

Zoe Darazsdi: Mental health stigma & neurodivergent self-adv...

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SPEAKERS

Zoe Darazsdi, Katy Weber



Zoe Darazsdi 00:00

Even though I don't have the same desire to like fit in necessarily think being understood, is like the greatest feeling on Earth.



Katy Weber 00:16

Hello, and welcome to the women and ADHD podcast. I'm your host, Katy Weber. I was diagnosed with ADHD at the age of 45. And it completely turned my world upside down. I've been looking back at so much of my life, school, jobs, my relationships, all of it with this new lens, and it has been nothing short of overwhelming. I quickly discovered I was not the only woman to have this experience. And now I interview other women who like me discovered in adulthood, they have ADHD and are finally feeling like they understand who they are and how to best lean into their strengths, both professionally and personally. Okay, I'd like to take a moment to share with you this review from a listener named Nicole on the Apple podcast platform. It's entitled validation. I've listened to every episode twice. Thank you for helping me feel seen and heard so many tears. I'm not alone. I'm not broken. I'm not an idiot with gratitude. Nicole. Wow, Nicole, that is incredible. Thank you so much for this review. And I am sincerely so glad that this podcast has been so helpful. Also, apparently, you now know a lot about me. So I'm just gonna go ahead and apologize for all the times I've repeated stories and jokes throughout these episodes, because I tend to do that a lot. Anyway, thank you for this review. And for anyone else out there who is a listener of this podcast and you've been helped by these conversations. A lovely way to say thank you is to take a moment to leave a review on the Apple podcast platform. And if that feels like too much, and I totally get it just stop and quickly hit five stars. In fact, why don't you just pause right now you can go do it. I promise I'll wait for you. Also, this is a quick reminder that I've got some great opportunities for personal growth coming up very soon, we've got the women and ADHD book club, a virtual accountability and support group where we read and complete the workbook entries in a radical guide for women with ADHD. And registration is now open for a new round of small group coaching. I've got two sessions coming up if you're looking for connection and support

and friendship with other incredible women with ADHD, while also developing a greater understanding of who you are and how to best work with your brain, head to women and [adhd.com/group](https://www.adhd.com/group) coaching to find out more and to register and for the book club, head to women and [adhd.com/book club](https://www.adhd.com/book-club) and of course you will find both of those links in the show notes. Okay, here we are at episode 119 in which I interview is Zoe Durazo it. Zoe is a neuro divergent mental health counselor who specializes in empowering autistic and ADHD clients. She has helped countless teens and adults to navigate the challenges and gifts of living with a unique brain. Her practice is trauma informed and guided by Adlerian counseling theory and disability rights activism. So he and I talk all about some of the stigmas and biases faced by autistic and ADHD clients in therapy, as well as strategies for Neuro divergence self advocacy in therapeutic relationships. We also talk about how mental health counselors could better serve their neurodivergent clients. Zoe's work is supported by her own Autistic Self Advocacy and the professional research she conducts on autistic people's experiences in counseling. When Zoe is not counseling, she is writing kickboxing and playing with her dog pieces. Okay, enjoy. All right, well, so thank you so much for joining me. I'm really excited to hear your story.

Z

Zoe Darazsdi 03:44

Ya know, thank you so much for having me on.



Katy Weber 03:48

So yeah, I guess we'll get started with your diagnosis. I'm assuming you were diagnosed in adulthood? Or why don't you tell me when you were diagnosed both with ADHD and with autism, and what was going on in your life that led you to piece together that guy should really look into this.

Z

Zoe Darazsdi 04:08

So when I was 19, I went to, like a mental health counselor for a lot of, you know, interesting challenges I was having that I just couldn't place or understand. And this counselor, she and I really did not have a great therapeutic alliance, to be honest. She kind of casually as an aside, mentioned that I have autism. And I was like, do tell how does one come to that conclusion? You know, a few sessions in but she didn't have a ton of information on on autism itself. She did not take note of ADHD as something that I had. She did you know explain to me Eat, why she thought that based on the DSM very briefly, but then I stopped seeing her because of you know, just other things feeling like the counseling wasn't going very well. At the time I was in a Bachelors of creative writing. And I had a minor in art therapy. So I wanted to do something with mental health care. But prior to like even going to college, one of my first jobs ever was at this day camp run by the local Ark, I mean, mainly, like a 15 year old and they're no training. And they were like, yes, like, do stuff with pipe cleaners, you know, this is very unqualified, but I felt like I was just intuitively capable of understanding the neurodivergent children, the autistic and ADHD kids, I knew what was going to, you know, set them off, I knew what they needed in order to transition between activities. And so when I was told, Oh, you you're, you know, autistic, I really looked into it. And I did a lot of self educating. And then through that, I found like the disability rights activism field, and I used a lot of my writing skills, my public speaking skills to try to essentially assist with that movement. And that is where I really came

into my identity as a neurodivergent person. And then, as I kind of learned more about autism and ADHD, the ways in which the symptoms actually overlap really considerably, I realized that that was also like an element of my identity. So just I was never really officially assessed. But I believe strongly in the concept of not self diagnosis, necessarily, but self identification, considering just the extent to which assessment is inaccessible in many ways. And also, you know, the extent to which all assessment is done within a context of racism and sexism, and many other systems that kind of result in some pretty inaccurate findings in the first place, or some disempowering experiences. So it's not that I don't believe strongly in assessment or think it's like, awesome for a lot of people. I know, it's been extremely helpful, extremely validating for so many people. But that's just not the personal path I've taken.



Katy Weber 07:27

Yeah, well, I think, you know, it's not accessible to so many people, especially in adulthood. And I think it's, you know, a question that's run through my podcast a lot, right, which is like, who the, the incredible overlap and also just not knowing where to go in terms of an assessment and also realizing that I like that term self identity is huge, right? And when so especially when the majority of us seem to share that experience of being minimized and being dismissed in a lot of our experiences with clinicians. Now, do you recall what this therapist saw, you know, did she did she tell you, you know, when she just sort of flippantly said, Yeah, you're probably autistic. What was she? What was the impetus for that? Or what were some of the characteristics she saw?



Zoe Darazsdi 08:19

To be honest, the conversation itself, I have a really hard time recalling it. But if I had to guess, if I came into my own office, I'm a therapist. Now, some things that I would kind of latch on to as indicators, just having a real challenge with understanding some of the social dynamics that neurotypical people kind of set of standards and expect people to adhere to, I really struggle with knowing what my social expectations are, and also kind of understanding why I would actually want to follow them, or what good would come from following them. I've always had challenges with these concepts of sort of like doublespeak, and things like that. And then also, you know, in tremendous sensory issues, you know, which were really like baffling to me my entire life. And I did not understand them. And a lot of the times I think it was interpreted as me being, you know, bratty or attention seeking, because I would just get so phenomenally overwhelmed by a fabric and noise, anything. Also just hurt like horrifically bad spatial reasoning. So bad, and you know, some other sort of just differences in the way that my brain processes information. But you know, because I was able to meet the expectations provided for me, in you know, the aspects of my life like education and career And because in many ways, it didn't fit the stereotypical bill of what people are looking for, you know, a little white boy who's like running around and very fixated on Thomas the Tank Engine, right. This is like, what they think of with a person who's autistic and as ADHD, because of that, it was just never, never something that other people really recognized.



Katy Weber 10:22

Yeah, you know, I was actually listening to an episode recently of the thoughtful counselor, they were talking about working with autistic clients. And one of the first questions was like, you

know, what are some of the characteristics of autism and in this was a few years old, this episode, they were talking about the reluctance to make eye contact. But there was no comment about the idea of masking, right, and how this sort of like fake eye contact is very common with many neuro divergence, which is like, you know, we've talked about sort of joked about, like, if I'm making eye contact with you, it means I'm elsewhere. I've like disassociated. Right, and that, so eye contact is not necessarily an issue for a lot of people. But it's like, what's happening when you're making eye contact is I'm no longer listening to what you're saying. And but so there was no comment that, you know, there was no conversation about masking and I feel like masking is such a huge part of autism and ADHD in terms of our own recognition about our behaviors. In adulthood, when inevitably, you're kind of looking over your life through this new lens and thinking like, maybe there wasn't evidence there, but because it was, it's because I was so good at hiding that and kind of learning how to socially adapt. I also was listening recently to an unmasking autism. Is that what it's right by Devin price, unmasking autism? Why does that sound weird, all of a sudden, I was like, anyway, great book highly recommended for anybody who is curious about whether or not they are also autistic. If they've been diagnosed with ADHD, or just starting out on sort of neuro divergent exploration, I found it really fascinating. And also like very much called out on a lot of things that I'm really very confused. Like, I feel like the more I learned about the overlap between autism and ADHD, the more confused I am about where one ends and where one begins, or like, Am I just thinking about it wrong, like some part of me sort of things like maybe I'm approaching it as though they are two independent entities that coexist, as opposed to thinking about it as more of like an amorphous blob of CO occurrence. I don't know, how do you kind of conceive of the two diagnoses in tandem? The intersectionality? Between the two, right?

Z

Zoe Darazsdi 12:42

Yeah. So I think that one thing that I always like to share with people is that the DSM, which is the you know, for folks who don't know, the book that has, it's the diagnostic and statistical manual of mental illness, it's where like, our diagnoses come from, that book itself has very low interrater reliability, like, if it was any other sort of assessment, the inter rater reliability level would be so low, that it would be considered not useful. So they actually lowered the standards in order to accept the DSM five, which basically by that it means that one person could go to multiple different therapists, all working off the DSM five, and get different diagnoses per therapist. So that in and of itself, to me, as a person who's really interested in social constructivism kind of like throws into a lot of question, the rigidity through which we conceive of these different diagnoses as being so separate from one another. You know, for example, like I see a lot of attachment issues in autistic people and people with ADHD. I see those things as being inherently linked. But anyway, started getting on a tangent that when we cut myself off with autism and ADHD, yeah, I sometimes I think of it as this like jumble of traits. Like sometimes I will interact with someone, like in my own private practice, interact with someone who clearly has all of the traits of autism, and not a lot of those ADHD additions. Or someone who has many of the traits of ADHD and not there's autism admissions, but the vast majority of people who I see clinically, are a blend between the two. And I think even just a lot of it presumes intentionality. Like when we look at folks with ADHD, it's like, oh, well, you know, you are not able to read social signals. But it's, it's because you're not slowing down enough to pay attention to the other person. The Autistic person, you're not able to read social signals, please the law cognitive empathy. When we get finer and finer into the details, there isn't a ton of

difference there. Right? Both of you are not processing the information accurately. And I don't know how well you can really parse apart the differences there, or why it matters that much. You know,



Katy Weber 15:25

I don't know why it matters that much, you know, because I asked that I asked that. And I feel like that's often some sort of the, the closing remark when I'm always asking, like, what is the difference? What are we talking about here? Because I also get very wrapped up in what are we talking about here that question with ADHD, it feels like a lot of the diagnostic criteria is based on like evidence, you know, behaviors. And yet at the same time, like most of our experiences, most of our lived experience as, especially as women is not categorized by behaviors. It's categorized by emotional regulation and executive dysfunction. And so a lot of it is it's so internal. And so I'm like, What are we even looking for? What are we talking about here? And I'm getting myself all jumbled up even just saying this out loud. What even was my point here? I think it was like, I've like, that's my rigidity. Part of me, that's like, I need clear definitions for everything. It's really difficult for me to embrace the chaos of, of the diagnoses, right? And the presentations, and I, you know, I saw a tweet recently, that was like, not a lot of people who aren't autistic spend a lot of time wondering if they're autistic. Like, okay, fine. I see where we're going with this.



Zoe Darazsdi 16:44

Right? Yeah, so much of my approach is like, let's just look at like, your individual experiences, your individual strengths and challenges. A lot of the times I see Well, for starters, many practitioner education programs, like therapist education, you know, masters of counseling and stuff like that. Don't even include one lesson on autism or ADHD, which is just ridiculous. A lot of the times I'll guest speak at, like Dr. To psychology programs. No, we've never had a person come in and talk about neurodiversity. Okay, like that is, you know, and then I have clients come to me and say that they have a lot of experiences with therapists who can think they understand these concepts. But in reality, all therapeutic interventions are being normed against, like, you know, created for neurotypical white men, it just doesn't work the same way for us. When you take some like counseling theories, and you apply them without really openly empathetically listening to autistic ADHD people, when you look at just our behaviors, you're going to have a very different understanding and a different approach on how to help people, like so many people I know, have executive dysfunction issues. And the therapists are like, well, this is your self esteem, you know, or this is you actually, some part of you secretly unconsciously has an issue with this, almost like sort of an accusatory way of like, well, I know you better than you know, you. And so I know how to interpret this, when really, it's like, if you listened to the person, if you really work through what's happening, it's that they're emotionally dysregulated. And they're being met with a task command, and they can't handle it. And it's not that they don't think they deserve to take a shower. It's that their brain is coming up against a wall.



Katy Weber 18:51

Yeah, and I think also, it doesn't matter how many tools you have in your toolbox in those moments, it doesn't matter how much how much CBT training you have, or DBT, or you know, it

doesn't matter how much EMDR you've done like in those moments, of emotional dysregulation, you none of those tools are helpful you because you just go from like zero to intensity so quickly, that like that's another thing, I feel like it can be really frustrating. It's just like, it doesn't it has nothing to do with your ability in that moment. And everything to do with just sort of the the dysregulation part and one of the things I hear a lot of the time from from women who go to their therapist and say I think I have ADHD is everybody everybody feels like they have ADHD sometimes, you know, you're let's let's work on the depression and the anxiety, you know, the just the minimizing immediately the lack of curiosity and the minimizing of, of what could be like a real lived experience, you know, Revelation, and had somebody else will resist They come to me and say that they talked to their therapist about having ADHD and their therapist was like, Well, I think we're all a little neuro divergent. And, you know, everybody's brains are like thumbprints. And you know, everyone's different. And so it was like, I feel I hear these things that are so aggressively unhelpful for the experience of somebody seeking a diagnosis. And one of the things I feel like is, seems to run through. I don't know if it's the if it's the counseling, curriculum and the training, but there's like a reluctance to diagnose, right, there's a reluctance to pathologize a lot of the experiences that women are having and saying, Well, you know, it's depression, as though that exists in a vacuum. And so I'm curious, like, do you if you were just talking about how a lot of the curriculum is not the word he is, but uh, you know, I feel like a lot of the training around the therapeutic model is to avoid the quickly diagnosing somebody, right, that you kind of want to, you want to work on, not pathologizing behaviors, but I feel like for the neurodivergent experience, we're not looking at a diagnosis as pathological, we're looking at a diagnosis as identity. And that is something that's very difficult to articulate to our therapist sometimes. Does that making sense? I feel like I'm being very, I don't know, if I'm representing my thoughts very well, right now. But you know, what I mean, like, I feel like there seems to be something inherent to the training. That is there's a disconnect.

Z

Zoe Darazsdi 21:34

Right. And I think that that's something that is like a difference between what you know, people come to me and be like, I don't know, what's the difference in like a counselor and a psychologist and a psychiatrist. And I think part of counseling is built on this idea of like wellness rather than illness as being integral, which is generally positive, you know, but it's almost, you know, what it almost feels like to me, I will be interacting sometimes, with the neurotypical mom of a neurodivergent child. Now, no disrespect to this community of people in any way. But a lot of the times, I will hear from them, things like, I use person first language for my child, because they're not defined by their autism and their ADHD, you know, this fixation on it, it has to be not a problem, it has to be either something that is so minimal about you that, you know, it would come extremely secondary, almost like a non integrated piece of your identity that could be removed. Or it has to be something that is like exclusively positive. There's not a lot of nuance there. And so much of the neurodivergent experience is existing in these stages of new bonds. Even myself as an autistic person. I believe that my autism and my ADHD and as is a big part of the reason why I have been successful in many things that I have done. I also believe that my autism and ADHD is part of the reason why I have experienced a lot of relational difficulties. It's part of the reason why, you know, I will go to a bar with my boyfriend, and it's like, oh, you know, I hosted a conference last weekend, I did all these things, etc. I go into this super crowded bar, I have to leave after 16 minutes and I cry in the car, I have

a meltdown. The same trait that might allow me to be very successful in one instance, makes life a living hell in another. There's some, some real nuance there. That gets washed away through the oversimplification found in the mental health field and in society at large.



Katy Weber 23:55

Yeah. Yeah, I feel like I complained about this too, with a lot of ADHD coaching approaches of like, we're gonna beat this right? And we're gonna we're gonna fix this. And I see that mentality so often in terms of like, how, you know, and I have clients who come to me who are like, Okay, I was just diagnosed with ADHD, how do I fix it? And, you know, I'm really having to sort of deconstruct where that's coming from, and the sort of ableist roots of a lot of that and coming up with like, no, actually, let's let's take the time to see the benefits. Lean into those, mitigate some of the struggles that are likely coming from miscommunication, misunderstanding, improper environment, you know, a lot of those things that are leading it to be feeling like a disorder when when it's really not. This episode is sponsored by athletic greens. I recently started taking ag one by athletic greens because I was honestly tired of juggling multiple supplements, researching which companies were the best I'm trying to remember to take them all throughout the day, I had heard great things about ag one. And I've been really pleased, I found it to be a simple and easy way to take care of my nutritional needs. And it tastes great. I take anyone on an empty stomach before my first meal of the day, and I find it gives me a fantastic boost of energy, it's become a really seamless habit to adopt. And it couldn't be easier. It's just one scoop of powder mixed with water. And I love knowing that these are high quality ingredients and that I'm getting the probiotics and the vitamins and minerals I need for my gut health and brain health. This one drink now replaces most of my other daily supplements, if you're looking for a simpler and cost effective supplement routine, athletic greens is giving you a free one year supply of vitamin D and five free travel packs with your first purchase. Go to athleticgreens.com/womenADHD, that's athletic, greens.com/womenADHD, and there's a link in the show notes, check it out today and start feeling your best. So now you are also talking about your neurodivergent clients. How did you do they come to you post diagnosis or are you screening? What are you finding with your clients?



Zoe Darazsdi 26:12

So my clients are in differing stages of identity development. When it comes to neuro divergence, a lot of people were tested during the pandemic, they were tested as adults. Other people were, you know, diagnosed as children, some people are just like self identifying that way, I find that there is, however a like a high degree of accuracy, and people's self identification. And I think a lot of that has to do with the fact that in the past five years or so, the community itself has taken charge and given itself a voice right through podcasts like this through educational tech talks. And I think that there's a big backlash with people saying, you know, this is now a trendy illness, this ADHD, this autism, you can't just have people out there making videos about how this works. And then everybody believing them. Like for starters, many of the people making these videos are very educated people and know what they're talking about. But also, research indicates that people with you know, autistic ADHD people have not been anywhere near the center of choosing what gets looked into when it comes to our own experience. We are never shareholders stakeholders in ADHD autism research. It is consistently stuff coming from a eugenics perspective. It's stuff where, you know, people's parents are being asked about them, rather than people being directly asked, When I

conducted autism research, the IRB process, it was very difficult because they could not accept that it neurodivergent person would be able to really, like provide legitimate answers in regards to their own experience. It was like Why aren't you asking their therapist? Or why weren't you asking their parents? Why am I not asking the parents of a grown ass adult? is not a question. It just is real, like immediate doubt that we're capable of reflecting effectively on ourselves. And it turns out we are and not only that, but the the stuff that we've been provided the context through which we're able to understand ourselves, through media, through interactions with, you know, various mental health care providers over the years, has provided a very thin, narrow way to conceive of ourselves that is not as robust as we are, it doesn't fit. So when I had these clients come in, and they all fit under this kind of umbrella of neuro divergence, and so many different ways and manifestations. And it's just really interesting to see how these, like identities intersect with other identities and develop in ways that are not appropriately appreciated by our current diagnostic system. Yeah, and,



Katy Weber 29:20

you know, we talking about this collective eye rolling from especially from clinicians, you know, everybody thinks they have ADHD nowadays, everybody thinks they have autism nowadays, like, the question that always comes back to me is like, what do you have to lose? As a clinician or as somebody who has already been diagnosed, when we expand the definition of what this looks like, what why are you reluctant to for that expansion and that psychoeducation why is there such a reluctance? Is it just gatekeeping or is there something that I'm missing about like the dilution of of a die? diagnosis or, you know, I hear that sometimes on reddit people being like, well, this, it minimizes my very real experience when people just flippantly say that they have autism or ADHD. And I'm like, really? How is it minimizing your, your personal experience? What do you think about this? You know, why there's such this eye rolling around the, you know, explosion of self diagnoses?



Zoe Darazsdi 30:25

Yeah, I mean, you know, for starters, I think that part of this is intersecting with misogyny, in the sense that now all of a sudden, all these women are coming out and saying that they're autistic and have ADHD. And it's like, no, you, Madam, are hysterical. Like, oh, you know, it's that kind of rhetoric all over again, I think.



Katy Weber 30:46

Right? Yeah. Just go take a nap. Yeah, yeah.



Zoe Darazsdi 30:50

Exactly. So I think that that, you know, plays a role. Also, I will hear people say, you're not neurodivergent. You know, who's neurodivergent? is people who have like, all of these very severe issues. People get very up in arms about that. And each time, it's like, why are we creating this system in which people have to earn through suffering, the legitimacy of their own identity?



Katy Weber 31:26

Preach? Oh, my God. Yes. I feel like if you're listening to this rewind, and listen to that, again.



Zoe Darazsdi 31:33

Yeah, and it's also, you know, this concept of like, severity, which is always interesting to me in the sense that it takes each symptom as an exclusively negative and nuanced bad thing. So we are defined in the ways in which we differ from this, like a legit neurotypical normal person out there who's wandering around. And the ways we differ must exclusively be negative, right? You can't be different than that, and like a good way. And we need to, like measure how different how much worse we are. And that is then like, the way in which we qualify, the severity and whether or not we deserve to be heard on this subject. I don't get who that's benefit.



Katy Weber 32:26

Right? Oh, my goodness. It is it is misogyny.



Zoe Darazsdi 32:30

Yeah, I mean, except for maybe the people who want to consider themselves to be very neurotypical and need these lines of supremacy to be hard. Are the people who, who are more comfortable with that system, the neurodivergent people who are more comfortable with that system. But in general, there's like elements of elitism to that, that are really disturbing, and that actually just serve to create dissonance between neurodivergent people when we should not be I mean, I don't know how many folks have ADHD or autism, I've known who will say, Yeah, I'm autistic. I'm ADHD, but you know, I'm not like, you know, I'm not like, though signal. Like, I'm not like those folks who like can't even talk or who like walk around flapping their hands. I'm not like those who like, can't sit for a test like I'm smart,



Katy Weber 33:27

right? Or even the term high functioning, right? How ridiculous that term is. What do you think about it for two seconds? Yeah.



Zoe Darazsdi 33:33

Right. And almost as if, like, if we're not acknowledging, high functioning, it's shows that we're not, you know, grateful. I do acknowledge that I have a phenomenal amount of privilege in this field, like, you know, I in many ways, I have a phenomenal amount of privilege. I also think that I've worked with individuals who are nonverbal, who are automatically considered by other neurodivergent people and by neurotypical people who are in authority positions, automatically considered bottom of the barrel, sort of right, like, Oh, you're badly off. They are essentially

being cast aside and rejected in this way that is just like brutal, unnecessary, cruel, and detracts from humanity as a whole. And if anything, being part of the Autistic community, being labeled high functioning, allows me to advocate for those people who literally are just being silenced in every way. And the more that we kind of consider ourselves as so separate from folks like that. The less of an urge towards ally ship we experience I think, it's like you know, I can never understand this thing of like, you know, both things can be true at once. You can have a lot of privilege in many different ways. You can also share challenges with other people and seek to better the community as a whole. Because of those challenges.



Katy Weber 35:15

Yeah, you know that this conversation is reminding me of applied behavior analysis. And for anyone who isn't familiar with ABA and kind of the controversy around it, do you feel like you can give a little primer quick about sort of why it's how dehumanizing it is, in terms of the autistic experience?



Zoe Darazsdi 35:35

Absolutely. So ABA was created by a man named Ivor Lou vos, he is the same man who created gay conversion therapy. It is based on pure behaviorism. So essentially, it is targeting an autistic behavior, such as stimming, which you know, could be many things flapping your hands making vocalizations, I'm always twirling my hair. That was my acceptable stem right, as a girl, we can twirl our hair and not be punished socially for it. Essentially, you create this goal, around eliminating a certain behavior, using behaviorism. Tactics, rewards and punishments very similar to how you train an animal, it's based on animal training. Behaviorism as a field is not inherently bad. It's when you set goals for people that are intended exclusively to make them more palatable to somebody else. When you don't include a person in any of their goal setting you assume supremacy over them. And when you don't honor the feelings and the cognitions of another person, that's called an institutional dehumanization. And many of the people I work with many of the people who have been kind enough to be participants in my research, experience, post traumatic stress symptoms, severely like, you know, horrible impacts to their self esteem, things like that as a result of a childhood that is dominated by ABA.



Katy Weber 37:19

Yeah, I relate to a lot of that just in terms of how many of us have a shared experience about kind of feeling like who we were, inherently was, was, quote unquote, wrong. And we had to learn how to be quote, unquote, right, in terms of various environments, and how much that has affected us in terms of ending up with diagnoses of depression and anxiety as a result, really, you know, when it comes down to it, and trace, it comes back to like, tracing it back to that idea of like, you said that the institutional dehumanization Damn, I feel like that's gonna be on my tombstone. But, you know, like, just that idea of how many times over and over again, we are denied our, our true selves to you know, becoming our true selves in, in favor of fitting in,



Z

Zoe Darazsdi 38:06

right. Yeah, and you know, growing up, I was always the weird girl, I took a lot of pride in that, I always, you know, I noticed that the people around me really seemed to interpret my behavior as being aggressively rebellious, like, intentionally so. And that was not actually it. For me, it was just that I didn't always have the self awareness to adhere to social standards. And then they thought that I was just making a conscious choice to like, one up the man. And hey, maybe I would have if I was that aware, but I wasn't. But that experience of being consistently rejected, or the weird kid created, sort of, like, you know, a lot of feelings around being inferior, etc. But it also, I felt like, at times, I found a lot of power in it. And I was, like, you know, I often conceived of myself, it's just outside of the hierarchy, like, you know, people are so desiring to create these hierarchies, where there's always going to be someone at the bottom and suffering in order to like, even create, like this idea of, of good, you know, for anybody else, or happiness for anybody else is that it has to be measured against the suffering of another. And I just refuse to participate as much as you possibly can refuse to participate in something that's so insidious in our society. But you know, I think a lot about the punk rock movement, which granted has, you know, a lot of like challenges in and of itself. When it comes to like, systems like racism, oppressive systems, there's some misogyny in the punk rock movement. So I'm not saying that it's like, a movement itself that is totally pure. But what I am saying is, and I've said this many times, I've met punk rockers Who are not neurodivergent but every neurodivergent person is inherently punk rock. Because we have this capacity to appreciate world, like the world outside of social constructs, how powerful is that? How punk rock is that? And I see children who are, you know, have ADHD autism, and they're they're considered like the bad kids, the weird kids, the put them on the bottom kids. And I'm like, let's look at this kid's traits, right? Okay, rigid thinker per separates on things, stubborn and disobedient. Okay? Now let's look at like the traits of what we consider to be great business person, right? has strong opinions and values, that's a rigid thinker, resilient, that's like someone who per separates, right? stubborn and disobedient, more like autonomous and courageous. But it's like a reframing where it's not valuable unless like when we do



Katy Weber 41:02

it. Yeah, right. The reframing, I think is so key. And one of the things going back to unmasking autism, the book has a really fabulous reframing chart that goes through some of those, quote unquote, character flaws, and reframes them each one systematically. And it's so lovely, because I think that's really what we're doing right, we're going to going through and thinking about things that we had always viewed as flaws and being able to read in being able to redefine for ourselves who we are, and based on seeing that these aren't actually flaws at all. These are actually you know, in the right environment are amazing. Yeah, I can't recommend that book. I, I'm gonna put a link to it in the show notes, I think because it's so good. I'd like to take a moment to thank better help for sponsoring this podcast. If you're a regular listener of this podcast, you know, I am a big proponent of therapy therapy provides me the best opportunity for verbal processing something that is so important for my kind of brain and my sense of self. What I love about BetterHelp is that it's not a crisis line. It's not self help. It is professional therapy that's done securely online from the comfort of your home. They assess your needs and match you with your own licensed professional therapist, and it's available for clients worldwide. So you get access to a broad range of expertise that might not be available to you locally. It also tends to be more affordable than traditional offline therapy and financial aid is available. If you visit their website and read their testimonials. There are actually quite a few reviews that specifically reference help with ADHD as a special offer for listeners of the

women and ADHD podcast, you'll get 10% off your first month, simply sign up at betterhelp.com/women ADHD, that's better help h e l p.com/women. ADHD. And there's a link in the show notes. This podcast is sponsored by BetterHelp. When I was diagnosed with ADHD, it completely turned my world upside down. I looked back at so much of my life, my grades in school, my multiple careers and hobbies, my friendships, my marriage, motherhood, my relationship with food and my body like all of this with a new lens. And it was overwhelming to say the least. If you've been diagnosed with ADHD, and you're feeling blown away by this new insight into your brain and how it operates, I totally understand I can help you begin to sort through this chaos, explore who you are and how your brain operates. So you can finally start to lean into your strengths and begin to use them to your advantage moving forward. Together, we can work to identify what obstacles you've been facing, and create strategies to help you start living a more fulfilling gratifying life, head over to [women in adhd.com/coaching](https://womeninadhd.com/coaching), to book a 30 minute initial consult with me. So we can figure out if my brand of one on one coaching is right for you. Again, that's [women and adhd.com/coaching](https://womeninadhd.com/coaching). And you can find that link in the episode show notes. What do you wish other therapists understood? You know, what are some of the things for them to look for in their clients? And if they're feeling uncomfortable around diagnosing neuro divergence, but like, in terms of screening, what would you say are some of the things a therapist might want to look for? If you could kind of go over your experience as a 19 year old and how poorly that was handled? What would you what advice would you give to another therapist who's who wants to maybe approach this with a client or what should they be looking for? What are some signs?

Z

Zoe Darazsdi 44:35

Right? I mean, I think that it's important to keep in mind like the extent to which people will adapt. And so like that, that masking, you know, the ways in which they have to contort themselves, to be socially acceptable can also really hide the neuro divergence itself. You know, I have met a lot of like teenagers, for example, who have like oppositional defiant disorder diagnoses and stuff like that. And then the more I sit with them, and we kind of talk about some of their behaviors, like I knew this one kid used to just like climb trees all the time, like, in a dangerous way, like climb to the very top of a very large tree. And did like he had other behaviors as well. But you know, that was one of them. And people saw it as an oppositional defiant disorder trait. And he was, uh, you know, he was had his arms crossed this kid. And I remember talking with him long enough, and him saying that, like, he has to get to the top of a tree, not because you're not, you're telling him not to. And so he wants to do that, he has to get up there. Because it's the only place where it's like, quiet, and the wind feels good on his skin, and he like needs to be up there. And it's impossible to fight the urge to go up there. You know, and then a lot of the arm crossing, are talking about that. And he was like, Well, I have to keep like my hands, like, tucked in. So why, and he's like, when I don't, when I was little, I used to flap them. And then my parents yelled at me for looking weird. Right, so like, this kid who's looking like he's like a bad attitude. Bad Kid, is actually, there's so often this like presumption that we're here to. disobey, make you upset. That has a lot to do with other people's egos. And then we internalize that and think we're bad people. But really, it's like, this is so much more about just having to get by in the world. Right. So having like, openness to that, and constantly checking your own response to people and your own sort of ego around them, can really opened you up to like, hearing them and understanding their experience better. Also, a lot of the times when you see folks who have like, real symptoms of like a depression or things like that, a lot of neurodivergent people come to counseling, because they're experiencing burnout. And burnout is this profound thing. And a lot of the times you can tell that this is really a neurodivergent trait. Because you know, you hear neurotypical people,

and they're often told, you just need to push yourself, just push and push, and it'll build your resilience, and you'll get better. And burnout often happens, because a neurodivergent person does that. And it actually instead of expanding their capacity, it limits it dramatically. Even just listening to that, you know, to looking for that narrative can be very telling.



Katy Weber 48:02

Yeah, so well said, I think, you know, one of the things that I see a lot of is the desire or right, trying really hard, and then feeling like the outcome is not reflective of the effort. And so this idea that, like I am trying really, really hard and I am being looked at as the exact opposite. I am being perceived as somebody who doesn't care, who is inconsiderate, who is, you know, antisocial or well those things. But like, if you can get behind that and see the effort, you know, see the the desire, I think that's something that is a key theme that I see a lot in, you know, especially in bringing facilitating the depression and the self esteem issues that you're talking about, right? It's because of the fact that like, I don't know, and, you know, and why so many of us feel broken and feel like everybody else is doing this, and I can't, you know, it's like it's it's, I'm trying. And that's I think one of the things that to look for, or one of the themes I see a lot in my experience and a lot of the experiences of guests that I've interviewed to where it's like, how do you how do you begin to articulate that? How hard you are trying when you're when it's being perceived as the opposite?



Zoe Darazsdi 49:18

Right? Yeah, I see. So many clients who are incredibly triggered by try harder. Like that is one of the most upsetting things to be told. Because really, it's like, think about how many times like even in my own life, I was like yelled at, you know, people presumed that I was being purposefully upsetting to other people, selfish, attention seeking, and it was so hurtful and so baffling, because even though I don't have the same desire to like fit in, necessarily think being understood. is like the greatest feeling on Earth. And like this thing of like you don't have empathy, as a neurodivergent person is so dehumanizing because every neurodivergent person I've ever met, so badly wants to feel connected to the larger world, and is trying so hard. And anytime I find out that I hurt somebody's feelings, when I didn't mean to, and I pretty much never mean to. I mean, it's like tragic. I feel awful. And I'm always looking for ways to not do that. But you know, that presumption that we are being essentially like assholes all the time, or lazy or something like that. I think that has a lot more to do with people's own fears about themselves that they're projecting on to you that this like general stigma against like, you know, morale, and like with morality and with productivity, that gets easily directed our way.



Katy Weber 51:06

Right? Yeah. Yeah. Okay, last question. I'm sorry, I'm throwing these I'm throwing all these really hard questions at you. And you're answering them. Amazingly, I feel like I should have given you a heads up because I really appreciate you delving in with this. So So going back to this idea that the experience of so many, it seems at the moment is is of women who are going to their therapist saying I think I have ADHD or autism there and being met with I don't know,

let's deal with the depression and the anxiety first, right? That's something that a lot of women here, what advice would you give to somebody who, who feels like they hit a brick wall in terms of their in terms of the feeling their identity has been invalidated?

Z

Zoe Darazsdi 51:59

Yeah, I mean, I've actually conducted research regarding Well, the research I specifically conducted looked at autistic adults perceptions of bias from their mental health practitioner and the way it impacted their self esteem. And so much of the stuff I've many of my participants also had ADHD. And then many of my clients have had this too. And it's like this feeling of being invalidated. It's always really hurtful, because it's like, no, because you're smart. And you're gonna think so you can't have ADHD or autism. And then it's like, but I do so does that mean, you think I'm dumb? Like, that's like just shaming of like some, like inherent piece of me, in addition to being invalidating. And it's, I mean, it's really difficult, as I, you know, have been a person who's in that position myself in counseling. And as you know, as someone who is now a provider of services, I really don't know what way a person could navigate that therapeutic alliance. Better, I think it's not the clients job, you know what I mean? And so like, it's almost like, oh, well, this, like, my therapist is just completely invalidating this thing about me. And I'm, like, you know, we'll sell that, like, there's maybe some elements of self advocacy there. But ultimately, it's like, what do you do, if this person who you come to who you are there to trust to be understanding and accepting and open doesn't do that for you? How can that be your you know what I mean, and it's just very disempowering. And unfortunately, there's also just not enough neurodivergent practitioners out there. Part of the reason I started my practice was because of that. They're just I recognize that in my area, there's a lot of neurodivergent people, and there was not any neurodivergent counselors, for those people. And a friend of mine once said to me, the opposite of love is not hate, it's apathy. You know, and so this brings me to this idea that also, you know, when you're experiencing invalidation, through the mental health field in this way, turning towards like, your community of peers can be so powerful, in the sense that like many identities that a person has, they're just surrounded geographically by people who share that identity. You know, members of your own family, right, the things that are just entirely genetic. Your divergence is not necessarily like that. But we have sort of fought so hard to create a space for ourselves in a digital world. That can be really inviting and empowering. And perhaps, you know, in an ideal world, we would have these therapists who are all educated on this topic, who all, you know, or have neurodivergent therapists in the first place. But unfortunately, as with so many things, and the neurodivergent experience, our way to getting help, feeling better, is nonlinear, and creative. And often involves leaning on each other for support.



Katy Weber 55:37

Oh, that's beautifully said. I love that. And yeah, gosh, thank you. This has been incredible. I really appreciate you're exploring these themes with me. One of the questions I love to ask my guests is, if you could name ADHD, something else would you and I feel like you know, another thing with with ADHD and autism, often, I hear that, you know, like autism is not a diagnosis based on your faults, right? It's not a it's not a diagnosis based in this idea of a disorder. And one of the things, you know, with ADHD is that it's presented immediately, as in terms of your deficits. So I'm curious, would you would you call it something else, if you could?

Z

Zoe Darazsdi 56:24

I saw the acronym, but I think the two very big things would be that I would like to see in the name for the name would be emotional regulation, information processing. I think attention deficit hyperactivity, there is not a deficit of attention than anything. Our brains are just working so fast and processing information in so many different ways. That like there's a surplus of attention, not regulated. And with that also comes a lot of emotion that is not being regulated. Yeah.



Katy Weber 57:07

I like that. Yeah. Well, we'll come up with a good acronym at some point. But I know right, and no, no, no. Nope, lost it. Oh, no, I think it was a I recently heard hyperactivity is somebody recommending that we call it hyper arousal instead of hyper activity, which I like embracing so hard. I'm like, I'm just gonna use hyper arousal from now on, because I feel like it's such a better it's such a slight tweak. And yet it describes the experience, both internal and external, so much better than hyper activity. And right and I think it's just and it encompasses the emotional element to of the of the arousal and the the dysregulation to I don't know there's something about that word, I feel like it's just sums it up so much better than Well, thank you so much, Zoe. This has been lovely. I was really looking forward to this conversation. So thank you for your time, how can people find more of you.

Z

Zoe Darazsdi 58:07

So my name is just notoriously difficult to spell, and Zoe's zo E. And then duress, D is D A R, AZ s, di, you can remember the Zs because zebras sandwich like The Little Debbie Snack Cake. And so of course, I took this really hard name to spell and I was like, This is how I will brand myself on all platforms, because it's gonna be so easy for people to find, anyway. But I am on Instagram and Tiktok as Zoe torres de counseling, and then you can also just find my website, which has some information on how to work with me, both is counselor, a coach, and also a public speaker. And that's just a way to rescue.com



Katy Weber 58:57

Oh, wonderful, I'll have links to that in the show notes. So you don't have to spell it out. Or so nobody has to type it out. But again, thank you so much. It's been really delightful to hear a little bit more about your story and your perspective. And I think it's such an important voice in that field, in the field of counseling, and just, I've always so thrilled when I can offer more resources because there's such a dearth of divergent counselors out there. And it's so you know, it's such a unmet need right now. So thank you for all that you're doing. And there you have it, thank you for listening and I really hope you enjoy this episode of the women and ADHD podcast also, you know, we ADHD ears crave feedback, and I would really appreciate hearing from you the listener. If you're a fan of the podcast, please take a moment to leave me a review on Apple podcasts or audible and if that feels like too much and I get it, then just take a few seconds right now to give Give me a five star rating, or share this episode on your own social media to help reach more women who maybe have yet to discover and lean into this gift of neurodivergent. See, and they may still be struggling and don't even know why. And if you'd

like to find out more about me and my one on one coaching for women with ADHD, head over to [women and adhd.com/coaching](https://www.adhd.com/coaching) and you can always find that link in the show notes. I'll see you next week when I interview another amazing woman who discovered that she is not lazy or crazy or broken. But she has ADHD and she is now on the path to understanding her neurodiversity and finally, using this gift to her advantage, take care till then