

Interview with Dr Tony Attwood

Welcome, thank you so much for joining me on this first live chat seminar for 2012. My name is Sue Larkey and my aim in the next 45 minutes is to give you lots of information to make a difference. I want you to get the most out of this call, so please print out the handout document and I'd recommend having a pen and highlighter ready to take notes. Just go to www.suelarkey.com to download the handout document. After the call I'll be on Facebook to take your questions and for people to discuss key points together. If you haven't already, to be able to join in the Facebook discussion, you just need to 'like' me and if you just go to Sue Larkey and you'll see one on Facebook that says 'teacher' and then you can join in the conversation after.

Tonight, I'm interviewing Dr Tony Attwood whose books are a must for anyone who has an interest in understanding ASD. Tony is a clinical psychologist who is based in Brisbane, however spends a large amount of time all over the world presenting on ASD. Tonight, we are very lucky to have him share with us his incredible knowledge and expertise. So welcome Tony, I really appreciate you joining me.

Thank you Sue, I'm so delighted with that introduction. I'd like to meet that person.

Ha ha. Tony what I'd love you do is just start off with a brief overview of what ASD is.

Okay, I'll give the formal one but my one-sentence view of ASD is that it describes someone who's found something more interesting in life than socialising. But when we look at what is officially autism spectrum disorder, we recognise it's neurodevelopmental. Not caused by bad parenting; brain is wired differently. And we look, as clinicians, at identifying five dimensions. The first dimension is the ability to understand people. That intuitive ability to read a face, make friends and relate. From, shall we say, those who are severely affected by autism that find people so confusing and aversive they'll do everything that they can to avoid them, to those with Asperger Syndrome who would like to have friends, or have a relationship, but are unsure of some of the aspects of friendship and relating to people and resonating with people that is elusive for them despite their intelligence. The next dimension is communication, that ranges from those who unfortunately for various reasons are unable to speak with all its associated frustrations, to those who can speak, in fact can talk. But then it's the art of conversation, being very pedantic and very unusual prosody such that the person has a wonderful vocabulary but at the end of the conversation you feel, hmm, that was different. Third dimension is learning profile. That is a different way of learning. For example, some of the young children are either naturally talented in learning to read and are hyperlexic or they're dyslexic. There are the children who are visualisers and they learn by demonstration. There are those who are verbalisers and they learn by reading a book. So what's very important is the learning profile associated with autism and Aspergers is different, teachers and parents need to know that. They can acquire great skills but it's a very uneven learning profile. One moment they'll entrance you with their abilities, next moment you think, wow I thought you would know that. The next dimension is sensory sensitivity. Now interestingly this will become one of the diagnostic criteria in DSM5 next year. And that is a sensitivity to the sensory world. Now that can include noises that are unbearably loud, aromas, textures, light intensity, tactile touch, all those sorts of things. So the sensory world can be overpowering. But sometimes there can be a lack of sensitivity to pain or temperature so we

assess the dimension of sensory sensitivity. The fifth dimension is perception and expression of emotions. And the one thing those with ASD are really good at is worrying. Now when we look at the emotions, there can be high levels of anxiety that leads to someone who's very controlling, routine and rituals to alleviate anxiety, and also emotional explosions to sort of cleanse the system. But also low self-esteem from feeling different can lead to depression and that frustration in life can have issues of anger management. But there's one aspect of autism spectrum disorder that's important clinically, and that is the dimension of love and affection. And for some with ASD may be confused about the needs for others, especially parents or partners, in terms of giving affection, when to receive it, how to receive it, what to do, all those sorts of things. And so for those with ASD, it may not be a hug it's a squeeze and why are you squeezing me and how will squeezing me solve the problem? And when they're young they learn don't cry because if you cry people squeeze you. Now the sixth dimension is movement disturbance, and that ranges from those who have quite significant motor restlessness, motor coordination problems and sometimes a form of movement disturbance that means they can't get their brain into gear with their mouth to talk. Despite inner language and intellect, they just can't form the words in a motor sense. To those with Aspergers who have problems with handwriting, ball-catching skills, etcetera. So those are the six dimensions that define autism spectrum disorders – from my clinical experience – and we would assess where on each on those dimensions that child or adult is and may progress. Okay Sue?

Fantastic Tony, I think that's an amazing explanation that you've given there. And for many people who want to understand more about that I think your book, *Asperger Syndrome, a Guide for Parents and Professionals*, goes into that plus more detail. And for me, the really valuable resource of people that want to get their head around that Asperger syndrome and all the things you've gone through and that incredible diversity within the spectrum. So thank you for that explanation. Tony, one of the challenges that schools and families often want to know is, how do you motivate these kids? So what would your recommendation be to motivate a kid on the spectrum?

It's a very good question Sue. First of all, typical kids are motivated to please mum, to please the teacher, to make someone's day. That altruistic desire to make someone happy. Little infants will do what they're doing again and again just because mum smiles and is so pleased for what you've done. Now that, shall we say, interpersonal enjoyment in other people's happiness characteristic is less powerful in those with ASD. But we do find there are other motivators. One is completion, closure, no errors, I've done it. The intrinsic reward of success. There it is, no errors, I can now move on to another activity. It is complete. And that sense of satisfaction and closure is very powerful for those with ASD. The second motivator is in terms of a strong desire to have recognition of the person's intellect. So when I'm giving a verbal reward, I tend not to say, oh I'm so pleased, you've made my day, I'm so happy that what you've done, let's share that with your brother or sister, let's share that with the rest of the class, they'll be so happy. Is actually, wow that shows me how intelligent you are. That's a measure of your wisdom. So I appeal to intellectual vanity, how smart they are, how intelligent they are, rather than their desire to please people. And what I have found though is once the person with Aspergers is motivated, oh they will be brilliant. But if they're not motivated, got ADHD and they become disrupted by everything. So motivation is crucial, they can apply themselves to excellence. If they're not motivated, they become a real problem.

Absolutely, and I think that you were talking about the need for completion and success really leads into what so many schools and families see that this absolute fear of making mistakes. So that other children are happy to get eight out of ten and they think they've done okay but for this child, that fear can override even them wanting to have a go. So how do we address of making mistakes?

It is a very powerful one and they tend to catastrophise or hit the panic button. I mean in that, what we call performance anxiety, fear of making a mistake, their adaption may be don't try. Because if you don't try, you don't make a mistake, you don't feel stupid, people don't think you're stupid and there's an abhorrence of making mistakes. Now, the interesting thing is they are very good at spotting mistakes and if you make a mistake, they are the first person to point out your mistake and they will criticise you. But when they make a mistake themselves, they freeze or become agitated. So there's a fear of appearing stupid and being ridiculed by peers. They may see a sensitivity to this that advice is perceived as criticism and those with ASD are not good at taking advice. They've got to do it their own way first. Now that fear of failure leads to a need to be right and that also means that they like those subjects where you are right. Like mathematics. Eight plus eight equals sixteen. Correct answer. Not twelve if you're in a cranky mood or twenty if you're in a generous mood. So they like those subjects where there's a degree of certainty and I am proven correct. Now this may mean that they may criticise others to feel good about themselves in terms of their success, I can show off my abilities. I can have admiration and respect for my intellect. And so they may point out errors in others to demonstrate intelligence. Not to ruin your day, but to show how good they are. Now, when you've got this characteristic the question is how do you cope with it? Well they have a tendency to be a perfectionist and see themselves as an adult when they're a child, not a kid. So they expect an adult level of competence. Now they're also, however, cognitive style of noticing detail and errors. Psychologists call this weak central coherence. I haven't got time to explain it, have a read of the book if you want to know what those strange words mean. But that leads to a sense of pessimism that in life they are over-dwelling on mistakes, errors, etcetera. Now when an error occurs they have what we call a one-track mind, they can't think what else to do and there's a limited ability to tolerate frustration. They can't understand why it's not working and hit the panic button and their frustration volume control is an on-off switch at maximum volume. If in doubt, hit the panic button. Now this is a major problem and we have to introduce the person that when you make a mistake it's not a disaster, it's good news because you've got information and you now know what to do. And if you want to intellectual strength, it's like physical strength. Physical strength is by exercise, intellectual strength is by making mistakes and learning from it. And what the smart thing to do is give it a try. So we'll use Carol Gray's Social Stories to explain that an error is not a disaster, people will not think you're stupid, but it gives you data, information and allows you to learn and show your intelligence. So that's how we look at coping with mistakes.

Absolutely, and I think Tony for teachers listening, to start off the year saying to the whole class, I want to see mistakes. Because when I've had kids with Aspergers in my class I sort of say to everyone – nearly do the Carol Gray stuff with everyone – that we're all here to learn and I want to see mistakes. And really model that, not just with the Aspergers kids in my class, but the other kids, then I notice that the Aspergers child just relaxes and doesn't hit that panic button. It doesn't mean they don't panic a little bit when they make a mistake but they tend to get, okay that's what I'm here for. So I think particularly to start off the year, that's very very important. And I think for parents with homework – although you and I know homework can be a disaster, another whole topic – that's

another thing for parents to really say that homework's about practice and you don't have to get it perfect. Because it's normally that perfectionism and the fear of mistakes that comes into that whole homework disaster that many families listening would experience I'm sure. Well that sort of leaves us with a next challenge that so many people experience, and particularly where they see behaviour, which is coping with change. And with schools and families and how busy they are today, so many kids on the spectrum rarely cope with the constant changes. So can you tell us a little bit about why that happens?

And also a question is how to cope with it, why? A few interesting things, often they have a thinking of a one-track mind and they have a mental set-up and structure of what's going to happen and they haven't got a plan B. So when a surprise occurs and a change occurs, the world has collapsed around them of I've no idea what I'm supposed to do in this situation. But also in a new situation there's a risk of failure, ridicule from your peers, sensory experiences. So they're more or less wanting routine and rituals and stability in their life. They're looking for a teacher that is predictable, the classroom routine is there. And so when change occurs they're unsure how their performance is going to be, how am I going to cope, what's going to happen in this situation? So we also recognise that those with ASD are very prone to anxiety and over-dwell on what could go wrong. Now I have a mental condition which I sometimes disclose if I'm feeling brave, it's a mental disorder called optimism. And by nature I'm an optimist. She'll be right mate, as we say in Australia. Things will be okay. Now that's elusive for those with ASD where they over-dwell on that and can't just go with the flow, it'll be all right, I'm going to be okay. So in coping with change, they hate surprises, they seek predictability and uniformity. Now that means that when change is going to occur, they need to be forewarned but also assured of what to do. Difficulty is, if you warn them sometimes too much in advance they'll over-dwell on it and it becomes almost an obsessive thought. So you've got to do your timing right. But then it's saying that this is going to happen in a reassuring way and I use almost a Carol Gray spoken Social Story of reassurance, there'll be support, you'll be able to cope, there are these strategies, etcetera. And so that change is going to occur but to embrace change, it's not going to imply stupidity or panic, this is an opportunity. But for those with ASD, they find that very difficult to do.

Absolutely. And I think Tony, again, being the start of the year, one of the social stories that I like to set up for all the students I support is what to do if your teacher is away. Because that is a change that can just send a child straight into meltdown, they walk in and there's a relief teacher there. But if we pre-warn students that if sometimes your teacher's sick, sometimes they go and do learning and actually, as you say, get rid of the surprise. If we can forewarn them, let them know. But also having a little social story tells them what to do when their teacher's away I find – and pre-thinking about that – means that when those surprises come up, they're ready. They're not in shock, they don't hit the panic button. So for parents and teachers listening in, I think if you have a little think about writing a little sort of social script that tells the student what to do. And that might be that if you're going to be away they go to the classroom next door or some of my students work in the library that day. Whatever's going to work best for that student. But I think that's where we have to choose our battles with change and not think that this kid just needs to be optimist like you Tony, ha ha.

Ha ha, I do recommend optimism.

Yeah I recommend it too, I think we both have that. So last year at your workshops you gave an excellent explanation of the difference between a meltdown and a tantrum and I was hoping you could share with us what the difference is between those, the meltdown and the tantrum.

Okay this was drawn to me very much by Deborah Lipsky who's written an excellent book *From Anxiety to Meltdown*. She has ASD herself and so she writes from that personal perspective. As a clinician I knew this but I felt that she has explained it so succinctly and clearly that I would like to give her credit for this. Now a meltdown is an ASD thing. It's being overwhelmed by the social demands. Sometimes they don't like playgrounds, not because of the social side but also the sensory side too. So it's overwhelmed by sensory, social, cognitive and linguistic confusion. Not sure what to say, not sure what to do in this situation. And when they are overloaded and overwhelmed they again tend to hit the panic button with a catastrophic reaction. They over-react. Moderation is not an easy Aspie, or ASD, characteristic. Now in that almost panic mode of being overwhelmed, the motivation is to escape. They've just got to get out of here. And it's to escape to tranquillity, solitude, needing reassurance, etcetera. Now as this is an ASD feature, the person needs compassion, consoling, to find a sanctuary, to find a bit of solitude is often the best recovery. But when you're at school, how can you ever be alone? So they may need a quiet, secluded area to calm down, reduce the sensory overload, minimise the socialising, no talking, no difficult activities. Maybe looking at pictures, reading a book, something that they're good at that acts as a distracter. So in that meltdown, they need understanding and support. Now a tantrum is a natural process, and because the kid's got ASD doesn't mean to say he's not a kid. And that's just trying it on. How do you know the difference? It's the eyes. Is it panic or is there a twinkle in the eye that I'm trying it on? If it's absolute panic, then you have that approach. If it's a tantrum, that's a response to frustration and they may be trying it on as emotional blackmail to see if I can get away with it. And of course when you give them what they want, it ends quickly. You know well actually that wasn't an ASD, you were just trying me on. And so, if you're not careful, the person with ASD can use their intense emotions, which occur naturally, as a way of manipulating people. As a control mechanism. It's what I call being a domestic terrorist. So that person knows if I threaten a wobbly, if I threaten to break things, etcetera, I can get what I want. Right that's it, I don't want to go to school, I'm going to threaten to break something if I have to go to school. And so you've got to be careful that those intense emotions don't, as a subsequent consequence, are used to manipulate you. And as parents it can be very easy to surrender to that, and as a teacher, for peace and quiet and the sake of the other twenty-five, thirty kids, is to give in. And what I'm asking there is to be assertive and calm, and which part of no don't you understand. And going through in a calm, assertive way. This is non-negotiable and you'll have to do it, it won't kill you, it's okay. Okay Sue? That explains my thoughts on that.

Absolutely. And I think Tony, listening to that I was thinking of a whole lot of kids I know and situations and I think that where you summed it up, it is knowing the look in those kids' eyes. There is no doubt. This is why I would say leaving these kids often with a relief teacher isn't a good idea because they don't know the kids' difference between that panic response and that twinkle in the eye saying, I'm just going to test you out today. And with these kids, that body posture and the look in the eye, it tells you so much when you get to know these kids about where they're at with a tantrum versus a meltdown. As well as all the other things you said, but I think that really sums it up. So we've been talking about meltdowns and anxiety and we can see that really is crossed over everything you've been talking about today. I find your cognitive behaviour books extremely

practical and helpful and I have parents and teacher assistants using them throughout Australia and New Zealand. But for many people listening, they mightn't know what the books are or what CBT is. Can you explain, briefly, what Cognitive Behaviour Therapy is for people?

Cognitive Behaviour Therapy is technically a psychotherapy that's been around for about thirty years. But it's very logical, it's not analysing your dreams, it's not checking when you were toilet trained. It's a scientific approach of these are emotions, this is what happens neurologically and psychologically, this is how they affect your thinking, your behaviour, your language. When you know about emotions and how they affect you, you can use your intelligence and practice to control your emotions rather than they control you. Now, for those with ASD this is great because it's factual, logical and allows them to really learn about themselves. Now normally CBT is the preserve of a clinical psychologist. What I've done is translate some of the strategies so that they can be used by teachers and parents. And to a certain extent by those with ASD. Now there are several components to CBT. One of the major ones is what's called affective, which means emotion education. And that's what these kids need more than any other typical kid. They need to read emotions, in others and themselves. In others in not to read a book but to read a face, to read body language, how emotions are conveyed in tone of voice. So lots of drama activities, video games, all sort of things so that that person can learn to read the signals of emotions in others but what is crucial, is within themselves. And that's where they're not very good at knowing their internal moods. So in fact they're often the last to know when they're about to lose it. So, we know there's neurological reasons for this. It's not an excuse but it means that they have a tendency not to be aware of imminent meltdown until it's sometimes too late. And by not consciously aware, often the teacher or parent isn't aware they're about to lose it. So we teach them to be in touch with their body, to know the changes in heart rate and so on. Now we'll use the concept of a thermometer to measure emotional temperature and to measure the emotional temperature or intensity in other people by body language, tone of voice. But also within themselves, because prevention is better than cure and if they can realise I'm about to lose it, or getting very anxious, depressed or angry, and it's a relatively low level, it's easier to fix. So it's really the cognitive or mental control of your emotions and you really need to have a developmental level of about six, seven, eight years old to really be able to do that. Prior to that the CBT is how can parents / teachers manage it. You're the cognition, you're the child's frontal lobes, so how can you control their behaviour. Later on, we're trying to get them to internalise that so that they can recognise the signals and identify the strategies. Now in our CBT programs – and I've developed them for both anger and anxiety – we've developed what's called the CAT Kit. Now the CAT Kit stands for Cognitive Affective Training so we'll have a thermometer, we will have faces and words and all those sorts of things. These are great for teachers, great for parents, as resource material to teach about affection. Now I'm going to be provocative and say that I think kids with ASD need one to two hours a week from kindergarten to year twelve on emotions. At the moment I'm running a group on a Saturday morning for four to six year olds and we're learning about emotions. Last week was happy, next week we're going to go through sad. And it's really learning about emotions, what makes people feel sad, what makes you feel sad, etcetera. So it's really learning about emotions and the CAT Kit allows that person to explore emotions in a constructive way. Emotions aren't necessarily things that are going to get you into trouble, it's fun, let's be a scientist, let's explore them. And so we'll explore a range of emotions in yourself and others but then the crucial component is how do you fix the feeling? Now I've developed in the

CAT Kit the concept of an emotional toolbox to fix the feeling and we will go through with the person physical tools that release the emotional energy. And it can be that they – I'm almost kind of a personal trainer, what can you do to release that energy that is constructive in the classroom, in the playground or at home that is a sense of release. We also go through relaxation, relaxation tools, teaching the person how to calm down. It may be listening to music, it may be – even for teenagers – we will use meditation. We will go through what helps you feel better and calm down. And we say to the kids, when you're calm, you're smart. If you get upset, you'll break it. If you want to show how smart you are, stay calm. We will also have social tools, people that can help you. Some people are like a sponge that absorbs the anguish. Other people are like a mirror that reflect it back or, like petrol or gasoline on a barbecue, inflame the situation. So who can help you? Pets can help you. It's going through what we call social tools. We will also go through thinking tools and the special interest is sometimes a thought-blocker to keep those negative thoughts away, it's a great source of pleasure. For those with classic autism it's spinning a coin or lid, that's their thought-blocker. If they're getting emotional, they're getting overload, they're going into meltdown, they will spin things and twiddle things as a form of escape, a thought blocker. We'll also go through the issue of medication that may help and obviously as the child matures, their cognition means that they should be able to better manage their emotions. We also go through inappropriate tools, hitting someone, smashing something, etcetera. Not a good idea. And so it's recognising that these are feelings within you, feeling anxious or angry or sad is not a bad emotion, we have them, the question is how you deal with them. So it's recognising them and being able to express their emotions in a more constructive way and the CAT Kit is a tool to do that.

Absolutely. And Tony I notice you said you're doing a group, I know a number of schools that one to two hours a week where they'll take a group of kids out and do that CAT Kit as a group. Say Friday afternoon or something. So how many kids at a time would you recommend doing the CAT Kit in an ideal group?

I think it depends on the age of the child, and whether they've got ADHD to be honest. If they've got ADHD, one on one. Because you've got to give them the total focus. And I think under the – although you can do groups to a certain extent, if you've got a very significant mood disorder or emotion problem, under the age of ten I think it needs to be one on one. The groups I'm running are kids, very beginning and it's an introduction. They've not got necessarily intense emotional problems but to get them familiar with the territory. If they've got a significant anger, sadness or anxiety problem, under the age of ten – one on one. After ten, they're very much more into group and they will take advice from group members more than from me. So I think you look at the individual. It depends if they're group orientated, can they respond to the group, etcetera.

Absolutely. Now Tony, at our workshops often I'll have your anger and your anxiety CBT books next to each other and people often ask me, well which one should I get? Do you have any advice what you say to people whether they should be getting the anger or anxiety in that *Exploring Feelings* books?

You've raised an interesting question on the sort of the difference between anger and anxiety, and the two can be linked together. A short answer is you probably only need one, you may not necessarily two. But I'm going to explain. When you have somebody who's anxious, they have

strategies to alleviate the anxiety. When they're thwarted from access to those strategies, they become frustrated and angry. However, there are other differences. Anger isn't always annoyance, it can be despair. And there are some of those with ASD who technically, clinically, should be depressed. Now when you're depressed you tend to internalise it and feel bad about the world and you lack energy. You can have what we call clinically an externalised – directed at others, not self – agitated explosion of energy, not lack of energy, depression. So when I'm referred children and adults for anger management. I also look for an underlying sadness or anxiety disorder that's contributing to the anger. Okay? May not have that flexibility of alternative strategies so that when they get angry it's because they can't tell what else to do in this situation. There's a lack of flexibility, that one track mind. But that anger is often very much a cause for concern, not just for the teacher and the parents, but for the kid themselves. And they say to me, Tony please help me manage my temper, I hate doing this, I don't like doing it but I just lose it and I regret it afterwards, I regret it so much. So you can have children with anger and anxiety issues. If they clearly have both, you may need both. But the books aren't expensive.

No, and they're fantastic and you can use over and over again with different kids and for me I often find it's so insightful sitting down with kids, it really helps you get inside their head. And they say those things like you just said where they'll say, I don't like it when I get angry, I don't like it when... you really hear for them how distressing it can be when they have those meltdowns and how uncomfortable they are with that. So I think it's fabulous if people can take that hour or two hours and sit down and really go through them with the kids each week because it does give you an opportunity to really understand where this kid's coming from and how they're thinking and their understanding of their emotions and why so many of our kids just do that nought to a hundred because they don't have the tools in the toolbox, as you say, to stop it escalating like the rest of us do.

And I want to add just one comment on that because my clinical work is not just with kids, it's with adults too. And one of the greatest problems for the adults is emotion management. And so if you can start off in childhood being familiar with emotions, managing emotions, you really have an opportunity to transform the quality of life of that child when they're an adult.

And I also think Tony, I think you and I would have over the years, the teenage years are – teenagers, it's a tricky year anyway, so the earlier you can get in and start it before the hormones, I seem to find that they're much more open and it seems to really embed and they understand it. But once you get the normal teenage behaviour as well, and the hormones, it can be trickier. So I think if you can get in before that teenage and then adulthood, it really makes a huge difference to these guys.

It does indeed, it's an insurance policy.

Is there anything else you wanted to share?

I think that's okay Sue.

Yeah I think that's sensational Tony. I'd really like to thank you for sharing tonight. I know many people listening will want more information and I want to let them know we've got a number of [workshops](#) coming up in Sydney, Orange, Melbourne, Canberra and Rockhampton. So if people want any more information on those, if they jump on my website www.suelarkey.com and they can

register online or download a form. But I'm sure many of you have listened tonight would be sitting there with lots of questions and thoughts and I know that the full day presentation, where you can get Tony from nine to four, you'll take away so many more ideas. And many people have asked that we do have Tony early in the year and that's why we've got him in Term 1 this year and I'm thrilled that he's been able to do that. So please make sure you register because we won't be running these again later in the year. Tony of course has a range of wonderful books which we've talked about tonight and if you download the [handout](#) I've got a picture of each of those there so while you're listening you really get to see the books we're talking about. And they are fantastic books and for me it's like having Tony to ask these questions to like we have tonight. But having the books there, if you haven't got Tony on hand you can pick them up and flick through them and I personally find them extremely reassuring when I might be having a child who's struggling with something and I can look it up. Or say homework, you can look up and see some more information. Or for example, you might have a student who has Tourette's and ASD, that sort of stuff, the more complexity of Aspergers and ASD is in the book. So I'd like to thank everyone for listening tonight, I hope you've found the live chat helpful. I look forward to chatting to people on Facebook now for the next hour or so, and this is a wonderful opportunity for, I find, community to talk and stimulate conversation and even answer each other's questions or direct people to more information. If anyone is uncomfortable posting on Facebook, or don't use Facebook, you're more than welcome to go to my website and send me a question and then I can answer you. Obviously it won't be tonight but in the next week or so. If any of you want to re-listen to this live chat, we will be sending out the audio to you and I would encourage you to forward that to anyone who would find this a helpful way to learn more about ASD. So the way to get that audio is just to go to my website, www.suelarkey.com, and that will be online for about a week. So make sure you download it on to your iPod or whatever source you use. Don't forget to download, there's lots of free [tip sheets](#) on my website and especially if you're new to ASD, I highly recommend you download those tip sheets. So thank you so much Tony for being with us tonight.

Thank you Sue, delightful yes.

Okay, look forward to seeing you in Campbelltown on the 22nd of February. So thanks Tony.

Yeah I'm looking forward to that.

Excellent, okay bye.

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