

Full Plate Podcast Episode #104: The Autism-Eating Disorder Connection and Understanding Healthism with Emma Green, PHD

Abbie Attwood

Welcome back to another episode of full plate I'm so glad you're here. It's me. It's Abbie, and I just finished recording this episode with our guest Emma Green and my heart is really full and so is my soul and I feel like it. Was really healing for my inner child and I don't say that in a really strange woo-woo way. I mean it like I wish that younger me could have heard this conversation, could have understood myself better, could have received the support I needed with my neuro divergence and gotten a diagnosis when I was younger. And I just think that would have prevented so much struggle for me particularly I don't I don't know that I would have even developed an eating disorder if that had been the case. So anyways, this was a really personally. Profound and important episode for me and I know that it's going to be really helpful for you regardless of what your lived experience has been but Emma Green is a writer and editor and researcher. She is neuro divergent and has a phd in health psychology. Her work aims to achieve social justice for people in all bodies by sharing science and lived experiences and getting and generating constructive conversations. So urine for a treat because we get into so much good stuff so Emma received a diagnosis of autism.

Abbie Attwood

Last year at the age of 35 and has been in the research base around eating disorders and fitness and health more broadly for a long time. She does amazing work. Please follow her on Instagram. I'll link that in the show notes. But the important part of this conversation is really understanding how healthism and ableism and anti fat any fatness intersect and how neurodivergence and eating disorders also intersect and. Really what we dig into in the majority of the episode is the connection between autism and eating disorders and really Emma's lived experience of how she received treatment and care through her teens and 20 s for eating disorder. How would that have been different had she known she was autistic right? and I just so deeply appreciate her voice on this matter and her vulnerability. The fact that she shows up so beautifully in this episode and just shares so much of what she's gone through and can. Is continuing to navigate given this was pretty recent. She says it was September of 2023 that she received a diagnosis. So yes, we talk about a lot of things a lot. instead of listing them all out I'm just going to jump right into this episode because.

Abbie Attwood

It's a good one. It's about an hour and I recommend listening to the entire thing and I hope that you get as much out of it as I did and I will see you on the other side. Thanks for being here my friends.

Abbie Attwood

Welcome Emma I am so happy we made this work. I'm so glad you're here. Yeah, and we manage the time zones. In fact, so you're 8 hours ahead I believe ah yeah.

Emma

Thanks for having me! Yeah, yeah, so it's evening here. So yeah, dark here and probably very funny and bright there.

Abbie Attwood

Yeah, kind of it's a little gloomy. It's a little gloomy today but I want to kick us off with my usual question which is what's on your plate and the first part being just tell us about a food you've been loving lately and then the second part being.

Emma

Ah.

Abbie Attwood

Life wise what's been on your plate. What's feeling like it's, you know, taking up a lot of time and energy in your life right now.

Emma

Yeah, so the first part and I don't know if you have these in America but we have this thing called malt loaf in the UK which is kind of like a really dense cake. Basically.

Emma

, and I'm really into that at the moment. You can get plain ones but you can get flavored ones as well. So very into that at the moment, really good. Yeah, so it's kind of yeah so I guess it's kind of like the texture of a fruit cake.

Abbie Attwood

Okay, okay, can you explain it to me because yeah I'm not familiar. So what? Yeah, tell me more about it.

Emma

So like a super dense kind of thing and you'd usually like I mean ah I'm not a good baker. So I buy it very much. You could make it but it's kind of like a loaf kind of thing and you'd kind of like to slice it up and like to have it with like busa or like jam or something like that. It's really really good.

Abbie Attwood

Yeah.

Abbie Attwood

Ah, that sounds so good. So what kind of flavor are you into in particular with that lately.

Emma

Yeah, I quite like the banana flavor as well. It's kind of like banana bread kind of vibes. Yeah, yeah, more cakey. Yeah, it's really really good. So that is.

Abbie Attwood

But it's denser. It's like more cakey. okay okay okay okay I need to look this up and try to make it or buy it somewhere Malt Malt loaf okay

Emma

Yeah, yeah, we cool it like malt loaf. Because it contains more I guess much other things. So yeah.

Abbie Attwood

This is so fun because I don't I normally am interviewing folks who are in the Us and so I'm so excited to get a new food like a new thing. nobody's brought this up yet on any of the podcasts. So you're special.

Emma

Oh amazing. Okay, well yeah, you have to let me know what you think if you do try it. He is oh cool.

Abbie Attwood

Good a hundred percent am I'm on such a baking spree these days. So I love that? Yeah , okay, the second part of the question lifewise.

Emma

Yeah, so I guess in terms of like and I'm always like reading and kind of delving into different things and I think recently I've just been thinking a lot about the kind of intersections between the kind of healthism that fatphobia ,ableism, and just how closely like they're kind of intertwined and that like we can't really think about dismantling 1 type of injustice without acknowledging and dismantling the others. and it's not a very easy solution to doing that. But just. I guess the importance of that kind of intersectionality. , and I think particularly the ableism piece, is what I'm kind of thinking a lot about recently. , having like had a recent kind of autism diagnosis. You know it was a kind of a personal topic to me as well. So .

Emma

Yeah, just kind of reflecting a lot on those topics at the moment.

Abbie Attwood

Oh yeah, you're speaking to my heart right now. I've been grappling with a lot of that lately. I've found myself because I work in you know, obviously with clients in the disordered eating space and there is no like you can't talk about. These things without talking about all of the ways that they intersect like you said with I mean the eating disorder landscape would be very different if healthism wasn't so prevalent right? same with that phobia like you can't talk about 1 without talking about the other like you said and they're all so.

Emma

Is.

Abbie Attwood

Connected and I don't know I'm curious for you lately. What is it I Ah I also have a personal kind of relationship with the ableism piece as I've gotten older, gotten more diagnoses with chronic illness and Neuro divergence and started to understand my own story. Better. It's such.. It's such a weird thing to start to like putting the pieces of your own life together later. , and so it does feel very personal for me too. So Could you tell me a little bit about that when you're thinking about the ableism piece of all of this could you describe to folks? Maybe yeah.

Emma

Me.

Abbie Attwood

We should give a really concrete definition of healthism and because I think that's going to be so important for this conversation and ableism as well.

Emma

Yeah, yeah, so we healthism goes back to Robert Crawford I believe is the original yeah is that? yeah like 1980 I think so , you know a while ago really and and there's kind of the idea that we should all pursue health as a kind of moral.

Abbie Attwood

Yeah, that was him? Yeah, yes.

Emma

Right? I guess and also assess that everyone does have the ability to choose health that it's It's ah you know and we often are conversations. , often about you know Health promoting behaviors and and things like that and it's this idea that. Yeah, everyone is obligated and everyone can make a series of choices to become healthy. and you know although on the surface I can think Well yeah, of course, , we know Obviously there are so many different

things that impact Health and social determinants of Health. So. Where you grew up your background you know like talking about you know Disability Chronic Illness. All these kinds of things impact not only your ability to be able to engage in. You know say Health promoting behaviors as they're often turned you know, exercise choosing nutritious foods but also. Your ability to actually become quote unquote healthy. You know, , if you if you have if you live with a chronic condition that's going to look very different to someone that that doesn't and so health is in. It can be quite sneaky and it sort of comes up. You know within diet culture that that.

Abbie Attwood

Yes.

Emma

In a lot of different spaces and I think it's something we do have to be really mindful of because it can be really harmful if we you know take it to heart. Yeah.

Abbie Attwood

Extremely. Yeah, no you did such an excellent job just describing that it it's it is. It's like making the pursuit of Health a moral imperative and anyone who's not performing that in some way is.

Emma

Are.

Abbie Attwood

We're taught to see that as like they're making some bad immoral choice like they're quote lazy. They're a quote drain on the system they're costing right? like it's It's really disgusting the narratives around it like in terms of.

Abbie Attwood

Like that. It's literally costing us money when people don't do that. It's horrific right? It's so embedded into our thinking in society and you said you know this idea that everyone the other thing is that everyone even can pursue Health right? and like what does that? What does that mean right?

Emma

Me if.

Abbie Attwood

To have the ability to pursue it: What kind of privileges. Do you have to hold and then the other piece that comes up a lot with diet culture I'm curious to get your thoughts on this is just that it there is like the behavior piece like the performing of the health pursuit. And then

there's the aesthetic and appearance of Health right? like this idea that we've all been conditioned to think that we can tell if someone is healthy by looking at them.

Abbie Attwood

And that does so much harm and I think that's especially like a place where that starts to intersect with fat phobia right.

Emma

Yeah, yeah, absolutely absolutely and we see that you know reflected sadly and often the health care that people will receive right? We know that if a fat person goes to the doctor. They are not treated in the same way that a thin person is. You know they won't often have the same tests and things done. They'll often.

Abbie Attwood

, yes.

Emma

You know, sadly just be told to lose weight and then just sent on the way you know and so it's people's ability to access you know Health care and things is that is you know impacted as well. So you know and I and. You know I think there are so many different ways that you know it can show up in the fitness industry. I mean so many fitness spaces aren't Inclusive. You know, , and so even if people actually want to be able to, you know, engage in exercise and they're not necessarily able. Able to do that because of all the different barriers that are in place you know? So I think it's something we have to be really mindful of and again you know in the small Body. So I don't have lived experience of you know, of being in a village body. But I think it's really important. That we kind of look out for these things and advocate you know, because it's so important that spaces are inclusive and you know particularly healthcare like it should be. You know everyone should be getting the help that they deserve and that they need you know it shouldn't be a case of how your body looks determines. The.

Abbie Attwood

Yeah, and it's also you saying that reminds me of the confusion that can arise around health at every size movement right? in terms of it actually being about access for everyone and.

Emma

The care you receive.

Abbie Attwood

Equitable care for everyone. It's not saying everyone is healthy. It's not saying everyone needs to be healthy at any size like you and I were both talking about before. It's not a moral imperative. It's not an obligation. , but that we need to provide equitable safety.

Emma
Me.

Abbie Attwood

Evidence-based care to everyone and when we have when we're just steeped in healthism in the medical field people aren't receiving that to your point right? There's avoidance of medical care for that purpose. There's the fact that those.

Emma
Are.

Abbie Attwood

I Mean the physical built environment of medical Offices. Don't have adequate. You know, ah devices and tools to support folks in a variety of bodies means that their like blood pressure readings can be wrong and they can't have certain surgeries or procedures done and. And then it goes into the fitness space like you were saying that like can you even access certain machines or spaces in general and the barriers. Yes, yes, the barriers to.

Emma

Yeah, yeah, absolutely clothing as well. You know like that's something often you know plus size kind of like you know, exercise clothing is so difficult to get particularly like in stores you're often ordering online. It's expensive. There are so many of these barriers.

Abbie Attwood

Yes, yes, and so if somebody even wants to like, put aside the fact that nobody has to pursue health. But if somebody even wants to, can they even be right? Is it even possible right?

Emma

, yeah, yeah, and do they even think it's for them right? I mean you know look at like most fitness magazines right? it is different, as you know.

Abbie Attwood
Rights.

Emma

Thin white you know quote unquote toned people. You know we don't typically see diversity on the fronts of magazines and not just in terms of you know body sizes you know how often do we see like you know, like disabled people represented. Very rarely. You know, maybe if we're talking about the Paralympics or something then you know it's but it's not a general

kind of you know, , something that's that's represented and I think that's it's so harmful because people think that something isn't for them. You know if they don't see it themselves.

Abbie Attwood

Yep.

Abbie Attwood

Yeah, yeah, and you mentioned another thing earlier which we're talking about. We're talking about the weight piece of this. But also when it comes to ableism and chronic illness you're seeing more and more lately. This.

Emma

See.

Abbie Attwood

Rise of wellness culture within diet culture and a lot of that is and as someone with chronic illness I experienced this myself. But this idea that there's some way of eating that can help someone either prevent or quote cure. Chronic illness is incredibly violent in a similar way because it suggests that the person did it to themselves if they have a crate like if you had only just quote unquote eaten the right way, you wouldn't have this chronic illness or here if you eliminate all these foods you should be able to get rid of this chronic illness which. We don't have any scientific evidence to support it and it leads people into myself included disordered eating behaviors and then they're still now they're grappling with chronic illness and an eating disorder right? because.

Emma

, yeah.

Abbie Attwood

Yeah, they're trying to pursue these quote Unquote Health promoting diets so it crosses into that too like it's ah your responsibility to fix yourself through food.

Emma

Yeah, absolutely and I think sadly that often kind of intertwines with people rejecting any form of kind of traditional medical treatment. You know there are some awful cases of people who think they can cure cancer through eating, you know, whole foods or not eating certain foods and.

Abbie Attwood

, ah yes, yes, yes yes, .

Emma

You know that we know this ah link you know, unfortunately with anti-vaxs and people that have you know these ideas about food. So I think you can always get this like double whammy where you end up with this kind of unhealthy relationship with food where you know your diet is extremely limited and actually you're not actually you know doing the kind of. Basic kind of Healthcare things that would actually make such a big difference to your you know to your quality of life and you know it's really.

Abbie Attwood

Yeah, yeah, and you mentioned the social determinants of health and food choices being such a tiny. Part of that overall and yet we're so hyper fixated on that as a culture. Yeah yes, yeah.

Emma

yeah yeah I mean it's roughly like 5 to 10 percent of your health outcomes. It's a tiny amount. You know if you think of the kind of you know is a pie chart sort of situation. You know, kind of 80% is the kind of you know the genetics and the and the social determinants of health. It's really stuck to a small percentage and yet it gets so.

Abbie Attwood

Yeah. I know I know it drives me bonkers. It really does. I could go on about that forever but I want to go. I want to dive into what I know is so personal to you and also where you've been directing a lot of your research.

Abbie Attwood

Is it intersects with healthism as you mentioned in Autism and your recent experience with a diagnosis as an adult and I would love so much and you I Just appreciate you so much for being willing to talk openly about this? , but could you.

Emma

Yes.

Abbie Attwood

Could you tell me and us everyone listening more about that experience ? I'm particularly curious about it being you know in your later life like in your thirties right and receiving this diagnosis and the process of that like it was. For how long were you suspecting it were you even suspecting it. How did you go about getting access to care and evaluation and yeah, anything you want to share about that that process and what it's been like for you over the last few years

Emma

Yeah, sure. Yeah, so I got my awesome diagnosis in September of last year so that's kind of a few months ago so still kind of feels fairly fresh, but I was yeah I was , thinking about it a long long time before.

Abbie Attwood

Very yeah.

Emma

Kind of went to my gp and discussed and being referred and actually a lot of what made me think that I might be autistic was my experiences with my eating disorder and my eating disorder of recovery. , so I struggled with an eating disorder from about the age of 14 kind of all the way through to kind of my mid 20 s and the context I'm 35 now so you know sort of a while ago. But , you know a significant proportion of my life. , and it was with my eating disorder. I was never trying to achieve a particular look or anything like that. But I was really entrenched in the behavior , you know in terms of particular foods and timing of when I would allow myself to eat and was very kind of obsessive with the amount of exercise and the type of exercise and it was the yeah it was the kind of routines and the rigidity of it that like really appealed to me and the numbers and tracking and all of that. Not a kind of. Body image thing really at all. and I struggled a lot for several years and I had which is a kind of go to treatment at least in the UK. I think ah you know more globally and something called cognitive behavioral therapy. So it's called cbt.

Emma

, which is the kind of go to for , a lot of , mental health , kind of ah you know disorders because it's cost effective largely and I really struggled with that and and just if people aren't familiar with cognitive behavioral therapy I guess in a nutshell it's trying to identify. Kind of your your thoughts and emotions and a big part of it is identifying irrational thoughts and then trying to generate a rational thought and the idea is you sort of have a bit of battle when you head and then the sort of the rational thought wins out and kind of over time you get better at that process and . You know you sort of Cbt yourself better is the idea roughly and that be very simplified but I apologize. But yeah and I , and I'm you know again Ill you know it works to people fantastic , but I really really struggled with it.

Abbie Attwood

I Think it's great.

Emma

I found I was often not able to identify particular emotions I was feeling and I was often given these worksheets where you'd have to rate your emotions so be like in terms of percentage. So like if you feel like 80% angry or something like that and I really really struggled with that i. Be like oh ah, could tell you from 100 % something or not percent. But I have no idea if it's anything in between yeah and I just found that and I was trying really really hard to engage with the therapy but it was just almost just giving my mind even more to deal with and I felt I already had.

Abbie Attwood

The spectrum. Yeah.

Emma

So much stuff going on in my head with the obsession about food and exercise and then I'm just given this extra lot of work for my brain to do and I just felt like that you know just exhausted by it. , and as I then kind of like had some few different other types of treatment and kind of. , you know did recover and it was kind of yeah reflecting on both how my eating was sort of manifested in terms of it not being really a body image thing at all and how much of a struggle cbt had been I thought actually maybe maybe there is. Something you know to just kind of you know being autistic I'd so read that? Again I'm but you know very science based I'm always delving into kind of and studies and things and I'd I'd seen that actually there was quite an overlap between , people who well particularly i. Had an anorexia nervosa but it seems a particular overlap with that and with autistic people likely with other eating disorders as well. But that and the moment that's where most of the research has been done and I feel oh they like maybe that would explain kind of why my struggles manifested. In the way that they did and I also read that cbt sometimes isn't that helpful because and autistic people myself included often struggle with something that's called Alexify Mia which is kind of difficult in like naming and recognizing our emotions and that would kind of explain why I was struggling with.

Emma

You know, naming them but also particularly rating them on these kinds of scales and things. , and so yeah I kind of sat on that for a while and thought you know do I Want to See. Like an ah diagnosis is that something that's going to be important, you know is it am I going to want to disclose it to other people. You know? , so I thought about it a lot .

Abbie Attwood

Important. Yeah.

Emma

March 2020 kind of covid happened and I think everyone had a bit more time to reflect on things and it seemed like the world slowed down a little bit in some ways. Because you know, there were less kinds of social obligations and it was then that I decided that I would. Kind of go to my gp and have a conversation about , potentially being referred for an autism diagnosis. , by this time I'd also done some kind of you know online measures you can find like think of a q 50 and the things edu as well. These various different kinds of. You know they will have all had their issues but they can give you an indication as to whether you might be autistic. , and I found I'd scored quite highly on them. So I thought okay well I've got some got some my own kind of personal reasons I've got these more kind of I guess you know validated sort of measures. . And I'll see how it goes with the gp wasn't great at first they said no, don't think you're autistic. Maybe just some social anxiety. basically , and I was like yeah I just yeah I

was a bit disheartened because. You know I do have some struggle with social anxiety. I thought there were so many other pieces that weren't really explained by that. and I also wasn't being offered any kind of support for that social anxiety. It wasn't like I was being referred for something so I thought yeah so I thought okay.

Abbie Attwood

Yeah, like go away. Yeah I'm so sorry Emma that's awful.

Emma

Yeah, it was disappointing but I think I luckily I guess I had that I don't know deep down like knowledge that I think there is something more there. Yeah and I was like you know I'm going to go back and forth to see someone different and see if I can just get.

Abbie Attwood

Yeah gut feeling. Yeah.

Emma

Ah, referral you know, , and luckily second time round I did get a referral. .

Abbie Attwood

I Also want to say like it's so disheartening to hear this on a personal level because I can only imagine how frustrating that was for you and then to think about and to think about folks who can't advocate for themselves as much going through this and why. Why this is so often probably missed in younger children right? because they don't have the wherewithal that you or I have even like with our research backgrounds now to be able to be like no I think that this is my experience and to chase it and I just want to say that like it's just so.

Emma

, yes.

Emma

Yeah.

Abbie Attwood

Dismissal is so frustrating because it's putting so many people in the position that you ended up in which is you know in your thirties only only receiving this now because you know maybe you didn't have the capacity to go down this road earlier in your life I just wanted to say that's just so frustrating.

Emma

Yeah, yeah, and I felt as well because I'd also had to unpack a lot of my own kind of you know, stereotypical beliefs about Autism I mean my background is psychology when I studied my undergraduate when I learned about Autism you know the.

Abbie Attwood

Right? right.

Emma

Particular terminology was out of impairments. You know we very much learned that like an you know autistic person has a broken brain and you know like science is going to figure out how to fix them. You know it was that kind of really damaging rhetoric you know there was certainly this idea that oh you know it's a .

Abbie Attwood

Yeah.

Emma

Mainly only the kind of you know, boys and men that it affects. You know we talked about the kind of extreme male brain hypothesis which is yeah does kind of it. Basically yeah, you can look after if they if they like but you know again just these.

Abbie Attwood

Yes.

Abbie Attwood

Yep yep Yep! ah.

Emma

You know, really damaging ideas sadly coming from researchers. , ah you know who just had this kind of binary. you know ideas about what autism looks like and doesn't look like so I felt like I'd dealt with yeah.

Abbie Attwood

Yeah, and so much research lacking on women in general. It's just also infuriating. You know.

Emma

Yeah, exactly exactly and you know we know that you know Autism still is and you know much more likely to be diagnosed in boys and men. But that's really because of these stereotypes and also the kind of measures that we're used to assess things you know, know in generally speaking, in women that.

Abbie Attwood

Yeah.

Emma

You know we do something that's called masking which is where we essentially try and blend in and hide our autistic traits and that can be kind of subconscious because it's what we do for survival essentially but it can also be a conscious thing as well that we don't feel. Safe to be ourselves in the world. You know, because of the consequences that we might you know fear all the real consequences that might occur from you know being ourselves. though it's you know it's I think really important that we do. You know, really unpack these stereotypes. because I think that sadly they are still held by researchers and by healthcare professionals as well. You know I do think I wonder if I'd have been. You know a guy and I'd gone I'd gone to the gp maybe I would have had a different response on that first occasion I don't know but you know it it's possible yeah did it. It might be, yeah.

Abbie Attwood

It's likely right? It is yeah or even when you were younger imagine like would the eating disorder have been the first diagnosis they gave you or would it have been that they looked further into any presentation.

Emma

Yeah, yeah, exactly exactly? yeah yeah, and you know we know that although there's you know, quite a big overlap with with you know people that are kind of autistic or Neuro divergent and eating disorders quite often. The.

Abbie Attwood

Or like Adhd or autism right? like it's really interesting.

Emma

People like myself don't get the autism or the Adhd diagnosis until later in their life when they've actually really been through eating disorder and treatment as well. So I think there's a yeah yeah.

Abbie Attwood

That's me Emma too. Yeah I received an ocd diagnosis when I was like yeah, just a couple years ago so similar timeframe is you and it made everything else make sense and to think.

Emma

, yeah.

Abbie Attwood

And that was the same thing. It's like that. It could have been that it could have been identified earlier but it wasn't because of the eating disorder behaviors. It's like they masked they were more easily identified by providers than.

Abbie Attwood

Then if they had been about if the obsessions had been and similar to you right? If the obsessions hadn't been about food and exercise then you know perhaps that wouldn't have you know would have received the actual diagnosis that we needed at the time right? because who's to say that the disordered eating would have been present.

Abbie Attwood

If not for the autism right? Or if not for the OCD which is really complicated.

Emma

, yeah, absolutely absolutely yeah I Just think there's a ah, really big case. Ah screening people generally like when you know people are children not waiting until people are struggling to then possibly.

Abbie Attwood

, yeah, yeah, yeah, yeah.

Emma

Or other things you know like why don't we have a general thing and you know I think it helps to also you know start to kind of normalize it and you know get away from this idea that like it's It's a bad thing to be you know Neuro divergent. It's literally just a different way your brain functions and the earlier you know that the better right? You know like it's.

Abbie Attwood

, ah yeah I think it's cool. Yeah yeah.

Emma

You know, , and so you can you know have the adaptations and things that you that you need you know? , So I think there's you know I Really wish you know I'll be my if I could wave Magic Wand I would love you know, just generally children to just be screened as early as possible for you know, all different types of and you know Neuro divergence. , so hopefully that fewer go on to you know, then you know they don't struggle as much in that you know in it and later you know.

Abbie Attwood

I Struggled for so long. Yeah, yeah, it's going back to you know going back to your eating disorder. You said you were about 14 so thinking about you back then so like younger Emma.

Emma
, yeah, yeah.

Abbie Attwood

So as you've reflected on this which I'm sure you have over the last several months since getting the diagnosis. How do you think things would have been different had that. And understood at that time and the other thing that I'm interested in actually is like did you identify with having an eating disorder at that time given that it wasn't ever about your body image like was it confusing to you then. And did you have trouble placing yourself amongst the very kind of like what we've what we've been trained, especially as researchers in this area but a lot of providers to identify as you know the attributes of somebody with an eating disorder right? And how you present. And did you look around figuratively or literally and think I don't quite know if I belong in this quote unquote like diagnostic picture here because I'm not obsessed with my body image I'm just obsessed with the numbers and I'm obsessed with these things.

Emma

Yeah, completely and that's that's yeah, that's exactly how I felt and it's tricky because I think that you know denial can be a part of eating disorders. Generally you know, but yeah, certainly at the time I just felt like what you know because I went to the GP. You know my parents quite.

Abbie Attwood
Absolutely yeah yeah.

Emma

Concerned and and went with me and they kind of brought up eating disorders then and I I just felt it doesn't it doesn't feel like it fit. Yeah, it was.

Abbie Attwood

Quite fit. Yeah yeah, but you knew that the behaviors centered around exercise and food. So. It's kind of like there's like I don't want to say that I don't want to so put words in your mouth or to the experience. But there's like some gaslighting that can happen in terms of Like. No, it must be this because you're obsessed with these things like you're obsessed with food and exercise and therefore eating disorder right.

Emma

Yeah, definitely definitely and I felt that there were just other aspects of exercise. It was kind of the way that it made my brain feel that also you know made it. I think it is difficult for me to.

Emma

I Guess manage it because it just felt like well there was so much stuff going on in my head generally I had this way that just made things feel a bit more calm and a bit more stable and yeah, , all of all of those things. It wasn't yeah it wasn't. The way it was being described to me, you know? Yes, There was certainly in terms of the amount and and I certainly wasn't you know, eating an adequate amount for the exercise I was doing but there was yeah, no real acknowledgement of the purpose that it was serving for me particularly at that time I think.

Abbie Attwood

I'm feeling I'm feeling a lot of I'm feeling really emotional hearing you talk about this because I had such a very similar experience. , and I haven't heard someone put it into words quite like that before but I I felt the exact same way. , and so it's. I'm sorry you went through that because it's hard, especially as a kid you are 14 years old and to go through that for it sounds like maybe like another almost decade of treatment and how confusing that is to never feel like it quite fits in terms of.

Abbie Attwood

Help you're receiving or the way that they're addressing it the the cbt or the like body image focus or you know that it's not quite what you were struggling with and yet it was the only It's the only treatment modalities offered in that path right.

Emma

Yeah, and I just think continually I just felt like I was being labeled as the problem like before I was given cbt. I was told I needed to have something called Motivational enhancement therapy because I supposedly wasn't committed to recovery and.

Abbie Attwood

Yes, yes.

Emma

You know and I just think like I mean for 1 thing that's the least motivating thing that you can actually hear someone. Yeah, tell them when you need to be more motivated like yeah but I just you know and so I think it's yeah I do feel you know.

Abbie Attwood

Absolutely is 1 of the many issues with traditional treatment. Yeah, yeah.

Emma

Yeah, just really sad I guess that I was just made to feel like I was, yeah, the problem and almost willfully , resisting treatment or engaging and it I felt like I'm doing my absolute best here and it's just it's really.

Abbie Attwood
Absolutely yeah.

Emma
Not yeah I'm really trying to work hard and it is just kind of wasn't wasn't working but wasn't even being acknowledged. You know I felt like they thought oh you need to try that harder. You know how I felt.

Abbie Attwood
Yeah, yeah, and it's so troubling too because with Neuro divergence. It's , a lot of it is like creating safety right? And so when you're.

Abbie Attwood
When you are not like a lot of the behaviors are about creating safety and that's what it sounds like maybe it was providing you right? like you were saying that it gave you something to focus on your brain was like kind of a very.

Abbie Attwood
Like I don't want to say scary place but like a lot going on in there and no one to help you with that and process that and a lot of that is you know a lot of these behaviors can come down to like feeling safer in the world and in your own brain, especially when we're conditioned.

Emma
, yeah, absolutely.

Abbie Attwood
Particularly as women do go to these behaviors anyways for control and safety. You know.

Emma
Yeah, yeah, absolutely and I think it's just so important to acknowledge as well. That kind of recovery looks very different. I mean it looks different for everyone right? Everyone's an individual but I think you know I felt like the recovered ideal that was also being presented to me.

Emma
Wasn't accessible. You know and I think for a lot of neurodivergent people it. It does look different. You know our eating might be a bit more structured than you know than someone who isn't neurotypical. You know I mean generally autistic people self- included we like routine you know and we often like eating kind of similar foods and things each day.

Abbie Attwood
Movie.

Emma

And that's not disordered. That's you know we like living our best lives. You know we do that because that provides us often a sense of comfort and you know frees up a bit more brain space for us to focus on other things you know that are you know war fun and and more enjoyable and and and things so. , I think that's really important as well that we don't kind of pathologize things and that something not you know, like for example, ah you know I don't like spontaneity or surprises in any form food included you know and that's not I don't see that as a bad thing. That's just a preference. You know for me and it doesn't mean that I don't still you know, enjoy like you know, different foods but it just means that that particular you know thing isn't for me and I think that's Fine. You know, I think it's really important that we don't have too narrow a definition of what. Recovered looks like and that we understand that you know it's again different for every single person the neurota version or not but particularly for Neuro divergent people. We might have a version of recovered that I Guess. Would be traditionally thought of as disordered you know and actually we shouldn't be quick to do that because it's about the it's not just about the behaviors themselves. But it's the kind of the reasons and things behind them. You know? Yeah, exactly exactly.

Abbie Attwood

The intention. Yeah I was going to ask you that I was going to ask you to talk about that. What's helped you well first and foremost it sounds like this diagnosis. It's led to a greater understanding of yourself and this whole experience. You've had throughout ah a. A large part of your life is about your story with an eating disorder and so really being able to make more sense of that but also like it really sounds Emma like it. It allows you to have more self-compassion and really be able to.

Emma
Yes.

Abbie Attwood

To understand yourself on a deeper level and not pathologize things that have never actually been quote wrong with you and and to be more accepting and warm towards yourself. It sounds like and and not it's like you're you're looking at your own behaviors and being like well gosh like.

Emma
, yes.

Abbie Attwood

It's about why I'm doing this and how it's impacting my life and I'm actually living my fucking best life you know of course to.

Emma

Yeah, yeah, yeah, it is and I think that's you know it's taking some work to do that. But yeah, that has been Yeah, the biggest thing I think is just yeah, being kinder to myself allowing myself to. Leaning into what kind of feels good and not judging things you know and just tiny things like for example, like I mean , you know as much of have quite a lot of sensory issues and one of the things I particularly hate is mint right? and I've been making myself use mint toothpaste for.

Emma

15 years and I was like you know what you can buy yourself a fruit toothpaste. It's okay, like it doesn't matter if it says it's for children. It's like if it tastes not like do it it like it's not you know, like yeah, exactly.

Abbie Attwood

Ah, yeah, who cares.

Emma

You know it's just like all these little things you know like I struggle a bit with like cooking and things so you know I do buy like more kind of pre-prepared foods and things and I think again going back to some of the stuff around you know, healthism and and ableism as well and I'm just yeah, try and just be a lot.

Abbie Attwood

Ah, Amen to the prepared foods. The quote unquote processed foods. Yeah, like it's actually that that would be like if we stop looking at Health as such as if we stop looking at Health as something we can define because we can't no one can agree on a definition of health right.

Emma

Yeah, let's judgemental of it.

Abbie Attwood

We Conceptualize it and think like that's actually a health promoting behavior for you because you're providing yourself with accessible foods so that you can nourish your body and your brain like like you said and have some routine around that so you don't forget or that you're able to to do that in a way that is. Gosh, it's feels safe. It feels Comforting. It feels just like true self-care and compassion and respect for your body.

Emma

Yeah, yeah, exactly exactly and I think that goes around like you know, not just the food itself. But, kind of how I Eat. So I think one of the things that is often cooked kind of like mindful eating is this idea that you should kind of eat what you know with few Distractions. No Tv No music. And actually for me that feels quite confronting because I don't really like the sounds of myself chewing all of these kinds of things

Abbie Attwood

I hate that. Okay, so that's that's a huge issue for me I wrote a newsletter on this recently about how angry it makes me that eating in front of the Tv is like demonized I have to eat in front of the tv I like to eat with the Tv I don't like to sit at a table and eat. In fact. And I don't like to hear my husband chew.

Emma

You know I Yeah I'm so for that and I just feel like that shouldn't be pathologized. That's how we actually make it an enjoyable experience. Yeah.

Abbie Attwood

Yeah, who cares? It's such a paternalistic kind of nuclear family idea of what we should be doing while we're eating and mindfulness like if anyone truly understood what mindfulness is they would know that like. It doesn't require that you're doing nothing else while you're eating or that you're eating in a particular way. It's actually about being aware and present with what you need at any given moment like so if you want to sit on the couch and watch Netflix which that's what I do while I eat then.

Emma

Really.

Abbie Attwood

That is your experience of being present in a way that feels good for you right.

Emma

Yeah, exactly exactly and not hyper focused on you know the sound of chewing or something like that. You know that just yeah, would not be fun.

Abbie Attwood

And if someone has a history of trauma especially surrounding food or family meals. A lot of that just doesn't feel safe in general right? like they'd rather do it in a different way and or they wouldn't. They don't want to sit there and focus on every bite that they're eating right? Like why do we have to.

Abbie Attwood

Center food in in a way that that looks like that It's just it's mind boggling to me and I'm so glad you brought this up and I'm so glad that you've come to make some peace with that for yourself too because I have to and it feels really good to be like this is okay.

Emma

Yeah, yeah, it's taken work but it's I think it's so important that we do that and I think you know and and find all these little ways that can make such a big difference. You know? I mean I think I'm still in a place where I'm working on advocating for my needs. You know other people and things.

Abbie Attwood

Yeah.

Emma

That's definitely to do a work in progress but with myself I'm just I think getting much more able to identify what it is that I need and just trying to just be less less judgmental of it and just rolling with it really?

Abbie Attwood

No, you're making me Happy. Oh This makes me happy. I can tell just by your energy. It feels like it's provided you with a lot of I don't know like inner support in your life like just knowing yourself better and. That's all we can ever ask. I don't know about you but recovery and recovery is always those that language has never felt right to me anyways and I think it's all just about how much truth we're able to access about ourselves and our experience and that just leads to more and more healing. And connection. You know, I don't know the recovered concept in and of itself. It just never sat right with me. I think we're all just living and evolving all the time. Yeah.

Emma

, yeah.

Emma

Yeah, yeah, and I think we should be open to that. That's the thing I think you know like I know you know I feel like I'm getting more in touch with my needs now but I'm also open to that changing in the future and.

Abbie Attwood

Yes.

Emma

You know and that's fine. You know, and I think yeah I agree I think sometimes ah too I do use the term sometimes recovered I guess and I I guess by that I mean more just that I'm not defined by such a struggle I suppose you know, but I it's not this kind of.

Abbie Attwood

Yeah, yeah.

Abbie Attwood

You.

Emma

Place It's like done. It's in the neat little bow done with and it looks the same forever like I think I completely agree with always learning more. Always you know we're always evolving, the world's always changing and what we need at any given time. Yeah.

Abbie Attwood

Even with.

Abbie Attwood

Yeah, our needs are changing. Yeah they're always going to change so you so you've you've obviously you obviously are an incredible researcher and among , a lot of things that you do and you know. Ah, following you for some time. We've been connected on Instagram so you used to do a lot of posts around fitness and now your page has really updated I noticed. It's like you've taken that down and.

Emma

Yeah.

Abbie Attwood

Give it a little refresh and it's focused on autism and eating disorders and your research now kind of going in that direction and so talk can you talk a little bit about that shift and how. How does fitness if at all play a role in your research anymore and have you kind of? Are you starting to look into that with the eating disorder autism connection as well.

Emma

Yeah, so I guess it's a few things I think I found life a bit burned out, kind of producing that kind of content like me I Love Science I Love delving into the research but I just was finding that over time it was kind of just taking more and kind of of my energy I guess and.

Abbie Attwood

Yeah, yeah.

Emma

And I know we often like to Mo about Algorithms but you know I sometimes just found that actually like people weren't seeing the content and it's not that I want all the likes but I always really enjoy the conversations I'd have with people in the comments. , and I found that I wasn't really getting that because I think people weren't seeing the content so I felt like.

Abbie Attwood

Yeah, yeah.

Emma

Create you know, creating this stuff to try and have you know like conversations with people and I'm I'm not really able to to have those and I also just felt I'd kind of run out of things to say in a way. I felt like I'd sort of.

Abbie Attwood

Yeah, you had covered a lot. Ah.

Emma

Yeah, sure there are other other things to say , but I felt I had and I also felt that I think lived experience is so important and I was really mindful that I didn't want to be portraying The idea that science is all that matters and it should be like that.

Abbie Attwood

Is that.

Emma

Precedence Over lived experience you know and I kind of felt in some ways that there is maybe a danger if I do that I'm shouting over people with lived experiences particularly those with kind of marginalized identities. You know.

Abbie Attwood

Are.

Emma

, so there was that side of things as Well. , and so I yeah I actually didn't post for months and months and months because I wasn't quite sure what I wanted to do with my cage. and then had the autism diagnosis I Thought oh. Okay, maybe this is a chance to bring some kind of lived experience and my own lived experience here. , talk about things from a slightly different perspective. , and yeah, that's what I've done I'm still kind of you know, early days with that and there is.

Abbie Attwood

And then.

Emma

Unfortunately a lack of research generally and kind of Neurodivergent. But there is some merging stuff, you know around kinds of eating disorders. Not as much around the fitness side I would really like to dig into that more because I've had some really interesting conversations with people a bit like.

Abbie Attwood

, yeah.

Emma

Touched on in terms of how exercise can make you feel like you know in terms of what it can do for your brain. , you know general stuff but endorphins and things. But I've not seen much in terms of the you know neurodivergent people specifically.

Emma

But I've had a lot of conversations where people have said there's something special. It does for my brain and a friend of mine. an eighty eight year old and she said that she only really gets on with intense exercise because she likes it's that what I don't know that feels best for her brain.

Abbie Attwood

Right.

Emma

Slow or calmer things just don't don't work for her and that was all about those. Ah you know, purely in terms of how it made her feel and I'd I'd love to see some more research on that stuff. , and , yeah.

Abbie Attwood

Yeah I agree and because I think what's really important. There is the awareness that we have about how high risk folks become both from like.

Emma

Move.

Abbie Attwood

Neurodivergence right? like the overlap is very high with eating disorders right? and so we know that that might put somebody at a higher risk for the development of eating disorder behavior like compulsive exercise and then being able to hold the nuance of Okay, what if someone.

Abbie Attwood

Has autism and they need this kind of routine and structure in this repetitive way or maybe exercise makes them feel a certain way and so how do we mitigate them traveling across that spectrum of those behaviors becoming compulsive. And detrimental to their health like how do we help people manage those kinds of engagement with food and exercise in a way that is compassionate and healthy and safe and that it doesn't get taken to more extreme levels like it did for me or you right?

Emma

, yeah.

Abbie Attwood

And to be able to hold that is really difficult because again like you said it takes a lot of self-awareness to come to a place to be able to evaluate your relationship with food and your relationship with movement and say okay. At this point I can see that I'm doing these things not from a disordered place. Or a compulsive place but rather from a oh this is just what makes me happy but that that is a difficult and blurry line. Do you know what? I mean like because at what point even if your friend with Adhd Oh intense exercise is what makes my brain feel good.

Emma

Yeah, yeah, yeah, yeah.

Abbie Attwood

Okay, how do we engage with that in a way that's not self-destructive right? It's really rough and we need to be supplying the type of support that helps people access a balanced and healthy relationship with these things because we have to acknowledge we live in a culture that moralizes.

Emma

, exactly Yes, yeah.

Abbie Attwood

That stuff that pushes eating disorder behaviors on us and calls them healthy particularly for people and larger bodies right? like that can become really dangerous and it's I'm just you know going off but like it's It's really tricky and so.

Emma

, yes.

Abbie Attwood

We need more research in this area precisely for that reason to protect people.

Emma

Definitely and I think you know for fitness coaches and personal trainers and things to be much more informed about you know, neurodiversity generally needs disorders. Yeah absolutely and I think you know even without the kind of eating disorder piece I think there could be just generally like challenges like for me I don't.

Abbie Attwood

, yes, and doctors. Yeah, yeah.

Abbie Attwood

, yeah, yes.

Emma

Always have reliable hunger and fullness cues and and something I'm I'm really reading to travelathlon right? And so for that I need a lot of fuel right? And so managing that right and you know can be a challenge and then along with the kind of. Has the sensory issues around food. So finding you know food that kind of you know is you know sufficient but also meets meets those needs and things and I I think we just really need a lot more. Yeah, a lot more knowledge a lot more awareness a lot more education so that people can be supported to you know? yeah, live their best life.

Abbie Attwood

Yeah.

Emma

Whatever that looks like in terms of food, food and exercise and feel supported.

Abbie Attwood

, yeah I agree so much with this and the more I hear you talk about this the more I'm like I think.

Abbie Attwood

Feel like there's like all these positive narratives coming out of this for you. Personally, whether it's been your professional life and kind of starting to take this experience that you've had and these experiences you've had your whole life that you're now kind of piecing together into your work and then. You know it actually sounds like it's been really positive in a personal way for you there. There is some. There's just a lot of magic that's come out of this not to diminish I'm sure how difficult it's been too but would you would you be able to like what has been.

Emma

Me.

Abbie Attwood

Some of the positive stuff to come out of this diagnosis for you. How has it shown up in a healing way in your life?

Emma

Yeah I mean I guess I felt like we went about the kind of thing that is the biggest thing is permission. I think permission for me to make accommodations in my own life about things that feel good like except in small ways you know buying a different toothpaste. , you know things like that.

Emma

But Also you know in in you know in in in larger ways as Well. I don't force myself to do things that don't feel good. You know I know I have a fairly limited social battery right? So if I'm going to a party or something I'm not going to stay on a path at midnight because it's just not going to be good for me, you know and. So things like that I'm much more able to tune into my needs and honor them. , and I think that's been really positive again. I'm still working on kind of advocating when it comes to like other people. So sometimes I have to work in an office environment and that's. Quite a big struggle with the different kind of sensory distractions and I'm kind of getting better at you know, being able to say actually you know I need to be able to wear headphones at certain points to just kind of manage that and you know some just different adjustments there that I'm still working on but I think yeah overall the biggest pieces. Is yeah, is that permission I think and and the acceptance I think that just my brain just processes things differently and that's fine like it's It's just a difference and in a way. Yes, It's a big thing but it's also not massive like it's you know it's really, you know it has.

Abbie Attwood

Yeah, yeah.

Emma

Term like autism and you know I think the labels can be really helpful in in terms of making sure that you get the you know support and things you need, but it's yeah, it's not yeah, it's just a one part of me I guess so it's also yeah, just getting it in.

Abbie Attwood

Yes, yes.

Abbie Attwood

Yeah, yeah.

Emma

, into perspective. So yeah, it has been overall a really positive. .

Abbie Attwood

You mentioned the working kind of like coworking and socializing as kind of some challenges , anything else that you've experienced like what what's been more challenging about it and what are you continuing to navigate and focus on for yourself.

Emma

Yeah I mean I guess the social thing is more challenging. So I think there are still, you know, really struggling things like small talk. For example, there is just so much a part of like you know, kind of society. But yeah.

Abbie Attwood

Yeah.

Abbie Attwood

Look at you podcasting with me.

Emma

We had a more in-depth conversation. But if you were like yeah yeah, , yeah I just I mean so overrated. But yeah, I think I could do a deep conversation. But if Ga conversation about the weather I'm just I'm out like I'm sorry so but I guess some of.

Abbie Attwood

Ah, yeah, yeah, yeah, yeah I don't do small talk either. So that's good. I'm like tell me your trauma. Let's go right? there? .

Abbie Attwood

Ah.

Emma

Though I do feel like it can be challenging because I sometimes feel that people can perceive me as a bit cold and a bit standoffish because I don't necessarily engage in that kind of small tool key thing. So I guess that can be a challenge as sometimes I feel like people have to like.

Abbie Attwood

Yeah, yeah.

Emma

To know me a bit better and then I can kind of form you know relationships that way. So I guess that's one of the challenges. I guess you know I mean I live in London which is a very kind of divine withy buffy place and although I kind of love that sometimes. Can be quite

overwhelming. So I would have headphones with me to kind of help manage the sort of sensory input that I'm getting you know because particularly if I'm a bit tired or something like that. It can just feel like a bit too much like traffic and just. Yeah, all the different things that are going on. yeah I guess sensory stuff a bit as well. So for some I'm just getting used to the habit now. So for example, tags and clothing I just have to immediately cut them out. Otherwise they can just drive me. Nuts. So.

Abbie Attwood

Drive you bunkers now. Okay.

Emma

Yeah, so I think yeah those are the main challenges. and a bit like I touched on as well. Sometimes the ah hunger and fullness cues. I think the combination of being Neuro divergent and also , being physically active means that sometimes they're a bit.

Abbie Attwood

You set reminders and stuff. What do you do? yeah.

Emma

Kind of dulled so I just have to just you know? Yeah, just be me or that I'm kind of eating , eating enough and particularly like if I'm doing , kind like doing triathlon and races and things and I would see around that my anxiety is a little bit higher as well. So just be you know, particularly mindful of that.

Abbie Attwood

Yeah.

Emma

Those times that I am, you know, taking on board. Yeah, enough food. , well.

Abbie Attwood

Yeah, and in particular it sounds like if you get very focused on a particular task for a long amount of time and just making sure like if you know you're going to go into that zone you know setting an alarm. It's like you know structure is not.

Emma

, yeah.

Abbie Attwood

It doesn't have I think we are so used to diet culture associating structure with food with like restrictions and I think we can use knowing our brains better and knowing ourselves better.

We can use structure for some of us who need it with food as a way to make sure we're getting plenty.

Abbie Attwood

Of food rather than using it as a way of like setting. It's not about rules right? It's about compassion and eating enough and comforting yourself with food too.

Emma

Yeah, absolutely yeah and a bit like we were speaking about before having you know food that is really kind of easily accessible and easy to prepare and stuff is a big part of that because I can then you know you know there are fewer barriers to doing it. Yeah exactly.

Abbie Attwood

Yes, unions alt loaf eat all the malt loaf. Yeah yeah, yeah I love it I Love it. , ok I want to just respect your time and I just.

Abbie Attwood

Love you so much for this conversation I think the last thing I want to ask you Emma is I'm just thinking about folks listening and I'm thinking about maybe if we have parents listening who have a child. Maybe they've recently gotten the diagnosis or maybe they're wondering about it or whatever it might be like you and I said whether or not you even need that label right?

Abbie Attwood

If just some practical tips thinking about young Emma thinking about what you may be needed as a kid would you give to families. , who are navigating just some of the yeah sensory. Issues and neuro divergence in children and thinking about feeding and supporting them and yeah, anything that you would that comes to mind when I ask you that.

Emma

Yeah, so I guess I would say don't feel like you have to have all the answers you know, you know we're still figuring out your research is still figuring out. Professionals are still figuring out and you know everyone is an individual so I would just say as much for us.

Abbie Attwood

From yeah.

Emma

Ask your child what they feel that they would benefit from and maybe just try some different things. You know it's okay to try something and either it works or it doesn't work and but you know it might be a little bit of trial and error with things you know with sensory things you know I mean a lot of people do find things like headphones helpful. . Things like , calling them like Fidget toys or stem toys can be helpful so like things like you know, stress balls like

squidgy balls or like little puzzles that , you know they might want to use in their kind of fingers and things can help naturally focus. , and so yeah, maybe just try different things like that.

Abbie Attwood
, little edit email.

Emma

And I guess I would also say try not to have too many expectations of how things should be quote unquote yeah, like we talked about this kind of family dinner idea like that might not work. You know? yeah, it might be dinner in front of the Tv that's fine like that might be the way you have your.

Abbie Attwood

Should I go? Yes, yeah dinner I was going to say the same thing right? right? Yeah or don't worry about all the like.

Emma

Nice wholesome thing. Yeah.

Abbie Attwood

Packaged stacks that they need or like don't worry about remember like when we were going back to social determinants of health that like I think parents have to ask themselves a lot like what am I afraid of if my kids eat a lot of this thing. What am I actually afraid of? Why can't they like to be fixated on this food for a while? Do I actually think and like it?

Emma

, faith.

Abbie Attwood

I have been informed by diet culture that something quote unquote bad is going to happen because of it or is this just what they need right now right.

Emma

Yeah, absolutely absolutely and I think I would also say obviously it's a personal decision about whether you choose to seek a diagnosis or not but I would say that I do think it is helpful to help. You know children get the support that they need at school. You know at kind of University Or College and you know in the workplace as well. And yes, potentially there is some stigma that also might come along with that. But. We all have to play a role in trying to dismantle that and I think the more people that are neurodivergent and open about being neurodivergent. Hopefully the more we can start to kind of , push against push against that

and make the world. You know, more inclusive for everyone. But. You know, including your diverging people.

Abbie Attwood

And that's like that's exactly what you're doing that describes how you're showing up in the world and the research you're doing and I'm so grateful and I'm so grateful for you sharing this with all of us. It's really, it means a lot to me I think I've just heard. So many things from you that I personally relate to so it's been a really healing conversation for me in that way and I know that a lot of people are going to be feeling really seen and heard and supported by everything you've described and been vulnerable about. So Thank you for being here.

Emma

No thank you, I've really enjoyed our conversation.

Abbie Attwood

And really appreciate it if folks want to follow you and find you? What's the best way to do that? Where can they follow along or learn more from you?

Emma

Yeah, so , but Instagram is the best place again. I'm not super frequent at the moment but I am hoping to be a bit more frequent this year. My new name is and my energy and ph d used to be in a fitness ph d I don't know if that still works but the mg ph d is a. Where to find me , and yeah, I'm usually like in my stories if I'm not always posting but I love having conversations with people over there. So yeah, definitely the best place to find me if you like to.

Abbie Attwood

Okay, so go find me on Instagram. I'll link that and comment partake in the comments. Everybody the conversation is where it's at oh Emma. Well thank you again and thank you for making the time difference work I hope you have.

Emma

Yes, yeah, absolutely..

Abbie Attwood

A wonderful evening and I'm glad we're connected.

Emma

You me too. Thank you He e.