A general information leaflet on PDA can be obtained from the National Autistic Society website 
www.autism.org.uk

More comprehensive education and handling guidelines are available from the Autism Education Trust. These can help you to better understand and manage a child with PDA in the classroom environment. Visit the PDA Society website resources area to download a copy.

The Elizabeth Newson Centre (part of NORSACA) provides a range of conferences events and training for both professionals and parents. It also holds a publications list that has a number of papers on PDA. Details of these are available from their website www.norsaca.org.uk

A parent has developed some excellent YouTube videos which may be useful viewing for teaching and support staff in schools: www.youtube.com/user/bluemillicent

Is there a child in your class / school who has recently been diagnosed with PDA?

Do you need information and handling guidelines to help with managing a child with PDA in the school environment?

The PDA Society website and forum are a source of help, support and information.

There is an area of the PDA Society forum (formerly the PDA Contact Group) which is specifically for professionals and is not accessible to parents. We encourage parents to use this resources and share ideas, thoughts and tips about PDA.

The PDA Society website and forum www.pdasociety.org.uk

A Teacher’s Guide to Understanding Pathological Demand Avoidance Syndrome (PDA)
**Some Facts About PDA**

PDA is a neurodevelopment disorder which is increasingly being viewed as part of the ‘autism spectrum’ but requires very different management.

PDA is a lifelong disability characterised by obsessively resisting the everyday demands of life. They often spend longer working to avoid the demand than they would have done by just accepting it!

Extreme mood swings are a common feature and they are often described as a ‘Jeckyll and Hyde’ character.

When children with PDA feel in control they are often enigmatic and charming but when they feel they are not in control, they experience high levels of anxiety which often leads to extreme and challenging behaviour.

Children with PDA often appear to have better social, interaction and communication skills than other children on the autism spectrum but lack depth in their understanding and are led by their need to control.

Children with PDA can have highly developed role play and social mimicry. They may adopt different personas and often use this as a strategy to avoid demands.

Children with PDA can show obsessive behaviour which may be focused on a person (e.g. another child) or on objects.

Language delay is often a feature of the child with PDA, but often children ‘catch up’ later. They have more fluent use of eye contact and better conversational timing than other children on the spectrum.

**Things to remember**

Children with PDA are not naughty or overtly malicious, although they are manipulative in the way they avoid demands. It is important to remember that underneath their robust exterior lies a very fragile and vulnerable ego.

Pushing a child with PDA to obey demands will often lead to high anxiety and ‘meltdown’ behaviour. At this stage the child needs REASSURANCE and not blame, or being made to feel ashamed. They cannot help this behaviour.

Children with PDA may be compliant and tolerant at school, and then behave much worse at home. It is important for teachers to realise that this is not due to less competent handling, but simply because they have reached their tolerance limits and need to ‘let their hair down’. It is important to communicate well with parents.

**Tips for Managing in Class**

A classroom is filled with DEMANDS, which often leads to high ANXIETY levels in the child with PDA. It may help to give instructions in a NON CONFRONTATIONAL style; and you may need to practice ‘asking without asking’ e.g. “I wonder if someone might be able to help me do this…….”

Try to present CHOICES, so the child feels in control of the situation.

Use a neutral tone and body language, sometimes standing behind the child.

Have a SAFE space with nothing in it. Have areas where the child can go to himself. Restraint should always be a LAST RESORT.

When a child ‘melts down’ use quiet tones, give lots of REASSURANCE even if they are swearing obscenities at you and lashing out. Try to think of it as a PANIC ATTACK.

Children with PDA will have poor spells when demands must be decreased accordingly and VICE VERSA.

Some children with PDA avoid by using more subtle techniques, and if not recognized and acted upon then this will be an obstacle to their learning.