

Relationships, Dating and Disability

David VanNuys Ph.D. interviews Danielle Sheypuk, Ph.D.

Dr. David: My guest today is Dr. Danielle Sheypuk. We'll be discussing issues surrounding dating and relationships for those with various source of disabilities.

Danielle Sheypuk earned her doctorate in 2009 in clinical psychology from the New School for Social Research in New York City. In 2012, she attracted an unusual degree of national media attention when she was awarded the title, "Miss Wheelchair New York."

Wheelchair-dependent since kindergarten, Danielle balances her professional duties as a Clinical Psychologist at the South Beach Psychiatric Center in Brooklyn New York, while handling increasing demands from the news media for access to her expertise. Danielle's particular areas of professional interest include the psychology of dating, relationships, and sexuality among the disabled.

She has used media appearances to advocate for the greater mainstreaming of the disabled into the social fabric of everyday life. Recently, Danielle inaugurated a private practice based in the growing field of Skype-assisted therapy.

Now, here's the interview.

Dr. Danielle Sheypuk, welcome to Shrink Rap Radio.

Dr. Danielle: Thanks, David. Good to be here.

Dr. David: It's good to have you. Let's jump right into your story. First of all, where did you grow up?

Dr. Danielle: I grew up in a small town called Scranton, Pennsylvania, a small rural town. People know it as home of the TV show, "The Office." It has some notoriety.

Dr. David: Yeah. I didn't realize that. I haven't really dug into that series, "The Office," although I know it's well-reviewed. I spent four years at the University of Pennsylvania in Philadelphia, so I should know where Scranton is. Is it anywhere near Philadelphia?

Dr. Danielle: It's about 2-and-a-half hours away.

Dr. David: Okay.

Dr. Danielle: Pennsylvania is a big state.

Dr. David: Yeah, and I had no car. I didn't explore it. Do you have any siblings?

Dr. Danielle: I have one younger sister. She is an anesthesiologist in the US Air Force. We're both overachievers.

Dr. David: Yeah.

Dr. Danielle: We've very close.

Dr. David: That's good. Wonderful. Now, you've been in a wheelchair ever since kindergarten, which is most of your life. It made me wonder if being in a chair for you somehow just feels normal.

Dr. Danielle: Yeah. That's a really good question. It is normal. I know no other way.

Dr. David: Yes.

Dr. Danielle: It's something that I completely accept. It's integrated into my way of living. It's almost like my wheelchair, it's a part of my body. I pay necessary attention, but not too much negative attention.

Dr. David: Good for you. Other people aren't always so good at that, so I'm wondering what it was like for you at school in the early years.

Dr. Danielle: Yeah. It depends on ... It's different having a congenital disability versus having some injury resulting from being in a wheelchair. Like I said, it's something that I've known. I got my first motorized wheelchair in kindergarten. The early school years, I felt like I was a kid like everyone else. I didn't even think of myself as being different. I've always done well academically, and had a lot of friends.

My parents always treated my sister and I as equals, which I find very important and really helpful in my own development. They weren't overprotective. I went out with my friends. I went to summer camps, sleepovers. I feel like they didn't see me as different, and I didn't see myself as different, and subsequently my social circle, my teachers didn't see me as different.

Dr. David: Yeah. How wonderful for you. I suspect since you're a psychologist, that you can answer this both with your psychologist hat and/or your other hat. I suspect your attitude of that you didn't see yourself different led other people to experience you as you are and as not different.

Dr. Danielle: Yes. I think because I didn't see myself as different, I had a positive attitude.

Dr. David: Did your parents ever give you any instruction or advice for dealing with being different from the other kids?

Dr. Danielle: Their motto was like this. There are ways to negotiate and navigate my disability. I can do everything that the other kids could do, but I have to just be a little creative, and think of ways to make it happen. It's really essentially a hopeful message. I always felt that there were no limits. I could do it. I just had to just think of a way to make it happen.

Dr. David: Yeah. Wonderful. I gather then that you were not the target of teasing or discrimination as you were growing up?

Dr. Danielle: Actually, no. I feel like it was just the opposite, that in some way I felt that people were drawn to me in a positive way, in a way that was ... Like they were eager to help. It's interesting, because even living in New York City, I find the same thing. New Yorkers have the reputation of being rude and dismissive, but I find it the opposite, that someone's always willing to open a door for me, or hand me my Starbucks coffee from a high counter, or even help me in the high-end department stores shopping, get clothes, and not discriminated against at all.

I'm also a very social and extroverted person, which I think helps also with that.

Dr. David: Yeah. It definitely sounds that way. That's wonderful. That should be inspiring to other people who are maybe in a similar situation or who have found themselves in a chair later in life and didn't grow up with it. It at least points to the possibility that attitude can make a real difference.

Dr. Danielle: Yes, especially people who are afraid to fit themselves out there. It's true. If you just recently suffered an injury or having a disability is somehow a new way of life for you, you have that anxiety.

Dr. David: True.

Dr. Danielle: Sometimes fear of the worst is happening, but quite the opposite could actually happen.

Dr. David: Your work right now, a lot of your work focuses on working with other people with disabilities of one sort or another, and with the focus on relationships and dating and so on. Of course, I have to wonder how that was for you in high school and then later in college, which are supposed to be very social times and times of often sexual experimentation. How did you deal with that?

Dr. Danielle: That's a really good question. Adolescence is a key time for starting to develop, obviously, interest in dating, and romance, and sex. I mentioned already that I've always achieve academically, and I've always had a big social circle, but the one area that I struggled in was this one; dating, romance, finding a significant other. I felt excluded. I just felt like I wasn't a part of it.

My friends, everyone around me was being asked for home comings, and proms, and having their first kiss, and I was just always wistfully wondering what that would be like, even feeling hopeless that it may never happen for me.

What's interesting, Dave, is that in the literature, this is very common for adolescents with disabilities, because they're often sheltered by family and friends who are reluctant to talk about them being sexual beings, sexual people. If your families and friends don't want to talk about it or discuss it with you or look at you in that way, then you're given little opportunity to normalize it.

What's really interesting is that achieving academically is often stressed instead. The implicit message as a disabled adolescent is, "Listen. You're probably not going to find romance, or love, or get married, or have a family, so concentrate on developing yourself intellectually." In a sense, you may not be sexy or have sex appeal, but you have a good brain.

Dr. David: Yeah.

Dr. Danielle: If you really think about it, that's hard to hear. That's like me telling you, "Listen. You're never going to find anyone, Dr. Dave. I'm sorry, but ..."

Dr. David: That was so terrible.

Dr. Danielle: "... no one's ever really going to accept your disability." That's just a really negative message ...

Dr. David: It sure is. Somehow now, to some degree – I don't know how much we can discuss that – have overcome that. I'm wondering if at any point you got some psychotherapy and if that played any role for you.

Dr. Danielle: I wish I ... Growing up through high school and college, I had no experience with psychotherapy, and I never sought a therapist. I struggled with this issue even through college. In hindsight, I really wish I had a professional to talk to, someone that could really understand my situation, and that was open to talking about it. That could help me be get in-touch with myself as a sexual, attractive

person who has a lot to offer someone else in a romantic relationship. I didn't know of anything like that. I don't think my parents did either.

Dr. David: At what point did you decide you wanted to become a psychologist, a psychotherapist not having had any experience in that domain?

Dr. Danielle: I wish I could give you a more exciting answer. I just simply decided in high school when I took an intro to psychology course, and I was interested in it enough that I decided to major in it in college. Then I would go from there to see how I liked it.

At that point in time, really my struggles with dating and romance had nothing to do with me deciding to become a psychologist, or even the psychology of me having a disability wasn't related. I just simply like the field.

Dr. David: At what point did you begin to put the two together? Because I have to assume that at some point there was some dawning recognition of, "This is kind of a psychological issue for me, and I need to deal with it somehow."

Dr. Danielle: Yeah.

Dr. David: Did that begin to dawn on your graduate school at some point, or ...

Dr. Danielle: Yes. Thank, God. It eventually dawned on me. I moved to Manhattan to go to graduate school. It wasn't until then that I spread my wings, so to speak, and began to fly, and began to date.

Dr. David: How did you manage that transition?

Dr. Danielle: I came to Manhattan to go to graduate school, but I also was aware that New York is a very liberal, open-minded, highly-populated city. I was hoping that that would increase my chances of meeting someone who would be romantically interested in me and vice versa.

When I came to New York and moved into my apartment, I signed up for Match.com, and that was the online dating experience launched me into it. I just started taking note of the similarities and differences between my experience, those with my friends, the trials and tribulations. It came together when I also started networking and meeting other people with disabilities and seeing that they had common issues and struggles.

Also, my work clinically I observed struggles with dating and romance, and not just with physically disabled people, but also people struggling with mental, psychiatric disabilities. They all came together, and I realize that this is an area that's problematic, and that no one is really reaching out to help and fix this situation.

Dr. David: That raises an interesting question, because I would think maybe there would be other professionals who have targeted this as an issue, or maybe a national association, or a national support group. Is there no such group that focuses on sexuality, dating, relationships for people with various disabilities?

Dr. Danielle: Yeah. I'm sure that it's randomly, sporadically addressed. I've said this before, too, in some of the other interviews I've done. It's just ... There's been campaigns to help us with a lot, many aspects of our life, our lives as disabled people academically in college, in the workplace, but there's really been no campaign designed to improve our romantic relationships, and to increase our satisfaction in this area, to integrate us into this area. It's an area where people really struggle.

First and foremost, the negative stereotypes and stigmas or just... I feel like they're entrenched. It's easy to see if people assume that because you have a disability, or you're in a wheelchair, whatever, you're not sexual. The big one is, "You can't have sex," or, "You won't make a good wife," "You won't make a good mother," or husband, lover. "You can't have children." "You're not sexy." This is what comes to people's mind when you mention disability and dating.

Dr. David: Yes. One thing that just popped into my mind as maybe helpful, is this movie. I forgot the title, with Helen Hunt, who's a sex therapist. What's the name of that film?

Dr. Danielle: "The Sessions."

Dr. David: "The Sessions," yes. What was your reaction to that film? I thought, for me, it was like a real eye-opener, a really courageous film to address it as explicitly as it did.

Dr. Danielle: Me, too. I remember seeing it. I saw that it at The Angelica in Manhattan. I remember thinking, Thank God that someone's showing this on the big screen. It's like a relief just to see it exposed. I think they did a really good job, specially the actors who played the disabled, the man was polio in the film. I think they did a great job on really illustrating the issue.

Dr. David: Yeah. They sure did. I would think you'd have a copy as a therapeutic tool for the people you work with.

Dr. Danielle: I know. The issue is this. If you really showed the anxiety, the apprehension, the hopelessness, the depression, the self-consciousness, because you take these stereotypes or stigmas that society has, and then you internalize them. They become a part of you and the way you view yourself, and you don't view yourself as a sexual person.

Dr. David: Yeah. By the way, it's hard enough for people who are not disabled. Then there's like conflictual area, difficult. It just compounds it. It can be challenging for just about everybody.

Dr. Danielle: Yeah.

Dr. David: Last year, you were awarded the title of, "Miss Wheelchair New York."

Dr. Danielle: Yes.

Dr. David: Tell us about that. How did that come about?

Dr. Danielle: You don't really think of that when you think of PhD, right?

Dr. David: Right, we don't.

Dr. Danielle: My friends discovered the pageant online. It's a pageant that recognizes achievement and accomplishments in disabled women in wheelchairs. Unfortunately, it's not very well-known. She uncovered it somehow online, and nominated me, and the pageant director called me, and I applied. I won the title. I wanted to pursue the title and win it.

I was actually very strategic about it, because I knew that having this title would help open doors for me and allow me to begin to promote my views on dating, and sex, and relationships. Because at this point, I was already passionate about it, and I'd already written a couple of articles about it.

I felt like this unique combination like having a PhD, having this title, would really make me palatable to pop culture. To the masses who like pop culture, and just make more people listen, and facilitate, make it easier for me to change this negative societal view. Because it's not just, "Wow. Here's a woman who has her doctorate," but, "Wow. She's a pageant winner? What does she have to say about this?" I feel like it really has had a good response.

Dr. David: I'm thinking of, as I hear you talk, I'm thinking of Marly Madsen. Is that her name? The deaf actress. That film has been a real pulpit for her in terms of showing how capable deaf people are. I assume you've seen her. It's something or other.

Dr. Danielle: Yeah. I don't recognize her name, but I'm sure if you showed me her picture ...

Dr. David: Yeah.

Dr. Danielle: Yeah. It's a good point. I mean, people don't expect you to be a professional, and people don't expect you to be a highly-educated, professional who's in a romantic relationship, or who's active romantically. I use the term romance loosely, dating and sexual. People don't expect any of that.

Dr. David: I don't know how much of your personal experience you feel comfortable of sharing, but I am wondering what's happened for you? Have you been able to move along in that dimension in your own personal life?

Dr. Danielle: You mean, in terms of dating and romance?

Dr. David: Yeah, dating, and romance, and sexuality, if you're comfortable talking about that.

Dr. Danielle: Yeah. I'm always putting myself out there and always trying to find someone who likes me and I like them. I think that's important. It's not just someone who likes me and can look past my wheelchair. It's also me breaking them. I use that point with my clients a lot. This is a two-way street. It's not just, "Okay. Let me take this person. They like me. They accept my wheelchair. No one else will." No. It's, "Do you like them to?" That's very empowering, and that's very important.

I'm single. I label myself as single, single and dating. I'm out there online. Or now there's the new social apps for the iPhone that really facilitate meeting people, or just friends, or romance. I think it's important that I keep ... I call it "field research." I need to be out there and know what it's like, and be rejected, and be able to take that experience and translate it to my practice and my work.

Dr. David: Are you talking about Twitter and Facebook or other sort of more specialized apps?

Dr. Danielle: That's interesting you brought that up, too. Yeah. Twitter and Facebook, and now ... Actually, there's kind of an explosion of new apps for the iPhone. The one

that was recently brought to my attention was this app called, Tinder. It's really like online dating on speed, maybe on cocaine.

Dr. David: Dating on speed. How so?

Dr. Danielle: It's an app on your iPhone, and it's a very basic profile. You really just see pictures of people who are located in your area, pictures and the ages of people in your area. You either like or not like them on the screen. If I like someone and they also like me back, then it's a match. You're immediately chatting with them in real-time on the phone. I'm trying it out. It's really interesting, because you're exposed to a high volume of people, and I think as a disability trying to date in our society, which still has a lot of these negative stereotypes, I guess you could say, it's important to expose yourselves to a lot of people, get to know a lot of different people. It increases your chances of finding someone who's interested.

I get the same rejection that other people get. I recently got, "You're so interesting, and beautiful, and smart, but honestly ... I have to be honest. I have never dated someone in a wheelchair. I don't know what that's like." That's very common.

Dr. David: It's like you have to be sort of like a salesman. Part of the salesman experience is you have to be willing to experience lots and lots of no's because you can get to some yes's.

Dr. Danielle: Mm-hmm (affirmative). You have to have a thick skin about it. I encourage people with disabilities all the time to keep out there and keep dating, because it's also very ... Some people give up on dating altogether, people with disabilities. They'll just give up on dating, think it's not possible for them. It's not going to happen. The more we are all out there dating, the more normal this becomes.

Dr. David: Yes.

Dr. Danielle: When someone's interested in you, their friends aren't saying, "Hey, buddy. What are you doing? Why don't you just date someone that doesn't have all the problems that she has in a wheelchair?" Now, it becomes, "Oh yeah. I dated a girl on a wheelchair before. Yeah, she was cool."

It's all part of the grand scheme.

Dr. David: Yeah, right. Going back to "Miss Wheelchair New York." I gather, you've been the focus of quite a bit of media attention. Of course, I'm media, I guess. I'm

talking to you right now. How has that been? What kinds of doors has it opened for you?

Dr. Danielle: It's going really well. It fueled my fire and my passion even more, because I realize how much people want to talk about this topic, especially people with disabilities. Like you said before, the fact of the matter is that dating is difficult for everyone. It's a universal struggle, but when you add a wheelchair to the picture, it makes it 10 times harder. It makes it a relatable topic, not just people on wheelchairs, but people who are able bodied as well.

Dr. David: Yes.

Dr. Danielle: They can understand and they're open, and willing to listen to what I have to say. I think it's important. You know, I've been getting media attention from not just media specifically, from people disabilities, but also general media like The New York Daily News, Yahoo. That's very important that both audiences are listening. If any positive changes are going to happen ... It can't just be people with disabilities listening to what I have to say. Yeah, we all know that is a problem, but everyone needs to listen and change their outlook.

Dr. David: Yes. I have the impression that you've also become an advocate for the disabled in New York City. Is that so? If so, what can you tell us about that work?

Dr. Danielle: Yes. I've done some advocacy work since I've been here. The main areas that I've been involved in, I've been involved in my local community board, which is the board that represents my neighborhood in Manhattan. I often will help, will represent disabled rights and accessibility, bringing to their attention the accessibility issues. For example, there was a really dangerous curb near my apartment building that didn't have a curb cut, a ramp that lets you up onto the curb. Anybody in a wheelchair would have to go on the street for a little ways, until they could come up onto the sidewalk where there was a parking garage because the parking garage would have the ramp. I would say it's dangerous. That was one of my campaigns was to present this to the board authority and the local community board. I thought it would be a no-brainer. I thought they would see my picture and say, "Wow. We didn't know it was so dangerous." It was really a struggle. I had to get petitions. I eventually got an ADA compliant curb cut put there. That was a nice success.

Dr. David: Yeah. Good for you. Each success builds to the next one and more and more of them.

Dr. Danielle: Yes.

Dr. David: In addition to your work at the South Beach Psychiatric Center where you're working in Brooklyn, you also have a private practice to deal with the sorts of issues that we've been talking about here. I see that you're offering consultations services on Skype, too.

Dr. Danielle: Yeah.

Dr. David: How's the Skype consulting working out for you?

Dr. Danielle: I'm very excited about it, because I engineered this, so it's my private practice. I do it all via Skype. I engineered it specifically to make it easier for people with physical disabilities to attend therapy.

Dr. David: Yes, I noticed that.

Dr. Danielle: It makes a lot of sense, because you know, we all frequently deal with environmental barrier. Just difficult to leave the house, or we have home attendance, or incimate weather. There's just a whole host of factors. I felt this would be great, because you don't even have to leave your house. I find it wonderfully rewarding, and I find a therapeutic relationship richer than I ever expected.

Dr. David: Really?

Dr. Danielle: Yeah.

Dr. David: That's interesting.

Dr. Danielle: Because it's as someone with a disability, I understand the intricacies of having a disability. I've walked in their shoes, and I find that this coupled with my doctorate makes it really great therapy.

Dr. David: Yeah. I'm wondering if there's almost a kind of anonymity even though I think you're doing this on video, on Skype?

Dr. Danielle: Mm-hmm (affirmative). Yes.

Dr. David: You can see one another, so it's not totally anonymous. There is a bit of a remove, and I'm wondering if that remove actually might make it easier for someone to share.

Dr. Danielle: Yeah. That's interesting. I'm not sure about that, really, and I'm not aware of any research about that yet, but maybe. You cut out the whole piece of getting out of the house, going to a therapist's office, being in a therapist's office. That can cause apprehension.

Dr. David: Sure. Fear that somebody knows you, might see you there or something like that, too.

Dr. Danielle: Yeah. It's just really convenient. You can cut out the whole travel time and ...

Dr. David: Well, is everybody that you're seeing that way, are they all in wheelchairs, or are there other sources of disabilities that are finding you as well?

Dr. Danielle: I have a mix of clients. I have people who aren't physically disabled at all. Actually, my work, my day job at the out-patient clinic, I see people with just mental health issues. Few have disabilities, but they all have mental health issues. I see a wide array of disorders, and struggles, and different levels of severity. It's kind of the same in my practice, although I have more people with physical disabilities.

Dr. David: How about the people who come to the clinic where you physically work? Do they seem to accept the fact that they're working with somebody in a chair? Do they express surprise? What kind of reception are you getting?

Dr. Danielle: Actually, people who come to the clinic are in desperate need of help. They're at a point in their lives where they want to make a change and they don't know how to do it, and they're reaching out for help. They respect me as a professional and as a clinician. I'm from a psychodynamic orientation, so the therapy is about them and how they project their own attitudes and beliefs onto me. I don't reveal much about my own self. I feel like having a disability, it's the same ... I mean, they might have an issue with me, because I'm a female, or because I'm Caucasian, or because I'm 35, or because ...

Dr. David: Good point. Yeah.

Dr. Danielle: It's the same kind of dynamics that any other therapist would experience, I feel.

Dr. David: Yeah. You anticipated what was going to be my next question, which was to ask what kind of a therapeutic approach you use and psychodynamic. That's wonderful.

Dr. Danielle: I trained at the New School for Social Research.

Dr. David: Are they known for that?

Dr. Danielle: Yes.

Dr. David: Yeah. I went to the University of Michigan, and I wouldn't be surprised. I haven't been in-touched to see if their orientation was the same as it was when I was there, but the clinical psychology track was very psychodynamic when I was going to a school there. The New School, I guess, was one of the places where years ago when psychoanalysts were fleeing Germany and other that were being threatened. I think the New School is probably one of the places where some of those very influential analysts landed and helped to establish the psychoanalytic approach in this country.

Dr. Danielle: Yes. That's correct. That's correct. It has a really rich, rich history.

Dr. David: Yes. That was just kind of bring channeled to me as we're talking here, I heard that somewhere.

Dr. Danielle: It's a great learning environment. I'm really glad I went there for my doctorate.

Dr. David: Now, I understand that among your many projects, you're working to produce a pilot for a reality-based TV series?

Dr. Danielle: Yes.

Dr. David: Wow. What's that about? Tell us.

Dr. Danielle: I know. I really have nothing on my plate. I'm bored. It's a two-part, I guess, let's call it a "campaign" and a mission. First part, I'm working with people with disabilities to help them feel integrated into the world of dating and romance, and to improve their, I call it "date-able self-esteem" because I feel it's through my work it's two different concepts; self-esteem versus date-able self-esteem. I always say that the reason I'm single is not because I have low self-esteem. I'm happy with my career, I have great friends, I have an apartment in Manhattan, but how I feel about myself as a date-able, sexual person is different. That's part one.

The other part is just to normalize dating someone with a disability for the rest of the population and dispelling all these negative stereotypes and I feel that one of the best ways to do this is through ... Just to expose society on a huge level using the medium of television.

Dr. David: Yeah.

Dr. Danielle: Just to really show people. I could go around locally and go to local hospitals, and nursing homes, and high schools, but I'm not going to change the way people in Nebraska see this. I want to do something through television. The concept is through reality TV, just show people who you would be a professional and dating and socializing in a wheelchair. You just happen to be in a wheelchair.

If you think about it, it's super important because if you compare it to other populations, so to speak, not that long ago it wasn't acceptable to be gay. It wasn't cool to be gay. It wasn't cool to be in a bisexual relationship, and now, it's acceptable and cool. Let's do that. Let's make this happen for people with disabilities.

Dr. David: Yeah. That sounds like a great strategy for doing it. I'll keep my eye out for that show. Good luck with that. Do you have any other irons in the fire?

Dr. Danielle: I have a lot. I always have irons. My fire is like burning high right now. One of the main things I'm going to be doing is I'm launching a podcast where I want ...

Dr. David: Oh no. Competition. Competition.

Dr. Danielle: Don't worry. Don't worry. I want to be able to offer dating advice to people with physical disabilities as like a call in show.

Dr. David: That's a great idea.

Dr. Danielle: Thank you. If you can't afford going into therapy or maybe you're not ready to be in therapy and you want to anonymously ask a question, this is the venue that I'm going to offer people. Kind of like a Dr. Ruth, but sexier.

Dr. David: Sexier? Okay.

Dr. Danielle: I am launching this the first week of June.

Dr. David: This is really happening.

Dr. Danielle: Yes. I would encourage people to check my website for the official launch details.

Dr. David: Why don't you go ahead and give us the website right now? I'll definitely be mentioning it in my commentary, but let's put it out there right now.

Dr. Danielle: Yes. My website is simply my name. It's DanielleSheypuk.com.

Dr. David: Great. You mentioned part of the two prong plan is to change the attitudes of able bodied people toward their disabled peers. Have you seen any changes over time in those attitudes? Do you have any sense that things have gotten better or in the process of getting better? Or is it too early to draw any conclusions?

Dr. Danielle: I think we're at the forefront of seeing some major change in this area, that being dating, romance, and sexuality. I feel like it's really at the very beginning and we've seen some major breakouts. For example, "The Sessions" like we talked about. There is a reality TV show on Sundance that's called "The Push Girls." I don't know if you're familiar with it.

Dr. David: No. I haven't seen that.

Dr. Danielle: Yes. It's about four women who have spinal cord injuries. I think they're in their roughly 20s and 30s. They are four friends in L.A. It just shows the everyday life of someone in a wheelchair. It's very important, because, again, wheelchair people think dirty sweatpants, bad haircut, that people don't expect you to have a good haircut, wear stylish clothes, wear high heels. This show is helping to just normalize the everyday routine. I think that's opening a window.

Dr. David: Yes, definitely. Somebody there is definitely in the same wavelength ...

Dr. Danielle: Yes.

Dr. David: ... that you're on.

Dr. Danielle: I just did an interview for Women's E-News on of their journalist is doing a piece on the new social apps that I spoke about before. It's like Tinder. There is an adolescent piece to these apps. They're very highly monitored, and censored. There's talk. I discussed how this can help people with disabilities, adolescents specifically, networking, and meeting people, and feeling integrated, and flirting, and things like that.

This is also very new. I really wish I had that when I was an adolescent.

Dr. David: Yeah.

Dr. Danielle: Actually, that's another iron in my fire. Women's E-News is going to be bringing a piece of their magazine which will be an adolescent segment. In the fall, I'll be doing some writing for adolescents, which is called "Disabilities."

Dr. David: Wonderful.

Dr. Danielle: Yeah.

Dr. David: That's great. Maybe there will be a way for them to respond back to you and get some dialogue going?

Dr. Danielle: Yes. I'm sure.

Dr. David: As we begin to wind down here, some people don't like the term "disabled" and preferred to talk about "differently abled." I'm wondering if you have a position on that.

Dr. Danielle: I don't have a strong position either way. I feel like I'm just not that caught up in the terminology, although, I do understand what the proponents of differently abled are saying.

Dr. David: Sure.

Dr. Danielle: I'm not really offended either way.

Dr. David: Well, I know you've got an appointment coming up. Is there any final thought that you'll like to leave our listeners with?

Dr. Danielle: Of course, it's going to be a positive one.

Dr. David: Good.

Dr. Danielle: I tell my clients all the time, I tell everyone that I don't care what your disability is or how severe it is. Dating and romance and having a satisfying sexual life is possible for you. It's just is. Period. End of story.

Dr. David: Okay. Wonderful.

Dr. Danielle: I encourage people with disabilities to keep dating and keep putting themselves out there, and eventually society will wise-up and change these negative attitudes.

Dr. David: Okay. Dr. Danielle Sheypuk, thanks for being my guest on Shrink Rap Radio.

Dr. Danielle: It's been my pleasure. Thanks for helping me get this message out there.