

PFA Tips

Addictions and Neurodiversity Part I: Defining the Problem

As a psychiatrist and therapist working with neurodiverse teens and young adults, here's a scenario that we hear from parents frequently:

“I can't believe how much time my son spends on electronics. He wakes up at 1PM, does nothing all day, then plays video games till 4 in the morning. He must be addicted, right?” Well, yes...and no.

Addictions—whether to electronics, substances or some behavior like gambling or sex – is a complex process, made even more complicated by the emotional, cognitive and behavioral issues that come with neurodiverse brains challenged with ASD or ADHD.

What is “Addictions”?

What does it mean to be “addicted”? We think about addictions in the sense of using or doing something too much – too much computer time at night, too much marijuana every day, too much time looking at porn.

Another element is that the behavior is getting in the way of normal functioning – and that the person keeps doing it even though they can see that it's not entirely good for them. For example, your loved one might be addicted if:

- They're avoiding schoolwork to play video games with their friends at 1AM -- and failing because of it.
- They can't go out with friends without smoking weed or drinking -- and are not learning to use healthy coping strategies to deal with their emotional issues.
- They're going to the casino, spending their family's money on gambling -- and are destroying the relationships with the people they love the most.

Addictions and the brain

If we look into the brain of the addict, we see that a certain part of the brain

– the reward center – is “hijacked” by the substance or process. The reward center has learned that if it repeatedly engages in an addictive behavior; it will get “squirts” of dopamine, the pleasure neurotransmitter.

And who doesn't want to be happy? So the reward center drives the brain to seek the substance or process again and again; and eventually rewires the brain to ignore basic needs – work, food, school, relationships, physical safety -- in pursuit of the addiction.

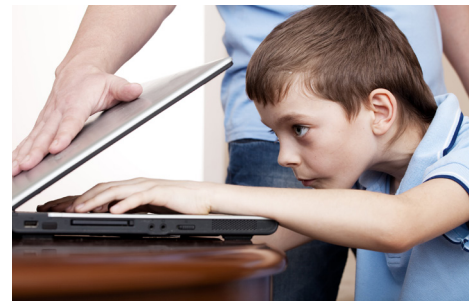
Over time, the reward center receives less dopamine in each “s squirt” -- so the person develops a tolerance and spends more time performing the addictive behavior to chase the dopamine.

And it doesn't matter if we're talking drugs or games or sex; all addictions have the same roots in the brain.

Is my loved one addicted?

The use of potentially addicting substances or processes forms a continuum -- from a little dabbling and experimentation to “normal” social use to overuse to true addictions.

So where does your loved one fall on this continuum? To answer that, let's spend a moment on the issue of overuse -- which differs from addictions in two key ways:



First, addictions present a bigger problem for our loved ones in terms of its more extreme impact on healthy functioning. If the addiction is not treated, the impact can be catastrophic to an individual's life – physical health, emotional issues, lifestyle issues, and premature death.

Second, overuse is relatively easier to treat. Even though their external behavior might appear problematic, the overusing/ non-addicted person will have an inner readiness for change that the addicted person won't have and an emotional openness to learning healthier behaviors and tapering down problematic ones.

Providing individuals with productive alternatives will often lead to them beginning to change their habits because their brains are not sufficiently hijacked to prevent learning new habits. This is true whether the overuse is electronics, alcohol or marijuana.

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Addictions: Part I – cont.Proud Sponsor of
PFA Resource Center**Why does my neurodiverse loved one overuse?**

People overuse to modify emotional states which feel intolerable or overwhelming – including being social, seeking work or doing school. Without endorsing overuse, we can view it compassionately: avoidance or numbing through overuse balances the almost paralyzing anxiety these individuals often experience.

Although addictions and overuse can be angering and scary for us, appreciating the inner workings of our loved one's psyche – that is, what got them into this problem in the first place – will go a long way to making the journey towards better mental health more manageable and successful.

We can't emphasize this point enough: caregivers need to take full stock of the reasons their loved ones overuse in order to be the best possible guides towards their health.

To that end, let's take a quick look inside the ADHD and ASD brain, which broadly speaking can be extremely poorly "regulated." Genetics drives the development of the brain in utero, so your loved one – even before they have to deal with the demands of school, social life, jobs – is born with a brain that does not manage many brain "software packages" well – sensory perceptions, emotions (mood and anxiety), impulse control, focus, the ability to be cognitively fluid (read "rigidity").

And if your loved one's brain can't effectively regulate itself well from the get-go, how can they possibly do well in school, in the family, in social relationships or on a job? Many of our neurodiverse loved ones struggle to keep up with peers and have a sense of being behind, being different, even being a failure. No matter how hard they try, the successes are tougher to come by. So they may feel hopeless, anxious and depressed, and suffer from low self-esteem.

When we talk with them, they might tell us that they're bored or sad or tired or lonely. But whatever words they use to describe their experience, at the root of it they don't feel good, don't feel that they have control of their inner life or outward behaviors. As one person put it, "I feel like a pendulum without the dignity of center."

Why do gaming communities such as "Discord" and "Role Play Games" appeal to the autistic population?

Cue the substances and the electronics and anything addictive. Why? Because our loved ones want to feel better, or numb, or be stimulated, or to avoid real life because anything feels easier than that. So they start using a little bit, and it works – they feel good for a little while. And then their reward center whispers to them "If you used a little and felt a little better, then if you use a lot more, you'll feel a lot better."

And so the cycle begins. Healthy behaviors shift gradually to those activities and patterns that provide relief from pain – and for some, provide what feels like the only source of pleasure in their lives.

Using social media for somebody with ASD provides the added benefit of being able to engage with peers in a more comfortable, satisfying manner than if they were to try to tackle face-to-face communications, dating and making friends. If you skip the struggles of mastering real-life social cueing and instead create a world of like-minded peers with whom you can engage successfully in fulfilling social connections – well, it's hard to argue someone out of that behavior.

Additional Resources

PFA Tips: Addictions and Neurodiversity - Getting Help
<https://pathfindersforautism.org/articles/behavior/pfa-tips-addictions-part2/>

Pathfinders for Autism Online Provider Database
<http://pathfindersforautism.org/providers-services/>
Choose category > Mental Health and Counseling

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