

# Anne Bartolucci: ADHD & common sleep problems

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## SPEAKERS

Katy Weber, Anne Bartolucci

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Anne Bartolucci 00:00

I had so many of my patients with ADHD, say 9pm is when I really wake up, that's when my brain really wants me to do things. And so it can be harder to not take advantage of that. I've also found with women, especially moms, that when they get to the end of the day, and they put the kids to bed, and maybe their partner goes to bed those last hours or the time when they have to themselves. And so part of what I found is helpful is to say, Okay, let's go with that. Let's find things that you can do during that time. And give yourself some flexibility. But try to make sure that you're off screens from within an hour of bedtime, so that your brain has a chance to start winding down.



Katy Weber 00:48

Hello, and welcome to the women and ADHD podcast. I'm your host, Katy Weber. I was diagnosed with ADHD at the age of 45. And it completely turned my world upside down. I've been looking back at so much of my life, school jobs, my relationships, all of it with this new lens. And it has been nothing short of overwhelming. I quickly discovered I was not the only woman to have this experience. And now I interview other women who like me discovered in adulthood, they have ADHD and are finally feeling like they understand who they are and how to best lean into their strengths, both professionally and personally. Okay, before we get started, I'd like to share with you this lovely review from a listener called Midnight t 21. On the apple podcast platform, it's entitled incredible content. Thank you so much for bringing the world this extremely valuable free content. Keep doing what you're doing. Thank you so much midnight tea. I really value your feedback and these reviews, and I'm just so glad these conversations have helped others as much as they have helped me. Thank you so much for listening. And I think this is honestly the longest I've ever kept up with anything consistent. So I really have to say it's thanks to reviews like these and this incredibly supportive community. And of course, the abundance of fascinating brilliant ADHD women from around the globe who have shared their stories each week. So thank you everyone. I am really feeling the love today. Okay, here we are at episode 99 in which I interview Anna Bartolucci. Ana is a licensed

psychologist, a certified behavioral sleep medicine specialist and the founder and chief psychologist of Atlanta, insomnia and behavioral health services. She's also adjunct faculty at Emory University and enjoys sharing her knowledge as an author, speaker trainer and now writing coach and when she's not helping people sleep. She is a USA Today Best Selling Author of urban fantasy and steampunk under her not so secret pen name, Cecilia, Dominic Ana, and I talk about what led to her own diagnosis in adulthood. And we also discuss her book *better sleep for the overachiever*, we talk about some of the more common sleep issues experienced by adults with ADHD such as delayed circadian rhythms, restless sleep, and revenge, bedtime procrastination. We also talk about healthy sleep etiquette for adults with ADHD, and the benefits of productive relaxation. If you'd like today's interview, and maybe have some more questions for Ana, I have great news. She will be our featured expert in the women in ADHD online community for the month of October. So stay tuned. That's right. Every month we feature live Q and A's with experts. And those are always recorded and archived for our members. We just recently had a great one on ADHD and medications. And coming up in September, the topic will be ADHD and RSD rejection sensitive dysphoria. And then of course in October, we'll have Ana back. If you haven't yet joined us over in the online community, head over now to [women and adhd.com](#). And you can always find that link in the show notes. Without further ado, here is my interview with Ana Bartolucci. Enjoy. All right, well, I'm so glad we are finally having this conversation on after all of the back and forth. And I'm so thrilled to have you here. Thank you so much for sitting down with me. I'm really excited to hear your story.

A

Anne Bartolucci 04:10

Thank you so much, Katie, I'm really excited to be here because you I discovered your podcast soon after my own diagnosis. And I was like, Oh, wow, these are these are my people.



Katy Weber 04:19

I love hearing that. And I love kind of being able to have guests on the podcast who sort of, you know, listen to it as well early on in their journey because it just sort of feels it feels like a nice cathartic experience. Right? Okay, so let's get started with you know, when were you diagnosed with ADHD and then what was happening in your life at the time that you started to connect the dots and start to think okay, maybe this is ADHD?

A

Anne Bartolucci 04:45

Yes. So I never in the world thought I had ADHD. Because when I was growing up, and I think I'm slightly younger than you are, but I was thinking back through my elementary school journey, which was pretty much in the 80s. And I remember A couple of students who I later figured out how to ADHD, but of course, they were the little boys who couldn't sit still. And I was always the daydreamer, you know, I was always doing flights of fancy I was doodling. still paying attention, actually, the doodling helped me to pay attention helped me to focus. But it was interesting because I started a few years ago looking at or seeing articles with by women who had been late life diagnoses and thinking, well, a lot of this sounds like me. And I have a mentor here in the Atlanta area, who's both a good friend and a mentor. And she's been diagnosed with ADHD for forever. And so we would talk about some of my struggles, for

example, not being able to do things consistently enough to be able to get to the next level in my writing career. And she would say, oh, yeah, that sounds a lot like ADHD. That sounds very similar. I'm like, Oh, I don't have ADHD. I'm not hyper. I'm very successful. I'm, you know, I always made good grades. Because, you know, we have that dichotomy in our heads that if you were smart, and did well in school, and you can't have ADHD,



Katy Weber 06:08

well, doctors tell us this. Yes.



Anne Bartolucci 06:11

And I know from listening to your podcast, that that is not true. Shout out to Jules. So yes, I never thought it could be me. But then, last year was really rough. Of course, I'm a psychologist, asleep psychologist. And there has been incredibly high demand at the practice. So the point that I was lucky enough to finally bring on another practitioner, I only have her part time, I would love to have her full time because we definitely have the work. And people have just been so much more high distress than they were before the pandemic, which I think you've probably found as well. So I was having all of that demand. In my professional life, I had four deaths last year, both into varying degrees of closeness. And it was the fourth one that happened at the end of October, that I say broke me, that pretty much wiped out the rest of my existing mental resources. And November is National Novel Writing Month. So that's when people will sit down and try to bring out 50,000 words of a novel in 30 days. Typically, I've done it successfully. But I was just sitting down and nothing was coming in. Typically, creativity has been my outlet. And I thought, okay, something is wrong. So I finally reached out to a colleague of mine, who does testing. And we sat down and did it. And he was skeptical at first, he said, Are you sure? Like what makes you think and but then he asked me some interesting questions like, well, how have you managed? And how have you coped to this point, if you do have ADHD, I told them, I've gotten very good at delegating. I have a wonderful office manager who takes care of a little picky detail things that my brain doesn't like to do. She keeps me on task for things. She keeps me accountable. We put in systems and routines so that things are done at certain times that you don't have to actually think about it. And I've also relied a lot on my husband, like, for example, today, he's doing laundry, because laundry is one of those tasks that I have just never been able to do because it's a task that requires doing something and then a pause and doing something and then a pause, and my brain in the pauses just goes elsewhere and doesn't want to come back. You're nodding like yeah, that sounds a lot like. So I finally got my diagnosis in January, I'm lucky that I will acknowledge my privilege that I am in the mental health field and was able to get in with somebody quickly because they are a friend and a colleague. So yeah, I've just been diagnosed since January.



Katy Weber 08:43

Wow. Okay, well, that answers my question about whether you were diagnosed when you wrote the book, because I know that there were some parts in your in the book, which we will get to later on. But there were some parts, especially at the end, when you talk about procrastination, where you do mention ADHD. And so that's why I was curious if you had written the book. Or if you had already kind of put some of these pieces together in your own life when you were

writing the book, or if you were diagnosed, and then went back and looked at your book through this whole new lens. We were like, oh, yeah, this all makes sense. Because that's what happened to me with my book about binge eating. So anyway, but I'll get to that. I really want to get back to some of the things you know, you had mentioned being a great student and a doodler. After your diagnosis. You know, we go over the whole course of our life through this with this new lens and it's just so intense and, and mind blowing, and I think I have yet to meet somebody who was diagnosed maybe they exist, but I've yet to meet somebody who was diagnosed with ADHD and they're like, oh, yeah, no biggie. You know, usually it's this journey of grief and and elation and it's such a roller coaster. So I'm curious with your background in psychology and and and Um, advanced degrees, like, what was it like going back for you? And looking back and thinking, oh, yeah, the signs were there all along.

A

Anne Bartolucci 10:07

It was definitely, I guess it was an ambivalent process when you're where you feel more than one strong emotion at the same time. On one hand, it would have been nice to know that I had ADHD and could have potentially used a little bit of help, and maybe a little bit of understanding. On the other hand, it has been nice to go back and look at some of this. Do you build things I did when I was younger? I'd say, oh, that's why. So I've been a lot more compassionate to my younger self as a result, which has definitely been nice and healing. I wrote down some of the things that I've seen pop up in articles. One big thing that would have been nice to know was the emotional reactivity. dysphoria. Oh, my gosh. Like, I remember at times in my life, when somebody ghosted me you know, before ghosting was actually a term and becoming frantic, of what did I do? What happened? How can I fix this? What's wrong with me? I also have times in my life when I would misinterpret instructions. And I would, you know, get lower grades on certain assignments as a result, but of course, then I would overcompensate afterwards, to not do that. And another thing that came to mind was, I before Outlook calendars became a widely used thing, or at least a widely used thing in my life, I would have a hard time remembering things that were out of my normal routine. So for example, I was on a committee when I was in graduate school, and I could never remember to make the meetings, which was so out of character with me. And I'm wondering, why didn't nobody, why didn't none of the psychologists around me catch this? But yeah, I could never remember make meetings. And yes, I would write them in my planner, but then I would never look at the planner. And then when I got into the work world, especially when I was working in a regular nine to five for somebody else, where it was somebody else dictating my schedule and my workload, I would go home, at the end of the day, just feeling what I would call soul weary, I would be so exhausted, and I thought it was burnout. But then I would recover and I would be fine for a couple of days. And then I would have it again. And now I realized that was probably attention and executive function to fatigue, that I was feeling because I was having to manage all these things that were outside of the things that my brain wanted to do, or found it easy to do.



Katy Weber 12:29

Yeah, I know, I, I'm, I'm experiencing that right now. I'm taking a college level course for the summer. And there was a part of me that was like, Oh, this will be great, this will be fun. And I realized, it's, it's, you know, for the first time, I've taken a college level course, in 20, almost 25 years, and realizing how much attention is how much of my brain bandwidth is required. And

holds on to it even like, it's been very difficult for me to partition, like studying time versus work time and everything else. And like realizing how just that like internalized work life balance is really, really exhausting. And really difficult, like I'm finding the transitions are very difficult. And it's been through the, you know, since this diagnosis, it's been very meta to, like, realize all of this happening in real time. And yeah, and that that term weary, really, like hit me, you know, that idea of just how much mental energy is required for certain tasks that don't seem like they should require it, or at least other people don't don't require it right. And then of course, the flip side is tasks that are difficult for other people feel effortless to us. Right? Like hyperfocus, and rabbit holes and all of those things. You're like, oh, yeah, you know, no biggie.

A

Anne Bartolucci 13:45

Yeah, that was one of the interesting things that my husband observed. He's like, you don't have any trouble focusing. In fact, I have trouble getting you to stop focusing. And so I was like, oh, there's that hyperfocus fees piece? Definitely.



Katy Weber 13:57

Yeah, I know. Right. Yeah. And obviously, I've talked so much about not relating to the hyperactivity initially, and just feeling like I don't know what you're talking about. I feel overwhelming paralysis a lot of the time and having no really just never thinking about what was causing the paralysis or how intimately related to hyperactivity paralysis is right and how that shows up for so many of us and I, and then we end up thinking that we're lazy. And to me, laziness was the opposite of vibro activity.

A

Anne Bartolucci 14:28

Right? Yeah, it was interesting. I had a time when I was trying to manage a lot of different things. Of course, long before my diagnosis, when I complain to my office manager is like, I'm just lazy because I can't get any of these things done. And she looked at me, she said, Ana, you are the least lazy person. I know.



Katy Weber 14:42

Yeah, that was sort of the conversations I was having with my therapist at the time when she was really like, Dude, look into ADHD, because I think it was she was seeing such a difference between my sense of self and how I was viewing and explaining myself in our sessions versus the evidence of what I was doing and accomplishing in my life. She was the one who would have to mirror that back to me and be like, Don't you see how different you know how you're viewing yourself versus what is actually happening? So how did you end up specializing in sleep? And what's the word I'm looking for? Studies?

A

Anne Bartolucci 15:19

Behavioral sleep medicine. Oh, behavioral. Yes. Thank you. Yeah. So this is a an interesting journey. When I got ready to apply for intership, I looked for experiences outside of our little

journey. When I got ready to apply for internship, I looked for experiences outside of our little psychology clinic, and the UGA clinical program. And I reached out to some alums in the Atlanta area, because I was in Athens and Atlanta was only, you know, hour, hour and a half drive away, depending on traffic and construction and all that fun stuff. I ended up getting responses back from a couple of them, one of whom was a private practice psychologist, and the other was Michael Bruce, who is still a friend and a mentor. And he was working at a practice here in Decatur, which is on the I guess you could say, on the sort of east part of the Atlanta area. And he said, Yeah, sure, you can come work with me, you know, maybe an hour or an afternoon every other week, and let's see how it goes. And he was doing general sleep medicine. So I ended up going to work with him, we really hit it off. By the end of that academic year, I think I was doing two days a week in the practice. So I was getting really familiar with general sleep medicine. And then when I went on internship, and to explain to those of your listeners who don't understand the psychology training program, so what we do is we have a certain number of years in our program in our in our school, and then we go off for a year and work in an actual intense clinical setting. So in my case, I went to the Central Arkansas, VA, because I figured going to a VA hospital, I would pretty much see anything, I would be prepared for everything, which was not untrue. I saw a lot I did a lot, I'm very happy for that experience. And they knew I had an interest in sleep medicine and behavioral sleep medicine. I was one of the health psych interns. And so when I was getting ready to go on my second rotation, the rotation supervisor came to me and said, I have a mission for you from God. And I said, Oh, really from God. And he said he has God wants you to go to the head of the sleep lab here, head to the sleep medicine area and tell them that you want to work with him while you're on my rotation. So there we go. My you know, my little intern self. I'm in my early 20s and said, Hey, would you would you let me work with you. And it was very door. pulmonologist and his go okay, fine. And so I ended up working with him on that rotation. So I got some more experience. And he liked me. And apparently, that experience is still going for the interns there, which I'm super proud of. And then I came back. And at that point, my program, which thankfully no longer does, this made us go back for a year to supervise the younger students. And also that's when I did my dissertation. And when I was getting ready to graduate, Mike Bruce was getting ready to leave. And so I basically just slotted into his spot that practice and they were super supportive of me during my early career, they paid for my licensure process, they paid for my extra certification and behavioral sleep medicine. And then a few years later, I went into private practice. Because of that, the soul weariness, I realized that that was not the best fit for me. There were some other things going on. And so yeah, I've been in my practice since 2008, and have never looked back.



**Katy Weber** 18:53

Interesting, I guess you can't really specialize in sleep studies without dealing with kind of the inability to sleep. So at what point did you start really specializing, or I guess what was the inspiration for the book, your book, better sleep for the overachiever and kind of talking about. So the busy brain and perfectionism and how that affects sleep.



**Anne Bartolucci** 19:15

When I was in that medical setting, I was very limited in what I could do with my insomnia patients. And that was one of the big reasons I went into private practice. So I could be more of a psychologist rather than a sort of a assistant medical professional, almost. And so that's when I really started seeing more insomnia patients that even at this point 85 to 90% of my practice

is focused on Insomnia Treatment. And I found myself having the same conversation over and over again and noticing this one personality type that I would see repeatedly and they were the overachiever types, the ones with you know, some of them have the type A personality some of them don't, but they're all very motivated by achieve They have that perfectionistic quality. And a lot of that is what keeps them up at night. What keeps them mind racing. And so I thought, Hmm, this is an interesting pattern. I did propose it to a couple of publishers and one of them so we don't. It was an academic publisher that did my business basics for private practice book. So we don't really do self help. And then the other one, Sybil, you know, there's not really a scientific basis for this overachiever type. So we can't publish a book on it. So I said, Okay, fine. I'll do it on my own. So that's what made me go into do the independent publishing, I'd already been independent publishing my fiction for years. So I knew how the process work. But that's basically the genesis for better sleep for the overachiever. And I also wanted to talk not only about the sleep issues, because of course, everybody's heard the sleep recommendations. But what are the other pieces that I've noticed that go into the sleep disturbance at night?



Katy Weber 20:56

Yeah, I think that was really interesting part of your book, just like debunking some of the myths around, you know, what we should be doing, because I think, as a woman with ADHD, I'm not alone and always feeling like I should be doing something. And yet it's not working for me, right. And like, I remember trying melatonin to get to sleep. And it was like, had the opposite effect. And, and often being like, Oh, that's interesting, but never really looked much into it. What are some of the sleep strategies that we are often recommended, but you realize now, kind of, with your, you know, with a new insight into a neurodivergent brain like that, what are some of the strategies that might actually make it worse, so



Anne Bartolucci 21:38

one of the ones that we often hear is go to bed at the same time, every single night. Whereas if somebody isn't sleeping enough, that's just going to cause them to lie awake in bed longer, which is then going to feed into the insomnia process, which is basically the thesis ation between bed and sleep has gotten broken, and begged, it's associated with anxiety and negative emotions rather than with rest. And it's been interesting trying to break my patients have as like, well, I go to bed at the same time, every single night, and often very proud of it. And so then we have to talk about okay, is that really working for you? And that's a question that I end up asking a lot, especially if my are divergent clients. And it's interesting, because slight tangent, I've always had this fascination with ADHD and sleep. When I lecture to the sleep fellows in the psychiatry fellows, each of the other disorders in the sleep have one maybe two slides and ADHD for years has had its own section. Because it is a complicated relationship. Another thing that I've noticed is a lot of people have this myth that they should get up early in order to be productive, because there's this huge myth in our society that only morning people get things done. But I know I wrote about in the book with my own struggles with that I know from being in the group that other people have definitely struggled with that as well. And the truth is that this is one of my soap boxes, that people should be able to live and work and sleep on their body's natural rhythm. And one thing we know about people with ADHD is that they tend to be a little bit more phase delayed. So our internal clocks are set a little bit later than the 10pm to 6am sleep schedule that the rest of the world and school systems and jobs want



us to keep. So that's another thing that's fighting against that. And a lot of times people have more flexibility than they realize, especially now with so many more people working from home and being able to set their own hours better. But a lot of times they don't think I should be able to advocate for that.



Katy Weber 23:40

That is really unfortunate. And I feel like I've spoken to a lot of women too, who are stuck in that trap of you know, working from home and feeling constantly guilty because their productivity is not kind of ebbs and flows throughout the day. And yet they sort of feel like they have to be stuck at their screen all day long and at a certain time, and it just feels like so unfortunate. And like why can't we why can't we just get what we need to get done. And not have to worry about, you know, how how we're showing up or how we're being viewed. But yeah, that's another



Anne Bartolucci 24:11

time. Yeah, exactly. Like, let's definitely be working smarter, not harder, even though I hate that expression. But it's basically I've got my fidget thing here. It's a rest dressing. It's got little things in it. There's semicircular so I end up playing with them, just in case anybody else is listening and fidgeting. Okay, yes, the workflow I just recently in July, I have figured out a couple of things about my own workflow that might be helpful for others. First, I had originally last year once I realized, okay, this telehealth practices going to be a semi permanent thing and at this point, I'm still only seeing three or four in person patients per week. The rest of it is It's all virtual. And I figured out that I can't do as many virtual sessions in a day as I can in person sessions. And I suspect it's not only because you know, when you have virtual sessions, as we are looking at each other, we're only getting, you know, mid chest, and up. So we're missing a lot of the nonverbals that you would normally get in sleep, we're kind of obsessed with feet, we like to see what people are doing with their feet, because that can help us to chase down other things. So there was that. And also, I believe, with the neurodivergent brain is hard to maintain that level of focus on just one thing. So I realized, Okay, well, first, let me make my writing time in the morning. And then my patient time to the middle of the day and evening. And I realized after about a year that wasn't working, because between my face delay, and my trouble getting started on things that I was not doing what I needed to do in the morning. So this month, I have done a couple of things for my my brain, which is I now only see three telehealth patients in a row before I get a break. And I've also started with patients at nine o'clock in the morning, because I know I will get up and show up for somebody at nine o'clock better than I will show up for my own self and for my own stuff, which I feel guilty admitting that. But it's worked beautifully. And it's true. And I really like stopping at four o'clock in the afternoon and just having the rest of the afternoon to do what I need what I want to do.



Katy Weber 26:30

Yeah, I know, right? Yeah, I feel like I've had a few conversations about the sort of recognizing bio rhythms, especially from throughout the day, and kind of what sort of work I do best at different times of the day and why and it's been really it's been super helpful for me to not only get what I need to get done and not always sort of feel like oh, God, why isn't this work at you



know, not trying to jam things. But also realizing like you said, like, why certain things can be more draining than others. And that's really fascinating about the the needing to see so many visual cues right? In your profession. That's really interesting. I'd like to take a moment to thank better help for sponsoring this podcast. If you're a regular listener of this podcast, you know, I am a big proponent of therapy therapy provides me the best opportunity for verbal processing something that is so important for my kind of brain and my sense of self. What I love about BetterHelp is that it's not a crisis line. It's not self help. It is professional therapy that's done securely online from the comfort of your home. They assess your needs and match you with your own licensed professional therapist, and it's available for clients worldwide. So you get access to a broad range of expertise that might not be available to you locally. It also tends to be more affordable than traditional offline therapy and financial aid is available. If you visit their website and read their testimonials. There are actually quite a few reviews that specifically reference help with ADHD as a special offer for listeners of the women and ADHD podcast, you'll get 10% off your first month, simply sign up at [betterhelp.com/women](https://betterhelp.com/women) ADHD. That's BetterHelp [h e l p.com/women](https://betterhelp.com/women). ADHD, and there's a link in the show notes. This podcast is sponsored by BetterHelp. I'm curious about revenge, bedtime, procrastination. That's something that's talked about a lot with ADHD and I actually have never really had I used to be a very late a night owl I used to always stay up until like three or four in the morning. But now that I'm older, I'm more of like a in bed by 930. Right and up at five. So it's fascinating to me when I hear a lot of women talking about revenge bedtime, procrastination, because it's not something I've necessarily ever related to what I my sleep struggles involve going to bed not having a hard time falling asleep. But I wake up at you know, two or three in the morning wide awake, where my brain is like, let's go over our to do list for the week. But I'm curious, like what insights have you had into that? You know, why? Why do we do it? What even is it and why is somebody with ADHD more likely to kind of stay up late and have that that later rhythm phase delay?

A

Anne Bartolucci 29:13

From what I've read revenge, bedtime procrastination is basically because people have been responding to everybody else's demands all day, they resist going to bed because that is the time that they have to do their things, and the things that they enjoy. I suspect it's even more with ADHD brain because of that phase delay. Because I've had so many of my patients with ADHD say 9pm is when I really wake up. That's when my brain really wants me to do things. And so it can be harder to not take advantage of that. I've also found with women especially moms, that when they get to the end of the day and they put the kids to bed, and maybe their partner goes to bed those last hours or the time when they have to themselves And so part of what I found is helpful is to say, Okay, let's go with that. Let's find things that you can do during that time. And give yourself some flexibility. But try to make sure that you're off screens from within an hour of bedtime, so that your brain has a chance to start winding down. And so you're not interfering with your own natural melatonin release, which is what happens when we are on screens late. Plus, a lot of what we do on screens tends to be activating. So when it comes to the revenge, bedtime, procrastination, it's, you know, taking revenge on the rest of your life, basically. But in the end, again, is how well is it really working for you? And see, what is it that you are actually getting out of that? And can you fulfill those needs in a different way or in a more useful way?



Katy Weber 30:52

I want to get back to the idea of when our no screens because this was this is something that's really, really hard. And it really it is, I mean, I genuinely have tried many times to wind down before bedtime. And like I said, I don't really have a hard time falling asleep. And so but I think I do what you talked about earlier, which is like, I don't go to bed until I'm actually really, really tired. But I like to listen to audiobooks. And so when I'm listening to an audio book, in order to focus on the book, and pay attention to the book, I need to be doing something. And so often, I will be playing like Solitaire, something on my phone. So I'm staring at the screen right up until I go to bed. And I know that in theory, that's terrible. But I'm like, I don't I literally don't know what else to do. Like, what do you do? Like, it seems so silly, but, but also, so indicative of our addiction to television, and our phones and our compute, like without a screen, I literally have no idea what to do for that one hour. That won't make me more awake. You know what I mean? Like, there's like, if I try to read a book, I will immediately fall asleep. And so then I'm like, Well, do I push the one hour earlier? Because of that, like, what do you what exactly? Does a typical? What do you typically recommend somebody do during that one hour?

A

Anne Bartolucci 32:15

That's very individual, but think about okay, what are you doing when you're playing the cards? You are doing something that is semi structured, and that requires a little bit of focus. And I believe they still do make for real cards. That's true. Okay. So that might be something to try is to play solitaire with real cards, as opposed to on the phone? Yeah, all right.



Katy Weber 32:44

I'll try that at bed. Because that's what I usually do. I listen to it in bed. I thought about that. Actually, when I was relisting to the book, or to your book, too. I was like, what would I even do? Because I you know, another we have imposed screen free time for a huge window on Saturday on Sunday with our entire family. And it is really interesting, because we really, we all do it. It's enforced, and we all hate it. And it's like an addict, like you can feel the addiction, right? The impulse to all every 10 seconds. One of us is like, ah, yeah, what time is that? How much longer do we have? And so one of the kind of loopholes I've gotten is to listen to a book. And if I'm not like puttering around doing chores, I will color. And so I thought about that. I was like, Well, I suppose I could color. But then there's the sort of petulant child version of me that's like, I don't want to do that. I don't want to do any of that. Like, I just want to be on my screen. So but since I'm not falling, having difficulty falling asleep, what damage am I actually doing? Like? Is my using my phone all the way up until falling asleep? Is that contributing to my waking up in the middle of the night? Quite possibly?

A

Anne Bartolucci 33:53

This is not psychological advice. That means that I can tell you from having lifted at this point 10s of 1000s of sleep diaries that yes, late screen use does contribute to middle of the night awakening.



Katy Weber 34:07

Yeah it was afraid of that

mean, it was afraid of that.

A

Anne Bartolucci 34:09

Yeah. Also possibly chewing this entire free bedtime routine in bed rather than last 15 to 20 minutes. So it's interesting because yeah, a lot of people do have that myth that okay, well, I can do whatever I want up to bedtime if I'm falling asleep, okay. And I actually do have a handout for you and your listeners on five Sleep, sleep myths that might be keeping you from sleeping, and that's one of them. You know, some of them are in the books, some of them are not. And it's because of that it keeps you from releasing your brain releasing its own natural melatonin. It is activating to the brain in other ways because sunlight, that 520 to 580 nanometer wavelength, I think is one of our body's main signals for when it's time to be awake. Even if you're using something on the screen, like night shift or flux, it's still not blocking all of that signal. And so you're dampening your own melatonin, you're telling your brain, it's time to be awake. And at the beginning of the night, your sleep drive is probably high enough, that that's covering that up. But of course, as you sleep, the sleep drive goes down, which means all the other stuff is going to emerge. So what I found with my neurodivergent patients is yes to do something that is a combination, like you were describing. So listening to an audiobook or a podcast, while drawing or coloring or doodling, or playing cards with real cards, maybe having a few different options, so that you can say, Okay, what do I feel like doing tonight? Or what do I at least feel like not doing tonight? And perhaps doing that regularly, but if, on the other hand, not holding yourself to it with such a perfectionistic standard, that you're going to feel like a complete failure if you don't, and then give up realizing that it's a learning process, okay, I need to figure out what my pre bedtime routine can be without screens. And maybe it's weaning yourself. Okay, I'm going to let that last half hour, be screen free at first, and then gradually moving that earlier, once you figure out you can do it and no, sometimes you believe and have to start with okay, that last 15 minutes is gonna be screen free. Sorry, you look so disappointed.



Katy Weber 36:27

No, I know, well, no, I'm just laughing because they have like, of course, it's obvious that you would have a sort of gradual workup to that. And so I'm just laughing at him. Like there's, there's nothing gradual about us. Like it's so true, right? Which is like, how could I be the best at this immediately. And I really, really struggle with that one. And so and but for the many people who I'm sure who are listening who have the more common issue of racing mind not being able to fall asleep. So they end up watching television or or drinking, that's another thing I did a lot in my 20s and 30s, which was I relied on alcohol to put me to sleep, what are some of the ways that you you know, would recommend, you know, less problematic, how healthier way to kind of start to wind down and turn your mind off.

A

Anne Bartolucci 37:18

That's definitely a big one, the mind racing, I would have to say, after I can't sleep, I can't turn my mind off is the biggest complaint that I hear. And a lot of times, I find that by delaying bedtime a little bit and implementing a pre bedtime routine, people find that they have much less trouble with that, because they're not activating their mind, right up until bedtime, even though they feel like they are relaxing. So for the people who feel like they need to watch

television to fall asleep. Think about okay, what is it? What is it? Is it the fact that you're actually watching something? Or is it the fact that you are listening to a story, so maybe it's weaning from the television to audiobooks or podcasts. And one of the other things that I found about people who are watching television to fall asleep is that they are often listening to something that is very familiar, like, for some reason, friends, is one of those things that puts a lot of people to sleep, like I'll put on, I'll put an episode of Friends, because I've seen them all a million times, and they know exactly what's going to happen. So I don't quite have to pay attention. So in that case, maybe weaning from television to music, or to something that's going to go off. I mean, you definitely whatever it is, you want it to go off within a half an hour of your target bedtime, so that you're not listening to it all night, because that can definitely disrupt your sleep. Our brains pay attention to words. So perhaps it's weaning to music, or in that last hour, we mean from television to podcast, or audiobook plus something else that is slightly engaging, but isn't going to suck you in and make you want to do it all night, which I find is a big problem. If I try to read fiction before that is I will often be avoided later than I really want to be. Because I get caught up in it and want to finish it, especially if I get towards the end of the book. So I have found out that I need to read nonfiction. Listening to stuff before bed doesn't really work for me, but it does for a lot of my neurodivergent patients because again, it gives them something to sort of attach to so they're not in their own thoughts. They I would say figure out what it is that you can do that will help you to get that same effect but without the screens.



Katy Weber 39:33

Yeah, yeah. All right, back to the screens part. Now, another concept that you talked a lot about in the book, which is fascinating to me is productive relaxation, which was something I hadn't really thought about because I always thought you know, like that's my husband to a tee like he his downtime is always doing something right and I always thought of that as this sort of like weirdo manic energy. You know that like for him Relaxation. is cooking or baking or you know, going around and putting and fixing things, and he loves it and he loves, I think it's great for him and it's very healthy for him. Whereas like, for me, my idea of relaxation is literally lying on the couch, scrolling my phone, and I'm like, Hmm, I'm glad I'm married to somebody like him and not him. Because for me, I've just like kind of would you just start like, slow down like it feels to me like, that would not be relaxing. But when you brought it well, you talked about productive relaxation and use, like the example of gardening or, you know, some of these ways in which we can kind of burn off a little bit of energy in a relaxing way, it was such a light bulb moment for me where I was like, that might be what I need more than just lying around and feeling that like exhaustion and burnout all the time. Like I get like, it made so much sense to me, and I don't, but I also don't know how to like, actually start becoming more of the person because I don't know, I like I just feel like when I am tired, I want to lie around. And so how would you suggest like, how do you get out of that association with relaxation? Or let's just backtrack a little What are you sort of define productive relaxation? First of all,



Anne Bartolucci 41:13

when somebody engages in productive relaxation, they are doing something that uses a different part of the brain than they normally have to use in their line of work. So for example, with me, being a psychotherapist, during most of my day, productive relaxation might enjoy doing something that has me focused externally in a sensory way. So that might be gardening

or like your husband, I'm all about the cooking and the baking, I find those things to be incredibly relaxing, productive relaxation can also be useful for people who feel like if they're not accomplishing something, that they are not, you know, fulfilling their destiny or something that they have to have accomplishment as part of whatever it is they do. I actually took the Clifton Strengths inventory late last year, and found out that achievement was my number two, which helped me with Okay, that's it. And so, and in part of the literature, they say, and so for people with this high achieving strength, it is actually okay and beneficial for them sometimes to work on weekends and vacations, because that's just their strength. And that's how they enjoy themselves. So I still try not to work on weekends and vacations. But at least if I do, I don't beat myself up for it. For people, that's potentially what they need to do is to have something to show for their activity at the end. So for a lot of times for people that can be coloring, because you do have some a finished product, it can be Woodworking for some people, it can be gardening, it can be assembling things, doing models. So in your case, though, if you find that you're lying on the couch and scrolling the phone, helps you feel refreshed and rejuvenated afterwards, then that might actually be a valid relaxation thing for you. I sometimes need to do that myself, I just need to sit and I don't scroll social media, I have learned that that's both a time suck and also makes me feel bad about myself. So I'll end up just reading whatever random articles Google pops up for me to read. Google knows me very well at this point. But you know, some other times I feel like I need to get things done. So it just depends on energy level and also mental resource level.



Katy Weber 43:34

Yeah, I'm very much the same. I am. I stay off social media as much as possible, which can be difficult with my job. But I, I do I've noticed such a difference in my own mood and mental health when I have stayed far away. But yeah, I don't think it does help me feel refreshed and rejuvenated. And that's what I think is what was such a light bulb moment for me, which was like, I feel like it's probably actually making it worse. And that I would you know, that idea of the you know, the bedfellows of of hyperactivity and paralysis. Like I feel like for somebody who has a lot of internalized hyper activity, the idea of productive relaxation makes a lot of sense, in terms of like, if I'm always feeling exhausted, and always feeling tired, no matter how much I nap, and no matter how much I lie around, usually the best thing for me to do is to get back into the habit of like walking a lot and going on hikes, right and moving my body and then I sleep better. And so I always thought it was like, Well, I'm improving the quality of my sleep, but I never thought about it in terms of like, what I need to feel refreshed and rejuvenated, might not be lying around more, it might actually be more movement and then when I think about kind of the h element of ADHD, you know, even though we don't think of ourselves as hyperactive I think a lot of our internalized hyperactivity is related to lack of movement, right? And it's almost like it's almost like without enough movement, the hyperactivity then foster to internalize, you know what I mean? And it's like finding more balance and why I think so many athletes who have ADHD suddenly start to have all of this executive dysfunction issues when they have an injury or something keeps them you know, or they retire or that anyway, it was really interesting concept. And I'm going to try it was just like, I'm just not there yet because I think I have such a negative association with all of that, like putting that my husband I think I just have to find something that's interesting. But then when walking, actually, when when you were talking about it, that's a huge one for me. And I always know like, if I'm in a pissy mood and being really just like, down and depressed, it's because I've gotten out of my walking routine. And it's not like I need to, like, become a competitive athlete or run a marathon. It's really just like, going for a walk.

A

Anne Bartolucci 45:46

Yeah. Or even if no, if the weather is not great, like here in Atlanta, it's gonna be 92 degrees and humid today. So I might go for a walk later, I might not I might go to the gym, or I might just put on like a 20 minute yoga class, and just do something to move.



Katy Weber 46:03

Yeah, yeah, I know. I feel like I feel like whenever we talk about ADHD and physical movement, there's always like, the eye rolls, you know, of just like with screen time, right? Which is like, Oh, I know, I'm supposed to do it. I know, it's gonna help me feel better. I just don't run out. Yeah, for me, like, I recognize that I recognize that inner child. And I'm like, Yeah, you're right. If you don't want to do it, I totally get it. It's, you don't feel like it. But we're still gonna do it. I talked to myself, like I would a child, where I'm just sort of like, but it needs to get done. And this is why and, you know, this is why I have sort of had those inner negotiations.

A

Anne Bartolucci 46:40

And if you really want to do it, you can have some screentime afterwards, and bribe your inner child like you bribe your regular children.



Katy Weber 46:48

Right, yeah. That's the other thing too. And I do this with my kids, too, which, you know, they'll come home from school, and it's like, three o'clock in the afternoon. And they're like, I'm, you know, and I'll just be like, this is the time to, like, let's go out and rejuvenate and get and go for a walk or do something active because we've got, you know, there's still six hours left in the day. And they're like, but I'm so tired. I just want to lie around. And then we, you know, I sort of had that conversation where I'm like, so what are you going to are you literally just going to lie around for six hours, like let's think about how to best figure out our afternoon. If we do this now, then you could lie around afterwards and not have to worry about anything 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](https://www.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](https://www.womenandadhd.com/coaching). And you can find that link in the episode show notes. Yeah, it was really interested, I really, it's fantastic book or recommended, they'll definitely be a link in the show notes. And you're also a prolific writer with fiction. And so I guess that kind of segues into my question about what do you love most about your ADHD?

A

**Anne Bartolucci 48:47**

Sorry, for the cliché, cliché answer, but I have to say my creativity. Oh, that daydreaming did me some good when I was younger? Because yes, I always found my imaginary worlds to be so much more interesting than the real mundane world. And so I feel that that translated into fiction and I've written since I was a kid. So that's always been a coping thing for me as well whether it's working out stuff emotionally or just giving myself something to distract, but also Yes, productive relaxation, because by the end of it, you have a story you have something to show for it. It's also fun to exercise my creative problem solving. Like I I like to say that, you know, of course, people see the connection between me being a psychologist to making me a better writer, but I feel like being a creative writer and author has made me a better psychologist because I end up bringing that creativity into every realm of what I do. And I think it also helps because I can hold on to different storylines and different worlds in my head, that other people might not be Well to do like I asked, I told my best friend who is a high school English teacher when I was diagnosed with ADHD, and she is really the only person who said, I'm not surprised. As you know, typically the reaction I would get is no, you're not. As you said, you're she said that surprise, I said, why? She said, Because you are terrible at multitasking. So that you have all of these things going on. And you can go from one to the other, then okay, that's a good explanation. I do require transition time, but I am able to do both on the same day.

**Katy Weber 50:33**

Interesting. Yeah, that is a fascinating kind of contradiction. Because I, there are some things in terms of juggling, that I feel like I can be really great at like very sharp and have a lot of spinning plates. But at the same time, like I was saying before, with the school, and suddenly, this one class is dominating all of my bandwidth, and I am having a lot of hard times transitioning, and I know my you know, a lot of us do have some difficulties, you know, in the fall and transitioning from season to season. And some of those things that can can be difficult. It feels like such an interesting contradiction. But ya know, that makes total sense to me in terms of the creative worlds how that influences psychology or your view as a psychologist, because psychology is so much about connecting the dots from like behavior to the brain, and all of those being able to see all those different perspectives. So it feels feels natural.

A

**Anne Bartolucci 51:25**

Yes, they do fit together well. And sometimes I need to take a break from both of them. And I have to be very conscious of my emotional and mental energy levels. So for example, on Wednesday, I was having one of those times when my brain was just like, No, I'm tired, I just want to sleep. I actually might have fallen asleep a little bit during an online class, I'm not going to say for sure. The mistake was because my opposite home was in my spare bedroom. And so I was like, I'll just go sit on the bed propped up on the pillows while I listen to this. And that was a bad idea. So I was like, Okay, do I force myself to do a writing sprint? Or what do I do? So that's what I ended up doing the yoga class, and I felt much better afterwards. And then as I told you, before, we were talking, I suspected that was probably the program to the kidneys to cope with yesterday, my body was telling me something is going wrong here, you need to rest. And so I was glad that I did. And then yesterday afternoon, after I was feeling better, I had this



impatient of, okay, I cancelled all my clients, I can get all this stuff done. And I was like, no, no, I need to be, you know, because I have ADHD, you know, I need to get myself some recovery time because I had this incredibly painful experience this morning. And so I'm very glad that because today, I feel so much better. And I think it's because I did give myself Wednesday afternoon through yesterday to, to recover and rest from this whole thing.



Katy Weber 52:51

Right, yeah, I think that's something I've been very grateful for with my own diagnosis, and just being able to have so much more grace for myself on those days, where I'm like, where my brain was just like, No, you're not, you may have 25 things on your to do list, but we're not doing any of them. And I'm like, and I'm like, okay, that's fine. You know, today's just gonna be that day. And in order for me to get productive sooner, I will have to just lean into that and just realize that that's happening for a reason. And there's so much of that. I feel like it's very common with ADHD in those moments of rest to start, like, you're saying, like, when your body is resting, your brain starts going into overdrive, because it's like, okay, what are all the things I'm not doing? What are the things I'm going to do when I can get better? And what are you know, and, and so many times, I have clients who come to me who are like, you know, what's wrong with me that I'm not able to do stuff right now? And I'm like, Well, what's going on in your life? And they're like, Well, you know, I mean, even if there was nothing personal going on, we're living in a dumpster fire of a country right now. So you're just like, of course, none of us can get anything done. Like, all you have to do is like, look at the front page of any newspaper. And you're like, yeah, no wonder nobody's getting anything done right now. But I think you know, we have that, like, that drive is always there, like, Oh, I gotta get all this stuff done. And so for me, it's been so much easier to recognize when that happens and be like now, today, today's arrest day, so you might as well enjoy it. And let's, you know, binge on an old show or something.



Anne Bartolucci 54:12

Yes, that was that was yesterday, we got through most of the second half of the second season of Buffy because I was in college and grad school and it was on originally. And of course I write urban fantasy. So I feel like I have missed this part. This very important part of my Canon. It's funny because I find myself afterwards like this morning even thinking about okay, I'm appreciating it probably more than I would have because I'm appreciating it as a writer and how they took some so many of the expectations and twisted them. So you really don't know what's going to happen with any one of these episodes that comes up. I mean, they did they did play the werewolf pretty straight, but the rest of it has been has been a lot of fun to notice that. Yeah, it was allowing myself to do that. It's like okay, we're just going to sit and binge Buffy because my husband also wasn't feeling well. All yesterday and I think we both benefited from it that you mentioned that drive to keep going. And that was one of the things that when I was going back through better sleep for the overachiever, reading that part about how overachievers feel like they have that constant drive like that constant worrying motor in the middle of their chest. And it's like, okay, that's not just overachievers. That's definitely the ADHD as well. Yeah.



Katy Weber 55:23

So I, you know, I actually, you just reminded me, I never got to really ask you about like, what, what were some of those things in the book, when you look back through this lens where you're like, oh, yeah, maybe this is more ADHD than just simply overachieving? Like how do we even start to parse and figure out like, what is what? That's, that's a bigger, much bigger question.

A

Anne Bartolucci 55:44

And I think that's it, it comes to the point of, we can't make them mutually exclusive, there is definitely a lot of overlap. And just because you have ADHD doesn't mean you can't be achievement oriented, it just might mean that you have to get some more different tools in your toolbox. I was actually telling that to somebody this past weekend is like, I feel that since my diagnosis, I realized better the tools that I need, and the skills that I need to develop to get around this. So thinking about the overlap, yeah, there's definitely that drive, the relaxation, the productive relaxation, that you mentioned that, you know, for some of us, we need to often be doing something to relax. It's not just sitting around. Of course, there's this whole chapter on perfectionism, which includes imposter syndrome. And you know, we talked about, I talked about the bargains that we make with ourselves, if only I can do blink perfectly, or do it right on the first time, then I will be happy. And I wonder if some of that comes from the messaging around ADHD that because you have this issue, you need to prove yourself, even if it's not necessarily stated outright. And so I think that drives into a lot of the perfectionism. And then of course, there's that whole chapter on procrastination, which as the chapter headings says, It was the last chapter for a reason because it requires most research. Yes, and ADHD. It makes us great procrastinators. And so it's digging into that and figuring out okay, what are we doing? And I have definitely found myself drawing more on some of those strategies that I talked about, especially the not falling into the trap of I have to do all the little things before I can do the big thing.



Katy Weber 57:27

Yeah, yeah, I know. Right. And I think also, like you were mentioning about finding the tools at this, you know, just realizing that if something's not working, it's not I'm not the problem, right. I think that's been the biggest shift. If I could think of like one thing that's been made, the biggest difference is that my default is not what's wrong with me. My default is okay, what do I need right now? And so I think that is so helpful. And in so many areas. Oh, my God, I feel like I could probably talk to you for another hour. I have so many more questions. It's so interesting to think about a lot of these overlaps, right? Like it'll, you know, and all the ways in which we had kind of identified ourselves as certain types of people before coming to an ADHD diagnosis and then being like, Oh, right. Okay. It's, you know, there's a lot more happening beneath the surface here than just being like, Oh, I'm an Enneagram. Seven, or I'm a highly sensitive person, or I haven't, you know, all these ways that we kind of came to the ADHD through these, like earlier, identities. Anyway. So if you could rename ADHD to something that's a little less confusing, what would you call it,

A

Anne Bartolucci 58:35

I would call it variable executive function syndrome. Because that covers the fact that some days, some days, we are completely on point. And we were able to get all of the things done. And some days we are depleted, and we cannot and that the gap between the two is larger

And some days we are depleted, and we cannot and that the gap between the two is larger than it is for the neurotypical people.



Katy Weber 59:01

Like that, and now as a psychologist, like, you know, because often I'll, you know, we'll talk about on this podcast, we'll talk about the term disorder, right? And it kind of falls sometimes. There's objection to the term disorder, because it doesn't, it feels like it's pathologizing it just a type of brain. And then there's also a lot of women who feel like we should keep the term disorder because it actually makes it seem, you know, it's easier to seek treatment, it's easier to seek accommodations when it's taken seriously in the medical field. So what's the difference between syndrome and disorder in terms of like the DSM, or just the medical field?



Anne Bartolucci 59:34

So I believe, and I'm not entirely sure, I think that disorder is a defined problem with symptoms, and outcomes and treatments, whereas syndrome is more nebulous and they tend to be diagnoses of exclusion, which a lot of times ADHD is a diagnosis of exclusion. We've ruled everything out. We still have this collection of symptoms. So it's a syndrome. So for example, the probably the most famous one, or the one that a lot of people are most familiar with is irritable bowel syndrome, where, you know, they're still trying to figure out where it comes from, why is it so? Variable in presentation? Why does it flare up? So I believe that you know, ADHD fits into that is well, then you can still seek treatments for syndrome, they still have their own diagnosis codes. I think it just acknowledges that we haven't figured it all out yet.



Katy Weber 1:00:28

Yeah, I really, I really like that. Because, you know, obviously, anyone who's listened to this podcast, like, that's the question I have all the time, which is like, what are we even talking about? Because it feels like this. Oftentimes, it's, you know, variable traits based on, you know, similarities in our brains but dissimilarities in our environment. And so it's interesting to me to sort of think about like, what's at the core of all of this, I need the answer, I need to figure out, you know, what is what is driving all of this? I don't know if I ever will. But it's fun. It's fun. Asking the questions. So I really liked that variable executive function syndrome. And it's also you know, a nice Google initialism too. Awesome. Okay. Well, thank you so much, Ana. It's been absolutely wonderful to kind of pick your brain and hear more about your own journey and all of your expertise. How can people find more of you and find you and also let us know how we can read some of your fiction too. Oh, absolutely.



Anne Bartolucci 1:01:27

So you can find all about better sleep for the overachiever at [overachiever?book.com](http://overachiever?book.com). And I believe the sign up for the newsletter where you would get that download for five sleep myths that might keep keeping you from sleeping is [overachiever.book.com](http://overachiever.book.com) forward slash newsletter? I tried to make it easy. Hopefully that is actually it. My brain is like I think so. But not boy Hello, ADHD moment. And if you're curious about my fiction, my fiction website is Cecilia Dominic, calm. That's si si ILIA [dominic.com](http://dominic.com). I didn't realize or I forgot when I chose that.

But Cecilia can have two spelling. So it's fun with the eye in the middle. And it's Steampunk is urban fantasy. I have one book that is just contemporary metafiction. That is rather hilarious, because it was one of my earliest efforts. And it was it really shows a lot of my frustration as a writer and trying to get published. That yes, I have three urban fantasy series two are in progress, one of them is completed, and one steampunk series that is completed and one that is in progress. And then if you're curious about my practice, you can find us at sleepy in the atl.com. So sleepy like I'm so sleepy in i n and then a lot of people refer to Atlanta as the ATL th e ATL. So that's what we are, we are sleeping in the atl.com. And we are licensed in Georgia, but two of us are sigh pack providers, which means that we can see patients in select other states as well.



Katy Weber 1:03:04

Awesome. Oh, well, that's so great. And yes, I will have I will I will double check the that link for the newsletter and make sure it's in the show notes. So yeah, all of this all of that you don't have to remember it, you could go and find all of those links in the show notes. So Well, thank you again, I'm so glad we finally were able to sit down and say, yeah, thank you for your expertise. It's been absolutely wonderful.



Anne Bartolucci 1:03:27

Well, thank you so much, Katie.



Katy Weber 1:03:33

And there you have 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 maybe have yet to discover and lean into this gift of neuro divergence 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 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