

- Hey, and welcome to PCTY Talks. I'm your host, Shari Simpson. During our time together, we'll stay close to the news and info you need to succeed as an HR pro. And together, we'll explore topics around HR thought leadership, compliance, and real life HR situations we face every day. Joining me on the podcast today is Jenny Jeep Johnson. She is a jack of all trades, master of many. She has formal education in theater, and a Juris Doctor, and some continuing education certificates from Cornell. She has acted professionally, she's held public office, she's a public speaker, she's won sales awards. Jenny, thank you so much for jumping on with me.

- Thank you so much for having me.

- So I wanna set the stage for our audience by starting a little bit with your background, as it relates to our discussion today. And our discussion today is really around multi-passionate neurodivergent individuals and how they're navigating the workplace. So let's start with this, when did you first think there might be something unique about the way that you see the world and work through it?

- Well, first of all, let me say that the way that you just described being somebody like me is the kindest, most beautiful description. Or even the idea that there was a point where I discovered that I might move through the world differently than other people. I think for me, and like many other people like me, I didn't suspect that there was something different about me, I suspected... Or I knew, I felt my whole life like there was something wrong with me. But not in terms of a diagnosable thing, like I'm a piece of poop, what is wrong with me? Why can't I do things that are, quote, "simple things" that other grown adult people or even as a young adult that I felt like I struggled with so much more than anybody else? So for me, I actually don't think that I ever would've really gone through the diagnostic process if my daughter hadn't been diagnosed at a very young age. The long and short of it is that we were... She was diagnosed at three years old, which is a little bit on the younger side. And I naturally wanted to know how to parent her. We went to a parenting class and they were sort of describing how her world is. And can you imagine, if you moved through the world experiencing these things? And I was like, "Yeah, she's an alive human on the planet." And I remember my husband's head-

- Like, "Doesn't everybody go through the world like that?"

- Right. His head snapped toward me and he was just sort of shaking his head back and forth, like, "Uh-oh." It was really the first time anyone had put language to what I felt was like how just the world was, but was talking about it in terms of this level of dysregulation or these challenges. Imagine if you experienced these things. And I was like, "But I do." So that was really what kind of led down my diagnostic path and to where I am now.

- So when you finally decided to have that conversation with a doctor, what did they diagnose you with and how did they go through that process?

- So my experience was, I already had a very comfortable... I was already very comfortable with mental health and mental health support and I was already seeing a counselor. And so she made a recommendation to a psychiatrist who does the formal testing. And it was quite extensive. Over multiple days, there were any number of tests administered. Some of them what we think of more as a IQ assessment, others were verbal, others were shapes and sounds and word associations and things like that. And I melted down day one, test section two. I cried and I was like, "Is this normal?" And so needless to say, at the end of all that, he kinda put everything through a hopper and sat down and kind of went through the analysis of what he saw. And that's when I learned. I think a lot of us have a very weird sense of humor about these things because I remember him saying to me that there were certain segments of the tests where I tested in the top half of the top 1% of the population. And then we got to another section and he was trying to explain my score and he said "This was a little bit of a... Can I ask, have you ever suffered a traumatic brain injury?"

- Oh no!

- And he didn't mean it judgmentally, but I felt like that moment sort of perfectly encapsulated my experience on this planet. I have always known that certain things come easily to me. I'm very comfortable with them. And even at some point, you become aware that you're more comfortable with them than other people are. And then these other parts, where it's not like I struggle, it's like my brain doesn't allow me to use it. So we'll say things like, "That part of my brain is dead," or, "Nope, just not happening." And so it was kind of validating to have somebody else see what I had always felt.

- Once you got your diagnosis and you knew you were down this road of ADD/ADHD and the way you were wired and your perspective in dealing with your daughter and how that kind of opened your eyes to the way you moved through the world, how did that change how you approached work?

- Well, first of all, I would say, growing up, you hear about kids with ADD, we called it ADD a lot more at that time. And I remember them asking how I felt as her parent when she got her diagnosis. And I remember saying, "I don't feel anything because I don't actually know what that is." And so the first part of the journey for me was understanding what that meant, what executive function is, why that is so connected to what we hear people call adulting or organization or things that generally make you feel whether you're put together or a

hot mess. And so that was kind of the first part, was learning what even it all is and then where I kind of plugged into that. As far as having evolved through that, I would say now the way that it sort of intersects with the way I approach my work is that it was a very, I don't know if freeing is the right word, but it really allowed me to accept my strengths as actual strengths. Because that was the next step in the, if I was going to accept that the things that I struggled with or that just were not skills that I had as not being weaknesses, but rather a part, just a result of how I'm made. And I think, as women, but also in the ADHD community, and then of course when those bubbles overlap. We talk all the time about imposter syndrome. I'm sure you've had so many conversations about it. And I think for people with ADHD, that that idea of imposter syndrome can be more pronounced because you don't... You're masking so much all the time to try to appear as somebody who isn't struggling with the things that we quote, say are, "Simple tasks." And I love my counselor because she said, "You need to stop saying simple like you can't do simple things because they're not simple if they're not simple for you." And that really helped me understand. So needless to say, if I was going to accept that that wasn't... There was nothing wrong with me, that my brain didn't wanna do certain things or couldn't do certain things, then certainly the next phase of that is accepting that the things I am good at aren't accidental but true and real, also as a result of how I'm made. And when I got to that point, it allowed me to be much more honest with my coworkers or the people who reported to me or environmental accommodations I felt that I needed because they lived in the realm of factual then and became accommodations that could assist me instead of avoiding being put in a position where anyone would discover that I wasn't able to do what I felt like should have been something anybody could do.

- How did you go about having that conversation with your leadership, and for that matter, your direct reports on what do those accommodations look like for you? Because your accommodations are gonna be very unique compared to somebody else's in this space.

- I'm so glad that you said that because, as with every single population, there's no such thing as a monolith. When we look at what accommodations people need, but also in terms of our ability to communicate them in the first place. Just because you have a condition that puts you in the realm of neurodivergent doesn't magically mean that you're better than everybody else at self-assessment or presentation or communicating feelings around them. That is something that you have to want to develop as a person. And communicating them can also be really challenging because you never stop being any of your other characteristics just because you're talking about neurodivergence. So when I approach a male superior, I don't suddenly shed any of the complications that come with communicating with a male superior as a woman or for people... Everything's always so dynamically at play, so I just... It makes it tricky to be like,

"Here's how you should do it," 'cause I can only speak for what worked for me. I would say that I have approached this with sort of radical honesty and acceptance. So I'm very comfortable saying things like, "Hey I noticed that we have this task or this thing or this new policy that mandates that we all complete X task. I am going to be honest with you, that's going to be a very difficult thing for me to do." So I usually try to come up with an alternate way of accomplishing the same goal that I can present and see whether that's acceptable. But I've honestly been really surprised by how often it ends up sort of leading to an overview of why that thing is being implemented in the first place. Because if it's so alienating if somebody that speaks up about it, then it's kind of like how many other people might this be affecting? And then ultimately, what's the goal that we're trying to accomplish in the first place? So I'm always very willing to sit and talk about those things, but I do understand that I perform a huge amount of unpaid labor in assisting with things that are not technically within my job description. So I think you just have to be honest with yourself about what you're willing to do in order to feel the way you wanna feel. And it's certainly not anybody's responsibility to educate everybody on what these things are, but there are times where I choose to do that because it ultimately makes my job easier and I and my goals are aligned with the company's goals, and then it just is more seamless that way. When it comes to my direct reports, it's a little bit different in the situation that I'm in now because I don't have any direct reports. But previously, I had a staff that worked for me and I was just as honest with them as I would be with somebody I report to. And we really found ways for all of us to create a little ecosystem, because turns out, sometimes they struggled with some of those things but somebody else found those things really... Scheduling, for instance, huge problem for me. So somebody else might really thrive in sort of that executive assistant role where those kind of tasks are very comforting and very simple for them. And then we were able to kind of accommodate one another. And both of us ended up in a position where we were thriving more than we would've before.

- And what a great way to open the door about inclusion. Sharing the conversation that you had with the supervisor about the task or the process and starting to kind of challenge those questions like, "Okay, well why are we doing it this way? What is the goal we're trying to get to? Can it be done in a more seamless way or more organic way for different people?" What a great opportunity to have those tougher conversations about the broad definition of inclusivity and what that really means across different people. I wanna switch gears just a tiny bit as we close out our conversation and just get your perspective on this. We know that there's an Adderall shortage right now out there, and so there's a lot of amazing neurodivergent people who are struggling right now because they've had this resource that has helped them navigate their jobs, their families, those kinds of things in a different way. And so they're having to cope. So for those people that

might be listening, that are in that space, what hope, what advice do you have for them as they kinda navigate until that shortage is no longer a thing for us?

- So if you weren't aware that there was an Adderall shortage before you listened to this, hearing me ramble through answers might be the tip that that's a problem. It's very difficult to be linear when you naturally are excited by various things that pop up within the course of a conversation. So thank you for your patience on that. Second of all, I would say there are things that we know help our brains. The reasons stimulants are so effective for people like me is because they provide a stability that my brain can't get to otherwise. Which is why, for someone like me, there's no such thing as a sort of hyperactivity that happens when you're taking methylphenidate. For me, and for people like me, it actually has the opposite effect that you would expect. It's very calming. When I was getting my dosage in order, sometimes it would actually make me fall asleep. So it's very... It always cracks me up when they're like, "People just wanna hop kids up on drugs." And I'm like, "Have you ever seen what happens to a child or a person who doesn't have ADHD when you give them these drugs?" No one would want that! It would be chaos. So look into why these drugs, how these drugs work in the brain. And then there are ways that you can sort of artificially, hopefully temporarily, help yourself with getting a hit of dopamine, same stuff that actually helps in a lot of different situations. Getting outside, quick bursts of exercise, any of the things that can help give you a little jolt of those chemicals. A lot of people will find themselves snacking a lot more when they can't get their medicine. And it's not... I mean, it can be an appetite suppressant for some people. But most often, people end up not eating as much because they're not constantly looking for a way to get a hit of dopamine. So maybe in this time, go ahead and snack away, I don't know. Get some chocolate. And then also just be really kind with yourself. I think for me, being on the medicine feels like nothing to me. It's only in the absence of it that I've realized just how huge of a role it plays in helping me focus. And I think that, for people who have people working for them, and if they do see sort of a marked difference in their ability to make eye contact during conversations or they're shifting in their chair or things like that, it might very well be because they just don't have access to some of the major tools that we use for this. So it may also affect mood. You may have more anxiety, more depression, and that's all very normal. It just might be an additional thing that you have to cope with. So we all just need to be a little more patient with ourselves in these times of no stimulants.

- What a great way to end our conversation, on kindness, right? I mean, we all need to be kind to each other, but this has been a great conversation and opened my eyes up to some things that I need to think about as an HR practitioner, is working with neurodivergent employees and the things that they might need or resources we might need to talk

about so that we can open the door for them to feel comfortable to have those conversations. So Jenny, thanks for taking a few minutes of your day.

- I am so happy to have been here. Thank you so much.

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