

Check 2 for Communication and Behaviours – highlight any that fit for your child

Name _____ Date _____

- appears to have a pervasive developmental disorder
- functions much better alongside parent/ main carer in familiar, quiet environment
- is highly aware and sensitive
- has obsessive demand avoidance
- has no sense of responsibility
- may show slight – marked semantic pragmatic difficulties (takes things literally, poor concepts, rudeness)
- makes good eye contact, usually, but may avoid at times
- plays creatively
- major difficulties were masked in his/ her early years
- has superficial sociability but behaviour is uninhibited e.g. unprovoked aggression (or withdrawal)
- is very socially manipulative (this is usually neurological, not character)
- resists the demands of everyday life, at home and/ or in school
- has apparent lack of social identity and no sense of pride
- obsessions are along the lines of blaming someone else when something goes wrong and hanging onto this blame and harassing someone they 'dislike'
- is very difficult to teach despite intelligence
- can only learn 1-1, but even this will be a high 'resistance' area
- needs full-time 1-1 to control disruption in a class – but will 'resist' this - or may withdraw in class
- clumsy and physically awkward; lack of physical confidence around other children
- has very marked lability of mood; can be quite OK one minute and full 'rage' (or withdrawal) the next, over a very small incident, pressure or conversation; playing – pushing / hiding in a split second
- goes over the top in protest or fear
- emotions sometimes seem like an act
- a lot of life is presented like an act
- lack of refined sense of self, and hence does not feel responsible for own actions
- all play and activity must be totally on his/ her terms; can't do other's paths
- has to follow own impulses, led by need to control
- changes mind instantly if he/ she suspects someone is taking control
- totally denies the obvious
- re-offends whatever is explained
- cannot/ will not apologise because he/ she denies
- is not concerned with what is fitting for his/ her age
- inappropriate behaviour in shops/ classroom (e.g. kicking. screaming)
- prefers adults but does not recognise their status
- praise, reward, reproof, punishment are ineffectual and behavioural approaches fail, because this is a neurological dysfunction and health problem, not a behaviour problem
- if corrected in an authoritarian way, will take this out on someone else later or be self destructive
- can resist social demands by lashing out, pushing forcefully, screaming or swearing
- cannot sustain the pressure of 'good' behaviour

These criteria are collected from various sources and validated by my daily experiences working with children over many years, as a teacher, learning support teacher, SENCO and deputy head of a hospital school, and latterly running NatureKids, for those kids who couldn't cope in school/ home. A high number of the above highlighted indicate a Pathological Demand Avoidance type profile. Much written about PDA is negative and depressing, but I find these kids to be highly aware, extremely intelligent and with understanding, compassion and the right support, they are the most powerful Pioneers of our time.