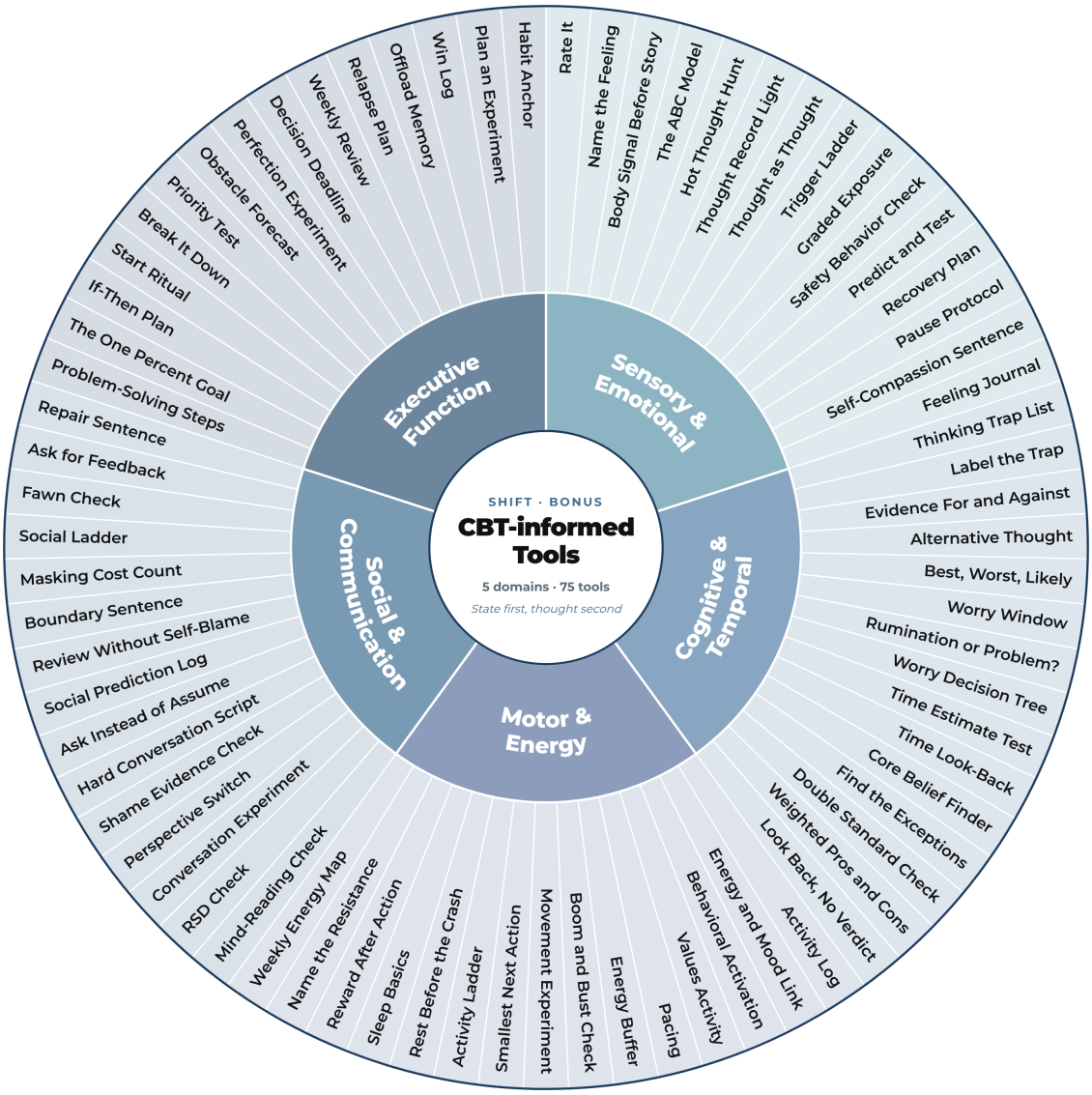
ALEXANDRA ROBUSTE

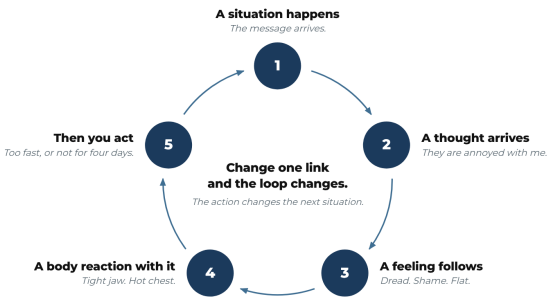
NEUROINCLUSIVE LEADERSHIP & NERVOUS SYSTEM DESIGN

CBT-informed Tools

Five domains, 75 tools, in the order they run. The handbook to the wheel.



THE LOOP EVERY TOOL SITS INSIDE



THE ONE RULE

State first.
Thought second.
Action third.

0	1	2	3	4	5	6	7	8	9	10

At seven and above, you reset.
You do not reason. Nothing here works up there.

At six and below, you use a tool.
Pick two from one domain and run them for a week.

These are coaching tools. They are not therapy and they diagnose nothing. If someone is in immediate danger, call or text 988, or your local emergency number.

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THE THOUGHT THAT ARRIVES BEFORE YOU DO

A message lands on your phone. Short. No greeting. Your chest tightens before you finish reading it.

In the second before the tightness, a thought went by. They are annoyed with me. You did not choose it. You barely saw it. But your body answered it as if it were a fact.

That second is where this module lives.

PART ONE

What these tools are

Where they come from, and why the standard version so often closes its door on a neurodivergent brain.

WHAT CBT IS

CBT stands for cognitive behavioral therapy. Aaron Beck developed it in the 1960s after he noticed that his patients carried a running commentary they had never examined. Fast, automatic thoughts. Nobody had asked them to look.

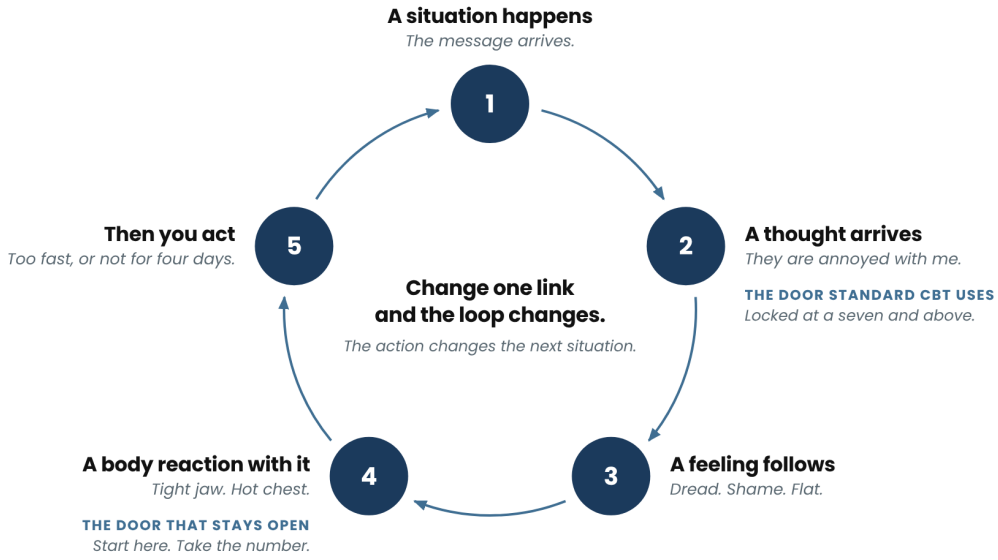
The core model has five parts that loop. A situation happens. A thought arrives. A feeling follows, and a body reaction with it. Then you act, and the action changes the next situation. Change one link and the loop changes.

CBT is practical. It is structured and focused on the present. It treats a thought as something you can test against reality, the way you would test a guess. It is one of the most studied psychological approaches there is.

For neurodivergent adults the picture is good, with a limit you should know. In 2010, Safren and colleagues showed that adults with ADHD who kept taking medication and added CBT improved more than those who added relaxation with education. For autistic adults, reviews find benefit, mostly for anxiety, and mostly when the therapy is adapted. That research is smaller, and I will not pretend otherwise.

THE LOOP, AND THE TWO CORNERS THE TRIANGLE LEAVES OUT

Most people meet this model as a triangle. Thoughts, feelings, behavior, three corners, arrows all the way round. It is a good drawing and it is missing the two parts that decide everything for a neurodivergent brain: the situation you were standing in, and the body reaction that arrives before the feeling has a name.



Standard CBT always asks you to enter at the thought. Catch it, test it, argue with it. On a bad afternoon that door is locked, and standing outside it rattling the handle is how people learn to hate this method. So the question stops being what you should think instead. It becomes **which link can you reach right now**, and at a seven the answer is the body.

WHY IT OFTEN FAILS NEURODIVERGENT PEOPLE

Standard CBT is written for a brain that can do five things at once. It asks you to notice a feeling, name it, find the thought behind it, argue with the thought and write all of it down. Usually in a seven column worksheet. Usually as homework.

Now take a nervous system that is already at an eight out of ten. Thinking does not work there. Reasoning is a skill, and skills need access. That is the Access Gap, and it is the whole reason this module exists.

Other doors close too. If naming feelings is hard, the first step of every worksheet is already a wall. If executive function is stretched, a long record never gets filled in. If you read questions literally, how does that make you feel can draw a blank.

People in this position conclude that CBT does not work for them. The tool did not fail them. Nobody built a way in.

PART TWO

The order of operations

One order, and it is not negotiable. Everything else on the wheel sits inside it.

THE RULE

State first. Thought second. Action third.

At seven out of ten or higher, you reset and you do not reason. At six or below, you use a tool.

Every unit opens with a reset. The rule is simple. If your feeling is a seven out of ten or higher, you reset first and you do not reason. If it is a six or lower, you go on to the tool. You will learn how to rate that number in Unit 1. It is the first tool in the module, and it decides when every other tool is available.

Resets come from your Reset Languages. Think, Move, Touch, Listen, Space and Connect. A sharp clap, a cold pack on the neck, a closed door. Nothing clever. They are there to bring you back into range.

PART THREE

Five changes I make to CBT

I made five adaptations, and you will see them in every tool.

Short
Three minutes, not thirty. Anything longer will not be done.

External
Paper, an index card, a phone note, a voice memo. Anything but your working memory.

Concrete
Numbers, examples, exact wording. No guessing what a prompt means.

Body first
The body signal comes before the thought, because it arrives first.

One at a time
You do not need all of them. You need four or five that work for you. Read this like a hardware store, not a syllabus.

PART FOUR

The five domains, and the networks under them

One ring of the wheel per domain. The network names come from my teaching map. That map is simplified, and it cannot diagnose anyone.

Sensory and Emotional

15 TOOLS FOR THE MOMENT THE SIGNAL IS TOO LOUD

The supermarket at five o'clock.

Sensory and emotional processing is the first SNIP domain. In my teaching map it matches the salience network, the brain's gatekeeper. It decides what counts as important right now. When it runs hot, everything is urgent, feelings arrive large, and recovery takes long. That map is simplified, and it cannot diagnose anyone.

This is also the domain where state decides everything. So this unit has the most resets and the shortest tools.

THE FIFTEEN

Rate It, Name the Feeling, Body Signal Before Story, The ABC Model, Hot Thought Hunt, Thought Record Light, Thought as Thought, Trigger Ladder, Graded Exposure, Safety Behavior Check, Predict and Test, Recovery Plan, Pause Protocol, Self-Compassion Sentence, Feeling Journal.

Cognitive and Temporal

15 TOOLS FOR LOOPS, WORRY AND TIME

Three in the morning.

Cognitive and temporal processing is the second SNIP domain. In my teaching map it matches the default mode network, the part of the brain that runs when you are not focused on a task. It replays the past, rehearses the future and builds the story of who you are. When it runs hot you get loops, time slippage and a very loud inner narrator. That map is simplified, and it cannot diagnose anyone.

This unit has two jobs. One is to catch thoughts that mislead you. The other is to deal with time, which many neurodivergent brains experience differently.

THE FIFTEEN

Thinking Trap List, Label the Trap, Evidence For and Against, Alternative Thought, Best, Worst, Likely, Worry Window, Rumination or Problem?, Worry Decision Tree, Time Estimate Test, Time Look-Back, Core Belief Finder, Find the Exceptions, Double Standard Check, Weighted Pros and Cons, Look Back, No Verdict.

Motor and Energy

15 TOOLS FOR YOUR BODY, YOUR BATTERIES AND YOUR PACING

The good week and the crash.

Motor and energy is the third SNIP domain. In my teaching map it matches the interoceptive network, which reads the inside of your body. Hunger, tiredness, heartbeat, tension. When that signal is faint or noisy, you miss the warnings and run past your limits. That map is simplified, and it cannot diagnose anyone.

Research on autistic burnout, such as the study by Raymaker and colleagues in 2020, describes exactly this pattern. Long stretches of overextension, followed by exhaustion, loss of skills and reduced tolerance for input. This unit helps you spot the pattern earlier.

THE FIFTEEN

Activity Log, Energy and Mood Link, Behavioral Activation, Values Activity, Pacing, Energy Buffer, Boom and Bust Check, Movement Experiment, Smallest Next Action, Activity Ladder, Rest Before the Crash, Sleep Basics, Reward After Action, Name the Resistance, Weekly Energy Map.

Social and Communication

15 TOOLS FOR READING PEOPLE, BEING READ AND THE COST OF MASKING

The reply that took four minutes.

Social and communication is the fourth SNIP domain. In my teaching map it matches the social brain network. That map is simplified, and it cannot diagnose anyone.

One idea belongs here from the start. Damian Milton called it the double empathy problem. When an autistic person and a non autistic person misread each other, the gap runs in both directions. It is not a deficit sitting only on one side. Many of the tools below work because they check an assumption instead of trusting it.

THE FIFTEEN

Mind-Reading Check, RSD Check, Conversation Experiment, Perspective Switch, Shame Evidence Check, Hard Conversation Script, Ask Instead of Assume, Social Prediction Log, Review Without Self-Blame, Boundary Sentence, Masking Cost Count, Social Ladder, Fawn Check, Ask for Feedback, Repair Sentence.

Executive Function

15 TOOLS FOR STARTING, PLANNING AND FINISHING

The tab that stays open.

Executive function is the fifth SNIP domain. In my teaching map it matches the central executive network, which holds goals in mind, plans steps and switches between tasks. When that network is stretched, you know what to do and cannot begin. That map is simplified, and it cannot diagnose anyone.

A rule helps here. The tools in this unit move work out of your head and into the world. Paper, alarms, objects, people. Your working memory is the scarcest resource you have.

THE FIFTEEN

Problem-Solving Steps, The One Percent Goal, If-Then Plan, Start Ritual, Break It Down, Priority Test, Obstacle Forecast, Perfection Experiment, Decision Deadline, Weekly Review, Relapse Plan, Offload Memory, Win Log, Plan an Experiment, Habit Anchor.

PART FIVE

How to find your four or five

Seventy-five is a hardware store, not a syllabus. Nobody uses all of it, and trying to is its own kind of overload.

1. **Take one week, not one lifetime.** Pick the week you are actually in. Not a year of history read backwards through the last argument.
2. **Find where it went wrong, not who went wrong.** Look at the five domains and ask which one the week kept landing in. The signal was too loud. The loop would not stop. The body ran past its limit. The room read you wrong. You knew what to do and could not begin.
3. **Take the number first.** Whatever domain you picked, the number comes before the tool. If you are at a seven, the tool is not the next move. The reset is.
4. **Choose two, not ten.** From that domain, pick two tools and use only those for a week. Write them on something you will see. Paper beats intention.
5. **Keep what worked, drop what did not.** A tool that you did not do is not a tool you failed. It is a tool that did not fit, and there are seventy-four others.
6. **Add one, slowly.** Four or five is a full set. Most people never need more, and the ones who try to run twenty end up running none.

WHAT THE WHEEL IS FOR

The wheel does not tell you what is wrong with you. It gives names to things you are already doing badly by hand, so you can do four or five of them on purpose instead. That is the whole claim, and it is enough.

PART SIX

What this is not

The part people skip, and the part that matters most when you use this with somebody other than yourself.

This is not therapy. It is not treatment, and it does not diagnose anything. These are structured tools that coaches, educators, leaders, parents and neurodivergent people can use. A therapist does something different. A therapist builds a full picture of one person and treats a condition. A tool does neither.

Know where the line sits. Some things need more than a tool. Low mood on most days for two weeks or more. Panic attacks. Memories of a trauma that keep forcing their way in. Eating that has become a struggle. Alcohol or drugs that have taken over. Any thought of ending your life or hurting yourself.

When you meet one of these, in a client or in yourself, stop using the tools as the main support. Say it plainly. This is beyond what coaching tools can carry, and I want you to have more support than I can give. Then help them find a qualified professional.

IF SOMEONE IS IN IMMEDIATE DANGER

Call or text **988** in the United States, or call your local emergency number.

WHERE THE TOOLS COME FROM

Some tools do not come from classic CBT. A few come from acceptance and commitment therapy, compassion focused therapy or dialectical behavior therapy. When that happens I say so. The title of the module says CBT informed because it is honest about that.

PART SEVEN

The wheel is the map. The module is the ground.

What this handbook holds, and what sits behind it.

Every tool follows the same shape. What it is, in a few sentences. How to do it, in steps you can follow while you are doing it. And a note on what changes when your brain is neurodivergent.

This handbook and the wheel are free. So is the browser version, where every one of the 75 tools tells you what it is, and five of them are written out in full. The steps for all 75, and the note on what changes when your brain is neurodivergent, are the bonus module in the SHIFT part of the Access Institute: alexandrarobuste.com/access-institute.

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