20 BACP Workplace | April 2023 BACP Workplace | April 2023

Nicola Banning talks to Bernie Wright about how lockdown presented neurodivergent employees with new opportunities, and she gives an insight into her work training others about neurodivergence, eating disorders and disordered eating

Bernie Wright is a co-founder of NEDDE TRAINING and a BACP accredited counsellor, psychotherapist and clinical supervisor. In 2007, she trained as a master practitioner in eating disorders and obesity at the National Centre for Eating Disorders (NCFED) and became its supervisor, mentor, senior lecturer and clinical lead. Bernie now co-runs NEDDE Training with Lisa Smith, providing training on neurodivergence, eating disorders and disordered eating. bernie@neddetraining.co.uk

### NB: What made you decide to train as a therapist?

BW: I decided to train in 2002, having received therapy myself and having always loved connecting with people. Once I embarked on my training, I was hooked, and my previous careers as both a chef and as a regional sales area manager for a London employment agency didn't seem right. I was however full of anxiety as, being neurodivergent (ND) (ADHD, dyslexic, dyspraxic, with dyscalculia), the world seemed to be full of people who knew better than I did, and while that still remains true today, it doesn't derail me in the way that it once did.

Fortunately, I met Linda Martin, an outstanding trainer, who gently saw me, just as she saw each student that she taught. I will always be grateful for her calming presence; and throughout my training and beyond, her voice has remained with me. Back then, I suffered from verbal dyspraxia, and when I was under stress, I would stutter. I'm smiling having written that sentence as I'd

almost forgotten ever having had it. It was my work as a therapist which has helped me to heal, as, in my client work, I've had to slow down in the way that I communicate, and so stuttering is no longer an issue for me. It's one of the many gifts of being a therapist. I also used to wear a scarf to cover the anxiety rashes around my neck that showed my fears, but I haven't worn a scarf for many years. In fact, I'd forgotten that too until my sister reminded me of it recently. We ND folk can certainly be very good at forgetting things and are brilliant at camouflaging.

NB: Once you became a therapist, you noticed that you were seeing clients with eating disorders and similar presentations to yourself. How did you respond to what you were observing?

**BW:** My decision to specialise as an eating disorder practitioner started early in my life as a therapist. While on placement as a trainee counsellor, I learnt that difficult emotions have be purged as a form of emotional relief. It taught me to never forget to ask every client about their relationship with food, weight and shape





However, I was still surprised at the numbers of clients who were suffering in some way with eating disorders, so in 2007 I trained in London with Deanne Jade at the National Centre for Eating Disorders before becoming its clinical lead and senior trainer up until June last year. I will always be grateful to Deanne for believing in me and teaching me so well. I've recently set up NEDDE TRAINING, which specialises in neurodiversity, eating disorders and disordered eating, along with my long-term colleague and trainer nutritionist, Lisa Smith, who is also a senior lecturer at the College of Naturopathic Medicine.

# NB: Was there a turning point for you when you decided to get into training others about neurodiversity and eating disorders?

BW: I became a trainer some years ago, after my wonderfully wise supervisor Stephen Richards, a tutor at Wealden College, a training school for counsellors and psychotherapists, suggested that it was time I used my experience and knowledge to train others. Honestly, the very thought left me shaking with anxiety. and yet here I am, doing exactly that. I've also had the support of Margaret Banfield, another experienced supervisor, who worked with me until she retired, and without them both, I don't think I would be writing this today. They've both showed me what it was like to be taught and supported in new and different ways, and they always believed in me, which meant that I could reach for the stars. That's how I have seen my career progress, full of heights and mountains to climb, and I'm still attempting to climb.

## NB: Can you tell me more about who you train and the training you offer?

**BW:** It's now understood that one in five people is neurodivergent, although often the statistics seems to struggle to agree on this. What's clear from my work is that a significant number of individuals who are neurodivergent have an increased risk of developing eating disorders and disordered eating.

We deliver training that is directed at training organisations, charities and individuals to help them to be able to spot neurodivergence in our clients and tailor the treatment to fit the uniqueness of each individual in a person-centred way. As a therapist, I know that if we miss identifying neurodivergence in the therapeutic space, we may miss our clients altogether. We also train organisations in how to make reasonable adjustments, ensure that people's accessibility needs are met within the workspace and consider how differing ways of learning and communicating can have an effect on our working environment.

### NB: What can you tell me about your team?

**BW:** At NEDDE TRAINING, we pay attention to diversity of any kind, and we have carefully selected trainers, who are either neurodivergent or specialists in the diversity of humankind. We are dedicated to supporting those we train to understand neurodivergence and the need to break down barriers

diagnoses such as dyslexia, autism and ADHD.

I'm proud that we engage a wonderful group of trainers, the majority of whom are autistic or have ADHD or both. However, it is not an essential requirement that trainers who work with NEDDE TRAINING have a diagnosis. I know that some will disagree with me on this point, but I'm clear about my rationale as I don't believe that only neurodivergent trainers can train others in this topic.

Similarly, I don't believe that I can only work with an anorexic client, a substance abuser or someone experiencing domestic abuse if I have also walked in their shoes. I feel strongly that we must not risk encouraging a divide between neurotypical (NT) and ND people, fuelled by our past traumas, and somehow, unconsciously or indeed consciously, attempt to get even in some way. With so much division in our society, I worry sometimes that we could be in danger of moving into camps, which are not helpful.

### NB: Being congruent about who you are sounds central to the success of your business and to how you can communicate with others. Can you say more about how that looks and feels for you?

**BW:** It looks like a stream meandering along – some parts of the journey are rapid and unpredictable and other parts are gentle and joyful as we enter territories that are new, scarv and exciting. It is important to me that I am transparent, that I no longer hide my true self, as so many ND people do. I am happy now for people to see me, and truly see me. I no longer go to great lengths so that no one sees my handwriting, to ensure that I hide the huge deficits in my education. I no longer fear the words I cannot read, especially if I have to read them out loud in front of an audience. If I shake or stutter, that is absolutely OK, and I am no longer left filled with a crippling sense of shame.

### NB: That's an incredibly honest answer – thank you. In what ways have you noticed that the pandemic has impacted on ND employees?

**BW:** I have been astonished at how the pandemic has impacted on all of us and how, in its aftermath, there is a whole army of neurodivergent individuals who will be silent no longer. I watched in wonder as social media for neurodivergent folks exploded, and those who have been voiceless together found a community and a voice. One person who springs to mind is Tigger Pritchard, who is awesomely autistic (his words) and trains for us. He found a whole new world when he was forced to stay at home during lockdown, and the anxiety of everyday sensory

'I have been astonished at how the pandemic has impacted on all of us and how. in its aftermath. there is a whole army of neurodivergent individuals who will be silent no longer'

demands evaporated. Training opportunities online came thick and fast, and now he is in huge demand, both here in the UK and abroad. He's a real star!

I now often hear people say that being neurodivergent is the new epidemic of our time, but I don't believe that to be the case. I do believe that neurodivergent people have become far more comfortable discussing their neurodivergence, and the pandemic resulted in lots of adults being diagnosed with autism and ADHD, simply because they had more time to understand their symptoms and how they had spent a lifetime masking and camouflaging their neurodivergence.

The change to our pace of life, and our conditions for working at home during lockdown, allowed many ND people to learn more about themselves. The escalation of the neurodivergent movement during the pandemic caught us all unaware. Now, there are huge waiting lists for assessments and a woeful lack of professionals trained to work in this field, as well as with clients with eating disorders and disordered eating.

### NB: What did you learn about yourself during the pandemic?

BW: It was certainly interesting to observe how my colleagues and my supervisees reacted during lockdown, but as an extrovert with ADHD, I found that losing connection with others felt like losing a part of myself. As a defence against boredom, which scares me, I threw myself into work. I'm sorry to say that I even envied my autistic colleagues and friends who loved being at home and were never happier, despite acknowledging the fear of losing loved ones to the pandemic. I engaged in long conversations with ADHD friends about how we might survive life that was like Groundhog Day every day, and it turns out that we have been changed by the experience. Speaking personally, I still don't think I've truly returned to my former self.

### NB: That's quite a statement on how deeply the experience has impacted on you and your work.

**BW:** Yes, it is. It appeared to me that the practitioners who suffered most (although I know we all suffered) were the ones who get their energy from others. Many claimed that working remotely, behind a screen, felt like someone had taken the air from their lungs. I can relate to that parallel process, particularly as COVID-19 was literally doing that to so many people. I believe that, having listened to such relentless anguish and despair so intensely, we will be talking about the after-effects of the pandemic for many years to come.

### NB: How did you manage the transition to working with clients online and the demand for your services?

BW: When the pandemic first started in the UK, I said that I would never train online, but I relented very quickly as the work intensified and it became clear

that working online was going to be essential for a long time to come. As eating disorder practitioners, we were inundated with work and the phone rang constantly. Children who had been hiding eating disorders while going to school could no longer do so at home, and more people fell prey to exercise addiction (given that it was one of the few things we were allowed to do) or to eating disorders. Clients who I'd not heard from for many years came back, temporarily in most cases, to be reminded of what they already knew. We also had a lot of clients relapsing, mainly shamed into doing so by the messages they were receiving from the UK Government about the risks of dying of COVID-19 if they were living in a larger body.

Interview

I greatly admire the clients who appeared to develop a deeper level of autonomy, which they may not have expressed in person. I also know of supervisees who were left alone on Zoom on numerous occasions by clients, leaving the therapist wondering what had happened. While the benefits of working online were many, I honestly surprised myself by how much I missed meeting people in person. If there were a silver lining for the delegates I met on virtual training courses, it was that there was no longer the likelihood of me tripping over them or bumping into them, due to my dyspraxia.

### NB: What concerns do you have when NT therapists work with ND clients without

BW: My concerns are simple, especially in the field I work in – as therapists, we must understand how to recognise the ND individual. We do ND people a huge disservice if we do not understand their sensory needs and if we do not meet their accessibility needs. If we expect them to react as a neurotypical client acts, we will not reach them, we will not see them and we will certainly not help them.

### NB: Are you hopeful about the developments in our understanding of neurodiversity as a society?

BW: Yes, I'm extremely hopeful; and yet, due to the huge demand out there, my sense is that it will still be chaotic for a long time to come. I've witnessed my own neurodivergent children attempting to survive in a neurotypical school environment, which is clearly not meant for them. I hope that there will come a time when everyone can learn in an educational environment that meets our children in their world, regardless of whether they are neurodivergent or neurotypical. It is still a long way off, but I'm hopeful.

### NB: What keeps you motivated and so hopeful in vour work?

**BW:** That's an easy question to answer; it's simply the beauty of humanity and my innate belief that we are all attempting to do our very best, even if we feel we are drowning sometimes.

'I recognise the various reasons why neurodivergent people are more likely to experience mental health issues, such as depression. anxiety and trauma-related issues'

### NB: What's your best advice for therapists who are ND and trying to find their way in our profession, and who are working with employers and organisations?

**BW:** I would advise you to be *very* clear about your specific needs, ask for reasonable adjustments and for your accessibility needs to be met, and avoid going into a training institution or a workplace that is not truly invested in equity, diversity and inclusion (EDI).

### NB: What are your greatest professional moments?

BW: Last June, I developed a training course in working with neurodiversity, which was personally challenging as I revisited traumas from my past that I believed I had left behind. As I came to the end of delivering the training, I realised my work on ND and eating disorders was now officially out there in the world; I had passed on what I knew and nothing would be guite the same again.

I wanted to use my voice to speak for those who are currently silent, as I once was.

It's my hope that maybe, just maybe, I have made some impact on the lives of future generations and that things are changing. I felt I owed it to my children, to my family and to all whose neurodivergent voices have been muted.

### NB: Is there anything that BACP could do to support therapists who are ND and who are also running a business?

BW: Yes; I'd like to see BACP require all counselling training institutions to be ND aware, and offer training courses and support on how to run a business if you are neurodivergent.

### NB: Do you have any unfulfilled ambitions?

BW: Yes: I need to just stop and smell the roses; just being, as opposed to doing, is a challenge for me.

#### NB: How do you switch off and relax?

BW: Like all ADHD individuals, my mind is very busy; and yet, it is strange, I can go on holiday and do absolutely nothing. I literally stop, breathe and tune out; it feels as though I step out of my body and enter a new one, at least for a short while.

### Tell us about your workplace

workplaceeditor@bacp.co.uk