



Episode #164:

**Dr. Melissa Neff on Supporting
Adults Newly Identified as Differently Wired**

July 2, 2019

Debbie: Hello Melissa, welcome back to the podcast.

Melissa: Thank you so much. I'm so excited to be here.

Debbie: I feel like this is an episode that's been a long time in the making. We've been talking about this for, I don't know, I feel like almost a year. But I'm really looking forward to this. I think this is one of those conversations that people are not really having, you know, outside of their homes or their small families, and I think it actually is going to be really relevant to my community. So I've already given an introduction to kind of your top line credentials, but can you just introduce yourself and tell us a little bit about your practice and what you do?

Melissa: Sure. So I'm a clinical psychologist in Missoula, Montana. I have a private practice that is solely focused on assessment of children and adults. And I focus on, I would say that my practice is rapidly becoming about differently wired people, which I didn't expect when I went into practice, but which has been a wonderful diversion.

Debbie: So, and when you're doing these assessments, and just for listeners, we covered in depth, I don't know, must've been the first maybe six months of this podcast, so it's an oldie but goodie, but we did talk at length about, you know, what actually is involved in doing an assessment. But could you just give us like the top line what you're doing if, if someone comes in to you, either an adult or, or an adult bringing their child in for an assessment?

Melissa: Absolutely. So people usually come in for an assessment when they have a question. So there's usually a referral question. Do I have this diagnosis? Why can't my child sit still in school? Why doesn't my child make eye contact? And so we're seeking to answer that question through a series of sort of gathering data. And that involves a really comprehensive clinical interview with the child and the parent. Or if it's an adult, just the adult, um, a series of tests that will address those questions and hopefully will give us kind of a snapshot that's really comprehensive of their learning style. How do they tick, how do they communicate, how do they learn? What's the best way to teach them? And then I write up a report and I meet with people for a feedback session and go over all the information that I found.

And, and I like to think of assessment as kind of putting pieces of a puzzle together. Each piece, you know, the interview, the observations that I make during testing, the test results, prior information that comes from other professionals or previous testing. I'm putting all of that together to sort of build a snapshot of who this person is at this point in time, strengths and weaknesses and how to best help this person. And so I think probably the most important part of the assessment, in my opinion, is going through the results afterwards and making sure that people really understand what the tests mean. So you're not just handing them a long piece of paper with all these percentiles and labels that are clinical. Most people aren't familiar with those things. And really

explaining what does it mean when you're on the autism spectrum, what is bipolar disorder? And kind of going through those things and really having them walk out feeling like, okay, I know what's going on with my kid. I know the next steps. Now I have this referral to the following, you know, a therapist, an occupational therapist, a speech therapist. I know what to do in school, here's some ideas for parenting. So that's kind of the process. And then I kind of send them out into the world, hopefully to other people who can help carry out those goals that we define in the assessment.

Debbie: And so then in that process of, I know your practice is adults and kids, but in that process, what I've heard from so many adults and why I was so excited to have this conversation with you, is that a lot of adults are bringing their kids in, they are going through this process, something that wasn't really available when they were kids, not, not in the way it is today. And they're having their own kind of 'aha' moments. Like, hmm, something sounds familiar here. This is hitting really close to home. So I'm just wondering, you know, generally speaking, I'm hearing that a lot from parents. Do you think that's a common experience that if a child is differently wired, then there's a good chance an adult is?

Melissa: Oh my goodness, this is, this is something that I want to share because it's been so fascinating to me. When people come in for the feedback session with me, I bring out my giant whiteboard and I draw a standard curve and I kind of explain what's average and where people fall. And as I'm kind of plotting, you know, because I have visual learners and I have auditory learners, and so I'm trying to explain it in multiple ways. And what's really interesting when I'm assessing kids is that I would say at least nine times out of ten there is one parent in the room that looks at that white board as I'm giving results and I can see the changes on their face and I can see a recognition in them of, oh my gosh, this is me. And a lot of them say it out loud.

Most of them do. Most of them say, oh my gosh, this sounds exactly like me. And so you know, then I try to use that as an opportunity to say, well, how have you learned to cope with this? How did you learn to deal with not wanting to do math problems or not understanding, you know, how to decode words and how did you get through it? Because now maybe you can be this advocate for your child in a way nobody else can or really understands. But it's so common that people come in and recognize themselves in their child and it's not as common that they want to pursue that further. But some people, I've had some just incredible families who want to do anything they can to help their child and to help themselves and they all come back then for their own evaluation to find out if they're, for example, on the spectrum.

Debbie: I'm wondering if, you know, if you have both parents in the room and one has that 'aha' moment, I also, you know, just from people that I've spoken to, know that sometimes it's the parent who isn't on the spectrum who is more involved in their child's just the, this diagnostic process and more intimately knows what's going on. And they're the ones who make the connection like, Oh, I think my partner is on the spectrum. What does that look like? Or have you experienced that?

Melissa: Oh yeah, that happens too. So a lot of times when the person is having that realization, you know, the wife or the husband who is not having the realization is kind of rolling their eyes or kind of going, oh my gosh, this sounds like my husband or this sounds like my wife or I told you so. Um, you know, there's definitely, yeah. I think one of the things that I think is really interesting and hard about this process is that it seems like people who are on the spectrum that are not yet identified or self identified on the spectrum and maybe who don't know that they are, a lot of people around them may suspect that they are or may have that insight before them. And may kind of know that, but either the person who is differently wired sort of isn't open to hearing that or maybe isn't ready to hear that, um, or, or thinks, oh, it's just my wife nagging me or blaming me.

But I think that is a really common experience that the other parent who maybe is not differently wired, who is kind of maybe running the show more, is not usually surprised that the other parent is likely differently wired. Because usually those are the people in the family that are having problems with each other, is the two differently wired folks are often going head to head because they're both stubborn and arguing. And so I do think it's pretty apparent to spouses, you know, oftentimes before it's apparent to the person that is experiencing that.

Debbie: So let's talk more then about that head to head thing. So, you know, I had someone on the show and we're going to focus this conversation more specifically on autism spectrum, but I did interview someone on the show probably a year and a half ago, Rich Schramm, who created an app for kids with ADHD. His kids have ADHD, he has ADHD. And he was talking about how he really struggled with his, I don't remember his son or daughter, but one of his children's ADHD really just bothered him, you know, and he felt so guilty about that because it was things that he had experience with and was also struggling with. But they seem to have this real like emotional tug of war thing going on. What is that, how have you seen it look in families when there is a parent on the spectrum, a child on the spectrum, like where do the challenges lie?

Melissa: Oh man, I think there's so many challenges. Um, this is such a big question. I think that there are several things. You know, what you just said about, you know, sort of becoming annoyed with the child who's like you. We're all like that as humans in a way, right? You know, the people who bother us the most, there's probably something about us that we're not dealing with. If there's something that triggers us, you know, from another person, just from a general psychology perspective. But I think that people on the spectrum have these, what I call super powers, that in a certain context, they would use their powers for things like building video games and programming computers and creating imaginary worlds and writing novels and just all these amazing things, but the same traits that sort of make them amazing also can be their achilles' heel.

And there's a couple of them that I think really get in the way with parent-child interactions if you have a differently wired parent and a differently wired kid on the spectrum. And there's a couple of them, but I would say that sort of the biggest ones are, so we know that people on the spectrum tend to hyperfocus

and tend to really zone in on one thing. And again, in one context, that can be a huge strength because you can sit down for three hours and create an imaginary Minecraft world. Um, on the flip side, when you're having a fight and you're hyper-focused on one detail and you have to be right, that can be really tough when you have two people going at it who have to be right. Right?

Debbie: Sounding so familiar. Okay. Right?

Melissa: And then you have this thing in autism, and I don't know if folks have talked about this on your podcast, but there's this piece of autism that we talk about called Theory of Mind. And Theory of Mind is the idea that sometimes people on the spectrum don't have very good Theory of Mind in the sense that they're not always aware that other people have different thoughts and feelings than they do. So they sort of assume that it's my way or the highway because my way makes the most sense to me. But I can't really perspective take that somebody else would have an idea that's anywhere near as good as mine. And they're not trying to be contrary, they're not trying to be egocentric or sort of, um, self absorbed, but they just are convinced that they're right. And so you have two people who are convinced that they're right going at, you know, a fight. And then, you know, I think sometimes it's hard for maybe the differently wired parents to see the child as, as having his or her own voice and, and having that voice be valuable. And um, we also have the social pressure of, you know, the idea that parents are supposed to be in charge and you're supposed to be in control of your kid.

And one of the clients that I have diagnosed on the spectrum that's an adult with a child on the spectrum also has talked a lot about feeling as if he was really steered to stay with behavioral interventions for his kid for years before he realized his kid was differently wired and had to change his perspective. Because other people, you know, therapists would come in and say, you just need to, you just need to punish him. You just need to send him to his room. You just need to step up and be the parent. So there's that social pressure piece and then there's the piece of sort of going at it with each other that I think can just lead to these fights that don't end well.

Debbie: Yeah. And I, you know, as you were saying that, I don't know if you see this, but I'm wondering if that kind of dynamic can contribute to things like ODD or Pathological Demand Avoidance or, I'm not an expert on these things, but just that, that dynamic between the two, uh, differently wired, um, people in the household going head to head and kind of digging their heels in. Can that contribute to more?

Melissa: Absolutely. Yeah. So, so when we think of Oppositional Defiant Disorder and Disruptive Behavior Disorder, we often think of them as kind of parenting issues when we think of them from a very behavioral perspective. And so when you're talking about diagnosis or treatment, it really kind of depends what perspective you come from because if you're coming from a solely behavioral perspective, sure, you might have a kid on the autism spectrum who is displaying disruptive behavior and oppositional behavior. But if you flip your lens, right, if you tilt your lens like you've talked about and you say, wait a minute, my kid is not trying to

be defiant, my child is very rigid, my child is hyper-focused, my child feels that he is right and doesn't understand that there's another perspective that might be valuable. Um, the reasons for the defiance are very different than a child who's just trying to get attention or you know, get more screen time.

It really comes from I am wired this way and I see the world this way and I don't know why you see it that way. And so I think sometimes these things get mislabeled as behavioral issues. And if we think about it as a differently wired issue and treat it that way, where we say, okay, this is how you see the world. In the case of, for example, pathological demand avoidance, which we're going to be talking about soon also, these are kids that have a high need for control of their environment, but they're not trying to be defiant. They just, in order to not feel anxious, they have to create a high level of control in their environment, which looks like defiant behavior and outrageous behavior. But it's really intended to calm them down and help them feel okay in the world. And I always think, you know, I say this, I give diagnoses and labels for a living, and I find them to only be somewhat useful. Because they're great in terms of getting you services and getting the right meds and getting the right people involved. But it's really about your perspective. You know, not the diagnosis, it's about your lens. And if you can consider that the child just doesn't understand why the rules are the way they are instead of just why, why won't they just follow the rules? It kind of can lead to a different conversation.

Debbie: Yeah, that makes sense. So one of the words that came up a lot, you know, as I mentioned earlier, we're doing a followup podcast episode to this conversation where I'll be talking with adults who are in this situation who have been diagnosed as adults as a result of their going through the journey with their child. One of the words that came up a lot when I asked for feedback from parents was this word 'masking'. That they have built this ability to mask, when they're in the workplace, you know, just kind of throughout their lives. It's been a coping mechanism for them. And so I'm wondering about that because I imagine many of these parents, you know, if they haven't been diagnosed until now, many of them have had thriving careers and have, you know, have been successful. So can you talk more about that and how a parent is able to, to do that in kind of the real world and then what happens at home?

Melissa: Yes. This is such an important question. So masking is the idea that you just learn how to fake social skills. You learn how to fake interactions. And so many people on the autism spectrum, if you think back to when you and I were in school, how many people did you know that had Asperger's disorder at the time?

Debbie: No, none.

Melissa: Right. Now, you know, now we probably would find out that some of our friends did and some of the people we went to school with. It wasn't recognized. And so what people in our generation and previous generations had to do was they either had to suck it up and deal with it and learn ways to get through the world or they couldn't. And then if they couldn't, maybe it would turn into real shutting down or you know, anxiety disorders or you know, failure to launch kind of things. And then you have people who just were resilient enough or had enough

support or had just the gumption to be able to say, okay, I know I don't get it. I'm not going to show that to people. I am going to just make it through the world the way I have to.

And then you have their parents who didn't know what differently wired was. They might know their child was different and they might've been supportive or not, but there was very much more of a bootstraps mentality when we were growing up and obviously in previous generations to us, even more so. So I think that people have had to push through and I honestly think it's traumatized a whole generation of autistic people who had to pretend that they didn't make repetitive noises and just stop doing it. Who had to stop making ticks because people would make fun of them. And they had to learn how. Who had to mask their sensory issues with wearing sunglasses inside and making a joke about it or pretend that they understood jokes when they didn't and just laugh along.

And maybe people would know they were kind of awkward or a little off, but they just learned how to do it. And then you bring that to the home. And what's hard about that is that some of these parents will say, well, I did it. I figured it out. I masked and mimicked, so why can't you? Right? And so that's a big fight that can happen in families where when the parent doesn't realize that they're differently wired or they're aware of it and they just say, well, who cares? I, I figured it out. I compensated. You can too. Well, the child needs to have coping skills to do that, but the question really is that in this day and age do we want, or ever, do we want to encourage people to not be who they are? Do we want to have them hide?

There's all this controversy about things like ABA therapy, right, about like if I can teach you how to smile and reciprocate with behavioral methods by reinforcing you, you can learn how to be neurotypical and act neurotypical. And I'm not sure that that's what does a service to people who are not neurotypical. I'm not sure. That's, we're asking them to blend in and not be themselves. And often what I see then in my office is a 40 something year old man breaking down in tears saying I never got to be who I was. I don't know who I am now and I don't know how to help my kid.

Debbie: Oh god, that's heartbreaking.

Melissa: It's heartbreaking. But what's wonderful is that so many of them show up to get help and that's all beautiful.

Debbie: You know, you talk, you mentioned the word trauma. What does that help look like for an adult? How does one go about trying to heal trauma that was experienced, you know, as a result of just not being seen or understood?

Melissa: Yeah. Oh, such a big question. And I, I don't know if there's a pat answer to that. I think, you know, the answer is definitely therapy, right? Like so mental health therapy to, to say, just to explore what your feelings are. So a lot of people with autism have something called Alexithymia, and Alexithymia is where you're not, you sort of have trouble identifying your emotional experience or expressing it. And sometimes I think that it's, you know, there's a misnomer in my opinion, that

people on the spectrum don't have empathy. That is, in my opinion, completely wrong. I think most people on the spectrum actually have more empathy than the rest of us could even imagine, even us very empathetic people. But the sensory overload of being in the world shuts that empathy down so that it's hard to make eye contact and it's hard to connect because they feel so deeply.

So then if you translate that into like what that looks like as an adult who has always not dealt with their feelings, or if nobody helped you with your feelings, or if you had to hide that you were not typical. A lot of people don't know who they are, what they're feeling. So there's a lot of grief about sort of subtle emotional neglect from parents who might be very well meaning people who just didn't attune to the fact that the child was different and needed help with labeling emotions or expressing emotions. And so there's a lot of sort of maybe regressed emotions and, and that's where adults have meltdowns too. They look different than a tantrum in a kid, but adults on the spectrum have meltdowns. And you can read about this, you know, there's articles about it on autism websites and there's books, you know, where people describe what a sort of adult meltdown looks like.

But, so managing, learning to manage your emotions I think is a big piece. I think probably the biggest piece is having supportive people in your life who will accept you for who you are and not try to make you be anything else than what you are. So coming to terms with sort of some of those emotions, becoming in touch with them, learning about your communication style. So a lot of times I'll send adults also to an occupational therapist or a speech therapist. And the speech therapist can help with things like conversational reciprocity and making eye contact and trying to understand jokes. And, and an occupational therapist can help with some of that what do you do with sensory overload? What are some tools we can give you to manage your sensory experience? So I would say that the sort of treatments are maybe not different than for kids, you know, in a basic way. But there's all the added layers of some of these folks have just been so traumatized by the school system because there was no help for them.

Debbie: Well, yeah, I mean, and you use the word grief. I'm wondering what you've experienced, you know, from what I hear in my community that there seems to be this mix of loss, sadness. Some people just feel relieved or you know, that they have this sense of clarity and understanding and finally they kind of know who they are and it can be really empowering. You know, I guess there's no right way to experience this, but does that kind of cover any of those would be a normal reaction to discovering this about yourself?

Melissa: Yeah. You know, I see a range of responses and it's kind of like anything in therapy. It really depends on where you're at in your life and what you're willing to see about yourself. Right? Because we're always in different places in our life and sometimes we're more willing to face things fully directly. And sometimes we're only willing to look at parts of ourselves. But you know, I think what happens with a lot of these parents is they become so frustrated with parenting their child and they don't know what to do, that they get to a point where they say, I'll do anything, just help me. And that's where sort of like the openness comes in to learn more about themselves. And so, you know, my experience

honestly with adults on the spectrum who get a diagnosis on the spectrum is that they're overwhelmingly relieved and not surprised.

Because we live in the age of the internet, you can look things up, you can self assess online, you can do those things and you know, all of those things are not considered valid psychological tests. But there are some things in there that that can help people self identify. And so my experience, at least in my practice has been that most people feel relief. But I suspect that that's because the people who are coming to me are ready to hear it. If, if people aren't ready to get a diagnosis, they're not usually going to come in for a diagnosis, right? Or go into therapy. They're going to continue to sort of say, oh, it's my wife's fault, or it's, you know, it's the school and they don't know how to help my kid or my kid's just being defiant. So if a person is at a place where they're really ready to know who they are and learn about themselves, my experience has been that there is a lot of relief. There's definitely some grief about, wow, look at what my kid has that I didn't have. My kid gets an IEP or an individualized education plan. My kid gets to go to a sensory room, my kid gets to jump on the trampoline once a week to release the sensory issues that are causing anxiety at school. I didn't get any of that. So there is definitely some grief, but I feel like by the time people are ready to know, it's more of relief.

Debbie: And do you recommend, you know, there's so many things online, you can take this test online assessment to see if you have ADHD or if you're on the spectrum, you know, do you recommend that people take it one step further and actually go in for a formal assessment? Uh, what's, what are your thoughts on that?

Melissa: You know, I think the need for an informal versus formal assessment really depends on your goal. And I think we talked about this in my earlier podcast about just the process of psych testing, but a diagnosis is really useful in certain ways, right? Some people, and what's interesting about people on the spectrum generally is that a lot of people really like that label and want to call themselves an aspy or something like that. So, so there's, sometimes there's a desire for that label, but oftentimes it's more functional, the reasons that people will come in. I need an accommodation for work or I'm going back to school and I know that my learning style is different. So I need to do LD testing to see if I can get accommodations, you know, when I go back to school.

Or some people come in because they don't know how to talk to their spouse and they want to learn what their communication style is and then have me explain to them and their spouse, hey, this is how you have to talk to your husband during conflicts. This is why he doesn't seem like he's listening to you or he's stuck on one point. Um, you know, or if you are like, hey, I'm going into therapy and I, I don't know who I am, I don't know what I want to work on. You know, assessment can be a great place to sort of identify what are the issues that I need to work on. The other piece is that people on the spectrum are, as adults, by the time they come to me, they're often so misdiagnosed with other things or on medications that may or may not be helpful. So one of my clients who is an adult on the spectrum with a kid on the spectrum was diagnosed initially with ADHD, and that probably is a valid diagnosis, and was on, you know, meds for ADHD for years, but they didn't really help.

But that lens of getting diagnosed with ADHD, not being on the right meds, and then kind of going through this process of we're going to keep trying things, maybe it's anxiety, maybe it's this, and then I'm in therapy and maybe it's this. And then at that point it's like if you don't know really what you need to treat, and if you need medication, assessment is also good at sort of saying, well, you might not need medication. You know, here's how good your attention and your working memory are without medication, you don't need it. Or ooh, you know, you, maybe you really do need that. So I think, you know, those kinds of things can be helpful.

I recently had a client who's on the spectrum that's an adult that went on an antidepressant and I think this person had so much anxiety previously and now that they're on this antidepressant, their anxiety is going down. And, and that actually precipitated them realizing, them coming in for an eval because that they started to realize, hey, I'm on the spectrum and I've been hiding it for so long and now that my anxiety is decreased, I don't want to hide it anymore. I kind of want to just be who I am. I'm tired of putting up the mask, it takes all this energy and all this anxiety and I'm tired and I kind of, I need to know who I am so I can know how to proceed.

Debbie: Have you seen situations where this discovery, you know, the child and this parent being similarly wired eventually leads to an even deeper bond, you know, powerful relationship because of that shared experience and maybe even learning through each other?

Melissa: I think so. I think it really, um, the, the onus for that is probably more on the parent, right? Because the child is looking to the parent for that sort of guidance and that maturity. And so the parent has to learn not to fight back with their child and that kind of thing. And so I have seen that over time that there has been a growing closeness when a parent is aware of how their issues are contributing, there can be really like a greater understanding of what their child is going through.

Debbie: All right. So my hunch is that there are a lot of people listening to this episode who are shaking their head and listening, uh huh, yep, yep. What do I do? So if there's someone listening to this and they're realizing that either, it might be a two part question, if they're realizing they're differently wired or if they're thinking, wow, my partner, you know, we might want to move forward with an assessment. And maybe the partner hasn't even considered it. So yeah. So this is two separate questions. One, what would you recommend a person listening who is starting to self identify how they proceed? And then maybe a second part is any thoughts on how a partner could start the conversation with their partner if they suspect they are also on the spectrum?

Melissa: Okay. Yeah. I think the first one's easier than the second one. How to proceed would be, again, depending on your goal. If your goal is self understanding, I think it does not hurt to get an evaluation. I think if you get a formal evaluation then you're taking tests that are validated and normed and scientifically researched and um, we believe strongly then that they measure what they're

supposed to measure as opposed to an online assessment that has no necessarily scientific backing of if this actually does measure the disorder or not. So I think that getting an evaluation can be really good. What's important I think is making sure, and I think Seth Perler has talked about this, making sure that you have the right person for your evaluation. So making sure that you, if you think that you might be differently wired or on the spectrum, making sure that you're going to a psychologist or neuropsychologist. It doesn't matter, it really has to do with what their area of expertise is.

So if this is someone who is familiar with adults on the autism spectrum, knows how to assess for it, knows how to see it, and tease that out from other diagnoses, that's the person you want to see. There's a lot of folks out there who, because we're just learning so much about autism now, who maybe are later in life psychologists who didn't learn about autism or maybe haven't done a lot of continuing education about it, or. You just want to make sure that, and so call and ask questions. Don't be afraid to call our offices and say, hey, you know, these are, this is what I'm going through. This is what I think I have or I'm struggling with. Is that what you do? And how do you do that? So people shouldn't be afraid to ask questions and find the right person.

I think the same is true with a therapist. So that's another place to go is therapy, right? But to find a therapist who understands that lens of being differently wired instead of looking at it in a really clinical way of anxiety disorder or bipolar disorder, but really looking at the whole person and saying, oh, you know, this is, I specialize in working with people on the spectrum. So finding the right people is, is really key. So you know, you also can do things like online assessments. You can do reading. What's so great is that there's this boom right now of people writing books about being on the autism spectrum, you know, there's articles about it. So if you're self identifying, you know that and that's enough for you, then maybe you just take that information into therapy to work through what you need to work through.

In regards to how to start a conversation with your spouse, that's tough. You know, my experience with my clients who have come to the realization of being differently wired is that it's because of that Theory of Mind issue that I talked about earlier. And because of that sort of, um, people have a really specific viewpoint of themselves and people on the spectrum typically tend to be a little bit cognitively inflexible at times or rigid in their viewpoints. And so when the idea comes from someone else, think about your child as differently wired and you ask, you say, hey, would you like to do this today? And they're like, oh no, I would like to build batteries today. You know, they have a very specific idea of what they want and who they are and how they want to spend their time. And so I think these are very hard conversations to start with a spouse, unless there's an opening of realizing there's something.

So I think gently talking about, hey, you know, when you do this, it kind of reminds me of our son. Do you feel like you two are alike in some way? So maybe drawing the connection between the child and the parent. You know, oh, I read this really interesting book, I wonder if you want to read it. You know, a lot of my clients have come to me after reading books like *Neurotribes* or Temple

Grandin's books or something on the internet and they say, oh my gosh, this, this is me. Now I need to know. So I think what you have to do is probably put the information in people's hands and they have to be ready to take those next steps. But I think the way to do it is not ever in a blaming way or a judgemental way, it's always going to be in a curious way. And I think that if we can think about people as differently wired instead of having clinical problems, that changes the conversation, which is what you've been trying to do. It changes the lens and it takes away a lot of the judgment and the shame, and the stigma, which I think then would make people more open. I hope.

Debbie: Thank you for answering that. I threw that one in as a, as a wild card at the end. But I appreciate that. So well before we say goodbye, um, we covered so many things. But is there anything that we didn't get to that you think is important to include in this conversation?

Melissa: Just maybe one other thing to consider would be kind of going back to the fighting that happens between a parent, a differently wired parent and a differently wired child. I think sometimes a helpful way to think about autism is similar to the way that we think about PTSD or, or trauma. So my experience, the more I get to know people on the autism spectrum, children and adults, the more I start to see the similarities in somebody who has been traumatized, who either goes into fight, flight, freeze or fawn. The four F's, which we can go into or don't have to go into. And people with autism who do the same thing because of sensory overload. So if you think about somebody who has trauma from, let's say they were in an earthquake and now they tend to freeze when they're asked to do something because they're still so traumatized from the earthquake, you can see the same thing in people with, on the spectrum where once they become overloaded with sensory information or once nobody's seeing their viewpoint and they're feeling really frustrated, it's almost like their brain goes into that same place as somebody with trauma. And people with autism are actually, I want to say the last statistic I read, which is probably outdated, is that you know, 50% of kids with autism are runners or they'll run out of the classroom or they'll run from school or they'll run across the street without looking.

So that's, that's the flight response, right? And then the fight response is some kids get aggressive and then of course get mislabeled as behavior disordered when maybe they're aggressive because they didn't understand that somebody was trying to ask them to play or, or wanted an object back that someone took. Or a lot of people I think with autism also go into the freeze state where they shut down because sensory overload takes over. And so I think what can happen with parents and kids that are both on the spectrum is that one of them is in one of those states and the other might be in the same state or a different state, but they're both maybe in fight mode. And when you're in fight mode and you're using your primitive brain to make decisions, you're not using that executive functioning that says, wait a minute, yelling at my child is not going to help them change their behavior.

You're in it, you're feeling so stressed out in the moment and, and it's just anger output. And that's what your kid's doing too. And when you have two people acting out of their primitive brains, when they have the capacity to do that, if

they, to not do that if they're calm, it can really cause a lot of conflict. Or if you have a kid that is a freezer who shuts down and the parent wants to fight with them and fight with them and talk to them and talk to them, and the kid's just shut down and shut down and shut down. It's like one person's trauma talking to another person's trauma and you're not getting anywhere. So I think that's another helpful way to look at it is that when we're in conflict with our kids, we're not always using our rational minds. And so if we can start to realize that we're acting out of a primitive state that's either sensory overload or sort of a trauma response, then we can take a minute to calm ourselves down, especially for parents, you know, and to not fall into those patterns or to recognize, hey, my child is in freeze right now. How do I help him get out of it? What's going to be the most effective way?

Debbie: That's great. Thank you for that. So, okay, fantastic. I just really appreciate your perspective and your thoughtfulness in helping me bring this conversation to this community. Again, I think this is going to be relevant to so many of our listeners and I'm excited to share the second part of this. I will be talking with adults who are in this situation to see how they're moving through it. So before we say goodbye, is there, I guess if you have any favorite resources you mentioned Temple Grandin's book, you mentioned *Neurotribes*, anything else you want to share? And then also is there a place that people can connect with you if they want to learn more about your work?

Melissa: Sure. Yeah. Thank you so much for doing this podcast. I am, I'm really excited about it and I can't wait to hear the one that you do with parents that are on the spectrum because they're going to know so much more than I am. Um, but there's a ton of books. If you just go on Amazon and Google, you know, I think I might be autistic or books about autism and adults. There's a couple books. There's one book that's called *I Think I Might Be Autistic*. There's another book called *Pretending To Be Normal*. Um, so there's, you know, there's Temple Grandin's book is really great. *Neurotribes* is awesome. So those are some really great resources. And then ways that people can reach me, on my website, MelissaNeffphd.com and then all my contact information is on there. And it's been really fun, I've actually had a couple people come to be assessed from me because they heard me on the podcast. So they've come from out of state or things like that, which has been super fun that people are interested. And um, yeah.

Debbie: Awesome. And I'll just, we'll give a shout out to Learn Inc too because that's how Zach Morris who connected me with you. Um, there's some good stuff happening in Missoula. I have to make it out there one of these days.

Melissa: Yes, you're always welcome. And Zach is doing an incredible job at Learn Inc, he's helping so many differently wired kids.

Debbie: Yeah. Cool. So all right. Thank you again so much for this conversation. I really appreciate it. I learned so much and we look forward to having you back on the show. As you mentioned earlier, we are going to be bringing you back on not too far in the future to talk about pathological demand avoidance. So thank you so much.

Melissa: Thank you so much. It's been so fun and I can't wait to do it again.

RESOURCES MENTIONED:

- [Dr. Melissa Neff](#)
- [A Deep Dive About Assessments, Diagnoses, and Labels, with Dr. Melissa Neff](#) (podcast episode)
- [Thinking in Pictures: My Life with Autism](#) by Temple Grandin
- [Neurotribes: The Legacy of Autism and the Future of Neurodiversity](#) by Steve Silberman
- [I Think I Might Be Autistic: A Guide to Autistism Spectrum Disorder and Self-Discovery for Adults](#) by Cynthia Kim
- [Pretending to Be Normal: Living with Asperger's Syndrome](#) by Liane Holliday Willey
- [Learn Inc School](#)