Shining with ADHD by The Childhood Collective

Episode #164: Understanding Rejection Sensitive Dysphoria and ADHD with Dr. Ann-Louise Lockhart

Dr. Ann-Louise: What I like about RSD designation is it really highlights the emotional dysregulation piece of ADHD that I think is missing from our diagnostic manual.

Katie: Hi there. We are The Childhood Collective, and we have helped thousands of overwhelmed parents find joy and confidence in raising their child with ADHD. I'm Katie, a speech language pathologist.

Lori: And I'm Lori.

Mallory: And I'm Mallory. And we're both child psychologists.

Lori: As busy mamas ourselves, we are on a mission to support ADHD parents on this beautiful and chaotic parenting journey.

Mallory: If you are looking for honest ADHD parenting stories, a dose of empathy with a side of humor and practical tools, you are in the right place.

Katie: Let's help your family shine with ADHD.

Mallory: Today, Lori and I are welcoming Dr. Ann-Louise Lockhart back to the podcast. We are excited to be talking with her again because you listeners really, really loved hearing her thoughts about promoting positive sibling relationships. And today she's back for a new topic.

Lori: Yes, she is. And for a little reintroduction, Dr. Lockhart is a pediatric psychologist and coach with over 17 years of experience in her field. She's also the business owner of A New Day Pediatric Psychology in San Antonio, Texas and the face behind one of our favorite Instagram accounts.

Mallory: In her practice and on social media, Dr. Lockhart helps parents with kids and teens, including those diagnosed with ADHD and anxiety, as well as kids who are highly sensitive. We also get a little glimpse into her personal life on Instagram. Like when you moved and

you were decorating your new house. And she's a wife of 24 years and a mom of two kids, ages 11 and 13. Thanks for joining us again, Dr. Lockhart.

Dr. Ann-Louise: Yes, thank you for having me back.

Mallory: We are so excited that you're here today. Before we jumped on, we were just talking about the beautiful weather in Arizona and in San Antonio.

Lori: Yes.

Mallory: So, you know it's bad when the saguaro cacti are dying from the heat. Like something that has always lived in the Sonoran desert, it's too hot for them, so that...

Dr. Ann-Louise: That's concerning.

Mallory: Yeah, I know it is. Well, today we asked you to join us again to talk about a topic that of our listeners may be familiar with, but some of our listeners may be hearing this term for the first time. And that's Rejection Sensitive Dysphoria, or RSD. So for those of our listeners who aren't familiar with this term, can you provide an explanation of what RSD is?

Dr. Ann-Louise: Yeah. So, this is an interesting term because it's not a diagnosis in our diagnostic manual. It's not something that we can get following testing, but it's a somewhat of a emotional behavior that Dr. William Dodson, who's a child psychiatrist, noticed. And he talked about it in a publication in the ADDitude magazine. And what he said is that it is the intense emotional response to a real or perceived failure, rejection, or criticism. And what he has observed is that he sees it in what I last read, over 99% of ADHD cases. I mean, that's practically everybody. So it's very much correlated ADHD and Rejection Sensitive Dysphoria really go hand in hand. And what I like about RSD designation is it really highlights the emotional dysregulation piece of ADHD that I think is missing from our diagnostic manual.

Lori: Yeah, and we talk about that all the time, that there is such a significant emotional component to emotional dysregulation that goes along with ADHD that is not captured in the diagnosis. And you even see this with Oppositional Defiant Disorder, where one of the core components is anger. And so many kids, that is a diagnosis, and so many kids go on to get

that diagnosis later on, because again, anger, anxiety, some of these other emotional things that we know go along with ADHD aren't necessarily captured with that diagnosis.

Dr. Ann-Louise: Which is why I think so many people push back against ODD, because they feel like it's a cop out diagnosis or that it's not capturing the emotional part of it when it's real. For parents who have a child who demonstrate a lot of this oppositional defiance, but I really think the RSD is driving a lot of that as well, too.

Mallory: Yep, absolutely. I'd say that we have listeners sending us messages all the time, asking us to, like, make an episode about how do you handle the big emotions? Because that is one of, you know, one of the top challenges in their home is their child's big emotions. And then as a parent, the big emotions you have as a result of your child's big emotions, handling everyone's emotions. Especially since a lot of the parents that are listeners here, they have kids with ADHD and a lot of them have ADHD themselves. So there's a lot of big emotions going on in these homes, and it's a real challenge for them.

Lori: Yeah. So we know that RSD is tricky because it isn't really a diagnosis in the diagnostic manual at this time, but again, so many families are experiencing those symptoms. What are some of the signs or examples of RSD that you commonly hear from parents when you're doing an evaluation?

Dr. Ann-Louise: So, what I see is really kind of on either end of the spectrum. So, when a child or a teen experiences a slight, a perceived criticism, whether it's kind of real or perceived, rejection, any of those kinds of things, they might either withdraw into themselves and isolate, pull-in, become apathetic, show signs of depression, lots of isolation, or on the flip side, they might externalize or lash out, become angry, have the big meltdown or tantrum, hit, scream, all those kinds of big kinds of things and so where you see a lot of like the oppositional type behaviors. On the flip side, you might also see to those who tend to withdraw a lot of perfectionism. Because if I am people pleasing, so if I notice that I will be rejected, if I do blank, then I will just do everything perfectly. I will please, I will make my parents proud of me. I'll make sure that nobody ever rejects me. So I will be above and beyond, pretend like I have everything together. So that's where you'll see it. That's where I think when we see these kind of co-occurring diagnoses of ADHD and anxiety, or ADHD and depression, or ADHD and Oppositional Defined Disorder, I think a lot of that RSD is what we're seeing, because they're trying to protect themselves from this criticism, this

feeling like I haven't done things well enough or that my emotions are intense and I don't know what to do with it. Or when I have these intense emotions and I see my parents or the adults in my life, they don't know what to do with it. So all of these things, they pick up on this, and then you get this spiral. And I think that's where parents feel at a loss, because they're like, you know, like, I had a reel some time ago about rejection, sensitive dysphoria. A parent just saying, hey, how'd you do in your math test? I know you were struggling, and they're like, so I guess you think I'm stupid now? Fine. Are you happy now? And I'm like? Cause that's the feeling that you get, like, no, I'm not happy that I think what I just asked you how you did on your test, but again, because you may have had these discussions, they have this perceived sense of not being good enough. All of these things. Now, they're sensitive to anything. They notice your tone, your body language. And so this is where people then get, like, at a loss. And so, this is so real on so many levels for parents with ADHD with kids with ADHD, because it comes up so often with that emotional dysregulation piece.

Mallory: Yeah. And, I mean, it makes sense why kids with ADHD might be experiencing these feelings more intensely and more frequently than your typical child because they are getting a lot of criticism and negative feedback more than your typical child. They are getting a lot of corrections on their behavior. They are being criticized a lot. They're the ones who are getting in trouble in class for not sitting still. They're the ones who are getting in trouble at home because they can't follow a simple morning routine. That will start to wear on you over time if you're constantly only getting negative feedback from the other people in your life, you do start to become hypersensitive to critical feedback because you do start to feel like you can't do anything right. And then, like you said, in some cases will lead to that perfectionism where you say, well, if I just do everything perfectly right, then there will be nothing to criticize.

Dr. Ann-Louise: Right. Exactly. And so then you get in that kind of feedback loop and the perception that they're feeling they might actually be correct. That you are disappointed, that you are frustrated, that you are expecting them to mess up. And so then their antenna is up and they're always scanning, waiting for that negative feedback. Or they're always waiting for that criticism. Because you're right, Mallory, like a lot of these kids, they're used to always getting this negative feedback, so they're just waiting for it. And so is it that they're more sensitive to rejection or is it that they do get more rejection and they're getting more criticism?

Lori: Right.

Mallory: Another area where I see this showing up in the families that we're speaking to is in their peer relationships. Where maybe like one small peer interaction that felt off leads, them down the spiral of like this person hates me, I have no friends, nobody likes me. Whether again, whether that interaction, whether that was just a perceived oddity or whether it truly was like an off interaction, it can really impact those peer relationships.

Dr. Ann-Louise: Yes. And as we know with ADHD, peer relationships are impacted for a variety of reasons. One is their impulsivity. They're saying things or doing things out of turn that could be offensive and rude to their peers. Or their inattentiveness doesn't allow them to pay attention to important details in a conversation. Or, you know, they're more immature than their peers because there's lots of evidence that shows that they're two to three years younger than their, developmentally, than their peers, so they're more immature. And then on top of that, you have a kid who then is quickly offended or over reading the room, noticing things that maybe other peers their age don't notice. And I see that, I think in the majority of kids and teens that I meet with this rejection sensitivity with peers is almost always an issue. Like almost, I don't think I've met with a single one that this hasn't been an issue.

Lori: That's so interesting. And I guess, in some of the kids that I've seen, there's been a history of bullying experiences. You know, sometimes parents will be like, well, we're not quite sure if it's bullying because, you know, in their mind, like, we will see them in experiences and they'll say that this happened when it didn't actually happen. But then there are actual experiences where kids have been bullied, and then again, that makes them much more sensitive to any type of criticism that they experience from other kids. Increased anxiety, all of those things.

Dr. Ann-Louise: Right. Because they're misreading things sometimes, or they're misinterpreting or they are actually reading it, and then they take too much offense to it and then they react.

Mallory: So you've kind of been alluding to one of my questions, and it's about executive functioning, because I know you love executive functioning just as much as we do and we know that kids with ADHD struggle with executive functioning. There's lagging executive functioning skills. So this is things like keeping their attention to tasks that are non-preferred,

getting started on things, thinking ahead to the future, and making choices now that are going to benefit your future self, like you mentioned already, the impulsivity piece. So do you think that RSD is related to these? Maybe this is a little bit of a loaded question, but do you think RSD is related to these executive functioning challenges and if so, how so?

Dr. Ann-Louise: Yeah, I think that's an interesting question because one of the things that pops in my head when I think of rejection sensitivity i, the executive function skill of selfawareness and self-monitoring. I think that is huge because it's kind of like they're aware of themselves, but it's like they're too aware of themselves, but not. Like they're kind of like misreading cues and they're not aware of their kind of their interoceptive state, like how their body and their emotions are responding to their environment.

Lori: So I'm sure we have lots of parents who are listening to the episode and feeling like they can completely relate all of what we're talking about to their child, but I know everyone is wondering at this point, what do I do about it? How do I help my child who seems to really struggle with that rejection sensitivity?

Dr. Ann-Louise: Yes. Okay, so I think a big part that we have to remember is when a child is emotionally dysregulated, they are going to trigger a parent's emotional dysregulation. They're going to trigger your nervous system because you're going to feel like you're under threat, and you might truly be, but it might feel emotionally, psychologically, physically threatening when your child is in your face, when they're yelling, when they're hitting, when they're trying to hit, when they're pretending to hit. Any of those kinds of things, that you're going to feel dysregulated yourself, which causes parents to move into punishment mode or to overreaction. So I think it's keeping in mind that, yes, it makes sense that your child's dysregulation is going to cause you to feel dysregulated. And I think we have to normalize that for ourselves and understand that that's that kind of fight, flight, freeze, fawn response with our sensory system. So I think speaking that parent self-talk and say, oh, well, of course I feel under threat because it feels threatening. And I think saying that to ourselves. I think a big one is, as I always talk about, is teaching the skills that the child lacks. So if you see that, like, self-awareness, I believe is a big part of rejection sensitivity, is if, you know, that's a big part of what they're struggling with, is you build up their self-awareness in a way that's healthy and more adaptive, because right now they're responding in a very maladaptive way. So you speak it out loud, you know, not in the moment, but try to do it before the moment.

And speaking things like, hey, I notice that you are really good at reading a room. Or I noticed that you notice people's face and body language and voice and tone, and you respond to that. That's kind of a gift, but it can also be your nemesis. And this is why. Because you might be more likely to misperceive or to see something and think that someone means something wrong, that something is wrong, or that they're rejecting you. Is that something that you notice? So, like, getting them to be aware of how they tend to respond to situations and again, building that self-awareness. And then another piece is to roleplay that. To roleplay. You can do that through speaking about it, but then also just acting it out. Just like, let's talk about how we can respond in ways that are healthier. And you could either often make it fun as well too. Like, okay, let's talk about how you often respond. And you can make it kind of light. You can respond in terms of how you might respond in that situation and then say, okay, well, that's how we would typically respond, because we feel hurt let's talk about a different way we could respond so that you're expecting the best out of someone and not thinking that they are meaning something negative against you. And let's talk about how to read body language in different ways. So if someone looks at you and looks away, maybe they don't like you, or maybe they were thinking about something else, or maybe a thought popped into their mind or maybe they got distracted. There's many reasons why someone might do blank. And so I think really helping them with that self-awareness, but also perspective taking, that people do the same thing but mean different things and help them to build that kind of like that social cues and social awareness in that sense. So I find that those things are helpful. Are they time consuming? Absolutely.

Lori: Yeah.

Dr. Ann-Louise: But we're skill building, right? And skill building takes time and it takes lots of repetition. And as we know with ADHD, repetition is so important to learning a skill, because their long-term memory starts to work and starts to store them in this file system until one day they can access it and use it successfully.

Mallory: I think you've hit on some really important points here. One of them being is a lot of this work is on the front end, the skill building and the prep. Like, a lot of it is, it's not in the moment crisis management. It's a lot of work in the beginning and it's a lot of that skill building to be prepared for the moment. Because I know there's a lot of parents who are like, when this happens, how do I respond? What do I do? And I mean, that's one piece of it, but

the bulk of the work is before the moment, right? And the other piece that you mentioned that I love, and I feel like this is just a huge piece of ADHD in general, is the rehearsal piece. And when we talk about other things, when it comes to ADHD, like self-advocacy, we're like, practice it. Actually practice that type of interaction, practice doing that. And I feel like families are hesitant to do this often because it feels kind of silly. And a lot of times as parents too, we just, we want to know what to do and then we want to make it happen versus like, working with our child to actually get their input and learn this skill. And I think that's a huge piece of it too, is, you know, get your child's input on this, right. And if you're practicing and rehearsing, obviously you have your kids input on it because they're a part of that too. So it's not just us as parents changing our behavior, although that's a big piece, it's getting them involved, getting their input, and actually practicing these things so that in the moment it is easier. And that's a huge piece of it so I love that you mentioned that for families.

Dr. Ann-Louise: Yeah, I think so often I speak to parents and they really, I see this in presentations and parent coaching, where they're like, well, when do we punish? And I'm like, get away from that mindset.

Lori: Yes.

Dr. Ann-Louise: Because punishment, it can be effective, absolutely, but you're not teaching any skill. You're just creating a situation, especially for kids who are rejection sensitive. You're creating a situation where they just get better at hiding things. They go further into themselves, they get more anxious, more rage, and then they're still not learning a skill. So, I think we need to move away from thinking, oh, when our kid is rude or when they do this thing that I should just punish, it's like, well, or you could teach them the skill that's more effective in the long term.

Mallory: Yeah. And also for, as a parent, when you're using punishment and it's not working, you feel like each time you're having to up the ante. Like first at, first your consequence was, you know, no tablet today. But then you like find yourself up in, oh, it didn't work last time, so now no tablet for a week, and pretty soon, you know, I'm, throwing the tablet out or it's not working. So you are like upping the ante and then in the end you're punishing yourself as a parent with a lot of these consequences and it's not effective, it's putting a strain on the relationship with your child. But I do think there's a lot of parents that are like, okay, if I'm

not punishing, what am I doing in the moment? How am I talking to my child in the moment when they're telling me when I try to provide a piece of critical feedback and there's an emotional meltdown. Or my child is kind of processing through the social interaction that they had at school and now they think everyone hates them. How should parents handle that in the moment, regardless of how much prep they've done? What do they do in the moment?

Dr. Ann-Louise: That's where that kind of quiet presence comes in. So your child says something, say there's something dramatic that happened at school that they perceived as dramatic, whether true or nothing. It's you listening and empathizing and validating. Oh, wow, that sounded tough. Oh, wait, and then what happened? Oh my gosh, that sounds like that was really hard for you. Like really being present and being with them, joining them in that process, that storytelling, that drama situation, and then being curious about it. So wait, wait, wait, let me get this right. So when they sent that text and they left you out of the group chat and you thought they hated you, then what happened? Like, what were you thinking at that moment? Like being curious and kind of asking reflective questions so that hopefully in the process maybe your child has some self-awareness, they have an epiphany. But a lot of that is just being with them in the moment. And that's with anything, whether it's a misunderstanding with a sibling or a parent or a friend or a teacher. I think it's just that empathic, validating, reflective, curious response. Because you want them to, you want to, to me it's like you're mirroring. You want to mirror back what they're giving you. So that way maybe their brain starts to realize, wait, that's not exactly how it happened. Or wait, that sounds kind of ridiculous. Or wait, why did I have that reaction? And then hopefully they start to see it from your reflection, not being judgmental or what you need to do is giving advice that they don't need, it's just reflecting it back to them. So I think that's a lot of what you can do in the moment when they're kind of escalating or, you know, have this reaction is that you give it back to them and you stay as calm as possible and you join them in whatever misery they're in in that moment.

Lori: Yeah, it's a hard balance. I know my daughter is an anxious kiddo, and when there's difficulty with friends at school, it's such a hard balance to not want to like jump in and say what she was doing wrong immediately or give feedback on that. And it is, it's a tricky balance of really listening and validating, but also being there to kind of help them through that and help them understand those situations too when they need it.

Mallory: And I think one of the benefits of doing all of this front loading and practice and talking with your child about this on the front end, is that in the moment you have a common language with your child to actually talk about this and they understand what you're talking about. If you're talking about the rejection sensitivity for the first time in the moment, you're probably going to get an even bigger reaction from your child, right? But just like, just like when your child is anxious, then in the moment when they're feeling anxious, you already have that common language to talk about it with your child and they get it. And then they can more easily kind of tap into the skills that you've already practiced and you've talked about. So another benefit of it is just having that common language and being on the same page as your child and that will help you in the moment as well. Although it is just really tricky in the moment. Especially, you know, you're a parent and hearing your child experience the feelings of rejection, it's not easy to, it's not easy to hear that you feel for them.

Dr. Ann-Louise: Yeah. And I love that common language piece because it's really about validating your child's experiences so that they don't feel like they're too much for you. Because if they know they're not too much for you, then they know they're not too much for themselves. Because if my grown-up parent doesn't know how to handle my emotions, how can I handle my emotions? So, it's a really, it's a big thing to ask a parent to regulate in that moment, but it's such an important lesson for our kids, too.

Mallory: Yeah. I love that. So, this has been so helpful Ann-Louise, we really appreciate you taking the time to share your expertise about rejection sensitive dysphoria with us today. I'm sure that all of our listeners, well, I'm sure that a ton of them have already connected with you on Instagram, but if they're not connected with you and the resources you provide and everything you have to offer families, let them know where they can find you and what you have to support them.

Dr. Ann-Louise: Yeah, definitely. So they can find me on Instagram @dr.annlouise.lockhart, I post tons of stuff on ADHD and highly sensitive kids, anxiety. And they also can find me on my website at anewdaysa.com, and I have resources, courses, parent membership, and I have several courses on ADHD and executive functioning that they can tap into as well. So, yeah, those are my resources that I have available.

Mallory: I love that you have lots for our families that I'm sure they'll be interested in so we will be sure to link all of those things for them in the show notes. Thank you again for joining us today, Dr. Lockhart. We really appreciate your time.

Dr. Ann-Louise: Thanks for having me.

Katie: Thanks for listening to Shining with ADHD by your hosts, Lori, Katie, and Mallory of The Childhood Collective.

Mallory: If you enjoyed this episode, please leave us a review and hit subscribe so you can be the first to know when a new episode airs.

Lori: If you are looking for links and resources mentioned in this episode, you can always find those in the show notes. See you next time!