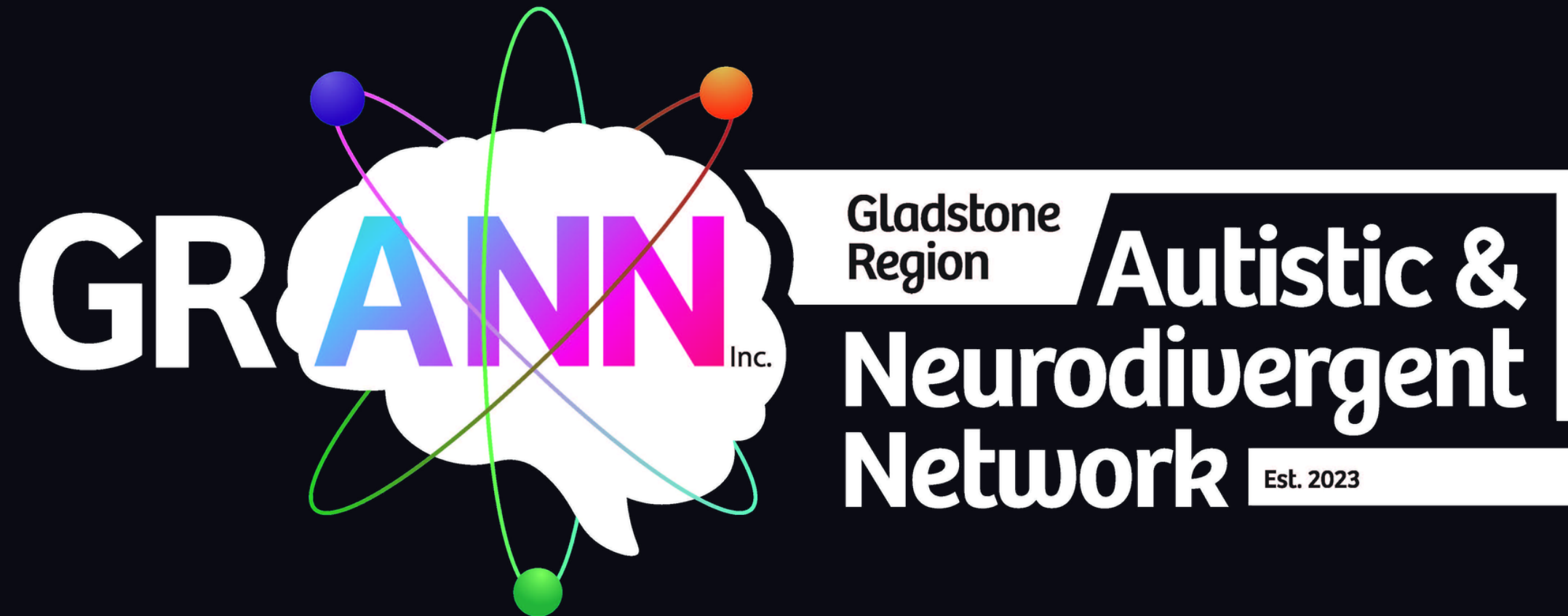




Interoception:

When We Stop Listening to Our Bodies
Because The World Taught Us To

Reframing Interoception, Autism, Chronic Invalidation, and Nervous System Survival

What Is Interoception?

Interoception is our ability to notice and interpret the internal sensations of our body — the constant, quiet stream of signals that tells us what we need.



Hunger & Thirst



Pain Signals



**Bladder & Bowel
Awareness**



Fatigue



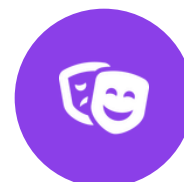
**Temperature
Regulation**



Nausea



Heart Rate Changes



Emotional Arousal



Muscle Tension



Internal Discomfort

Not All Autistic People Struggle With Interoception.



Were they unable to feel their bodies... or were they systematically taught not to listen to them?

And for many who do, this is the more uncomfortable — and more useful — question to ask.

When Your Body Keeps Sending Signals Nobody Believes

Many neurodivergent people experience their bodies differently from an early age — often alongside:

- Sensory hypersensitivity to lights, noise, smells & touch
- Digestive difficulties & gastrointestinal distress
- Chronic pain conditions
- Migraines triggered by environmental stimuli
- Nervous system dysregulation
- Chronic fatigue & brain fog
- Unusual medication sensitivities
- Autoimmune or connective tissue disorders
- Co-occurring chronic illness



The Overlap Is Real

Research increasingly recognises high rates of overlap between Autism, ADHD, chronic pain conditions, gastrointestinal disorders, connective tissue disorders, and autonomic nervous system dysfunction.

Adaptation, not absence.

THE INVALIDATION PATTERN

What They're Told Instead

"Stop being dramatic."

"You're too sensitive."

*"There's nothing wrong with
you."*

"You need to toughen up."

"You complain too much."

"Everybody else is fine."

"Ignore it."

"Get over it."

The problem isn't simply that people don't believe them. It's what happens next.

Survival Sometimes Means Learning To Ignore Yourself



1

The Body Is Overwhelmed

Lights, sounds, smells, textures, food, and emotion all register as physically intense.



2

The World Responds With Disbelief

"That's not happening."
"You're exaggerating."
"Stop complaining."



3

The Nervous System Steps In

It protects by suppressing internal monitoring — sometimes through dissociation.



4

Signals Go Quiet, Not Away

The body still sends them. They're just no longer consciously registered.

Why Interoception Can Become Blunted

What It Can Look Like

- Not noticing hunger until physical shaking begins
- Not recognising thirst until dehydration headaches arrive
- No gradual bladder awareness — just sudden, urgent need
- Not feeling pain until it becomes extreme

What May Actually Be Happening

Years spent learning that body signals are dangerous, inconvenient, shameful, or irrelevant — so the brain quietly stopped flagging them early.

From the outside, this can look like impaired interoception. From the inside, it may be a learned survival skill.

The Clinical Blind Spot Professionals Need to Understand



Too often, practitioners assume an autistic person struggling with body awareness simply has an interoceptive deficit.

But for many, reconnecting with the body has historically been unsafe — not absent.

“This isn't a simple interoceptive deficit.”



Feeling internal sensations can trigger anxiety



Paying attention to bodily states can feel threatening



Body awareness has felt associated with punishment



Internal sensations were long dismissed by authority figures



The body itself becomes connected with shame

Why Somatic Therapy Requires Careful Foundations

 ***Has this person been taught that noticing their body is safe?***

When a practitioner asks “Where do you feel that emotion in your body?” the answer is rarely simple. A person may:

● Genuinely not know

● Feel disconnected from those sensations

● Experience a demand-avoidance response

● Interpret the question as a trap

● Fear giving the “wrong” answer

● Feel exposed by sensations they've spent years suppressing

Before Body-Awareness Work Begins

Therapeutic work may first need to focus on:



Rebuilding trust in internal experience



Validating sensory differences



Decoupling bodily awareness from shame



Understanding survival-based dissociation



Slowly restoring safe self-monitoring



Recognising chronic environmental invalidation as trauma

Believe What You Cannot See

"That smell hurts."

"That shirt hurts."

*"The lights make me
sick."*

*"That sound hurts my
head."*

*"I feel weird after
eating this."*



The fact that you do not experience it the same way does not mean it is not happening.
Children learn whether their bodies are trustworthy based on how adults respond.

Move Beyond Deficit Thinking

DEFICIT FRAMING

~~*“Why can't this autistic person recognise their body signals?”*~~



ADAPTATION FRAMING

“What experiences may have taught this person that paying attention to their body was unsafe?”

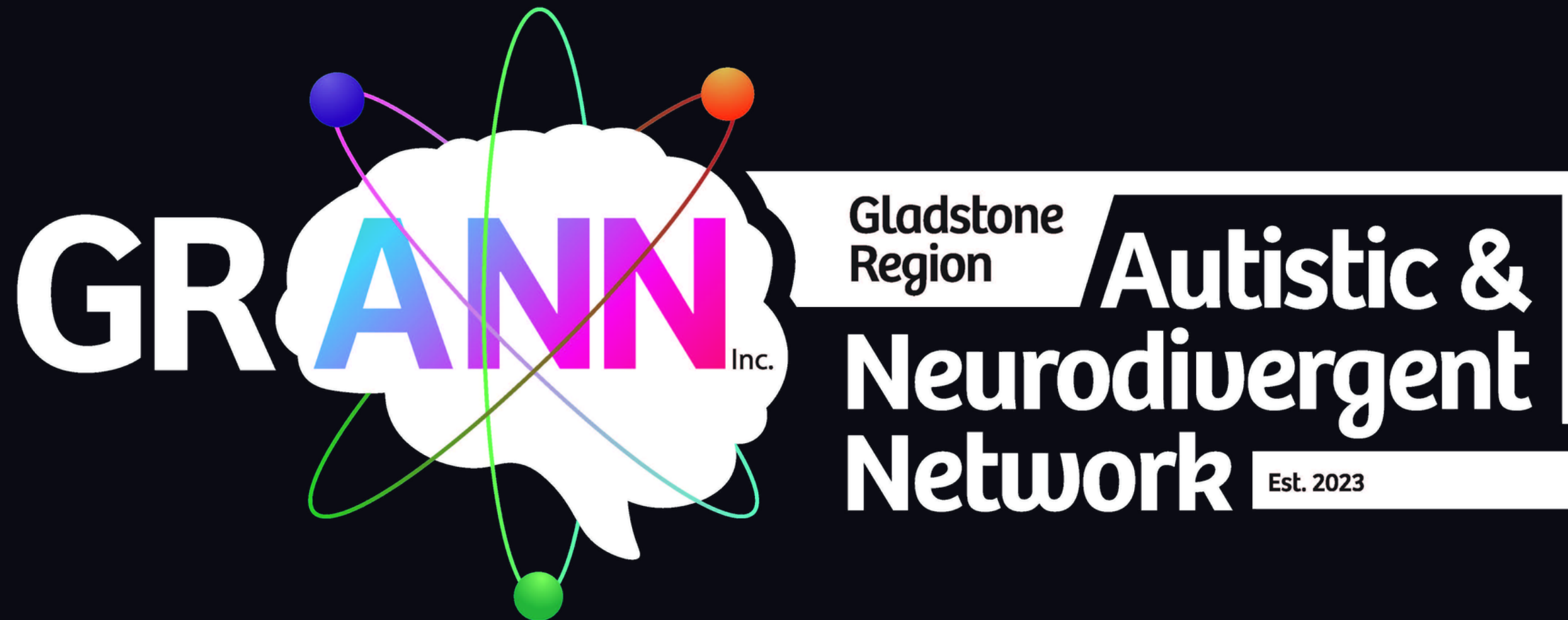
This distinction changes everything.

We Want To Hear From You

Sometimes what appears to be dysfunction is adaptation. Sometimes what appears to be inability is survival.

-  Have you experienced being told your body sensations were impossible?
-  Were migraines, pain, digestive issues, or sensory overload dismissed growing up?
-  Did adults minimise experiences you later realised were legitimate physiological reactions?
-  Have professionals misunderstood your relationship with body awareness?
-  Have you learned to ignore your body simply because nobody would change the environment causing harm?

At GRANN, lived experience is expertise — coupled with autistic-led research. Communities learn fastest when lived experience leads the conversation.



In solidarity 🌻

Gladstone Region Autistic & Neurodivergent Network Inc · Est. 2023