

Making it a success!

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*Talking to Families
About Diagnosis*
Executive Functioning
Making Choices
PDA vs ODD



FREE

Downloadable
pdf

Starting the Diagnosis Conversation

Starting a conversation with a family about their child's development is one of the most important — and most nerve-racking — things I can do as an educator. When I get it right, it opens doors to support that can genuinely change a child's trajectory. When I get it wrong, I risk losing the family's trust at the exact moment they need it most.

My role is clear — and it is not to diagnose

As an educator, my role is to observe, document, and advocate. I am not there to label, diagnose, or suggest what a child might have. I am there to bring my documented concerns to a family's attention in a way that keeps us working together — as a team, for that child.

Why Starting Early Matters

Assessment waiting lists in the public system can be 18 months or longer. Private assessments can cost between \$1,500 and \$4,000. There is no cost to be on a wait list, and families can cancel if they change their mind. Every month I delay the conversation is a month of potential early support the child does not receive.

8 Top Tips

1. Choose the right environment. I avoid the principal's office at all costs. Meeting families in the classroom, during yard duty, or somewhere they feel comfortable immediately reduces defensiveness. Some of my most productive conversations have happened informally — because the parent felt relaxed enough to be honest.
2. Lead with positives — always. Before I raise any concern, I prepare at least two or three genuine, specific positive things about this child. The ratio that works is four positives to every one concern. I never skip this step, no matter how pressured I feel.
3. Use a reflection exercise. I ask everyone in the meeting to take a moment and write down three things going well and three challenges. We share the positives first — every time. It resets the room.
4. Use collaborative language. I frame myself as someone who needs help: "I really want Riley to get the most out of my classroom, and I feel like I might be missing something. Can you help me understand what you see at home?" That changes the entire dynamic.
5. Listen actively. Parents know their child better than anyone. If I ask genuine questions and truly listen, I get information I would never have thought to ask for — a recent house move, a lost friendship, a period of poor sleep.
6. Ask about settings beyond home. If a parent says they do not see the behaviour at home, I ask: "Do you take them to birthday parties? The supermarket? Playgrounds?" Often the answer reveals that those places have been quietly stopped. That avoidance is itself a significant red flag.
7. Have a next step ready. I never leave a meeting without a clear action. If I am raising the possibility of an assessment, I come with names of psychologists or paediatricians I have heard positive things about from other families.
8. Create a written trail after every meeting. I email a summary of what was discussed, what each person has agreed to do, and when we will check in again. If a family declines assessment, I document that too. It protects everyone.



episode how to have the hard conversation

listen now and download the free step visual talking to Families About diagnosis

suelarkey.com.au/talking-to-parents-diagnosis/

8 STEPS FOR:

TALKING TO FAMILIES ABOUT DIAGNOSIS

A Step-By-Step Guide for Educators

1

COME FROM A TONE OF CARING FOR THE CHILD

Tone is everything. The first few sentences and gestures you make are so important to the success of the meeting.

2

START WITH POSITIVES

Share positive observations or bring examples of their great work. Don't just jump into your concerns about the child.

3

AIM FOR AN ASSESSMENT.

Many families don't know educators can't diagnose children.

4

COME PREPARED

Listen to podcast episode 240 for indicators/red flags to observe and discuss.

5

SHARE YOUR OBSERVATIONS

Share your observations of the child in your setting and ask the families whether they have seen the same

6

COLLABORATE

Ask families what they think! Be open-minded, and value what they have to say.

7

PROVIDE SOLUTION PATHS

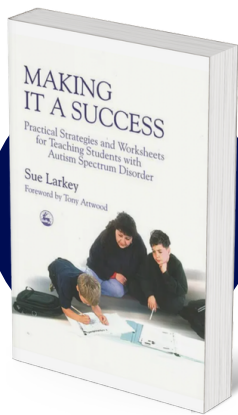
Have a list of recommended professionals on hand. List available in episode 240.

8

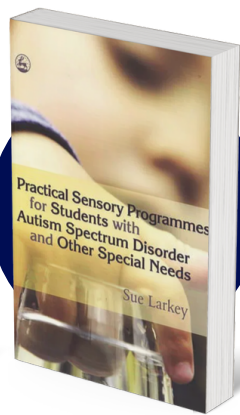
PLAN NEXT STEPS

When the meeting is done, you should have come up with a plan they have agreed to and a date to review this.

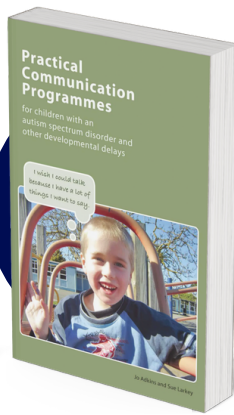
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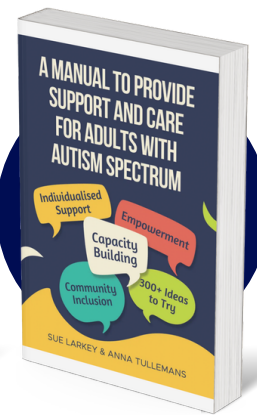
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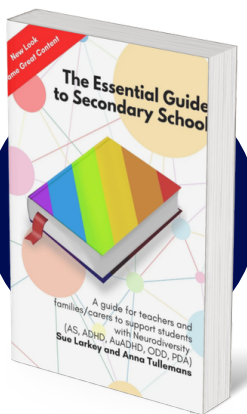
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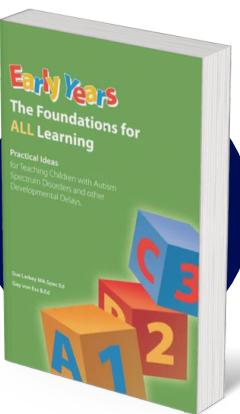
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The Essential Guide to Secondary School



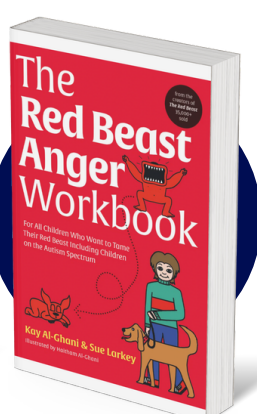
The Early Years: The Foundation For All Learning



Teacher Assistant's Big Red Book of Ideas



Teacher Assistant's Big Blue Book of Ideas



Red Beast Anger Workbook

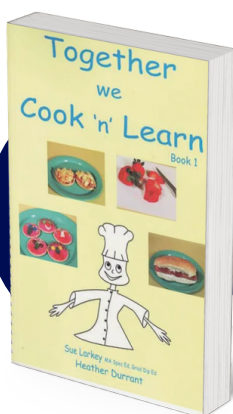


Photo Cook Book 1

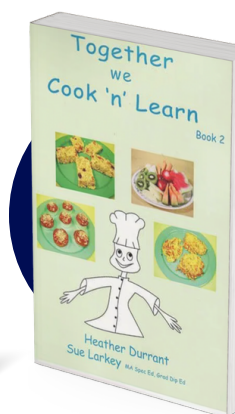
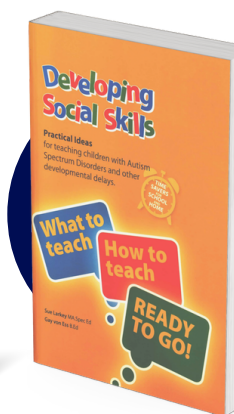
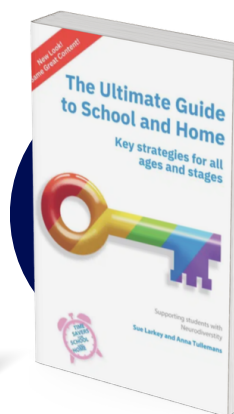


Photo Cook Book 2



Developing Social Skills



The Ultimate Guide to School and Home

Executive Functioning & Autistic Inertia

Executive functioning is the brain's "admin team" — the part that handles planning, organising, prioritising, emotional regulation, working memory, task initiation, flexibility, and impulse control. It underpins everything: behaviour, learning, social skills, and engagement. When this system is under strain, what looks like laziness, avoidance, or defiance is almost always something very different.

What is autistic inertia?

Autistic inertia is what happens at the moment a task is due to start or finish. It is not a choice. It is the haze between thought and action. Starting a task is hard. Finishing a task is hard. Shifting between tasks is hard.

Autism + Environment = Outcome

For Neurotypical students, filtering out background noise and sensory competition happens with relative ease. For many Neurodiverse students, that filtering is the work — before any learning has even begun. Think of an open-plan classroom: glass walls, competing displays around the board, multiple adults talking at once, eighty children in a shared space. Blocking all of that out requires constant, and often exhausting, mental effort. When we change the environment to make it less overwhelming, we can also change the outcome.

8 Top Tips

1. Change "should" to "could." The word "should" increases demand and anxiety. "Could" invites rather than commands. "You could try starting with question two" feels very different to "you should start with question two."
2. Provide a starting prompt — never a blank page. Task initiation is genuinely hard. A first sentence, a template, or a partially completed organiser breaks through the initiation barrier before anxiety has a chance to take hold.
3. Use "when and then" phrasing. "When you finish this section, then you can choose your next activity." Clear sequence, reduced overwhelm. The child knows what comes next.
4. Introduce a Tomorrow Box. A small physical box on the desk. If a task feels impossible today, it goes in the box. It is not gone, it is not forgotten, and the child is not failing. Almost all students come back to it the following day.
5. Keep spare supplies near the door. Forgetting materials is an executive functioning difficulty, not defiance. Having pens and paper available removes the shame, the disruption, and the shame spiral that often follows.
6. Signal "stopping for now" — not "stop." When I say "stop," many neurodiverse students hear "never." I now say: "We are pausing for now — you can come back to this at 2pm." That one language shift prevents enormous distress at transitions.
7. Give a five-minute warning before transitions. For many students with ADHD, this is when their best work happens — the impending transition helps them complete what they are doing before shifting focus.
8. Minimise competing visual displays around the board. If I want students to look at the board, I make the board the only thing on that wall. Every poster or display around the focal point is a competing demand on a system already working at capacity.

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Interested in learning more about executive functioning and the strategies you can use to help your students? Sign up to [earn eadles executive functioning course usually \\$70](#), but use the coupon code to purchase today for [\\$0](#) [before April 30th](#)

TOP 10 TIPS FOR SUPPORTING STUDENTS WITH

Executive Functioning

- 1** Future events can affect present functioning. The anticipation of a task at 2 pm can dominate thoughts from 9 am onwards.
- 2** Students freeze on entire assignments when one part feels overwhelming. (Autistic Inertia)
- 3** Being in 'power-saving mode' isn't laziness – it's preparing for upcoming demands.
- 4** If you're in fight or flight due to anxiety, you can't access the prefrontal cortex for executive functioning.
- 5** A student may appear calm in class but could be masking an incredible amount of effort.
- 6** If something feels like a 'nope' today, it doesn't mean 'nope' forever – maybe try again tomorrow.
- 7** Students keep things visible because they worry they will forget them if packed away.
- 8** Students may reserve their meltdowns for home, as it is a safe space.
- 9** Setting homework at the day's end competes with social anxiety, sensory overload, and processing—no wonder it gets lost.
- 10** Just getting to school can take 50% of the students' energy for the day.

Listen to Podcast Episode 275:

Executive Functioning Skills for Neurodiverse students: "Beyond just try harder"

AVAILABLE AT: suelarkey.com.au

Online Course on Executive Functioning

- Educators Guide to Executive Functioning Course
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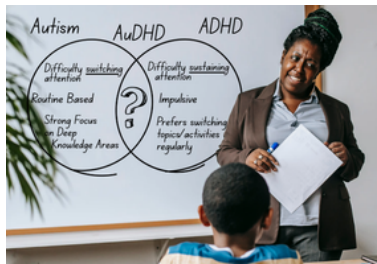


ONLINE COURSE

Understanding AuDHD: Teaching & Supporting Students with Autism and ADHD Co-occurrence

Pathological Demand Avoidance (PDA) in the Classroom: Understanding Strategies for Educators

Educators Guide to Executive Functioning



PRESENTER

Laura Kerby
(Teacher & Grad Dip Psychology)

Laura Kerby
(Teacher & Grad Dip Psychology)

Sue Larkey (Teacher) & Dean Beadle (Autistic Adult & Education Consultant)

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- ✓ Understanding what AuDHD is and how Autism and ADHD overlap
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- ✓ How executive functioning differences affect organisation and attention
- ✓ Strategies for supporting motivation, novelty seeking, and hyperfocus
- ✓ Understanding sensory needs and how they fluctuate day to day

- ✓ Understanding of Pathological Demand Avoidance (PDA)
- ✓ What are Demands and How to Avoid PDA & Anxiety: Key Strategies
- ✓ Difference between PDD, ODD, and ASD
- ✓ Practical Approaches and Strategies to Support Learning
- ✓ Supporting and Understanding Behaviour PDA and Education: How to Make it Work

- ✓ What is Executive Functioning and Autistic Inertia
- ✓ Myths and Misconceptions about Executive Functioning, ADHD & Autistic Inertia Time Management in the Classroom: Why it's so difficult and how to make it easier.
- ✓ Key Strategies for Supporting Executive Functioning at School & Home
- ✓ Classroom Strategies for Building Executive Functioning Skills
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Why Choice-Making Is So Hard for Neurodiverse Students

Choices are meant to empower students — to build autonomy, increase engagement, and encourage exploration. But for many neurodiverse children, even a simple “beach or bush?” can trigger anxiety, shutdown, or meltdown. Understanding why this happens is the first step to offering choices that actually work.

The core challenge

Choice-making requires problem-solving and the ability to weigh up consequences. What if I make the wrong choice? What if I choose something and then hate it? What if there is no way back? For neurodiverse students, these are not abstract worries — they are genuine and overwhelming anxieties. The higher the anxiety, the lower the problem-solving capacity. A student who chooses confidently on Monday may be completely unable to choose on Wednesday.

Why Sameness Is Not Stubbornness

When a student insists on the same activity, the same food, or the same seat every single day, I now understand this differently. They know how that activity works and how it ends. That predictability is genuinely calming. Unknown activities are unpredictable — and unpredictable can feel threatening.

I always lower anxiety first. I make sure the safe option remains available. Once a student feels safe and settled, I am consistently amazed by how much they begin to explore on their own.

The Question I Ask Before Offering Any Choice

“What is the educational outcome? What am I actually trying to achieve by giving this student a choice right now?”

If a student is always choosing the same thing from a shelf of twenty options, the choice is not increasing engagement — it is just producing the same outcome, day after day. That is when I pull back to two options, and I make them genuinely different from each other.

6 Top Tips

1. Always limit to two choices. Never open-ended. Two concrete, clearly different options dramatically reduce cognitive load and decision fatigue.
2. Make the choices genuinely opposite. If both options are equally appealing, the student still has to choose between two things they like — which is just as hard. One option should be something they clearly prefer; the other should be an easy, obvious no.
3. Use visuals. Display the two choices as real objects or photos, not just verbal instructions. This is especially important for students with working memory difficulties who cannot hold the options in mind while trying to decide.
4. Model making the wrong choice. Say out loud: “I’ve read two pages of this and I don’t like it — I’m going to put it back.” This teaches that changing your mind is safe and that wrong choices are recoverable.
5. Never say “later” or “no” without a specific time. “No” means “never again” to many neurodiverse students. “Later” is meaningless without a clock. I always say: “Not right now — you can have that at 3pm.”
6. Use parallel play to introduce new activities. Sit beside the student doing the new activity. Do not ask them to join. Just be there. They will come when they are ready — and when they do, it is entirely their choice.

Why Choices Can Be Hard

(AS, ADHD, ODD, PDA)

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AS/Autism



UNCERTAINTY & ANXIETY

- "I don't know" or freezing
- Worry about "wrong" choice
- Shutting down

What Helps:

- Predictable routines
- Visual choices
- Two clear options

PDA



CHOICE FEELS LIKE A DEMAND

- "I don't know" or freezing
- Worry about "wrong" choice
- Shutting down

What Helps:

- Indirect language
- Playful approach
- Collaborative tone

ADHD



IMPULSIVITY & OVERLOAD

- Quick, impulsive choices
- "You choose" or indecision
- Regret after choosing

What Helps:

- Two choices
- Time limits
- Visual menus

ODD



POWER STRUGGLE

- Rejecting both options
- Arguing defiance
- "You can't make me!"

What Helps:

- Build connections
- Offer real choices
- Avoid power battles

Remember: Behaviour looks similar, but the REASON is different.

AS/Autism:

Uncertainty

PDA:

Demand Avoidance

ADHD:

Executive Overload

ODD:

Control Battle

PDA vs ODD — Understanding the Critical Difference

Pathological Demand Avoidance (PDA) and Oppositional Defiant Disorder (ODD) are two of the most frequently confused profiles in education — with real consequences for the students involved. Getting this distinction right changes everything about how I respond.

The simplest way to remember it

PDA: Can't — anxiety-driven. The student desperately wants to cooperate, but the anxiety makes it genuinely impossible.

ODD: Won't — defiance-driven. The student is not anxious about the task. They are refusing on the basis of authority.

Laura Kerbey's Spider Analogy

Imagine someone asks me to hold their pet spider — harmless, just needs holding briefly. Even though I want to help, even though I know it is safe, my anxiety makes it genuinely impossible. I cannot do it. That is PDA: can't, due to anxiety and fear, even when the person wants to comply.

Now imagine the same request to someone with no fear of spiders whatsoever. They fold their arms and say: "Hold your own spider." No anxiety. Pure defiance. That is ODD: won't.

One critical detail: a PDA student often desperately wants to do what they have been asked. Their avoidance comes with real distress. An ODD student does not particularly care whether the adult is disappointed.



"The antidote to anxiety is trust."

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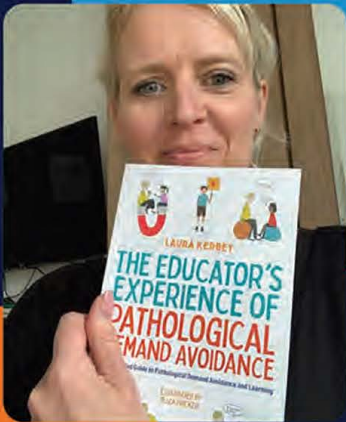
Interested in learning more about [A Sign up to Laura Kerbey's amazing course on Autism](#) A usually [\\$70](#), but use the coupon code to purchase today for [\\$0](#)pires April 15th

Laura Kerbey's

10 TOP TIPS FOR SUPPORTING STUDENTS WITH

Pathological Demand Avoidance

- 1 Build a relationship
- 2 Have an exit strategy or code word for when anxiety gets too much.
- 3 Let individuals plan their own routines for the day
- 4 Remove the demand of writing
- 5 Connect by chatting about areas of interests
- 6 Let them lead
- 7 Think of yourself as a learning facilitator – not a teacher or TA.
- 8 Always look outside the box and look for “natural” learning opportunities
- 9 Mold the curriculum around the learner (not the other way around)
- 10 Recognise the signs of anxiety and pull back when you see them rising



Best Selling Book

“The Educator’s Experience of PDA”

[AVAILABLE HERE](#)

Listen to Podcast Episode 214:

The Educator’s Guide to Pathological Demand Avoidance (PDA) with Laura Kerbey

[AVAILABLE HERE](#)

Online Course

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