## TRANSCRIPT OF AUDIO FILE:

## **BEGIN TRANSCRIPT:**

THERAPIST: Hi, come on in. CLIENT: Thank you. (Pause) THERAPIST: Good morning.

CLIENT: So last week this time I think I was out of practice... was part of it, just like it'd been a long time. And I think... so you asked if I knew I was frustrated? And I don't know what I said, if I answered that at the time. But I had known that I was frustrated, but not perhaps the extent to which I was not talking about being frustrated and thus had difficulty talking about being frustrated with you. My friend Franco (sp?) is applying for academic jobs right now, which is a stressful thing normally. [0:00:59] But he's also... (chuckling) the advice he got from his thesis committee was that he should just do another project real quick before he applied for jobs and use that as the talk that he gives. So that gives him a month to do the work that normally would take a year or something, which is terrible advice. But it's what he got. So I've been talking less about my frustrations with him so that I can be available to him in that clearly not very good time in his life, and not talking with Tanya about it.

So there's kind of just a... I think it had turned into a... you know, it's like when I would come in here six months ago, and I would be very angry or upset and not as aware of it or aware of the extent to which I was tamping it down to keep going through. [0:02:06] I think that's part of what was going on. (Pause) So it's a good thing that we had the sessions last week. Tanya and I went to a wedding of one of her cousins this weekend, which was a hard time for me? The wedding was beautiful, and there were a lot of parties, and that was all (pause) fine. There were the normal kind of annoyances that go along with going anywhere with her family. No one's ever on time for anything. We made it to the wedding on time by about two minutes and only because we tried to get there about 40 minutes early. So that was good. [0:03:03] (Pause) And it's one of those things. I don't particularly care if we're always going to be late if we're not also trying to get there on time. So it's sort of like a... I don't know. The utter failure to match one's own expectations is the particularly frustrating part of it for me. Anyway, so I just (chuckling)... [I'd started to say] (ph), the expectation that we'd be an hour late and that it was... so I can deal with that. But that's... that goes to our talking about changing expectations in the face of not being able to trust that something will happen. Reset the expectation is sort of my response to it. (Pause)

You know, all of Tanya's extended family wanted to know what a biomechanical engineer does. [0:04:06] There was a... I'm not exactly sure how to frame it. It's a reasonable question except for the panic in all of their eyes as they're asking the question, because of... I'm-not-going-to-understand-what-you're-going-to-say panic. So I can't give a good response in that face. But these are minor things that just come with the territory. They're okay. We kind of get through them and move on. It was... the weekend was particularly hard, I guess in one general way and in one specific way. The specific way was it was very hard to sit through the same wedding ceremony, the same liturgy that I had gone through. [0:05:09] You know, they say essentially the same vows to each other, and here I am sitting next to a person. And having the vows sort of read to me is a (pause) painful contrast with the reality of my situation at present. So these are the intentions or these are the promises, and (chuckling) here's where we are.

THERAPIST: Were there particular vows that were especially hard to hear? (Pause) [0:06:01]

CLIENT: So in the service they do this strange thing where they do a declaration of intent, and then they actually do the vows. And they're, like, separate parts of the ceremony, presumably to ensure that the person they're forcing to get married isn't being forced to get married. That's why they have to declare their own intent. It's all historical and kind of silly. And then that part... that's the part that contains the forsaking all others piece. So that's a little hard to hear. [0:06:58] It's sort of like I was... I guess I was in the process of dealing with that issue? And then things got dramatically worse on the depression, suicidality front. And so it's hard to look back on any period of my marriage and say, that was a really good time for longer than a few weeks. (Pause) Then in the actual vows portion there's the in sickness and in health part. That's kind of a... (Pause) It sounds like a trap to me now.

THERAPIST: Hmm. (Pause) [0:07:59]

CLIENT: You know, I made the vows fully aware of Tanya's history of depression and amidst the anxiety that was her sort of default state during the wedding planning. [0:09:11] But this... where we are now is not really on the map when I did that, so, you know. (Pause) The whole thing kind of has a, for better for worse, for richer for poorer, in sickness and in health, sort of duality contrast thing to it. So it's (pause) hard to deal with when it feels vaguely like a bait and switch. [0:10:03] Like, yeah, there'll be both of these things. You'll have to deal with some bad things, but there'll be good things. Well, it's not been a whole lot of good things, so... (Pause) [0:11:00]

THERAPIST: What are you thinking about?

CLIENT: I was thinking about the other difficult part of it, which was the family entire. [0:12:01] In the entire scope of the weekend I didn't... (Pause) So Tanya's father and her sister both come to visit us in Andover, but I haven't seen or really spoken with either of them in five or six months. So...

THERAPIST: It's been that long since they've been here?

CLIENT: Maybe I'm misestimating. So I guess Amanda was here in February, so that's been about six months. David was here maybe in March. So... maybe April. One of those two. So four to six months, yes. So it's been that long since they've been here. They've been in touch with Tanya and talking with her, which is good, but essentially not communicating with me at all, which (pause) I wouldn't say I've thought about a whole lot. [0:13:08] But in seeing them again, it's sort of like, yeah, I guess things have been hard here, and where have you all been? And we're not going to even talk about it being... having been hard or anything the entire time that we're here? I just... (Pause) You know, there's the sort of mutual acknowledgement that it'd been a long time since we'd seen each other, and it's good to see you. And I think that was real. That's about it, so... (Pause) [0:14:00] And so I think I feel more alone in this and angry about that. Not that they're particularly people that I would rely on (inaudible at 0:14:16) that they were the people that were involved in this in... at least vaguely in the crisis situation. So it's... (Pause)

THERAPIST: Do you feel like they just... you're not on their radar, they don't get it? Or do you feel like they're sort of actively trying to avoid something?

CLIENT: I don't know. I don't know. (Chuckling) So I guess... we're... some of us are leaving the reception, the wedding reception at 2:00 in the morning. There's still a whole lot of dancing and drinking and partying going on. [0:15:01] But it's time for some of us to leave, myself

included. But Amanda, Tanya's sister, is still there. And so, in that... that was the only moment in which we had anything like a conversation about it. And in that moment she wanted to tell me that... I wanted to leave, didn't really want to be having a conversation at that moment. This was a, like, bye-I'll-see-you-tomorrow sort of conversation on my part (chuckling). But on her part it was a, so glad to see you, I've been thinking about you every day. I know we haven't talked, but I've been thinking about you. (Pause) To which I sort of... I said, well, you're life hasn't been exactly great either. She's been fired from her job for failure to be organized at all. [0:15:59] (Pause) To which she responded, yeah, but... something to the extent of, that's not an excuse. So no, I don't think I'm not on their radar? I think that... I think in her case she feels like she ought to do something but isn't quite clear what it is. And that has set up some sort of guilt cycle that prevents her from speaking to me except when she's really drunk. It's not... (Pause)

So I guess, in thinking about the whole thing, if this were a weekend where they were all coming... because no one's life is in a particularly wonderful place right now, and everyone was like, let's just leave everything behind and have a really good time and focus on these people who are getting married, I can get behind that in some sense. [0:17:01] A, that's not what they were doing, because it's not like they're normally dealing with their issues, so it's not like leaving them behind is a change. And B, David's approach to the weekend was to try to mend fences with all of his siblings who are not... someone's always fighting among his siblings. There are, like, six of them, so to... so it's... so that... in no sense was that the approach. So it's... I don't know. I guess I've lost the thread. I can sort of rationalize what's going on, but I'm still upset about it. (Pause) Which I find a little strange, in that watching-myself perspective, because I didn't really go there with any expectation of... I actually didn't go there with any expectations at all. [0:17:56] So I... (Chuckling) in some part of me, it's like, what are you upset about? But... (Pause)

THERAPIST: Well, it sounds like you didn't go with any explicit expectations.

CLIENT: (Chuckling) Fair enough. Yeah. (Pause) [0:19:00]

THERAPIST: You are deeply unhappy and deeply angry about your situation.

CLIENT: Sure seem to be, yeah.

THERAPIST: Yeah. Sure seems that way to me.

CLIENT: (Chuckling) (Pause) [0:20:00] I guess I'm sitting here trying to sort out, like, why? Why am I so unhappy and angry about this? [0:20:58] (Pause) And it seems like, the more I try to recapture a sense of self, the more I am like, what the hell was all of this? And the... (Pause) You know, I think you've noticed that I value personal responsibility. (Pause) And we've talked about, to what extent is this Tanya's fault or not Tanya's fault? And so the farther we get from it the... (Pause) [0:22:01] I guess the more a claim of a lack of control or whatever seems (pause) like a convenient excuse or something.

THERAPIST: On her part.

CLIENT: Yeah. Yeah. (Pause) [0:22:59]

THERAPIST: Well, I wonder... were you going to say something?

CLIENT: I'm very curious about what you wonder. I was just going to say it's also... I mean, I can't really even talk about it with her because she doesn't remember it. So it's like, how can I hold her accountable for something she...? I'm in a position of power in a sense, of I can say,

this happened, or, you were this way. And how can she rebut or comment? So it's like I can't even, I don't know, address it or something.

THERAPIST: And [that confused me for the moment] (ph) because it sounds like at least some important features of her you feel are still there...

CLIENT: Mm-hmm.

THERAPIST: So, when you said you can't address it because it was in the past, I (crosstalk)...

CLIENT: No, she doesn't remember it. It is... it was erased from her memory by the ECT, so she...

THERAPIST: Yeah. [0:24:01] (Pause)

CLIENT: So, like, the particularly bad period of our lives, she has essentially no memories from. (Pause) What were you wondering?

THERAPIST: It's interesting because it was sort of related to that. There's one piece of dealing with Tanya's illness in the present and then also in the past, which is sort of a traumatic event, for lack of a better term, that you went through, that you feel completely alone in and you can't share with her because she was there and not there at the same time. [0:25:10] Or... yeah, I guess that's one way of putting it. But, when you were talking just a moment ago and in terms of control and responsibility, I was thinking that I... it sounded like, to me, one of the conflicts that you're experiencing is being married to someone who you worry has a sort of fundamentally different personal and moral ethic than you, which is not about the ECT...

CLIENT: No, that's right.

THERAPIST: It's not even about her illness.

CLIENT: No, that's right. That's right. It's sort of like, through the lens of the illness I have come to see this more clearly or something.

THERAPIST: Yes.

CLIENT: Yeah. And that is... yeah, no, I think that's a really nice insight I was not... (Pause) [0:26:00] That thought flitted through my head once two days ago, and I haven't looked at it since. And I think that visiting her family and being frustrated by, like, everyone in her family (chuckling), like, extended family included, being... having a particular sense of ethic is... or approach to life that is dramatically different from mine. Yeah, I think that's a large piece of the... (Pause) [0:27:00] Yeah, and I have no idea what to do about that. Yeah. (Pause)

THERAPIST: Well, this is certainly not the only solution, or it's not the whole solution. But this kind of thing I think you can have conversations with Tanya about. [0:27:58]

CLIENT: I think that's right. (Pause) [0:29:00] Yeah, I guess I'm thinking about two things. One, I'm not exactly sure how to have those conversations. It's kind of a practical issue that can be dealt with. The other is that I think this is... (Pause) I think it helps explain why I have been (pause), I'm not quite sure how to phrase it, but less than perfectly pleased by her wanting to take on some of her responsibilities again. There's this element of not trusting that that's a good idea in the sense that she'll overburden herself. [0:30:02] But I think this is also like a, I don't know (pause), a sense of assuming responsibilities when it's convenient as opposed to always or something. And so it's... now it's convenient again, so you want to take them back. Well, great. That's not... that's not now we do things. I think that's... I think that's right. (Pause) So in a practical sense I'm not sure how to have the conversation, because clearly I'm pretty

frustrated or upset. And on one level it's not particularly kind to start into a conversation that... where I have a whole lot of pent-up frustrations. [0:31:07] And on the other hand it's not particularly clear that she can handle a conversation where I am very frustrated. I think she probably can. But...

THERAPIST: And handle, meaning...?

CLIENT: Not go into a spiral that ends up in the very bad place again, you know, in suicidality or self-injury or the hospital. (Pause) [0:32:00]

THERAPIST: I can't answer that on a practical level...

CLIENT: (Chuckling)

THERAPIST: But it seems like ultimately an untenable way to live your life.

CLIENT: Hmm.

THERAPIST: On a very basic level you can't control for all the factors that will upset her. And I appreciate your saying, well, me speaking is upsetting her. So I can choose not to speak, which is different than other things which seem more out of your control.

CLIENT: (Chuckling)

THERAPIST: But I think as a general approach in your marriage it's untenable, on so many levels, not the least of which is, the pent-up anger will just continue to grow.

CLIENT: Right. (Pause) [0:32:00] Yeah, I hear you, and I think you're right. I just don't... (Pause) Yeah, I don't have a particularly clear view of what a tenable strategy is at this point. [0:34:03] (Pause)

THERAPIST: Well, when one feels really, really angry at the person or people they love, being worried about the impact of that anger, I think, is a general fear. I mean, I think that's kind of a fear in general that you might have regardless of Tanya's psychologic state...

CLIENT: Sure.

THERAPIST: And then it's exacerbated by it. (Pause) [0:35:00] [0:36:00]

CLIENT: So what do people do?

THERAPIST: Well, they can do one of two things. They can keep it inside, or they can express it

CLIENT: (Chuckling)

THERAPIST: Or maybe the question was more complicated than that. Probably it was, because that's sort of obvious. (Pause) [0:37:00] [0:38:00] What are you thinking?

CLIENT: I'm thinking that in order to express it to her I have to find the right level of not caring about the impact on her. I mean, I cannot be worried about the impact and say something. But in order not to be worried about the impact I have to, at some point, not care about what it does to her, because, if I know what's going to happen and I do it anyway, then I've done this thing.

THERAPIST: But you can't know.

CLIENT: No, I can't know. But, if I can reasonably project that it's going to do something bad and then I do it... like, I'm not going to throw a rock at your head because I can't know what's going to happen, but it's probably going to hurt. [0:38:59]

THERAPIST: That's so much... as a scientist that's... those are... that's a terrible analogy. One, you can predict with far more accuracy than the other by...

CLIENT: (Chuckling) Mm-hmm.

THERAPIST: So that's what's wrong with the argument, because you can't know. You can have a fantasy that you can know. I understand your prediction is not 50-50 random guess, but you still can't know. (Pause) [0:40:00] But you certainly feel that your anger can be destructive.

CLIENT: Yeah, that's definitely true. (Pause) [0:41:00] [0:42:01] Yeah, I guess I'm still stuck on, can't know. Yeah, I definitely feel that my anger can be destructive. I guess I've told you before that I've... sometimes when I'm very angry I want to smash everything. I don't, but that's a control thing. I don't do it, not, I don't want to do it. [0:43:03] So yeah, I feel like it could easily be destructive if I were to let it. And so that's certainly a component here, or it feels like it. But I'm... I guess I'm... yeah, I guess I'm stuck on, can't know. It's not that I don't accept, like... yeah, obviously I cannot know, there is not a... but I feel like you're making a stronger claim than that, like, I cannot project with any reasonable certainty, that like, yeah, it's not 50-50, but I can't tilt it much past 55-45 or something. (Pause) [0:44:01]

THERAPIST: Well, then maybe I'm not giving you enough credit so far as not knowing what you feel she can and can't handle.

CLIENT: No, I... you know, you're probably right. I just... I can't... I don't know, it's a... (Pause) I mean, I... no, I think you're right. I do not have a particularly good sense at this moment of what she can and can't handle because at any given time my sense of what she can and can't handle seems to lag behind where she actually is. It was accurate two weeks ago or whatever, but it's not accurate for the day. (Pause) [0:45:00]

THERAPIST: Well, James, we're actually going (crosstalk)...

CLIENT: (Chuckling) Okay.

THERAPIST: That we're going to need to end on that note. I was going to say... or I'm going to say, you know, I'm happy to meet with you if you wanted to do twice a week for a while. We can really just get into this. And we are into it. You've got a lot to figure out. There's some time constraints it sounds like, in terms of your job and figuring that out. So I just want to put that out there to you, that I'd be happy to do it. I think it'd be helpful, not to say that meeting once a week isn't helpful.

CLIENT: Okay, thanks. Yeah, I'm not sure offhand, I'll think about it.

THERAPIST: Okay.

CLIENT: And I'll be in touch. Thanks.

THERAPIST: I'll see you next week then. Okay, you take care.

CLIENT: Thanks.
END TRANSCRIPT