



PDA in girls is frequently missed, misunderstood, or misdiagnosed. This guide explains why, and what to look for. Whether you're a parent noticing something doesn't quite fit, or a clinician wanting to assess more accurately — this resource is for you.

Why PDA Looks Different in Girls

Girls with PDA are often exceptionally good at masking — concealing their distress behind socially acceptable behaviour. At school, they may appear compliant, even high-achieving. At home, the mask comes off completely.

This home-school split is one of the most consistent features of PDA in girls. Schools often don't believe parents. Parents are exhausted and confused. The child falls through the gaps.

How Masking Shows Up in Girls

- Appearing 'fine' or even socially confident at school
- Mimicking peers and copying social scripts
- Using humour or charm to deflect and avoid demands
- Appearing helpful or compliant to control the environment
- Collapsing entirely after school — meltdowns, shutdown, refusal to engage

Signs of PDA That Are Commonly Missed in Girls

Demand Avoidance That Looks Like Stubbornness

For girls, demand avoidance often looks like negotiating, redirecting, or controlling — not outright refusal. A girl with PDA might turn every request into a project she leads on her own terms.

Social Motivation That Masks the Profile

Many PDA girls are deeply motivated by social connection — unlike some boys with autism. This social drive can obscure the PDA profile, especially in younger children. She desperately wants friendships but finds them exhausting and overwhelming.

Internalised Meltdowns and Shutdown

Boys with PDA often externalise — big meltdowns, visible aggression. Girls more often internalise — anxiety, somatic complaints, self-criticism, shutdown. This is harder to see and easier to dismiss.

- Frequent stomachaches, headaches, fatigue with no medical cause
- Refusal to attend school that escalates gradually
- Withdrawing from friends without explanation
- Heightened anxiety around transitions or changes
- Perfectionism and intense fear of failure



The PDA Girls Diagnostic Gap in Australia

Research consistently shows girls receive autism diagnoses later than boys — often by several years. PDA is even less well-recognised in girls. Many are first diagnosed with anxiety disorder, ADHD, ODD, or borderline personality disorder before a PDA profile is identified.

If a girl has received

If a girl has received multiple diagnoses that haven't fully explained her experience — or if diagnoses helped but didn't capture the demand avoidance picture — PDA is worth exploring.

What Parents Can Do

Document the Home-School Split

Keep a simple diary of what school reports versus what you see at home. This contrast is diagnostic gold. It's not evidence that the child is manipulating — it's evidence of the masking toll.

Prepare for the Assessment

- Request a clinician with experience in autism in girls, not just autism generally
- Provide your own written description of the home presentation — not just what school observes
- Mention demand avoidance specifically, using that language
- Include video if possible — brief clips of home behaviour are useful evidence
- Note any previous diagnoses and why they felt incomplete

Trust What You're Seeing

Parents of PDA girls are frequently told they're overreacting, that their daughter is 'fine at school', or that the problem is parenting. These responses are wrong, harmful, and unfortunately common. Your observations at home are valid and important.

What Clinicians Can Do

- Assess in multiple contexts — not just one clinical setting
- Weight parent report heavily, especially where it differs from school report
- Ask about demand avoidance specifically, using relatable examples
- Look for the masking presentation — girls who appear competent but are struggling enormously
- Consider PDA profiles before defaulting to anxiety disorder or ODD diagnoses
- Ensure assessment captures the full profile, not just social communication



Key Takeaways

1. PDA in girls is commonly missed due to masking and internalised presentations
2. The home-school split is a consistent and important indicator
3. Girls often receive other diagnoses first — PDA may not be on the clinician's radar
4. Parent observation is critical — it must be weighted appropriately
5. Early identification protects mental health and reduces the toll of years undiagnosed

Helpful Tip

For more resources on PDA in girls and women, visit pdaaustralia.com.au/girls — including downloads, support links, and connections to Australian PDA communities.