<u>Pathological Demand Avoidance (PDA) in the Classroom: Understanding and Teaching</u> <u>Strategies for Educators</u>

[00:00:00] Well, welcome, Laura. I'm so excited for you to share lots of tips and information to understand PDA. I'm going to hand over to you to share your wealth of knowledge. Thank you very much. Thank you for having me. Um, so PDA pathological demand avoidance, um, I think is a topic That is very sort of hot on everyone's minds at the moment, and lots of people, you know, are asking about PDA, you know, particularly teachers, um, and I think one of the most important things to understand about PDA is that, yes, it is, it is a type of autism, but it needs a very different approach to, uh, you know, the way that we would maybe work with somebody who has a more sort of typical autism profile.

[00:00:58] Um, I think one [00:01:00] of the other challenges about PDA is that it is not recognized as a standalone condition in our diagnostic manuals. So, um, I think there is a, a kind of myth that in the UK you can get a diagnosis of pathological demand avoidance, but actually you, you can't, you have to have a diagnosis of autism with a demand avoidant profile or autism with, um, PDA, a PDA profile.

[00:01:28] And I think that's really difficult for, for, um, parents sometimes, but I think it's also really difficult for educators. Because they're thinking, well, how do I support this condition that officially doesn't exist? Um, and I really hope that in the future we have a lot more kind of research about PDA so that people do feel more, um, confident about it because I know from my experience that when you get it right with these young people, it's, it's incredible.

[00:01:58] They're phenomenal. They're like [00:02:00] my favorite, uh, type of young person to, to work with. So, um, the other thing that I always stress when I work with any kind of school or, um, educational provision in, in, in the UK, I'm sure it's the same in Australia, Sue, I know it's the same in America, is that we should be focusing on the individual.

[00:02:23] child or young person's needs and not their diagnosis. Um, and actually some of the best schools that I've worked with, um, those schools have done incredible work with a young person, even though the child doesn't have a formal diagnosis of pathological demand avoidance. So, um, I have a slide that explains that behind the behavior is a child, you know, suffering from anxiety.

[00:02:52] You know, social isolation, you know, depression, et cetera. Now, it's very, very important to understand the [00:03:00] anxiety that is driving the PDA profile. However, in that statement that also explains that the child is, you know, isolated, et cetera, that's only if they're in the wrong environment. And when the child or young person is in the right environment, you know, we see them thriving and that is just, you know, incredible.

[00:03:23] What is PDA? You know, people, if you, if you've not heard of PDA and you, you Google PDA, you will probably see something that says it's a, a profile of autism that's characterized by high anxiety and a need to avoid demands and remain in control. There's so much more to PDA than that. Also, I think we have to understand that when any of us get anxious, we, we have this need to control, you know, when I ask people, what, what makes you anxious?

[00:03:57] It's usually situations where they do feel out of [00:04:00] control. So PDA is not just about, you know, you know, feeling anxious and needing control. And I'm going to talk a little bit about that a bit more later. The other thing, you know, to understand is that everybody who has PDA is completely unique and completely different.

[00:04:18] And okay, yes, they will share. Um, characteristics, they will share the same characteristics. This is stuff that we will look for when we're doing our assessments. And I do do PDA assessments, which is incredibly interesting work. Um, but again, this is why in any educational setting. We should be so focusing on the child's individual needs.

[00:04:44] You know, I work with two young people with a PDA profile, two boys, similar age. You read about them on paper, they look really, really similar. But when you actually start working with them, They're so different. They need such a different approach. [00:05:00] So the key characteristics of, uh, pathological demand avoidance, obviously the first one is avoiding everyday demands of life.

[00:05:09] And that is also, you know, that is a fundamental part of PDA. However, what separates pathological demand avoidance from other types of demand avoidance is that an individual with a PDA profile will avoid demands that they want to do, as well as demands that they don't want to do. And I think that's, you know, that's a very, very important point to understand about PDA.

[00:05:42] When we're looking at, uh, when we're doing our assessments as well, the other thing that we have to really look at and take into consideration is how the individual is avoiding the demands. Because it won't just be a simple, well, sometimes it's a simple no. I'm not doing it [00:06:00] or I can't do it. But PDA is a very, very good at using social strategies as well to avoid the demand.

[00:06:07] So lots of, um, distraction or flattery or procrastination. Um, and a good example here is a young person that I was doing an assessment with a little while ago. I put part of the assessment task out in front of them and explain what he needed to do. And he glanced out the window and he, the clinic where I work is next to a church, and he said, um, Laura, how old do you think that church is next door?

[00:06:40] And I said, oh, I don't know. It's pretty old, probably about five, six hundred years old. And he said, all right. He said, um, do you have many weddings there? And I said, well, I said, do you know what? I said, I've never seen a wedding. I said, but um, you know, we're usually here until like sort of one o'clock and then we go home.

[00:06:58] And I said, and most [00:07:00] weddings take place in the afternoon or, you know, and he was like, Oh, what do you think that is? And I said, I suppose everyone needs a chance to get ready. And then you have your party in the evening. And I realized after about 10 minutes of talking about churches and weddings, then we moved on to the graveyard and how many graves were in the garden and what was the oldest grave.

[00:07:17] I thought he hasn't done the task. But he didn't, like, he didn't refuse to do the task. He just completely sidetracked me. It was so, so clever the way that he did it. So, you know, we, we, we look at that. There's also lots of flattery. So sometimes I'll turn up at an appointment and someone will say, Oh Laura, I really like your earrings.

[00:07:35] They're really nice. Where did you get them from? You know, and then we'll start talking about jewelry. So sometimes, as I say, the demand avoidance is, it's actually quite subtle. Um, you might not even realize. that you've, that the demand has been avoided until like ages later. Um, PDA is usually also very socially driven.

[00:07:56] They, they like being around, um, other [00:08:00] individuals. Um, lots of the children that I work with who really struggle with school, um, will continue going in, even though sometimes they're given the option. You don't have to go to school, you know, there's alternatives to school. And, and they will still continue to go because they want to be around their friends.

[00:08:19] However, this is also very important because we need to understand that PDAs are autistic. So although they often have this social drive, they don't always have the social skills that they need to be able to have, you know, successful, um, relationships with others. You know, I'm not saying that they can't because I've seen that they can, but a lot of the PDAs that I've worked with have had real difficulties kind of in those social situations like the playground.

[00:08:50] Um, they could, they can be quite, you know, bossy and controlling. They have this anxiety driven need to control. So sometimes they will be very controlling with other [00:09:00] children and that means that other children get, you know, they don't want to play with them. They don't want to be told what to do all the time.

[00:09:07] Once when I was doing an observation of a young person, I was, I was observing him playing with the other children. And it was like he was, he was directing a play or a film. So he was saying, no, no, no, no, don't, don't say anything yet. Wait, wait, it's not your turn. Okay. Right. You say that part now. And it, you know, he had made himself also the most important person in the game.

[00:09:30] Like he was the leader, like the captain of this game. Um, and of course, That kind of play is okay all the time, you know, the children are kind of happy to go along with it. But when those other children are like, no, we don't want to play this game today. We don't want to be bossed around. That can have a real social impact.

[00:09:49] Um, I was talking to, uh, an amazing teenage PDA the other day about his friendships. And he said, you know, this young person is. [00:10:00] So charismatic as lots of PDAs are, um, and he said, Laura, he said, I can walk in a coffee shop and come out with someone's phone number, you know, I, I've got a phone full of people's numbers, he said, so the bottom line is, he said, I, I'm very good at making friends, he said, but I'm terrible at keeping them.

[00:10:18] And, and he, he was explaining that one of the reasons for that is that he finds the demands of friendship very difficult. So he said, I'm either really bossy and controlling and I annoy people, he said, or he said, I find other people really needy. Like if someone sends me a text message, I'm like, I've got to reply to this now.

[00:10:36] Oh, but I can't. So, you know, it can be very, very difficult. We do see, you know, I think quite a high kind of correlation between PDA and ADHD. So a lot of my PDAs have ADHD traits such as, you know, high impulse. Um, you also see kind of like, you know, significant sort of mood swings. Um, [00:11:00] I know some parents have described like a Jekyll and Hyde personality.

[00:11:04] Um, roleplay is also a really, really important feature of PDA profile. Um, and obviously to have, to be able to roleplay, you, you have to have a really good degree of creativity and imagination. And roleplay has three functions in, in, in my opinion. So the first is roleplay to avoid demands. So I've worked with lots of children that will pretend to be a cat or a dog.

[00:11:31] if they don't want to do something. Um, you know, I can't possibly do my work because I've got paws and, you know, I can't hold my pen basically because I've got paws. Um, Rob, the best example I have to, I read it somewhere, it wasn't one of my examples, but my favourite example was a child that was asked to do some, some written work and he said, I'm afraid I can't do that, I'm a castle.

[00:11:55] And I just thought, this is amazing, like castles just stand around being [00:12:00] castles. They don't, they don't do writing. Um, sometimes role play is used to conform with or comply with demands. Um, and, and again, one of my favorite example here is a young person that I met. A few years ago, there were about 10 or 11, and I was meeting him and his mum to, you know, talk about how I could work with them and offer some support, and his mum spoke to me before we met, and said, you know, Laura, just to let you know, he is very anxious about meeting you, um, you know, I don't know how much you're going to get out of him, and I said, that's fine, you know, I'm, I'm used to working with anxious children, and He, you know, I, I basically met them in a, we decided to sort of meet in a neutral environment, which was a cafe bar, um, and I got there a little bit after them, and I walked in and this, uh, child, walked up to me and he said, Hi, Laura, did you have a good [00:13:00] journey?

[00:13:00] And I said, Oh, I did. Thank you very much. And he said, Oh, that's great. Can I get you a coffee? So I said, Oh, I'd love a coffee. Thank you very much. So he went and got me a coffee and then he came and sat down and on the table where we were sitting. There was a jug of water and some small, some little glasses and he would pour a little bit of water into the glass and then do it like a shot and then he'd lean back in his chair and he'd go, and then he said, so Laura, tell me a bit about yourself.

[00:13:29] How long have you been in this line of work? It must be absolutely fascinating. And he proceeded to interview me. He then excused himself to go to the toilet and he winked at me. And sort of strutted across this bar and I looked at his mum and she was sort of sat there like, you know, laughing and she said, Laura, I'm so sorry.

[00:13:49] She said, you're not really meeting my son today. She said, you're actually meeting, uh, Kate Winslet's fiance from the Titanic and explained that at [00:14:00] the time this, her son was, you know, watching the Titanic, you know, on repeat two, three times a week. And he had taken on the role of Cal from Titanic because he is a very confident, you know, bordering on very arrogant, not going to take any rubbish from anybody.

[00:14:22] Um, and so he felt more comfortable meeting me in that role, somebody who could basically take and comply with the demands of that meeting. Um, And, you know, I did start working with that young person and he would go into school in different characters and it would often be a Harry Potter character. So he would go in as, as, um, Harry Potter, um, and be able to sort of do his work.

[00:14:51] But if he was having a bad day, then he would go in as Malfoy. Um, a character that, you know, was, you know, less [00:15:00] compliant and, you know, less friendly to other children. Um, that boy as well, I think, if anybody had observed us in, observed that interaction in that cafe, they would have thought that that child was supremely confident.

[00:15:18] you know, bordering on precocious. And actually, what was so important to understand was that he was actually incredibly anxious. And that's very important because some of the most anxious children I've worked with, they don't look anxious. Um, the third way that children and young people with this profile present using this kind of role play, and I think this is the most important one if you do work in an educational setting, um, is those children that just keep themselves very much under the radar at school.

[00:15:52] So they, they stay very quiet at school, they don't ask for help, you know, they're just sort of sitting there saying, please don't ask me anything, please don't [00:16:00] speak to me. you know, and it's almost like they're role playing the part of a compliant, well behaved student, and those are actually the children that I probably get the most concerned about, because those are the children who are struggling so much with school, they're masking so heavily, their parents struggle to get them in in the mornings, they're then dealing with the kind of aftermath or the fallout when those children get home, and unfortunately what can happen, is that those parents, when they go into the school and they talk to their child's teacher and try and explain how much the child is struggling, the teachers say, well, they seem fine when they're here.

[00:16:37] Um, and then, of course, the child doesn't get the support they need, or the focus is very much placed back on parent, and it's almost like a parental blame. So I think that's incredibly important to be, you know, be aware of. Um, the final characteristic of PDA that again, we do look for in our assessments is, um, the, the kind of special [00:17:00] interests or the obsessions.

[00:17:02] Now, I don't really like talking about obsessions. I think that sounds quite negative. Um, but that, I mean, that's how it's. phrased in, in, in the sort of character in the, in the criteria. But what's really interesting is often those, those special interests or those obsessions are very much aimed at people.

[00:17:19] And what can be very difficult is that it can be either a loving or a loathing obsession. And again, that can have a real social impact. So if it's a loving obsession, then it can be, you know, I only want. to play with you. I don't want you to play with any other children. Um, that not only has an impact on the child who's the focus of the obsession, but it also has a wider social impact as well.

[00:17:46] Um, if it's a loathing obsession, that can also be very, very difficult. And again, it could be a child, but it could be a member of staff. It could be a teacher or a learning support assistant. And we've, we've had, [00:18:00] children that I've worked with who've been introduced to a new teacher or new LSA and just said, no, I'm not working with them.

[00:18:07] I hate them. And it's never going to happen. And there may not have been any previous interaction. It's not that someone has done something which has, you know,

wronged or upset them. It's like instant, nah, never going to happen. Um, and again, that can be really, really difficult because you know, in a school setting, if you've got a new member of staff, a new teacher, a new learning support assistant, and the child with PDA is basically saying, no, I'm not ever going to work with them, then that, that's, that is really, really tricky.

[00:18:40] So I'm going to have to pause for a minute. I'm sorry. No, no, that's all right. And I was. Hang on a sec.

[00:18:48] So those, those are the sort of the key features of PDA, um, but there's an awful lot more to PDA than just those. One of the other really, really important points to understand about, uh, [00:19:00] PDA is, is that they will often find it very, very difficult to, um, recognize hierarchy or authority. Um, I have always described PDA as, as being like adults that are trapped in their child's body.

[00:19:18] And I did a post on this, um, probably about two or three years ago now. Um, and it went. It went mad, like it just went mad, like so many parents were saying, yes, yes, that's, that's my child, like my child, we've always described my child as being like a miniature adult or an adult trapped in a child's body.

[00:19:41] Um, and when I'm doing my parent workshops and I, you know, I say to parents, you know, does that resonate like. I say like a hundred percent say it does. And then they also say that their parent, their, their children will say things like, you are not the boss of me, . Or they will try and parent other children as [00:20:00] well, or in a school setting, they will act like another teacher.

[00:20:04] Um, and they will tell other children what to do. They'll tell other children how to behave again. that has a real social impact. It's quite cute when the, when you've got like a five year old who's, you know, acting like a miniature adult, but as a child gets older, that can become more difficult, um, for other children to tolerate.

[00:20:24] But I think what's really important to, to understand about kind of, Inability to see hierarchy and authority, which I actually think is a really amazing way to look at people and just to look at people as like other humans that you feel safe with or not. Understanding that also helps us understand that actually what PDAs need is very equal, reciprocal relationships.

[00:20:50] That is what is so important to them. So for that reason, you, you know, you have to present yourself as an equal. I, I do regard myself as, as, as equal to [00:21:00] the, to the children that I'm working with. I, I would never present myself as a, I'm a teacher or I'm a tutor. It also explains why, uh, a lot of neurotypical children will just defer to the adult.

[00:21:14] They will defer to what the adult is telling them to do and they won't question that. They're just like, oh, my teacher's telling me what to do. I don't really like it, but I need to do it. a child with PDA, that does not work. Um, PDAs, you know, they are highly creative and imaginative. And the, the, the work that some of my PDA students have created, it blows my mind.

[00:21:40] It's just phenomenal. Um, you know, And their imagination just goes to the most incredible places when we allow it to. It is amazing. PDA is also incredibly empathetic. Um, and actually. almost too [00:22:00] empathetic sometimes. You know, they're so high, highly sensitive and hypervigilant to the environment around them.

[00:22:07] And that includes the people in them. Um, and I know lots of young people with PDA who, will pick up on other people's emotions and, and become quite upset if, if they think someone else is upset. Um, in an assessment I did last year, um, one of the parents was telling us that their child was driven, they went to London one evening, they drove through central London at night, and it was the first time her, the, the child had seen homeless people.

[00:22:39] And she was incredibly distressed by seeing homeless people. She was, she, she was... You know, saying to her dad, you need to stop the car, you need to go to the cash point, you need to get them some money out. And her dad was trying to explain that I, I can't do that, you know, if I, if I gave all the homeless people in London money, I wouldn't have any money left.

[00:22:58] And, and then they, [00:23:00] you know, she got very angry and upset with her dad for, for not giving them money. And then when they got home that, you know, finally, and they went to bed, she couldn't sleep. She was just lying there. distraught because they were homeless people. She said, I can't stop thinking about them.

[00:23:15] Um, so other people, you know, other, the way that other people are around PDAs can really impact on them. Um, PDAs really require a very sort of novel, spontaneous sort of way of living as well, because anything that becomes too much of a routine, too much of a ritual, Uh can feel like a demand if you if there's an expectation that they do something at the same time every day that becomes a demand.

[00:23:44] So as long as they are, um, you know, motivated by the thing that you want to do, like having a very spontaneous approach of being able to say at school, Oh, look what I brought in today. Or, Oh, look at this amazing thing I found. [00:24:00] Oh, today we're going to do X, Y, Z that the PDA will probably really enjoy that approach because it's, it's, it's not.

[00:24:07] demanding because it's not, um, it's not something that they've kind of expected to do. Uh, I've, you know, I think a lot of autistic individuals anyway are very kind of truthful, um, but PDA is, they, they not only speak the truth, but they also seek the truth. I think they are. you know, very, very good at sniffing out anything that's not entirely genuine or truthful or honest.

[00:24:34] So, um, yeah, they speak the truth, but they seek the truth as well. And I, you know, there's a chapter in my book, which it's got a little, uh, a symbol saying honesty is the best policy. And I, I really do think that honesty is the best policy with PDA is because I think if you, if you try, Well, basically, if you lie about your intentions or you're caught out not being entirely genuine, then you will lose their trust, and that trust is [00:25:00] everything to PDAs.

[00:25:02] Um, yes, they will sometimes overstep the mark, you know, take things a little bit too far. Um, and another really, really important point to understand about PDAs is that they are Um, highly, highly sensitive to the environment around them, and that includes you. That includes you as a person. So, you know, again, when I do, uh, parent workshops, I will say, put your hand up if your child has ever accused you of being angry when you're not.

[00:25:29] Every hand goes up. Put your hand up if your child has ever, um, accused you of shouting at them when you haven't shouted. Every hand goes up. So they are so, so tuned into the environment that if you yourself are feeling emotionally a little bit dysregulated, they will pick up on that. But again, may not know why you're dysregulated.

[00:25:52] They might think, Oh, my teacher's angry with me. All my LSAs cross because I didn't do something. And it might be that you've just walked into the [00:26:00] classroom feeling a little bit stressed or anxious about something completely not related to them. So again, that goes back to honesty, being the best policy.

[00:26:08] Now, Yes, PDA, you know, we do see demand avoidance with the PDA profile, but PDA is not just about demand avoidance. It's all of those other things that we've just been speaking about. And I think it's also really important to remember that demand avoidance is something that we all experience. You know, it's human nature to avoid demands of things that are, you know, uncomfortable or painful or scary.

[00:26:32] Um, you know, if we didn't avoid those demands, we probably wouldn't survive. Um, You know, in, in the UK, we do have to look for demand avoidance as part of any autism assessment. But again, this comes back to looking at why the young person or the child is avoiding the demands. And with, um, you know, with a, with an autistic child, you will see demand avoidance, but it's [00:27:00] usually.

[00:27:01] what we call rational demand avoidance. You know, I won't go into the party because there's balloons and the balloons might pop. I won't go into that classroom because it's, um, very noisy and there's too many people in there. Um, I don't want to go outside and play in the garden because it's raining. You know, you, we, we can, you can find reasons behind the demand avoidance with PDA.

[00:27:27] Sometimes the demand avoidance feels quite irrational, you know, as I said already that the learner, the child will avoid the demands of things that they want to do. And that's again really, really important to be aware of in a learning environment because, you know, you might have a child, this has happened to me on so many occasions when a child has said to me, Oh Laura, um, next week when I see you, could you bring me a quiz on...

[00:27:55] Aztecs and Incas, this actually happened once. So I prepared a [00:28:00] quiz on Aztecs and Incas, and then I took it to the child and he, he just looked terrified that I'd presented him with this quiz that he, he himself had said he wanted to do. So, you know, I think we have to think about the impact of having PDA and how frustrating that must be when you, you can't do things that you want to do.

[00:28:23] Again, we also need to remember that there's a high degree of demand avoidance within our students with an ADHD profile as well. I have an ADHD diagnosis. I tend to avoid things that are boring. you know, if something's not interesting to me, I don't really want to do it. Um, I need, I need something that's very stimulating for me.

[00:28:46] I don't avoid things that I want to do though. If I'm looking forward to something, you know, it could be meeting a friend for coffee or, um, going on holiday or whatever it is, once, [00:29:00] once I decide I want to do something, it's very, very, very rare for me to think, well, no, I can't do that now because there's an expectation on me to do it.

[00:29:09] Um, as we've already mentioned, you know, you, you, you can't get a standalone diagnosis of PDA. Um, but again, it's just a, a important reminder that, you know, When we're supporting a child with a PDA profile, supporting a learner with a PDA profile, it's their needs we need to focus on. And, you know, some of the best schools that I have worked with have done incredible work with young people with PDA who don't have PDA even written into their diagnosis.

[00:29:44] The schools themselves have picked up, this child seems really, really demand avoidant. Um, There obviously does come a point where it becomes very helpful to get a diagnosis. , but it can be very [00:30:00] tricky to to get a diagnosis. Um. And yeah, a good, a good school, a good teacher, a good LSA will begin to use those strategies without that formal diagnosis.

[00:30:11] And it can just, it can be life transforming. And we're going to talk about that later. Now, we've talked about the need for control that individuals with PDA have. And yes, that is very, very important to be aware of. But actually, what PDAs than the need for control is the need for autonomy. And. There are various kind of rework, you know, remodelings of pathological demand avoidance.

[00:30:37] So Tomlin Wilding, um, talks about a pervasive drive for autonomy and Dr. Wen Lawson talks about a persistent drive for autonomy. I actually think this is. so much better in describing what PDAs need. So yes, they have a need for control, but if you think about it, when you have [00:31:00] complete autonomy, you have complete control.

[00:31:04] And when you have complete autonomy, nothing is trying to control you. Now, I don't find. The PDA is that I work with particularly controlling because they have so much autonomy when I start to see that control that controlling behavior is when they feel that they are losing autonomy and to a PDA.

[00:31:28] Basically demands of threats to their autonomy. So it's really, really important to try and give as much autonomy as you can. We're going to talk about some more strategies later, but actually offering somebody a choice. instantly makes them feel they have some autonomy in, in, in what they're doing. But we do have to be aware that, um, making a choice can be a demand.

[00:31:56] And I think also one of the mistakes that people make is that [00:32:00] they start offering choices when somebody is not able to make a choice. So when somebody becomes very, very anxious, And they're saying, you know, well, you can do this or this. And the brain has gone into that state of, I can't process, I can't even make a choice.

[00:32:16] So I think we do need to use choices with caution. And we'll talk about choices a little bit more in a moment. Um, one of the other ways that you can ensure that you're offering autonomy is just by involving the The child or the young person in as many decisions as you can, you know, don't impose things upon them.

[00:32:36] Don't impose a routine on them. If, if the child, you know, does benefit from, uh, using kind of, um, Visual timetables or planners, don't just hand it to them and say, right, this is what you're doing today. Try and involve the PDA in, in, in the creation of those plans. Um, and I think what's also really important to remember is that, [00:33:00] you know, many PDAs and certainly the ones that I've worked with are autodidactic, which means they can teach themselves.

[00:33:06] So I no longer think of myself as a teacher or a tutor. I think of myself as a learning facilitator. So I'm just, they've, they've... They know how to learn. A lot, a lot of them will just teach themselves. I'm just there to make sure that everything that they need to learn is there for them. So we've got some quotes on, on how it feels to have.

[00:33:31] PDA. And these are quotes from a young person called Molly Sherwin. Um, and Molly is the subject of the book, My Daughter's Not Naughty, which was written by her mum, Jane Sherwin. It's one of the first books I read on PDA. And I know a lot of my clients, um, have said to me that it's like, you know, reading, um, about their own child.

[00:33:53] And, you know, I think these quotes are very, very insightful into what it [00:34:00] must be like to live with PDA, but also how frustrating it must be, you know, to, you know, avoid demands when, when you want to do something and then someone suggests it must be incredibly difficult. And I think also these quotes show a recognition that I know that it frustrates you when you can't when I can't do the things that you want me to.

[00:34:27] So again, that shows that level of empathy. But again, I think that is also incredibly important to be aware of, because we're talking about these highly empathetic young people. And, you know, I remember once one of the children that I work with, and I thought our sessions were going really well, you know, I thought we would, you know, we were getting on great.

[00:34:51] And then I, I'd done a few sessions and his parents contacted me and said, Laura, you know, he, he had a, um, a really difficult time after you left [00:35:00] today. And I said, Oh no, why, what's happened? And they said, the mum said, well, Laura, he's he's finding it really hard that he can't tell you that he's not, he doesn't want to do the things that you've, you're asking him to do because he doesn't want to upset you.

[00:35:17] You know, he really likes you. He doesn't want you to be upset with him. So he's waiting for you to go. And then he's saying, Oh, I don't want to do that anymore, but he couldn't tell me himself. So again, it's really, really important to be aware of that. But yeah, I think also, you know, this quote there, my anxiety stops me from doing the things I want to do, as well as the things I don't want to do.

[00:35:35] It's so important that we remember this with, with the PDA profile. The other thing to be really, really aware of is to be, you know, you, you, in a learning environment, you are putting demands on your learners all the time from the, from the minute they walk into the, into the door. The other thing that I think we have to be [00:36:00] aware of is just to get into school or college, just to get into the learning environment, that young person will already have had to comply with so many demands.

[00:36:13] So if you break the demand of get up, get ready, go to school, if you break those down within those three demands, there are dozens and dozens of smaller, like micro demands. So, so it's very, very important to remember that the child with PDA has already had to sort of comply with loads of demands before they've even got in the door.

[00:36:38] So some demands are very obvious, you know, direct demands. If we say to someone like, sit down, start your work, that will feel like an attack on the autonomy, you know, just telling the child where they need to sit, that they need to start their work. So we definitely don't want to be using that kind of language.

[00:36:58] Sometimes people think they're hiding a [00:37:00] demand, and I don't like that. I think that, like, these sort of sneaky demands I don't like, because A, the PDA will pick up on it, um, and, you know, that will potentially, um, lose the trust that they have with you, but B, there's still demands. So if you start any, um, conversation with, let's do this, or it's time to do that, or we need to do that, that will be again, an attack on the autonomy, particularly.

[00:37:31] you then need to be thinking about your intention. So if it's a really nice day and you genuinely think that the child that you're working with will enjoy going outside, And, and doing something with you outside and it's something that you would enjoy as well and it's just something that you want to do together and you say, Oh, you know, we could go outside to do some work.

[00:37:54] And that that you know the PDA if they want to go outside might come with you. But if your [00:38:00] intention is, I need to get this child outside. And you're saying, Oh, why don't we go outside to do your work, they can, they can honestly pick up on that intention. Um, So that's very, you have to be very mindful of that.

[00:38:15] More importantly, we need to be aware of the silent demands that we place on individuals. And those expectations, I've said that word expectation already. But, you know, this is where also our traditional autism strategies need to kind of go in the bin. Because, you know, a noun export, a visual planner, a timer.

[00:38:35] All of those things, which can be incredibly helpful for some autistic learners, can actually feel like huge demands to the learner with PDA. Um, so again, if you, you know, if you, you have to work very collaboratively with the PDA, you know, so there are some children who might say, yeah, I'd find it really helpful to have a, to have a timer, or I'd find it really helpful to have a now next board.

[00:38:58] Um, I went [00:39:00] into a school recently and they. Basically said to me, Oh, we were chasing him around with his now next board to try and get show him what he needs

to do. Like, why are you doing that? Like if the child is running away, clearly the now next board is not helping. Because what, what a now next board is basically saying is first you have to comply with this demand.

[00:39:20] Then you have to comply with that demand. So very important to be aware of those. Um, also just like. And those sort of non verbal cues that we might give like, you know, tapping a watch to mean hurry up. Um, a facial expression could be a demand, you know, you could indicate with your facial expression how you want someone to do something.

[00:39:42] Just placing work down in front of a student. It's basically a demand of start your work now and also within this one we have to think about things like our social expectations like manners, you know, so like saying please saying thank [00:40:00] you, and those can make the PDA feel very very anxious, you know, and I should say please.

[00:40:07] I know I should say thank you, but I worked with one young person who was unable to go into school. And one of the reasons for that was because the head teacher, who was absolutely lovely, would stand out in the playground and greet all the children as they came into the playground. So he'd say, Good morning, so and so.

[00:40:25] And they there was then an expectation on them that they would reply, Good morning, Mr. So and so. And this child. That I was working with was I, I, that was the one of the reasons he couldn't go into school because he's like, Oh, I have to say hello to the head teacher. And when I spoke to the head teacher about it, he was absolutely lovely.

[00:40:42] He was like, Oh, you know, I won't say it anymore. But, you know, just saying good morning sets up a demand to respond. Um, also any kind of rules could be seen as demand, so whether those, again, there's social rules, but rules of games, school rules, um, [00:41:00] can all feel very difficult. I did an observation in the school a little while ago, where, um, the first thing I saw when I walked in the classroom on the, written on the whiteboard, was, you know, you need to do this, you, you have to do this, this needs to be done by this time, and I said to the teacher, the first thing I noticed when I walked in was, was, just a list of demands on the board, basically.

[00:41:23] So the young person was there to observe was really struggling to get into the classroom. And I think that, again, was one of the reasons why. We also do need to be mindful of the self imposed demands that are very, very difficult for, for individuals with PDA. And, and, you know, again, that can be anything.

[00:41:39] Um, it can be around sort of self care. It can be around. sleep. I think sleep is a huge demand. That's one of the things I get asked about a lot, actually. And again, of course, if you've got a child that's not sleeping, that can make them feel more anxious. And then that will increase their demand avoidance anyway.

[00:41:58] Um, and then just things like, I [00:42:00] think in the learning environment to be really aware of is things like perfectionism, like they set. Sometimes very, very high standards for themselves, and then when they can't meet those standards, that can cause real anxiety, you know, there's a, one of the things I pick up on a lot with my PDAs is a fear of failure.

[00:42:20] It has, you know, I can't risk failing. I have to be in control of whether I pass or fail. Um, so, you know, a lot of the young people that I work with, exams, having to take exams or handing coursework is incredibly anxiety provoking. Because they just feel completely out of control, you know, you're doing an exam, you have no control over what work, what, what work is going to be in the exam paper, the exam environment is very, very, very controlling.

[00:42:53] So, um, I think, I think our education system, you know, particularly when you get to that level of [00:43:00] having to do exams and hand in coursework and stuff, um, becomes even harder because it's just, they just feel so out of control. So. As I mentioned earlier, we also need to be very, you know, looking at how the the PDA will avoid the demand.

[00:43:17] So, manipulating social situations to remain in control. I don't like that word manipulate. It sounds again very negative, but if you think of the word manipulate, it basically means to reshape. So they will reshape social situations. So that could be, again, changing rules and games so that they're always on top, always the winner.

[00:43:35] And sometimes it will be a refusal. Nope, not doing it. Can't do it. You know, I'd say it's usually more can't than won't, but sometimes you'll get, I won't do it. Um, lots of excuses. Legs not working seems to be a fairly universal, uh, I've worked with parents and professionals all over the place who say that their, the child will say, no, my legs don't work.

[00:43:58] I can't do that. [00:44:00] Um, or there could be other kinds of like physical incapacities that mean that they can't possibly do the work. Um, distraction. I gave you an example of that earlier. Arguing, delaying and procrastinating, like, I've just, I've just got to do this first, or, you know, yeah, I'm just gonna, just, just need to finish this off.

[00:44:17] So again, they just, just keep that little bit of control back around when they're going to do something. Um, suggesting alternatives. Um, so I've got a lovely example of a child who, um, I did a, he asked me to provide, um, do a game for Christmas. So I took along this game that I've made, which was very, very simple.

[00:44:37] I just put lots and lots of words related to Christmas in a little box. So I had Santa, sleigh, turkey, you know, present, Christmas tree. And I took along this box and I said, right, I've made up this game. And I said, you can take out three words or you can take out five words and you can either tell a story or...

[00:44:58] Um, draw a [00:45:00] picture or, you know, whatever you want to do. I said, you know, we can do it together or you can do it on your own. So he said, okay, you go first. So I took out my five words and I made up a story, you know, using those words. And he went, oh, can I add some words to the box? So I said, yeah, of course you can.

[00:45:17] So he went off into the corner of the room. He was sat there for ages writing and cutting. I was thinking, God, this is brilliant. He loves this. This is a child that doesn't really like writing. He's really invested in this game. And then he, he was there for ages, brought the box back and went, it's your turn again.

[00:45:32] So I said, okay. So I went in the box, I pulled out one Santa and four bananas. He'd written the word banana about 25 times and put that back in the box. So that was his way of saying, Yeah, I'll play your game, Laura, but I'm gonna take the control back. And I just went with it. I thought it was really, really funny.

[00:45:52] And I did make up a brilliant story, which I stole from Elf, um, that Santa's sleigh had stopped running on Christmas spirit, [00:46:00] and it basically now ran on bananas. And he was really, really laughing. He thought that was really funny. Um, sometimes as well, though, the demand avoidance will be, um, presented as, you know, a role play, like an individual that can't possibly comply with that request or demand.

[00:46:20] So, to understand PDA, and, you know, to be able to support a child with a PDA profile, it is essential that you understand anxiety. Um, And, you know, anxiety really is the kind of, I think of PDA as like a, almost like a machine and anxiety is the biggest cog in the machine and everything comes off that cog.

[00:46:42] Um, so anxiety is our cognitive, physiological and biological response to a threat. I'd like you to think now about what makes you feel anxious. Because when I ask what makes people feel anxious in a group [00:47:00] setting, usually what people tell me is not what we may think of as a real threat, like a life or death situation.

[00:47:11] So I get very anxious about being late. I get very anxious about technology, like my computer not working or, you know, Zoom not recording something properly. That makes me really, really anxious. It doesn't matter that those are not real threats. My life is not in danger if I'm 10 minutes late to a meeting.

[00:47:34] My life is certainly not in danger if a Zoom recording, you know, goes wrong, but it doesn't matter. I will have the same physiological response. My heart's going to beat really, really fast. My breathing could become shallow. I could become hot and sweaty. I might get butterflies in my tummy. So whether or not the threat is real or not, our brain perceives it as a threat.

[00:47:57] And that's incredibly important to remember with anxious [00:48:00] children. Um, you PDA profile. that they will feel threats coming at them at all times. So, very, very important to think about that. Um, it's also really helpful to think of the bucket analogy when we're supporting our PDAs because, um, you know, if you haven't heard of the bucket analogy that if you The neurotypical individual has a bucket that has lots and lots of holes in so throughout the day all of us have to deal with demands, things that make us stress, things that make us anxious.

[00:48:36] things that make us uncomfortable. The neurotypical individual has a bucket which has holes in the bottom. So throughout the day, while their bucket's being filled up with all those different things, they're processing all of those things. So it takes something very big or very unusual for their bucket to fill up.

[00:48:55] The PDA bucket is --different and it's different for two reasons. First of all, it [00:49:00] doesn't have the holes in it. and it might have one tiny little pinprick hole. So what that means is throughout the day their bucket is constantly filling up and there's nowhere for that anxiety to go. The other thing that's really important to be aware of with the PDA bucket is that it will always have anxiety in it.

[00:49:20] And again, you might have children and young people that are coming into your setting whose buckets are already quite full because they've already had to comply with so many demands already just to get into school. Um, I recently interviewed lots of teenagers with PDA. And one of the really, really important things that I picked up from those interviews was that they feel anxious all the time.

[00:49:47] Like they, they were all saying, basically, I just feel anxious pretty much all the time. But some of those individuals did not look anxious. It's a bit like that boy in the, in the cafe, sort of, you know, acting [00:50:00] like a very confident man. So, you know, you, you may be working with a child with a PDA profile.

[00:50:07] Who comes across as potentially very shy or potentially they just seem angry all the time, perhaps they're like very, very smiley. And so it is essential to remember that anxiety takes many different guises. And, you know, some of the most anxious children that I've worked with just don't look anxious at all.

[00:50:29] Again, thinking about what makes you feel anxious. It's also really helpful to think about what makes you feel better when you feel anxious. Um, you know, if I was running late to a meeting, I would. usually phone ahead and explain, I'm really sorry. I'm running late. I'm stuck in traffic. And what I need from the, from the person who is expecting me is understanding.

[00:50:55] I need them to validate that I'm anxious. I need them to say something like, Laura, [00:51:00] don't worry. You know, we know the traffic's really bad today. Loads of people have got stuck in the traffic. You know, it's not your fault. Please don't worry. Get here safely. Um, you know, we can be really flexible on timing.

[00:51:14] I need them to really, um, show me that they are not cross with me, that they, that they understand that they can empathize with me. Um, I don't need people to say, well, that's not very professional. Is it Laura? Or, you know, you should have left earlier or everyone's waiting for you. And I think what can happen sometimes in schools is that, um, When children behave in a way that is challenging for the adults around them, they get told things like, that wasn't appropriate.

[00:51:47] Or, you know, that wasn't a good choice and, and the schools are sometimes failing to recognize that when a child, you know, throws their work on the floor, they're doing it because they feel really [00:52:00] anxious or they feel angry or aggrieved about something. So actually saying, do you know what? That made me really angry as well.

[00:52:07] You need to hear that when you feel anxious, don't you? I think also the other thing that's really, really helpful to think about is, um, you know, when that bucket is full, think of it as a panic attack, you know, it is not bad behavior. If we think about it as bad behavior, I've seen Sue write about this recently, if you think about it as bad behavior, then your brain automatically thinks to goes to like sanctions and punishments.

[00:52:33] If you think about someone having a panic attack, if you walked into the staff room at work and you knew someone was having a panic attack, you wouldn't dream of sanctioning them. You would just think this person is in real crisis. So this person is in trouble. What can I do to support them? And that is really, really important when we're supporting, you know, PDA learners.

[00:52:54] We also need to remember as well that the higher someone's anxiety is, the [00:53:00] lower their demand tolerance will be. So always bear that in mind. High anxiety means low tolerance. Low anxiety means higher tolerance. Um, so that again, that's where your bucket analogy comes in. So if you know someone's bucket is really, really full, for example, you know, if you know that your children or the child that you're supporting is very anxious when they first come into school in the morning, that is not the time.

[00:53:23] To be, you know, you putting lots of demands on them when that bucket is really full. We need to be thinking about a low demand approach. We also need to think about how important is it. Okay, so it's almost like you need to think about that bucket has got limited, limited demand and capacity in it. So every time you put a demand on a PDA, you're using up a little bit of that capacity.

[00:53:46] You don't want to be wasting that capacity on demands that just aren't pointless. So um, an example that I talk about in my book is when I was in a school once and I was doing an And the child that I was [00:54:00] observing had taken her shoes and socks off. Um, was sat at her desk, she was working, and the teacher came over with the shoes and socks and put them next to the tea to the little girl and said to the, to the ta, um, can you get her to put her shoes and socks on please?

[00:54:15] And the TA looked at me when the teacher had walked away, and I just went. No, like, it's not important, like, she's sat at her desk, she's working in a classroom which was carpeted, but when the bell went, and the little girl wanted to go and run around outside in a playground, the demand became much more important.

[00:54:34] You know, you don't want a little girl running around in the playground with bare feet because she could... basically hurt herself. So in, when we're picking our battles with PDA, PDA is this is what we need to be thinking about. How important is it? And to be honest with you, most of the demands that I think you have to insist on are usually linked to keeping people safe.

[00:54:59] You know, I think [00:55:00] there's lots of demands in school environment, like where your coat outside, use a pen, not a pencil, like, why? Like, they're not important. But if you've got a child that wants to ride around on a scooter, or, you know, at lunchtime or playtime, and there's a concern that they're going to hurt themselves if they don't wear a crash helmet, then, you know, you can ask them to put the crash helmet on, and then you can back it up by saying, I know it's really annoying that you have to wear the crash helmet, I know it's uncomfortable, but Health and safety laws, they're really annoying sometimes, but if someone, you know, if someone comes into school, sees you cycling, you know, riding around without a crash helmet on, we're going to get into all sorts of trouble and they could ban scooters.

[00:55:40] We don't want that to happen, do we? So it's about validating, but also backing it up. Now, the next thing we're going to look at is the difference between PDA, autism, when it's not pathological demand avoidance, and ODD.

[00:55:57] The main thing again here, which [00:56:00] is so important, is whilst anybody that has a diagnosis of autism, PDA, ODD, is going to have similar characteristics and challenges. Again, just so, so important to remember that everybody with any of these diagnoses is an individual and they will need that very, very individual approach.

[00:56:20] So the differences that I'm going to go through now are. quite generic. Um, obviously everybody who's autistic, everyone who's PDA, everyone who's ODD as I've just said is different, but these are the sort of easiest ways to sort of, sort of distinguish the key differences. Um, eye contact is not something that I pay particular attention to anyway.

[00:56:42] I, I know lots of autistic people that don't have a difficulty with eye contact. I know some non autistic people that don't like eye contact, but generally speaking, an individual with a PDA profile, you know, they don't have the same difficulties with, with eye contact. It's something that we

[00:57:01] Um, We've already sort of spoken about the fact that PDAs are often very socially driven, even though they find it difficult sometimes, whereas an autistic individual who's more typically autistic may try and kind of isolate themselves more. A really, really important difference, I think this is one of the most important ones, is we've already mentioned the fact that PDAs require spontaneity and novelty.

[00:57:26] and actually having a routine can cause them anxiety if it feels like it's been imposed upon them. But for an autistic individual, not having a routine and not having a structure can cause them a lot of anxiety. So you can, you know, spring a nice surprise on a PDA, and if it's got a high, what's in it for me, they'll, you know, be possibly likely to go for it.

[00:57:53] Um, you could spring, spring a nice surprise on somebody who's autistic and It could be like, well, no, no, I wasn't [00:58:00] expecting that to happen. So that's really, that I think is a really important difference. Um, reward systems do not generally work with children with PDA. You know, again, it just makes them feel out of control.

[00:58:13] Um, and I think this is, again, a really important thing to be aware of. Um, the school where I used to work, which was a school for autistic children, A lot of our children really thrived on routine and, and structure and rewards as well. Like they, we had a reward system in our school that started on a Monday, finished on a Friday afternoon.

[00:58:33] The children kind of worked towards targets and points, and lots of the children in my school really thrived on that. PDAs did not. It, it just was too long to wait. Um, they weren't motivated by the reward. You know, they would get to Wednesday and think, well, you know, blow this, I've been, I'm never going to get the reward I want, or actually I'm quite happy with what I've got so far, so the rest of the week can go out the window.

[00:58:58] So yeah, we, we have to [00:59:00] look at different ways to reward PDAs, I'm going to talk about that in a moment. Um, I've mentioned the sort of high level of empathy and imagination that you get with PDA. I am not saying for a moment that autistic children lack empathy and lack imagination, we know that's not true, but with a PDA child it just seems incredibly broad, um, and incredibly Well, just incredible, incredibly incredible.

[00:59:24] Um, the, you know, children that I work with, with PDA, we have the most phenomenal reciprocal conversations, and they are genuinely very much two way conversations, particularly if there's something that I can really offer to the conversation. I don't get monologued at, some of my autistic clients will talk to me and it's not a reciprocal, not, not always, but it's not always a reciprocal conversation.

[00:59:53] But my PDAs and I, we have amazing conversations about all sorts of amazing things. There is a [01:00:00] difference, um, in the kind of male female split. There's a lot more boys diagnosed with, uh, autism than, than girls. That is not to say that there's more autistic boys than girls. It's the way I think that we're, we're assessing a lot of girls are getting missed.

[01:00:16] I think it's probably the same 50 50. whether it's PDA or non PDA autism. But again, the way that we're assessing for autism means that girls aren't always being picked up. But with PDA, it's pretty much 50 50. And actually, we've got about 50 percent boys and girls in the tutoring service that I run for PDA ers.

[01:00:37] When I do workshops for parents on PDA, it's usually like I did one the other day. I said, can I have a show of hands if you've got a son or a daughter? And it was 50 50. That would not happen if I was doing an autism workshop. It would probably be predominantly boys. The other most important, you know, difference on here is the way that Demands are avoided and with a autism [01:01:00] profile without PDA, as I've already said, yes, you will get demand avoidance, but it is not pathological.

[01:01:06] It's not down to this anxiety driven needs for autonomy and control. It's usually no, I'm not doing that because there's usually an identifiable reason behind the demand avoidance. Having said that, when we do go on to talk about the strategies, I think the strategies for a demand avoidant child are the same as a child with PDA, pretty much, unless it's an autistic child that really needs that structure and routine and predictability.

[01:01:34] I don't think it's actually that important in terms of the strategies. So the other, um, diagnosis, which is, uh, I think commonly Um, maybe mistaken for PDA or used instead of PDA is oppositional defiance disorder. Um, in the UK, it doesn't seem to be being used as much these [01:02:00] days, but it is still being used.

[01:02:02] Um, I know when I speak to families in Australia and America, the ODD is still. used quite a lot. Um, ODD is not an autism spectrum condition. So in the UK, ODD comes under our banner of, um, social, emotional, and mental health, SCMH. Because they're not autistic, Children with an ODD profile, unless they have coexisting autism, but ODD on its own, they don't have the same difficulties with social communication, don't have the same difficulties with their sensory needs, they don't have those very, very strong obsessions or interests, um, they don't use all of those social strategies, those very clever social avoidance, sorry, uh, avoidance strategies.

[01:02:56] They, they, it's usually just a no, F off, not doing it, or doing the [01:03:00] opposite of what you've asked to do. They don't use all that, um, distraction and flattery, etc. Another really, really important difference is that children with an ODD profile can also recognize hierarchy and, um, authority that, that, you know, they, they will often Be more than able to take demands from their peers or from children.

[01:03:25] They don't have that need to control their chil their, their, their sort of the people, the, the children that they're around or the people that they're playing with. But if a teacher or a parent or another adult asks or tells 'em to do something, it's like, nah, because you are, you are in a position of authority.

[01:03:41] So I can see why it's sometimes confused with PDA, but actually. Fundamentally, they are very different. The way that I think of it, which is a very simple way of looking at it, the simplest way of looking at it for me is PDAs, I can't do it. Even though I [01:04:00] might want to, I can't do it. And it's anxiety driven.

[01:04:03] ODDs, I won't do it. Because you told me to. So that's a very simple way to do it. The other thing is with ODD is they will also Respond usually quite well to reward systems as well, which we know that our PDAs don't. So we're going to move on to talk about some strategies now, and I've got a quote here from a lady called Dr.

[01:04:26] Gloria Duravilla. Dr. Gloria is, um, a brilliant child and adolescent psychiatrist that's based here in the UK. Um, she does PDA assessment. She's also written some books on PDA, um, including a book for children. So, um, who, who have a PDA diagnosis. So I think we've got links to those at the end of the presentation, but I would work, you know, They're really good books and Gloria's quote explains that identifying PDA is crucial.

[01:04:54] As I've been told by many parents and professionals that the approaches that we use with [01:05:00] children with an autism diagnosis don't work and can be counterproductive and that's really, really important. Um, however, she also goes on to say she's been told. That the, the use of PDA strategies has been transformative.

[01:05:15] And I certainly have the same experience, you know, some of the children and young people that I've worked with, who've struggled so much in the wrong setting and in the wrong environment, you know, when they go into that PDA friendly environment, that lower demand environment, they just thrive, you know, it, it, that I love that word transformative.

[01:05:37] And I've, I've had that word. He said to me on numerous occasions, um, particularly by parents who his children now have tutoring because the child was struggling so much in the school environment because it was just so wrong for them. And I'm not saying that all schools are wrong because there's some amazing schools out there.

[01:05:55] But unfortunately, some of the children I've worked with, their experiences in school were not. [01:06:00] Very positive. Um, and then we just see them thrive when they're given the right approach. So, the most important part of your job, if you work with a PDA er, before you even think about teaching or learning or supporting with learning, is to build a connection with them.

[01:06:18] Um, one of the chapters in my book is entitled The Antidote to Anxiety is Trust, and I love that quote. I didn't make that quote up. I can't take credit for it, but someone said it to me once and I was like, yes, this is, this is it. You know, we've already talked about the fact that anxiety is such a huge part of the PDA profile.

[01:06:40] So, you know, we need to try and reduce their anxiety and the safer you feel with someone, the less anxious you will be. And this is again, really, really important for schools. You know, if you have a situation where. a TA or a teacher's off sick and you're like [01:07:00] oh we've got a cover teacher they can just go and work with that child we've got a cover TA they can be this this child with PDAs one to one today that child doesn't know that one to one they're just going to feel anxious so that I'm not saying that that child shouldn't work with that one to one, but that one to one's primary role should be, I need to get to know this child.

[01:07:20] I need to learn about all the things that they're interested in. I just need to sit and talk to them about all the things that they want to sit and talk about. Um, reward systems, as I've just said, really don't work very well for PDAs. So we need to find different ways. So if you are going to use rewards, they need to be instantaneous.

[01:07:41] And of high value to them, but you can also use natural consequences. So it's great that you've nearly finished your work. You're going to have loads of time to play now. What would you like to do? So again, it's not, you're not saying to them when you've done your work, then you can go out and play because that's.

[01:07:59] [01:08:00] That's the demand. But if you just notice when they're working, you know, that they're sitting there and they're doing, doing great work, then you can use that natural consequence of, you know, you're going to have more time to play now. Similarly, I saw you had a brilliant playtime today. I bet that the children are going to really look forward to playing with you tomorrow now.

[01:08:20] So again, it's just talking about those natural consequences, which I think is a more natural way, um, without creating additional demands. Um, though we do need to show empathy, um, and validate the things that they can't do or are finding very difficult. So I know you find it hard to do lots of writing. Oh, writing used to make my hand hurt when I was in school.

[01:08:42] How about I scribe for you? Or how about we use the laptop? Um. Setting challenges. So I bet you can't work. I bet you can't do more than me. I bet you can't do more than you did yesterday, you know, making it into a genuine challenge. I think if you are going to set those [01:09:00] challenges or do them as races or anything, you need to get involved.

[01:09:03] You like, you need to genuinely participate in that. Um, and then, you know, Also, when you do the work with them, um, either alongside them or share that work, as soon as you share a demand, you make it smaller. I would never. ever expect a child that I'm working with to do a piece of work that I wouldn't be prepared to sit and do with them.

[01:09:29] Either, as I say, either next to them and like be leaning over and going, Oh, I like what you've done there. I didn't think of that. Or, Oh, you've written more than me. I bet I could try and catch up or okay. If you can think of the ideas, I can write them down, or I can think of ideas and you can write them down.

[01:09:45] So again, you're sharing that demand because then you make it smaller. Choices we've already mentioned, um, choices I think can work really, really well if they use correctly. So again, if you've got a child that's, you know, [01:10:00] interested in a topic, you

could say, oh, we could start with this task or this task, like, or it could be that choice of I can write or you can write.

[01:10:07] Would you like to work on your own? Or would you like some time to, you know, and would you like some time to work this out? Or would you like me to stay and support you now? So giving those choices can be really helpful. But as I said, you do need to be careful with choices because, um, you know, making a choice can be a demand.

[01:10:25] Also, I have seen a mistake made where The child is offered, you can have this or this and they don't want either of them, just not interested. And the analogy I use to describe, you know, to help explain that is I'm vegetarian, I don't eat meat. If someone said to me, Laurie, you can have a chicken sandwich or a ham sandwich.

[01:10:43] I'm not going to eat either of those just because it's presented as a choice. Um, so you do need to be mindful that something needs to be attractive because if it's not, they're not going to choose it. We also need to be really careful with praise. Now, I think this is probably one of the things that [01:11:00] I found the hardest habit to break.

[01:11:03] When I first started working with PDA ers, you know, my background was so heavily rooted in, you know, praise, positive reinforcement. Um, and one of the, one of the children that I worked with, one of the first PDA ers I worked with, you know, I said, good boy. once and he looked at me in absolute disgust and just said, I'm not a dog.

[01:11:24] He was, he was so upset that I used that phrase. So we do need to be really careful with praise. Not only does it maybe sound like you're praising a dog, but praise can set up a demand to, um, repeat the demand or even to improve on it. Praise also sets up a demand of how you respond to it. Like, uh, I say now.

[01:11:51] So, we need to find other ways to praise. So, I use a lot of I statements when I'm praising. So, I will [01:12:00] say things like, Oh, I love that colour. I know, what made you choose that? Or, Oh, I really like the use of adjectives that you've used there. I wouldn't have thought of using them. Um, or, I will say something like, um, I really like the way that you've presented your work today.

[01:12:19] So it's using those I statements. If we don't do it like that, it can also feel really disingenuous. You know, if you think, you know, the PDA will pick up on, um, I don't really deserve that praise. So I was doing an assessment last week, and I was talking about praise with the boy, and he said, I only like to be praised on the things that I'm actually really proud of because if I'm not proud of it, it just feels fake.

[01:12:42] And I thought, yeah, that makes, that's a really, really good point. Um, you could also talk about The individual's work may be to another child or to a colleague, you could just say, Oh, I really like, I've really enjoyed working with so and so and so today, they've [01:13:00] done some great work. You might say to another child, I've really enjoyed working with you and so and so today.

[01:13:04] So you're praising in their hearing. Also, when you have established a really good relationship with a PDA, you can use humour as part of your praise. So I did an observation a while ago, and the little boy I was observing had done some amazing work, and his teaching assistant said, well, you've done loads of work today, I'm obviously a great teacher.

[01:13:29] And the little boy really, really laughed at that, and it was lovely, it was lovely, but obviously she could say that because she had that brilliant connection with him. Um, I also would use humor and say things like, well, sorry, but you're just a genius, aren't you? I mean, I'm in the presence of a genius here and just kind of make light of it.

[01:13:46] Um, but again, I can do that because I've, I've got that really good relationship. Um, we've already talked about like picking a battles, but yeah, just, you know, ask yourself the question, does it really matter? Does [01:14:00] it really matter if? They finish. Does it really matter if they don't write anything and I scribe for them?

[01:14:08] You know, just take the pressure off yourself. You know, does it really matter if they're climbing onto the roof of the school? Yes, of course it does. So asking that question is very, very helpful. Um, also, you know, giving the PDA a chance to help you. You know, genuinely help you, finding things that they're good at, giving them responsibilities.

[01:14:30] That's going to be really good for them as well. But again, you need to do that in collaboration with them because they can be autodidactic, letting them take the lead as well. Like, don't be afraid to let them teach you and run away with what it is that they want to do. Um, look for those kind of natural learning opportunities as well.

[01:14:49] There are, there are learning opportunities all around us. They don't have to just be in the classroom at the table, you know, there could be all sorts of things that, you know, I, I would often go for walks with [01:15:00] the children that I worked with and just like, you know, find things and just talk about things.

[01:15:05] And one of the things that I think we are very lucky that we can do in the tutoring service that I run is mold the curriculum around the learner, like, you know, we we find what it is that they love and what they're interested in and what they're good at. And then we build the curriculum around that.

[01:15:23] That can be harder to do in a school, particularly as you go up through, through the, you know, the years. But, you know, if you can find ways to sort of mold it around the things that they love, that can be incredibly helpful. Because of their anxiety, you know, it's really important to have an exit strategy.

[01:15:39] So being allowed. To leave if they want to leave. Sometimes, even using an exit card or a timeout card can be too much. So some of the children I've worked with are allowed to just walk out the classroom if they need to, just to have a break. Again, as long as you can keep them safe. Um, really helpful is to have a check in and a check out every morning and afternoon.

[01:15:58] So again, [01:16:00] remembering that someone's anxiety could be highest in the morning when they come into school and that demand against straight into the classroom could be very, very difficult for them. So having a check in in the morning with a trusted adult talking about what's happening that day. Any worries or concerns that they might have can be helpful.

[01:16:15] And then the same at the end of the day, like just empty that bucket a little bit. Um, also, a soft start in the morning can be really good. So not having to go straight into the classroom, like being able to go into the library, being able to just listen to music or go on an iPad or draw or whatever it is that just empties that bucket a little bit.

[01:16:34] Some of the children that I've worked with as well have been able to come into school and like help the caretaker in the morning. They haven't had to go straight into the classroom. They've had jobs to do. Um, one boy I worked with would go into the playground and, and he was an eco warrior, which basically meant he was picking up litter, but he loved it.

[01:16:52] He had a little, a little high vis jacket and a grabber. And he was, he was very happy doing that. He was much happier doing, doing that [01:17:00] than going straight into the classroom. And then he felt calmer and then he could go into the classroom environment. Um, I'm often asked what is the best school for children with PDA?

[01:17:10] And I always say, It's not the school. It's the people in the school. It's the ethos of the school. It's the spirit of the school that is, is really, really important. Um, so yeah, and I've seen, I've seen amazing, um, results and, and children just thrive. Um, and the type of school they've gone to might not be a different type.

[01:17:34] It's just that the people in the school get it and, and they felt safer with those people. I think the other thing to say, which is really important is that. Um, you know, working with someone with PDA can be very, very tiring. And, you know, you need to look after yourself. You're constantly thinking on your feet.

[01:17:53] You might be having your ideas rejected. You might be, you know, sometimes if the child's feeling very [01:18:00] anxious, you might be ignored, told to F off. You might even get hurt. So it is exhausting. So I think it's really, really important, um, to make sure that you're looking after yourself as well. Um, And something that I came up with, actually, it was a choice of answers, and I, this was during Covid, I was working with a boy, and, um, I, he'd asked me to, you know, to prepare this quiz for him, and when I told him that I'd done the quiz, he looked really, really worried, and I said, don't worry, I said, we can play the quiz, I said, but we'll play it with a twist, I said, you can either give me the right answer, or you can give me your silliest answer, and he, he really loved that, so if he didn't know the answer, and changed the whole time this topic.

[01:18:43] yeah. He just came up with something crazy and it really, really made me laugh, so it was win win for him. But what I noticed is as we went through the quiz, the silly answers got less and less and less because he felt more comfortable and then he could give me the right answer. I also think we [01:19:00] need to sort of think, you know, does it matter whether the child has finished?

[01:19:03] The task or the piece of work, you know, we put a lot of emphasis on finishing and I don't think it's always necessary. Like, if you can prove that learning is taking place, then actually finishing is, is not absolutely essential, right? So I need to just pause because I can't read what I've written.

[01:19:32] I think involving the learner with as much of the planning about their learning is also really, really important because again, they'll feel that they've got that autonomy around what they're learning. And again, I do appreciate this gets harder as you go up through the education system. What, what I see with a lot of PDA is, is that the first, you know, the first, in the UK, we have a primary system and the primary system, I think, is more autonomous, particularly to start off with, like [01:20:00] when children start school, um, there's a lot of playing, like a lot of the learning is through their play, and unfortunately that as they go through the system, the autonomy is removed gradually and gradually.

[01:20:11] But then what I do see is when they get to like 16 and they can go to college, that autonomy really opens up again. But if you can involve them as much as you can in their learning and the planning, that can be really helpful. And then something that I forgot to mention just a moment ago was, you know, in, you know, helping other learners to be supportive as well.

[01:20:31] So I personally think, and I'm sure Sue would agree with me, that new training on neurodiversity should not just be limited to school stuff. I think children, like us, children are so supportive and so inclusive when they're, when they grow up understanding about neurodiversity. So it's so, so important to do that.

[01:20:51] Um, okay. So thinking about behavior. Again, you may have seen the iceberg model before. [01:21:00] The iceberg is so, so important because what it helps us remember is that what we see is just the tip of the iceberg. And if you think back to your geography lessons at school, you might remember that an iceberg only 10 percent of it is visible above the surface and 90 percent of it is hidden below the surface.

[01:21:21] One of the biggest mistakes that I see happening in schools is that they only focus on what they see with the behavior. They don't focus on the underlying causes. And if you don't identify those underlying causes and support with those, the behavior will never change because the underlying causes are still there.

[01:21:41] And with PDA, the biggest... Part of the iceberg is anxiety. So, we constantly need to have that in our minds. We constantly need to be thinking, how can I reduce this anxiety? How can I support this anxiety? How, how can I make this child, young person feel safer? [01:22:00] I think. Like I mentioned earlier, it's like a cog in a machine.

[01:22:04] Anxiety is the biggest cog, but the social communication differences, the sensory needs, all of those things are going to be linked to that cog as well. So, shrinking the anxiety cog can have a massive impact on everything else that's attached to it as well. So, we've got some more quotes from Molly Sherwin here.

[01:22:21] So these are from a PDA er. This is talking to professionals about what she needs. So first of all, she says, don't speak down or patronize me and remembering that someone with a PDA profile will feel like you're equal. So we'll be, we'll feel very easily patronized or spoken down to. Don't give direct demands, definitely don't give an ultimatum.

[01:22:42] An ultimatum to me is the ultimate no no with a PDA; they will just feel completely backed into a corner and trapped. Don't state the obvious, don't bombard with questions and don't insist that I respond or answer you. You know, responding to a question is a demand. Um, the [01:23:00] most important one on here to me is the building a relationship, like as I mentioned earlier, the, the higher, they, sorry, the more they feel safe with you, the lower their anxiety will be.

[01:23:12] And you can't rush that relationship and you can't force it. If somebody does not want to work with you, if someone is saying they, they, they, they, they can't work with a

member of staff and you try and force it, it's only going to go wrong. The only way to try and get that connection. is to take your time and make it genuine as well.

[01:23:32] So just sitting and talking about the child's interest can be really helpful. Speak to them as an equal because they regard themselves as your equal. Empathize with them, you know, validate the things that they find difficult. Um, understand that they want to do things, but their anxiety stops them. And really, really important is to recognize the signs of that anxiety and pull right back when you see it.

[01:23:56] So I, you know, once you get to know your students really [01:24:00] well, you should be able to work out what those triggers are. You know, I've worked with children that start to twiddle their hair or blink a lot more, or you lose the eye contact. One boy I worked with would put his hand up to his mouth. As soon as I saw that, I knew that anxiety was becoming very, very high.

[01:24:19] And I had to pull right back. Now, sometimes the bucket will fill up. Okay. And that's not maybe anything that you've done wrong. It might just be, as I said, they've come into school with a very, very full bucket. Now, I think that PDA has a really bad reputation. I think that people think that, you Individuals with PDA, you know, can be very violent and aggressive and I just don't see that.

[01:24:46] I know it can happen when their anxiety is really, really high, but it's certainly not the case all the time for all PDAs. And actually, a lot of the children that I work with will internalize their anxiety and they will go more into that kind of shutdown [01:25:00] state. But it's very, very important to be, you know, again, aware of the individual that you're working with, individual, um, You know, responses to anxiety and how we support that is very, very important.

[01:25:15] Now. The first one on here is, you know, Don't personalize it. Okay, if you get told to f off if someone says they hate you Um, they hope they never see you again, you know, try and remember that is coming from a place of anxiety um They may not mean it. They may mean it in that moment, but they may not mean it all the time.

[01:25:34] And, you know, I think not taking it personally is really hard to do, um, because we're all human being, but actually, you know, if you take it personally, then it could affect your relationship with them. You certainly cannot. bear a grudge, you certainly cannot bring anything over to the next day. You know, it's like, you know, what, what I have found when I've had my very difficult sessions with PDA is, is often they're very [01:26:00] remorseful the next time they, they feel very sorry.

[01:26:02] And I will just say, Oh, it's fine. Like. Thank you for apologizing, but you know, I know you were just having a really bad day. Um, we must certainly not, you know, use any sanctions or threats when someone is feeling anxious. You know, if I was running late to something and someone said, oh, you need to get here in the next 10 minutes or we're going to cancel your training today and leave a bad review on your website, that would make my anxiety go through the roof.

[01:26:28] So it's exactly the same with a child who's anxious. You can't. You know, you just can't use those threats. You never shout. I hope none of you would ever shout in a school setting anyway. Um, but yeah, remembering how sensitive the PDA is anyway to tone of voice. When I ask my PDAs, who are the teachers you don't like very much, they always say are the ones that shout.

[01:26:51] You know, they're so heightened that it just sounds incredibly severe to them. So, try and stay calm, you know, calmness is [01:27:00] contagious. The more calm you are, the more calm the people are around you. But the same is, the same can be said with anxiety. I think if you don't feel that you can stay calm, then there's no shame in saying that you need a break and having a change of face.

[01:27:16] I've mentioned this word so much, but it's so important to empathize and validate, like when someone's feeling angry, you know, I can see you're feeling really angry about this. Yeah, I think I'd be really angry too. I'm not surprised you feel like this. You know, you need to validate how they're feeling. Um, distraction and humor can work really well.

[01:27:33] You, you, you have to find the right time and the right moment to do it. Um, but certainly some of the children that I've worked with. Humor is a brilliant way of diffusing their anxiety. Um, do not try and negotiate when someone is in crisis. You know, the more anxious you get, the less you're able to process, the less cognitively able you are.

[01:27:57] So having too many... [01:28:00] Instructions, having too much information to process when you feel very anxious is actually very, very difficult and actually could send the person further into crisis. You do need to be incredibly flexible with someone with PDA, and the most important one on there is about staying safe.

[01:28:15] You know, you have to keep yourself safe. You have to keep the child or PDA safe. You have to keep other children safe. Um, so always having that in your, in your mind, and that comes back to the does it really matter? The kettle analogy is one of my favorite analogies. So in the morning, when you wake up, you put your kettle on and it probably takes maybe a minute or two to come to boil, but once your kettle has boiled once, the water in that kettle will stay hot for a very, very long time.

[01:28:45] probably a minimum of 45 minutes to an hour. That's like someone who's been in crisis. It might appear that they've gone into crisis very quickly. It's probably been brewing for ages, but it will take so much [01:29:00] longer for them to come out of the crisis. Their adrenaline levels will be very high. for a long time afterwards.

[01:29:07] Now, using that similar analogy, if you've just boiled your kettle, you might do what I do, is I boil the kettle, I get distracted, then I go back in the kitchen, oh, I need to boil the kettle, and I press the on button again a few minutes later, and it will boil instantly the second time because the water in the kettle is still hot.

[01:29:23] And this is like someone who's been in crisis. If their adrenaline levels are still high and we try and take them back into a situation where they've been triggered, We try and put a demand on them. Oh, you need to tell me what happened. You need to talk about it. We need to debrief. That's like pressing the on button on the kettle again, and they could go straight back into crisis.

[01:29:43] So the two things that the young people with PDA that I work with tell me that they need. Very easy. Time and space. That is what they need. Um, now, I know that it can be sometimes difficult to find [01:30:00] time and to find space in schools. But honestly, like, it can make such a difference when they have that. So, you know, being with your safe person in a safe space is, is just so important.

[01:30:15] So, last thing we're going to talk about then, we're just going to sort of talk a little bit more about education. And, you know, Hopefully now you do have a really good understanding of why school and college and other learning environments are so difficult for PDAs. Um, back in 2018, the PDA society did a study here in the UK of nearly a thousand learners.

[01:30:39] and found that 70 percent of them were unable to access their education in a school or college. Now, that's a lot. I would love to know of the 30 percent that are in school or college, like, what phase of education they are in. I suspect a lot of them are still in our primary system. Although that 70 [01:31:00] percent is still really, really high.

[01:31:02] I do think that we need to recognize that a third of children with PDA are still in school. And I think that's really, really important, you know, because what that shows is that it can work with the right support and with the right approach. Um, there is a very high, you know, amount of school refusal in PDAs.

[01:31:24] I don't like the term school refusal. Um, we tend to use the term emotional based school avoidance here in the UK now. I think that's much more accurate. The reason I don't

like the term school refusal, particularly for PDAs, is because I don't think the PDAs are often choosing not go to school. They can't go to school.

[01:31:42] It's not a choice. They want to go to school, but their demand avoidance means that they can't. So I think school refusals are, it's an inaccurate way of, you know, describing it. Hopefully now you have got a really good understanding of just why having PDA means [01:32:00] that school is so difficult. You know, there's just all those demands everywhere.

[01:32:03] On top of that, you've got the social communication differences. You know, it's the demands of being in a playground or in a classroom with other children. Schools are often very, very challenging from a sensory perspective. You know, they're busy, they're noisy, they're loud, they can be smelly even. You know, school canteens, science laboratories, changing rooms.

[01:32:24] They're difficult from a sensory perspective. Just having a high level of anxiety means you cannot learn. You know, if you're worried about something, it's so difficult to learn, it is so difficult to focus. Autistic children will often have processing differences and different learning styles, so if you're in a learning environment and the teacher's using a lot of, um, you know, talking to teach and they're not using the visual stuff, that can be difficult.

[01:32:52] Um, the fear of failure and the friendship issues that we've already mentioned. And, you know, also those children and young people that [01:33:00] are masking, you know, you might think, oh, they're coping fine. You're not seeing behind the mask and how much they're struggling. Something that can be, uh, really, really helpful to sort of encourage.

[01:33:11] um, learning or, you know, to support learning is tapping into the student's special interest. And on this picture here, you've got, um, this is one of Eliza Fricker's illustrations from my book. You've got, um, a picture of Henry VIII. Um, so this was from when I was working with a young person. I'd go and see him in school once a week.

[01:33:32] And I got into school one day and he was having a very tricky day. And he was telling the adults that he was supporting that he was going to chop their heads off. He hated them, and he was going to chop off their heads. And I said, oh, you sound like Henry VIII. He said, who is he? I said, oh, he was a king. I said, and when he didn't like someone, I said, he basically just chopped their heads off.

[01:33:54] I said, including his wives. I said, he had six wives and he chopped two of their heads off. And this little [01:34:00] boy was like, whoa, no way. So I said to him, would you like to learn more about Henry VIII? He said, because he's my favorite king. And he is genuinely my favorite king. And he was like, yeah, okay then.

[01:34:09] So we went off to the library and we had this completely impromptu lesson all about Henry VIII, um, and his mum contacted me that evening. And she said, oh, hello, Laura. She said, um, so and so came home from school today and said that they did a history lesson with you. I said, I wasn't expecting you to do history with them because I was doing.

[01:34:28] like emotional support and she said but he absolutely loved him. I said no I didn't expect to be doing history with him either but we were able to weave in a little bit about Henry VIII maybe had some like anger problems and maybe would have been like better off, you know, talking to someone about his feelings, going for a walk in the garden, so we did manage to weave in a little bit of emotional stuff there.

[01:34:48] Um, the other picture which I absolutely love is, is the, the fox with the, um, hat on. That's Guy Fawkes, as in Guy Fawkes, and that was just another, [01:35:00] you know, interest that one of my children had, and we reenacted the whole of the Gunpowder Plot using his cuddly toys, and he found a cuddly toy fox and came up with the name Guy Fawkes.

[01:35:13] Which I thought was just absolutely genius, um, but there are some things, just some sort of notes of caution, if you're going to use these special interests, first of all, with PDA is that interest can change very, very regularly. And I myself have made the mistake of planning lessons and creating resources, which has taken me hours.

[01:35:35] on one thing and then going into school with this amazing Lesson planned and they've flipped it and gone. No, thanks. I don't want to do that today. You know, they've moved on basically. Um, the other thing that we need to be very careful of is that we don't hijack the young person's interest, you know. It could be that they've got a really strong interest about minecraft or anime or whatever it is and then if we just [01:36:00] We're gonna make all the work about those things.

[01:36:02] It's like, no, that's their thing. You've, you've taken it and you've made it into learning. And again, just to give you an example, one of my special interests is dolls, houses, and miniatures. And I have two doll houses. And I, I, I, you know, I love them. And if a friend comes around, says, oh, Laura, can we go and have a look at your dolls houses?

[01:36:22] I, I'm like, yes. This is my favorite thing to talk about. Let's go. Um. If someone came around my house and said, Hi, Laura, um, I'd like us to do a spreadsheet on Excel of everything that you've bought for your doll's houses, when you bought it, how much it cost. I'd be like, no, I'm not doing it because I have a.

[01:36:44] pathological fear of spreadsheets and Excel. I hate it. I hate it. People I work with know how much I hate Excel. Just because you're using my doll's house to talk about, make me, make me basically do [01:37:00] Excel spreadsheets. Sorry, Sue, that was the doorbell.

[01:37:08] The best way to, you know, use those special interests if you like, is just to sit and just chat and enjoy learning together. Like, The best sessions I've had with my PDAs have been when there's been like a spark of something that they are interested in, and I'm like, That sounds amazing. I'd love to learn about that with you.

[01:37:32] Let's learn about it together. Um, or get them to teach me stuff. You know, I have learned, I've probably learned as much from my PDA as, as I've taught them or facilitated for them. Um, And it's just such a lovely way to work. I had a session with one of my PDAs a little while ago, and we didn't pick up a pen, a pencil, [01:38:00] a book, a piece of paper, or anything.

[01:38:02] We just sat and chatted the whole time. And I got in my car and I thought, God, we didn't actually really do any work today. And then when I got home, I checked my phone and I had a message from the boy's mum saying, so and so absolutely loved that session with you today, Laura. He said it was the best one he's had.

[01:38:19] You know, it was just very equal, very reciprocal, just learning from each other. And I just think that's just... So important. So there's a graph that I drew which, um, somebody pointed out actually the other day that I've got my axis labelled the wrong way round. Which I didn't realise because I wasn't very good at graphs at school as well as Excel.

[01:38:42] But the main point I'm trying to make in this graph is that the progress of a PDA er will not be linear. It will not be a straight line. I mean, is any child anyway, but you will have days or weeks of accelerated progress when you're like, [01:39:00] wow, they're just miles ahead, like miles ahead. And then they might plateau.

[01:39:06] Or they might even regress a little bit and that's okay because honestly, when they're excited by learning and they're supported correctly, the progress only ever goes up. The really, really important thing for us to do when we work with PDAs is make sure that we have a very collaborative approach. So it is essential that we work with.

[01:39:31] you know, we keep the child basically in the heart. This triangle I've got on this image here is so important. You've got the child at the center. That is what should always be in the back of our minds. I think you have to have a good sense of humor to work with someone with PDA. You have to be flexible and creative.

[01:39:48] You have to be able to think on your feet and just pull ideas. out the bag. You have to be able to stay calm, even when, you know, things are difficult, and recognize that your emotional [01:40:00] regulation could really impact on the PDAs. So if you're starting to feel anxious yourself, it's much, much better, I think, if it's possible to step out and let someone come in.

[01:40:10] And, you know, I think also working with these other professionals, but also work with parents. And remember, you might be the expert in your job, but parents are the experts in their children. And where I have seen, um, the best results with PDA is, is when everybody has worked. collaboratively, but with the, with the child at the heart and bring the child in, you know, bring the child in, let them talk about what works for them.

[01:40:38] Let them, you know, respect what they're saying doesn't work for them. That's really, really important. Finally, I just want to end on a really positive slide. Um, and this is a young person that I have known now for about eight years who has given me consent. to, to share this information with them.

[01:40:57] So I started working with this young person called [01:41:00] Sophie, um, when they were about 15, um, She was diagnosed with autism when she was eight, didn't have a formal PDA diagnosis. Um, her parents read about PDA when she was about 14 and said it was like a light bulb moment. They just realized that, you know, everything that they have been doing.

[01:41:21] was wrong as a pair as parents, you know, and she went to an amazing school that were incredibly supportive of her needs. Um, even without that PD, PDA diagnosis and myself, the parents and the school work really, really closely with, with Sophie very much at the heart. And Sophie went to an academic school.

[01:41:40] She was a real masker. She was very, very kind of like well behaved in school, almost too well behaved, like she was terrified of getting into trouble, terrified of doing anything wrong, but then unfortunately would go home and, you know, the mask would come off and would result in behavior that was quite challenging for her family at home.[01:42:00]

[01:42:00] She did very well in her exams, but chose not to go to university down the kind of like traditional route. That would have been too big a demand for her at the time. So she did an apprenticeship at a degree level as an engineer. She was working for an engineering company that made ejection seats for fighter pilot planes.

[01:42:23] And she's just recently changed jobs, and she now works for an engineering company that makes prosthetic limbs. She's doing absolutely brilliantly. Um, she, as you can

see in the picture that I've got on my slide, she was awarded the Highly Commended Apprentice at the London Business Awards back in 2020.

[01:42:43] Um, and she has just written the, the afterword for my, my new book on PDA because she wanted people to know. That yes, it's challenging having PDA, but when you have the right support, you have the right people around you, there is [01:43:00] no reason at all why you, you can't become a huge success. And that's why she wants me to talk about her in, in my training because she.

[01:43:10] She just wants everyone to know that, um, and she's a real success. So finally, um, you know, there are some references and other useful reading if you want to learn more about PDA. Um, I hope you found this course helpful. I hope you found it useful. Um, and I hope that, like I do, you will be able to love working with PDAs because, you know, one of, in my book I talk about, you know, confessions and my, it starts with a confession that I used to find PDA quite frightening to work with.

[01:43:46] I didn't, wasn't doing it right. I was making lots of mistakes. It wasn't going well. But then I changed my approach. And I now genuinely love working with PDA ers, and, you know, the second confession in the book is when you, when you work in [01:44:00] education, you're not meant to have favourites, and I do, and they've all got PDA, because they're just, they're just the best to work with when, when you get it right.

[01:44:07] So I hope this has been really helpful in giving you an insight into PDA. and an insight into working with, you know, how to work with PDA is because I hope like, like me one day, or if they're not already, they will become your absolute favorite, um, learners to work with. And thank you, Laura. Honestly, every slide, every bit of information was just.

[01:44:31] Invaluable. There were so many amazing insights, but I think coming from love and loving the children, I think the only thing I'd add is always to share with the parents, what you love about their child. Cause they get so much negative from other judgment. And I find if I build that relationship with the parents, it also helps my relationship with the child.

[01:44:51] And so I just can't thank you enough for sharing your wealth. Of knowledge, expertise, stories, and also having, [01:45:00] you know, making it humorous for us as learners too. So amazing. Absolutely amazing. Thank you for having me.