Support for Neurodivergent Parents

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SUMMARY

The podcast episode explores the intersection of parenting and neurodivergence, focusing on the experiences of neurodivergent parents and how their traits impact family dynamics. Sarah, a neurodivergent parent, and Dr. Rahime Andolibian, a clinical psychologist specializing in trauma and neurodiversity, discuss the challenges and strengths that come with parenting while neurodivergent, emphasizing the importance of understanding and communication within relationships.

- *Many couples seek therapy when one partner is neurodivergent, often leading to diagnoses that help clarify struggles.*
- *Female partners frequently express feelings of being overwhelmed and underappreciated, often managing the emotional climate of the family.*
- *Neurodivergent individuals may struggle with transferring learned behaviors across different situations, complicating relationship dynamics.*
- *Effective communication strategies can be challenging, especially when neurodivergent partners perceive discussions as confrontational.*
- *Emotional regulation is crucial for both partners, as it can significantly impact family dynamics and conflict resolution.*
- *Delegating tasks and utilizing resources (like virtual assistants) can help alleviate the burden on neurodivergent parents and improve family functioning.*
- *Neurodivergent traits can bring unique strengths to parenting, such as creativity, flexibility, and resilience, which can benefit family routines and problem-solving.*
- *Understanding and compassion are essential for navigating the complexities of neurodivergent relationships, fostering a supportive environment for both parents and children.*

[Music] foreign [Music] team Mojo podcast and today we are continuing our series on the intersection of parenting and neurodivergence and instead of looking at children where we and also the vast majority of other resources are neurodivergence and Family's Focus we're going to look at the parents experience and how parents neurodivergence impacts family relationships I'm here today with

parents Sarah who uses she and they pronouns and who is neurodivergent parent of William age three and a half Sarah is currently studying a masters in social work program at California Polytechnic University Humboldt and their interest in trauma and its intersection with the clinical aspect of Social Work and psychology is part of what drew them to this interview welcome Sarah it's good to have you here thank you and we're also looking forward to talking with Dr rahime andolibian Who uses she her pronouns about this topic Dr andolivian goes by Dr a she was born in mashad Iran and moved with her family to California in 1986. Dr a was educated in Los Angeles and is a clinical psychologist specializing in trauma work near a diverse adult evaluations and couples and family therapy she held certifications in family intervention EMDR sensory motorcycle therapy and neurodiverse couples work she is the owner of Spectrum Services NYC where her staff support neurodiverse adults with

diagnoses therapy coaching and more welcome Dr A nice to have you well nice to be here and nice to talk to you good to have you here all right so I know um that you work a lot with couples who come to you with communication problems and it turns out that one or more potentially Partners end up getting diagnosed and I'm wondering if you can maybe kind of set the scene here by telling us what kind of patterns you see

in couples where one partner is known to be neurodivergent or where there's an unknown acknowledged part of the relationship um yeah so I think twofold one is that from my practice we get a lot of folks um who are who are not diagnosed but suspect that they're diagnosed you know they're diagnosable or they've been having difficulty they've researched the web and have gone some you know screeners or people have told them multiple times that this might be going

on or they've had ongoing frustrations and they come into couples work or individual work and then we discover that it's really a good idea to kind of take a look at the of the diagnostic piece so I think lots of the people that we have coming to us and there's probably lots of families where there's no Divergence within their individual or couple hood and they're doing you know fine or fine enough and things are evolving in their

relationship and all as well the people that come to us through you know our website or through referral sources are folks that are struggling right so I always like to use the sort of the scale of let's say if you've got a zero to 100 or 0-10 scale and you've got all these different behaviors and different actions and different ways of you know managing your intimacy relationship work social components whatnot um it's you know lots of people don't

ever get diagnosed or don't need a diagnosis for that matter because they're doing well enough um and then right in the middle of that scale is when people are starting to have difficulty in one area or multiple areas and so that's when you they come to us and that's when we end up seeing them and potentially diagnosing them that will hopefully help make sense of the stuff that they're struggling with and then you know give us a clear

guideline as to how going to move forward in helping the individual but also helping them in their relationship and their intimacy and then also in their parenting and work and social components and these other things I don't know if I answered your question but I guess I'm curious for a double click in terms of what kinds are the things are you are you seeing these couples presenting with like what are they what problems are they coming to

you saying this is an issue and and you're saying oh have you ever thought of this yeah most often when it comes to couples not individual uh folks that write to us and start to come out for services but most of the couples who come to us are similar to the neurotypical world where the woman typically or the female partner is typically the one having lots of complaints and difficulty finding a lot of Injustice in the way that things are divided up finding that they're overwhelmed overworked over underappreciated um the intimacy is suffering the sexual relationship suffering the you know child rearing stuff is uh really really feels like a burden to one partner um and so that's usually what brings them in is one partner is really advocating for we need to figure out what to do we need to figure out what's going on there's something that you know there's something not working talking here and we tend to get a lot of

Partners where the female partner at least in a lot of the cases that we have um are starting to feel like they're going crazy like they're like we you know we've been through this we went we've been to four or five couples therapists we've we've gone over what this trigger was around this fight for example we've resolved it it feels like things are getting better I feel closer to this partner and then my partner withdraws or they go through this sort

of patterning again and most couples have the same five different content it's a similar patterning in their fight so that's not unusual for their diverse couples but what tends to be a little bit more unusual in my experience and my practice is that the transferability of learning seems to take much much longer so if you have a similar circumstance and you've learned you know certain aspects of what's going on what takes off your partner what takes you off how

to regulate yourself how to regulate your partner how to communicate Etc um and then a slight variation to the to the fight or difficulty that transferability of learning from one circumstance to another seems to be harder and so the partners the neurotypical partners or some of them of course are neurotypical with some you know I call neurodivergent sort of sparkles you know we all have a little bit of neurodivergence in us um so for the lack of better terms I'm

saying your typical partner but that doesn't mean that there may not be no diversion I'll have features of it um they're finding that that becomes you know so extremely um challenging that they go into fight flea mode right away so that's just they are just ready to you know colloquence or you know bail out of the relationship because it's just becoming such a long-term pattern and they feel pretty hopeless because they've gone to get Services lots of different places

they've had a lot of neurotopical interventions that actually tend to exaggerate some of the difficulty that they've had um yeah and I'm I'm really glad that you brought up there you sort of alluded to the idea that often the female identifying partner who's identifying the issue and who may think that you know that this is there's something really wrong with me because I'm we're not able to function in this relationship and I think that was one

thing that was clear to me in the research that I was doing in preparation for this episode which was that um it's often the female identifying identifying partner who says well my my husband is is doing fine right because they're keeping it together at work and they are clearly functioning and it's completely ignoring all of the work that the stay-at-home parent is doing or perhaps the parent who is working and and doing a lot of parenting as well um and also that that uh female identifying partner is managing the emotional climate of the family and nobody realizes all of this until she gets so sick or something happens that takes her out of the picture and all of it all of a sudden everything falls apart um and so to me that really stuck out as an indicator of oh you know if this kind of thing is happening if if you're out of the picture and everything's falling

apart then there's an indicator everything is not okay even when you're there yeah and I think that leads to actually answering your question maybe even and are there another aspect of it um and I was really interested to to hear that is that I think a lot of the the partners that I have that come in complaining about the Dynamics in the relationship it feels like that wheel like that that constant you know we've been doing this we've been doing this

we've been doing this and it's over and over and over and over not to say that if you had a neurotypical partner or a neurotypical couple that wouldn't be this a similar complaint or symptomology but I think with interventions that's the key triggers for me of ah we might be dealing with neurodivergence here like if I have an individual part you know person in my office or someone that I'm talking to or a friend and they're talking about the couple's

therapists that they've seen or the work that they've done and they they see that they're including intervention in their lives they're finding that they're kind of in this hamster wheel of this constant dance um and they feel that they're carrying more of the burden of that that tends to flag from me that there may be you know these folks may be talking a different language and us just saying communicate more effectively is not actually assisting them because they're actually

communicating very effectively they're telling each other that ain't working like they're struggling you know it's that we're trying to get them you know like making eye contact or holding hands or looking at each other while you're making it those are many of those interventions can actually be extremely flooding to a neurodivergent partner and having an intervention where you do a couple's thing and by the way I'm guilty of doing all of these things not only to

people that I've treated but also for myself in treatment as well so I'm not only the president I'm also the client I always like to say that about my work just because I I think it helps de-shame the dynamic the more we all talk about it the more people can get the help and support that they need um but like doing a two-hour intervention with a couple's person person can leave a neurotypical-ish partner and I would consider myself that

you know feeling really close and feeling really intimate and feeling like we realigned certain things and we dealt with a bunch of some traumatic stuff and attachment stuff and then we're out to dinner I'm expecting much more closeness and tightness and holding hands and you know he's walking 10 feet in front of me clueless to where I'm at in space to him we're sitting at this restaurant we're having food not making eye contact not looking at me looking at the screen he

was probably in in hindsight he was probably regulating himself and to me it felt so um hopeless because I thought if we just did this two-hour intervention thing and we felt so close afterwards and then within 30 minutes that feels like we're back to that I you know I'm on an island and you're on an island without having an understanding of the neurodivergence you can then translate that into he doesn't love me this is not a priority like all of these things that

you tell yourself that then could push me into fightfully freeze responses because I had trauma in my background and that was my defense when I was in difficult situations where the intimacy felt challenged so I think that's the you know we get a lot of Partners somewhere in that Spectrum where they either haven't received any services or they've received services and it's been really ineffective and it's caused them to feel even more hopeless and more powerless

um so it's sort of a you know we've got a big big variety that come through but that those are some of the things we notice well I am I guess I really liked hearing about the specific interventions that you found to be um triggering for the um neurodivergent partner um and I'm wondering if there are other ones that are kind of like a red flag um that you wouldn't use for a neurodivergent um person or a couple with a

neurodivergent partner and I was wondering if um when we're talking neurodivergent if you're thinking of all of the kind of ways that we understand that every year specifically thinking of autism spectrum disorder um so yeah that's those are my two follow-ups I'm specifically when we're talking about the couples I was I was sort of referencing the couples that have one partner um who's autistic and I'll use that as a term to describe folks that we in the

past have called high functioning Asperger's but really as the diagnostic manual now everyone is under the same category of autism and there's you know the field is sort of shifted in my opinion about that has shifted over time and what was useful and what wasn't but I think the idea that when we say someone is really high functioning that even the mildest version of autism can have real huge impact and that those folks will likely not get the help that

they need and so the the importance of having that categorization I think a lot of people are starting to talk about that a little bit more um so I'm thinking of more um autism uh partnered with another with a partner that's not on the autism spectrum but could have attention deficit or you know which actually is a very big combination I see clinically is that I see an attention deficit super doer I mean we see lots of therapists

lots of nurses lots of super duper doers type A people that are bonded with and married to or in relationship with um autistic partners and so there's lots of ways that that works for a very long period of time and then there's lots of ways of that kind of combusts and makes things very very difficult um kind of similar to what you were saying earlier Jen about when the when the partner stops doing the the doing you know

whether they've left the relationship or not but you know like for example lots of lots of couples when they're going through a really big huge change in their physical body so if they're going through a postpartum um where they just don't have capacity for any of the other stuff that they were you know juggling for the entire family for their partner the things they were compensating for and they're focusing only on an infant they were trying to you know keep alive in

themselves and or we were talking about people that are pretty menopausal or menopause going through menopause or some accident happens or some major illness occurs or a loss of a parent or a loss of a job those are events that sort of trigger that shift um in the dynamic that kind of has been okay I mean most of the time our the partners are somewhat coolest to what's going on they'll say well the kids are doing okay and things seem to be all

right you know I they don't necessarily have a deep understanding of some of the difficulty unless the partner's really been you know badgering them and they'll say you know yeah you've been in ag you know you're nagging me you're telling me the same thing you know I've heard this over and over it's not nothing I do is good enough I hear that a lot where they just feel completely like they give up because they feel like they can't win no

matter what um it's it's really honestly pretty heartbreaking and challenging for for both people and so that's our hope for um the kind of having the kind of awareness and understanding of okay this is the dynamic that's going on here this is um adding to the regular old stuff that couples need to navigate the the same challenges that all couples have you also have this other piece that's preventing you from being sort of teammates it becomes by the time they

come to us it becomes it's you against me you know you're complaining about me you're saying I'm not doing it right you're saying you're it become ends so they've lost that sort of Team approach where it's us working with this neurodivergence or this difference and translating with with one another and I think that's the the neurotypical interventions that don't tend to work um are first if they're not informed that we have a neurodivergent partner or Partners they won't be able to give this

so communication for example is one where if you're talking about communication um I used to do a lot of sort of Imago style ifs which is like talking about parts and also paying attention to what got triggered for me when something were to happen you know if my partner wasn't listening then it was like telling them why it was important that that communication happened the way it did and what it would trigger for me and what parts

would come up for me where I would go and why I would want to flee or fight or whatever it was my partner you know people don't listen after like 30 seconds of that because what happens first of all we know this research to be true with Dr gottman's work and women men in general where men tend to flood uh four times as fast as their female Partners when in an argument so their perceived experience of being criticized

can actually flood their nervous system it changes their hormones and their pee it changes their blood pressure it changes there because they've been monitored and what they call the love lab where couples start to argue and so my my two cents on that and of course I haven't done the research and I don't think Dr godman's done it either but maybe he will after he was success um is that they um they get my my sense is that the flooding that happens in the nervous system of someone who is uh you know in the middle of a discussion or a talk so often neurotypical partner thinks they're having a conversation or are beginning a discussion and the new you know um diverse partner feels that it's a fight they feel it in their body it's like they're preparing for so typically you know let's say I go in with this understanding that or this hope that we're going to get to resolve something

and maybe work on something even if we don't come to a resolution at least put it on a table and name it and to my neuro uh diverse partner it could feel like I'm attacking and so their defenses are immediately up and so what I see as a neurotypical partner is not the internal experience they had what I see as a defensive partner who's refusing to listen who's refusing to explain you know fill in the blanks and then that

triggers all kinds of stuff in me about the kind of relationship I'm in and the triggers that that does for me and my relationship with my you know my father was like that and I can't stand being in a relationship with my you know the same person and all of this happens and it just becomes this sort of big Big Blob of you know um conflict and then once you have enough of this conflict built in it starts to erode the stuff you

appreciate about each other the stuff that you are you know supposed to say it's like a four to one ratio again Dr gottman's work that if you want to keep status quo you have to at least agree make a statement of agreement or something positive about the person intermixed into the the negative you know um share that you have and it can't be in the form of a criticism or contempt well all this stuff gets thrown out the window

when you're in the middle of you know uh when you're and most of our families of course they're overworked you know you know overtired over scheduled have a massive amount of stuff coming at them socially politically you know with everything that we all deal with in the course of our days and so to navigate all of that and then to navigate their couple hood and then to navigate child rearing and to be speaking different languages and to not understand the you know and

the interventions offered often are you know increased communication creating you know time for yourselves with one another but let's say you don't know each other's love language for example right so it's very similar like neurotypical neurodiverse interventions where going back to what I was saying I think earlier if the idea is to have uh in the middle of something or When Something's Happened you're regulating yourself and then you come to your partner and say hey when this happened the other night

when you interrupted me when I was talking to a friend it felt very shaming it triggered this in my and I'm going on and on this is a very neurotypical intervention my partner's already checked out they're completely flooded so very specific not not and then also you know the part that you know sometimes often um I should say sometimes often people do is when they get super flooded is that they sort of pile the kitchen sink like all the

dishes are in the kitchen sink you did this the other day and this continues to happen with the kids and you know you've never stood out for me with you know and it's just the never and off you know the things that we know not to say multiplied and just magnified and so clear consistent sort of very simple fact like this is what happened this is how I felt this is my my request for the future and by the way these any

technique that I go over and talk about is not in a vacuum going to be effective right it's requiring an understanding um you know a sort of a manual between each person um because every every human being is very complex and anyone that's you know on the autism spectrum or they have ADHD or OCD or any of the other neurodivergences are very very unique and so that's why I think it's important to understand how do you process what do

you notice what floods your system what are your strengths what are the ways that you contribute really well and then what are the partners and then figuring out how to actually make sort of a manual for each other so that you can have it as a reference point and then applying those interventions to those individual people because even a neurotypical intervention may not work with every neurodivergent you know couples obviously or neurotypical intervention with your liberties

so I'm really interested in these these Dynamics between couples that you're mentioning and we actually had a question come in from a member of your parenting Mojo community and I'm just going to describe her situation a little bit and and I've sent you this information in advance so I know you're familiar with it Dr a and she and our partner both have ADHD and he was recently diagnosed with mild autism spectrum disorder and they've been working with a couple's therapists to do

what's called increasing their capacity which is what the therapist said they were going to do and a year later they have a ton of insight but not really any more capacity and the partner has limited executive functioning capabilities so he gets really overwhelmed by their five and three year olds and he also doesn't take on any of the planning scheduling coordinating communicating all the stuff that happens between families in the outside world gets overwhelmed by strong emotions to

his credit he is tapping out when he needs some time to recharge but that leaves the parent who reached out to me to sort of soothe and manage the children and she finds that she's sort of fitting into this classic mothering role of managing the entire mental and emotional load of the family and so she's wondering you know how do I support my partner in being a successful parent and also find some more balance in terms of what they bring to the

family as parents what do you think about that that kind of situation because I'm guessing that's sort of a synecity for a situation a lot of parents are finding themselves in yeah I think um it's a first of all let me just say it's very very hard you know no matter what you know no matter what people say and do and no matter what who the clinician it's a very very hard situation it really really is because

you're dealing with multiple kids you're dealing with individuals who are you need to be functioning on a pretty high level to be able to manage the two children I mean I really and and frankly I think we're all um symptomatic because we are in environments and societies where that kind of Village is not there you know it's all on the parents I mean my parents had five kids and had I remember lots of people helping my parents and I had plenty of quality time with my mom you know um and she was I don't remember her ever being stressed I don't know if my child will say that about me and I'm you know and I've got one kid and so there were lots of resources we had someone coming in delivering groceries someone was there doing this we had a person who drove you know out of their their my aunts were in in and out of our house

like a revolving door there was a whole family of seven people that were constantly there to support my parents but with the kids right and we had a ton of cousins I cannot say that that's my experience raising a child now and most of the people I know feel that they're sort of community and Village support is not there so first of all I just want to say that as a whole as a society we're all struggling to keep up with all the

demands that is at us without the resources that we all need which is each other okay so having said that um so I want to normalize some of the challenges that they have because it's you know it's really it's really hard and then also I think you know redefining the the expectations and relationships and redefining what a success would be so to me when I look at her situation we've got two people that have ADHD that have executive function

you know challenges we've got him recently diagnosed with you know autism that is you know he's in his late 30s or mid to late 30s so that has been a lifelong Journey that has taught him lots of adaptations lots of ways to cope including probably avoidance of certain things and certain defenses that are not no longer they were very useful in the past for him but they probably no longer are helpful in his relationship with his

wife and his kids but that's what he's probably learned and there are lots of them that I'm sure she's learned and so I think figuring out a way I think there is success in that they've gotten a diagnosis which I think for most people forget this takes people years it takes two to four years for someone from the start of their journey to be like hey maybe and then to finally getting a diagnosis and going through the process and it

takes them years to actually process what that means what are their strengths what are the areas that they really their pets you know they're just big huge pitfalls and they don't want to do that again anymore because it has huge consequences in their relationships and their work and this and that um and often I find we have about maybe a 10 maybe 20 percent of them Gathering the data on this now but about 10 20 of the people

that go through our diagnostic piece where they get a diagnosis to roll right into treatment so they're doing couples work individual work or coaching work and so that's still a pretty small percentage if you think about it you know like having and that doesn't mean that by the way I don't follow everyone so I don't know if they've gotten Services outside of our program or not but I think sometimes that that becomes really key because once you have a

diagnosis and you have an understanding so now you've gone to the doctor you know you're diabetic or you're pre-diabetic or whatever and they've given you this medication well now you've got to start to actually apply the dietary stuff the lifelong you know the lifestyle changes and the medication if you need to take them so if that hasn't happened then if that's also the the big sort of challenge that's next which is now what do we do with this knowledge that we have and how do we you know apply it you know therapeutic work alone like having a couples therapist for the couple often is not enough you know we might need Executive function coaching work for one person and by the way one coach is not necessarily the right coach for that person so there's lots of different ways to sort of address that um and I think frankly the challenge that I feel I have you know that we're trying to do some

some coursework offerings and some things that people can download for a much cheaper price to be able to because it's a privilege to have the money and the you know insurance reimbursements if you're lucky enough to have good out of cup you know out of network coverage to be able to get these services and so it's it's it adds another burden to a family that's already feeling pretty burdened if you're adding all of these services but I have to tell you I found

that not doing it often can lead to a lot more you know like going through lots of days where you're not showing up to work and jeopardizes your work having an intimate relationship that starts to slowly weather and die and then leading to separation divorce that also is very costly and costly on a variety of levels financially emotionally children you know you name it so it does become a pretty big investment with a with a couple to really really do this work and

and some survive and some frankly don't or some by sometime until the kids are a little older and then they don't stay together it really depends on how you know who's who's putting in all their you know who's putting in all the effort and how they're doing it and also finding the right resources and I have to say our field has not been that great I mean we're a pretty new field in general psychology as a whole but I

don't think that we've been that great at offering the kind of resources and support that our neurodivergent people have needed and so there are groups and people and organizations that are doing that we're all working really hard to try to keep up and try to have a life while we're trying to meet the needs of the community but also there's a lot more to still you know there's a lot there's a lot more reading to be doing

um so I I I think one of the answers too that I have with regards to the you know capacity piece is that besides modifying and then being very concrete and clear and really working on emotional regulation I think that becomes a really really big piece you know their their relationships where they can have enough conflict and they can have multiple conflicts and as long as they repair like that's the research around couples is that as long as you repair more often

when you fight the relationship tends to sustain that's also I think John godsman work done godman's work I think in neurodivergent relationships this is my very anecdotal and personal experience of doing this uh specializing in the last 10 years so it's definitely not you know I haven't done research on this and there may be other people that feel that I'm not accurate but my sense is that the sort of ratio of you know 75 of the

time you need to be on the same page and 25 of the time you could um I'm sorry only 25 of the time you need to be on the same page for a relationship to sustain I find when you have neurodivergence that just shots shoots down to about 10 if not less just by the nature of the fact that people are speaking in totally different terms people are processing completely differently people's senses are triggered and their body is traumatized

in a completely different way than a neurotypical relationship you know neurotypical partners are and so when you have such a small ratio of times where you feel like you're on the same page or you really get each other and you really in tune with one another that requires a hell of a lot more work then right to be able to sort of capture that difference because that's the majority of the time you start to feel like that so those the couples that for

a variety of reasons and there are lots of factors that go into this it's not just in a Divergent piece but lots of other factors but the couples that emotionally have a hard time regulating themselves and often it means what the you know the neurotypical partner or the neurodivergent partner often is also with a partner that's traumatized or a partner that has ADHD or has some other neurodivergence because then it makes it so much more difficult

um that grounding that consistent regulating you've got parents that are pretty burnt out and exhausted and they're the the amount of conflict sort of overtakes the relationship yeah I don't know if I answered you a question yeah it is it is a hard one yeah it's a hard one but I think you know a lot of Wonderful I think a lot of because I don't want to also just be talking about some of the negative negativity of it but emotional

regulation working on impulse control um so that you're not also like in moments of conflict if you're dealing you know if you're in a relationship where you're dealing with a conflict in that moment that's often the worst time to say or do anything with the partner or to make a request or to to you know bring up the list of things or to do what to do or um and I think often you know at least

in this situation I am I I wonder and I talked about this on another podcast about the need for the the non-autistic partner to really take more and go Inward and do more of that work Inward and that often I find does not happen because the partner is burnt out or busy and exhausted from all the managing and all the you know all the plates they're spinning but it becomes really huge because it really takes one person to

regulate and it has a ripple effect into the family so if you're regulating really well if you've got one person one of the partners really regulating well it tends to decrease the conflict because there's just no you know there's no ball to kind of bounce back and forth in the conflict when that person is not triggered themselves and so I often say instead of putting more energy into I'm going to increase the capacity of my partner I'm

going to get them to do X Y and Z really that needs to go much more inward um and then you can kind of sit down and go okay what are the logistical things that we need to do what's a Time block that we can put aside and these are the things that you know let's say the mornings or evenings are horrible because they're so executive function oriented you know get the teeth brush put the you know cream on put the

um sunblock on don't forget to do the hair and then get the food in and then do this and the brush it like the executive functioning of what it takes in the morning I've got a three-year-old I get it it's a lot like I literally need a list on it on the mirror for myself and I'm pretty good at that stuff so that to do that for multiple kids there's just a lot of stuff to manage

while you're being time management you're managing your time blindness you know all of these things so I think not those excluding those circumstances my partner does really really well with play with my kid or they can sit down and watch a cartoon anything giggle and laugh at them and that's fantastic okay I get those two hours or an hour and a half or whatever it might be where he can manage that and he can you know

prepare the meal or having certain blocks where I think once there's an acceptance of these are the ways that we're very different this is going to be a continuous problem I always say to couples delegate as much as you can so if you have the ability to hire someone to food prep for you to grocery shop for you to come clean the house to whatever parts that are causing difficulty between you as much as you can delegate

outside of the household so the conflict over those circumstances becomes less again I know it's a privilege but often and most of us you know have the ability to invest in that if we can and then really reevaluate what are the things I'm really good at what are the things he's really good at or she's really good at and then let's divide and conquer the core of it is that when people are once people are diagnosed My Hope Is and this

what is what we see happen often is that they start to feel like they're slowly going back to being on the same team as opposed to one against the other um and that you know that transition can be months for some couples and it can take years for some couples uh I have heard Dr gabromate say that ADHD can form in response to Childhood trauma and this doesn't have to be really big trauma it can be as simple as

a child's needs not being seen and met by the parent ADHD symptoms are indicative of a person's tendency to disconnect which is an Adaptive strategy if you're exposed to Childhood Trauma from which you disconnect to survive what do you think of this well I I love I mean I'm a trauma therapist so that's sort of where I you know I think I found my wings and found my my whole history and life explained in a way that really was empowering and

extraordinary so um I've always you know I I agree with everything regarding trauma um that I've read so far and I haven't read everything that um Gabor has contributed but you know vessel and uh Pat Ogden and many others most of all of their work I I follow I think when it comes to um ADHD and it being trauma based or um the sort of the co-currence of that I and I'm evolving and I you know wanted

to say this actually in the beginning so I'll take the chance to take the time to say it now you know I'm evolving as a clinician I'm evolving as a person or the field of psychology like I said is pretty young it's evolving research is evolving our ability to you know our active MRIs and ability to study the brain and understanding the physiology of that or the you know genetic research is evolving so it's all evolving I don't

know where the answer will be 10 years from now I've been humbled enough in my career in my life to be like you know um what I find helpful is to to do the and approach you know I think that the biomarkers of um the biomarkers of genes and that I think we need to pay attention to there are lots of people that I treat and I have a beautiful colleague who's one of our one of my evaluators

um who has had no you know socio-political trauma no interjectional trauma and all five her and her siblings and five members of her family are all diagnosed with ADHD with very similar symptomology so um and then you have lots of people like me who had lots of childhood trauma and right from third grade before some of some of the significant stuff really um sorry after some significant traumas happened I started to have a lot of difficulty with working memory and

multiplication table um when I was like a straight A student in Iran and so um dyslexia did calculate those are the you know so the in combination with those things I mean I can't say that I'm not keeping my eye very closely on my daughter even though she's growing up very differently in a wonderful you know having a wonderful life with protected from almost all the trauma that I ever were exposed to and having a wonderful

you know joyful playful life that I may not see some of that ADHD symptomology so I would you know I'm keeping an eye through that process I'm watching some of the impulsivity I'm watching some of the difficulty regulating I know she's also three in a toddler so it's developmentally in that box right but at the same time I'm also very aware of the intergenerational piece of that like I'm sorry the multiple members of my family that you know cousin who grew up here

you know had no exposure to the things that me and my brothers and my cousins were exposed to in Iran During the Revolution and post-revolution and whatnot has struggled with ADHD was diagnosed very you know very early so there was a there's an and approach I think a combination piece I don't doubt um and I don't and I love hearing um trauma and the ADHD symptomology explained with a lens of trauma I think it's really helpful for our society I

think when things get things are sort of I think can have the ability to not or them sorry let me restate that I'm thinking it challenging when it becomes even bi-directional like it's either you know I think it's multi-directional like there's so many different factors that contribute to a diagnosis of ADHD or no Divergence and other neurodivergences and I think that it's helpful and some of the stuff I saw as of late and again these are social

media pieces and like little blurbs that people say or write about you know matis or um um Dr mati's work and may not be a representative of all of his work or contribution I think if people take it as okay this is only a trauma response and they deny the other component I think it can be harmful because some people really do and are relieved to know okay so this runs in my family or this has been you know I have a

predisposition for it or I had a biomarker for it just like I might have a biomarker for diabetes doesn't mean I'm diabetic but all these other components like knowing I have a biomarker for it is helpful because it relieves them of some of the shame to be able to get some of the help that they need and so I always say to people when I'm doing this with them if it helps to understand it from more of a genetic loading component because that helps you be able to get the resources that you need and be able to talk about this more openly to the people that you love and address the the difficulties you're having then then go with that if it helps to say look I feel like if I talk about this as more you know genetically loaded that it would limit me from or limit my child because then it's sort of fixed and they can't do anything about

it well you know we don't do that and I think it's a comps kind of I always find that it's um human beings like to you know put things in this or that kind of box as a way to help understand and be able to move forward and the reality is with human behavior it's extremely complex like a neurotypical or near-diverse intervention May totally bomb with a particular couple why because they're very complex human beings with a lot of different factors

there's cultural stuff there's social political stuff there's trauma of stuff there's other mental health Dynamics there's economic stuff there's all these other factors that contribute so something that may work with someone may not work with someone else which is why you tend to go to a specialist within the sub-specialty to do the work because they need to be Tailoring bringing the skill to the table but really tailoring all of that to the individual person I'm not sure if I

answered that question either so you tell me if you have a follow-up yes yes you did answer that question and I think um remembering that these diagnoses are um their labels right that can be helpful in having us navigate towards Solutions however they're not absolute and they're not something that like it it doesn't Define you right but it can help you to

give you a tool to find a pathway yeah absolutely yeah and really the you know there's lots of I mean I used to I used to be in the camp where I didn't really like diagnoses at all and I didn't like testing and you know even though I was trained to do testing in grad school um and I really shifted and I've shifted mainly because in the neurodiversion population I saw such an extraordinary amount of suffering because people just

didn't know that you know I not only by the way and I've been meaning you know Divergent population and I don't mean just my work I'm talking about my personal life and lots of friends and lots of people within my family where they were misdiagnosed mislabeled if they even got treatment and most of them didn't get treatment and the suffering that they personally experienced the amount of Shame they internalize the amount of you know stuff they told

themselves about who they were about their the areas that they were struggling meant that they were stupid they were this they were that they were never going to have you know it just it was so heartbreaking and so I've sort of made it my mission um to help um I'm sorry my mind just went to a conversation I had with my brother which maybe we'll get to which I think sort of demonstrates this point but um so yeah I

made it my mission to really provide the evalu the psychological component um and we do we do diagnose and I've got staff who are very reluctant to diagnose and I've explained and we're having a meeting about this actually tomorrow again um where it's really critical when someone comes to an adulthood and says hey I've been told that I might be on the Spectrum or I've been told I might have ADHD and I've taken these these things but I also have a ton of trauma

and I taught attachment stuff which by the way which human being in the world you know doesn't like we all have some level of trauma some of some of these experiences um I don't want the trauma or the the socio-political stuff or the International Trauma piece or the race component or the cultural stuff to mask the neurodivergence that's been there all their life and no one saw it everyone else saw the trauma including myself by the way

um I you know was in therapy for 20 years of my life and never got the neurodivergent piece that the ADHD piece looked at because I compensated so beautifully for it and it sort of made it my superpower it does not mean that it didn't limit me in many ways and cause lots of stress and lots of difficulty um and you see that that's kind of a common story with a lot of women with ADHD and a lot of women that are on the

Spectrum as well um and so I think of diagnoses now as sort of a you know like if I apply the medical model then it makes sense to me there's some people that really had to avoid diagnoses because of the ramifications of what that would look like within with either within their family culture or systemically so there are lots of people that were avoiding psychology and avoiding diagnoses because it was a protection against shame against depression against this that I get that

where and there are countries by the way and many people within families even in this country who still have that experience you know like I don't know five years ago if you told me you know if my cousin should go get diagnosed in Iran as you know 10 years ago I should say as schizophrenic I would say no because he would be shunned by it would be horrific you know and of course he did and it was really important because

he needed some medications and blah blah blah but my point is there are certain places on the planet where mental health is still very very stigmatized and getting a diagnosis could actually backfire on you educationally you know and familiarly Etc we're talking mostly to to the American eyes to the American audience where we have moved that needle I feel a lot we're talking about these things much more openly there's lots of people out there making some really huge

contributions even on social media where they're offering so much to the population and making it more commonplace to talk about these things and mental health is not as stigmatized which is fantastic to experience um so I think of diagnoses as like you know do I want to know if I have a predisposition or something so I can be more mindful do I want to know if I you know I've been feeling kind of off and I

feel like I'm you know my whatever let's say my mood is this or that do I want to know if I've got any deficiency is my thyroid okay is my vitamin D okay am I getting enough B2 12s what are the things that are contributing would I want to have a good thorough checkup and my answer to that always for me is yes now there are other people who say no I'm doing fine I don't want to do it okay well those are people that won't come to me and I probably won't see them and potentially like I'm not here to argue that that's a better or worse way to live that's just a different way to live I obviously deal with and encourage the people in my life and anytime I get a chance to talk about this openly is to say the more you know the more awareness you have the more skillful you can be

and then figuring out how to navigate and move forward now having said that it's not an easy process there are people that are married to people that are on you know that are autistic right now that could be listening that are really scary what that means to understand more to look at things more you have to also face things within yourself within your family potentially within your children and that's not an easy emotional process that requires a

lot of holding a lot of space and sometimes people don't have that space or even have the emotional support or even the emotional regulation skills within themselves to navigate that without the support so I get that it's not an you know like let's just all go do it kind of you know dynamic but I but I do like to encourage more and more people to do that and at least in my business part of what we're trying to do

is to provide some of the screeners available online for free some of their you know ability to get diagnosed to be done in an hour or two for some people where they don't need a full comprehensive we're trying to do things within an eight to ten hour period as opposed to a you know 3 500 to 5 000 investment making it much shorter much less helping people figure out how to get their insurances to reimburse them for the most of the time the

services that they have or the um coverage that they have that they may not know that they have so navigating helping um and then we'll be you know hopefully be doing some stuff online where you can download things and be able to get these resources available too we'll get better there's lots of people on social media that are also doing doing a great job and we're going to be posting more about them and offering those resources so

hopefully you know people are suffering less and less in silence and in silos that's the that's the hope of you know the work so diagnoses are to me a deepening of understanding um and not everyone has experienced that myself included in the field um but I think we tried to explain that thoroughly to our um our client base so that they understand and I specifically have gone through and made sure there's a strength-based component where we talk

about strength we look look every single neurodivergent person I know is full of bloody grit like they are resilient and have a lot of grit Because by the time they get to us they've navigated a lot right similar with people that have gone through trauma um that people are just as a whole people are so full of self-healing even if they don't feel it in the moment I see them they're they've always been working towards now sometimes they've

been working towards that in a way that's constantly sort of they've hit a dead end and that's where we come in and we can help redirect sort of that energy and support a different approach that would give them a lot more success but um so yeah keeping in mind that diagnoses are also a window into that person at that time given what we are understanding and hearing and that and based on the fields you know understanding and that's evolving like

something we used to diagnose 10 years ago we don't diagnose anymore as a you know mental health condition so the world is you know Society is evolving too um so I have ADHD and I find some aspects of parenting hard um it was nice to hear that you too struggle with I think you said ADHD um what is it about ADHD that makes it so hard and what what do you think I can do to parent more effectively and with a

greater sense of ease maybe it's I also have a three and a half year old so um yeah and they're marvelous and I adore these little ones and um you know it's just it's a lot you know it's a lot to navigate and so I think I don't have the um uh let's see so obviously similar to the other things we talked about you know one ADHD person or like you you tap on

one autistic person they're extremely different than another autistic person right the you know there's a famous quote about if you meet one autistic person you've met one autistic person and the same applies to ADHD or someone with trauma right um people really understand it when I say it this way if I say to you that Jane I'm making that name up Jane is suffering from depression and if I had a survey of you know 100 people in the

room I would get 100 different answers right I would get clusters that are similar like oh she can't get out of bed or she hasn't eaten in three days or she's having a hard time sleeping or then there will be people who go oh she's been functioning really well and she's a CEO of a company and she feels like she has no motivation no interest you know everything is just so you get a variety of different you know um you

know depression I did see what not everyone is very very different so I think though as a general whole first of all you have an inattentive type ADHD you have a predominantly hyperactive or impulsive type and then you have a combined type which is a little bit harder to sort of tease out for a lot of people and so if you have an intensive type someone that has a difficulty with working memory someone that has a hard time initiating tasks or

completing tasks someone that requires a deadline in order for their brain to go oh my God let's get rid of that timeline it's like we need to like apply ourselves because you know Thanksgiving is literally next week or it's tomorrow for that matter or the deadline is tonight and I haven't done anything to prepare so um and then you have folks that and I'm the combined I'm a combined version if you couldn't tell already um where I don't have you know and I

have a lot of compensatory skills that I've built over the course of my life I'm very organized I'm like task oriented I've got everything on Google Drive and I've gotten lists and all of the you know like the iPhone is my best working memory helper the best you know um notepad but before that I had notepads everywhere and sticky you know notes and as a kid I used to write on my hands for example because I would forget

things I still mess up on names constantly I still mess up on anything that's the same letter of Dyslexia and this calculus so those things continue on to be times where I catch myself and I just speak about them now and openly sort of rework them but I think the executive function requirement for a parent is a tremendous amount and so in general with for any human being to have a to raise a child again when you don't have

a village of people coming in right um and so if you have the inattentive part of ADHD or you have the impulsive type which is tends to be the part of my life where I get in trouble is that I'm a little bit more impulsive by the way it's also my superpower so I want to make sure all of the stuff we talk about is also people's amazing stuff like I've been able to manage things in my career that I know

very few other commissions my you know and my realm have you know so um I've been able to I'm an entrepreneur in a variety of different ways lots of ways that that kind of need for variety and sort of uh dopamine increases have also you know fed my world and fed the people in my life and um whatnot but it also gets you you know there are also downsides to that you know different sides of the same coin so

I think as a whole um the executive function requirements and also the emotional regulation so I find and again this is for lots of ADHD people but not for all but that emotional regulation for ADHD folks is harder and I think for women and one thing that I don't see as much and I've been bringing it up to the engine of a lot of people psychiatric nurse practitioners um ADHD psychiatrists um clinicians that I feel are very sort

of uh top in the field that I'm connecting with and collaborating there's very little that I hear in common language there's been some studies done on it but on for example um menstrual cycle the lutein phase of the period and also what that what that does to the ADHD symptomology for a lot of women and then you tack on the child rearing component when you're dealing with that yourself and trying to regulate yourself and managing work and

running a business and and whatever else you're doing um you know it's hard it's like insanity you know so I think think keeping in mind and by the way we're not even talking about the stuff happening politically in your particular state that you might be living in that has a direct impact on you and raising your child we're not talking about the stuff in America like gun violence and these things that are as parents like really

head home and really cause us to grieve the stuff happening internationally that are constantly like was telling Jen this before the call for the last eight weeks I feel like my brain's been outside of my body because my heart is bleeding for what's happening in Iran with my family there and with the women there and the people there so we're not even talking about these outside factors that have such a such a sort of personal impact so

to regulate yourself the executive function component to deal with the dopamine changes that happen that have been studied and you know um in uh folks with ADHD to deal with the task initiation task completion on top of you know you're managing a lot and kids require all of those things you know especially toddlers right they are the I mean all kids I think but in particular a toddler who's frontal lobe and amygdalas are like so in the development phase and they need you to be their co-regulator you know it becomes and sometimes it's like the the red cup is perfectly great until it's not and it happens in an instance you know and then it's a complete meltdown because you had the wrong cup which doesn't make sense to a parent potentially in that moment and requires so much more attentiveness and groundedness and regulating and if you've left work you've had an eight-hour day you've managed all of the

stuff that's required your own executive function stuff it's a cocktail for meltdowns for both people like the parent and the child or both parents and the child so I think the executive function piece is one of the hardest and then the emotional regulation piece is also I think more challenging because when you have a child they demand that from you in a different kind of way than when you're in a relationship or when you're living you know on your own or

you're living amongst adults you know the pool for that and there's probably more answers that I would want to give to you later that I'll probably think of but that's the top two that comes to mind yeah I feel like we could probably talk for another five hours or so yeah [Laughter] the social calendaring you know the even like I get emails from my kids school and I think they do a really great job but it's like the amount of fundraising

they have and the like I literally have an assistant where I send those to and say please put it in my calendar and then I'll go through and just check I don't want you to even read the emails because it's so flooding to my system when I've got 73 emails in my inbox I've got a client load I'm dropping my kid off I'm petting my kid off I'm figuring out what to do in the afternoon I'll be

doing piano are we that that's a lot to manage so that's also the social calendaring I think again it's an executive function piece but um the extracurricular stuff for all children especially as I get older I hear it gets worse so I don't know how I'm going to manage but I'm going to call Jen once she's done you should yes I didn't get a nine year old so I'll go to her perhaps yeah I'm just wondering if you can maybe

give us one particular um intervention you would provide a parent with ADHD yeah so there's lots of there's a couple of tools and we're going to have some of them I'm just adding two more to our website so if you go to the website spectrumservicesnyc.com and you go to the resources page we're going to try to have a lot of these available so that you can just click on it and you know go to them there are a couple of I mean

there's also like there's these apps that people can use right that's helpful if you have a calendar and there's ways that you can time block so you have a block of time not more of a to-do list which I tend to sort of do as a as a way to kind of get through and then I realize that also kind of adds a little bit of stress to my you know I could feel the stress hormone sort of in my

body and my chest getting tight sometimes because that list continues to grow obviously no matter how much you know I try to knock things off and so sometimes time blocking is actually a better approach for ADHD folks where they block a certain amount of time and they don't give themselves a to-do list but they give themselves a space to explore let's say if I'm doing something creative or if I'm working on whatever it might be um there's an app for that as well and

there's some resources available that it will have on the website hopefully I think by tomorrow um so definitely by the time the podcast comes out I think they'll be there um I'm you know I'm a big like you know I'm a big proponent of if you can get a virtual assistant someone that you you know gets or anyone that's willing to do assistantship work because now they can do it from you know they can do it from anywhere delegate whatever Parts

you can like if planning and execution is difficult um if you know that it's you're always running to something by the way like another technique is like if you're running late to something because you find or you're often running late to something or finding that it's hard for you to get your work done because you tend to lose track of time when you're on social media on your phone well then you take social media off your phone you have to

actually go to the browser click on it make it make it a tad bit more uncomfortable to then just kind of go on Instagram or go on Facebook or whatever it is that's the impulsive sort of response response piece make it only available for yourself on um on your computer make sure you have times in your day where you turn the phone on airplane mode and it's away so that you're able to just say present and

work on that I say you know for most people because you can learn all this self-help stuff with following two good people on Instagram that do ADHD stuff so if you're following good people with good resources and you're able to apply it and it feels great then fantastic it's kind of like a diet book like if you get a diet book or get some advice on keto diet or whatever it is and you do it and it works then great but if you

find yourself struggling with weight loss right if you find yourself struggling with the ADHD symptomology then get yourself a coach get someone that's going to work with you on specifically tailoring something to you and then helping you follow through and hold you accountable because that often tends to be it's not a lack of insight it's a lack of action it's like a follow-through that tends to be difficult and it takes I always say a good you know

really a new habit is built you know and consistent and like in therapy we always say like give it nine months we want nine months for a new behavior in the family to become sort of the norm so um but sooner than that like 30 days or 45 days within doing something pretty consistently you can see a significant change within yourself so um small small sort of wins all wins nonetheless to having someone reinforce those is important so time management

stuff there's all kinds of tools and techniques and I could go over probably you know tens and tens of them but I think what's really what my top two would be if you find yourself needing the if you can get the support get the support um and delegate the parts that you really dislike like I personally really dislike going to the grocery store I enjoy cooking I really dislike going to like to the point where it's like nails on a chalkboard so for me I have an Annie that comes in and once a week her job is to go through the list which I update as I you know as I've like I finished the peanut butter I leave it on the counter until it goes on the list I don't throw it away because I'll forget and then I'll recycle the bottle if I'm out of foil I'll finish the foil I'll leave it on the counter when I'm with my

phone and passing the gas yeah foil added to the list or I say hey Siri add oil to the grocery list then I throw away the foil box so she has an updated list on a regular basis she goes every Wednesday she picks up the groceries she puts it away that allows me to then cook for my kid without the part that I dread right the part that I don't think someone to come clean your house if you

hate doing that if you find that you're fighting with your partner over who's doing the vacuuming who's doing in the cleaning so as much as I can I say if you can delegate even in Little Bits it helps even if you can't like people say well we can't we can't we need a mate every day and I'm like well get them to do the laundry once a month even that helps a ton it takes a little bit off of

you and that adds a lot of room in your emotional regulation which for me has always been the king the more people emotionally regulate the better that they can have and figure out what their strategy is and how they're moving forward when people are on the edge of their Windows of Tolerance where they can't tolerate any you know a small little you know pin could just push them over the edge you can't live on the edge

for that long it's just not sustainable so you've got to expand that window of Tolerance and the way we do that is by getting the support resources we need whether you delegate out or whether you utilize some apps and other resources that are available within and then tag teaming of course if you have other people like my mom loves to go to the Trader Joe's and she always goes to Trader Joe's for me and she knows exactly what to buy there

every single time every two weeks on delivery she brings it home that's my Village and that helps a lot that's one less thing that I have to do as a single mom of a three-year-old with a company right where I can be spending that two hours having a social drink with a friend and filling up my tank a little bit so that it's sort of my time so I don't know if I gave you any strategies

that are useful for you but there are lots of them and there's lots of research on like what strategies are helpful there are people to follow so if you follow me on Instagram I don't post things but I can send you stuff or you go to our website we'll have these folks also listed there there are some really great tools being shared on Instagram short little bits you watch and you're like oh my God that's so useful and you

kind of and it's free thank you so much yeah you're welcome yeah I think that'll be great for a lot of the listeners um and I recognize some of the tools from my tool toolbox too okay good good yeah so just as we wrap up here then I what I want to leave us with is sort of a sense and you've been alluding to this throughout our conversation but just to really tie this together for people the idea that um these diagnoses are not all bad right it's not all doom and gloom we have this terrible thing we have to figure out how to live with it there's a huge amount of uh of resourcefulness that with that some of these diagnosis bring to us and I started doing some brainstorming based on the research based on things I've heard from families um I was starting to think about how autism right is is a real gift in terms

of planning and routines which when you have a young child around the house it can be really really helpful um I work with a parent who has ADHD and she's contributing a story from my book and she actually talked to her therapist and asked her therapist you know what am I really good at as a parent and um and the therapist said you're so flexible right your child brings this challenge to you and you don't get stuck in this

one way we have to navigate it this way you just respond flexibly and pivot um I'm guessing that parents with any type of neurodivergence it brings a great deal of empathy to their child's own struggles right whether or not they're struggling with the same thing although I understand it could probably be triggering in some ways too I'm just wondering if you see specific ways that um the strengths really come up that parents might be able to look at this

differently and think oh yeah that really is helpful to me and I can see this in a different way yeah um I'll speak to that as a general whole of neurodiversion and there's lots of young people that are talking about this um what I find that people that are new Divergent also bring sort of at least this is my way of thinking about it of what they bring to the world is a um huge amount of expansion of compassion

and understanding they kind of force us all to pay attention to that you know there's differences and we need to understand each other's differences in how to work with one another and love one another so I think whether they intend to or not that tends to be a a piece that is added to the world any diversity right brings that to the table if we do a good job as a Humanity um I agree with you completely that sort

of ADHD folks really bring a lot of creativity lots of flexibility also lots of fun like you know I have a mom that who's a friend of mine who does not sit still she's either on a bike or on a volleyball team or they like she's always doing something active and it's sort of it reminds me of like that you know listen like I said everything is sort of the opposite side of the coin that can also be problematic if you

can't be still enough to like enjoy time and kids eat all of that stuff but we're talking about the strengths here and I think that it brings a lot of expansion to the family it can bring a lot of expansion to the person lots of CEOs of companies are ADHD you know that that's like you know that they are the idea that hey wait a minute I don't like that box we're going to create this other

thing we're going to fold this into this other eight-legged you know process you know and to push for Change and to push and be flexible I think that's a beautiful thing lots of creativity lots of expansiveness lots of leadership skills um I think you uh pointed this out really beautifully I think one of the things I've noticed in relationships especially when you have an ADHD mom in a you know uh autistic male uh dad is that it actually offsets the like the

the need for routine and slow down and transition between things helps the kids because if it was left to the ADHD mom you know they'd be running all the time and not to say that's bad but we know that the brain development of kids really requires that sense of structure and routine and they do really Blossom and they get enough brain development where they need enough sleep and they have that routine so there's lots of ways that once I think

especially if you have the mix of that in couple hood that it can really complement one another but sometimes takes really long time to get there so yeah lots of um um there's one more thing I was thinking about with autism that I thought was a really big um strength I think maybe I think it was maybe the compassion piece and my understanding piece that it really requires people to begin to think about um what you know what what can I do

differently and how can I co-create a different Dynamic with someone which also tends us more inward right as opposed to turning a you know that's saying you know you have eyes to look out and so most of us tend to look outward as opposed to Inward and so I think when you're dealing with neurodivergence and autism in particular too that you'd sort of have to turn inward and say okay how am I how can I be doing this differently what is it

about my co-creating this Dynamic that I can shift and change and I think we talked about this before the grit and the resilience there's a ton of grit and resilience and a ton of incredible ways like the you know I have a down I have an app where it reads stuff for you you know I forget what it's called now but it's probably bad because he probably would like the plug but um he was dyslexic and that's how he developed

because ADHD is like he he learned how to develop that for people who were struggling with reading right so like all this innovation um comes also from these Incredible Minds right um not to say everyone on the spectrum is you know super so we have the gamut of people that are really struggling with functioning maybe people that are doing really really well I don't want to also paint the brush that everyone has like is genius because that's also a pitfall

to pull them but lots of great lots of resilience irrespective of where people are on that um on that color wheel of spectrum as I call it yeah awesome all right so well thank you both of you I guess firstly thank you to Sarah for uh jumping in and helping me to shape the questions and and being with us today thanks Sarah yeah thank you so much for having me yeah and Dr a I just want to

make sure that listeners know where they can find information on you you mentioned your website spectrumservicesnyc.com and that you're adding a whole bunch of screeners and resources and that kind of thing to it so um so listeners should head head there if they are looking for more information on these topics yes that's the that's the website and you can email me directly there and you know any questions or thoughts that they have and I have a wonderful business manager

Lauren who's also very easy to connect with and also we have lots of other resources and books and things like that that if people want we have everything that we've sort of tried and true to us we've put up there including everyone that are the everyone in our team that loves the resources yeah super well we'll put a link to that website also on our references page at yourparentingmojo.com forward slash parents neurodivergence [Music]