I am going to cheat today and read from a script, and that is because I am really not feeling well, so I decided to make this easy for myself. It’s frustrating when you suffer from chronic mental illness and you can’t step outside of the illness in order to talk about it. But I guess that’s the nature of the beast.

So, my name is Nomi, and I have Asperger Syndrome. Unfortunately I also have high anxiety, chronic pain, insomnia, and a particularly virulent case of Bipolar Disorder that I developed as a teenager.

Now, what all of my illnesses have in common is that they are all triggered by stress. And my life begins and ends with stress. I was not diagnosed with Asperger’s until around my 21st birthday, so I grew up in a mainstream school environment with no extra supports, and with lots and lots and lots of stress.

Now, it’s important to distinguish between external stressors and my subjective experience of stress. I grew up in Brookline, attended the Brookline public schools, was financially secure, and went on vacation every summer. From the outside my life looked pretty good, but on the inside there was nothing but stress.

I sometimes say that the stressors in my life include sensory, motor, spatial, social, communication, cognitive, executive functioning, and emotional stress. Obviously I don’t have time to go through all of these, so I’ll give you a few examples to illustrate.

My earliest memories are of sensory overload. Children talking and yelling and crying. I couldn’t process what was being said to me in that environment. There were crowded cafeterias, packed assembly halls, and gym class with flying balls that I couldn’t keep up with. I got hit in the head! The world was too loud, too close, too fast. I still struggle with this, especially loud noises. (Not as many flying balls now.)

I also was, and still am, very sensitive to other people’s emotions. I used to cry when teachers yelled at my classmates, even though I was a “good girl” and never got yelled at. One time a first grade classmate was crying about something. She got over it, but I had to go out in the hall because I was sobbing inconsolably. (It’s common for girls and women on the spectrum to be very sensitive to emotion and conflict.)

And, of course, like everyone with Asperger’s, I had a lot of social stressors. There was some bullying, but there was also that insidious form of exclusion -- people talking behind my back, getting picked last, generally being in the “out group.” I remember two boys who kept knocking over my block tower in preschool, and I kept rebuilding it, over and over, clearly oblivious to this social dynamic. Then there was the neighbor who invited me over to play only to ignore me as she played with her preferred friends. The girls who whispered and rolled their eyes when I spoke.

I remember in junior high school a girl invited me to be a part of her exclusive club. She said it was the “PEN 15” club. Think about that for a minute. She wrote the word on my hand to indicate my membership in this club. I was so happy to be included with the “cool girls” that I eagerly accepted. Later I remember burning with shame when I looked down and realized what was written on my hand.

Going through life on the outside, without a close friend, was one of my greatest sources of stress, and sometimes even a source of self-hatred.

Then there was academic stress. See, one thing the the kids sometimes called me was “stupid” or “retard.” I was desperate to prove that I was not. I told myself I would get straight A’s. If I couldn’t get ahead socially or athletically, at least I could excel academically. And I did -- but it meant studying all afternoon, and all evening, and all weekend, at the expense of self-care, and relaxation, and sleep. This is because I had to compensate for poor executive functioning and an inefficient learning style. The Brookline school system is tough. But I needed to prove myself to the world. I needed to prove I was not a “retard.”

Another source of stress that I have struggled with my entire life is a strong tendency to catastrophize and ruminate about past failures. I don’t know how to let go.

Fast forward to age 21. I have been diagnosed with Bipolar Disorder -- following a series of traumatic hospitalizations and misdiagnoses, from personality disorders to schizo-affective disorder, and more. I am severely depressed and also profoundly isolated because I feel too awful to finish college or work. I am aimless and floundering.

My therapist suspects there is something else going on with me, besides Bipolar. She and my mother arrange for some neuropsych testing, and I am diagnosed with Asperger’s. On the spot. I am stunned. I have never even heard of Asperger’s.

I joined AANE almost immediately after my diagnosis and entered a weekly support group, which I still attend, 15 years later. AANE helped me overcome the shock and stigma of having a form of autism. They helped me identify my strengths and embrace all of who I am.

I can say that the AANE community -- including staff and other adults with Asperger’s -- have been my greatest support in coping with my Asperger’s and mental illness. They understand how I think. (Most people do not.) Without AANE, I would have no friends and no community. Only my parents and mental health providers. I would be leading an incredibly lonely life.

In terms of what else has been helpful:

Talk therapy has been a mixed blessing. I probably wasted at least 10 years talking about my past. I ruminate a lot about my past, and talking about it in therapy does not help me stop that. I sometimes refer to psychodynamic therapy as “co-rumination” or “co-perseveration.” Not helpful for me.

Cognitive-Behavioral Therapy is okay. I am ambivalent about it. CBT is intended to help you change negative beliefs to make them more “balanced.” Sounds reasonable. But, who says negative beliefs are always “imbalanced”? Sometimes life really is that hard. It’s life.

When someone tells me things aren’t as bad as I think they are, I want to say to them, “Prove it. Show me the data.” Psychotherapy doesn’t deal in proof or data, and that’s been extremely frustrating for me. My life is very hard right now -- I have a lot of chronic conditions -- and I am not interested in empty platitudes that are not backed up by scientific evidence!

Sometimes I think I have too much cognitive rigidity to use CBT to its maximum effect.

But in the past five years I have found forms of talk therapy that do work for me. My current therapist is great -- he is eminently practical (that’s a requirement for me), and he helps me solve problems related to independent living. I have a lot of medical issues now, which means a lot of doctor’s appointments. So prior to each appointment, my therapist helps me write and rehearse a script for how to speak with the doctor. We create flow charts: If the doctor says this, I say this; if she says that, I say this other thing. We try to account for all possible contingencies, including what to say if I don’t know what to say. That way I can go in to my appointments completely prepared. I don’t know if I could live independently without this sort of help.

My therapist is a Buddhist. I am too -- sort of -- usually. I identify strongly with Buddhist psychology. (Not the religion.) We do compassion-focused therapy, which is basically what it sounds like. The idea is to practice having maximal compassion for oneself and others. Choosing kindness, even when that’s the harder choice. (It’s especially hard with myself.) Trying to be the kindest person I can be has given me a life objective, a sort of north star. Even if I can never finish college or work or make my own family -- I can choose to be kind in a moment.

(When I was younger I wanted to discover the “Truth” with a capital “T.” That was an abortive mission if ever there was one. So now I focus on kindness instead.)

My therapist models exceptional kindness toward me, as do the folks at AANE, and I copy them. I learn well by imitation. It’s how I blend in in the outside world. It’s sort of -- outside in.

Because I often struggle to calm myself down, I like to create simple mantras that I can repeat to myself in times of distress. I’d like to end with a recent one. It is a mantra for self-compassion and taking effective action.

 Choose grief, not guilt.

 No shame. No blame.

 Just find what’s true,

 And do what you need to do.

And that’s it.