

Lauren Yuile: ADHD & communication disorders

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SPEAKERS

Katy Weber, Lauren Yuile



Lauren Yuile 00:00


Someone with a language disorder. When you're looking at their behaviors, they can actually look similar. There's a language disorder with nothing else to someone with ADHD. But for the person with ADHD, they're not following the instruction because they've been distracted by everything else. So the brains going 1000 miles an hour. So they're not attending to the instruction. But someone with the language disorder is not understanding the instruction. Hello, and





Katy Weber 00:39

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 liked 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. I would love to take a moment to share with you part of a review from a listener named Steph J. Lopez on the Apple podcast platform. It's called review for dopamine rush. I just found your podcast after a recent ADHD diagnosis. I'm in my late 20s. And I definitely didn't believe it at first. But after listening to a couple of your episodes, I feel like my mind has been blown. I feel so validated. And I'm starting to realize that all these things I attributed to personality flaws or quirks are a shared experience with many women from RSD. To executive function, hygiene to friendships, I feel less alone and less shame in who I am. Because of your podcast. I've found ways to describe the feelings and thought patterns I have to my close friends and family members. I've cried, laughed and had a lot of aha moments while listening to your podcast. Thank you for your help. I feel hopeful. Well, thank you, Steph. This is honestly so wonderful to hear. And I really grateful for the feedback and the review. And I'm just so glad the podcast has been helping you feel less alone. And you know, it can be so hard to articulate this journey to the people we care about. So I'm so glad to hear that these conversations have been helping you describe your experiences to friends and family. Thank you again for taking the time to leave a review. I really really

appreciate it. Okay, here we are at episode 115 in which I interview Lauren Ewell. Lauren is a speech pathologist who lives in Sydney, Australia. She supports children and young adults with difficulties in different areas of communication, such as using an understanding language, using clear speech, reading, writing and social communication. In this role, she has worked with people with various co occurring diagnoses, most commonly autism spectrum disorder and or ADHD. Lauren believes everyone has a right to a voice and she's passionate about helping people understand the impact of communication disorders and receive the support they need. Lauren and I talk about the similarities and differences between developmental language disorder and ADHD and the importance of presumed competence and a strengths based approach to learning for Neuro divergent children. Lauren has always felt different and misunderstood in her life. And suddenly everything made sense when she received her own diagnosis of ADHD earlier this year. Since then, she has endeavored to learn more and understand herself more deeply. And she shares how this journey has made her a better speech pathologist.

 Lauren Yuile 03:45
Enjoy. So Laura,

 Katy Weber 03:48
thank you so much for joining me all the way from Sydney. I love love, love this global community of ours and how crazy it is that we have so many shared experiences and yet also so many different experiences, right, that all are kind of rolled into this. So let's get started. And why don't you tell me kind of when you were diagnosed, how old were you and what was going on in your life that really led to the diagnosis.

 Lauren Yuile 04:18
So I've actually only recently been diagnosed I was diagnosed May this year. And I feel like my diagnosis story is like one of those movies that starts like at the end and then it's like a giant flashback. Oh my god. Yeah, could because for me kind of the actual diagnosis stuff happened very quickly. But it was kind of like it was all building and I had no idea was so what have you kind of happened because so I was working on a speech pathologist, and I was working in a private practice at the time. And my boss I got along really well with him. Just finished her master's in clinical psychology. And little did I know, she had just been diagnosed about five months earlier. But I was saying, because at the time, I was kind of struggling and now realizes ADHD burnout. But I was also really concerned with my driving. And because my partner was really concerned as well, because most of the time, I would be absolutely fine and safe and wonderful. But I was just having these lapses in attention where I just miss something. And we're both really worried about it. And few other things going on. I'm just talking to my just chatting to my boss and mentioning this. And she just looks at me and goes, maybe you have ADHD, what she's like, you sound like me. And because she been my supervisor for three years, she was like, actually, this would explain a lot. Because she was like, you really struggle getting paperwork done on time. You get distracted quite easily, like had to move me to one of the back offices, because when I was near reception, whenever someone would come out, I would like, go and have a chat. And I'd always be listening. I didn't realize at the time, but I

didn't fully understand ADHD, I thought it was that hyperactive boy running around the room. Because of course, like, and that's a lot of what I'd seen as working with a lot of kids who have ADHD diagnoses. And when I then looked it up and found out about, you know, more inattentiveness, but even that, just how it presents in women and hyperfocus. Because the big thing was always, it can't be ADHD, you really go to school, because that was ever an issue for me. But all the ADHD stuff for me was at home. Yes, so she made that comment. And if it was anyone else, I probably would have gone. Okay, but not totally egotistical, but also be going but I'm not like the kids that I work with, or things like that. But because it was my boss, I was like, if she's saying this, I definitely have to listen. And then I did the hyperfocus deep dive was going, oh my god, this is me. And then within like, two and it also explained, like I said that flashback. It kind of explained everything that I've kind of struggled with. I didn't realize it was a struggle. I thought it was normal. I just felt different my whole life. And yeah, then I booked the appointment, two days later, and a few days for a few months later had the appointment with a psychologist and got the diagnosis.



Katy Weber 08:03

It doesn't sound like there was much of a waiting, period it. I feel like that's something we hear so much, especially in countries that have decent health care, or socialized health care that it's like, oh, and then you know, the wait, it was two years or whatever.



Lauren Yuile 08:19

I'm really, really lucky the way it was only two months. I was also slightly relentless. I called and called and called and called places. So a lot of places that had close their books weren't taking on people for ADHD assessments I take people on for other types of assessments for not ADHD. A few had a six month or an eight month wait. And I think I was just really lucky that the psych psychiatrist I got in with he, I have a feeling he might have been actually quite new to the practice and building up a caseload. I'm not sure. But that's what I suspect. And he was also telehealth only, which might have made you know, other people go elsewhere. But from the outside, great. I'm very busy going all over the place. That means wherever I am, I can stop and have my appointment. So no, I think I was incredibly lucky. Like my brother who he's in the process of getting a diagnosis at the moment. He had about a six month wait. So it's usually luckily I haven't heard anyone for two years, but I've heard a lot of people struggle to find someone and the six to eight month wait seems to be very common, unfortunately.



Katy Weber 09:50

Yeah, I know. Right. It's interesting that they'll see they'll see you for other diagnoses but not ADHD, right, which clearly indicates that like it's The it's not a dearth of staffing, it's more time, it's mostly what is it the testing, you think? Or like, What? Is it the different? Who's available for the diagnostics? Or what do you think is going on there?



Lauren Yuile 10:12

Honestly, not sure. It might also be, and this is, please say there's no data. This is just my thoughts. I do wonder if it's also like clinical interest of the practitioners as well. Because I

thoughts. I do wonder if it's also like, clinical interest of the practitioners as well. Because I mean, and I know that from my work, that there's certain areas that you might want to focus more on. Or maybe there's, there's too many people and everything was getting overloaded. I honestly am not sure. Because I mean, for me, I was like, it was an hour conversation. And I didn't do any assessments, it was just a conversation with the psychiatrist. And then I had the diagnosis at the end of it.



Katy Weber 11:02

Yeah. That was my experience, too. I it was, you know, a half hour conversation with my general practitioner might, my doctor and it's so amazing how differently, you know, how many of us come to our diagnosis from different different ways in terms of like, sometimes it's a three hours full psych assessment, and, you know, and, and other times, you know, it's like you, I always joke that, like, I walked in the door with all of my paperwork, fumbling and was like, My doctor was like, Yeah, you had me at hello. Right. It's so interesting to like, I think, this idea that, what were what is happening right now in this like, Boon of diagnoses, right, so many women, especially adult women are coming to their room realize that this is ADHD, and that this is real, like this is, like you said, I love that the metaphor of the movie starting at the end, because it really is this profound experience of looking over the whole course of your life. This is not women who are just seeing one meme about losing keys, and deciding they have ADHD. And I think that for the most part, this like, there are a lot of mental health professionals, especially who are kind of rolling their eyes. I'm saying like, ADHD is so trendy right now, I don't think it's as and my, you know, I always want to throw it back there and be like, yes, a lot of people are experiencing this right now and are coming to this realization right now. But if it's not ADHD, what is it? And at the same time, like, it's entirely possible that it was ADHD all along? This is exactly what is happening in so many areas. And I'm going off on a little tangent here. So stay with me, but like recently, John Oliver was talking about, he was talking about gender. I don't know if you saw his episode on gender. But he was talking about how like, everybody rolls their eyes, he was talking about this in reference to sort of the non binary, right, and that so many people on trans and non binary, and he was talking about, like, people roll their eyes, everybody's non binary nowadays, and oh, it's such a fad, and they're not gonna want to stay this way. And he was using the example of left handedness. And he was like, when in the 1970s, or 80s, when teachers stopped forcing children to become right handed, the number of left handed people skyrocketed, because people were free to use whatever hand they wanted. And so you could look at those statistics and say, Oh, everybody's left handed nowadays, oh, my God, it's such a trend. But the reality is, that when the information is there, when you're seeing yourself through this new light, and you're able to kind of understand that this was ADHD all along, of course, the number of people with ADHD is going to skyrocket like it makes perfect sense. And so I'm so every time somebody rolls their eyes, when you start talking about ADHD, I'm like, nope. Like, I'm just so frustrated, because I was there too. And, you know, I feel like I was also there for a long time being like, what is happening? Is this ADHD? Why are so many of us suddenly realizing it. And I feel like he just use this perfect. He just had this perfect way of demonstrating and explaining, like, of course, when you are able to live in your truth, right? And you're starting to connect these dots like, yes, absolutely more of us are going to start realizing that it was this all along



Lauren Yuile 14:11

entirely. And that was definitely my experience. And I'm sure it's the experience of most people who listened to this podcast. I remember. So my partner works from home. And my

who listened to this podcast. I remember. So my partner works from home. And my appointment was at the beginning of the day. And so I just started work a bit like, I remember afterwards, I walked in, and I said, I have ADHD, and he was like, Why are you smiling? This isn't something you should be happy about. And I was like, No, but it's I said, I feel like there's a weight on my chest and then I had no idea was there is gone. And it's amazing. Just that one thing, even before like, you know starting in treatments, a friend of mine had a really good analogy because you know, I've, as I'm sure a lot of women that you talk to also have anxiety, and was seeing psychologists and doing a lot of work around all of that. But I think without realizing apps like this pieces missing, because I just thought this was anxiety, and it just felt like this huge weight. And I was like, I'm doing all this stuff, how can I still feel like this. And it's because anxiety was a very small part of the rest of ADHD. But my friend had this really good analogy she was like, it's like, all this time, you trying to put a puzzle together without the lid of the box. And someone has given you the lid of the box. Because that diagnosis alone, completely, I think it gave myself permission to not judge myself, and shame myself. And also much more proactive into health words for things that I never had before, because I didn't know was a thing like task initiation. And like, you know, the internal because I'm, we're being catalyzed hyperactivity, because I'm the combined subtype. And just all this language that I could use to actually say, This is what I need. This is what's happening. That'll learn, like everyone around me was like you are like, in this. So I'm sorry, in a much better place. And this Yeah, was that anything else? Just that diagnosis alone, and like, also my relationship? Because my partner is very neat and orderly, and everything has its place. And so it would drive him insane that he was like, how could you not put it away? And how could you not clean that? And I'd be like, I don't know. It's like, I can't see it, is what I was being trying to now he was like, I know, I really get now you're not doing it on purpose. You're actually trying as much as you can. And you can't do this. Oh,



Katy Weber 17:13

my God. You've got me. So I'm so emotional. You were giving me goosebumps before when talking about it. Because it's so true, right? It's like, the, you know, this idea that like you see, you know, one thing occurs to you or when people talk about ADHD, like losing keys, or, you know, oh, a squirrel, that's going to make you not think you have it right? I'm not going to relate to any of that. I'm not going to relate to that rhetoric. And so it's when you start doing that deep dive and your whole life flashes before your eyes that you start to really see like, oh, okay, this is all of those misconceptions that we have. You're definitely I mean, it's funny too, because I feel like I've interviewed so many professionals who worked with ADHD children for a long time and still had those preconceived notions, in terms of what it looks like, and I, you know, I, I have a son and a daughter, and I actually kind of had I did very poorly in school. And so I had that stereotype to write of like, oh, eight kids with ADHD do poorly in school, and I did poorly in school. And it wasn't until I started interviewing women for the podcast, and like, one after the other. I was interviewing women who did very well in school. And then in adulthood, they were just a ball of depression and anxiety, and seeing like, oh, okay, I see how those connect, and the perfectionism and then this sort of need to, to the masking and all of that, and the and the white knuckling and all of that anxiety. And then I looked at my daughter, my teenage daughter and was like, oh, okay, I see that because she's an honor roll student, she does really well. And so when I got her diagnosed, and I recently was asking for a fiver for because I'm like, that's what you do as a parent, right? You get a fiber for for your child. And we were sitting, I was sitting in this room with a bunch of these school administrators. And it was like, we were speaking a different language. They were like, Why are we here? She's an honor roll student who gets 90s? Why are you asking for accommodations? And I was like, I don't? I

don't know. Why am I asking for a cup date? Like I had this total moment of like, should I not be here? Should I not be asking for accommodations if she's already quote, unquote, doing well, and they, and I just saw that it was just this like, visceral moment of realizing like how misunderstood kids are by their teachers and their administrators who are like, I don't know what you're talking about. They're doing fine and me being like, they're not fine, but they're not fine. But not really understanding what to do in that situation. And I'm still processing all of that. But



Lauren Yuile 19:39


that's really that's fat. And it reminds me because of course I'm, you know, still relatively early in this journey. And reminds me of two things. First one, even like before I had the diagnosis, when people got Oh, you're so organized because they'd have system Some schedules and things and I'd go no, no, no. I'm actually very unorganized. And if I don't have anything, nothing will get done. And all I talk about things at home, and everyone would be like, No, I think even my partner was like, similar. And then he started to live with me. And he was kind of like, like, Oh, my God, like, you're not in those words, but I think he was like, wow. So I think you put a lot of effort in, that people don't notice until you're somewhere where it falls apart. But the amount of effort I was putting in, really realized it, because, again, your ADHD moment, had my medication was still working out the right medication for me. And I was taking it and I wasn't, you know, felt it might have making a bit of a difference, but wasn't sure and totally forgot to us. Like at the end of the bottle, I need to book a new appointment. six week wait for the appointment. Love that access treatment for executive functioning requires extra executive functioning. So I had this period where I didn't have a net. And I was coming home, just feeling tired, but awful, like, just expense so much. And I realized I was putting so much extra energy trying to keep everything in my head and all the balls up in the air that I didn't know that. That's what I was doing. And I was kind of plateauing. I was like, Oh, this is masking on like, this is what it is. Because I would have been very similar to your daughter, I was very, very good academically, went to university graduated with honors, that I was having to put so much more effort in. And I guess the other thing is with the accommodations is that is looking at it is not going to take the effort, the that masking and extra effort she's putting in all of her. Actually, yet the output there seem to be the same. Will she actually be feeling a lot better and more herself not having to do that?




Katy Weber 22:34

Right. Yeah, that's the big question. Because I think they were kind of looking at it as especially the teacher who was in the room was sort of like, you know, how much did you hear what she has a 95? What you just you don't you need accommodations, so she can get 100. And I was like, No, that's not the point. The point is that we're trying to alleviate some of the anxiety and the pressure, I'm seeing a very different child than you are. And I see a child who if she gets a 75, she has a panic attack. And you know, and so it was one of those situations where I'm like, I want to do whatever I can to make her feel like we're doing something to help with the anxiety. And they were basically like, get a therapist, I was like we already have a therapy, you know, but they were basically like, these are problems that are not school related. So school accommodations aren't going to help you need home accommodations, and you need outside


accommodations. And I was like, but all of the anxiety is school related. And that was I think, was the other disconnect to communication wise, where I was like, we just like I said, feeling like we were speaking different languages.

 Lauren Yuile 23:36

And it gets the idea that ADHD is all about academic achievement, but it's about also about the effort, and everything you have to do to get there.

 Katy Weber 23:45

Exactly. I know, right? Same reason why like when my doctor told me I was how hard I was working when I was explaining to her my elaborate system on how I don't lose keys. And she was like, well, you work really, really hard. And then I like burst into tears because I was like nobody's ever said that. Right? And that's like you said it was a two fold realization that a you mean everybody isn't like this. But then at the same time also then realizing like oh, right, yeah, I am really working really, really hard to just stay afloat. And that is so good. It's such there's so much grief there when you have that realization, right where you stop and you're like, Oh, I am working so much harder. 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 experts. to use 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 BetterHelp h e l p.com/women. ADHD, and there's a link in the show notes. This podcast is sponsored by BetterHelp. So are there are there things in your past where you're like, Oh, the signs were clearly there all along?

 Lauren Yuile 25:40

Does? I'm assuming my whole life doesn't have an answer. Like a friend of mine who's known me for a while he's studying psychology, and she's has a brother who's has ASD and likely ADHD. She sums us up and she turns to me goes, how did we not realize that you have ADHD? Because I feel like yeah, for me, always losing things. The I get really into, like my school because I hyper focus on study is what I I've always done it because I'm very curious, and it's motivating for me. And I'd always be so into it, I would then forget something. Or you then look at my desk and everything is everywhere. I can't like interrupting people having, you know, five unfinished craft projects in my closet at any given time. It's just all these little things that it's kind of like yeah, no, that's ADHD. That's just what it was always everything. The reason why I just have all these little examples is because there's all this stuff that was always Oh, that's just Lauren. And now it's Oh, actually, no, that's Lauren's ADHD.



Katy Weber 27:08

Right. Yeah. And I guess going back to that, why it's so frustrating when people minimize this experience and say, like, oh, you saw one tick tock video. And now you've decided you have ADHD? And you're like, No, I saw one tick tock video. And then I saw another and then I saw another and then I went into, you know, hyper focus. And I did all this research in my entire life flash before, but



Lauren Yuile 27:31

it's interesting, because for me, it was, because we've now realized that I think I mentioned yet my brother's in the middle of getting a diagnosis, my mom is going to get assessed next year, because like, you know, she, like wants to have that concrete thing. But we're pretty much like you have ADHD, and my mom's would be nine. And there's so much struggle she has had, that she was just like, had no idea. And now she's like, this makes so much sense. And all this and all this, like stuff in different places. She's worked of people basically saying, like, you know, you're not trying hard enough for all the paperwork, and things like that, that it just, it's so free in the fact that that alone has also changed my parents relationship, even though that, you know, been together for like, 35 years. My dad, it's just been that final thing. My dad kind of gets it now. And also when they had COVID earlier in the year, and that is brain foggy, like and my mum said, This is what it's like for me all the time. And he was like, how do you do it?



Katy Weber 28:56

That's why married you, right? Pretty much. I know. It is. That's so sweet. Oh my god, you're giving me all the feels today, Lord. It's so sweet, right? Because it is like, just think about how much your life changes and how much is in front of you in terms of this changed outlook on who you are and how you operate in the world. It's just so wonderful. And and yeah, it's completely changed my relationship. My marriage, it's changed how I am as a parent, too. I mean, it's really, yeah, just realizing and why so often is I've I love when I love thinking about how it's been called piece of shit syndrome. Because I think that, you know, explains so much right about how we view ourselves until we have this diagnosis, and it's like learning to walk all over again. Yeah.



Lauren Yuile 29:46

And I think for me, the biggest thing is kind of working out, you know, how to manage the anxiety and all of that because I kind of be given strategies, and then I find it really different Got to use those strategies. Like when I did use some sometimes they'd work. But then I have guilt to the you know, it's my, my phone, I'm not sleeping my x y Zed because I'm not using the strategies. And that's built up my whole life, it's now taking a lot of effort to kind of go, well, actually, what if it's more all the strategies are made for someone who's hearing typical? And that's not my brain? So of course, it's not going to work for me. I need find different strategies. Yeah.



Katy Weber 30:34

Oh, yeah, absolutely. And maybe those strategies will work this week, but they might not work next week, and that you have to prepare for that as well and have a sense of humor about that as well, I think also, right, which is like, you get really, really excited about this idea about consistency. And I'm like, whoa, whoa, whoa, hold up. That's, that's not gonna work forever. You need something new. And that's kind of part of that's part and parcel, right? It's like, you have to take the good and the bad together. So okay, so I want to talk about your speech pathologist. And I'm sure it's also been mind blowing for you to think about the ADHD brain and just some of that overlap. Right. And okay, so So, you worked with a lot of kids with ADHD, let's talk about developmental language disorder, and what exactly is it? And you know, why? Why is there so much overlap? Why is it so common? Why is it such a common comorbidity with ADHD?



Lauren Yuile 31:28

Hey, so I'll answer as much of this as I can, because I think there's also part of this, that we have theories,



Katy Weber 31:35

there's a lot of correlative talk, not a lot of causal talk. Yeah.



Lauren Yuile 31:41

But yeah, but there's a few factors in that I'll get into later. But first, so I think it's important. So the term developmental language disorder is actually quite new. It was 2016 2017, they had I can't remember the name of the study, but I'm happy to give it to you to put it in the notes. That basically, they realized that everyone was describing the same thing, but calling it something different auditory processing, specific language impairment, expressive receptive language disorder, but we were all kind of describing the same thing. So look for like therapists and different professionals kind of got together and decided on the term developmental language disorder. And basically what that means is, yeah, language difficulties with no known cause. Because there's certain developmental disorders that have an effect the language will count, as part of the disorder has, can have an associated language disorder, like for example, autism, is sometimes it's kind of hard of the diagnosis, in which case, we would call it language develop, sorry, language disorder associated with autism spectrum disorder. But when we don't actually know, like, when there's, you know, we can't look at the brain and say, or, yeah, there's nothing else that could be causing language disorder, is developmental language disorder. However, because this is relatively new, you're gonna come across a lot of people that don't call it that, they'll still use specific language impairment, or different things. That's kind of the consensus was like in the prefer profession internationally developmental language disorder, but it's, as always trickling down you're probably going to hear lots of different terms that really describe the same thing.



Katy Weber 33:53

Like a DD and ADHD.

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Lauren Yuile 33:55

Exactly. And so in terms of I guess, what it is, what Yeah, what do I mean by language difficulty? There's different ways of breaking it down, a lot of people break it down into receptive language, which is understanding language. And so that would include understanding of instruction what words mean, understanding inferences, by understanding jokes, sarcasm, and multi multi part instructions and multipack stories, how do you follow a story? How do you understand an argument? Anything to do with understanding or like you know, understanding of conversation, and then the using language or expressive language is how do I put my ideas into words? Knowing what words you can use, what words to use when how to structure your ideas? How do you tell a story how Do give a persuasive argument how she tell jokes, how to, you have that conversation. But it's, as I'm sure your brain is already ticking away. There's a lot that have probably said that it's like, but ADHD can also cause that difficulty. And this is one of the tricky things is that someone with a language disorder, when you're looking at their behaviors, they can actually look similar. This language disorder with nothing else to someone with ADHD. But for the person with ADHD, they're not following the instruction, because they'd been distracted by everything else, or their brains, going 1000 miles an hour. So they're not attending to the instruction. But someone with a language disorder is not understanding the instruction. What do you mean by will do this, like, do this after you do this? Their language sentence just aren't able to break that down? Yeah,



Katy Weber 36:11

no, absolutely. But I'm like, How do you know in the moment, diagnostically which it is, especially when you're dealing with young children,

L

Lauren Yuile 36:21

yeah, and also one of the big red flags is how we know this might be a language disorder, is because often kids with language disorders are the class clown, or to argue for the behavioral difficulties, which again, sounds very similar to the red flags to ADHD. One of the upsides is, it seems that a lot of our language measurements, in the tests that we do to diagnose can actually be quite a, yeah, I was reading a study last week, that can actually be quite effective in telling the difference. Because if you also think of it at the inner language, when you're doing a language assessment, it's usually a clinical room to small room, there's very minimal distractions, it's one on one. And I know, the policy as a private practice, I worked as we were very child centered. So that child, as soon as we noticed that attention going, we would stop the assessment and book another session. So there are some children that I did the assessment in like 20 minute chunks, because that's how long I could like we still do, like the sensory breaks and the physical breaks. But that's just how long I can get them. And measures that we're doing. It's what they were breaking down what they do say when they were looking at what they understand when their attention is that. So and look by looking at a lot of the vocab measures. And like I said a lot of the actual type of tests in language assessments, research has shown that they're actually quite good at that differential diagnosis of ADHD, and language. But it's, it's still tricky, because sometimes you also get someone that will walk into a

clinic. And I might assess that language. And on that standardized measure, they're fine. But then if I look at how they're using language, day to day, they're really struggling. Of course, there's a lot more into it. Sometimes there's still like a language disorder going on. But sometimes it's kind of like, that's just might not have enough to diagnose, but let's just do some work to show you how to communicate. And I find if that's all the child means that once you kind of showed give them those pieces, so sort of take off. But sometimes that diagnosis can also be an ongoing process.



Katy Weber 39:04

That's so fascinating. Yeah, I feel like that's sort of similar with handwriting too, with dysgraphia. Right, which is that idea of like, my thoughts, or if I'm having a difficulty sort of getting my thoughts too, into my fingers, too, right. And they're going too quickly. And then my handwriting, you know, and then I'm missing word. And so it's like there's so much overlap there in terms of what is actually ends up what you're actually seeing.



Lauren Yuile 39:27

And what can also happen is sometimes I'll like a child will come in, they'll be like, Oh, we're thinking dysgraphia because they're having trouble with their writing. But the handwriting is fine. It's, you can read it really well. But it's actually the breakdown in the language. They don't know how to structure a paragraph. They don't know how to structure a story. They've got these ideas. They don't know how to communicate that in their language. And so actually When Yeah, then when you see the speech pathologist, and because we also can do work on writing and reading, and all of that as well. And often, you know, that can be dysgraphia and other things as well. And can This can definitely be part of dysgraphia that sometimes it's actually notices. This is a language disorder. But it might be in the way that like some kids, you know, the day to day stuff are pretty good. But it's, I guess what we call the higher level language skills, which is the harder language skills like metaphor, structuring and ultimate, and that is when the wheels fall off.



Katy Weber 40:46

Oh, my goodness, yeah, this is so fascinating. Good. You make me want to like, go into deep dive about this, because I'm very curious. My head, I had a daughter and a son. And my daughter was like, hyper verbal from a very early age. And she was basically like reciting poetry. By the time she was two. And my son was nonverbal. Nothing until after the age of two, he just screamed. And so we had a speech therapists who we had tested always for his hearing, and, and he had a speech therapist for years and years and years. And so it's been interesting sort of thinking now having them both diagnosed and sort of all of this knowledge around neuro divergence and kind of what is happening and what is firing in the brain. It's so interesting to think back because he was he was also tested for autism, because he was very like, solo, you know, he played alone and a lot of that stuff. So he was tested at the time. And so now I'm kind of like, what, what were they not seeing what were they say? Like, it's so interesting to think about, oh, my God, that just the brain, it's so confounding and weird.



L

Lauren Yuile 41:54

And also forgot to mention, there was a breach of the systematic review, that said that the crossover of developmental language disorder co occurring with ADHD was between 20 to 90%. Yeah, I believe that. I think part of that discrepancy is also when you look at a lot of the behavior measures for ADHD, that language face. For example, I think some of even like the parent, parental checklists, how are they with following instructions? Yeah, and things like that, that requires language skill. So they're not doing it because of the ADHD or language. And another thing is that sometimes I'm not as familiar with the assessments for because I think a lot of the assessments of ADHD at least in pediatrics is more teacher and parent reporting. But I also know that when you look at the Yep, so the whisk, I'm assuming it's the same in the US, which is one of the really popular IQ assessments. Some of those items are language based. And this is one of the things that I learned from my boss, who are my old boss, who been great mentor to me, the boss, that's far the reason why I got diagnosed. Because she's a speech pathologist and a psychologist, she can do a lot of these assessments now. But with that dual qualification, she was looking at the scores, and sometimes it would come down, come out as like a low IQ, or low area. But it's because when you look at sub tests, that one one, it's, you know, everything would be pretty equal in without scoring. But then there'll be two, if you look at the chart, there'd be two scores that have scored really, really low. And then but when you look at those tests, then two sub tests with no visual support. It's all language.



Katy Weber 44:14

Yeah, yeah. That's what happened with my kids. When they both did their psych assessment. My daughter was like, scored like, you know, they were it was all percentile so it was all like, you know, 90 percentile and all of these different things and then auditory processing. She was like point 0/5 5% of people areas. Yeah, we're like, okay, you're a visual processor got it.

L

Lauren Yuile 44:41

We'll say sometimes what my clothes I have no idea, the case with your children because I'm not a therapist. But I know some kids that would come to our clinic. We would then look at it and then you look at the language schools and you're like, actually, this is because I have an underlying language disorder has nothing to do with bad IQ. It's language sentence. Because that test was relying on that language skills. And if you have a language disorder that's going to affect how they



Katy Weber 45:19

I know I'm You're breaking my brain right now. I'm just like, there's just so much to think about.

L

Lauren Yuile 45:26

My main recommendation would be to ever has any of these concerns. Always try to book like, even if it's, you know, the six, unfortunately, the six to 12 months wait for a speech pathologist, if you've got access, trying to get that assessment, and then you can cross it off. Like whenever I've had a parent that says, I don't know if he should come in for an assessment, I always go

look, if you're not sure. Sometimes it's better to come in. And if there's nothing then at least you know, but if there is a language disorder or something going on, and you've got the information that will do something.



Katy Weber 46:08

Yeah, absolutely. I find those like Venn diagrams are really helpful too, with a lot of these co occurring disorders, or even just like with ADHD, and like what I always try to like Google, the Venn diagrams for like PTSD and ADHD, and OCD and ADHD, I always find them fascinating, too. I don't know that something about the visual, the Venn diagram.



Lauren Yuile 46:32

Yeah, I never thought of that. After this interview, I'm probably going to go through diagrams. But yeah, but the, the tricky thing is, is it's hard to know exactly what like we think there's definitely something genetically linked with all of it. That in terms of it can also be difficult knowing what the exact, I guess, correlation between Ms be the same for like dyslexia, and dysgraphia. But like, for example, DLD or developmental language disorder, and ADHD, because it often falls through the cracks. And for example, like we, and I think you and I both know, we were talking about earlier how ADHD often falls through the cracks, developmental language disorders even more so. So I think this is a way in Australia, and I think it's consistent in the US, the estimate is that one in 14 children have developmental language disorder. So she talking about a classroom of 32 children in every classroom. And but no one knows about it. Talks about it. And they're not dying.



Katy Weber 47:50

Yeah, oh, yeah, absolutely. Right. I feel like that's the I feel like ADHD is sort of one of those things, sort of like the iceberg, where there's all of these various presentations, and you'll get diagnosed with something and be like, That's the answer. This is what it is. It was dyslexia all along, right, or, Oh, it's this, it was, you know, it was anxiety all along. And you kind of hold on to these identities around these diagnoses and not realizing that the iceberg was ADHD. And that, you know, it was all of these things, surprise. But I think, you know, it's when you're in that state of sort of confusion, like many of us are like, what is this? What's wrong with me? And then you can kind of glom on to an answer really quickly, we have a tendency to do that, and especially with when we're talking about parents and kids, right, which is like, Oh, this is it. And then you realize that like, Oh, no surprise, there's a whole lot more under here.



Lauren Yuile 48:43

Also exact like, I can't, I don't think you can, I'll ever fully get what that position is like, until I am a parent. Oh, it's one thing going through it for yourself or trying to go through it with your child, or for your child. Or just, that would just be a whole different experience. That's just extra trouble, I imagine extra overwhelming and extra anxious. And like I said, I I say I imagine I don't think I will ever fully get it unless I'm in that position.



Katy Weber 49:18

Well, and I think it's so you know, it's so entertaining to me that so many women come to their ADHD diagnoses through their kids, right? Because they desperately want to help their children. And so they go into hyperfocus mode, and then they start researching, like, what is how can I help them? How can I do absolutely, you know, 150%, and they just go into hyperdrive. And then that's when they're like, oh, right, this explains my life a lot. I see a lot of my myself in this and realizing, you know, and then they start connecting the dots. It's so much easier to do when you're helping your child instead of helping ourselves which I think says a lot. I think that you know, says a lot about just the state of overwhelm a lot of the time When it comes to our mental health and everything else. 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, 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. And you can find that link in the episode show notes. How would a parent know what's developmentally appropriate? And what might be a silent like what what what might be like a telltale milestone where you could say this is definitely outside of the Venn diagram.



Lauren Yuile 51:27

That questions can be tricky to answer because it's different for all ages. Okay, but if you look at a lot of the associates, also probably because I know that you've got an international audience, for example, in Australia, but most countries have their have a Speech and Hearing Association. So in the US, you have Asha, which is amazing. And I also use their resources down here. And a lot of in Australia, we have speech pathology, Australia, a lot of those websites, break it down for the different ages, how many words they should have how they're following instruction. And that can be a really good tool to use. Because the other thing is, I feel I also feel like there is more resources, people usually more aware of a smaller chart. So like, for example, by around 18 months, you'd be hoping someone like a child is saying, between 20 to 60 words, and by two, they're definitely starting to combine words and put them into sentences. And I do whilst that can still be overwhelming. I feel like people have a better idea with that, than when they're older. And I think the big thing is, if they're taking, if it's effortful for school aged child can definitely talk about milestones. But I feel like the big things is, if they're getting really frustrated, and it's really effortful, and hard, like, you know, and they're having to put extra effort into understanding what the teacher is saying, or the page is blank, because I haven't written anything. Or when the signing to avoid work tasks. It's kind of like, okay, there's something else going on here. Because I feel like often that kind of, there's can be so many answers to that question. Cuz you can jump, everything was saying before, you can be ADHD can be anxiety can just be like, you know, not being bored. But I find, I think, and again,

this is unfolding purely from experience. I find, generally, if a child's really starting to get really frustrated, and really avoid, it's usually because it's just really, really hard for them. And it's worth seeing if there's a reason.



Katy Weber 54:16

Right? And then yeah, or if they're like my son where they were just screaming all the time out of frustration, which was a really difficult time.



Lauren Yuile 54:26

I can't imagine I really can imagine. And that's because mine's so everything I'm talking about. My current job is actually at a school for children with disabilities, and a lot of the children we have are nonverbal. And they're just so frustrated, but giving them a way to communicate. Because it's just life changing. Like if you think of not being able to like we communicate and everything we do it has a sheet, and also how we assess how we access therapies, usually based on verbal skills. How we access education is based on verbal skills, and reading and writing. It's all through language and communication skills, how we connect with other people, conversations, friendships, all of that. A lot of it all starts with communication. So that's why we often get this flow effect. When a child is having a communication difficulties, it affects just about all aspects of their life. And there's also a lot of sodium studies. And I think this is international, that a lot of people in jails and juvenile detention centers have undiagnosed language disorders.



Katy Weber 55:55

Can God it's so amazing that you have this dual perspective too, because I think about like working with children with with other disabilities, who might be nonverbal, like to real, it's all coming down to this same logic, right, which is the same idea of like, this method isn't working. So we let's figure out what is working, it doesn't mean that there's anything wrong with you. And you know, and I think some of that, especially, you know, I imagine having somebody who would be nonverbal well into are you thinking about some of the like, there was a viral clip about a nonverbal valedictorian at a University recently, where they were giving the valedictory speech through like an AI. And it was that same idea, right of like how people just sort of assume that there's something wrong with you or that you're not smart. If you're not verbal, and kind of realizing that it always really comes down to like, we need to figure out what is the method of communication that's going to work for you. And I feel like there's a lot of parallel there with any kind of issue about neuro divergence, right, and this idea of like, stop trying to force, something that's not going to work for you. So it's so wonderful that you've got this multifaceted perspective.



Lauren Yuile 57:04

Here. And in especially special education, we often talk about the idea of assumed competence, or the least dangerous assumption. Assume that someone can do it, or like well, yet which one is least dangerous, assuming they can do the thing or that they can't do the

thing. I and like, for example, had a really exciting, really exciting moment, a few moments actually, at work this last week, where there was this eight, nine year old, nonverbal on the teacher and I sitting going, I actually think he's really switched on. But the most valuable he could be was, he'd grant but like, he could get his point across like, he knew he understood, and he and I had an AAC device, and I put it in front of him. And usually, I have to teach them how so sorry, AOC is a way to communicate that's not based on verbal speech. So like, if you think, like that valedictorian speech is a really good example of a way to communicate, usually involving technology, but not always, that isn't taught by speaking verbally. And so, and there's so many different devices out there, that you kind of, it's always finding the best fit. Anyway. We try this and I put it in front of this child, and usually I have to teach him how to use it. But he was automatically pushing my hand away and exploring it himself. And cuz in the US, do you guys have morning circles sometimes at the beginning of the day? Yeah. So yeah, like that routine? And that's when we do it. Because the teacher was like he's bored in mourning circle. And I think it's because you know, he can't engage it would be great if that's what I'm try using them. And so I'm sitting next to him. The only word I had shown him where it was on the device was morning circle. Within 20 minutes of him just exploring, he pops out. No one likes morning circle by. And we were just going oh my god, like, because if we didn't think you could do that, and just put that in front of him. He never would have been, like, you would have assumed because often people probably would have seen well, yeah, like, you know, whatever, because he just, you know, walks around points and grants. But he's actually very cheeky, very switched on. Yeah. And it's, but it's again, it's the same for even I really liked that you pointed this out. It's the same vein for even the children with ADHD and developmental language disorder in a mainstream school. I've had so many children say to me, I'm stupid. And I'm going no, you just your brain thinks about language differently.



Katy Weber 1:00:13

Right? I love that idea. Assume, always assume competence, right? Like, I felt like that was the same idea of like, always assume your child wants to succeed, and figure out how you can help them get there, as opposed to just immediately assuming that they don't want to be there. They don't want to do well, like everyone wants to do well. And so if they don't want to do well, they've probably given up trying. And they you know, and that's so tragic. So I love that idea of like, always assume absolute competence, especially in children, right? Oh, my goodness, you're making me so emotional. Oh, Lord, this is so incredible. Oh, God, I want to be mindful of the time, but I feel like I could pick your brain for so much longer. You're such a Oh, my goodness, thank you so much. For this perspective, I really, really appreciate it. I think this is going to be quite I mean, for a parent who might be struggling with a young child like I was, Oh, my goodness, this will be so interesting and fascinating. So quickly, do you have another name for ADHD? If you could call it something else? Did you? Did you prepare something



Lauren Yuile 1:01:18

I kind of have. So try to be mindful of the time because it's so easy for me to keep talking. So for ages, I thought I would get rid of the disorder, because I don't like that it implies that something's wrong. But I also as we've talked about before, so often when I'm if especially if I'm giving language diagnosis, I'll you know, say the term developmental language disorder, or what I'm describing, and I'll basically say this just means that, like I said before, a child's brain thinks about language differently. To mean, different is the biggest is better or difficulty, but I

don't I think it's really important that we know that ADHD is a different. It's not on the spectrum of neurotypical it's different again, because I know for me, it just seems like it kind of undercuts my experience when people like, oh, but everyone's a bit like that, or, you know, that's really common. It's like, no, no, this is another thing. So I think for me, I probably at the moment, believe the disorder, but I probably probably call it like, you know, executive function disorder, or executive function name difference, because it's much bigger than the attention. And that's part of the reason why I think me, it didn't, it went undiagnosed, because it's like, but learn, but learn can focus really, really well. Yes, I can. On one thing, when I'm motivated, but it's everything else that goes along with that, or the other executive functions.



Katy Weber 1:03:09

Right? Yeah. So well said. And I think so many of us who dismissed the idea of it even when we didn't know that it you know, even if somebody suggested, like, my therapist suggested to me I had ADHD, and I was like, I don't know what you're talking about. That's ridiculous. I was kind of offended. So yeah, right. That's so important. I like that. I saw a tweet recently, that's been really helping me, which is like, somebody who's like, Oh, everybody, everybody loses their keys. And the response was like, yeah, and everybody has to go to the bathroom, Janet, but if you have to do it 90 times a day, you might want to get that checked out. Right. Like that. I feel like that's been helpful for me. Whoever wrote that tweet, shout out. I don't remember where I saw it, but, or who wrote it, but I'm like, if that can maybe that'll be helpful for somebody else who's struggling with this idea of like, you because I think a lot of us do struggle with that idea of like, How much am I struggling? Right. Well, thank you.



Lauren Yuile 1:04:08

I don't know what it's like for other people right? Now your experience exactly



Katy Weber 1:04:12

right. Yeah. Oh, well, thank you so so much for sitting down with me and sharing not only your story, but your wisdom too. I really even just your diagnosis perspective was so great. I was feeling I feel like I got a lot out of this. So I know a lot of people well so thank you so much, Lauren.



Lauren Yuile 1:04:29

Absolute pleasure. And there you have



Katy Weber 1:04:37

it. Thank you for listening and I really hope you enjoyed 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 me a five star rating, or share this episode on your own social media to help reach more women who may be 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.womenandadhd.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