

Edy Hurst - It's Ableism

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SPEAKERS

Cerys Bradley, Edy Hurst, Miggy Barker

Cerys Bradley 00:00

Hello and welcome to It's Ableism, a new podcast about disability and ableism.

Miggy Barker 00:04

A cool, sexy podcast about disability.

Cerys Bradley 00:07

That's right, it's the podcast where we make structural ableism funny

Miggy Barker 00:11

in a way that's definitely helpful.

Cerys Bradley 00:13

Yes, that's exactly what we're aiming to do be helpful. My name is Cerys Bradley. I'm an autistic comedian and a level maths teacher.

Miggy Barker 00:21

And my name is Miggy Barker. I am a performer, writer, and I am a wheelchair user.

Cerys Bradley 00:27

In this episode, we're talking about diagnosis and how the story we tell ourselves about diagnosis being some kind of cure

Miggy Barker 00:34

is ableist.

Cerys Bradley 00:35

Yeah, it's ableist. Actually it is. It's very ableist. And to have that conversation, we're joined by Edy Hurst, award winning musical comedian and podcaster whose show, Edy Hurst's Wonderfull Discoverie of

Witches in the Countie of Himself, explores, well, actually, this very topic, and also the Vengaboys, I think,

Edy Hurst 00:54

yeah, exclusive actually a lot more Vengaboys than than many people expect from the title and the marketing images.

Cerys Bradley 01:03

I saw someone the other day, and they were singing a vengaboy song, and I, like, it was like, like, I was a sleeper cell, because it's the same song from your show, from one of the like, the, I don't want to, like, spoil it, but one of the bits where you do real magic on stage, and I was like, it just like, evokes something in me. I was like, we need to set up a salt circle for what's about to happen. So you have fundamentally changed my relationship with the Vengaboys forever.

Edy Hurst 01:39

I'm delighted and sorry. Thanks for having me. Thank you. Thanks.

Cerys Bradley 01:44

We will welcome you onto the show by forcing you to be the judge in ableism of the week. This is how we start off every episode. It's the bit where we share a thing that's happened to us which we think is ableist, and then, because I'm a very competitive person, one of us is going to win the conversation. So Miggy and I are going to battle it out for the ableism of the week. Edy, you are the judge and the decision that you make could make or break this project.

Edy Hurst 02:11

Excellent. Very excited to be the ombudsman of this.

Cerys Bradley 02:14

Miggy, do you want to go first? Or should I go first? What do you feel?

Miggy Barker 02:19

I can go first? My ableism of the week happened today. I had to go to the pharmacy. I went. I went to the pharmacy. Went to the one that I found on on like maps to be accessible and like near me and all of that. I went and no, it wasn't. Massive step, and I tried to get someone's attention inside, and no one saw me. So then I had to go to a different pharmacy. Luckily, there are pharmacies everywhere, but went to another pharmacy, which also had a step, also listed as being step free online, but has a step. There was a security guard. Why there was a security guard, I don't know, but there was a security person, like at the door, and I managed to get their attention and ask if they had a ramp or something, and and they were like, Yeah, but I'm not allowed to use it, like, I can't get the ramp for you. And I was like, Okay, could you get someone who can to get it for me. And she was like, Oh, yeah, sure. And then went and did that. Like, that's brand new, a brand new thought no one could ever possibly conceive of. So then I was waiting for a good couple minutes, but a guy came. They had a ramp. Put it down, the wrong way around, put it down. And then I, like, went in, did what I needed to do, on my way out, again, same security guard was like, Hello, could you can we get the ramp back? And she looked confused as

to why I would need that. But then, turns out the ramp had never been put away. It was still like in the doorway, which is like, great, because normally they hide it from me, but it had been knocked over and was now just on the floor and not actually a usable ramp. So then I had to get someone's attention to make it a ramp again so I could leave, and that's on picking up medication at the pharmacy.

Cerys Bradley 04:16

I realized later, when you said that the ramp was upside down, like, because it's, you know, like a, like a, you know, like two dimensional sheet, you can put it, but when you originally said the ramp was the wrong way around, what I was imagining was like a wedge, and they had put it so that the pointy end of the wedge was at the step and then the wide end...

Miggy Barker 04:40

Honestly, I would not put it past some people to do that.

Cerys Bradley 04:43

It's a tough one to beat, but I think I might have it, because we are returning to stories of toilets in the school that I work in. So my school, it's got two gender neutral toilets and. And then it's got a handful of disabled toilets. And I've complained previously about, can I get a key to one of these disabled toilets? Because there's, in general, not enough toilets in the college, and there are no staff specific toilets, my only options are using the same disabled toilet, same gender neutral toilet that the students have access to. There's not very much space in the college for kids to exist, and so a lot of them hang out in the toilets, which makes being able to use the toilet in lunchtime between lessons like virtually impossible. Came in on Tuesday, I think, to find out that the disabled toilet, which was on my floor, they've added a second lock to so it has a lock in the door, so that when you go into the toilet, you can lock it from the inside. They've then put a second lock, which is a key lock, and the idea is that you're supposed to keep it locked with that so now only people who have the key have access to the toilet. So that obviously, is a problem in and of itself, because there are disabled students in the school, and also there are students who, like, want space to themselves. Like, there's lots of reasons why kids want to be able to access this toilet and they don't have the key. So that's ableism number one. Ableism number two: no one was informed that they were doing this, and so when we came in, nobody had the key. So it's not just that students didn't have the key, like staff also weren't given the key. I feel kind of lucky because my line manager noticed first and went on a hunt. And it turns out there are not very many keys to this toilet. And so she managed to get me one of the very few keys to the toilet. So that's ableism number one is like the fact they've done this in the first place. Ableism number two is they haven't told anyone having, like, done like, a staff check and given relevant people the key. Ableism number three, staff don't want to use the stools or urinals that kids are using. I appreciate that is a difficult position for them, and so mostly they want to use a disabled toilet. But also they are, you know, like human beings. And so for them, the disabled toilet is the toilet that you shit in when you come in in the morning. And so it's quite difficult to access the toilet first thing, because that is where everybody is pooping. It's people's preferred place for that. And so people like this toilet. So they weren't very happy that it's now only accessible by key. And so our department managed to get another key, which is now on a lanyard, which hangs up in one of the offices, like, I don't want to tell people who can and cannot use the toilet. And I think, you know, people have their own reasons for wanting to use the toilet, and I sympathize for why they want to use the toilet. But now there's just like a rotation, first of all, of staff

who come and get that key. And first of all, it's basically announcing to everybody on the floor, I'm gonna go have my poo now, because they've gone to get that key. But also, I now get to see all of the staff who, like, I don't want to make the assumption, but I know that they don't need to use that. They could use a different toilet. I now get to see all of the ones that they just they're basically the disabled toilet gets treated like a staff toilet, because we don't have staff toilets. So those are the three, three layers of ableism in that key debacle.

Cerys Bradley 04:44

Wow, I dunno, like, as we recorded, I just saw Miggy's face, like, just how matter of fact it was, obviously everyone's going to shit in the disabled toilet. First thing you do, you wake up in the morning, you go to disabled toilet, you drop a bomb, you get out of there.

Miggy Barker 08:43

What do you mean? Is this the whole shit on company time thing?

Cerys Bradley 08:47

Yes, yes, yes, it is. It's a legitimate thing.

Miggy Barker 08:49

Carry on then.

Cerys Bradley 08:50

Pooping on company it's very difficult, because the anti capitalist in me is struggling against the like, disability activist. Because, like, I want both of the obviously, the solution here is that we just get staff toilets. Like, if we get staff toilets, this problem goes away.

Edy Hurst 09:08

Yeah you really should have staff toilets. I find it mad from a safeguarding point of view, that it is the space where everyone does the dirtiest bits is shared with everyone.

Cerys Bradley 09:20

The school needs more toilets. It needs staff toilets. It needs a particularly nice toilet that people can poop in so they stop using my one. So that was my week. Anyway, who wins? Edy?

Edy Hurst 09:34

Oh, great. Okay, good question. So I actually, I think they're both terrible. I have, I have a pitch, though, to try and solve both of them, right? So we know that there is a security guard outside the pharmacy. However, it feels like really, the security guard would best be placed by the disabled toilet to ensure that it's being used appropriately, and even just have somebody there with the vibes of like, don't muck around here, guys, I think that's a good solution for both of these. Thank you. Thank you.

Cerys Bradley 10:06

You've misunderstood the task. Edy. You're not trying to solve the thing.

Edy Hurst 10:10

Have I just gone? You know what this problem needs? Police! Great.

Miggy Barker 10:13

Yeah, that's exactly what you've done.

Cerys Bradley 10:16

You're meant to be picking which one is worse, who wins.

Edy Hurst 10:19

I know, I know. It's hard.

Miggy Barker 10:21

Cerys needs to know.

Edy Hurst 10:22

In terms of which one I think the ableism is, is the worst off, I would say, Miggy your experience, because I also feel Cerys that there is a massive safeguarding issue with what is the whole situation there?

Cerys Bradley 10:37

Yeah, yeah. And we've now spent like half our time talking about the ableism the week...

Miggy Barker 10:47

That's alright!

Edy Hurst 10:49

I have a big question I'd like to play my 3d printed ocarina before I ask it.

Miggy Barker 10:53

Oh, please do

Edy Hurst 10:54

[plays a weird little tune] There we go. How come getting diagnosed with ADHD didn't magically solve all of my problems?

Cerys Bradley 11:03

Ableism. Ableism is why that's that's the case.

Miggy Barker 11:05

So, Edy, you are diagnosed. And also, Cerys is diagnosed? Is this correct?

Cerys Bradley 11:10

Yes, I got, I got a, I got an autism diagnosis as an adult.

Miggy Barker 11:17

How was that?

Cerys Bradley 11:18

From the NHS. I would not recommend it. To be perfectly honest, I wouldn't say that it was a particularly enjoyable experience. I think if I had the same connection to the online neurodivergent community that I have now, if I had had that seven or eight years ago when I first asked my GP whether or not getting a diagnosis might be possible, I don't think I would have done like I think I've read a lot more about self diagnosis and the ways that you can advocate for yourself without a private or or NHS diagnosis. I definitely didn't feel comfortable when I first sort of started thinking about this to call myself autistic. So I talked to my GP about it, and then he gave me a referral, and then I was on a waiting list for four or five years. And I was on that waiting list for so long that I thought that they must have read my referral and read the forms that I had you had to do, like a questionnaire to begin with. I thought they must have read that decided that I wasn't and either notified me, and I'd missed it because I moved so frequently, or just hadn't bothered to tell me. And so I was like, Okay, well, I guess that mystery is solved. Like, I'm not even I'm not even autistic. Like, close to be close enough to being autistic for them to either bother telling me that I'm not, and then I got a phone call completely out of the blue, being like, okay, it is now your turn to do the testing. And I was like, Oh, wow, I've just been sat in a queue for such a long time. And then I did the formal kind of interview things and got a diagnosis. Edy, you have, you have multiple diagnoses.

Edy Hurst 13:05

Oh, do I? Oh, yes, no, you're right. Actually, yeah, I do. I always it's a funny one, and I think it might be a little bit of neurodivergent ableism, in a way. It might be my own baggage, but I got diagnosed with dyslexia at like seven at school, and it and so for ages, I don't think I interrogated much more, any additional neuro divergences. And so, yeah, I think for a long time I was like dyslexia, and just kept googling symptoms and going, like, is this cause of dyslexia? And loads of things said maybe who you know could be. But yeah, so diagnosed with dyslexia, at like seven, and then I think it was, I think it was 2022. Had an official assessment, as opposed to all those unofficial assessments on Buzzfeed of ADHD, which was a weird it's interesting, like talking about the process that you went through Cerys. It's interesting because I, like, I was on that list for maybe a year and a half, and I did a thing called right to choose, which is when you say to the NHS, are there any other services that you work with that could provide it quicker, which I'm not a mad fan of, but also it like the waiting list just kept getting longer for getting assessed. And I thought, like, I might be like, I don't know how long's it gonna last. But then they said they didn't provide that service to anyone else, which was fine. It's just like, I'll wait longer. And then I got then I got referred to a service that was private, third party anyway, which was baffling. And I explain this every time to like GPs and people, when I have to talk about stuff, and they always give me, like, the face that you're doing Miggy, which is like that. Why has that happened? And it's, I don't know. I don't know why it happened. It's so like, none of the machinery of how I got there is explained to me. None of that process is explained. And then I also, like. Like, I'd be really interested to hear about your diagnosis paths, in terms of, like, what happened after the assessment. Because I feel like at the very end of the ADHD assessment, the person, like, said, and I think you've got ADHD, but I feel like with dyslexia, there was a lot more reports and things and a lot more thinking that had to

happen afterwards. So I don't know whether it's just I, like, nailed it so hard that they were like, fucking hell, the shoots, we're so close to the shoot that the presents come out the pipe. You got it.

Cerys Bradley 15:28

So I wonder if it's the difference between dyslexia and ADHD in the way that they're treated. So dyslexia, like because it is considered, I mean, depending on how we categorize these things, they can both be considered learning disabilities, but dyslexia, because it, I guess, is more generally characterized as having a more direct impact on your kind of academics. It makes more sense that it's like a thing that you test for in a way that ADHD less so. So there's like, a bunch of like, IQ cognitive kind of tests that you can do. So it could be that were ADHD similar in terms of its like, clear, direct impact on your academic work. Like, if they could do the test, they would that would also...

Edy Hurst 16:20

yeah, I mean, I kind of, I feel like, when I got the dyslexia assessments and stuff, it was like the idea of ADHD didn't come into it, and I it was largely because I was being disruptive, and I was having a bad time at school and acting out a lot because of that, that it was kind of like a behavioral thing. But I think the dyslexia, like you said, because I think in terms of the definitely, like the boxes we put them in, ADHD, autism, goes into a neurodevelopment, one, whereas the dyslexia like a neuro learning, or something like you said, it's a learning seen as a learning difficulty first, rather than having any other impact on your life, because that's exactly how neurodiversity works, as we know. So I don't know it felt and then my behavior went better after that, because there was some sort of support for me, and my grades improved from it. So I feel like it was kind of put anything else. Even though there were those assessments, it was weird that none of it was picked up in terms of, like, how I spoke to people, and how I manage my workload, and how I like felt in a space, it was more just, oh, well, you can, you can do touch typing now, great.

Cerys Bradley 17:28

Do you think, do you think that is because you were diagnosed, because you were acting out? So the thing that they're trying to do there is not, you know, help you find out these things about yourself. The thing that they're doing there is trying to fix your behavior in the classroom, and if the measures that they're putting like in place to support you for dyslexia were effective, of that, that's it's served its purpose. And given that it's not actually about who you are, in that sense, there's no point in asking further questions.

Edy Hurst 18:07

I know this is a comedy podcast, and we're running the risk of going into more of a Marc Maron led, let's go deep, brother, think. But I feel like a lot of it actually was to do with my mum, like really putting a shift in to get support. And dyslexia was the kind the thing that she had an idea and got, there was more information available, yeah, to understand that. And there was, like, actual, tangible things that you could support that I think there was also less stigma about.

Cerys Bradley 18:30

interesting that you said that at the end of your diagnosis, they said you have ADHD, because that's I didn't get that. I wasn't told you have autism. I think the phrasing was something to the effect of, we have no reason to believe that you don't have this

Edy Hurst 18:43

that feels like a really helpful thing for somebody with autism.

Cerys Bradley 18:49

The concept of autism is like an idea that has kind of evolved over a long period of time, and it comes from a discipline which, like, originally, like, you're, you're kind of within psychiatry or psychology, like everything was kind of, you know, it was schizophrenia. And then schizophrenia as a concept, which is some kind of something in which the brain is functionally different to other people's brains that then, like, split off into loads and loads of different so autism, for a while, they thought that it was like child schizophrenia and like, there's all of these kinds of different diagnosis that you can give people. They all split away essentially from the same thing. And it's the scientific or like medical practice of trying to put people into discrete categories, which I think is not necessarily how any of this is working. So it's always going to be like a best guess, kind of approximation, or not best guess, but it is like an approximation, but then it's presented. When you think about diagnosis, you're thinking about like a truth. And I just don't think that. Uh, okay, I'm going fully into this now. Like, I don't think like autism is like, I don't think that it exists like, it obviously does exist, but it kind of exists in the same way that like, gender exists, race exists, like, it's a construct that we have created which is supposed to make it easier for us to kind of understand people and the world and inter personal dynamics or whatever. But the idea that there's like this person either is autistic or is not autistic, and there is a test which exists which will tell you whether they are or not, and there's a right answer there, isn't like a like a thing. And so by saying like, we don't have enough evidence to say that you don't have this is, it's, I think, actually quite positive, because it's an acknowledgement of the fact that, like, this isn't like some other things, like, it's not a thing where we can tell you explicitly, this definitely is true, because that's not the actual framework that we're kind of working in. But I think what is interesting is, at the end of my diagnosis, they said, Do you think you might have ADHD? Because a lot of people who get tested for autism then go on to get tested for ADHD. And the the doctor was like, for what it's worth, I don't think that you do. I don't think this is worth your time. And at the time, I was like, Oh, my God, I think I'm autistic. This is like, I'm gonna process this. And I hadn't even considered ADHD as my understanding of ADHD was, like, quite trivial. Like, it's, it's a hyperactivity disorder. What I remember of it was like, you know, hyperactive, misbehaving boys at school like that didn't seem to fit. And then the more that I have, like, connected with the autism community, there are loads of people who sit in the kind of intersection of those two things. And so I read a lot more about ADHD now that I ever have, and now I'm a bit like, oh, like, yes, that symptom, similarly to what you were saying, Edy, which was like, Is this a symptom of autism, or is it a symptom of ADHD? And at the end of the day, like, do I care? Like, is it? Does it matter? Because lots of these symptoms do sit across multiple different different labels.

Edy Hurst 22:04

The thing that I found really because I think what you're saying before about the sort of self diagnosis, or understanding of your own diagnosis, I mean, because self diagnosis sounds a bit ableist as a phrase anyway, if you know what I mean, like, like, that you I think it's a legitimate way for somebody to

advocate and understand themselves, but saying self diagnosis implies that there is something that you have to add on to that diagnosis. I had a thing to check if I could get support at uni with dyslexia as well to see whether my dyslexia symptoms were high enough. But there was like a direct like in I had to get that diagnosis in order to get that support. I couldn't just say I'm dyslexic and hope the world treats me better for it. And the same with ADHD, like, in order to access medication and things legally, I had to get that diagnosis, and I found that really beneficial to get the access to the medication. It's been really helpful for me, yeah, but also it's a funny one thinking about, like, other symptoms that I experienced, because there is a lot of overlap, I think, between autism and ADHD, but I don't necessarily know what an official diagnosis for that would do to help, because I think Fern Brady has a great had a great interview a while ago where they were saying, like, you know, if autism, you get, like, you get a stack of books, whereas with ADHD, you get some medication and you also have the books. But we got ADHD. Come on, come on. It's gotta be an audio book, please. You animals.

Miggy Barker 23:29

We are categorizing, like we do with everything, categorizing what is and isn't something about you that makes you different from everyone else, even though it's not everyone else, because lots of people have this and XYZ, like, in order, and the idea being that, like, well, if that can be helpful, then yeah, like, if getting this diagnosis, if having a word associated with the way I do things is going to be helpful and make it easier to, you know, not have to explain every time you want to do something, why you want to do it, or need to do it, because you can just be like, I need this for an access thing because of this, then that's great, but that doesn't really happen, because it constantly gets questioned anyway, whether you're diagnosed, like by a Doctor or peer reviewed, as people say these days, as the kids, or self diagnosed, as we say. Like that in itself is a weird term, but like however, the way you've come across going this is a word that I use to identify the things that I do and the reasons I do them is ends up like being used against you as well, as opposed to actually being a helpful thing. And at the end of the day, we're just trying to work out ways to support ourselves, unless you have autism. In case it's read some books about that being autistic, good luck. Like.

Cerys Bradley 24:59

Yeah, when I applied for the job that I have now, I remember having a very long conversation with my partner about whether or not I was going to tick the box to say that I am disabled and I have autism, and whether that is something that I wanted to disclose to my employers, because that's a really difficult question, because if you don't declare it to begin with, you put yourself in a position where it becomes harder to use it to advocate for yourself in the times where you need that label to advocate for yourself. But then also, by doing that, you make yourself vulnerable to ableism within that system. And I mean, like, I feel very lucky to be working as a teacher now, when there has been so much activism and so much advocacy around allowing disabled people to be teachers, there is definitely a decade, not that long ago, where, by saying that I am disabled, that just would have immediately like justified on the grounds that is dangerous for the children, would have prevented me from being able to become a teacher. But it has definitely like I had to do an occupational health interview when I first started, and the two things that I declared were IBS and autism, and as we have discussed at length about the context of the toilets in my school, one of those things affects my ability to teach way more than the other, because I have shat myself whilst at this college, because I cannot go to the toilets, and you can't teach teenagers if you smell like poo, they just do not respect you, and they won't do calculus.

Miggy Barker 26:44
Service announcement.

Cerys Bradley 26:45
Yeah, just in case anyone didn't know.

Edy Hurst 26:48
Is that the t shirt that you're gonna get on for the podcast?

Cerys Bradley 26:51
But like, one, one of, one of those things that I had declared, like, has does genuinely, meaningfully, like having to dash out of a classroom in order to be able to use the bathroom when I'm my IBS is really bad, versus autism, where there are lots of things that I have to advocate for myself, for, particularly around like sensory things in in school, but it doesn't affect Like, it doesn't hinder my like being in the classroom working with kids, and that was the only thing that we talked about in my occupational health interview. And all of the questions were like, safeguarding issues or like ways that I might not be the best person to be like in in the classroom, whether or not I was going to be able to cope thinking about, like, the longevity of me in this role. And we agreed to, like, check in in a year to see if there were any things that I needed. And so, like, a year later, when I had that same conversation again, the conversation was all around whether or not, like, I was like, okay, so not when I was like, Okay, so here are the problems I'm having, you know, with my office and lights and sounds and things like that. The conversation was not, well, how do we fix that environment so that you feel comfortable? It was, Are you sure that you are suitable for this role? So, like, does your disability, you know, make you not a good teacher. So you're kind of like, in a position where you either declare or you don't declare, and both things put you in a worse position to advocate for yourself.

Miggy Barker 28:31
And then they wonder why? And they're like, oh, disabled people don't want to work, and they they're lazy, and the you know, doing it on purpose so that they can just sleep all day and they don't care. And, you know, disabled people should want to work and contribute to society. And it's like, look what happens when we try.

Edy Hurst 28:51
Cerys, sorry with the so with IBS, have you had a diagnosis for it, or is it just something, you know, because you have tangible things that physically happen to you?

Cerys Bradley 29:01
Yeah, no, it's so this one, I don't have a formal diagnosis of IBS. This one, I have, like, I have given this to myself as a label from doing not BuzzFeed quizzes, but, you know, like NHS quizzes and talking to other people who have IBS.

Edy Hurst 29:20
The BuzzFeed of the state.

Miggy Barker 29:24

Buzzfeed of the state. You heard it here first.

Edy Hurst 29:27

Because I yeah, like, I feel like somebody would tell me they have IBS, and I'd just be like, I mean, I don't know. I'm not sure if I should be saying I in this conversation, but one would be told that, and I feel like there is such an exchange between IBS, what that means and somebody would somebody need, needs things for that, like needs better access to toilets because of that, whereas, and there is that diagnosis, or there is the sharing of the diagnosis, whereas, I feel like with ADHD and with dyslexia, maybe not so much dyslexia, but definitely ADHD. Every time that I have some sort of conversation about it, there is the question of, have I been diagnosed with it, and what is my day like? And even then, when I say that, it's like, well, what do I actually need? Because I don't know. Like, I've been I got this when I was in my 30s, like at that point, I mean, you know, I'm not being doomy here, but it is like I've had 30 years of putting up with this so so much of this is now untying, like going, Wait, hang on. I don't have to do that all the time. I don't constantly have to do that. Oh no, that's what, where do I end? And where does that begin? And that, like diagnose, has been helpful in some ways, to try and start untying that and having somebody else tell me that. But actually going through that's, like, really confusing,

Cerys Bradley 30:44

yeah, I think both the point that, like, people are more willing to help with the things that they understand more and can, like, do a physical thing for, but then also your question has kind of made me realize a bit some, I think an internal ableism that I have is the physical manifestation of IBS is undeniable, and that makes me feel more comfortable like claiming that. So I actually the thing that made me speak to my GP about getting an autism diagnosis is when my partner sent me an article about misophonia, which is about the way that you process sounds, so people with misophonia, myself included, like sounds that are uncomfortable, like people chewing or eating or whatever the current thought process is, the way that they're processed is through like pain. So it's like understood by your body as painful as opposed to annoying, which explains why some people seem much more sensitive to these sounds than others. Because, like I thought, that I could just hear better than other people, and that's why people didn't find these sounds intolerable, but it's the fact that they can hear them, but it doesn't physically affect them. And when I had a physical manifestation of autism, a thing that I felt like was provable, that is the thing that made me feel confident enough to speak to my GP. And I think there's so much about the like family of neurodivergence that, because it's intangible, it both invites more interrogation from other people, but also more self doubt. Whereas IBS, like, I know that is a physical thing in my body and sometimes in my pants, and I just can't deny that, and so I feel happier like, whereas the autism, like, maybe I'm making up, I still think maybe I'm making up.

Miggy Barker 32:45

I completely like, I see the thought process, and it makes perfect sense. But then I'm sitting here with my physical disabilities, and I'm thinking about conversations I've had with people with like, chronic illnesses and lots of physical disability problems and it, but we end up doing the same thing with those of like, yeah, like, they're there, but are they really or they're there, but they go away. Or, like, there's

always a way, there's always something that it's like, this isn't good enough to prove that this is a problem that I have. And then some things end up being like, I don't know like, so me with my spinal injury, if I have a problem with like, anything, one of the first things that gets said to me is like, but that's because of your spinal injury, as opposed to, like, this is a problem that we probably want to fix, because it's a problem, and it's like, yeah, I don't know. I'm now just thinking about, like, what we mean when we think of like something being tangible and like a good enough proof that something is wrong or a good reason to want to fix something, especially because Edy, you were saying, like, you've had this for 30 years, and you've been dealing with it, and now you're looking at all the ways that you didn't have to be dealing with it, and you're like, untangling all those things. But in doing that, I'm sure some things are becoming harder, because you're having to advocate for the fact that you shouldn't have to do or deal with certain things. And there's this, like, added labor on to the idea of, of saying, like, No, this is a problem that I don't need to have. This can be a fixable, like a fixable, or more manageable thing, if people work with me here and help me.

Miggy Barker 34:40

And on that note, we should probably wrap up.

Cerys Bradley 34:47

Thank you so much Edy, for coming on the podcast and chatting to us. How can people find out what fun, cool Vengaboys and non Vengaboys related stuff that you're up to?

Edy Hurst 34:49

So you can follow me on social medias at Ed y, h, u, r, s, t, I'm on most of them. I think some of them I don't use anymore for obvious reasons, but I am pretty active on Instagram, which I'm not thrilled about. I'm on tour with my show Edy Hurst's Wonderfull Discoverie of Witches in the Countie of Gimsel. It's about the vengaboyz, neurodivergence and the Lancashire witch trials all in equal part. You can put it through the middle 33.33% point three reoccurring of all of it, and I will be going to the fringe. Have a look for that show and give us a follow. If you enjoyed me. If not, don't, I won't know that's also fine.

Cerys Bradley 34:59

Go up to Edy in the gym and tell him what inspiration he is.

Edy Hurst 35:02

Good look finding me

Miggy Barker 37:07

You've been listening to it's ableism.

Cerys Bradley 37:09

I've been Cerys

Miggy Barker 37:10

and I've been Miggy.

Cerys Bradley 37:11

For more information about our guests and the topics covered, check out the show notes and our reading list.

Miggy Barker 37:15

This podcast was produced by Little Wander, and the music was composed by Chuck SJ.

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