PDA Training Australia (in-person workshops, Perth, WA and webinars in 2025)
- <https://www.teachwire.net/news/understanding-pda/>
- <https://www.pdasociety.org.uk/wp-content/uploads/2021/10/PDA-for-teaching-professionals.pdf>
- <https://www.pdasociety.org.uk/wp-content/uploads/2021/04/What-is-PDA-booklet-website-v2.1.pdf>
- <https://www.twinkl.com.au/resource/t-s-4063-managing-pathological-demand-avoidance-in-the-classroom-top-tips>

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Founder/Administrator, PDA Perth WA Parents Community and Support Group (2.3K+ members)
Founder/Administrator, PDA Perth WA Interest Group for Educators & Health Professionals (1K+)

