

# Cate Osborn: Sex, fruit snacks & coming as you are

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## SPEAKERS

Katy Weber, Cate Osborn

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Katy Weber 00:00

One of the things I'm most nervous about with talking about sex and asking you questions about sex is the fact that like, I am an open book on this podcast, I am as candid as you can be. It never occurred to me to censor anything about my life. But at the same time, I'm also like, I do have a partner of 20 years that I want to keep, and, yeah, yeah, you know, I want to respect his privacy. I know that there's also like people who, you know, like he has, like colleagues who listen to this podcast. So yeah, it's gonna be really hard for me to not, you know, maybe we should have like a tell if you're like, you might not want to talk about this, right?



Cate Osborn 00:36

Yeah, because I call those fruit snack warnings.



Katy Weber 00:40

Okay, well, what can I that's actually on my question list. So I might as well just ask you that what is up with the fruit snacks, I, I feel like I've seen a lot of your Tiktok videos, but I'd never saw the Advent, the genesis of the the fruit snack.



Cate Osborn 00:52

It was it was very organic. It was. So what happened was is one time as a joke, like, my mom said that she was mad at me, because sometimes I would just start talking about like sex, ADHD. And she's like, I love you. But I don't necessarily want to hear about that. And so then the next time I like happened to be eating a package of fruit snacks, because I like free snacks. And so then I just said, I made some joke about and if you don't want to see this kind of content, here's the first snack, Oh, get it, I like through it. And that kind of just stuck. And it

became this thing, where like, now if I say fruit snack warning, like most of my audience just knows what that means. And those who don't like it's fine, because I still go, we're going to talk about sex and ADHD. So if you don't want to see this kind of content, or preferred snack on the way out, but I always say that first because I feel like I used to say, if you're not 18, grab a fruit snack. But then somebody pointed out that like, the stuff that you're talking about is very, like sex ed based. And for a lot of people sex ed starts at like 11 or 12. And so like, excluding an audience based on age isn't necessarily as inclusive as saying, Hey, if you're uncomfortable hearing about sex, no matter what age you are, step outside. And so I decided, like, I just felt like that was a really good way to enforce consent and enforce boundaries. But in a way that's like, very approachable and very, like, sort of friendly. You know, it's not like you're a team, fuck off. Like, it's, you know, it's like, hey, like, if you don't want to hear about this, that's cool, but we're gonna, you know, we're gonna use appropriate terminology. And so you might learn something, so.



Katy Weber 02:17

Okay, all right. I always wondered about that, because I was like, is she playing a long game trying to get monster spawns?



Cate Osborn 02:22

I mean, also that also that there is a long game, but the problem is, is that I only ever use for snacks when I'm talking about sex and kink and so I feel like mots is like never going to sponsor me. It's counterintuitive. It's counterintuitive.



Katy Weber 02:35

You never know. You never know what tick tock, right? Okay, so so let's get started with I guess my first question which is you're diagnosed in adulthood were you diagnosed pre pandemic or post pandemic,



Cate Osborn 02:46

I was diagnosed pre pandemic, I was diagnosed, I technically, I went in for the appointment the day before my birthday, but I was diagnosed on my 30th birthday was when I got a phone call, which was a very weird experience. But my diagnosis story is actually weird, because there's like a secondary thing that happened. And so what happened with me is I actually had an ovarian torsion. And when I had an ovarian torsion, it was so bad that my ovary actually died. And I went into sepsis, and I almost died. And so they had to have him or I had to have emergency surgery to have the ovary removed. And then after that was when my life started falling apart, and for weeks and weeks and weeks, I had no idea what was going on. I literally thought I was losing my mind. Like I was scared. I thought, I like early onset dementia. I didn't know what was going on. But at the time, I was I am still an actor, but I was I was in a show and I was doing a show in rep with three other Shakespeare plays. And I had leads in all three of these shows. And as a person who had been living with undiagnosed ADHD, I developed a lot of systems and a lot of structures to sort of like support myself through that. But then they all

stopped working. And overnight, I went from being this actor who was like, very good at memorizing my line, making sure that I like took enough time to like prepare, and I was like, going to be ready. And I was going to be on board too. I couldn't sit down. I couldn't sit down to focus. If I did find the the sort of motivation to sit down and learn my line, I would read the same line over and over and over again. I couldn't hold anything in my head. And finally, my husband looked at me because my husband is the one who does a lot of the like, my you know, like quizzing me on my lines. And he was like, are you okay? Like, I've never seen you struggle like this. And I was like, I don't know what's going on. And thankfully at the time, I had a friend who has ADHD and depression. And he looked at me and he said, I think you have ADHD. And I said, there's there's no way like I have two master's degrees. I got straight A's my whole life like, you know, and he was like, I don't know, fam and so I went to the psychologist honestly, just Out of fear. I didn't really go expecting an ADHD diagnosis or anything. I just wanted to know that like I was okay. And I lucked out. I have the best psychologist in the history of the world. But her experience was also as sort of like a burnt out gifted kid, like she has ADHD and anxiety. And so talking to her and like, being able to sort of like talk through my experience, she was like, oh, yeah, like I see you. This is valid you This is so common in women, you know, in their 30s. And so what I learned was that ADHD is very impacted by your hormones. And so because of my ovarian torsion that kicked off and a hormonal imbalance that was so profound that that was really what made my ADHD unlivable. That's a really long story. I'm so sorry.



Katy Weber 05:47

We don't apologize for them. But



Cate Osborn 05:51

like, I was like, at some point, I'll get to the point. I've, no, I



Katy Weber 05:53

mean, it is so fascinating when you connect the dots and the you know, when I was thinking about that, like, you know, as I look back at my own life, and the moments in which like, my life turned into a shit show, because it's sort of this like roller coaster, right? So it's like, really, there's, you know, there was middle school, and then there was University. And then there was when I had a baby that was like, again, like hormonally, it was just like, Oh, my God, like, I can't believe how different my experience would have been had I had any clue that this wasn't just my own personal moral failing as a human. Yes. And now, you know, as I enter in the like, multi decade phase called perimenopause, I'm like, Who knows what's happening? But, you know, I think for me, My diagnosis was so wrapped up in the pandemic, it's really difficult for me to kind of sort through and sift through what was hormonal and what wasn't. And what was just like, the trauma of living in America for the last like four years and counting, right? Yeah. And that's something I feel like I'm always trying to sort out through these conversations, which is like, you know, how many times I asked myself like, is this actually ADHD? Or am I just an angry feminist who like, can't deal with it,



Cate Osborn 07:07

I like a little column a little column B.



Katy Weber 07:11

That's what at the end of the day, I know, I've like doesn't really matter, like, but it's so like, for me, it's been, it's so interesting to think about, I lost my train of thought anyway, the, you know, this idea of like, are when we talk about ADHD, are we talking about kind of this genetic neuro biological condition that is leading to life becoming unmanageable at certain times when other factors are brought in, like hormones, or trauma, etc? Or do we only think about ADHD as those traits that show up? In the worst of times? Does that make sense? You know, like, Yeah,



Cate Osborn 07:50

well, it's, it's one of the reasons why I started doing what I do, is because I got so angry about all of the places that I didn't know, ADHD affected my life. You know, and like, like, now is sort of an ADHD advocate, slash educator, you know, understanding like the profundity that ADHD can have on a person's life. Because before before I started knowing all this stuff about ADHD, and it became sort of like this big part of my life. You know, I always thought it was just like, oh, this thing that kids have when they can't sit still in the back of the classroom. But then it was like, the more that I learned, the more that sort of my my eyes were open, and my worldview shifted to like realizing that like it is a all encompassing disorder. But even more than that, like, the different ways that it shows up things like the rates of addiction, the rates of eating disorders, the rates of sexual dysfunction, like sleep disorders, comorbidities like depression and anxiety, like, there were all of these things where I was looking at my own life, and I was going, Oh, well, now that I know that I have ADHD, the 17 years that I've been dealing with binge eating and bulimia sure make a lot more sense. You know, the way that I can't drink without drinking to access sure makes a lot more sense. And so there were like, all of these moments where I was like, it, I get so frustrated by the limited scope, to which so much of the conversation about ADHD, like, stays in I get that's a weird way to say that. But it's, I just get so frustrated because it's like, it's not just about school. It's not just about like, not being able to like organize your work notes. It's like, this affects every facet of your life, like from like waking up to going to sleep, quite literally for some people. And so that was the thing that really drew me to like opening these conversations and having this convert these conversations and doing this work was I just got mad. I just got mad, but that wasn't part of the conversation. And that was the part that I cared about, you know, that was the part that was affecting me. I did find in school it was the rest of it that ruined my life.



Katy Weber 09:58

Yeah, well and you I mean, I feel like so many of us come to our own understanding of ADHD through the like, emotional regulation element, right like that, like, Oh my God, how much of my own, you know, inability to cope and ability to like have real relationships with people that were fulfilling, you know, like all of these ways in which we Yeah, it sort of affected our life emotionally. And like, none of that is listed on it on the DSM. And like, I don't, I've never met a single person who was like, I felt like I had a deficit of detention, a deficit of attention. So we'll get to that later. But yeah, I'm about



Cate Osborn 10:37

to soapbox so hard when we get I have opinions.



Katy Weber 10:43

But, you know, it's, it's interesting to me to like how we're getting to this point with social media and Tik Tok with and, you know, let me start over. So it's, what is fascinating to me is the fact that we are getting this huge divide between individuals who are sort of educating themselves seeing themselves in social media content online, you know, feeling deeply seen by ADHD, you know, videos, whatever. And then they're going to their doctors, and they're just becoming like, completely rejected, and there's gatekeeping and gaslighting. And that, you know, I also had a really great experience with a medical professional who actually knew what she was talking about. And I came to her and, you know, with all of this paperwork in a frenzy, and she was like, she calmed down. That's okay. Yeah, we got you. And then from then on, have now I've just heard like, nothing but like horror story after horror story from women who have their doctors have told them things like, yeah, you're fine, you know, or you've made it this far. That's one of my personal favorites is you made it this far without a diagnosis? What's the point? Yeah, you know, but being said that, you know, you're just depressed or, you know, all of these ways in which our medical professionals are just like, lagging and, and then women who are just like, What do I do? Like, it just, it just feels like there's such this divide between, like, the information that is out there, like, yes, you probably have ADHD, and then the ability to like, help people's in had the system then help people? Yeah, I think, you know, right now, it's like, this advocacy is so important. And like, I don't know, like, changing the face of what it looks like for medical professional. Like, that's why I think so many of us, I think it's so great. When, when so many people after they have their diagnosis, go into advocacy, and go into, you know, educating as opposed to, you know, being like, Oh, I yeah, what, like, I've never met somebody who was like, Yeah, I got diagnosed with ADHD, but like, it's, it's fine. It's no big deal. Yeah.



Cate Osborn 12:50

Well, I think that there are some people who who have that, right where like, and I hear this a lot, especially in like, older women, where it's like, I've been living my whole life, like, you know, building these systems and building the structures. And now I found out I have ADHD, and like, yeah, some things make sense. But like, it's not fundamentally changing the course of my life. But then on the other side of that coin, you have people who, like, whose core understanding of who they are, and what they are, and how they navigate through the world shifts and changes like overnight. And I think that's a really kind of powerful thing to think about. Because one of the things that I struggle with the most as an advocate, as an educator, is that my frame of reference is what I only can speak to, and I only really have experienced my own experience. You know, and I say this a lot. But it's like if you know, one person with ADHD, you know, one person with ADHD, and because ADHD is a spectrum disorder, where people have different strengths and different weaknesses, and they and they struggle in different ways, and they, and they, you know, are very successful in other ways. It becomes really hard to contextualize a conversation where everything looks so different on everybody, you know, you have people like me who are incredibly academically successful, you know, but I can't do my laundry or, or keep my house uncluttered to save my life. Or you know, but then you have the opposite. You

have people who are immaculately clean and very organized. But they really struggled in school, or they really struggle with like the comorbidities of like learning disabilities and things like that. And so it's like, because there is no, one way that ADHD looks, and then that sort of like we get into soapbox territory about how they really only ever researched like, a single type of person, right, like, so it's like all the research, like looked one way for a very long time. And we're seeing, you know, women left out of the conversation. We're seeing people of color left out of the conversation, we're seeing trans and non binary people left out of the conversation entirely. Like there have been, I think, one and a half studies done about the effects of like, hormone replacement on like ADHD And it's just like, there's a huge segment of the population who has both ADHD and is in need of hormone replacement and even to like, a certain extent, like women in like menopause and stuff are also using hormone replacement therapies. And so it's like, where is the where's the research? Where's the research being done about the effects that like our hormones and these things have on us? And so, like this, like I'm trying to like step, I'm trying to call my soapbox down, but I've had a day so riled up. But it's, but it's just like, I feel like it does such as it does such a short, it has a just short sighted focus, you know, and it's and it's, again, like one of the reasons why I started talking and advocating was because like, when I first started reading about ADHD, it was all literature geared towards parents, whose like, kids wouldn't stop screwing around in class and like what to do when your ADHD kid won't behave. And I was like, I wanted to change that narrative. I wanted to talk about the all the different ways that ADHD looks like and so I think that as frustrating as it is, I think one of the best things that we can do for our community is having conversations like this and being open and honest about like, that's not a thing that I struggle with, but you might and that is okay you know,



Katy Weber 16:18

yeah Absolutely. Okay, so let's get into sex, because I feel like for me, the two biggest brain explosions with that's not true. I had so many of them. But I feel like for the contents of this conversation, it was a huge brain explosion for me to think about my relationship with sex through the lens of a of an ADHD diagnosis. The other one was eating because I was actually a binge eating recovery coach before my diagnosis and so you know, and I had this long, storied history with Body Dysmorphia and eating disorders. And then now with through the lens of ADHD, it's like, oh, yeah, okay. That's yeah, that's really big. So, the what are some of the things that have were like blew your mind when you started thinking as you obviously like, have, you know, you have a much more storied relationship with? Just, I guess, your sex education? I mean, you you, I found out from your interview with Leah Carrie, that you like, put yourself through grad school by being a dominatrix. So this wasn't laser like you woke up one day and you're like, I'm going to start talking about sex. I mean, this has been sort of woven into most of your adulthood.



Cate Osborn 19:29

Yeah, I mean, I mean, one of the reasons why I decided to become a certified sex educator was because I wanted to have sort of a training and educational background that could ground a lot of like the knowledge and a lot of the experience that I already had. And so as a certified sex educator with ADHD, my primary sort of like area of focus has become just looking at neurodivergent see in sex and you know, sex education. because one of the things that I think is so interesting is that in, I would say 99.9% of conversations surrounding sex and sexuality

and consent and communication. The assumption is, is that everybody involved is neurotypical, everybody involved has the same understanding of memory. Everybody has the same understanding of time, everybody has the same, like, understanding of what communication is and how to like communicate. And that is fundamentally not the case across the board, right? Like, it's just not a thing. And it really came to a head and I've told this story before, but I'll tell it again. But it really came to a head when I was getting my training. And I was sitting in this class, and we were we were talking about, you know, sex. I mean, it was a conversation about having sex, right? But the instructor was talking about this idea that like, you know, if sex gets interrupted if you need to go pee, if somebody falls off the bed, if something funny happens, whatever. He said, The moment is not Oh, what did oh god now and complete the thought of a head is like the moment is not precious is basically what he said, the moment is not precious. And I and my body filled with like, a white hot rage. And I was so angry, and I was like, angry in a way that I don't usually get angry, like, I worked very hard to not get mad. But I was furious. And I was like, What do you mean, the moment is not precious? Like, every moment of my life is precious. And like, especially like with sex, like, Yeah, I absolutely recognize that sometimes you need to be during sex, and that's okay. But like, for me, if I go get up in the middle of sex to pee, whether or not I come back in a headspace to be able to continue intimacy is completely contingent on 5000 Other factors. And that was really a moment where I realized that so much of sex and so much of sex ed and the commute and the and the conversations around it are based on like a, just a fallible assumption that we're all on the same page about how we navigate these things. And that was when I really started delving into neurodivergent. See, and sex and like, what that actually looks like, and the more that I learned, and the more that I realized there was like this huge, huge gap in our in our conversations and our understanding. That was that was like a really big turning point for me in terms of like, really committing to like, Okay, this is the thing that I talk about now, because I guess nobody else is.



Katy Weber 22:37

Yeah, well, and I think I think permission is so important to, you know, one one thing that one of the like pivotal books for me was Emily Nagasaki's come as you are,



Cate Osborn 22:48


oh, my God, I, I love that book.




Katy Weber 22:50

It's so good. And I you know, I read it, both my husband and I read it. Before I was diagnosed with ADHD, but it was like, you know, it's so it's so seminal in in the way that it's like, the message is basically whatever works or doesn't work for you is normal, right. And like, I feel like, we need permission to be told that whatever we are doing, or whatever, you know, you know, I love what she talks about when it comes to the accelerators and the breaks. And that's something that I like, come back to all the time when it comes to, you know, when being in the mood of being hyper sexual, or, yeah, I'm almost never hyper sexual. I don't know why I said that. But like, but you know, but that book essentially gave permission that like, you are fine, you know, there's nothing wrong with you. And I think it really showed me how like most of mainstream media when it comes to sex, and sex education is like, shows you something so


radically different from what most of us actually experience that we lose that sense of like permission. You know, where you're like, Wait, did that woman just like climax and 10 seconds? Like, that's, that doesn't happen.

 Cate Osborn 24:02

And I got some good news.

 Katy Weber 24:06

But like, it was just that idea that, you know, I think, I think that at least I feel like, for my experience, because I'm not going to I'm going to try not to generalize when it comes to neuro divergence, but like, I feel like permission to be who we are is something that we really struggle with and I certainly struggle with and like have a lot of times in my life, I've had to, like explicitly seek out the permission to be like, yes, you know, whatever your experience is, there's nothing wrong with that, that we go into a lot of situations feeling like if it's not working for me, it's because there's something I'm doing wrong. Not the fact that the situation is just not working.

 Cate Osborn 24:44

Yeah, exactly. And I think even even past that, too, is like, again, I don't have like universally speak for every neurodivergent person but I think that there is a lot of trauma and a lot of I don't want to say shame and guilt. But I really do mean shame and guilt. Like, I feel like a lot of neurodivergent people hear over and over and over again, like they're too much, or they're being overdramatic, or they need to calm down, or they're being too loud, or they're being too excited, or, you know, they need to act a certain way, or be a certain way that they fundamentally are just not. And so then when you enter into these spaces, where you are expected to be yourself and know yourself and know your likes, and your dislikes, that can be immensely difficult for somebody who has been told over and over and over again for their entire life, that they're wrong, and they're bad, and they should be a different way. And the way that they are isn't good enough, or is weird, or strange, or doesn't fit in or whatever. And so, of course, like coming as you are for somebody who is neurodivergent, especially a late diagnosed neurodivergent person can be difficult and, and scary and vulnerable and hard. Because a lot of times like, we don't know who we are, because we've been putting on these masks. And we've been doing all this work to fit into a society that tells us to calm down and not be so excited and not be so loud and not be so scattered and not be so unfocused. And not being not being not being not be over and over and over again. And so one of the things that I love to do whenever I teach a lot of classes and workshops, and I go around to a lot of like kink spaces, and like Dungeons and organizations today, and I teach classes there. And one of the things that I really like to ask, like, first thing is I was like, What is your favorite movie? That's what I start with that what's your favorite movie? And like, 90% of the time, you know, Star Wars, I'll say, okay, is that actually your favorite movie? Or is that your partner's favorite movie? On the go? Oh, well, my partner really likes Star Wars like, Yeah, that's great. What is your favorite movie? And they go, Well, I don't I go, Yeah, but like, what was the movie that you love? And sometimes they can't tell me. And and then we talked about that we and then I tell my story about how like, I spent years never picking the movie because I didn't want to make



the wrong choice. I spent years saying that Star Wars was my favorite movie. It's not my favorite movie is Shakespeare in Love. You know, and, and, you know, and so they're like, there's all these places where it's so easy to just say, whatever you want is fine. Whatever you need is fine. I'm happy with that. And that's great in conversation with being a supportive partner. But that is not so great. And having our own needs met, specially in conversation with sex and intimacy. And so for me, it's been really enlightening and really eye opening to talk about neurodivergent see in conversation with, well, what do you want? What do you need? Like, what do you need to feel safe and supported, because everybody is different, everybody is an individual. And so coming as you are, involves a lot of self reflection sometimes and a lot of introspection, and a lot of having to release the shame and the guilt of I need a blindfold during sex, because otherwise I'm going to get distracted, I need you to play music. Because if the neighbor starts mowing his lawn, it's all over for me, you know. And so that's why I love getting to have those conversations, because I feel like not only are we talking about sex and sexuality, but we're also talking about honoring ourselves and honoring who we are in our own needs and our own wants. And I think that's, like, really powerful for people who haven't necessarily had that opportunity before. If that makes any sense at



**Katy Weber** 28:37

all. Oh, my God, so much. I mean, I just thinking about that idea of like, determining your own needs in a sexual context, right, like, and how especially difficult that is for people who, like you said, have spent most of our lives fearing making decisions because we're worried it's gonna be the wrong one. Or even just like, it's so much easier to put other people in charge a lot of the time when you feel like you don't really know, you know, you're not really in touch with with you know, you just don't want to be at the wheel a lot of the time. And I remember when you were talking with Leah, Carrie about, about the, you know, the difficulties with having somebody perform oral sex. And it was just like, it was like, I get so freaked out, I get so freaked out well, and it was just like, I had ADHD written all over it because it's like, not only is there the whole issue of like, you know, it gets kind of boring because it takes a while but there's also like, so there's the distractibility it's kind of lonely and cold. And then there's also just the worry and the guilt that like once that sets in, it's like, you can't get rid of it, right where you start to worry so much about like, is my partner enjoying themselves? Are they you know, and then you start like, it's so I feel like sex demands are good sex demands a level of like selfishness that I think is really hard to access when You have when you're crippled with RSD?



**Cate Osborn** 30:02

Yeah. And I think like RSD is a is a big part of it. But I also think too, and this is like less and neurodivergent problem and more, I think just like a cultural problem. But you know, and I know that this has talked a lot about income as you are, which by the way, just listener go by the book, just save yourself some time. Just just go buy it, just go buy it, just go buy the book. Yeah. But but one of the things that honestly took me so long to realize is that there's this narrative in, in popular culture, and especially like romance books, and movies, and all that kind of stuff is like, Well, true love means being able to read your partner's mind. And it is, and that's the exact opposite thing to true. But I run into this constantly with this idea that like, well, I shouldn't have to ask my partner to be hugged. I shouldn't have to ask my partner for them to say I love you. But then I say, Okay, well, how would your partner know that you want

them to hug you and say that I love you before they leave unless you ask for it? And then the other person says, well, they should just know. And I said, Well, how are they supposed to know? And they say, Oh, well, they love me, they should just No. And I said, No, no, no, this is not how any of this works. Like if your need is to be hugged and told that you're loved before your partner leaves the house, that is a perfectly valid ask that is a perfectly valid and necessary need for you to articulate. And if your partner grew up in a home where it was like bye, and then they they left and that was normal, your partner may not know that, that is a thing that you feel is missing and that and your partner may not know that that's a thing that is like a thing that people do. But this assumption that true love means inherently knowing without having to talk about it without having to explain your body's you know, join perfectly and there's like doves flying out and shit. It just it doesn't happen. It's this not reality. And then when you sort of like, you know, zoom in a little bit more and and have that conversation around sexuality and neurodiversity. It's like there's so much to unpack, and things like rejection sensitivity, things like interoception not being able to like know what you're feeling or articulating your emotions. You know, that kind of stuff. Like there's so much more than just what we're being told by the media, I guess. I don't know. I forgot the end of the sentence. I kind of was like I got I got ramped up and then I stalled so it's fine. Sometimes I like start going and then I'm like I got no headache. I got no I think



Katy Weber 36:23

you know, one thing for me too, that has been really fascinating. was the fact that I hated making out. Yeah. Right. And I also and I never ever thought it was like a sensory issue, right that I just don't like things in my face. And so that was another one where I was like, I feel like my diagnosis gave me permission to be like, Oh, it's okay. If it's a sensory issue, then I can ask for I can ask for my wants and needs better within this context. It's almost like accommodations, like you would get an IEP for your sex life. Right?



Cate Osborn 36:55

Yeah, well, absolutely. And I think that like, with that, too, is like, not that diagnosis is like necessary for advocating your needs. Like, I want to be very clear about that. But I think that one thing that a diagnosis can provide is and I and I always kind of say this, and I say it half jokingly, but it's like, it gives you a place to Google from right. Because like, once you have the term, once you know the thing, then you can say, Okay, well, like what are other people with ADHD experiencing? And that can be really useful because it allows you to contextualize those needs and say, Okay, well, some people with ADHD do have different, like, sensory issues. That is that is part of ADHD, you know, the same way that you know, rejection sensitivity, okay, well, then, you know, also like sexual dysfunction, or slash disappointments is what I like to say, you know, and then it's like, okay, comorbidities like depression, anxiety, like, all of those things feed into our sex life, all of those things feed into how we navigate the world. And so having the right term to Google, is, I think, a great place to start. Because I think it gives a lot of people permission to do exactly what you said, which is say, hey, it's not that I don't love you, it's just that I cannot stand the sensation of oral sex. Like, it's a sensory thing for me. And that, I think, gives us a, I don't wanna say like, a justifies it. But I think it allows us to really take stock of like, all of those little things and say, Oh, that's, that's because of this. I'm not broken. I'm not I'm not damaged. It's just a thing. And we'll, we'll deal with it, you know, and I think that's really useful in terms of like, supporting yourself and being able to, like advocate for your own needs.



Katy Weber 38:39

Yeah, I think it all kind of falls under that same category of like, we are not the problem, right. The problem is, whatever situation I'm facing, and that needs, you know, we need to figure out how to fix that. But like, you know, I think our default mode is always to be like, I am the one who is who is at fault here. Because, you know, maybe we're told that 10,000 times in our



Cate Osborn 38:59

lives, right? It's, it's shocking to me how common that is, and especially for people who are late diagnosed, is just that, that feeling of you know, I'm, I'm the broken one, I'm the one doing something wrong, and it's like, no, maybe, maybe it's okay, if you need to, like, you know, do this that or the other thing like it doesn't, it's not a commentary on you, it's just what you need.



Katy Weber 39:23

Well, that was I think one of the like, one of your videos that lives in my head rent free. Well, actually, there's two Okay, first of all, there's the Venn diagram of ADHD DND into an ink is like a stack of pancakes. The Venn diagram that is a stack of pancakes, I love that term so much. But, but the video about just like being like really, really competent. And so you know, this idea that like we are super exhausted, because we are very competent at a lot of things. And so there's this idea Do that, like we should be able to figure everything out? And so a lot of that frustration while yes, we are told a lot of the times are childhood, like you need to try harder, you need to do the thing, you need to just work at it, and you'll get it. But like, I think that a lot of that it comes almost like internally from being a like, it's sort of a byproduct of being generally bright at things, you know, and be that frustration of like, why am I not figuring this out?



Cate Osborn 40:26

It's so funny that you mentioned that video, because not that this matters at all to the conversation. But that video got some of the lowest views that any of my videos I forgot that was not a popular video like it was it did not do well. But when I tell you that more people directly reach out to me and talk about that video. More than like, you know, I have videos that I think have like 789 million views. And that video that I think maybe 7000 People saw is like the one that keeps coming up. And I think because like it's so weird, because like thanks, tick back. That's really helpful. Thanks, Thanks, daddy, tick tock. But like, I think the reason why that video kind of sticks is because like, it's, it's a very, I think it's a very universal experience for anybody who is sort of like that burnt out gifted kid sort of like vibe. But even more than that, and this is a thing that I heard even from people who like didn't necessarily go through like gifted programs, but they are, they were like, socialized as a woman. And there's this expectation that like mom holds everything together. You know, mom keeps the house in order, like Mom, mom is the one who's like running the show. And so the expectation of having your shit together often just comes with appearing female to the world, you know what I mean. And I think that's really interesting, because I think that it adds yet another layer of complexity and a lot another level of challenge in unpacking all of the different places where

neurodivergent see fits into our life and and affects our lives. Because if the expectation is always that you have your shit together, and you are the one who's keeping track of everything, and you are the one managing the household, and you are the one doing all the work, which is very, very common. For many women, you know, who are experiencing this, I'm having to then take stock of all of that, and say, on top of you know, the neurodivergent see, on top of the struggles on top of everything is still I still have to handle it, there's nobody else to handle it for me. And so then you know, and then we find a lot of people in your experience who that was the story until the pandemic when all the structures and all the systems started breaking down. And now it's just like the it's like a two fold sense of loss. It's it's a sense of like, Oh, so much of this is making sense, because now I have this diagnosis. But then it's also like the again, I don't I don't want to speak for anybody but myself, but like the anger and the resentment and the guilt and the shame that can come out of like, but I'm the one who's supposed to have my my shit together. I'm the one who's supposed to be be handling all of this stuff. And if I don't, who's going to like what if what if my accommodations aren't, you know, aren't going to be helpful for everybody else around me like what happens then? And I think I wish that we talked more about it, I really, really do a riot. I



Katy Weber 43:26

mean, yeah, oh God, there's so much there. Like, first of all, that idea of like, rather than helping you if you look like you're struggling, it's much easier for us as a society to just applaud you for all that you do your sight. So brave, which is why I get so fucking frustrated with this idea that ADHD is a superpower because we're doing the same thing with ADHD. Just for the record or eyeballs just for your, for your listeners,



Cate Osborn 43:51

I just made a very obvious face.



Katy Weber 43:55

But you know, we're doing the exact same thing, which is like rather than help you we're just gonna we're just gonna reframe this into something that you should be applauded for all the things that you do and just like reinforce this idea that you're you should be able to have have it all and do it all.



Cate Osborn 44:09

I mean, you know, the thing. And I've said again, I've said a lot of this before, but like, the thing that I keep coming back to this is maybe rude. But here we are. Like, if contextualizing your ADHD as a superpower is this thing that gets you through the day. I respect that. I understand that. I understand that sometimes. It's, it's really, like you need that you need that thing to hang on to. And if that works for you, that's fantastic. However, my husband collects comic books, and he is has an encyclopedic knowledge of the Marvel Universe. And sometimes I'm like, Have you ever read a comic book? Because superpowers are universally across the board? I saw lating and difficult and they affect your family and your relationships. And the narrative

around superheroes is not like, is never oh my god, Captain America, it's oh my god, Captain America is balancing these pressures of having to be this leader and be this hero. But carrying, like the guilt and the shame and the anxiety of these pressures, and like are like Rogue is a really good one, like from X Men, because it's like, rogue superpower involves, like, if she touches you, you fucking die. Like her entire superpower is about the feeling of isolation and about the feeling of not fitting in, in this world. And so I think that, like, it's really logical, it's incredibly logical to make it a direct analogy for neurodiversity, to superheroes. But I think that if you're going to contextualize the superpower, it makes a lot more sense if you're contextualizing it within the framework of the isolation, and the difficulty, and the loneliness, and the the challenges that a superpower faces are, you know, results in as as instead of being like, I'm a superhero, and I can do anything, it's like, yeah. But ultimately, you're gonna have to leave your partner because they your secret identity, you know what I mean? Like, it's just, it's just, it's, it's so interesting to me that, that we have that superhero conversation was like, if y'all ever read a comic book, because this was great as it seems.



Katy Weber 46:34

No, that's brilliant, I think, you know, and now when somebody refers to it as a superpower, I can just be like, you're right. I never thought about it. I'm so sorry. That feels really difficult.



Cate Osborn 46:44

Yeah, well, and that's the thing is like, that's what I started doing. And it was really interesting, because I think a lot of people like, it's, there's a, there's a culture of toxic positivity, that has, has, I think, always kind of been there, but has become much more profitable as of late as people who were like living through this ongoing pandemic, and their mental health is being sort of like dramatically affected, and their systems and their structures are breaking down. There's like this, this toxic positivity, self help narrative, about, like, all you have to do is, you know, believe that your ADHD is a superpower, and harness the power of your hyperfocus and you'll be fine. And it's like, that's not how it fucking works. And, and so this, this idea that there's a one size fits all solution to a deeply personal and deeply different neurodivergent it is, I think, really damaging, you know, because it's an if you want to kick a dead horse about it, like, there are so many different superpowers, you know, and some of them are really lame, you know, like, some of them are really like underwhelming superpowers. But some people have like, a phenomenal, you know, like Superman, he gets, he gets all the good powers, right? But it's like all of those affect those superheroes lives in different ways and show up in different ways and cause different problems. And so it's like, yeah, it might still be a superpower. We can call it a superpower all day long. But like your self help book, and your planner may not work for me. And so at some point, it's like, why are we having this conversation? Like, it's not how any of this works. Anyway, I'll stop ranting about that. I'm sorry.



Katy Weber 56:23

Well, now I'm curious, like, you know, I talk a lot with guests about the medium of tick tock and what it is about that magical, like one to two minute video that seems to have broken through the mental health, you know, education barrier more than any, any other social media platform. Do you have any theories about like, what it is about the vignette?

C

**Cate Osborn 56:45**

I mean, I think the easiest joke is that for ADHD, 15 seconds seems non threatening, you know, but I honestly think that what it what it is more than that is it's a combination of both like the digestibility of like, short pieces of information. But also like the community that arises out of that, because like, the algorithm, like I hear so often, like, the algorithm knew that I was gay before I did like that, you know, the algorithm knew I had ADHD before I did. I hear that all the time. And so I think that there is like, sort of a double edged sword of like, I can go on tick tock, and I can highlight one thing, you know, I can I talk a lot about like ADHD, being affected by your period, if you're a person who gets period. And I talk a lot about that. And so every time I post that video, I get a million billions views, I get a million billions comments, I get a million billions emails. And so but then what happens is in the comments, all of these people start saying, Wait, this happens to you to wait, I thought I was the only one Wait, no, there's all like, and so it's nice, because the digestibility of whatever the thing is that I'm talking about that day, in conversation with, like, the interactivity and the community that that results in that information being disseminated. It's it really becomes I think, like cyclical of the community, you know, wants to have these conversations here as a place for these conversations to happen. And it's been, it's been incredibly rewarding. And it's been an incredible privilege to get to sort of like, Be the person who says, Well, hey, let's bring attention to this, let's talk about this. I think I'm one of the only people talking about like, specifically ADHD, and sex, there's been a few more people who have sort of hopped on board that train since I started talking about it. And it makes me so happy. Because the other thing too, is like, everybody has a different background, everybody's experience is different. And so it's like, yeah, 10 people can make a video about ADHD, and sex, and have 10 different things to say, and 10 different viewpoints on it, and 10 different, you know, different stories, but those are all valid, and those are all part of the community. And it's not that one person is right, and one person is wrong. You know, like one person might say, Oh, my God, kink is the best thing ever. And somebody else might say, you know, kink doesn't work for me at all. And both of those things are valid. And I think as a community, it's important for everybody to have the ability to look at that easily digestible thing and say, well, one person said yes, one person said, No, we're getting a very, uh, you know, different viewpoints, different different perspectives, different stories. And I think the more that we do that, and the more of that content that gets made, the more we start really having a larger conversation about how diverse and different and how different the experience is, are of the community as a whole. And so I think that it just kind of like compiles on itself over and over and over again, like, all the time.

**Katy Weber 59:42**

I know I tell people to bring tick tock videos to their doctor all the time. And then I get backlash, where people are like, oh, you know, a one minute video isn't gonna diagnose you and I'm like, No, but a one minute video is going to be a frame of reference for conversation where you could describe your situation to your doctor, in a way that if you were just sitting there in the doctor's office, and they're like, What do you hear? and you're like, oh, I don't know, I don't remember. Like, you know, we need we need to take notes basically in our life and so you can't bring the 800 tabs that you have open on your laptop into the doctor i but you might. But like so often I think the the, these short vignettes, you know, open up Windows into so much of our in articulable, that's a word. I'm pretty sure. Yeah, experiences.

C

Cate Osborn 1:00:25

Well, and yeah, I mean, I advocate taking notes to your doctor so hard, I will, I will die on that hill, take bring notes to your doctor, like you're there, your employee, you're paying them to be there. So like, use your time well. But I think too, like one of the really interesting things that happened to me when I first started doing this, and like my, my, you know, account started sort of like picking up steam and attention is that a lot of the first interviews that I did, were with people who were doing stories about how annoying it was that ADHD was becoming part of this larger conversation and how cringy it was that like everybody was getting diagnosed because of tick tock. And how embarrassing it was that all of these people were going to the doctor and being like, I think I have ADHD. And I was like, Who is that hurting, though? You know, and that was the thing. And I kept fighting. And I got, like, real feisty with some of the journalists who reached out to me because I was like, What's your problem with it? And they're like, Well, I just think it's, and I was like, What's the problem? And they're like, well, it's just like, everybody's like hopping on board the ADHD train, I'm like, is it possible to throw this out here? Is it more likely that ADHD is not perhaps as trendy as you think it is. But what is actually happening is that we as a culture, and as a community are having a much larger conversation about how the voices of women and people of color and trans people and older people and and all sorts of different diverse voices are suddenly coming to the table and saying, No, this is also something that I live with. But here is my unique experience that has previously been on research and on talked about, because all of the research is focused on, you know, 18 to 20 year old white men. And so is it not possible that perhaps instead, we're just seeing how badly and dramatically the system led us down? How dramatically all of these like underdiagnosed, communities are suddenly talking about this? Is it not? Perhaps likely, and then they will get real quiet? It was like, but don't you think it's cringy? And like, I don't think it is. Because I think if you go to the doctor, and you say I think I have ADHD, and he and I don't assume the gender of your doctor, but they say like, you know, okay, well, why do you think that and you pull out a tic tac right? is exactly what you said, it provides a frame of reference. Now your doctor might look at you and they might say, you know, like, Okay, well, like that's only like one component part of having ADHD, but that sounds like anxiety, or that sounds like depression, or it sounds like, at bare minimum, that you're really struggling with this one thing. Let's get you some support, let's get you a system, let's get your referral to a counselor or a therapist or a psychologist. And it's like, there's no ADHD pie, like ADHD is not going to run out. If a bunch of people seek out a diagnosis. What it is doing is, is it's showing like really truly like how many people are part of the pie, and how our perspective on the on the pie is changing. And I get I just get really heated up about that, you know, cuz I'm like, what, why? Why is this the conversation, like, let people live their life,



Katy Weber 1:03:35

and have that chance to, like, redefine who they are to themselves.

C

Cate Osborn 1:03:39

It's like, it's not hurting anybody. Like, it's also like, there was one time when this when this journalist was talking to me about it, and they were doing this story about cringy was and I was like, Well, I'm just gonna say this, but like, tick tock runs on an algorithm. So if all you're seeing is ADHD content, that's not necessarily the universal experience of every single person on Tik

Tok. And then like, three months later, they contacted me, and they were like, Hey, I just wanted to let you know that after doing some more research, it turns out that I, in fact, was had ADHD the whole time. And I was like, oh, oh,



Katy Weber 1:04:17

okay. I know. I just posted about that today, where I'm like, I'm so tired of all of the, you know, those, like douche posts that are just like, this is everybody's experience. This is ADHD. I don't know what you're talking about. And I'm like, I want to give each one of those people a hug and be like, it's time to talk to your doctor.



Cate Osborn 1:04:33

Yeah. And it's and it's like, you know, I think there is if I'm being fair, there is some there's a lot of misinformation out there. You know, and there was like, there like the one that I always come back to is like, there's like this really big conversation about how, if you recognize someone's footsteps, then you have like, just childhood trauma. And it was like, oh, cuz it's a trauma response. And it's like, no, it's because you lived in the same house with people for 20 years. Like it's not necessarily like it can be an absence We can be and we're not gonna invalidate that. But it's also like, this is a very common experience. And so it's like, I think you have to tread very carefully when you are doing research. But I think that it's also one of the great things about the conversation about neuro divergence is that research is becoming much more accessible, but information is becoming much more accessible, accessible. And so I also think, to a certain extent, like the misinformation is really getting filtered out. Because even when the video blows up, you know, it's like, if you recognize your husband's footsteps, you are you have trauma. And it's like, and then you know, 20, you know, qualified medical professionals will stitch that video and say, No, actually not. And so I think that it's nice, because it's, it's also creating dialogue. And it's also defining stuff for a lot of people in a way that they may not ever have had the access to that context before,



Katy Weber 1:05:50

which is cool. Now really quick, because I'm watching the clock right now. So we did a really good job sticking the time. I'm really proud of us. Right. Thank you. So what would you call ADHD, if you could rename it?



Cate Osborn 1:06:05

Attention? Directional hyperactivity disorder? I think that's really, I think that's, I



Katy Weber 1:06:11

think that's the thing is it keeps it you keep the hyperactivity and the disorder?



C

Cate Osborn 1:06:16

Maybe, I mean, I think I will. And honestly, okay, this is a, this is a little bonus rant for you, and it's fine, I, I'm good on time for that I can, we can go 10 minutes, there's always, there's always time. But like, the thing is, is that I think the real truth is because of the system in which we operate. Especially like if you live in America, the health care system is broken all the way to shit. And so there are a lot of people who advocate for, we need to take the disorder out, we need it, we need to remove the conversation about disorder or disability from ADHD. And, and I'm really against that, and I'm not against it, because I think that ADHD is a disorder, because I really think that like there are, what is what is it disorder, you know, but I think that what that conversation is eliminating is, is the conversation about accessibility, to resources, access to medical care, access to medication, access to IEPs, access to, you know, mental health supports and stuff. And there are so many people who advocate for saying, it's not a disorder, it's not a disorder, it's just like the way that we are. And that's amazing. And that's great. But a lot of times, those are coming for people who can afford private insurance, that's coming from people who can afford medication, who don't have to apply for aid or apply for an IEP, or maybe are in a school system, where where, you know, neurodivergent and, you know, kids with learning disabilities are underserved. And so if we're going to have a conversation about what to rename ADHD, we cannot leave those people out of the conversation, we cannot say, well, because I have the support in place, because I have the structures that I need. And it's not a disability. For me, it's not a disorder, for me, I'm fine. That's really harmful to the community. Like it really is. And so it's like, and it sucks, because there's so much pressure to rename it, there's so much pressure to say like it's not a disorder. But ultimately, we have to think about insurance, we have to think about billing, we have to think about school systems saying, Oh, it's not a disability anymore. It's not a disorder anymore. Great. We don't have to provide any sports or any supports, because it's going to save us money on our system if we don't have to support the students anymore. And that is going to be very, very harmful for a lot of people. And so I think I don't like deficit. I don't like the word deficit, because I think it is a complete misnomer. But I think that unfortunately, we do have to have the disorder, or some kind of indicator that this is this is a real medical condition that a lot of people struggle with. And it looks very different on everybody. But we cannot eliminate those support structures in the interest of making ourselves feel better. And I think that's really important to talk about.



Katy Weber 1:09:21

Yeah, no, I totally agree. And I think it sort of ties in with the whole running theme of like, legitimizing what is happening to you and and as well like having the permissions that you might need, as opposed to just being like, well, it's a behavioral issue. You just need to try harder, you just need to discipline better, whatever it is. And, you know, at the end of the day, you're just making excuses. hyperactivity I struggle with just because I feel like for me, it was such a barrier to me really taking you know, for so long. It was suggested to me by my therapist that I should look into it and I was like, I don't have any I don't have ADHD I'm not hyperactive. I could lie on the couch for days.

C

Cate Osborn 1:09:58

Yeah, well, I think to like Like just better education and more education about what hyperactivity looks like, you know? Yeah. Yeah. Because like spoilers. Impulse shopping is a type of hyperactivity.



Katy Weber 1:10:10

I know. I think my most popular video was basically like, I'm not hyper. And then it was like a list of all the ways in which Yeah, it was like, Oh, I'm quick to rage, road rage, holy. Like, I remember my doctor asking me my diagnosis. She was like, How do you feel when you're stuck in traffic? And I was like, I feel like I want to rip the steering wheel out of the dashboard and throw it out the window. And I was like, Oh, right.



Cate Osborn 1:10:30

I get it. Now. I live in Atlanta, is I would not wish this traffic on my worst enemy.



Katy Weber 1:10:36

Oh, God. Well, I really appreciate you taking the time and sitting down with me. I know. I'm sure that when you tweeted out about people getting in touch with you, I'm sure you started an avalanche. But it's great. It's



Cate Osborn 1:10:47

been so happy that I did. It was amazing. Because I got to meet got to meet so many cool people. I've gotten to talk about stuff that I just deeply and passionately care about. And it's been awesome because I get to like connect with cool people like you. So it's been it's been rad. Wonderful. Awesome. Well, wonderful.



Katy Weber 1:11:03

Now for anybody for the you know, the eight people who don't know



Cate Osborn 1:11:06

who you are. If that is for that I people it's fine.



Katy Weber 1:11:10

But you know what, how can people kind of find you? Oh, I'll have all the links in the show notes. But I feel like we didn't talk enough about being a certified sex educators where you're going with this and



Cate Osborn 1:11:22

having back on we'll have a whole other party it'll be great. What I did there but I'm I go by Katie source Katie with a C on all social medias, you can find me on Tik Tok on YouTube on Twitter, but it's mostly just me making Dungeons and Dragons jokes. I also have a YouTube channel. We're going to I'm going to start doing a lot more YouTube content in the in the long run more long form content, which I'm terrified about. I also stream on Twitch if you're into that kind of thing. We have a great community that gets together every morning we just hang out we talk we vibe. Sometimes we talk about mental health. Sometimes we just you know, sing songs. It's it's just it's sort of a grab bag, you know, but you can find me Katie a source all the places. Also if you liked listening to me talk for the past hour I have a podcast. It's called Kagan Eric's infinite quest and ADHD adventure. We talk about life with ADHD and depression, and navigating the world as sort of just neurodivergent adults. We talked a lot about sex. We talked a lot about kink. We talked a lot about relationships. We also played Dungeons and Dragons. It's an ADHD podcast I do what I want oh yeah, that's that's me and if you want to learn more you can go to Katie source calm or infinite Quest podcast.com. And I'm, that's where I am. You would think at this point, I would be good at that part. But it's I'm still the worst. It's still the part that I dread the most of any part of the podcast is when they go where can I find you? And then I panic for five minutes. There's



Katy Weber 1:12:46

like 80 different you know, you have so many hats.



Cate Osborn 1:12:50

I have. So just in my entire life is just a box at this point. It's fine.



Katy Weber 1:12:56

That's awesome. Yeah, yeah. See, that's the other thing my daughter will my 15 year old is huge into d&d and LARPing. And this was like serious street cred that I even told her I was interviewing you because she's a big fan of languages, sending each other Tik Tok videos all day long. That's delightful.