A fact sheet about

When a big feeling hits

Understanding Zoe

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When a big feeling hits

Why thinking does not help yet, and what you can do instead.



Key points

- In the first few minutes of a big feeling, the part of you that plans and thinks things through goes quiet. So talking yourself down often does not work yet.
- What may help is cutting the input (definition below): fewer demands, less noise and light, less talk, and no decisions.
- Choose one physical action ahead of time. A plan made on a calm day can still work when choosing feels impossible.
- If you seek out sensory input, cutting the input may mean swapping it for a kind you choose, such as pressure or movement.

Why reasoning with yourself does not work yet

The kettle is going and the TV is on, someone asks what is for dinner, and your phone buzzes with a message you need to answer. Within a minute you are close to tears or about to snap, and every voice in the room is too loud.

Most advice for this moment asks you to think. You are told to count to ten, look at it another way or work out what you are feeling. But in the first few minutes, thinking is the hardest thing to do...

When a feeling arrives at full size, your body treats it like an emergency. The part of your brain that plans and thinks things through is one of the first to go quiet. It comes back as the alarm settles. You can read more about what happens in your body and brain here.

Autistic adults who have described their meltdowns say the same thing. Most felt flooded by sounds, feelings and what people wanted from them. Many found it hard to think or remember in the middle of it. That study was with autistic adults, but the emergency response behind it happens in every brain. So if you are ADHD or neurodivergent in another way, this can fit you too.

So the first job is to stop adding to the load, and calming down can come after the thinking part of you comes back.

What cutting the input means

Input is anything coming in that asks something of you: some of it comes through your senses, and some of it comes from people. In the first few minutes, it may help to drop four kinds first:

- demands: put down what you were doing, because it will still be there in ten minutes
- noise and light: leave the room, switch something off, close your eyes or cover your ears
- talk: a question is input, even a kind one, and so is having to answer it
- decisions: nothing needs deciding right now, including what to do next

Many autistic adults say everyday sights, sounds, touch and smells hit them harder than they hit other people. ADHD adults describe both stronger and weaker reactions than most people. If you are neurodivergent in another way, your senses may work differently too, and the steps below can still help.

Not everyone needs less of everything, because some people mostly avoid sensory input and some mostly seek it. Many are a mix, and may avoid noise but seek pressure.

If you seek input, silence and stillness may feel worse. What may help is input you choose, like firm pressure, a fast walk, rocking or cold water. That still counts as cutting the input, because you are swapping what is coming at you for something you control.

Most of the sensory research is with autistic adults, and there is less with ADHD adults and more broadly neurodivergent adults. Research like this has often left out BBIA (Black, Brown, Indigenous and Asian) people, LGBTQIA+ people and other groups. Your lived experience is what is most valid. The advice to cut the input first comes mainly from what autistic adults say helps them. It has not been tested in research yet, so it is anchored in lived experience and in what the community shares about it.

The one thing to try: one action, chosen ahead of time

Pick one physical action on a calm day, and decide when you will use it. This is called an if-then plan: if this happens, then I do that. Research shows people stick to plans like this more often than to a general idea of what they should do.

It may help here because the choosing is already done. In the moment, you only have to do the thing.

Make it physical, small and possible wherever you usually are:

- go to another room, the car or the garden
- put on headphones or earplugs
- lie on the floor, or under a heavy blanket
- turn the lights down and sit with your back to a wall
- hold something cold, or run cold water over your wrists

Make the "if" something you can notice from the outside, like your voice getting sharp. A feeling inside you may only show up late. Then write the plan as one line, such as "if my voice gets sharp, I go to the bedroom and put headphones on".

You can keep that line in your notes in the Understanding Zoe app. You can also set a reminder to read it again on a calm day.

Some places do not let you leave, like a family event or a day of caring for someone. Keep a smaller version for those, such as headphones in, eyes closed or a few minutes in the bathroom.

What to say, and what tends to make it worse

Agree on one sentence ahead of time, because words can be hard to find in the moment. "I need ten minutes, I am not upset with you" covers most situations. If speaking is hard, a hand signal or a text you have already written can do the same job. You can read more about explaining what helps to a partner here.

Leaving can look rude at first, and the sentence helps with that. These things often make it worse:

- being asked what is wrong, or why
- being told to calm down, or to breathe
- touch you did not ask for, although firm touch helps some people
- trying to sort out the problem or the argument now
- going back into the room before you are ready

When the feeling eases, you may not be ready for the next thing yet. Keep the input low a little longer, and have some water and food if you can. Talking about what happened can wait until later, or until tomorrow.

Getting support

This page describes what many adults say about themselves. It is not an assessment, and it cannot tell you what is going on for you.

You can ask for support at any point, however often this happens. A GP is a good place to start. A GP can also talk with you about a Mental Health Treatment Plan, which can lower the cost of sessions. Different health professionals can help with sensory needs and with plans for moments like these. Your GP can help you work out who is right for you. You can also book a telehealth session through Understanding Zoe.

If you are not safe right now, call Lifeline on 13 11 14, at any time of the day or night.

Sources

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