

AT: Welcome to the infinite women podcast. I'm your host Allison Tyra, and today I'm joined by Dr. Brandy Schillace, Editor in Chief of Medical Humanities for the British Medical Journal, to discuss women and autism and for context, both of us are autistic. And one of the big topics that we wanted to discuss was, why are women under-diagnosed with autism?

BS: There's so many reasons, but one of the biggest is that we, generally speaking, so I'm going to say what people say the reasons are, and then we're going to deconstruct that. People say the reasons are, well, it's because women, generally speaking, mask better than men. I was told this literally yesterday. And I think that that's an interesting thing to say, because why do women mask better than men? And I think one of the reasons is because, you know, women are frequently not diagnosed. And if you're not diagnosed, you're forced to learn behaviors, like masking, because you have to function in some way. And to give you an example, as a child, I was just frequently told to straighten up. Like, okay, you know, you just, I had the executive function. Full disclosure, I have autism, but I don't have any other co-occurrence diagnoses, which meant I had plenty of executive function. I was able to kind of like, pull it together. So I got told a lot, like, just stop being weird. I can't deal with that, right? Like, stop being weird, get it together. And so for instance, take stimming it's not that I don't stim, it's that I learned how to stim like, weirdly inwardly, and other, or I hide and do it, or it's after I have, like a weird tic in my forehead that I do instead, was there's all these other ways, because I could, because no one thought I was autistic. Now, if they'd known, I might have been permitted to do those behaviors, in which case, I wouldn't have had to mask them. So I think there's this interesting merry-go-round, women are under-diagnosed, therefore, we have to mask in order to function because no one's giving us the space not to mask because we're under-diagnosed. So the question, you know, why do women mask more? And why are they under diagnosed go hand in hand, I think. We mask and so we're under diagnosed, and we're under diagnosed, which is why we learned to mask it.

AT: And I think the reason that we're I don't know that we're better at masking, I think it's that society requires us to be better at masking, I don't think it's an innate characteristic.

BS: Women are required to, to fill in the gaps anywhere. So I remember even things you learned in childhood, things you absorb without even knowing that you're learning them, right. Dad's have a bad day. So you know, mom and daughter, and you, we're going to make sure that they're taken care of. Or even something as simple, and I've heard this from many other women that I know, where it's like, well let the boys have the biggest share of whatever meal we're having. Because, because they're the boys, I guess, right? Like, there's all of this, there's all these ways in which you make sure they're taken care of first. So of course, your needs come, this concept that somehow your needs come second, you're less important, you should, you know, simmer down, don't stick your head above the line, this concept that you're the one who changes to fit the situation. And this, this is all about when people say the whole she was asking for it, right? She should have changed her dress code to fit the situation she was in. There's always the assumption that the woman will change to fit the situation. So yeah, it's not really that different when you think about it. You're just, you're expecting the woman to change those behaviors to fit into society, whether it's autism or something else.

AT: Yeah, and this caretaking aspect reminds me of, I forget where the study was from, but it found that women were a lot more likely to die from heart attacks for a couple of reasons. One of them was that they were less likely to seek medical attention urgently because they had to be taking care of everyone else in their life. So they put their own health secondary and it literally killed them. But also, and I think this ties back to the issue at hand, women weren't studied in terms of, what do heart attacks look like. And so for many years, we only had this set of symptoms that primarily men experienced. So when women were experiencing say lower back pain, they didn't realize that that's a sign of a heart attack because women hadn't been studied and this is a much bigger issue, obviously across any health issues, as far as I'm aware is women aren't included in the studies and that obviously extends to autism. Because even dating back to like 1943, the first study of 11 kids, only

three of them were girls. And, you know, Asperger had many issues going on. I think we can agree on that. But he explicitly said girls can't be autistic. So there has been this exclusion.

BS: Yeah, he's...

AT: He's very problematic.

BS: \*cough\* Nazi \*cough\*

AT: Oh no, say it - he was a Nazi.

BS: Yeah, total Nazi. But right. So a little background about me, I'm a medical humanities person, I'm the editor of the Journal of Medical Humanities for the British Medical Association, and et cetera. Like I do a lot of things with medicine. One of the things that I study a lot of is pain, pain and chronic pain, I have chronic pain, I suffer chronic pain. Women's pain tolerance is very high, because women's pain isn't taken seriously. So you've seen the, I mean, it's very funny when they play the TikTok videos of guys being shocked to try and experience what period cramps are like, and they're losing their mind. So I remember, my grandmother, or my mom or whatever, having pneumonia, and still taking care of everybody else. Because you're just used to the fact that you just deal with all of this pain and all of this additional burdens. And I'm not trying to make women seem like they're super beings. But there, there's just this cultural expectation that you will put up with it. And I'll give it a non-gendered but rather racial example. There was a period of time in our very sad and sordid history of the United States, where they just thought black slave women didn't suffer pregnancy pains. They're like, well, they just don't have those, you know, they just don't have pain. So they did not treat them as though they were suffering pain when they went through childbirth. And therefore, the response was, the women just behaved stoically. It's a feedback loop, right? Like, there's no point, no one's gonna pay attention to me, I'll get treated worse if I react as though I'm in pain. So you, you bear up, you become this stoic thing. So once again, expectations placed on a demographic cause people to rise up and meet that demographic. And so I think the more expectations are placed on women or on a particular racial demographic, to be a certain way, there's a real pressure and there's a feedback loop because you're both punished for not meeting that, and also rewarded for meeting it.

AT: And I think it's very telling that in both of these cases, we're talking about oppressed people. So people who do not have the power to fight back and say, "No, you need to take this seriously. I can stand up for myself," because, I mean, you see examples like J. Marion Sims, the suppose that father of gynecology, yes. For anyone who can't see this, which is everyone, she just shuddered and that is the correct response. Because this man experimented on slave women, operated on them without, obviously they couldn't say no, so there was no consent. But there was also no anesthesia. And it was absolutely horrific. Like he was doing gynecological surgery on these women and they were fully conscious. And they were also forced to assist with each other surgery, like it is absolutely horrific.

BS: These were fistula surgeries that he was practicing. So for any of the listeners who aren't familiar, a fistula is a bad thing it is. It's where you have, often it happens when women give birth too young and that's of course going to happen if you're a slave girl, probably. And it's a hole that happens between the vaginal wall and the rectal ball. That's a very thin area of tissue. And so that's a real problem that needed to be fixed, sewn up, et cetera. And so you know what, people try to let him off the hook because they're like, Oh, the slavery was probably had fistulas. And so he's fixing them. See, he was doing them a favor. We have records and I'm gonna get the number wrong. I used to work in a medical history museum and we had the tools that were used by J. Marion Sims, some of the tools there. So I'm gonna get this number wrong, but I'm in the ballpark. He performed something like 27 surgeries on just one of the women. So we're talking 27 vaginal surgeries, you

know not all of those were necessary. So these are these are like practice surgeries performed on someone's body. And so, it's astonishing to me how many people are still willing to kind of brush things under the rug and be like, Wow, but it's for the greater good. You know, and Asperger gets that treatment too, incidentally when we're talking about autism, but like, well, maybe what he did good things, too. I feel like we have real problems, when we try to slice our ethics up that way, you know?

AT: Yeah, and even the term Asperger's, there's a fair bit of debate, because I feel like a lot of people grew up with that term. And so it's what they're familiar with. And so they sort of cling to it because of that. But then when you actually look at it, not only is it very ablest to essentially say, these are the autistic people, worth allowing to live, because that's what he was doing. He was saying, these are the ones that we should not chuck into the Holocaust. That is the basis of Asperger's. That is what he was doing. So not only is that extremely ablest in and of itself. But yeah, he was a literal Nazi. So I think we should stop using that term, radical suggestion.

BS: It is interesting, and I grew up with, this is one reason why, I'm a late diagnosis, I'm an adult diagnosis. Because, for a lot of reasons, because I'm 45, as well. And so I just fall into that time period, where it was still not very well known, and where girls were still not, largely largely not being diagnosed. I mean, we're, there's still not enough actual women being diagnosed. But I was living at a time when almost nobody was, if they were if they were assigned female at birth. And so I, I feel like some of it was because of these arbitrary designations, they're like, oh, high-functioning, which again, is an ableist her. Well, this is you have just autism a little, and they have autism a lot, and that's incorrect. That's simply not true. You can have autism and something else. You can have autism and ADHD, you can have autism and anxiety and depression, you can have autism and bipolar disorder, you can have autism and lots of things. But there's not this, this concept of high functioning, that does come from Asperger because he was basically saying, this is a person we can use in society, therefore they can live. This is a person who has "low function", therefore, they are, they should not live. And you still have people, this is still a debate that's happening, for instance, when it comes to people with Down Syndrome and ideas about, I want to call it designer babies, right? They're like, what to do in utero in these situations, and whether or not we ought to fix chromosomal mutations, and et cetera, et cetera. And like, I wouldn't want to be fixed out of being myself. I'm perfectly happy being autistic self that I am, despite all the problems that it occasionally brings up. So it's, terminology is, it's tricky, and it's sticky, as well as being tricky which rhymes. And I like rhymes. But I think that the reason people don't want to give up Asperger's, it makes sense to me, and I understand it. And I think particularly as autistic people we're like, No, that one works for me. And I don't want to tear it away from people. But at the same time, I think words are sometimes our life rafts, and sometimes they're anchors around our feet. And so it's difficult, but sometimes it is a necessary thing.

AT: And I would imagine another barrier to official diagnosis, because I know when my husband went through the process in his 30s, here in Australia, you know, we're very fortunate to have healthcare. But it was still, you know, quite expensive, quite time-consuming. You know, you really need to be in a major city to see the appropriate specialists. And I would imagine that's a huge barrier somewhere like the US, which, having lived there for most of my life, I can tell you does not have all the tasty, tasty health care. I mean, I haven't officially been diagnosed because I saw how extensive that process was. And it was just like, there's no point for me, because, there's no reason. Like, I know I have it, but there's no supports out there that I would be eligible for, because I'm "not autistic enough." That was in quote marks, that was sarcastic. But is that is that an issue for women? Or is that just an issue for everyone who might be considering seeking a diagnosis?

BS: So I think it's an issue for everyone seeking a diagnosis. I think the issues differ, however, for a couple of reasons. I also do not have what you call an official medical diagnosis, but this is, so I'm going to try not to go on too bad of a tangent here. But I also don't have an official diagnosis for my connective tissue disorder. So I

suffer from, so trust me when I tell you, I do have Ehlers Danlos. But I don't have a diagnosis for it because I have, you have to have like, eight of 10 criteria. And I have like seven of 10 criteria, so I don't have enough. So I have all the things, so I asked, I'm basically, I ain't broke, but I ain't fixed. And some of that is because I've maintained myself very healthily, like I work out all the time and exercise. And so I was telling the doctor, I was like, you realize that I'm basically being penalized for being good at taking care of my body, because I'm in such good shape, you're not giving me a diagnosis for something like if I was in worse shape, you'd be like, yeah, definitely, you got a problem. So can you look me in the eye and say, I don't have a connective tissue. She's like, Oh, no, there's something wrong with your connective tissue. And I was like, but you can't give me a diagnosis. So I'm a little skeptical of this whole requirement of diagnosis, anyway, because it is so frequently, especially in the United States, tied to what we can and can't spend money on or for. So, self-diagnosis is really well accepted in the autism community, because it's very difficult to diagnose adults anyway. The tests are not developed for that, which is a failing of the system, not of autistic people. But secondly, I have a friend who is a man and his child was diagnosed with autism. And his wife was like, you know, I think it's time you maybe had a little checkup yourself. So he first went to go get sort of this looked at, and the person looked at him and said, Can you hold down a job and relationships? And he was like, yes. She's like, so why are you getting tested? Like as though it wasn't important for a man... Like, you know, if you're a successful man, you're married, you have kids, why do you care? was kind of the question. I thought, that's probably not the question they would have asked a woman. I feel, maybe I'm wrong. I feel like it'd been a different question. But it was like, almost like you're white, you're a guy, you're winning. Why do you need to know? So I do think there's still a kind of resistance, whether you're male or female, there's kind of a, why do you care? Why do you want to know? You're winning. So it's interesting. For me, it mattered a lot to have to understand myself as autistic was a big deal, was it for you?

AT So after my husband got diagnosed, he went and got a graduate certificate in autism, not autistic studies, or anything, just autism. And after a little while, he just sort of looked at me and was like, you might want to take some of these self diagnostic, like quizzes, like it's not like a Buzzfeed quiz. But it's a properly developed, you know, you have certain presentations that align with autism. And, yeah, I got the results like, oh, yeah, that makes sense. And I find this really interesting because there is a genetic component. So your friend's story is not uncommon. I've heard so many people say, you know, my kid was diagnosed, and then things started clicking for me. And in my case, it was my husband, because it seems like autistic people also tend to gravitate towards each other. Yeah, we tend to be drawn to each other just because we're compatible types of weird, so to speak.

BS: Yeah. I run a book club called the Peculiar Book Club, which is a twice monthly show. And I just threw it out there one day, I was like, I'm autistic. Right, show of hands? I was like, Oh, okay. Yeah, you're my people, I see. So yeah, sometimes we send up solar flares, kind of, and people are like, go, there it is. For me, personally, I just displayed many of the things from a small child up, but my mom was kind of not willing. Like, there was a real stigma. And so she didn't really want to have me tested. So it was kind of like a known secret, or an open secret, I guess that I was not quite okay, in some ways. Like I didn't, I couldn't stand to be touched or held as a baby. I couldn't, I'm hyperlexia. So I learned to talk very early. I'm hyperlexic now, I have almost a photographic memory. There's other little things like that. My complete lack of social skills until I find, like I've learned really well, but I totally have like a library of things where I'm like, Okay, this is where we make this face, you know, so that I function. And so I knew, but without knowing knowing, but when I finally embraced it, when I finally realized there was nothing wrong with it, I began to stop masking and then my life got so much better. However, I did find a lot of people being like, why are you being this way now? And I was like, Oh, honey, like this is the way I've always been, but just, I've like totally buttoned it up around you, you know, because I didn't want to chase people away. But what I found out is the people who I chased away were probably not really worth keeping around anyway. And so it's been, I have felt so much freer and less exhausted. And I've learned that I can just be like, it's actually really great because now I don't have to explain

things quite as hard as I used to. I'll be like, I just can't watch that show. Like, I'm really triggered by super emotional TV or TV in general. And I just can't do it. And people used to just be like, Well, why? Well, why? And now I just get to put my autism button on and be like, cuz this. So, right, here's the button. I think that it has been really, really awesome. And it has led to a lot of self exploration and self forgiveness and expansiveness. And that's, for me, that's why I'm so upset that women are under-diagnosed, because I think it is another way of keeping them down. Right? Like, it's another way of shrinking their possibilities.

AT: I don't know how much of this I may be projecting here. Because I understand that you live in Ohio. Is that correct?

BS: I do.

AT: So I grew up in Indiana, just next door. And you mentioned your mom, not wanting the stigma of a diagnosis. And I remember feeling very much like growing up in Indiana, it was, we're gonna pretend everything's okay. And ignore anything that's not, because if we just pretend that's basically the same as things actually being okay, which of course, is crap.

BS: That's just the Midwestern ethic right there. That's, that's pure American Midwest. That's how they do it there.

AT: So I'm not sure how much of this is you know, a regional cultural thing. But I do take heart that, I don't know how things are going in Indiana right now, because I left. But you know, the fact that we are seeing so many kids getting diagnosed, and then the parents are figuring it out from that. You know, I am taking heart that things are hopefully getting better, in that regard.

BS: My mom is not autistic, but what she has sort of discovered, which I had suspected too actually. She's like, now that she realizes I'm autistic, she's like, that explains so much about my mom, that her own mother, because my grandmother, it just, I just don't like to be touched. It's just a thing, you know, and my grandmother never hugged her kids, and my mom, so she was adamant about going to hug us as kids. And I was like, oh my god, no. And she was like, what? You can see how that might affect you, as a person, like, your mom doesn't want to hug you, your kid doesn't want to hug. Now, my brother's very cuddly. So she got lots of hugs there. But it is kind of interesting how, you know, not knowing, I could see how that could play on you, on a neurotypical person whose's surrounded by other people going, what is happening? So, you know, it's just as difficult, I think communication is so helped by having just an open understanding that, I mean, a lot more people than we normally recognize, are probably neuro-atypical in some fashion, which means the word is probably wrong. Like, if 50% of the population is neuro-atypical, that it just means we're, there's differences. But I do think that I do think things are getting better for diagnosis, I do think things are definitely better re: stigma. Because I was told, I mean, when I was getting a job, I hate to, I don't think of 45 as being all that old. But when I think about the fact that when I was first looking for jobs, it's over 20 years ago. I was also told not to tell people that I had epileptic seizures, and not to tell people, like there's so many things that I was supposed to not tell people about.

AT: And I feel like that's even more broadly, like I was told, don't wear pants and flats, to job interviews. And I feel like those requirements are a lot stricter for women in general, of how you're meant to present yourself as professional. And, you know, obviously, this isn't just women, you get a lot of stories about, say, African Americans who are told that they can't wear their hair in a certain way, because that's inherently unprofessional. And so I think we're getting coming back to this, you know, marginalized groups being held to higher standards, regardless of what group you're actually a part of.

BS: Yeah, well, I wrote an article in Scientific American called Coming Out Autistic and I was talking about the fact that, the problem is, when you're a minority group, the other side always act like they're meeting you halfway, without realizing that like they've made it about 50 feet, and you've walked 500 miles to be here. And they don't see that inequality, they're blind to that inequality. And that's the power of privilege, right? Privilege allows you to not see all the other hurdles the other person has had to overcome. So, you get people actually annoyed, I mean, honestly annoyed with you thinking, Well, why can't you just come to the party with me? I'm like, because I'd rather die. Like, not an answer that they want to hear. And so then you find yourself modulating like, I am so much more aware, it was just funny, because I think autistic people get so much crap for not being empathetic or sympathetic. And then, of course, also, because women are supposed to be so sympathetic and empathetic, which there's just so many feelings all the time, that if you don't display enough of them, people think you're just terribly deficient. But I'm constantly thinking about what I'm saying might affect the other person, and they are not thinking about that about me. They're not thinking about how, saying that I've wounded them, because I didn't want to go to some social party bender with them, when I'm completely like, worn out from a week of doing whatever, it's like, they don't think that, not taking my feelings into account. So I realized that autistic people in general, male, female, or otherwise, end up doing a lot of emotional labor on behalf of other people to make them feel comfortable, then you add to that the fact that women are expected to already be doing a bunch of emotional labor to make other people feel comfortable, then that means if you're an autistic woman, like you're not gonna have a good day, like ever.

AT: When it comes to autistic empathy, I actually, in my experience, I find that autistic folks are much more empathetic, which sounds like matches your experiences.

BS: Yeah, I'm just gonna nod emphatically at an audio podcast.

AT: But I'm very fortunate now to work for an autistic nonprofit that is staffed and led by other autistic people. And it has been so eye opening, because I just sort of thought that all workplaces were toxic. And realizing that there are places that aren't like, that has been such a relief.

BS: Yeah, I work for myself, and my boss is really demanding. No, it's true. I am a boss, I'm an editor for a journal, and I have people under me, and I've had several of them be like, you're so understanding. And I was like, you know, I think I'm doing the bare minimum. But I just feel like, I'm honestly trying to put myself in your shoes, because I've spent my life making a study of human nature trying to figure out how one functions on this planet. So some of it, I think you become empathetic as a means of survival. You're trying to understand the people around you and communicate with them. And you I really want to. That doesn't mean that there aren't autistic assholes.

AT: Oh yeah.

BS: I mean, there's Elon Musk.

AT: Oh, no, I'm not claiming him.

BS: Yeah, no, he's definitely more asshole than autistic. But, but I think on the whole, we want to be understood and to understand and therefore, I think what gets mistaken, is I have lots of empathy. It's my articulation of that empathy is not always understood. Because here's what I do wrong, I try to treat other people the way I'd want to be treated. But I largely want to be left alone. You know what I mean, though, it's like, I'll think of someone and be like, Oh, I'm, I'm really worried about them. And so I'll like, send them a heart emoji because it doesn't occur to me to call them or something. Or turn up unannounced, for God's sake. But it's like my way of showing care, I'll do things for people. I'll run an errand for them. I'll think about whether or

not you know, gosh, I wonder if they've eaten dinner. I should maybe send some food over like, I'm thinking about them. But my interactions are often frequently nonverbal, despite the fact that I'm an author and words should be my thing. Often not face-to-face. You know, it's it's a very different kind of thing and almost never physical like, I'm not a hugger, for obvious reasons. I had a friend who used to always touch you when she talked to you. And I was like, wow, like stop. That was her method of like reaching out and kind of letting you know that she was paying attention to you. And I was just like, that's, no. So you have this empathy. And it's the ability to help people see that you have it is what I think I struggle with the most.

AT: Yeah, and it sounds like what you're describing is incompatible love languages where, you express affection and caring by doing things, but not doing the things that other people's love languages require. So you're just not speaking the same languages necessarily. And I wonder if, because I feel like a lot of the autistic folks I've met, were very much, let's do the thing. Let's find practical solutions, let's do things. And I think that may be a little off-putting to some non autistic folks. Because it's just, I'm gonna feed you because that's what you need. And that might also be a Midwestern thing, though.

BS: Well, yeah, it's funny because the beginning of the healing of my relationship with my mom over the autism thing actually, stems from my dad had a heart attack this, and he survived, thank goodness, it was pretty bad. And so this is during COVID. So I dropped everything. And my parents live in the middle of nowhere. And so I drove down to my parents' house, and I was basically, I was driving my mom to and from the hospital, but I'm not allowed in the hospital, because it's COVID. So I'm driving her, it's like an hour away to the hospital. And then I'm dropping her off, and I'm living in my car. And then I'm driving her back to her cottage at night, getting a couple of hours sleep, getting up the next morning and doing it again. And I'm like taking care of everything in between. And I'm not really a shoulder to cry on in the normal sense of the thing, right? But then, when my brother came to relieve me, so we took turns, my brother came down to relieve me, that's when my mom got to, like, have the good cry, because I don't, you can have a good cry. I'm just not very effective. I'll bring you tissues for it, though. You know, I'll be like, Hey, you probably need these and we'll hydrate you, you look like you might be dehydrated. So it's really funny that you say that because you're right, we're like, what does your body need right now. But my mother sort of made this realization that I was there. You know, my there-ness is very, you can count on that. So during all of this, one of my autistic friends was like, what do you need? I was like, when I get home, I need gluten-free scones to be at my door. And they're like, on it! You know? And they were there, I got home and there were scones. So you're right. It's because I don't dwell in the feelings. I have feelings. But I tend not to like, dwell, they don't, I don't live in them. You know, they happen. And then, you know, I tried to like bury them and we move on. But I think for my mom, she really, for her that big emotional outburst is something she really needs and and has to kind of live through. And to do that well, I think people need someone who can kind of speak that language too. And I don't I don't speak that language well, so finding out, I think getting better at articulating people what I am good at and what I'm not, it's been very important. But you can't do that, again, without a diagnosis. If you don't know yourself, you don't know what to tell people. So now I'm very good. I'll be like, Hey, I am so sorry that this happened. I'm here for you. And here's what I can provide. But if you need this, I'm gonna I'm gonna tag out and I'm gonna send in reinforcements. And I have done that. And I find that that's actually the appropriate, that's right. You know, just to let people know what your limitations are, there's nothing wrong with that.

AT: And I do enjoy talking through whether it's my problems or someone else's problem, I am very much like, hey, let's have a chat about this. And I am a hugger. I am you know, more traditionally love language-y, I guess. But, you know, my husband's like you were he's not super big on on the touching. And so we sort of had to navigate how does that work for us? But that's one of those times when I feel like being autistic is frickin' amazing because it was, no we're gonna sit down and have an honest conversation without all of this pretense so we're actually going to make progress and be able to move forward. And you know, it's like you were saying with like your hyperlexia, learning to speak earlier than the average kid. And there are so many things like the

way my husband's brain works, I'm just like, this is a superpower, right? Like the the neuro-affirming view of autism, I absolutely love because I feel like so much of what we get is, you know, medicalized, this is a disorder, they even frickin' call it Autism Spectrum Disorder. As opposed to just autism. It's shorter. We don't need an acronym. It's fine. But yeah, just that looking at the strengths. It's so nice to have that perspective. And I feel like we don't get that perspective enough in the mainstream. And that's why, your mom being concerned about the stigma, if we took a more neuro-affirming approach, broadly, there wouldn't be stigma.

BS: Right, and like I said, I'm not sorry that I am me. There are times when it's when I have frustrations, right. And there's things I am and am not good at. And honestly, there's enough overlap with like, I'm also deeply introverted. Not all autistic people are introverts, I just happen to also be introverted. So you've also got overlaps. You know, my nephew has generalized anxiety disorder. And I've discovered there's a lot of overlap between being an autistic introvert and generalized anxiety disorder, too. So, I read somewhere, like "normal as a setting on a dryer." Like, there's nobody who is actually meeting this bizarre standard that like, the DSM-5 has cooked up somewhere of like, what normalcy is. So I think that we all have something to give and to gain from sharing all these perspectives. The problem is that years of stigma have kept us from actually talking about what we're really like. So I would pretend to be a certain way for a long time, instead of being, actually it's like this. And those real conversations, our navigations as as you put it. I'm also married. And we also had to navigate, I am married to someone who is literally like a sticky cuddlebug person. And there's times when touching, I'm good at it. But you have to know when it's okay. And that navigation is so key, you cannot do that without communication. But when you've taught somebody to hide the best aspects of themselves for most of their lives, or they don't even know what they are because they've masked so long that they are the mask, that happens a lot too, you rob people of their of the best, sometimes the best, most honest selves they can be.

AT: But yeah, communication is another one of those areas where I feel I'm a very straightforward, clear, honest person. If I have an issue, I will tell you, and I will tell you as clearly as possible, including, you know why this bothers me. And I feel like that's where I've gotten in a lot of trouble in situations where like, I've experienced workplace bullying, for example, because I'm just trying to be honest, and actually solve the problem. Because I'm autistic. That's how my brain works. And it's not well received.

BS: Workplace nuance is something I'm not very great at. So I worked in an office one time and one of the other people there thought I was trying to steal her job for some reason. And she tells me this, and my response was, why would I ever want *your* job? And then she was mad at me for that, and I was like, you can't have it both ways. You can't be mad that I want your job and then mad that I don't want it. Yeah, so that didn't go well. She actually cried. And then I was like, Okay, I don't understand what's happening. I do not, I am not well equipped to deal with this. So, there's times when I have stumbled like, badly. Learning that I'm not singling you out is a better way of saying something, then you're not special. Like learning that words, you have to choose the right ones, especially if you're talking to your mother-in-law, for instance. Like, I've walked right into some real cow pies over the years. But communication can be fun if you feel like you can be honest. And if the person who's willing to learn you too, obviously is, I don't think my coworker was interested in learning me.

AT: Yeah, I think that's, that's often what it comes down to is. Yeah, I don't think this is a Midwest thing, because I've definitely experienced it here in Australia, but the "we don't want to acknowledge and address problems. So we're just going to pretend that you are the problem, because that's easier than actually getting to the root of what's going on." So you're the problem for complaining about it. And we're going to ignore that your complaint is valid. So I feel like there's a bit of gaslighting.

BS: And that is going to happen I think, I mean to bring this back around to women, that is also gonna be something that afflicts women more than it afflicts men and then afflict minority women more than it's going to



afflict majority. So, I always think about this as, I know I've seen it done before, where they have people lined up and basically, they list certain characteristics. And you get to move ahead with certain characteristics. And it's like, if you're a woman, but then if you're a black woman, but then if you're a black woman with a disability, and it just keeps moving along. If you're black and gay and have a disability, all these different things. And it's just the world is not an especially kind or equitable place anyway. And I think our goal should be to lift not just each other out, but anyone else who's who we can along the way. So, I fight a lot for trans rights, and I do a lot of work with other social justice things, a lot of work with disability rights and things like that. I have deep empathy for other autistic people who I think are just sitting in a corner somewhere going, I will just not talk to anyone and it will be fine. And they wonder why we tend not to reach out - it's like, a few reasons.

AT: But it's also because, especially if you haven't been diagnosed, you have been told through most of your life that you are wrong, that you are doing life and person wrong. And so that becomes your default assumption. You internalize that I must be doing something wrong. Am I doing something wrong? And that's why so many of us have anxiety and depression.

BS: I'm pretty unsinkable. I am. I have been variously described as a truck, a train and a bulldog in a wind tunnel. I am a presence, a force to be reckoned with, a force of nature - there's a lot of metaphors. But my one main weakness is I can be easily gaslight into thinking I have gotten it wrong, that kind of idea. And it's crazy, because I'll know I'm right, but all it takes is more than one person to go, but do you? And at one of my jobs, there were just two people who would play off that and I was constantly feeling undermined by that, even though I knew. You think I would know better but you can't spend a lifetime of thinking you've got it wrong, you've misinterpreted the situation, right? I'm very very vulnerable to that and I'm getting better. I try to take spot checks, right, like okay, well then I need to get some some fresh viewpoints on this situation. But regardless of being very smart and together and having lots of other big personality things going for me, it's surprising how often I can be undermined exactly that way.

AT: And the fact that a lot of us do tend to be very productive, get stuff done, we do tend to be quite smart, obviously, #notallAutistics but a lot of us do show show these traits. And apparently that actually makes us more vulnerable to being bullied because people like taking down the smart kid. They like taking down the person who is maybe showing them up at work, whether or not you know, we're we're not trying necessarily to do that, but we're just being our competent selves. And including managers, like coworkers and managers have both shown that they are more likely to bully those hyper-competent, very productive people. Which is just so maddening.

BS: I was told, I forget exactly how this person put it, I'm gonna I'm gonna butcher how they said it, but they're not here. So it was like lion syndrome, that like I'm this alpha lion. I walk into the room and it's like, "ta-da, she's there! She owns the room, she's bigger than the room but she doesn't care about the room, doesn't need the room." What they don't realize is it's just me disassociating so I don't die of social interaction. And so this dissociation ends up looking like this powerplay when it's not. So I think sometimes too, you have somebody walk in and they just look aloof and like they're into it, when really they're just sitting there going like "don't make eye contact. Someone will talk to you." Without realizing. Like that's, that's honestly, so funny when people will say like who've known me in adulthood that knew me as a child will be like, Oh, you were so aloof in school. But you can see where that comes from. So yeah, I do think that we get misunderstood a lot of times when we're just trying to cope.

AT: Yeah, I also describe us as, again, in general, we are not people people, but we are person people. Like, I am very much enjoying this conversation that we're having right now. But drop me in a party full of people, especially people I don't know. And I will go find the nearest cat and just hang out in the corner. I will be in the laundry room at a house party hanging out with the cat, because that's where I'm most comfortable.

BS: I've been in those laundry rooms myself.

AT: But you get us with one or two people that we click with, and often another autistic person, and you know, we can just talk for hours. I'm not going to keep you on for hours. But you know what I mean? We're not people people. We're person people.

BS: You know, what is interesting about that? You're absolutely right. However, I'm also a performer, which is a weird thing to be when you're an introvert. I don't know how this happens. But I understand there's actors like this, too. So I'm a performer. I have a show, I host a show. I've been on TV. I've acted, I've done all this stuff. So when I am on stage, so if there's a big group of people, I perform, and I'm fine. And so then I fool people, because they're like, Wow, she's great fun at parties. No. I'm great fun as an entertainer at a party where I'm doing my thing, you know? So sometimes this backfires in very strange ways. Like if there is no laundry room and no cat, I kind of panic and I go into performance mode, which not too long ago, I gave in. I shouldn't have done this, but I went to a social function with my spouse. And it's a bunch of engineers, which also are not always the most neurotypical people. But it was a bunch of engineers. And it was a party at this bar place. And I was there and I was doing okay for a minute. But there was no escape. Like, there was no place to go and hide. And all of a sudden, I found myself at this table, and I'm surrounded by people. And they were like, oh, you're Brandy Schillace, and I just looked at that, I was like, Do you guys like dinosaurs? And I just launched into like, a discussion of dinosaur cloacas. I was like, they use that hole for everything. Let me tell you how. And I owned the room, but also told them a lot of bizarre medical and like weird facts. And Mark was like, wow, you talked them for a long time. I was like, don't ask them about that. Like, maybe don't talk to them for a while about anything that happened there. I panicked. So yeah, so you're right. I'm not a people person. But when I am in front of people, I'm really good. As long as I can entertain.

AT: Well, that's just it, because my, I keep mentioning my husband, but he is an actor and an opera singer. But I think a lot of that is, well, in your case, you were talking about what I assume is a special interest. And, you know, we love talking about a special interest.

BS: I have a lot of them. I've got loads of special interests. I've worked in medical history, I can tell you about cloning. I wish there was a game show where they would like throw up there and just be like, elephants, crocodiles, go, and you just built a story out of that. Anyway, carry on?

AT: Oh, no, I was just gonna say, obviously, that's a special interest. But there's also in terms of performing on stage or public speaking, there is a script. You know exactly what you need to do. You've been given all of the structure to do this. And I think that's probably very reassuring for a lot of autistic folks, because we do like structure. And it's not something where you have to navigate it, because you've already worked this out. You've practiced it before you went up there. And it's taken all of that sort of heavy lifting. I describe it as manual versus automatic, when we're talking about like interpreting someone else's facial expressions and things like that. What a neurotypical brain does on automatic, a lot of us have to do manually, but I feel like scripted performance takes that out of the equation.

BS: Most of my deliveries are unscripted, actually, but that's not fair for me to say because I have a photographic memory. So they're unscripted in the sense that I'm not reading, I haven't practiced it. I'm not reading off of anything. It's impromptu, but it's a scripted situation, I'm in control. I determine when it begins, where the middle is at, where it ends, I tell people what to do, they're going to do it. Like I get audience participation, right, I run the room. And even though I'm on stage, I'm not weirdly enough, the focus, I'm always redirecting the energy of the room. And I think that that in itself is a kind of, it's like I'm behind the camera, even if I'm in front of it. And I think that that's a way of gaining that script, even if it's not actually scripted in the

traditional sense. So I think that's part of it. That helps a great deal. But when it comes to individual interactions, yeah, like, I can't. cocktail parties are not my, not my forte. I don't do well with those.

AT: That should be like the number one question on the diagnostics.

BS: The question should be, when you were at a cocktail party, how many cats are there? If your answer's "I don't know. Not autistic." "Maybe one." "There were three. Their names were..." and then you know.

AT: Yeah, my husband, when he was getting his diagnosis, there was a questionnaire that someone close to him had to fill out. And I was the natural choice. And there were questions like, you know, does he seem comfortable at parties? Yes, no. And I'd be like, yes, but with an asterisk, where I then wrote at the bottom, but I know he's faking it. Like I was adding addendums. And apparently, he took this back and the medical professional was like, Does your wife like spreadsheets by any chance? And I feel like that person knew and just didn't tell us. I do love spreadsheets.

BS: So Eric Garcia is a friend of mine, Eric Garcia, wrote We're Not Broken, which is about autism. And he is autistic. And he was the one who finally convinced me it was time to come out of my autism closet and basically just be out there with it. So he's like my autism midwife, I guess. He helped me give birth to my public autism. And he's been great because it was it was through him really that I realized what interesting autism radar we all have. Because it's so much easier to tell someone when you are, you kind of just go, "yeah, I get you. I get you. Oh, that that's probably not good news for you if I get you."

AT: No, it is good news. Because if I get you then you will learn something about yourself.

BS: That's true. That's true. That's true.

AT: Join us next time on the Infinite Women podcast and remember, well-behaved women rarely make history.