

BEGIN TRANSCRIPT:

THERAPIST: Do it often, but you know it's a great learning tool to do that, so.

CLIENT: Okay, that's fine. No I was just – it was just a -

THERAPIST: Yeah.

CLIENT: Question. If it was being done out there.

THERAPIST: Yeah, it probably one day soon.

CLIENT: Okay.

THERAPIST: So, how are you doing and how was your week?

CLIENT: Good. I think that you know going back after –

THERAPIST: Yeah.

CLIENT: You know last week's session and thinking about – you know I (sigh) I recognize that there – you know there's that hum, I don't know if it's a – I don't think that the correct description would be that there's like this volcano of emotion waiting to erupt. But I recognize it you know, there's – there's stuff there. [00:00:46]

THERAPIST: Okay.

CLIENT: You know and it's like over the years and whatever the number of years this has been, you know we kind of laid out a timeline last week.

THERAPIST: We did.

CLIENT: And it was you know that (sign) you know some of this stuff I've kind of been like dealing with in one way or another for ten – [00:01:05]

THERAPIST: 13 years.

CLIENT: Yeah, 10, 12 years, something like that.

THERAPIST: Yeah. Yeah.

CLIENT: And I recognize that it's like well, I've gotten to a place where you know – you know through my own Taoist practice –

THERAPIST: Yeah.

CLIENT: That it's like I can start to you know detect and to see you know when those feelings are starting to arise.

THERAPIST: Okay.

CLIENT: Not that I'm trying to ignore them.

THERAPIST: Um-hum.

CLIENT: Or to squelch them. But just to recognize that it's like – you know it's like welcoming a friend in. It's like okay, or you know, maybe not a friend – [00:01:36]

THERAPIST: Okay.

CLIENT: But it's like you're here anyway, have a seat. You know –

THERAPIST: So – okay so last week we talked a lot about you know, why –

CLIENT: Um-hum.

THERAPIST: You decided to come in.

CLIENT: Um-hum.

THERAPIST: And you know kind of looking at the relationship with your wife and it didn't turn out the way that you had wanted it to, even though you've been in it for 25 years now –

CLIENT: Um-hum.

THERAPIST: And kind of some of the things associated with that. And we talked about how you have sort of looked to meditation and Taoist practice to kind of help you cope with the fact that, and explain maybe – [00:02:10]

CLIENT: Um-hum.

THERAPIST: You know why for example, your wife's sexual abuses had such a negative impact on your relationship and your ability to be close to her.

CLIENT: Um-hum.

THERAPIST: When we talked about last week your burying is the wrong word – word. But not dealing with some of the strong emotions associated with that.

CLIENT: Um-hum.

THERAPIST: What – what did you come up with? [00:02:33]

CLIENT: (deep breath)

THERAPIST: Who is the old friend I guess is what I'm asking.

CLIENT: Oh, yeah, yeah – I think that those – some of those recurring feelings that you know, that maybe early on –

THERAPIST: Yeah.

CLIENT: Were a lot stronger. You know in terms of like really being angry.

THERAPIST: Okay.

CLIENT: Really being hurt. Really being frustrated. You know knowing that I went through periods of depression. [00:03:00]

THERAPIST: Yeah. Because of the marriage.

CLIENT: Probably, I meant here was – yeah. There was some other things going on there, but yeah that's probably the biggie, yeah.

THERAPIST: Can you tell me about some of those periods of depression.

CLIENT: Yeah. I got to the point of labeling them. You know, for me it was being in the pit.

THERAPIST: Okay.

CLIENT: You know it was like you knew you were there.

THERAPIST: Um-hum.

CLIENT: It was kind of like not necessarily just waking up one morning and you were there. It's kind of like you know there was this slip – [00:03:37]

THERAPIST: Um-hum.

CLIENT: Down kind of the steep slippery –

THERAPIST: The slippery slope, yeah.

CLIENT: Slope and then all of a sudden you're there in this pit. And it's like I can't get out. I can't – I don't have the skill necessary to figure out how to scale back up and get out, you know kind of thing. [00:03:53]

THERAPIST: It's interesting that you label that as something that you should have been able to do by having a particular skill set.

CLIENT: Hum (sigh). Hum, hum, hum. Yeah, I – you know back then you know there wasn't a skill set.

THERAPIST: Yeah.

CLIENT: You know it was just I'm here –

THERAPIST: Yeah.

CLIENT: And it just is awful.

THERAPIST: Yes. But sometimes even when you have a skill set it's –I mean a pit, it's the pit of hell.

CLIENT: (chuckle)

THERAPIST: Right? I mean it's –

CLIENT: Yeah.

THERAPIST: Horrific. I mean you know, how far are you in your own clinical program?
[00:04:27]

CLIENT: This is really my first full year, so – yeah.

THERAPIST: Okay. So when you work with someone who is clinically depressed, it doesn't matter if they're a fucking genius –

CLIENT: (chuckle)

THERAPIST: Okay, and have all of the skill sets in the world, and have taught –

CLIENT: Yeah.

THERAPIST: World class seminars on cognitive behavioral therapy and the treatment of depression.

CLIENT: Sure.

THERAPIST: It's still the pit of hell

CLIENT: Yeah, yeah.

THERAPIST: So you know, back to my original kind of idea here. It's interesting that you label it as something that you – you know I guess I'm wondering – [00:05:04]

CLIENT: Um-hum, um-hum.

THERAPIST: You know kind of continuing –

CLIENT: Um-hum.

THERAPIST: From our discussion last week, where's the empathy for yourself in all of this?

CLIENT: Um-hum. I think it is starting to develop. I think it is starting to develop. I've recognized that yeah, it's not something –

THERAPIST: Um-hum.

CLIENT: That has been present. So I think it's really – you know and it's been more of an intentional practice maybe within the last six months. [00:05:36]

THERAPIST: Interesting.

CLIENT: To really –

THERAPIST: So all of these years, right, where you are you know, forming this life with someone and we all have an idea of what we want that to look like. You have children –

CLIENT: Um-hum.

THERAPIST: You know, you know, looking kind of at your, I don't want to call it a crisis of faith, but kind of re-exploring your –

CLIENT: Yeah.

THERAPIST: Christian faith, and what that means and what that doesn't mean.

CLIENT: Right, right. [00:05:59]

THERAPIST: And you know your son's coming out process. The fact that your wife has issues she can't talk to you about. In some ways you're isolated looking –

CLIENT: Right.

THERAPIST: Inside.

CLIENT: Right, right.

THERAPIST: Disconnected from all of this. All of the emotional intimacy that you want, that's one of the reasons why many of us get married, just to for one reason.

CLIENT: Right, right.

THERAPIST: And you're just now allowing yourself to be empathetic towards you.

CLIENT: Yeah and I do see it as you know kind of a byproduct of you know this particular path –
[00:06:33]

THERAPIST: Yeah.

CLIENT: Of you know, kind of this inward path.

THERAPIST: Okay.

CLIENT: And –

THERAPIST: Why do you blame yourself so?

CLIENT: Do I? Let me – let me get my head around that. Do I blame myself? For?

THERAPIST: Blame is probably the wrong word. Finger point at you, shame and damn yourself.
[00:07:02]

CLIENT: Hum.

THERAPIST: I should have had the skill set to –

CLIENT: Oh.

THERAPIST: You know.

CLIENT: Well.

THERAPIST: That's just one example.

CLIENT: Am I – yeah. Am I – am I really feeling that, that strongly? I guess – I guess for the most part that probably, I'm a fairly self-sufficient person you know, [00:07:30]

THERAPIST: Um-hum.

CLIENT: You know and kind of you know, just because I'm in the theories class right now –

THERAPIST: Yeah.

CLIENT: You know it's like oh, okay, so we're doing. All right. Where do I fit with all the Adlerian stuff. Okay, well I'm the oldest child, let's see you know.

THERAPIST: Um-hum.

CLIENT: So it's like, it fits.

THERAPIST: Um-hum.

CLIENT: You know it's like you're the self-sufficient, you know over achiever and whatever. Responsible, blah, blah, blah, you know. And it's like well, yeah. You know it's like – and I suppose that those were messages that were there in childhood as well, it's like – [00:08:02]

THERAPIST: Can you give a voice to those messages so that I'm clear?

CLIENT: Yeah, whatever. You know you're – there's not a – there's not a whole lot of room for sympathy for like if you're feeling bad.

THERAPIST: Okay.

CLIENT: You know if you're feeling bad, you're feeling down, whatever, it's like just do something. Go get busy. You know rub some dirt on it let's go. You know.

THERAPIST: Get over it.

CLIENT: Right.

THERAPIST: Okay.

CLIENT: So there's not a whole lot of that. So I'm sure that that's you know a pretty strong voice in terms of like what one does with depression. [00:08:34]

THERAPIST: Um-hum.

CLIENT: So it's like okay I'm here in the pit and there's nobody – there's nobody's that's able to help me get out of it.

THERAPIST: Um-hum.

CLIENT: And I can't – I can't just whatever.

THERAPIST: Um-hum.

CLIENT: It seems like all the get busy kind of things and trying to get over this isn't helping anything.

THERAPIST: Um-hum.

CLIENT: You know you're just, you're still in the pit.

THERAPIST: Um-hum. How bad did the pit get?

CLIENT: Oh, you know, I would probably, you know I was still functioning. [00:09:05]

THERAPIST: Um-hum.

CLIENT: You know, still doing work and that kind of thing.

THERAPIST: Um-hum.

CLIENT: It's just that you know, you're carrying around all this anger.

THERAPIST: Yeah.

CLIENT: And whatever.

THERAPIST: Um-hum.

CLIENT: So it's like looking – looking in from the outside, it's like well, I'm probably a pretty miserable person to live with.

THERAPIST: Um-hum.

CLIENT: You know that's – that's probably how it manifested itself, you know.

THERAPIST: And you mentioned that last week, you're like you weren't allowed to be angry because –

CLIENT: Uh-huh, yeah.

THERAPIST: Previously when you got angry, that wasn't okay. Tell me about when the depression occurred and what was the family's reaction? [00:09:35]

CLIENT: (sigh) Yeah you know sometimes I think that it's a little difficult to remember. I think that there was a feeling like, I almost have to just do this on my own.

THERAPIST: Okay.

CLIENT: You know kind of thing, and it's like I think that there's just this sense that the best that I can do is be quiet. [00:10:01]

THERAPIST: Um-hum.

CLIENT: And to be non-communicative.

THERAPIST: Um-hum.

CLIENT: And that's not helping anybody either.

THERAPIST: Right.

CLIENT: You know everybody knows that there's something going on.

THERAPIST: Sure.

CLIENT: (chuckle) We're not going to talk about it. And I think over time people just learned that it's like okay, give him his space and let him alone and eventually it will go away type of thing. [00:10:21]

THERAPIST: Um-hum.

CLIENT: So yeah. So there's this sense, I guess that not that anybody put me there, you know, but –

THERAPIST: Yeah.

CLIENT: Because of my inability to communicate or to talk it out or whatever, then it was like you go – you went through this alone. (chuckle)

THERAPIST: Yeah, but you know on the other hand, in some ways I, you know I have a kind of a strong reaction to what you're saying, because I'm imagining you – you know there's not the dialog that's been created in the family culture – [00:10:48]

CLIENT: Right.

THERAPIST: To say hey, I'm hurting. Because that got shut down when you grew up. And that got shut down in some ways in the family culture that you created with your wife, given what you've told me about her own sexual abuse that she wasn't open to talking about that. Right? [00:11:03]

CLIENT: Yeah.

THERAPIST: And so I'm imagining –

CLIENT: Yeah, yeah.

THERAPIST: First of all because depression is its own form of awful. And even if you're getting up and going to work every day, it's still pretty awful. And how isolating that is, and nobody is saying, oh my God, are you okay? We are really worried about you. Is there anything we can do?

CLIENT: Yeah I don't think there is – I don't think there was any of that kind of voice. It's more – it's more of a frustration of you know, pull it together. You know and maybe that's just me interpreting it, that it's like [00:11:37]

THERAPIST: But how would that have been for you if somebody had said that?

CLIENT: That would have been pretty amazing. Yeah, you know it would have been a little, you know –

THERAPIST: Yeah.

CLIENT: Enough of a shift that it may have like moved me in a particular direction or something or –

THERAPIST: So that's where some of the anger comes from.

CLIENT: Hum, could be. Could be.

THERAPIST: You know I'm thinking of you know, and pardon the analogy okay, but – [00:11:59]

CLIENT: Um-hum.

THERAPIST: A friend of mine told me her mother had surgery and the anesthesia did something weird –

CLIENT: Um-hum.

THERAPIST: Where she was awake but couldn't speak.

CLIENT: Um-hum.

THERAPIST: You know, and they finally figured it out and put her back under. But she is awake, right. And they're still doing surgery, which means she begins to feel and see things. Yeah. Okay, but I kind of see that for you. Like you are having this depression, this reaction. –
[00:12:25]

CLIENT: Um-hum.

THERAPIST: Where you are screaming for the inside. You're just not making any noise.

CLIENT: Right.

THERAPIST: And people aren't noticing, reaching out, the family's response is, we'll just ignore it and hope it goes away. We're going to give him his space. When what you really probably needed was for somebody to say, are you okay? What's happening with you? What can we do?

CLIENT: Um-hum. Yeah and I think that there was probably that. You know it was like you know, but I think that the whole dynamic of the relationship is – had gotten to the place where it's like (chuckle) you know there's enough force fields up – [00:13:01]

THERAPIST: Right.

CLIENT: And it's like tell me what's going on. And it's like you know, there's a problem with intimacy here.

THERAPIST: Yeah.

CLIENT: It's like I'm not sure what I can tell you anymore. You know. (laugh)

THERAPIST: So this is the – so you know last week you described for me –

CLIENT: Yeah.

THERAPIST: You've been married 25 years.

CLIENT: Yeah.

THERAPIST: It was at the 12 year mark where things really started to change. Did your depression begin to occur after the 12 year mark?

CLIENT: You know that – that was kind of a – it was kind of a tough time. You know we were talking care of elderly family, with hers –

THERAPIST: Right.

CLIENT: And you know they were kind of like passing at that point. Yeah, so there was like huge transitions – [00:13:38]

THERAPIST: Yeah.

CLIENT: Going on at that point. So I would – I would probably generally characteristically – or you know say that yeah, that was.

THERAPIST: So your needs got lost.

CLIENT: Yeah. I did – I did seek out and went through a little personal counseling at that point.

THERAPIST: Okay.

CLIENT: You know because I was really encouraging my wife to do that. [00:13:59]

THERAPIST: Yeah.

CLIENT: I was kind of hoping that we would do something together.

THERAPIST: Right.

CLIENT: The best that she could do was – I think that she met two or three times with somebody.

THERAPIST: Um-hum.

CLIENT: And that was pretty much it. But I continued with this guy for, I don't know, I'm kind of thinking weekly on and off for maybe, I don't know, whatever the insurance paid for at the time.

THERAPIST: Okay.

CLIENT: You know. Three months, something like that.

THERAPIST: Did you find it helpful?

CLIENT: Yeah. Yeah, it was.

THERAPIST: Okay.

CLIENT: It was at the time. And I felt like it – it did allow – yeah. Or I don't know if – I'm reluctant to say it gave me skills, but it probably helped me up enough you know. [00:14:40]

THERAPIST: Um-hum.

CLIENT: It was another voice –

THERAPIST: Yeah.

CLIENT: Or another ear I suppose really, just to allow me to yeah, talk through some of that stuff. Yeah.

THERAPIST: Did he get it?

CLIENT: Oh yeah, yeah.

THERAPIST: Good.

CLIENT: Um-hum. Yeah, I really think so. I think we connected well. [00:15:00]

THERAPIST: Okay.

CLIENT: I'm trying to think (chuckle) I'm just sitting here and like trying to reel back you know to 2000, I think that was when that session – those sessions happened and I'm just like trying to remember, you know.

THERAPIST: Um-hum.

CLIENT: But (pause) yeah, I think you know because you know we were – you know we were dealing with you know trying to figure out, you know I was trying to come up with a way of like can we do some couples counseling. [00:15:35]

THERAPIST: Yeah.

CLIENT: And it just was like –

THERAPIST: Another force field.

CLIENT: Yeah. It was just like, you know this is the best that I'm going to be able to do right now and you know, so.

THERAPIST: You don't sound like you believe that.

CLIENT: I do believe that it was really the best that she could do.

THERAPIST: Okay.

CLIENT: I think you know what I can – well what I see is that you know, there's – there's enough hurt there, there's enough trauma there. [00:16:04]

THERAPIST: For her, for you, for both?

CLIENT: For her.

THERAPIST: Okay.

CLIENT: That you know she – she gets so far and that's it.

THERAPIST: Um-hum.

CLIENT: And it's kind of like I'm a little curious, and it's like well I just don't under – and I think I've tried, I can't remember which books, but I – I remember reading some books about that time trying to figure out you know – [00:16:29]

THERAPIST: Um-hum.

CLIENT: Kind of where is she at, and where's she at and what she's going through with the sexual abuse thing. And I know that you know, there's really no way to know -

THERAPIST: Um-hum.

CLIENT: You know somebody else's experience. So, but it's like I tend to be –

THERAPIST: Um-hum.

CLIENT: Kind of proactive in terms of like hey, I've got issues, you know let's –

THERAPIST: Sure.

CLIENT: You know and granted you know, it's kind of like you know I've been dealing with things kind of in my own way. And then having the availability or having the opportunity to you know, to plug back into this – [00:17:04]

THERAPIST: Um-hum.

CLIENT: Into the counseling program, it's like hey, this is a great opportunity to you know, explore this a little bit further, you know.

THERAPIST: So what is it like for you? I mean last week we talked a little bit about not only is the emotional intimacy missing –

CLIENT: Um-hum.

THERAPIST: But a lot of the physical intimacy for several years now.

CLIENT: Um-hum.

THERAPIST: And what is that like for you?

CLIENT: I would say it's been – you know it was – it's been difficult. [00:17:34]

THERAPIST: Um-hum.

CLIENT: But again kind of this process whereby you know I turned it from this this situation –

THERAPIST: Um-hum.

CLIENT: That was just driving all of this anxiety and frustration and anger and whatnot. And eventually you know, turned it into a practice –

THERAPIST: Okay.

CLIENT: That allowed me to – you know it became kind of this spiritual quest or this kind of this – it's like well, it allows me to look at it differently. [00:18:06]

THERAPIST: Okay, it – can you flesh that out a little bit for me more.

CLIENT: (sigh) You know I think that the – you know I'm looking at some of these theories now and I'm – you know I really don't have a handle on all the theories.

THERAPIST: Um-hum.

CLIENT: And so I'm not going to be able to tell you which ones. But I mean there's some certainly some stuff in the CBT. [00:18:29]

THERAPIST: Um-hum.

CLIENT: And there's some existential stuff that –

THERAPIST: Um-hum.

CLIENT: You know it all kind of gets pulled together or maybe it was the other way around. Because I mean Taoist philosophy and theory has been around for a very long time.

THERAPIST: Um-hum.

CLIENT: And you know so looking at that and recognizing that you know, it's just – it's just the conditions the way they are.

THERAPIST: Um-hum.

CLIENT: You know it's my reaction to these conditions that's really at the root of my suffering.
[00:18:57]

THERAPIST: Um-hum. Well and I think in some ways that is generous. But in some ways it also continues to deny your own real human needs that you wanted to get through your marriage.

CLIENT: Yeah.

THERAPIST: And –

CLIENT: Yeah.

THERAPIST: Deserved to get through your marriage. And these are not unreal sexual needs and emotional intimacy needs in marriage are – [00:19:29]

CLIENT: Yeah.

THERAPIST: Certainly not in any way, they change over time but –

CLIENT: Yeah.

THERAPIST: They're not unrealistic needs.

CLIENT: No. I don't think they're unrealistic needs. You know and again I think I used an example last time that it's like well you know, I know of –

THERAPIST: Um-hum.

CLIENT: Not a close friend, but it's you know, more of like a distant relationship kind of a thing where you know this person is married to somebody who was in an auto accident.

THERAPIST: Um-hum.

CLIENT: And you know, they're in – they're still in relationship. [00:20:01]

THERAPIST: Um-hum.

CLIENT: But his caring for a quadriplegic.

THERAPIST: Right.

CLIENT: You know this is a – you know it's like well –

THERAPIST: So you're saying it could be worse.

CLIENT: It could be worse.

THERAPIST: It can always be worse.

CLIENT: And I guess what I'm say it's like you know, it's reconciling the fact that it's like well you know what, I can't change her.

THERAPIST: True.

CLIENT: I can support her and I can encourage her, but I can't change her.

THERAPIST: Um-hum.

CLIENT: So it's like well, you know I can get up this morning. [00:20:30]

THERAPIST: Um-hum.

CLIENT: And I can be really mad, frustrated, angry, depressed that life didn't turn out the way that I wanted it to –

THERAPIST: Um-hum.

CLIENT: Or you know, I can somehow use this experience and you know, try to draw some strength from that, whatever you know.

THERAPIST: Sure.

CLIENT: Or it's a recognition that it's like – at least recognizing where the suffering is coming from.

THERAPIST: True.

CLIENT: It's not coming from out there in.

THERAPIST: Um-hum.

CLIENT: It's that you know, the suffering that I'm experiencing is coming from within and I'm projecting it out onto a situation. [00:21:05]

THERAPIST: Do you think it's either or? Do you think either you know – it's like saying love and dislike can't live in the same house. You know, it's – you know I guess what I say is the either word, let me explain myself here.

CLIENT: Hum, hum.

THERAPIST: On the one hand, yes, I think that sometimes we can contribute to our own suffering.

CLIENT: Um-hum.

THERAPIST: By the way that we view things. And on the other hand, it's a very human experience to want to need something and have a reaction to that when we don't get it. So in some ways – [00:21:39]

CLIENT: Yeah.

THERAPIST: You are entitled to feel the range of things that you would feel because you know, you are entitled to grieve that life did not turn out the way you wanted it to. You're entitled to you know, last week you described that your relationship with your wife is more like roommates. And I would imagine –

CLIENT: Um-hum.

THERAPIST: That you would have some feelings, some strong feelings about that, you know. And you were -

CLIENT: Oh, yeah. Yeah.

THERAPIST: Okay, and so I guess you know, on the other hand, you have made a choice to stay with her – [00:22:07]

CLIENT: Yeah.

THERAPIST: And accept the relationship as is because you can't change her.

CLIENT: Right.

THERAPIST: Right?

CLIENT: Right, right.

THERAPIST: And I guess I'm saying you don't think they can live in the same house, it's either/or?

CLIENT: Oh, no. No. I think – I think clearly that they're both there.

THERAPIST: Okay.

CLIENT: I think clearly you know there is an acceptance –

THERAPIST: Yeah.

CLIENT: Or you know a recognition of conditions the way they are. [00:22:29]

THERAPIST: So what do you do with all of that?

CLIENT: (pause) What do I? I just want to make sure I'm understanding what you're saying. What do I do with all of that?

THERAPIST: All of the conflict between those two things. Accepting it the way it is.

CLIENT: Um-hum.

THERAPIST: And –

CLIENT: Right.

THERAPIST: Feeling angry and hurt because it is the way that it is. And you can't change it.

CLIENT: (sigh) Um, how do I deal with all of that/ [00:23:00]

THERAPIST: Um-hum.

CLIENT: Well I think that that's you know, I think that that's been this slow process.

THERAPIST: Um-hum.

CLIENT: You know of the last six or seven years –

THERAPIST: Um-hum.

CLIENT: Where it's like you know kind of coming to that place of being able to name those feelings. And recognizing that you know at some point –

THERAPIST: Um-hum.

CLIENT: You know you can have – you can catch yourself and you're in this full blown rage –
[00:23:34]

THERAPIST: Um-hum.

CLIENT: Or anger about something. You know it's like (pause) I'm I'm grasping for an example, but you know it's like okay, I mean I'm angry about a situation that's occurred –

THERAPIST: Um-hum.

CLIENT: And recognizing that over time it's like the awareness level of like noticing the feelings starting to arise. [00:24:01]

THERAPIST: Okay.

CLIENT: And it's like being able to name that and being able to have just a little bit of space -

THERAPIST: Um-hum.

CLIENT: Between being able to see the feeling arise –

THERAPIST: Okay.

CLIENT: And being able to name it and say, ah, this is – this is anger.

THERAPIST: Um-hum.

CLIENT: And not to try to deny the anger, -

THERAPIST: Right.

CLIENT: Not to say that you shouldn't be here.

THERAPIST: Um-hum.

CLIENT: But it's like if I can say this is anger, as opposed to I am angry – [00:24:33]

THERAPIST: Um-hum.

CLIENT: Gives me a little bit of space there and it gives me a chance to say do I really want to engage in this right now? What's the benefit of engaging in this? So that –

THERAPIST: So and how good are you at that?

CLIENT: I'm getting better.

THERAPIST: Oh that's good. Maybe you can teach me. (laugh)

CLIENT: (laughing)

THERAPIST: I don't have it like this.

CLIENT: Well and I guess that that is the – I guess that's the benefit. And I guess one of the reasons that I feel so committed to continuing this meditation practice is like – [00:25:07]

THERAPIST: Sure.

CLIENT: Nobody has to tell me -

THERAPIST: Um-hum.

CLIENT: That this is a good thing. I know from my own experience that this is – this is a practical skill. (laugh)

THERAPIST: So not only meditation, but kind of providing some emotional distance, you know for you allows you some control over a situation in which it's difficult to control. You can't control the fact that your wife won't – [00:25:30]

CLIENT: No.

THERAPIST: Emotionally connection. But when you meditate about it, when you sort of get some emotional distance from it, you can feel like you have some control over you and your own response.

CLIENT: I think that what I also feel –

THERAPIST: Um-hum.

CLIENT: That there's a growing sense of compassion.

THERAPIST: Okay.

CLIENT: That –

THERAPIST: Can you tell me about that.

CLIENT: (sigh) And perhaps that is one of the things that that growing sense of compassion is expanding enough that perhaps I can include myself into that. [00:26:00]

THERAPIST: Okay.

CLIENT: But when I – and I'm using the (chuckle) this visual like being able to hold the situation.

THERAPIST: Um-hum.

CLIENT: Or the condition.

THERAPIST: Um-hum.

CLIENT: And to be able to recognize that you know, my interaction –

THERAPIST: Um-hum.

CLIENT: You know however I contact – have some kind of a contact with that situation or the condition, you know – you know sense triggers – [00:26:33]

THERAPIST: Okay.

CLIENT: You know somebody can say something, I can see something, I can feel – I can think something and all of a sudden you know, there is the arising of some emotion or feeling.

THERAPIST: Um-hum.

CLIENT: Now some issues that are not that big in my life anymore, I rarely – there have been there have been some things that it's like hey, this doesn't bother me anymore. You know, quick example, I grew up (chuckle) this is really stupid, but I grew up sitting next to my mother – [00:27:07]

THERAPIST: Okay.

CLIENT: At the table, and she just had the most annoying way of eating (laugh)

THERAPIST: Give me an example.

CLIENT: She would just you know, the way she chewed, and it was like – I would sit there and you know it was like – you know the cartoon image that I have it's just like – it just kept exploding and getting louder and I got to the place where – you know of course you don't talk about these things or you know, how do you tell your mom, gee mom, can you close your mouth or something, this is really annoying. [00:27:40]

THERAPIST: Um-hum.

CLIENT: You know but I learned to sit at the table in such a way that you know it was kind of –

THERAPIST: Covering your ear?

CLIENT: Yeah. Yeah. So –

THERAPIST: What, well okay – why do you think –

CLIENT: (laughing)

THERAPIST: If you grew up with her doing that, -

CLIENT: Uh-huh.

THERAPIST: Why did that annoy you? As you – yeah. What about that was so annoying?

CLIENT: I don't know. You know I almost think in some ways that it's like you know, something becomes annoying – [00:28:01]

THERAPIST: Um-hum.

CLIENT: And then you know, we create, you know the story gets bigger and bigger and before long you know, we've turned it into this huge monster.

THERAPIST: Um-hum.

CLIENT: And it's like now when I you know, I have to sit down to the table, I'm sitting down with the monster as opposed to just like well, can you focus on something else, or whatever you know. So –

THERAPIST: Can you tell me a little bit about how you grew up and who you grew up with so I can get a sense of –

CLIENT: (laughing)

THERAPIST: (chuckle)

CLIENT: Oldest of five. I have four brothers and we're probably all within like a year, year and a half. [00:28:37]

THERAPIST: Okay.

CLIENT: And then I have a little sister who is 11 years younger than me.

THERAPIST: Okay.

CLIENT: So in growing up I'm probably you know, I'm probably mom's helper.

THERAPIST: Okay.

CLIENT: Just because –

THERAPIST: You're the oldest.

CLIENT: I'm the oldest. You know there's a lot of stuff going on here.

THERAPIST: Right.

CLIENT: I don't know, what else can I say. You know we come from pretty you know, strong religious background, you know Christian background. You know looking back on it now, you know the pretty, pretty conservative – [00:29:20]

THERAPIST: Um-hum.

CLIENT: You know Christian values and that kind of thing. Small town America living you know in a town of 2,200 over –

THERAPIST: Where?

CLIENT: Dunlap.

THERAPIST: Okay, yeah.

CLIENT: Near Dunlap. So in a lot of ways, you know growing up in Cami. [00:29:35]

THERAPIST: Um-hum.

CLIENT: You know –

THERAPIST: Relationship, mom, dad?

CLIENT: Dad worked as an auto mechanic all of his life. Out of the house before I got up in the morning usually.

THERAPIST: Um-hum.

CLIENT: Got home 5:30, 6:00 at night. You know tired, exhausted and you know, you know so that that relationship a little bit more distant, probably was a lot closer to my mom. [00:30:00]

THERAPIST: Okay.

CLIENT: Probably still am.

THERAPIST: Right.

CLIENT: You know and – yeah. Yeah. So dad's – now I did get involved in boy scouting, which I really had to you know, twist their arm to allow me to do that kind of thing, they just didn't really want to get involved in that. You know I felt like (chuckle) they didn't really want me to get involved in it because it was going to mean that they were probably going to have to get involved in it too. [00:30:33]

THERAPIST: Okay.

CLIENT: So –

THERAPIST: So you felt pretty – they discouraged you from doing it and you thought because once the kid is involved, the parents have to be involved too.

CLIENT: Um, I don't even know if I thought that.

THERAPIST: Okay.

CLIENT: You know it was more I just wanted to be involved in it.

THERAPIST: No, I mean looking back.

CLIENT: Oh.

THERAPIST: That was you think one of the reasons why they didn't want you to be involved in it?

CLIENT: Was because they were going to have to get involved?

THERAPIST: Yes.

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: Probably so. I think initially with my dad. [00:31:01]

THERAPIST: All right.

CLIENT: And then – yeah. Eventually he got involved and interested, and then you know, was still involved in it after – long after I had given up.

THERAPIST: Wow.

CLIENT: You know so –

THERAPIST: Okay. So then it became a family thing.

CLIENT: Yeah. I think it allowed my dad and I to connect on a certain level you know. Not a huge deep level or anything like that.

THERAPIST: Um-hum.

CLIENT: I don't feel like I have this really you know, deep relationship with my dad. Probably I don't even feel like he's not one of those people in my life who if I want advise – [00:31:36]

THERAPIST: Um-hum.

CLIENT: Or an opinion, he's somebody that I would go to.

THERAPIST: What was that like growing up?

CLIENT: I don't think I really realized that to that extent until you know, you started interacting with other kids, and it's probably junior high –

THERAPIST: Um-hum.

CLIENT: Or high school, before you're you know, like comparing parents and things like that. And it's like oh, well. So it's kind of like this disappointment. [00:32:03]

THERAPIST: Yeah.

CLIENT: Well you know, it's a disappointment in that it's like okay, well here's the – here's the hand that you were dealt –

THERAPIST: Um-hum.

CLIENT: And it's like well, okay. (laugh)

THERAPIST: Well that's a – and that's seeming to be a big theme.

CLIENT: The hand you were dealt?

THERAPIST: The hand you were dealt. Suck it up and deal with it.

CLIENT: (laugh) Yeah, it could be.

THERAPIST: What about your relationship with your mom? [00:32:29]

CLIENT: I think that yeah, and I've had a chance and I think I don't even know if that was one of those things that we dealt with early on, or if it's just something that I've come to recognize over the years, is that you know, with my mom, there was you know, a very clear sense of conditionality. [00:32:51]

THERAPIST: Okay.

CLIENT: You know she had this you know, at some point during my growing up experience, and it was probably, I don't know, maybe she started to have this feud with her brother –

THERAPIST: Okay.

CLIENT: Her only sibling, and they live a block apart.

THERAPIST: I was going to ask what the close – yeah, okay.

CLIENT: And you know there's been this ongoing feud and it was kind of like you know – and I – and I know this about my grandfather,. My grandfather went to his grave you know holding lifelong grudges. And my mother it's like – it's like once you get on the shit list you're not getting off the shit list. [00:33:26]

THERAPIST: Tell me again your cultural background.

CLIENT: German American.

THERAPIST: Okay. That was – I was going to guess German or Irish.

CLIENT: Pretty much,

THERAPIST: Because that – there's a feud culture sometimes in –

CLIENT: Yeah, you know and there was a – yeah. So you know we're coming from this blue collar you know, mentality. There's a you know, I remember hearing messages growing up as a kid that –

THERAPIST: Like?

CLIENT: That you know my dad would come home, and now I'm interpreting it –

THERAPIST: Um-hum.

CLIENT: A little bit differently. It's like well there's a whole lot of insecurity there, but you know he would come home and talk about all these college educated people who brought their car in and didn't even have enough sense to keep the oil changed – [00:34:08]

THERAPIST: Um-hum.

CLIENT: Or whatever, you know. It's just like this sense of – this sense of – you got the message growing up as a kid that going to college wasn't –

THERAPIST: Um-hum.

CLIENT: A valued thing.

THERAPIST: Um-hum. And then you went to college.

CLIENT: And then I went to college. Yeah, I broke all the rules.

THERAPIST: And you went to college at Brown.

CLIENT: No, I got – my undergrad was at Northwestern.

THERAPIST: Okay, right, which is not too far from Dunlap, but then you got a Master's Degree from Brown? [00:34:32]

CLIENT: Yeah, yeah.

THERAPIST: Okay.

CLIENT: That was after we got married and –

THERAPIST: Yeah.

CLIENT: You know, so.

THERAPIST: So you did break all the rules.

CLIENT: Yeah, you know it was great. You know and to a certain degree I was like wow, I really – well yeah. And you know I had some exposure through working at a boy scout camp –

THERAPIST: Um-hum.

CLIENT: That allowed me to see kids that were going to college –

THERAPIST: Um-hum.

CLIENT: It's like oh, this is what you – I could be doing. And so that allowed me to eventually figure out how to climb over the wall and to get out you know, kind of thing. [00:35:04]

THERAPIST: It's another wall.

CLIENT: My younger brothers, however, did not. (chuckle)

THERAPIST: Okay.

CLIENT: Or my younger sister. (laugh) As much as –

THERAPIST: So they didn't, but you did.

CLIENT: Yeah. Yeah.

THERAPIST: You know, it – do you – do you kind of hear some themes here?

CLIENT: Well (pause) I know that there are some themes –

THERAPIST: Um-hum.

CLIENT: You know and I know that one of the themes you know are – one of the things that I have kind of reflected upon – [00:35:39]

THERAPIST: Um-hum.

CLIENT: Earlier, is that you know, that notion that we sort of end up marrying our parents –

THERAPIST: Um-hum.

CLIENT: To a certain degree.

THERAPIST: Um-hum.

CLIENT: You know and as much as I like wow, I hadn't really saw this, but this was a lot of – there's a lot of conditionality. [00:35:56]

THERAPIST: Yeah.

CLIENT: You know it's like – and you know my wife is you know, in a lot of way, a lot like my mom in terms of like you know she has some very clear understandings of how the world should be. And you know – yeah. So yeah, it's like everybody knows. Everybody knows that there's a list and you don't want to be on it. [00:36:18]

THERAPIST: Um-hum. The shit list.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: And everybody knows –

THERAPIST: Were you on the list?

CLIENT: Oh, yeah, yeah for a while.

THERAPIST: When were you on the list?

CLIENT: Oh, when I went off to college.

THERAPIST: Uh-huh.

CLIENT: One of the (chuckle) one of the first things I did was to go with a friend to a bible study –

THERAPIST: Um-hum.

CLIENT: That was being held in the basement. I turns out we ended up at the wrong one.

THERAPIST: Okay.

CLIENT: It wasn't the one that he thought he was going to, but it turns out that it was this really fundamentalist, evangelical group.

THERAPIST: Okay.

CLIENT: And so – and they were – they were like high pressure salesmen and you know I was a freshman Christian – [00:37:02]

THERAPIST: Sure.

CLIENT: You know I was a great find for them. (laughing)

THERAPIST: Sure, sure.

CLIENT: So by – you know, long story short, I ended up getting re-baptized into this fundamentalist church around Thanksgiving and so my – yeah, my folks didn't have any idea or clue of how to deal with that. I came home and this young preacher had prepared me for what they were going to do and they were going to throw me out of the house. And here's my phone, I'll come and get you. And all this kind of stuff, and none of that happened. [00:37:40]

THERAPIST: Um-hum.

CLIENT: So it kind of threw me off guard.

THERAPIST: Um-hum.

CLIENT: And then you know, I ended up having this kind of first counseling experience with an old teacher who was a nun.

THERAPIST: Um-hum.

CLIENT: And she was just you know – you know she had a great counseling sense and just – yeah. So by whatever, probably by Easter, you know I had kind of worked it out and – [00:38:05]

THERAPIST: Okay.

CLIENT: It was like –

THERAPIST: You found the right bible study, you went back to.

CLIENT: No, well you know, actually then it was kind of like I took the next two or three years off religion.

THERAPIST: Sure, okay.

CLIENT: And then my senior year in college I ended up at the Christian Student Center at Northwestern and that's where I met my wife and (shoo) – yeah. [00:38:29]

THERAPIST: Um-hum.

CLIENT: So. But yeah, there's – I mean there's a lot of (chuckle) there's a lot of other detail in there too that I – I was engaged to another woman.

THERAPIST: Okay.

CLIENT: A freshman – my freshman year in college, so yeah, I'm throwing this in. (sigh) So I come home my freshman year at college and I'm hanging out in the summer with the youth group, the youth guitar group at church. So this was clearly after the fundamentalist church thing. [00:39:14]

THERAPIST: Um-hum.

CLIENT: So I'm just singing it with this group, and the leader of this group, we're all about the same age, one night after practice, you know I can tell she's in distress. She tells me she's pregnant.

THERAPIST: Okay.

CLIENT: You know it turns out that you know she's working some place and the guy is twice her age. [00:39:36]

THERAPIST: Um-hum.

CLIENT: So you know, I just – you know I'm her friend, I befriend her and then it was like you know, in this small town, -

THERAPIST: Um-hum.

CLIENT: All of a sudden you know it's like, by the end of the summer or at some point –

THERAPIST: Um-hum.

CLIENT: You know it (pause) it you know people are starting to wonder who's the father and all of this kind of thing. So again, another long story short, I end up deciding to stand by her with this and we eventually, probably in shorter order thought, we ended up getting engaged. [00:40:14]

THERAPIST: Okay.

CLIENT: I go through the pregnancy with her. And you know, now there's a child in the picture.

THERAPIST: Um-hum.

CLIENT: And now there's this little child who's walking around calling me daddy.

THERAPIST: Goodness, while you were a freshman in college?

CLIENT: Sophomore, junior in college.

THERAPIST: Yeah.

CLIENT: And you know, by my senior year it was like you know, recognizing that yeah, this was you know, the wrong path to have taken and – [00:40:41]

THERAPIST: You did not get married to her.

CLIENT: We did not get married, but there was a divorce. (laughing)

THERAPIST: Yeah, well I bet, so how did the relationship end?

CLIENT: You know eventually yeah, it was – it was really probably the most difficult thing that I ever really you know did.

THERAPIST: Yeah, tell me.

CLIENT: But yeah, we – she was down and you know, things had been kind of cycling down and it wasn't great anyway, but it was kind of like it just was a discussion – [00:41:14]

THERAPIST: Um-hum.

CLIENT: It was like I really think that this – I just can't do this you know.

THERAPIST: Um-hum.

CLIENT: So it didn't end like with any bombs being thrown or anything like that.

THERAPIST: Um-hum.

CLIENT: But you know it was still – it ended -

THERAPIST: Did you end it?

CLIENT: I did.

THERAPIST: Yeah.

CLIENT: I did.

THERAPIST: How do you feel about that?

CLIENT: It was the hardest thing I ever did, but you know that sense of freedom and liberation after that it was like that was palpable. [00:41:40]

THERAPIST: Yeah.

CLIENT: And it was like – oh, I felt really good about that.

THERAPIST: Do you still beat yourself up over that?

CLIENT: No. No, no, no, no.

THERAPIST: Okay. Okay.

CLIENT: I don't. No, it was – it was to free I mean of an experience –

THERAPIST: Yeah.

CLIENT: To you know, it's like well, at the time it was difficult –

THERAPIST: Yeah.

CLIENT: And it took a while to kind of work through that, but you know. [00:42:02]

THERAPIST: You know it sounds like you really cared about this woman –

CLIENT: Yeah.

THERAPIST: Not necessarily, you know as a friend to kind of jump in and try to be helpful.

CLIENT: Yeah, I think it was kind of this –

THERAPIST: But you sacrificed yourself there a bit.

CLIENT: Yeah, I did. Yeah.

THERAPIST: But that's another theme.

CLIENT: Yeah.

THERAPIST: You know, I mean – you now going back a little bit, it's like I'm imagining you, you know growing up in your household and one of the themes is being told that you're not okay. Right? You know whether it's directly or not, I mean is there any accuracy to that? You don't fit in. Right? You're – [00:42:36]

CLIENT: Oh yeah.

THERAPIST: You know so –

CLIENT: Yeah.

THERAPIST: If you don't fit in to who we are, that must mean it's you, that you're not okay. Right?

CLIENT: Um-hum.

THERAPIST: Somehow you're different. You're not okay.

CLIENT: Well I was a little over weight as a kid.

THERAPIST: Okay.

CLIENT: And my three younger brothers –

THERAPIST: Yeah.

CLIENT: They bonded –

THERAPIST: Yeah.

CLIENT: And they were the three musketeers. And -

THERAPIST: So it's them against you.

CLIENT: In a lot of cases. But you know there was a year and a half difference between me and my next younger brother – [00:43:04]

THERAPIST: Um-hum.

CLIENT: And it just worked out that there was another kid down the neighborhood and he and I were about the same age.

THERAPIST: Yeah.

CLIENT: So you know, I was going off and hanging with him and the three of them were left at home.

THERAPIST: Um-hum.

CLIENT: So it was clear you know, well it's like of course they're going to bond. You know that's who's there to play with, you know and that kind of thing. But eventually it just you know, it became that. And it – it still is to a lot of degrees. [00:43:28]

THERAPIST: Yeah, but it's always you on the outside looking in.

CLIENT: Oh, yeah.

THERAPIST: Right.

CLIENT: Yeah, that's –

THERAPIST: Like growing up.

CLIENT: Yep.

THERAPIST: Getting married. Right, you're on the outside looking in.

CLIENT: (sigh) Getting married, say more about that.

THERAPIST: Well, grow – okay, so you know, the idea that you're not okay, -

CLIENT: Um-hum.

THERAPIST: Right?

CLIENT: Um-hum.

THERAPIST: Is a powerful theme –

CLIENT: Oh, yeah.

THERAPIST: When you're perfectly okay, you know, it's just not a fit. This – you know, so you're in this family, your dad's a mechanic, you go to college. The rest of the family doesn't go to college. That's another – [00:43:59]

CLIENT: Um-hum.

THERAPIST: You know, you're not okay. Your younger brother bond, right? Not with you. That's an emotionally intimate relationship you're closed out of, right?

CLIENT: Um-hum.

THERAPIST: All right so now you go off and in some ways you're sort of, as we all are at 18, looking for our identity, -

CLIENT: Right.

THERAPIST: And your religious identity, and you know, you get kind of co-opted a bit by –

CLIENT: (chuckle)

THERAPIST: As we all do by various groups, right? You know you get co-opted by the fundamentalist group, and then you know, you meet this young woman who's you know in distress and you kind of you know, want to do the right thing by her. [00:44:29]

CLIENT: Right.

THERAPIST: But all – you know, and then you – you marry your wife and again, you're sort of emotionally shut out, on the outside looking in.

CLIENT: Yeah.

THERAPIST: Emotional connection piece –

CLIENT: Yeah, yeah.

THERAPIST: And again, the way that you interpret the data is, I'm not okay.

CLIENT: Oh, yeah.

THERAPIST: Yeah.

CLIENT: Yeah. And there's – you know I mean in that message, whether – and that's a – that's a lifelong message.

THERAPIST: Yes.

CLIENT: But no, I'm going to throw out that probably the big one – [00:45:06]

THERAPIST: Yeah?

CLIENT: For me that I had to deal with, or probably still am dealing with, is that I was born with a birth defect –

THERAPIST: Um-hum.

CLIENT: And I don't know if you're aware of this condition, but it's called hypospadias.

THERAPIST: I have heard of it, I don't know much about it. You tell me a bit about it.

CLIENT: It's – it is –

THERAPIST: Hypospadias. Okay.

CLIENT: Yeah, you can look it up. [00:45:28]

THERAPIST: Un-huh.

CLIENT: But it's a deformity in the penis –

THERAPIST: Okay.

CLIENT: Where you basically some skin kind of gets kind of grown in a – so there was a you know really minor – you know cosmetic –

THERAPIST: I have heard of it, yes.

CLIENT: Kind of surgery kind of thing that goes on.

THERAPIST: Okay.

CLIENT: But in my family it was never talked about.

THERAPIST: Sure.

CLIENT: You know, so one of the very first memories that I have, vivid memories that I have as a kid, and I – you know I told my mom – [00:45:59]

THERAPIST: Um-hum.

CLIENT: Early on, of this memory of being in the hospital, and I can see this train set that I was playing with, -

THERAPIST: Um-hum.

CLIENT: And I described – you know I can remember, even though I didn't know it at the time, I made the connection later, that it was like, oh, I was watching that show, it was the flying nun, it was on television.

THERAPIST: Okay.

CLIENT: So I call these pieces, I have this very vivid memory. I thought it was when I had my tonsils taken out at age five. [00:46:26]

THERAPIST: Um-hum.

CLIENT: And it wasn't, it was when I had the surgery when I was two.

THERAPIST: Goodness, that's an early memory.

CLIENT: Yeah. And it was like – and one of the reasons that I think that it was indelible was that my parents didn't stay with me overnight –

THERAPIST: Wow.

CLIENT: For that visit.

THERAPIST: Um-hum.

CLIENT: Or they couldn't and my mom was kind of talking to me about that. So there was that – you know so there's that piece –

THERAPIST: Um-hum.

CLIENT: You know that – you know I think early on I said that I identified with Rudolph the Red Nosed Reindeer – [00:47:00]

THERAPIST: Yeah, and now it makes more sense.

CLIENT: And I was like there was this physical deformity.

THERAPIST: Yeah.

CLIENT: You know, and even – even though it wasn't like Rudolph that he's wearing it out on his nose –

THERAPIST: Sure.

CLIENT: It's a deformity that you know, you have to deal with for the rest of your life.

THERAPIST: Um-hum.

CLIENT: And it's like – so that message –

THERAPIST: But you're not being told about – talked to about –

CLIENT: Right.

THERAPIST: Right, it's wrapped up in the Christian shame, you know, it's wrapped up in –
[00:47:28]

CLIENT: Well because it's – it's sexual, we can't talk about it.

THERAPIST: It's sexual we can't talk about it.

CLIENT: Yeah, right.

THERAPIST: Right. And then of course you all have brothers.

CLIENT: Right, right, right.

THERAPIST: And then you join the boy scouts.

CLIENT: Yeah. Sports was the – you know –

THERAPIST: Right.

CLIENT: I went into fifth grade basketball because I was so tall –

THERAPIST: Yeah.

CLIENT: Everybody said oh, you've got to be a basketball player.

THERAPIST: Yeah.

CLIENT: Well that – you know that took me into the locker room.

THERAPIST: Right, right.

CLIENT: It's like I can't go there.

THERAPIST: Right.

CLIENT: You know and it was like, oh, you know. So there's just that, you know, there's something wrong with you message from the start. [00:48:05]

THERAPIST: Physically, emotionally.

CLIENT: Well, I don't know about the emotional part. But you know there – the physical piece early on for sure.

THERAPIST: Well the physical piece, but also the, you know, the identity piece and then it becomes an emotional piece, right? This message that there's something wrong with you. You don't fit. And you know, [00:48:26]

CLIENT: Yeah.

THERAPIST: There's an emotional consequence. And it's you know I'm imaging just how –

CLIENT: Yeah, yeah.

THERAPIST: Extraordinarily not only painful that is –

CLIENT: Um, um-hum.

THERAPIST: And how many things you were shut out of –

CLIENT: Yeah.

THERAPIST: Right?

CLIENT: Yeah.

THERAPIST: This kid who carries this message, -

CLIENT: Right.

THERAPIST: When a parent is supposed to be like, you know sweetie nothing's wrong with you. We love you just the way you are. And that's not what you got.

CLIENT: No. No. And – yeah.

THERAPIST: And then you didn't get it in marriage. Like that's one of the supposed to be one of the corrective experiences. [00:48:56]

CLIENT: Yeah.

THERAPIST: Right?

CLIENT: Yeah.

THERAPIST: Where, you know, if we didn't get it growing up, and then we couldn't find it some places, -

CLIENT: Um-hum.

THERAPIST: You know, then again you –

CLIENT: Yeah.

THERAPIST: You hope to marry somebody who, not fixes it, but the relationship –

CLIENT: Right.

THERAPIST: Has some healing properties.

CLIENT: Right. Right. And I think that that may have been there early on.

THERAPIST: Yeah.

CLIENT: And then –

THERAPIST: Do you think this was sorry go ahead with.

CLIENT: And then it you know –

THERAPIST: Yeah.

CLIENT: Like somebody just shut it off. And then all of my worst fears were confirmed.

THERAPIST: Okay, at which?

CLIENT: You know that – you know when the intimacy stopped. [00:49:28]

THERAPIST: Yeah.

CLIENT: You know it was like kicking back into the old fear of nobody's ever going to be able to love me -

THERAPIST: Yeah.

CLIENT: Fear.

THERAPIST: How is that to say that out loud?

CLIENT: Oh, um, you know I think I – you know I've been able to say that before.

THERAPIST: Um-hum, um-hum.

CLIENT: You know and it's like oh, I see what's going on here.

THERAPIST: So you've done your work around that before.

CLIENT: Yeah, it's like –

THERAPIST: Yeah.

CLIENT: I clearly see what's going on in terms of like, yeah, that kicked in here.

THERAPIST: Um-hum.

CLIENT: You know it's like – and of course there's going to be a lot of anger – [00:50:01]

THERAPIST: Yes.

CLIENT: Whatnot around that.

THERAPIST: Sure.

CLIENT: But it's still there. (laugh)

THERAPIST: Yeah, well, but in some ways if it wasn't there, or you couldn't ever touch it, I understand why you try to distance yourself from it in some ways, so it doesn't consume you, but –

CLIENT: Um-hum.

THERAPIST: If it wasn't there, in some ways it would almost be healthier because some part of you, you know is fighting being judged or marginalized or you know, the idea that something is wrong with you when it's not necessarily something is wrong with you. It's you know, there's a whole lot wrong with some of these environments – [00:50:42]

CLIENT: Um-hum.

THERAPIST: That you've been in.

CLIENT: Yeah. Yeah. Yeah, no I see that.

THERAPIST: Yes.

CLIENT: You know and I – in – and just in terms of like the whole compassion –

THERAPIST: Yeah.

CLIENT: Piece, it's like yeah, I recognize that you know if I was like – if I was able to be my own parent or something, it's like – it's kind of like – [00:51:05]

THERAPIST: Yeah, what would that look like if you were?

CLIENT: Yeah. You know and I've had some instances where I've tried to do that kind of exercise.

THERAPIST: Okay.

CLIENT: You know, kind of with the five year old child kind of thing.

THERAPIST: Okay.

CLIENT: It's like what would you say to the five year old child, you know –

THERAPIST: Sure.

CLIENT: And all of those kind of things. And having had three of my own kids –

THERAPIST: Yeah.

CLIENT: It's just like I would never do that to my kid. (laugh) [00:51:29]

THERAPIST: So how – how do you think some of these experiences have shaped your parenting of your three kids?

CLIENT: I know that's it's better.

THERAPIST: Um-hum.

CLIENT: I know that it's better than, you know – I hate to put it on that comparison, but what else have we got really?

THERAPIST: Sure.

CLIENT: You know but, I know that it was a (pause) you know, that we were closer to the kids.
[00:51:58]

THERAPIST: You gave better than what you got.

CLIENT: Yeah. Thanks, yeah.

THERAPIST: Okay.

CLIENT: But that's yeah. And I – and you know certainly being able to talk about sexuality –

THERAPIST: Um-hum.

CLIENT: And that kind of thing with the kids –

THERAPIST: Um-hum.

CLIENT: And having a son who is openly gay –

THERAPIST: Yeah.

CLIENT: And being excepting and welcoming and it's like doing everything and really kind of being very con – you know conscious of that.

THERAPIST: Sure.

CLIENT: It's like I'm sure that I've still fallen down –

THERAPIST: Um-hum.

CLIENT: But I want to do everything I can.

THERAPIST: Just in different areas. (laughing) [00:52:29]

CLIENT: (laughing) It's just like whatever you know, I really want you know, this experience to you know, to be a good – you know I don't want to feel like – yeah. Well you know, it's always good to provide job security for counselors. I mean – (chuckle)

THERAPIST: (laughing)

CLIENT: But I hope that their experience wasn't too –

THERAPIST: Um-hum.

CLIENT: Traumatic.

THERAPIST: Um-hum.

CLIENT: So – but it will be interesting you know, to – I don't know. To see what it – you know to get the – I'd like to get a report card, you know I don't know everything. [00:53:00]

THERAPIST: (laughing) Well, you will. We all do.

CLIENT: (laughing)

THERAPIST: (laughing) Whether they call it that or not.

CLIENT: How'd you do?

THERAPIST: Okay. How – how are you doing today, given everything that we've kind of been talking about.

CLIENT: Oh no, I – it's a positive experience.

THERAPIST: Um-hum.

CLIENT: It really is. And I do feel like as much as I know that I'm working on this issue –

THERAPIST: Um-hum.

CLIENT: As much as I you know (sigh) you know, I recognize that you know, in doing some of the reflection papers and that kind of thing for classes, I recognized you know, it's like this is a big one. [00:53:33]

THERAPIST: Yeah.

CLIENT: This is a big issue that I need to continue to work with because I can't see clients. You know the transference stuff –

THERAPIST: Um-hum.

CLIENT: That's going on.

THERAPIST: Um-hum.

CLIENT: It's like well, I'd really like to have a little bit better handle on this –

THERAPIST: Um-hum.

CLIENT: Because as much work as I have done on it, I really do feel like yeah – it's – it's still – it's still a big one. There's a lot of other things that I've been able to let go of and are not as big a deal anymore. [00:54:03]

THERAPIST: Sure.

CLIENT: But this one is still there, you know.

THERAPIST: So, you know if I could leave you with a question that I'll have you think about.

CLIENT: Sure.

THERAPIST: What if you find out that the messages you've received about yourself, not that necessarily have been directly told to you, but the messages that you have received about yourself –

CLIENT: Um-hum.

THERAPIST: As you were growing up and a newly married man and into the marriage – [00:54:26]

CLIENT: Um-hum, um-hum, um-hum.

THERAPIST: Were not true. What would that mean?

CLIENT: Well I know that they weren't true.

THERAPIST: Right. I know that you know intellectually that they weren't true.

CLIENT: Yeah.

THERAPIST: But what if you know, and I will like I said leave you with this theme but –

CLIENT: Yeah, yeah, no I understand.

THERAPIST: What if you know they're not true, but you internalize they're not true. How would that impact you and what would be different in your life? [00:54:59]

CLIENT: Well I will think about that.

THERAPIST: Yeah.

CLIENT: Yeah. Sure.

THERAPIST: Okay. So –

CLIENT: Well thank you.

THERAPIST: Thank you. [00:55:08]

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: Gross outside. Ugg.

CLIENT: You know it happens in the fall sometimes.

THERAPIST: It – it does.

CLIENT: It rains.

THERAPIST: So how was your week?

CLIENT: Good.

THERAPIST: All right. Any new thoughts?

CLIENT: (sigh)

THERAPIST: On some of the things we've been talking about?

CLIENT: I'm not exactly sure. So I'm kind of hoping we can kind of chase them out a little bit, but –

THERAPIST: Okay.

CLIENT: I would say that there's (sigh) a hint of like emotion that's kind of like under the surface.

THERAPIST: Okay.

CLIENT: You know so it's like I know that there's there's stuff there so I think about like you know, the – the thought will arise (sigh) (pause) whatever – whatever it might be, but it's you know, it may be a variation of you know, this didn't work out exactly the way I thought it would,

or you know, kind of the you know, the why me questions. You know those kind of things.
[00:01:16]

THERAPIST: Yeah.

CLIENT: So – and again, not that I'm necessarily trying to repress that, it's just kind of like taking stock. It's like okay.

THERAPIST: Um-hum. [00:01:25]

CLIENT: So that's – that's the question that's arising right now. Or that's the feeling or that's there. So I also recognize that underneath that, you know there's – there's – there's some emotion.

THERAPIST: If you could put a name to the emotion, what would it be?

CLIENT: (sigh) hum, hum, hum, hum – I would probably say sadness. You know that – you know it's just like well this seems a little sad. This seems a little sad that it didn't work out or you know – yeah. [00:02:04]

THERAPIST: Say more about sadness.

CLIENT: Hum, hum, hum – hum, hum, hum. I think that some of what we talked about last week, I think in terms of – hum – (pause) you know trying to categorize or trying to describe you know, who I am. [00:02:36]

THERAPIST: Um-hum.

CLIENT: You know the type of personality that I think that I am. You know somebody who feels passionate, likes to be – would like to be perhaps in a relationship where it felt that kind of energy, you know and it's just like wow. [00:02:57]

THERAPIST: Um-hum.

CLIENT: You know? It's like sort of that sense of being like well, sort of feel stuck with the way the situation is right now.

THERAPIST: Okay.

CLIENT: Obviously not being able to see the clear direction out of the quicksand, but just sort of like, I don't know if quicksand is necessarily the right word. I don't feel like I'm sinking.

THERAPIST: Okay.

CLIENT: You know it's more of a sense of like hum, kind of stuck, I'm not sure which way to go or how to get out of this. So yeah, and just feeling sad that it's like hum. Yeah. Or – yeah. [00:03:36]

THERAPIST: What would it be like if you let yourself feel sad?

CLIENT: Well I think that I have. (chuckle)

THERAPIST: Okay.

CLIENT: (pause) I think I usually end up getting to the place of like well, I can feel sad, doesn't really change the fact that – doesn't seem to change the situation. [00:04:04]

THERAPIST: Um-hum.

CLIENT: It's like well, I can feel sad and be struck or I can get on and do something else.

THERAPIST: Right.

CLIENT: Doesn't really change the situation, but I feel better. (chuckle)

THERAPIST: You mean by distracting.

CLIENT: I – yeah, I guess distracting. I don't not – yeah, I – I guess. I – I think more that I've kind of gotten to a place of recognizing that (sigh) you know, sad's the story here. [00:04:37]

THERAPIST: Yeah.

CLIENT: It's like who says it's sad, you know. I – there are days when I – when I can – I can sit back and I can go oh, well this isn't sad at all.

THERAPIST: Right.

CLIENT: This is a tremendously liberating place to be.

THERAPIST: Which part of it?

CLIENT: I mean being in a relationship where you know, you don't have maybe that – that – those you know and look at other relationships and it's like – it's like wow, there's a lot of expectations and you know, people have a little bit tighter sense of like what the rules are or what the norms are in the relationship. [00:05:15]

THERAPIST: Yeah.

CLIENT: And I'm like wow. You know things are really you know, pretty loose here, so it's like shouldn't really feel like that's a bad thing you know. (chuckle) So it's kind of like I can look at the conditions maybe from a place of you know, being objective about it a little bit and recognizing well, if I go down this road and I – if I go with this interpretation, I can go hum, this is sad. Or if I go down this road it's like, you know, this is kind of good. (laugh) [00:05:45]

THERAPIST: Well – yeah, so I definitely hear what you're saying. I guess the pattern that makes me feel sad is the fact that you have to for so much of your life from what you've told me, continue to minimize your own feelings because people have not really let you feel them. [00:06:10]

CLIENT: Um-hum.

THERAPIST: So now you're in a pattern where you yourself have to say well, it's not sad. But it's deeply sad because it's not what you wanted it to be. I mean and sometimes you have to grieve what you wanted it to be, you know.

CLIENT: Yeah.

THERAPIST: It – you know you say well it doesn't change it. Well, no it doesn't change it, but it distracting yourself from it, is sometimes a good strategy, but it doesn't change the fact that it's there. And when you look back over a lifetime with someone, and it didn't turn out at all what you wanted it to be, that's deeply sad and very angry.

CLIENT: Yeah. Yeah.

THERAPIST: And the fact that you – you know, based on you know your belief system and value system you know, I don't know who wouldn't feel stuck. Right? [00:06:59]

CLIENT: Yeah.

THERAPIST: Because from the outside looking in you say well, you know we don't fight and you know she doesn't put these restrictions on me. But sometimes you would want a fight and some restrictions versus a lack of emotional intimacy.

CLIENT: (sigh) Yeah I suppose that you know if the – yeah I don't know. Hum, it – that'd be an interesting question to sit with, but I think – yeah. Emotional intimacy it's like well, it's been out of the picture for such a long time, it's difficult to even you know, kind of put myself there you know. So yeah, you know, feeling that sadness and you sort of you know, it's like the – you know the situation being what it is and it's like (sigh) how do you find – how do you find emotional intimacy? [00:07:53]

THERAPIST: Um-hum.

CLIENT: You know in the current set – (chuckle) you know in the set up that we have. It's kind of like well shit. (laughing)

THERAPIST: Can – well – yeah. Well can you – so can you describe for me – give me a typical week at home.

CLIENT: Oh. Well yeah.

THERAPIST: With your interactions with your wife, yeah.

CLIENT: Considering – yeah. Considering that you know we've just shifted in terms of like being officially empty nesters –

THERAPIST: Okay, right.

CLIENT: So the youngest one is off at Indiana University, is a freshman. And he isn't coming home nearly as often as the older two did. [00:08:29]

THERAPIST: Um-hum.

CLIENT: He's like oh, I got this thing.

THERAPIST: Right, right.

CLIENT: You know (chuckle) So – yeah. So the kids are pretty much gone you know. I've got an activity on Monday evenings. I'm on class on Tuesday evenings. We're together at choir practice on Wednesday evenings. She's the director.

THERAPIST: Okay.

CLIENT: (sigh) Then she goes you know and spends the rest of the evening with girlfriends after the choir. Thursday I'm in class up here. [00:09:05]

THERAPIST: Okay.

CLIENT: Fridays, so far since the beginning of the school year we have hopped in the car and gone to see one of the kids or something over the weekend.

THERAPIST: Okay.

CLIENT: So it's been a lot of traveling. So we have had maybe a little bit more time actually in the same proximity. [00:09:30]

THERAPIST: Tell me what that experience is like. Driving together, going to see the kids. What are you talking about?

CLIENT: Well, I can back – I can back up to the last time, which may not be 100 percent typical, but it's like – huh (chuckle) she did like calendar stuff for almost the entire trip down to –

THERAPIST: Are you driving or is she?

CLIENT: I was driving.

THERAPIST: Okay and she says we've got this, this date and – [00:09:56]

CLIENT: Yeah and she's doing stuff and she's making phone calls and she's doing e-mails. So you know it's just like a lot of you know calendar work. So it was utilizing that time to – yeah. So –

THERAPIST: And what do you want it to be?

CLIENT: Well, what I – yeah. And again I've gotten to that place of just like okay.

THERAPIST: I know what you've accepted.

CLIENT: I know.

THERAPIST: But in your fantasy world, what would it look like?

CLIENT: It would like well why don't we – why don't we have a meaningful conversation about anything you know. [00:10:29]

THERAPIST: Um-hum.

CLIENT: Where you at? You know, what's important to you? What's you know – so I feel like it's been (chuckle) a long time. Yeah, yeah.

THERAPIST: And if you initiated that conversation, what would happen do you think? I'm not suggesting that you do, but right.

CLIENT: (sigh) Yeah, yeah, I know. (pause) Yeah I think that I don't know. I'm not 100 percent sure I know anymore. [00:11:01]

THERAPIST: Um-hum.

CLIENT: You know I think I've just gotten myself to this point – this habitual place of you know and I recognize that it's – it comes from a lot of years of being like hurt and it's like okay. You

know I'm done with that. I'm not going there anymore. You know it's like if we want to talk about the weather, fine. (laugh)

THERAPIST: Um-hum.

CLIENT: But I'm not going into that place again of like yeah. You know so I can be – I can sit here and get angry that you're going to fill up this time and space with something other than getting close to interpersonal communication. Or I can just whatever, you know.

THERAPIST: How – so being hurt from her looks like what Seamus? [00:11:51]

CLIENT: (chuckling) I – yeah, and this might be you know putting the spin on sitting and thinking about it you know for a lot of years. But I feel like (big sigh) (pause) Yeah I think it's just that place of like recognizing that no matter how I approach from whatever angle or direction I approach, there is – you know I keep thinking that the force field isn't going to be up everywhere. [00:12:32]

THERAPIST: Right.

CLIENT: But it's – it's up pretty much everywhere.

THERAPIST: I'm trying to get a picture of your approach so I can sort of –

CLIENT: Oh I would say it's probably really, really ineffective. (laughing)

THERAPIST: No. You know it's – you're the – it's not – this is not an evaluation of the approach. I guess what I'm trying to see is, I'm trying to picture you having a conversation and what happens when you get rejected? So you try to broach a topic, how does she reject you? What happens? [00:13:04]

CLIENT: Hum.

THERAPIST: Because this is a pattern and I guess I'm just sort of trying to get – what does the pattern look like for you?

CLIENT: That's it yeah. Hum? (sigh) Well I think – I think that I often times will shut down because I don't ever feel like there's a sense of (pause) (sigh) I don't – I think that I – I think that there's certain fear that you know my opinion, my – yeah whatever it is that I have to say is not going to be accepted. [00:14:02]

THERAPIST: Um-hum.

CLIENT: And it's kind of like there's that sense of hum, it's here's my – here's my opinion, here's my idea. This is the you know – it kind of feels like this is the way it is.

THERAPIST: Okay.

CLIENT: Yeah.

THERAPIST: So give me – give me an example.

CLIENT: Yeah. Yeah, yeah, yeah. (sigh) I'm just – I'm just trying to put words to a feeling as opposed to having some kind of a – a concrete example. (pause) Yeah – the only thing I'm – I'm able to kind latch onto right now is maybe just a recent conversation about you know, her being upset that none of the kids went to church anymore. [00:15:04]

THERAPIST: Okay.

CLIENT: And you know and I was kind of in that place of like you know feeling like well hey you know, they're 21 or approaching 21 and you know, and I'm not really sure it's going to be helpful to push.

THERAPIST: Um-hum.

CLIENT: So you know that kind of thing. And I'm not exactly sure what the wording was back, but it was more of a sense of you know, you know this is how I think it should be. You know definitely you know, she's able to express her emotion a lot more clearly and so I'm not really sure I felt like I was necessarily being heard. [00:15:50]

THERAPIST: Um-hum.

CLIENT: You know –

THERAPIST: Kind of like oh, whatever.

CLIENT: Right. And you know because I'm you know trying to be – because I have gone down this other path you know, where I'm kind of walking this parallel path you know, doing this study of Taoism – you know so like I know, even though we're not talking about it, it's like you're kind of responsible for this. [00:16:19]

THERAPIST: Okay, so you think that's what's behind it.

CLIENT: Well, I – I yeah.

THERAPIST: You don't go to church as much as you should, and so they're getting this stuff from you.

CLIENT: And you're not – you're not – you're not standing there with me encouraging them to go to church and it's just like you know, whether or not I heard those words exactly, you know it's – it's been there. [00:16:42]

THERAPIST: Sure. Um-hum.

CLIENT: You know that kind of feeling. That kind of sentiment comes out and you know you're kind of – I know you hear what you want to hear kind of thing, but it's like okay. You know something will be said over here that was like oh, I get it, that was a message for me. (laugh) [00:17:00]

THERAPIST: Yeah. Um-hum. And – and how often do you – does that happen in your interactions with her?

CLIENT: Not often. I think again, you know I think that we've – what I said before, that we've learned how to be good roommates.

THERAPIST: Yeah.

CLIENT: You know and it's like I see her in the morning, you know we have 10 or 15 minutes in the morning, on most mornings. And then depending on what day of the week it is, I may not see her for a day or two, or whatever. So it's not like – you know we did set Wednesday after – or Wednesday evening to try to get together for dinner before choir practice [00:17:38]

THERAPIST: Okay.

CLIENT: So that's really (chuckle) you know so that you know in terms of like it's – it's safe time, you know that's – it's like public space, so yeah.

THERAPIST: Do you guys sleep in the same bed?

CLIENT: Yeah.

THERAPIST: Okay. And how is that?

CLIENT: It's two people sleeping in the same bed. Yeah. I mean there hasn't been a sexual intimacy (pause) it's my daughter's bed, in seven years. [00:18:17]

THERAPIST: Seven years is a long time.

CLIENT: Yeah. So yeah. There was a lack of –

THERAPIST: What do you do with that piece?

CLIENT: (sigh) Nothing.

THERAPIST: Um-hum. Nothing at all?

CLIENT: Well nothing that includes anybody else.

THERAPIST: Well, okay.

CLIENT: Yeah.

THERAPIST: But masturbation.

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: But – and I would say that that is not – you know and (chuckle) I don't know what regular or anything like that but it's like – yeah, that's the only – [00:18:53]

THERAPIST: Yeah. Well that would fulfill a physical need, but not necessarily an emotional one.

CLIENT: Right. And you – and you recognize that.

THERAPIST: Sure.

CLIENT: It's like well this isn't about – this isn't about the physical. You know it's like this really is about you know having some kind of an emotional, intimate relationship.

THERAPIST: And is that something the two of you talk about together ever?

CLIENT: No.

THERAPIST: No. Because I'm wondering what she does with that piece as well.

CLIENT: I believe that she has an intimate relationship.

THERAPIST: Okay.

CLIENT: You know.

THERAPIST: So do you think that she is cheating?

CLIENT: No.

THERAPIST: Okay.

CLIENT: But her needs for an emotional relationship are being fulfilled by a close friend.
[00:19:35]

THERAPIST: Um-hum. Male, Female?

CLIENT: Female friend.

THERAPIST: Okay.

CLIENT: (sigh) So.

THERAPIST: Do you think there's anything romantic in that relationship?

CLIENT: You know this is you know, when you're – when you're sitting there you know trying to figure out why and what's going on, and everything that's kind of floating around in your head, and you're creating all kinds of wild scenarios and stories, it's like – and then you start to look back a little bit, and it's like now I'm starting to put little pieces together of like what I know about stories from her past and it's like, yeah, you know, maybe – maybe there's – you know and I don't understand. [00:20:25]

THERAPIST: Okay.

CLIENT: I don't understand the world of bisexuality.

THERAPIST: Yeah.

CLIENT: I'm starting to get to understand a little bit of the world of you know my son being you know male homosexual.

THERAPIST: Yeah.

CLIENT: And I've got some other friends that are. But I really don't know anybody and I really haven't taken any time to understand that. Not that I think that my wife would, or is. Maybe she would, but I don't know if she – (sigh) [00:20:52]

THERAPIST: So you think their relationship is not necessarily sexual.

CLIENT: Right.

THERAPIST: But there may be some romantic overtones.

CLIENT: (pause) Boy I don't know. There have been a couple of times where I just feel like wow. Wow would you look at that. (chuckle) You know it's like everything about this relationship looks like what we used to have. [00:21:13]

THERAPIST: Tell me.

CLIENT: (chuckle) You know just in terms of like the amount of phone time. The amount of time together. You know it's like – you know there's part of me earlier on that was like really attached to the you know, the Christian story. Enough that it's like well, this is not Corinthians 13. You don't keep score. [00:21:33]

THERAPIST: Um-hum.

CLIENT: You know and I'm like oh, okay, so I need to let go of that. But it's like damn it, I just want to do a time study.

THERAPIST: Yeah, okay.

CLIENT: Let's do a – let's do a little bar graph here in terms of like –

THERAPIST: Well let's. Well –

CLIENT: (laughing)

THERAPIST: You know it's – it's interesting because as I – as I hear you telling your story, it's always interjected how you have to adjust or check yourself or distract yourself or you know, don't do tit for tat. [00:22:04]

CLIENT: I know, yeah.

THERAPIST: And that's great

CLIENT: (chuckle)

THERAPIST: You know but that's not always about the real human experience of being hurt or feeling shit on, or feeling jealous rightfully so, or angry –

CLIENT: Yeah, yeah.

THERAPIST: Or even sort of looking at your – you're – I think it's great that you're holding yourself to a higher standard. But I think you again dismiss your own real experiences. And that would be painfully lonely, right? And angering, right? [00:22:34]

CLIENT: Oh yeah.

THERAPIST: Right?

CLIENT: Oh yeah, oh yeah.

THERAPIST: To be married to a person who – because all couples have problems, but this huge disconnect when you want to connect. And now you know you suspect that she is getting these needs met somewhere else.

CLIENT: Yeah, yeah.

THERAPIST: And whether or not there's a sexual component, you're the one who's on the losing end. [00:22:51]

CLIENT: Oh, yeah, yeah, right.

THERAPIST: Yeah. And I guess – I hope in here, you feel like you can actually give voice to whatever you know, whatever you're telling yourself is socially unacceptable and accept the fact that you know you felt cheated. Because I would feel completely cheated. [00:23:09]

CLIENT: Yeah.

THERAPIST: 25 years of marriage and you describe yourselves as you know good roommates.

CLIENT: (chuckle)

THERAPIST: And that's not what you want. Was that what you wanted? And that's not what you want.

CLIENT: No, no. And yeah. [00:23:24]

THERAPIST: It seems unjust.

CLIENT: (sigh) Yeah you know, and as much as – you know I am hearing what you're saying, you know. I also don't want to necessarily you know – I know that my own lack of communication early on in the relationship helped get me to here to. [00:23:45]

THERAPIST: Sure, sure. And I am not -

CLIENT: I'm not –

THERAPIST: Demonizing your wife. And I am not sort of hearing things in a one sided way. Right. But I guess because you are so quick to minimize your own feels or dismiss them or say well I shouldn't be keeping score. And I'm kind of like well if you're a human being – [00:24:05]

CLIENT: (laugh) Yeah.

THERAPIST: You know every once and a while, human beings even good ones keep score.

CLIENT: Yeah. Yeah. No and I get it you know and that and I do. You know and it's like well, I'm pretty sure you know from my informal score keeping that the bar graph would look a little bit more like what you know our current economic situation you know is. [00:24:32]

THERAPIST: Explain.

CLIENT: In terms of like you know the economic divide. You know most of Americans you know were earning about this much money. And the top one percent is so far off the chart – (chuckle) in terms like –

THERAPIST: You mean in terms of you guys, how well you're doing financially? [00:24:48]

CLIENT: No, I'm talking about time spent together.

THERAPIST: Okay.

CLIENT: So just backing up two steps and looking at that time study. You know and it's like yeah, you know, so and it was the kind of thing that even when the kids were at home, you know the kids and I were even having this conversation. It's like really? Mom's over at Lisa's house again.

THERAPIST: Okay.

CLIENT: You know it's kind of like it became the kind of thing that it's just like okay. [00:25:19]

THERAPIST: Can you give voice to your suspicions or thoughts here about what you think is happening?

CLIENT: Yeah. I – for me it seemed very clear that that happened at the time that my daughter was leaving for school, for college. And –

THERAPIST: The oldest?

CLIENT: The oldest.

THERAPIST: Okay.

CLIENT: And you know my wife is the – the youngest of her family. She's now orphaned. Her worst fear is that all of the people that she loves are going to die. And they have. [00:25:56]

THERAPIST: Um-hum.

CLIENT: You know so that fear has been realized a number of different times. And she's experienced a lot of death and a lot of loss in her life. And I think that my daughter Penelope going off to school because the real concrete confirmation that these people that I love are going to leave me. [00:26:20]

THERAPIST: Um-hum.

CLIENT: And so it – you know this is me interpreting, but you know what it seemed like was okay, well I'm going to go over to Lisa's house because she has two younger daughters over there and they're not going to leave right away. [00:26:37]

THERAPIST: Um-hum.

CLIENT: You know so it's just like – it's too painful –

THERAPIST: But what about you?

CLIENT: It's too painful for me to be here because I have to confront the reality that everybody's leaving me.

THERAPIST: Yeah. Um-hum. But what about you? You're the one person that doesn't leave. [00:26:53]

CLIENT: (pause) (sigh) Yeah, I'm not 100 percent sure about that, you know it was like – and I'm trying to remember. I'm – I'm kind of thinking my – my moving deeper into you know the world of meditation and kind of going down that path you know, was more of a result of trying to deal with you know – [00:27:26]

THERAPIST: That's an emotional leaving. I understand that. Or an emotional disconnection. But you haven't left. I mean there's an emotional divide which is a form of leaving, but you haven't left Right?

CLIENT: Um-hum.

THERAPIST: And so I guess when I say what about me? That's what I'd be thinking. So the kids leave because you raised them to leave, to take care of themselves, right?

CLIENT: Yeah.

THERAPIST: And I'd be thinking as the spouse, well what about me? I'm still here.

CLIENT: Right.

THERAPIST: Right? We're in this thing together. And I'm not leaving. And yet she left you.
[00:27:57]

CLIENT: Yeah. Yeah. Yeah. So – and not being – not being able or if – skilled in being able to communicate that. You know and – and my worst – my worst fears are that you know I don't want anybody to be upset with me because then they're not going to love me. [00:28:28]

THERAPIST: Um-hum.

CLIENT: You know so I'm going to play – I'm going to play all these games so that you're not upset with me.

THERAPIST: But she's upset with you. And you're upset with her. [00:28:38]

CLIENT: Yeah you know and it's like –

THERAPIST: So you guys are holding this, I don't know, hostility maybe? Anger? Towards one another because –

CLIENT: Probably.

THERAPIST: It didn't work out for either one of you the way you thought it –

CLIENT: Right.

THERAPIST: And neither one of you can talk about it.

CLIENT: Yeah, pretty much.

THERAPIST: Which is imprisoning.

CLIENT: (chuckle) Yeah, there you go.

THERAPIST: Yeah, because then you have to share a bed with someone.

CLIENT: Yeah. [00:28:59]

THERAPIST: Which is an intimate act that makes a mockery of the fact that it's an intimate act, because it's not.

CLIENT: Right.

THERAPIST: Yeah.

CLIENT: Yeah, yeah.

THERAPIST: That's a lot.

CLIENT: Sure. Trick or treat. (laugh) It's unfair.

THERAPIST: It's very unfair.

CLIENT: Yeah. Yeah. Yeah, yeah, so it you know it's been you know I recognize that it's like – yeah, I'm just not sure you know, it's like well, I'm not – not that you know guys can't you know figure out how to have close intimate relationships, but there's just not that you know –
[00:29:54]

THERAPIST: It's not only a lot harder but it's far less socially sanctioned for men to have that kind of emotionally intimate relationship with other men.

CLIENT: Yeah.

THERAPIST: At least for –

CLIENT: I think it probably in other cultures it works. But it doesn't work so well in this culture.

THERAPIST: Not for heterosexual men.

CLIENT: No. So I do have you know, or have had you know, a few female friends. [00:30:20]

THERAPIST: Okay.

CLIENT: But it's like okay, based upon our cultural norms, this is about as far as this relationship's going to go.

THERAPIST: Um-hum.

CLIENT: You know and that's frustrating, and that's sad. And it's like well, whoever came up with this plan, well this kind of sucks a lot. (laugh) You know like – [00:30:38]

THERAPIST: So the fact that you know –

CLIENT: Shit.

THERAPIST: You're married you know in name and values.

CLIENT: Right. Yeah.

THERAPIST: But not in an emotional sense. And you can't get close because of the marriage. [00:30:55]

CLIENT: Yeah. And I'm – and I'm like not that I would want a marriage relationship with these other people, but it's like okay, you know, at some point here you know – the you know this is not culturally acceptable anymore, you know.

THERAPIST: Sure, sure.

CLIENT: I'm not going to be able to go and spend as much time you know, with these other friends, as my wife does with her friend. [00:31:21]

THERAPIST: Sure.

CLIENT: You know it's like I can't just go take a weekend and – okay, here's a quick aside.

THERAPIST: Yeah.

CLIENT: My wife and I used to get to get away. Like we would go quarterly. You know like once a season we would go take a long weekend.

THERAPIST: That's nice, that's great.

CLIENT: So about the time you know my daughter goes off to school, all of a sudden Lisa ends up becoming the partner to go on these weekend trips. And I'm like (chuckle) [00:31:55]

THERAPIST: And you're like what?

CLIENT: Yeah. Just – yeah, I was swallowing a lot of anger, you know and -

THERAPIST: Why swallow?

CLIENT: (sigh) I don't know, I think I just got – I got to this place that just like – well I think it was also on you know, coming to the place or coming on the heels of that we had that conversation once like you know what – what the – in relationship to the sex abuse scandal. [00:32:31]

THERAPIST: Yeah, okay.

CLIENT: And it's like you know, after one of those weekends where we had been together, you know it was kind of clearly we were – you know that sexual relations had come down to like four times out of the year. And like these were important weekends because this was the only time that we – we did, you know we had the time or the space for this kind of relationship. [00:32:58]

THERAPIST: Sure.

CLIENT: And it was after one of those weekends, she's like I just don't think that we can do this right now. I just can't – I can't go there right now.

THERAPIST: Okay.

CLIENT: So I mean really that was about the extent of the conversation, I'm like – you know so it was like I could see that it was like – I'm going to use a Star Trek analogy.

THERAPIST: Okay.

CLIENT: Because I don't know it's like – lowered the force field long enough to be able to tell you that piece of information. And then the force field went back up. [00:33:26]

THERAPIST: To not be able to have a conversation about it.

CLIENT: Yeah. That's what it felt like on the inside you know.

THERAPIST: Sure.

CLIENT: And you know I played that game. It's like instead of me being you know, self-confident enough or self-assertive enough, or caring enough about you know, how do I make this – you know, it's like well okay. I just kind of sat with it. [00:33:50]

THERAPIST: But you do deeply care.

CLIENT: I do. And you know –

THERAPIST: I mean you're not – you're not apathetic at all. There's no – this is not apathetic. This is not apathy.

CLIENT: (sigh)

THERAPIST: But there is anger and pain, it's not apathy.

CLIENT: Well yeah.

THERAPIST: I mean so I guess a question comes to mind, if it could be, if you thought that there was a chance to have a friendship and an emotional and sexual relationship with you wife, would you want to have that with her? [00:34:22]

CLIENT: (sigh) You know I guess part of the – I (pause) I think – I think yes.

THERAPIST: Okay.

CLIENT: I mean to really be honest with you about it, I'm not 100 percent sure I can say yes.

THERAPIST: Yeah, well that –

CLIENT: I mean there's – I, it's like shit. There's a lot – there's a lot of damage (chuckle)

THERAPIST: There's a lot of damage, sure.

CLIENT: There's a lot of damage, there's a lot of crap here that has to be cleaned up before, and like –

THERAPIST: Absolutely.

CLIENT: Yeah, so I don't – I recognize that it's conditional. You know it's like well yes, but I think for me the biggest piece is right now, it's like I really had the feeling like this is somebody who really isn't looking for my affection right now. And I'm like well the last thing that I want is to be the guy that's in the position of like trying to make you like me. (laugh) [00:35:16]

THERAPIST: Sure. You know, and you – you laugh.

CLIENT: I'm like well that really sucks. (laughing)

THERAPIST: Well you laugh but it's such a – it's a painful thing and I get that, right. But, you know I'm thinking a couple of things. You know I'm imaging there's – it's like you're screaming from the inside. But if you, you know – so you know because you – it's like being imprisoned. You know you mention the analogy of a force field, right? [00:35:40]

CLIENT: Yeah.

THERAPIST: And so I almost wonder, and I am certainly not suggesting this at all. But you know I almost wonder what do you have to lose by saying look, I'm not happy. This is not what I – I am struggling every day because this looks like none of what I wanted it to. Right?

And there are times I want to emotionally connect to you and we are living these separate lives where we completely freeze each other out. I mean we just live a mockery of what we started out doing. [00:36:17]

CLIENT: Sure, sure.

THERAPIST: You know I mean, as scary as that would be, you know you would at least get to release some of that and see what happens. Now, of course you say that then there has to –

then either nothing happens which is bad, something happens which is scary, I mean, but what would it be like?

CLIENT: (sigh) Yeah.

THERAPIST: To crack the force field enough to state your own truth. [00:36:41]

CLIENT: (pause) Yeah I think I recognize you know, I think I recognize enough to know that yeah. If you ever really want to crack this, you're going to have to do that.

THERAPIST: Yeah. That's what I mean about screaming from the inside. It's such a silent scream.

CLIENT: Yeah. I recognize that yeah. It's one of the big – it's one of the big dragons. It's one of the – it's like okay. [00:37:09]

THERAPIST: But Seamus you've been silent for years.

CLIENT: Yeah I know, I know.

THERAPIST: And it's killing you emotionally. I mean that's the – I mean that's the most painful piece that it's killing you.

CLIENT: Yeah.

THERAPIST: It's like a thousand cuts on the inside, right? And so you know, my guess is you do find comfort in meditation. And you do find comfort in Taoism. But your voice is still – I mean you have had this whole culture your whole life of being silenced. Allowing yourself to be silenced or being silenced. Not giving your own emotion weight. [00:37:48]

CLIENT: Hum.

THERAPIST: And so in some ways it gives other people permission to not give it weight. But it is equally important as everyone else is. You know and at least if you state your truth, and maybe if you think about it we can work on how you might go about doing that. But you don't have to be screaming from the inside. If you're going to scream, you might as well damn scream.

CLIENT: Um-hum.

THERAPIST: You know because at least you're not stuck.

CLIENT: Yeah Stuck – stuck is not good.

THERAPIST: Stuck sucks.

CLIENT: And I recognize that stuck isn't going to help anybody. [00:38:23]

THERAPIST: Yeah but really it's about you.

CLIENT: Yeah. Yeah.

THERAPIST: You know I mean tell me what that experience might be like for you as you imagine it.

CLIENT: (sigh) I think in the past I would have said it was probably the scariest thing that I could imagine. [00:38:44]

THERAPIST: Okay.

CLIENT: I think it's probably not as scary as I used to –

THERAPIST: Because?

CLIENT: I'm not exactly sure you know that there – there's probably been some emotional, or some maturation, or you know some whatever, you know. [00:39:04]

THERAPIST: Okay.

CLIENT: Just getting to the place of like well screw it. You know it's like I'm 50 years old, you know. I can do this.

THERAPIST: Um-hum. And 50 is young. So can you imagine, because you can foreseeably do this for 25 more plus years.

CLIENT: Sure.

THERAPIST: Right, and we just get older, you know. We didn't get different unless we make it different.

CLIENT: Right. Yep.

THERAPIST: You know, so –

CLIENT: Well I get that.

THERAPIST: Yeah, and so you know if you look at it, you know, that might be a scarier truth that if you don't speak your truth, that you could have another 25 years. Because I wonder if, and I

don't know, because I don't know your wife. But I'm going to speak this out loud, you tell me your thoughts on it. [00:39:47]

I wonder if your wife is using the marriage as a cover of normalcy. Everything's okay. Appearances are.

CLIENT: Sure.

THERAPIST: Yeah. And I think as the spouse that would piss me off. Because she gets the cover while she gets to go have an emotionally intimate relationship, if not a sexual relationship. We don't know what's going on right. [00:40:08]

And if you, you know, we can talk about women's sexuality and some of the things, and I teach human sexuality class. Women's sexuality is more fluid than men's often times, right. On a continuum of heterosexual, homosexual and bisexuality, you know women are at least more likely to admit being bisexual, right.

And so I don't know what's happening in that relationship. Women have the freedom to be deeply, emotionally intimate with one another without a sexual component. But that might be there. It might. And I think you've already thought of that. [00:40:39]

CLIENT: Yeah.

THERAPIST: Yeah. So I – I imagine that you're suffering in silence, you know, accept your own rage within you and depression is deafening. And she gets to use the marriage as a cover while you don't get your needs met.

CLIENT: Um-hum. [00:40:55]

THERAPIST: Right? And you started the discussion about Lisa with saying well she's who – this is how we used to be. And that would just piss me off on so many levels. Because you don't get any parts of your needs met. And the marriage gets to be a cover for your wife, you know. And I don't think it's this simplistic, but you know while she can have these intimate needs met while you are suffering. That's the part that's really unjust. [00:41:21]

CLIENT: Um-hum, um-hum.

THERAPIST: But you – you can state your truth. You don't have to be in silence. It won't change her behavior, but it might change things for you.

CLIENT: Yeah. Yeah. I really yeah. I really – I feel like I'm getting to that place even though I'm not you know I'm not sure I can walk out tomorrow and do that. (chuckle)

THERAPIST: Sure. Sure.

CLIENT: But I'm getting to the place where I feel like yeah, you know I need to be able to say this for me.

THERAPIST: Yeah.

CLIENT: And in full recognition that nothing – nothing will change. Or if it does change, it might be for the worse. (laughing) Well, I recognize this. [00:42:01]

THERAPIST: Okay, well and I can see the worse yeah, what would that look like?

CLIENT: Well I'm not sure what worse would be except that you know, you know that the divide is even bigger you know. (pause) Yeah. But again, you know I have a friend (chuckle) So there is an aside right here.

THERAPIST: Yeah.

CLIENT: I have a close friend who is you know, we were friends for – oh, I don't know we've been friends for six, eight years. [00:42:31]

THERAPIST: Okay.

CLIENT: The last couple of years, within the last two years, you know he's come out to me that his a transgendered woman. How do I say that?

THERAPIST: Okay. So he's male to female?

CLIENT: He's a male – yeah.

THERAPIST: So he's physically male?

CLIENT: Yes.

THERAPIST: But inside he's always felt that he's female. Okay.

CLIENT: Yes, that's it.

THERAPIST: Okay, okay.

CLIENT: I can't say the words right, but –

THERAPIST: Yeah. Yeah, okay.

CLIENT: And you know, I'm – I'm you know I'm great with that. And I'm supportive of all that, but I also see in him you know it's like my God, you're living this life. [00:43:04]

THERAPIST: Yeah.

CLIENT: You know and it's like –

THERAPIST: Like what? He's living this life what?

CLIENT: (chuckle) You know it's like this parallel thing, it's like well look, wouldn't it just be easier to like be out with it? (laugh)

THERAPIST: Sure. Sure. So he's living this life of being trapped.

CLIENT: Sure.

THERAPIST: Yes. Because his brain is one thing and his –

CLIENT: And you know, he's you know, he's 60 years old. He has three grown children. He has a young daughter, you know, his wife is actually fairly supportive of him. [00:43:42]

THERAPIST: Yeah. But she – okay, so he told his wife?

CLIENT: Yeah.

THERAPIST: Okay, but that's the big difference in some ways. Somebody knows his story.

CLIENT: Um-hum.

THERAPIST: You know, no, not somebody. You do and his wife does. Right?

CLIENT: Um-hum.

THERAPIST: And you keep your story to yourself, which is you know –

CLIENT: Yeah, pretty much. [00:44:03]

THERAPIST: And you know, I'm glad you have shared it with me. But you know so in some ways, you know, yours is worse.

CLIENT: Yeah. Yeah, yeah.

THERAPIST: Because he at least has told his wife. He's told a close friend.

CLIENT: Right.

THERAPIST: And the telling of one's story is a powerful thing. And you have kept your story close because you keep trying to rationalize or understand or rework it or be empathetic to your wife's trauma. But you yourself are traumatized by what has happened in your marriage.

[00:44:34]

CLIENT: Yeah. Yeah, yeah.

THERAPIST: I mean it's been traumatizing.

CLIENT: Yeah, yeah. Yeah. No, and I get that. You know and it's – you recognize that you know it's like you know there's a kind of this trust relationship that's been built up and then it's like naw, no trust anymore. (chuckle) [00:44:58]

THERAPIST: Yeah. Yeah.

CLIENT: So that yeah. That's certainly traumatizing.

THERAPIST: Well, it is. But it doesn't – you can't change her and that is the frustrating part. But your own silence is painful.

CLIENT: Um-hum.

THERAPIST: Right?

CLIENT: Um-hum.

THERAPIST: And I think that's the part that is – because you do have a choice. You don't have to stay in this marriage. You don't. Right?

CLIENT: Well –

THERAPIST: And I am not suggesting you should get a divorce. [00:45:30]

CLIENT: No.

THERAPIST: I don't suggest such things. But I'm saying sometimes you can – if you recognize you do have a choice to speak or to not speak. To say what your truth is or not. To divorce or to remain married. Sometimes just the recognizing that you do actually do have a choice.

CLIENT: Yeah, yeah.

THERAPIST: You know because you could decide I'm done and get divorced tomorrow.

CLIENT: Um-hum.

THERAPIST: You could do it.

CLIENT: Right. Right. No, I get it.

THERAPIST: Yeah. And what – I mean have you ever thought about that?

CLIENT: Oh, sure. [00:46:01]

THERAPIST: Okay, and sort of what – what are your thoughts about it?

CLIENT: You know I think that all of the stories and the baggage that I have about (chuckle) being the oldest and the most responsible, and blah, blah, blah, and all of those other, you know things, you know I'm dragging around too much of that baggage as well. I mean it's like yeah. It's like –

THERAPIST: Yeah but this is – this is not irresponsible. We can unpack some of that, right.

CLIENT: (chuckling)

THERAPIST: But that is not – you know you have all of this shit on your shoulders about who you're supposed to be and what you're supposed to be doing, and how you're supposed to feel. [00:46:40]

CLIENT: Yeah, yeah.

THERAPIST: And you know why you should remain married and why – you know and some of that's true, right. And our values are extremely important part of who we are, so I don't want to –

CLIENT: Yeah. Yeah, yeah.

THERAPIST: You know dismiss that. I'm not you know again, I'm not suggesting divorce. But I'm saying you know that in some ways you have – you're in the fight of your life. You have to fight for yourself. [00:47:03]

CLIENT: No I get it. Yeah.

THERAPIST: Yeah. Your spirit your sole, you have to fight for your own happiness, which you do deserve.

CLIENT: Yeah.

THERAPIST: You do not have to stay. And if you do decide to stay, you certainly don't have to remain silent.

CLIENT: Yeah. And I think that that – I think that that that starts to get at putting some words to what I feel.

THERAPIST: Sure.

CLIENT: It's like you know even engaging in this process. It's like (sign) it's like okay, you know it's like I'm having this relation – you know this conversation with myself. Okay, if you're going to do this, if you're going to stick it out, well you need to figure out you know some way to be you know, and what's the word I'm looking for (pause) not congruent. True to yourself, what's another word for that? [00:48:04]

THERAPIST: Yeah. True to yourself.

CLIENT: Yeah. But I -

THERAPIST: You know, oh, yeah. It could be congruent, but it's –

CLIENT: Whatever. You got the point that it's like look, if you're going to do this, fine. But it's like man up. You know be you. You know that kind of feeling.

THERAPIST: Um-hum, um-hum.

CLIENT: So yeah. You know I think that I'm – I think that I recognize the work that has to be done.

THERAPIST: Sure.

CLIENT: You know and it's like trying to gear up for starting an exercise program. You know how many days do you sit around and like okay, I'm going to get my – here's my new shoes. [00:48:43]

THERAPIST: Yeah.

CLIENT: And okay, I need a you know a sweat suit. And it's like okay (hard breath) bracing up for this, you know it's like I can do this. It's not going to be easy.

THERAPIST: Yeah. Sure.

CLIENT: It's going to be hard work. But I recognize it's like yeah, this is. And I know that the confrontation is not really with my wife. [00:49:05]

THERAPIST: It's with you.

CLIENT: Yeah.

THERAPIST: And your own demons.

CLIENT: Oh, yeah.

THERAPIST: Yeah.

CLIENT: Yeah.

THERAPIST: And it – I you know I think that's insightful and you are a deeply insightful person. But this is, it starts from your parents. And all of that, this continual being silenced, this you know who you're supposed to be.

CLIENT: Oh, yeah.

THERAPIST: And in some ways 50 can be liberating. You know 50 can be liberating because you can say to yourself, you know what? [00:49:32]

CLIENT: Well really, yeah.

THERAPIST: You know people have told me who I'm supposed to be and that is a bunch of bull shit. I don't have to do that.

CLIENT: Yeah.

THERAPIST: You know I can really be me and that is okay. And some ways the standing up for yourself you know, maybe to make it less scary does not have to start with a deep heartfelt conversation. But it can be you know, you have a discussion let's say are we going to go see the kids. Or she's says I'm not happy with you know the fact that the kids aren't going to church anymore. And you know, you state your peace and you feel blown off. [00:50:05]

And you can say hey, don't blow me off. You know, I feel like our children are old enough to make good decisions with the values we have taught them. I felt dismissed there. And then let it go. But it can start with the small things. It doesn't have to start with a huge conversation.

CLIENT: Yeah.

THERAPIST: Tell me your thoughts about that. [00:50:26]

CLIENT: No I recognize that I think that the decision to get involved, or to do this counseling program, it was something that I really was feeling strongly compelled to do.

THERAPIST: Um-hum.

CLIENT: I started having conversations and talking to other people about what I was feeling and it was like I'm really kind of thinking I'd like to do this, you know. You know I've been running my own business for 13 years and it's just like I'm at the end of that road you know. It's like there's not – there's no. [00:51:02]

THERAPIST: Yeah.

CLIENT: And it's like well if I really put a lot of time and energy into this, I'm sure I can continue to make money. But there's no heart and soul in this anymore. And that's kind of important to me.

THERAPIST: Yes.

CLIENT: You know to get up in the morning, you know and it's like so I talked to enough people and it's like well what do you think? And it's like well, yeah, I think you'd be good at that.

THERAPIST: Yeah.

CLIENT: So I just finally got to the place where I'm like yeah, this is what I want to do. So it was interesting, I talked to all these other people, but I told my wife. [00:51:31]

THERAPIST: Okay.

CLIENT: It's like you know this is what I'm going to do.

THERAPIST: And her response was?

CLIENT: Well because it came out of you know left field for her, she was like what? What? You know and like are you sure you can't do this, you know like could we wait like three years until the kids are out of you know school, so that we're not trying to pay for you know, all of this college at one time. And you know so I know she's coming at it from the whole financial aspect of it. (chuckle) [00:52:01]

THERAPIST: Yeah.

CLIENT: But of all the people I talked to, she's the only one that wasn't like encouraging.

THERAPIST: Right.

CLIENT: You know so it's taken a while and I think she's on board in terms of like at least somewhat supportive of that, but.

THERAPIST: But in some ways that's a small way of standing up for yourself. It's kind of actually a pretty big way. It's not a small way. Because you decided you needed to do this for yourself.

CLIENT: Yeah. And it really – and I did it in a way that was probably atypical of what I did before. It's like okay, I know if I go through the normal channels of the way I would – I'm going to talk it over with her and eventually I'm going to get to this place of like well, she's going to get upset about that you know, so I'm just planning this all in my head. And she's going to get upset about this and I'm going to back down. [00:52:46]

THERAPIST: Okay.

CLIENT: And I – I'm not want to do that. I just want to go for this. This is what I want to do. So it was like (sigh) so that was a little gutsy I suppose.

THERAPIST: Yeah.

CLIENT: For me, but I yeah. It was, I did it.

THERAPIST: Yeah.

CLIENT: And here I am. And I'm still living to tell the tell and all that stuff. [00:53:08]

THERAPIST: And here you are. Right.

CLIENT: So.

THERAPIST: Yeah. I mean I think there's a lesson in that.

CLIENT: Yeah. So I know that it's there.

THERAPIST: Yeah.

CLIENT: You know and again I feel like I know that this is – this is the dragon that I've got to fight you know.

THERAPIST: Yeah. I do wonder where you got reinforced for the backing down? It didn't start with your wife. It's there now. You know and maybe that's something next time we've got to look at. Where you got reinforced for the backing down. Because that's where you started having to swallow all of your own feelings. Or all of – put people's needs before you put your own. [00:53:49]

CLIENT: Backing down?

THERAPIST: Backing down.

CLIENT: Well I'm sure that that's – I'm sure that that's probably been there from the get go.

THERAPIST: Yeah. But see you're not okay with that. You know, sometimes it's compromise. Compromise though is different than continuing –

CLIENT: Yeah compromise is actually having coming from a place – a strong position and being able to give and take a little bit.

THERAPIST: Yeah. But, but that's not what you're describing in backing down.

CLIENT: No.

THERAPIST: And if you think about it, your parents didn't know anything about college, but you did not back down. Right? You went to college. [00:54:28]

CLIENT: Right.

THERAPIST: They didn't really want you to go to Boston, but you went.

CLIENT: Right.

THERAPIST: You know so with the times in your life that you have followed your own voice, right?

CLIENT: Um-hum.

THERAPIST: Have been validating times.

CLIENT: Um-hum, sure.

THERAPIST: So I would imagine that that's where our work can focus. Where you follow your own voice. Good or bad. You know it was interesting, so last night we had a friend over. My husband and I were talking. And they were talking about you know, these are intellectual guys, so they're talking about you know, perceptions of masculinity and all of this stuff, you know. [00:55:03]

CLIENT: (chuckling)

THERAPIST: You know and how it's you know structured – they could say it better than I. But one of the things that they talked about, right, and I always like to kind of listen because I find the discussion fascinating is that you know how society constructs manhood and some of the very rigid things that men have to do and have to be.

CLIENT: Um-hum. [00:55:23]

THERAPIST: How sometimes you know, you know you have to fight, even if you know you're going to lose. And you know so one guy who is not the physical athlete guy had to fight with his intellect. And you know my husband, you know and so – it was interesting because they said because sometimes you are just called to do that and be that as a man. And you know if you don't fit the stereotypical kind of machismo male role, how you have to find other outlets for your masculinity. But sometimes you know you just have to fight even if you're going to lose, right? And I'm like what? [00:55:56]

Right, but – and I thought about it. And in some ways you have to fight I wonder even if you think you're going to lose, because the fight is about you. It's not really about your wife. It's about you.

CLIENT: Um-hum.

THERAPIST: You're in a fight for your own peace, your own happiness, your own freedom.

CLIENT: Yeah, no it is, yeah.

THERAPIST: Your own sense of self really, you know. And the fight is to finally validate for yourself. You're not only okay, but you're really a good human being. And you don't have to make everybody happy to be a good human being. And it's not you know – you really do get one life to live. [00:56:34]

And so you kind of have to live, it sounds corny, but you sort of have to live your own best life. And that does not mean always backing down.

CLIENT: Yeah.

THERAPIST: And you know you swallowed all of that shit, you know. And that's where the rage and the depression and the anger come from.

CLIENT: Yeah.

THERAPIST: Because nobody can continue to do that.

CLIENT: Yeah. Yeah. Now – yeah. No, yeah. I get all that.

THERAPIST: Yeah.

CLIENT: I get all that.

THERAPIST: Yeah. How does that sit with you? As we – [00:57:02]

CLIENT: I think – no, it – it all seems to flow. I get all of that.

THERAPIST: Yeah.

CLIENT: You know I'm not exactly sure you know, just in terms of like you know, I know that I don't fit the role – you know the typical male role model stuff. Yeah. I'm not exactly sure where I'm going with that piece, but. [00:57:31]

THERAPIST: Um-hum.

CLIENT: No, that resonates a lot. And I feel like it seems to fit you know what we're saying, so.

THERAPIST: Something to think about.

CLIENT: Yeah. Yeah.

THERAPIST: So, we are not meeting next week because of those interviews.

CLIENT: Right.

THERAPIST: But we will meet – [00:57:51]

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BEGIN TRANSCRIPT:

CLIENT: I don't need to do that, so.

THERAPIST: Well you know ICA is – they don't have as much money as some other organizations, so you know.

CLIENT: No.

THERAPIST: If you go to ACA, which has a national presence you know.

CLIENT: Right. I was – my experience was being the graduate student volunteer.

THERAPIST: Yeah, okay.

CLIENT: Thursday was fine because it was a pre-conference day and I was one of two graduate students who were helping out in this whole thing and it was really, it was okay, but Friday and Saturday – [00:00:40]

THERAPIST: What happened?

CLIENT: I – thinking that they need a little bit more help or a little bit more coordination. There were several grads who were helping out from here who left with a really bad taste in their mouths.

THERAPIST: Oh, that's too bad. Was it because of disorganization, or?

CLIENT: I don't know. I'm thinking disorganization and you know it's like people will usually come and work all day for you with not much more than a pat on the head, but there were not many pats on the head going on and – [00:01:14]

THERAPIST: That's too bad.

CLIENT: Yeah. So, but you know, that's minor.

THERAPIST: Hopefully you at least got a chance to see some cool presentations.

CLIENT: Not much.

THERAPIST: Not much, oh my goodness.

CLIENT: The one that I was excited about going to see, we all – full room, packed room.

THERAPIST: What was it?

CLIENT: It was on mindfulness and the presenter didn't show. [00:01:37]

THERAPIST: Oh, my goodness.

CLIENT: Really?

THERAPIST: The presenter didn't show up?

CLIENT: Oh, my gosh.

THERAPIST: Oh, that's terrible. I'm sorry that that was just –

CLIENT: So maybe somebody wasn't very mindful about when they were supposed to be.

THERAPIST: Oh, my goodness. Well I am sorry you didn't have a good experience, that's too bad.

CLIENT: Well no, no, but I was there for the all day with the presenters, or the – when they did their thing you know on wellness and you know their models based on Adlerian and so it was really interesting. [00:02:11]

THERAPIST: Okay.

CLIENT: It was a good day. I won't say I had a bad experience, it was just like little hiccups there.

THERAPIST: All right. Well how have you been? It's been a couple of weeks since we've seen one another.

CLIENT: Okay. Yeah I think (pause) trying to get back – I'm running out of a meeting so I'm like shifting gears. [00:02:41]

THERAPIST: Sure, shift focus, yeah.

CLIENT: The – I think the experience has been that I had been more in tune with what I'm feeling.

THERAPIST: Okay, you mean over the last couple of weeks since we've been talking?

CLIENT: Yeah, yeah.

THERAPIST: Okay, tell me.

CLIENT: Well I think one experience that I had, I think it was pretty much like right on the heels of leaving here, you know going home that evening and kind of recognizing that over the years you know, it's – I've kind of allowed this pattern to happen where you know my life gets arranged for me and I get the memo. [00:03:23]

THERAPIST: Okay.

CLIENT: Here's – here's what we're doing and you know it's never really done you know, (pause) oh, I don't know what the word would be. It's not done like you will do this kind of thing, but it's more like you know there was some innocuous thing, like it was a profit – or a charity breakfast after church. [00:03:57]

THERAPIST: Okay.

CLIENT: So it's like I already feel like church is kind of this obligatory thing that I do and I go to get my card punched and –

THERAPIST: (laugh)

CLIENT: Justify my health insurance.

THERAPIST: Okay, right (chuckle)

CLIENT: (chuckle) But then it was like – so there's this – this breakfast that happened, or was happening afterwards, but I was just like, no I'm not really interested in doing that. You know and it was like – so I recognized that I kind of did that maybe a little quickly. [00:04:34]

THERAPIST: Okay.

CLIENT: Maybe a little abruptly. It was just like, no I'm not interested in going there. And it was like – it was enough of a shock that it was like –

THERAPIST: Wow.

CLIENT: Okay, well what's wrong? (chuckle) Which you know was like (laugh) no, I just don't want to do it you know. So.

THERAPIST: What – that's pretty significant. So you know you kind of had your day planned for you. You know and this is sort of the norm. And then you – you said I'm not doing this part of the day and you know, what was that like for you? [00:05:08]

CLIENT: Oh I think that I was really – I felt fine about that. I felt good about that.

THERAPIST: Good for you.

CLIENT: It was just recognizing you know the little post it note that I'll put you know up there for like the next time. It's like don't need to be quite as abrupt. (chuckle) You know. [00:05:29]

THERAPIST: Okay.

CLIENT: It's like yeah, you can just say well yeah, you know thanks for thinking about me here, but yeah, I'm really not so much interested in doing that.

THERAPIST: Okay.

CLIENT: You know I've got some other things or some other thoughts you know about my day. You know so I could have perhaps done it a little bit. But either way, irregardless, you know it was like you know just being able to say, no, I'm not going to, I'm not going there, so. [00:05:53]

THERAPIST: And it sounds like you feel okay about stating that.

CLIENT: Yeah and I feel like – I think that it was that that was good to be able to do that kind of thing and I recognize that – that I've gotten into such a pattern – our lives have gotten into such a pattern that that kind of thing happens and it happens almost like automatically.

THERAPIST: That – that your day being planned for you?

CLIENT: Weeks, months, years, whatever. And I'm just like okay. Yeah. You know and it's not that it's even an intentional thing anymore. It's just that this is normative behavior. [00:06:43]

THERAPIST: Right. Right the way that we do things.

CLIENT: And I don't like it anymore.

THERAPIST: Yeah.

CLIENT: I'm not sure I liked it ever.

THERAPIST: Probably not.

CLIENT: But it's like yeah. You know, it's just that life in the past with the kids in high school and grade school or whatever, that life just seems like it was happening so quickly that it's like okay, whatever, yeah, just you know, tell me what I need to do. You know? [00:07:06]

THERAPIST: Yeah, yeah.

CLIENT: And just kind of –

THERAPIST: That's not okay anymore. Not that it ever was. But I you know, I wonder – I mean that's in some ways very powerful. A small change. You are empowered to make a small change.

CLIENT: Yeah.

THERAPIST: And she responded to the change. Now she was surprised, but it doesn't sound like there was an argument or –

CLIENT: No, there was you know some questioning about that. [00:07:35]

THERAPIST: Sure because it broke the pattern.

CLIENT: Yeah. And maybe you know a little bit of lobbying, but not – not too much. But I just yeah. I recognized that you know doing that kind of helps you recognize how much of that kind of thing is still continuing to go on.

THERAPIST: Yeah.

CLIENT: And it's like I don't know. [00:08:00]

THERAPIST: Yeah. You know it has me thinking a couple of things. I think that sometimes married men are socialized into accepting certain things, to go along to get along. To not rock the boat. Whether it's kind of you know and I'll use the example of my own marriage. One of the things that my husband and I try to work out, and I think it's a process. You know where he would do something, but he'd be really irritated about it. But he wouldn't tell me he was irritated, you know. [00:08:33]

And so I think he was like I'll just her up or we'll just go along to get along. And I said to him, I said, well how would I know that you're irritated or angry about that? Because you haven't told me. And he said I really have to make an effort to do that. It's anti male in some ways. And it's not what I'm used to. He's black British. So you add male plus emotional repression as – and he would tell you this, okay. [00:08:56]

CLIENT: (laughing)

THERAPIST: And so I thought about it and he has to work hard to say to me, what you did pissed me off. Or you know it really made me angry. And I always have to work hard to not react to it. But just that little bit. And we are not 25 years in like you are, okay. But change the pattern, right.

And so he has to make an effort, but I'm appreciative at least knowing. I'd rather know that he's pissed or angry because I think that in working with couples, and you'll see this in your own clinical work. Sometimes we get socialized into these patterns, and we may not even like the pattern, but it's just easier. [00:09:32]

And I think men a lot of the times are like you know what just do it. Just shut up and do it. And then years later you find I don't even want to be doing this.

CLIENT: Right.

THERAPIST: You know so I – it makes me wonder what other changes you can make because you have felt disempowered in your marriage for so long.

CLIENT: Right. Right.

THERAPIST: And like you couldn't change things feeling stuck. Which leads to kind of helplessness, hopelessness and a kind of feeling of just like you know, being stuck in your own life. [00:09:58]

CLIENT: Right. Right.

THERAPIST: And you just did that and you just became unstuck. Not completely, but just in that little I'm not doing that.

CLIENT: Right. Right.

THERAPIST: Tell me your thoughts about that.

CLIENT: No, I think just the sense of yeah, trying to figure out that you know kind of what you just said. That's like all right, let's try to be a little bit more intentional about this.

THERAPIST: Yeah. [00:10:27]

CLIENT: You know and it's like you know, (pause) starting to get to a place of being able to recognize – recognize the feeling as it's arising. That – that recognition of okay, this is whatever. This is anger. It's like this is anger about you just writing my whole weekend for me. [00:10:58]

THERAPIST: Yeah.

CLIENT: And it's like being able to be with that. To be with that emotion and then use it as you know, a – a positive beacon or something. It's like you know, this might be a good time for you to like tell her what you're feeling here. You know as opposed to just like, I don't – I'm not going there. I'm not going to go into that place and being frustrated. So. [00:11:27]

THERAPIST: Yeah. That's kind of – that's kind of huge though. I mean you –

CLIENT: (big sigh) Yeah.

THERAPIST: I mean you – no, but it kind of is because you've – you've sort of been in the pattern of burying it and repressing it, kind of choking it down.

CLIENT: Oh yeah, for years, for decades.

THERAPIST: And you made it – okay, but you just made a huge – I don't want to minimize how significant it is. Even though it seems like a small change. You said I'm not doing that. And it seems small. It's actually huge because you had to not only recognize what you were feeling, acknowledge it and then act on it. Like you had to do something with it in the moment. [00:11:59]

You know if we – if we move it that example out of your marriage and you know, since you are a counseling student. You know often times in my supervision of students, when you feel something with a client, now you have to take it and do something. You have to channel it into your interventions.

CLIENT: Yeah.

THERAPIST: And because it means something. You know.

CLIENT: Say – say that again.

THERAPIST: Okay. So you know, in a – in any situation. But in a clinical situation when you feel something with a client –

CLIENT: So you're talking you the counselor feels something. [00:12:32]

THERAPIST: Yes.

CLIENT: Okay.

THERAPIST: You have to – so this – I guess what I'm trying to do is say, you're starting this with your marriage, but eventually you're going to use this personally and professionally. You don't throw out an emotion you're feeling and invalidate it. It's all meaningful.

CLIENT: Right. Right.

THERAPIST: So you take it, if you're bored, or angry or scared or irritated or whatever. And you've got to take it and you channel it into your interventions. You do something with it. And that's exactly what you did with your wife. You – you got unstuck. You've been stuck and that – that little bit of saying something, taking your anger or irritation that you've been burying for so long and saying no, I'm not going to do that. [00:13:09]

Whatever you said is less significant than you one, felt it. Two, acknowledged it and three, said something. That's pretty amazing actually. It's not a small thing, Seamus.

CLIENT: All right, well I'll sit with that. It feels – it feels insignificant. You know because like whatever. It feels like (chuckling) in looking at trying to move the entire mountain it's like well you know I've just taken a table spoon and I just you know. (laugh) It's not – I get the – [00:13:42]

THERAPIST: What's the mountain?

CLIENT: The mountain of you know, decades of not –not being honest. Not being able to speak or you know, whatever you know.

THERAPIST: Is she the mountain?

CLIENT: No, no, I think you know to me, you know not being able to express my feelings. You know it's like – [00:14:11]

THERAPIST: But you did.

CLIENT: I did. You know.

THERAPIST: And what if you re-conceptualize it. You're not trying to move a mountain.

CLIENT: (chuckling) Yeah. I like that, yeah.

THERAPIST: You're trying to change things. I mean because if you are moving a mountain, well then that's exhausting.

CLIENT: Yeah, exactly.

THERAPIST: But if it's – you know what, I'm not doing it this way anymore. Like just the small – and changes occurs in small stages. So just acknowledging I'm feeling something and I'm going to stand up for myself here. [00:14:35]

CLIENT: Um-hum. Um-hum.

THERAPIST: I'm not going to let my life be planned for me. I get to plan my life. Right. Or we get to discuss how we plan our lives. But I'm not going to allow my life to be planned. I'm not okay with that anymore. Is – the process is huge. [00:14:52]

CLIENT: Um-hum.

THERAPIST: That what you did is huge. It seems like a small intervention, but the process you went through to do that intervention is huge. And typically, since you are allowing yourself to sit with these emotions, more things are going to come out of that. You know the next time you have – I bet you you're not going to be able to be quiet the next time your life gets planned for you. [00:15:13]

CLIENT: Oh, no. I feel – yeah. And not that I've had a repeat performance on that yet.

THERAPIST: Sure.

CLIENT: But mostly because (chuckle) she's been too busy with this other activity and it's like we just really haven't seen much of each other. However, however I recognize that there's this event going on at Indiana University where my youngest is at. [00:15:44]

THERAPIST: Okay.

CLIENT: So we were just there for family weekend. There's an event that she'd like to attend on the weekend. But she can't.

THERAPIST: Okay.

CLIENT: And she's like oh you should go. You should go do that. And I recognized kind of what was going on there. And it was just like I have really – you know if you really wanted to go to this and it was going to be like the two of us going to do this, you know I would consider talking about this because it would be like a different avenue. It would be a different event. It would be you and I doing something together. [00:16:22]

THERAPIST: Yeah.

CLIENT: But you know, this is your thing. This is like jazz vocal performance and I – you know I'll go to support my son if he's performing in a concert. But this is like an outside group that's coming in. You know this is your thing.

THERAPIST: Yeah.

CLIENT: I'm not going to go there by myself to do that. So.

THERAPIST: Did you say that?

CLIENT: Yeah I was able to say yeah, you know, no. I'm really not wanting to go do this by myself. And it was not – it was not as big an issue as maybe other things. It – it's not a great example, but you know it was an example – [00:17:02]

THERAPIST: No, but it's a really good example.

CLIENT: It was another opportunity for me to say yeah, no I'm not going to go there.

THERAPIST: How did that feel?

CLIENT: Fine. Fine, yeah.

THERAPIST: Okay, is it just me over here by myself recognizing that this is still a really big deal?

CLIENT: (laughing) I don't know. I don't know, (chuckle) I don't know.

THERAPIST: What I – what I find interesting is that in the telling of the story, you sort of were hard on yourself about the way you did it. As if the language should have been softer or more thoughtful. [00:17:28]

CLIENT: Yeah you know, and I recognize – I do recognize it and I was even thinking about that as it was happening.

THERAPIST: Okay.

CLIENT: You know that it's like, oh, would you look at that. You know, you're going –

THERAPIST: So what's that about?

CLIENT: You're going to – now you're going to beat yourself up because you didn't – you didn't do it right.

THERAPIST: Yeah I heard that.

CLIENT: Or you didn't say it kind enough. Or whatever. It's like you just said it. Would you just back away from that and just let it alone. (laugh)

THERAPIST: Well I mean but what do you – what do you think that's about?

CLIENT: Not wanting – not wanting to do anything that puts me in a position where somebody won't like me. [00:18:07]

THERAPIST: What if your wife doesn't like you?

CLIENT: (pause) A, I'm pretty sure that there's a good chance that maybe (laugh) that may be the reality.

THERAPIST: Is what?

CLIENT: (chuckle) That – that you know, that she doesn't like me. (laugh)

THERAPIST: Okay. And then what about you liking her? [00:18:29]

CLIENT: Yeah. You know it's like, that's an interesting impasse to be at. It's like oh, wow.

THERAPIST: Wait. If you had to tell me right now. Do you agree with the statement that you don't like her?

CLIENT: Do I like her? (pause) I – yeah. You know it's like –

THERAPIST: Okay.

CLIENT: Okay so how much time has passed before I'm answering this question. I like her.

THERAPIST: Do you? [00:19:00]

CLIENT: Maybe not, I don't know. Can I be honest about that that? I'm not sure. I think that the bottom line is that if we were two strangers that were meeting and it's like – yeah I'm not so sure that this would be relationship material here. So I'm like -

THERAPIST: Do you like your wife?

CLIENT: (pause) (sigh) Wow. (pause) I think – I think our time's up now. (laugh) [00:19:37]

THERAPIST: (laughing) This is pretty uncomfortable for you.

CLIENT: Yeah. Yeah this – this gets at you know the – the big myths.

THERAPIST: Tell me.

CLIENT: Yeah. You know the myths of you have to like – you have to like your wife right? That's –

THERAPIST: You don't. Yeah you know it's – the dichotomies of loving someone but not liking them. Liking someone, not loving them. And love and like, and like love and hate living in the same house. You know my dad was a therapist, teacher and some other things. And he taught me – he had some – his parents were – he was a great dad. But his parents were pretty abusive. And he didn't like them. [00:20:25]

CLIENT: Yeah.

THERAPIST: And I – and they were great grandparents, which is the ironic thing, but he – he told me when I was an adolescent, I don't like them. I love them. But I don't like them. And I recognize from the – his perspective of all the things that he had to endure that they weren't likable to him.

So I kind of understood that you can love someone deeply, or not. And not like them. And like is – like is what often can change in a marriage. And there are times when you like someone very much and then sometimes you don't like them. And so for me, saying I like someone or I don't like. It's easy. There are times I like my husband very much. And times I'm like ooh, I don't like you right now. Right. [00:21:13]

CLIENT: Okay.

THERAPIST: So for me it would be easier to say. For you it's more complicated. And we've talked about some childhood factors.

CLIENT: Yeah.

THERAPIST: But you know that really caused a conflict for you. Can you tell me –

CLIENT: Well yeah. You know and I think that I do remember a conversation with my father, you know and this was probably when I'm what? 17, 18 years old. I'm an undergrad. I'm going back to college. He's driving me back to college. [00:21:41]

THERAPIST: Um-hum.

CLIENT: And I'm not exactly sure what precipitated the question. I just remember the question. And the question you know, which I think was kind of a ballsy question at the time and it's like, so do you love mom?

THERAPIST: Um-hum. And?

CLIENT: Pause. Well she's my partner. And I was like wow. You know so it was like I don't what to have that relationship. [00:22:10]

THERAPIST: What impact did that have?

CLIENT: I don't want to have that relationship. You know and it's like I – you know and so it's like oh, so here you are. Welcome. Welcome to your dad. (laugh)

THERAPIST: Is that scary for you?

CLIENT: Not necessarily scary, just a little, maybe a lot at this point. You know it's like damn it. You know is it – can we escape this? Or is this just the natural course of – of relationships? [00:22:39]

THERAPIST: Um-hum.

CLIENT: You know there's you know all the fairy tales and all the myths and all the you know, all of that. All of the expectations and all of the crap that's out there about relationships and it's like how much of that – you know you think that you've you know, gotten over and not bought into, but it's like (click) how much of that stuff is just interwoven into the fabric of who we are that. [00:23:05]

THERAPIST: But you – you almost sort of interpret this as your personal failure.

CLIENT: Hum. Let me think about that. (pause) Probably. (pause) Yeah, you know it's like whatever. You know it's almost like I'm angry at being naive or something. It's like –

THERAPIST: Tell me.

CLIENT: What you didn't see this, you know. You couldn't – what was you know, what has changed so much you know, that you know you couldn't see all of these qualities and traits. You know it's like well, people change, people evolve over time. So it's like – [00:23:48]

THERAPIST: So you're as angry at yourself as you are at your wife.

CLIENT: Maybe.

THERAPIST: Okay.

CLIENT: Maybe. And maybe it's just easier to be mad at me, you know then to be mad at somebody else. Especially when you have issues of you know – you know the whole sexual abuse piece of it is like oh, you're going to be mad at the victim. Oh, there – that's good. (chuckle) [00:24:19]

THERAPIST: Well, you're not mad at the victim. You're angry at your wife. That's not the same.

CLIENT: Yeah. Yeah.

THERAPIST: You know it's – you are unreasonably hard on yourself.

CLIENT: I never really –

THERAPIST: Unreasonably hard on yourself.

CLIENT: I never really noticed that before. [00:24:35]

THERAPIST: It's – it's in some ways a constant theme of how unreasonably hard on yourself you are.

CLIENT: Hum. Hum.

THERAPIST: You're supposed to be stoic. You're not supposed to have any needs. You're supposed to be the good guy.

CLIENT: (chuckling)

THERAPIST: You're supposed to – and when I say unreasonably, I mean it's impossible and it's – it's unfair to yourself.

CLIENT: Yeah, yeah.

THERAPIST: You see – I can see the pattern of where your own voice got buried. You know and it got buried as you have learned to try to be all things to all people. And you can't be. [00:25:08]

CLIENT: No.

THERAPIST: No.

CLIENT: No. Yeah. Yeah. Yeah.

THERAPIST: How does – how does that sit with you?

CLIENT: Well I think that (pause) there's a certain you know – you know just a like maybe what a little crack of light or something, it's like oh, there's an enlightening. Even though it's kind of dark to look at, it's like really, you're that guy. You're the – you're that guy that is so incredibly hard on himself. Wow. Would you look at that. [00:25:44]

THERAPIST: And you feel what about that?

CLIENT: Well I feel like you know having that knowledge or being able to kind of see that is helpful and I also recognize that that piece of the voice being buried, it's like yeah, you know (pause) I'm not used to having a voice. I'm not even sure what my own voice sounds like. [00:26:11]

THERAPIST: Um-hum.

CLIENT: That kind of feeling. You know so it's like it's not surprising that you know, (chuckle) I just kind of blurt something out.

THERAPIST: Exactly.

CLIENT: Because it's like well, you – you don't know how to use your voice do you?

THERAPIST: Okay. I think that's true.

CLIENT: Yeah. Yeah.

THERAPIST: So now what do you do with that? [00:26:33]

CLIENT: (pause) (sigh) A couple of little things you know. You know just you know, thinking about it. You know it was like I was writing a reflection paper. You know so I'm thinking – a couple of things were going through my head. It's like the whole notion of authenticity. And it's like, well dude, if you're going to be authentic in – and you know I wasn't using these words at the time, but it's like now I would use the words, it's like, well and you'd want to kind of exercise your voice here. It's like then you need to – you need to write that into the paper. You can't write something that sort of sounds nice or whatever. [00:27:18]

THERAPIST: Sure.

CLIENT: You know and it sort of sounds like you're being authenticity. (laugh)

THERAPIST: Right. (laugh)

CLIENT: It's like well what are you really felling here? You know and it's like write it down, you know.

THERAPIST: And what did you write? If I may ask. [00:27:33]

CLIENT: Oh, well it was a – it was a small review or critique of the ICA.

THERAPIST: All right.

CLIENT: You know and it was like, yeah, it was – it was kind of disorganized. It was kind of chaotic. You know so I wrote those things in.

THERAPIST: So you wrote the truth.

CLIENT: Yeah. I did.

THERAPIST: And what was it like to write the truth?

CLIENT: Well, it was okay in that you know I felt like again, it's sort of like well, riding a bike is not so bad as long as the training wheels are on. (laugh) [00:28:02]

THERAPIST: Well but you – but you thought about not writing the truth.

CLIENT: Well I recognized what I was doing.

THERAPIST: Yes.

CLIENT: That there's such a long history and such a long pattern that it will be – I think the job or the task is to try to be aware of when those feelings are starting to arise.

THERAPIST: Um-hum.

CLIENT: You know it's like oh. Trying to figure out if I can put you know, the little Kmart blue light or something, you know that's like oh, do you see the – do you see the little flashing light here. You might be – you might be engaging in that behavior right now. [00:28:38]

So if I can try to be – those feelings a little bit more. It doesn't necessarily mean that I have to act on every one of them.

THERAPIST: True.

CLIENT: But if I can at least be aware. It's like oh, yeah, not so much here. You know this –

THERAPIST: You know, this is going to sound very corny, but in some ways I'm excited for you because you've been through this very deeply painful process you know, of recognizing that you're not in a place that you want to be. That your marriage is not what you want it to be. But you're also on the verge of absolutely discovering your own voice. [00:29:20]

CLIENT: Um-hum.

THERAPIST: There are cracks. And when you begin to exercise it. When you learn how to exercise your own voice without putting the restrictions that you think should be on it, you're really going to like yourself a whole lot.

CLIENT: Um-hum.

THERAPIST: And you will recognize that in part, each of us is kind of responsible for our own happiness.

CLIENT: Right. Right. [00:29:49]

THERAPIST: You know like the things – because you're connected to your wife, the things that she does influences you. But choosing to not go to a Sunday afternoon lunch because you don't want to go, is a way of recognizing your you know, exercising your own voice because you don't want to go. And you don't have to, right. And it's a way of standing up for yourself and not going along to get along. And – and here are a thousand ways to do that for yourself every day. It's not a punitive measure to get back at your wife. [00:30:22]

CLIENT: Right. Right.

THERAPIST: You know and I don't have – I have a small sense of her, not a significant sense, but I wonder if the change might not be good for both of you.

CLIENT: Yeah. And it's impossible for me to change and not to have some kind of an impact on the relationship.

THERAPIST: Yeah. Even though it might be scary. Because of course you don't know what it might look like. But it means – the changes that you've made so far, hopefully show you that you're not stuck. Or you're not willing to be stuck anymore. And small changes lead to big changes. [00:30:58]

CLIENT: Well I'll sit with that because – yeah. I think I'm obviously you know, have been minimizing the change. You know I think – and maybe we all want the big change or we want the you know – but whatever, yeah. Yeah. You know so. I'll sit with the – and be okay with the small changes too. Um-hum.

THERAPIST: Yeah, I still don't see it as small. [00:31:30]

CLIENT: (laughing)

THERAPIST: I see it as pretty big. Because of the process. This wasn't the – you're tired and you barked a response. This was a thoughtful acknowledgment of your own thoughts and feelings and prefacing them. And that's not selfish. That's not selfish.

CLIENT: (deep breath) Yeah.

THERAPIST: It's you know, not in this context, it's really not. [00:31:59]

CLIENT: Yeah, I think I – I think I get that. I think you know I can see how for too long you know, just going along and then being the guy who doesn't really want to be – and doing whatever it's like well, how fun was that for everybody?

THERAPIST: Um-hum. (chuckle)

CLIENT: Can we take a vote on that? You know. Yeah. I – I get that that stance is probably even more selfish you know then if I would have just been able to say yeah, no. I'm not going to do that. And You know please feel free if you want to, but I'm not going, kind of attitude. And maybe everybody would have been happier in the long run. So. [00:32:49]

THERAPIST: You've often spoken about the force field.

CLIENT: Um-hum.

THERAPIST: What does this do to the force field? The shared force field?

CLIENT: Hum. (long pause) Well, I initially – you know I'll spend some more time sitting with that. But I initially it feels like I've sort of dropped mine.

THERAPIST: Okay. [00:33:29]

CLIENT: You know sort of it was – in doing for me, you know it's kind of like, all right. Force field's down. I'm not going. Boom. You know, hit me with your best shot, you know kind of feeling you know.

THERAPIST: Um-hum.

CLIENT: I don't know if that implies that there's still a force field there or not. But it's – you know it puts me in a more vulnerable position I think.

THERAPIST: Why vulnerable?

CLIENT: Because I looked – I'm – I'm – again, you know it's like that (chuckle) you know I'm facing my worst fear which is you're not going to like me. [00:34:10]

THERAPIST: Tell me about why that's your worst fear.

CLIENT: Well, I don't know. I – I think that just in – in other situations it always feels like you know, other in past counseling situations or past spiritual direction sessions. It always feels to me like you know, that that's – that's this underlying theme or monster or demon, or whatever. [00:34:43]

It's just like yeah, would you look at that, you know your whole life is wrapped up around needing to please other people. Needing to be liked by other people. And it's like look at how much crap you've gotten into because you can't – you can't either tell people what you really think, or you can't be honest about what you feel, or you go along and do things because you don't want to hurt somebody else's feelings. Blah, blah, blah. [00:35:15]

Maybe even get yourself into an engaged relationship with somebody because you were worried about what they might think about you. And I'm gughh.

THERAPIST: How – how do you think that's operated in here?

CLIENT: (pause) (sigh) Well I feel like it's less in here.

THERAPIST: Why?

CLIENT: Well, for the most part I think, you know I feel a sense of trust in this relation –

THERAPIST: Do you think I like you?

CLIENT: (pause) Maybe it's about the story of the counselor client relationship. It's like it doesn't matter if you like me. (laugh) It's much or something, I'm not sure. [00:36:03]

THERAPIST: So it – I have to be as the counselor, attracted to the story. I can't just like you, Seamus. I'm interested in the story.

CLIENT: No that's not what I was trying to say I don't think. You know for me it's not the – there's not – I don't know. There's not the expectation. (pause) You know why is it more important for you know, I'm kind of stuck on that one. I don't know. [00:36:42]

THERAPIST: You know I understand from what you've talked about where the desire to be liked comes from because you know you were in a family where you didn't feel like you belonged with your brothers. In some ways with your parents. You know the choices that you've made. I get that. [00:37:03]

And there's sometimes that with depression comes that. But here's the biggest unfortunate thing of all is, at least from my interactions with you. And I'm not blowing smoke here. You're really likeable.

CLIENT: Um-hum.

THERAPIST: And if you say you haven't tried, well then you're likeable but you don't know. You don't know if that's true or not. Because if what you've told me is true, then you're working so hard to be liked that you don't know that you actually are and you probably don't have to work at it. [00:37:30]

CLIENT: Um-hum. Um-hum.

THERAPIST: Right. And so going back to our conversation about if your wife likes you and if you like your wife. Let's say you guys don't like each other very much. Let's just say that. Well then you're working really hard for something you're not going to get. Let's say, you don't like her and she doesn't like you. Then all the things that you have done to go along to get along, and you're angry, resentful. She's angry, resentful. And there are these mutual force fields up as we've talked about. That's not working. [00:38:06]

CLIENT: Um-hum. Um-hum.

THERAPIST: So – so in some ways, what the hell?

CLIENT: (chuckle) Yeah.

THERAPIST: Right? Why not – and I'm not trying to make it – I think it's much more harder. It's much more difficult than this. I'm not saying you know, well what the hell, just throw it out the window. But kind of like what the hell. Let's say you guys don't like each other. Well, that means you know, it's probably not going to get a whole lot worse. Maybe you're concern of the image of the withdrawal of what? I mean there's the withdrawal of emotional support that's already there. There's the withdrawal of physical affection which is already there. What are – what's – what's the loss here? [00:38:43]

CLIENT: (chuckle) Yeah. Exactly. Then I think it starts to become – then I think it starts to become like the social things. You know it's like then – then it becomes like keeping up appearances.

THERAPIST: Yes and I mean, that's important to you and to her. And in some ways especially to her from what you've said, yes?

CLIENT: (sigh) Yeah. Yeah I think so. I mean – I mean there's – there's the kids, there's the cultural thing, there's her job. You know it's like yeah, you know this is a good – this is a good package. You know this is a good gig. A good act to you know to be playing, you know and.
[00:39:32]

THERAPIST: Yeah. I'm not saying what the hell, throw it out the window.

CLIENT: No, I'm not getting that from you.

THERAPIST: But I'm saying what the hell, you – you since – if you – if you accept that to be the truth, and I don't know that it is. But let's just you know, say that that's the truth, it actually would give you the opportunity to make some changes. Because what you fear has happened already.

CLIENT: (chuckle) Yeah, I've – I've actually had that thought before too, that's right. [00:39:59]

THERAPIST: Okay.

CLIENT: Yeah the metaphor might be something like (pause) the guy who's out you know, standing out in front of his house talking to a you know, an insurance agent about you know fire insurance. And the picture in the back is you know, the house is smoldering, it's just ashes. (chuckle) You know it's like, really dude?

THERAPIST: Yeah.

CLIENT: (chuckle) What's – what are you – what are you insuring here, you know. And I think it's habitual behavior. [00:40:34]

THERAPIST: It is.

CLIENT: It's like it's – this is the way I react in every situation. And it – it's like – Pavlovian dog.

THERAPIST: See you're telling yourself that, but you've changed it. Well yeah, but you're not a dog.

CLIENT: (laugh)

THERAPIST: And you've change it.

CLIENT: Yeah.

THERAPIST: You've change it. And that's why it's significant. Because if you can change that, you can't change her. But sometimes – I mean and we often with our spouses create – given our history and the context – what we think is going on inside their heads. [00:41:09]

CLIENT: Oh yeah.

THERAPIST: Sometimes we're right. Sometimes we're not. But if the worst has happened, if the house is already on fire, or smoldering, or burned to ashes, in some ways, you know you can allow your own voice to be heard, and re-teach yourself about you.

CLIENT: Um-hum. Um-hum. [00:41:33]

THERAPIST: You know where you say, I don't like this. Or I'm not happy with this particular thing. Or I miss the physical intimacy. And what is the consequence? What, she doesn't speak to you? Or she says nasty things?

CLIENT: (chuckling) Yeah.

THERAPIST: I mean you are already deeply hurt, don't trust. The force field is still up. One act does not bring the force field down. It doesn't actually make you more vulnerable. It actually makes you more powerful. [00:42:05]

CLIENT: Yeah. And I think that – I think that that's the experience that I had. It think that I do feel that. I think that I do you know, even though I may not be using the language that I think that it was a powerful experience.

THERAPIST: Yeah.

CLIENT: I do feel empowered to continue to do those kind of things.

THERAPIST: Yeah.

CLIENT: And to recognize not only within the context of my marriage, but it's like oh, shit yeah. You know you just do this everywhere don't you. Just look at that. Oh, would you look at that. (chuckle) There you go again. Isn't that kind of funny. [00:42:40]

So I think that I'm you know, I'm starting to be able to see that. And I think that the way that I'm beginning to see that is maybe with just kind of a sense of humor about it almost.

THERAPIST: Okay.

CLIENT: You know it's like you know, oh, there you go again. Isn't that funny. You know so it's like –

THERAPIST: And that's humor for you, you're not poking fun at yourself? You're not making fun or damning yourself?

CLIENT: No, no, no, no. No.

THERAPIST: Okay.

CLIENT: It's – it's really not that feeling. It's more of like oh, I caught you. You tried to do it there, but I caught you. You know it's kind of – that kind of feeling. Like almost like you know, my dog who you know I tell her to sit in the corner. And you know I'm doing the dishes or something and she'll – she'll wait and then it's like she slowly starts to move. [00:43:32]

THERAPIST: (chuckle)

CLIENT: It's like no. No, it's like I caught you.

THERAPIST: I see you, yeah.

CLIENT: I see you. So it's – it's that kind of thing. It's like oh, I see what's going on here.

THERAPIST: Yeah.

CLIENT: So it's more of that recognition. And if there's a sense of humor about it, it's more of a sense of a smile of like aah. [00:43:46]

THERAPIST: Okay.

CLIENT: Awareness, recognizing. Okay, that's what's going on here.

THERAPIST: Okay.

CLIENT: And there's where the empowerment is, you know. The awareness is powerful.

THERAPIST: Yeah. Because you're changing it.

CLIENT: Yeah.

THERAPIST: But I think that you know, if it should move to damning or blaming or shaming yourself, remember, there are some really good reasons you – you began to live your life that way. There always are. Right. [00:44:13]

CLIENT: Um-hum.

THERAPIST: There's some really good reasons why we develop the coping skills that we do, right. Even when they stop making sense for us to do. So at some point in time that was functional and served a good value for you. It stopped and you don't have to do it anymore. But you know, you always have to honor and understand why. [00:44:41]

So I hope that – I mean and you have a sense of why, you know, but I think that sometimes we develop around these ways of being and then you know, but you can change it. But you have to – you have to respect the why did you do it in the first place. Instead of – and you try to have to kind of take a step back a little bit and look at it and say well why did I begin to live this way? What was happening? [00:45:06]

CLIENT: Yeah.

THERAPIST: As opposed to going what the hell? And what's wrong with you? And no. Because then you never really understand or respect why.

CLIENT: Yeah.

THERAPIST: And then recognize well, you don't have to do that anymore. You don't have to be that anymore.

CLIENT: Yeah. Yeah.

THERAPIST: You get to choose.

CLIENT: Yeah. No I think – I think I get that you know. I – I'm not necessarily sure if I'm so much, that I feel like I necessarily have the energy right now to, well maybe I could. But I'm like (pause) you know I'm okay with just being able to say yeah. You know there was a reason why this happened in the past. [00:45:49]

THERAPIST: All right.

CLIENT: I can let it go.

THERAPIST: Okay.

CLIENT: Really. You know it's like I get that. I get the fact that it's habitual patterns. And I've just been you know doing the same kind of thing, it's like I just need to come to that place and like stop it. You can stop this now.

THERAPIST: I wish you would have empathy for yourself for the why.

CLIENT: (deep breath) I'm – okay. So it sounds like – it sounds to you like I'm not empathetic. [00:46:25]

THERAPIST: To you. For the why.

CLIENT: No I –

THERAPIST: Deeply – I'm going to make up a word here.

CLIENT: Okay.

THERAPIST: Caringly empathetic as to the why.

CLIENT: I will sit with that. I – I think that – I would say that I – I think that I feel empathetic.

THERAPIST: Have you forgiven yourself?

CLIENT: Hum, that's a good question. That probably – probably not. I think that – yeah. If – if I could answer that one quickly or honestly, yeah. The fact that I can't, says something to the fact that yeah, probably not there yet you know. [00:47:20]

THERAPIST: Okay.

CLIENT: Yeah. So I'll sit with that some more. I think that that could be.

THERAPIST: Seamus what are you feeling right now?

CLIENT: (deep breath) I think that you know it's just kind of an endorsement of – of some empowerment. You know I do feel that – yeah. Even though I may not be onboard necessarily being able to see it 100 percent yet, it's like I trust the fact that you're able to hold it for me. (chuckle) For a little bit. (laugh) [00:47:54]

THERAPIST: How very abdiculations of you. (laugh)

CLIENT: Yeah. Okay.

THERAPIST: Okay.

CLIENT: So yeah. Just yeah, hanging on to that for a little bit. Or holding it out there for me.

THERAPIST: Okay.

CLIENT: Let me – let me – so it feels like – yeah, let me try this one on this week. You know it's like I'll put that on and kind of wear that and see what it feels like. But –

THERAPIST: Which parts will you wear?

CLIENT: Well I think that I feel like sitting with – sitting with the forgiveness piece. [00:48:31]

THERAPIST: Um-hum.

CLIENT: (pause) You know and I feel like the – the other two by four to the head was like oh, do you like your wife? That's – I'm not really sure where to go with that, but it's like, oh, that was an incredibly uncomfortable question, so.

THERAPIST: Yeah.

CLIENT: Kind of going with that. Kind of looking at (pause) yeah. Why not, you know. Why not give this a shot you know. [00:49:09]

THERAPIST: Um-hum.

CLIENT: You know and then like trying to be aware of like what the hell is my voice you know.

THERAPIST: Um-hum. It's a – it's a lot quickly in here.

CLIENT: Okay.

THERAPIST: Does it feel that way to you?

CLIENT: Not necessarily.

THERAPIST: Okay. I want to be respectful of the pace. [00:49:31]

CLIENT: Oh thanks. No I think that (pause) I think to a – to some degree, you know it's – it's been the kind of thing where I've been trying to figure out how to get to this place, you know and it's like – so just having – having somebody kind of help channel that and move it, that feels helpful. [00:49:58]

THERAPIST: Um-hum.

CLIENT: You know it's like oh.

THERAPIST: Because you came in, it seemed like pretty ready, pretty open you know. And so I'm – I know I'm saying some pretty blunt, direct things, you know. But I'm sort of using our earlier discussion about you know, I guess the idea of your truth right, being you know seen – seeing you, hearing you, your wants, your needs without the distraction of – I don't have to consider your wife's needs in here, right. [00:50:41]

CLIENT: Um-hum.

THERAPIST: And I don't have to consider your kids. I have to consider what those mean to you. But I'm hoping that this can be a place where for an hour a week, you don't have to consider what it has to sound like when you say it out there. You can just say it or feel it or think it. And if I get it wrong, which you know, no problem, you say you got it wrong. [00:51:04]

And you get to sound – you get to hear yourself say directly, no that's not right. Or you got it wrong without having to repackage it in a way that you think I can or can't hear it. Because it's not going to change the fact that I like you. And I think you're a bright guy and enjoy working with you. Right, and I come from the other perspective where I just kind of say it. I don't really – really don't consider (laugh) – [00:51:27]

CLIENT: (laughing)

THERAPIST: You know to – and that's sometimes a good thing, and sometimes not a good thing at all. But I just – because one of the things that I trust is, if I say it or do it wrong either in my personal life, or as a therapist, and it's not that I'm trying to – trying to hurt people in any way, but if I say it or do it wrong, I trust that the relationship I form, there will be some repair. [00:51:52]

So if I say Seamus, how did you hear what I said and you say you know what, I didn't like that. Or that hurt or you have a facial expression. I trust that there will be a repair in the relationship. So I'm not overly concerned with how I say things. I try to say things in a sensitive way. But I also just say it you know. [00:52:11]

CLIENT: Yeah.

THERAPIST: And so in some ways, I hope that's helpful to you.

CLIENT: Well if nothing else, it's some modeling because I didn't grow up in that situation. You know so I don't – I don't have very many positive role models on how one you know, effectively just says it. [00:52:33]

THERAPIST: Yeah, well we'll see how effective it is.

CLIENT: (laughing)

THERAPIST: But – but if not I certainly trust (laugh) I do trust that you're going to tell me. Or find some way of communicating.

CLIENT: Well I will (pause) yeah. I think that I can.

THERAPIST: I hope so.

CLIENT: So yeah. We'll see – we'll see how that plays out so.

THERAPIST: I don't know. Well – well you said that you have a lot to sit with this week, so I'll be interested to hear what you come back with next week. [00:53:03]

CLIENT: Yeah. And next week is still working?

THERAPIST: Yes. We are still here next week.

CLIENT: That is the 20th?

THERAPIST: The 19th. No.

CLIENT: The 21st.

THERAPIST: The 21st yes.

CLIENT: 21st.

THERAPIST: The 21st.

CLIENT: Yeah. Okay.

THERAPIST: Yeah.

CLIENT: And then – so and then –

THERAPIST: And then Thanksgiving is the next.

CLIENT: So does this – this all gets a reset then for the second semester?

THERAPIST: I am here through the second week of December.

CLIENT: Okay.

THERAPIST: And I think that you guys have finals the first week of December?

CLIENT: Yeah.

THERAPIST: Yeah. So I am here through the second week of December, and then –

CLIENT: But I think that I'm also – yeah. Let's see. No I have to check, I think. [00:53:46]

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: There we go, that's better. How you doing?

CLIENT: All right.

THERAPIST: What's happening in your world?

CLIENT: Well it's you know, the last couple of weeks –

THERAPIST: It is.

CLIENT: Before the end of the semester, so it's like non-stop paper writing. And I'll follow it shortly by cramming for exams you know. So. (chuckle) [00:00:18]

THERAPIST: It's pretty bad. And you wonder why – if your professors all get together and have a conspiracy theory and why everything's due at once.

CLIENT: Oh, well, I've been on the other side of the desk you know. It's like everybody's – everybody's trying to cram it all in –

THERAPIST: Um-hum.

CLIENT: At the end of the semester so. Yeah, so thinking about coming up here, or thinking about you know, the week, you know, reflecting on the week. It's like well, I'm not sure how much like revelatory information I have to give you. I've just been you know sitting in front of a computer for a lot of – [00:00:51]

THERAPIST: Um-hum.

CLIENT: A lot of the time. So, not that stuff hasn't been happening.

THERAPIST: Yeah.

CLIENT: But I'm just like, well I don't know. (chuckle)

THERAPIST: What's been happening?

CLIENT: I I – honestly you know, a lot a paper writing. (laugh)

THERAPIST: Yeah. What's been happening at home besides paper writing?

CLIENT: Yeah. You know the – our schedules – our schedules are such that you know there's just a lot of – [00:01:20]

THERAPIST: Yeah.

CLIENT: You know. You know, our housing situation is such that you know, we built this house kind of about, um six and a half miles kind of southeast of Limestone.

THERAPIST: Okay.

CLIENT: So we're out in the country, little rural subdivision, and my job – or my wife's job is in Bourbonnais.

THERAPIST: Okay.

CLIENT: Which door to door is probably about a 20, 25 minute drive.

THERAPIST: Yeah.

CLIENT: You know, as the crow flies, a lot shorter, but you know, just getting there. [00:01:55]

THERAPIST: Sure.

CLIENT: So once she's over there, it's like running back and forth to the house is kind of like you know, it was always a stretch, or it's always a struggle, so when the kids – we actually were going to send the kids to a parochial high school.

THERAPIST: Um-hum.

CLIENT: Because our house is in the Limestone School District.

THERAPIST: Right.

CLIENT: And my wife's you know, a music person, you know a music degree person, and so music's always been really important in the family. So – and she was – she got this job working part time for the Bradley School District as the accompanist for the choir program. And she had decided that the kids – well actually my daughter was in high school for two years there and just hated it. [00:02:59]

THERAPIST: Is that the local?

CLIENT: Parochial high school.

THERAPIST: Yeah, okay.

CLIENT: Because she's a music kid.

THERAPIST: Yeah.

CLIENT: And you know, if you want to play sports, they've got a pretty good sports program, but not much on the music side. So we ended up transferring her, and in the process ended up buying a house.

THERAPIST: Okay.

CLIENT: In the school district, so we were tax payers in the school district.

THERAPIST: Yeah.

CLIENT: But then it became apparent that like driving the kids back and forth you know, just (chuckle) so the bottom line is we ended up moving and living over there during the school year.
[00:03:37]

THERAPIST: Okay.

CLIENT: So it's kind of like this you know –

THERAPIST: So you have two houses about –

CLIENT: Yeah. And, yeah -

THERAPIST: 20, 25 minutes apart, okay.

CLIENT: But the other – you know the house in Bradley is now rented out.

THERAPIST: Okay.

CLIENT: So we got renters in there. So my wife is in Bradley.

THERAPIST: Yeah.

CLIENT: Used to living in Bradley.

THERAPIST: Yeah.

CLIENT: All of her life and her friends are in Bradley.

THERAPIST: Right.

CLIENT: You know, and so it's like my whole life is over here, but I drive out and go to sleep. You know, it's like – [00:04:01]

THERAPIST: Which kind of seems to further symbolize.

CLIENT: Oh, yeah.

THERAPIST: Yeah.

CLIENT: Oh yeah. (laugh)

THERAPIST: Yeah. Tell me about that reaction.

CLIENT: You know it's just my world has kind of been that way for the last six years, so when we were living in Bradley, I would drive every day out to my studio.

THERAPIST: Okay.

CLIENT: And the house, so I was at the house every day.

THERAPIST: Yeah.

CLIENT: Didn't really feel like home because home is where – [00:04:32]

THERAPIST: That's right.

CLIENT: You're family and your jock is. (laugh)

THERAPIST: Right, right.

CLIENT: So you know, I'm coming out and taking care of this – and the you know, it's a pretty large home.

THERAPIST: Um-hum.

CLIENT: And a pretty you know, my studio is – so it's like this two acre piece of property.

THERAPIST: Is your studio in your home? Or is it –

CLIENT: It's adjacent to it.

THERAPIST: Okay. Okay.

CLIENT: It's a separate building. But yeah. So in the meantime we've gotten – you know we've had a couple of different people that have been like borders that have lived there. [00:05:06]

THERAPIST: Um-hum.

CLIENT: You know, just you have boarding, kind of occupying the space and that kind of thing and – and all that kind of thing. But you know it's been this kind of odd mix of what's been going on. You know so initially it was like building you know, this dream that I had. [00:05:27]

THERAPIST: Um-hum.

CLIENT: Of creating a cottage industry, which I think maybe I got to experience or live for a few years.

THERAPIST: Okay, before you moved to Bradley.

CLIENT: Yeah. Yeah that it you know, that it was this kind of thing where – and it worked for a little while that I was at home when the kids got home from school, and my business at the time was actually in the garage before I built the studio – [00:05:49]

THERAPIST: Um-hum.

CLIENT: Next door. And you know, so it was – yeah.

THERAPIST: I never asked you, how did you get into building furniture?

CLIENT: I'm a shop teacher.

THERAPIST: Okay.

CLIENT: So –

THERAPIST: You're musical?

CLIENT: A little bit.

THERAPIST: Okay.

CLIENT: My wife's really the musician. You know, I sing a little bit you know, but not. But no I started off my undergrad was in industrial arts. [00:06:16]

THERAPIST: Okay.

CLIENT: So the thing that you find about teaching industrial arts is that you never have time to build anything.

THERAPIST: I bet.

CLIENT: You're always helping kids.

THERAPIST: Yeah.

CLIENT: And yeah. So then I would start to do projects and that kind of thing for people on the weekends.

THERAPIST: So you were actually teaching –

CLIENT: Yes.

THERAPIST: In the school – in which school district?

CLIENT: Oh I was at – I was in Andres.

THERAPIST: Okay.

CLIENT: And my last stop was at Peotone. I taught at the Bradley Career Center.

THERAPIST: Okay.

CLIENT: A few other places around the state.

THERAPIST: Okay.

CLIENT: So I had about close to 15 years of experience –

THERAPIST: Yeah.

CLIENT: As a high school teacher. So (sigh) the – yeah. But you know I was building things on the weekends and the summers and it just eventually got to the place where it was like well I'm really busy – [00:07:05]

THERAPIST: Um-hum.

CLIENT: You know, and I'm really getting kind of tired and burned out with school. So it's like you know, I made the shift. And I had started to make that shift. You know it was always kind of like this dream that I wanted to try.

THERAPIST: Um-hum.

CLIENT: So in 2000 is when I left teaching and started my business. So.

THERAPIST: How – how have you enjoyed that transition?

CLIENT: I think that I enjoyed it probably for the first five years. [00:07:36]

THERAPIST: Okay.

CLIENT: And then you know, things kept kind of growing to the point where I ended up getting some help.

THERAPIST: Um-hum.

CLIENT: And then I started to become a business man and –

THERAPIST: Yeah.

CLIENT: Stopped becoming an artist.

THERAPIST: Okay.

CLIENT: And so the last – the last several years have just been this you know, this kind of trying to figure out how to be a business man and how to run a business and how to you know grow a business and how to you know do quick books and all the stuff that you need to do. [00:08:05]

THERAPIST: Yeah.

CLIENT: To run a business and recognizing that you know what, as much as I tried, as much as I think I had the aptitude to do this –

THERAPIST: Yeah.

CLIENT: Being a business man is just not doing anything except sucking the life right out of me. (laugh)

THERAPIST: Um-hum.

CLIENT: And there's like kind of bumping up against that reality of like hum – [00:08:32]

THERAPIST: There are a lot of parallels here.

CLIENT: Tell me how you see it as parallel.

THERAPIST: Well you know, I see you as a talented person. A man of –

CLIENT: Um-hum.

THERAPIST: Many talents.

CLIENT: Okay.

THERAPIST: Right. And you leave teaching, which is kind of your secure profession.

CLIENT: Um-hum.

THERAPIST: And you kind of go out and you give way to the artistry –

CLIENT: Um-hum.

THERAPIST: Of what you want to do. And then it doesn't again turn out the way that you want it to because – and this happens with many people, it's like music majors, right. [00:09:02]

CLIENT: Yeah. Yeah, yeah.

THERAPIST: You go into music because you love it and then it becomes your business and all of a sudden it's not so much fun anymore.

CLIENT: Yeah. Yeah, yeah.

THERAPIST: And for you, you went into it for the artistry of it. Knew you'd have to make a living, and then it turns into now you're the business man and once again you went into it for the artistry of it and you didn't get to fully do that as long as you wanted to. [00:09:22]

CLIENT: Well, maybe I did. You know –

THERAPIST: Okay.

CLIENT: Really I've kind of gotten to this place where I'm like – I'm in a position right now where I could –

THERAPIST: Sure.

CLIENT: You know, put more time into the artistry if I really wanted to.

THERAPIST: Um-hum.

CLIENT: You know the – you know the sad truth of the matter is it's like – it's like going to the cupboard and open up the cupboard it's like you know what, there's just nothing there anymore.

THERAPIST: Um-hum.

CLIENT: You know it's empty. (chuckle) And I'm like um – you know maybe I – I'm not saying that I'm – I really have never considered myself an artist in the same sense that you know, other people who are what I would consider professional artists, even though I'm sure I fit that category. [00:10:05]

THERAPIST: Yeah.

CLIENT: You know, I have made money.

THERAPIST: Well –

CLIENT: With my art, but –

THERAPIST: Why have you not considered yourself an artist?

CLIENT: I was. I think it's my own definition that you know I didn't go to school to train to be an artist. So that's my – that's my criteria, you know.

THERAPIST: That's the criteria?

CLIENT: I suppose.

THERAPIST: I don't know if van Gogh went to school or not.

CLIENT: I don't know if he did either. (laugh)

THERAPIST: Yeah.

CLIENT: But you know, I don't put myself in that same category with those folks. And so it's like yeah, I think it's probably an important note because I think that looking back at kind of those old patterns, it's like yeah, you know I feel like I've been an imposter. [00:10:48]

THERAPIST: Yeah. Okay, say more about that.

CLIENT: Yeah I just – it's like well, you know – you know I suppose it's all about the comparisons, comparing yourself to other people and other people's arts.

THERAPIST: To whom are you comparing yourself?

CLIENT: I other professional woodworking artists [00:11:11]

THERAPIST: Okay.

CLIENT: That are out there you know and it's kind of like recognizing that it's like yeah, you know what, you're never going to win awards.

THERAPIST: Um-hum.

CLIENT: You know with your stuff. And you know, I took this path of creating liturgical furniture –

THERAPIST: Okay.

CLIENT: Which is like in the music world – [00:11:27]

THERAPIST: Yeah.

CLIENT: Like going down the road of being a liturgical musician.

THERAPIST: Okay.

CLIENT: It's like serious artists –

THERAPIST: Okay.

CLIENT: Really don't take you seriously because you're doing this liturgical stuff.

THERAPIST: Is that – is that what you need? You don't feel like you've been taken seriously?

CLIENT: Well I would say that there's a little bit of that.

THERAPIST: Okay.

CLIENT: I would say that that's a little bit of the theme down there. Because I've heard myself say that kind of thing.

THERAPIST: Yeah.

CLIENT: Not that – yeah, I don't feel like it's this huge need within, certainly within the world of woodworking. [00:12:04]

THERAPIST: Um-hum.

CLIENT: It's kind of like I've come to terms with. It's like you know I'm satisfied with what I did.

THERAPIST: Are you?

CLIENT: I'm okay. Yeah. You know I really am.

THERAPIST: Okay.

CLIENT: You know looking back on it, you know I've got a large portfolio of pictures and it's like yeah, you know what we did some interesting stuff.

THERAPIST: Yeah.

CLIENT: You know I'm not knocking it, we did some good stuff. And I don't – I don't feel this need to have made some kind of a name in the woodworking world. Because they're recognized, it's like yeah, you know that and five bucks would get me a cup of coffee at Starbucks. (chuckle) Yeah, like whatever. [00:12:37]

THERAPIST: You know it's that there – I kind of have a lot of things in my head right now. Like this – your career paralleling some of the issues in your marriage, kind of in that outlet. But it – you know I think, it's like there's several ways to look at it. From the person on the outside, me, listening to the story, I just think wow, look at all of your talents. [00:12:59]

CLIENT: Um-hum.

THERAPIST: Right. You can, and look at how you easily dismiss them. So you went from being a teacher –

CLIENT: Um-hum.

THERAPIST: Which is one set of skills.

CLIENT: Right.

THERAPIST: And then – and an artist.

CLIENT: Um-hum.

THERAPIST: But you don't define it as art, which is interesting., you know. And then you decide that you want to sort of be an artist full time and then you make money at it, it sounds like you've had a successful business, which is defined by I mean, putting you know, being able to help support your family, okay. [00:13:32]

CLIENT: Sure, yeah.

THERAPIST: And that works out well, it may not have been as fulfilling as you wanted, but you know, you sort of made a career change and now you are in a master's program, you know enhancing another set of skills. So a person hearing that – I mean you could say, well you just can't make up your mind.

CLIENT: (laughing)

THERAPIST: It doesn't really sound like that. I mean it sounds like you're a man of many skills and interests.

CLIENT: Um-hum.

THERAPIST: You know, kind of in addition to your search for truth and fulfillment. [00:14:02]

CLIENT: I think that – I think that a lot of the – I think a lot of the jumping around has – I think maybe earlier on –

THERAPIST: Um-hum.

CLIENT: It may have more to do with you know, grabbing for the brass ring, as opposed to now it's like the switch is yeah, you know what, meaning is more important in my life right now.

THERAPIST: Yeah. But what's wrong with either of those things? Sometimes one leads to the other.

CLIENT: Oh, I'm – yeah, I'm not necessarily saying that it was – [00:14:30]

THERAPIST: Okay.

CLIENT: I'm not knocking it. It's just a recognition that –

THERAPIST: Sure.

CLIENT: Motivations earlier on.

THERAPIST: Yeah.

CLIENT: You know I'm sure that there was some level of meaning because I know that you know, I had made decisions based upon lifestyle and –

THERAPIST: Uh-huh.

CLIENT: And you know – you know finding satisfaction in what I was doing and –

THERAPIST: Um-huh.

CLIENT: You know how it affected the family, all those kind of things were kind of utmost in you know, designing this cottage industry kind of thing. [00:15:02]

THERAPIST: Yeah.

CLIENT: So I recognize that that was there. You know, but I may have also been motivated by you know, I don't know – you know kind of that personal goal as – which is okay. But now kind of recognizing that there's kind of this deeper sense of like you know, trying to figure out what's of meaning and how does this impact – you know, how can I be of service or – [00:15:31]

THERAPIST: Um-hum.

CLIENT: Benefit beyond just my own goals.

THERAPIST: What do you make of my interpretation of your being a man of many talents?

CLIENT: I think that that's true.

THERAPIST: Good.

CLIENT: Yeah. Now when I see that you know, and I think that I'm not exactly sure that I throw myself in the position of being a renaissance man. That always sounds a little pretentious.
(laugh)

THERAPIST: Okay.

CLIENT: But I think that I find that I'm not somebody who's just satisfied for long periods of time – [00:16:06]

THERAPIST: Um-hum.

CLIENT: Doing the same thing over and over again.

THERAPIST: Okay.

CLIENT: You know I've always valued in a job the fact that if one day doesn't look like the last day –

THERAPIST: Sure.

CLIENT: Then it's a good job.

THERAPIST: Yeah.

CLIENT: You know. I think I had a factory job – I did have a factory job that I was trying to think about how long it lasted, but I think it was just one summer – [00:16:31]

THERAPIST: Yeah.

CLIENT: Back after high school. And it was like this – if I hadn't already made the decision to go to college –

THERAPIST: Sure.

CLIENT: This would have sealed the deal for me. (chuckle)

THERAPIST: Yeah. Do you internalize that? That sense of somebody who has a lot of skills and can be successful at those things?

CLIENT: Yeah.

THERAPIST: You do?

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: You know because I think setting out on – down this road of the – doing this master's degree, you know is like – hum, I don't really think that I spent much time in the doubt place. [00:17:06]

THERAPIST: Okay.

CLIENT: You know it's like I'm looking back, it's like – you know and I've got a CV of –

THERAPIST: Um-hum.

CLIENT: Things that I've done, you know.

THERAPIST: Yeah.

CLIENT: You know. You were a teacher, and you were a business man. And you built a house and you did all these things and it's like you know, it's kind of like I've got a track record of like you start something, you generally finish it. [00:17:30]

THERAPIST: Okay, that's great.

CLIENT: And you know, you generally do a pretty good job at it. So I feel like yeah, you know, I'm going to get through this master's degree program.

THERAPIST: Well there's no doubt about that.

CLIENT: Maybe.

THERAPIST: You know all of these things are related though. Teaching and art, you know –

CLIENT: Um-hum.

THERAPIST: And counseling. There's a pretty strong – even if you tie in you know, you're looking at Taoism –

CLIENT: Um-hum.

THERAPIST: All of those things are pretty related. Significantly. Do you see that? [00:18:05]

CLIENT: Maybe not as clearly as you're seeing it. (chuckle) Maybe I'm seeing a thread of helping others.

THERAPIST: Helping others and in some ways of expression.

CLIENT: (sigh)

THERAPIST: In expressing yourself.

CLIENT: Umm, I'm not – yeah. Certainly I can see that with the – you know the art piece of it, but like expressing yourself through teaching – [00:18:42]

THERAPIST: Um-hum.

CLIENT: You know being on stage, or what would you – how do you mean that?

THERAPIST: Well, so if you're teaching, a good teacher reaches students.

CLIENT: Right.

THERAPIST: Though a genuine relationship –

CLIENT: Right.

THERAPIST: That you have, that's appropriate for teacher and student.

CLIENT: Right.

THERAPIST: You know, you communicating, you're developing relationships, [00:18:59]

CLIENT: Right. Right, right.

THERAPIST: In some ways teaching is its own form of artistry.

CLIENT: Right, yep. Yeah.

THERAPIST: Okay. If you're good at it.

CLIENT: I got it.

THERAPIST: And you're not just – you know and you're teaching students how to do something, right? And you're reaching them through your art. You know now some of them will be like yeah, I don't really care, but others –

CLIENT: Yeah.

THERAPIST: Will take it and turn it into a skill, or at least feel valued.

CLIENT: Yeah.

THERAPIST: And counseling is very similar.

CLIENT: Yeah, I get that now, yeah.

THERAPIST: So they're pretty related.

CLIENT: Yeah, okay.

THERAPIST: So your career path is pretty consistent I would imagine with who you are, who you've always wanted to be. Your search for meaning and truth and for understanding, they're related. [00:19:38]

CLIENT: Um-hum.

THERAPIST: You know what I mean, maybe I already know that –

CLIENT: Oh yeah.

THERAPIST: Because I'm a teacher and a counselor at the same time.

CLIENT: (chuckle)

THERAPIST: But they're deeply related to one another and art is a part of that. So whether you're –

CLIENT: Um-hum, um-hum.

THERAPIST: A you know – so for example I have a history of being a musician myself.

CLIENT: Okay.

THERAPIST: But I wasn't going to be winning any awards.

CLIENT: Right.

THERAPIST: But my deep appreciation for music and the arts, right is sort of very relevant to what I do I think. [00:20:03]

CLIENT: Sure. Sure, sure.

THERAPIST: I mean you know, what do you make of that?

CLIENT: Well I think I – you know I think I see that and I think that I see – yeah, that I felt like my critique of myself as a teacher –

THERAPIST: Yeah.

CLIENT: It's like you know, you can look around and see, yeah people that they just don't have it you know. [00:20:30]

THERAPIST: Sure.

CLIENT: And probably should go find something else to do because they're making themselves and everybody else miserable. And I recognize that yeah, it is a craft and it is an art –

THERAPIST: Um-hum.

CLIENT: And for the most part you know, your students teach you how to become a teacher.

THERAPIST: Sure.

CLIENT: And you know, and I think one of the things that I you know, early on recognized that it's like oh, yeah, you know I'm not teaching a subject.

THERAPIST: Yeah.

CLIENT: I'm teaching kids.

THERAPIST: Yeah.

CLIENT: You know and that's you know, that's what you're really focusing on. [00:21:00]

THERAPIST: Right. I mean it –

CLIENT: It doesn't matter, I mean okay, this is the vehicle whereby I'm impacting kids' lives.

THERAPIST: Yeah.

CLIENT: You know and it's like I'm going to impact kids' lives through this particular media.
Could have been -

THERAPIST: Right, it doesn't matter if the end result is they come out and become great artists themselves.

CLIENT: Yeah. The bottom line is you know, have I helped to push them down the path toward being you know, happier, healthier adults you know. [00:21:25]

THERAPIST: Yeah.

CLIENT: And that's – that was more important than like building the hutch or whatever, you know.

THERAPIST: Sure. Caring enough about them.

CLIENT: Yeah.

THERAPIST: So your search for meaning, I mean in some ways maybe you've had it and haven't recognized it.

CLIENT: Hum. I would say that I've – I would say that I've recognized it.

THERAPIST: Okay.

CLIENT: I would say that I have been somebody that's been motivated by the search for meaning for a long time.

THERAPIST: That's what it sounds like.

CLIENT: Yeah. And that you know even back –

THERAPIST: But you've had it I guess though is what I'm saying.

CLIENT: I've had it? Oh, I've had – [00:22:02]

THERAPIST: Meaning. Significant meaning.

CLIENT: Oh yeah, yeah. Right, right.

THERAPIST: Yeah.

CLIENT: But I also feel like you know, that that kind of ebbs and flows.

THERAPIST: Um-hum.

CLIENT: And it's like recognizing it's like okay, everything has its own cycle, you know.

THERAPIST: True.

CLIENT: And it's like – and it's okay. It's okay that this particular – this particular chapter –

THERAPIST: Um-hum.

CLIENT: Is coming to an end.

THERAPIST: Um-hum.

CLIENT: And it – and I don't stand at the end of this book or chapter of you know, the woodworking piece [00:22:36]

THERAPIST: Um-hum.

CLIENT: In devastation.

THERAPIST: Sure. Okay.

CLIENT: You know it's like, okay, we've done some good things, I've helped foster a couple of young men now to the place where you know, we're trying to work on a contractual relationship where they're going to be buying my tools from me and – [00:22:55]

THERAPIST: So you're transitioning from that.

CLIENT: And you know I'm transitioning out of that and you know, I have – I went from having a class, several classes a day –

THERAPIST: Yeah.

CLIENT: You know to a classroom of one.

THERAPIST: Okay.

CLIENT: You know kind of an apprentice kind of a relationship. And he's clearly ready to fly on his own.

THERAPIST: Yeah.

CLIENT: And that kind of thing. And it's been good. It's a good process, so –

THERAPIST: You sound ready.

CLIENT: Yeah. But for me to be at a place of like going to the – you know going to that cupboard –

THERAPIST: Yeah.

CLIENT: Of like yeah, do I need to make any more art? Yeah, I don't.

THERAPIST: Okay.

CLIENT: It's just not there right now.

THERAPIST: Um-hum.

CLIENT: Maybe later, but right now, like, no. [00:23:30]

THERAPIST: You know I find it interesting that sort of your ease of acceptance of career changes –

CLIENT: Yeah, I look at that and I'm like –

THERAPIST: Which is awesome. And what about – but not more difficult the marital changes.

CLIENT: Yeah. You know I don't feel like – yeah that's a difficult one.

THERAPIST: Yeah.

CLIENT: You know and I guess to be honest you know, to be open enough to be able to say that, and I have to admit that you know, if anything has you know sat with me this week, [00:24:01]

THERAPIST: Yeah.

CLIENT: It's like that you know, it's like I – and maybe that's the best I could do was just to sit with you know, where we were at last week. And that's like –

THERAPIST: That question.

CLIENT: Yeah.

THERAPIST: Do you like your wife?

CLIENT: Yeah. And I just think I've been okay with being able to say, yeah, you know what, maybe it's not a permanent I don't like my wife, but –

THERAPIST: Sure.

CLIENT: You know right now I'm not liking it so much.

THERAPIST: Yeah.

CLIENT: Not liking the relationship. Not liking the where we're at. Not liking – yeah, and being able to say not liking the person so much right now. [00:24:33]

THERAPIST: What's it like to say that out loud?

CLIENT: It's okay. It's okay to be in that place.

THERAPIST: Yeah.

CLIENT: Even though I'm not necessarily sure I have any huge revelation about that, -

THERAPIST: Yeah.

CLIENT: But it's like oh, well, yeah, I can feel that and I'm not going to you know evaporate or anything. (laugh)

THERAPIST: Yeah.

CLIENT: You know.

THERAPIST: Well that's interesting because last week it was tough to kind of consider the question and it sounds like you've sat with it and this week. [00:24:59]

CLIENT: Yeah. Yeah.

THERAPIST: What happened there?

CLIENT: I'm not sure that there's any – you know just – but it's just like sitting with that.

THERAPIST: Yeah, okay.

CLIENT: You know I read a – oh I don't know where it was at – no I heard – ah, it doesn't matter. It's a story about a guy who went off, he was in the Peace Corp and he ended up going over to India and Burma and studying meditation. [00:25:30]

THERAPIST: Okay.

CLIENT: And he ended up in one of these one of these places where he was really trying – he had found this place of like deep bliss and peacefulness and he ended up having to come back to the states.

THERAPIST: Okay. [00:25:49]

CLIENT: So he worked in the states and he was getting some money and he was just dreaming about the whole time of like oh, I just want to get back to that. You know I want to go continue my studies and you know, after a couple of years he made it back. And he got back over there and he started to meditate again. It was like nothing. He – it was just like instead of this being this place of light and blissfulness, he described it as being a place of twisted steel and darkness, you know. [00:26:18]

THERAPIST: Um-hum.

CLIENT: And it was – he was so frustrated that he was like trying to get you know, trying to get back to that place that he had known. And his meditation teacher just – it's like you're missing the point, you've got to let that go.

THERAPIST: Um-hum.

CLIENT: You know.

THERAPIST: What it was.

CLIENT: Yeah. You know it's like you're clinging to you know, that ideal of what you wanted it to be and he ended up, his meditation teacher sent him out to this hut and he recognized that

instead of like – he recognized that really what it was about, that what meditation is about is like coming face to face – [00:27:02]

THERAPIST: Um-hum.

CLIENT: With fear.

THERAPIST: Um-hum.

CLIENT: And just being able to be there with it.

THERAPIST: Um-hum.

CLIENT: And stare it down eye to eye.

THERAPIST: Um-hum.

CLIENT: You know and not in that place of struggle, but just being with it in –

THERAPIST: Like sitting with it.

CLIENT: And he said that that night in the hut he had three candles lit and at some point he recognized in the corner of the hut, there was a snake. [00:27:25]

THERAPIST: Um-hum.

CLIENT: And he's out in the jungle. And he said it was a king cobra.

THERAPIST: Oh God, ugh.

CLIENT: And he said that it was just sitting there staring at him.

THERAPIST: Um-hum.

CLIENT: And he said that they stared at each other –

THERAPIST: Um-hum.

CLIENT: All night long. And in that process he recognized it was just him and the snake and the fear.

THERAPIST: Um-hum.

CLIENT: And by morning you know, he had fallen asleep – no, he had at some point toward the morning as the last candle was going out, he got up and bowed to the snake. [00:28:01]

THERAPIST: Um-hum.

CLIENT: And then went back to a corner and fell asleep and when he woke up the snake was gone. He says so I don't even know if the snake was real –

THERAPIST: Sure.

CLIENT: Or if I had imagined it. But it was that realization of you know coming face to face with the fear. You know and just being with the fear.

THERAPIST: That's a powerful story.

CLIENT: And I think for me it's like you know, there's that sense that we spend so much of our life running away from – [00:28:31]

THERAPIST: Yeah.

CLIENT: The fear.

THERAPIST: Yeah.

CLIENT: You know and I think that – and I won't say that I've always run away from fear because I feel like there's a lot of things that I've just like hey, I'll jump into this, you know.

THERAPIST: Um-hum.

CLIENT: And just go with it and see where it's at. But I recognize that for umm, maybe ten years, I've been running away from you know the fear, or longer. Certainly longer that fear of you know, that ultimate fear of not being liked or – [00:29:01]

THERAPIST: You mean in your marriage or in general?

CLIENT: Well in life, but –

THERAPIST: Yeah.

CLIENT: In the marriage. I mean you know that's all interwoven together.

THERAPIST: Sure.

CLIENT: It's just this huge twisted ball of twine.

THERAPIST: So as you were reading that story –

CLIENT: Um-hum.

THERAPIST: What did you take away from it for yourself?

CLIENT: That I feel like this this path toward you know counseling –

THERAPIST: Um-hum.

CLIENT: The counseling degree and you know having this ability to do you know, some personal work on this – [00:29:33]

THERAPIST: Yeah.

CLIENT: It's recognizing yeah, you know this is, yeah just continuing to be – it's like okay, I'm just sitting with this.

THERAPIST: Yeah.

CLIENT: You know it was kind of that – it was kind of that feeling of like okay, it maybe feels a little uncomfortable –

THERAPIST: Yeah.

CLIENT: It certainly a little scary to be able to say that or to just be with that,

THERAPIST: Yeah.

CLIENT: But it was like – I feel like I'm in that place of just like well, me and the snake, we can just sit here now. [00:29:58]

THERAPIST: Yeah.

CLIENT: You know and I'm okay with that. You know, even though I don't know where that's going to lead –

THERAPIST: Sure.

CLIENT: Even though it's like – it's like the important part right now is just to be with the fear. Just to be with the fear, you know.

THERAPIST: I think it's a powerful thing to do that.

CLIENT: Yeah.

THERAPIST: To be with fear, to be with grief –

CLIENT: Yeah.

THERAPIST: To sit with pain. It takes a kind of courage that I think that we don't talk about, to just sit –

CLIENT: Yeah.

THERAPIST: With it and not do anything with it or about it.

CLIENT: Yeah.

THERAPIST: You know – you know it kind of brings to mind a true thing you know, as you begin to work with your own clients you'll have – you'll realize that people have kids, they don't like their own kids. [00:30:36]

CLIENT: Oh, sure.

THERAPIST: Or their kids are not likable. But not just in an instance or a period of time, continually. You know the world often – love and dislike and love and hate can live in the same house.

CLIENT: Right.

THERAPIST: There are these dichotomies that I imagine you've come across in your you know, meditative work. But you know, the hardest thing is to deal with them within us. [00:31:00]

CLIENT: Um-hum. Oh, yeah.

THERAPIST: Loving someone –

CLIENT: Yeah. (laugh)

THERAPIST: Not liking someone, and getting rid of the should of our life.

CLIENT: Uh-huh.

THERAPIST: That we should be this way or it has to be this way and –

CLIENT: Oh, yeah.

THERAPIST: You know, it sounds like even though you've just kind of been sitting with it, and that is a very powerful thing to do, let it sit there and resonate. It still sounds like over the last week there's been a lot of growth. Because when I said it last week – [00:31:23]

CLIENT: (chuckle)

THERAPIST: You know, it was a tough thing for you to hear.

CLIENT: Um-hum.

THERAPIST: And to imagine what would it mean if it might be true. Right, what does that mean about me? What does it mean about my life, my relationship, you know. And this week you've kind of come back and said you know, I'm just going to sit with it.

CLIENT: Well –

THERAPIST: And maybe – maybe there are parts of it that's true and that's okay.

CLIENT: And I think that you know, in that story, you know, it's like he – you know that's pretty much the story but, just me just kind of you know interjecting into that story, it's like coming to that place of recognizing, you know what, I'm just going to sit here. [00:32:00]

THERAPIST: Um-hum.

CLIENT: You know, if I get bit and I get killed, okay. That's –

THERAPIST: Yeah.

CLIENT: That – but that's one possible scenario here. But the other possible scenario is that you know, we can figure out how to coexist, or –

THERAPIST: Um-hum.

CLIENT: You know the snake ends up becoming a bunny rabbit, you know I –

THERAPIST: (laughing)

CLIENT: (laugh) You know there's – but it's like I know that the intuitive or the instinctual reaction – [00:32:32]

THERAPIST: Um-hum.

CLIENT: To being with the snake was to get the hell out of the hut.

THERAPIST: Sure. Because why would we want to stay in the fight or flight, you know.

CLIENT: Yeah. You know, so now it's like recognizing oh, I can be here. Well, and maybe the snake's not so bad.

THERAPIST: Maybe not.

CLIENT: You know, so.

THERAPIST: Right. And, but I think the idea of choice has to be recognized.

CLIENT: Um-hum.

THERAPIST: You know.

CLIENT: Um-hum.

THERAPIST: You have a choice, you're not – you know as we talked about last week, you're not stuck. And in fact you're sort of really not stuck at all, you're growing pretty rapidly. [00:33:03]

CLIENT: Um-hum, um-hum, um-hum.

THERAPIST: And sort of you know, continuing to, I don't know figuring out who you are is the right word, because I think you have a sense of who you are, a pretty strong sense. But acknowledging, accepting, embracing those parts of yourself, all of them maybe.

CLIENT: Um-hum.

THERAPIST: I mean is there any accuracy in that statement?

CLIENT: Yeah. You know and if there's you know, in terms of what's been going on this week, well the whole week has been steeped in Adlerian [ph] theory. [00:33:29]

THERAPIST: (laugh) How do you like Adler?

CLIENT: I'm – I'm going with it for now.

THERAPIST: Okay.

CLIENT: You know, I'm feeling like, well who knows where I'm at a year from now. But as I'm looking at all the theories, you know, I thought originally going into this you know theories class that I would probably be leaning most towards Ragerian [ph]. [00:33:52]

THERAPIST: Okay.

CLIENT: And there's certainly a lot of things. There's a lot of things about all of the theories –

THERAPIST: Sure.

CLIENT: That you know, that I could pull from this. But I think what I find – ultimately what I found that I could embrace the most in Adler was that sense of holistic – [00:34:08]

THERAPIST: Um-hum.

CLIENT: The holistic person.

THERAPIST: Um-hum.

CLIENT: And you know and I kind of – are you familiar with Meyers and Sweeney's wholeness, or wellness model?

THERAPIST: No, I don't think I am.

CLIENT: They took Adler's theory – [00:34:30]

THERAPIST: Yeah.

CLIENT: And made this – their book, their seminal book was called "Counseling for Wellness".

THERAPIST: Okay.

CLIENT: So they're taking you know, kind of the major concepts from Adler –

THERAPIST: Um-hum.

CLIENT: And just putting it into this model where it's like to be a well person, you know you have to have all of these concepts in balance.

THERAPIST: Okay.

CLIENT: You know they put spirituality at the center of their model. And then it's you know the physical part –

THERAPIST: Um-hum.

CLIENT: You know being you know, in good physical shape, and relationship, and work, [00:35:01]

THERAPIST: Um-hum.

CLIENT: And leisure and there's one other. But they all kind of you know – and then they've done like 30 years' worth of empirical research –

THERAPIST: Okay.

CLIENT: In terms of like coming up with an instrument that rates –

THERAPIST: Sure.

CLIENT: You know where you fall on this. Blah, blah, blah – you don't need to hear all this. But you know, I'm looking at that and thinking about well, you know maybe, you know my physical side is okay right now. [00:35:30]

THERAPIST: Um-hum.

CLIENT: You know but it's like okay, this relationship side, not so. You know so looking at the whole person, looking at the wellness of –

THERAPIST: Right.

CLIENT: The whole person, it's just recognizing that you know, need to work on some areas because some areas –

THERAPIST: Yeah. Well I'm sure it's you know, difficult to be in 100 percent balance, 100 percent of the time.

CLIENT: Right. Right, yes. So it's it's always an evaluative type of thing. and it's like recognizing okay, [00:35:59]

THERAPIST: You think that's the biggest part that's out of balance for you, the relational part?

CLIENT: Well it's a big part.

THERAPIST: Okay.

CLIENT: It's a big part because I think that like to me, or for me, and it's connected to our recognizing that you know the social piece is also out of skew.

THERAPIST: Um-hum.

CLIENT: And it's like, hum, okay well how many really close friends do I have? Hum.

THERAPIST: Why do you think that is?

CLIENT: I don't know. That's a good question. I mean I'm hearing some, you know past tape that's playing that says well if you want to be a friend – or if you want a friend, you've got to be a friend. And yeah. I think that you know, and I think that there's you know, I've read and I think that it's probably pretty common that men find – [00:36:56]

THERAPIST: Um-hum.

CLIENT: Intimacy you know, married men find intimacy in their spouse and not so much the other way around. I think you may have even said that too.

THERAPIST: Um-hum.

CLIENT: But you know it all clicked you know, it's like (deep breath) . So I'm like okay, if I've got this – if I've got this story that says that the only place that I can – the only place, now and I recognized that's a self-imposed story, but the only place I can find intimacy is in my marriage relationship, and that's not going so well, then not so much intimacy. And it's like okay, how do I foster that outside of the marriage relationship – [00:37:39]

THERAPIST: Um-hum.

CLIENT: Without the metaphor was how do I do that without you know, I've got this whole image of Wylie Coyote, have I told you this one?

THERAPIST: I think so. Refresh my memory.

CLIENT: Just (chuckle) the picture of Wylie Coyote you know standing at the plunger of a dynamite charge. [00:38:01]

THERAPIST: Yeah, yeah.

CLIENT: Only he's like just right in front of the big pile of dynamite.

THERAPIST: Yeah.

CLIENT: You know like without blowing up my life, how do I do this without blowing up my life.

THERAPIST: And do you mean by blowing up your life, sort of seeking intimacy from another woman? Is that what you mean?

CLIENT: Well, yeah. It's like I have always had the ability, I think to have closer relationships with females –

THERAPIST: Yeah.

CLIENT: Then men.

THERAPIST: Yeah.

CLIENT: And it turns out the closest male relationship that I've had – [00:38:29]

THERAPIST: Yeah.

CLIENT: Over the last ten years –

THERAPIST: That they were with Italy, yeah.

CLIENT: is Italy. (laugh)

THERAPIST: Yeah.

CLIENT: I'm like oh, okay, well that's why we had such a close relationship. (laugh) [00:38:37]

THERAPIST: Yeah.

CLIENT: So I don't know, is it just that men in general don't know how to have intimate relationships? I don't know.

THERAPIST: It might mean that intimacy is defined differently amongst two heterosexual men. But one of the things that becomes clear is that that's what you're wanting, needing, craving. [00:38:59]

CLIENT: Oh, yeah.

THERAPIST: Because we all do.

CLIENT: Yeah.

THERAPIST: So, you know –

CLIENT: Yeah.

THERAPIST: Maybe we next need to look at where you can get that need met. Because it's a real human need.

CLIENT: Um-hum.

THERAPIST: It's – it's you know to feel fully supported and you know accepted –

CLIENT: Right.

THERAPIST: You know, you have to get that need met.

CLIENT: Oh, yeah.

THERAPIST: It's critically important.

CLIENT: Yeah, I – yeah. I recognize that you know, and I know that there's part of me that feels like well, some of that might need to come within too. [00:39:33]

THERAPIST: Um-hum. Explain.

CLIENT: Well you know it's like, if I truly felt that sense of self acceptance –

THERAPIST: Um-hum.

CLIENT: Would I need it so much from other buddy – other people.

THERAPIST: I think that's a good – a good question. But are you talking about – I mean I guess intimacy does imply some acceptance. But you know –

CLIENT: Yeah.

THERAPIST: As opposed to you know, we've talked about needing to be liked, that's one thing. [00:40:01]

CLIENT: Um-hum.

THERAPIST: But the need for emotional intimacy –

CLIENT: Um-hum.

THERAPIST: To share your thoughts and emotions –

CLIENT: Deepest thoughts.

THERAPIST: Yeah.

CLIENT: And emotion, yeah.

THERAPIST: Even if you fully accept yourself, which all of us I think work to do.

CLIENT: Right.

THERAPIST: You might still have that need –

CLIENT: Yeah.

THERAPIST: Because it's not the same. It – you know they feed from one another. But even if you fully accepted yourself off in the desert somewhere, [00:40:29]

CLIENT: Yeah.

THERAPIST: You would still have a need probably to connect with others and have close relationships with others. That's part of who you are is important.

CLIENT: Yeah I feel like there's probably you know, it's like wow, is there really anybody on the planet that I feel like I can go to to feel that sense of just like you know, unconditional acceptance. [00:40:53]

THERAPIST: And?

CLIENT: Not right now.

THERAPIST: How is that to say?

CLIENT: You know I've been with that.

THERAPIST: Yeah.

CLIENT: You know and it's a recognition. It's like oh, well here's a condition –

THERAPIST: Yeah.

CLIENT: You know and I think that I've gotten to that place of like recognizing oh, all right, this is loneliness.

THERAPIST: Yeah.

CLIENT: You know it's kind of like the snake in the room. Can I just be with the loneliness right now? You know and it's like I'm not going to run from you.

THERAPIST: Um-hum.

CLIENT: You know, this is loneliness. This is an issue that I'm going to deal with.

THERAPIST: Yeah. And loneliness is -

CLIENT: Yeah.

THERAPIST: Really hard. I mean we don't often talk about loneliness and I think – [00:41:33]

CLIENT: Yeah.

THERAPIST: That sometimes –

CLIENT: Yeah.

THERAPIST: Loneliness is deeply painful –

CLIENT: Um-hum.

THERAPIST: But in some ways it's almost mockingly more painful when you're married, because it –

CLIENT: Oh, yeah. You're recognize it's like, you know often times –

THERAPIST: Yeah.

CLIENT: I said, well whoever came up with this – this particular social arrangement and this wasn't very – this – I'm not liking it so much. (laugh)

THERAPIST: You know you laugh, but what is it that you feel when you think about your loneliness? [00:42:01]

CLIENT: Well it's – it's being in a position of being stuck.

THERAPIST: Okay.

CLIENT: You know and I think that that's – you know that's that metaphor that maybe I early – I used early on.

THERAPIST: Yeah.

CLIENT: That sense of like whatever quicksand or not quicksand, but you're just kind of mired, it's like I'm stuck, I don't know how to move.

THERAPIST: Yeah.

CLIENT: You know it's like which way can I move?

THERAPIST: So you have in one area of your life all of this growth, and the other you know – [00:42:32]

CLIENT: Um-hum.

THERAPIST: Career wise, recognizing more skills.

CLIENT: Um-hum.

THERAPIST: And the other sort of deep sense of loneliness. And loneliness is –

CLIENT: Um-hum.

THERAPIST: Just painful. Just painful.

CLIENT: Yeah. Yeah it is. And so you know, you instinctually –

THERAPIST: Um-hum.

CLIENT: You know over the past you do things to to run away from that.

THERAPIST: Um-hum.

CLIENT: To cover it up and not feel it. So let's get busier with work, let's go – let's you know, do something else, whatever, but let's cover up the loneliness. [00:43:04]

THERAPIST: Yeah.

CLIENT: You know. And prior – like I really haven't – I gave up drinking when I gave up the you know, when my stomach went – when I had my stomach problems. But you know, having two or three gin and tonics at night –

THERAPIST: Um-hum.

CLIENT: Yeah, that kind of – that of puts the salve on things, you know.

THERAPIST: That numbs it.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: Yeah so giving all of that up just kind of brings it you know, [00:43:32]

THERAPIST: Yeah.

CLIENT: A little bit more raw in your face. So.

THERAPIST: What's it like to talk about?

CLIENT: Hum. No I recognize it you know, that that's the issue.

THERAPIST: Um-hum.

CLIENT: Or that is an issue.

THERAPIST: Yeah.

CLIENT: You know it's a tough issue. Hum. But the little story of the snake, or the metaphor of the snake is a helpful one right now. It's like okay. [00:44:01]

THERAPIST: So maybe it's not about fear for you, maybe it's the snake is loneliness.

CLIENT: (big sigh)

THERAPIST: Facing whatever.

CLIENT: Yeah. You know there's certainly fear.

THERAPIST: Yeah.

CLIENT: There's fear in figuring out how to negotiate –

THERAPIST: Um-hum.

CLIENT: Or work through this –

THERAPIST: Um-hum.

CLIENT: Relationship in order to be able to deal with –

THERAPIST: Yeah.

CLIENT: You know the loneliness, the you know, the disappointment, the whatever. You know those kind of things that I'm feeling. It's just like, okay. [00:44:34]

THERAPIST: I think some of it might be about your working to build connections with other people.

CLIENT: Um-hum.

THERAPIST: I think we can be fed in different ways by different people.

CLIENT: Yeah.

THERAPIST: It may not be you know –

CLIENT: Yeah.

THERAPIST: Deeply emotionally, intimate, but each – each sort of relationship, whether it's superficial and kind –

CLIENT: Yeah.

THERAPIST: Of on the outer circle. Or ones we build on the inner circle, might help with some of the loneliness as opposed to kind of looking towards your wife. Which is – [00:45:02]

CLIENT: Right.

THERAPIST: Not satisfactory right now.

CLIENT: Right. Well and certainly the you know the program here, you know –

THERAPIST: Yeah.

CLIENT: Developing relationships here.

THERAPIST: Yeah.

CLIENT: And it's like you know initially you know, the first couple of semesters you don't know anybody.

THERAPIST: Right.

CLIENT: And so you're not making relationships now. We're making a few more relationship and it's like oh, okay, there's some camaraderie going on here. It's like okay, this is –

THERAPIST: Yeah.

CLIENT: This is life giving.

THERAPIST: Yeah.

CLIENT: You know this is good.

THERAPIST: The G-issue actually is a really good place for that. It's hard – I think the older you get the harder it is to build connections with people – [00:45:33]

CLIENT: Um-hum.

THERAPIST: Because you're sort of – people are established –

CLIENT: Yeah.

THERAPIST: Doing what they're doing, but G-issue given its non-traditional status –

CLIENT: Yeah.

THERAPIST: At least at the moment, is a place that you get another opportunity to do that.

CLIENT: Yeah.

THERAPIST: So I'm glad to hear that you're starting to do that.

CLIENT: No, it's – it's there and I – and I see that –

THERAPIST: Yeah.

CLIENT: And I get that. Darn it I just had a thought there that went away. It will come back.
(pause) Hum. I know it was related to like kind of that sense of dumping all of those needs for –
[00:46:19]

THERAPIST: Yeah.

CLIENT: Intimacy on one person. It's like yeah, you know that's really not very fair you know, to the other person.

THERAPIST: Well, (sigh)

CLIENT: And -

THERAPIST: You know and kind of as we end today, I'll have you think about – I don't know if that's what you did. [00:46:34]

CLIENT: Oh I don't think I did either.

THERAPIST: Yeah. I don't think that that's what you did. But you had an expectation for –

CLIENT: But maybe for me to have the expectation that all of my intimacy needs should be met by one person is an unfair, or an unrealistic –

THERAPIST: Or, I think –

CLIENT: Expectation.

THERAPIST: I think we have to flush that out a bit. Maybe you just want some.

CLIENT: (laugh) I'll take anything.

THERAPIST: Good. Well yeah.

CLIENT: What do you got? (laughing)

THERAPIST: Yeah. So maybe – maybe you just want some. I don't know about all. [00:47:01]

CLIENT: Yeah. Yeah, yeah, yeah.

THERAPIST: So are we on for next week?

CLIENT: Sure.

THERAPIST: Okay.

CLIENT: I think. Let's see what is next week?

THERAPIST: No, not next week, it's Thanksgiving.

CLIENT: No, it's Thanksgiving. [00:47:10]

END TRANSCRIPT

BEGIN TRANSCRIPT:

(laughter and inaudible conversation)

CLIENT: No turkey day was – we drove to my parents in (inaudible at 00:00:17) which is over near Dunlap.

THERAPIST: Okay.

CLIENT: Just—I call it Carmi.

THERAPIST: (laughs) (inaudible at 00:00:27) I don't think I have heard of (inaudible). Were they hit by any of the kind of tornado stuff?

CLIENT: Five miles away.

THERAPIST: Oh my goodness.

CLIENT: I actually had a cousin – she and her husband and their newborn made it to the basement but the house was wiped out. And my little brother – younger brother – who was on his way to an auto parts store and is rolling into the town as the tornado was coming through.
[00:01:00]

THERAPIST: Oh!

CLIENT: And he couldn't decide which way it was coming.

THERAPIST: Yeah.

CLIENT: He ended up turning and the tornado chased him. This tornado was travelling at sixty miles an hour.

THERAPIST: Oh goodness gracious.

CLIENT: He was flying down the highway at like a hundred and ten trying to out run it.

THERAPIST: Trying to get away from it.

CLIENT: And so it was interesting. So we had some stories.

THERAPIST: I bet!

CLIENT: Stories to tell.

THERAPIST: Everyone is okay?

CLIENT: Yeah. Yeah you know with the amount of damage that happened in that little town there was only like one death I think. That was related to the tornado. So. Yeah. So.

THERAPIST: How is it for you when you get together with your family?

CLIENT: Yeah I was trying to pay attention to that. I think what I've kind of recognized is that over the years it's gotten more comfortable. [00:01:55]

THERAPIST: Okay.

CLIENT: Now it's expanding so now it's like my siblings' children are – they're all the ages –. Probably the youngest right now is like grade school. So my younger sister, who is eleven years younger than me, her youngest is still in grade school but the vast majority of kids are all kind of clumped together in that college age.

THERAPIST: Yeah.

CLIENT: And moving on. Some of them are starting to bring home boyfriend/girlfriend kind of thing. So. Yeah it's quite a little bit less drama.

THERAPIST: Okay.

CLIENT: And those kind of things. So I was just noting that quality of it. You know, for the day. So yeah. So I was trying to be mindful of what was going on in terms of like quality of conversation. You know, those kind of things that were happening. It was interesting that— I have three younger brothers. And we're all within about a year, year and a half apart. [00:03:29]

THERAPIST: Mm-hmm.

CLIENT: In terms of age. So we were just kind of clustered together. And at one point it became apparent that we're all in the same boat. Even though we weren't like having that conversation, it was enough bits of pieces of conversation where it's like we're all in the same boat.

THERAPIST: Explain all in the same boat.

CLIENT: Well you know just that sense of like we're middle age.

THERAPIST: Yeah.

CLIENT: Kids are growing up and moving out. And we're finding ourselves in relationships that are like, "Yeah." We're just looking at each other. It's like the words don't even really need to be said or something.

THERAPIST: That's interesting!

CLIENT: Yeah.

THERAPIST: Was that comforting for you? Or –

CLIENT: No I don't know about comforting. You know other – I don't know. Does one feel comforted when – it's not this bad, I'm just saying – when you're not the only guy in line for the gallows? (laughing) [00:04:38]

THERAPIST: Well at least you're not alone!

CLIENT: Yeah exactly. (laughing)

THERAPIST: But what sort of brought you to that place? Because I don't get the impression that–

CLIENT: Oh my younger brother – my youngest brother has a relationship which is really pretty difficult. His wife was diagnosed after they were married with bipolar.

THERAPIST: Okay.

CLIENT: And it seemed like – when they had kids that seemed to really exasperate that.

THERAPIST: Mm-hmm.

CLIENT: And she's really been – she's got substance abuse issues and bipolar.

THERAPIST: Okay.

CLIENT: Yeah. And it's been a couple of years since we've seen her at any family functions. She just doesn't –

THERAPIST: And was she there this time? [00:05:28]

CLIENT: No.

THERAPIST: Okay.

CLIENT: And then he's got two – twins and they are probably twenty, twenty-one years old.

THERAPIST: Mm-hmm.

CLIENT: And they had really incredibly good grades. They were like top ten of the students in high school.

THERAPIST: Yeah.

CLIENT: But – I think they even had potential scholarships to different colleges but they sort of – they (inaudible at 00:06:01). They're really pretty tight. They hang together. (sighs) And one of them is really into tattoos and piercings and it's almost – my brother. You can sort of see that like one of twins is kind of following Mom's path. [00:06:27]

THERAPIST: Mm-hmm.

CLIENT: And it's probably not going to be really surprising if he ends up bipolar. And the other one – maybe not so much. So but I think he's – my youngest brother – is feeling a lot of depression. You could really see it on his face. So it was just –

THERAPIST: Oh would it be something you would consider building a connection with him around? Or –

CLIENT: I think we've tried. I think of all my brothers that he and I probably are the least – we've had the least connection over the years. But we've had a couple of conversations in regards to that relationship and his relationship with his wife. Yeah I think there is just sort of this sense of like he's not sure what to do. But I think that – you know I started – he was using words like “divorce” a little bit. Maybe not divorce but – [00:07:35]

THERAPIST: Okay.

CLIENT: Yeah or indicating, “I don't know how much longer this is going to last.” Kind of thing. (sighs)

THERAPIST: Okay.

CLIENT: Yeah. So as much as he was open to that I was trying to start a couple of different conversations with him. Whether or not it was – the fact that we were in a relatively crowded space.

THERAPIST: Right. Exactly.

CLIENT: You're not going to have a really intimate conversation. So I felt was it that or he just didn't want to go there and wasn't really sure about that.

THERAPIST: Yeah. But we've talked about it's hard to make connections for you. Especially connections with other men. [00:08:24]

CLIENT: Mm.

THERAPIST: And I wonder if – and this may not be the case because sometimes when a relationship is kind of set sometimes it's kind of set. But other times not. And I wonder – as you

kind of look around the table at your brothers who you feel are in similar places and you kind of get it – that there are so few people who get it.

CLIENT: Mm-hmm.

THERAPIST: You know because from the outside most people are healthy and everybody is doing what they're doing. But on the inside there is a lot of pain happening.

CLIENT: Yeah.

THERAPIST: Because this did not turn out the way –

CLIENT: (chuckling)

THERAPIST: the way that you wanted it to turn out. Not just you but it sounds like your brother and (inaudible at 00:09:04) as well.

CLIENT: Yeah it could be. Yeah it could be.

THERAPIST: What would it be like for you to try to build a bridge there?

CLIENT: Yeah I think that that's really – yeah I don't see that as –. The only problem is just the geographical distance and the time kind of thing. [00:09:28]

THERAPIST: Yeah.

CLIENT: I have one younger brother that I'm probably a little bit closer – is that your phone? Oh okay – that we've been able to sort of maintain a kind of relationship but the other two not at much. So I'm still feeling like that is a relationship with my brother Bill that I've wanted to keep going and keep expanding.

THERAPIST: Yeah.

CLIENT: Yeah so not that I'm opposed to doing that with any of them it's just whether or not there is a reciprocal –.

THERAPIST: Right.

CLIENT: – need or desire there.

THERAPIST: And what happens if let's say you make an overture and there is not, then what?

CLIENT: You know I think it's okay.

THERAPIST: And what happens if there is?

CLIENT: I'm okay with that too. (inaudible) [00:10:29]

THERAPIST: Right.

CLIENT: Yeah.

THERAPIST: So there is not a whole lot of risk.

CLIENT: No. No there is not. No and I don't necessarily feel anxious about any of that.

THERAPIST: Yeah.

CLIENT: So in recognizing that we uniquely share things in common that I don't share in common with anybody else on the planet.

THERAPIST: True.

CLIENT: So yeah.

THERAPIST: Just something to think about because it strikes me as a bit of a parallel process.

CLIENT: Mm.

THERAPIST: And you're born into siblings and it doesn't mean you'll be close. It just doesn't. But the parallel processes – you're having this common experience with your brothers. At least from the outside. Looking outside in.

CLIENT: Mm.

THERAPIST: And you're shut out of building a connection, right? And you live with your wife and you're shut out of building a connection.

CLIENT: Yeah. You know – (sigh). You know I do recognize that the common – a common factor in that is the me part of that. [00:11:38]

THERAPIST: Mm-hmm.

CLIENT: And it's like, well really looking at what it is about me that I can change to make those connections happen a little bit better.

THERAPIST: Mm-hmm.

CLIENT: It's like clearly we can do everything we can. We can stand on our heads and jump up and down or whatever.

THERAPIST: Mm-hmm.

CLIENT: And yeah. Sometimes you're just never going to get – you're just not going to get in.

THERAPIST: Mm-hmm. Mm-hmm.

CLIENT: And it's like I'm good with that. But I really want to make sure that I'm being honest with myself in terms of am I really open to this. Am I really or is it – I don't know. It is the kind of thing where I even really tried or –

THERAPIST: Okay.

CLIENT: or you open the door just enough to know. [00:12:38]

THERAPIST: Sure. So what did you come up with when you thought about that?

CLIENT: Well I had an experience shortly after – you know part of it is I recognize that – I think the last time we were talking I was kind of mentioning this metaphor that I was sitting with which was just the snake in the hut.

THERAPIST: That's right.

CLIENT: You remember that metaphor so I've kind of stayed with that. It's been there for me. I recognized that over the holiday, when my kids were at home, I was starting to tap into some feelings that I hadn't had for a while. [00:13:26]

THERAPIST: Mm-hmm.

CLIENT: It was like okay. So this is the first year perhaps in like about two or three where we've been at this house.

THERAPIST: Mm-hmm. Okay. That's right.

CLIENT: And it's – there was like decorating going on for the holidays and that kind of stuff. And it's like I recognized that in the past that was just kind of this place of like kicking into kind of a depression. I don't know if it was a seasonal kind of thing. That was a pattern. I know that that pattern –

THERAPIST: Where you would get kind of depressed from the holidays?

CLIENT: Kind of depressed and whatever.

THERAPIST: Yeah.

CLIENT: And I'm not really sure that I ever had any resolve to that or whatever. But it was like okay I recognize that there is that kind of thing going on.

THERAPIST: Did that happen to you this time as well?

CLIENT: Yeah. Yeah. It was – I was in a slightly different place in that I was able to kind of step aside from it and be able to observe what was happening.

THERAPIST: Mm-hmm. What was happening?

CLIENT: Mm. I'm not necessarily sure I have – other than I knew that there was some depression. I knew that there was some frustration. The sensation or those feelings of loneliness. Kind of being outside of what's going on. [00:14:52]

THERAPIST: Mm-hmm.

CLIENT: Feelings.

THERAPIST: So you felt depressed and lonely. Sad.

CLIENT: Yeah. Yeah. And so I think that I kind of got into that place where I was just kind of quiet.

THERAPIST: Mm-hmm.

CLIENT: Kind of like whatever. Not jovial. Meh.

THERAPIST: Yeah?

CLIENT: Those kind of things. So I recognized that the family was doing its thing. Like "What's wrong Dad? What's going on here? What are you feeling?" So that's from the kids.

THERAPIST: Okay.

CLIENT: And I recognized that that mm. Okay so those natural tendencies. It's like okay so this is how I deal with that. It's like, "Oh I'm fine. Oh I'm just a little tired." I'm a little–

THERAPIST: Mm-hmm.

CLIENT: It's like –

THERAPIST: Yeah.

CLIENT: You're not addressing the issue. It's like –

THERAPIST: How did you want to address the issue?

CLIENT: I recognized that point early on that it was like, "Mm." I was able to see what was happening but it was too frightening to think about how to change that. [00:16:07]

THERAPIST: You know what's interesting in the way that you describe feelings is you kind of describe them external to yourself. There was depression. There was loneliness. Instead of I felt depressed and lonely.

CLIENT: Well that's a conscious thing that's going on.

THERAPIST: Tell me about it.

CLIENT: It's part of – it's kind of that, part of my meditation practice.

THERAPIST: All right.

CLIENT: To be able to see what's happening.

THERAPIST: Okay.

CLIENT: You know so it's like to be able to at least name the feeling.

THERAPIST: Right.

CLIENT: Before it was kind of like um, you're in this funk and it's just like all you know is that it's like whatever, this God awful place, this feeling. And it's like I don't want to be here and it's that sense of you're just running away as fast as you can. It's almost like you're a person on fire. You're running away. And running away isn't helping anything. It's just fanning the flames. [00:17:13]

THERAPIST: Right.

CLIENT: So the practice is more of like can you turn into it and just observe what's happening. So that's the practice that I feel I'm trying to –

THERAPIST: Okay.

CLIENT: So when I say that's – so for me it's kind of a new place.

THERAPIST: Okay.

CLIENT: Of being able to say okay this is what's going on right now. Can you see –

THERAPIST: And what would it be like to sort of actively feel it in the moment?

CLIENT: And I really was trying to be there with that which was the metaphor of being in the hut.

THERAPIST: Yes.

CLIENT: Can you just be with the feeling right now?

THERAPIST: And?

CLIENT: So I recognized in being with the feeling that it's manifesting itself in bodily ways
–[00:18:05]

THERAPIST: Yes. Right.

CLIENT: so I'm kind of like this depressed and sad and lonely guy.

THERAPIST: And why do you think that was the case?

CLIENT: (sighs) Um, triggers. Things that were going on.

THERAPIST: Like?

CLIENT: Maybe the triggers of hauling down the holiday stuff or whatever.

THERAPIST: Mm-hmm.

CLIENT: Why is that? I'm not a hundred percent sure.

THERAPIST: Is this sort of the picture of who you would want your family to be? Sometimes I think people – a lot of times people really struggle with the holidays because it's sort of what I want it to be like.

CLIENT: Mm-hmm.

THERAPIST: What it is. Or the fact that your kids are older so things are changing. Is it I'm lonely or is it sort of grief or loss of times past? What do you think it is? [00:19:00]

CLIENT: (sighs) I actually had this feeling or what I was sensing was that – my kids maybe not as much – but my wife was really in this place of trying to hang onto or recreate that that what has been kind of thing.

THERAPIST: All right.

CLIENT: You know? And there was this – and I was just like, “You know what? It’s a new time. It’s a new space.” Whatever.

THERAPIST: Mm-hmm.

CLIENT: Things and then there was kind of this rigid sense of things that have to happen. And we’re going to do this. And –

THERAPIST: Did that make you angry?

CLIENT: Yeah.

THERAPIST: Yeah. Okay.

CLIENT: Yeah there was anger in that. And then it doesn’t take long before you jump to it’s like, aw, there is really no connection here in terms of – we’re not discussing any of this. It’s just –

THERAPIST: Tell me what made you angry. [00:20:08]

CLIENT: Mm. Yeah I don’t know. Probably that sense of is it anger or is it loneliness? I’m not a hundred percent sure. It’s just like –

THERAPIST: There was some anger at her.

CLIENT: Yeah. It’s like – and yeah. Okay so just staying with the anger and trying not to rationalize it but just – (sighs). Anger at that inability. And another part of me is trying to (laughs) fight myself from saying this but it’s like “Look just let it go. Let go of trying to be ten years old or whatever. And trying to –” And there is that sense of just trying to recreate. [00:21:18]

THERAPIST: And why does that make you angry?

CLIENT: Um, because it feels like she’s stuck.

THERAPIST: Okay.

CLIENT: She is stuck in a place, in a time or whatever.

THERAPIST: What’s the place?

CLIENT: (sighs) You know it's always the past.

THERAPIST: Mm-hmm.

CLIENT: Is it one particular place? I'm not a hundred percent sure about that but it's certainly with her mom. And with her elderly aunts and uncles. And it – maybe when she was in high school. (inaudible) [00:21:58]

THERAPIST: And do you see why this is connected to the loneliness?

CLIENT: Yeah. Because she's there and I'm here.

THERAPIST: That's right. Because it's sort of like all of these things come together. Because as long as she's stuck in a place she can't see you or be with you.

CLIENT: Mm-hmm.

THERAPIST: Because she's stuck back there.

CLIENT: Mm-hmm.

THERAPIST: Right? Trying to force it. To make it be what it's not.

CLIENT: Mm-hmm.

THERAPIST: Right? And my guess is it probably pisses you off on a very deep level because while she's stuck doing what she's doing, absorbed in that experience, she's left you lonely in yours.

CLIENT: Yeah. You know there is this sense of when I was closer to that time and some of those people were still alive –

THERAPIST: Yeah.

CLIENT: it was like we could be together. But as those people died off and life kept moving on –

THERAPIST: Right. She stayed there and you moved. [00:22:58]

CLIENT: Yeah.

THERAPIST: And is that where one of the breaks, if you look at the timeline, that happened in the relationship? Is that when the force field came up?

CLIENT: Oh yeah. And with each successive death it just –

THERAPIST: Retreated farther and farther. And so that's why it made you angry.

CLIENT: Yeah. And I guess I never really thought about the anger part because I don't think that I allow myself to go there. Because it's like then you've got the issue of "really you're going to be angry at somebody who has had all this loss in their life?" And blah, blah, blah.

THERAPIST: I find it interesting how you will talk yourself out of your feelings.

CLIENT: I know. I know! I know and I was really fighting it. Just to sit with it.

THERAPIST: And I saw that. But it also makes you more angry. Before anyone else has a chance to dismiss your feelings, you dismiss them very quickly.

CLIENT: Yeah I know. I know.

THERAPIST: But they're very justified. Feelings just are. [00:23:54]

CLIENT: Yeah.

THERAPIST: They don't have – and as you were talking earlier about observing the feeling, you can't observe it and be with it at the same time.

CLIENT: (laughing)

THERAPIST: You know we talk about being – as you learn in your group class, the participant observer. People don't do that well.

CLIENT: Mm-hmm.

THERAPIST: You can't observe it from a distance and be in it feeling it.

CLIENT: Mm-hmm.

THERAPIST: So and if you are in the hut with the snake –

CLIENT: Yeah.

THERAPIST: to me it's about being with it.

CLIENT: That's the fear. Yeah. Being with the fear. Being with the pain. Being with the anger.

THERAPIST: Being with your own – your feelings are valid.

CLIENT: Mm-hmm.

THERAPIST: In some ways they're the essence of being human. The ability to feel, connect. Right? Attachment loss causes loneliness.

CLIENT: Yeah.

THERAPIST: And you are angry at her. Sad at what will not be.

CLIENT: Yeah.

THERAPIST: Pissed that she's so rigid and that she doesn't see you. And I've thought about this. This idea of not being touched. Tell me. [00:25:00]

CLIENT: Yeah. No. Yeah it's like –

THERAPIST: That's the part, my guess is, where loneliness is really not being touched. To be not touched could be a very painful experience.

CLIENT: Mm-hmm.

THERAPIST: Can you talk about that a little bit?

CLIENT: No I think that – it's one of those things like I grew up in a family where physical affection was not shown.

THERAPIST: Right.

CLIENT: And it wasn't until maybe my youngest sister, my little sister, that my folks went to some workshop or something about parenting –

THERAPIST: After the three boys are out.

CLIENT: Four.

THERAPIST: Right. Four boys.

CLIENT: Yeah then they were starting to warm up to the idea of hugging. And it wasn't until my brother, one of my brothers, brought home his fiancée who was just like, "We all hug. This is what normal people do." And she forced the family to hug each other kind of thing. And it's become a more commonplace occurrence. My mother and I still don't have that relationship. [00:26:26]

THERAPIST: Where you hug?

CLIENT: It's gotten to this place of like – it's almost is this kind of half hug kind of a thing.

THERAPIST: Yeah.

CLIENT: Interestingly my dad is more comfortable with hugging. But my mom is like – and she. We've tried. We've experimented a couple of times. Not you know –

THERAPIST: How does that feel for you?

CLIENT: But to be able to say "I love you" on either side.

THERAPIST: Okay. And what about you and your kids?

CLIENT: Oh I think that we've been very intentional about showing affection and being able to say I love you and things like that with the kids. [00:27:12]

THERAPIST: Mm-hmm.

CLIENT: But it's just really interesting that it's not there with my mom. And I'm like, "Wow, would you look at that? Would you look at the relationship?" Wow, wow.

THERAPIST: The parallels with the wife.

CLIENT: Wow would you look at that? (laughing)

THERAPIST: When you think about not being touched not only sexually, but non-sexually as well, how do you feel about that?

CLIENT: Well it's – you know you read those stories about infant gorillas dying or whatever. Or even babies.

THERAPIST: Mm-hmm.

CLIENT: Because of lack of human interaction or touch. Or whatever. And it's like, "Yeah I get that."

THERAPIST: We need it.

CLIENT: Yeah. (laughing)

THERAPIST: And in some ways if you read some of the literature on intimacy and male intimacy, men need it even more. Especially heterosexual men because they don't get touched except by their wives. [00:28:10]

CLIENT: Yeah.

THERAPIST: Right. Heterosexual married men I should say.

CLIENT: Yeah.

THERAPIST: Gay men are better at it. They can touch each other. Right? But heterosexual men there is this stigma of being gay. And so women can touch each other.

CLIENT: Right.

THERAPIST: And so this is one of the reasons why sex for married, heterosexual men becomes even more important because the only place they get touched and physically validated is – you know.

CLIENT: Yeah. Yeah. Yeah. So there you go.

THERAPIST: And that's been missing for a while.

CLIENT: Oh yeah.

THERAPIST: Yeah. Which is one of the reasons why some of the loneliness is justified.

CLIENT: Yeah. Yeah. And I think that even when touch and sexuality was a part of the relationship, there was even then – and I don't know how far back we have to go. Maybe it was there from the beginning. [00:29:05]

THERAPIST: Mm-hmm.

CLIENT: I'm not a hundred percent sure. Not – and it was clearly a continuum or – but there was just that sense of –. At some point you begin to recognize that it's like this person doesn't want you to touch her.

THERAPIST: Mm-hmm.

CLIENT: Or there is this uncomfortableness. And it's like what's that all about?

THERAPIST: Can you tell me a little bit about that?

CLIENT: Mm. Um, I don't know. Um. (pause at 00:29:43 until 00:29:50) Yeah I think that it just became kind of this unspoken rule or unspoken condition that affection just sort of became a – physical affection of any kind – really just became uncomfortable. (inaudible) [00:30:20]

THERAPIST: And uncomfortable on her part? On your part? Or well obviously if she's uncomfortable then you'll be uncomfortable.

CLIENT: Yeah. I think for me it's like whether it was – and there was certainly a kind of a spoken discussion or a verbal discussion about no more sex. Right now.

THERAPIST: How did that go?

CLIENT: Um, you know it was I think the wording was something like, "I just need you not to touch me" or something like "We need not do this for awhile." Or something like that. [00:31:15]

THERAPIST: Okay.

CLIENT: And I was just like, "Okay." And it was kind of like –

THERAPIST: And you felt what about it?

CLIENT: I felt like at that point I was trying to be respectful.

THERAPIST: Right.

CLIENT: And it was like, "Okay what's going on here?" And it's like well automatically when you're in that situation – when I'm in that situation—and it's like, "Okay."

THERAPIST: Yes.

CLIENT: (chuckles) You know there are all kinds of messages about "So you're going to be guy who is going to push this now? How insensitive is that?" (laughs) It's like –

THERAPIST: Well okay maybe it might have been insensitive at that very moment but then we got to seven years.

CLIENT: Yeah. I know. I know.

THERAPIST: So this sort of denial of your own need. So was there ever a kind of try to return to physical intimacy or that was it? [00:32:05]

CLIENT: Yeah that was it.

THERAPIST: Why for you?

CLIENT: You know I think that it was one of those kind of things that now you kind of look back on and it's like that experience of being in Lake Erie.

THERAPIST: Right.

CLIENT: You know it's like you're up here on the shore and it's really cold. The water is really cold.

THERAPIST: Yeah.

CLIENT: And it's like you're just going to get your feet wet.

THERAPIST: Yeah.

CLIENT: And eventually, over time, you've kind of now all of a sudden you're out up to your neck in the water and it's like, "How the hell did I get here?" And it was like one little step at a time.

THERAPIST: Right.

CLIENT: And it's like along with the fact that I can't talk about this. It was like – and it just keeps compounding or whatever. [00:33:03]

THERAPIST: Well I see where a depression happened because all of this stuff is repressed. And it's sort of like – I told you I had a friend whose mother was having surgery and she had some type of heart surgery. And there was some weird thing that happened with her and the anesthesia where she could feel it but she couldn't speak.

CLIENT: Mm.

THERAPIST: So she's screaming from the inside because she can feel it but she can't speak. So it still looks like she's asleep. And she finally did wake up and they put her back under but she – but it kind of strikes as an apt analogy.

CLIENT: Mm-hmm. Yeah.

THERAPIST: Because being the good guy in your mind is somehow an important thing to do. We've gone back to the theme of people liking you. But you've suffered tremendously for it.

CLIENT: Yeah. Yeah.

THERAPIST: As opposed to saying, "Hold the hell up! Wait a minute!"

CLIENT: Yeah. Yeah.

THERAPIST: And you're angry about it. Justifiably so. [00:34:05]

CLIENT: Yeah. And I think – yeah I'm angry. I'm angry.

THERAPIST: But you're also punishing yourself.

CLIENT: I'm recognizing –

THERAPIST: It's like this form of self-punishment. What did you do that was so terrible that you have to punish yourself in this way?

CLIENT: Mm. Yeah that's a good point. Because now it looks like the self-punishment is more directed at "Well why can't you talk?" "What's your problem?" "What's your problem that you can't –" You know just talk and be open about this. Yeah.

THERAPIST: Okay. Explain where that came from. You mean that's your punishment?

CLIENT: Well that's where I'm at now.

THERAPIST: Okay.

CLIENT: You know that there's more – the anger that I feel.

THERAPIST: Yeah.

CLIENT: You know I can see that it's like a pattern of like just sitting with that. It's like, "Really? You're going to punish yourself?" Do you see what you did there?

THERAPIST: Yeah.

CLIENT: So now there is this sense of like being angry at that part of myself that allowed me to do that. Does that make sense? [00:35:11]

THERAPIST: It does.

CLIENT: (laughs)

THERAPIST: But you know it came from a really – I mean that's a lifetime of socialization. It started at home. We don't hug in this family is code for so many things. We don't hug. We don't say I love you. And that's common in many cultures, all right?

CLIENT: Mm-hmm.

THERAPIST: But it means we don't feel in ways that we say we do. We don't communicate emotions openly. We don't, we don't, we don't. Right? If you are a sensitive kid – and I imagine that you were a sensitive kid and an empath – that that felt normal even if you didn't like it. Right? It may have felt normal even if you didn't like it.

CLIENT: Mm-hmm.

THERAPIST: So then of course then you have a lifetime of socializing of don't.

CLIENT: Mm-hmm.

THERAPIST: Right? Don't. Don't be. Don't do. Right? And even your kind of looking at philosophy and kind of meditation is the exploring of the why. [00:36:09]

CLIENT: Mm-hmm.

THERAPIST: Exploring the "Well you're just supposed to sit with it." Even observing the feelings. I'm supposed to sit and observe.

CLIENT: Mm-hmm. Mm-hmm.

THERAPIST: As opposed to being a part of it when you're an intensely feeling man.

CLIENT: Mm.

THERAPIST: You know I'd almost rather you scream.

CLIENT: (laughing)

THERAPIST: You laugh.

CLIENT: Yeah. Yeah. Yeah I would – yeah. I did get to a place over the holiday.

THERAPIST: Okay.

CLIENT: After the kids (inaudible at 00:36:44) and my wife – she's like, "What's going on?" She's asking me. "You seem – something's up." You know? "You seem like you're not yourself." Or whatever. And I recognized in that moment that it's like, "Okay. Here it is. Here it is. What are you going to do with this?" [00:37:08]

THERAPIST: Yeah. Okay.

CLIENT: You know? So it's like recognizing that it was very difficult to be with the snake and just – you know. And it was like I don't really remember now – because I was trying to kind of like reconstruct this – and it was like “Oh I wish I had the handy little tape recorder.” (chuckles)

THERAPIST: What did you say?

CLIENT: (sighs) I don't know if I can remember everything that I said but more a sense of what I said was really trying to stay with – yeah because what was wanting to come out was “Well I'm tired.” Or I'm this. Where it's something that was going to skirt the issue. [00:37:53]

THERAPIST: Yeah.

CLIENT: But I – you know I think I tried to explain to her where I was at and that I was really trying to just stay with whatever the feeling was. And I think she was –

THERAPIST: Did you tell her what the feeling was?

CLIENT: I think she was trying to help me get to like “Well what are you feeling?” And I'm feeling – (sighs). I think that I was able to say that I had felt this sense like this is – the most that I could get out was that it's difficult for me to feel in this family.

THERAPIST: Okay. Good for you!

CLIENT: So it's just like okay –

THERAPIST: And how did she respond?

CLIENT: (sighs) You know I think that she allowed – I think the way that I presented it I think she allowed me just to be with that. And maybe hear it. But it was like – I was kind of explaining this catch-22 scenario that I'm in. [00:39:09]

THERAPIST: Yeah.

CLIENT: But it's like I feel like I can't have the feelings or express the feelings that I'm having in this family because when I do I get shot down really fast.

THERAPIST: Okay.

CLIENT: You know, it's like I can't be depressed. I can't be angry. I can't be whatever.

THERAPIST: Did you say those words?

CLIENT: Mm-hmm. Yeah.

THERAPIST: And she received them?

CLIENT: I think so. I think so.

THERAPIST: Okay that's really huge. Why do you present these really huge things like they're not really huge? That's huge because you revealed yourself and you have not felt safe to reveal any parts to that. And yet you still revealed part of yourself. How you felt.

CLIENT: Yeah. Yeah. No I really did – I did recognize in the moment that it's like yeah, this is that cold – you're. Yeah you're turning into fear here of this. It's just like really trying to hold my ground. [00:40:12]

THERAPIST: And how did it feel to say those things?

CLIENT: Well I think that after – it was frightening.

THERAPIST: Yeah.

CLIENT: It was frightening to be able to just hold my ground and say it.

THERAPIST: What was frightening about it?

CLIENT: Yeah you know that was – and I think that I was able to have that thought almost in the moment. Of like, "Really? What's so frightening about this?" It's like I'm not sure that I have an answer for that yet. You know it's like –

THERAPIST: It's not safe.

CLIENT: It's not safe.

THERAPIST: You might get bitten by the snake.

CLIENT: Yeah exactly. You know. But I think in saying it, it did open up a little bit more of a sense of like whatever. Calm or confidence. Or a little sense of like that was okay.

THERAPIST: That's pretty amazing!

CLIENT: Yeah.

THERAPIST: That's pretty amazing. I mean that's a really big deal. You've been always the little boy who'd been told not to feel. Don't be. Don't feel. [00:41:18]

CLIENT: Mm-hmm.

THERAPIST: And so you've had a lifetime of practice. But that's not true. I mean you still do feel. And you do still care. Right? And you still do hurt.

CLIENT: Mm-hmm. Mm-hmm.

THERAPIST: And you spoke it for the first time to her. And she did not dismiss it. I mean she didn't – in a textbook she would've responded by hopefully holding your hand or hugging you but she didn't dismiss it. And I wonder if the sort of feelings of loneliness, sadness and your presentation of them – what you look like – in some ways was your distress signal. Hoping to see if someone would notice. I mean we want the people we love – (cell phone rings) I'm so sorry. [00:42:00]

CLIENT: Mm-hmm. No it's all right. It's all right.

THERAPIST: (inaudible at 00:42:03) You want the people you love to respond when you hurt.

CLIENT: Mm-hmm.

THERAPIST: You know we want to be reached sometimes. We don't reach out but we want someone to notice. And there is nothing wrong with that. And she noticed.

CLIENT: Right.

THERAPIST: Which means she's not completely disconnected from you.

CLIENT: No. No. No. She's in her own highly protected place.

THERAPIST: She is.

CLIENT: And she's far away or whatever but that doesn't mean that she doesn't – you know.

THERAPIST: Do you feel like your wife loves you? And remember – let me put a caveat out there. Like is different. The perception of the relationship is different. But do you feel like your wife loves you?

CLIENT: My perception, my view is – (sighs). I think similar to the feelings that I was describing earlier. It's like she's in love with an image of me that doesn't exist anymore.

THERAPIST: How does that feel to say? [00:43:10]

CLIENT: It feels – again. It feels lonely. And it's like – hey this is me. I'm here now.

THERAPIST: What is that image of you?

CLIENT: I'm not back there.

THERAPIST: And who are you back there different?

CLIENT: Oh I don't know. The me that was back there. The me that was in college. The me that was whatever. I'm – difficult to maybe even remember. But it's like – you know there is like things that have happened along the way. It's like well you know I've had these issues with my stomach.

THERAPIST: Yeah.

CLIENT: And I'm – I don't eat meat anymore. And I don't drink alcohol anymore.

THERAPIST: Mm-hmm. Mm-hmm.

CLIENT: But she's in love with the guy that still wants to sit down and have a couple of gin and tonics with her every night. [00:44:04]

THERAPIST: Right.

CLIENT: And it's like – and I know. It's not spoken but it's felt. And it's like why can't you be that guy?

THERAPIST: Mm-hmm.

CLIENT: You know and it's like – so that's yeah. That's hard.

THERAPIST: Very hard.

CLIENT: And it's like dammit. You know?

THERAPIST: (inaudible at 00:44:23)

CLIENT: You know? (laughing) I just need somebody to see me. Can you just see me? You know? I feel like the invisible man sometimes. It's like – yeah whatever. There's a number of different science fiction metaphors I could probably pick on but –.

THERAPIST: You know I see it sometimes go across your face. How much it hurts to not be seen.

CLIENT: Mm. Mm-hmm. Yeah so I think that I carry that– I certainly carry it through the doors here. [00:44:56]

THERAPIST: Sure.

CLIENT: And it's like – I think one of the things that I'm finding somewhat surprising is that people see me here.

THERAPIST: What's different – how do you know?

CLIENT: (sighs) I don't know exactly. But I'm – there is a certain sense of like people are starting –. I've been in the program long enough now.

THERAPIST: Sure.

CLIENT: (inaudible at 00:45:22) it's like people call me by name. It's like – a little bit. I mean it's not like you're seeing these people on a daily basis. It's difficult to –

THERAPIST: How does it feel to be seen?

CLIENT: Yeah. It's like I like hanging out here. It's nice to be a part of something. It's nice to feel like your ideas count. Who you are matters. The things that you care about matter. And it's like that's – yeah. [00:45:54]

THERAPIST: It's almost like and a lot of (inaudible at 00:45:57) students feel that way. It's almost like you have to leave what was to go with people who have no history to be seen –

CLIENT: Yeah.

THERAPIST: for who you are in a day. But I wonder what it would be like for you to tell your wife that. Not that I'm suggesting you should but I wonder what it would be like for you to tell her that.

CLIENT: (pause at 00:46:23 until 00:46:28) Yeah I do see that's a possibility. I do see that it – that I think that I'm moving closer to that place.

THERAPIST: Mm-hmm.

CLIENT: Yeah and I think that it's kind of that that sense of like climbing the stairs – the ladder to the high dive. [00:46:53]

THERAPIST: Mm-hmm.

CLIENT: It's like well given, given the right circumstances. I might actually jump.

THERAPIST: Well you are not (client laughing), you are not unknowable nor are you unlovable.

CLIENT: No and I think that part of that path I recognize. A huge part of that path is really me getting to know me.

THERAPIST: Mm-hmm.

CLIENT: And really me coming to love who I am.

THERAPIST: Mm-hmm.

CLIENT: And I'm like, "Yeah."

THERAPIST: Right.

CLIENT: This is huge.

THERAPIST: Because people – you don't necessarily need –. We all need validation but it can come from different sources.

CLIENT: Mm-hmm.

THERAPIST: And I wonder – and I don't know because I don't have a sense of your wife other than what you've told me of course –

CLIENT: Right.

THERAPIST: but I wonder if some part of her is also waiting for you. You've talked about being in silos and the force field.

CLIENT: Right. Right.

THERAPIST: And once you've been together for a really long time you have – a lot of times accurate, sometimes not – a representation of who you think someone is and it doesn't leave them room to break out of that. [00:47:58]

CLIENT: Mm-hmm.

THERAPIST: It doesn't leave room to be different.

CLIENT: Right. Right.

THERAPIST: There is a movie – and I can't remember the name of it. It came out maybe a year ago. Two years. With Meryl Streep and Tommy Lee Jones. What was it called?

CLIENT: Oh I saw it. Yeah. I did not see that movie but I was like – my wife and I saw the previews and I'm like, "I can't go there. That's our relationship. I can't go there." (laughs)

THERAPIST: Yeah. But you know what? But I wonder if you should.

CLIENT: Yeah. Yeah.

THERAPIST: And it's almost like you're Meryl Streep and she's Tommy Lee Jones.

CLIENT: Yeah and again I didn't see the movie. So.

THERAPIST: I wonder if that's something you should think about. First you should see it yourself.

CLIENT: Yeah.

THERAPIST: But I wonder if it's something you should watch together. Not now. Right?

CLIENT: Yeah.

THERAPIST: But it's in some ways it's a message to anyone who is in a long-term relationship or a marital relationship because all of us are vulnerable to that. [00:48:54]

CLIENT: Mm-hmm.

THERAPIST: As you saw you went home and you saw your brothers living parts of your experience.

CLIENT: Yeah.

THERAPIST: Right? Because all of us are vulnerable to that.

CLIENT: Right. Right.

THERAPIST: You know you have a voice here. And you've been told for so long that you can't use it or can't speak. You're screaming from the outside. But anytime – at least since we've been working together – you even you said know or you've spoken a little bit of your truth it has not been the disaster that you feared it would be.

CLIENT: No I don't think it is. And I think that probably cognitively or whatever. On a philosophical level I can see that it's like "Yeah look. You can say these kinds of things. The world as we know it is not going to end."

THERAPIST: Yeah.

CLIENT: But yeah. When the rubber hits the road –

THERAPIST: Of course. It's a process. [00:49:54]

CLIENT: You're someplace else.

THERAPIST: I wonder if I could have you think about if you could write your wife a letter and say anything you wanted to say, what would it look like? Before – I'm not suggesting you write the letter at this point. And if you did I wouldn't suggest that you give it to her. But I wonder if you thought about writing her a letter so you could say anything you have ever wanted to say about the relationship or how much you hurt or the lack of physical or emotional – like what would it be like for you to do that?

CLIENT: (pause at 00:50:30 until 00:50:36) Um probably the best – the first thought that comes to mind is like somebody who has just been—. You know when you've had like the stomach flu.

THERAPIST: Yeah.

CLIENT: And you just like, you know it would feel so much better if you could just vomit. Right? [00:50:55]

THERAPIST: (chuckles)

CLIENT: But –

THERAPIST: Wow! That is a powerful reaction.

CLIENT: But you're just going to sit here and you're going to – no I can't go there. Oh man I just don't want to vomit.

THERAPIST: Wow that's pretty –

CLIENT: I just want to sit here. So I think that the experience would be that of like, "Okay I've just got to vomit."

THERAPIST: There is something really terrifying about this for you.

CLIENT: Mm-hmm. Mm-hmm. Yeah.

THERAPIST: I think we have to look at what that is.

CLIENT: Oh yeah. It's –

THERAPIST: I mean that's a powerful image.

CLIENT: Mm-hmm.

THERAPIST: You know? And in our work together parts of me really feels for your experience (client laughing) because you're this kind of deeply feeling man who wants to have these connections with other people that you are really capable of having but somewhere along the line you have been consistently told that it's you or you can't. Or you have linked up with individuals who can't or won't or aren't capable. [00:51:59]

CLIENT: Yeah. Yeah.

THERAPIST: And then when you –

CLIENT: You're so clever. (laughs)

THERAPIST: Deflect with humor. But when you think about even being able to privately write down your thoughts; it's terrifying.

CLIENT: Mm. Yeah. Yeah it's not like – yeah.

THERAPIST: We've got to figure out where that came from.

CLIENT: Mm-hmm.

THERAPIST: You know you must've gotten punished really badly whether directly or someone told you something. Somewhere you've picked up this idea that it's not only unsafe but it's almost traumatic to be able to share those things.

CLIENT: Mm-hmm. Mm.

THERAPIST: So just a question. I am here next week if you want to come in.

CLIENT: I think –

THERAPIST: You don't have to. But you—

CLIENT: No that's the twelfth?

THERAPIST: That's the twelfth.

CLIENT: I believe that I'm actually here on campus that day but I have to figure out – I think that there is one of those APAT things going on.

THERAPIST: Yeah. Okay.

CLIENT: So let me – I will find out about that.

THERAPIST: Okay.

CLIENT: And then what? Call you? E-mail you?

THERAPIST: E-mail me. And you can come in for our regularly scheduled time or I should have some time flexibility that day so just let me know.

CLIENT: I think that we've e-mailed, right?

THERAPIST: We have. If not, it's on my card.

CLIENT: (inaudible at 00:53:23) Okay.

THERAPIST: You can always e-mail me. I'm pretty quick on the e-mail.

C: Okay, great. [00:53:28] [end of audio]

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: ...idiot. (chuckling)

THERAPIST: Well, you shouldn't.

CLIENT: (inaudible at 00:00:04).

THERAPIST: I'm glad to see they've added a student panel. I suggested to them that they do so.

CLIENT: Well, good.

THERAPIST: Because...

CLIENT: In all...

THERAPIST: ...who teach... who uses them but people who are students? So...

CLIENT: It all looked a little canned so I'm like I'll never be able to look at one of those tapes the same way again. (chuckling)

THERAPIST: So who came in and...

CLIENT: Sheri Geller. Somebody from Toronto talking about presence. (pause) I just had the cheat sheet in front of me here. But it was really kind of like integrating mindfulness and just really kind of like a... I've had an experience with like mindful dialog. I forget the guy's name who was doing that work. But you're really... just really trying to be in the moment kind of thing when you're... so... [00:01:03]

THERAPIST: And did you choose to kind of be on this panel because of the topic or...

CLIENT: Well, there was only one left and they were putting out the plea for volunteers. And I'm like, well, I'll do it. What the heck. And then when I saw what it was, it's like, well, this should be interesting. And it was. Yea, so I'm sorry.

THERAPIST: No, it's fine.

CLIENT: We got ten minutes. Go. (chuckling)

THERAPIST: (chuckling)

CLIENT: Yea. (pause) Let me shift gears here. So the homework, I actually tried. I tried to find the video and I'm like, stupid Netflix didn't have it. I'm like, where am I going to find this thing? So I'm like, I think I'm going to have to go to a video store or something. I'm like...

THERAPIST: Oh gosh, because people still do that.

CLIENT: ...I live under a rock. I don't have cable. (chuckling) All I've got is an Apple TV.

THERAPIST: (chuckling) I'm surprised Netflix didn't have it. [00:02:00]

CLIENT: I'm like...

THERAPIST: Is it you mean where you...

CLIENT: Well, through Netflix... through the subscription.

THERAPIST: Right.

CLIENT: The online kind of thing.

THERAPIST: Right.

CLIENT: And I'm plugging it in and it's like, no hope springs.

THERAPIST: Oh, you know what. So it doesn't... it's probably not... you probably can't like watch it in the moment. You probably have to order it.

CLIENT: I have to... yea.

THERAPIST: So right.

CLIENT: So I have to do that and... yea.

THERAPIST: Well, you didn't have enough to do, I know, with finals. So... (chuckling)

CLIENT: Right. So by the time... there was not enough. If I had to order it... and I didn't check through the QVC if it was there. So I'll get it.

THERAPIST: Well, I'd be interested to hear kind of your thoughts on it and what sort of resonates for you. You'll like it on multiple levels, I think. Like it and not like it on multiple levels.

CLIENT: So yea, we'll see where that goes. I know that this past week, I've just been really in tune with just like the anger. There's just so much anger there. [00:03:04]

THERAPIST: Wow. Tell me. That's pretty significant.

CLIENT: Well, I'm like... yea, I'm like... (pause) Maybe a recognition of how I don't know whatever kind of (pause) ways I've tried to like either I don't know maybe ignore or maybe pretend it's not there. I'm not sure exactly. It's like, really? I didn't think that there was all that anger there. So it's like, hmm. So it's like, well, this is... so I haven't seen the movie yet so... and I'm not a big Hobbit fan and all that kind of thing. But there's just this sense like, well, the dragon has been laying there dormant for a long time. [00:04:05] It's not like the dragon went away. It's just...

THERAPIST: Tell me why anger is so tough for you.

CLIENT: (pause) Well, I wouldn't say it's just anger. I mean... but I mean, there's anger and there's that sense of loneliness, this sense of disappointment. All those kind of sensations that kind of in my current terminology are all those emotions that really just kind of perpetuate this sense of unsatisfactoriness about life. The Buddhists call it suffering or dukkha. That sense of life is just miserable. [00:05:03]

And it's like so in recognizing, it's like, well, yea. There's a sense that I can look at this. I can look at this story right now and I'm like I can kind of cognitively pick this apart. And I can go... so I'm able to view it at that level. And I can recognize that it's like this is this whole grand narrative that I've created.

THERAPIST: What's the narrative, Seamus?

CLIENT: About how life should be. How relationships should be. There's that sense of, I'm not getting the world the way I want it. There's that, here's my narrative. Here's the script. It's easy to see in relationships and maybe other people's relationships, but it's like we both walk onto the stage together and we exchange scripts. And as long as we're reading off script, life is good.

THERAPIST: Right.

CLIENT: But then we start improvising. [00:06:07]

THERAPIST: So when did you start improvising?

CLIENT: It's like, hey, wait a minute. Where's this part about like, OK. It's like, all right, all right. The kids start to come. We recognize life is going to be a little tougher and it's like... and then like whatever. Then you get the...

THERAPIST: What's...

CLIENT: ...whole chapter about sexual abuse. And it's like, wait a minute. This wasn't in my script.

THERAPIST: Right.

CLIENT: So now I'm going... so then it's like the frustration, the anger, blah, blah, blah.

THERAPIST: Can you tell me about the anger?

CLIENT: It is (pause) just trying to like be with it and observe what that emotion is feeling like. It's... it really is like this being with... and I've had this experience being around children who are just completely irrational. [00:07:08] And it's just this raw irrationality about them. And it's like there is nothing that you're going to be able to do or say that's going to change the situation. It's just like roar.

THERAPIST: Can you talk about your anger from the point in which you feel it through yourself as the vessel?

CLIENT: (pause) How do I feel it? (pause) I'm not exactly sure where you're going with that. But just in terms of like a feeling, how do I wear that anger? How do I feel that anger? (pause) [00:08:00] I'm not... there's sort of this just kind of this depression kind of a feeling about it. And it's like I recognize that the two are linked in that probably I switch from anger to depression. It's like I can't stay with the anger.

THERAPIST: Sure.

CLIENT: So I slip into this depression, this depressed place. And it's like, wow.

THERAPIST: It's... there's a lot happening for you right now it seems. Because even as you're describing your anger which I consider a breakthrough because we kind of danced around it for a while and that was a hard thing to kind of acknowledge. What I see on your face is hurt. It hurt. Anger from being hurt. Somebody runs over my toes with a bike that I'm angry about it. But the deep hurt that you feel that's where the anger comes from.

CLIENT: Yea. And I think that there's sort of that sense of like... I don't know. Betrayal might be a little bit of a strong word but...

THERAPIST: No. Tell me about it if it's real. [00:09:09]

CLIENT: Well, it's like wait a minute. And it's kind of like the being on stage together. It's like, hey, this is kind of a vulnerable place. We're on stage together. And it's like, wait a minute. You've taken this play in a completely different direction. (chuckling)

THERAPIST: And you didn't ask me.

CLIENT: Yea. And I'm standing up here trying to improvise looking like an idiot or whatever.

THERAPIST: But I think it's not whatever. And in the... even in the emotional processing of your own feelings, you sort of compared to a toddler who's irrational, right? Or being on the play and having the script change on you and then you're the one looking like a fool, right? That somehow your emotions are childish or foolish. And that's one of the reasons why I think that you have never allowed yourself to feel angry. You bury them and that's when things become depression, right? [00:10:02] But your hurt of years and your sense of betrayal and not having a choice. Or going along or having things change and not having the kind of saying something is very real. And if you continue to kind of blow it off and say it's irrational or you come with analogies to describe it. I mean, sometimes you just feel.

CLIENT: Yea, and it... and there was...

THERAPIST: Can you sit with that for a second?

CLIENT: Oh, I was sitting with it all week, really.

THERAPIST: What triggered it and how do... what was it like to sit with it?

CLIENT: Well, I think there's a lot of triggers. I recognize that sense of a feeling like my life has come to this place of like... it's kind of like here is the memo. This is what you're doing today kind of thing. And I recognize it. It's like, well, I probably got myself into that place because I didn't speak up about that. [00:11:06] It's like, OK. So I'm just going to...

THERAPIST: So that happened this weekend?

CLIENT: Oh, yea. I ended up... and not that I wouldn't necessarily have decided to do this myself, but it's a different sense of like this is what we're doing as opposed to would you like to do this? Or maybe we could discuss this? But it's like, I went to see a concert that my daughter was doing down in three hours south. And then we came up. No, first we... first I ended up going over to a concert that my nephew was doing over near my hometown or in my hometown. So it was a whole weekend of just being on the road going to...

THERAPIST: And you didn't want to do those things?

CLIENT: Again, I'm not sure that I wouldn't have wanted to go do those. It was the resentment of the expectation. This is what we're going to go do. And it was like, hmm. So I was able to recognize...

THERAPIST: Sure. [00:12:02]

CLIENT: ...that that was what was going on. I was unable to know what to do with that.

THERAPIST: So you kind of sat with it?

CLIENT: Yea. And I just like, OK, yea. And I think that where I am... where I was able to be was like, OK, I'm feeling the anger. The only thing that I know what to do with this anger is to go to depression. And I started to feel myself slipping in that direction. And then it was like, wow, I have all of this anger and resentment and whatnot built up over years. And I'm like, OK, I don't know what to do with this.

THERAPIST: What would you like to do with it?

CLIENT: (pause) I'm not 100% sure. I sort of had that image of Wile E. Coyote that I may have shared with you.

THERAPIST: You have.

CLIENT: Yea. And I'm like I'm just wanting to be really careful that I don't pull the trigger and just end up blowing everything up. [00:13:02]

THERAPIST: And what would that look like because this is a... Wile E. Coyote has come up as a prominent image multiple times. And it's powerful, him, kind of exploding the dynamite.

CLIENT: Well, it's because he's sitting on the stack of dynamite.

THERAPIST: Right. And what do you fear will happen if you get angry and vent that or speak that?

CLIENT: I don't know. Is it that... in a lot of ways, I feel...

THERAPIST: Right.

CLIENT: ...the worst case scenario is that life as you know it will be over.

THERAPIST: And life as you know it will be over meaning your marriage would change. And that would be what?

CLIENT: Well, I think I'm unable to see like this moving in a positive direction.

THERAPIST: Right.

CLIENT: So I can only image, at this point, the negative. And I'm not sure that it's like... I'm not sure how to go there. [00:14:02] I'm not sure I want to go there. And it's like, well, is it really that bad? And then you start going down that road of like...

THERAPIST: But then you're talking yourself out of what's true for you.

CLIENT: Yea.

THERAPIST: And you have a history of doing that over years.

CLIENT: Yea, I'm pretty skilled at that. (chuckling)

THERAPIST: I just wonder if you're not as angry at yourself as you are at your wife for not speaking earlier.

CLIENT: Oh yea. I know the anger is that I can see that the anger is self-directed. It's easy to be able to project that on somebody else and it's like this is your fault.

THERAPIST: Right.

CLIENT: But yea, I know it's... I know where the fault lies and it's like...

THERAPIST: Was it fault?

CLIENT: ...I almost had that sense of... I don't know. There's just this sense of... I haven't had the dream in a long time. [00:15:01] But I used to have these dreams but I think it was more back when I was actually teaching I would be in the situation where I would be like confronting somebody. Usually students, the problem students...

THERAPIST: Right.

CLIENT: ...where you were in this highly confrontational situation. So it's a situation that you've been dealing with and you know what you want to say but your jaw, it's like you're paralyzed. That's the feeling that I'm having in the dream. So I'm paralyzed. I can't get my mouth to move and it's like it's just that frustration...

THERAPIST: Wow.

CLIENT: ...in the dream. Now I haven't had that dream in a long time. But I'm like that's the sensation that I feel.

THERAPIST: Paralyzed.

CLIENT: Yea, it's like damn it. You know what you need to be doing. You know that like saying what you feel here would be really the best thing.

THERAPIST: Right.

CLIENT: Why can't you do that? And it's like it's because my jaw is locked. I can't get my damn jaw to move. [00:16:09] That feeling. So...

THERAPIST: Where do you think that comes from, Seamus (sp?)?

CLIENT: Oh God, I'm sure that that comes from like growing up as a kid. I'm sure that even though, at this point, I can't like say, well, here's the example. But I'm just like you go back home and I'm almost able to kind of relive or re-see some of my childhood in that my little sister lives across the backyard from my mom and dad.

THERAPIST: Currently?

CLIENT: Yea. And she's got ages like eight or nine through high school. So it's kind of like I can kind of like come back and... now I know mom and dad have changed over the years but it's like I'm seeing how they interact with the grandkids. And it's like, oh.

THERAPIST: And what are you seeing? [00:17:00]

CLIENT: (pause) All of those messages. It's like if you're feeling anger about... or if you're feeling anything. If you're frustrated about it, it's like the old tapes that click in. It's like, well, go get busy doing something else. Go find...

THERAPIST: Don't feel.

CLIENT: Don't feel.

THERAPIST: And don't show us. Don't tell us.

CLIENT: And don't tell me about it because I don't know what to do with it. And I'm just going to tell you to go do something. Well, let's go get busy doing something else.

THERAPIST: Right.

CLIENT: And that's the mode. It's like, divert, divert, divert.

THERAPIST: So even before getting married, you've been doing this a long time which is...

CLIENT: Oh yea. I came to the marriage with no skills in communication. So it's like, OK. And I'm pretty sure that I may have found somebody with an equal talent. Or maybe she was a little bit more skilled at being able to express what she was wanting. [00:18:03] And therefore, it's like, well, since I can't express myself, I guess we'll just do what you want to do because I can't talk to you know. (chuckling) Whatever.

THERAPIST: You almost give me the sense of being... it's a sense of feeling terror with being angry. And you're hearing construction, by the way.

CLIENT: Oh yea. I know. We heard it down in the studio. Is it terror? Yea, I think now I'm getting to that... it feels like I've painted myself into a corner. That it's like, OK. So where do you go from here? It's like...

THERAPIST: Well, where would you like to go?

CLIENT: (pause) I think that the more I'm sitting with that this week, it's like I just want to be able to be in that place...

THERAPIST: Right.

CLIENT: ...of being able to express what I'm feeling. [00:19:02] And then it's kind of like the music in the background, that dramatic music, the swell. And it's like you know something is... and it's like you recognize, oh. Well, the other actor isn't on the stage.

THERAPIST: And you really want her on the stage with you.

CLIENT: Yea.

THERAPIST: So you can renegotiate the script.

CLIENT: And I know that we have come over the years of playing this dance. And it's like I think I have been somebody that had... I've been trying...

THERAPIST: Right.

CLIENT: ...for a long time. And I know that one of our conversations throughout our entire marriage is just like, look. She's, "Well, how do you feel? What do you want to do? Tell me what..." And I'm like, "No. I need some time." And it's like... and there's always this sense of like there's not enough time for me to like get it out. I just... I can't tell you. [00:20:02] It's like...

THERAPIST: So she's stopped asking and you stopped trying to tell.

CLIENT: Yea. Or that life circumstances and whatnot and now it's like, OK, well, our time together is five minutes over coffee this morning. So you got anything important to tell me, it's like right now. And then... and the way the day plays out, it's like, well, maybe I'll see you tomorrow. And you get the same five minutes. (chuckling)

THERAPIST: How do you we know, though, that she is not also feeling like she can't... maybe she wants to connect and can't.

CLIENT: Oh, I think that we're probably in the same canyon, just on other side... opposite sides of the canyon.

THERAPIST: Right.

CLIENT: I think we're probably both in that same stuck place of not being about to talk. She's got this phobia that seems to have developed over the years about talking on the phone. [00:21:03]

THERAPIST: Tell me about that.

CLIENT: Thankfully, we have phones where we can text each other because I do get messages from her and that's good.

THERAPIST: Tell... can you tell me a little bit about the phobia so I got a...

CLIENT: She just doesn't like talking to people on the phone. And it's like she'll do it when she has to but...

THERAPIST: Your kids as well?

CLIENT: Yea. I think that she would prefer... well, maybe she's a little more comfortable talking to the kids on the phone. But yea, she's not going to intentionally pick up the phone and call me. She'll text me or she'll avoid talking to me.

THERAPIST: Is it just you or is it other people as well?

CLIENT: Oh, I think there may be other people, too.

THERAPIST: So it is a phone issue.

CLIENT: Yea.

THERAPIST: Not specific?

CLIENT: Yea, I think it's a little bit more of a phone issue. Yea, I don't feel special about the phone issue but...

THERAPIST: Do you ever touch? [00:22:01]

CLIENT: (pause) No. Rarely.

THERAPIST: Not ever?

CLIENT: Well, no. I won't say not ever but it... yea. No. It's (pause) awkward. Like when you're in social settings where there's... I don't know. Maybe there's a sense of like, well, this would be good for the actors on the stage right now to be holding hands kind of feeling. It's like... but it doesn't feel... on my end, it doesn't feel like it's genuine. Is there a genuineness on her part? Maybe.

But I'm like, yea. After I feel like wait a minute. Before we can... (chuckling) It's like, I need to... we need to talk here. It's like, I can't... it's like, no. We've got to... yea, it's like we've got to renegotiate this. [00:23:05] Or we've got to start from the... start over or something. It's like, whoa. Put on the brakes. Cut. (chuckling) Rewind. (chuckling)

THERAPIST: So if we're watching the play of your marriage and we're in a... intermission is done and we're in... going into Act 4 of a four-act play, what do you want Act 4 to look like?

CLIENT: (pause) Yea. (pause) Well, I think I would like that... to have that sense or that opportunity to... for the two main characters to talk it out.

THERAPIST: So tell me. Take me through. [00:24:01] And the main character is you. It's your play.

CLIENT: Yea, I think just being able to say just like we need to have time to talk and we need to be able to... we need to like I don't know not necessarily disregard all of the past. But it's like just recognizing, hey, this is not acceptable. I can't continue to go in this direction. And it's like I am the kind of person in my professional life... it's like as a teacher, it's like it got to the place where I'm like I can't stand doing this anymore.

THERAPIST: How does she respond to what you're saying in the play? [00:25:00]

CLIENT: (pause) Yea, I would see her as being open to doing that.

THERAPIST: Tell me what her dialog is.

CLIENT: (pause) If I can write the play the way that I want it to me, then I would say...

THERAPIST: You're writing it.

CLIENT: ...then she's open to it.

THERAPIST: And she says what to you after you say, "We really need to talk. I can't keep doing it the way we've done it."

CLIENT: That I agree with you. And that... yea, I want to do this as... I want to do that, too.

THERAPIST: And you say?

CLIENT: OK.

THERAPIST: And now what?

CLIENT: (pause) We just need... we just figure out how to do that. And maybe it's like taking a trip or getting away from all of the other distractions or whatever. [00:26:08] But it's just like... yea.

THERAPIST: Can you flesh it out a little bit and tell me more about the dialog so she says yes and you say yes and now what?

CLIENT: (pause) I'm not sure. I'm not sure what that looks like.

THERAPIST: What do you make of that? This is your play so it can look like however you want it to.

CLIENT: What do I make of that? (pause) [00:27:00] I don't know. I think there's part of me that... the honest part of me that's like, well, do I really want that? Is that really what I want? Is that the way I want this? Is that the way? Maybe I'm not able to come up with any dialog because I'm like I'm not sure that I'm wanting it to go in that direction.

THERAPIST: What's it like to say that?

CLIENT: Well, I think that there's the, it feels good to be honest about it. (pause) Yea, so not recognizing that I'm going down the road of trying to whatever, think my way out of it or justify it. It's like...

THERAPIST: That's it. It's of note, right? You can write the fourth act any way you want to. You can have her say anything you want her to say. [00:28:04] And the initial part is pretty clear. Let's talk. But what you would say and how you would say it, you got stuck because you're not sure not how to say it but if you want to say anything more than that which I think is not only powerful. It sort of speaks about just how deeply hurt and angry you are.

CLIENT: Oh yea.

THERAPIST: And the questioning of, do I even want that to exist? If I could have it, would I want it?

CLIENT: Yea. I mean, there's... because I have those discussions with myself.

THERAPIST: Sure.

CLIENT: It's like, well, here you are again, another night alone. And it's like, well dude, you want the alternative? I mean, it's like be careful what you're wishing for here. (chuckling)

THERAPIST: What is the alternative? What is the alternative that you are imagining? [00:29:01]

CLIENT: That I'm engaged in some other activity. Like tonight I'm going to support... listen to the high school choir. I no longer have kids in choir but my wife is the accompanist for the choir. So she has asked if I would come to the choir tonight. And I'm like, yes, I will be there. Then there's going to be a gathering afterwards at the choir director's house aka her best friend who they spend all of their time together. And I'm like, oh good. I get to be a third wheel.

THERAPIST: You're angry.

CLIENT: Yea, I'm angry. I don't want to go.

THERAPIST: Why are you going?

CLIENT: Because I'm a Boy Scout. I'm an Eagle Scout. I'm the good boy. I always do these things and that's... yea, so... or whatever. (chuckling) I'm like I don't even know. [00:30:06] It's just like... yea.

THERAPIST: You can stop the treadmill at any time or change it. Change the speed. You can go to one and not the other. You can say, "I don't want to go." You can go to both...

CLIENT: Right.

THERAPIST: ...and say, "Fine, but something about this scheduling has to change." I mean the treadmill that you're on, you can choose to stay on it and that is a valid choice for sure. You can say, "You know what. The alternative, whatever that is. Whatever you... I think you have a

picture in your head of what the alternative is. If it's divorce and I don't want that. Or if it's being lonely although I would argue you're already lonely, right?

CLIENT: Yea.

THERAPIST: But you can change it. You've already changed the pattern in some significant ways in a short period of time. And sometimes just recognizing you have a choice, right? Whether you are happy with the way you're responding or not, recognizing that you're changing internally and the external changes will take a while to show up. [00:31:06] You can at least be proud of that. But you don't have to be a Boy Scout because you don't like it. In some ways, you think it gives you this extra benefit but it's actually really not as beneficial I think as...

CLIENT: It's just a pattern at this point. It's just habitual energy. I think early on it gave me identity and I drew some self-kudos for being the guy that wore the white hat or something.

THERAPIST: The good guy.

CLIENT: Yea, whatever. I'm like, whatever. Yea, look what that got you.

THERAPIST: Well, no matter if you go or not, you're still a good guy. You're just a guy who decided he didn't want to go to the rehearsal or the concert. (pause) And it almost sounds...

CLIENT: Yea. And I need to hang onto that.

THERAPIST: It almost sounds like going tonight afterwards is a painful and angering experience for you because you don't know what's going on with your wife and her best friend. [00:32:07] But you know you feel that relationship robbed you of emotional intimacy. Why are you putting yourself through that?

CLIENT: Yea, I don't know. I'm having this vision of this cartoon character who has this large hammer and just keeps on hitting himself in the head. (chuckling)

THERAPIST: Ouch. (chuckling)

CLIENT: I'm like I don't know. Why do I do that?

THERAPIST: Put the hammer down.

CLIENT: Yea. Put the hammer down. Stop it.

THERAPIST: Well, it's not that easy and I'm not trying to make that easy. But you can... if part of you is saying, "I would spend the night at home feeling bad for not going." OK, then why don't you go to the concert and not go afterwards? And say, "Hon, I'm going to go to support you tonight. I want to see it but I'm not going afterwards."

CLIENT: Yea. And I've done that a number of different times. I've been able to do that lately.

THERAPIST: Oh, good for you. [00:33:00]

CLIENT: I've been able to go and I'm like yea, you know what? I've had enough concert. I've had enough of this. I'm going to head home. So yea, and while I think that that may... I'm not sure that it puts me necessarily in a place of feeling empowered yet.

THERAPIST: I guess, for you, I would just wish that you wouldn't put yourself in places of pain.

CLIENT: I'm going to sit with that. And I'm going to consider that tonight because I feel like that I did it on Tuesday. They had a... there was another concert. It wasn't even her concert and I'm like, why did you do this? This was... I went to the orchestra concert.

THERAPIST: Are you expecting something back when you do these things?

CLIENT: I think that that could be habitually... it's like I think that ship sailed a long time ago. But there is like...

THERAPIST: But I wonder if you still hope. [00:34:01]

CLIENT: Yea. It's like, well, if I go and maybe she'll spend time with me. There's that... yea.

THERAPIST: OK. And to be clear, there's nothing wrong with wanting something back. If I go to the store and pick up beer for my husband, I want something back. Good wife. Yay me.

CLIENT: Yea, something.

THERAPIST: But the something now that there's been all these years of silence isn't clear.

CLIENT: Right.

THERAPIST: And you are allowed to want something back but you're going to have to learn to ask for it and to risk not getting it. But I would say it's less of a risk than you feel is because you're already not getting it, right?

CLIENT: (chuckling) Yea. THERAPIST: But my guess isn't we don't know this for a fact. You're not asking and she's not giving because you miss each other's signals all the time. So is there a chance? So I guess in the time that we don't see each other and yay for you for going to India. Have a wonderful time. [00:35:00]

But I guess I'll ask you to think about a couple of things. I want you to think about writing the fourth act. Come up with multiple scenarios. You can come up with I don't want to put words in

your mouth here a divorce scenario. And you can come up with a... and this is all fantasy. You can come up with a happily ever after scenario. And you can come up with a realistic scenario. And you can come up with a fantasy, right? And you can rehearse the dialog. It's your script, right?

And sort of just instead of putting restrictions on how you think and feel and how you think it might go allow yourself to fantasize about how you think you want it to go. And then maybe the next day you completely change it. But I think it will give us some data about... because I think you think if we can just talk now, I'm going to end it because I don't... who knows what comes next. But in your fantasy if you are the author of the play and you are then it can end or it can look like however you want it to look. [00:36:04]

And I just wonder and we don't know. Maybe she's not receptive at all or maybe she's locked in the same prison you are and just perceives the whole thing differently, maybe.

CLIENT: Of course, yea.

THERAPIST: And I don't know. I don't want to create that. Like you are two people who want to connect and don't know how. We don't know that. I don't know that, right? But I'm...

CLIENT: Yea. No, I understand, yea.

THERAPIST: ...saying, if you can allow your mind to go and just imagine what you would want it to be and allow yourself the freedom to imagine what you would want it to be. Everything that you sort of engage in meditation, even the one you attended about presence and mindfulness has to do with being in the moment. This is the theme being in the moment, living with the experience. And this is why I imagine that you're attracted to these things is the thing that you very much struggle against doing. [00:37:02] It's like you and the snake again, right? And so being your fantasy, I guess I would encourage you to allow it to be whatever you want it to be or you think you want it to be.

CLIENT: OK. (pause) Yea, I can do that.

THERAPIST: Yea. And then let me know between that... I hope you do that first before you see the movie.

CLIENT: OK. Well, there's a chance... yea, I can make that happen. I'll just wait to...

THERAPIST: And then maybe you see how the film changes, feeds, shapes the fantasy. You are allowed a fantasy life whatever it is, realistic or not. I mean, that's the point of fantasy. You get to write your own script.

CLIENT: OK.

THERAPIST: When do you leave for India?

CLIENT: Twenty-eight.

THERAPIST: Have a great time. [00:38:00]

CLIENT: Yea. I'm like... now that finals and everything are done, I'm like, OK, all the stuff that I need to get prepared. And I'm like I hope I got enough time to do this. So...

THERAPIST: I really want to hear about it when you get back. And hope that when you're there, you just let yourself be.

CLIENT: You know what? I'm sure that I will. And I know that there's a lot of... there's expectation that... it's like, well, take lots of pictures. And I'm like, yea. You know what? I'll take some but...

THERAPIST: I'll just be.

CLIENT: ...I'm just going to be here.

THERAPIST: Yea, good for you.

CLIENT: I don't... it's like this is... I really feel pretty selfish but this is just my time. Damn it, I'm going to take it. (chuckling)

THERAPIST: It's not selfish. It's not selfish. This time works for you next semester? Are we good?

CLIENT: We're going to... yea. I think it... let's see. We're a Thursday.

THERAPIST: Thursday at 1:00.

CLIENT: Do we have Tuesday available or not?

THERAPIST: We might.

CLIENT: Because I'm here Monday and Tuesday of next semester. [00:39:06]

THERAPIST: Stop. Yea, so let me see. We might.

END TRANSCRIPT

BEGIN TRANSCRIPT:

INTERVIEWER: When did you get back?

RESPONDENT: Late Saturday night.

INTERVIEWER: Okay. Okay.

RESPONDENT: So it's like 78° at LAX.

INTERVIEWER: Welcome home.

RESPONDENT: And almost getting on the plane it's like, no, there's a delay in Detroit.

INTERVIEWER: It's been pretty bad here while you've been gone.

RESPONDENT: I know, I know. And I've been avoiding spending too much time calling and writing people and letting them know that it's 90°.

INTERVIEWER: That's very nice of you. So while we were suffering. So tell me about your trip, how was India?

RESPONDENT: Wow. Yeah, how do you... It was just a really educational experience.

INTERVIEWER: Okay.

RESPONDENT: Everything you'd want a multi-cultural trip like that to be.

INTERVIEWER: Yeah.

RESPONDENT: Plopping yourself into a culture where you're clearly the minority, and clearly don't know how to speak the language. Yeah. And trying to figure it out. So it was really fun. Yeah. We had some interesting twists and turns from the get go.

INTERVIEWER: Do tell.

RESPONDENT: Like three days into the trip Dr. Smith... I don't know, did you hear this?

INTERVIEWER: I heard he got sick.

RESPONDENT: Well, he came with like bronchitis, and it just kept getting worse and worse. And eventually he's like, you know, in more serious shape than just like bronchitis. So they end up taking him to the hospital. And I didn't know his personal background.

INTERVIEWER: Yeah.

RESPONDENT: But he's like inches away from like renal failure.

INTERVIEWER: Oh God. I didn't know that.

RESPONDENT: So he ends up... I mean, they brought him back today. He spent the last, you know, two-plus weeks of his trip sitting in a northern Indian hospital...

INTERVIEWER: Right. [2:00]

RESPONDENT: ... on dialysis.

INTERVIEWER: Oh God. That's awful. In a place... You know, you can imagine how isolating that would be. You don't speak the language, you're not home, you're having serious medical issues.

RESPONDENT: Yeah.

INTERVIEWER: That's bad.

RESPONDENT: So, I mean, that dynamic happened. Dr. Peterson got sick for a day or two. Just the kind of other little ups and downs you sort of expect. And then there's the protest going on over in India.

INTERVIEWER: Okay. Now, I hadn't heard about this.

RESPONDENT: Pro-democracy... I don't know if it's pro-democracy... Anyway, there's like the... when we get over there, there's clearly this hubbub that this large group in Mumbai is going to shut down the city.

INTERVIEWER: Okay. "Welcome to our city!"

RESPONDENT: And the first part of the trip, the first week, we're in the northern part, and the second and third week we were doing these workshops in Mumbai. And Carlson's hotel is in one location where the workshops are, and the rest of us kind of put up in this hotel are in another location.

INTERVIEWER: Mm hm.

RESPONDENT: And it becomes apparent that... you know, the first week we're doing just fine, but it was... the start of the second week was the date that they were going to shut down the city. And one of the spots, there's like seven locations around the city that they were going to block traffic and shut down the city, and it would have been between our two hotels.

INTERVIEWER: Was it far... those two hotels, were they far apart?

RESPONDENT: No. Geographically, no.

INTERVIEWER: Okay.

RESPONDENT: Depending on the traffic, yes.

INTERVIEWER: Okay, okay.

RESPONDENT: You know, traffic over there is insane. But they ended up moving us out into the country to this rural resort for the last week, and I'm like, "Okay, well that worked out." [laughter] So being in Mumbai for a week was enough for me.

INTERVIEWER: Okay.

RESPONDENT: It was just like... it was too much.

INTERVIEWER: Okay. Too much stimulation...

RESPONDENT: Yeah.

INTERVIEWER: Okay.

RESPONDENT: Too much stimulation, too much... too many people. I mean, it's 13 million people.

INTERVIEWER: Yeah.

RESPONDENT: And, you know, unless you're with a Indian person...

INTERVIEWER: Mm hm.

RESPONDENT: ... you know, being escorted around. I just didn't feel comfortable.

INTERVIEWER: Mm hm, mm hm.

RESPONDENT: I remember taking a walk away from the hotel just kind of exploring a little bit, and I got to this huge intersection, and there was no Indian person there for me to watch and follow. You know, it's like, okay, when do I walk?

INTERVIEWER: Uh huh.

RESPONDENT: And it was like this huge bank of cars just sitting over here, and I'm like, nope. I just turned around and walked back. [5:00]

INTERVIEWER: Yeah.

RESPONDENT: I'm like, I am not walking out in the middle of this. We actually had one of the doc students just got clipped in the back of her leg by one of those little motorcycles that are running over there, and it was just like, okay, we got to be careful here.

INTERVIEWER: A very interesting multi-cultural experience where you can learn what it's like to be isolated.

RESPONDENT: Oh yeah.

INTERVIEWER: And don't know any of the rules. And I always find it very helpful... I think I told you, my husband is European.

RESPONDENT: If you did I may have forgotten that, but yeah.

INTERVIEWER: Okay. And he's only been in the United States for maybe three and a half years.

RESPONDENT: Okay.

INTERVIEWER: And even though our language is very common, he frequently says—and I've heard this from clients from other places—how hard he has to think over here, because everything he knows to be true, all the rules are different.

RESPONDENT: Yeah. Yeah.

INTERVIEWER: Even though at least, you know, there's some semblance of speaking the same language. And he says, "When I go home, I don't have to think very hard."

RESPONDENT: Yeah.

INTERVIEWER: And here... And so you can kind of see where... I felt like that in Italy. Like I was isolated, I didn't speak the language. So I think that your experience over there...

RESPONDENT: Oh yeah.

INTERVIEWER: ... is pretty applicable to everything you're going to do as a counselor, because you realize what it's like to be the only lonely out there and you're the one not knowing the rules.

RESPONDENT: Yeah. And it was good to have those experiences, it was good to be feeling those kind of things.

INTERVIEWER: Yeah.

RESPONDENT: It's like, "Oh." You know, just being in that place of being able to watch that while it's up. And it's like, one day at some point it's like, okay... yeah, I don't think this is necessarily home sickness, but I'm ready to go home.

INTERVIEWER: Yeah. [laughter]

RESPONDENT: Whatever that feeling is.

INTERVIEWER: More things that are familiar and make sense, yeah.

RESPONDENT: Yeah, whatever you want to call that. And then other little expectations you had, bringing... It's like, "Oh, Indian food, I love Indian food." And then it's like, "Oh, I'm a vegetarian, this'll be great."

INTERVIEWER: You like the American version of the Indian food.

RESPONDENT: Meanwhile, we get over there, it's like those people put meat in everything.
[7:00]

INTERVIEWER: Do they really?

RESPONDENT: Yeah. So the irony is that in the States, when you go to like a steak place or something and you're like the oddball vegetarian, they don't know what to do with you.

INTERVIEWER: Right.

RESPONDENT: They crack open the bag of frozen broccoli, carrots and cauliflower and they dump it in and throw some little sauce on it. And I'm like... I got that meal two or three different times in India. I'm like, "Are you kidding me?" [laughs]

INTERVIEWER: Wow. Wow. I wouldn't expect that. That's funny.

RESPONDENT: So... But yeah, yeah. I mean, just it was a great... It was great the first week. It was like, we were on this bus tour—not on buses, van tour—everything was pre-laid out, you know, what we're doing, the schedule, where we were eating, where the hotels were. It's like, I didn't have to think for an entire week. It was like being in grade school again.

INTERVIEWER: Okay. [laughs]

RESPONDENT: Just hop on the van, you know, goof around with the people in the back of the van. And in the process made friends with some of our Indian hosts. And I came back with three

or four people's e-mails that I'm sure I'll probably keep some sort of relationship going with, and that was really fun. And really trying to dig in and get a sense of what it means to be Indian.

INTERVIEWER: Yeah.

RESPONDENT: You know, what's it like to be an everyday Indian. And, I don't know, I got what I got out of it, my interpretation of that. So no, it was just really... yeah. It was really great to just be in that place of like, yeah, I don't have to think. Going to Mumbai kind of changed everything.

INTERVIEWER: Yeah. That sounds like when of the kind of real multi-cultural experience began.

RESPONDENT: Yeah, yeah. And then it was like, okay, now you're on your own and you got to try to figure this thing out. And one of the first things we did, a group of five of us I think, we wanted to do a little bit of sightseeing and try to get down to the palace. So we thought, hey, we'll take a taxi. So we have the bellman from the hotel get us a taxi. Well, he didn't get us a taxi, he got us a couple of tuk tuks.

INTERVIEWER: What's a tuk tuk?

RESPONDENT: It's a three-wheeled open scooter kind of a thing.

INTERVIEWER: Okay.

RESPONDENT: It's like a supped up golf cart.

INTERVIEWER: And you have to drive it?

RESPONDENT: No, no, no, there's a driver.

INTERVIEWER: Okay. All right.

RESPONDENT: A couple of drivers. So he puts us in these tuk tuks, and it's like a Disneyland ride or something. Only there's reality involved here.

INTERVIEWER: Sure. [10:00]

RESPONDENT: It was like, "What the hell are we doing?" So we get away from the hotel, I don't know how far, 10 or 12 blocks, who knows, kind of turning here and there, and the tuk tuk, they pull over to the side. And the driver hops out and he goes, "So we're going to stop now at a couple of different places." So it's like, "Oh, here's the scam."

INTERVIEWER: But we don't want that!

RESPONDENT: Yeah. They're going to take us to a jewelry outlet store, and they're going to take us to a tailor. And then, you know, "But you don't have to stay. Like five minutes, just stay five minutes. See we get a..." and he pulls out this card "...we get a stamp if we take visitors there for free gas." So we do that. And then that makes us a little bit lighter. Then we're going to take a water taxi across the river to get to the palace.

INTERVIEWER: Okay.

RESPONDENT: Well, they take us to this place, and there's no water taxi there. It's a tour boat. I mean, you're going to get an hour tour now on the river.

INTERVIEWER: [laughing] Whether you want it or not.

RESPONDENT: I mean, it's kind of like... you know, because you don't know what you're doing.

INTERVIEWER: Right.

RESPONDENT: You don't know what you're doing. It's like you would have just said, "No, we're not going here, we're going to go to the water taxi."

INTERVIEWER: But you can't advocate for yourself if you don't speak the language, and it's not your rules.

RESPONDENT: Yeah, yeah. And so it's like, okay. So we paid way too much for a tour down the river. And then the boat goes past the dock for the palace and then turns up this tributary, and we're heading down this area where it's like, "Where are we going and why are we here?" And finally I'm just like... I just keep looking at the driver, the female driver, and it's like, "Turn it around back to the palace." I mean, I kept saying "palace." And finally she turned the boat around and went back. So we get there and we get to the dock and we finally get over to the palace just in time for the palace to close. [laughs] [12:00]

INTERVIEWER: You didn't get to see it?

RESPONDENT: No.

INTERVIEWER: Oh no.

RESPONDENT: Not that day.

INTERVIEWER: Okay.

RESPONDENT: But in the meantime of course we had the prime lesson in getting around, and at least had this funny story to tell about being shook down all the way through Mumbai.

INTERVIEWER: Well, if it makes you feel better, I got off the plane in Italy and this English-speaking cab driver walked up to me, and he was in a long line of cabs so I thought it was legit, and took me for twice what it would be. And mid-way through I thought, I'm definitely being screwed here. I'm from Detroit, I know this is not the way it's supposed to work, but what can I do, you're in it now. So I think it's part of the tourism experience.

RESPONDENT: Yeah. And I'm sure that that kind of thing happens every day of the week and...

INTERVIEWER: Every day in every country.

RESPONDENT: ... twice on Sunday.

INTERVIEWER: Sure.

RESPONDENT: Yeah.

INTERVIEWER: Sure.

RESPONDENT: You know. And then the whole haggling experience at the markets, all those kind of things. So it was...

INTERVIEWER: It sounds like a full trip.

RESPONDENT: It was. I think.

INTERVIEWER: Yeah.

RESPONDENT: Lots of experiences. I'm really glad that we ended out at the resort.

INTERVIEWER: Yeah. Did you get to connect with some of your classmates at all?

RESPONDENT: Yeah. The other interesting development for this trip, and it's kind of like I'm waiting to see if like, well, that was a really good idea in India, let's see if it develops back here in the States or if it just stays over there, I'm not really sure.

INTERVIEWER: Okay.

RESPONDENT: But since Dr. Smith was out of the picture after like three days Dr. Peterson and I are the only two males on this trip. And he and I were able to speak the Buddhist speak.

INTERVIEWER: Oh, that's right. That's right. Because he has a...

RESPONDENT: So we connected really on this trip. And I had volunteered to give a presentation at one of his workshops. And I'm thinking, well, I know this is kind of a gutsy thing,

because it's like I'm a master's student, and his doc students are there. But he just opened it up to anybody, it's like if you want to volunteer to make a presentation. And I said, "Sign me up." And I said, "How about I talk about the MBSR program?"

INTERVIEWER: Okay.

RESPONDENT: He said, "Great." So I did it.

INTERVIEWER: That's great.

RESPONDENT: So about half-way through the trip he's starting to talk to me about like, "We need to figure out how to get you into the doc program."

INTERVIEWER: I was just... you know, it's so funny that you say this. I was just thinking that that would be a good next move for you. Silas's a good guy...

RESPONDENT: Yeah.

INTERVIEWER: ... and if he... he usually doesn't say things, at least in my experience, that he doesn't mean. So how did you feel?

RESPONDENT: Well, it kind of took me by surprise.

INTERVIEWER: Yeah.

RESPONDENT: I mean, it kind of was like, I don't know what to do with that.

INTERVIEWER: Okay.

RESPONDENT: So I talked to other doc students about it, and talked to a couple of the other pros that were there. [15:00]

INTERVIEWER: Yeah.

RESPONDENT: And I was like kinda getting a feel for how legit is this, what is this offer? And it's like...

INTERVIEWER: Well, let's stop for a second and go back. So your first reaction was, it sounds like, I don't know, I'm just a master's student. And then your second reaction was you weren't sure how legit it was?

RESPONDENT: Yeah, that's... I didn't know Peterson well enough at that point to be able to know. It's like, well, is he just kind of patting me...

INTERVIEWER: What, blowing smoke?

RESPONDENT: ... patting me on the head and making me feel... giving me some confidence, encouragement or whatever, using Adlerian speak, but...

INTERVIEWER: Why do you think he would do that?

RESPONDENT: Maybe I put myself in that position. It's like, okay, if I had a person doing a presentation, (a) that I didn't know that well, and was a master's student or whatever, it's like, you know, that's how I would want to be. Not insincere, but I would want to be encouraging.

INTERVIEWER: Well, but you can... he can be encouraging without saying I think you should go on for a doctor program.

RESPONDENT: Yeah, I suppose.

INTERVIEWER: He could say, you know, I think you did a good job, or I think that's interesting, and let it go.

RESPONDENT: Yeah, yeah.

INTERVIEWER: But what I find very interesting is your first reaction is to question the legitimacy of his seeing something in you that...

RESPONDENT: Yeah. I suppose it's probably a self-confidence thing coming back on me.

INTERVIEWER: I think so.

RESPONDENT: Yeah.

INTERVIEWER: Well, I'm surprised that you're surprised. You know, I guess I'm surprised that you're always surprised when other people see talent in you.

RESPONDENT: Mm. I think that it... Well, it may be that, but I think that there's also a piece of like, "Do you understand that I've barely gotten through this master's degree program? I don't know how I can legitimately walk..." You know, what kind of games or what kind of things are going to have to be done in order...

INTERVIEWER: Why would it be a game, Seamus?

RESPONDENT: It's like, well, there's K accreditation here. And then it's like... it seems to me like some backroom deals are going to have to happen in order to make this really work.

INTERVIEWER: Wait a second. I'm sorry that I'm laughing with you. What backroom deals? You mean for you to become a doctoral student?

RESPONDENT: Right.

INTERVIEWER: Why?

RESPONDENT: Well, it's like my first master's degree is in religious education.

INTERVIEWER: Okay.

RESPONDENT: And if you look at that it's like there's not a whole lot... there's nothing over here that interfaces or looks like any of the master's degree programs that are [K-crep?] class in the master's degree program.

INTERVIEWER: Why do they have to be correlated at all? I mean, and I wouldn't...

RESPONDENT: That's me. Okay? This is my head going, "Uh... Well, this is kind of..." This is like a non sequitur, it's like...

INTERVIEWER: You are having some interesting reactions to him seeing talent in you. You're coming up with all these justifications and rationalizations and trying to push away what might be a powerful truth.

RESPONDENT: Yeah. And I suppose that it's... you know, I think that I went down this road once before, but sort of that sense of feeling like I'm the imposter.

INTERVIEWER: Yeah.

RESPONDENT: Yeah.

INTERVIEWER: Okay, can you talk a little bit more about that?

RESPONDENT: It's like I haven't even seen my first client yet, and we're talking about the doctoral program? [laughs]

INTERVIEWER: Well, yes. I mean, first of all, I'm not surprised. As you were talking I thought we should talk about moving on, not to take credit from Silas. And I know Silas, at least on a professional level.

RESPONDENT: Yeah.

INTERVIEWER: And when he offers an opportunity it's kind of freely given, and he means for you if you're going to take him up on it he'll be very supportive. And if you're not, it's kind of like, no hard feelings.

RESPONDENT: Right.

INTERVIEWER: But at least in my experience with him he really doesn't say things that he doesn't mean or make offers that are not legit.

RESPONDENT: Yeah.

INTERVIEWER: But your immediate reaction is to come up with all of these things about questioning the legitimacy of the offer and what games are going to be played. There's nothing that you've told me about that you've put your mind to professionally...

RESPONDENT: Yeah, yeah. Right, right.

INTERVIEWER: ... that you haven't done. Why would this be any different? [20:00]

RESPONDENT: Well, I think because for me it's like I don't have any control over... or I don't have enough understanding of the system, or that kind of thing. And it's like part of it is just we're going to go up there and talk about it later this afternoon and try to talk with Fred and figure out what I'm going to need to do, what kind of classes I'm going to need to take. And we did have a discussion. I had told him after a few days that it's like... we were out at the resort and it was like, "You know, this has been a great place to reflect, and I feel like, even though I'm not 100% sure exactly what this means, I feel like, yeah, this is a direction I feel like I want to go."

INTERVIEWER: Mm hm.

RESPONDENT: And I said... you know, and I also asked him, and I said, "I'm going to ask you straight up, not knowing if this is kosher to ask you..."

INTERVIEWER: Okay.

RESPONDENT: "... but it's like I know I'm going to need a letter of recommendation for this, would you write me one?" You know, so.

INTERVIEWER: Sure. And what'd he say?

RESPONDENT: He said yeah. You know, "Send me your resume and I'll put something together."

INTERVIEWER: That's great.

RESPONDENT: And then about at the same time Sanders and Fred were just walking by, and he's just like, "So when we get back we need to figure out how we can get Mr. Seamus going on this," and that we were just kinda brainstorming some stuff. And she was like, "Well..." And the K-crep thing kind of came up.

INTERVIEWER: Yeah.

RESPONDENT: Which I felt like, all right, well, this would be... if I was in her role I'd be concerned about making sure that all the I's were dotted and T's were crossed.

INTERVIEWER: Okay, explain what you mean by that, the K-crep thing came up.

RESPONDENT: You know, it's like, I know that... because I had gone and researched the requirements for the doc program.

INTERVIEWER: Yeah.

RESPONDENT: And that one of the requirements, was having graduated from a master's program that was K-crep certified.

INTERVIEWER: Okay.

RESPONDENT: And it's like, okay, I'm not there. [22:00]

INTERVIEWER: Well, but you're in the master's program.

RESPONDENT: I am in the master's program.

INTERVIEWER: Does he mean... Okay, does he mean sort of jump into the doc program without finishing the master's program? Okay. But they do take students who aren't from a master's program.

RESPONDENT: Yeah, and that's...

INTERVIEWER: Okay, so now I'm understanding this is why you're questioning it. Because you're talking about kind of not finishing your master's degree here, because you already have a master's degree, and then going into the doc program.

RESPONDENT: Yeah.

INTERVIEWER: Okay.

RESPONDENT: And I think what he was trying to do is figure out some way to kind of hybrid it so that maybe I'm taking a few more master's degree courses.

INTERVIEWER: Absolutely.

RESPONDENT: And she was kinda talking, it's like, "Well, let's... If we stay at the master's degree level you're paying less money than if you're doing the doctoral level stuff." But like figuring out which of these classes we can kind of use for dual credit, or whatever.

INTERVIEWER: Sure.

RESPONDENT: And I'm like, okay, you're just in a place that I don't have any...

INTERVIEWER: Okay.

RESPONDENT: You know, I don't have any control over this, I can't... I don't even know what you're talking about at this point.

INTERVIEWER: Okay. So I understand what you mean. Let me see if I can give you an example that might make things clearer. So my undergrad degree was from the Northern Illinois University. When I was applying to graduate school there were two types of doctoral PHC programs at the time that I was applying for. One was you can apply for just a master's program and get your master's degree and then go on and apply for a doctoral program. And so you had a program where you applied at a doctoral program and you get your master's degree along the way.

RESPONDENT: Ah.

INTERVIEWER: Because they want to do your whole educational process. They took a few students who already had a master's degree, but most of us did not. And we received a master's degree. You already have a master's degree, and you have some master's level classes. So my guess is in speaking with Silas they're trying to figure out a way where you still get some of your master's courses under your belt, and then instead of finishing the master's degree go on for the doctoral degree because you already have a master's degree, even though it's not necessarily in counseling psychology. It's done a lot.

RESPONDENT: Okay.

INTERVIEWER: It's not that big a deal.

RESPONDENT: Okay.

INTERVIEWER: It's not... you know.

RESPONDENT: It's just that... not part of my worldview...

INTERVIEWER: Sure.

RESPONDENT: ... and I'm like, "I don't know what we're talking about here."

INTERVIEWER: But if somebody told you now after this trip... you know, if you came back with the idea that you were going to finish your master's degree and go on for a doctoral degree, this doctoral program, would you be surprised?

RESPONDENT: No, I don't think so.

INTERVIEWER: No.

RESPONDENT: No.

INTERVIEWER: So this isn't actually that much different. So however it happens, you finish your master's degree, you go on for the doctoral degree, or you just jump, right...

RESPONDENT: Yeah.

INTERVIEWER: ... right from you kind of transition from master's courses into the doctoral program, it doesn't really make much difference, because the end result for you is going to be the same.

RESPONDENT: Yeah. And I... you know, I know what this sounds like, probably the way it's gonna sound. But I'm like, I got to know all of the other doc students in the program that were on the trip, and I'm like, oh yeah. [25:00]

INTERVIEWER: Oh yeah what?

RESPONDENT: I can handle that.

INTERVIEWER: Well, yeah.

RESPONDENT: You know, it's like... you know, I'm probably older than all of these other doc students.

INTERVIEWER: Well, here... What is in your mind about the doctorate or people who have doctorates?

RESPONDENT: Yeah, you know...

INTERVIEWER: Because let me just get rid of that right now. [laughter] I mean, what's in your mind about that?

RESPONDENT: I don't know. You know, I guess I feel like... You know, first of all it's like master's...

INTERVIEWER: Yeah.

RESPONDENT: ... ought to say something about like being a master of the content area that you're studying.

INTERVIEWER: Oh, you take that word so literally!

RESPONDENT: I know.

INTERVIEWER: Not at all. It just means, you know...

RESPONDENT: That you jumped through a few more hoops in order to be able to get to this particular level of education.

INTERVIEWER: Well... of course you're capable of doctoral work.

RESPONDENT: Mm hm.

INTERVIEWER: Getting a doctorate means you probably had more perseverance than anything, than sort of a mark of intelligence. I don't really find it's a mark of intelligence. I know brilliant people who never finished high school, and people who have doctorates that aren't that bright. It's not that. It's kind of about...

RESPONDENT: It's an endurance test.

INTERVIEWER: It's an endurance test, but it's also specializing in an area of knowledge, and it means you can do different things. But that's it. And I supervise master's level clinicians, doctoral level clinicians, post docs and professionals. And there is sometimes a difference in skill level, but there's really not. And I think one of the things that you'll find is your life experience and who you are...

RESPONDENT: Yeah.

INTERVIEWER: ... as well as your desire to learn and intelligence will bode well.

RESPONDENT: Okay.

INTERVIEWER: So you interact with these doctoral students, you're like, "I could totally do that." But you should feel that way...

RESPONDENT: Yeah.

INTERVIEWER: ...because it's true.

RESPONDENT: Yeah, yeah. Yeah.

INTERVIEWER: Then you kind of engaged with Silas and he said the same thing. And so I guess what I'm wondering is how that... if we kind of strip away some of your defensive reactions, how did it feel for him to identify that talent in you? How did it feel?

RESPONDENT: No, I think I felt, you know, a new sense. You know, there was that encouragement, there was that new sense of like, "Oh, I do belong here. I fit in here."

INTERVIEWER: Yeah.

RESPONDENT: You know? It's like, okay.

INTERVIEWER: So you're not the imposter.

RESPONDENT: No, I don't think I came home necessarily feeling like the imposter, as much as I like... you know, still a little bit confused, just in terms of how this actually happens.

INTERVIEWER: Sure.

RESPONDENT: And it does help to have this explanation right now.

INTERVIEWER: Seamus, that's kind of an old script. It's interesting. Because I see in you... you know, not too many people have the confidence to leave an already established job in teaching and, "Oh, I think I'll start a business."

RESPONDENT: [laughing]

INTERVIEWER: Right? "Oh, now I think I'm going to jump into a whole other career." So there is a core of you that really is confident.

RESPONDENT: Yeah, yeah.

INTERVIEWER: Because you take calculated, intelligent career risks that are in line with your talents and skills. [28:00]

RESPONDENT: Yeah, yeah.

INTERVIEWER: And you don't do it willy-nilly, it's planful, right?

RESPONDENT: Yeah. Yeah, yeah.

INTERVIEWER: And yet this old script from childhood, from your relationships...

RESPONDENT: Something, yeah.

INTERVIEWER: ... that tells you that you don't belong, or you're not smart enough. Despite the fact that there is every evidence you are.

RESPONDENT: Yeah.

INTERVIEWER: So tell me what's accurate about that for you.

RESPONDENT: Well, it is accurate. And having spent the week with Silas and the whole Adlerian take on things...

INTERVIEWER: Yeah.

RESPONDENT: ...it's like, you know... yeah, that was my dad.

INTERVIEWER: Okay, explain.

RESPONDENT: Well, dad was a blue collar, you know, mechanic.

INTERVIEWER: Yeah.

RESPONDENT: And he came home every night and that was the script. You know, he's dealing with these college educated people that don't know anything about their car.

INTERVIEWER: Right.

RESPONDENT: So we're going to make fun of the college educated people who can't fix their own car.

INTERVIEWER: Sure.

RESPONDENT: Because he's feeling really, you know, stepped down [on], he's feeling really... whatever. He has no self-confidence.

INTERVIEWER: But then you became that college educated person.

RESPONDENT: Yeah.

INTERVIEWER: The first one in your family.

RESPONDENT: Yeah. Yeah.

INTERVIEWER: Yeah.

RESPONDENT: So...

INTERVIEWER: The only one, right? Out of your brothers?

RESPONDENT: Out of my immediate family.

INTERVIEWER: Yeah. So...

RESPONDENT: I have an uncle that... college grad, but...

INTERVIEWER: The fish out of water.

RESPONDENT: Yeah.

INTERVIEWER: But even when you've belonged you haven't felt like you belonged.

RESPONDENT: Even when I belonged... [pause] Yeah, I suppose. As an educator, when I was in industrial arts, it was kind of like, well, I'm just an industrial arts teacher.

INTERVIEWER: Right.

RESPONDENT: You know, it's like... you know. And in the school system it kind of worked that way. You know, there's...

INTERVIEWER: Yeah, I get it, the academic wing...

RESPONDENT: You know, and half in science, and the academic wing...

INTERVIEWER: Sure. [30:00]

RESPONDENT: ... and it's over here. And it's like, around the sports people, well, they're important because they're sports. And then it's, you know, the boat people, and it's just like, whatever.

INTERVIEWER: Yeah.

RESPONDENT: I mean, we need them because we got to have a study hall for these kids, we don't know what to do with them. [laughs]

INTERVIEWER: But you know what, it's... but that's not true.

RESPONDENT: No, and I know it wasn't. And I know that I was really good at what I did, and I was really effective, and I touched kids' lives, and I get all of that. But there's also that undecided...

INTERVIEWER: So why do you think it wasn't enough?

RESPONDENT: [pause] Hm. Wasn't enough?

INTERVIEWER: Wasn't enough to fully legitimize what you were doing.

RESPONDENT: Mm hm. [pause] I wonder if I... I've never heard that question put that way before. Is it that? Or... [pause] I just remember feeling really... um... kind of burned out.

INTERVIEWER: No.

RESPONDENT: No?

INTERVIEWER: I don't mean enough to stay, I mean enough to feel legitimized. Right?

RESPONDENT: Mm.

INTERVIEWER: You find places where you do belong.

RESPONDENT: Yeah.

INTERVIEWER: Right? Even I would say embraced. But you never quite feel like you fit. Legitimized.

RESPONDENT: Yeah, that could be. That could be the case.

INTERVIEWER: You began describing being early on sort of this imposter phenomenon where you were...

RESPONDENT: Uh huh.

INTERVIEWER: ... and then it's through kind of sort of talking about it out loud where you realize, well, you're not exactly an imposter, you're kind of right where you belong.

RESPONDENT: Yeah.

INTERVIEWER: You know. And then Silas goes, "Look, you should come to the doctorate program." And I'm sure that brings about anxiety and pride and all these kind of conflicting emotions.

RESPONDENT: Yeah, yeah.

INTERVIEWER: But then again that's right where you belong. And yet your first response is to feel like, I don't belong.

RESPONDENT: Yeah. I don't belong, or I'm not sure I'm good enough.

INTERVIEWER: Right. That's an old script.

RESPONDENT: Yeah, yeah.

INTERVIEWER: It's outdated and not true.

RESPONDENT: [chuckles] Yeah. Yeah. Yeah, it is interesting.

INTERVIEWER: Well, what's interesting?

RESPONDENT: Well, I'm just thinking about it. It's like teaching, and then working. You know, those... Because clearly, you know, I can go back to my portfolio of all the projects that I have worked on. It's like, yeah, for ten or twelve years we were in a fairly successful little business, you know...

INTERVIEWER: Yeah.

RESPONDENT: ... and we did some stuff, you know. [33:00]

INTERVIEWER: But you're diminishing your own joy in the doing of it. I mean, you find things that you're really good at, but because it's not legitimate, or it's not as good as this over here, it's almost like you can't enjoy it as much, even when you're enjoying it.

RESPONDENT: [pause] That may be true. I'm thinking that... You know, I think I can point to some years or some stretches certainly in both of those careers where I really felt like, okay, I'm riding the wave. And I know I'm there. You know, I'm in it, I'm digging it. But at some point, or for whatever reason, that just wanes.

INTERVIEWER: Right.

RESPONDENT: And... you know, whatever that old song was. You know, "The feeling's gone and I just can't get it back." [chuckles] You know, that sense of passion, or whatever...

INTERVIEWER: Mm hm.

RESPONDENT: ... about those careers.

INTERVIEWER: But they're all... you know, all of your careers are related to one another. You're not off in one thing over here. I mean, they're all nicely related, right, in one way... Even religious education. I mean, that's pretty broad. I mean, it's all kind of related. You're not sort of far out there. It's not that kind of losing passion that I'm concerned about, it's the not feeling good enough, or not feeling like what you're doing is legit enough, or that somebody else is doing something more important than what you're doing. It's kind of like when people say psychology's not a real science, or you're not a real doctor. That doesn't affect me at all. I mean, I could care less. I enjoy what I do.

RESPONDENT: Mm hm.

INTERVIEWER: Right. And when I get bored with one aspect of what I do I just kinda change it up and do something else within the same field. You know, because psychology's broad enough to be doing a bunch of different things.

RESPONDENT: Yeah, yeah. [35:00]

INTERVIEWER: But those things... you know, I'm so unaffected by that, because I feel like what I am doing is what I'm supposed to be doing.

RESPONDENT: Mm. Mm hm, mm hm.

INTERVIEWER: Does any of that resonate with you?

RESPONDENT: No, I think so.

INTERVIEWER: Okay.

RESPONDENT: You know, I really do. I feel like even though I'm not necessarily sure that I've—what's the word I'm looking for?—that I've found my home...

INTERVIEWER: Okay.

RESPONDENT: ... yet...

INTERVIEWER: Mm hm.

RESPONDENT: ... in this field, I feel like there's nothing... And certainly this trip helped a lot in terms of making me feel like, okay, I've got a family now.

INTERVIEWER: Yeah.

RESPONDENT: You know, I'm gonna...

INTERVIEWER: Oh, so tell me about that.

RESPONDENT: Well, you know, it's like you're in these situations with people for three weeks. It's like you're automatically thrown into having to deal with life and death issues, and all of this kind of thing. And it's like those are the kind of experiences that develop relationships all of a sudden.

INTERVIEWER: Mm hm.

RESPONDENT: Or you spend a five hour van ride with somebody...

INTERVIEWER: Or a tuk tuk.

RESPONDENT: Well, you're not talking so much with a tuk tuk.

INTERVIEWER: Okay.

RESPONDENT: You know, that's just bold fear. You're sharing fear together.

INTERVIEWER: [laughs]

RESPONDENT: But having those kind of opportunities, it's like nobody else in this program is going to have that ability...

INTERVIEWER: Sure.

RESPONDENT: ... to develop those kind of relationships with the people... We're a commuter college, and with the cohort system there were a lot of people there that know the other cohort.

INTERVIEWER: Sure.

RESPONDENT: So they got to interact with different cohorts, and all of that was great. And now it's kind of like, oh, I miss those guys.

INTERVIEWER: Yeah.

RESPONDENT: You know, three weeks together, and then it's like, oh.

INTERVIEWER: You're going to have to try to stay in touch with people. This trip seems like it was really good for you.

RESPONDENT: Yeah. Yeah. I really... Yeah, I knew I was going to have some life changing effects, it's just like, okay, what's it gonna be?

INTERVIEWER: Yeah. [37:00]

RESPONDENT: So yeah. And I'm sure I'm going to be reflecting on that for quite some time yet. But there is a sense of coming from it. And it's like, there is a renewed kind of energy.

INTERVIEWER: Yeah.

RESPONDENT: Maybe a little less, I don't know, tension.

INTERVIEWER: Yeah. How was it coming... how was it coming home?

RESPONDENT: It was... it was okay. You know, it was kind of like, well, I feel like there's been some changes here. And even though it...

INTERVIEWER: In you?

RESPONDENT: Yeah. Even though I'm not 100% sure what that is yet.

INTERVIEWER: Okay.

RESPONDENT: And it's like I'm walking back into kind of life as it always was.

INTERVIEWER: Yeah.

RESPONDENT: And it's like, okay. And it's like, well, this is how life always was. And somehow today it's not bothering me.

INTERVIEWER: Okay.

RESPONDENT: It's like, I'm all good with this. Or whatever. This is kind of what I expected. Okay.

INTERVIEWER: Okay.

RESPONDENT: You know, I got back late, my wife had just come from a concert, she was over at her best friend's house and I got dropped over there. A friend of mine picked me up at the airport and dropped me off because she was doing this concert. And it was kind of like, "Hey, how you doing? Let's hear a few stories." And then they continued their conversation about

critiquing the concert and kind of life going on. And it's like, "Oh, all right, well, this is the way it is."

INTERVIEWER: Right.

RESPONDENT: You know, why should I expect that I'm going to have the stage to talk about my trip for...

INTERVIEWER: Any disappointment there?

RESPONDENT: You know, a little bit. But on the other hand, it's like, no, this is where they're at. You know?

INTERVIEWER: Mm hm.

RESPONDENT: This is where they're at. And it's like I... Yeah. For me to have an expectation of things being different is only going to set me up for being disappointed. And I'm like, okay.

INTERVIEWER: Did you get a chance to see that movie?

RESPONDENT: I did not.

INTERVIEWER: Okay.

RESPONDENT: And I...

INTERVIEWER: I wouldn't think that you would, being gone for so...

RESPONDENT: No. We barely... I was able to set up a blog site, and I was able to get about a dozen blog entries during...

INTERVIEWER: That's great. During your trip?

RESPONDENT: Yeah.

INTERVIEWER: That's great.

RESPONDENT: But it was difficult to get decent Internet. And I felt like there were times where like, okay, I've got Internet right now, I'm going to do something real quick and try to send it out before I lose the Internet.

INTERVIEWER: Sure.

RESPONDENT: So I got a dozen little... that I sent back to the folks at home and anybody that cared to plug into the blog site. And...

INTERVIEWER: That's cool.

RESPONDENT: Yeah.

INTERVIEWER: Yeah.

RESPONDENT: Because I don't do the Facebook thing...

INTERVIEWER: Yeah.

RESPONDENT: ... and I was thinking about it prior to going and then let it... no, I just don't want to do that. So I set up a blog and I just posted a few pictures and some thoughts about being in India when I was there. So people were able to keep up a little bit with me. And I did a few face-time calls when I was over there and that kind of thing. Yeah, you know, I've kind of jumped back into regular life, and there's regular schedules going on. And my daughter came home Sunday. [40:30]

INTERVIEWER: Okay.

RESPONDENT: She did a little surprise trip, she drove three hours, she and her boyfriend came up to see me. And that felt nice.

INTERVIEWER: Yeah.

RESPONDENT: That felt nice that she did that, and that kind of thing. So... [pause] Yeah, you know, I think it... being back from the trip I really just haven't... I've been more focused on that, rather than focused too much on the relationship thing. And I recognize that it's like, well, I'm just in this place of like...

INTERVIEWER: Yeah, maybe... maybe you don't want to think about that right now. Kinda just...

RESPONDENT: Yeah, it's kind of where...

INTERVIEWER: Yeah.

RESPONDENT: It kind of feels like that. And I'm like, nah. And I don't know if that's necessarily being in a place of denial, or whatever. It's just like, ah. You know, I've got this doctoral piece...

INTERVIEWER: Yeah.

RESPONDENT: ... and I'm jumping back into school, and it's like, yeah, let's go in that direction, it seems more interesting. [laughs]

INTERVIEWER: Yeah. Or, you know, put this piece on hold, because that piece is constant, and kind of absorb all of your sort of insights and reflections from the trip, and then what this means, this kind of talking to Silas and kind of him taking an interest in you, what this is going to mean for you personally and professionally.

RESPONDENT: Yeah, yeah. Yeah, so I think that there might even be a small potential that I could be going back to India.

INTERVIEWER: Okay, do tell.

RESPONDENT: And I don't know if Silas' going to be going back to India anymore.

INTERVIEWER: Okay, okay.

RESPONDENT: You know, because of his health and...

INTERVIEWER: Yeah.

RESPONDENT: But there may be enough of a connection there that some of the people in the program... you know, some of the other professors would have to kind of lead that trip up. But I think that the mindfulness piece I think is enough of an interest for Silas that I think that... you know, I think he has a stake in wanting to keep something like that going.

INTERVIEWER: Mm hm.

RESPONDENT: For me, I had plenty of time to think about it while I'm over there and I'm thinking... you know, I had a discussion, or I started a conversation with Perry Tulley and... oh, shoot, I lost her name. I think she's in social work. But they're involved in mindfulness here at the college. And there was discussion of that they had thought about trying to put together a mindfulness institute.

INTERVIEWER: Mm hm.

RESPONDENT: But they were just kind of feeling discouraged about it and didn't really know how to make it happen. And I'm like, "Yeah, I think you could make that happen." I think that could be a project. I could do this.

INTERVIEWER: Mm hm. [43:30]

RESPONDENT: This could be a capstone project, or I could...

INTERVIEWER: What makes you think you can do it?

RESPONDENT: Because I'm excited about it. And it's like I can do stuff.

INTERVIEWER: See, but that's the... it's the fascinating dichotomy. That I believe you can, you know. And a large part of you believes you can too.

RESPONDENT: Yeah.

INTERVIEWER: Where does the apostrophes come in? Where does the piece... you know, this sort of confidence in yourself that you can—and do, you can do it, and you do do it—and yet this kind of... you know, not that you're given to arrogance and have no self-doubt, but this kind of self-doubt piece that nags at you.

RESPONDENT: Yeah. You know, I'm sure that that is kind of a childhood thing, that that's all still there. And I think that it's like looking... What I'm seeing in my head right now is like the list of criteria.

INTERVIEWER: Explain.

RESPONDENT: It's like the criteria for passing the master's degree.

INTERVIEWER: Okay.

RESPONDENT: And it's like, no, haven't had that class, haven't done that, haven't done that. It's like, "You haven't done any of this stuff."

INTERVIEWER: Well, what haven't you done? I mean, you said you were barely getting through the master's program, which I find hard to believe. What does that mean?

RESPONDENT: Well, I mean, I'm, what, two, three semesters into this?

INTERVIEWER: Okay.

RESPONDENT: And, you know...

INTERVIEWER: That's enough to know, Seamus.

RESPONDENT: ... haven't seen any clients, haven't done any practicum work, haven't... you know. So whatever.

INTERVIEWER: What... I guess what difference does that make? [45:00]

RESPONDENT: Yeah.

INTERVIEWER: How would that be different for you?

RESPONDENT: It wouldn't. Because I feel like... You know, I've been doing these mindful meditation classes for the last five years. I do plenty of informal one-on-one counseling with people all the time.

INTERVIEWER: Mm hm.

RESPONDENT: Nobody calls it that, but that's what's going on.

INTERVIEWER: Mm hm.

RESPONDENT: And I know I'm not going to have any problem in dealing...

INTERVIEWER: Okay.

RESPONDENT: You know, I'm sure that there will be problem clients, and I'm sure that there will be serious problems that I will encounter and issues that I'm not going to know how to handle well and things like that.

INTERVIEWER: But that's why you're in training.

RESPONDENT: Right, right.

INTERVIEWER: So what difference does it make that... I mean, I think you can decide if you know your own mind. And the thing is, you do know your own mind. Sometimes you may struggle with how you feel about things, or kind of different aspects of things going on, but you know your own mind. I guess if I could sort of give you something it would be—and I don't know if I can—but thinking about learning how to trust yourself consciously. Because I think you trust yourself on an unconscious level, because there's no way you could have just left one career, picked up another career, done well, left the other career, in a mindful intelligent way without having some trust in yourself, without having some planning, right?

RESPONDENT: Mm hm, mm hm.

INTERVIEWER: Because, as I said before, none of these were impulsive decisions, and they were all in line with an already developed skill set that you decided to develop more. That bespeaks of confidence, right?

RESPONDENT: Mm hm.

INTERVIEWER: I wish you could trust yourself consciously, make a conscious effort. You can still be scared, you can still be anxious. Right. Because if you weren't, then I'd be concerned,

because you don't exactly know what you're getting into. Seeing clients professionally changes all of us all the time. Right. Who you are as a counselor ten years ago is different ten years from now, as it should be. But if you could trust yourself consciously you might have more joy with what you're doing. Because you know what you're doing. You do. So it wouldn't really matter if you had decided, "I'm going to go for my doctorate." on day one of the master's program, or when you graduated with your master's degree. It wouldn't make a difference.

RESPONDENT: Hm. Mm hm, mm hm.

INTERVIEWER: Not for you. Maybe for someone else, but not for you. Tell me what you hear me saying.

RESPONDENT: I think... You know, I'm going to spend some more time trying to get at the core of that. But there's some deep childhood stuff there. [48:00]

INTERVIEWER: Mm hm.

RESPONDENT: And even though I can't put my finger on it, there is that sense of like what message was it that I got from my folks? Was it my mom, was it my dad? Who was it that handed me that gift...

INTERVIEWER: Mm hm.

RESPONDENT: ... that you're... that you're not good enough? Or where did that come from? You know?

INTERVIEWER: Well, I think that definitely deserves some thought, because it is one of the themes of our work together. But I'm imagining your dad as a mechanic. And you got your brains from somewhere. I mean, I imagine your parents were pretty bright people. You know.

RESPONDENT: Yeah.

INTERVIEWER: And being a mechanic is a different kind of talent. That's all. But it involves some intelligence. But he it sounds like didn't feel good about the type of intelligence he had, which is why he had to put down the college boys.

RESPONDENT: Yeah.

INTERVIEWER: Right?

RESPONDENT: Yeah, yeah.

INTERVIEWER: So some of it you probably earned honestly. Right? Because when we don't feel good about ourselves we tend to just pass it on down the line.

RESPONDENT: Sure.

INTERVIEWER: Right?

RESPONDENT: Sure.

INTERVIEWER: And then you were a fish out of water because you weren't going to be a mechanic, you weren't going to be a laborer, you were going to be a college boy, and that's not necessarily what we do in this family.

RESPONDENT: Mm hm.

INTERVIEWER: Right. And so instead of... And I can see echoes of that. My grandmother, my paternal grandmother had a college degree, but my paternal grandfather had a sixth grade education. And couldn't read well, but could do complex mathematics in his head. So he was very bright. And my dad, who had a college education and went on to get a master's degree, a doctorate, whatever, they had nothing to talk about. Because my grandfather was like, "What do you do?" Right. But his own insecurity didn't allow him to really be supportive and understand what my father was doing. But those brains came from somewhere. [50:00]

RESPONDENT: Yeah. Yeah.

INTERVIEWER: Tell me what you're sort of taking away from this.

RESPONDENT: Yeah, well, what you were just saying there, that sense of like, you know, I put myself in this place where there's sort of this alienation that gets built up.

INTERVIEWER: Mm hm.

RESPONDENT: And it's like, okay, now I don't know how to relate to you. Yeah, and then my mind was just jumping to, "Oh, well, look at that. Now isn't that kind of what's going on in your marriage relationship?"

INTERVIEWER: Explain.

RESPONDENT: That, you know, it's like... you know, whether it be... you know, whatever. I mean, there's a lot more things going on than that. But now I'm in... now I'm in a completely different career path than... maybe two career paths different than when we started out.

INTERVIEWER: Sure.

RESPONDENT: And it's just like how much...

INTERVIEWER: Getting farther and farther apart?

RESPONDENT: Yeah. It's like it was so nice to be able to just have conversations with people on the trip that could speak my speak.

INTERVIEWER: Mm hm.

RESPONDENT: And it was really nice to be understood... [laughs]

INTERVIEWER: Yeah.

RESPONDENT: ... by people for three weeks.

INTERVIEWER: Understood, appreciated. And validated.

RESPONDENT: Yeah, yeah, yeah. Yeah, yeah.

INTERVIEWER: But I do wonder if you belong far more places than you think you do. But because of the old script of alienation. Right?

RESPONDENT: Mm hm, mm hm.

INTERVIEWER: I mean, I see you very easily... You know, one of the interesting things about Phoenix University for me, and this is my twelfth year here, is that there are so many students that come here who are smart, and have never been told "you're smart," and have had to crawl over glass to get here and do well.

RESPONDENT: Right.

INTERVIEWER: And then they find people of like minds, they find other people who have had non-traditional career paths...

RESPONDENT: Yeah.

INTERVIEWER: ... and professors who go, "Wow, you're really smart. Why don't you do these twelve things," and the students are shocked and surprised. And it's kind of this amazing place of growth. I mean, I hope bringing freshmen here doesn't kind of change that. But maybe this is where you belong and you're doing what you're supposed to be doing at this point...

RESPONDENT: Yeah, sure. Sure.

INTERVIEWER: ... in your life experience and varied career path and everything you've been through, you're going to pull all of that out of you and that's going to go directly into your work as a counselor.

RESPONDENT: Sure, sure.

INTERVIEWER: So you're not actually starting from 20 years ago, you're starting from today.

RESPONDENT: Yeah.

INTERVIEWER: And maybe you don't have to project or interject the feeling of being an impostor. Because I don't think you are here.

RESPONDENT: Mm hm. [pause] Yeah. No, it... yeah. No, and I think that that trip... I think that the trip really helped me to feel that.

INTERVIEWER: Mm hm.

RESPONDENT: You know, again, that sense of family...

INTERVIEWER: Yeah.

RESPONDENT: ... a sense of belonging, a sense of like, wow, okay, okay. You know, some validation. It's like, okay, I'm ready to jump...

INTERVIEWER: You can be like that in your life.

RESPONDENT: Yeah. [53:00]

INTERVIEWER: It can be like that in your life.

RESPONDENT: Mm hm.

INTERVIEWER: And in some places, maybe not at home, but in some places, you might have more control over that than you think you do.

RESPONDENT: Mm. Mm hm, mm hm. Yeah, yeah.

INTERVIEWER: What would it be like if you lived like that, with that feeling more often than not?

RESPONDENT: Well, I think it would... I think it be probably more energizing.

INTERVIEWER: Mm hm.

RESPONDENT: Probably more productive.

INTERVIEWER: Okay.

RESPONDENT: You know, I could see myself getting things [snaps fingers, snap, snap]. It's like psssst! [hand gliding along]. You know, it's like being in the zone. It's like, "Okay, here we go."

INTERVIEWER: Mm hm. You're a driven guy, Seamus.

RESPONDENT: Yeah, I must be.

INTERVIEWER: That's not a bad thing to be.

RESPONDENT: Yeah, yeah. So I think it's finding all of those pieces, and it's like setting those pieces up, and it's like, I've got a little talent for this, I'm enjoying what I'm doing, it seems to be beneficial. It's got all of these things going for it, and it's easy to get... it's easy to get into that place. And I think when I'm there what I recognize is that I have a little bit of talent for being the orchestrator or the conductor.

INTERVIEWER: Okay.

RESPONDENT: It's like when I really got into my place as a teacher I felt like I could feel the... I could feel the being able to see it all, and then being able to like delegate things and make... you know, seeing the talents in kids, and making things happen. And pulling... making student organizations happen, and putting the right people in the right places, and that kind of thing. So it's like, yeah, I know I have some gifts for that, I know I can make that happen. [55:00]

INTERVIEWER: Yes you do. So of course then actually this career path makes a lot of sense. It's congruent.

RESPONDENT: Oh yeah. Yeah.

INTERVIEWER: So maybe you become Dr. Seamus, I can totally see that. Maybe you go on and you're a professor.

RESPONDENT: And I think that that was a seed that I planted a long time ago. And it was like, I'd really like to do that someday.

INTERVIEWER: So this is not a shock.

RESPONDENT: It's not a shock, except that I wrote another story along with that that said that in order to be able to do that you're going to have to be an expert at whatever it is that you're doing.

INTERVIEWER: Pfff! Who told you that?

RESPONDENT: I did.

INTERVIEWER: [laughing] Let me tell you...

RESPONDENT: And I'm brilliant.

INTERVIEWER: [laughing] Uh, I don't know.

RESPONDENT: But that's what I'm say...

INTERVIEWER: But I'm a full-time professor and I don't think we're an expert at anything.

RESPONDENT: But yeah, see, that's my own tripping block.

INTERVIEWER: Yeah.

RESPONDENT: That I set that standard.

INTERVIEWER: Mm hm.

RESPONDENT: So when somebody else is coming and trying to... and it's like, well, wait a minute, you're not meeting...

INTERVIEWER: You know, I think meeting with Silas will be really good for you. I want you to ask him a question. You could always tell him that I told you to ask a question if you feel comfortable doing that, but you don't have to. But ask him, when did he feel like he became the expert. [pause] And what does he feel like he's an expert in.

RESPONDENT: Mm hm.

INTERVIEWER: Just ask him those questions and see what he says.

RESPONDENT: All right.

INTERVIEWER: You know, "When did you feel like you became the expert? And what do you feel like you're an expert in?" That word, expert.

RESPONDENT: Yeah, yeah.

INTERVIEWER: You know. And then if he asks you where it's coming from, whatever, you can blame it on me. Or you cannot. But, you know...

RESPONDENT: Mm hm, mm hm. [57:00]

INTERVIEWER: I think your idea of what it means to have a doctorate, or what it means to be a professor, it's really just who you are and what you bring. And if you were a talented teacher to kids, you'd be a talented professor.

RESPONDENT: Yeah. And when I sit back and I analyze the professors that I've had, it's like, well, I've had a handful of really good ones.

INTERVIEWER: Sure.

RESPONDENT: But most of them, mmm yeah, I could have done their job.

INTERVIEWER: Okay.

RESPONDENT: Not even knowing what the curriculum is. It's like, well, give me five... give me five, ten minutes with the curriculum...

INTERVIEWER: Well, this is... somebody might take you up on that. [laughs]

RESPONDENT: Give me five, ten minutes with the curriculum, I'm sure I'll do a better job than whatever it is...

INTERVIEWER: And why do you think that is?

RESPONDENT: I don't know. (a), I've done enough teaching to know that... Yeah, what we're teaching is people, not a curriculum. [58:00]

INTERVIEWER: Okay. But why do you think it is that you think you could do that, do a better job? What factor do you think?

RESPONDENT: I think that probably when I feel like I could be doing a better job than whoever happens to be in front of the... you know, it's that I'm intuiting that they really don't want to be there, or...

INTERVIEWER: Okay. So what do you call that, that... what you have?

RESPONDENT: Well, I think... you know, I know...

INTERVIEWER: Okay.

RESPONDENT: ... that there are just some people that have the talent to be able to do that.

INTERVIEWER: The talent, or maybe the passion or the energy.

RESPONDENT: Yeah. Yeah.

INTERVIEWER: So when you're up there... you know, when you were telling me about orchestrating things, seeing talented kids, that requires energy.

RESPONDENT: Mm hm.

INTERVIEWER: Right? Or passion. Passion is just another way of saying energy, it's a particular type of energy. Right?

RESPONDENT: Mm hm.

INTERVIEWER: So I think good teachers have a passion for what they do.

RESPONDENT: Sure.

INTERVIEWER: It looks different, depending on who you are.

RESPONDENT: Yeah, yeah.

INTERVIEWER: Right? But they're energized by what they're doing...

RESPONDENT: Sure.

INTERVIEWER: ... and they're passionate about their subject area. Right. So is that why you're saying you think I could pick it up in ten minutes and do a better job, because is that the it that you're talking about?

RESPONDENT: Yeah, I think it's the it of being able to connect with people.

INTERVIEWER: All right, but that is one of the things that drives you. And that is why you're not an imposter.

RESPONDENT: Mm hm.

INTERVIEWER: You know, I think in our early work together I said, you know, you're a deep guy, and connecting to people is important to you.

RESPONDENT: Mm hm.

INTERVIEWER: Right. You're not an unemotional man at all. And so that is the part that makes you not an imposter. [pause] Not in this environment. [1:00:00]

RESPONDENT: Yeah, yeah. Yeah. [pause] Yeah. I think that... I think I see that. You know, certainly after this trip I'm feeling less of those... you know, that insecurity.

INTERVIEWER: Yeah.

RESPONDENT: You know, about the program, and feeling like... To a certain degree I have to admit that I've been kind of bored with the graduate level classes that I've been taking so far.

INTERVIEWER: Okay.

RESPONDENT: It's like, yeah, this has not been really difficult.

INTERVIEWER: Well, but it... I don't think it's going to be difficult for you. I don't think it's about being difficult. It's about what are you going to take with what you're doing and channel it into the clinical realm. Right? So I don't think something has to be difficult to be challenging, or something has to be difficult to change us. It may not be academically difficult for you at all. And you may find that the doctoral level classes are... they may be work intensive, but not necessarily academically difficult. Right?

RESPONDENT: Yeah.

INTERVIEWER: But that's not the measure of anything, right. It's kind of like, what are you going to do with this information?

RESPONDENT: Yeah, yeah.

INTERVIEWER: You know, how are you going to be changed by it, how are you going to change it, and what kind of counsel... like where are you going to channel it?

RESPONDENT: Yeah.

INTERVIEWER: Right. So what are you going to do with it? So I don't think it... I don't think you have to feel like you're being challenged to death academically to kind of take in the knowledge and then to do something with it.

RESPONDENT: Yeah. That's a good point. I think this probably needing to rethink or re-envision what a master's program... what a doc program looks like.

INTERVIEWER: Yeah.

RESPONDENT: And it's like... yeah. Because it's not serving me real well right now, you know, to have those old notions.

INTERVIEWER: You know, I don't learn anything to mastery until I have to teach it to somebody else.

RESPONDENT: Right. [1:02:00]

INTERVIEWER: Not ever. Not ever. Like I learned DSM-V really, really well not in my doctoral program, but when I began to teach practicum internship.

RESPONDENT: Right.

INTERVIEWER: Right? I think I was a good counselor in graduate school, but when I really had to teach other people how to be counselors then I had to learn it to mastery. And mastery changes. I mean, you have to change mastery to remain good at it.

RESPONDENT: Yeah.

INTERVIEWER: So instead I guess kind of as we end today what I would challenge you to do is find your joy in what you're doing. Find your joy in it. And enjoy the hell out of it.

RESPONDENT: Mm hm.

INTERVIEWER: Right, just really enjoy what you're learning, enjoy where you are, enjoy the fact that you belong.

RESPONDENT: Yeah, yeah.

INTERVIEWER: You know, enjoy the fact that you developed this great relationship with this very knowledgeable man who sees things in you, and feel free to pick his brain about things, and if he offers you opportunities, I can tell you from firsthand experience, take them. And challenge yourself to continue to grow...

RESPONDENT: Mm hm, mm hm.

INTERVIEWER: ... about things. And face... you know, we're working on killing off the old script. It doesn't fit.

RESPONDENT: Yeah. Yeah.

INTERVIEWER: And it doesn't have to hold you back. So find your joy in what you're doing, and know that you belong here.

RESPONDENT: Yeah. Yeah. No, and I think I do. You know, really I think...

INTERVIEWER: Good.

RESPONDENT: ... if the trip gave me anything, it gave me that. So that was... I brought souvenirs back for people in the family...

INTERVIEWER: Okay.

RESPONDENT: ... and I'm like, I don't really need anything.

INTERVIEWER: Yeah.

RESPONDENT: Because I got that.

INTERVIEWER: Well, I'd love to see a couple pictures here and there when you...

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: Okay. I was like, "I'm remiss. Oh, I'm remiss in my things."

CLIENT: Should I post-date?

THERAPIST: Um, do whatever makes you happy, it's okay. As long as I have your permission it doesn't matter.

CLIENT: Okay.

THERAPIST: Thank you. So how are you? How was the letdown from India?

CLIENT: Well, I still have a souvenir from India

THERAPIST: Uh oh! Good or bad?

CLIENT: Ear infection.

THERAPIST: Mm!

CLIENT: I had a cold, a sinus infection.

THERAPIST: Yeah?

CLIENT: And then it developed into bronchitis. And then it developed into this ear infection, and it's just hanging on. And now the last couple of days I'm like... it's starting to like... I'm feeling it in my throat.

THERAPIST: Did you get some antibiotics?

CLIENT: I called... I went to my doctor two weeks ago...

THERAPIST: Yeah.

CLIENT: ... and he's like, "Yeah, it's right in there, but you know what, let's try to avoid the antibiotics. Just ride it out. You can ride it out." And now it's like I'm like, "Dude, if I'm getting strep out of this I'm really not going to be happy."

THERAPIST: Yeah.

CLIENT: So I called him this morning and just filled him in on the details and I'm like waiting for a return call.

THERAPIST: "Can you just call it into the pharmacy and not make me suffer?"

CLIENT: I've got another ace in my... I got another friend...

THERAPIST: Okay.

CLIENT: ... who's a doctor. He's like, "Look, if he doesn't give you meds just call me, I'll write you something."

THERAPIST: Okay. That's great. Because they don't like to do that. They don't... you know, they're like, "No, I won't even do that for my mom." So that's a good friend, keep him around.

CLIENT: Yeah. So I'm like, "Just give me a Z-Pak. I just need to get over this thing."

THERAPIST: Sure, sure.

CLIENT: I'm in classes where I need to hear. I can't hear out of my right ear.

THERAPIST: Oh, gosh.

CLIENT: And I've got hearing loss in my left ear. So I'm working on like less...

THERAPIST: I don't think I knew that you had hearing loss.

CLIENT: Well...

THERAPIST: A little bit?

CLIENT: You know, it's from being in... teaching for 15 years in industrial art shops with no hearing protection. [00:02:00]

THERAPIST: Yeah, I bet.

CLIENT: So.

THERAPIST: I bet, I bet.

CLIENT: You know, yeah. So just...

THERAPIST: So you were gonna think about some things.

CLIENT: I've been thinking about a lot of things.

THERAPIST: Oh, do tell!

CLIENT: I'm trying to remember our conversations. But I'm thinking probably the... you know, the thing that I was talking about the most that day was probably the doctoral thing.

THERAPIST: Yeah.

CLIENT: And I've kind of like decided that, yeah, I can kind of put... I can kind of slow that down a little bit.

THERAPIST: Okay. Okay.

CLIENT: You know, it's like it's still gonna be there. And it gives me some time to reflect on this. Because I'm like, okay, I really need to see this doc program...

THERAPIST: Yeah.

CLIENT: ... because I'm thinking I feel like... I know that we had this discussion, but I'm like, I just need a foundation.

THERAPIST: Sure.

CLIENT: I need a foundation. And I'm like... it's not that I'm feeling like I'm not good enough or... like I know I could do the work, but...

THERAPIST: Sure.

CLIENT: ... I need a foundation.

THERAPIST: So you feel like you'd—which is completely fine—you kind of feel better about it by getting the master's degree and then going on.

CLIENT: Or at least getting enough of the master's degree to say, "Okay, I've got a foundation."

THERAPIST: Sure.

CLIENT: And if like... you know, there's an experience that's parallel or similar to practicum...

THERAPIST: Yeah.

CLIENT: ... where it's like, "Okay..." You're doing exactly the same thing.

THERAPIST: You mean at the doctoral level.

CLIENT: At the doctoral level.

THERAPIST: Yeah, that's like...

CLIENT: And I'm like... again, I don't know enough about the program to be able to say that, you know.

THERAPIST: Sure.

CLIENT: But the whole point was to like get myself this career for the third half of my life.

THERAPIST: Yeah.

CLIENT: And I just need... you know. And I've had enough life experience to know that, you know, from building a house, it's like the most important thing is to get the foundation right.
[00:4:00]

THERAPIST: True. True.

CLIENT: So it's like... And I recognized going into these beginning counseling classes that I'm doing right now. It's like, "Oh yeah, I've got a lot to learn here. [unclear]"

THERAPIST: Sure, you have a lot to bring and a lot to learn, which is always the case.

CLIENT: Well, yeah. Yeah. And I'm not like... I'm not in that place of feeling like I'm not good enough, or I don't...

THERAPIST: Okay.

CLIENT: You know, it's like really, I...

THERAPIST: So it sounds like you kinda did some work around that and kinda looked within. Because the last time we talked sort of your gut instinct was, "I don't know." And then it was, "Well, I could do that." But it's kinda nice to know you can do it and you don't have to do it right now.

CLIENT: Yeah. And then part of me really wants to sit with it and go, "Is this really the direction I want to go?"

THERAPIST: Sure.

CLIENT: You know, is that academic path the one that I want to go down?

THERAPIST: Sure.

CLIENT: Or am I more of a clinician? Do I want to...

THERAPIST: Well, you get to be both. I think that's the thing that's exciting about it.

CLIENT: Yeah.

THERAPIST: I mean, that's what I do for my full-time job.

CLIENT: Sure.

THERAPIST: And, you know, I think either way. I mean, the kind of great thing about it is the compliment's been paid, you've thought about what it sort of has meant to your life and what it's meant to your career path, but either way you're going to get there.

CLIENT: Yeah.

THERAPIST: And whether you decide to just stop at the master's degree—you can still teach on adjunct level if you want to, and still practice and become licensed—or go on for the doctorate.

CLIENT: Right.

THERAPIST: Either way it's a win-win. So...

CLIENT: I think it is, and I think that one of the things... and I don't know if we had this discussion, but was it before or after our meeting? But I went up and had a discussion with Dr. Fred about it.

THERAPIST: Okay.

CLIENT: Was that...

THERAPIST: No, I think you were going to.

CLIENT: So it was like, you know, she's like, "Well, I'll take a look at your transcripts from your other degrees and see what you got." And I really felt like she was trying to work with me.

THERAPIST: Sure.

CLIENT: But it's like, look, her position is, I have to be legit about this. [00:06:00]

THERAPIST: Oh yeah. Well, that was always going to be the case.

CLIENT: Yeah. But in the process of looking at my transcript she like found... you know, she did some stuff, it's like, "Well, we could call this class this." She ended up giving me like three or four classes.

THERAPIST: Okay. Yeah.

CLIENT: I'm like, all right, I'm not going to push this thing. I mean, I felt like she did some things. And it was like we recognized that I had taken this intro to research class.

THERAPIST: Right, right.

CLIENT: It's been a long time ago, but I took an intro to research class.

THERAPIST: Sure.

CLIENT: She goes, "Well, you've taken an intro to research class." It's like, "Well, we can get rid of the 6610 easy."

THERAPIST: Yeah, yeah.

CLIENT: You know. And it's like she gave me a couple of other ones. It's like in the end I feel like, okay, she gave me a semester.

THERAPIST: Sure. Oh, that's great. Did she give it to you towards this master's degree?

CLIENT: Yeah.

THERAPIST: Well, that's great.

CLIENT: So I'm like, okay.

THERAPIST: That's great.

CLIENT: You know?

THERAPIST: Yeah.

CLIENT: I felt like I don't want to overdo this thing. It's like I feel like... and for my own sake. I want to make sure that I can do this. You know, that I've got enough of a foundation to do this. And I feel like, yeah, self confidence-wise it's like, okay, I know I'm going to be able to do this.

THERAPIST: Sure.

CLIENT: I recognize though that throughout my other career as a teacher, a woodworker, it's like you went and you did the classes that you needed to do to learn a new skill. It's like I regularly took classes in the summertime, week or two long classes to learn a new school. And that's what I feel like I'm doing here, it's like I'm learning some new skills. [00:08:00]

THERAPIST: Well, and you know, I think you... it sounds like you're making kind of an informed decision and the right one for you, but this is not... she did you kind of a nice turn in looking at your transcript again, but that's kind of what program directors do. Like I do it all the time. And I'm saying it to say it's not that she's doing you a special favor, it's kind of like what we do. So any time a student says, "Can you review my transcript, I think these classes might count for something," that's her job to do it.

CLIENT: I see.

THERAPIST: You know. And so don't feel like... Because quite frankly, she has to approve it and the registrar's office has to kind of sign off on it. So you're not... I guess I want to say, you're not cheating the process, right.

CLIENT: No. And I don't necessarily feel like I'm doing that.

THERAPIST: Okay.

CLIENT: I sort of felt like it was like she took a look at it, she did all she felt she could do at this point, and said, "You know what, this is about all I can do."

THERAPIST: Here's what you got. Right. You got three classes. Sure.

CLIENT: You know. And I'm like, okay.

THERAPIST: Yeah.

CLIENT: I'm good with that. I'm gonna at this point just say smile... I'm gonna smile, say thank you, and just kinda let it ride for a little bit.

THERAPIST: Yeah.

CLIENT: I know that they opened up their graduate... their deadline, they extended their deadline, so they're opening it up to allow other people to get in.

THERAPIST: You mean the doctoral program?

CLIENT: I'm sorry, the doctoral program.

THERAPIST: Okay.

CLIENT: But at this point I'm just really like, yeah, let's see where it's at in a year.

THERAPIST: Okay. Well, I mean, it sounds like you're very comfortable with that decision.

CLIENT: You know, I think I am.

THERAPIST: Good.

CLIENT: And I really... I'm kind of engaged in these classes now, and I recognize, wow, this is... If I felt like all of the classes that I was sitting in were not challenging, and I wasn't learning anything, and it's like, "What's the next thing?", then I'd be feeling different about that. I'm sitting next to somebody in one of my classes who's there. [00:10:00]

THERAPIST: Okay.

CLIENT: You know, she's coming here from South Africa.

THERAPIST: Okay.

CLIENT: She's got a master's degree in counseling.

THERAPIST: Yeah.

CLIENT: So we're talking. It's like, "Why aren't you in the doc program?"

THERAPIST: Right.

CLIENT: And she goes, "Well, X, Y, and Z classes they're not counting."

THERAPIST: They are not going to count, yeah.

CLIENT: "That's why I'm in these classes. So I have to take these classes." And I'm like, "Did you talk to anybody about that? Who did you talk to about that?" So I'm like...

THERAPIST: International transfers are difficult.

CLIENT: Are they really?

THERAPIST: Mm hm.

CLIENT: Okay.

THERAPIST: Mm hm. They're more likely to... disinclined to accept things than to accept them. Because psychology in counseling is so culturally based. And given that this is a [K credit? 10:45] program they have... very guide...

CLIENT: No, I get it.

THERAPIST: ... guidelines. But it sounds like you've really thought a lot about this. What about the compliment that Nick Peterson paid you, what are you going to do with that?

CLIENT: Well, you know, I think I want to continue to try to maintain that relationship as best I can.

THERAPIST: Okay.

CLIENT: You know, if there's a chance to be a grad student for him I'll pursue that. But I'll try to maintain that relationship as best I can. And I'm not exactly sure how to do that, but it's like just trying to put myself in his path.

THERAPIST: Sure. I don't think he'd probably mind if you stayed in touch with him and asked him if he's got any projects he, you know, wants a fellow Taoist to join him on.

CLIENT: Right.

THERAPIST: I don't think he has a problem with that. I can't speak for him, but I don't think he would.

CLIENT: Yeah, you know. So it's like I think that that's... Yeah, it's good. You know, I want to maintain that without making it look like I'm a, you know, gold digger or whatever. It's just like I like the guy, and I want to maintain...

THERAPIST: Well, so that's funny to me. Why would he think when he initiated kind of the discussion with you that you are... [00:12:00]

CLIENT: I think that it's just maybe a perception that people might have.

THERAPIST: Of you?

CLIENT: Yeah.

THERAPIST: Where is that coming from?

CLIENT: You know, I don't know. It's probably... You know, it's kinda the way I operate.

THERAPIST: Explain.

CLIENT: As a student, like when I was in high school...

THERAPIST: Okay.

CLIENT: ... I was just like... not that I felt like I was doing it to manipulate.

THERAPIST: Okay.

CLIENT: I recognize now through further study of like the Myers-Briggs thing, the NFP personality type, it's like it's just how we operate. We want the connections, you know.

THERAPIST: So explain to me. Go ahead.

CLIENT: Just, uh... I recognize that in order for like the education process to happen it's like, you know, I want to know more than just what the teacher shows up with.

THERAPIST: Sure.

CLIENT: It's like I want to know the person behind... I want to know the rela[tionship]... I want to have a relationship with the instructor outside of the classroom.

THERAPIST: Okay. But why would that be kind of a negative thing?

CLIENT: Evidently it's...

THERAPIST: Because I don't perceive you as having major boundary issues and calling people at home.

CLIENT: I think it's just one of those kind of things where it probably... I don't remember an incident, but it's like anybody who has a relationship with the teacher...

THERAPIST: Yeah.

CLIENT: ... you know, the teacher's pet, brown noser, or that kind of thing. It's like I never recog[nized]... but that must have happened, you know, throughout the process, because I feel that kind of thing.

THERAPIST: Yeah, you know, this is I think another theme again I think, being really concerned about what other people think of you.

CLIENT: Oh my God, that's the number one thing.

THERAPIST: Yeah.

CLIENT: Yeah. Yeah, yeah.

THERAPIST: But it's pretty consistent through your whole life.

CLIENT: Oh yeah.

THERAPIST: As well as sort of this sort of existential search for meaning, purpose, you know. But that sort of is a...

CLIENT: That's the dragon that's always been there. [00:14:00]

THERAPIST: Yeah, can we... It keeps sort of coming back to that. Can we talk a little bit about...

CLIENT: Sure.

THERAPIST: ... why you think wanting a relationship... and it's probably with just certain professors, it's probably not with every single one of them.

CLIENT: [sighs] [pause] No, probably not. But I always recognize that it's the way that I operate in a class.

THERAPIST: Okay. What does it look like?

CLIENT: Um... [pause] I usually feel like I want to figure out... and usually it doesn't take long. It's like something that I'm feeling unclear about.

THERAPIST: Okay.

CLIENT: And recognizing, okay, this is an opportunity for me to go spend time, office hours, get to know this person. Here's my concern, we've got a relationship, and now I feel comfortable, and you know.

THERAPIST: So your wanting to kind of connect with the people who teach you is a way to feel comfortable?

CLIENT: Hm. Is it that? Maybe. You know, I'm just going to say this because the thought came to my mind because we were talking about this, but is it to make sure that they like me?

THERAPIST: Yeah, there's some shame here I think.

CLIENT: Mm.

THERAPIST: Like shame that you need that.

CLIENT: That I need the help?

THERAPIST: No.

CLIENT: No.

THERAPIST: Because I don't know if you need the help, I think you just need the connection. I mean, the connection comes in the guise that you need the help.

CLIENT: Mm hm, mm hm.

THERAPIST: You know. But it's almost like you're ashamed of wanting to be connected.

CLIENT: Am I ashamed of that?

THERAPIST: Or how you want to be connected.

CLIENT: It might be. Or it's how other people are going to perceive that I'm running around having these connections or whatever, I don't know. [00:16:00]

THERAPIST: Yeah. There that is again. What's that about for you?

CLIENT: Hm. Just, you know, the thing that ignited... or touched on it, maybe that third rail is that constant that's always been there. It's like needing, that deep needing to be liked. You know, accepted.

THERAPIST: And how do you know when you are?

CLIENT: Oh God. I don't know if I ever am. That's the exhausting part of all of that. It's like how do I know I'm ever... it's like you set out all these... you know.

THERAPIST: Mm hm.

CLIENT: And I see how I've done that kind of thing in relationships, you know, marriage relationship.

THERAPIST: Right. Because in some ways this kind of echoes all the family stuff and your relationship with your wife.

CLIENT: Mm hm.

THERAPIST: But I guess one of the things that just kind of popped for me is, why are you not enough? I mean, I perceive you as a very likeable person, you know, without really having to try. I mean, you might feel like you have to try, I don't know if that's actually true. And I wonder why you think you have to work so hard to connect with other people.

CLIENT: [pause] I'm not sure that I've ever had to really think about that question. I think it's just always been there, that's just who I am kind of thing.

THERAPIST: How will that play out with your clients?

CLIENT: [chuckles] Yeah, that's a good question. Yeah. And I'm sure that it's going to be like every other story in my life, that, you know, you have to love me. You have to like me. I'll be devastated if you don't like me. [00:18:00]

THERAPIST: Well, I mean, you sort of [unclear] yourself. But I think it's pretty painful, because it's such a long theme.

CLIENT: Yeah. Mm hm. Yeah. And I recognize even though it's like... uuuuh... I can't point to specific examples, but it's like the amount of trouble or situations that I've got into in my life because of this. You know, it's like...

THERAPIST: Like the fiancé backing...

CLIENT: Right.

THERAPIST: Yeah.

CLIENT: Yeah. That's probably the... you know, the best example, but...

THERAPIST: But what if you're missing it, and what if you're actually really likeable and easily acceptable? More often than not. You know, in some ways you're using the framework of your family and your marriage—which makes sense, I mean, these are huge things—as your framework of relating to everything. But I wonder if that is the case. I mean, what if you just are? What if you really actually don't have to work at it, at least outside of home?

CLIENT: Well, I think that... [pause] I think that there's a part of me, whatever that percentage is, that really knows that.

THERAPIST: Mm hm.

CLIENT: You know, and I know that from experience.

THERAPIST: Mm hm.

CLIENT: You know, that experience of being in high school, and in college, and being a teacher. But there's been this break where... you know, there's been this 13-year break, 14-year break, where I've been kind of on my own.

THERAPIST: Okay. Through the marriage?

CLIENT: Through the marriage, through my job choice.

THERAPIST: Sure.

CLIENT: You know, kind of the sole... I've been... it's been me and another guy working.
[00:20:00]

THERAPIST: But why would what you know to be true simply cease to be because you changed careers? You know, why would you...

CLIENT: Yeah. Because I'm not getting that reinforcement.

THERAPIST: But how do you know when you get the reinforcement? Right. So how do you know when someone likes you?

CLIENT: I think it's just that connection, it's that intuitive connection of being with people.

THERAPIST: But it's not enough?

CLIENT: [whisper:] It's not enough?

THERAPIST: It's not enough to heal you.

CLIENT: Well, no. Because I think ultimately underneath all of it is the one person that has... that doesn't like me.

THERAPIST: Is?

CLIENT: Me. [laughs]

THERAPIST: Okay.

CLIENT: You know, and I had that kind of realization, it's like, "Oh yeah." For a while I had done the practice of like trying to look at myself in the mirror and say some kind of a positive thing to me, you know, as I'm walking by.

THERAPIST: Okay.

CLIENT: And I tried that for a while, and it was an arduous task.

THERAPIST: And why was it difficult you think?

CLIENT: Uh... You know, I think it's just too many years of like not liking the image looking back.

THERAPIST: Physically?

CLIENT: Mm... probably physically. Yeah, it might be deeper than that. I mean, there maybe have been times when it was like not liking the character as well. But yeah, you know, I recognize that I'm in that pattern again. It's like, yeah, can I walk past a mirror and not... It's like, "Oh my God, really? This is the message you send yourself every time you walk past a mirror? That's really fascinating."

THERAPIST: And what parts of yourself are you picking apart? [00:22:00]

CLIENT: Ah... I don't know. [pause] That's a good question, I'm not sure... You know, it's like those pictures that... anorexics looking in the mirror.

THERAPIST: Yeah.

CLIENT: And what do they see when they're looking in the mirror?

THERAPIST: Right.

CLIENT: It's like... I think I started to... It's like the mirror, and now seeing the images on the videotapes of counseling sessions.

THERAPIST: Okay.

CLIENT: I'm like...

THERAPIST: What do you mean?

CLIENT: It's like, "Oh, here's that... that same person is in both of those images." It's like... you know.

THERAPIST: And that doesn't answer the question.

CLIENT: I know.

THERAPIST: Of what do you see.

CLIENT: I'm trying to get at it. It's the... [pause] Yeah. You know, when I look at that image I'm not seeing the image that I think other people perceive.

THERAPIST: Okay. So you think that other people perceive sort of a more positive image of you.

CLIENT: More positive image, maybe more self-confident, more...

THERAPIST: Yeah. But that's part of you too. Right? You know, you brought up something in the first session and we haven't really talked about it. You sort of talked a bit about a physical deformity.

CLIENT: Right, right, right.

THERAPIST: How much of that do you think plays into your self-image?

CLIENT: You know, I think it's probably really huge. I think that it's probably one of those things that's been there.

THERAPIST: Yeah. Can you tell me a little bit more about it?

CLIENT: The actual physical-ness of it?

THERAPIST: A bit, and about how it's impacted you.

CLIENT: Well, I think that the... what I've been able to discover on my own...

THERAPIST: Yeah. [00:24:00]

CLIENT: ... because this is something that we don't talk about.

THERAPIST: Sure. And this is something you were born with?

CLIENT: Right, right.

THERAPIST: Okay.

CLIENT: So it's not necessarily that rare, but it's... it's a... a slight... it's a deformity where part of the foreskin kind of grows...

THERAPIST: Okay.

CLIENT: ... together and it has to be like physically... you have to get in there and do a little...

THERAPIST: Sure.

CLIENT: ... minor surgery.

THERAPIST: Okay.

CLIENT: Um... Not that it's... you know, not that that's terrible...

THERAPIST: Right.

CLIENT: ... but, you know, it definitely puts you in a place of like, okay, when I'm in a locker room experience...

THERAPIST: Right.

CLIENT: ... it's like one of these things... [laughs] ... like the other...

THERAPIST: Right. And do you remember kind of being in a locker room...

CLIENT: Oh gosh, yeah, there was...

THERAPIST: ... and either feeling like you were gonna be stared at or being teased about it?

CLIENT: Yeah. And I think that I... like I ran away from those experiences.

THERAPIST: Sure.

CLIENT: I didn't walk away from those experiences.

THERAPIST: Well, it would be pretty terrifying.

CLIENT: Oh yeah.

THERAPIST: Boys can be pretty cruel.

CLIENT: Oh, exactly.

THERAPIST: Yeah.

CLIENT: And I think that... I didn't even have to go there, because I was in that situation with like fifth grade basketball.

THERAPIST: Okay.

CLIENT: You know. Now I think back about it, it's like, "Fifth grade basketball? Why did we need to take showers after practice for fifth grade basketball?"

THERAPIST: That's a good point.

CLIENT: Then I started to think about who the coach was.

THERAPIST: Yeah?

CLIENT: And I'm like, "Oh." And we were in a parochial grade school. Oh. This wasn't about... And I'm like, "Oh, how sick is all of this?" [laughter] I'm like, okay. So I don't even want to go there.

THERAPIST: Okay.

CLIENT: But there was another kid who was probably similar. [00:26:00]

THERAPIST: Okay.

CLIENT: You know, in terms of, you know, what we were dealing with.

THERAPIST: Sure.

CLIENT: And it's like there was... it's like I didn't have to be the one getting picked on because he was there, and it was like I figured out ways not to be. And I was out of sports. And I avoided sports...

THERAPIST: Because of it.

CLIENT: ... because of that.

THERAPIST: Yeah.

CLIENT: And I had made it all the way through my high school except for the last quarter of my senior year. I figured out how to finagle my hometown family doctor to give me medical excuses out of PE.

THERAPIST: Yeah.

CLIENT: But he finally wouldn't sign them anymore my senior year.

THERAPIST: Yeah.

CLIENT: And... No, it was the first semester of my senior year, I had to take PE. And so I figured out how to like get around the whole shower thing the first quarter, and then ended up figuring out how to talk my industrial arts teacher into...

THERAPIST: Yeah.

CLIENT: I came out of a study hall one time, and I was down and helping out... I was just waiting to talk to him, and I was working with this special ed student that he had in class, and I was helping him put whatever project he was working on together. And finally... I had been in there the whole period, I was just killing time, and the teacher says, "Robert, what are you doing here?" It's like, "I was just trying to get a pass out of study hall." He said, "Well, I'll get you out of study hall all the time if you want to come down here and work with this kid."

THERAPIST: Yeah?

CLIENT: And I was... This all works because I was skipping out of PE, is what I was doing.

THERAPIST: Yeah.

CLIENT: And he says, "Well, I'll get you out of PE." He was a coach.

THERAPIST: Yeah. [00:28:00]

CLIENT: So all he did is walk down to the PE department, he says, "I'm taking Collins, he's going to work with me." It's like there was no paperwork done, it was just like, [blows].

THERAPIST: But that is such a powerfully terrifying experience, that you had to avoid gym... or sports...

CLIENT: Mm hm.

THERAPIST: ... you know, your whole life so you weren't bullied or teased or...

CLIENT: Exactly.

THERAPIST: Yeah.

CLIENT: And this is... You know, I get how huge this issue has been for me.

THERAPIST: Yeah.

CLIENT: And it's like it's not the first time that we've marched up to the precipice of dealing with this. But, you know, it's huge.

THERAPIST: How did it impact dating and romantic relationships?

CLIENT: Oh. [laughs] I love this... I love this vignette, so.

THERAPIST: Okay.

CLIENT: Libby Howser. I am like biggest crush in the world on...

THERAPIST: I don't think I'm familiar with her.

CLIENT: Well.

THERAPIST: I'm going to Google her when you go.

CLIENT: Go ahead.

THERAPIST: Okay.

CLIENT: I've tried, so you can't find her.

THERAPIST: Okay. [laughter] She's no one famous, then.

CLIENT: Oh, she was pretty famous, but...

THERAPIST: Okay.

CLIENT: ... I didn't realize how famous she was. But yeah, she was new to the school my sophomore year and I just had the biggest crush on her.

THERAPIST: Okay.

CLIENT: Like she sat right behind me in German class, it was my favorite class.

THERAPIST: Yeah.

CLIENT: You know the scene. So finally I think my senior year conditions work out, we're in the play together or something. And I get this opportunity to... we're going to go on a date or something. So I go over to pick her up at her house, I'm just thrilled about this, and get over there, and her mom and her boyfriend are going out.

THERAPIST: Okay.

CLIENT: So it's like nobody else at the house. We were going to go to a movie or something, and it's like... and Libby's like, "Why don't we just stay here?"

THERAPIST: Mm hm. [00:30:00]

CLIENT: So, you know, we start making out on the couch. And then we continue to make out on the couch, and we're just making out on the couch, just kissing and making out on the couch. Finally she goes, "I think it's time for you to go home now." And I was just like, "What is this all about?"

THERAPIST: Mm hm.

CLIENT: You know, it's like, "Okay." And that was pretty much it. [laughs] Well, come to find out later... so this was my senior year, and the summer of my senior year I'm going with a friend, we're sharing a ride, we're working at the same little manufacturing plant together, and he's like filling me in that Libby Howser was known by almost all of the guys in the senior class. You know, she had made the rounds. And he was just laughing. He's like, "Wow. So you didn't make it with Libby Howser? So there's one guy in the senior class she didn't make it with!" [laughs]

THERAPIST: But how is it that you kind of take that as sort of a slam against your masculinity?

CLIENT: No, I don't necessar[ily]...

THERAPIST: Are you sure?

CLIENT: I don't necessarily see it as a slam as much as it was... there's certainly the naïveté. But I also recognize the grip of... you know, it's like I'm not gonna... I'm not even going there, because we can't go there.

THERAPIST: Sure.

CLIENT: You know, this is... Um, yeah.

THERAPIST: Do you think you could have gone there if wanted to?

CLIENT: Well, eventually I did.

THERAPIST: Mm hm.

CLIENT: I just wasn't prepared at that time.

THERAPIST: Sure.

CLIENT: And really at that point in time I had no idea that... you know, I was that naïve that I had no idea that she was... [chuckles] ... that worldly of a girl. [laughs]

THERAPIST: Well, and do we know if she was that worldly of a girl, or do we know what they said?

CLIENT: Mmm... that's true. I don't know this for a fact. [00:32:00]

THERAPIST: Mm hm. And she liked you.

CLIENT: She liked me. And she signed my yearbook.

THERAPIST: And she went out with you, invited you to her house.

CLIENT: Yeah. Yeah. And... Yeah. And I think that there may have been, you know, something there, but...

THERAPIST: Like attraction.

CLIENT: Could be.

THERAPIST: Uh...

CLIENT: But she...

THERAPIST: Um, you know, Seamus, I don't think she would have invited you in her house...

CLIENT: Well...

THERAPIST: ... and proceeded to continue making out with you to kill time.

CLIENT: Yeah. Yeah. No, but... Yeah. It's...

THERAPIST: Is that hard to accept? And quite frankly, maybe she really liked you. Which is why she maybe said, "Let's not."

CLIENT: Mmmm...

THERAPIST: You know. Or maybe she didn't want to go any further.

CLIENT: Yeah.

THERAPIST: The point is, I think, you know, it's sort of like the initial reaction to John Carlson's compliment is the same. The part that gets missed, right, or gets glossed over, is the positive part of the message. She liked you.

CLIENT: Mm, yeah.

THERAPIST: Felt comfortable enough to invite you into her house and make out with you.

CLIENT: Yeah. [pause] Yeah.

THERAPIST: And you felt confident enough to do it.

CLIENT: Yeah. Yeah. [pause] Yeah.

THERAPIST: But that part doesn't stick as much.

CLIENT: No, probably not. You know, you probably... Yeah. [pause] I just started working with Prezi. Have you done anything with Prezi?

THERAPIST: No.

CLIENT: Anyway, I'm just thinking about the fact that... It's really cool. You have the ability to zoom in and out. I mean, it's really kinda cool.

THERAPIST: Okay. [00:34:00]

CLIENT: But I'm thinking about, you know, you can kind of put this big message up here. And then if you put this liiiiittle tiny message way back here...

THERAPIST: Mm hm.

CLIENT: ... you know, on the next screen it appears to be zooming up at you.

THERAPIST: And what's the message that you [overtalk].

CLIENT: Oh, I'm just saying it's like the big messages that I put in the big circles are, you know, "Not Good Enough..."

THERAPIST: Right.

CLIENT: "... I'm a Loser," whatever. And the liliitle message way back there is, you know, "Might be somebody that maybe somebody likes." [laughs]

THERAPIST: Yes. But you know what, but your behavior when you're not looking, there is confidence there. Because you continue to do things and challenge yourself in new ways. So you did have romantic relationships, you did go on to have romantic relationships in college.

CLIENT: Oh yeah. Oh yeah.

THERAPIST: Yeah. And...

CLIENT: And I did... you know, and I did in high school too.

THERAPIST: Yeah.

CLIENT: You know. It's kind of like... Yeah.

THERAPIST: And did it ever cause any sexual problems?

CLIENT: [sighs] No. You know, not really. I mean... But, you know, it is... it has been the... [pause] Yeah, it has been the defining... it has been the defining element of who I am.

THERAPIST: Yeah. Say more about that. That's a powerful statement.

CLIENT: Um... Yeah, you know, and I think it's probably self... it's been the self-identifying, you know.

THERAPIST: Yeah.

CLIENT: It's one of those kinda things, it's like that standard by which all men in America are judged by.

THERAPIST: Right.

CLIENT: And it's like, wow, this is really huge. It's like... So you get it at that level. It's like at the societal level. It's like, [expiration]. [00:36:00]

THERAPIST: Sure. The slam against masculinity, you're not man, or not man enough.

CLIENT: Right, yeah.

THERAPIST: Or this sort of painful thing that you've always had to hide.

CLIENT: And then it's like... then when you're like in the... you know, the whole adolescent scene...

THERAPIST: Yeah.

CLIENT: ... and the whole judging yourself against porn stars.

THERAPIST: Yeah.

CLIENT: And it's like, nobody matches those standards. But then it's like, [expiration], I can't even go there. You know, so you've got that. [laughs]

THERAPIST: Yeah, I mean, on a... You laugh, even though it's painful. But I'm imagining how painful that experience could be, and how it can follow you. But there's still a part of you that proceeded enough to have multiple romantic relationships, to get married, to have children.

CLIENT: Mm hm.

THERAPIST: Right. And so even though you have this doubt that you carry with you, or this kind of... you know, this sense of not belonging or needing, you still are able to... And it's still painful. I mean, I'm not diminishing that. But I guess what I'm saying is, that's the part, this kind of old message, this thing that you hold within you, [all while? 37:18] you don't pay active attention to all the things you're capable of...

CLIENT: Yeah.

THERAPIST: ... to all the ways that... I mean, all these other people who see these positive things in you and respond to you so well can't be wrong. Right? So I wonder if it's that part of you, these messages you got about yourself, if it's those messages that are wrong because you were sort of misplaced in the environments that you were in. [pause] Right? It's a mismatch.

CLIENT: Misplaced. Say that again?

THERAPIST: A mismatch. Right. And so, you know, you were born into this... your family...

CLIENT: Mm hm.

THERAPIST: ... but in some ways you were mismatched with them.

CLIENT: Mm hm.

THERAPIST: Right. If you were born into a family of two teachers you would have been their ideal son. Right.

CLIENT: Yeah. [00:38:00]

THERAPIST: But, you know, I almost got the sense from what you describe that your parents never quite really got you in the way that you needed to be understood. Right. And then we sort of move forward. And then, you know, you become committed to a woman who sort of didn't get who you were becoming...

CLIENT: Yeah.

THERAPIST: ... which was painful for you. Selecting, you know, somebody who...

CLIENT: Yeah, yeah.

THERAPIST: And then of course you sort of blame yourself. But these are really old scripts.

CLIENT: Yeah.

THERAPIST: Painful scripts.

CLIENT: Yeah.

THERAPIST: That do have a place. I mean, I'm not saying that they don't have some place. But I'm saying, that is what you're paying the most attention to in the dark.

CLIENT: Mm hm, mm hm.

THERAPIST: But, you know, you pay minimal attention to the good stuff. Right?

CLIENT: Yeah, and I think that there's... There is kind of like that sense, you know.

THERAPIST: Yeah.

CLIENT: As you're talking about that it's like I'm hearing that, or feeling that, "Yeah, but if you really knew who I was..."

THERAPIST: Then what?

CLIENT: ... you wouldn't like me.

THERAPIST: So what is it that you think that I would not like?

CLIENT: [sighs] And again, I think it goes back, you know, to those older scripts.

THERAPIST: Okay.

CLIENT: And to that sense...

THERAPIST: So what is it, Seamus?

CLIENT: And to that sense that from early on we did not talk about this condition.

THERAPIST: Right. And that's where shame comes from.

CLIENT: Of course.

THERAPIST: Yes. Because any time...

CLIENT: So there must be something terribly wrong with me that we wouldn't talk about this.

THERAPIST: But what if it was because they didn't know what to say or how to talk about it?

CLIENT: Well, of course that's what it was.

THERAPIST: Well, right. But see, that's the part where you're stuck.

CLIENT: Yeah.

THERAPIST: Right? You know, so in my human sexuality class I always like to ask the question, "How many of your parents regularly talk to you about sex?" And out of a class of 35, two or three people raise their hands. Because we can't talk about it and don't talk about it, right.

CLIENT: No, of course.

THERAPIST: And so of course when you catch your six year old masturbating, as most of them do, right, because that's normal, they're just... like they explore their elbow...

CLIENT: Right. [00:40:00]

THERAPIST: ... they explore their genitalia, it feels good. And then the parent goes, "Oh my God, that's so horrible," and the kid learned body shame, right?

CLIENT: Right.

THERAPIST: So you learned it in this really powerful, powerful way...

CLIENT: Right, right.

THERAPIST: ... which kind of enhanced all these negative messages about you.

CLIENT: Mm hm, mm hm.

THERAPIST: But it's a broken script because it's not accurate. It's not accurate.

CLIENT: Yeah. And I think at the...

THERAPIST: It was never accurate.

CLIENT: No. No. And I think that, you know, there have been times and places... You know, really, I've gotten to this place of being able to forgive my parents for that.

THERAPIST: Yeah, but what about you?

CLIENT: [sighs] Yeah, I'm not... I'm not so sure... Yeah, because it's still there. It's obviously still there.

THERAPIST: How did you raise your kids differently than what you were raised?

CLIENT: [pause] Well, I think that we did consciously try.

THERAPIST: What did you do?

CLIENT: Yeah.

THERAPIST: Honest assessment.

CLIENT: [long pause] I do remember having some conversations with... you know, especially the boys.

THERAPIST: Okay.

CLIENT: So I feel like maybe not all that much.

THERAPIST: Not just about sex though. Relationally. What did you do differently...

CLIENT: Oh, relationally...

THERAPIST: ... than how you were raised?

CLIENT: I really think that I tried to interact a lot more with the kids. You know, I tried to be there, I tried to, you know, do the rough house kind of thing...

THERAPIST: Yeah.

CLIENT: ... and play and...

THERAPIST: Did you enjoy them?

CLIENT: Yeah.

THERAPIST: What did you enjoy about it? [00:42:00]

CLIENT: Having the relationship, you know. I feel like... Yeah, I do feel like there is that bond.

THERAPIST: Okay.

CLIENT: You know, I have an individual bond with each one of these kids, and a relationship. Yeah, and there's a closeness there. You know, it's like... So I go, "Yay me," because I feel like I was able to get that... you know, I'm able to be there.

THERAPIST: I hear a 'but' in there.

CLIENT: Mmmm... Well, maybe... I mean, maybe there's always a-little-bit-more-you-could-have-done kind of thing.

THERAPIST: That's always the case.

CLIENT: Yeah. But for the most part I feel like... ummm... It's different. It's different from the way that my folks raised me.

THERAPIST: Because?

CLIENT: I can get on the phone and talk with them. You know, when they call me they want to talk to me. They ask my advice on things. You know, it's like...

THERAPIST: So even though they're all out of the house they are connected to you.

CLIENT: Yeah. Yeah.

THERAPIST: That's huge. That's huge.

CLIENT: Yeah.

THERAPIST: And... but you did that.

CLIENT: Mm hm. Mm hm. Mm hm.

THERAPIST: Where is your embracement—if that's a word—of that?

CLIENT: [drums fingers on desk/chair] Yeah, I see that. Yeah, I see that I'm maybe not quite embracing that as much as I...

THERAPIST: You know...

CLIENT: And I recognized it. I don't know.

THERAPIST: You know, my dad was a therapist...

CLIENT: Uh huh. [00:44:00]

THERAPIST: ... and a teacher. And we were very close. He passed away in 2006. And I think one of the great things about my dad is I knew him kind of as a little girl and my daddy, but then I knew him as a man, and his faults, and all his impatience, you know.

CLIENT: Mm hm.

THERAPIST: And we had a really close relationship. A friendship as well as, you know, he was my dad, right. And despite my knowing a lot of his flaws, and him definitely knowing mine, right, that just allowed me to see him as a human being.

CLIENT: Mm hm.

THERAPIST: Not a perfect human being, but a human being. So knowing that he was vulnerable.

CLIENT: Mm hm.

THERAPIST: Right. Knowing that he, you know, got angry at times, or, you know, got sad—I remember the first time he ever cried, my mother's father had passed away, I'd never seen that before, I was ten—and sort of knowing him as a human being really sort of allows me, even as a middle-aged woman, to have internalized the relationship. And it's just with me all the time.

CLIENT: Mm hm, mm hm.

THERAPIST: Right. So even though he's not here, I carry it with me because we had that bond.

CLIENT: Sure.

THERAPIST: Right. And it sounds like you tried to really work to have a bond with your children.

CLIENT: Mm hm.

THERAPIST: Right. Why are you not embracing that? That's something to be proud of. I mean, in some ways that's who you are. You didn't come from that. My dad didn't either. His parents were crazy, okay.

CLIENT: [laughs]

THERAPIST: You know, and abusive people. And he worked hard to do it differently.

CLIENT: Yeah.

THERAPIST: And you worked really hard to do it differently. And it pays you back, because you can see that your kids still want to be connected to you even though they're off at college.

CLIENT: Mm hm, mm hm.

THERAPIST: Does that not have huge impact for you?

CLIENT: [pause] Hm. [pause] I'm not exactly sure if I'm understanding the question. And I'm also not exactly sure I'm understanding, you know, like what you're seeing in terms that makes you feel like I'm not... I'm not recognizing that relationship. [00:46:00]

THERAPIST: I guess what I'm saying is you are, um, continually hurt by what you are not, and not sort of embracing all the good things that you are.

CLIENT: Oh, I see. Mm.

THERAPIST: Right. And when you make human beings, and bring them into the world, and invest time and energy into them, and love them, and do the best you can, and talk to them, and, you know, change things about your background and your upbringing that you didn't like. And I remember you telling me you actively tried to be more physically affectionate with your kids than you got, right.

CLIENT: Mm hm.

THERAPIST: Ain't no parent in the world perfect. But you made an active effort to really remain connected. And you still do, driving up to go see...

CLIENT: Right.

THERAPIST: ... performances and whatever, when you could easily not. Right? I guess I'm saying, that's more of the mark of who you are...

CLIENT: Mm hm, mm hm.

THERAPIST: ... than who you are not.

CLIENT: Mm hm.

THERAPIST: It's not commonplace, Seamus.

CLIENT: Mm. Yeah. I mean, it's kind of an interesting... it's kind of an interesting place, being inside of my head, because it's like I do get it. You know, it's like I'm able to kind of pull back, and I'm able to see, it's like, you know, kind of both of those things. It's like I see the brokenness...

THERAPIST: Yeah.

CLIENT: ... but at the same time it's like I can also see the... you know, the pretty self-confident, you know, guy.

THERAPIST: Right.

CLIENT: You know, I can see both of those kinda things. And I recognize that at different times, you know, different... you know, they're both there...

THERAPIST: They're both there.

CLIENT: ... but at different times one is a little bit more dominant than the other. [00:48:00]

THERAPIST: Yes. Or even when you are feeling confident and behaving confidently this little piece still nags at you.

CLIENT: Sure.

THERAPIST: Like a tag on your sweater.

CLIENT: You know... and I'm sure it's like one of those viral videos that almost everybody's seen. So you've probably seen it as well. But the guy who's out there, the motivational speaker who's out there who has no arms and no legs.

THERAPIST: No, I haven't seen that.

CLIENT: And he has what appears to be part of like his foot.

THERAPIST: Okay.

CLIENT: So, I mean, literally the guy is a weevil.

THERAPIST: Okay.

CLIENT: You know. And he is just like this incredible...

THERAPIST: Sure.

CLIENT: ... motivational speaker. And he's talking... this video, he's talking to this group of kids, high school kids.

THERAPIST: Uh uh.

CLIENT: And, you know, and it's just like, okay, this guy is clearly coming from a place of like... you know. And he is just... he doesn't have any disabilities. You know, he doesn't have... You know, it's just like...

THERAPIST: Or that's what he shows. [pause] You show... we all show a different face. You can't compare how you feel inside to how somebody else looks on the outside.

CLIENT: Say that again.

THERAPIST: Okay. So you say he's... you know, he's up there, he's so positive. I almost hear, you know, "Why can't I be more positive," or whatever. But that's what he shows the world. We don't know what's going on inside of him, we only know his account of it. Just like for you nobody knowing, walking around...

CLIENT: Yeah, yeah.

THERAPIST: ... you know, you appear to be a very confident guy...

CLIENT: Right, right.

THERAPIST: ... a smart man. Nobody would know.

CLIENT: Yeah. So... Yeah. And I guess what I'm saying with that video...

THERAPIST: Yeah.

CLIENT: ... it's kind of like... It's like, yeah, I don't know what this guy feels like on the inside.

THERAPIST: Sure. [00:50:00]

CLIENT: And I don't know what his story is either. But, you know, could I get to that place?

THERAPIST: Okay.

CLIENT: Could I get to that place of like, whatever? You know, whatever the... whatever the limitation, whatever... You know, it's like this is just a circumstance of your life. — Whatever.

THERAPIST: Sure.

CLIENT: You know. Can you just... can you capitalize on that? You know, there are times that I recognize that who I am...

THERAPIST: Yeah.

CLIENT: ... in large part is because of...

THERAPIST: Sure. Sure. And in some ways... You know, I guess what I hope for you, and what I hope that you gain from our work together, is some sense of healing from this...

CLIENT: Mm hm, mm hm.

THERAPIST: ... or kind of quieting this script that's been...

CLIENT: Yeah.

THERAPIST: ... you know, with you so long. Because you're going to take all of this, all of who you are, and you're going to channel it into your work with people. Right. And in some ways you're well suited, because you want to connect with people, right.

CLIENT: Mm hm, mm hm.

THERAPIST: And part of having to suffer from this issue, and from all these negative messages...

CLIENT: Sure.

THERAPIST: ... is you can touch someone's life and really understand...

CLIENT: Yeah.

THERAPIST: ... how somebody can go through these things.

CLIENT: Sure.

THERAPIST: And that is a very powerful thing. I always tell my students, you never want to go to a counselor who hasn't been through anything, right. But you can channel that. But you gotta do it in a way for you...

CLIENT: Mm hm.

THERAPIST: ... given who you are, that's very genuine, right...

CLIENT: Mm hm.

THERAPIST: ... and not hypocritical. And so healing this part of you that continues to...

CLIENT: Right. Right.

THERAPIST: ... hurt, or be so concerned about what other people think, instead of seeing the true data more often than not that you're just likeable because you're you. People want to connect with you. Your teachers like to have you in their classes. I would like to have you in my class. You're smart, you get it, you dig deeper. What teacher wouldn't want that?

CLIENT: Exactly, yeah. [52:10]

THERAPIST: You know. And so I think kind of looking at what is actual, instead of... you know, what you feel is important, and it is valid, and it comes from a place. I mean, the environment has taught you some things about yourself. But it's also taught you a lot of positive things about yourself too...

CLIENT: Mm hm. Mm hm, mm hm.

THERAPIST: ... that I think you take in and you just kind of go, "That's nice." You know?

CLIENT: Mm hm. Mm hm, mm hm.

THERAPIST: You say, "That's nice," instead of going, "Wow! That's really cool. Look at this, look at me. Look at the things I've done. I still hurt over here and here and here. But wow, I'm a good dad!" Right?

CLIENT: Mm hm, mm hm.

THERAPIST: "I'm a good student. I can just decide, oh, I'm going to go in counseling, and I'm going to go do this. And I'm going to do this and make it a success." And I think that's equally... that's more important in some ways...

CLIENT: Mm hm.

THERAPIST: ... embracing that truth.

CLIENT: Yeah, yeah. No, I see that. I see that, yeah. Figuring out a way to allow those things in...

THERAPIST: Yeah.

CLIENT: ... and have a home as well. Yeah.

THERAPIST: Yes. That part I'm hoping for you makes up the primary part of your identity.

CLIENT: Mm hm.

THERAPIST: You know. The other stuff's important because it makes you a sensitive aware human being to other people's pain. And you'll never take that for granted...

CLIENT: Sure.

THERAPIST: ... that you will see you, who let you into their lives. And I think that's important. But it doesn't have to drive you anymore.

CLIENT: Mm.

THERAPIST: And it doesn't have to diminish your joy for all of the things that you are and have become.

CLIENT: Mm hm, mm hm. Mm hm. Yeah. Yeah. Well, I can sit with that for a while.

THERAPIST: Yeah. Sit for that... you know, with that till next week.

CLIENT: Sure.

THERAPIST: Well, do you have class tonight? [00:54:00]

CLIENT: Well, as it turns out I get to go be counseled again.

THERAPIST: You do?

CLIENT: Right now.

THERAPIST: [laughter] What is... is this your... Oh, is this 810, is that the class? Oh yeah, okay.

CLIENT: Yeah.

THERAPIST: Well, have fun.

CLIENT: We're gonna try it. So...

THERAPIST: This is the... That's a great class. It's a fun class.

CLIENT: Yeah.

THERAPIST: And then you get to do it with your classmate, right?

CLIENT: Right.

THERAPIST: Yes.

CLIENT: Two of them.

THERAPIST: Oh.

CLIENT: Because there's an odd number.

THERAPIST: Okay, so you're doing three in one group.

CLIENT: Right.

THERAPIST: All right.

CLIENT: So have a till next week.

THERAPIST: Well, have fun.

CLIENT: Same time, same bat channel.

THERAPIST: Yeah, absolutely. Hopefully there will be no storm. Okay, take care.

CLIENT: Buh-bye.

THERAPIST: Buh-bye.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: ...say that to me.

CLIENT: You know, being late is -

THERAPIST: Oh yeah.

CLIENT: among, you know, the top cardinal sins.

THERAPIST: Yes, you know, my last name is Norwegian but I am sure my Norwegian heritage, if I have any, goes so far back.

CLIENT: (laughs) That's a good point. Yeah.

THERAPIST: But I do have a time issue. So, you know, I mean African American and Norwegian somewhere.

CLIENT: We must be on time. (sound of snapping fingers)

THERAPIST: So maybe that is where I get it from. Well how are you?

CLIENT: I am good. I am good. Yeah, I had a few minutes to kind of re-collect, kind of refocus. It is like where am I at, kind of thing on the drive up.

THERAPIST: Yeah.

CLIENT: But, yeah, I think what I feel like I took away from last week was, you know, that sense of The way I kind of reworded it or renamed it was "looking at the fictions."

THERAPIST: Okay. Explain.

CLIENT: You know? Looking at the fictions of my life.

THERAPIST: Okay.

CLIENT: You know? It is like kind of one of a lesson or, you know, a kind of a place where I have been with my meditation practice recently is trying to see in all the different ways that what our minds tell us, moment to moment, is pretty much all fiction. [00:01:32]

THERAPIST: Okay. Explain.

CLIENT: That if you really sit and look at the thoughts and the stuff that is going on up here. You know, it is like just being able to kind of walk around the thought, analyze what is going on with the thought. It is like if you analyze that thought as being of the past -

THERAPIST: Right.

CLIENT: that in itself is a fiction.

THERAPIST: How so?

CLIENT: Because it is like, well, we have a memory of something -

THERAPIST: Mm. Mm hm.

CLIENT: but you survey ten people in an automobile accident -

THERAPIST: Sure.

CLIENT: you are going to have. Not saying that it didn't happen or was unreal but it was really a fiction. It is a fictionalized version of what happened.

THERAPIST: Sure, sure.

CLIENT: And if the memory happens or if what is going on in your mind happens to be (inaudible at 2:31) by the future, then that is pure fiction.

THERAPIST: True.

CLIENT: So unless you can just kind of remain in this place of being (laughs), you know, somehow completely in the moment, which I don't think I have ever actually been there.

THERAPIST: I was going to say, "Let me know."

CLIENT: (laughs)

THERAPIST: You know, you practice meditation and I haven't got there yet. So. (laughs)

CLIENT: So I am like, you know, maybe that is a goal and maybe some people can get there. But for the most part we spend our day just sifting through this menagerie of fictions that we keep creating for ourselves.

So for me that is kind of my filtering lens that I am kind of coming at when we were talking about that last week and it is like, "Ah!" You know? It is like you just keep peeling away the layers of fiction.

THERAPIST: Sure.

CLIENT: And it is like, wow, look at this. Here is a really old fiction.

THERAPIST: Yes.

CLIENT: You know, that has been so prevalent. [00:03:33]

THERAPIST: It is like a narrative and you look at narrative therapy terms.

CLIENT: Yeah.

THERAPIST: It is the powerful narrative. I mean, of course, Gestalt says one thing about it. Existential says another.

CLIENT: Yeah. (laughs)

THERAPIST: But I think in some ways, I mean, that is really insightful. And it is kind of all the same.

CLIENT: It is.

THERAPIST: But whether it is a fiction or whether it is a narrative it dominates. The dominant narrative is fiction.

CLIENT: Right. But for me what is underlying all of that is that it is not true.

THERAPIST: That is right.

CLIENT: You know, it is like we can call it whatever it is. But the bottom line is it is not true.

THERAPIST: Okay. But you feel like it is true.

CLIENT: Oh, of course. And when we grab onto those kind of things and we make those our guiding paradigms of our life then that is where all the suffering is at.

THERAPIST: So tell me, how did you then take that insight and emotionally interpret what it means for you. [00:04:32]

CLIENT: Yeah, yeah, yeah. So it was just like sitting with You know, and I think I probably spent the most time and probably spent immediate time kind of just sitting with the whole doctoral piece right now because there is some immediacy involved in that in terms of signing up, blah blah blah. And it is like looking at where we were at talking about it. It is like, really, can you just look at what is being said without going through the filter of all of the past stories.

THERAPIST: Yeah. And what did you find?

CLIENT: I found that I was able to hear it a little bit differently.

THERAPIST: Tell me how you heard it then.

CLIENT: Just trying to be with I am obviously not remembering exact wordings. But it is just like being with the experience of, yeah, somebody saw enough of something in you to ask you to consider that. And then when I opened myself up to that then I realize, oh, it wasn't just you there were two or three other people on this trip that gave you that same message. [00:05:56]

And it is like, "Wow, wow!" I had kind of discounted all of that stuff. And it wasn't until the message from Dr. Peterson actually kind of stuck.

THERAPIST: Right.

CLIENT: Then it was like disorienting. And then I kind of rewrote it to be something else. You sort of see -

THERAPIST: To fit your narrative of before.

CLIENT: Yeah.

THERAPIST: Yeah. So how do you internalize that then.

CLIENT: I spend a lot of time kind of rethinking that and it is like, well, I need to back this up and I need to go talk this out again. So, you know, I just -

THERAPIST: How did you feel?

CLIENT: How do I feel?

THERAPIST: Yes.

CLIENT: Or how did I feel?

THERAPIST: How did you, how do you? If you embrace that as sort of the new truth, which would be a more balanced truth?

CLIENT: I think that I have internalized that. [00:06:59]

THERAPIST: How do you feel?

CLIENT: (sigh) Well, I think that I was going to Well it is not a new experience so I think that the experiencing is energizing.

THERAPIST: Okay.

CLIENT: You know? It is like, "Oh. Okay." That is what it is then let's go. So there is sort of this sense of like the old stories just get us stuck in the mud. And it is like, "Oh!" That feeling of now because (laughs) we are in the midst of all of this snow but in the morning Never mind. You know what it is like traipsing through the snow.

THERAPIST: Yes.

CLIENT: And when you finally get out of the snow and you are on the sidewalk it is like, "Oh. oh. Okay. I can walk now." (laughs)

THERAPIST: Yeah. Is that what it is kind of like for you?

CLIENT: Yeah, yeah. It is kind of like that experience of, you know, you are trudging around or you are stuck in this not being able to move.

THERAPIST: Yeah.

CLIENT: Not completely stuck but you are slowed down. And now it is like, "Okay. I got this."
[00:08:05]

THERAPIST: So you mean sort of this kind of old fiction, as you describe it.

CLIENT: Yeah.

THERAPIST: This kind of negative, self-esteem, not feeling good about yourself, not feeling like you belong. Those are the themes.

CLIENT: Mm hm.

THERAPIST: And, you know, kind of coming out of that, looking around and beginning to actually accept, not only is that not necessarily the truth or the dominant narrative but it is part of the past. And it is true about how you felt but that is not the information you are getting from the majority of the environment these days.

CLIENT: Right.

THERAPIST: You are getting affirming messages about your ability to be successful.

CLIENT: Yeah, and that Yeah. So it is energizing. I won't say that it is like It still feels a little tentative.

THERAPIST: Okay.

CLIENT: It is like I just sort of have to put a little trust in this. It is like, no, I am sticking with the trust part of this. It is like I am going to trust the fact that this is the messages that I am hearing. [00:09:13]

THERAPIST: Mm hm. So you still can't fully embrace it yet, you think.

CLIENT: Well, more than I did.

THERAPIST: Okay. I will take that.

CLIENT: And it is kind of like, yeah, in that I feel like I am really trying to distinguish, am I putting this through the filter or are you just letting it stand. So it feels like I am in that place. You know? Hopefully, I am not.

THERAPIST: What if that is the new normal? I mean what if that is the truth? That is the truth? What if it is? Then what does that mean for you or about you?

CLIENT: Then, you know, I take that energy and I start moving forward with it. Into a certain degree I feel like, okay, that is what I did.

THERAPIST: How would that feel?

CLIENT: How would that feel. Hm. Empowering. And there is a sense of self confidence. I have been struggling on a stupid little paper that I was trying to write. And that was a reflection paper on India for Peterson. And it is like I know that all of the garbage that I was dumping on top of this paper was not allowing me to get the paper done. [00:10:40]

THERAPIST: Okay. What do you mean?

CLIENT: I am not good enough to write this paper. What have I got to say that, you know. Like all of this kind of negative garbage.

THERAPIST: When does that pop up for you most? That script?

CLIENT: Mm. (pause, sigh) Well, I am just thinking about that case and it is like, wow, that one popped up a lot but, you know, I put Peterson in this position of being somebody that I really respect. You know? And who is somebody who is really respected in his field. So it is like, you know, obviously people that I consider to be whatever, smarter than me, more accomplished than me.

So it is like, yeah. So I am playing this game of trying to impress somebody. Then it is like all of that other stuff comes up. You know, I think, probably.

THERAPIST: Okay. So because it is Nick Peterson and he has some pretty significant notoriety in the field, it was difficult for you to write the paper because you wanted to impress him.
[00:11:56]

CLIENT: Yeah. And just in terms of that case it is like, mm, how far can I go back and is that the typical pattern?

CLIENT: What I find interesting about that is that he was most impressed by you when you were just being you.

CLIENT: Yeah, that is what I am saying. That it is like I am still You know, so I think that the more I am able to let that go I was able to get the paper done.

THERAPIST: Yes. Okay. And so tell me about your process in terms of letting that go?

CLIENT: You know, there is almost a moment to moment kind of struggle sometimes. It is like, let it go. Let it go. You know, it is like you can feel that stuff coming up.

THERAPIST: What is the stuff?

CLIENT: Yeah, you know, the low self-esteem. "I am not good enough." "I can't do this." All the negative messaging. And it is just like, let it go.

THERAPIST: But you fight through it every time.

CLIENT: But I fight through it every time.

THERAPIST: You do.

CLIENT: Yeah. I am just trying to let that -

THERAPIST: Every time you want to do something or want to change careers or whatever.
[00:13:07]

CLIENT: That is true, yeah. I do find a way to slog through it.

THERAPIST: But you punish yourself.

CLIENT: Mm hm. Mm hm.

THERAPIST: You know, what are the, if you don't succeed in this program, which is highly doubtful, what are the stakes to you?

CLIENT: Well it would (sigh) Well, yeah. The first thought that comes to my mind is, "Well, it is only ego."

THERAPIST: Yeah.

CLIENT: I mean, what is the worst possible thing that can happen? I don't make it? Well I am assuming that I would have an LPC and I could, pffft, whatever. Or I can always go back to my woodshop and make bird houses, or You know, I mean I have got other options. If I don't make it in the program it is only a bruise to my ego.

THERAPIST: Sure. But it is a significant bruise. But the stakes financially, the stakes career path wise, the stakes are not huge.

CLIENT: No.

THERAPIST: So who do you have to impress?

CLIENT: (sigh) Yeah, probably me. [00:14:15]

THERAPIST: Tell me about impressing you.

CLIENT: Yeah. You know, it is overcoming that garbage and recognizing that it is like -

THERAPIST: How would you impress you?

CLIENT: (pause) I am not sure because I think that what I recognize is going to happen, you know, the same pattern. It is like, you know. achieve this level wasn't good enough. Achieve that level, it is not good enough. So it is like I have got to break the pattern. That is not working. You know?

THERAPIST: Mm hm.

CLIENT: So I think that I recently read this little article, blog post, I don't know what it was. But it was something about, we don't really hate ourselves. And it is impossible for ourselves to really hate ourselves. [00:15:15]

THERAPIST: Okay.

CLIENT: And it was like, "Oh!" It grabbed my attention so I sat with it for a couple of minutes and it was like The premise was that we are engaged in behaviors. When we hate something, when we truly hate something, we do something to try to get that out of our lives. So if there is some element about ourselves that we hate or dislike we are trying to get rid of that part, you know, out of our lives.

So we engage in behaviors that don't necessarily work. So instead of changing up the behavior we just do more of it. Thinking that if I do more of it (laughs) it will be better.

THERAPIST: So what it is that you are doing more of?

CLIENT: (sigh) Trying to overcome that low self-esteem by, you know, upping the stakes all the time. Maybe.

THERAPIST: Yes. But that doesn't work.

CLIENT: I don't know. I don't know. I have to really think about that. Am I really doing all of this stuff out of that motivation? I mean it sounds like a logical thing to say but is that really what is going on? [00:16:30]

THERAPIST: I mean it could be mixed. I mean you have a natural, intellectual curiosity about things.

CLIENT: Yeah.

THERAPIST: But that is not, I mean that is not really the point. You know? The point is, whatever you achieve isn't enough to get rid of the old script.

CLIENT: Right.

THERAPIST: Why do you think you hold on to it so when you know it is not true?

CLIENT: I think that it has just been within the past short, just a relatively short period of time that I am starting to see that. So these are relatively new.

THERAPIST: How short?

CLIENT: I don't know. Maybe (pause) a year.

THERAPIST: Okay.

CLIENT: I am not 100 percent sure. You know, but I think that I recognize that there has always been that pattern of whatever I have isn't good enough. [00:17:31]

THERAPIST: Mm hm. Who is it good enough for? I mean, who are you trying to be good enough for?

CLIENT: I am not sure. There is that sense of, you know, this isn't quite the right thing or the right job. There is always kind of that underlying sense of can't be happy, can't be satisfied or something.

THERAPIST: Don't belong here, maybe?

CLIENT: Don't belong? (pause) Maybe. Maybe. I have to think about that. (pause) I am not sure.

THERAPIST: It is like you are describing this sort of internal unrest.

CLIENT: Mm hm.

THERAPIST: Restlessness.

CLIENT: Mm hm. Not that, you know, it is never ceasing. I mean it is like you find places of being. And it's like, okay, I'm kind of here. This is okay. This is all good. And then it is like, "Hm." You know? And it's like, no, I have got to find something else or, you know, whatever. [00:18:41]

THERAPIST: I still wonder how will you impress yourself? How will you know you will be impressed?

CLIENT: Well, I think one of the other things that I am recognizing in the whole story and fiction narrative is recognizing that the biggest story or the biggest fiction is the fiction of me.

THERAPIST: Which is?

CLIENT: All of the story and all of the stuff that I have created around my sense of who I am. You know? That is all fictional too. And it is like you create these expectations and how things are supposed to be and you accumulate all this stuff.

THERAPIST: So who is the real Seamus?

CLIENT: Yeah, you know, it is like pulling away all of that stuff and getting underneath that. It is like, well, trying to impress this, you know, this fictional story. It is like, well yeah, that is going to be really futile, isn't it? [00:19:55]

THERAPIST: Well, but when you do pull it all away, what is there?

CLIENT: (sigh) Yeah. You know, and I think that that is kind of what I think the gift of this program is, is that it is like I see that, okay, the degree is great and I am sure the work is great and being able to help people is great. But it is like there is It is just this path of self-discovery right now or deeper self-discovery. It is not that I haven't done some of this work before. But it is like this is -

THERAPIST: That is not an answer, Seamus.

CLIENT: I don't know.

THERAPIST: That is an intellectualized answer about the -

CLIENT: Yeah, I know. I know. I know. It is like dancing around.

THERAPIST: (laughs)

CLIENT: But it is like Is it being at a place of saying, "I am not sure. I don't know." Or, "I just can't see it." You know?

THERAPIST: Hm. [00:20:52]

CLIENT: (pause, sigh)) Yeah. I guess that there is this budding sense of (pause) Yeah, that is kind of interesting thought or an interesting new way of looking at it. It is like, you know, kind of recognizing. It is like, oh, okay, this is transition time. This is like there is something else going on here. There is kind of this budding sense or emergence or just being able to peel away stuff to be able to have a deeper sense of what that is.

THERAPIST: Gestalt talks about peeling away the layers -

CLIENT: Okay.

THERAPIST: to get to the most genuine core of yourself.

CLIENT: Okay. I haven't studied Gestalt.

THERAPIST: Yeah. It talks about that.

CLIENT: Okay.

THERAPIST: And then, who are you underneath?

CLIENT: Yeah.

THERAPIST: There is a real guy of substance under there. [00:22:03]

CLIENT: Mm hm. Mm hm.

THERAPIST: You know?

CLIENT: Yeah.

THERAPIST: And quite possibly, and I don't know, maybe other people don't see your layers as much as you do.

CLIENT: Mm hm. (pause)

THERAPIST: Because they don't know you feel insecure.

CLIENT: Right.

THERAPIST: Right? And they don't know that you doubt yourself.

CLIENT: Right.

THERAPIST: That is not how you present.

CLIENT: Mm hm. (pause) Yeah. Mm hm. So I think that, I don't know, I am just kind of looking at the different puzzle pieces out here on the table. I sort of feel like trying to let go of some of the story, you know, puts me in a better place to be able to see things maybe as they are. As opposed to, you know, I know it is just another way of saying, you know, getting rid of some of the garbage, some of the filters. But whatever. It is just like, okay. And maybe coming to (laughs) [00:23:27]

THERAPIST: You laugh.

CLIENT: a place of authenticity.

THERAPIST: Yeah. So what would that look like.

CLIENT: Yeah. You know, it is like that challenge in those beginning classes of, you know, authenticity. Am I authentic? You know?

THERAPIST: Mm hm.

CLIENT: And somebody talked about one of the greatest challenges is to be impeccably, to have impeccable speech or to have impeccable honesty. I am just trying to remember. That we have maybe honesty at one level. You know? Kind of like our dealings with people. For me at the underneath level it is like, "Are you really honest?" Can you really be honest with yourself?

Or, you know, is there just so much habitual energy around all of the stories that you have told yourself that you believe your own crap. You know, and it is like that is not honest. [00:24:50]

THERAPIST: Well, is it honest? I mean, you know, you say you believe your own crap. But these are very painful stories -

CLIENT: Mm hm.

THERAPIST: that somehow you picked up as a very young kid.

CLIENT: Mm hm.

THERAPIST: And a developing adolescent for all the reasons we have talked about. And so, as you see, you can't just let that go. Right? You can change the narrative and you can accept that that is not your truth, if it was at all. It is certainly not anymore. But, you know, it is interesting because, you know, I supervise the interns down here.

CLIENT: Mm hm.

THERAPIST: And I always pick them based on who they are. So in a couple of weeks we will do 30 interviews. And, you know, you pick people based on who they are and how I think they will hold up to Phoenix students.

CLIENT: (laughs)

THERAPIST: Because Phoenix students have a very low tolerance for people who are not real.

CLIENT: Mm.

THERAPIST: Like they don't have time for it. You know? Especially, you know, it is an older student population which I really like. And they just don't have time for bullshit. [00:25:58]

CLIENT: (laughs)

THERAPIST: They are kind of like, "Look, I have parents, I have got kids, I have got all this stuff going on."

CLIENT: Yeah.

THERAPIST: "I have got issues. I have come to talk to you about it.

CLIENT: Yeah.

THERAPIST: Be a real frickin' human being. Okay?"

CLIENT: (laughs)

THERAPIST: And regardless of the age of the intern, if it is somebody in his or her 20's all the way up to students in his or her 50's or 60's, I choose them based on who they are. And one of the interesting things that happens is, so whether these are students who have seeing clients awhile or this is the first client they will ever see, many of them go through this transformation where they think a professional counselor has to be formal and kind of buttoned up.

And I hear them on their tapes and I say, "Who is that? I don't want that. Bring you back." Right? Because clients, we all do therapy in different ways, but clients come back to you because of who you are.

CLIENT: Yeah. Right.

THERAPIST: Some of what you do but they are attracted to the relationship you form with them.

CLIENT: Exactly. Yeah. Yeah.

THERAPIST: And so when you look at The painful stories that you have lived you will use in your work. Right. [00:27:04]

CLIENT: Mm hm.

THERAPIST: But, you know, also deeply, genuinely who you are. All of that. Your struggles, your joys, your fears goes into it.

CLIENT: Mm hm.

THERAPIST: So when you say you are not honest or, you know, kind of your struggling with this crap of sort of letting go of the script. You know, I guess I would hope that you would look at it a different way.

CLIENT: Alright, well (pause) I think that what I am hearing you say in that or what I am sensing from you in that is that I am sort of wanting to like just drop, cut this off, deny it, it is not here. And for me, if that what I am projecting, that is not exactly where I am at with that. It is more a sense of a feeling of, yeah, it is never going to go anywhere. [00:28:04]

I mean that is the makeup, that is the fabric of who I am. And I get that. You know? But there is a difference between it being there I am just trying to think of an analogy or a metaphor that kind of sums up how I feel about that. There is a difference between (pause, sigh) I don't know.

You know, it is like I see these If I could have a relationship with that part of my life it would be more of one of like a book on a shelf.

THERAPIST: Okay.

CLIENT: It is like, okay. And it is there. It ain't going anywhere. You know? But this is a chapter and here is what I have learned from this part of my life. And here, if I can open this up for you, let me kind of explain. This kind of explains a little bit about who I am.

THERAPIST: So how would this explain it? What would you get from the book?

CLIENT: From?

THERAPIST: That chapter.

CLIENT: I am sorry.

THERAPIST: The painful chapters. What would you get from it? What did you learn from it? Who did you become because of it? [00:29:18]

CLIENT: Mm. I see. I think that probably all of those experiences helped me to be really empathic. You know, I have had, you know, not all of the experiences in the world to have, but I have had some. You know? And it is like I know that feeling and I can feel that feel.

THERAPIST: Which feeling? Which one?

CLIENT: Whatever. Low self-esteem, shame, feeling like you are the outsider, feeling whatever. You know? Not good enough, not smart enough. Whatever. You know, whatever those feelings are I am just saying that I think that all of those experiences, you know, really create the fabric of who I am. So it is not that I am really trying to cut that off. [00:30:20]

But there is a difference between recognizing that and somehow being connected to that. You know? It is like then now you are kind of talking like being hardwired like a computer.

THERAPIST: Okay.

CLIENT: You know, and it is like it is not that experience. The experience is more of one of like here is a reference book that explains a little bit about who I am. As opposed to being hardwired to the story of.

THERAPIST: Sure.

CLIENT: So I am sorry. I am just I know that I think visually, whatever. And I am just -

THERAPIST: I think it is pretty cool. You know. But whatever it is, whether it is a book or hardwired into a computer, right? It is sort of it is still here. It is still right in front of you. You still look at it.

CLIENT: Mm hm.

THERAPIST: I wonder if we can move it to the side or to the back.

CLIENT: Oh, I see.

THERAPIST: Right? So, you know, it is still here.

CLIENT: Mm hm.

THERAPIST: It is still right in front of you because it is still the natural trigger. It is still your “go to.” Right?

CLIENT: Mm hm.

THERAPIST: Where you take the compliment and your first reaction is, “No.” And then you go, “Maybe.” And, I mean, that is still improvement because you go, “Well, maybe.” Right?

[00:31:30]

CLIENT: Mm hm. Mm hm.

THERAPIST: But I wonder if, you know, you sort of embrace the fact that you are being validated for how bright you are, how capable you are. Right?

CLIENT: Mm hm. Mm hm.

THERAPIST: People who seek your friendship. Right? Classmates who enjoy your company. Right?

CLIENT: Mm hm.

THERAPIST: And that helps you rewrite the script. There are times in your life I would imagine, if you went back, where there are chances to rewrite the script. But it has had a very powerful hold on you. But you don’t need it anymore.

CLIENT: Mm hm.

THERAPIST: It is not true.

CLIENT: Right.

THERAPIST: Right? And so it has made you in some ways a deeply sensitive man. Uniquely qualified in some ways to be doing what you are studying to be doing. But not if you can’t allow it to recede to the background. Right?

CLIENT: Mm hm.

THERAPIST: So as long as it is still in the forefront that is going to cause not only more pain, but it is going to be very hard for you when you are working with a client with similar issues to say all the right things and not feel them yourself. [00:32:32]

CLIENT: Right.

THERAPIST: But once you And it is in the process. I can see you working through it. But if you allow it to be there. I mean if you look at, you know, I don't profess to be an Adlerian therapist, okay? But if you look at Adler's inferiority complex, Right? And sort of taking that and to turning into very productive things. But eventually you have to let that quiet itself.

CLIENT: Right.

THERAPIST: So eventually, when is And I guess when I say, what would it take to impress you? You know? In some ways, you should already be really impressed. You should be extremely impressed with who you are, what you stand for and how you proceed. Even if you are not always proud of the things that you have had to go through in your life.

CLIENT: Mm hm.

THERAPIST: You can still be proud of the man that you are.

CLIENT: Yeah. And I think that probably what I was kind of focusing in on when you said that. You know, I mean, maybe a couple of things, you know, initially. There is that one, that deeply German sense of we don't blow our own horns. We are not late. We don't blow our own horns. (laughs) So there is that. [00:33:45]

Then that I kind of picked up on that notion of, you know, the fiction of the self. And I am like, then I got kind of wrapped up into that whole But if I can put all of that aside and now just what you just said resonates. You know? So I recognize that it is like, well, that wasn't my first response but what you are saying does trigger something.

THERAPIST: Which part resonates?

CLIENT: That, yeah, I am completely impressed with me. (laughs)

THERAPIST: Oh, well good! (laughs) Wow! Say more about that.

CLIENT: Well, yeah. I mean part of who I am and where I am kind of is based upon It is like, okay, I have got all of this other garbage over here.

THERAPIST: Sure.

CLIENT: You know? But I do have plenty of success stories.

THERAPIST: Yes.

CLIENT: You know? That I can look at and it is like, "Can I handle the doctoral program? Yeah, you can handle it." You know? Because I have got all of these other things that I have accomplished and it is like, hmph, it is just another thing. [00:34:54]

THERAPIST: It is. But that is the part that is not internalized yet. That is not the dominant message.

CLIENT: No.

THERAPIST: It is there.

CLIENT: It is there.

THERAPIST: But that can be the dominant message.

CLIENT: Right.

THERAPIST: You know, that can be. And it is not about blowing your own horn. I mean sometimes that is appropriate too. But it is really about letting that be the dominant message. Which doesn't mean you don't get scared or feel insecure sometimes. But it does mean you spend more of your time feeling good about yourself -

CLIENT: Yeah.

THERAPIST: and the things that you are capable of and what you have accomplished than not.

CLIENT: Yeah. No, and I think that that is what allows me to slog through the snow.

THERAPIST: Yes.

CLIENT: In order to be able to keep going.

THERAPIST: Yes, I agree.

CLIENT: Yeah, yeah.

THERAPIST: But I think that is what you don't recognize on a consistent level. I know it is there because there is no way I mean, in some ways you have to think to yourself, you know it somewhere because what would make you believe you could jump into a master's program of which you have little background -

CLIENT: (laughs)

THERAPIST: and do well. And yet you wanted to and now you are. [00:36:05]

CLIENT: (laughs) Yeah. I know. Yeah.

THERAPIST: So that part is there.

CLIENT: Yeah.

THERAPIST: What made you possibly believe that you should go to college when that is not the message that came from your family.

CLIENT: Mm.

THERAPIST: And yet you did. What made you, occur to you -

CLIENT: That is a bitter (ph) one.

THERAPIST: you know, that you could go from a theology background to teaching, is it industrial arts? Okay? To quitting that full time job with good benefits and opening your own business. I mean, so there is confidence at your core.

CLIENT: Mm.

THERAPIST: But you don't allow that to be the dominant message.

CLIENT: Hm.

THERAPIST: And that dominant message, it is not arrogance.

CLIENT: Mm hm.

THERAPIST: Right? It is more comfortable with yourself.

CLIENT: Yeah.

THERAPIST: You know, even the parts of you that are vulnerable or hurting. You know, I think it is possible to, even parts of yourself you don't like very much, but you can still be comfortable with yourself. So we know that is a very strong in there because, as I said before at the beginning of the session, you always do it anyway. [00:37:13]

CLIENT: Mm hm.

THERAPIST: Right? You always do it anyway. You always stand up and take care of your responsibilities and uphold your obligations and do it anyway regardless of if you feel depressed

-

CLIENT: Yeah. Yeah.

THERAPIST: or scared or insecure. So to me that is the dominant message. Right? And that can't come through because if this is the dominant core it is like, I guess I am not a visual person but to use a visual. It is like you let the bees come in or birds and peck the shit out of it, okay, until it is dominant but it is limping.

CLIENT: Mm hm.

THERAPIST: But that is your dominant message.

CLIENT: Mm hm.

THERAPIST: Your whole life that is more of a dominant message than the negative things that you got about yourself, really.

CLIENT: Yeah. Yeah.

THERAPIST: I mean, how do you take in what I am saying?

CLIENT: No. I am on board with that. Yeah. I get that.

THERAPIST: So how do you let that be at the center.

CLIENT: Hm. Well. (laughs) I think I am going to start practicing one of these silly things I saw on a Ted Talk. [00:38:14]

THERAPIST: Okay. Tell me.

CLIENT: (laughs) And I don't know if I can pull up that Ted Talk and send you a copy of it.

THERAPIST: Yeah, please do.

CLIENT: But it was directed toward girls and it was that this woman was working with girls who are having self-esteem issues and confidence issues. And it was all in just changing their behavior, their external behavior. You know? And she got girls to take a look at the way they were standing, the way they were sitting. And it is like, kind of her premise was that the way that we carry ourselves -

THERAPIST: Sure.

CLIENT: you know, has a direct impact on how we think.

THERAPIST: Sure.

CLIENT: And vice versa. So she is like, she did this research study where she just had girls pose in powers of position. [00:39:17]

THERAPIST: Okay.

CLIENT: Confidence. And it is like two minutes a day and it changed up their -

THERAPIST: How they felt about themselves.

CLIENT: How they felt about themselves. And it is like, you know, it is like start acting like it. You know, it is just like, look, if this is your dominant feature.

THERAPIST: Yeah.

CLIENT: And we just recently took the strengths finder assessment in the careers class.

THERAPIST: Okay.

CLIENT: So it is like having It is like, "Oh! Well this is who you really are."

THERAPIST: What did you score, by the way?

CLIENT: (laughs)

THERAPIST: Is this like the SDS?

CLIENT: No it is one of these deals. Strengths finders dot com.

THERAPIST: Okay. It is not the Strom (ph) either.

CLIENT: It is somebody making 25 bucks on selling a book and giving you this 177 point assessment test. So it is empathy, connectedness. And you have to kind of look at their definitions of that. [00:40:18]

THERAPIST: Sure.

CLIENT: Um. (pause) Shoot. (sigh) I am just able to hang on to empathy right now -

THERAPIST: Okay.

CLIENT: with the number one strength.

THERAPIST: Was that your number one strength. (pause) Okay. That is a good thing.

CLIENT: Yeah, so it is kind of like And connectedness. It was like, yeah, I felt really comfortable with the assessment. It is like, yeah, that is who I am.

THERAPIST: Yes. So I guess my argument would be, you actually don't strike me as somebody who does not know himself well. You strike me as somebody who is sometimes uncomfortable with some aspects of you or some of the things that you have had to experience.

CLIENT: Mm.

THERAPIST: But you actually don't strike me as somebody who is completely unaware of who he is, what he wants, what he stands for.

CLIENT: Mm.

THERAPIST: Right? I mean I think is shame clouds the issue from earlier, from those experiences. But I mean you don't stroke me as someone who doesn't know. [00:41:25]

CLIENT: Right. Right.

THERAPIST: I mean, am I making this up?

CLIENT: No. I think that that is completely accurate.

THERAPIST: So I think if you go back You know, you were the guy who the outside motivation to people please had you engaged to the young woman who was expecting when you were in college. But that is one motivation. Things are much more complicated than that.

CLIENT: Mm hm.

THERAPIST: Some of that was deep empathy for her circumstances.

CLIENT: Mm hm. Right.

THERAPIST: And the fact that she was by herself.

CLIENT: Right.

THERAPIST: And she was a close friend.

CLIENT: Right.

THERAPIST: Right? So some of it So it is easy to go, well, here you are trying to people please again. You got yourself in this situation. Well, you could buy her flowers and candy or help to pay her bills. Right? But some of it you were moved by your sense of compassion, caring and empathy.

CLIENT: Mm hm. Mm hm.

THERAPIST: Right? Even with your wife, who we haven't talked about in a while.

CLIENT: (laughs)

THERAPIST: Right? And your sort of anger at the situation and sort of being closed out, you know, is a struggle for you because you have empathy for her traumatic circumstances. Right?
[00:42:33]

CLIENT: Mm hm.

THERAPIST: It just, of course, craps all over you own very real needs. Right? So, you know, I think it is not that simple. Some of it, the outside motivation, the part of you that you might not like about you is the people pleaser part. But the part of you maybe that if you reframe it, the part of you that wants to be connected to other people because that is not how you felt growing up.

CLIENT: Mm hm.

THERAPIST: You know? And not only wanting it but admitting it, embracing it and searching for it.

CLIENT: Mm hm.

THERAPIST: I don't see anything wrong with that. I see that as a very honest, human need that most men, all humans I think feel.

CLIENT: Right.

THERAPIST: But most men can't admit.

CLIENT: Right. Mm hm. Yeah. You know and I would say that I feel, you know, recognizing that, yeah, I put myself in the path of this train. But one of the kind of unexpected consequences is like, oh, wow, yeah. All of a sudden I am in this position to be, you know, making those relationships. [00:43:50]

THERAPIST: Sure.

CLIENT: You know and, yeah.

THERAPIST: You are not afraid to be impacted by the things happening around you. Right? You don't feign apathy. You are not afraid to be affected or to care.

CLIENT: Mm hm.

THERAPIST: Well that is huge. Right? You don't, you know, take human pain, whether it is yours or anybody else's, lightly. Right?

CLIENT: Right.

THERAPIST: I mean, does this sound like I am describing you?

CLIENT: Mm hm.

THERAPIST: Okay. Well how did I know that? I am really not a genius.

CLIENT: (laughs)

THERAPIST: You know?

CLIENT: Yeah. Yeah.

THERAPIST: Where do you think I picked that up from.

CLIENT: Yeah. Yeah.

THERAPIST: You know, is that a dishonest part of you?

CLIENT: Mm. Good point. Yeah.

THERAPIST: You see? So I think you are more critical of you but I think you are probably more honest than many. You know, not only in your sort of search for truth and your struggle for self-acceptance but your own vulnerability. Well, that is really hard to be that honest. Right? And it will only serve you well in a field like this. [00:45:02]

CLIENT: Mm hm. Yeah. Yeah.

THERAPIST: And the people pleasing part can be amended.

CLIENT: Mm hm. Yeah. And it is not like it is a completely useless trait.

THERAPIST: No.

CLIENT: It just has to be -

THERAPIST: Modified.

CLIENT: Yeah, modulated.

THERAPIST: Yeah. Yeah. And you did it in the classroom. I know you had to because students will walk all over you.

CLIENT: (laughs) Mm hm.

THERAPIST: So you had to do some of it there. I mean you have to be able to deal with angry students. You have to be able to deal with clients who aren't necessarily happy with what you are doing to work on the relationship. Right? And so I even think you have overestimated certain things negative and underestimated certain things positive.

And if I was going to encourage to you to sort of get honest, that is where I would encourage you to get honest. About the balance of how you view you. Not about the honesty about holding onto the old script or the struggles or any of that. I mean, it sounds to me like you are pretty deeply honest about those things. [00:46:11]

CLIENT: Hm. (pause)

THERAPIST: What are your thoughts on that?

CLIENT: Well, I think that that certainly gives me something to think about. You know?

THERAPIST: Mm hm.

CLIENT: Looking at that sense of how much, you know, emphasis. And really just trying to continue to focus on, you know. It is like let's look toward. What does that really feel like. What is the, you know, what is the truer essence or the truer nature of who I am. And I don't know. Yeah. And maybe just (pause, sigh)

I guess the word I am thinking, you know, trying to come up with a synonym for but it is like, you know, celebrate or try to just sit with that. I don't know what word I am looking for. Celebrate doesn't seem like the right word. [00:47:26]

THERAPIST: Embrace?

CLIENT: Embrace.

THERAPIST: You know, I have an author for you.

CLIENT: Yeah?

THERAPIST: Have you heard of Yalom?

CLIENT: Yeah.

THERAPIST: You should read Yalom's stuff.

CLIENT: Really?

THERAPIST: Yes. He strikes me as Of course, I have never met the man. I have seen him speak and I have read a lot of his books. But, you know, he at least comes across as being humble and honest in his struggle. He is an existentialist.

CLIENT: Existentialism. Yeah.

THERAPIST: And the call him the "Group God."

CLIENT: The group?

THERAPIST: The "Group God," because he is the one who really kind of, you know, he wrote one of the definitive -

CLIENT: Oh, okay. Right, right, right.

THERAPIST: group therapy texts.

CLIENT: I'm sorry. You put those two words.

THERAPIST: Oh yeah. Sorry. They call him the "Group God." Irvin Yalom.

CLIENT: Irvin Yalom. Yeah.

THERAPIST: And he has written books with some of his clients. You know, "Love's Executioner," was one. But you should look into Pull him up on YouTube.

CLIENT: Okay.

THERAPIST: You know, you can see interviews with him and he is pretty honest about his own struggles in working with clients and what that looks like.

CLIENT: Okay.

THERAPIST: And you might really You know, again, existentialism, Taoism.

CLIENT: Right.

THERAPIST: Some similar, very similar kind of philosophies.

CLIENT: (laughs) Yeah.

THERAPIST: From a novice point of view. [00:48:37]

CLIENT: Yeah.

THERAPIST: But check it out and let me know what you think.

CLIENT: Okay.

THERAPIST: You might really resonate with some of his work.

CLIENT: Yeah, yeah. I know that when I was studying a little bit about the existentialists and -

THERAPIST: Yeah.

CLIENT: yeah, you know, I am really resonating with these guys but I am kind of looking at the rest of the field and I am like, yeah, nobody seems to be doing anything with that. So. (laughs)

THERAPIST: Yeah.

CLIENT: Maybe I should focus on Alice (ph) or somebody else. (laughs)

THERAPIST: Well, you know what? And, you know, I will say this: I think it is not that people aren't focusing on it, it is just that I think mental health has made a transition to empirically validated treatments and, you know, session plans and treatment plans. And something, unfortunately, could get lost if we forget some of these other types of therapies. And I think they can still be incorporated with some of the newer therapies that we have.

CLIENT: And I think that probably the truth is that there just aren't that many people that are willing to go there. [00:49:40]

THERAPIST: Possibly. Depending on who you are working with. But you will find out.

CLIENT: Hm.

THERAPIST: So lots to think about for next week.

CLIENT: Sure.

THERAPIST: So I will see you then.

CLIENT: Well, thank you. Maybe I will be able to hear you better by then.

THERAPIST: Hopefully, we have a Oh yeah. How is your -

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: ...surprised [to see me.] (ph)

THERAPIST: Yeah, quite surprised.

CLIENT: [Oh my God.] (ph)

THERAPIST: So how are you doing? How was your week?

CLIENT: Pretty Good. Yeah. Just was hoping that there would be a little bit more time this morning to have spent a little prep time. Like, "Okay, where am I at? What am I going to say?" And it is like, "Yeah. No, here I am." (laughs)

THERAPIST: Yeah. Yeah. There is never as much of that as we would want.

CLIENT: So I am just kind of reeling back to, did I make the decision to take the GRE last week? Did I tell you I was doing the GRE? Okay.

THERAPIST: No. You decided to not do the doc program.

CLIENT: Really?

THERAPIST: Right away.

CLIENT: Oh. Right away.

THERAPIST: Right away.

CLIENT: So I think where I am at this week from whatever events, not that there were that many events, yeah, I made the decision. And it is like, yeah. I am going to go. I will go take the GRE.
[00:01:12]

THERAPIST: Okay.

CLIENT: And it is like now I have to pony up 180 bucks to do this.

THERAPIST: Is it 180 now? Oh goodness!

CLIENT: So it is like, okay, I am at 180 bucks if I decide. Whatever. So I am going to go do that. I will go ahead and fill out the rest of the application forms. It looks like, and maybe we have had this discussion, but it kind of looks like kind of what they are anticipating or hoping that I am going to do is to go ahead and apply for this year.

THERAPIST: Okay. For the masters or the doctoral program?

CLIENT: The doctoral program.

THERAPIST: Okay.

CLIENT: And then I would be admitted into the doc program and I would be finishing up my master's degree classes as prereqs to the doctorate. The doc program. Which makes them more expensive. So I am still trying to figure out, okay, so why wouldn't I wait until next year to apply for the doc program? [00:02:19]

THERAPIST: Okay. Why wouldn't you wait until -

CLIENT: I don't know. But that is like a question that I need to have answered. You know, Dr. Fred is saying, "Well, there are advantages to doing this." And I think that there is clearly the people that sign up for the doc program and get involved in it, you know, are less likely or more likely to complete it or to stick with it or whatever. I don't know. (sigh)

THERAPIST: Okay. So you think that they are telling you you have a pretty good shot so you might as well. That is what it is sounding like.

CLIENT: Yeah. And she said, it sounded like they would be able to set me up with at least a half time assistanceship.

THERAPIST: Wow.

CLIENT: Which would cover the cost difference. But I am like, well maybe if I get in and they will figure out how to find me a full time assistanceship and then I don't have to worry about it.

THERAPIST: Sure. So you changed your mind.

CLIENT: Really? That was where we left it last week? [00:03:26]

THERAPIST: Well last week I think you decided to go ahead and finish up the master's degree.

CLIENT: Well that is definitely going to have to be part of it.

THERAPIST: So would you do a praticum and internship at the masters level?

CLIENT: Yeah. I think so.

THERAPIST: Okay.

CLIENT: Because unless they are figuring that, you know, whatever practicum But I am thinking that a practicum at the doc level would be different than a practicum at the master's degree level.

THERAPIST: It is from what I know about it because they are looking for different things because most people who go through the program already are either licensed therapists or have some, you know -

CLIENT: Experience. (laughs)

THERAPIST: You know you can apply, get in and decide to delay your admission for a year if you wanted to.

CLIENT: Yeah, but that is not what they are wanting me to do.

THERAPIST: No. It sounds like they want you to kind of go forward. I mean, how do you feel about that?

CLIENT: I think I feel okay about that, you know, in that it is like, well, nothing really changes all that much. And as long as I am getting, you know, at the end of this they are awarding me a master's degree so that I can get my LPC, so that I can be working while I am also doing.
[00:04:42]

THERAPIST: Yes.

CLIENT: You know, I would like to be working toward the LCPC or getting hours toward that. So as long as I am able to do that. And if things work out and if life circumstances work out differently and I can't complete the doc program, at least I have got the master's degree.

THERAPIST: Sure. I think there is really no losing here.

CLIENT: I don't think so.

THERAPIST: So kind of whatever decision that you make.

CLIENT: Mm hm.

THERAPIST: Now I know for the doc program for people who already have their LCPC they are pretty flexible about what it is comprised of. You always want to make sure that you have the number of hours you need and you are supervised by either an LCPC or somebody like myself who has a clinical licensure through being a psychologist, that you get those hours supervised.

CLIENT: Mm hm.

THERAPIST: And as long as you get those hours supervised by an appropriately licensed professional you will be fine. So it is kind of a win, win either way.

CLIENT: Mm hm.

THERAPIST: It really doesn't make a difference. You know, I got my master's degree along the way in the doctoral program. So most people at Phoenix don't do it that way but it doesn't really matter. So if they are saying, "Hey, we really want you in the doc program," that is a really good sign I think that, you know, you have a strong chance on getting in. [00:06:04]

CLIENT: (sigh) Yeah.

THERAPIST: And I have heard they are going to take a bigger class next year to make up for some of the enrollment deficits of maybe some of the students who have dropped out. Because typically doctoral programs are smaller and maybe they want you to be a part of that class. So that is impressive.

CLIENT: Yeah. I think, though, that I really wouldn't start the cohort until Fall of '15.

THERAPIST: Sure, sure.

CLIENT: So it would be, you know, I would still have an entire year yet before I would start a cohort.

THERAPIST: Sure. How do you feel about all this?

CLIENT: You know, it was disorienting at first. You know, some different feelings. It was a little disorienting then, you know, kind of went down that path of wanting to dismiss it. You know?

THERAPIST: Yeah.

CLIENT: And then kind of like, "Well, this feels really good." You know? And then I am kind of wanting to check that. And it is like, let's make this decision based on something other than, "Ooh, this feels really good." You know? So I think, you know, it has maybe evened out a little bit more. [00:07:13]

THERAPIST: Okay.

CLIENT: And now I do have another group. I don't know if I have mentioned this group of guys that we get together every four to six weeks.

THERAPIST: No. I don't think you did.

CLIENT: And it is an intentional group. I was invited to be a part of it. And it was started by a guy that I knew from kind of early on just out of undergrad. Yeah, someplace back then. We have known each other off and on for a long time. And he has got his PhD in psychology. And when we first got married he put together an intentional young families group.

THERAPIST: Okay.

CLIENT: So we would get together about once every four to six weeks and talk about young family issues, raising kids. And then that group kind of died out for one reason or another.

THERAPIST: Because you were raising young families with kids. (laughs)

CLIENT: Well, yeah, I think that there was really a nasty divorce. [00:08:19]

THERAPIST: Oh, goodness.

CLIENT: And one of the group members that kind of precipitated the end of that. (sigh) So this group is guys that, the other two guys in the group are counselors and I was invited to be a part of this group because he knew that I was getting into counseling. So it was a nice mix. So I am the youngest guy in the group, you know, so it is nice to have the experience of these other guys. So it was a nice change to kind of air this idea with them and we kind of talked it through.

THERAPIST: Yeah.

CLIENT: So, yeah, I sort of feel now I am kind of in this place of it does seem like it is just one of those situations where it is really difficult to find the cons. You know there is a lot of pros about this and not so many cons.

THERAPIST: Well, more time. But you don't mind that.

CLIENT: A little more time and a little bit more money.

THERAPIST: Yeah. And since you don't really mind that.

CLIENT: And right now it doesn't seem to be an issue.

THERAPIST: Sure. Sure.

CLIENT: That could change any day.

THERAPIST: Have you told your wife about it?

CLIENT: Mm hm.

THERAPIST: Tell me her thoughts.

CLIENT: I think she has been fine with it. I would say it may be an issue if she wasn't so closely connected to her best friend. But they spend all of their waking hours together anyway. So.
(laughs) [00:09:43]

THERAPIST: So, tell me about that. I detect some sarcasm there.

CLIENT: Well, yes and no. I mean, I feel like there is less pressure for me.

THERAPIST: Yeah.

CLIENT: You know, thinking about this program because this semester I am up here three nights out of the week.

THERAPIST: Yeah.

CLIENT: You know, and I am up here most days. Well that wouldn't really affect here. But, you know, three nights out of the week I am up here.

THERAPIST: It stings though, doesn't it?

CLIENT: No, I am really okay with it.

THERAPIST: Really?

CLIENT: Because if I wasn't here I would likely be at home alone. (laughs)

THERAPIST: No, I meant it stings that she still spending a lot of this time with this woman.

CLIENT: Yeah. You know, I go back and forth on that. And I really, you know, I am able to see. You know, it is like I can look at it this way, that I recognize that this is still an issue and I know that I still need to continue to work with this issue because it is going to constantly be there for me as a counselor. [00:10:52]

THERAPIST: The issue with your wife?

CLIENT: Yes.

THERAPIST: Yes.

CLIENT: So I recognize that there is still a sense of being unsettled. But I am also in this other place of recognizing, yeah, you know, I can create this universe however I want to.

THERAPIST: Sure.

CLIENT: You know, I can look at it this way or I can look at it this way. And if I spend a lot of time dwelling on this then I go down that road of being angry, frustrated, upset, mildly depressed. I get all of those kinds of things. And I am like, "Yeah, do you see what you did there." You know?

THERAPIST: But that stuff is still there.

CLIENT: Oh, it is there but, you know, it is also recognizing that And I know that I am filtering some of the language of choice theory on this. But it is like it is a choice. I can go there or I can go with a different -

THERAPIST: Well they coexist together in the same universe.

CLIENT: Yes.

THERAPIST: You know, there are a lot of positive things happening for you. You know, you are excelling in this academic area where your professors have really looked at you and said, "Hey, we want to continue to educate you." You know? I mean that is impressive. And are encouraging you to apply even before you finish the master's program. So that is great.[00:12:05]

But then there is still some of this old stuff there, you know, that in some ways it makes it less of a hassle because your wife is spending so much time with her best friend that you don't really have to consider her needs in this. But on the other hand, it means she is still not really considering yours. Toughie.

CLIENT: Yeah, yeah. I know that that is there. I know that there is a sense, you know (pause) Yeah, that I am sure that if we had that conversation -

THERAPIST: You and she.

CLIENT: She and I. If we had that conversation her world view would be, you know, I am projecting, that she is doing everything that she can to spend time with me and showing me all these different ways that she cares about me and those kinds of things. And I recognize that, yeah, in her universe I am sure that that is 100 percent correct.

But in terms of knowing each other, you know, really spending time. You know, "Do I really know you?" kind of things. It is like, yeah, I think we probably both suck at that pretty much. [00:13:21]

THERAPIST: Mm hm. What would you like to, if anything You know, we spent a lot of time kind of in our earlier work looking at those pieces. We have moved away from looking at those pieces. What would you like to do with them?

CLIENT: Yeah. I have thought about that one too. You know, it is like the inclination from years of habitual energy, the inclination is to avoid it, to ignore it. And now I feel like, well, yeah, how much (pause) So I think that I am pushing against that inclination and recognizing that, yeah, as a professional I am going to be asking other people to do that kind of thing.

And it is like So I know that But I feel In this situation I feel stuck. You know. I feel stuck in those old habitual patterns. I don't feel that I can't do it. I don't feel like I can't figure this out. But I know that I feel stuck. And I know that, yeah, yeah. (pause) It is an interesting You know, it is interesting. (laughs) [00:14:48]

THERAPIST: Yeah.

CLIENT: We go there and it is like, hmmm, yeah. It is like the brain shuts down. It is like I don't want to go there. I don't want to think about it. Boom.

THERAPIST: In some ways I am kind of torn with you because I still see it as a very painful issue. You are in this marriage where you are not getting your needs met.

CLIENT: Hmm.

THERAPIST: And there is a part of you that wants to still connect. And then, you know, I am happy for you that, you know, you have kind of found your academic home and you are being fulfilled in these other ways.

CLIENT: Yeah.

THERAPIST: If you could have it look any way you wanted it too, how would it look?

(pause)

CLIENT: Yeah, yeah. If I can just pull myself out of the box of the shoulds and woulds and all of those kinds of things and just put myself into that place, into that fictional place, that fantasy place, it is like, well, I think today the answer would be, "Yeah." You know, the whole marriage commitment thing. [00:16:01]

THERAPIST: Yeah.

CLIENT: Yeah, whoever came up with that idea? That is not good. I don't like that anymore. So we will be done with that. And, you know, I am kind of liking this not being, you know, in this role of being a student again. And it is like, yeah, I kind of like the freedom of all of that. You know?

THERAPIST: So are you saying that in your ideal world you would not be with your wife?

CLIENT: Yeah. I mean if I can really just suspend -

THERAPIST: Suspend it all.

CLIENT: If I could just suspend all of the language. And this is really difficult. I am really feeling a lot of struggle right now to, "Yes, but you can't go there. You can't think that."

THERAPIST: Tell me more about the struggle.

CLIENT: You know, that notion of the marriage commitment. It is like, yeah, you don't even This is a lifelong commitment. And it is like, "Yeah, too bad for you. But you made that commitment." You know?

THERAPIST: So too bad, you know, you are locked in here.

CLIENT: Mm hm. Mm hm.

THERAPIST: But your thoughts don't match that. [00:17:13]

CLIENT: Yeah. You know, and it is like, well, what have you got? What have you got? Is it really bad enough that you would want to call it quits. You know, really. What is so terrible? So I mean there is a number of all of those different voices coming. It is just so against all the past tapes that it is like -

THERAPIST: Tell me about the tapes.

CLIENT: My folks. You know, watching my folks and their relationship. And it is like -

THERAPIST: What about it?

CLIENT: I know that it looked like it was You know, like their relationship looks like mine.

THERAPIST: How close a match?

CLIENT: Maybe pretty close. I don't know. It doesn't seem You know, they seem to get along well enough together. But, yeah, in terms of how much do they actually connect? You know, do they know You know, it is like they are roommates living in a house. You know, it is like, "I'll do

my thing. You do your thing.” And, well, I don’t know. They do some stuff together. But I don’t know. [00:18:37]

THERAPIST: You feel like it sort of mirrors your own.

CLIENT: Yeah. I think, yeah. You know, in that need of mine to connect with somebody. To feel like I have actually got somebody that is listening to me. You know, might be even moderately interested to know something about me. You know, those kind of feelings. And it is like, yeah, I am not sure I see that in their relationship. You know? It is kind of like they repeat each other’s stories.

THERAPIST: Sure. But how connected are they?

CLIENT: You know, it is like, “We have got a history together and we can share that.”

THERAPIST: Right.

CLIENT: And, “We have got kids together and we can share that.” But in terms of, you know, anything Maybe their needs Maybe they don’t care.

THERAPIST: And what about -

CLIENT: And that is great for them.

THERAPIST: But it is not okay with you.

CLIENT: It doesn’t seem to be.

THERAPIST: And what about sex?

CLIENT: (sigh, pause) You know, again, another Yeah, another issue. It is just like, yeah. And I feel that. You know? (laughs) [00:19:51]

THERAPIST: Yeah.

CLIENT: I feel that frustration of “Damn it!” (laughs)

THERAPIST: Damn it, what?

CLIENT: You know, to be in that place or to be in this relationship where I am like (pause) great, so you know I can get myself mentally to this place where it is like, okay, I can wall myself off. And it is like I don’t need to think about sex and I don’t need to think about interpersonal relationships. And I can just kind of section myself off for a little while. And then I feel like then

there are times where it is just like you know that is not working real well for you because it leaks out.

THERAPIST: Well sure. It is a real human need to touch and be touched and to physically be validated with your partner.

CLIENT: And so I feel like I am in this relationship where I feel like the condition of it is that we just don't go there. We don't talk about it. I am not trying to use any kind of blaming language because I recognize that we are both responsible for being in that position. [00:21:10]

THERAPIST: But it is not okay with you.

CLIENT: No. No. And it is just like, yeah, what do I feel? I feel trapped. What do I feel? Stuck. You know? What other words? Yeah.

THERAPIST: Yeah. And divorce would be, and I am not at all trying to sort of try to convince you that divorce is the right option.

CLIENT: I know.

THERAPIST: I am just putting it, you know, kind of talking it through with you. But divorce is an absolute no no because? What are the messages you have received about that?

CLIENT: Oh, I suppose I go immediately to the kids.

THERAPIST: Yeah.

CLIENT: You know, it is like you have got to stay married for the kids.

THERAPIST: But they are grown.

CLIENT: Right. But you still got to stay married for the kids because whatever. And then the other thought is, regardless of how weak or dysfunctional our relationship is, it is like me trying to imagine her going through that. [00:22:19]

THERAPIST: Going through what?

CLIENT: Going through a divorce.

THERAPIST: Okay.

CLIENT: And it is like I am pretty sure she is not going to handle that real well. And, you know, I am making up that whole story knowing full well that people are very resilient and they can figure this out.

THERAPIST: Mm hm. And how would it be for you?

CLIENT: (pause) Well, you know, yeah. I have had that experience of letting go of an earlier relationship where I was engaged to somebody for a couple of years.

THERAPIST: Right.

CLIENT: And that was difficult to kind of initially go through. But after that it was just euphoric feelings of freedom. And I recognize that, well, am I just kind of reaching back for that. You know?

THERAPIST: Mm hm.

CLIENT: Well, it is like that is the only answer you know.

THERAPIST: Sure.

CLIENT: You know, run away and you got rewarded for running away because you had this -

THERAPIST: Whoa! You are so hard on yourself. I don't think you ran away. You were engaged for several years to her. [00:23:33]

CLIENT: Yeah, yeah.

THERAPIST: That wasn't about running away it was about recognizing that that was not a good match.

CLIENT: Yeah, yeah.

THERAPIST: And if you decided tomorrow to get a divorce it wouldn't be running away. This is what you are telling yourself isn't it?

CLIENT: Oh yeah.

THERAPIST: Yeah. It is like, Steve, you have created this whole world in your head -

CLIENT: Oh yeah.

THERAPIST: about what you think it is. Right? And all while you distance yourself from how painful it is on a daily basis even if you are sort of not internalizing it anymore and throwing yourself into school. It always comes back to -

CLIENT: Oh yeah.

THERAPIST: Yeah. You know?

CLIENT: Yeah.

THERAPIST: And I can only imagine how extraordinarily painful that would be because you are a man who wants to connect.

CLIENT: Yeah.

THERAPIST: In a very healthy way. And to be with your wife of all these years and to not be sexually validated, emotionally validated, you know, it is sort of like cold hard glass with ice behind it sort of looking in. And I just kind of imagine.

CLIENT: Yeah.

THERAPIST: Tell me how that feels.

CLIENT: Yeah. Yeah. You know, it is like (pause) Yeah. [00:24:46]

THERAPIST: Yeah.

CLIENT: (laughs) Yeah. It is like, yeah, that is a pretty good description. Yeah, I guess that is how I feel. You know? Yeah.

THERAPIST: What would it be like for you to do something radical?

CLIENT: (sighs, pause) I don't know. I think that I am probably moving to that place. You know, that there is a sense of this work, our work together, my feeling a renewed sense of some self-esteem about myself through the program here. That there is a sense of like, "Well, you know what? Yeah. You don't need to continue doing this to yourself."

THERAPIST: You are an attractive, extremely bright, deeply sensitive, insightful man.

CLIENT: Mm hm.

THERAPIST: You know?

CLIENT: Mm hm.

THERAPIST: And we don't know I mean, of course, you know better than I. But we don't know for sure where your wife is at because of the fear, right? [00:26:04]

CLIENT: Exactly.

THERAPIST: And extreme anxiety of the wall that has built between the two of you.

CLIENT: Oh yeah. Yeah.

THERAPIST: And there is something very terrifying for you about knowing whatever the truth is, even though everything about you seeks the truth. There is something scary about seeking the truth here because it could be as simple and I am not trying to simplify it because I think it is very complicated as saying, "Honey, I am not happy and I want to be."

CLIENT: Mm hm.

THERAPIST: "And I would like to talk to you about that." Which is not about divorce, per se. Right?

CLIENT: Mm hm.

THERAPIST: Maybe that is not an option. My parents separated when I was thirteen. They never got divorced.

CLIENT: Mm hm.

THERAPIST: Never. Right? And actually after their parents started dying started to be friends again. You know, but it took years. And I am not suggesting that model either.

CLIENT: Mm hm.

THERAPIST: I am just saying, if you have all of these negative feelings about divorce, right? You know, and I do feel like you are a man with a lot of love to give and are looking for that in one form or fashion. And somebody would love to do it. Right? [00:27:09]

CLIENT: Right.

THERAPIST: I think you have to give yourself a shot at that whatever it looks like.

CLIENT: Right.

THERAPIST: It may look like having conversations with your wife about what you want.

CLIENT: Mm hm.

THERAPIST: Maybe it is about actually, genuinely trying to work on your relationship. Maybe it is about finally getting answers to know this isn't going to work. Or maybe it is about separating because you are pretty separated now.

CLIENT: (sigh)

THERAPIST: And that is the loneliest piece. You know, to be living with somebody under the guise of being with somebody but not really being with somebody is a lonely, lonely, lonely, tough place to be.

CLIENT: Yeah.

THERAPIST: But you are not stuck.

CLIENT: No. And I think that I am feeling more and more in that place of like, yeah, you know, stuck is just a box that I put myself in. Stuck is just the story I am telling myself.

THERAPIST: But it is tough because I can see where you would feel stuck.

CLIENT: Of course.

THERAPIST: Once you have so much history with someone and you don't want to rock the boat. And so I too in our work together am completely torn with you're on this great And I can sort of see your future career and you are going to be great at it. I can see it ahead of you.
[00:28:16]

CLIENT: Mm hm.

THERAPIST: But what do you do then when you sit across from your clients or you sit across from your couples?

CLIENT: (sigh) Yeah.

THERAPIST: I remember I told you my Dad was therapist and he was in the process of he and my Mom were separating. And he got asked about it. And he said, "It was painful for me but I was pretty honest." And, you know, he said, "We love each other. We don't like each other anymore. We just don't like each other." And I think it was more complicated than that.

So I guess I am saying, you don't have to stay in this place. And avoiding the hurt. It doesn't go anywhere. It is not wallowing in it to kind of take it out and process it. But your needs, your sexual and emotional needs, psychological needs, intellectual needs are healthy, important needs. And they can't be denied.

CLIENT: Mm hm.

THERAPIST: And when you are being constantly validated over in one area it makes the other area that much more stark. You know?

CLIENT: Mm hm.

THERAPIST: And you cannot change her behavior but you can certainly, you know, say, "Honey, I am not happy and I really want to have some honest discussions with you." And at least have a start. And if it doesn't go anywhere and you keep trying well that is an answer too. I mean, what are your thoughts on what I am saying? [00:29:31]

CLIENT: I think I am (pause) You know, I think that there is part of me that is like, and I think we have explored this a little bit, but I am like I mean there is another part of me that is like, "I am not sure I want to go there."

THERAPIST: Yeah. Tell me about that part.

CLIENT: Because what if she actually wants to work on this? (laughs)

THERAPIST: Right.

CLIENT: It is like that is a whole lot of work I am not sure I want to do either. (laughs)

THERAPIST: So what would that be like?

CLIENT: Well, then it is just kind of like, you know, you recognize that, yeah, my perspective on this is just one perspective.

THERAPIST: Sure.

CLIENT: You know, she has a perspective.

THERAPIST: So what if she does want to work on it?

CLIENT: (sigh) Well then I feel like (pause) I think that is something that should be explored. [00:30:40]

THERAPIST: I am not talking about that. I am talking about your own real, honest reactions to that.

CLIENT: Hm. Yeah.

THERAPIST: You know what I notice?

CLIENT: Hm?

THERAPIST: You even censor your thoughts.

CLIENT: (laughs)

THERAPIST: And you know they are just thoughts.

CLIENT: (laughs)

THERAPIST: You are allowed to have whatever thoughts you want.

CLIENT: Yeah.

THERAPIST: So you can honestly say, "You know what? There are days I wish I never married that woman."

CLIENT: Oh yeah.

THERAPIST: Or, "There are days I wish I was divorced."

CLIENT: Of course.

THERAPIST: But you even censor the thought and shame yourself in the process. But you can take it out and you can look at the thought. You can say it out loud sometimes. Whether it is here or whether it is by yourself or whatever. You are allowed to say, "You know, she might want to work on it and, my God, I don't even know if I want to work on it."

CLIENT: Mm hm.

THERAPIST: If she said that I might think, "Oh hell. I don't want to work on this with you. Can't we just end the damn thing." You know?

CLIENT: (laughs) Yeah.

THERAPIST: And so you are allowed to but you censor your thoughts.

CLIENT: Yeah, yeah, yeah.

THERAPIST: You know because they are not "good" thoughts or whatever. And I don't judge your thoughts and you shouldn't either. You are allowed to think whatever.

CLIENT: (sigh) Yeah. That is a good point. And, yeah, and I do. You know, but I am not sure that I am able to have those thoughts without, you know. You know the guy with the stick whacking away. [00:32:00]

THERAPIST: Why not?

CLIENT: (sigh) I think that, the thought that comes to mind first is I am afraid that I am going to act on them.

THERAPIST: Okay. How many thoughts, the sort socially undesirable thoughts you have had that you have actually acted on on a consistent basis?

CLIENT: Oh yeah. No, but I am just like -

THERAPIST: But you won't. You have control over that.

CLIENT: Yeah.

THERAPIST: It is sort of like So, my husband and I hang around a bunch of male psychologists.

CLIENT: (laughs)

THERAPIST: Don't ask. Because most of my friends are psychologists. Don't ask. And it is very interesting. They were my friends first and then they all go out with the guys, which is wonderful. And I like to be quiet and be a fly on the wall and hear them talk.

CLIENT: Mm hm.

THERAPIST: Very bright guys but a lot of times they talk about men's response to sexual things. Right? And so it is an automatic response but these are kind of very smart, you know, fully feeling, emotional men. And then they kind of joke about it and they talk about it. You know?
[00:33:04]

CLIENT: Mm hm.

THERAPIST: And they may have these thoughts that a lot of times they don't necessarily act on but they consider it kind of part of being a male to have certain sexual thoughts that are just there. And, you know, we talk about it and I learn a lot about it and I find it really interesting. We have thoughts all the time. I joke with my students.

CLIENT: Right.

THERAPIST: If people really knew what was in your head you would have no friends at all.

CLIENT: (laughs) Exactly.

THERAPIST: But a thought is just a thought, just like any other. And it doesn't have to. And in some ways when you censor yourself before you let it out, you know, you are hurting yourself. Because you are saying, "It is not okay for me to think this. It is not okay for me to feel this."

CLIENT: Mm.

THERAPIST: Well then how is it really okay for you to be you? We all have undesirable thoughts half of the time. They are just thoughts.

CLIENT: Thoughts. Yep. Yeah. Yeah, that is really You know, and that is part of meditation practice is just being able to sit and be with thoughts and just allow them to be. [00:34:11]

THERAPIST: Yes, and that is why I find it fascinating that in all these areas of your life your search for truth and meaning, you know, existentialism, Taoism is so Your quest is so honest and genuine and consistent.

CLIENT: Mm hm.

THERAPIST: And yet in this area of your life, right, your search for truth is shut down prematurely because you are scared of not only your own thoughts and feelings -

CLIENT: Yeah.

THERAPIST: but of hers as well.

CLIENT: Sure.

THERAPIST: Did you ever get a chance to see that movie?

CLIENT: Not yet. Not yet.

THERAPIST: Okay. You know what? You don't have to but every once in a while I will ask.

CLIENT: You know, and if it was convenient I would have watched it already. But I have to go to the store to rent the damn thing.

THERAPIST: You know what? I will bring it for you. I have it home. I am going to use it in a workshop I am doing on couples so I will bring it.

CLIENT: Alright. But, yeah. And I have gone through the process, because I don't have cable television and blah, blah, blah. And Netflix, it is not on Netflix.

THERAPIST: That is interesting.

CLIENT: Not through the streaming Netflix.

THERAPIST: No, not through streaming. They don't have good movies through streaming. So let me remind myself.

CLIENT: I would have to order it so it is not convenient. [00:35:20]

THERAPIST: I will bring it to you but if you could bring it back the next week so I can use it.

CLIENT: Oh sure, sure.

THERAPIST: Okay. (pause) So what do you think about all this?

CLIENT: Well I think that it is empowering. You know, it is empowering. You know, I think there is a certain freedom in being told by somebody that it is okay to think. To just to have the thoughts. And it is like, yeah, cognitively we know those kind of things. And we probably even tell other people those things when it is like, yeah.

And I think that trying to devise some kind of a little practice for myself whereby I can just sit with that. Can I just sit with the thought and allow it to be? And not, A, feel like schmuck for having the thought or, you know, try to suppress it. [00:36:20]

THERAPIST: I think you can accept the fact that you are a human being.

CLIENT: Mm hm. Yeah.

THERAPIST: And human beings, to a greater or lesser extent depending on who you are, have socially unacceptable thoughts. Sometimes altruistic feelings, sexual feelings, physical needs, emotional needs. I mean and that just makes you a human being like the rest of us.

CLIENT: Sure.

THERAPIST: And that is not only perfectly okay to be but whatever has happened to you in your life. Right? And all the history we have been through about you are sort of getting the messages about what you are not allowed to be, you still are amazingly you.

CLIENT: Mm hm.

THERAPIST: I mean you still are a deeply feeling, thinking man.

CLIENT: Yeah.

THERAPIST: And that is why you still hurt over the fact that your relationship with you wife is not what it could be or what you would want it to be. And as painful as that is, that means that a healthy part of you is not destroyed. You are not apathetic to it. Right? And I hope that you are never apathetic to it. I mean, I hope you don't continue to be in pain around it.

CLIENT: Mm hm.

THERAPIST: I hope that that gets resolved one day.

CLIENT: Yeah.

THERAPIST: But if that part of you You know, because if you think about it, you know, that has got to be one of the best parts of you, the part of you that wants to connect on a genuine level with other human beings. [00:37:33]

CLIENT: Yeah, yeah.

THERAPIST: And that has not been damaged. It has been bruised. Right?

CLIENT: Yeah.

THERAPIST: And so if you really were apathetic, how sad would that be? Because then what would you do as a counselor?

CLIENT: Yeah, yeah. Well I am pretty sure I wouldn't be.

THERAPIST: Well, people try to be.

CLIENT: Really.

THERAPIST: Sure. I have got stories.

CLIENT: (laughs)

THERAPIST: I guess the point is, you know, in some ways, even though it is scary and we can look at this more. But what do you have to lose? It is probably not going to make things worse? You know, right now it is sort of status quo. But it still eats at you.

CLIENT: Oh yeah.

THERAPIST: And you don't talk about it all the time but it eats at you -

CLIENT: Oh yeah.

THERAPIST: because you want more. And after being married to someone for a long and you haven't given up that either it could be more or that there is something else out there for you, whatever that is. Right? And maybe you don't want more from your marriage. Maybe you grieve

the fact that it wasn't what you wanted it to be. But you will never know until you find out.
[00:38:37]

CLIENT: Mm hm. Mm hm. (pause) Yeah, yeah. (pause) Well, I think that it empowers me a little bit more to at least stand there and feel like I am, you know, okay with facing this. And, yeah, I think I feel less committed to ignore and to run away. And it is like, well, even though I may not know what that means right now.

THERAPIST: Sure. Running away does not diminish your pain in this.

CLIENT: No. It hasn't worked for me for decades. So maybe I should try something else.

THERAPIST: Any thoughts on what that might look like for you.

CLIENT: (sigh) Yeah. I think I need to spend some time just sitting with the thought of (pause) You know, it seems obvious to me that the first place is, you know, "Okay, we need to have at talk." But I get to that place and then I am not sure I even want to have the damn talk. [00:39:57]

THERAPIST: Right. And that is honest.

CLIENT: (laughs) So then I am like, "Okay. Well tomorrow."

THERAPIST: But it is okay to be conflicted. I don't really think you have to know. And I don't even know if you can. You can think, well, maybe you just have a talk and you say, "I really am not happy and we have to talk. But I don't really know what to say because it has been so long since we have done this." You don't have to have the right words.

CLIENT: Mm hm.

THERAPIST: You don't even have to have the talk. You know?

CLIENT: No.

THERAPIST: I guess what I am saying is you can sort of honestly look within yourself and note that you are conflicted. Part of you wants to leave it the hell alone so you don't stir up the bees nest. Part of you may want to go in there and see what is really in there. And part of you probably really doesn't even want to know because maybe you don't want to put forth the effort. And all of that is okay.

CLIENT: Yeah. And it is all there.

THERAPIST: Yeah. And I tell any couple that I work with, "I really don't need a hundred percent commitment. I need about 30 percent. Twenty Five definitely. I need a good 25 percent. And I don't even need that every time we meet. But I need about 25 percent because who is a

hundred percent committed all the time? Newlyweds maybe. So they say. Right? But that is just honest. [00:41:08]

CLIENT: Mm hm. Mm hm. Mm hm. Yeah. (pause) Yeah.

THERAPIST: How are you doing? That is a lot.

CLIENT: Yeah. It is a lot. But I don't feel overwhelmed by that. It is kind of like, well, of course. You know? This is just one of those kind of roads that I think all you can do is just kind of keep walking toward, marching toward it. Yeah, running away, I know what that path looks like. So this is going to seem unfamiliar and, you know, I am going to feel a little tentative about this and it is okay to be in that place too.

THERAPIST: Remember, one of the best parts of you wants to connect on a genuine level with people. So why would wanting to connect with your wife be any different?

CLIENT: (sigh)

THERAPIST: I mean that would be the primary place. So that is not You know, no matter what happens whatever you decide to do. And if you do decide to have a discussion, however it goes, that is a really good healthy part. There is nothing wrong with that whatsoever. [00:42:22]

CLIENT: Sure.

THERAPIST: You may not get it back or maybe you will. I don't know.

CLIENT: Right.

THERAPIST: But that is not, you know, there is nothing wrong with that part.

CLIENT: Yeah. Yeah. That is true enough. Then, you know, the next part of that is the actual practicalities of making that happen. It is like I think we both can become pretty adept at like Well, I will take some of blame in that. But the schedule is set up in such a way -

THERAPIST: Sure.

CLIENT: that there is just no time to schedule.

THERAPIST: Well, because it makes it easier.

CLIENT: It makes it a lot easier.

THERAPIST: That can be changed too.

CLIENT: I know.

THERAPIST: But it makes it easier.

CLIENT: Mm hm. Yeah, yeah, yeah. (pause) Yeah, yeah. Yeah, and I think that there is that growing Probably when I allowed myself to feel it. [00:44:34]

THERAPIST: Yeah.

CLIENT: There is that growing sense. Probably the sense has always been there it is just allowing myself to feel the anger, the frustration. Again, because, yeah, it has always been there. You know?

THERAPIST: Yeah.

CLIENT: There has always been something. There has always been one more thing.

THERAPIST: Sure.

CLIENT: It is like one of those bad dreams or bad movies where it is like, okay, I will just wait this out and as soon as I get to this point then it And it is just like a never ending cycle of, "Just one more thing." And I am just like, yeah, I think I am pretty much done with this.

THERAPIST: Have you ever really grieved your marriage.

CLIENT: No.

THERAPIST: Okay. That was quick. (laughs)

CLIENT: (laughs)

THERAPIST: You know, maybe you should think about that.

CLIENT: At least grieving the idea of what I wanted the marriage to be.

THERAPIST: Absolutely. You know, what is under all of that anger and resentment and frustration -

CLIENT: Sure.

THERAPIST: is all of the sadness and pain.

CLIENT: Expectations that were never met.

THERAPIST: But grieving it might allow you, if the end conclusion is to let it go and what you wanted it to be, it might allow you to let it go.

CLIENT: Well regardless, regardless, I need to let it go anyway. I need to let that, those expectations of 30 years ago.

THERAPIST: Maybe. But I don't know if they are 30 years old.

CLIENT: No?

THERAPIST: I mean what is it you are expecting of 30 years ago? What are the things that -

CLIENT: Oh, I know. You are right (cross talking at 45:18)

THERAPIST: You expect what? Regular physical contact with your wife. Well that is pretty normal. You expect to have conversations and to be known. Well that is pretty normal. What is of 30 years ago?

CLIENT: Mm. Mm hm.

THERAPIST: Again, you have taken sort of appropriate needs and, you know in some ways blamed yourself for needing it or wanting it and saying, "Well, it is your fault because these are 30 year old needs." They are not 30 year old needs.

CLIENT: Yeah.

THERAPIST: You know, if you weren't married to your wife and you were married to Sheila, let's say. That is not your wife's name is it?

CLIENT: No. (laughs)

THERAPIST: We are just putting Sheila. You know, Sheila as opposed to your wife's name, right? The needs would be the same. You know, they would look different in some ways.

CLIENT: Yeah.

THERAPIST: But those are just the needs that we have which is why we form long term partnerships with people in the first place in the hopes that they meet those needs.

CLIENT: Yeah, yeah.

THERAPIST: There is nothing wrong with needing those things. And the more you tell yourself there is, they don't go away.

CLIENT: Yeah. Yeah.

THERAPIST: They are not unrealistic. [00:46:22]

CLIENT: Mm hm. Yeah. If I really felt like they could go away or I could turn them off. You know? But I haven't found that to be true. (laughs) I haven't found that switch. You know.

THERAPIST: Yeah, I don't think there is a switch there. And if so you would be in denial. And, you know, you are not good at being in denial. I know you want to be and thank God for that.

CLIENT: Mm hm.

THERAPIST: You know. I mean, you may try to practice denial and it may work but it is there. And I think it is because you are intuitive and you know it is there.

CLIENT: Mm hm. Yeah. And, yeah, and I think that that makes it, yeah. I can't let it You know. And that is a good insight or that is a good way of putting that. It is kind of like once It is like the toothpaste is out of the tube. You know? It is like I can't not see the world any other way than that.

THERAPIST: Yeah. I mean, I am honestly trying to think of the relationships, romantic relationships in my life or friendships that have been in my life. I have looked for similar things. I want to be understood. You know? I want to be validated. [00:47:34]

CLIENT: Yeah:

THERAPIST: I want to be needed depending on the type of the relationship it is.

CLIENT: Mm hm.

THERAPIST: I want to give back to my relationships. The needs look a little different depending on who the other person is.

CLIENT: Yeah.

THERAPIST: But the needs are very similar.

CLIENT: Sure. (pause) Yeah, yeah. (pause) Mm hm.

THERAPIST: I also wonder too if there is anything in there about if divorce is on the table are you a bad guy?

CLIENT: Oh yeah. Oh yeah.

THERAPIST: Yeah.

CLIENT: Yeah. I mean that is -

THERAPIST: So that means by staying you are a good guy.

CLIENT: Oh yeah.

THERAPIST: Okay. You are martyring yourself.

CLIENT: Yeah. Sure. You know, for my wife and for my folks. Yeah. My kids.

THERAPIST: But they don't live your life.

CLIENT: Hm?

THERAPIST: They don't live your life.

CLIENT: No. No. No. Yeah, but that is a pretty big mountain. [00:48:47]

THERAPIST: Mm hm.

CLIENT: You know, walking down the path, you know, it is like, "Whoa. Wait a minute." I had this vision of the path which was kind of like looking into the deep dark woods. And now all of a sudden I recognize just as I get started down the path, "Woo!" There is a huge mountain in the way. (laughs)

THERAPIST: You know, years ago I worked with this client who I liked very much. He was in his early fifties and he had been married for a long time. And he and his wife had divorced. She had some substance abuse issues and he finally forced divorced. And he never saw himself as divorced.

And I remember him sitting in front of me and I said, "You know, what brings you in?" And he dissolved into sobs. And I thought, "What did I say?" And then I tried to process what happened and nothing. He just cleaned up like nothing ever happened. And I thought, "Okay. Maybe I didn't see that."

Then we started talking again and the same thing happened. And it turned out he had all these unresolved grief issues years, years that the very act of kind of finally sitting in front of someone and talking about it brought it up. So first we started off with his marriage which he was very upset that it didn't work out. [00:50:00]

CLIENT: (laughs)

THERAPIST: Okay. And he had sort of martyred himself a bit. And then we went into some of his issues with his parents and, you know, some of that didn't work out the way that he wanted it to. And he was always the good guy. You know? And he always did the right thing but in a lot of ways he was miserable and pissed about it. I don't know if he always recognized that.

You know and he was starting dating again and that kind of brought up some issues. But all these messages that he had heard about himself, you know, weren't necessarily true. They were kind of the things that he was told because of other people's stuff. Right? And he was really this incredible person and he just had to finally sort of let this go.

And he had been divorced for several years. You know? But it was a real struggle because he never saw himself because it involved this [identity issue.] (ph) He didn't want to be divorced. Right? But it just got so bad, the substance issues got so bad. And, you know, I think you guys are not similar in many ways. [00:51:01]

CLIENT: Yeah.

THERAPIST: But there are some similarities there. And I guess I am saying that to say, you know, looking at this stuff, I mean it is painful, but it doesn't necessarily Avoiding it doesn't provide any clarity.

CLIENT: No. And, you know, and I think also recognize it. Not that I necessarily subscribe to the medical model of addiction and all those words and everything. But it is like, yeah, I can see how my behavior provides some codependency for somebody who is also trying to avoid. And it is like, well, yeah, if somebody stopped the merry-go-round maybe it would facilitate change all the way around.

THERAPIST: And there are some real good reasons. And I mean I guess I want to acknowledge. There are some real reasons that you have avoided having this conversation. Things have taught you over time that this conversation isn't welcome all the time, is scary. And I think that is true. [00:52:18]

But I also think that not having the conversation or sort of denying yourself the chance for understanding. You know, you are going to find clients who don't really care about insight. Right? And that is okay. You work them with CBT, you work with them with some of the other models. Because they are not interested in knowing the why, they want to know what. Behavior is what. You kind of want to know why.

CLIENT: Mm hm.

THERAPIST: Because everything about you, all the philosophies you seek are about the "why." And so this is the one area that your "why" is missing. And it is not that she can fill in the pieces but the possible collaboration and maybe you can fill it in yourself. But you can't do that if you are stuck.

CLIENT: Yeah. Yeah. (pause) Mm hm. (sigh) Yeah.

THERAPIST: How are you doing right now? That is a lot?

CLIENT: Well, yeah, you know, it's (pause) Yeah. Just knowing that, yeah, this is like it is the 800 pound gorilla. You know? It is what I have got to do. It is the work that I have got to do. And we can talk about other peripheral things that may be related but it is like, yeah, you know what? I have just got to climb this damn mountain. You know? [00:53:43]

THERAPIST: It doesn't have to start at the top though.

CLIENT: No.

THERAPIST: You can start with kind of letting yourself think whatever you need to think and looking at it. It can start with, "What would you say if you wanted to say something. It doesn't have to start with a conversation. It can start with, what would it be like to have a conversation? You don't have to have that conversation. You don't ever have to have that conversation but you certainly don't have to have it any time soon. You know?

CLIENT: Mm hm.

THERAPIST: But thinking about having it or thinking about, if you could say anything what you would want to say and what you want to hear? You know? Entertaining in your own mind what you would like it to be. You know? Or what you are afraid might happen might be a good place.

CLIENT: Mm hm.

THERAPIST: A little mental rehearsal.

CLIENT: Yeah, yeah. But I think just, you know, recognizing that it is just important to stay with. (pause) Yeah. And just being with the snake.

THERAPIST: Mm hm.

CLIENT: Being with the cobra. Whatever. It is just like I have got to be with this. You know, as opposed to running off. [00:54:48]

THERAPIST: Well I hate homework but I am going to give you homework.

CLIENT: (laughs)

THERAPIST: I would like for you to let your mind roam. Right? You know? If you should think back to our conversation today or think about what it would be like to talk with your wife. All of

the positive, negative and every thought in between without censoring yourself. And if you do catch yourself censoring you I would like to hear about it. What are the areas that you most censor yourself?

CLIENT: Mm hm.

THERAPIST: You know, and what feelings come up? Is it because you are about to have a thought that you deemed shameful? So I just would like for you to be aware of the kind of meta cognition piece of what your thoughts are and how often during the day you tell yourself not to have particular thoughts.

CLIENT: Mm hm. Mm hm.

THERAPIST: And maybe we can just be aware of that.

CLIENT: Yeah, yeah. And I have, actually I picked up a dedicated notebook to start journaling.

THERAPIST: Okay.

CLIENT: I used to do that kind of thing anyway. So it is like, okay.

THERAPIST: Okay. Let me know how that works.

CLIENT: Yeah. I will see. You know, I am really trying and I feel like it has not been interestingly enough it has not been something that has worked well for me.

THERAPIST: Yeah. It may not be your thing. Maybe instead you go out to your, you know, is it like a workshop? And do something with your hands.

CLIENT: (inaudible at 56:15)

THERAPIST: But journaling, you know, you can see if that works. You know, it works for some people. Some people it is just not their thing.

CLIENT: Yeah.

THERAPIST: Wherever you can let your mind roam freely.

CLIENT: Yeah. And I think that, yeah. I will see where it goes.

THERAPIST: Yeah.

CLIENT: But I also need to let go of the story of, "You don't know how to journal." Or, "You are not doing it right." Or whatever.

THERAPIST: Oh, definitely.

CLIENT: So it is just going to be allowing yourself to think and process on paper the way that you do that.

THERAPIST: Sure.

CLIENT: And I know that sometimes it looks like a lot of scribbles and circles and pictures and stuff.

THERAPIST: Yeah. Don't censor yourself as you journal.

CLIENT: I know.

THERAPIST: Yeah. Just let it go.

CLIENT: It is like, "Oh, but my journal doesn't sound like Anne Frank." (laughs)

THERAPIST: (laughs) Let's hope not.

CLIENT: (laughs)

THERAPIST: Okay. So we are on for next week. There is -

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: ...I'm going to put my faith in them too because I don't think we can take too much more of this. So how are you?

CLIENT: I think I'm doing okay.

THERAPIST: Okay. And I forgot the movie of course.

CLIENT: That's okay.

THERAPIST: I had a little Post-it Note but it didn't make it to the car.

CLIENT: Too bad. No, I feel like it was, good is not a good word, but a couple of watershed moments over the week.

THERAPIST: Oh do tell.

CLIENT: I think that the first one was after class. I had a discussion with a friend after class and the conversation revolved around pets and pets' response to you. And she was saying that we were kind of talking about feelings and having gone through this process of being more in touch and more in tune with your feelings, she said it changed the way her animals responded to her. [0:01:13]

THERAPIST: Interesting. How so?

CLIENT: They can pick up on the feelings.

THERAPIST: Yes, they always can.

CLIENT: So they now, she seems to feel that they know before she even knows that she's sad or whatever. So she just noticed that in her animals and I was discussing how it feels like, I was kind of joking that yes, my dog, she just when I first come in she just runs up puts her nose against my leg and goes oh it's him, okay. And then what she said to me was maybe she doesn't know that you're there. And I know that there's this whole thing going on that when I'm not there the dog lays around and mopes. And so I'm the alpha dog and when I come home she just needs to know that I'm there and it's all good. But what I really was hearing and what I took from that was maybe she doesn't sense that you're there. Maybe she can't pick up on those feelings. [0:02:21]

THERAPIST: And we're still talking about the dog?

CLIENT: No. Of course not. So then it was what I sensed after that, it was in that moment, it's one of those kind of time standing still moments, like that slip on the ice, land on your back and knock the wind out of you. It kind of took my breath away and I said oh my God, what if I'm really not there? Just in terms of of course I'm not there. If I can't be with my feelings, you've shut off this huge part of you. And what if the dog really doesn't know that you're there? Those kind of feelings but certainly I'm not as much there as I could be. You know, it's just that real, that reality, that sense of like – yes, it was just that insight, big insight. [0:03:22]

THERAPIST: And what did you take that to mean for your life?

CLIENT: That being in touch with feelings and embracing that. I guess where I went with that then just kind of making that commitment to sit with whatever the feeling was that was coming at the time. And I recognized that it didn't take long before I was like holy crap, I'm in this place of all these feelings. [0:04:04].

THERAPIST: What feelings?

CLIENT: Anger, fear, confusion, those –

[Phone rings]

THERAPIST: Oh I'm sorry. I keep forgetting to turn that off.

CLIENT: That's okay. All those things that kind of things that are coming at me and I just kind of sat with that on Friday. And then got up early on Saturday, too early, went to the Y to work out and then didn't come home until 7:00. So I had a half hour to park near the Y with a three-mile track around it out in the woods. It's a nice area and I was doing this power walk around there and I was energized by that. I was mentally in my mind. At some point I said yes, you know what I'm drawing a line in the sand. I'm not –

THERAPIST: What's the line?

CLIENT: going to – I'm not – I think that when I recognized or identified that it's a commitment to authenticity. No, I got to be with whatever it is. I've got to let go of the old habits and patterns of how to deal with feelings and – it's like that old metaphor of sitting with the snake. [0:05:28]

THERAPIST: Yes, right. I mean it sounds like a pretty powerful moment.

CLIENT: It was, yes. And it was again another one of those kind of like – it's still close enough event to me to have that sense of feeling, of being in the park. I remember the conversation; I remember the park. It's like snapshot moments. So there's the commitment to that –

THERAPIST: What will change for you then? What will be different?

CLIENT: Well then coming back home from the Y, I was energized and recognizing that the closer and closer I got to home wow all of this anger is kind of building up. And I said okay, I'm just going to be with this. And coming into the house and I said okay. [0:06:21]

And so it didn't take long before what's wrong? And I recognized that there was a big part of me that said nothing. I didn't go there but I know those patterns, I know what to do, I know what to say to be inauthentic. And so eventually I got to be able to this place of just sitting with it and calmly sitting with it enough that I'm like yes, it's part of the stuff that I'm working through. I'm –

THERAPIST: Tell me what you were sitting with. What were you feeling?

CLIENT: Oh, it's difficult to – just the image of my mind is the big soup pot on the stove. And you can tell it's boiling, you know the lids on it kind of thing and just lifting it up enough to know that there's –

THERAPIST: Steam coming up. [0:07:27]

CLIENT: Yes. So the anger and wow this is not just, there's not a particular incident, it's all of the stuff. It's all of this anger. And I recognize that I'm not going to run away from it but I'm also not sure I can open the lid on this right now. So it's okay.

THERAPIST: Can you tell me what you think is in the pot?

CLIENT: Oh years of built up anger.

THERAPIST: Tell me about it. Let's name it. [0:08:01]

CLIENT: Angry at being, the feeling of being stuck in this relationship; anger of betrayal, feeling like you've been betrayed. So there's that –

THERAPIST: There's more.

CLIENT: Yes, whatever. Anger probably going all the way back to being a kid. Anger about not being able to just be angry or whatever.

THERAPIST: What else?

CLIENT: I don't know.

THERAPIST: Seamus, how would I know you're angry? What would it look like?

CLIENT: Yes, I'm not quite sure I'm there yet.

THERAPIST: Where would you have to be for me to know you're angry?

CLIENT: [Pause] I don't know. But I do know that it's kind of like that same sense of being angry.

THERAPIST: So even in the process of discussing anger it becomes intellectualized.

CLIENT: Yes and no. I spent the weekend in tears, not a lot but –

THERAPIST: Yes, tell me about that.

CLIENT: on the verge of tears and I'm just again trying not to intellectualize that too much but just okay, I'm just going to sit with this, whatever this is. [0:09:42]

THERAPIST: And what was it? What brought you to tears?

CLIENT: Maybe tapping into loneliness, tapping into, or you know, yes sadness. Again, anger and sadness about –

THERAPIST: Any grief there?

CLIENT: Yes, maybe. Maybe. Yes, there's maybe that too. Knowing that I didn't really spend a lot of time trying to name stuff as much as just trying to sit with it, yes. So –

THERAPIST: You've been busy.

CLIENT: Well yes. So knowing that that, yes, is a lot of what was going on.

THERAPIST: So what does it feel like to talk about this? What do you feel?

CLIENT: Oh I'm feeling energized, committed, whatever. I'm okay with that. Knowing that yes, I'm not exactly sure what it looks like necessarily to be angry can I feel that? It's getting closer. I have a – I will back up just a second because I, in coming back I was able to not only did I not go down the path of denying what I was feeling, but I was able to make some inroads in terms of saying what I was feeling. [0:11:38]

THERAPIST: That's pretty fantastic. To yourself.

CLIENT: No, to Mary.

THERAPIST: Oh my gosh.

CLIENT: So it's like here's the deal. I'm doing some -

THERAPIST: Whoa. Let's go back. What happened?

CLIENT: Well I was really I was committed to staying with that. Even though it was a little bit frightening I said, okay I just need to just be with this. Not in any kind of accusatory place but okay, well I know from the program, from this work of whatever, self-discovery that I'm doing that I know that it's really important for me to just be with my feelings right now. All I can tell you is that I'm just feeling a lot of anger right now and this is where I can be with that. [0:12:29]

THERAPIST: This is what you said to her?

CLIENT: Yes.

THERAPIST: Wow.

CLIENT: And then it was kind of that sense of I don't really remember the question but it was a probing question and in terms of it was a question that was going to, it required me to, like a self-revelation kind of thing. It was a deeper [0:13:02]

THERAPIST: She asked you?

CLIENT: Yes and I recognized at the moment I can't go there. So what I was able to say to her was I said well one of the things that I've learned through the program is that in order for that kind of communication to happen there has to be an alliance, there has to be this trust relationship there. And she was able to get it. She said so you're not feeling like you can trust me? And I said yes, I can't.

THERAPIST: Wow.

CLIENT: So -

THERAPIST: And that was received how?

CLIENT: I think it was, my guess just in terms of being together for 27 years, it was that moment of panic and fear probably, probably maybe a sense of wanting to close down from that a little bit.

THERAPIST: Her?

CLIENT: Yes. I'm just guessing. And I was also, we were also, it wasn't like a conversation too much but it was recognizing I think she did say something about recognizing that the state of our relationship being what it is. You know it's like we talk about it without talking about it, that kind of thing. We never really talk about it but there's a recognition that it's not what it's supposed to be. [0:14:43]

THERAPIST: From her as well as you?

CLIENT: Yes. And I was just able to say yes, you know it's a huge knotted ball of twine and it didn't get this way overnight. And it's going to take a lot to try to untangle this and I'm just not sure where that's going to go. And then able to kind of and then there was this sense, I wish that I had a tape recorder in my head to kind of be able to kind of replay that and look at it, but there was more of a sense of like the way that I felt it was, well I'm, from her, well I'm hopeful that this process or this program will help you and I get closer together. [0:15:31]

THERAPIST: She said that?

CLIENT: Yes. And I felt this instantaneous sort of being angry about that because what it felt to me was I'm sure that once you get fixed everything will be fine. And so I was able to just say well this is my journey and this is my path and we all have a path that we need to walk. And it was about as far as I could go with that. And, so that was it felt empowering to be in that place and it was not tremendously scary, but I was in this place of I had a real burn on coming back from the Y and I said I'm okay. The line's in the sand; I'm not crossing back. [0:16:33]

THERAPIST: That's pretty incredible. That's pretty amazing.

CLIENT: I think so and I've really and I get that; I'm not knocking it down.

THERAPIST: Yes but that's not I never expected that you would come back and say that you and your wife began talking. When you started you sort of, it's a sort of self-process. You should be pretty incredibly proud of yourself. That took a lot of guts to even bring it up. It's interesting your interpretation of her response. Your immediate sort of emotion was anger and your sort of interpretation of her response was sort of like you need to get fixed and we'll be okay. From an outsider's point of view I would not have, that's not what I initially would've thought. Now you have obviously much more data than I do. [0:17:23]

CLIENT: Well yes, and it's data. It's past experiences; it's too many. It's too many of those scenarios in the past where everything will be just fine once you figure out how to open up and share your feelings and you do this and you do this. Again, that's my interpretation of how I'm interpreting that communication and there's always two sides to the story.

THERAPIST: But while she acknowledged the problem, not, no, she acknowledged a problem.

CLIENT: A problem.

THERAPIST: Yes, that there is a problem. Wow.

CLIENT: Yes. So, but the what I yes.

THERAPIST: You put yourself out there. That's a pretty intimate thing to do, to sort of not only allow yourself to be in the moment emotionally which can be very scary, but also to take it and it sort of provoked you to action. You did something with it. You had a conversation about it in a very honest way. That's significant, Seamus. [0:18:39]

CLIENT: Yes, and I really do feel like there has been some click in terms of it's just like the it's almost like that sense of Dorothy in the Wizard of Oz. Once you know that the little old guy is behind the curtains, you can go back. It's like okay, this is it; you've got to be authentic. And it's not an academic exercise. [0:19:14]

THERAPIST: No it's not.

CLIENT: This has to be. And I feel like I also recognize that I don't know where this is going to lead.

THERAPIST: Okay. Where do you think it will take you? And not necessarily the relationship but take you?

CLIENT: I think it's going to take me to incredible places because I'm, just in a couple of days of just experimenting with this, trying to be with this it just feels like oh, this is great.

THERAPIST: But your first word, I find it very interesting. Your first word is that it was energizing, not draining or your first response wasn't that it was scary although I'm sure parts of it probably were -

CLIENT: Not nearly as scary as you had played it out in your head. But I think it I don't know.

THERAPIST: What allowed you to do all that? [0:20:10]

CLIENT: That's a good question. I think it's probably been cumulative. I think it's probably been cumulative. I think it has been the influence of this work; it's been the influence of being a part of this program. All of these little it's kind of like Jenga, eventually something gets pulled and everything falls.

THERAPIST: Does your wife know you're in counseling?

CLIENT: Yes.

THERAPIST: Okay. Have you had any conversations not about the content but about you said I'm going to counseling and she had a response to that?

CLIENT: Well I think there is that sense of I think that there's again I think she'd like to know more about that but I'm not in a place of being able to do that.

THERAPIST: Yes. Well, your sessions are private. [0:21:12]

CLIENT: Yes and even but I don't know that they would necessarily have to be if the relationship was in a different place.

THERAPIST: You know as you're talking and even kind of looking at you physically whenever we bring up your wife or sort of her interest in let's say your sessions or telling you something, your first instinct is to protect yourself.

CLIENT: I know.

THERAPIST: I mean, do you notice that?

CLIENT: Oh yes.

THERAPIST: You do it physically, you jerk kind of a bit and your first instinct is to be kind of no, she's not getting any information about this, or -

CLIENT: It's been a lot of years.

THERAPIST: It has been.

CLIENT: It's been a lot of years and I think that I recognize that again trying to stay with that big pot of emotions it's like yes, and I'm trying not to be too much in the place of blaming because I recognize who is the guy that's been putting the lid on this. But I'm like dammit I'm yes, there's going to be in order for that relationship to I don't it'll never go back to what it was and I wouldn't want it to but in order for that relationship to be a quote producing relationship there's going to have to be a hell of a lot of work. And I can't do that by myself. [0:22:43]

THERAPIST: No, but you really don't trust her with your feelings.

CLIENT: No.

THERAPIST: It sounds like you've been shut down too many times.

CLIENT: And so you put it out there just a little bit and I recognize that's it's I'm not maybe being fair but it's little things like we had the opportunity, we had the opportunity to drive back together from Indiana University, which is a three-hour -

THERAPIST: Okay, that's about four, three or four [0:23:18]

CLIENT: Two and a half hours of driving, maybe three.

THERAPIST: To drive there and back?

CLIENT: To drive back. And again I'm not asking her to but she says, you know she knows what the conditions are.

THERAPIST: Conditions?

CLIENT: In terms of we had the opportunity to drive back together. We have had this hint of a conversation last Saturday, which it's not like a written invitation but it's a pretty big overture on my part.

THERAPIST: You want her to pick it up and do something with it. [0:24:04]

CLIENT: And she's choosing to drive back with her best friend.

THERAPIST: Oh boy.

CLIENT: So I said, okay -

THERAPIST: How did that feel?

CLIENT: Well, I was able to just be with that. A friend of mine recently said sometimes you just got to embrace the suck. [Laughs]

THERAPIST: Well sometimes you do but did no part of you want to say well now wait a minute?

CLIENT: No. To be honest with you, no. I said I'm not going there. If you don't want to f***king ride back with me fine. I'm not going to change.

THERAPIST: You know there are a lot of misses I think that are happening.

CLIENT: A lot of?

THERAPIST: Misses, you keep missing one another. And some of it's by tacit agreement. I'm sure there's a huge part of you that's happy to drive back on your own, and then on the other hand it's kind of like now we just started something here and you deliberately didn't see the opportunity or ran from the opportunity and I guess I'd be feeling mixed feelings. One, I'm relieved, I don't have to do this with you, or two, you just validated everything I ever thought about you. Or three, and then it would also hurt. [0:25:19]

CLIENT: Can I have all three of those?

THERAPIST: You can have them all because -

CLIENT: This is not like Let's Make a Deal? [Laughs]

THERAPIST: No. I think you can have them all and I think I'd be feeling all those things -

CLIENT: Yes I do.

THERAPIST: that here you go again; you kind of really do some workaround. And this work has been years in coming to kind of allow yourself to be in an emotional place, really get in touch with all of the pain and sort of discomfort those feelings bring, and to say something about it. And then, and again it's received but it's not furthered.

CLIENT: No and again I'm trying not to be in this place of setting up the rules of the game and then not telling anybody. It's like well, I didn't put it out there; I'd like to continue this conversation. I just put that out there. So [0:26:22]

THERAPIST: But we always have hopes don't we? We always kind of hope or wish I remember, for example my husband and I got into some kind of argument or whatever and we were really getting on each other's nerves so I went upstairs. And I thought to myself now part of me wants to be alone from you while you have your grumpy self downstairs and I'm upstairs. And I thought but it's probably better for the relationship if you either come up here or I go down there. And he came up and said do you want to watch a movie, which is his repair effort, and I said

okay, I'll be down in a minute, and I went downstairs. So that means he was the mature one in that situation.

But I thought, I remember thinking about it and I think what happened there was a miss. You had a connection, which you haven't had in a while where there was a conversation, some potential for some intimacy, even kind of just starting, and then the hope was that she would do something with that, like I made an effort here; not only I hope you recognize how hard this is for me but then you also make an effort. I'm not talking huge expectations here. And then unfortunately your hope, your wish did not come true, which sometimes makes you go okay, I was right. [0:27:36]

CLIENT: Yes and I think what it does for me is just there's that inclination to shut down.

THERAPIST: Sure absolutely.

CLIENT: And it's trying to remain open to that and open to feelings in the face of that is the challenge; that's the work.

THERAPIST: Well I think your physical reaction to the thought of going deep with her is visceral, which tells me how deep the wound is. I mean that tells me you have felt slapped down any time you've been vulnerable and you say absolutely not. Even the way you talk about your feelings with her in this instance over the weekend is informative but it's not inviting her to not only comfort you because you don't trust that she will or can do that, it's not inviting her to even participate, it's informing her which is a power position. It's like I'm going to tell you how I feel but I'm not going to invite you to experience it with me. And that tells me there's such a long history of your feeling shut down, misunderstood and deeply hurt that you do not trust that she can handle your basic feelings at all. [0:28:50]

CLIENT: Yes, that pretty much nails it down. You hit it there.

THERAPIST: I mean you have described it as the kind of the force field.

CLIENT: Yes, yes it is. [0:29:09]

THERAPIST: And the fact that she chose to drive back with the best friend, which is a point of contention already. Not only did you it's not that you chose to stay longer or drive back alone. You chose to drive back with this other person who you are sharing intimate things with. I mean that's another, it's another miss.

CLIENT: Yes and I was like, Friday night so we don't really, I mean there's a couple of spaces that she puts on the calendar for us to do things. And I recognize that's a coping mechanism, it's like if I fill up the calendar so full then you and I can have coffee, literally you and I can have coffee for 10 or 15 minutes before I have to go to work on some days, that doesn't allow us any

time to have any kind of a conversation. I mean maybe we can hit the highlights of what has to be done today [0:30:10]

THERAPIST: Is that what it's -

CLIENT: That's what it is, yes. And then now that the kids are gone and I'm at school, that changes up the pattern of things, we can have dinner out on Wednesday nights.

THERAPIST: Before choir practice.

CLIENT: Before choir practice.

THERAPIST: So you can't really get anything -

CLIENT: So there's a limited period of time -

THERAPIST: Your [fizz was slot] (ph) -

CLIENT: Got to go. And then, okay so on the books, we had this, she wanted to go see this big band that was playing in a restaurant down in Limestone. So it's like, okay. One of the friends from school's got a big band and so we wanted to go support them and go see the big band. We're getting ready to go out and she says well Lisa's husband's gone for the weekend; I invited her to come along too. And I'm like -

THERAPIST: Oh Steve.

CLIENT: [Laughing] son of a bitch. It's just and I said sure, whatever.

THERAPIST: But that's not okay with you. [0:31:14]

CLIENT: Well I've just gotten to the place now where before it wasn't okay. And now the relationship's strained so bad that she might as well come along because -

THERAPIST: Right. Yes. And I do get that. That part of you is sort of relieved, and part of you also pissed and part of you is just kind of accepting it. But you're still angry about it.

CLIENT: I'm angry because now, to be honest with you and honest with myself, because now I'm f***king stuck in a relationship like this. [Laughing] And I stuck is -

THERAPIST: No but stuck, that's the first time you've said that. How did that feel to say?

CLIENT: Oh, you know it's just the reality of what it is right now. It doesn't necessarily have to be that way forever but I recognize that that's my condition. I'm stuck right now.

THERAPIST: You feel stuck. You're not stuck. [0:32:18]

CLIENT: No, but I've felt stuck for a hell of a long time.

THERAPIST: Yes but you haven't sort of spoken the truth in the air and felt all the things with it.

CLIENT: No, not so much and I think that the weekend, that moment over in the park. It's like I'm done feeling this.

THERAPIST: Yes, so that means you're not stuck any more.

CLIENT: No, I'm not stuck any more. I'm yes, you know what? I need to figure out whatever strategies I need to do to get myself unstuck.

THERAPIST: Because you don't want this anymore.

CLIENT: I don't want this anymore.

THERAPIST: Wow.

CLIENT: So I don't know where that goes. And for me all options are on the table. I don't all I know is I'm done with the old shit.

THERAPIST: And the old shit that you're done with is?

CLIENT: Just going back into that place of I'm going to deny my feelings and I'm going to say that this is okay and go into this place of stasis or something. I said no. [0:33:33]

THERAPIST: You're done with that. I see that, which means you're not silenced any more.

CLIENT: No I don't really think so. I recognize that it's emerging; it's new. I'm not necessarily afraid of it but I also recognize that there's a certain wisdom that I'm wanting to bring with it. It's like, okay, it's okay. It's sort of like the dog that's been chained to the barn all of its life and somebody lets it go, there's this inclination for it to just run like hell. [0:34:13]

THERAPIST: And what would that look like for you?

CLIENT: I mean there's an initial euphoria.

THERAPIST: Yes, what's the fantasy? If you could have no restrictions what would you do now? No restrictions, no guilt restrictions, no commitment restrictions what would you do?

CLIENT: You know I recognize, really as much as I sit in this little cell of enjoying putting on the clothing of not good enough and low self-esteem, it's like shit, I'm a pretty good guy and there's

a hell of a lot of people out there that I know I can connect with. Yes, can I allow myself just to say that? Can I allow myself to run free off the chain?

THERAPIST: Yes, at least in the fantasy. [0:35:22]

CLIENT: Yes, I'd find a relationship where I could explore. And I'm not talking [sexualizing it] (ph); I'm talking about I just want to be known by somebody. I want to know somebody else.

THERAPIST: But what if sexual intimacy was part of that? That doesn't have to be, I mean that's a normal part of life.

CLIENT: Yes, and I would be okay with that. But I think for me right now that, that need -

THERAPIST: The need to be known.

CLIENT: is even deeper than the sexual piece. I recognize that the sexual piece is there and that I don't want to deny that either but I'm just saying I need some water first [laughs] and then we can deal with other things. So, yes, that's the fantasy piece. Can I imagine that fantasy piece in the relationship that I currently have? Not right now. Does that mean that it could never happen again? I'm not sure. I'm open to that possibility maybe. I mean if I have to put a percentage on there maybe I'm 10% open to that right now. I mean there would have to be some serious work in terms of trust being built back up again. I at this point don't see the possibility of that happening but maybe it does. [0:36:53]

THERAPIST: You've done some amazing work. I mean this is all sort of really brave stuff. You've really had to get down there and sort of get into the guts of the thing.

CLIENT: Well maybe that's where you get after you wallow in it for years.

THERAPIST: Well, wallow. I hope there's no self-judgment there. You feel kind of what you feel.

CLIENT: No I don't necessarily, I don't think that it's a I'm not yes, that wasn't necessarily meant to be a knocking myself kind of a thing but -

THERAPIST: So embracing your feelings is empowering. [0:37:36]

CLIENT: Yes, I think so. A little frightening but empowering.

THERAPIST: Yes because feelings are probably the most real part of us. They're the most honest as long as you don't judge them or try to rationalize them out they just are.

CLIENT: And I think that, I think over the weekend I was hugely grateful or leaning on my meditation practice because it allowed me to stay in the moment and okay this is the skill that I

didn't have before. I didn't know how to do that before. I just ran like hell or I put the lid on it or whatever. [0:38:21]

THERAPIST: Well and you know why you ran like hell?

CLIENT: I don't know, because I didn't want to be hurt.

THERAPIST: Well not just that. I mean you were already hurt but the experiencing it and looking at it you were always told whether through words or actions something is wrong with you if you feel this way or you shouldn't feel this way or feelings aren't important or don't show us your feelings. And that message got repeated from childhood through adulthood. And you realized, we were talking about scripts that aren't true, it's not true. Your feelings are and we talked a lot several weeks ago about you being a deeply feeling man.

CLIENT: Yes, and I think that it helped be able to get in touch with that.

THERAPIST: It's a gift, Seamus. [0:39:15]

CLIENT: Yes, I think I'm starting to appreciate that. I think I'm starting to appreciate that and recognizing it's who do I connect with. Other people that have deep feelings. I haven't found too many guys that have deep feelings that I can connect with. The only one that I did three years ago told me he's trans. I said oh shit, crap, cross that one off the list. [Laughing]

THERAPIST: Well there are if you look at remember when we talked about Jung (ph) and his work? You will find that most of them are male psychologists. But they're out there.

CLIENT: No, I believe that. I do believe that. It's just that they're not in my immediate circle of people. And I think that once I put the intention out there that I throw that out into the universe, they'll start showing. [0:40:18]

THERAPIST: What about in this group that you're a part of, the men's group?

CLIENT: I think that that could happen except for physical distance. These guys are up in Shorewood and I'm down here in Limestone. We get together every six months. So it's more like, I see it more like a quasi-supervision group almost. We get together and we kind of check in. It's a place to kind of connect for an hour or two and then -

THERAPIST: Okay. APA has a division on men, the psychology of men.

CLIENT: Well, Manz's (ph) coming on Tuesday so I'm going to that. And I think Peterson's also talked about the fact that I might be able to, there might be some connection there. We'll see, we'll see what happens. See if there is a connection. I might end up working or doing something in that field too.

THERAPIST: Well that would be great. That's a lot of work in a very short amount of time. I mean you've been really working very hard. [0:41:32]

CLIENT: But I get the motivation. I ain't going to be no counselor if I can't figure this out. If I -

THERAPIST: Well you could be. You'd just be one type of counselor.

CLIENT: Yes, well it's not the kind of counselor I want to be. Okay, I get it. Authenticity; it ain't going to happen unless you're authentic.

THERAPIST: What have you learned about yourself through this?

CLIENT: [Pause] Well I think that it's being able to kind of look at, kind of step back and say this pattern really isn't all that much different. Whenever I choose to take on a project, I'm going to figure out what needs to be done and I'm going to surround myself with a network of people to help me figure out how to get this thing done. And we're going to do it and it's going to get done well. And there's a certain perseverance involved. Yes. [0:42:41]

THERAPIST: And that's what you do? You're just now your own project?

CLIENT: Yes. I think so. Sometimes I often go back to the project of building the house. There was a whole lot of well that was a really -

THERAPIST: Did you participate in building your house?

CLIENT: I built my house. [0:43:07]

THERAPIST: I don't think I knew that.

CLIENT: And it was like okay I've got a little bit of background, a little bit of background on how to build a house. I'm an Industrial Arts teacher so I told myself that I knew how to build a house. I know how to read a print; I never built a house before.

THERAPIST: But you have now. You built your house.

CLIENT: I put together a team of people and I learned everything I needed to know and I built the damn house. So I got a track record; I can do this.

THERAPIST: Did that, have you ever processed the fact that you built your own house?

CLIENT: Oh yes.

THERAPIST: Have you?

CLIENT: I think so.

THERAPIST: Really? That's quite the analogy.

CLIENT: Oh, well maybe I didn't process it.

THERAPIST: I don't think you did. You decided you were going to build your own house and you built your own house. And then your family lived there. You never built a house before. So you started from scratch, some knowledge; are you happy with the product?

CLIENT: Yes.

THERAPIST: What do you like best about the house? [0:44:28]

CLIENT: Well I can also go down the road about all the things I don't like about the house, but I think for me it just, it symbolizes that sense of a project undertaken.

THERAPIST: How many bedrooms?

CLIENT: There are four.

THERAPIST: Okay, what's the layout of the house?

CLIENT: It's a basic it's kind of a farmhouse-like looking thing, so it's big, wraparound front porch.

THERAPIST: Did you design it?

CLIENT: Yes. We took a design that we found in a home book and kind of altered a few things here and there and -

THERAPIST: Steve what made you think you could build a house?

CLIENT: I built a bunch of little shit in the workshop. [Laughing] I don't know. [0:45:21]

THERAPIST: That's not the same thing as building a house.

CLIENT: No it's not.

THERAPIST: You know, I think you have to -

CLIENT: I don't know. I don't know what made me think I could do it.

THERAPIST: So the next time you go for -

CLIENT: I built a backyard shed prior to that. [Laughter]

THERAPIST: I think the next time you have a quiet moment, I think you really now have to look at what building your house from scratch meant. Like you just decided to build a damn house. So why -

CLIENT: Well it was building a house but it was also building a cottage industry.

THERAPIST: Okay, but you never built a house before, right? So whatever you put your mind to you seem to be very successful at it, right? And if you can build a house from scratch, what can you do with yourself? I mean there are countless of examples that counter the negative scripts and we just continue to discover. You built a freaking house. Well that's pretty significant.
[0:46:37]

CLIENT: No and I think that you asked how does this impact, how is this getting in touch with your feelings and I think that what kind of it does somehow. It's like pulling back the veil; I get that. Yes, there's a lot of shit there to celebrate; there's a lot of good stuff there and I can go with that. [0:47:04]

THERAPIST: It's like rebuilding your house from the inside. I mean it's sort of like really looking at what's inside, what the patterns are, what it feels like, what it looks like, embracing, accepting what's on the inside.

CLIENT: Yes, and again I'm kind of employing some of those same patterns that I did before. I need help doing this; I've got to surround myself with people who know how to do this. I'm not sure I could've built the house all by myself but having a network of people that can aid me in doing that kind of thing. Not, yes I could do it by myself. I'm sure eventually I could figure this thing out but I like the energy of working with a team.

THERAPIST: Well and you don't have to build anything by yourself. You can but you certainly don't have to.

CLIENT: So, yes.

THERAPIST: That's pretty incredible. [0:48:10]

CLIENT: And also just like had this thought of wow, that there's a lot of anger just sitting there for another time. Like, when we moved from that house over to Bradley-

THERAPIST: From the house you built to Bradley?

CLIENT: so that the kids could be in the other school district and so my wife could be closer to her best friend. [Laughs]

THERAPIST: You always laugh. You know what? I've come to learn that that's where the anger is. Whenever you laugh like that, usually there's some hurt or some anger there.

CLIENT: Yes, I know. Thanks, but, yes that's yes.

THERAPIST: So tell me, so you built the house and you moved.

CLIENT: Well I built the house, then I built the house, I was working as a teacher, then I was kind of moving toward setting up cottage industry. So I got my furniture building business in the garage so I'm there when the kids I can get the kids off to school in the morning, I'm there when they come home so it was just like this whole little dream that I had created. And then it was we made the decision that my daughter it wasn't working out in the school district or the school system where she was at so it was try to figure out how to plug her into the other one, which precipitated buying a house. And then eventually it was like oh now it's a 25 minute drive from the house to the school and then this is getting crazy and [0:49:56]

THERAPIST: How did you feel about those decisions?

CLIENT: Oh my God. It was I was in the pit for a while.

THERAPIST: Meaning?

CLIENT: Depressed, angry.

THERAPIST: So this was not a decision you wanted to make.

CLIENT: It was a decision that, yes it seemed like the best thing to do for my daughter but it was, yes I was letting go of my house and my dream and -

THERAPIST: And there was no discussion of your letting go of the house and the dream?

CLIENT: Well I would have to really dig up those memories again because I've sat on all I -

THERAPIST: But you haven't sat on the feelings because that's so after you build the house, the family moves into the house and then the family moves back out of the house. That's a rejection of the house, of what you built.

CLIENT: And it was probably a little bit more personal than that.

THERAPIST: Yes, so tell me about that.

CLIENT: You know I think at the point when we did make the move over, that this, the friendship had started to build. So that there was this sense of, for me even though it wasn't spoken, there

was this sense of this is just damned inconvenient. There's a half an hour drive that's going to have to take place if you're going to go from one person's house to the other house. And that's like so I knew that I felt, I didn't know, I felt that there was another motivation for moving out of the house along with getting the kids over into the school district. [0:51:50]

And then when the kids were out of the school district and we no longer needed to be over there, then moving back out to the house there was almost that sense of resistance in terms of like -

THERAPIST: Which is a rejection of the house that you built for your family.

CLIENT: Which I take a little bit more personally. [Laughs]

THERAPIST: Well yes because it's, I mean it's pretty symbolic of everything, as is your going along with the decisions but not really feeling included in making kind of being forced feeling like you're forced into making these decisions and you never got to vent your feelings about them. [0:52:25]

CLIENT: I never allowed myself or if I you know what, I think that I did but there was that there was always this cold sense of logic like well this is the best decision kind of, what other choice, so -

THERAPIST: But then you have to buy a house that somebody else built to live in when you built your house for your family's needs. That's pretty deep, which is why every time you go home you feel a sense of anger because the symbols are everywhere.

CLIENT: Well and my business remained at my house so -

THERAPIST: That's right, so you had to go back to the house -

CLIENT: so I had to drive back to an empty house every day and, yes. So that was six years of yes. [0:53:14]

THERAPIST: So that's a lot.

CLIENT: Six year of going through that and the relationship and it's just like yes, you know what? That's enough, I'm done, I'm done with that. It's just coming to that place of recognizing that I'm done with that. I'm done with -

THERAPIST: There's a lot there.

CLIENT: being a floor mat.

THERAPIST: There's a lot there. How are you doing right now?

CLIENT: I'm doing okay. I really am. I'm doing okay. I don't know where this goes but I'm doing okay. I'm going to be okay with this.

THERAPIST: Well that I know. You know, again, you've done some amazing work pretty quickly and I'm proud of you. I hope you're proud of yourself.

CLIENT: I do feel that, yes.

THERAPIST: I remember your first session, first or second session, talking a little bit about the anger and you said no, we're not doing that, we're not going there and you did it a lot. Good for you.

CLIENT: Well I knew that that was the issue.

THERAPIST: Sure. Really, you were always honest about it. [0:54:14]

CLIENT: But, yes. So yes I know that we got a couple of weeks off.

THERAPIST: We do because next week you're gone, the week after that I'm up at the no that's February, but the next Tuesday -

CLIENT: I think it's actually the 18th of March.

THERAPIST: I do think it is the 18th of March. Yes, okay, we're back.

CLIENT: Yes, so we'll see if I can sustain this, maintain this for a couple of weeks.

THERAPIST: You know sometimes there's not once you sort of walk through a door with certain things you can't go back and I don't think you'll be going back.

CLIENT: I don't feel that sense and it's not a sense of there's a certain layer of yes, it's lighter to walk. There's a why would I want to pick that up again.

THERAPIST: Good for you. Well it would be interesting to hear what happens over the next couple of weeks as you kind of continue to stay in the moment.

CLIENT: Yes, and that's the other challenge just to be with that and to -

THERAPIST: You unstuck yourself. [0:55:22]

CLIENT: explore what that can mean for me.

THERAPIST: You know that, right? You unstuck yourself.

CLIENT: Yes. I know. I don't feel stuck. I don't know where I'm going -

THERAPIST: That's fine.

CLIENT: but I don't feel stuck.

THERAPIST: That's pretty incredible. Good for you. Well I'll be interested to hear what happens over the next two weeks.

CLIENT: Okay. Thank you.

THERAPIST: All right. So I will see you. Hopefully in March the Spring will come and stay with us consistently.

CLIENT: It'll only be a couple of wow. In March it'll be almost Spring by then.

THERAPIST: Oh yes. Please. Bring it on.

CLIENT: Tell me it's okay to take the GRE with almost the first week of study.

THERAPIST: It is. You'll be fine because they just need a score. They don't need a high score; they just need a score.

CLIENT: Really because I haven't started I'm not really freaking out about this but -

THERAPIST: No, I promise, promise, promise.

CLIENT: Okay, because I'm taking it this time.

THERAPIST: No, I promise. Just take it, yes. All right, see you later. [0:56:26]

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: Well, what's happening?

CLIENT: I don't know where to begin. So probably best place is present moment, which is just trying to figure out where I'm at present moment-wise, which is probably going to the course or the session. Where I'm at this morning is Lieutenant Dans (ph) strapped to the mast of the boat raging against the storm.

THERAPIST: [Laughs] Why?

CLIENT: That's where I'm at.

THERAPIST: It's a good thing that I get the movie reference because whenever, I find whenever I use movie reference in classes all of mine are from the 90s and the 80s so that's pretty I got that one. That's my genre.

CLIENT: I mean it's like there's nothing more raw than Lieutenant Dans (ph) screaming at the storm, so. Yes, and I'm remembering a sentence from a few sessions back, how would I know you're angry? Well I'm not sure that I'm in this place physically showing it but it's palpable. [00:01:12]

THERAPIST: I can see it. What's been happening?

CLIENT: Why don't you take me, if you can, can you take me back to where we last, our last session?

THERAPIST: Yes. Well we were talking a lot, I mean you kind of surprisingly told me that you had a discussion with your wife and you talked a bit about being unhappy. And she acknowledged that but then it was kind of dropped. I also remember that she had an opportunity to continue the conversation when you went to go see your kid at Indiana University, right? And she chose to drive with a friend instead and so I think that's where we were.

CLIENT: Yes. Okay. Yes, so that weekend, that weekend I went to see the kids, so I had an opportunity to see my son Harry in Maroa. And he had a conference; I stayed over with him. Lovely, lovely evening. Went out to dinner or went out to breakfast. Went out to dinner when my daughter came over. So we, I had an opportunity to connect with all the kids. [00:02:20]

THERAPIST: And was it just you?

CLIENT: It was just me because my wife was at this conference with her friend and then we all converged at Indiana University Sunday afternoon. My son was in a show. I didn't know the show. The show was A Little Night Music.

THERAPIST: Okay, I'm not familiar and I'm a musical I love musicals.

CLIENT: Yes, me too, and I said here's a Steven Sondheim I've never seen.

THERAPIST: Interesting. Okay.

CLIENT: So it's where the song "Send In the Clowns" comes from. Okay, and it's all about these love triangles of people in unhappy marriages and mistresses and here's my son playing me on stage. And I said, oh God, this is really oh the irony here is too thick for me to even sit in.

THERAPIST: Tell me about it.

CLIENT: [Laughs] Yes, I don't know if there's much more to tell other than that but hearing "Send In the Clowns" will never sound the same again. So it's just like [00:03:34]

THERAPIST: It's like a punch to the gut.

CLIENT: Yes, yes. And then yes. So then it's recognizing the lid is just coming off of the pressure cooker. Another image that I have is I am, I don't know it's terribly unpleasant, but just vomiting up emotion and it's so the best that I can be is restrained but I've recognized that I've been having these physical reactions. I can feel it. It's like being with the sensations of the body and [00:04:27]

THERAPIST: What physical reactions are you having?

CLIENT: Just a lot of tension. I recognize the closer I drive to going home it's just this buildup of tension. It's just such a, yes, a visceral feeling. So give me a second to try to pull it together but I'm trying to remember a series of events. So that was that weekend. I think that, I'm just going to throw stuff out there. At this point it just feels like [laughing] no movie reference but just this visual of I got these puzzle pieces and I'm just throwing them on the table like I don't know what. [00:05:32]

So there's this sense of okay, it's not unreasonable to want to have a relationship with emotional and physical intimacy. This is crazy, and there's just all this anger just kind of building up and -

THERAPIST: It's all the anger you've been holding back for a long time.

CLIENT: Oh my God, decades. And it's probably anger that predates my marriage. I don't know. And then, yes I don't know if I can really remember if there were other significant events of that week. But the weekend for Christmas this year we've decided not to buy gifts. We ended up buying a season subscription to Broadway on Detroit. So we got tickets and we ended up going to the first one of those shows on Sunday night. And we ended up going to dinner ahead of time and I was just in this place of kind of now, kind of this, but we're in this public place and it doesn't take a brain surgeon to know that there's something wrong. So she's asking me so what's going on. And I say, recognizing that I'm trying to jump back into those old patterns of, I'm not saying the words but they're right there, nothing's wrong; I'm fine. But I'm not going there so I'm just sitting with it and there's maybe some awkward silence but I was finally, and again I'm not going to be able to give this verbatim or anything like that, but I was able in probably choppy sentences and language able to get out expressing just all this anger that I'm feeling about [00:08:00]

And again I wish I had my recorder so that I could've gone back and replayed what was it that you were really able to say. But I know that words, probably like the bullet point that you could've used for the 6:00 news, was that I was able to say I'm in a three-person relationship

and I'm the odd man out. And I did say seven or eight years ago you hauled down the flag from the flagship and you transferred it to Lisa's house and you've left me here with nothing.

THERAPIST: That's amazing and very powerful.

CLIENT: And, so I know that that was kind of like where, I may recall other things that I was able to say, but for me it was like okay. And at the point that I was saying it, there was I don't remember this sense of being out of control. It was more a sense of there was almost just calm determination. I'm saying this. I just kind of leaned into it a little bit and it was okay and as a matter of fact it was like wow. [00:09:24]

THERAPIST: Wow is right.

CLIENT: You know, the anticipation of saying that was far worse than saying it.

THERAPIST: So what not only enabled you to do that but what enabled you to do that and then what reaction did you get?

CLIENT: What enabled me I think just the work that we've been doing, pushing the canoe (ph), sitting with this, I think coming to some kind of resolve but I don't know when that happened. But I got to this point and I remember saying it out loud, dammit, I'm going to get intimacy back into my life. And this is not an unreasonable thing for me to want. And so I've got to do something; I've got to take some action to make this happen. And recognizing that sitting on my emotions and being dishonest with myself is not going to get me there. [00:10:29]

THERAPIST: What reaction did you get?

CLIENT: I think initially there was the sense of, because there was some talk about kind of where this is coming from but it's kind of like the process I'm talking about, that through work that I'm doing with individual counseling and stuff like that. There was this sense of like oh I'm really so happy for you that you're doing this and it'll be not that those were the words but the essence was it'll be so great when you finally get all fixed and come back and everything will be hunky-dory. And it was just like, that was like throwing gasoline on the fire. And I said -

THERAPIST: Oh yes, sure. That made it much worse; I can see that. [00:11:14]

CLIENT: Oh my God.

THERAPIST: Yes, well it's patronizing. You go do your job and you just get that fixed with your little counseling program over there and when you're all fixed come back and we'll go back to the way we were.

CLIENT: Right. And it's just, I recognize that just kind of enflamed the torch or the fire. And then I also recognized that the other kicker in that was that whenever we talk about intimacy -

THERAPIST: You and she?

CLIENT: Yes, it's like we're not talking the same language. And she's says, she's starting to get a little defensive and the tears are welling up and that kind of thing and she says but all of the things that I do for you to show you how much I care; my love and affection for you and all of the intimacy that I give you, you're just not there for that. I said well tell me what that looks like because I believe that that's what you're trying to do but I don't know what that looks like. And she says well I give you a kiss in the morning on my way out the door and I tell you I love you. And it just came out of my mouth and I said yes, but you know what that looks like to me? That's just a reminder of all the things that I don't have in my life. It's just like, well that was probably not the most sensitive thing to say at moment but it was [00:12:56]

THERAPIST: It was deeply honest.

CLIENT: I get a peck on the cheek and that's it.

THERAPIST: Right. And Lisa gets the emotional intimacy that you're missing.

CLIENT: Yes. And then it was kind of I recognized that that was as far as she could go at that moment and she kind of went into this place of and it was also time for us to move to the show. But then it became mindless conversation about this and that and she was fiddling on the phone and looking at Facebook and telling me about this and that. I was just like before that though, I was saying that we were talking about physical intimacy. So that conversation then spilled into whenever we're talking about intimacy it's automatically it's about sexual intimacy. And I said you're not hearing me, you're not hearing me. And I get it, I get that her fear of sexual intimacy is so deep that that's but she started talking about our sexual intimacy in terms of past tense, as in completely past tense. [00:14:32]

THERAPIST: Give me some verbiage.

CLIENT: We had a really wonderful sexual intimacy in our life; we have three wonderful kids. Not necessarily that she said these words but that's over now and I can't go there anymore. And it's kind of like, it sort of happened at that moment but the stone that kind of got pushed over there it took a while before that started to roll into an avalanche and it just like wow, okay that's been my experience for the last seven years but that's never been stated. That's never been stated like yes, this is completely over. [00:15:28]

THERAPIST: And how did you react to her sentence?

CLIENT: I had this image that I'm the guy that's been sitting at the railway station for the last seven years waiting for the train to show up. And I said dude, what a dumb ass. This train is not even coming back and you're still sitting at the chain, at the station.

THERAPIST: You sat at the station for some very good reasons.

CLIENT: Yes, I get that but I mean that's where the anger is at. And this morning it was, I don't know.

THERAPIST: Go ahead.

CLIENT: Well, I'm just trying to decide if that's the chain of events.

THERAPIST: Even out of sequence, it's okay.

CLIENT: So I get the fact that all of this emotion is out there and I know it's got to be scaring the living bejesus out of her because I'm shifting paradigms in a pretty big way and I recognize that that may not have been my intention. I didn't want to hit the plunger but there you go. I put the nuclear option on the table. [00:16:40]

And again, where did this conversation fit into it? I'm not 100% sure but I was able to say you know what, I need physical and emotional intimacy in my life and I'm no longer willing to live without it.

THERAPIST: Good for you.

CLIENT: And that was a conversation that happened around the kitchen table maybe yesterday or the day before, I'm not sure. I don't know. It all started to, and I recognized it this emotional rage or whatever that I'm in right now, I'm just puking up junk and I'm sorry. [00:17:11]

THERAPIST: Emotional honesty, it's not junk Seamus.

CLIENT: Yes, I know.

THERAPIST: It's not junk. It's the truth that's always been there that she has ignored because it was convenient and you've been trying to ignore so you didn't have to have the conversation. So although I imagine it's a deeply painful space, it's a cathartic space because this is all the stuff that you've been holding in. And it's in some ways it's unfair that you're the one who has to hold it and she lives from the benefits of your holding it. And you shouldn't have to hold it anymore because you're not asking for anything unreasonable.

CLIENT: Well I can't, I can't and it's coming out. And I get that that's painful for me and her and everybody else. It's just like -

THERAPIST: But it needed to happen.

CLIENT: but I'm done. At some point, I don't know why, but it was just and I have kind of shut out music a lot in my life over the past seven years and I don't know why.

THERAPIST: No, you know why. [00:18:15]

CLIENT: Well, I shut down everything.

THERAPIST: Well not only that but you guys met around music, music is what sometimes pulls her away from you. I mean I -

CLIENT: Okay. You know what? Okay.

THERAPIST: Yes, I mean, and so, and whenever you are forced to connect, it's forced to connect instead of wanting it's around music or her concerts or her deciding what you're going to do. So I get it.

CLIENT: And music is of course touches the emotional cores, so why the hell put yourself there? Whether it's classical music or country music or whatever. I fired up an old Johnny Cash the last Johnny Cash album. He did a cover of Tom Petty's "I Won't Back Down." And I just like playing that. And then it bumps up against his cover of Nine Inch Nails "Hurt," which is just so incredibly raw that I'm like okay I'm not sure even I can go here today. [00:19:21]

THERAPIST: So you said to her I'm not going to put up with this anymore and how, what did she, how did she respond to that?

CLIENT: Oh, yes, and again whether this is all out of and it doesn't matter. I mean this is how memory works. This is why you can ask nine different people what happened at the scene of an accident and you going to get nine different explanations. But at some point something well you know what you're asking me. You're asking me to choose to go someplace where I can't go or you're leaving. And I didn't all I said were those words and that was her interpretation of that. [00:20:18]

THERAPIST: Did you take any of that kind of guilt-inducing statement into yourself because that's not actually what I'm hearing that you said. That may be what she heard. You're stating your own needs and she's received it, yes.

CLIENT: You know, I think that was the really amazing part in all of this. All I can feel is anger; I'm not feeling the guilt.

THERAPIST: Okay. Good, good.

CLIENT: Yes, I get that you're hurting and I know what that would've done to me in the past and I'm not backing down. And I know that there's going to be the onslaught. I mean this is a fucking fireswamp. I mean this is just going to be, this is just going to be and I get it. This is karma; this is the path that you set up a long time ago. Intentionally, unintentionally it doesn't make any difference. It's all the damn dominoes that you've set up. You can't talk about your feelings; you

can't do this. It's 27 years of this so here's what happens. Here's what happens after 27 years of setting up those dominoes. [00:21:27]

THERAPIST: Well, okay but this is a two-person issue.

CLIENT: Oh I know but I'm going to take responsibility for me.

THERAPIST: Sure, but you're not yes and my guess is there were times in the marriage you did try to talk about your feelings and you were shut down and maybe her as well. That's usually what happens. Somebody teaches you how receptive they are to what you think and feel but you're not able to do that anymore and you're not asking anything unreasonable at all. Physical and emotional intimacy, that's one of the reasons why people get married and have romantic relationships in the first place, those two things. [00:22:04]

So this isn't anything that's unreasonable. It's a game changer, right, because you're married kind of in name only, and she's okay with that because she's getting her emotional needs met elsewhere but you're not okay with it any more. I mean I'm very proud of you even though I recognize that it's a deeply painful experience. But it almost needed to happen because you're not good at not being honest with you.

CLIENT: I'm not good at being honest with me?

THERAPIST: You're not good at not being honest with you. You can do it but -

CLIENT: I think I've been doing it for a long time.

THERAPIST: Yes, but it's taken its toll. Yes, and what you're asking the compliment that's missed is I want to be close to you. That's not what she heard but in some ways -

CLIENT: But I don't yes, you know what? I don't think that's there.

THERAPIST: Well I, and I hear what you're saying but the idea that I want intimacy and this is your expectation I don't know if you guys can do that or have that given all of the damage that's been done. I don't know that you can't have it but I don't know and I don't know if that's what you're seeking from her but stating that expectation there's still an inherent compliment and it is this is what I've been looking for; this is what I need. [00:23:29]

CLIENT: Yes, and if anything the only thing that I can hold onto right now is that I can say that to me. I can say that to me and it's okay. Another event that happened is, in sharing some of this with a friend, there was this image that came back to me in some work that I have done a long time ago in terms of like the inner child kind of thing. And this is back when I was doing my Masters in Religious Education. I did a pro-golf journaling class. So you're doing this imagery stuff and you're going back and revisiting past hurts and that kind of thing. [00:24:24]

But this image this friend had talked about this dream where she rescued this child from this real seedy hotel. She knew that there was this child in there someplace and that she went in and rescued this child. And that seemed like a really powerful image with me. I just kind of sat with that for a while and I kind of envisioned the seedy hotel and I'm walking down this hallway. And at the end of the hallway I opened the door and I'm in the front yard of my childhood home. And I find myself, the five-year-old self who's kind of hiding in the bushes. [00:25:22]

And I remember this scene but it was this hiding from a couple of neighborhood boys who were laughing at me at the time, and I don't even remember why but that was what was going on. And I had had this vision or have worked with this image before and it was always like you would go and talk to the child and tell the child it was okay, whatever it was, blah, blah, blah. And this time it was no talking. It was just like I grabbed up this five-year-old image of myself and it's been a hugely powerful thing because he hasn't left me. [00:26:02]

THERAPIST: Tell me what the image means to you.

CLIENT: The image is just this deep sense of giving myself some love, just like cradling those parts of me.

THERAPIST: I can see that it's painful for you. Can you tell me what you're feeling right now as you're telling me about it?

CLIENT: That sense of all those years of not being able to do that. All those years of this little child who's just been alone and hurt or whatever. Whatever that is.

THERAPIST: Having to hide, even.

CLIENT: Yes, and can't speak and interestingly enough there's a mask. I'm wearing The Lone Ranger mask and a little cowboy hat.

THERAPIST: The five-year-old?

CLIENT: Yes, this five-year-old and I got rid of all that stuff. You don't need to have this on.

THERAPIST: So you saved you, comforted you, hugged you. [00:27:05]

CLIENT: Yes. So I do meditation in the morning and I got this meditation bench. So the posture that I have is you're kneeling on the floor on this bench and this little five-year-old is just right from me and it's just, it's a really powerful imagery right now so that's really -

THERAPIST: It's almost like, and pardon my interpretation if it's not correct, but it's almost like I'm kind of walking with you through this image but I imagine for the first time in being honest about your feelings not only do you validate them but you comforted yourself. So in some ways

you provided the intimacy that you needed because you believe that your feelings are true, honest and valid. And before you had been dismissing them.

CLIENT: Yes. And I really do feel like there's a sense of commitment to that, there's a sense of power to that, there's a sense of I know there's been no way that I can go back to whatever that was. So that's been a powerful game changer for me. Sitting in on Matt Englar-Carlson's workshop [00:28:33]

THERAPIST: How did that go?

CLIENT: It was good. The thing that I brought out of that was working with men is working with that deep sense of shame. And some pieces started to fall together there.

THERAPIST: Tell me about the pieces.

CLIENT: My issue of having this mild deformity in my penis or my penis is this huge shame that has been the major definitive kind of thing that's going on in my life and recognizing the power of that shame. My God. [00:29:17]

THERAPIST: Well it's almost like you've been multiply shamed in multiple areas. So the penis is the symbol of manhood; that for you is a source of shame. Men, I was just having this conversation with my husband and this is what makes me crazy about our society, how we tell boys don't feel, man up, be a man, which I think are the most destructive messages you can give another human. Don't feel and if you feel you're weak or vulnerable. And on so many levels you've been told don't be. Don't be, don't be you, don't feel. And in some ways that's not even who you are. And so undoing all those damaging messages takes a long time. [00:30:00]

CLIENT: Yes, so I'm really trying to be patient with myself because, yes.

THERAPIST: Well damn, I mean you've some amazing work in a short amount of time. It's painful work but for -

CLIENT: Well I'm not running away from it, I'm not backing down from it.

THERAPIST: No you're not.

CLIENT: I get it, this is really hugely watershed stuff and it's -

THERAPIST: It can either be painful ending or a new beginning or both.

CLIENT: Yes. It is already both and I just don't know what that new beginning is. But whatever was ended a long time ago and it's just a recognition that that was over. Now, whatever comes out of that I don't know. At this point today, I'm still lashed to the mast and I'm screaming. There

ain't no love and there ain't no compassion. And until that tempest dies down, there's going to be no reasoning with this right now. [00:31:18]

THERAPIST: What's it go ahead, sorry.

CLIENT: No, I was just going to say, yes it was yesterday because we had the snow yesterday, that I was in this place. And she was home from school, I was trying to get some work done and then it was so we had this conversation talking about trying to go down that road of talking about intimacy and recognizing that we are talking two complete different languages. And I recognized in just sitting there just trying to not get into counselor mode but really just trying to deeply listen to what she was saying I feel and hear that she is so completely petrified of moving down the road of [00:32:23]

THERAPIST: Physical intimacy?

CLIENT: Yes. That there's just and she's just screaming against that and yelling at me.

THERAPIST: Yelling at you physically?

CLIENT: Oh yes. I can't go there. And what if I had some other kind of thing like if I was in a car accident and I was a quadriplegic and would you stop loving me then too? And I get, you know, I get that this is a very real thing for her. And she says fine if intimacy is, if that's so important to you then just go find somebody and have yourself a good lay and then so she's just yelling [00:33:07]

THERAPIST: And then? And then what?

CLIENT: Yes, I don't know. And be happy or something. She can't understand. She can't hear what I'm saying.

THERAPIST: Sure because she's coming from her own place of fear. But again it's unfortunate that she's not hearing what you're saying because for her it's about you're going to ask me to do something I don't want to do. And what? It's certainly not unreasonable that married people have sex regardless of whatever age across the lifespan.

CLIENT: You would think though it would be.

THERAPIST: Yes, but it's most married couples have sex.

CLIENT: Well not according to her.

THERAPIST: Well but research shows differently.

CLIENT: Her research, however -

THERAPIST: Yes, but she's not able to hear the emotional intimate piece. Physical intimacy is an outgrowth of the emotional intimacy typically in a marriage, right?

CLIENT: Right.

THERAPIST: What was it like for you to kind of say these things to her and then get yelled at or not be heard? [00:34:16]

CLIENT: You know, I think again it was just pouring more gasoline on the fire.

THERAPIST: Yes, I almost hear that your needs were diminished. Like, if you just want sex you go out and find it's not just sex and sex is actually pretty important.

CLIENT: She can't hear that. She's never been able to hear that and I get that now. I get that probably all the way back to the beginning of our relationship but that's not the way the relationship started. Which is so completely confusing because she was the one that initiated everything in the beginning and I -

THERAPIST: Sexually? [00:35:01]

CLIENT: Yes, and so that was so all the sudden we got this completely upside down relationship.

THERAPIST: How do you think that having sort of the physical deformity and her cutting off sex seven years ago -

CLIENT: Oh that was huge.

THERAPIST: Yes, how do you think those things kind of have impacted you?

CLIENT: Well it confirmed my worst fears that I wasn't loveable.

THERAPIST: Even though that's not true?

CLIENT: Oh of course. And even though that wasn't what she was saying. All of that aside, deep down inside the story that I was really listening to was that and that happened prior to seven years ago. That happened -

THERAPIST: Sure. Are you familiar with narrative therapy at all?

CLIENT: Yes.

THERAPIST: You've changed your narrative.

CLIENT: Oh I know.

THERAPIST: We're in an alternate story here. You changed the dominant narrative. [00:36:04]

CLIENT: Well tell me what you're hearing.

THERAPIST: Yes. Well the dominant narrative is what we've been looking at this whole time, all these messages of inadequacy, these messages about your worth and keeping your feelings. But you as of last week or two weeks ago now just changed the narrative completely. Like I don't want that any more. We have been talking about the old scripts and how they weren't true and how you're this kind of really talented man who can pick up and do all three careers and do them well and how you're sort of a very deeply feeling man even though that has been told, you have been told that's not okay. And you got rid of that negative narrative. It's brought you to a painful place but a very honest place and a place where so I'm hearing her kind of saying these things and diminishing your needs, but I'm also hearing that you did not take that in and say you know you're right, maybe I should but you would have. That's how we know that the narrative has changed. You would have gone okay, you're right; maybe I shouldn't want sex, which is insane. It's insane. [00:37:17]

CLIENT: Yes, it's insane and that's what I did for a long time.

THERAPIST: Well the insane part is if your expectations were unreasonable. But they're not unreasonable; they're normal healthy expectations for a marriage.

CLIENT: Yes, I can see if my only expression of sex was sadomasochism.

THERAPIST: Sure, exactly. Exactly. And I mean yes, it's her own terror and things like this. I get that and have a lot of experience working with individuals of sexual abuse. I get that. But the fact that it's a surprise that you need these things is troubling.

CLIENT: It's not a surprise.

THERAPIST: No, she's surprised that you are saying you need these things.

CLIENT: Maybe not I mean this has always been an issue and she's always, it's always been this kind of thing like you can't just love me for who I am; you got to have sex.

THERAPIST: Okay. Can you take me back then before the kind of seven-year absence period, past the beginning part of the relationship. You had three kids; you've had to have sex to have three kids.

CLIENT: All three times.

THERAPIST: Yes, at least three times. But so how was this what was being conveyed in your marriage let's say 15 years ago sexually about sex?

CLIENT: Same story. Same story. I'm not sure at what point the honeymoon ended; it didn't last long. And when I'm sure after the kids. It's kind of like this sense of okay I got three kids; we're done.

THERAPIST: So sex was always an issue? [00:38:54]

CLIENT: Yes, I don't know. And I don't know it's difficult to go back but it's been a very long time.

THERAPIST: And always the message was you always want sex, you always want sex.

CLIENT: Can't you just love me for who I am?

THERAPIST: Wow. That's a pretty loaded message. You know what it says? You're not supposed to want this from me. What's wrong with you that you want me to have sex? You're deprived or whatever, which is completely not the case. [00:39:25]

CLIENT: But that's the but that was the relationship and just over time, over time it eventually got to the place where we couldn't have sex at home any more. So sex was relegated to maybe three or four times a year by going away for the weekend.

THERAPIST: And then was it awkward or was it always initiated by you?

CLIENT: Oh it was pretty much always initiated by me. And we had gotten to the point that the only way you were going to have sex is if you had two or three drinks beforehand. So you had to get in this self-medicated state before you could go there. [00:40:05]

THERAPIST: And how was sex after the medicated state?

CLIENT: Perfunctory probably. Not satisfying. Whatever. Yes, you just kind of recognize that this is, this is just ugly, ugly to pull all of this garbage out. But yes, I think I got to that point that -

THERAPIST: Well no wonder you stopped having sex. If you get told that something's wrong with you basically or why can't you just love me for who I am, pretty soon you're like it's not worth it.

CLIENT: Well I think, yes, I think between that and for at least 10 years she's had these pre-menopausal migraines. So I mean if it's not a headache, or working or the kids or whatever, A, there's no time and it's like wow, there's just no time, there's no time. And then [00:41:09]

THERAPIST: You know what I wonder? Sorry to interrupt you. It's almost like, and obviously I don't know your wife, but it's almost like you know what the real fear might be about for her? Finding out there's something wrong with her.

CLIENT: Oh yes, I know that.

THERAPIST: Yes, right, and so -

CLIENT: Because there's nothing wrong with her.

THERAPIST: Yes. Well so instead I say there's something wrong with you, there's something wrong with your expectation, but deep down I wonder because I don't know. I think it's pretty common knowledge or maybe because I teach the human sexuality class but most married couples have sex around once a week. Younger married couples have sex more; middle-aged couples usually have sex about one time a week. This is not anything that's unexpected, out of the norm. It's really not. And so I wonder if the fear is you're asking me to give you something I can't give you, I'm not capable of. What's wrong with me? So it's just a lot easier to say what's wrong with you that you even want this? [00:42:16]

Well of course you would. I mean it's a healthy need, absolutely normal, nothing wrong with it. It's the expectation that you would be having sex with your wife. But this of course sex is the smallest piece of this. This is not about sex. Sex is just a way to communicate emotional intimacy.

CLIENT: Right, and this, and the conversation always gets derailed around this. We end up talking about this and it's like okay, we're missing the point. Missing the point completely.

THERAPIST: And if you could tell her right now what the point is in a sentence, what would be your point? What would you want her to know?

CLIENT: That you got some serious hurts and you're going to need to get them fixed. And there's no hope for intimacy until you can fix that. And, I don't know.

THERAPIST: How would you define intimacy to her?

CLIENT: Intimacy is the ability to be completely vulnerable to another person. And right now I know that I can't go there. I've never been able to go there with her because there's been such a huge part of her that's been walled off. And I recognize that I can't bring my vulnerability to that because it's like okay well I'm going to be completely open and vulnerable with you but you don't have to be. [00:43:58]

THERAPIST: But in some ways you did by putting your feelings out there and by being honest even through anger, right? So you go from a place of not expressing your feelings to expressing your true feelings, whatever they are, in some ways you did. I mean that's the amazing part

about this. I'm not throwing that word around because I like it. I mean it's amazing what you did after years of feeling stuck and silenced and not being able to do this. [00:44:27]

You were dead honest, unflinchingly, about how you feel and what you want despite the fact that you've been told for so long that that's not okay. Some part of you doesn't believe that and you put it out there making yourself vulnerable. And then refusing to take in any guilt about it or refusing to take in and this was not unkind. This is just really honest refusing to kind of continue in this place of being stuck. You're certainly not stuck any more. [00:45:07]

CLIENT: No. No, and it's like screw it. I'm getting, I'm putting intimacy in my life.

THERAPIST: Well what do you think about this idea being thrown in your face of just go find someone if that's important to you?

CLIENT: You know what? To a certain degree I feel like I made this commitment to myself whatever a week ago, two weeks ago, and I said you know what I already have friends. I already have friends. I have friends that care about me and I think recognize some things about me. Who the hell says I can't have relationships, friendships? I can just explore that.

THERAPIST: She meant sexually, though.

CLIENT: I know she did and I'm not ready to go there.

THERAPIST: No and I'm not suggesting or encouraging you to do that. But I'm saying what do you think about her throwing that at you? What did you do with that piece? [0:46:03]

CLIENT: It made me feel really cheap. It made me feel really angry, like God.

THERAPIST: That's what I was concerned about. It was designed, that comment was designed to minimize your sexual needs and make you feel cheap but it shouldn't. [0:46:29]

CLIENT: I didn't accept it. I mean I felt that and at the time I was in this place of listening to it but I wasn't in a place of reacting. I quickly went to this place of you know what, I can sit here and listen and I can just be in the moment and listen and that's about all I can handle. And I feel like not that I'm tamping down my emotion but I feel like at that point I was just giving her the gift and allowing her to get it out.

THERAPIST: Sure, sure. So where does all of this leave you? It's a lot. [0:47:04]

CLIENT: "Well this morning, and I recognize that for I don't know how many years I showed up faithfully to Wednesday night choir practice and she goes out with the girls every Wednesday night. I know that. I go home after choir practice, I go home and whatever, watch whatever series I'm watching on Netflix or whatever. So last night it was screw this. I'm not going to go home any more. I'm tired of sitting in front of the goddamned television and wasting my life. So

I just asked one of the guys I don't want to go to a bar but how about Starbucks? You want to go to grab a Starbucks?

THERAPIST: Sure. And you did.

CLIENT: And I did.

THERAPIST: Good for you. How did that feel?

CLIENT: It was okay. I recognize, I started listening to Brene Brown, are you familiar with that name?

THERAPIST: No.

CLIENT: Type in Brene Brown, and that's spelled B-R-E-N-E Brown, and she's got some TED (ph) talks on shame and vulnerability and they were hitting me in a hard place. You know, right on kind of stuff. And one of the things, there was a little five-minute segment, when you get to the TED (ph) talk there was a little five minute segment where she's talking with Oprah. You know it was just a little segment of six people you shouldn't share your vulnerability with, people who don't deserve your vulnerability. And I recognized in the midst of this last night going out with this guy it's like yeah, we're not going there. [0:48:57]

THERAPIST: Right, right. Well, and that's okay.

CLIENT: And that's okay.

THERAPIST: You did it to get – yes.

CLIENT: I get it. I said okay, I got to go now.

THERAPIST: What would it be like for you to not go to choir practice anymore? [0:49:04]

CLIENT: Oh that's coming. But so instead of going out with the girls last night she went home. But she didn't tell me she was going home. So I get this text, I'm almost home and I get this text so are you okay, where are you? I came home after choir practice and you weren't here and I just, I could just start to feel it bubbling up.

THERAPIST: It? What it?

CLIENT: Anger, rage and I said this is all about clinging now; this is all about recognizing that I put the God damned nuclear option on the table and now after seven years you're finally going to pay some attention to me. It just, it's just –

THERAPIST: I can see physically. It's like viscerally.

CLIENT: And then I have a routine in the morning. I've had a routine in the morning for years. And this has been spoken about, this is known. I wake up very slowly in the morning and I have a half an hour to 45 minute meditation routine, exercise, and I have to go walk the dog and – I move. I get up very early in the morning because that's my time. And she got up this morning at 5:30 and she's out there making breakfast and –

THERAPIST: Pissed. [0:50:33]

CLIENT: And I'm getting up and I went out and I walked the dog and normally we walk for five minutes. But I just walked and I was so in touch with one other episode where I was that angry and I ended up walking down the country road for about three miles and I wasn't coming back. It was just like – I'm just – and I'm still [0:51:05]

THERAPIST: And do you know why you're so pissed? I mean, I think I get it but do you know why?

CLIENT: This is just all too little too late.

THERAPIST: Yes, well it's faux intimacy. It's like putting a band-aid over a gunshot wound.

CLIENT: Exactly. So then –

THERAPIST: So you're going to make me breakfast now.

CLIENT: And she's saying those words to me. So what I feel is I'm putting all this intimacy out here and you're just pushing me away. And I said I can't just turn it on like a spigot.

THERAPIST: Sure, sure. And it's still another representation of the fact that she doesn't even get what you're asking. [0:51:40]

CLIENT: She doesn't get it.

THERAPIST: Like if I just come home from choir practice and make you breakfast then we'll be okay and we can go back to what we were. But you aren't going back; that's not possible. And it's not about breakfast, right? Maybe a decade ago it might have been about breakfast and talking over breakfast but we're far beyond that point. It's –in some ways I would imagine it minimizes what you feel. [0:52:11]

CLIENT: I was sitting there and I physically felt like I was going to vomit. And I was shaking. I could barely talk. I was able to tell her I'm feeling such anger and rage right now that I can't even function.

THERAPIST: Good for you.

CLIENT: And at that point I just got up and I just, whatever I was doing, I was getting – I recognized I didn't shave; I barely remembered to get my books. I said oh man, I am such a place here this morning I can barely contain it.

THERAPIST: Yes because you can't live with dishonesty anymore and that's dishonest. You cannot live with hypocrisy anymore and there it is looking you in the face.

CLIENT: It's all fucking around and I said – yes, sitting around in choir practice last night I said I am so fucking tired of this. I'm tired of living this lie; I am done. I am done with this shit.

THERAPIST: I hear that.

CLIENT: Done with – so I recognize that this is huge. It's going to be – we're not talking like, I don't know.

THERAPIST: Who else can you talk to about all of these things? [0:53:35]

CLIENT: Well I have one friend and I think at this point we, unfortunately, I don't know, I don't know if it's fortunate or unfortunate, we're both really kind of in the same boat right now.

THERAPIST: Okay, that might not be a bad thing.

CLIENT: But I think we both recognize how needy we are, how, what the needs are for boundaries in this. So I think that we're trying to really work on that but I feel so out of control.

THERAPIST: Very raw right now. [0:54:23]

CLIENT: And I'm just – I don't want to hurt anybody else.

THERAPIST: Seamus I don't think you're going to hurt anybody else. I don't think you need to worry about hurting other people but you might think of other people, even people who you might not have known long, maybe even students in the program who you have a connection with.

CLIENT: You know, I do have a connection with some people and I do feel like I've got people. I've got a network of people here; thank God I've got a network of people here. And a little bit here, a little bit there –

THERAPIST: Use your network.

CLIENT: Yes. And I recognize that there are some professional boundary things that I've got to be really concerned about and that kind of thing.

THERAPIST: Probably less so with some of the students in the program given they're in the same place. You can share a piece with this person and a piece with and that's one of the things I typically find with students in that program. With students who support other students they're typically really good at doing that but you are processing this so you're in the middle of it. Like I said I am really proud of you even though I know that this is a really painful place. But I also know, I mean I want you to think about how much this took out of you. I mean I want you, I guess I want you to know how brave you are. This is an act of bravery because if we went back to, and we can because they're all on tape, earlier sessions even my mentioning the idea of your anger you said I can't go there. Even the idea of thinking about talking to your wife brought up all this anxiety and you just busted through that in such a short amount of time. [0:56:08]

CLIENT: Yes, I know. I know and I guess it's just the way – I don't know. I suppose if I sat and reflected on it I suppose that that's kind of the way I do things.

THERAPIST: Okay, it's been a long time coming.

CLIENT: Like planning and planning to build a house and finally boom, we're going to make it happen. Planning and planning to start your own business and it's like okay this is it. So I suppose that that's the way I do things. I don't know. [0:56:41]

THERAPIST: Well if anything comes up and you need to talk, even though we're on Spring Break next week, if you send me an e-mail I'll call you. And I don't offer it if I don't mean it. So if you say – and it's the best way to get in touch with me because the phone's right there. So if you say can you give me a call I'll say yes, what time do you have, I'll definitely give you a call. That's never a problem. [0:57:05]

CLIENT: Thank you.

THERAPIST: So if you still need to process this or if something happens and you need to kind of explore that please go ahead and again I will say I will never offer that if I don't mean it. So if you e-mail me I will give you a call.

CLIENT: Yes. No it's, yes it's a pretty unfamiliar place.

THERAPIST: Yes. I don't think you have to be afraid of it though.

CLIENT: No, it's just looking at, yes, looking at the consequences of everything.

THERAPIST: I don't know. In some ways I think you've made the decision not to waste another day.

CLIENT: Oh yes, that was definitely set.

THERAPIST: So you're not stuck.

CLIENT: No I'm not stuck.

THERAPIST: You've changed the course of what this could look like for you.

CLIENT: Yes, it's just that, and I've put in motion of getting some names of couples counselors. But –

THERAPIST: I know some good ones so let me know. [0:58:11]

CLIENT: I'll take suggestions but I'm – I remember talking to someone who's this couples counselor. She said yes, I can work with a couple. It's just I ask them up front are you with me on this? And a lot of times I get a lot of resistance. Can you give me at least 25% you're in on this? And I've got nothing; I'm bringing nothing to the table. I'll give you that I will go but there is just absolutely nothing there but today anger and rage and I've got no compassion today. [0:59:07]

THERAPIST: Sure. Well, I – the only person you need compassion for right now is yourself because you have not given you much compassion over the years. So right now, I hope you are most compassionate with yourself.

CLIENT: I can do that even though I'm getting the message of you're being incredibly selfish.

THERAPIST: Yes. I don't see it that way, not that I'm an expert on such things but – I guess if I thought that there was some unreasonable expectation then I'd say let's look at your expectations but I hear very normal, healthy expectations for a marriage; nothing that's not. Nobody's perfect but wanting physical and emotional intimacy from and with your wife, stating that as a need, is absolutely normal.

CLIENT: It does sound pretty ridiculous just to be saying that in this room, doesn't it?

THERAPIST: It doesn't sound ridiculous, but –

CLIENT: It sounds ridiculous that I would be thinking that that would be acceptable.

THERAPIST: Well I think you have been told for so long. So you will give me a call next week if you need to or send me an e-mail and I'll give you a call right back. Please do.

CLIENT: I will. [1:00:21]

THERAPIST: And I'm glad that we were able to get in today for sure. Let me know. Were back to our regular Tuesday time the week after next.

CLIENT: Right, not next week.

THERAPIST: Not next week but the week after next.

CLIENT: Yes. Well she has a three-day thing she's going with the band at the beginning part of next week so -

THERAPIST: So some relief there.

CLIENT: I'll get a little bit of a respite.

THERAPIST: Yes. Don't watch that movie now. [Laughs] No, I don't think you need to see that.

CLIENT: I didn't want to go watch that movie in the first place.

THERAPIST: Yes, well I don't think we need the movie any more.

CLIENT: Yes, and now I'm feeling like what I'm going to be dealing with is this clingy behavior, which is all I'm going to be like -

THERAPIST: Maybe.

CLIENT: enflaming things.

THERAPIST: As long as you are honest in your feelings and in your words, whatever her behavior if you find that objectionable you can say why.

CLIENT: Yes, I suppose I can.

THERAPIST: And so then you will find her behavior less objectionable because you are being honest about why it triggers you so. So as long as you are honest in your feelings and your behavior -

CLIENT: That's true. I've got to stay with that.

THERAPIST: You have to stay with that because then you can be honest about why the clinging is like nails on a chalkboard, why that's not okay. And again I think that's a pretty accurate response, not unreasonable. Okay, take care of yourself.

CLIENT: I will. I can.

THERAPIST: And let me know. Let me know.

CLIENT: And thank you.

THERAPIST: No, it's – I really enjoy working with you Seamus. Think of yourself as brave, incredibly brave.

CLIENT: I think of myself as [inaudible at 1:02:28].

THERAPIST: Yes, for sure. For sure.

CLIENT: You seen the Lego Movie?

THERAPIST: No, the Lego Movie? Is that a modern movie that's out because I am so out of touch with modern movies. Do I need to see that?

CLIENT: I don't know. I'm identifying with this little character who's the main character in the movie.

THERAPIST: Okay. I'll have to look that up. Okay, take care. All right, bye bye.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: So what's happening?

CLIENT: It's been a while, hasn't it?

THERAPIST: It's been a week, yes. Because I think I saw you a week from Thursday. I saw you like the sixth.

CLIENT: Okay.

THERAPIST: Yes.

CLIENT: Yeah. It feels like a lot of water under the bridge.

THERAPIST: Or the thirteenth. I can't remember.

CLIENT: I think the thirteenth.

THERAPIST: I think the thirteenth, yes.

CLIENT: Yeah.

THERAPIST: What's happened?

CLIENT: Well, I think the rubber hit the road.

THERAPIST: Okay. Tell me what that means.

CLIENT: Yeah. I'm trying to back up. (PAUSE) Uh...

THERAPIST: Do you want me to tell you the last thing I heard?

CLIENT: Yeah.

THERAPIST: Okay. So I remember that you, you know, you and your wife had a talk and you kind of told her how unhappy you were, you know, and she felt pressured, you know, when you told her about the physical intimacy missing. You know, and I remember you guys were going to go to Indiana University to see...

CLIENT: Right. [00:00:57]

THERAPIST: Okay. And I remember she chose to drive with her friend.

CLIENT: Right.

THERAPIST: Okay? And I think that's...

CLIENT: So I didn't tell you about going to Indiana University?

THERAPIST: No. Because I don't think you had gone yet.

CLIENT: Okay. So... Really? I thought that was the weekend before that. It doesn't matter.

THERAPIST: Okay.

CLIENT: So Indiana University... My son is...

THERAPIST: Oh no. Okay. Yes. You told me that we has in a play and you felt like he was playing your life.

CLIENT: Yeah, yeah, yeah.

THERAPIST: Yes. I remember that. Yes.

CLIENT: Okay. Good. Yeah. So that Thursday... (PAUSE) I don't know. I guess it was maybe that Sunday we went out to, we went to the show in Detroit and that's where...

THERAPIST: That's right.

CLIENT: ...you know, we had that discussion.

THERAPIST: At dinner. I remember that. Okay.

CLIENT: So, yeah. That Thursday, I came home and it was just like... I was kind of in this place of not really sure what to do and I was like feeling all this anger and... (PAUSE) I really tried to put myself back there and I don't remember but it was just like, "I just want to get out of here."
[00:02:05]

So I went home and visited with my, or stayed with my brother and sister in law and, for Friday night. And then I made plans to go see my mom and dad on Saturday.

THERAPIST: Wow.

CLIENT: So the brother and sister in law, I know... I'm going to be shifting around. I've got a pain in my hip here.

THERAPIST: Okay.

CLIENT: I'm trying to find a comfortable...

THERAPIST: Do you need to put your foot up?

CLIENT: Yeah. I might. We'll see.

THERAPIST: You can move the furniture. Feel free...

CLIENT: So, at any rate, I went home to see them. (SIGH) I know that they had been doing their marriage counseling for about a year.

THERAPIST: Okay.

CLIENT: And so we ended up talking for a while and my brother had to work on Saturday and he was tired. So he ended up going to bed a little bit earlier. But I stayed up until like one in the morning...

THERAPIST: Okay.

CLIENT: ...talking with my sister in law. You know, and it's like just felt like we were, we really had a story to share...

THERAPIST: Yeah.

CLIENT: ...in terms of similarities that she had put the nuclear option on the table.

THERAPIST: Okay. [00:03:09]

CLIENT: And, as it turns out, all of us, my four brothers, or my three brothers and I... There are four of us. You know, we're all in exactly the same boat.

THERAPIST: Wow.

CLIENT: We've all thrown the nuclear option out the table.

THERAPIST: Each of you around the same time.

CLIENT: Yeah.

THERAPIST: Tell me about that. That's pretty significant.

CLIENT: Yeah. I don't know. It seems significant. I'm thinking, "Well, maybe not all that significant considering we all came from the same house."

THERAPIST: Yeah. But that really emphasizes the house that you came from.

CLIENT: Yeah. I think so. I mean, so there's a connection there. You know? So, at any rate, I felt like, you know, it was good to be able to feel like I was, you know, sharing that. You know, I felt like I had this significant moment of sharing with...

THERAPIST: Yeah. [00:03:51]

CLIENT: I don't know if I mentioned that I... Peterson had recommended looking at Brene Brown (ph). She does work with shame and vulnerability.

THERAPIST: Yes, yes, yes. That's right. Because you mentioned that to me because she did a TED Talk?

CLIENT: Yes. So, at any rate, I had kind of watched that and kind of felt this place of like... I was feeling some empowerment from just kind of like finding the people that you trust to be vulnerable with and kind of leaning into that. So, you know, it felt like that was good. Let them know that, you know, kind of where I was at. It's like, "We're going to go see, you know, marriage counseling. But..."

THERAPIST: You are?

CLIENT: Yeah.

THERAPIST: Okay. This is a lot I've missed.

CLIENT: Oh, it's a lot. Yeah.

THERAPIST: Okay. Can you tell me how this came about? Yeah.

CLIENT: I'll keep going. I'm just trying to go through it chronologically but... So... (PAUSE) Yeah. It was just in that place of like explaining where I'm at. It's like, "Look. I'm going to go. But I know, you know, before the session's over, they're going to ask me the magic question." It's like, "How much are you willing to put into this?" [00:05:03]

It's like... In all honesty, if I'm going to stand in my boots right now, it's like I've got nothing. And that's what I'm showing up with. You know? So I kind of did that talk with them and, you know, there were other things. I mean, my sister in law was able to kind of mirror some stuff back to me. It's like, "Yeah. You know, we've kind of been noticing, you know, over the past six years, you know, things weren't good." You know... My nephew kind of asked her a question. So it's like, "Do you think Seamus and Mary will stay married after the kids are gone? It seems like Mary and Ms. Curt are together all the time."

THERAPIST: Wow. What was that like to hear?

CLIENT: I'm just like, "Wow." So... I mean, there's that.

THERAPIST: Yeah.

CLIENT: I went to talk to my folks to let them know that I was going to go do marriage counseling...

THERAPIST: Yeah. [00:05:55]

CLIENT: ...because they're like, you know, the ultra conservative Christians. I'm thinking, "Well, this is not going to go well." But they turned out to be like super supportive in terms of like...

THERAPIST: Wonderful.

CLIENT: You know, it's like, "We understand and, yeah, we kind of noticed some stuff too. But, you know, it's not our place to say anything."

THERAPIST: Sure.

CLIENT: You know, it's like, okay... So I was feeling kind of encouraged by all of that.

THERAPIST: Yeah.

CLIENT: Mary left with the band and the choir for like, like Monday, Tuesday, and Wednesday of this past week or... Yeah. But I got home on Saturday night.

THERAPIST: Okay.

CLIENT: (SIGH) Sunday the kids, the boys were both in town. I chose to talk to the boys. You know, I felt like this is kind of, you know, a thing.

THERAPIST: Your sons?

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: Both of them, both the boys were home. (SIGH) And, you know, felt like I just needed to let them know that...

THERAPIST: You told them? [00:06:59]

CLIENT: I told them that we were going to go do marriage counseling.

THERAPIST: Okay.

CLIENT: But I'm like also kind of telling them where I'm at.

THERAPIST: Yeah.

CLIENT: Which turned out to be not such a good point of...

THERAPIST: What happened?

CLIENT: Mary found out that I had done that and it's like, you know, "Don't you think we should have talked about that?" You know? So it's like, "Yeah. Point well taken." Yeah, that probably wasn't the best way to do that. So, at any rate...

THERAPIST: It's almost as if though you're tired of keeping it secret. I mean, you just can't do it anymore.

CLIENT: Could be. Could be that.

THERAPIST: Yeah.

CLIENT: I mean, there's another issue I'd kind of like to discuss too. But Sunday night, you know, we had... Everybody was out of the house, you know, another opportunity to talk and, you

know, I think I was able... Again, I don't remember the entire gist of the conversation. I think I can pull some bullet points out of that. And I think that we're... I was able to get to, you know, and underscoring again for her... [00:08:01]

You know, after, you know, seven years of this experience, I feel like my emotional penny bank is empty. You know, the well is dry and I'm starting from a place of like negative because there's just not a whole lot of trust left here. And, you know, that whole weekend, you know, she was like... (LAUGHTER) For seven years, my experience has been like she's going to be gone.

THERAPIST: Right.

CLIENT: You know? One way or the other, there's something always on the go or she's with Lisa or whatever. But like she was home and it's like, "It's all about me," and, "How can I help you?" and, "You know, let's make..." You know, it's just like... It just seemed so insincere after like so much of the opposite experience to all the sudden have like all this syrupy sweet attention is just like... [00:08:59]

THERAPIST: How did you feel about that?

CLIENT: I was furious.

THERAPIST: Yeah. I would imagine.

CLIENT: And so I was telling her that, you know, that I'm having this, where I'm at with these feelings. And she goes, "Well, I'm here to make a deposit." And I thought that it wasn't possible for like people's heads to explode. But I really felt something click at that moment. And I was just like... I really shut down after that. I was so angry. I stood up and I was like... I really felt like I was going to break something.

THERAPIST: Tell me about your anger in that moment.

CLIENT: Yeah. I was just like shaking, you know, kind of like...

THERAPIST: But tell me why. I think I get it. But tell me why.

CLIENT: (SIGH) It just felt so insincere. It felt so late. It felt like this is somebody who really doesn't understand the situation at all and this is not... This is just not fucking going to get any better.

THERAPIST: Right. [00:09:57]

CLIENT: You know, because I'm just... You know, we are so far apart for this. And it's like I'm not hearing... She's not hearing me. I'm not hearing her. Whatever. And it's just like we're miles apart on this.

THERAPIST: Like a Band-Aid over a gunshot wound.

CLIENT: That's what it felt like to me in that moment.

THERAPIST: Sure. After it's already started to fester.

CLIENT: Yeah. And you've been left there for seven years.

THERAPIST: Sure, sure.

CLIENT: So that's my experience.

THERAPIST: Yeah.

CLIENT: So... And she's like, "Well, I just don't know what you need. I just don't know what you want." And the best I could say was like, "I just need some space. I just need some space because all I've got right now is anger and rage and that's the best that I can do. And that's the best that I can tell you." So she was gone for the next couples of days on this trip which was just, you know, (inaudible at 00:10:45)

THERAPIST: Sure.

CLIENT: You know, it gave me an opportunity to just kind of chill out. And it was Spring Break and, you know... (SIGH) But when she came back on Wednesday, you know, she texted me. "So, I'm back in town. You know, do you need more space or do you need me to stay in town? Where should I, you know..." [00:11:03]

I said, "Do whatever makes you comfortable. But I just need you to know that if you're coming out here, I'm going to be sleeping upstairs."

THERAPIST: Okay.

CLIENT: So she said, "Well, I'll stay in town for a couple more nights." And she did. You know, and then got home... I don't know. (PAUSE) She called me, I think it was maybe, Saturday night. Peter was going to be home again. And, you know, she was in tears and it's like, you know... "Can you just, can you please just stay in the room with me, you know, while Peter's home?" I'm like, "Okay." [00:11:53]

THERAPIST: Because why do you think?

CLIENT: Because... You know, I think I get it. I mean, it's just like this, you know, being in this place is completely devastating. Her world view. You know? And it's like... I don't know. I've been up and down and I keep playing around with like what's going on. (PAUSE) Let's see. So

what is today? Saturday. We went... Oh, Sunday. Sunday was my son's senior recital down at Maroa. Okay. So, you know, I was upset of course, you know, that I had talked to a couple members of my family and the kids, you know... So she was upset about the fact that, you know... It was like, "Could you have found a better time to do this?" It's like we've got this senior recital this weekend and so, you know, she was feeling hurt and betrayed that I had talked to people. I can sort of get that. [00:12:57]

But I'm like... (SIGH) Whatever. It wasn't my intention to do that. It was just an intention to feel like I needed some support.

THERAPIST: Sure, sure.

CLIENT: So we did this recital and it all went fairly well and everybody was pretty, I think, pretty normal except that, you know, it's like, there's, you know, the white elephant in the room.

THERAPIST: Yeah.

CLIENT: But whatever. And then we come back Sunday night and it was late and I just... You know, it was like, "I'm not going to make a deal out of this right now." So I went into our bedroom. But last night it was like I had made the decision that I was, you know, I was going to be in that place of "I don't feel comfortable doing this anymore." You know, it's like...

THERAPIST: Doing what anymore?

CLIENT: Sleeping in this bed. It just feels like, you know, I've been doing this for so many years. And it's like now that I'm in this place of feeling, all I feel is tension and I'm not sleeping well at night anymore. [00:14:01]

And I'm like... So, as it turns out, I didn't sleep well last night anyway. I went up to bed and...

THERAPIST: So did you move upstairs then?

CLIENT: I just... Yeah.

THERAPIST: Okay.

CLIENT: I just went... I didn't move everything upstairs. I just went to... We've got extra beds upstairs. But, you know... I don't know. She got home. I don't know where she was at. I don't know. What was last night? Oh. I got home from class and she got home probably around a quarter to nine, texted me from downstairs and said, you know, "I'm home. Going to bed. Too sad to talk." And I just texted back, "Okay." I don't know what time it was. I had actually gone to bed. So I don't know. It could have been fifteen minutes. It could have been an hour. I don't know what time it was actually. But she just came up and turned on the light and just like, you know, unleashed.

THERAPIST: Okay. Tell me about what happened. [00:14:57]

CLIENT: "Why are you doing this to me? Why are you being so cruel?" (SIGH) I'm like... She's always been somebody who can like... The internal thinker. When it's on her mind, she can just say it.

THERAPIST: Sure.

CLIENT: And she can dump it out there. And for me, you know, especially when I get hit with a barrage of feelings like that, then it's like, "I don't know." You know? Then it takes me a long time to put it all together, you know, as an external thinker to get it out there and all that stuff. So I don't know. We were up until three-ish.

THERAPIST: How did you respond to sort of her emotional barrage?

CLIENT: I was really pretty amazing because I had spent some time over the last, whatever, week and a half just kind of thinking about all of that and thinking about, you know, how I believe, you know, that I have been, you know, for fifty years out of my life. [00:16:01]

It's just that sense of like I gather my self-worth based upon whether or not people like me. It's all external stuff. You know? So the worst thing in the world is for somebody to be angry at me.

THERAPIST: Sure.

CLIENT: You know, because you could snuff me out of existence by being angry at me. So I had really spent some time thinking about that, journaling about that, talking to some other people about that. You know, and getting a sense, you know, "This is how I've operated all my life." Combine that with, you know, my shame issues and combine that with a really bad skill set for communicating, you know... And it's like, "Well, here it is. It's all come home to roost. This is the sum total and accumulation of like all of your really bad communication skills. So here you go." (LAUGHTER) [00:17:03]

THERAPIST: So what happened?

CLIENT: What happened?

THERAPIST: Yes. How did you respond?

CLIENT: You know, I just kind of sat there with it.

THERAPIST: Okay.

CLIENT: You know, and I just kind of sat there and it's like, "You know what? I'm just going to let her get this out." And what was really amazing, you know, is that I'm not in this place of overwhelming fear. I'm not in this place of like "I'm going to have to cave into everything that's being said here." It's like, "You know what? She's got a right to be really, really angry and pissed off and all of this kind of stuff because, yeah, it's her stuff. And I'm good with that." You know? (SIGH) But, you know... (PAUSE) Yeah. You know, so it was helpful, you know, to a certain degree to kind of get like, you know, to be able to get it from her. It's like, "You're recognized." These are conversations, these are talks that should have happened twenty years ago.
[00:18:05]

THERAPIST: Sure. But she's emotionally responding to you.

CLIENT: Oh yeah.

THERAPIST: Yeah. And that's not... You guys have been emotionally not responding to one another and now you are. You know, something that you said. You know all of your bad communications skills. You know, I don't think you're a bad communicator. I think it hasn't been safe to communicate what you've needed to communicate.

CLIENT: Okay. Well, whatever. I get that. I think that I get that. Enough other people have affirmed to me in being a fairly easy communicator.

THERAPIST: Yeah.

CLIENT: When it comes to this relationship...

THERAPIST: Right.

CLIENT: ...it really, really sucks in a big way. And I get that. You know? And I get that, you know, there's a lot of issues going on. So as we were talking and as we were trying to like get things out, it's like, you know, I get the fact that, you know, she believes that in her mind that, you know, she was, she's giving me my space. You know, that it's like, "Well, I couldn't get you to communicate so I decided that I just needed to move on and move on with my life and just wait for you to decide to communicate or decide to start feeling again." [00:19:15]

So, you know, I get that we're doing to best that we can with the skills that we had. It just didn't work out real well. You know? You know, so a lot of old past hurts came bubbling up and, you know, thrown around and things like that. So... (PAUSE) Yeah. You know...

THERAPIST: How did you guys get to the point where you decided to go for couple's counseling?

CLIENT: Oh, we had made that decision earlier in the week. You know, it was kind of a thing that I put it out there and said that I'd get some recommendations, you know, to, for couple's counseling.

THERAPIST: Great. Who are you going to see? [00:20:01]

CLIENT: William Bernard.

THERAPIST: No, I don't know him.

CLIENT: A recommendation from (inaudible at 00:20:09)

THERAPIST: Okay.

CLIENT: So anyway...

THERAPIST: Can I check in with you and find out how you're doing? This is so much.

CLIENT: Yeah. It's a lot. And I think that, you know... And she's... You know, she was angry about... You know, I feel like it is a lot. You know, and it's like, "Well? You know what? It was unintentional." This is just the way it's happening. You know? And she's like... She's angry at the whole counseling thing because it's like...

THERAPIST: This and the counseling program or just you being here?

CLIENT: Well, maybe this because it's like, you know, "I hope that you learn from this experience that you shouldn't do this to anybody. You shouldn't... You know, you shouldn't destroy peoples' worlds like this." [00:20:53]

THERAPIST: How do you feel about what she said?

CLIENT: Well, there's truth to it. But I also feel like... I mean, deep down underneath all of this, it's like, "Yeah. You know what? There's a world here that needs to be destroyed." In my opinion.

THERAPIST: Do you think... Well, do you feel that way, that kind of counseling or coming to counseling here has destroyed this?

CLIENT: No.

THERAPIST: Okay.

CLIENT: No. It was destroyed long before I came here. You know, this is just fixing me to allow me to be able to communicate and to feel. The fact of the matter is I don't have a whole lot of skill set for that so maybe I didn't do this gracefully. Maybe I didn't do this as well as it needed to

be done. But, you know what? It's out there now. You know, so it's like, "Okay. I've got to deal with that." [00:22:03]

THERAPIST: Well, you know... I can see her perspective where before coming to counseling you were... You guys had this status quo pattern. Now all of this was bubbling up underneath it and it sounds like she had some denial around what was happening around the relationship. But it worked. Right?

CLIENT: Sure.

THERAPIST: And then it didn't.

CLIENT: Because a lot of people... You know, what we had was really wonderful and a lot of people would really, you know, give a lot to have what we had. And I'm like, "Yeah. We had some good stuff here. But, you know..." (PAUSE) From my chair...

THERAPIST: But it wasn't good for you. No.

CLIENT: From my chair, this was a lot of years of really sucking a lot.

THERAPIST: Sure.

CLIENT: You know? And not being able to really own that or feel that.

THERAPIST: Sure.

CLIENT: You know? So...

THERAPIST: You know, I fluctuate from being deeply sad for the situation you're in because it's such a painful thing to deal with and amazingly proud of you because, in such a short amount of time, you went from being paralyzed, you know, fearful about saying what's real for you and not wanting to experience your anger to putting it out there in a way that... You know, it's almost like you just couldn't take it anymore. You just couldn't take the denial anymore... [00:23:11]

And so, in some ways... So, for her, I see she sees her world as destroyed. But the world was based on water because of all these things underneath it you're the one who was being... It worked for her. It never really worked for you, not for at least seven years.

CLIENT: Yeah. So I think that we got... (SIGH) We got to this place of like, you know... I felt like we kind of circled around to another place that was really familiar to me in my past relationship which was...

THERAPIST: Okay.

CLIENT: ...you know, that when we would occasionally have these moments where we would have these disagreements or arguments or even... But, you know, these moments of conflict, it was always feeling like the situation got manipulated around so that it became all my deal. It was all my work that needed to be fixed. [00:24:03]

You know? And if you could just figure out how to line up your world...

THERAPIST: And fix you.

CLIENT: ...the way that I want it to be...

THERAPIST: Sure.

CLIENT: ...then everything's going to be great. You know, and I feel like the piece that's missing in that formula now is that I'm less inclined to believe that.

THERAPIST: Sure.

CLIENT: I'm less inclined to believe that I need to gain my self-worth from jumping through that hoop. So I was able to like, "Yeah, you know what? Something doesn't feel right here to me." And I was able to say to her sort of, "Yeah. But you know what... I'll take 50% of this but this is not... I mean, we're still not dealing with the 800 pound gorilla."

THERAPIST: Sure.

CLIENT: You know, which is the sexual abuse issues.

THERAPIST: Right. And you said this?

CLIENT: Oh yeah.

THERAPIST: And how was that received?

CLIENT: It was like, "Oh, I intend to, you know, that we needed to talk about that too." It's like... I was able to throw some stuff out there. It's like, "You know, this shit really hurts. I'm carrying around some really old hurts." [00:25:05]

THERAPIST: Sure, sure.

CLIENT: You know? And I was able to like... I get it because it's just like it just won't go away. You know? The whole relationship she had with the priest that married us that I didn't know about.

THERAPIST: This is the priest that sexually abused her.

CLIENT: She doesn't call it abuse.

THERAPIST: Okay.

CLIENT: It was a relationship.

THERAPIST: Okay.

CLIENT: Because she was eighteen.

THERAPIST: Okay.

CLIENT: And he was 54 and 55.

THERAPIST: So they had a sexual relationship.

CLIENT: Oh yeah.

THERAPIST: Okay.

CLIENT: But I'm thinking, 'Yeah, what would you say about your eighteen year old daughter having a relationship with a 55 year old priest?'

THERAPIST: Sure. Yeah.

CLIENT: Would that be abuse or would that be a relationship?

THERAPIST: Yeah. It was abuse and abusive. We wouldn't define it was childhood sexual abuse. But what difference does it makes? It was abusive.

CLIENT: Yeah. You know, what I think she points to is being her sexual abuse episode was her brother. And I don't remember exactly what age she was. But it's like, you know, she recognizes... You know, I feel that, you know, that kind of the loss of innocence and, you know...
[00:26:15]

So sex has been a bad thing for her...

THERAPIST: Sure.

CLIENT: ...ever since then. So, you know, it's... As we're speaking this stuff last night, it's like talking about the 800 pound elephant. You know, and she can only grab onto the sexual component.

THERAPIST: Yes.

CLIENT: And it's like, "You're asking me to go someplace that I can't go." You know, it's like... And I'm like, "What I'm talking about here is I'm talking about intimacy. I'm talking about the fact that we don't have intimacy physical or emotional..."

THERAPIST: Right. [00:26:55]

CLIENT: "...and it's all related to this issue. We need to deal with this issue because none of this is going to happen until we do." And it took like two or three times and I'm still not sure if she...

THERAPIST: Because she's terrified.

CLIENT: Oh, she's terrified. And then, you know, she's... Whenever the really intense anger comes up, it's all around that sexual abuse issue. She is so resistant to this.

THERAPIST: Sure. But, you know, I guess, you know, in hearing your response and hers, I guess, you know, if I could provide you with some protective mechanisms, and I don't know if I can, this is not about her or you. It's about the both of you.

CLIENT: Oh yeah.

THERAPIST: So, you know, when this sexual abuse issue comes up and comes out more and more, you know, it's tempting to say, "Well..." It's tempting in some ways to deny your own needs, I think and to focus on the sexual abuse because, you know, "How could you possibly want these things from me? Look. I've been sexually abused. I can't do it." And you're not talking about that. And, in some ways, you have really denied your own needs for a really long time. [00:28:07]

CLIENT: For a long damn time.

THERAPIST: Yes. And if it was... It's not about the sexual abuse issue. That's one important factor. But it's about not having the emotional intimacy. So...

CLIENT: "You were never able to go there. I was always trying to give you that emotional intimacy. But you would never accept it." That was her response.

THERAPIST: Sure. And what did you feel about what she said?

CLIENT: I get that that's what she believes. I get that that's her point of view. But it's like, "You know what? From my place..."

THERAPIST: Yes.

CLIENT: "...with my issues..."

THERAPIST: Right.

CLIENT: "...it's like you shut off the physical intimacy which told me, it confirmed my worst fears."

THERAPIST: Sure. And does she, is she aware of that?

CLIENT: Oh yeah. You know, but since that wasn't her intention, that doesn't exist.

THERAPIST: Right. [00:29:05]

CLIENT: That, you know...

THERAPIST: So in some ways you're both right from your individual points of view.

CLIENT: Of course.

THERAPIST: Of course. Yeah. Which makes it all the more painful because she's not able to hear you and you may have a reduced ability to hear her.

CLIENT: I certainly get all that.

THERAPIST: Sure, sure.

CLIENT: Because I feel like... And one of the other things I'm just grappling with today. It's like... You know, I don't feel like I'm this vengeful, angry, hateful person to anybody else on the planet except her.

THERAPIST: Well, are you... Well, let's go back and look at your words. Are you vengeful and hateful towards her?

CLIENT: Well, it sounded like I was last night.

THERAPIST: No. Is that a truth? Are you vengeful and hateful towards your wife?

CLIENT: No. But I will, you know, I will loudly admit it. As much as I wouldn't early on, it's like I don't like her anymore. [00:30:03]

THERAPIST: What's it like to say that?

CLIENT: (SIGH) You know, it's just truth at this point. You know? It's like, "Great."

THERAPIST: And what does that mean for you to not like her?

CLIENT: I don't know how we fix anything because I'm like... I'm starting out in such a low position in terms of intimacy, having anything to bring to this.

THERAPIST: Sure.

CLIENT: And I'm not even bringing like with me to the table.

THERAPIST: Right.

CLIENT: And now I'm supposed to build a lifelong relationship for whatever is left of it? And you want me to give you an answer right now tonight? Do you want this to work out? And I'm like, "I'm telling you what I got. And what I got is nothing." So it makes me feel like, you know, I get to be that guy then. I get to confirm all of her worst fears and I get to... [00:30:59]

THERAPIST: Okay. That's right. So let's stop for a second. You know, that's my fear for you that you inherit that and that's not true. That's just not true. It's never ever that simple. Right? You are not that guy. Right? That guy would've had multiple affairs, left, done many things... You're not that guy. You're not happy and you're no longer willing to put up with a relationship, a marriage with getting any of your needs met in intimacy. But that doesn't make you that guy. And so, you know, as you have worked incredibly hard to find your truth and you have found it, as painful as it is, in your counseling with her, in your discussions with her, you have to stand in your own truth. Right? You know, I think I told you when I was thirteen, my parents separated, right? And I was old enough to kind of understand some of it but not all of it because as a kid I'm watching these things unfold. And I saw how very painful it was for them both. Right? [00:32:03]

I probably as a kid took my dad's side. I was kind of a Daddy's girl.

CLIENT: Sure.

THERAPIST: I was pissed at my mom for years. But... And as a grown up, I began to see things differently that these were two really good people. They loved each other. I don't think they liked each other much anymore although, you know, they managed to figure their shit out later after their parents started dying off, after they were separated. They were always separated. They strangely became good friends. Right? But I began to realize that, you know, they were both correct from their point of view. And something wasn't working for them anymore. Right? And there were times I think when my mom really wanted it to work and there were times I think when my dad really wanted it to work not really at the same time. Right? And I remember it being a painful experience and both of them talking about it being a painful experience. But, you know... And she was really angry at him. But he was not that guy. He really wasn't. He could act like an asshole or she could act like an asshole. But they weren't assholes. It just didn't work anymore for them. [00:33:07]

You know? And this is not working for you. This hasn't worked for you in a really long time and it hasn't worked for you in some extremely damaging and painful ways. That doesn't make you that guy. It just makes the truth that it's not working for you. That's the truth, no more, no less.

CLIENT: Yeah.

THERAPIST: And you have a diminished ability after sort of like swallowing shit for years and years and going, "I'm not doing this anymore. I can't do it." Right? But that doesn't make you that guy. No matter how positioned into that role you will be pressured to feel, that doesn't make you that guy. It doesn't. It doesn't make you perfect. It doesn't make her perfect. But you are not that guy.

CLIENT: Yeah. And I think that... You know, I think the other thing that I'm, you know, feeling, you know, is that, you know, she knows how to throw, you know, she knows how to throw the old stuff back out there.

THERAPIST: Sure. [00:34:09]

CLIENT: You know, it's like... (PAUSE) You know, reminding me that, you know...

THERAPIST: That what?

CLIENT: That the business, the business is, you know, kind of failed or it didn't turn out the way I wanted it to or it's like, you know, that I was kind of floundering and struggling and not sure what to do. She's like, "You know, I kept encouraging you to go get a job. You just wouldn't go do that. You ended up going to this, you know, this counseling thing." And it's just like all of these things that from her vantage point, the way that she's seeing it and the way she's throwing it out at me, is that, you know, I've just been this narcissistic character that has just pursued whatever the hell it is that he wants to do. And, "I'll just sit here and go to work and fund all of your narcissistic adventures." [00:35:01]

And I'm like, "Wow. That really hurts." You know, I get how you might see that or something from your point of view and it's like... It's difficult to look at the track record and not say, "Yeah. I guess I do change up my career, you know, quite a bit."

THERAPIST: But let's hold on for a second. I think that's one way of looking at it. However, when you decided to stop teaching and open up your own business, was there a discussion about it?

CLIENT: (SIGH) Yeah, I think so.

THERAPIST: Okay. And were there any sort of say, "No, hold on. I don't think you should do this," or, "Let's not do this."

CLIENT: Yeah.

THERAPIST: Permanently?

CLIENT: No.

THERAPIST: Like... Right. In the beginning.

CLIENT: Yeah. It's like... You know, it was a scary adventure and it's like, "Do you really want to do this," and, "This is really taking a step out and away from security and..." [00:35:59]

THERAPIST: But was that message consistent? "I really don't want you to do this." Or did it change?

CLIENT: I think that she eventually just kind of gave in on the idea.

THERAPIST: Okay. So, in some ways, if that is her perception... Right? So this is a communication both of you have where you may subtly state or state once or twice what you think or feel in disagreement with the other person and then let it go.

CLIENT: Probably once.

THERAPIST: Okay. But then are these... What happens is there are these fundamental... In some ways, she bears a responsibility for saying, "I'm not comfortable with this. I don't like this. I don't want to do this." But that's not the message that you heard consistently. And the same thing for you. If something was happening... I mean, it didn't have to be a seven year...

CLIENT: Yeah.

THERAPIST: So this is the... And this is not pointing the finger. But what I'm trying to point out here is this is the agreed upon couple contract that you guys signed together about how we do things in this house with one another. Right?

CLIENT: Right. [00:36:57]

THERAPIST: And how we do things in this house up to this point has been we don't really talk about the things that hurt us, that bother us. We just kind of go into separate corners.

CLIENT: Right.

THERAPIST: And then you changed contract.

CLIENT: Yeah.

THERAPIST: Right? Because you couldn't stand the contract the way it was. But both of you, right, both of you absolutely agreed upon that contract.

CLIENT: And I think I was able to say that...

THERAPIST: Sure.

CLIENT: ...in so many words last night. It's like, "You know, we have really, really poor communication skills. You know? And the reason we're here right now tonight is because we have 27 years of really bad communication skills." And it's like, "I can't go there anymore." It's like whatever that was, whatever that was, that's over now because I'm changed.

THERAPIST: How are you doing with all of the feelings this brings? [00:37:55]

CLIENT: (SIGH) (PAUSE) You know, I... You know, it's difficult to manage, you know, because it's omnipresent and difficult to like focus. You know, it took me like two hours to get stupid little reflection question done that I had to submit online today. A smarter man would have figured out a different plan for doing this. You know?

THERAPIST: I don't think it has anything to do with intelligence. This is a very painful alive fully present ball of stuff.

CLIENT: Oh this is all in.

THERAPIST: Yeah. It is.

CLIENT: I mean, this is all in.

THERAPIST: It is. I mean, you completely changed the dynamic. Like since you guys had been following all the rules and now there are now rules. All the rules that you had are gone.

CLIENT: And I get it. You know? She told me that.

THERAPIST: Yeah.

CLIENT: You know? "You have all the cards now." (PAUSE) And that's an uncomfortable place for her because she likes having all the cards. [00:38:59]

THERAPIST: Do you feel you have all the cards?

CLIENT: (SIGH) The way that she continues to operate in this.... It's like, "I'm just going to stand back here and you..." You know, the image I have is from a long damn time ago in our relationship. It's like there are these walls built up. And it's like, "I'm talking to you over this wall. Do you feel intimately close now?" That's the kind of intimacy that we've had in this relationship.

THERAPIST: Sure.

CLIENT: And it's like, "I'll stick my head out to see if it's safe for me to, you know, tell you how I'm feeling."

THERAPIST: The first couple of sessions you described it as the force field.

CLIENT: Same thing.

THERAPIST: Yeah.

CLIENT: So I get that, you know, I did the same damn thing. And which came first? I don't know. It doesn't matter.

THERAPIST: Well, it came together. That's the agreed upon contract.

CLIENT: Right. I mean, yeah, we entered the relationship like that and we came with our own brokenness. So this is how we do this. [00:40:05]

THERAPIST: But that doesn't make you a bad guy.

CLIENT: Oh boy.

THERAPIST: That just makes you a guy that can't deal with this current situation the way it is anymore. Right? And I'm going to say this again because in the moments where you feel guilt or shame or whatever, I would like you to remember that it doesn't make you a bad guy. And if you really focus within, in your truth, you know that this doesn't make you a bad guy. So whether this marriage continues or not or what happens next doesn't mean you're the one at fault or I don't think there's a fault. I just think that it, you know, things are not working and you're not willing to put up with it anymore. You know? And if you look to, you know, it is kind of remarkable that your brothers are at a similar place and maybe if you think existentially some of it is getting to a point in your life, you know, the kids are out of the house and you're reclaiming parts of your life for yourself. [00:41:09]

And you look back and you go, "But I don't want, you know, the next forty years to look like this. I don't want that."

CLIENT: Right.

THERAPIST: And that's...

CLIENT: And she does.

THERAPIST: Well, sure because it works for her. She gets the social acceptable desirable position of being married, kids are out of the house, that's respectable. It's very Christian. Right? And yet her emotional intimacy needs get to be met and yours don't. Right? And, in some ways, I can understand her perspective. You've destroyed this very nice little life that we've had. But it's hell for you. It's been hell for you.

CLIENT: And it has been because I get that. And it's like, "Well, has it really been hell?" Well, why don't we look at the facts, pal. You know? I mean, not that I... I'm just saying this... I shouldn't say this knowing my position as a counselor in training...

THERAPIST: You say whatever you want. [00:42:05]

CLIENT: Well, I don't need you pressing any panic buttons. But it's like the thought of going back and trying to maintain that relationship, I might as well just swallow a gun.

THERAPIST: Sure, sure, sure.

CLIENT: You know, I...

THERAPIST: Right. Which is a pretty powerful analogy. Like, you know, I just think you decided, "There's no fucking way I can do this anymore. Like I can't do it." And there's...

CLIENT: It's like I don't care whose fault it is.

THERAPIST: Sure.

CLIENT: You know, I'm just listening to some old music. I realized that I haven't plugged in music... Was it you that reminded me of this?

THERAPIST: Yeah. We talked about it.

CLIENT: It's like... I started listening to some old music. I found some Johnny Cash.

THERAPIST: Yeah, that's right. We talked about Johnny Cash.

CLIENT: You know? And it's like he did a cover of Nine Inch Nails, Hurt. And there's a really raw moment in there where he's like, "You can have it all, my empire of dirt." You know, it's just like... I don't... (SIGH)

THERAPIST: And that brought up what for you? [00:43:01]

CLIENT: You know, it's like... (PAUSE) I just want... I don't want any part of this.

THERAPIST: Sure.

CLIENT: You know?

THERAPIST: So what's it going to be like to go to counseling? When is it? Tomorrow?

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: I don't know. I don't know. It's just like all I can be and all I can bring is what I am.

THERAPIST: Sure. Have you ever been to couples' counseling before?

CLIENT: No.

THERAPIST: Okay. It's emotionally intense. I hope that you have a good counselor and I think your honesty with where you are is probably one of the most important things. If you... You know, it's almost always the case that people are differentially motivated. But you continue to be honest. Right? You be honest with where you are. Where you are may change...

CLIENT: Yeah.

THERAPIST: ...depending on how things go. But I don't think you have to have expectations. I just think that you have to try to be open to the process, not even expect what it will bring or fix or heal or whatever. But just kind of... You know, you have so much more information now from your wife than you've had in years about her emotional responses to things, some of which hurt you, some of which pissed you off. [00:44:11]

But you have emotional data. Right? And so counseling will bring more emotional data and then you will continue to kind of look at it and decide what you want to do with the rest of your life.

CLIENT: Yeah, yeah.

THERAPIST: And that's the expectation to have, that you're going to learn more and that information will be useful to you for decisions that you have to make. And I think that's all you really have to bring to the process. Show up, listen, state your truth...

CLIENT: Yeah, yeah.

THERAPIST: It looks like it's really wearing on you.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: Yeah. It is. You know, and I get that. And it's... (PAUSE) Yeah. [00:45:01]

You know, and really, you know, there's a huge... It's who I am. You know? And it hurts inside to see her hurting. You know, and it's like I don't want to do that to anybody. You know? (PAUSE) There's also a part of me that's like... Whatever. You know? I can't take 100% responsibility...

THERAPIST: Absolutely not.

CLIENT: ...for this. You know?

THERAPIST: Sure.

CLIENT: It's a sad situation and... Yeah. Everybody's going to be feeling what they're going to be feeling about this. But I can only accept whatever I feel I'm responsible for.

THERAPIST: Sure. And recognize that, you know, if you have... I don't know. Let's say you have 40% responsibility and she has 40% responsibility, there's 20% variability there still floating around, you know, of just factors. Right? [00:46:01]

I think it is pretty incredible that you reached out to your family for support. Well, I need to hear that because it feels like, you know, I'm being some kind of a sneaky bastard who's trying to, you know, set up conditions for blood money.

THERAPIST: Not really. You know, in terms of talking to your sons, that might have been a decision the two of you made together but your family, your siblings, your brothers. Right? You are allowed to have relationships with your family members and to reach out to them. You really are. You really don't have to ask anybody's permission to do that. And what you got back from your parents and from your brother and your sister in law was surprising probably for you because you had, in some ways, you know, everybody's kind of cut off from one another. But you needed that. You had gotten into a habit of not reaching out and when you did, you got a lot of rewards.

CLIENT: I really did and I found it not just those family members...

THERAPIST: Yeah. [00:47:01]

CLIENT: ...but there's a half a dozen other friends...

THERAPIST: Sure.

CLIENT: ...that I've had since a long time friends and it's like.... I had this small little, you know, group of support system.

THERAPIST: Yeah. But you didn't feel that way a couple months ago. We...

CLIENT: Probably not.

THERAPIST: No.

CLIENT: And, you know, a couple of months ago it's like I couldn't tell you what I was feeling.

THERAPIST: No. But you didn't feel like you had much support and you changed it by talking about what you're going through. Right?

CLIENT: Yeah.

THERAPIST: You're changing these huge patterns... Maybe it's hard to see because you're in the middle of it and it's really painful. But you sort of had a lifetime of one pattern. You've completely changed it in a couple of months. Right?

CLIENT: Yeah. You know, as much as I didn't want to be Wile E. Coyote hitting the plunger on the dynamite, that's pretty much what I did.

THERAPIST: Sure.

CLIENT: Yeah. I pretty much just fucking blew it all up. [00:47:55]

THERAPIST: But you blew up the pattern.

CLIENT: Yeah.

THERAPIST: You didn't blow up the marriage. Okay? You blew up the pattern that wasn't working.

CLIENT: Yep.

THERAPIST: Alright? Again, I don't want self-blame to creep in here but what it does is it really clouds understanding what's really happening. If you are just guilt ridden and shame ridden, you don't really, you're not really in a place then to really look at what's happening. Right? So I'm imagining things as you go forward. I'm imagining this is a pretty awful place to be. But it was a worse place to be where you were before and you won't stay here.

CLIENT: Yeah. And I think that's what I've got to remember.

THERAPIST: Yes.

CLIENT: It's like I have no idea... You know, a buddy of mine who's... I call him my redneck alter ego.

THERAPIST: Okay.

CLIENT: If you can imagine everything that I'm... Do 180.

THERAPIST: Okay.

CLIENT: I mean, he puts away a twelve pack a night.

THERAPIST: Okay.

CLIENT: He's just one of those guys. But, you know, like he's a truth teller.

THERAPIST: Sure. [00:49:03]

CLIENT: You know... And he won't candy coat it for you.

THERAPIST: Sure.

CLIENT: He's like, "Seamus, you've been coming over to my house for ten years telling me this shit. You finally grew a pair." (LAUGHTER)

THERAPIST: (LAUGHTER) What was it like to hear that?

CLIENT: You know, it's like whatever. You know, it's probably what I needed to hear in the moment. You know, it's like... You know, he went through an awful nasty divorce...

THERAPIST: Yeah.

CLIENT: Really nasty. So he's coming from a different, from a completely different perspective.

THERAPIST: Sure.

CLIENT: He's like, "You need to go home right now and start figuring out your finances. What the hell are you going to do?" You know, it's like, "Oh shit." I haven't even thought about the reality of what all this means.

THERAPIST: Right.

CLIENT: I'm so airy fairy worried about my existential whatever that it's like, "Well, what's this really look like?"

THERAPIST: Well, you're not there yet.

CLIENT: I'm in a... I'm in a financially vulnerable place.

THERAPIST: Sure.

CLIENT: So I'm like... So that puts me in a... That almost puts me in a position of like, "Shit."
[00:50:07]

THERAPIST: You know, the finances, as scary as it is, will work out and you're not there yet.

CLIENT: I know, I know, I know. And I don't even... You know, it's like... (SIGH) Part of me feels like I ought to be trying to bring something to the table.

THERAPIST: You are. You're bringing you and your truth.

CLIENT: Alright.

THERAPIST: And I'm not saying, "Don't think about finances and that stuff," because if your thoughts direct you that way, that's more data. I mean, that says you're planning for a different future than you thought you were. You know? But you don't know yet. You don't know where this thing is going to go. You just know that you can't stand it anymore the way that it has been. And you're changing the pattern means you're not stuck anymore. You're reaching out to people who can understand what you're going through which means you're building a support system. You're finding you're not the only person going through this and you just refuse to stay stuck in that hell hole anymore. [00:51:03]

CLIENT: No. I... If I haven't said that clearly enough, it's like I'm... Even in the midst of all that last night, I didn't go back downstairs. I rolled over and went back to sleep.

THERAPIST: Yeah. Good for you.

CLIENT: You know, it's like I can't do it.

THERAPIST: Sure.

CLIENT: I can't do that.

THERAPIST: It's not okay anymore.

CLIENT: It's like I guess I'm just going to wear whatever it is I have to wear right now. I feel like the only way out of this particular situation is through it. I have been dancing around it for so long...

THERAPIST: Sure.

CLIENT: ...that it's not working.

THERAPIST: Sure.

CLIENT: Or I've ignored it or denied it or whatever those feelings are. It's like...

THERAPIST: You know, I bet whatever, where ever this path takes you, whatever relationships you make with people regardless, whether they're romantic or not or whatever... I bet you never do that again.

CLIENT: Oh I never do that again. [00:52:01]

THERAPIST: I bet you never keep your silence again. I bet you never do that again.

CLIENT: It's really pretty amazing in, you know, the last two weeks. I've said things to people I've never ever said before in my life.

THERAPIST: Yeah. Yes.

CLIENT: And it's like I don't feel bad about it.

THERAPIST: Doesn't it feel empowering?

CLIENT: It feels... Yeah.

THERAPIST: That's great.

CLIENT: I can't do that with her.

THERAPIST: Well, but you have been.

CLIENT: To a certain degree. Yeah. I guess you're right.

THERAPIST: Okay. But you have been.

CLIENT: I guess I have been.

THERAPIST: You said to a certain degree. Oh please. We went from not at all to having conversations where you kind of stand your ground and state the truth. And you're still able to hear what she's saying whether you like it or not.

CLIENT: Yeah. So I guess you're right. I'm speaking my truth. It's just that the truth is not what she wants to hear and it's not pretty and bubbly.

THERAPIST: Yes. And she's speaking truth back to you that you don't always want to hear either. I mean, that's always the way that it is. But you're not changing the truth.

CLIENT: Yeah.

THERAPIST: You know, so, now, again, so when I say, you know, my goodness, you've broken this pattern, you've broken the shit out of the pattern.

CLIENT: Yeah. [00:53:09]

THERAPIST: Like, you know, it's like a glass plate that you just cracked the hell out of.

CLIENT: It's not going back together again.

THERAPIST: No. And you know what? Good. Because...

CLIENT: Oh yeah.

THERAPIST: I sort of liken it to having acid on your insides the other way where you're just slowly destroying yourself from the inside. Say again?

CLIENT: That's what I did.

THERAPIST: That's what... Yeah. That's what I think of it as not being able to say how you feel and how you think and how you're dying inside.

CLIENT: Swallowing all that poison for years. You know, it's like, you know... I think the one thing that was really difficult for me and I did call my daughter. It's like... She wasn't home so I called her and talked to her over the phone. She's the only one that really expresses any kind of emotion out of all the people that I talk to.

THERAPIST: Yeah. [00:54:03]

CLIENT: I get it. You know, it's like...

THERAPIST: What happened there?

CLIENT: She was, she was sad...

THERAPIST: Yeah.

CLIENT: ...about that.

THERAPIST: Yeah.

CLIENT: And then she called me another time. I think she and my wife had a discussion and she said, "It just feels like you're not going to try to put it back together Dad." You know? And so I get, you know, that I'm changing up, I'm rockin everybody's world.

THERAPIST: Sure.

CLIENT: And that one's probably the hardest and it's just like, you know... I don't care who else is crying but my little princess cries and then it's like, "Oh shit."

THERAPIST: Yeah. But you know...

CLIENT: But, you know, Mary is like, "How can you... How can you..." Whatever she said, the word. I don't know. "...break the hearts of our children," and all that kind of thing. And I'm just feeling like continuing this crap and giving them that for how many more years, you know, it's like... [00:55:05]

THERAPIST: But see even that is a very emotional blackmail.

CLIENT: Manipulative.

THERAPIST: "Break the hearts of our children." Well, your children are grown and it doesn't mean they're immune to this." Okay? But it means you will have conversations with your grown children and you will say what's true for you and you will acknowledge how difficult it is for the family. But are you breaking the hearts of your children? You know, I don't...

CLIENT: Here's another thing. It's like, "Okay." I get that what she's saying.

THERAPIST: Sure, sure. It's definitely sad and they will have a reaction to that. But that's really... That's a finger point. "You're breaking the hearts of our children."

CLIENT: Oh yeah.

THERAPIST: You know... And it's like, "Well, I don't know about that." Like, I mean, I certainly don't speak for every child of divorce or separation but, you know, I had a really good relationship with both of my parents. And there were a rocky few years. I was a lot younger than your children. I mean, my brother was probably college age, at the time, my older brother.
[00:56:05]

But, you know, my relationship with my parents stood the test of time individually because I had good individual relationships with them. And it was a very difficult thing for our family go through

to watch your parents separate or split up. But my... Each of them attended to the relationship with each of us and there were three of us, each of them did. And I think that even though it's a painful time, you know, remember that you are a good dad and you are their dad and you are going to have conversations with them about it.

CLIENT: Yeah. It's just, you know...

THERAPIST: Yeah.

CLIENT: It's throwing around that kind of, that emotional stuff.

THERAPIST: Sure.

CLIENT: You know?

THERAPIST: And you know what? You are trying. You wouldn't agree to go to counseling if you weren't trying. So when you say, "It feels like you're not going to put it back together," that you don't know. But you know you're trying and trying today looks different than it would yesterday, looks different than it would tomorrow. Trying today may look like you only have negative two. Maybe tomorrow it's 10%. We don't know. [00:57:07]

You don't know. It's okay not to know. How are you doing right now as we kind of end things for today?

CLIENT: Yeah, I know, I know, I know. Yeah. You know, it's just sitting in the suck.

THERAPIST: It is.

CLIENT: Yeah.

THERAPIST: There's a lot of suck.

CLIENT: Yep. There is.

THERAPIST: But you are extraordinarily brave to do it.

CLIENT: Well, that's what some others have said and I'm like... I need to hang onto that because... I mean, there's kind of like this dualistic list.

THERAPIST: Yeah.

CLIENT: You know, it's like the things that I feel like I've come to know about myself and the things that, you know, got thrown at me last night. You know, it's like...

THERAPIST: Well, that's her perspective.

CLIENT: Yeah. [00:57:55]

THERAPIST: And she's entitled to it. Right? But that's one perspective.

CLIENT: Yeah. And these are perspectives too and it's like neither of them are really ultimately real. You know, it's like...

THERAPIST: Well or they're a shared reality or, you know... If you, you know, if you feel like it or if something happens in couples' counseling and you want to check up with me, please do. Send me an e-mail and tell me to call you. I'll call you as soon as I can call you. You know? You know, all you have to do is be, show up and be there⁵.

CLIENT: Yeah. And that's what I'm going to do and... Yeah. And thanks. It's...

THERAPIST: For? (LAUGHTER) I don't know. For?

CLIENT: For everything.

THERAPIST: Okay.

CLIENT: No, I mean, really, I do believe that on the back side of this it's... It all looks better somehow. But...

THERAPIST: I think so.

CLIENT: Right now, it's just...

THERAPIST: But it takes a while. You know, I have a really good friend of mine. He's a psychologist and he... He's in his early fifties and he and his wife have been together for 25, 26 years and they just went through a painful divorce and for some similar reasons that, you know, she... They weren't able to connect, emotional intimacy. This is not a unique experience to you. It is your experience. But it's a painful experience. You know? But you're doing it.

CLIENT: Yep. I'm doing it.

THERAPIST: And that takes a strength because in some ways Seamus it would have been so much easier for you just to stay in the same pattern.

CLIENT: And I'm surrounded by people that are doing that.

THERAPIST: Yes.

CLIENT: I'm surrounded by people that are doing that. My wife's, you know, all of the friends.

THERAPIST: Yes. But that's not okay with you anymore.

CLIENT: They're doing that. I'm like... I have to live on the island of misfit toys. Right?

THERAPIST: (LAUGHTER) So I will see you next week.

CLIENT: Thank you.

THERAPIST: Okay. Let me know how things go.

CLIENT: I am sorry. I appreciate the time.

THERAPIST: No. Problem at all. Take care Seamus. See you next week.

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: Well, to use the right metaphor...

THERAPIST: Okay.

CLIENT: ...you know, I'm still in the ring.

THERAPIST: Okay.

CLIENT: You know, the fight is internal. You know the fight is internal about like staying with the truth. You know?

THERAPIST: Right.

CLIENT: So I feel like the weekend was, you know... I was up against the ropes.

THERAPIST: Right.

CLIENT: But I'm... I think I'm still in the... I may be in the corner right now but at least I'm still in the ring. So...

THERAPIST: It sounds like it's been a pretty tough weekend.

CLIENT: Yeah, yeah.

THERAPIST: Yeah, I can tell by your face.

CLIENT: Yeah. And I'm operating on like two nights of almost no sleep. So...

THERAPIST: Yeah. What's happening for you at night?

CLIENT: (SIGH) You know, it's just like I've been really tuned into by body and like the body is just like screaming at me.

THERAPIST: What's it saying to you? [00:00:59]

CLIENT: Well, it was interesting. I'll back up just a little bit.

THERAPIST: Sure.

CLIENT: A friend (PAUSE) was talking about some gestalt stuff. And I've been resistant to that kind of stuff. That whole notion of talking to the empty chair just drive me crazy.

THERAPIST: I'm surprised.

CLIENT: And I'm like why would I be so resistant to something like that?

THERAPIST: Yeah.

CLIENT: So... Like, I don't know. For whatever reason, like Sunday morning, I was just like (PAUSE) just sitting there and I started.

THERAPIST: Okay.

CLIENT: You know, and it was almost barely audible.

THERAPIST: Yeah.

CLIENT: It's like, okay. It's not like thinking about talking to the empty chair. I have to talk to the empty chair.

THERAPIST: Okay.

CLIENT: And it's like the more I did it, the louder my voice got.

THERAPIST: Mm hmm.

CLIENT: And I just started saying stuff.

THERAPIST: What did you say?

CLIENT: You know, like I was just directing it all at Mary and just trying, trying not to edit, just trying to get it all out. You know? [00:02:03]

And I'm thinking, "Okay. Maybe this is what I need. This is what I need to do in order to get rid of this knotted up feeling in my stomach."

THERAPIST: What kinds of things did you say to the chair?

CLIENT: You know, I think, you know, anger feelings, hurt feelings, you know, how could you have done this to me kind of feelings. You know? And ultimately, you know, saying those really hard words of, "You know, there's just not any love there anymore and I just want out."

THERAPIST: Wow.

CLIENT: You know... And that's just like, just really difficult.

THERAPIST: Gut wrenching.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: So it's like, "Okay." I'm thinking, "Hey, you know, maybe this is good. You know how to get this stuff out." The experience that I had of doing that it just like... It just knotted up that stomach even tighter. [00:02:59]

THERAPIST: Sure.

CLIENT: And then I started to develop this like splitting headache.

THERAPIST: Right.

CLIENT: And I'm like, "Oh fuck."

THERAPIST: Yeah.

CLIENT: You know, so then Mary was coming home and she was home in the afternoon and I had to go down the road of like trying to fix some (PAUSE) financial mistakes in my Quickbooks program with the business that I'm sort of transitioning out of. And I'm just like such a zero when it comes to that. So I had to go revisit tapes of being the failed businessman. You know? So like carrying that around and then like really not wanting to talk.

THERAPIST: Sure.

CLIENT: So like, "Let's go try to see a movie." You know, there's nothing really. And so we're going to watch a movie. Well, the Internet's not working properly. So it's just like, "Okay." And I'm really just like... You know, the longer it's going on... I don't want to be too graphic. But you know that feeling when you've got to vomit and there's just nothing that's going to make it feel better unless you do. [00:04:15]

So it's like, "Look, I just need to get some stuff out." And I know that, you know... And she's... You know, she's not unaware that I'm like physically in a really bad place. You know? And I'm sure that probably on the outside it looked like someone who is going crazy. But it's just like, "Okay, I've got to get this stuff out." I just need to be heard. You know? So I launch into some of the stuff. And, again, you know, what's coming out? Not 100% sure.

THERAPIST: Sure.

CLIENT: You know? It's like coming out. And I could sense that she was going to jump right in with, you know, being defensive about the stuff I'm spitting out. And I was able to say, "Look, you know, if you're not in a position to be able to hear this right now, I understand and I'll stop because I'm not in a place of arguing about this. I just need to get it all out. And if you can't hear it right now, I understand. But that's... If you're going to... If this is going to happen, I just need to get this stuff out. You know?" [00:05:19]

THERAPIST: What was that like for you?

CLIENT: Again, it was kind of like the gestalt experience. It was kind of slow and I'm not really sure how I'm saying. It feels kind of awkward. But the more I was doing it, you know, I could just really feel just that sense of lightning. And it was like, "I know that this is what I need to be doing. I just need to be getting all of this crap out."

THERAPIST: I mean, you are really in the heart of it.

CLIENT: Oh.

THERAPIST: Yeah.

CLIENT: (PAUSE) Yeah. So... (PAUSE) So I'm just like trying to stay with that, trying to stay with, you know, is that really what you feel? Is this what you're... You know, it's like... So I think I was able to get, you know... It seemed like okay. You know? [00:06:07]

This is probably all I'm going to be able to do right now. Not that it's all said. You know? But...

THERAPIST: Sure.

CLIENT: Because I couldn't go there. I couldn't say, "I don't love you anymore and I want out." You know?

THERAPIST: What was that like for you to say that to yourself?

CLIENT: (PAUSE) Well, it's truth. It's where I'm at. I know it's truth. But it's just like... (PAUSE) Okay, for me to speak my truth, I have to go down to the place of watching somebody's life just crumble. (PAUSE) And, you know... After I was able to get my stuff out, you know... You know, it was kind of like I can tell, you know, that she's standing there. I recognize that, you know, when I'm looking into her eyes, you know, all I see is the fear and I think that that's all I've ever seen. [00:07:07]

THERAPIST: Tell me more about that.

CLIENT: You know, recognizing that it's like... (SIGH) (PAUSE) I've experienced other relationships. I've experienced other friendship and you know that there's something in the gaze where you can connect with somebody on a deeper level.

THERAPIST: Sure.

CLIENT: And I... You know, all I've been able to connect with I think is the fear. I don't... There's not that connection of...

THERAPIST: Fear that the marriage is going to fail and that you're going to leave.

CLIENT: That I'm going to leave. Yeah, yeah.

THERAPIST: And what impact did that have on you, Seamus?

CLIENT: I think that it just allowed me to be able to say... It's like, "Look. You know, if we're going to continue in this, it's got to be all in. It's got to be... I've got to have... We've got to be both completely honest. You know, this is... You know, we've got to march completely honest forward in this. You know? Because whatever it was, that's over. Because the key, one of the key ingredients for what that was has changed. You know? And I've changed it." [00:08:17]

THERAPIST: You've changed. Right.

CLIENT: You know? And it's like... It's not going to be the same.

THERAPIST: What is this doing to you? I mean, I know what it's doing to you physically. But what's it doing to you emotionally to really admit these things to yourself?

CLIENT: (SIGH) What's it doing to me emotionally? (PAUSE) Well, I think it's just put me, it's just pushing me closer to the cliff. You know?

THERAPIST: What's on the other side of the cliff you think? [00:08:55]

CLIENT: I'm going to have to take the leap into just saying, "I'm out." You know? That's what it feels like to me. It's like I don't... At this point, it's like the path, the path is marching off the cliff and jumping into whatever it is.

THERAPIST: Which is preferable to staying on?

CLIENT: (PAUSE) Yeah. I had to go to a... I chose to go to a faculty dinner Saturday night. It was an awards banquet. So I'm sitting around the table with the music faculty. So these are the people that Mary works with.

THERAPIST: Oh her faculty dinner. Okay.

CLIENT: (SIGH) You know, her best friend Lisa and her husband Rory are there and, you know... There's another one of the women from the faculty who I suppose probably is in on what's going on.

THERAPIST: Okay. [00:09:59]

CLIENT: So it's like at least half of the people at the table are like...

THERAPIST: It sounds like hell.

CLIENT: Yeah. And I'm like, "Really? Why are you wanting to do this? Why are you going to do this? What's..."

THERAPIST: Going to do what? Make you go to that... Have you at the dinner?

CLIENT: Yeah. Why am I going to this dinner. You know, and I'm like asking myself ahead of time. It's like there's nothing that feels like you want to be doing this. What the hell are you going this for?

THERAPIST: You yourself or what Mary? Okay. Yourself.

CLIENT: Yeah. It's me, inner conversation. So I'm like... So I think ultimately I just decided, "You know what? I'm going to go."

THERAPIST: Okay.

CLIENT: And I'm just going to try to stay with, just be aware of what's going on, you know, feeling wise. And it really was this hellish experience for me.

THERAPIST: I can imagine. Because it's a lie.

CLIENT: Oh yeah.

THERAPIST: It's phony. It's fake.

CLIENT: The whole thing was.

THERAPIST: Sure.

CLIENT: You know, and I just was like... It took all of my skills, you know, to stay in that.

THERAPIST: Yeah.

CLIENT: And I recognized just the screaming and yelling that's going on inside. And it's like I know that the only way that I was able to get through those kind of things in the past is just to shut down. [00:11:09]

You know what? I recognize that it doesn't make any difference what relationship you're in. I mean, there are some things we go and we do because they're an obligation.

THERAPIST: Sure.

CLIENT: And you do it and you get through it and blah, blah, blah. You know? And not everything has to be, you know, that, you know, you always have to be in this place with me. "Well, if I don't feel like doing it, I'm not going to go do it." I think. I don't know.

THERAPIST: Right. Because that's not how relationships work. But it's interesting that you should bring up Gestalt because... And I don't know how much you know about Gestalt. Do... A little bit. Okay. There's a personality structure in Gestalt that talks about peeling back the layers. Right? The first one is I think the phony layer and the second one is the phobic layer. Right? You know, and you peel back... There's the implosive and the explosive... I can't remember all of them. [00:12:05]

But then, you know, that's the whole purpose of gestalt therapy, to increase awareness. I actually showed a video of Fritz Perl (ph) last night in class. So it's interesting that this should come up today. You know, and he talks about body awareness and wholeness. But you peel back the layers and then you have the genuine authentic self which is something that's very hard to do and be. Right? And you're talking in so many words about peeling back the layers and not being able to take the phony, phobic layer. And I want to take you back a bit when you first came in and I asked you if you liked your wife. And that was a question that was so hard for you to look at. You kind of pushed it away and you kind of pushed back kind of not wanting to look at the anger. And you've really moved really quickly to sort of not being able to tolerate any phoniness, fakeness, something that's not real for you. [00:12:59]

CLIENT: Yeah. And I think that that's really... You know, it's got to be jarring for everybody around me.

THERAPIST: Sure.

CLIENT: It's jarring for me.

THERAPIST: Absolutely.

CLIENT: And I'm just like... You know, I find that it's, it's affecting so much. You know, it's just affecting everything.

THERAPIST: Tell me how it's...

CLIENT: I mean I... You know, I've not handled it well. (PAUSE) And I recognize that, you know, this whole process and all the turmoil that I'm in right now is...

THERAPIST: Yeah.

CLIENT: But I'm supposed to be doing this little five hour a week tuition waiver thing...

THERAPIST: Okay.

CLIENT: ...with one of the professors. And, you know, and I'm like... I felt early on like I should have declined it.

THERAPIST: Okay.

CLIENT: A, because I'm not sure I really had time to do it. And then, B, it's not something I give a shit about. (WHISPERING)

THERAPIST: Okay. [00:13:57]

CLIENT: (LAUGHTER) And I'm supposed to be doing research and I'm supposed to be reading research articles and reviewing them and submitting reviews. And I'm like, "I don't even know what the hell I'm reading."

THERAPIST: (LAUGHTER)

CLIENT: You know? And I'm like... So, there's just this like, "Ah, I'll do anything." So I know subconsciously it's like, "Well, this is my lowest priority."

THERAPIST: Sure.

CLIENT: So what happens, you know... Well, I've put it off for a couple of weeks.

THERAPIST: Right.

CLIENT: And then this shit hits.

THERAPIST: Right.

CLIENT: And then it's like, you know... So... (SIGH) I recognize that, you know, in kind of retrospect, the first... Maybe me now would have been able to go in and say, "Yeah. You know what? I need to decline this because I can't do this."

THERAPIST: Right. But you couldn't at the time.

CLIENT: No.

THERAPIST: But, you know, this is as much a surprise to you as much as anybody else. This is the you that always was. I mean, this is... But, you know, when you say, you know, you're screwing up everybody's life and that kind of thing, I think you're going through a period of transition. And when one person, as you know, in a family changes, everybody has to change.
[00:15:03]

But is it screwing up someone else's life? Your wife would probably say yes. But I think there's a different interpretation of that because you were dying. Right? I remember actively thinking after some of our early sessions that, you know, what your potential was, you know, and the fact that I just felt so much for you because I saw you dying.

CLIENT: Yeah.

THERAPIST: Right? And not wanting to be emotionally dead anymore but sort of really struggling with not only admitting your own truth but what it means to who you say you are. Right? And I think that's the process that's being challenged here. Who you say you are you have always been this person. But you haven't always felt safe enough.

CLIENT: Well, and somebody else reflected that back to me recently...

THERAPIST: Yeah.

CLIENT: ...very recently. And it's like, "Look, you keep saying that you're an inauthentic person, that you've lived an inauthentic life. It's like that's not true. You know? That..." And I guess that I admit that when I think about this network of people that I've kind of gone around and I've set up, you know, to kind of support me through this...

THERAPIST: Yeah. [00:16:15]

CLIENT: ...it's like, "Well, I've got authentic relationships with all of these people don't I?"

THERAPIST: Sure.

CLIENT: It's just that for whatever reason, you know, and I'm sure the list is long, I can't be authentic in this marriage.

THERAPIST: Well, you are now. (PAUSE) And that's not... That's a combination of two people as well as a culture, a family culture, a couple culture. That's not just you. That was the agreed upon contract and when you changed the contract, everything has to change. But both of you for years agreed upon that contract.

CLIENT: Yeah.

THERAPIST: The problem is you want to renegotiate the terms of maybe you want to walk away from the contract altogether and that's what's different. And you know what? As sad and as painful... As excruciatingly painful as it is and what this means to your life and hers, you have a right to do that. [00:17:03]

You do have a right to do that.

CLIENT: I think that that's probably where I'm at right now. It's like I'm not sure that I believe that I do.

THERAPIST: Okay.

CLIENT: I mean, there's a cognitive part of me that, you know, like gets that.

THERAPIST: Yeah.

CLIENT: And then there's the other part of me that's like, you know...

THERAPIST: Tell me about the other part.

CLIENT: Well, it's buying into her story. It's like, "I've sacrificed this and I've done all I could. I've tried to get you to feel. I've tried to get you to talk and blah, blah, blah."

THERAPIST: Sure.

CLIENT: It's like wow. After listening to all that, you know, it's like I'm pretty sure I must be the most selfish narcissistic bastard that's ever lived.

THERAPIST: Well, okay. Let's say you are. Now what? What does that change then?

CLIENT: It doesn't change anything. I mean, the bottom line is, "Okay. Yep. I did all that." It's like... But the bottom line is, you know, "I really don't want to go to a movie with you tonight."

THERAPIST: Right. [00:18:01]

CLIENT: "I really don't want to be having, to be sitting here looking into your eyes that are just about 'Are you going to leave me?'" You know, and knowing that there's all of this vitriol. There's all of this vitriol there. But I'm willing to forgive all that if you'll just come back. You know, she uses the words and I'm just like, "This is really insightful." And as she was saying it, it's just like, "Ugh..."

THERAPIST: What words?

CLIENT: She goes, "I know... You know, what I hold onto is this kernel of you, you know, who this true part of you and who you are and I'm just holding onto this kernel. And I'm just, you know, waiting for you to come back."

THERAPIST: And how was that for you? [00:19:07]

CLIENT: And I'm like, "You're just not there. You just... Whatever that kernel was that you're hanging onto, I'm not that guy five minutes after you hung onto that kernel." It's like I want to be known for who I am right now. I've wanted to be known for who I am right now for a very long damn time.

THERAPIST: Sure. Right.

CLIENT: And it's like... I get it. You know? "I'm not meeting that picture so you don't get anything."

THERAPIST: Well, you know, this is not a matter of rightness or wrongness.

CLIENT: I know.

THERAPIST: I think that's the most frustrating part of it. So if you do say, yes, you're a selfish bastard, the... Now what? You know? We could look at it and put blame on both sides. I don't think it's about blame. Her perspective is valid from her perspective and yours is valid from yours. But you can't go back to the way things were. [00:19:59]

It... You can't. You can't physically. You can't emotionally. You can't psychologically. You can't. Like, you know, sometimes once you just break it, it's broken. Right? Now, it doesn't mean you can't put it back together if that's what you want. But that's a break in there. And you can't... You refuse to go back to it like that. You know? And it seems like, from at least what you're telling

me, every statement she makes is confirmation that she doesn't get you. She just wants to hold onto the marriage because it paints a pretty picture. Right? But it's an empty marriage from your perspective. So what picture is that? And the picture, in some ways, is soul destroying for you because it's just a picture. You know, I think you gave the analogy of saying, you know, "This is not a marriage bed. So what difference does it mean if I go upstairs? It hasn't been a marriage bed in a long time."

CLIENT: Yeah. (PAUSE) Yeah. (SIGH) Yeah.

THERAPIST: I wish it didn't have to be so painful but oftentimes feeling is pain. And it's excruciating. It really is. I mean, it's just... And this is something that you're going to be going through a long time. Right? [00:21:09]

And I'll tell you know, Seamus, she's never going to come over and fully get it. Right? You may never fully get it from her that... Yeah.

CLIENT: Yeah. No. I think that's where I've come to recognize. And it's like there's probably no amount of counseling that's going to do this especially if she's not willing to engage in her own personal counseling.

THERAPIST: Yeah, and, you know, I mean, I believe that people can change and I believe that people can see one another even through the toughest times if that's the desired point. Right? If that's where you want to get to. But you're in the process of deciding if that's what you want to do.

CLIENT: I know.

THERAPIST: Right?

CLIENT: I know.

THERAPIST: And when you said two times, "I want out. I don't... This isn't working. I want out..." Those are pretty powerful statements to be making. Those are statements you haven't made before. You have hinted at it. You know, you have kind of touched it a little bit. [00:22:09]

But, in your own gestalt exercise, you said it to the chair and you said it in here.

CLIENT: Yeah. (SIGH) Yeah. And I thought those were just words that I could never, ever say.

THERAPIST: Well, you spoke the hell out of them pretty definitively. And I... Only you can decide if that's your answer but considering that's not an area where you would touch before probably because deep down you knew the answer for you.

CLIENT: Yeah. You know, it's like, "Shit." You know? I know that I've been living with this reality for years. You know? I really do. It's just like, you know... I had a... I don't know if I was telling you this. But a friend of mine who's, you know, just this gritty redneck...

THERAPIST: You told me a bit about him. Yes. [00:22:57]

CLIENT: I mean, he's like, "You've been telling me this shit for ten years."

THERAPIST: Right.

CLIENT: You know, it's like... It's not anything that, you know, I haven't been afraid to tell somebody at some point.

THERAPIST: Right.

CLIENT: But too afraid to think it or to really consider it.

THERAPIST: You are ready.

CLIENT: Yeah.

THERAPIST: You weren't ready.

CLIENT: Yeah. And there were other conditions. It was like, "You're not going to do this while the kids are around."

THERAPIST: Sure.

CLIENT: Maybe. You know... (SIGH) So I know that this, what's left in here is, I think, it's just going there. And I'm going to carry this around whether I go there or not.

THERAPIST: Go there where?

CLIENT: I mean, just hit the final button. You know, can I really go there? You know, it's like...

THERAPIST: Well, where are you with that?

(PAUSE) [00:24:00]

CLIENT: I really don't know. You know? I mean, in terms of authenticity, you know, it's like, "Am I really being authentic going to counseling?"

THERAPIST: Going into it or coming here?

CLIENT: Marriage counseling.

THERAPIST: Marriage counseling.

CLIENT: Am I really being authentic because it's like... I really felt like the best answer or the only answer I could give this guy last week was, "Here's what I got. You know? We just need to get shit out on the table."

THERAPIST: How is that not authentic?

CLIENT: Because I think that underneath it, you know, there's just this deep sense of, "I don't think this is going to work."

THERAPIST: Yeah. And you know what? I think it's sort of not about whether it works or whether it doesn't. In some ways, it's about the process. And you have to be able to look yourself in the mirror. And maybe part of being able to look yourself in the mirror is to do due diligence in the relationship. [00:25:01]

CLIENT: Yeah.

THERAPIST: So you still remain true to yourself but going to counseling, whether it works or doesn't... Right? I still think... Remember, we talked about on the phone a different one possibly. It's sort of like... You guys have been married for almost thirty years. And in some ways, if this is ending, you have to see it to its end so that when you're done, if this is the course that it's taking, you say, "You know what? I tried and the answer was still the same for me." Right? So although it may seem like, you know, "I don't know if this is going to work..." You know, a lot of couples feel that way when they go into counseling. You know, and although I don't think there's going to be some miracle and everything's going to be perfect... I don't believe that things work like that. You have to do your due diligence and I think that's why you're doing it. [00:25:59]

CLIENT: Yeah, yeah, yeah. You know, I know that it's just the hardest damn work I've ever done before.

THERAPIST: Oh yeah. And probably some of the most painful.

CLIENT: Yeah.

THERAPIST: What do you do with all of that pain?

CLIENT: (SIGH) Well, not sleep too well. There's that. (PAUSE) You know, mostly run away. You know, spending more and more time up here as opposed to being home. You know, and I recognize it's like... This whole career path, you know, I've set up conditions. I've set up conditions to be locked into a career path or, you know, a graduate school program where I

don't have to be at home. I don't have to be around. You know? So now that all the kids are gone, you know...

THERAPIST: Are you the only one doing that? [00:27:01]

CLIENT: I wasn't...

THERAPIST: Right.

CLIENT: ...until I hit the button.

THERAPIST: Right.

CLIENT: And now it's like, "Well, where are you? Why aren't you here?"

THERAPIST: Sure. But again, the contract has changed. See before, both of you were doing that. Right? She with all the kind of commitments with music stuff and with Lisa, right, and you in school. Right? And are you running away or are you getting space? Because it's...

CLIENT: Oh it's space.

THERAPIST: Yeah. So before I would have said, "Yeah, I can see where you could see that as running away because you're running away from dealing." But you're constantly dealing with it now. It ain't going anywhere. I mean, it's constant. It's with you when you sleep. It's with you when you're here. You know, you are having conversations about it. So I don't see it as running away.

CLIENT: No. I'm fully immersed in it.

THERAPIST: Yes.

CLIENT: You know, I've spent quite a bit of time...

THERAPIST: Right.

CLIENT: ...with a number of different friends...

THERAPIST: Sure.

CLIENT: ...dealing with this issue. It's just like... You know, and I'm grateful, you know, intensely grateful for all of these people that are allowing me to just come in and emotionally vomit at their feet. And that's really gratifying. [00:28:11]

But... (PAUSE) Yeah. Where was I going with that?

THERAPIST: Tell me what you're feeling right now.

CLIENT: Yeah. It's just hard.

THERAPIST: Hard meaning really hurting.

CLIENT: But feeling kind of buoyed up by, you know, the network of people that I've got and it's like, "Okay, you know, I know this is really hard and... But I just have to keep marching through it." You know?

THERAPIST: What's the hardest part about it for you?

CLIENT: I think watching Mary disintegrate. I really... (SIGH) (PAUSE) You know, I could potentially see her just like giving up. [00:29:01]

You know, and not committing suicide but, you know, something physically happening to her that, you know, would just put her into some kind of a physical state or, you know, she would have a stroke or whatever. I mean, she's had a history of really serious migraines that I'm sure, in my opinion, are related to the abuse issue and her inability to deal with that. And it's like, you know, she's always... She's always thinking that these headaches are going to. It's like, "Well, you know, maybe it's a stroke." It's almost like she's talking herself into it. Kind of...

THERAPIST: So you are taking some of this on.

CLIENT: Oh yeah. (PAUSE) Yeah. So it's recognizing that, you know, it's just against my nature as a person to, you know, feel somebody, you know, experiencing that much pain and not have this incredible empathy. [00:30:09]

THERAPIST: Sure.

CLIENT: You know, and I'm like... I understand and I really do see that perhaps the most empathetic thing that I could do or the most beneficial thing that I could do is to just do this and perhaps...

THERAPIST: Do what?

CLIENT: Get out.

THERAPIST: You mean leave the relationship?

CLIENT: Yeah.

THERAPIST: Why is that the most empathetic thing?

CLIENT: Because maybe it would actually force her, you know, to deal with some issues. I don't know. Because right now it's like, you know, she's just grasping at whatever little thing she can grasp onto. It's like... You know, she said something to me the other night. And I'm like, "I didn't give you any indication, outside of the fact that I've like let up on some of the anger..." Because it's just really hard, you know, to be in that place of anger all the time. [00:31:03]

And, you know, it's like just ask the question. "How are you doing?" You know, and I feel like, you know, I backed off of the anger a little bit and just asked the question, "How are you doing?" And it's like she's interpreting that as, "Well, at least we're both committed to fixing up the relationship." I'm like...

THERAPIST: But that's the very reason why you can't, you don't want to go home because home, once again, you know, this sort of needy representation... You know, before she was ignoring you. You had a pat on the head or a kiss on the cheek. And now she's home but it's, you know... I'm wondering if you sort of don't see it as superficial, a little too late. And, you know, it's almost like you have an aversive reaction to it because, you know, it's so skims the surface, desperation to hold onto what?

CLIENT: Exactly. [00:31:57]

THERAPIST: This thing that you don't even want.

CLIENT: Yeah.

THERAPIST: Right? And if she looked at it, right, really imagined it as opposed to saying the marriage but what is comprised of the marriage, you know, what does she get out of it as well?

CLIENT: I mean, like you're hanging onto... You know, it's like how long? "In your words, you're describing how I've been over the last seven years that, you know, I've been a bump on the log. You know, you've had to drag me to everything that I didn't engage in stuff, you know, that I was, you know, verbally sarcastic and unkind to you." It's like, "What about that do you want to hang on to?"

THERAPIST: Sure. It's like the kernel of you.

CLIENT: "And if I go back, that's the guy you get."

THERAPIST: Well, you can't go back.

CLIENT: I know. But I'm just saying it's like...

THERAPIST: But seven years ago though... That's what she said? "Seven years ago?"

CLIENT: Well, I don't know if she did. I know that's...

THERAPIST: Yeah because that's when you guys stopped having sex.

CLIENT: Oh yeah.

THERAPIST: Yeah. [00:32:59]

CLIENT: Yeah. I mean, and longer really.

THERAPIST: But that's where that final connection was broken. So other connections were broken up to that point.

CLIENT: Yeah. You know, at that point, to me, that was almost like the final straw.

THERAPIST: Sure.

CLIENT: You know? Prior to that, it was living with years of rejection and feeling like I was a sexual predator and a pariah and whatnot. So it's like...

THERAPIST: Tell me about feeling like a sexual predator.

CLIENT: Oh yeah. I mean, it's just... Yeah. You know, it's like once it became known that the sexual abuse issue was something that was the fabric of our marriage, then it's like, "Great. Now I'm in the position of if I want to initiate a sexual experience, then, you know, that's I'm sure how I'm being portrayed." And it's like, "Okay. Well then, that just kind of puts me in shutdown mode." [00:34:03]

You know? Or what you end up learning over time that the only way that's going to happen is if you start, you know, plying her with two or three martinis. And then it's like... Doesn't that feel special? You know, then you still feel like a sexual manipulator.

THERAPIST: Sure.

CLIENT: And it's like... There's no intimacy in that. It's like...

THERAPIST: So you just quit that.

CLIENT: Yeah. And eventually it's like, "Yeah. I'm done with this. I'm done with drinking. I'm done with the whole nine yards."

THERAPIST: Sure.

CLIENT: You know, I didn't like what drinking was doing to me and it's just like cold turkey, done.

THERAPIST: Sure. Well, that was a way of coping.

CLIENT: Yeah.

THERAPIST: But, you know, of course, for her to not have sex and to not be asked was a relief.

CLIENT: Oh yeah. [00:34:59]

THERAPIST: But, for you, it's the opposite of that.

CLIENT: Oh yeah. It's just been like the shutdown of everything.

THERAPIST: Sure.

CLIENT: It's like there is no emotional relationship here because there's no vulnerability. There's no openness.

THERAPIST: But her grieving process now, her fear, her panic, right, are things, you know, her suffering is reflective of your own for years. You understand? So it's just you had been in pain and suffering for all these years for wanting this connection, denying yourself of a voice to say anything. Right? And you finally exploded. Well, what you're seeing, right, is kind of she's kicked out of denial because you're kicked out of denial and now you're just seeing her reflection of the pain that you both feel. You know? You're both in pain here.

CLIENT: Oh yeah.

THERAPIST: You know, this is not, you know... Whatever happens, you don't come away from this things absolutely clean. It hurts you. It hurts you to see her hurting. And it hurts you deeply. [00:36:11]

CLIENT: Yeah. But for me to sit here and say that I can just forgive and forget and move on and pretend that none of that ever happened and to pretend that everything's hunky dory and it's not...

THERAPIST: Well, that's not possible.

CLIENT: Let's revisit all of those, you know, those feelings that you had for each other 27, 28 years ago when you first got together. It's like... I can't fucking remember anything.

THERAPIST: Sure.

CLIENT: There's nothing there. You know? It's like I have to get through so many layers of crap to even get back down there that I'm like... And when I get there, it's like, "Yeah, we're so far removed from that."

THERAPIST: Yeah.

CLIENT: You know, there's been too damn much water under the bridge.

THERAPIST: What... So are you guys going to go back to this guy? [00:36:59]

CLIENT: Yeah. I'll go Wednesday and we'll see. I'll try it one more time and, again, I'll be in my truth. And it's like, "Yeah, William. No..."

THERAPIST: Yeah. So what would it... You know, and I'm laughing because I told you when we talked over the phone that we had to fire... My husband and I had to fire a couples' therapist. Right? Because he just... You know, and I remember there was a point in the session where we said to him, "We don't want this. We want this." Right? And I wonder for you, if you could tell him what you want.

CLIENT: Well, I think that what I want is like, "William, we need to get everything out on the table, A, you know, so we can see what we're clearly looking at. I want to be heard. And then it's like... Departure is from here. Whatever that was, that was a snapshot of a long damn time ago."

THERAPIST: Right. [00:37:57]

CLIENT: "And I'm not sure that I can make any connection to that at all.

THERAPIST: Or you even want to at this point.

CLIENT: Or even want to. You know?

THERAPIST: Yeah. But tell him and, I mean, and sometimes a worthy discussion with Mary about what she wants to get out of it. Right? But that didn't serve your needs. And I think you can say, "This isn't working for me. The solution focused approach, given how much water is under the bridge, to the point where we're drowning, that's not going to work because I don't even want to go back and look at who we were 27 years ago. I want to look at right now because I'm in my right now. You know, I can't even connect to that."

CLIENT: Yeah. Yeah, I mean, that's where it's at. So that's... Yeah. That's the hard stuff.

THERAPIST: A lot, a lot of hard stuff.

CLIENT: Yeah. How are we doing?

THERAPIST: We're doing perfect.

CLIENT: Yeah. [00:38:59]

THERAPIST: Where are your kids in all this? I know over the weekend you told me you talked to your son who was pretty supportive.

CLIENT: Yeah. I haven't really talked to the other two.

THERAPIST: Okay.

CLIENT: I would imagine that, you know, my daughter... I mean, she's immersed in trying to get through a musical right now. So she teaches all day and musical practice all night.

THERAPIST: What is... What are their years again?

CLIENT: She's 25, out teaching for three years. The other one's... The middle one's a senior in college and the youngest is a freshman. So... We have to go drive down to southern Illinois, three hour car drive.

THERAPIST: It is. In Pocahontas or Ferguson (ph)?

CLIENT: No. Taylorville.

THERAPIST: Where is Taylorville?

CLIENT: Halfway between Belleville and Decatur.

THERAPIST: Yeah okay.

CLIENT: It's in everybody's favorite pee spot.

THERAPIST: Okay. (LAUGHTER)

CLIENT: It's the only wide place the road where you've got a decent exit there. But, you know, we're supposed to drive down together on Friday.

THERAPIST: And what's on Friday? [00:40:01]

CLIENT: Her musical. Penelope's directing this musical or no, not directing, she's the musical director of this musical. We're going to go down and see that. So it's like...

THERAPIST: How will that be, three hours in the car?

CLIENT: Long.

THERAPIST: Yes. Right. And I remember when you were just kind of getting started with being open and honest, you would want, you wanted the time with her and she didn't. And now... I know because I remember there was an incident where she could have chosen to drive with you but she drove with Lisa. And now the last thing that you want is a car ride. What are you going to do with the car ride?

CLIENT: (SIGH) Well, you know, I guess the bottom line is just stay in authenticity. You know? And if I can't go there, I'm just going to have to say, "We can't talk about that."

THERAPIST: Do you still love her? [00:40:57]

CLIENT: You know, that's an interesting question.

THERAPIST: It is.

CLIENT: You know, do I still love her? You know, there's a lot of... You know, love is one of those tricky words to define.

THERAPIST: It is.

CLIENT: Do I love her as a person?

THERAPIST: Yes.

CLIENT: Yeah. You know, I want the best for her. I care about her. You know, she's part of my family. You know?

THERAPIST: Right.

CLIENT: It's like I love her like I love, you know, Delia who lives with us and I love her like, you know... Do I love her as much as my kids? Probably not.

THERAPIST: Sure. Different kind of love.

CLIENT: Different kind of love.

THERAPIST: But I... Here's why I ask. I'm not asking if you're in love with your wife. I'm asking if you love her because that's why when she hurts, you hurt. Right? It's not that you don't love her and care about her. It's you don't know if you want to be married to her or if you have romantic feelings or if you like her or if... Love is complicated. Right? [00:42:01]

And so that's why you're impacted deeply by this because you do love and care about her. The marriage isn't working. Right? If you, if she was, if you were, she was a hateful bitch and awful and horrible, in some ways...

CLIENT: It'd be easier.

THERAPIST: ...it'd be easier. Right. But to see her vulnerable because of your reaction is difficult. But I think in whatever conversations that you have, part of the authenticity is, "I do love and care about you. I don't know though where I am in terms of wanting to be married because I feel like I have not been happy in our marriage for years." And both of those pieces of data are true. That's why it's complicated. Because both of those pieces of data are true and they will probably always be true.

CLIENT: Yeah.

THERAPIST: It's sort of like, you know, if, you know, if this wasn't... If we weren't talking about marriage but if you think back to the woman who you were engaged to. Right? You might not say you love her today. But you do care. If you heard that something bad had happened to her, you would have sad feelings about that probably You want her to be okay. [00:43:11]

She's not part of your life. Right? This isn't somebody who you kind of hold a candle for. Right? You know, but it's somebody who you had a connection with. You're not emotionally immune to that connection. Right? Well, that's an even more way here. You've had children with this woman. You have a history. You know, there are parts of you that know her and there are parts of her that know you and then there are parts that don't know each other well at all. You know, complicated because both of those are true. It makes it very complicated. It is not a cut and dry case and it won't be.

CLIENT: Yeah. I know.

THERAPIST: But that's what makes you... When you get to thinking about, "Well, I'm causing her pain..." Well, you are not the bad guy. [00:43:59]

There is no fucking bad guy. There's no bad guy here.

CLIENT: Yeah. I just need to hang onto that because (PAUSE) she's very convincing.

THERAPIST: Sure.

CLIENT: Because she's very scared.

THERAPIST: She is very scared.

CLIENT: And I get that. So...

THERAPIST: Yeah. But there is not bad guy. Sometimes shit doesn't work. We can look at why but in the end sometimes it just doesn't work or, you know, a relationship is uneven. One person is in love with the other person and the other person isn't. And it's painful and it's screwed up. But there's no way to make it.. I mean, it's just unbalanced.

CLIENT: Yeah, yeah, yeah.

(PAUSE) [00:45:00]

CLIENT: You know, and I get... Yeah. And try as hard as I can, you know, it's just like I can't bring myself back to that. You know, and it's like... You know, I felt like why, why all of this... You know, and it's not a huge place to go. You know? It's just like years of accumulated feelings like this. And it's like, you know... (PAUSE) You know, I was able to tell her. It's like, "Look. The anger that I'm feeling is not some kind of a random anger feeling."

THERAPIST: Right.

CLIENT: The feeling that I have is, and the feelings that I'm trying to deal with, you know, is being in a relationship for seven years where the other person in the relationship has had an affair and you're witnessing all of this and you're just allowing it to happen. I mean, that's what I'm feeling. That's what it feels like from my side of the chair. [00:46:05]

THERAPIST: An emotional affair.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: And it's just like that's just really, really, really hard. You know? So...

THERAPIST: But as you process that piece with the therapist because that's what has to be out there... Put that out there. Right? Don't forget all parts of the truth. If you look at all parts of the truth, you do love and care about this woman, you know, and you're sorry and she's in pain and you're sorry that you're in pain. Right? That is a part of the truth. You are not the bad guy. You are not a bad guy. You are not.

CLIENT: (SIGH) Yeah.

THERAPIST: Right? You're not the bad guy. In some ways, you cannot put on the bad guy cloak, you can't because if you're going to be genuine and honest about everything, that's not a piece that fits. [00:46:59]

You can feel like the bad guy or you can feel somewhat guilty or I wish... You know you wish it was a clean break or whatever. You can feel and you can wish but you cannot do on the bad guy cape because that's not true data. It's not. You know, like I said, you can feel whatever it is you need to feel but you can't put that on. You've been wearing that shit for years. And it's not accurate. Right? She can have her perspective and be angry and hurt and you get it. I mean, you have empathy for that. Right? But there is no blame here. Right? It's a two person contract that was agreed upon by both of you for years and now the contract isn't working anymore.

CLIENT: Yeah, yeah, yeah.

THERAPIST: And as shitty as that is, that's life. That's life. Right? No matter how much we wish it otherwise, you know, and our relationships are not always on the same page as the person we're with and that's painful. [00:48:11]

CLIENT: Yeah. It's painful. It's painful. And it's like... (PAUSE) Yeah. And there's... Yeah. All of the defense mechanisms, all of the clinging and all the, all of that stuff coming out.

THERAPIST: Sure. She's in a completely different process point than you are.

CLIENT: Yeah.

THERAPIST: Right. In some ways, you might have a better ability to hear her than she you at this point.

CLIENT: Yeah. And...

THERAPIST: Not that you want to be hearing a lot of that but...

CLIENT: No. I get it. But she's... Yeah. You know, so it's difficult, you know, when she's throwing out the "for better or for worse." It's like, "Yeah, but I don't know. I'm not... I'm thinking that sounds a little... All of that sounds a little coercive at this point." [00:49:11]

THERAPIST: Yeah. See that's not... That's the desperation talking and not the... Which this is new for her. So I get it. But that's not going to pull you closer. Right?

CLIENT: Right.

THERAPIST: But, Seamus, it would have worked before. That's the point. Do you understand? Because when I came in here and I asked and we talked a little bit about divorce or whatever and you said, "I took vows." Right? Like this is kind of the way it is. This is why I'm stuck. Right? That would have worked before.

CLIENT: Yeah.

THERAPIST: But that doesn't work anymore. There's no way for her to know that doesn't work right now. Right? Right now it's aversive to you. You know? Like, "That's all you got? Like, ugh." But that would have worked before because that's what you said. That's what you projected, right, that you... You know? And now that's not okay anymore. And that's not a switcheroo or a bait and switch. That shit just happens in real life. [00:50:09]

It just happens.

CLIENT: It happened day by day, year by year.

THERAPIST: Sure, sure, sure.

CLIENT: Incident by incident. Whatever.

THERAPIST: The... You would have been here seven years ago, ten years ago, the next ten years might have looked very different. And we can only be where we are. But you just got here today. But this was always the point unless you remained in kind of some very deep denial. This was always the point. You know, and I... You know, as being honored to bear witness to, even though it's a painful struggle... When you first came to this point, this was always there from the minute you walked through the door.

CLIENT: Oh yeah. [00:51:03]

THERAPIST: You know? And so, you know, and I watched the process of you stabbing yourself with denial and how difficult it was for you to sort of, you know, be stuck and be there and think that, "This is my life and I don't like any parts of it and I'm not getting anything, what I need..." You know, I wonder if when you think back on this, will you think that painful point, as awful as it is, is still more preferable to the forcefield.

CLIENT: Oh yeah. I mean... And I think this is why I continue to be able to stand in it and be willing to stand in it because it's... It's just hard. And I feel like it's just kind of a thing where I get up daily and it's like you really have to like steady yourself. It's like, "Okay. We just keep moving forward with this."

THERAPIST: It's an incredibly brave thing to do.

(PAUSE) [00:52:00]

THERAPIST: Incredibly brave.

CLIENT: Well, I'll try to hear that but it just... Yeah.

THERAPIST: Well, sure because you'd had it the other way before. I mean, the reason why it's brave it because it's really hard.

CLIENT: Yeah.

THERAPIST: When you say, "This is the nuclear option," it is. This is what you were fleeing from for years.

CLIENT: Yeah. So... Yeah. I get that... Yeah. I get that I'm that guy that pulled the plug and walked off the stage.

THERAPIST: What do you mean "that guy that pulled the plug?"

CLIENT: Oh I don't know. I suppose that that's one of those things that I'm going to have to get over that too. I guess I'm hearing her language in that. It's like, "I can't believe he turned out to be one of those guys that would just throw it all away for, you know, whatever, you know, whatever..."

THERAPIST: Which guy was that? The one who stayed in the marriage for almost 35 years? The one who's going to counseling? The one who has not had an affair? Which guy was that? This is not she got breast cancer and you left, you had a disabled guy and said, "Forget this."
[00:53:11]

That's that guy. Which guy are we talking about?

CLIENT: Well, in her way of thinking.

THERAPIST: Which guy do we mean now? Like, "I can't believe you're that guy." Which guy? Are we pulling the plug, what, to go and have an affair with a 22 year old? That's not what I'm hearing. That's not what you're saying. That's that guy. See, you keep... You're hearing that guy. That's where you put yourself. But you are the guy. You are that guy that said, "I can't fucking take it anymore." Right? "I need closeness. I need physical intimacy. I need warmth and caring." That's the guy you are. And where is the bullshit in that? So that's that guy. So when you hear "that guy" or you think "that guy," be that guy that you are not the guy that's being projected to be. [00:54:00]

You cannot put on that cloak. Right? It makes no sense. Right? We're not talking about three years into a marriage. We're talking about 27 of which you, you know... If you told everybody, "By the way, this has been a sexless marriage for seven or eight years," most guys would tell you what?

CLIENT: Are you fucking nuts?

THERAPIST: Are you fucking kidding me? Right? No way. That's grounds for immediate dismissal. Right? You know, so, you know... And yet, through all of it, you know, you kind of stood there with it. You know, emotionally withdrawn, depressed, angry, whatever. Right? So

when she says “that guy,” I can see where she’s saying that because she’s hurting and her world as she knows it is ending... It’s not ending. It ended. And what does that mean now? But when you say “that guy” you’re the guy that stayed there for 27 years.

CLIENT: Yeah. [00:55:03]

THERAPIST: So don’t inherit that. It muddies the picture. It means it’s not clear.

CLIENT: Yeah, yeah, yeah. (SIGH)

THERAPIST: How are you doing with my little diatribe there?

CLIENT: (LAUGHTER) It’s... You know it’s why I’m here. It’s what I’m needing to hear because I’m like... I need to be bolstered up in being able to work forward with this because there’s just so many other stories that I’m, you know, that I’ve bought into over the years that it’s just really difficult to stand in this.

THERAPIST: Sure. But I want you to look at the history of your behavior and your commitment to your marriage. Right?

CLIENT: Yeah.

THERAPIST: You know, so this isn’t... Unfortunately, it’s not about that guy. And it would be nice if Lisa would understand that. She may never understand it. But that’s not... That’s not as... It’s important but it doesn’t change anything. It doesn’t change anything. Right? Because we only ever see things from our perspective most of the time. Right? [00:56:11]

But you are not that guy. You cannot take out the whip and whip your back with being that guy because it’s inaccurate. It’s just inaccurate. This is not you guys had a bad year in your marriage and you’re ready to call it quits. Right?

CLIENT: Right.

THERAPIST: This is not that simple. You know? And if you abuse yourself or muddy the picture with so much guilt and shame that you can’t see clearly, that’s not going to be you. You won’t come out of this having grown. Right? So...

CLIENT: No. I mean, I don’t want to be going through all of this, all of this work, all of this pain and suffering only to end up, you know, back in some, you know, place that’s like this much better than what it was. [00:57:09]

THERAPIST: Right. But you can always feel for her circumstance and feel that this is a sad ending. Right? It’s a sad ending to a story, a history, you know, a life with someone and that’s always devastating. Right? No matter what was good or bad. Right? You had children together.

You had a vision together. It didn't turn out the way that you wanted it or needed it to be and so that is devastating. Right? And she feels that devastation just like you do. You just interpret it differently. But the story's changed and stories always change whether we want them to or not.

CLIENT: Yeah, yeah.

THERAPIST: How are you doing right now?

CLIENT: (SIGH) Just tough stuff, tough stuff, tough stuff. You know, knowing that I've got to do the counseling thing tomorrow...

THERAPIST: Yeah. [00:58:05]

CLIENT: We'll see how that goes.

THERAPIST: Let me know. Drop me an e-mail. If you need me to call you, it's not a problem. I certainly will. I don't mind doing that at all.

CLIENT: Yeah. I appreciate that.

THERAPIST: Or if you don't want to talk and you want to check in by e-mail... "We fired him. He got better..." Whatever.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: And... (PAUSE) Yeah. You know, I think it's just the hard work of like continuing to stand in the truth, continuing to try to send the message.

THERAPIST: Sure.

CLIENT: And it's just like, you know, not probably not ready at this point yet to be able to say my truth.

THERAPIST: Sure. Well, and maybe the truth is still validated. But it's a very, very brave thing because it pushes all your buttons, all the buttons about being liked and all those buttons are being pushed and that's what makes it so brave. [00:59:03]

CLIENT: Yeah. Or stupid. One of the two.

THERAPIST: I don't see stupid in this but...

CLIENT: Yep.

THERAPIST: Well, let me know how it goes.

CLIENT: Okay.

THERAPIST: Alright?

CLIENT: Thank you. I appreciate it all.

THERAPIST: No problem. I just wish it wasn't so difficult.

CLIENT: Yeah.

THERAPIST: So much of life is fucking difficult. (LAUGHTER)

CLIENT: See you.

THERAPIST: See you later. Bye bye.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: ...in their teaching practicum at University of St Francis. They've taught for me. So, you know, that's... I was just out there.

CLIENT: He was like...

THERAPIST: He's so funny. (LAUGHTER)

CLIENT: He said, "Oh, I'm so glad to hear that you're doing counseling with her."

THERAPIST: Oh, you told him?

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: He's like, "Oh yeah. She's the real thing."

THERAPIST: He's so silly. (LAUGHTER)

CLIENT: No. Just listen to that. It's okay.

THERAPIST: No, no. I appreciate it. But, I mean, he's just silly.

CLIENT: Yeah, yeah. So...

THERAPIST: How are you?

CLIENT: Right now, I'm okay.

THERAPIST: Okay. I mean, you look a little better than last time.

CLIENT: Yeah, yeah. You know, I... Through conversations with friends and, you know, kind of my own processing, I have decided that the best thing for me to do right now is I've carved out this little safe space...

THERAPIST: Okay.

CLIENT: ...in my head and I'm calling it kind of this little middle path.

THERAPIST: Okay.

CLIENT: Instead of being really embroiled in all of the emotional garbage over here and wanting to run like hell over here...

THERAPIST: Sure. [00:01:05]

CLIENT: ...I'm just like, "Well, why not just step out of both paths and just sit right here?"

THERAPIST: Okay.

CLIENT: And it's like just chill. You know, you've got a hell of a lot of work that needs to be done before you gnaw on the top end of May. It's like, "Why don't you focus on that and, you know, just take a breather from all of this emotional stuff."

THERAPIST: Okay.

CLIENT: So it's, you know... I've kind of just kind of created this little time out in my head right now.

THERAPIST: Okay. And it's working well.

CLIENT: It seems to be.

THERAPIST: Good.

CLIENT: It seems to be. I had to do a three hour drive to Taylorville to visit Penelope. I drove with Mary. Three hour drive back, you know... So that was six hours in the car and I survived.

THERAPIST: Yeah. How was that? (LAUGHTER)

CLIENT: You know, I just kind of set my boundaries up front, you know, going in to it. Just kind of like, "Yeah, you know, I'm in this really guarded place and, you know, I'm not going to be able to go too deep with, you know, conversations and really just felt like I'm..." [00:02:15]

I can't remember wording. I can't... You know, I can only kind of remember the gist of the conversation but, you know, I just kind of put that out there up front and... Basically said, you know, because, you know, of course everything was back to normal or everything was fine getting into the car and going down to... And it's like I'm feeling like the beaten dog, kind of skittish because I just had to endure, you know, like this hour long unleashing of all of this really ugly negative stuff the last time we got out of marriage counseling. [00:03:01]

So when we got to Taylorville, my daughter's boyfriend has this dog that they rescued from a shelter. And we know the dog was abused. So he's fine around females, not so much around guys.

THERAPIST: Not so much around guys. Yeah.

CLIENT: So he's hiding underneath the table. I'm trying to coax him out a little bit. I've got a treat. He's just like so tentative about coming out. And I'm like, "I feel your pain. I feel your pain man."

THERAPIST: (LAUGHTER)

CLIENT: It's like, "You just stay under there. It's okay."

THERAPIST: "Stay under there."

CLIENT: "I'll just slide the treat in to you dude."

THERAPIST: "You come out when you're ready."

CLIENT: So, you know, for me it's kind of like this wild ride of, "Wait a minute. How can I be the most selfish, you know, cruel bastard in the world one day and then everything's fine the next day." [00:04:03]

THERAPIST: Is that the sense that you were getting from her that everything's fine the next day when you don't push to talk about things?

CLIENT: (SIGH) Yeah, I mean, like the anger thing was gone. You know? And it was like... So, you know, I kind of launched into my little spiel. "Hey, you know, I'm just really guarded and I know it's from, reacting from where we were on Wednesday." And it's just like, "Yeah. I'm not feeling in a place where, you know, there's a lot of trust here." You know?

THERAPIST: What happened Wednesday with the counselor?

CLIENT: Oh, we didn't talk about that.

THERAPIST: Yeah.

CLIENT: Oh my.

THERAPIST: Okay. (LAUGHTER)

CLIENT: That was kind of a train wreck.

THERAPIST: Okay.

CLIENT: So, you know, we got in there and, you know, started talking about issues. But, you know, I really had a chance to kind of like open up and it's like, "This has been my experience of what life without physical and emotional intimacy has been like for a long time." [00:05:01]

Kind of laying out the pattern of, "We started to go the route of helping her deal with this issue when it came to light, you know, whatever, twelve, fifteen years ago." And, you know, kind of like, "Well, I was kind of the guy, at that point, who was there to stand by her and help her and that kind of thing." You know, again, I'm not 100% sure if I said this in the session or if we talked about it in the car on the way home or whatever. But, you know, it's like, "I was there..."

THERAPIST: Right.

CLIENT: "...trying to do that twelve, fifteen years ago." She came back from a couple of counseling sessions and she was done. It's like... I got the message that I was one who had a problem for wanting to have a physical relationship. You know? I kept getting that message over and over and over and, you know, everything just spiraling down to... [00:05:55]

You know, so...

THERAPIST: How was that received in the session?

CLIENT: Well, the counselor was like, "Wow." You know, there was almost kind of like, "Wow. You've endured seven years without any physical, you know, emotional, physical or emotional in your..." He said, "Most marriages wouldn't have lasted that long."

THERAPIST: How did that feel for you to be validated like that?

CLIENT: It was just like, "Oh, thank you."

THERAPIST: Right.

CLIENT: Somebody thinks I'm not crazy.

THERAPIST: Well, you know, as I said, I told you, nobody... That is, your expectations for physical and emotional intimacy are so normal. How was your... How did Mary respond?

CLIENT: Well, that was like grabbing onto the third wheel. You know? It was... (PAUSE) And then, it was kind of like towards the last ten minutes of the session that we started talking a little bit more about, you know, the sexual abuse piece. And, you know, she got, you know, really defensive and I could sense that, you know, what was going on in her eyes was the same kind of thing that I've sensed every time that we've ever attempted to broach that topic. [00:07:07]

There's just like this, you know... There is a... I can't necessarily describe it but there is a physically different look in her face, you know, just terror.

THERAPIST: Sure.

CLIENT: And so, you know, she was really getting worked up into an anger and it's like, you know... And all of this stuff was coming out. It's like... And starting to unleash that stuff on me in terms of like, "I can't believe that you would turn out to be this guy and it's really just all about sex." And it just like... I'm like... So, part of me is like feeling like, "Well, at least the counselor is being able to hear all of this."

THERAPIST: Sure.

CLIENT: Earlier in the session, he had kind of alluded to the... He had brought up some scriptural passages.

THERAPIST: Okay. How was that? [00:07:57]

CLIENT: Well, for me, I'm like, "We don't need to go here."

THERAPIST: Yeah. How odd the way he didn't kind of check in regarding your religious affiliation.

CLIENT: He did. And like it's spelled out on the page, you know, it's like... And, you know, it's like, "Yeah, I'm kind of not going there with the Christian church anymore and, you know, I'm kind of into Taoism now." And it's like...

THERAPIST: Still kind of a misread.

CLIENT: But he's like, you know, and probably in Mary's favor read a little differently but, you know, he's coming from his own kind of evangelical bend or whatever. And I don't know exactly. But he felt comfortable saying that, you know, "Ephesians 4 or 5, you know, says a man shall leave his mother... This is the way God intended marriage to be." And I'm like...

THERAPIST: Oh boy. How was that?

CLIENT: Well, Mary... You know, Mary wasn't taking that too well at all.

THERAPIST: No.

CLIENT: So that was pretty much a train wreck. After that, she's like, "Yeah, no... We... That's not going to work anymore." So... [00:09:01]

THERAPIST: Wow. What are you... Hmm...

CLIENT: So we're done. I had to call and fire him. So...

THERAPIST: Okay. (LAUGHTER) Are you looking for somebody else?

CLIENT: Well, you know, she's grasping for some straw. I've got full court press going today. It's like, "Did you find another counselor? Did you find another counselor? Well, here's a name, so and so suggested. They went to counseling with this person."

THERAPIST: I asked Silas.

CLIENT: Huh?

THERAPIST: (inaudible at 00:09:25)

CLIENT: I did. And he had actually talked about some folks? No. I've heard of them before because I bought their damn book like twelve or fifteen years ago and sat on the therapist, Dan Lewis. It was the name that he gave.

THERAPIST: Okay.

CLIENT: But they're in Detroit and I remember that, you know, when Mary and I... You know, I suggested that we kind of work through that book. It's like, you know...

THERAPIST: Alright. [00:10:05]

CLIENT: You know, any of those books. It's like Getting the Love You Want... Yeah. Blah, blah, blah. It's like...

THERAPIST: Let me see if I can get some names for you.

CLIENT: Well, there's one person... I went ahead and made an appointment. It's somebody local down, you know, in the (inaudible) and it's just like... You know, but part of me is really rooted right now in this place.

THERAPIST: Sure.

CLIENT: And it's like... I will go. And it's on the fifteenth so it's like next Tuesday or something. I will go but, you know, the place where I'm at is still one of, "Hey. You know what? I'm feeling no pressure here at all to move anything along in any direction. And I still am in the same place I was three weeks ago."

THERAPIST: Right.

CLIENT: I've got nothing I'm bringing to this. So I'm like, you know, "You may be in crisis mode but..."

THERAPIST: But you're not.

CLIENT: "...I'm not."

THERAPIST: Right.

CLIENT: And I've got nothing that I'm bringing. "So, you know, your option is to take me where I'm at right now or..." [00:11:03]

THERAPIST: Which is where, Seamus? Where would you kind of describe where you are over this whole idea of marriage and...

CLIENT: You know, today and, again, it's just taken me such a long, maybe not all that long time but just, you know... I know that there is still a knot here in my stomach. And I think that knot in my stomach is just being able to say the words, you know, "I'm done."

THERAPIST: Okay.

CLIENT: You know? Because it's like... (PAUSE) I can't find anything else. There's nothing when I go looking. I can't find anything else.

THERAPIST: What would that be like for you when you finally say those words?

CLIENT: Well, I think that it's probably going to be like the feeling of relief that I've gotten from saying all the other words. It's just that I know that there's still that little knot down here.

THERAPIST: Sure.

CLIENT: And it's kind of like, "Okay, it's not going to go away until it comes out." You know? I get that. You know, so I really have just been sitting and I still want to sit. [00:12:09]

THERAPIST: Yeah, sure.

CLIENT: Because it's like, "Well, you really haven't given this very much time." And it's like, "Are you really putting your best effort into deciding whether or not this is how you're feeling?" And I'm thinking... I think yes. But I'm like, "You ought to know what you know."

THERAPIST: Sure. And I think that you've given it... This is a process of years. The end part of the process happened quickly. But this is a process that you've been working through for years within.

CLIENT: Unfortunately, yeah, not working on it with her.

THERAPIST: No. But there was no safety for you to do that and you weren't ready to do that.

CLIENT: No.

THERAPIST: But this... So when you say, "Have you given it enough time," well, you will be the determiner of that. But, you know, it doesn't take much time if you know and you haven't varied in that statement for the last three weeks. [00:13:05]

I think you need to give it whatever time that you need but that is your... If that is your truth, that's what it's going to be whether it's not or a year from now.

CLIENT: Yeah. And so part of me feels like, you know, stepping back into this place, you know, stepping off the path and stepping over into this place, it's like, "Hey, you know, I'm here. And, you know, other people can come and check me out if they want to and they can decide whether or not I'm Don Quixote tilting at windmills or if I'm just a guy who has made a decision in a different direction. I'll leave it up to you to decide. But I'm feeling like, you know, moving upstairs, I can sleep at night."

THERAPIST: Yeah.

CLIENT: It's like I've got my own safe space, you know, kind of... And I'm just like, you know, I recognize that, you know, coming home, it's like, if her car is there, it's like, "Damn."

THERAPIST: Sure. [00:14:11]

CLIENT: It's not like, "Hey, I'm happy to see you're home."

THERAPIST: Sure.

CLIENT: It's like...

THERAPIST: Because... "Damn" because what? What does that mean you have to do?

CLIENT: Well, it means that, you know, that I've got to share the house with the uncomfortable feelings and I don't really want to engage in any discussion. You know, I want to get some work done and I don't want to deal with this shit right now. That is where I'm at. So, you know, when she's not there, the garage is empty, I'm like, "Okay."

THERAPIST: Sure. Because you can breathe.

CLIENT: Yeah.

THERAPIST: Yeah. You know, the transformation even physically in you, your expressions when you talk about it, has been pretty phenomenal. I mean, I almost wish I had a camera so you could see this week where you are. Do you feel what that is? [00:15:05]

CLIENT: I think I can.

THERAPIST: Okay.

CLIENT: I think I can. You know, I know that there was a lot of, not necessarily in this session, but I know I was really identifying with like, "Who the hell thought it would be a good idea to put this really depressing statue of Paul Bunyan on the way in and out of this place."

THERAPIST: (LAUGHTER) Oh, the old Paul Bunyan. We've had jokes about that statue for years.

CLIENT: I'm like nothing says "Academic Success" like that statue.

THERAPIST: Yes.

CLIENT: I'm just like... I know that I've felt like that.

THERAPIST: Sure.

CLIENT: It's just like... You know, so heavy and guarded and protected. Now I'm like, yeah, you know what? I've got this image. I don't know if I shared this last week or not but I shared this

realization that the wounded child that I'm dealing with is not a five year old child. It's a two year old child. [00:15:59]

THERAPIST: Tell me about being two.

CLIENT: It's when I had my surgery.

THERAPIST: Tell me.

CLIENT: And I started to have some, you know, some of those memories came back. Not that I had... I remembered them as a kid and I... They've been a part of my life so it's not like this, you know, buried memory that came back. But I recognize that I had this... And, you know, what I don't have is a lot of information like why did they have to wait until I was two to do the surgery, kind of little corrective surgery that needed to be done. I am not sure about all of that. But I do remember, you know, being left alone overnight in the hospital. And I do remember being at my grandmother's house after the surgery was over. Now I don't know how long. But knowing that it was still new because I know that my mom had to put on some kind of salve or medication or something. And I was trying to tell my grandmother about it and my mom was scolding me for talking about it. "We don't talk about this." [00:17:11]

THERAPIST: We don't talk about your penis? We don't talk about... Ever.

CLIENT: Sex. I mean, that's just my family. We don't talk about this ever. So it's like, that's...

THERAPIST: That's...

CLIENT: That's going back to being two. That's not five. This is going back to being two. So all the sudden that image of this five year old that I have been parenting or taking care of, suddenly became two years old and it's like, "Oh, now this is a completely different feel."

THERAPIST: Sure. I mean, in some ways, I mean, it breaks my heart to have a two year old... And I can't imagine being two trying to describe what hurts you which is a very normal thing and two year olds have some words but not all words. And you learning at two, after being on earth two years, what we don't talk about, being shamed at two. [00:18:01]

CLIENT: Shamed and two and, "We don't talk about it," and not knowing... And then not having language for it and not knowing really much about that at all until I was like sixteen or seventeen years old and I'm just like...

THERAPIST: So you're left out in the cold to make sense of it on your own. But at two... I mean, how devastating is that?

CLIENT: Well, that's what I'm thinking. It's like, "Wow, this is even deeper than in a lot of ways..."

THERAPIST: Sure.

CLIENT: So it's like, now I have this image of this mother lioness. It's like I've got this two year old and I know that the two year old represents, you know my vulnerability.

THERAPIST: Sure.

CLIENT: And it's like, yeah, "You know what? This vulnerability only gets shared with a handful of really trusted select people and we ain't going to get hurt again."

THERAPIST: Sure.

CLIENT: It's like...

THERAPIST: Well, you're protecting the two year old that didn't get protected.

CLIENT: Yeah. And it's like... So now, when I think about that marriage relationship, it's like, "Oh yeah, we're not going there again." [00:18:59]

THERAPIST: Well, not only that but, I mean, unfortunately sometimes your vulnerability and your partner's vulnerability can help to heal one another. But yours and Mary's vulnerabilities were sort of similar and they just rubbed each other the wrong way. She couldn't... Of course, you're... I'm thinking that you're that guy that wants sex while, you know, that's a compliment. I mean, when the man stops wanting sex from his wife, that's a problem. That's the problem. The problem is not wanting sex with your wife. Right? And to be painted... So to take this image of you at two being told, "Something's wrong with you. We don't talk about that," at two, you know, which is what enabled you to stay so silent about it in your marriage for so long... Because, again, "We don't talk about this. Something's wrong with you that you want this," which is ridiculous. Right? So that's where we are.

CLIENT: Yeah. And then that's... Yeah. Right. Exactly. That's the, for better... You know, not that I really understand these words but that's my schema. [00:20:03]

THERAPIST: It's heartbreaking.

CLIENT: Yeah.

THERAPIST: And such a lie. I mean, such a lie.

CLIENT: (SIGH)

THERAPIST: You know, I mean, if you think about it, I mean, it's just so wrong. All of these... You know, the ideas that, you know... So, for example, you know, my two year old... I... She calls her vagina and vagina because I want her to know the proper words. And not to get too graphic,

but I'm changing her, she's like, "Touch." And I'm like, "Fine." You know, for her, an elbow and a vagina are the same thing. They don't know the difference. Right? But so at two, she knows touching whatever, her toes, her ear, her vagina is perfectly okay and yet, at two, you learned, "Don't touch it. Don't talk about it. Don't mention it and be ashamed about it."

CLIENT: Yeah. And don't talk to Grandma about it. So it must be bad.

THERAPIST: It must be really bad.

CLIENT: Yeah.

THERAPIST: How do you think that...

CLIENT: And "You're bad." That's, you know...

THERAPIST: Sure. [00:20:53]

(CROSSTALK)

THERAPIST: Because you felt all that shame and you remember it at two.

CLIENT: At two.

THERAPIST: Which just, like I said, it breaks my heart. What do you do with that?

CLIENT: So, yeah, you... You know, you know that you're bad. You know, you have all these messages. You think that deep down underneath all of this, you're unlovable and that once people get to know who you are, they'll never be able to love you. Right? So...

THERAPIST: Because you have this thing.

CLIENT: Yeah. This thing and I'm a bad person.

THERAPIST: And it's all about sex. And sex is bad. And then you have your wife saying...

CLIENT: Oh yeah. I mean, we grew up in the Christian family. Like sex is bad. Right?

THERAPIST: Right. And then you marry someone who was abused by, hurt by sex. Right? You know? It does make me wonder how you guys were able to have what I'm assuming and, correct me if I'm wrong, a health sex life enough to produce three children early on. [00:22:01]

CLIENT: Yeah. But it's like once that job was done, that's when I think that job was done, that's when I think everything started to fall apart.

THERAPIST: Sure. Because in the Christia faith, you have sex to produce children?

CLIENT: No. It wasn't that. It wasn't that. I think that... You know, whether it was... I don't think it was conscious. I think it was subconscious that it was like, "I need to submit to do this in order to get children."

THERAPIST: Right.

CLIENT: You know, she got as a message about sex from growing up as a kid, it's like, "It's just your duty. You just have to do it. You won't... You don't have to enjoy it. You know, it's not an enjoyable thing. You just do it."

THERAPIST: And what about you?

CLIENT: I never got any messages about sex.

THERAPIST: Well, you did, all negative. But...

CLIENT: Yeah.

THERAPIST: You know, was sex enjoyable with you with Mary early on?

CLIENT: I'm sure that it was.

THERAPIST: Okay.

CLIENT: It's difficult to remember that but I'm going to say that it must have been. You know? I'm sure that it was.

THERAPIST: And before Mary, sex with other women? [00:23:05]

CLIENT: June... We've had that story?

THERAPIST: The fiance. Yes.

CLIENT: So, you know, but... You know, it was the kind of thing that sex was not something that you just... You know, that was not the culture I grew up in.

THERAPIST: You don't just do it.

CLIENT: Yeah. You know, only if you're going to get married. So I'm having a feeling that probably being whatever, 19, 20 years old, it was like, you know, hormones are raging and so it's like, "I must be engaged at least, you know, if I'm going to..."

THERAPIST: Right.

CLIENT: Who knows what all that stuff was.

THERAPIST: What would it be like for you then? You know, let's just clear away any moral or ethical boundaries. Right? Just for the purposes of fantasy. What do you think it would be like for you to have sex with another woman? Right? I'm not recommending this. But just kind of... I think that your fantasy life has even taken a huge hit.

CLIENT: Yeah. [00:24:07]

THERAPIST: What... Because it was never okay to even fantasize. What would it be like for you to have sex with a sort of friendly, willing, attractive woman outside of a relationship? Can you imagine that?

CLIENT: Oh yeah.

THERAPIST: Yeah. What might that be like? What might you fantasize that that be like?

CLIENT: Well, it's interesting that you're bringing this up because it's another issue that I feel like I kind of need to talk about today. But, you know... (SIGH) (PAUSE) I'm not necessarily sure how, you know, graphic I want to get about that. But I know, you know, it's like I think that my fantasy life is pretty alive and well.

THERAPIST: Okay.

CLIENT: It's not like, you know... It's... I don't... You know, I don't necessarily want to compare it to other peoples' fantasy life...

THERAPIST: Sure. [00:24:57]

CLIENT: ...because I'm sure that... But I would say that it's pretty alive and well.

THERAPIST: And do you feel okay about that?

CLIENT: Oh yeah.

THERAPIST: Okay. Because you know that's a pretty healthy thing.

CLIENT: Oh yeah. And I'm okay with that. I have been told for a long period of time that it's not.

CLIENT: What about pornography?

CLIENT: I know that earlier on, you know, there were some... Like that was my introduction to sex when I was a kid.

THERAPIST: Sure.

CLIENT: So it's kind of like... You know, that was kind of like, you know, magazines that we, you know, we somehow found as a kid and that became like, you know, "Man this is like a gold mine." You know? So...

THERAPIST: What about now?

CLIENT: No. You know, I think earlier, and I don't know how many years ago, that I may have kind of gone back to that only because it's like, you know, going back to old habits or patterns or it's like... I don't know what to do with this. I think that I've always felt like that only makes the problem worse. [00:26:03]

THERAPIST: Tell me more about making the problem worse.

CLIENT: That it only accentuates the emptiness even that much more.

THERAPIST: But would it now in the current state of things?

CLIENT: (PAUSE) I'm kind of thinking yes just because it's like I'm not interested in...

THERAPIST: Are you sure?

CLIENT: I'm not interested in what I can't have.

THERAPIST: Okay.

CLIENT: I'm more interested in manifesting what I really want.

THERAPIST: Okay. Which is?

CLIENT: Intimacy.

THERAPIST: Okay.

CLIENT: I want, you know, a relationship that... And I think it's... And I think it's completely possible.

THERAPIST: Oh it's definitely possible.

CLIENT: And it's like... (PAUSE) So I'll just jump into saying that it's like, you know, recognizing that this explosion of feelings which came out as a lot of anger and rage initially and it's like kind of this uncontrollable ness... It's like I don't know what to do with all of this. And it's just like I'm just feeling all this. [00:27:11]

You know? It's kind of like, "Well, now I'm like, well shit. I have some potential friendships here that I'm like..."

THERAPIST: You really want to love again.

CLIENT: And it's like I've had, you know, more intimate conversations with a handful of people in the last month that I've had in the last twenty years of marriage. And I'm like... It's not... Not only is it possible. It's possible with a number of different people. It's just..

THERAPIST: Sure. The emotional intimacy piece.

CLIENT: And, you know, going down the road of fantasy, it's like... And it's like being in this place of being more comfortable with myself and more confident with myself, it's like... You know, yeah. You know, it's all possible. [00:28:07]

And it's like...

THERAPIST: And have a lot more hope than you had.

CLIENT: And I know that it's like I'm looking at, you know, 27 years of this against a handful, a handful of emotional conversations or intimate conversations... Okay, you know, I don't want to get too critical or editorialize these people but it's like emotional level, a gut level feeling. It's like... This isn't even... There isn't even...

THERAPIST: Night and day there.

CLIENT: There's not even a comparison here.

THERAPIST: Sure.

CLIENT: You know, the only reason I would stay in this right now is some kind of convoluted sense of obligation.

THERAPIST: Which is waning by the minute.

CLIENT: You know, I got the question on the way home. It's like...

THERAPIST: What was the question? [00:28:57]

CLIENT: "So where do you stand on this marriage vows? You know, the marriage commitment?" And I was just like... I was pretty, you know, pretty much in the safe space. And I'm like, "Yeah. You know what? I really don't have an answer for you right now. I'll get back to you when I feel like I can give you an answer." And I'm like... So I've been sitting with that and it's like... (PAUSE) Whatever it might have been 27 years ago...

THERAPIST: But, you know, it's interesting because you're not... It's a fair question because when you first came in here a couple of months ago, the first thing that came out of your mouth was, "I took vows. I am obligated." Right? So but that for you has changed.

CLIENT: Yeah.

THERAPIST: Right? Yes, you took vows.

CLIENT: Yeah.

THERAPIST: You know, sure. But a lot has changed for you and the kind of no longer willing to be miserable and the hope of something else for you, whatever that something else may look like... You know, and the no longer sort of willing to be dishonest about what your needs are and finally recognizing that your needs are normal and healthy needs. [00:30:17]

Right? Like these are, you know, normal healthy needs that married couples expect from one another.

CLIENT: You know? And it's like I'm looking at whatever, you know, who knows... Maybe we get one more day on the planet. But, you know, if I'm looking at statistics, you know, I... You know, there's a statistical chance that I get a few more years on the planet. And I'm like, "I don't want to spend those in that or anything that looks remotely close to that." And I would rather spend my time building a friendship and a deep emotional friendship and a deep emotional friendship that can include physical intimacy.

THERAPIST: Absolutely. [00:31:09]

CLIENT: Why wouldn't you want that?

THERAPIST: Well, right. Because initially that's what you wanted in your marriage. How are you dealing with the emotional component to Mary's hurt and anger? Last week that was a struggle for you.

CLIENT: Somehow, being in my safe place, it's like, "You know what? Your crisis is not my crisis." You know? And I've been getting more texts than ever and I've gotten, you know, a handful of calls from some of the church choir members that are checking in on me. It's like...

THERAPIST: Checking in on you because they know?

CLIENT: Yeah. They know something's up.

THERAPIST: And what is the nature of the...

CLIENT: Because I'm not there. Something's up.

THERAPIST: (LAUGHTER) Did you quit the choir?

CLIENT: Yeah. You know, probably not well. [00:32:01]

THERAPIST: I'm sorry. I have to laugh because when we talked about quitting the choir before, you're like, "No way." And you quit. You didn't even... "You quit?" "Oh yeah. I'm done with that." You know?

CLIENT: I know.

THERAPIST: That's pretty amazing. Damn Seamus.

CLIENT: No. It's like if I'm going to be in my truth, the only...

THERAPIST: You just beat the hell out of that truth. "Oh no. I've been done with that for years." (LAUGHTER) So how did you quit and when did you quit?

CLIENT: I just didn't go back. Well, I mean, it was... It was the marriage counseling thing. It was... I think I had a legitimate excuse the one week. But it was like coming back down and just being yelled at for an hour on the way back down. And it was like that's church choir night. And it's like, "Yeah. I'm pretty much not going there." (LAUGHTER)

THERAPIST: Sure.

CLIENT: I went home and it's like, "Yeah. I'm pretty much done. I'm pretty much done."

THERAPIST: Yeah. You're kind of pretty much are. [00:33:03]

CLIENT: Yeah. And it's like... But I knew that I was going to be done because I had warned...

THERAPIST: Sure. But do you understand that you've changed a lifetime pattern here in a matter of a month?

CLIENT: I know.

THERAPIST: You know, and I mean, and it's... And I recognize the difficult painful part of that. But I'm also very proud of you and you should be proud of yourself because you're just not

going the disingenuous thing anymore. You're just not going it. You know, the choir was never for you. You were willing to do it.

CLIENT: At some point it was but it's not anymore.

THERAPIST: Sure.

CLIENT: It hasn't been for a long time.

THERAPIST: You know, it's like going to the dinner, the faculty dinner with your wife. It's a facade.

CLIENT: I should have never done it.

THERAPIST: Well, I get why you did it and now that's why you're not willing to... Because it's not the truth.

CLIENT: Yeah. And the message I got on that was, "Well, you just go and do those things because you're my husband." [00:33:59]

THERAPIST: Well, but you did.

CLIENT: And I did.

THERAPIST: Right. You did for 27 years. But now it's just like nails on a chalkboard. It's... You know, you do just do those things as part of a marriage.

CLIENT: Right, right, right.

THERAPIST: But what we're looking at is not really a marriage for you anymore.

CLIENT: Nope.

THERAPIST: Right. So the rules... Those same rules for what you just do don't apply in the same way.

CLIENT: Yeah. It's kind of like... Yeah. I stepped off the stage. You know, I know it. I get it. It's like, "You know what? The pretense is done here. I'm done. You know, you can go on with this game if you want to. I'm just not in the play anymore. I'm over here. I'm sitting here." You know, and it's like, "Make all the demands you want. But I'm right here. And that's it." You know, and I'm like... (SIGH) So I know that that's got to sound really... I know that there's a big part of me that just like, "Wow. You know..."

THERAPIST: Wow what?

CLIENT: I... (PAUSE) I know that that probably looks really, really awful on the outside to some people. You know? And I know that it's got to be completely and utterly confusing to Mary who doesn't get it at all. [00:35:17]

You know, it's just like, you know, something seriously is wrong and I get that. It's like, "Yeah, you just changed everything. You just turned it all on its head in the matter of about a month and it's like..." (PAUSE) So? But, you know, to kind of get back to that question of how's that making you feel...

THERAPIST: Yeah.

CLIENT: You know, I was all knotted up with anxiety last week about that issue. I'm like not right now.

THERAPIST: What made the shift for you?

CLIENT: I think a lot of it has to do with just stepping out of it, just recognizing, "Hey, I don't have to feel pressured to feel like I've got to make a decision right now."

THERAPIST: Absolutely not. [00:36:01]

CLIENT: And so I'm just stepping out. I'm just stepping out of the game. You know, it's like, "Whatever." So we'll see where it goes. You know? (PAUSE) So there was, you know... In my word, in my interpretation, you know... (PAUSE) You know, we were driving down to Taylorville. She's like, "Well..." I give her the spiel about being really guarded and it's like, "Yeah, there's not a hell of a lot of trust here. So I'm not expecting..." And I said, "You know, I feel like anything that is going to touch the kind of emotional hot button issues I think ought to be done in the presence of a counselor as opposed to us like going there without, you know, some help." [00:36:53]

So, you know, I was like... I said my peace and said, you know, where I was going to go and what I was going to do and not do. And then she said, "Well, okay. But, you know, I just need you to know that, you know, the conversation or our time in counseling up there got me thinking that, you know, that maybe I had been wrong, you know, and I really, you know, feel like maybe I need to deal with this issue." And I'm like, you know, just hiding... Not hiding but just being in this place of being really guarded and I'm like, "Okay. Whatever. Good luck with that." So I know that there's just not... I just now that there's still a lot of hurt there that I just still can't even be in that place of compassion.

THERAPIST: Sure.

CLIENT: If she's being serious about that, then it's like, you know, "Could you show a little compassion? Could you..." But I'm like, "Whatever."

THERAPIST: Well, you don't trust, you know... I mean, it sounds like again a desperate measure to hold onto things. It might be different if she actually does seek her own counseling and you see that.

CLIENT: Yeah. And, you know, she send me a text that was like, "I left a message at a therapist's office." So it's like, "Whatever. Whatever." [00:38:09]

It's like... (LAUGHTER) You know... I guess, you know, that people can drastically change obviously. You know, I've drastically... Maybe. I don't know if I've drastically changed or if I'm just...

THERAPIST: I just think that we brought out what was in...

CLIENT: I finally just got... I just found a voice.

THERAPIST: Your own voice.

CLIENT: Yeah. And when I was finally able to speak, you know, the word that came out was, "Enough."

THERAPIST: And it was pretty clear.

CLIENT: You know, and... So, for her, it's like, "Well, great. If you can go get some counseling and you can change all that up... Again, where I'm at today is even if you changed it all up, I've got lots of years of shit that I'm sitting here with. It's like I can forgive but, you know, the way we move forward in relationships with forgiveness, it's like... You kind of remember, you know, what the hell happened so that you don't get hurt again." [00:39:15]

It's not that you can't forgive and move on but like we can move being friends or we can move on being, you know, parents, whatnot and we've figured out how to do that pretty well over the years. But it's like we never really figured out how to be intimate marriage partners. And I'd like to figure that out with somebody that has the capacity to do that. You know?

THERAPIST: What's that like to say?

CLIENT: For me?

THERAPIST: Yeah.

CLIENT: (SIGH) It's great to be able to say it. I'm not sure I'm yet at a place to be able to say it to her.

THERAPIST: Sure.

CLIENT: I feel like, again, it's probably what this is right here. It's like... [00:40:07]

And I suppose that I'm also giving myself time. It's like, "Okay, when the time is right, you'll know it. It'll be right." And it doesn't have to happen tomorrow. It's like, "Give yourself a break, dude."

THERAPIST: It doesn't have to happen tomorrow, six months from now, or a year from now. It's going to happen when you're ready for it to happen.

CLIENT: Yeah. But, I mean... (SIGH) I had a great little conversation with my little sister last night.

THERAPIST: Because there are four boys and one girl. Okay.

CLIENT: She's eleven years younger than I am and she just went through a divorce. She was married for 20 years to a guy who was kind of a jerk. And I was really sad when they married.

THERAPIST: You were sad when they got married because you knew he was a jerk?

CLIENT: Yeah.

THERAPIST: Can you tell me a little bit about that? That really touches you.

CLIENT: Well, I had really been working on trying to build her self-esteem to get her go to college and get her out of, help her climb over the walls of the little town and get out of that. [00:41:15]

But she ended up, you know, chasing after somebody who would bolster up her self-esteem, looking desperately for somebody to bolster her self-esteem. She found this guy who ended up being the jerk I thought he was going to be. So finally, she found her voice and had enough and... Yeah. They ended up getting a divorce. But, at any rate, she had known. I had gone on and had this conversation with my folks and they live across the backyard from each other. So I knew that my mom and she are really close. I knew they would talk. I didn't have a chance to talk to my little sister. So last night just happened to be the night. We talked on the phone for about a half an hour. Yeah. It was amazing that, you know, she was just in the same place and just confirming a lot of those things I was feeling for myself. [00:42:05]

It's like, "Yeah. What the hell? Step out. You know? You take it at your own speed. You know?" So it's like, "You know, you found your voice and..." Maybe in a little bit different language. You know, we're not... She's not saying, you know, an authentic life. She's like, "You've just got to be real." (LAUGHTER)

THERAPIST: But, you know, what's interesting is that you're not only getting pretty consistent outside validation but your siblings, from everything you've said, are going through, have been through something similar, right, with self-esteem issues in their own lives, kind of getting to this

place where you're with somebody for 20 plus years and then looking at it again. I mean, that's pretty, if you look at it from a family systems perspective, that's pretty significant stuff. [00:42:55]

CLIENT: Yeah, yeah, yeah.

THERAPIST: I mean, you know, so it's not just you who got the message. You were just the first one because you were the first born. But it went all the way through the family line.

CLIENT: Oh yeah. There's plenty of those issues there. We'd make an interesting study.

THERAPIST: But how painful for you all because it didn't bring the siblings closer together.

CLIENT: Interestingly enough though, I got a text yesterday from my brother. Now my three younger brothers have always been kind of tight and I've kind of been the odd man out. But I got invited to the brothers weekend.

THERAPIST: The brothers weekend. Do tell.

CLIENT: It's just that the three of them have, you know, gotten together and had a weekend or an evening and just kind of hung out.

THERAPIST: And are they all down state?

CLIENT: Well, they're over by Dunlap.

THERAPIST: Okay.

CLIENT: And I've never gotten an official invite to come out to that.

THERAPIST: Okay.

CLIENT: But I think that probably through my talking with my brother Bill and recognizing, shit, we're all in the same boat together... I'm guess that's why I got the invite. [00:44:07]

THERAPIST: How do you feel about the invite?

CLIENT: I'm thinking I've got to go.

THERAPIST: No. Do you want to go?

CLIENT: Oh yeah.

THERAPIST: Oh good.

CLIENT: It's like I want to check in on these guys. It's like we've got war stories to tell.

THERAPIST: You do.

CLIENT: And it's like... You know, my brother Bill's been doing marriage counseling for about a year and, you know, it kind of looks like they might salvage a relationship out of that. I don't know about my other two brothers. But I know where I'm feeling I'm at right now. So it's like...

THERAPIST: When is the brother's weaned?

CLIENT: This coming Saturday.

THERAPIST: Okay. So you're going to go down to Dunlap?

CLIENT: I think so. I think that's when it is. I'll have to check.

THERAPIST: Okay.

CLIENT: But...

THERAPIST: And do you guys go camping? What do you do?

CLIENT: No, I'm sure we'll just hang at my brother's house. He's got a bar downstairs. I'll sure we'll just drink too much and, for me, that's like one beer. [00:44:59]

THERAPIST: (LAUGHTER) Enjoy yourself.

CLIENT: I'm looking forward to that.

THERAPIST: That's great.

CLIENT: Getting out of... And it's like I recognize that like her work schedule, her church schedule, her life has been on the weekends which has kept me, you know... Because I've been the good puppy that's come along to church all the time. It's like I've denied myself relationships with my family.

THERAPIST: Why do you think you chose to quote, unquote "be the good puppy and go along?"

CLIENT: (SIGH) I don't know.

THERAPIST: Because she didn't keep you from them. You chose to go along with what was said.

CLIENT: Yeah. But you know what? There was a pretty strong message.

THERAPIST: Sure there was. Yes there absolutely was. But what made you choose to go along?

CLIENT: Well, because I wasn't going to make her unhappy.

THERAPIST: Because?

CLIENT: Not being there was going to make her...

THERAPIST: No. What is the consequence to making Mary unhappy?

CLIENT: Oh, that, you know, I don't exist. You know, that's not exactly the right word but it's like, "You won't like me anymore. You know, I need you to like me." [00:46:11]

And it's like... I think it like kind of became this surrogate in a way. It's like if the physical relationship's going to hell, the only thing I've got left for you to like me is to do this church thing.

THERAPIST: But even that was empty for you.

CLIENT: Eventually...

THERAPIST: Yeah. Because even the liking was not enough because that's the kiss at the door, goodbye, a pat on the head. I mean, the liking is not enough.

CLIENT: So... (SIGH) Yeah. There's all of that. You know, there's... So, yeah, any opportunity I can get... And eventually, it became like, "I'm just not going to church anymore. The choir's not happening. I'm just not going to church." [00:47:03]

You know, so slowly, you know, I've been eroding that over time. But, yeah, no. It's...

THERAPIST: What was it like to attend church when you don't practice Christianity anymore?

CLIENT: It was just mostly sitting there are trying to be in that place of mindfulness. It's like, "Okay. I'll just turn this into a mindfulness activity." And it's like, "Okay. Health insurance. Let me just focus on the fact that I'm getting my health insurance through, you know, my wife working at this place." It's just like... (SIGH)

THERAPIST: But you did that week after week. Yeah.

CLIENT: And sometimes multiple times a week.

THERAPIST: Yeah. For something that is not within your belief system anymore.

CLIENT: No. And, you know, not that I'm not a spiritual person.

THERAPIST: I think you're a very spiritual person.

CLIENT: But...

THERAPIST: Just not a practice of Christianity. [00:48:03]

CLIENT: Right. So yeah...

THERAPIST: You know, what I find... Something not now but eventually we have to look at. The contract was so set for so long. And there are parts that you agreed to that, you know, I think in marriage we all agree to parts of the contract we don't like. But that you don't like and sort of even went against your own belief system about things. Right? Which is why you have all of the emotion around this now where you're like, "I'm done," because for years... But both of you agreed to that contract. Right? For better or for worse you sort of agreed to the contract.

CLIENT: I mean, that was kind of an implied contract because we didn't go by the standard wording. We actually wrote our own vows and I'm like, "I don't even remember what those things were anymore." And it's like... So it's kind of like to throw around the standard language of the marriage contract, it's like, we didn't abide by the standard language when we got married. So what is it that, you know... [00:49:09]

It's like... Well, it's just kind of this... You know, this implied, understood that marriage is forever and you're stuck in it, you're stuck with me forever. That's just the implied.

THERAPIST: You know, I have a good friend of mine who is probably in his later fifties, a work colleague and a friend who used to be a Catholic priest.

CLIENT: Uh oh.

THERAPIST: Left that, became a Buddhist, married a Jewish woman.

CLIENT: Okay.

THERAPIST: And I asked him, you know, "What happened there?" And he just said, "It just wasn't me anymore. I just..." Of course, he talked a little bit about hypocrisy and those things. And he said, "I just couldn't do it anymore. I felt like a fraud. So I left, you know, and..." He's got this really long ponytail and, you know, he's like, "I couldn't do it anymore." [00:50:03]

It sort of strikes a bit similar here that you just can't do it anymore. When I say the contract, I sort of thing most married couples have an implied contract that you come to about the agreement that's most often not discussed about things, the way things are going to be, the way we're going to do things. And sometimes you go along to get along because it makes life easier.

But you did it in ways that compromised yourself so deeply that now you just can't abide by it anymore, right, even attending on a regular multi week basis church services for a faith that you no longer subscribe to.

CLIENT: Yeah. And I would say when I subscribed early on, I was on board.

THERAPIST: Right. Sure. But there was no conversation about recognizing, you know... I mean, there were some jabs here and there. But your belief system had changed.

CLIENT: Well, I mean, there were attempts at that and attempts to try. But it's like, "Nope." We're not going there. We don't discuss that. [00:51:11]

THERAPIST: Because you've been told multiple times in your life about what we don't discuss. "But as long as you attend church, I'm going to ignore this Taoism thing and you go... As long as we're married and that's what it looks like..." Right? I mean, the themes are pretty incredible.

CLIENT: It's all about the facade of it all.

THERAPIST: Right.

CLIENT: You know, it's about maintaining this grand illusion.

THERAPIST: Sure.

CLIENT: And it's like, "Yeah. I'm done with that."

THERAPIST: Right. But the message is that you've been told for your whole life about what we don't talk about don't apply anymore."

CLIENT: No really. And... (PAUSE) Yeah. So there's a part of me that's like, "Yeah. Well, you know what? I understand my complicity in all of this and I know that the way that I reacted to things... But that doesn't change the fact that I know what I know and I want what I want and I'm done with what I'm done with." [00:52:09]

THERAPIST: When you look back on this, do you think you will blame yourself or... "Why did I stay so long" "Why did I do these things?"

CLIENT: No.

THERAPIST: Good. Tell me why not. I like that.

CLIENT: No. I feel like, you know, as much as I may not necessarily feel this now, I think cognitively I describe too... You know, it's like you did the best you could do with what you had at the time and things... You know, you were ready when you were ready. It's everything that I

would tell everybody else. So I think that it's starting to sink in. I think I can be there with it and not beat myself up.

THERAPIST: I see that. And that wouldn't have been what you would have said month ago. That's pretty incredible.

CLIENT: So it's like... You know? I've got three great kids. I've got three really good kids out of this. There's plenty of other positives that I can mine through this ash heap and find. I may not be able to see them today. You know? But all of that brought me to where I'm at today. And it's like I'm kind of liking where I'm at today. [00:53:17]

THERAPIST: I see that.

CLIENT: Even though it may suck a lot.

THERAPIST: Right. But you wear it well, you know, and considering how difficult it was for you to sort of put on and keep on in the first place. Don't take it off again.

CLIENT: No. I ain't taking it off. So, I know that we have almost no time left. But it's like one of the other issues that I know that I'm kind of dealing with is the, this growing sense of like, "Well, shit. There are other relationships that are possible." And it's like now I'm feeling like am I in the same place of not knowing how to deal with anger and rage, you know... I don't know. Appropriately? I don't even know if those are the right words, you know, because I feel like in some ways, being able to deal with these heightened emotions is kind of like new territory for me. [00:54:15]

THERAPIST: So let me make sure I understand. You're obviously forming deeper more significant relationships with classmates talking about personal things, friendships are growing, you know, and maybe even looking to the future and romantic relationships. You're thinking, "Can I handle all of these emotions that have come up? Can I handle my own anger, my own pain?"

CLIENT: Can I handle... I mean, it's like... I recognize it as like I'm trying to stay in some place of authenticity. It's like I'm holding anger over here, I'm holding this relationship shit that I don't know what to do with. I'm holding... Wow, really close friendship. It's like, "Well, the authentic part of me doesn't want to let that go." It's like, "Well, why the hell should I?" [00:55:01]

THERAPIST: Are you having romantic feelings for one of these individual friendships?

CLIENT: Yeah. I'm afraid so.

THERAPIST: Yeah. Okay. That's what it's sounding like. And so your mind is kind of turning towards...

CLIENT: So it's like... Well, are you even trying in this other relationship anymore? Were you even trying in the first place?

THERAPIST: Well, for 27 years.

CLIENT: Yeah. It's just like... So there's that tension or that conflict now that I'm like, "Oh fuck."
(LAUGHTER)

THERAPIST: Well, you know, it's a different place to be. You know, it's kind of a bit more excited place to be in some ways. I was going to ask about that. I was like, "Oh, it's sounding like this to me." You know, that, in some ways, will work itself out. Right? So you're in the tough place of kind of looking at what you think you might want over here and still kind of embroiled in this relationship over here. [00:56:01]

CLIENT: Which is why I'm like in the middle now.

THERAPIST: Yeah. But some of this will... You know, some of this is going to take time to resolve itself. Are you afraid, you know, concerned that you might kind of act on this sexually or...

CLIENT: No.

THERAPIST: No. Just become more attached emotionally?

CLIENT: Yeah.

THERAPIST: Yeah. Okay.

CLIENT: You know, it's like I know that I've been the guy in the desert for so long that it's like somebody offers me a drink of water...

THERAPIST: Sure. Or a pitcher.

CLIENT: I'm like... You know, it's like I can sit here and have an intimate conversation.

THERAPIST: And be affirmed as well. Yeah. Well, you know, can we sort of look at that next week?

CLIENT: Sure.

THERAPIST: Yeah.

CLIENT: I'm sure that it will still be there next week.

THERAPIST: I think so. You know...

CLIENT: But I'm just... In the meantime, it's just like recognizing that that's part of what I'm sitting in too.

THERAPIST: Yes. And in the meantime kind of recognizing that this is sort of healthy part of you has kind of been unleashed. And now you're kind of hungry to go looking for the intimacy that you have been denied for so long. And so, you know, all of these are really healthy things. They just are. Unfortunately, you're going to sit in that too. But it's exciting in some ways to kind of see that there's another world that could be opened to you. [00:57:53]

CLIENT: Yeah.

THERAPIST: And that you refuse to go back to the box of not being in touch with your emotions.

CLIENT: Right.

THERAPIST: So whatever they are...

CLIENT: I have been sitting with that too. It's like, "Well, dude. You're not going back there either. So the bottom line is if you're going to shut off that emotion, then you're just going back into the same patterns you were dealing with before." So I know that I don't want to go there either. So...

THERAPIST: Okay. So we'll look at that. I want to hear more about that. (LAUGHTER)

CLIENT: Oh brother.

THERAPIST: Are you involved with all the (inaudible) stuff up there?

CLIENT: Well, not really outside of just being impacted by it.

THERAPIST: Yes. Where are you with the whole doctorate thing?

CLIENT: I'm going to turn in the application.

THERAPIST: Okay.

CLIENT: I'll go run screaming off the cliff and see what happens.

THERAPIST: I think that's a great idea. (LAUGHTER) Since you're jumping off so many cliffs these days.

CLIENT: (LAUGHTER)

THERAPIST: See you later. Bye bye.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: How are you?

CLIENT: I don't know.

THERAPIST: What's happening?

CLIENT: Let's see, most immediate, marriage counselor number two this morning at eight o'clock.

THERAPIST: Eight o'clock in the morning?

CLIENT: Yeah.

THERAPIST: Ooph. How was that?

CLIENT: Well, I was able to be solidly in my truth.

THERAPIST: Okay.

CLIENT: Which, when you're posed the hard questions...

THERAPIST: Which hard questions were you posed?

CLIENT: So do you love your wife?

THERAPIST: Oh, wow, right off the bat.

CLIENT: No, not I mean at the end of the session.

THERAPIST: Okay.

CLIENT: And I think that that was probably the most drastic. I was prepared, not that I had rehearsed it, but...

THERAPIST: Sure.

CLIENT: ...it was like okay, what's going on here. And it's like I really, probably, subconsciously, spent the weekend doing that work. [00:01:07]

THERAPIST: Okay.

CLIENT: I had an opportunity I got a text from my brother last week and he says hey and I don't know if I talked about this dynamic. When I grew up it was me and my three younger brothers.

THERAPIST: That's right. And they invited you to brothers' weekend, right? Yes.

CLIENT: So I went and it was great.

THERAPIST: Great.

CLIENT: We sat out in an open air beer garden and got there around, I don't know, 5:30, 6:00, and just sat there drinking cheap beer til 11:00, 11:30. It was...

THERAPIST: Nice.

CLIENT: It was a great time. I've had more beer in the last month than I've had in eight years. But it was great therapy, belly laughs, and not too many tears but some pretty solid sharing. [00:02:03] It's like I can't believe I'm having this kind of level of conversation with these guys. Turns out that three of the four of us have married adult survivors.

THERAPIST: Oh my goodness, you're kidding me. Whoa. What do you make of that?

CLIENT: We're fucked up. We're all fucked up.

THERAPIST: What sort of how did you guys come to that conclusion? I mean that's pretty meaningful data. And what do you make of it?

CLIENT: That I think it's within our family system to have grown up, I think, with a really kind of controlling mother whose love was very conditional. That's me and my take on it. [00:03:05] So I know that women who are in those kind of what little I know, and I haven't spent a lot of time studying this, but it's like control is a really important thing for survivors. And it's like so if my if the way I operate, and the way I did operate, is my self-esteem is wrapped around pleasing somebody who's really controlling and conditional in their love. And I'm like I think we all learned how to dance to that tune. And the one brother who didn't marry, he's got a voice. He's confident.

THERAPIST: In his relationship or just in general?

CLIENT: In general. They had problems in their relationship, probably about ten years ago, and he didn't stand for it then. [00:04:04] Threw the card on the table and it's like we either fix this or

I'm the fuck out of there. It's like he didn't my youngest brother is married somebody who's bipolar and a survivor, and her take on how she deals with her sexuality is 180 degrees to my wife. And I also know that that's a response too.

THERAPIST: So she wants sex...

CLIENT: All the time.

THERAPIST: All the time, yeah, which could be the mania component as well as...

CLIENT: It could be both of those things. But he's in as loveless a relationship as I am.

THERAPIST: Wow, even though the physical component is there.

CLIENT: Oh, and he says, when I've shared it with the handful of people that I've shared it with, it's like everybody says well what's wrong with that. I'm like no. I mean when you feel like your wife is berating you and yelling at you all night long and then expects you to have sex on top of that, no. [00:05:06] It's like no.

THERAPIST: So how, because there's an interesting dynamic that's happened as you have found your voice in saying I'm not putting up with this anymore, even starting a few months ago, it's actually brought you closer to your family, your siblings especially, because I remember you were talking about talking to your brother's wife, and you had some conversations with your brothers, and lo and behold you discovered these themes; this weekend was a solidification of those themes. How do you think you were able to go from a place of being kind of not connected to your brothers and your family to within a few months being sort of having an affinity with them of similarity of experiences?

CLIENT: How do I think that's possible?

THERAPIST: Because that's quick.

CLIENT: It is quick. I think that the initial thing that comes to mind, and I'm just throwing it off the top of my head, so I don't know, is that I think that there was an element of control about our relationship, and it's like whether it was her job or the amount of exposure that I got to my family, there was a sense of and whether that was even spoken or not, but it's like...

THERAPIST: You mean your wife or your mother? [00:06:23]

CLIENT: Wife.

THERAPIST: Okay.

CLIENT: And because she worked on the weekends all the time there's this expectation that well, you're going to be here for that. It's like shit with my family happens on the weekends because everybody else works during the week. So just over time not connecting with these people you just kind of slowly drift out of people's lives. So I don't know. I don't know if it's that, yeah, I don't know. That's just the first thing that comes to mind. [00:07:00]

THERAPIST: What else did you discover in the counsel of brothers?

CLIENT: That I felt like in telling my story, in kind of filling in some of the bits and pieces of where I was at, I think that I've come, over the week, to kind of recognize that the revelation of sexual abuse and her history and then finding about it finding out about it in my marriage 12 years in, was a really traumatic moment for me.

THERAPIST: Explain.

CLIENT: That I that it was this freeze frame moment that I'm like didn't know what to do with. Did I tell you the story about the FBI coming and raiding my business and...

THERAPIST: No.

CLIENT: Okay. A couple of years ago we had a boarder living in the house, a friend of ours living in the house. And a young kid, just got out of violin making school. And I was getting him set up to so one morning I'm sitting there typing away at my computer, and all of a sudden I've got three armed deputies from the county holding guns at my head telling me to back away from my computer. [00:08:14] And within 30 seconds me and my employee are handcuffed and standing on the porch of my business and I'm like...

THERAPIST: Goodness!

CLIENT: We're laughing at each other, it's like well this is not your typical morning. And it then it became clear within a few minutes they weren't after us, that they were breaking the door in on my house to go get Eddie who was upstairs and long story, he was involved in child porn stuff.

THERAPIST: And of course you had no idea.

CLIENT: No. And no repercussions came of that. And ultimately but the point being I had absolutely no idea what to do with being handcuffed and having armed deputies holding a gun to my head. And when they were doing that there wasn't terror, there wasn't fear. [00:09:03] It was I've got nothing for this except is this a joke?

THERAPIST: Right, kind of surreal a bit?

CLIENT: It was kind of surreal, and I was kind of laughing about it. It was like okay, I'll go outside, whatever. And I'm like so it was this stupid response to some you could have a number

of different responses but mine was kind of disbelief and okay. So I think, initially, that initial revelation of sexual abuse, it was like okay.

THERAPIST: So when you got married there was you didn't know anything. And can you tell me a little bit because we've talked about the fact that you found out, but we never really talked about how and what happened.

CLIENT: Really. Really? Are you sure?

THERAPIST: I don't think how you found out. I knew about the priest but how she ended up sharing this with you. [00:10:01]

CLIENT: Well, I was rubbing her shoulders one night, watching television, and this report comes on the about the sex abuse scandal, a priest sex abuse scandal. And she said well I need you to stop rubbing my shoulders now. And it just kind of was funky, and it was like what's this all about. And it kind of remained funky for a few days, and I think we finally ended up going out to eat. I remember the restaurant, the booth, everything about that night. And she's telling me these stories and she's telling me about the priest and shared some stuff about her brother when she was a kid and hints at potentially this thing that happened between she and a female coach when she was maybe, I don't know, junior high age. I'm not 100% sure. So I mean it's like stuff happened and...

THERAPIST: Okay, and she tells you this at dinner.

CLIENT: Yup. But it doesn't really click in, or maybe it clicks in and I'm just so dumb founded it's like it's not just a priest. [00:11:07] It's the priest that she invited special to come in and marry us.

THERAPIST: That I knew, yes.

CLIENT: So I'm like I think that that piece was so kind of jarring that I've I just kind of encapsulated that, I mean that kind of trauma moment or something. It's like okay, well I can't feel any of that because she's the one with dealing that's with the trauma here. You know what I mean? So...

THERAPIST: I do. What happened so she tells you all this and you're kind of numb to it except for the loudest piece of data is the fact that you invited your abuser to marry us, of course. Then how do things proceed after that?

CLIENT: She went to counseling for two or three sessions, and I got some books and was starting to read up a little bit on sexual abuse. [00:12:05] And then it became apparent that she wasn't going to go back to counseling anymore.

THERAPIST: And so you guys didn't talk about it after that.

CLIENT: We didn't we talked a little bit about it but it was like the message that eventually became clear is I don't have a problem, it's you that has the problem for wanting to have sex all the time.

THERAPIST: So after she told you you'd been having sex up to that point?

CLIENT: Yeah.

THERAPIST: Or it was getting...

CLIENT: But here's the deal. We had three kids and were taking care of three old people.

THERAPIST: Right, I remember.

CLIENT: So we're juggling a lot of balls and it's like I don't really remember what that was like except that it was a hell of a lot of work, and was there time in there for us. The last of them had died, and this is probably, I don't know, a year or two later, I don't know, this stuff sort of comes to light. So it's like we're on the kind of the backside of that. [00:13:02] And....

THERAPIST: And it was after she told you that...

CLIENT: Then we're in the slow death spiral of sexual intimacy, eventually getting to the place where it's like two or three times a year and we have to go out of town and we have to get drunk. And it's like and clearly it starts to move farther and farther away from intimacy and more and more to just the sex act. And it gets really ugly and I'm feeling like I'm some kind of a sexual predator and...

THERAPIST: But you didn't feel like that before you knew. You weren't feeling like you were...

CLIENT: No, but there was always this sense of I'm having that image of Pepe Le Pew. Do you remember that cartoon?

THERAPIST: Oh yeah.

CLIENT: And I'm like chasing this cat with the white stripe who keeps finding a way to elude me. [00:14:06] That always felt like that was the nature of it's like she always had a calendar in hand, and it was always full, and it was...

THERAPIST: It strikes me, and I work a lot with individuals who have been sexually abused a lot and do a lot of trauma work, and it strikes me that because you were not able to talk about it, in some ways the messages that you were given were don't talk about it; let it go. That's where the hold on the marriage was. It's almost as if things stopped from that point or got stuck there, and because she didn't want to talk about it and you couldn't access it, the processing of what

should have happened, or even your understanding of how to be supportive or to work together, died right there.

CLIENT: And I had an important realization over the weekend, a memory, wrapped around my operation as a kid. [00:15:08] So I've got some freeze frame moments. Okay, so this was obviously a traumatic experience because I'm two years old and I have these clear visual memories of being left alone in a hospital after this surgery. So that was traumatic enough, but then I remember, it's not like an unclaimed memory, I remember having it before, or a repressed memory, it's just that I haven't thought about it in a long time. But I remember standing at my grandmother's dining room table. She's sitting at the end of the table and I'm thinking that I must've been two-ish after this surgery, could be three-ish. I'm not sure how old I was exactly, but of wanting to tell grandma about my operation. And I don't know if it was, I really don't, but that's the dynamic of what's going on. [00:16:05] And I can see my mom standing in the doorway of the dining room and she's angry at me. It's like we don't talk about that.

THERAPIST: I remember you telling me that last week, which is you did because I remember having a really strong reaction to it, having a two year old thinking my God...

CLIENT: Okay, so we did talk about it.

THERAPIST: Sure, because at this point in time that frames everything going forward. And then of course it makes sense. You marry someone who we don't talk about sex, we don't ever talk about sexual things, right. And so when things go bad around sex, sexual abuse, sexual feelings, things die. So in some ways at two you almost lost your you lost your mom because you're going through this painful experience, right, and if you're two you need someone to comfort and love you, and now you lost her because you can't talk about it. To anybody.

CLIENT: So I'm abandoned in the hospital, and then I get this really strong message that there's something seriously wrong about you and we're not going to talk about it. [00:17:04]

THERAPIST: Yes, so you've always come to learn something's wrong with you about sex. Something's wrong with you physically, something's wrong with you emotionally, you want to talk about it, you want to have it, something's wrong with you. But really and what a lie that is because there's something wrong with everybody else surrounding it.

CLIENT: Yeah, so fast forward, here we are.

THERAPIST: Sure, here we are. Interesting that your brothers got the same messages.

CLIENT: Oh yeah, I mean we never talked about sex, period, in the family. And you grow up in a Christian family it's like sex is bad anyway. [laughter]

THERAPIST: Sure, everything about it.

CLIENT: Yeah, there's absolutely nothing redeeming about it at all. So yeah, so there...

THERAPIST: Yeah, and I imagine because of the physical condition you are going to be more sensitive, and because of who you are you're going to be more sensitive to it anyway. [00:18:01] So whereas if you take your brothers have clearly [inaudible] impacted, and I'm sure your sister, too, but if you're a more emotionally intuitive kid, and you probably were, it's going to impact you even more. And then you go ahead and add on the surgery and the fact I mean you can't even tell Grandma. We you can't talk to us about it but you can't even tell Grandma either.

CLIENT: Right, right, right, yeah. You can't talk to anybody about this.

THERAPIST: So you understand why you went into a deep freeze yourself for years.

CLIENT: Oh my God, yes.

THERAPIST: Because everything you've learned has said don't talk about it, don't mention it. And it's interesting because it's always due to somebody else's discomfort, not your own.

CLIENT: So and I was able to go there. It was like the it's interesting, having being junior counselor now, coming into these counseling sessions, and it's like so she sits down and I'm thinking okay, probably a couple of questions, kind of build the alliance a little bit. [00:19:09] So what brings you in today? Okay, well this is kind of just let's get to work. Here we are. It's like okay, so she backs up a little bit and just kind of asks some demographic information, but it's like okay, whatever, I'll launch into the story. And I'm like so here's me; this is how we got here. And I'm spelling out the story of the childhood and I'm spelling out the story of working through some of this shit in counseling [inaudible] and I'm a counseling student, blah, blah, blah, and I've been working on and trying to lay as much of the detail out there as I can. And it's like I've got some serious issues about shame.

THERAPIST: And what does Mary do?

CLIENT: She's sitting there; she's listening. So it's not like she's rejecting any of that. It's kind of like she's heard it all before. I just don't think that she gets any of the connection between the fact that I've been shut out of a physical and emotional relationship for seven or eight years and that I should just have all of these feelings of affection and love for her. It's like so I'm just...

THERAPIST: So you say all these things and then tell me a little bit about what happens in the session. [00:20:34]

CLIENT: Well then she gives her an opportunity to talk and it's like well, what's your take on all of this. And it's like well everything basically that Seamus' been shut down for a really long time. And I've been trying to do everything that I can to reach him and he just doesn't respond. And then, yeah, I may have the chronologic so I'll just keep throwing stuff out there. [00:21:11] But there's the sense of then that six weeks ago we go out on this date to Detroit, and I really

thought that this would be a great opportunity for us to reconnect. And we got these tickets so that we'd have this opportunity to go see these shows in Detroit all year long. It was a way for us to kind of, now that we're empty nesters, to reconnect. And so he tells me at dinner that, it was interesting how she put it, that he didn't want me to kiss him anymore, or to touch him anymore, that it only reminded him of everything that he couldn't have and he just he didn't want to have anything to do with me anymore. So okay, that's I can see how she's interpreting that that way. [00:22:02] So it's kind of like in her world she's been doing everything that she can to keep everything going, and then all of a sudden one day, boom, he just said this is crazy, I can't live like this anymore. So this huge disconnect for her.

THERAPIST: And how did the counselor make sense of the data? Because I'm trying to get a sense of how we got to do you still love your wife, which is kind of a provocative question in a first session, or can be. So how did she make sense of your mutual stories and...

CLIENT: I'm thinking, now this is just me being a little intuitive, like what's going on because I saw it. I felt like the same thing was happening with the other counselor. And it's like I'm throwing this information out there, that hey we've got an issue with sexual childhood abuse here, and this is what I'm reacting to and why I've shut down. And I'm just thinking. [00:23:03] I could be completely wrong about this, but she's like I think that she sees that there's a serious fucking problem here. And it's like we need to know what are we even interested in trying to fix this fucking mess.

THERAPIST: Yes, which is more intuitive than counselor one, who wants to do solution focused let's get in touch with your memories.

CLIENT: Well she's an LCW.

THERAPIST: Yeah, okay.

CLIENT: Licensed clinical social worker. And the yeah, counselor one, who's like but counselor one, after I got through my story he's like I could feel him going holy shit. That was my take on that, especially after her reaction in kind of losing it in there. So...

THERAPIST: How did you answer the question do you still love your wife?

CLIENT: Then I said well, I'm going to have to answer from a place of complete honesty here, and this is not a comfortable place for me to be. [00:24:07] But I said my experience of having lived for seven or eight years in a relationship where and I spelled it out in terms of hey, not only has it been no physical relationship, but because when my daughter went off to school she transferred all of her emotional relationship to her friend. So I've been living in this place of no emotional relationship and no physical relationship for eight years. And it's like my experience is I feel like I'm just crawling out of the desert at this point. And I'm operating at a place I'm operating in a deficit place. And this isn't anything that I haven't said to Mary two or three times. And it's like this is where I'm at. So did I say the words I don't love her anymore, no, I didn't, but

I just said this is where it's at. And I said and that's all I've got to be able to bring to this right now. [00:25:05]

THERAPIST: And how did things end in the session?

CLIENT: We did end up making another session for a couple of weeks down the road. She's on vacation next week, so it's two weeks to let this kind of marinate and see where it goes. But the question's out there. It's like so, do you think that you two ought to separate for awhile.

THERAPIST: She asked that.

CLIENT: Oh yeah.

THERAPIST: Okay. And?

CLIENT: And she asked Mary do you love your husband, and she's like oh, yes. I deeply, and I'm and all that kind of thing. And then it's like so I see this, she's saying those words, but then it's like just beneath the veneer of that there's so much anger, and it's like but I'm not willing I mean if he's not on board with any of this stuff, then I want him out of the house right now. [00:26:03]

THERAPIST: This is what she's saying.

CLIENT: Yeah, which is understandable to a certain degree but I'm like, again, I'm back in that place of and maybe that's completely fair but it's just like okay, I'm in this place of really conditional, a conditional understanding of this relationship. It's like this is these are the conditions. It's like...

THERAPIST: It seems, though, that things the ante has been upped a bit, right, so we're not there's movement, you may not know the direction, but if she's saying I mean what would it be like for you to move out of the house if that's what the two of you decide?

CLIENT: Part of me, I just wandered around the sculpture park for an hour and I'm just like what does all that feel like to me. What does that really feel like? What am I feeling now after this session? And I'm just wandering around; it's like I'm not feeling all knotted up inside. [00:27:08]

THERAPIST: You're not, I can tell. I was going to say, from where you were a few weeks ago and of course where you go to is never static. So you could be in a really bad place next week or whatever but you don't seem to be knotted up inside.

CLIENT: And I knew, I knew because I was kind of there was this knot.

THERAPIST: Yeah, we talked about that.

CLIENT: And I knew what that knot was.

THERAPIST: Are you setting this up, you think, Seamus?

CLIENT: Am I setting it up?

THERAPIST: Setting it up so you can setting it up, taking steps to say the end truth about what you want. You don't want this anymore. Is that where...

CLIENT: I don't know. I mean yes. I mean yes. There's a part of me that knows definitely that this relationship, the relationship the way it has been, is not healthy for me anymore. [00:28:05] It hasn't been healthy for me for a long time. And it's not going to be a growth producing relationship for me. Do I see any possibility of her changing? I don't hold out a hell of a lot of hope of that ever happening. And I'm like I don't think that I have the energy to sit around and wait for that to happen. She asked her, so Mary, what do you vision this relationship looking like if you go forward. What would you like? Well, I'd like to have companionship and I'd like to have the relationship that we had so we can kind of continue on the path, and it's kind of that grow old together. It's like and she goes what about sex. [00:29:01] Well I I'm starting to hear what he's saying, and I get that this is some piece that's really, really important to him, and I told him that I would be willing to work on that. And so me, hearing those words and the way that I'm interpreting that, it's like I get to be the caretaker. I get to be I get to continue that role as caretaker. I've taken care of the elder members of her family, I've gotten to take care of her brother. And of course that's what it should be if you were in this relationship where you felt like there was some mutuality.

THERAPIST: Sure, although caretaking should switch back and forth. It shouldn't be a one person, which you sounds like you feel like it has. It strikes me as interesting in some ways because you guys are clearly in two different places, where nobody wants to really have sex with somebody who doesn't want it back. [00:30:07] So I'm hearing now it's important to you so I'll work on it, but I don't really want it too, which doesn't make you so you're in this place of kind of deep honesty and truth, and she wants to go back to the way things were which is a place that's intolerable for you. And for her to really kind of go bring what you might need to the relationship would be such deep emotional work because the sexual abuse and your marriage are interrelated, and she'd really have to do that you can't work on one without the other. So she would have to do both, and from what you're saying it doesn't sound like you think she wants to or is willing or ready to do that kind of work.

CLIENT: She may want to but it's like I don't think that she wants to for so it's like okay, I don't know how to put this. [00:31:02] It's like I don't want to be in a relationship with somebody who feels like well, okay, I'll work really hard at doing all of this hard work that I need to do around sexuality if it's so important to you. And I'm just well how cheap and dirty does that make me feel. And I'm just like and then I'm supposed to tell you that I love you.

THERAPIST: Sure. Do you feel like you are supposed to tell her that you love her?

CLIENT: No. Well I mean that's what she'd like to hear but I'm not in that place of being able to say that. I was able to yell it out loud in this beer garden after who knows how many cheap beers.

THERAPIST: Yell what?

CLIENT: It's like Jesus Christ guys, I'm telling you, I didn't want to be this guy.

THERAPIST: Which guy?

CLIENT: Who's going to sit here at the table and tell you it's like I don't even fucking like her anymore. [00:32:04]

THERAPIST: Right, you didn't want to be the person to say those words.

CLIENT: Yeah, I don't want to be in that place, but that's where I'm at.

THERAPIST: Well, but again, here's another theme here. Why is it that guy? That guy always has these negative connotations about you're a bad person. And what guy are you except the guy who's unhappy in this marriage? Why do you have to be that guy? That goes back to all the shit with perfection that we talked about. You're not any guy. You're Seamus, who's unhappy in this marriage, who refuses to kind of go along to get along and not be honest about the fact that he's not unhappy. That doesn't mean that you're that guy. It just means you're Seamus who's fucking unhappy. But we always go back to that Seamus.

CLIENT: Yeah, I know. It's words. I just yeah. And I used them again in the session this morning. It's like I don't want to be...

THERAPIST: Are those your words, Mary's words, or both? [00:33:00]

CLIENT: Probably both. It's like that sense of this is not where I wanted this to be. This is not where I wanted this to be. This is not where I thought this relationship was going to be 26 years ago. But here we are.

THERAPIST: But that's the grief piece, okay, and that is a very valid, sensitive, painful place. But why does being in that place make you a bad person? Because that guy is synonymous with bad guy.

CLIENT: Right, and it's because in her world...

THERAPIST: What about yours?

CLIENT: Yeah, in my world I'm just unhappy.

THERAPIST: Right, but why do you continue to frame it as that guy? I understand you can frame it as I didn't want to be in this place or that place, but it always has to do with your personhood or your character. [00:34:01]

CLIENT: Well I think it's just too long of living in that schema. Too long of my worth or my existence or whatever is going to revolve around what you think of me, what you think of me, what you think of me.

THERAPIST: I'm going to call you on it every time I hear it because if you are going to be truthful, that's not the truth. Again, and I remember when my parents split up, both of them said I didn't think we'd be in this place; this is not how we thought this would go. It was painful for both of them. And I know as couples break up, there's guilt, there's shame, there's a whole lot of things. But you are not a bad person because you're admitting to being unhappy and refusing to be unhappy. You're not that guy. You're just Seamus who's unhappy, who refuses and it's intolerable to remain unhappy and silent about it. That doesn't make you that guy, it actually makes you a brave guy, because quite frankly, if you had shut the fuck up you could do this for 25 more years, right, and then you'd look back and be like really? [00:35:09]

CLIENT: Yeah, or I'd probably just end up shutting down so much I'd just be drooling in my oatmeal some place.

THERAPIST: Could be. Tell me what you're feeling as we're talking about these things.

CLIENT: I feel a sense of yeah, more of a sense of owning that, more of a sense of empowerment about that. It's like yes, yes, yes, you're 100% right. And yes, I need to stop using that language because it is clearly powerful. Language is clearly powerful, and as long as I continue to use that I'm going to be continuing to frame myself that way.

THERAPIST: Is Mary a bad person?

CLIENT: No.

THERAPIST: Is she that woman?

CLIENT: No, she has some issues.

THERAPIST: She's got some deep issues, right, that may be too painful for her to look at. And if she's not that woman, and I haven't heard you describe her even in your anger as that woman or but she when she says I didn't think you were that guy who would want sex or whatever, that you cannot ingest that. [00:36:18] You cannot ingest you have to take it out of yourself because you can't have I'm going to live in truth in one part and lie to myself on the other about being a bad person.

CLIENT: And listening yeah, listening to the crap on the other side.

THERAPIST: You can listen to it but you don't have to take it in yourself. You're just and you're not the only one who's unhappy, your brothers are. That doesn't make...

CLIENT: And if she owns it she's unhappy too.

THERAPIST: Who, Mary?

CLIENT: Yeah.

THERAPIST: Oh yeah, I'm sure, especially now.

CLIENT: And she has been unhappy. She has to have had to be unhappy because I have not responded to her in a long damn time.

THERAPIST: Tell me about that piece. That's come up a couple of times where she says I've done all these things and you're just shut down. What do you make of that? [00:37:05]

CLIENT: Oh, yeah, I am shut down.

THERAPIST: Do you see in your kind of recent past that she has reached out to you and you haven't responded?

CLIENT: Yeah, and it's always these in my interpretation it's always these reaching out over the top of the wall...

THERAPIST: For a pat on the head.

CLIENT: Yeah, or I'll give you a kiss on the cheek in the morning on the way out the door or whatever.

THERAPIST: Yeah. So in some ways you guys have gotten to a place where you can't really reach each other anymore, not in the ways that you need it. And maybe you want two different things out of the relationship.

CLIENT: Clearly. Clearly. I want an incredibly deep, meaningful relationship. Two people all in, no holds barred intimacy.

THERAPIST: Did you describe that for her?

CLIENT: I've tried, and what I get back from that's what I want too. [00:38:01]

THERAPIST: Sure.

CLIENT: And it's like okay, are you hearing me here. That's the sexual component piece. That's the physical and the emotional, boom, everything's in vulnerability. And...

THERAPIST: But it is what she wants. It just doesn't look like what you want or need it to look like.

CLIENT: Yeah, I mean she does want it. And but it's...

THERAPIST: Sure, and like this, and you want it like this.

CLIENT: Yeah, and as long as I can hold her hand and I can take her out to a show once a month and have coffee with her for five minutes in the morning and I listen to her tell stories, the same stories about whatever, everything's all good. And that's intimacy. That's what she wants. And I'm like it's got nothing for me. And maybe she wants something deeper than that. But I'm like it doesn't feel like that to me. [00:39:06]

THERAPIST: How do you feel about going to counseling, couples counseling, and talking this out with a counselor?

CLIENT: Are you asking me are you just wasting your time Seamus.

THERAPIST: No.

CLIENT: No, okay.

THERAPIST: No.

CLIENT: How do I feel about doing it in front of her or with her?

THERAPIST: Yeah, unless you feel like you're wasting your time.

CLIENT: I've got to I feel like other people have questioned me on that. It's like so do you know what you want. What are you really hoping to get out of couples counseling at this point? And I've thought about that. So part of me is like I know part of me just wants to be heard. Part of me wants to be heard and validated by somebody, maybe in her presence, that I'm not fucking crazy. [00:40:02] And is that a revenge thing? I don't think so. It's just, I don't know. I really feel like do I have a lot of hope of this thing, being able to pull this thing out? Not really. Because I know that one of the big components is going to be me being all in in trying to work and make this thing happen. Today, where I'm sitting, I can't do that.

THERAPIST: It's almost like this is part of the process, so if you view it as a process that leads to whatever end result, it's not only kind of about being heard but being seen, right, and coming to some resolution, even if it's to clarify you both want different things or to clarify the fact that

you're done or to clarify the fact that you want to try whatever it is, right. It's not that your doubts are valid and it's not that I wonder if this is a waste of your time because this is the first time in a long time the two of you have come together to talk about the deeper issues. [00:41:10] And so in some ways I think when you have been married as long as you have been married, you have to do due diligence on the relationship, even if you think it's going to go a certain way so that when all is said and done you look back and you said look, right, I'm at peace with this because I did due diligence. If you packed up, left, and filled divorce papers out tomorrow, my sense is that you might be really uncomfortable with that because even though this may be where this thing ends up, you're not ready for that piece yet.

CLIENT: No, and I feel like yeah, irregardless of what happens, I'm always going to be connected to this person, in one way or another. I mean we're going to have we've shared three kids together. We are parents together. And it's...

THERAPIST: Have a history together.

CLIENT: We have a history together. And ultimately I think that she's a really good person, and she's got some really deep issues, and I'm not sure that I can be the guy that's going to help her get through those issues. [00:42:18]

THERAPIST: Right. I don't know if you can be. I don't think you can be. First of all I don't know if at this point it's necessarily your job to do that because that would've happened at the 12 year mark. That's what I'm saying, that...

CLIENT: I tried to do it then.

THERAPIST: Sure, but it's hard to do it when someone won't let you in to do it, and she's not ready to face that.

CLIENT: And I'm not sure that I'm ready to face that now.

THERAPIST: Sure, right, because again, the freeze, the hold, happened at the 12 year mark, where you found all this stuff out. There were a few conversations, a few counseling sessions, and then after that everything kind of went downhill.

CLIENT: I got the message. I got the message back then and it's like wait a minute, you're going to tell me that none of this matters anymore and that now we're going to fix it. And it's like yeah, I'm not buying any of that. [00:43:13]

THERAPIST: I wonder if you will take from this whole thing I mean there are some pretty the moments that you described in your life that are kind of monumental, where you've been absolutely silenced, right. At two, told we don't talk about this, your wife's sexual abuse, basically the same message. And it stuck each time for years, right. I wonder and I hope that if you whatever you take from this, it's to never be silenced again.

CLIENT: Yeah, and I think that there's really a part of me that no, it's I feel like I've really I have this image of holding on to that two year old child and it's like yeah, you know what, I've got you and you ain't fucking going to get hurt again. I've got you on this. So there's sort of that sense of like yeah, I can speak. [00:44:10]

THERAPIST: Yeah, clearly, because you keep doing it consistently. It's almost and when you turn a corner, sometimes you just can't go back to the place...

CLIENT: I can't go back.

THERAPIST: But not only in this relationship, but forevermore, to not be silenced to the point where shame and guilt and doubt back you into a corner and you can't get out of the corner because of all these old messages because the messages are might be true to the person who provides the message but not for you. We don't talk about sex in this house because I, the parent, am uncomfortable with it. Not because it's wrong or bad or you shouldn't talk about it, right. Because I don't want to hear about it, you shouldn't talk about it. And that's a terrible message to send to a child. Like you've imprisoned this poor two year old because you're uncomfortable with the topic. [00:45:05] Therefore his feelings and issues with it means there's something wrong with him, which is the message that the two year old got. None of that is true. It's never been true.

CLIENT: No, and I get that, and you're and I really do feel that. And it's like but I recognize that in our relationship, that marriage relationship, that the communication system is so fucked up that I don't even know how to begin. And it's not like we can come at this from a place of okay, let's go have dinner together and try to sort this out. It's like...

THERAPIST: Which may be what she's thinking.

CLIENT: Oh yeah.

THERAPIST: Why is it this deep at this point when it hasn't been for this long.

CLIENT: Right, and her take on all of this is that I've gone crazy. It's like she said I hear what Seamus is saying and I hear that he's saying that he's being honest right now, but that's not what I believe. [00:46:06] I believe that he's not being true to himself. He's not being authentic. He is he's not being the person that he's been all of his life and...

THERAPIST: Sure, well, and who she's known you to be because that's been the investment.

CLIENT: And I get that. I get that. But that's yeah, so that's where we're at.

THERAPIST: Where are you I don't want to forget to ask you this with last week we started talking about some crushes, some fantasies, that you were having.

CLIENT: Oh, yeah, well I think where I'm at with that is recognizing that is it a crush so much as it's recognizing that there's potential here for relationships and there's potential here and there's wow, here's somebody who's mature and got their head on straight. And it's like I recognize and it's recognizing that okay, clearly I need to be I don't need these things to be overlapping right now. [00:47:18] But it's recognizing okay, you know what, I've got a friend here now, and a friend that I can talk to, and I'm not really wanting to stop that. I can put some pretty clear boundaries on this and I can be okay with this but it's like oh my God, this is what this could've been a long time ago. It's like oh my God, I can talk to somebody.

THERAPIST: And what's that like for you to have the realization of having emotional intimacy with a female friend?

CLIENT: What is that like for me? That's like a drink of water after being in the desert for so damn long. It's just like just to have a 15 or 20 minute conversation with somebody who's willing to sit there and listen to me and just take it in. [00:48:16] And I recognize okay, this person over here, she doesn't have 26 years' worth of my baggage. And it's like and I don't want to go down the road of oh, this is all new and shiny and this is...

THERAPIST: Absolutely. It is nice to recognize that there's a possibility some day of something else.

CLIENT: Oh clearly. I mean it's like and I recognize that there are so many old bad stories about myself that I'm pretty much sure that I can let down. I can let go of those now. It's like not lovable, [buzzer sound]. Not a good looking guy, [buzzer sound]. I get all of that.

THERAPIST: Well how did you get that so fast?

CLIENT: I don't know, but this is like the turning on the switch. It's like I really can't, I don't know, maybe I maybe I've just never talked to anybody else that's had this experience, of just like night and day. It's like the switch came on one day. [00:49:15]

THERAPIST: You remember we talked about how you get all these positive messages about yourself from the environment, from here, from professors, from other students, and you weren't able to, one, pay that much attention to them or two, internalize them because of you being entrenched in your own narrative of negativity. And then it is like turning on a light because you're not anymore. And so now you're able to go oh wow, look at all of this; I didn't even see this. But it's been there more consistently than you think it has.

CLIENT: Oh, yeah, of course. But it's like that moment of the switch coming on. It's like just such a huge watershed of everything. And it's like oh my God, I have been so wrong about so much stuff for so long. [00:50:04]

THERAPIST: Well you've been told a lot of things. It's amazing what we get told through other people's issues or discomfort about ourselves, right, so if you can you imagine, if you are not an emotionally healthy person, what is the message you pass on to your children about life, about themselves, that they learn from the parents. And you got some of that from yours. I mean we all get it from our parents.

CLIENT: Yeah, and how much did I pass on to my kids. It's like...

THERAPIST: Maybe.

CLIENT: It had to be there. We had to do that. We're two people that didn't deal with our issues for 26 years. And some of that stuff's going to be job security for some counselor down the road. But yeah, so what do I think about that relationship? [00:51:01] I think that trying to hold some healthy boundaries on that, but you know what, I'm okay with having friends. And it's like I've got a special friend and I've got other people that are close friends, and it's like these people are my network. And I'm like I'm okay with it.

THERAPIST: That's not a network you recognized or spoke about four months ago.

CLIENT: Oh no.

THERAPIST: Right, but as you live in your own truth, speak it, live in it, it's opened up all these other relationships. Six months ago I remember you saying there's nobody except for your male friend, who is male to female, transsexual friend.

CLIENT: Oh, yeah.

THERAPIST: But now you've got more family relationships, friend relationships, that you are open to you because of your truth. Isn't that pretty incredible?

CLIENT: It is pretty incredible.

THERAPIST: Because it's pretty quick.

CLIENT: It is pretty quick, and it's like recognizing well yeah, you know what? Those relationships were really always potentially there. [00:52:06] It's just me not being open to them. And what's changed is that this relationship over here, which has been really pretty unhealthy for me, and I'm dancing around trying to stay in orbit around this thing, it's like if I'm going to recognize that I'm not stuck in that orbit, then it's like okay, then everything else is opened up. So it's like all right, I'm no longer focusing on that; now I can focus on I've got all this other energy now to focus on all of these other things.

THERAPIST: Yeah, it's a different pain, too, the pain of being stuck. But now you're in the pain of processing. But there's forward movement in the processing.

CLIENT: Yeah, and I had to trust. I mean I think the only thing at his point that I feel some anxiety about, and I that's today. [00:53:05] Tomorrow's going to be a little bit [inaudible] I get that. And I may have completely different feelings tomorrow, but it's like yeah, if we got to separate, if we got a divorce, for me it's about the kids now. I but I don't have any control over that either.

THERAPIST: And your concerns would be?

CLIENT: That I'm going to have strained relationships with my daughter probably, who maybe isn't going to understand or, I don't know. I'm probably catastrophizing, but I'm that's more my concern then. And really the financial reality. I'm in a completely financially vulnerable place. I'm like oh, I'm in grad school, I'm counting on our relationships and that fact that I've got an assistantship to kind of get me through, and what am I going to do if this really ends? [00:54:14] It's like I haven't even thought about that yet. I'm like I've been dealing with all this existential shit and I'm like I haven't even thought about...

THERAPIST: The practicalities.

CLIENT: I mean that's so clearly my goofy ENFP personality type who oh, let's be all concerned about...

THERAPIST: But you will think about those things.

CLIENT: When it's time.

THERAPIST: Sure.

CLIENT: Yeah, I know. I know I will but I'm just like oh God.

THERAPIST: Well one reality at a time, huh.

CLIENT: I guess. I guess. And it's like but part of me is like I'm not so much interested in peeling the band aid off one hair at a time.

THERAPIST: Well no, you didn't peel it off, you ripped the damn thing off. Exactly.

CLIENT: When you're this hairy...

THERAPIST: It's definitely ripped off. [00:55:03]

CLIENT: ...you learn how to pull it off fast. And it's like it really doesn't hurt that much. There's an initial shock. I was walking through the sculpture park out here, and the first sculpture I encounter is entitled The Phoenix. And it's like and they're telling the story of the phoenix.

THERAPIST: Is that the green and white one?

CLIENT: No, it's the orange one. It kind of just looks and it's out; you have to walk to it just a little ways. And the phoenix lines a nest with cinnamon twigs and sits in the nest and burns itself up, and it rises out of the ashes. It's like it clearly feels like that right now. It's like...

THERAPIST: The rising part, not the burning part.

CLIENT: It's kind of like burning up a lot of old shit. [00:56:02] And it's kind of that sense of this is kind of the ring of fire kind of thing. And it's, yeah, some old stuff that needs to be burned away. And it may be there's a sense of new arising that's coming out of that at the same time, but it's like...

THERAPIST: It's hard work.

CLIENT: It's really hard work.

THERAPIST: But you're doing it.

CLIENT: Yeah.

THERAPIST: You're doing it. So we are on for next week.

CLIENT: Yeah, thanks. I'm sorry.

THERAPIST: No, we're fine. We're fine. We'll keep at it. You're doing a great job even though it's difficult.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: Can you come at, do 12:30 until like...

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: No problem.

THERAPIST: Then... Because it looks like that's right in between one interview and then the other one if that'll work for you.

CLIENT: Okay. (PAUSE)

THERAPIST: Let me make sure I write that in here. (PAUSE) Yes. Twelve thirty to like 1:20. Thank you for your flexibility. How are you?

CLIENT: I'm tired.

THERAPIST: I betcha.

CLIENT: (LAUGHTER)

THERAPIST: (LAUGHTER) Well that's honest. I can...

CLIENT: I'm tired.

THERAPIST: What's happening?

CLIENT: Let's see.

THERAPIST: Was today counseling day?

CLIENT: It wasn't.

THERAPIST: Oh okay.

CLIENT: Let's see. Holy crap. Next week is the 29th already.

THERAPIST: It is. Isn't that crazy?

CLIENT: Yeah. Crazy the amount of stuff I've got to get done between then...

THERAPIST: (LAUGHTER)

CLIENT: You know? And it would be great... Let's see. Hang on a second. (PAUSE) I want to make sure I get this in the right spot. Twelve thirty...

THERAPIST: Twelve thirty to like 1:20. [00:01:01]

CLIENT: Yeah. (PAUSE) Yeah. Just... You know, I'm really tired of... I'm tired of doing this.

THERAPIST: Yeah. What's happening?

CLIENT: You know... (SIGH) The Easter weekend was, you know...

THERAPIST: Oh yes. What happened this weekend?

CLIENT: Well, I wasn't part of any of the Easter stuff, you know, musically. And, you know, that's like... (PAUSE) This is like huge.

THERAPIST: Sacrilegious. This is the first time you've... Yeah. How did that go?

CLIENT: Well, you know... (SIGH) (PAUSE) You know, the bottom line through... You know, it's we're on the back side of it. But it's just like (PAUSE) you know, this surreal place of being like in my life. But everything's upside down. [00:02:03]

I think I've probably said that before but it just feels like everything about my life is upside down. You know, it's like... It's like, "Wow. Why is this?" And then it's just like it starts to filter in that so much of my life is intertwined with the church.

THERAPIST: Yeah.

CLIENT: And that's just... You know, my whole life is... I think it... I think I said these words out loud to somebody this week and it hit me in a different way. It's like it was a joke before because my wife kept her name. So, in this...

THERAPIST: That's interesting.

CLIENT: In this town, I'm Mr. Nickels.

THERAPIST: You're Mr. Nickels? Yeah.

CLIENT: You know, because... You know, people accidentally take me... They just assume that my name is...

THERAPIST: Sure.

CLIENT: ...Nickels. [00:02:59]

THERAPIST: That she took your name.

CLIENT: But it's... You know, that's what my role has been.

THERAPIST: Yeah.

CLIENT: My role has been...

THERAPIST: Mr. Nickels.

CLIENT: ...or Driving Miss Daisy. You know, like this is my... This is my role. And it's like, "Oh my." It's just so pervasive that I'm like everything in my life seems upside down now.

THERAPIST: Yeah. I mean, there's a lot of meaning in what you're saying. You know, so, you know, even your name is sort of not your name.

CLIENT: Well, yes and no. I mean... (PAUSE) I mean, I have an identity here and people know me.

THERAPIST: Sure.

CLIENT: But it's like my role is...

THERAPIST: Right. (PAUSE) Was there discussion around you're not participating in Easter or was it assumed?

CLIENT: Yeah. You know, it's like... You know, it was clear. It was clear that I wasn't going to choir practices and it was clear that, you know, class... I had class on Thursday night so, I mean, there's a Thursday night service that it's like didn't go to that. [00:04:01]

Friday afternoon, didn't go to that. So, I mean, it was just clear. But, you know, the kids all came home. So everybody would go and normally do the service.

THERAPIST: Oh. So the kids even came home? Oh, that's a lot.

CLIENT: So it's like everybody's there except me.

THERAPIST: Yeah. How did all that go?

CLIENT: It really... You know, it went okay. It was like I was able to maintain like my role in terms of like doing the cooking and, you know, and being there for the kids when they were around. But it was... You know, it took a tremendous amount of effort to just...

THERAPIST: Yeah.

CLIENT: ...you know, be in that place. Not that I felt like I could go because, you know, quite often it's just like, "Okay. Allow yourself to go there and imagine what that's going to look like." And it's like...

THERAPIST: Which part of it?

CLIENT: Going to church. You know? Just backing down and going to church. You know, "What's that going to feel like to you?"

THERAPIST: And?

CLIENT: And... No. Well, it's just like all of that just seemed like I couldn't, it would just be too crazy. [00:05:07]

(PAUSE)

THERAPIST: Seamus (ph), what was your kids' response? This was the first time they've been home since there have been known problems.

CLIENT: You know, everybody kind of just stayed in this (PAUSE) place of not really talking about it too much.

THERAPIST: Okay.

CLIENT: I got a few minutes with my daughter. I had been trying to figure out how to make time alone with her, you know, for the two days she was home. And I was just like... You know, at some point, I grabbed about five minutes and I just said, "You know, I was hoping we'd figure out how to get more of a chance to talk." So at least that kind of opened up that avenue and I told her I'd give her a call and we can talk some more on the phone.

THERAPIST: Okay.

CLIENT: But, you know... (PAUSE) It didn't feel like there was estrangement. It didn't feel like people were... You know, it's like recognizing that there's some stuff going on. But... [00:06:09]

(PAUSE) I did end up... Mary had like, I don't know what day, Thursday or Friday, she had texted me and said, "I need..." Because my job, along with, you know, doing other things in the choir, was to be the guy who tried to figure out the sound board and run the sound board.

THERAPIST: Okay.

CLIENT: I couldn't find anybody to run the sound board for... There's like four services on Sunday morning, on the 11:30 service. The kids all have to play. They're doing something musically at that service. "Would you run the sound board?" Or, "How do you feel about running the sound board?" [00:06:55]

And I thought about it for a while and I texted back and I said, "Okay," and I said, "Sure. So I'll try it."

THERAPIST: Okay.

CLIENT: But it was just... You know, it was painful.

THERAPIST: So you went? Yeah.

CLIENT: I went knowing that I probably shouldn't and I went as an experiment to see how it was going to feel.

THERAPIST: Sure.

CLIENT: And... (PAUSE) You know, it just took so damn much effort to stay in my skin.

THERAPIST: Tell me about that.

CLIENT: It was just... (PAUSE) You know, it was like... I felt like I didn't belong here. I felt like people were looking at me funny. You know, it's just like, "Okay..." You know, it's just like I'm... "Here comes the pariah." You know?

THERAPIST: Like an imposter in your former life kind of thing?

CLIENT: Well, that's a good question. Let me ask. (SIGH) (PAUSE) Yeah. It's just a role that doesn't work anymore. It's a role that's not comfortable. And it's like I know how to play this game. I know how to do this role. And it's like, okay, nothing's changed except instead of me sitting here seething, wishing I wasn't here, you know, I can now be in touch with all of these feelings and just... [00:08:11]

You know, I'm doing everything I can to like jump out of my skin and get the hell out of here.

THERAPIST: That's a pretty strong description.

CLIENT: Yeah. I mean, it's not... It's a really... And... It's a really visceral feeling.

THERAPIST: It is. I can see it.

CLIENT: And it's like... And it's permeated so much of the rest of my life. It's just like...

THERAPIST: What sense do you make of this?

CLIENT: (SIGH) I'm one unhappy dude. (LAUGHTER)

THERAPIST: Are you?

CLIENT: Am I? (PAUSE) You know, it's kind of like you know... You know, what your truth is. You know what you need to be doing in terms of getting out of this. But it just seems like... (PAUSE) You know, I... I don't know if I was telling you about my friend Irene who's a yoga instructor, kind of longtime friend in and out. But I mean, she's mid-sixties. I kind of went over three weeks, four weeks... I don't know what it was. [00:09:25]

I told her about my situation, kind of told her what kind of place I had come to. And she's just like, "You need to get out of there. You need to get out of there quick." And I'm like... (PAUSE) She's probably right. But I couldn't figure out how to do it.

THERAPIST: Sure.

CLIENT: You know?

THERAPIST: You know, in some ways, I'm imagining you, being a lapsed Christian myself, being at Easter mass, you know, running the sound board and it being, you know, like you're visiting your old life and it reminds you of how much you didn't like it, right, and why it's such a poor fit. Right? [00:10:09]

It makes sense why you did it when you did it. But you can't do it anymore.

CLIENT: No.

THERAPIST: Like not even a little bit.

CLIENT: No.

THERAPIST: You know, and so, in some ways, even though it was a really painful experience like physically and emotionally painful experience, I would bet you almost needed to have that experience because it was intolerable for you. And it reminds you very clearly you can't do that again.

CLIENT: Yeah.

THERAPIST: Like it's sort of like a physical impossibility. It doesn't fit. And so everything about it seems false...

CLIENT: Yeah.

THERAPIST: And not true to who you are or what you want.

CLIENT: Yeah.

THERAPIST: But it... It just makes it more clear. So, you know, when your friend says, "You need to get out of there and get out of there quick," in some ways, I would argue that's sort of what you're doing emotionally. Right? [00:10:59]

You knew you couldn't fully participate because that didn't feel right. But, you know, a reasonable request, "Can you run the sound board?" "I don't want to. But, sure, I will do this." It

allows you to kind of visit and recognize, you know, what you can't do which is more data for you.

CLIENT: Yeah.

THERAPIST: You know? So I don't know if it... Even if it was a painful experience and I can see that, I almost think it was a necessary experience.

CLIENT: Well, I kind of... I've kind of been sitting with that and kind of feeling that was... You know, and... (PAUSE) We had a couple of talks over the weekend, Mary and I...

THERAPIST: Yeah.

CLIENT: ...and it's just like... You know, I was in this place of really being pretty comfortable...

THERAPIST: Yeah.

CLIENT: ...of really being in my truth and being able to say, you know, a lot of the stuff that... And it's not like I necessarily was saying it, anything new. But just being able to stay with, you know, what I've been saying... You know, it's like... And I think emphatically and kind of clearly stating... It's just like... [00:12:05]

You know, because I've been so open about saying, "Yeah, you know, this is the way that I've been dealing with the situation..."

THERAPIST: Sure.

CLIENT: "...and, you know, here's my shame issues and this is why I shut down," and all that kind of thing, it's like it's been my narrative. So it's been real easy to say, you know, now she's, you know (PAUSE) adapting that or picking up on that. It's like, well, now it's...

THERAPIST: Well, clearly because she didn't expect that you would have a presence.

CLIENT: Well...

THERAPIST: She didn't expect it. She asked if you would do the sound board.

CLIENT: Oh no. I'm sorry. I'm sorry. I'm jumping.

THERAPIST: Oh okay.

CLIENT: I'm jumping out of that a little bit and saying that (PAUSE) my (PAUSE) letting her know that's it's been my... So what I'm saying is that I've been taking my half of the responsibility for this issue.

THERAPIST: Sure. Okay.

CLIENT: And she's been allowing me.

THERAPIST: Yeah.

CLIENT: And now it's like, "Well, if you hadn't shut down in this relationship..." It's like...
[00:13:09]

So, at some point, during the conversation, I was able to say, "Yeah. But you know what? From my side, I'm having exactly the same feelings."

THERAPIST: Sure.

CLIENT: "It's like you shut down in this relationship and that's been my experience." You know, so I was able to kind of at least say those kind of things and, again, try to say it in some way that it's like I... And I think I've given up.

THERAPIST: Okay.

CLIENT: I think it's like it isn't going to matter how you say this.

THERAPIST: Sure.

CLIENT: You know, it's just... (PAUSE) It's like the last eight years happened.

THERAPIST: Sure.

CLIENT: The last eight years happened. It's like, you know, trying to explain it to her. It's like, "I don't know how you can come to, you know, the end of these last eight years and have these warm, fuzzy feelings about me. It's like I've been an asshole." [00:14:01]

THERAPIST: Right.

CLIENT: You know, I've been this guy who has shut down. And the best that I can do is like snarkiness.

THERAPIST: Right.

CLIENT: "And you're going to have warm, fuzzy feelings about me at this point?" It's like...

THERAPIST: Maybe. You know, Seamus, are you familiar with narrative (ph) therapy at all?

CLIENT: I've heard about it.

THERAPIST: Okay. Let's... If you can think of a name for the story of your life up until a couple of months ago, what name would you give it? (PAUSE)

CLIENT: Hmm. (PAUSE) Like a one word name or any name?

THERAPIST: Whatever you want it to be.

CLIENT: (SIGH) (PAUSE) Yeah. (PAUSE) [00:15:00]

(PAUSE) I don't know. I'm just having this image of, you know, two wounded children (LAUGHTER) two wounded children, you know, driving the train. It's like... You know?

THERAPIST: Two wounded children driving the train?

CLIENT: You know, it's like it's a train wreck. You know?

THERAPIST: Mm hmm. And the train got wrecked. (PAUSE) And what about now?

CLIENT: What do I call it now?

THERAPIST: Yeah. What is it now? (PAUSE)

CLIENT: It sort of feels like (SIGH) (PAUSE) picking through the pieces of the wreck or sorting through the storm damage or whatever.

THERAPIST: So you can do what? [00:16:57]

CLIENT: (SIGH) I can do what? I can walk away.

THERAPIST: It looks like you're about to hop another train to me.

CLIENT: Yeah. You know...

THERAPIST: So narrative therapy looks at the dominant story of your life. So we've looked at themes. Right? So if it's two wounded children driving the train that eventually has a wreck... You know, we looked at insecurity themes and how you're not okay and you're not supposed to be and don't talk about sex and don't talk about this and, you know, all of these themes. And so you and your wounded wife drive the train that crashes and now you're picking pieces out of your life that you still want out of the wreck so you can get on the train. It's like creating another story altogether from the wreckage.

CLIENT: Yeah. Because I... You know, and I know that that's where I'm at.

THERAPIST: Sure.

CLIENT: I know that... (SIGH) I just had this like (LAUGHTER) this sense of like just, "Damn it."

THERAPIST: Damn it what? [00:17:01]

CLIENT: You know, this is where my life is. You know? It's just like... You know, so I'm mad. I'm angry at that. You know, it's like...

THERAPIST: Tell me what you're angry about.

CLIENT: (SIGH) (PAUSE) You know... (LAUGHTER) (PAUSE) Yeah. I guess I'm... This thought is just occurring, I guess. But it's like, damn it. Twenty seven years of being the boy scout. Twenty seven years of like really trying to stick it out and just do the right stuff. And I'm like... It just crumbles to shit like that. And I'm like, "Okay, this is what I've got."

THERAPIST: Okay. So what are you...

CLIENT: (LAUGHTER) [00:17:53]

THERAPIST: Tell me about what you're angry about because it's always your laughter that hides...

CLIENT: Yeah. I know.

THERAPIST: ...what's happening for you.

CLIENT: What am I angry at? (PAUSE) (SIGH) (PAUSE) I'm angry that, you know, I played the role of the good boy...

THERAPIST: Yeah.

CLIENT: ...and I still didn't get what I wanted. You know?

THERAPIST: Which was...

CLIENT: It's like... You know, it's that sense of probably being the little kid, you know, desperately wanting Mom's love, desperately wanting Mom's attention, whatever. And it's... As much as I'm the good boy, as much as I'm trying to do everything that she would expect me to do, there's still three other kids and there's still no time for me or there's still... You know, there's something wrong with me and our... You know, whatever those...

THERAPIST: You never got the approval. [00:18:51]

CLIENT: (SIGH)

THERAPIST: Validation, approval, acceptance.

CLIENT: Love. Yeah. Maybe.

THERAPIST: Yeah. But... And then you didn't get it again. Right. What if you find you don't need it from those sources as much as you thought you did? I mean, once you pick through the wreckage...

CLIENT: I know. And it's like, "Oh shit." Because I'm like... I'm seeing this in other peoples' lives and other peoples' stories. And it's like, "Yeah. I know it's me." It's like I've got to be able to find that love and acceptance from me. And that I know is key. And I'm not going to be able to find it from somebody else and nobody else is going to be able to give it to me.

THERAPIST: Well, you find it and have begun, in a real way, to find it within yourself. And then you can get parts of it from others.

CLIENT: Yeah.

THERAPIST: But what it, you know, instead of... You know, I almost get a sense you're looking at yourself like, "I fucking stayed in this thing for twenty seven years, you know, the good Boy Scout and I didn't get anything or I didn't get what I needed." [00:19:59]

And I wonder... I mean, part of that's clearly true. But I wonder if after you pick through the wreckage and hop another train, you know, in terms of taking the good parts of figuring out who you are and you find you do get what you want. It just doesn't look like how you thought it would look. It doesn't look like you're going to get it through this particular marriage. Right? But in leaving the wreck behind and walking away, not unscathed, but walking away no longer the wounded child but the grown man, if you create an entirely new experience...

CLIENT: Yeah.

THERAPIST: ...where you finally get some of what you want because that's where you're headed, right, because... And here's how I come to this. You have ceased to care as much about pleasing your wife. You dropped that like a bad habit. Right? You care enough about her not to be deliberately hurtful which is the good part of the Boy Scout. Okay? Right? [00:21:01]

But you no longer care about her opinion otherwise you would have been at Easter mass. Okay?

CLIENT: Yeah. Oh yeah. I mean, clearly the paradigm has shifted.

THERAPIST: Right. But that's what's enabling you to pick through the wreckage and hop to another train. Right? So the wounded kids (inaudible at 00:21:21) because you're not a wounded kid anymore and you refuse to be in the... It's like the skin of the kid is too small and that's why it's tight.

CLIENT: Yeah. Yeah.

THERAPIST: So even though you're in the middle of some really deeply painful shit, I wonder if once you pick through the wreckage and hop a different train, if you look back on the experience and you recognize, it took twenty seven years to get to the point where you don't want to ride that train anymore.

CLIENT: Yeah, yeah. I...

THERAPIST: Tell me your thoughts about that.

CLIENT: No. I mean... (SIGH) As I'm looking at, you know, my life or I'm looking at, or, you know, just within the last week or whatever... You know coming back from the counselor, the last marriage counselor and she was using words like separation and it's not like Mary is using words like separation. [00:22:11]

THERAPIST: Yeah.

CLIENT: And saying things to like... Chase asked me, "So, Dad, mom was saying something about the marriage counselor saying you guys might get separated or something."

THERAPIST: Yeah.

CLIENT: And I'm like, "Oh, that's really interesting that, you know, she said that to you." I didn't really engage in too much of that because I'm like... You know. So I said, "Well, it could be a possibility." But, you know... No there's almost this kind of sense that, you know, she's saying those words and I'm wondering if it's like... Part of me is wondering if it's like some kind of a tactic she's using to kind of like... You know, because I'm going to have to be the one that leaves. It's like, "Okay." I'm going to have to be the one that leaves. Well, I'm a full time student at Phoenix. I'm not really making an income at this point. So I'm thinking that is that... You know, my mind's just going to gamesmanship (ph) (inaudible at 00:23:11). And it's like, "Well, if you're really faced with the reality of separation, you know, how are you going to do that? So you're really not going to do it." [00:23:21]

You know, so let's just...

THERAPIST: Sure.

CLIENT: But I'm like, "Okay." You know, it's like I see the window is open or the door is open and it's like I'm going. I don't know how the hell I'm going to do it because I'm financially in the most vulnerable place I could ever be.

THERAPIST: Sure.

CLIENT: I'm like... And it's like I'm in such a position at Phoenix that I'm like... I don't want to leave this. You know, this is my future. This is where I'm going. So now it's just a matter of like, "Okay, now I've got this issue to deal with."

THERAPIST: Sure. [00:24:01]

CLIENT: You know, the practicalities of the reality of this, you know, it's like... You know, and for me, separation is not like kind of a trial thing. It's just like...

THERAPIST: A step. (PAUSE)

CLIENT: Yeah.

THERAPIST: But look how quickly...

CLIENT: I know. That's ridiculous. It's ridiculous how...

THERAPIST: ...how quickly you've moved, it's moved. You know, it's like really warp speed. You know, you came in, "I'm stuck. I'm stuck. I'm stuck," you know, right, not willing to even look at or even ready to talk about... You know, and now you're talking about separating...

CLIENT: Yeah.

THERAPIST: ...and how your old life is absolutely intolerable. I mean, it's... And it seems like your head is spinning. But it's been a pretty incredible... You've done an incredible amount of work in a short amount of time not without its emotional costs.

CLIENT: Oh yeah. I think that... Yeah. There's no way anybody gets through this thing unscathed.

THERAPIST: Sure.

CLIENT: I know that, you know... I get... In the end, I get out probably. But it's not without scars and damage. [00:25:03]

THERAPIST: Sure. Sure.

CLIENT: (SIGH)

THERAPIST: Two wounded children driving the car. (PAUSE) Tell me how you came up with that.

CLIENT: Well, you know, it's recognizing... You know, it's like we're both... You know, we're both just wounded people doing our best. You know, it's like I didn't intend to do this and she didn't intend to do this. But, you know, the adults that need to be driving the car aren't there.

THERAPIST: That's true. The... I don't know. I think the naming of that story in some ways is appropriate because it doesn't assign blame. If you're both two wounded kids driving the car and kids shouldn't be driving...

CLIENT: Yeah. [00:25:57]

THERAPIST: ...you know, it doesn't really assign blame and there's really only one outcome when you have two kids driving a car. It's going to crash.

CLIENT: Yeah.

THERAPIST: How old do you think the kids are?

CLIENT: (SIGH) They're... You know, for me, probably about two or three. And for her...

THERAPIST: And for her?

CLIENT: ...it's probably around four.

THERAPIST: Toddlers.

CLIENT: Yeah. Nobody should have left them alone in the car.

THERAPIST: No. (PAUSE)

CLIENT: So... (PAUSE) Yeah. You know, I recognize I was just sitting with a lot of sadness over the weekend, you know, just really viscerally (ph) feeling the sadness, not breaking into tears. You know? I feel like probably they're there. I don't know at this point really what's holding them back. You know? But...

THERAPIST: What would it be like to let them out?

CLIENT: (SIGH) I don't know because it's been so damn long since I've just cried over anything. I don't even remember. [00:27:03]

THERAPIST: Could you imagine? So it out be then pre... Could you imagine holding the two year old, the one year old?

CLIENT: (SIGH) (PAUSE) I can sort of visualize it in my head but I'm just like...

THERAPIST: Can you visualize your son as a baby? You have two sons. One of them. And what did you do when one of them cried?

CLIENT: Just held them, you know, let them kind of bury their head into my shoulder or something and whatever...

THERAPIST: And did you try to comfort?

CLIENT: Yeah.

THERAPIST: What did you do?

CLIENT: Just held them, rocked them, pat them on the back.

THERAPIST: Spoke?

CLIENT: Yeah. Probably.

THERAPIST: Did it work?

CLIENT: Sure.

THERAPIST: That's what you needed. That's what you need.

CLIENT: Yeah. [00:28:07]

THERAPIST: It's amazing how unabashed you can be with your children, right, when they're babies, when they're toddlers. You just do kind of what feels natural.

CLIENT: Yeah.

THERAPIST: Right. But what you forget to do for yourself and that's what you need.

CLIENT: Yeah, yeah, yeah. (PAUSE) Yeah. So the other issue that I feel like is there for me and it's kind of like really mixing up my head too is like knowing that... (PAUSE) You know, I feel like this whole, this image that I have of me coming to this awakening moment is almost like a baby bird dropping out of the nest. You know? So it's like I've just been sputtering all around, you know, trying to find my footing or my wings or whatever and it's just not a very graceful picture. [00:29:05]

You know? (LAUGHTER) You know? Not able to deal with emotion correctly and feeling like I'm just kind of floundering all over the place. You know, so in the midst of that, you know, I'm dealing with all of this anger and rage that I've never dealt with before and I've been able to find a voice and I've been able to speak it and, you know, to let everybody know that I can't so this anymore. You know? And it's like... And then just feeling in this place of like I'm just, you know, incredibly devoid of (PAUSE) you know, anything in my life, you know, friendship, intimacy. You know? All the sudden, you're like awakened to like friendship. You know? Here. You know?
[00:29:59]

So now I'm like, "Great." You know? I've got a friendship that I'm developing and it's like...

THERAPIST: It's like what?

CLIENT: It's complicated.

THERAPIST: Yes. It is.

CLIENT: It's complicated.

THERAPIST: Tell me about the feelings that you're experiencing in the friendship.

CLIENT: Well, it's like, "Gosh bless it." You know? It's like... It's what you would want...

THERAPIST: Sure.

CLIENT: ...you know, in terms of like an emotional friendship and it's like somebody that would actually talk to me and like... You know, it's... (PAUSE) And it doesn't have to be much. You know? And it's like, "Holy crap." You know, so I recognize that it's like... (SIGH) (PAUSE) So how much... And I can't deny the fact that it's had an impact on, you know, where I'm going and what this has been. You know, it's like I tried to separate all that out. You know? And it's like...

THERAPIST: Well, that's impossible. [00:31:01]

CLIENT: That's impossible. I can't do that.

THERAPIST: So tell me some more about the friendship and your feelings.

CLIENT: The friendship is... (PAUSE) You know, it's like... It's really like a bad plot from a miniseries or something. It's like, you know, two people find each other in almost identical situations. I'm like, "Of course you do." (LAUGHTER) Of course you do.

THERAPIST: So this person is also in a relationship which is ended. Yeah. Right. This is...

CLIENT: Of course you do.

THERAPIST: Well, that's why you found each other and that's why you get it. You get each other.

CLIENT: Yeah.

THERAPIST: Okay.

CLIENT: So, you know, we've become an ear for each other.

THERAPIST: Yeah. Sure.

CLIENT: And, you know, we're both in counseling, in the counseling program. So, you know, we're both working on our stuff. We're both encouraging each other to stand in our truth. And I'm like, "Oh my." (LAUGHTER) [00:31:57]

And it's wonderful.

THERAPIST: Sure.

CLIENT: You know, it's wonderful...

THERAPIST: Sure.

CLIENT: ...to be able to have a friend and a confidant.

THERAPIST: But?

CLIENT: But it's... (PAUSE) Now I'm in this place of like, "Damn it." Now I'm in this place of inauthenticity.

THERAPIST: How?

CLIENT: Because I don't want to be in this place of like denying or playing some kind of game like this doesn't exist. And it's like the more this friendship grows, the more I'm feeling like... (PAUSE) You know? And it's like not that I'm feeling... I'm trying to save...

THERAPIST: The more the friendship grows...

CLIENT: The more I feel like I'm, you know, hiding, being subversive. And I'm like I don't want to live like that. I've never had to live like that. You know? I've never done that.

THERAPIST: Because the feelings that you have... I'm assuming this is a woman. Towards this woman are probably turning romantic, somewhat sexual, emotional, intimate. Yeah because that's... [00:33:03]

CLIENT: Because that's what happens.

THERAPIST: Yeah. So, first of all, you're a human being. Congratulations. You can stop blaming yourself for being a human being.

CLIENT: Okay. That's one. Check.

THERAPIST: You are a human. Right? And that would not have been a possibility for you before because your mind would not have opened to that because you were still playing the role of Mr. Nickels.

CLIENT: Yeah.

THERAPIST: And now... So...

CLIENT: I mean, eight years I didn't do anything.

THERAPIST: Yeah.

CLIENT: Eight years. You know...

THERAPIST: Are you concerned that you will act sexually?

CLIENT: No. But what I'm concerned is that this will become the issue. And that's what I didn't want.

THERAPIST: Well, it's not the issue. But it complicates the issue and it's already complicated. So you can't go back to uncomplicating it.

CLIENT: Yeah.

THERAPIST: But what these sort of downfall of your marriage to Mary was, has been happening for a really long time. [00:34:01]

CLIENT: Oh yeah. It's not like I'm... It's not like I'm putting that in there...

THERAPIST: Sure.

CLIENT: ...and saying that this is the problem.

THERAPIST: Sure.

CLIENT: Or this was the cause.

THERAPIST: Right.

CLIENT: What I'm saying is that it's complicating it.

THERAPIST: It's complicating it. You know, the biggest issue... I guess my biggest concern for you that I would have for you in this is that you would fall for one another hard as you may be starting to and then if you do act sexually, you're not going to forgive yourself easily for that.

CLIENT: Yeah. No. And we've had the discussion.

THERAPIST: Sure.

CLIENT: And (PAUSE) I think that we're both, we both clearly see that.

THERAPIST: Sure.

CLIENT: We both clearly see that there's like enormous possibility.

THERAPIST: Sure.

CLIENT: You know, but there's also enormous amount of crap.

THERAPIST: Well, there's so much energy around it. I mean, there's energy around it and there's desire and there's longing and there's the fact that you get one another and it's a very powerful combination. [00:35:07]

Right? And I think...

CLIENT: Oh yeah.

THERAPIST: It's almost like two magnets.

CLIENT: Oh my gosh. Yeah.

THERAPIST: Oh sure. You know, and it's very, very difficult to resist the pull.

CLIENT: Oh yeah.

THERAPIST: Yeah. How are you doing with that?

CLIENT: (SIGH) (PAUSE) Well, I think I'm doing okay. I think that... (PAUSE) I can clearly see that, you know, being in a counseling, being a counselor and understanding, you know, the whole border issue, you know, understanding, you know, boundaries, it's like, "Yeah. This is difficult stuff."

THERAPIST: It is. [00:35:55]

CLIENT: And I feel like... (PAUSE) You know, for somebody who is as emotionally vulnerable as I am and have been the past couple of months, it's just like, "Wow." This would be really good for you to kind of get cleared up before you became a counselor. (LAUGHTER)

THERAPIST: Well, it's also energizing. It's a relationship that's energizing. It's (inaudible at 00:36:19)

CLIENT: I mean, it's doing everything...

THERAPIST: Sure.

CLIENT: ...for my neurochemicals (ph).

THERAPIST: Sure.

CLIENT: It's like, "Well, of course I'm coming back tomorrow because I'm getting my hit tomorrow."

THERAPIST: Sure.

CLIENT: Whatever. You know...

THERAPIST: And she is too.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: You know, and it's like, "Oh yeah. I clearly see that there's all kinds of, there are all kind of issues surrounding..."

THERAPIST: Yeah.

CLIENT: It's like... Well, yeah, first of all, it would be a really good idea maybe if we both kind of got our issues personally dealt with.

THERAPIST: Yeah. That's going to be difficult to do, isn't it? I mean, it's not... I wish I could tell you (LAUGHTER) that this is going to be clean. But it's not clean. It's complicated. You know? [00:37:03]

This person is not the demise of your marriage, had nothing to do with the demise of your marriage.

CLIENT: Yeah.

THERAPIST: Right. But, in some ways, you know, and I don't know a lot of (inaudible at 00:37:15) this person, this relationship is in your life for some reason.

CLIENT: Yeah.

THERAPIST: Right? And...

CLIENT: Yeah. I mean, there's too much like synchronicity. There's too much serendipity. It's like, "Oh my gosh." You know, it's like...

THERAPIST: Yeah. Do you want to talk about her a little bit?

CLIENT: (SIGH) (PAUSE) We're nearly the same age, you know, I think. (SIGH) Personality types, we're both ENFBs (ph) which could be another train wreck. (LAUGHTER) (PAUSE) Yeah. You know, fun. You know, it's... [00:38:05]

In a lot of ways, there's a lot like, "Well, if I could pick the opposite of my wife..."

THERAPIST: Sure.

CLIENT: "...you know, that would be pretty close."

THERAPIST: Sure.

CLIENT: (SIGH)

THERAPIST: She's in a relationship that's ending as well?

CLIENT: Yeah. She and her husband have actually gone through like some of the divorce stuff, you know, like drawing up papers and that kind of thing but they've never actually, you know... He's separated and he's been out living on his own for a couple of years. But, you know, there's... (PAUSE) Yeah. So I think she's been in this place of not being sure if she could let it go and that kind of thing. I think knowing that it's probably over...

THERAPIST: Sure.

CLIENT: ...but just, you know, some of her old childhood stuff come into play.

THERAPIST: Sure. [00:39:03]

CLIENT: And I think that's she's coming to recognize that she's somebody who (PAUSE) has been able to derive her meaning and self-esteem from placating narcissists. (PAUSE) So if I do everything I can to placate...

THERAPIST: Sure.

CLIENT: ...the narcissist, then I have meaning and worth. But you never get anything from a narcissist.

THERAPIST: Well, and something is echoing from your own story. We won't call you wife a narcissist at all. But, you know, in terms of the idea that if I'm good and I do everything right, then I'm going to get the love and affection and attention I deserve.

CLIENT: And there's clearly, you know, manipulative behavior going on.

THERAPIST: Sure.

CLIENT: You know, so we're going, we're looking at each other and like, you know, there's a lot of similarity in the story.

THERAPIST: Sure.

CLIENT: So, you know, it's just like, "Oh my." You know? So yeah. You know, we're a couple of lonely people. [00:40:03]

You know? But, you know, I think we also, you know, resonate... Not that she's Taoist, you know, but she's clearly supportive of whatever spiritual path, wherever I'm at and that's like, "Okay, could that be more opposite of where I'm from?" You know, just there's... Oh my gosh. This is what it feels like to be in a relationship with somebody who would just allow me to be me...

THERAPIST: Sure.

CLIENT: ...for me.

THERAPIST: And it's also... It's a new relationship.

CLIENT: Yeah. You know, it's got the...

THERAPIST: It's easy to sort of compare the new to the...

CLIENT: Oh yeah. I know.

(CROSSTALK)

THERAPIST: Yeah. It's...

CLIENT: ...that doesn't have twenty seven years of baggage and...

THERAPIST: But it's... It's allowed to be complicated, Seamus. You can't clean it up. It's just messy. Right? But in the messiness are some more powerful lessons for you about some of the things that you're looking for, whatever happens with your new friend in the future. There's some powerful lessons about what you need which is why it's such an attractive situation and what you're looking for and what you're not looking for. You're pretty clear on what you don't want as you finish picking through the wreckage and find the new train to get on. [00:41:27]

Right? This is in some ways teaching you what that experience might be like, what you want and what you need. (PAUSE)

CLIENT: (SIGH) Yeah. (PAUSE)

THERAPIST: You know, and it's okay to turn to one another for support as long as you're turning to others for support and you are. You know, you recognize the pitfalls. Right? If you're living in truth, and you are, it's about being honest with yourself. I think sometimes it's about when we are not honest with ourselves or the way we feel about someone else or sexual attraction or whatever that we fall. Right? [00:42:09]

If you're being honest with yourself and you're saying, "Okay. You know, I'm really liking this. I'm really... Here's the sexual aspect," you know, all of that.

CLIENT: Yeah.

THERAPIST: Then, in some ways, it's still complicated to deal with it but you're honest about it...

CLIENT: Well, yeah.

THERAPIST: Yeah. Which means you don't mess... You're not taken by surprise I guess is what I'm trying to say. When you're taken by surprise, oh, you've had sex and you wake up in the bed next to someone. You don't have to be taken by surprise. The feelings are all brewing.

CLIENT: No. Yeah. And, you know, I really... (PAUSE) I really don't see that happening. You know, I feel like... The potential is there.

THERAPIST: Yes.

CLIENT: I get that. You know, and I don't... (PAUSE) But the... You know, I think that the authenticity... It's like, "Look. We know."

THERAPIST: Sure. [00:43:01]

CLIENT: You know, we understand that there is an incredible attraction here.

THERAPIST: Sure. What's it like to have her be attracted to you?

CLIENT: Well, it's... You know... (PAUSE) It changes my paradigm.

THERAPIST: How?

CLIENT: It's like having somebody like think that, you know, I'm a good looking guy, it's like, "Wow. That's the..." That's incredible stuff. You know, it's like... To be attracted to me sexually... Wow. That's incredible. I'm pretty sure I don't even have an inkling of what that means. You know, it's like... So there's just so many old stories that are being like crushed.

THERAPIST: Sure. And what if she's not the only one? She's special and she's...

CLIENT: Yeah.

THERAPIST: ...kind of present now. What if she's not the only one who would be sexually attracted to you or would think that you are attractive?

CLIENT: You know, I feel like... Okay, I've got enough problems in my life right now.
(LAUGHTER) [00:44:05]

THERAPIST: No. But I mean in the new train ride, in the new story, for your new story.

CLIENT: Yeah.

THERAPIST: After you've picked through the wreckage. What if she's just a symbol, an important...

CLIENT: Yeah.

THERAPIST: I mean, she is a friend. It's a genuine... I'm not saying it. But what if it's just like kind of a whispering of what's out there for you, the possibilities?

CLIENT: (SIGH) (PAUSE) What does it feel like? Or what are you asking me?

THERAPIST: I'm asking you if you can imagine what if this is a hint of the possibilities to come that you could find other people, other women who would want to connect with you in intimate ways?

CLIENT: It seems a little overwhelming.

THERAPIST: Okay.

CLIENT: No? It's like that reality is such a new reality that it seems almost overwhelming.

THERAPIST: Okay. That's fair. [00:45:01]

CLIENT: It's like somebody who's been in the dark so long that when you step out into the light it's kind of like...

THERAPIST: (LAUGHTER) You know, I'm laughing because I have a... I think I told you I have a good friend of mine... He's a psychologist. Most of them are. It's very odd to have lots of male psychologist friends. And he and his wife of twenty five, twenty six years got a divorce recently. And he started dating again. And he has all of the... He is shocked... Women throwing themselves at him. And he's kind of a modest guy but he's an attractive guy and he's smart and he's, he listens and he does all these things. I, who came to the marriage game late in life, and he, who just left the marriage game, we have all these interesting stories to share. And he sort of surprised, pleasantly, you know, and he disclosed to me that he and his wife hadn't been intimate in five or six years, you know, he said because there were too many power struggles around that and he's like, "And I wasn't doing that." [00:45:59]

But, in a short amount of time, and it's not that he still doesn't hurt over... He's got two teenage girls. So hurt over the fact that, you know, this wasn't, the picture that he had for his life and, you know, I think, if it were up to him, in some ways, he would still be married. But he's been very kind of shocked and surprised at the number of women who are not only strongly attracted to him but have sort of chased him down with a stick. And he's like, "This is not the dating game I left twenty five years ago." And I'm like, "No, it's not." And I think, in some ways, it's been good for his ego. Right? He's not somebody who's going to kind of abuse the privilege. But it's been very good. I imagine that my friend will get married again someday because he sees himself as that type of guy. But, in the meantime, you know, it's opened kind of a whole new world to him. And these are not just women his age. These are women of all kind of ages, you know, from thirty on up, you know, which he's also been surprised because he's in his early fifties. [00:47:05]

I'm like, "They don't care. I don't know why you thought they did." (LAUGHTER) So I guess... You know, who knows if we're going to predict your story. But I think that you're married for twenty seven years and you see yourself in a particular sort of way. But that's doesn't mean that that's the way the world sees you and that is not especially the way the romantic world sees you. You know, and you don't that. (PAUSE)

CLIENT: Yeah.

THERAPIST: What do you make of that?

CLIENT: It's just so... It's so mind boggling right now. The whole trip has been mind boggling.

THERAPIST: Yeah.

CLIENT: And it's been mind boggling fast and I can barely get my head around it. Now I'm like, "Oh, and you want to complicate it even more? Oh great."

THERAPIST: Sure. But I guess, you know, to contextualize it, your world is changing rapidly. You know, I've had several, you know, several of my male psychologist friends who have gotten a divorce (LAUGHTER) and found kind of, you know, what it was like to kind of go out there and many of them have found it to be empowering. [00:48:11]

You know, seeking intimacy still, you know, finding intimacy, not just sexual intimacy... I'm talking about... You know, because these are guys who are, you know, psychologist guys, feeling guys.

CLIENT: (LAUGHTER) Weirdoes.

THERAPIST: No. (LAUGHTER) You know, but in some ways the type of man in counseling who is interested in emotional intimacy and an emotional connection is like a damn aphrodisiac for many women out there who've been dating more of your sort of traditional character. That point of connection is deeply important for many people. So, you know, I guess in putting this in context, you're in the pit of hell now. Right? [00:48:57]

However, you're not going to stay here. Just like you didn't stay stuck. Right?

CLIENT: Yeah.

THERAPIST: You know, you're working through it, you're recognizing the old mold. You've kind of broken it. It doesn't fit. Right? And this woman's presence in your life should be a powerful symbol to you about the possibilities. Right? So you've left a very lonely, lonely marriage. Right? And on your way out of it, you're finding that it's less lonely on the way out of it, in some ways, than it was in it. (PAUSE) Does that ring for you at all?

CLIENT: Oh yeah. I mean, I get it.

THERAPIST: Yeah.

CLIENT: I get all of that. You know? I think that the... (PAUSE) You know, I'm good with like out here.

THERAPIST: Yeah.

CLIENT: You know? I think where I'm at right now is struggling with this transition.

THERAPIST: Sure. Well, you're in the wreck now. [00:49:59]

CLIENT: And it's like... You know, I had some ideas about how I wanted the wreckage to be. I had some idea about, you know, can we crash this thing in a controlled way?

THERAPIST: No.

CLIENT: You know?

THERAPIST: You can never control the crash.

CLIENT: And I'm like, "Shit."

THERAPIST: Because if you could control it, it would look how for you?

CLIENT: That this part would have waited until I was clearly out of the wreckage.

THERAPIST: The new friendship? Yeah. No. And, again, it's... Crashes are messy. They're not clean. You know, but in some way, I mean, the... You can think of the friendship as a beacon of light in some darkness, not her per se. But the friendship and the possibilities.

CLIENT: I understand what you're saying. Yeah.

THERAPIST: Yeah. (PAUSE)

CLIENT: You know, yeah. Because, you know, there's... I understand and there's clearly issues around, you know... (PAUSE) Not that I'm wanting to jump from one relationship into the other. You know, it's like, "Yeah. You know, we need to... You know, there needs to be some space and some cooling..."

THERAPIST: Sure. [00:51:11]

CLIENT: "...off time and looking at things rationally and things like that." Because it's like, you know... I don't know who I am coming into this. It's pretty clear she doesn't know who she is. So it's like maybe it would be kind of good for me to figure out who you are first before you try to sort out with somebody else. You know?

THERAPIST: Sure.

CLIENT: So I feel like I'm still... I've still got a lot of work to do. You know, so... (PAUSE) I won't engage in that. That doesn't necessarily mean that I want to like cut that off either.

THERAPIST: Right.

CLIENT: But it's like can we do this responsibly? Can we be like mature adults? I'm not sure. I hope so.

THERAPIST: Well, that's where honesty and conversation comes in.

CLIENT: And it's incredible. It's like, "Oh my. This is how you have a relationship. Oh my. We can talk about anything. I can talk about nothing." [00:52:07]

You know, with my wife, I can talk about everything. So I'm like... (SIGH) And again, I'm not like... I'm not wanting to spend any time going, "Well, if that would have happened twenty seven years ago," or whatever.

THERAPIST: Sure, sure. Well...

CLIENT: If I would have had the skills that I have now. But I'm like...

THERAPIST: Or the expectation and twenty seven years ago, some of that was probably there.

CLIENT: It probably was.

THERAPIST: You may not remember it. But some of it was probably there.

CLIENT: Yeah. You know, and it's like... (PAUSE) Shit happened along the way.

THERAPIST: Sure.

CLIENT: You know, so it's like... (PAUSE) I can't change that either.

THERAPIST: How are you doing right now?

CLIENT: (SIGH) I suppose I'm doing okay. A little bit better...

THERAPIST: You're sorting through the shit.

CLIENT: Oh my. Oh, I know. And, again, I'm not saying this with (PAUSE) too much sincerity. But it's like, you know, when I allow myself to go back to the place of like, "Well, you can just stay here and pick up where you left off. You can figure out how to stay in this mess if you want to," it's like I could clearly see how, you know, you could get to the point of suicide thinking about that.

THERAPIST: Yeah. I don't think you can. I think you're past the point of no return with that. I think, to use your words, you put the nuclear option on the table. I don't think you could go back. You can't go to Easter mass. You can't go back to that.

CLIENT: I just kind of... Yeah. And as much as I thought...

THERAPIST: Yeah.

CLIENT: ...that I wasn't Wil E. Coyote with the dynamite, I'm pretty sure that I fucking blew it all to hell.

THERAPIST: Well, you did. But it was kind of coming.

CLIENT: Yeah. I know. It's just that, you know, I happened to be the one that precipitated it. You know, I'm not sure that Mary ever would have. But I'm like... I just couldn't take it anymore.

[00:54:01]

THERAPIST: Sure. Well, you couldn't take it anymore and you can't go back. So that's not even a possibility.

CLIENT: No.

THERAPIST: And, in some ways, that's a decision made, that's a door closed. Whatever that looks like you're still figuring out. But that's a decision made.

CLIENT: Yeah.

THERAPIST: Right? And now the train has fallen off the track and you are picking through the wreckage. And from the wreckage, you'll take the things with you that you need from this.

(PAUSE)

CLIENT: Yeah. Whatever that is.

THERAPIST: You're going to figure that out, I know.

CLIENT: Yeah, yeah. So anyway, thank you. (LAUGHTER)

THERAPIST: Powerful analogy. You know, I know it doesn't feel like you're doing well and I can't name your experience. But wow. You know, since we have been taping, if you ever want to go back and hear sessions one or two... [00:55:01]

CLIENT: I don't think I want to right now.

THERAPIST: You may not. But I'll save them for you. So if you ever want to, you will be able to see. You're going to go like, "Damn. I did all that?" I'll be like, "Yeah. Pretty quick."

CLIENT: Well, I know it's been pretty damn quick.

THERAPIST: So we are okay for next week for 12:30. Okay. So I will be coming from somebody's presentation. I will run down here and we will be on. Thanks for your flexibility again.

CLIENT: Yeah. Okay.

THERAPIST: Hang in there and like I said you can always drop me an e-mail between sessions. I'll give you a call.

CLIENT: Yeah. Thanks for that.

THERAPIST: Okay.

CLIENT: Alright.

THERAPIST: Take care of yourself.

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: How are you? What's happening?

CLIENT: I don't know.

THERAPIST: Okay.

CLIENT: Where was I? And I'll try to bring you up to speed.

THERAPIST: Okay. So let's think.

CLIENT: (LAUGHTER)

THERAPIST: Last time...

CLIENT: I'm...

THERAPIST: ...was around Easter. Is that right? Where we didn't do Easter. We talked about kind of not doing Easter...

CLIENT: Yeah, yeah.

THERAPIST: ...the way that you did, the kids coming home...

CLIENT: Yeah.

THERAPIST: ...you know, you're session with the counselor.

CLIENT: Yeah.

THERAPIST: We talked about that. Yeah. I think that's... And you kind of... Moving towards the end of this, I think we talked about kind of your feelings towards your friend, your developing feelings towards your friend. (PAUSE)

CLIENT: Yeah. I think that... (SIGH) (PAUSE) Yeah. Another counseling session today.

THERAPIST: Okay.

CLIENT: I'm walking away from that kind of feeling like a cornered animal.

THERAPIST: Okay. Tell me what happened. It sounds pretty heavy. [00:00:59]

CLIENT: You know, I went in there and it was kind of like...

THERAPIST: Yeah.

CLIENT: I tried to express what I was feeling and where I was at and it was just like, "Yeah, you know, I know that there's this, you know, pressure for me to get out of the intersection." You know? And... (PAUSE) And there's, you know, this push.

THERAPIST: And you're saying this?

CLIENT: No. That's (PAUSE) Mary and the counselor. There's kind of this push to, you know... And I'm trying to express... It's like, you know... I feel like I've been in this place of great emotionality.

THERAPIST: Okay.

CLIENT: You know, the last six or seven weeks and certainly early on... And, you know, I recognize, you know, it would be nice to get to a place of equal out, a little equilibrium with all of that to be able to feel like I'm making a rational decision. [00:01:55]

THERAPIST: You look hurt.

CLIENT: I feel a little bit.

THERAPIST: What happened today that was hurtful?

CLIENT: It just... It's just all about feeling like okay... (SIGH) (PAUSE) I'm not sure that anybody's really going to listen.

THERAPIST: Okay. Did you feel attacked in session today?

CLIENT: Yeah. A little bit.

THERAPIST: Okay. Tell me a little bit about how it went.

CLIENT: You know, the... I had decided, at some point over the weekend, that I was like, "Well, you know, maybe the best thing for me is to really look at this." You know, and I had a conversation with a couple of friends. And I'm like, "Do I really want to walk away without feeling like I did everything I could?" (PAUSE) So I, you know, made this attempt on Saturday morning and it was just like, "Can I do this? Can I go in this place? You know?" And so I'm like... I made coffee for her. I went in and, you know, we had kind of a rough discussion the night before so it was like, "Hey, I'm sorry that it worked out that way and it ended on that note," and, you know, tried to employ a little bit of, you know, Seligman's) positive psychology. [00:03:09]

THERAPIST: Okay.

CLIENT: And it's like, "Alright. Let's come up with five things that, you know, are kind of positive things to say." You know, and I think I tried to employ that and it kind of eased things up a little bit. And then there was a family wedding...

THERAPIST: Okay.

CLIENT: ...or a friend's wedding that day. And I recognized that, you know, it's like we have this public marriage.

THERAPIST: Sure.

CLIENT: So the way that I kind of pulled out of choir and pulled out of Easter and all that kind of stuff kind of left everybody feeling awkward. So this was an opportunity for me to engage in like, "Okay, let me go back into this and just, you know, say, 'Hey...' Maybe I don't have to say anything at all. But like I'm back here and it's like, you know..." Maybe this is, you know, the look of a guy who's trying.

THERAPIST: Sure. [00:03:57]

CLIENT: So I went to the wedding and that went fairly well. And I had to go sing. I was up in the choir loft and I was like, "Okay. I'll just focus on the music, focus on the singing, focus on my role doing that stuff." And it went fairly well, I thought. And then I had a couple of hours downtime between the wedding and reception. I went and had coffee with my boys and came home to play in this wedding cello and violin. And then I went to the reception. And I was doing okay until like after the dinner and the dance began.

THERAPIST: Okay.

CLIENT: And then it was just like... (LAUGHTER) In my mind, it was kind of like one of those movies... I don't know who the director is that does this kind of... Well, there's a lot of them. But it's just this like hand held camera. It's jerky. You get a lot of quick images and it's all coming at you and it's just like, you know, one happy couple after another happy couple dancing and having fun.

THERAPIST: Appearing happy couple [00:04:59]

CLIENT: Well, okay. Yeah. I mean, whole lots of people having fun dancing, you know... (PAUSE) You know... This was an Irish wedding. It was raucous and it was wild and crazy and I'm just like (PAUSE) feeling more and more constricted as the evening was going on. I think I stayed for probably about an hour but I just got to this point of like...

THERAPIST: What were you feeling watching all this?

CLIENT: A lot of sadness, a lot of, you know, knowing that I'm sitting next to somebody, we're in like, the feeling is not even there for me.

THERAPIST: So really acute grief...

CLIENT: Yeah.

THERAPIST: ...as you're watching what you wanted, what could have been.

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: And then going out on the dance... You know, I was going to... I said, "Hey, you know, I've had enough. I pretty much have to go home." And she goes, "Well, can we do one dance before you go?" And it was just really uncomfortable.

THERAPIST: I can imagine. How was that for you? [00:05:57]

CLIENT: Um... (PAUSE)

THERAPIST: What did it feel like?

CLIENT: I was trapped.

THERAPIST: So trapped...

CLIENT: I was trapped physically because I was up against the stage and all these people were, you know, surrounding us. It was like, "Okay. I can't even run if I want to." But that was the feeling of, "I need to get out of here," kind of feeling.

THERAPIST: And you were dancing and feeling what? (PAUSE)

CLIENT: (SIGH) I didn't want to be dancing.

THERAPIST: Disingenuine maybe?

CLIENT: "I'm just going through the motions here. I'm a guy going through the motions and I don't like this at all. I don't like this feeling. It's like..." (SIGH)

THERAPIST: Sounds like a visceral reaction.

CLIENT: It was.

THERAPIST: Yeah.

CLIENT: You know, I could feel it. And I'm like... So I'm like... (SIGH) You know, this internal thing... It's like, "Is this real? Is this real or is this something that I'm imagining? Am I trying to make it this way?" You know? So I'm really kind of fighting with that. [00:07:01]

But I'm like, "Damn it. You know what you're feeling and your feeling is you don't want to be dancing."

THERAPIST: Sure. Because dancing is a symbol of what it's not, what you wanted it to be, and as you're watching all these couples feeling like an imposter out there. Yeah.

CLIENT: Yeah.

THERAPIST: Painful.

CLIENT: Yeah. You know, and I know what's going on. It is that, you know, she's looking up at me and she's looking for anything, she's looking for any sign.

THERAPIST: Sure.

CLIENT: You know, and I'm just like... It just felt to me like... It was such a clinging moment.

THERAPIST: Yeah.

CLIENT: It's like... Nothing really endears you to somebody as much as clinging does.

THERAPIST: Well, it's like you're in your own personal pain of not being able to survive the, you know, visceral reaction to...

CLIENT: Yeah.

THERAPIST: ...grief and not being genuine and she's looking like, "Can you just give me a sign that we can work through this and be okay," and you can't. So you're in your pain and then you're watching her in yours. I'm just imagining how torturous and painful that is.

CLIENT: Yeah, yeah.

THERAPIST: What's it like to talk about it?

CLIENT: (SIGH) It's really... It's really hard.

THERAPIST: Yeah.

CLIENT: I've just been... You know, I went home and I was in just such sadness, such deep, deep sadness about this, you know, and I'm just like, "Oh my."

THERAPIST: You've moved from anger to grieving.

CLIENT: I think so. I really think so.

THERAPIST: Yeah.

CLIENT: Just... A couple of different times, it's just like... Not that I've just broken down and sobbed. But, you know, clearly the tears are coming. And...

THERAPIST: Well, there are all kinds of ways to grieve.

CLIENT: I know. (PAUSE) I don't know that but...

THERAPIST: I can tell how sad it is for you. I mean, you look really hurt. And, you know... So the wedding was what day?

CLIENT: Saturday.

THERAPIST: Okay. And then it sounds like you tried to make attempts like, you know... And, you know, I always say you should work at it until you can't do it anymore so you have no regrets.
[00:08:59]

CLIENT: (SIGH) And I felt like am I really being genuine while I do this? You know, and... Well, clearly, clearly, I'm going to have to sit here and do a fake it until you make it kind of attitude. And I'm like, "I don't know if I can do that." I don't know if I can bring that.

THERAPIST: You know, I wonder if I could give you a different frame work because I don't know if it's faking it until you make it. It feels like that. I can appreciate that it feels like that. But I wonder if it's kind of... You know, right now it's very tangled. You're tangled together and your lives are tangled together. But it's kind of about becoming detangled, in a way. In a way that you're not jerking away. It's a slower dance than that. It's a different dance.

CLIENT: I'm not sure that they're going to let me do a slow detangle.

THERAPIST: Well, what happened in the session?

CLIENT: (SIGH) So I'm trying to explain... And Mary is like, "Well, I know that we really didn't have a chance to talk about it over the weekend or after Saturday. So I'm just wondering if we can use this time with the counselor to talk about what your feelings were about the wedding."

THERAPIST: Okay. [00:10:05]

CLIENT: And I'm just like, "Well, okay." So, you know, I'm kind of laying out those feelings and laying out my experience. (PAUSE) And then... I don't know. I'm trying to remember details. But... (PAUSE) I know that, you know, where we came to is like that position of like, "Well, how long... So Mary, how long are you willing to allow for this indecision?"

THERAPIST: That's an interesting question.

CLIENT: Yeah. And, at one point, I thought, "Hmm. I thought we were supposed to avoid the why questions." But, you know, I was (PAUSE) talking about, you know, the activity of, you know, doing five positive things. I know Mary was talking about five positive things. [00:10:59]

And, you know, it seemed like he was really trying. You know, I know he was having some difficulty with that. And the counselor just fired over. It was like, "Well, why? Why would it be so hard for you?" And I'm like, "Okay. Well, maybe it's because the last eight years just happened in my life." You know, I just of laid that out for her. But I'm just like... I just kind of felt like...

THERAPIST: At attack.

CLIENT: Yeah. You know, I'm just like... So I was on the defensive after that.

THERAPIST: Did you say you felt attacked?

CLIENT: I let everybody know that I was feeling pressured.

THERAPIST: Okay.

CLIENT: I felt like I was coming in trying to explain that, "Hey, I'd like to do this in a little bit more rational pace. I'd like to move a little bit slower on this." And the counselor basically said, "Well, you know what you know. And, you know, whether it's two days or two weeks from now, you know what you know." I'm like, "Wow. Really? You know me that well?" I'm like... [00:12:03]

THERAPIST: It kind of pissed you off too. (PAUSE)

CLIENT: Maybe a little bit. I don't feel like there's been an alliance made with this woman.

THERAPIST: Okay.

CLIENT: You know, so it's just been sit down and deal with these issues. I'm like, "I don't even know who the hell you are." And I'm sitting there, "You know, I don't have anything for you as a counselor."

THERAPIST: Sure.

CLIENT: And now I'm feeling under attack and I'm like, "This is not working real well for me right now."

THERAPIST: Seamus, what if it's true? You know what you know but you're not ready to share it.

CLIENT: You know, I think more than one friend has asked me that question.

THERAPIST: Yeah. I mean, what if that's true?

CLIENT: What if that's true? Then I feel like... (PAUSE) You know, and I've been able to say to other people...

THERAPIST: Yeah.

CLIENT: It's like, "You know what? If they're pushing me, you know, if they're pushing me to make a decision..."

THERAPIST: Right.

CLIENT: "...about separation, it's like it's going to mean, you know, that I'm going to have to go out and figure out how to support myself because I don't have a job right now. I'm a full time student." I'm going to have to figure out how to support myself and be a student and figure all of that out. And all of my emotional pie is going to go into survival mode. [00:13:15]

And I'm not going to have anything to want to devote to working it out in the relationship. And I'm going to feel under attack or under siege whether that's the intention or not. And that's not going to put me in a place of like wanting to figure things out in a rational manner. And I will figure it out. And I will be out.

THERAPIST: It's like you've been backed in a corner, you know, and you're coming out with your dukes up.

CLIENT: Yeah. I guess and it's like, if this is clearly it, you know, clearly, I get no room for this.

THERAPIST: Yeah.

CLIENT: And I get no, you know, I get no say in how we proceed forward with this, then... [00:13:57]

THERAPIST: Well, and what is Mary saying about this? You feel like she is also pressuring you to make a decision?

CLIENT: Yeah. You know, and she was kind of saying that in the counseling session. And clearly the terms are... The terms are, you know, you can stay here for the summer but you're going to come down to the bed.

THERAPIST: Oh my goodness. "You can stay here but you have to sleep with me." Wow.

CLIENT: "Because this is too humiliating for me, for my sons to come home and to know that you're sleeping upstairs." It's like, "Okay."

THERAPIST: Well, that's definitely a pressuring statement.

CLIENT: It's very controlling. It feels very... You know, this is how it's going to be. You know? Which is always the way it's been.

THERAPIST: Well, but let's back up for a second because she can't make you come down to the bed and the two of you own the house. So she can't... You know, I don't want to introduce the ugliness...

CLIENT: I know, I know.

THERAPIST: But she can't... You're not going to come down to the bed unless the two of you decide that you're going to come down to the bed. And you're not going to leave unless the two of you decide at, you know, you are going to leave. [00:15:05]

I mean, this is not... The two of you own the house and, you know...

CLIENT: I know.

(CROSSTALK)

CLIENT: And it's just like because you happened to be, because you happen to have the paying job right now...

THERAPIST: Sure.

CLIENT: ...and you happen to have this position of... And I... Yeah, I get it. It's complex. It's not as cut and dried as that.

THERAPIST: It's not.

CLIENT: I mean, it's very complex.

THERAPIST: It is. It is. But if we... If you were working full time (PAUSE) do you think that would change your decision or the pacing of your decision?

CLIENT: Probably.

THERAPIST: Okay. So my guess is that's where the counselor is calling you out.

CLIENT: I think so.

THERAPIST: And you aren't, you know... Whatever you've made internally, that's not a decision you're ready or wanting to share this early. But it sounds like not only the counselor but it sounds like Mary is also pushing for a decision.

CLIENT: Yeah. [00:16:01]

THERAPIST: Yeah.

CLIENT: You know, and I get, in her world, that this is, you know...

THERAPIST: Sure.

CLIENT: ...hugely unexpected and... But really not.

THERAPIST: Right.

CLIENT: I mean, we've had some conversations over the last week that just like, "Wow. Really?" You know, it was like...

THERAPIST: Meaning?

CLIENT: Oh, you know, I think that she's felt for years that I'm going to leave her. And it's like, "Well..." (LAUGHTER) (PAUSE)

THERAPIST: Well, what?

CLIENT: You know, whatever. You know, I was shut down and couldn't communicate and she was shut down and couldn't communicate. So we're like... (LAUGHTER) One of us... You know, if one of us would've had a stick and like been able to knock the other one around, maybe... I don't know. But I'm like... (PAUSE) I have a friend who's kind of a mutual friend of the family. But I know that over time, you know, this friendship has gotten a little deeper than probably what most people would expect.

THERAPIST: You and this friend or she and this friend? [00:17:07]

CLIENT: Me and this friend.

THERAPIST: Okay. So it's, you know, a choir member's wife who's an elementary teacher in the parochial school, attached to the school or to the church and, you know, we share some common interests. We like gardening. Whatever. We're Abraham Lincoln buffs. You know, so common interests in, you know, we enjoy sharing those interest back and forth. Well, I know it's been a point, you know, that... I don't have an emotional relationship with my wife. But I have an emotional relationship with this person. So there's a rub there.

THERAPIST: With Mary?

CLIENT: Yeah.

THERAPIST: Yeah.

CLIENT: And there always has been...

THERAPIST: Okay.

CLIENT: ...you know, kind of thing. And I get that. You know, but it's like... (PAUSE) But she was sure that that was a sexual relationship and I'm like... [00:17:55]

THERAPIST: So she's sure you've been having an affair.

CLIENT: So it's like...

THERAPIST: Did you know that? Did you know that that's what she suspected?

CLIENT: No. No and I'm like, "Wow, wow." And who knew all this time?

THERAPIST: So she thought you were having an affair and never said anything all this time.

CLIENT: And I'm like... So I mean that in itself is almost like... But, on the other hand, I from my chair was feeling like she and Lisa were having an affair anyway. So...

THERAPIST: Has that come up? (PAUSE)

CLIENT: (SIGH) You know, I have used the language that I feel like I'm the third person in a three person relationship. You know, it feels to me like I've been living in a house where there's been an affair going on for seven years. [00:18:57]

THERAPIST: Have you asked?

CLIENT: No.

THERAPIST: Do you want to know?

CLIENT: No.

THERAPIST: No. Okay. (PAUSE) This is a new state for you. You feel ganged up on...

CLIENT: Yeah.

THERAPIST: ...right, kind of pushed to the corner...

CLIENT: Yeah.

THERAPIST: ...you know, sad at the same time, defensive, you know, like you have to defend yourself and now you are being forced to make some decisions quickly.

CLIENT: Yeah. And I feel like... Hmm... You know, so... (PAUSE) I'm like, "Okay, I'm the guy, you know..." Okay. Both of us have been in this relationship for eight years like this and, you know, I'm the guy that broke first and I said, "I can't do this anymore." And, you know, that was like six or seven weeks ago. And it's like, "Okay, you get exactly two more weeks to figure it out or you're out." It's like... (PAUSE) (SIGH)

THERAPIST: Well, you know... And although I can appreciate you're feeling like that, she can't kick you out. Right? She can't kick you out. [00:20:07]

CLIENT: Well, and I... (SIGH) I don't want to go down this road but I know, I think the law in the state of Illinois says that she can't kick me out...

THERAPIST: No.

CLIENT: ...if I don't have a job and not supply me with any income.

THERAPIST: Well, she can't kick you out because the two of you own the house together. This is not a domestic violence situation. Now, sometimes, you know, you would want your own space and I get that. Before you kind of give into to kind of feeling pressured to make a decision, keep a couple of things in mind. One, in your mind, from all the things we've been talking about, and kind of correct me if I'm wrong, you've made a decision. But you haven't made a decision about the timing of revealing that decision. And now you're being pushed into pushing your timeline up.

CLIENT: Yeah. And I get that, you know, actually having the reality of making a decision makes things a lot more clear.

THERAPIST: Sure. [00:20:59]

CLIENT: You know, so it's like is this really what I want to do?

THERAPIST: Right.

CLIENT: Is this really what I want to do?

THERAPIST: You thought you were going to have more time, you know... And, you know, it... How do I say this? Seeing several friends through their respective divorces, male friends, you know... I hate to even say this. But I want to prepare you in some ways for the ugliness that comes when the decision is made. You want it to be and expect it to be and, you know, many men do, you know, sometimes it's a gender thing, not to generalize, but rational. But the breaking up of a twenty seven year marriage, there's nothing rational about it. It's a completely emotional experience. And your sadness and grieving... You know, I don't know if you're surprised by that. But there will be a lot of it because it means it's an ending of who you thought you were, the things you said you wanted, the life you pictured for yourself, what do you do financially... You know, you came from a relatively secure financial position and your spouse is working. Now you have a lot to think about. [00:22:15]

You know, there... You have options. But now you have to consider them. And that's something... In a six to eight week timespan, it's huge. But before you panic, you don't have to get out your house. You know, it might be comfortable, more comfortable if the two of you were

living apart. But you don't have to get out of your house. She can't make you get out of your house. The two of you share the house. Right? So that doesn't have to happen that way. You know, it's something that, you know, a lot of times we say that when we feel hurt or angry and, in some ways, I get her perspective as well. "If you're done, let's just be done." Right?

CLIENT: Right. [00:22:55]

THERAPIST: But it's not that easy. It's never going to be that easy. This is not going to be a quick process. It's going to take probably the final kind of disentanglement, if that's a word, is going to take a couple of years emotionally, assets, all that stuff. So sit in it for a while. Your emotions from last week to this week are different. Feeling this pressure, feeling ganged up on... I urge you to say, "I feel ganged up on. I felt like you're not hearing me." Right?

CLIENT: Yeah. And I was able to say that.

THERAPIST: Good. But it did force a conversation that you might not have had. Right? It may have called you out before you were ready about this decision. Right? But, in many ways, you are making, you are kind of internally, from what you've talked about, made a decision. You're not ready to reveal it yet though. Is that correct?

CLIENT: (SIGH) I think so. I mean, you know, the... Again, the implications...

THERAPIST: Sure.

CLIENT: ...are huge.

THERAPIST: Sure. It's the logistics, the implications, all of that...

CLIENT: You know, it's like... You know, I look at all of this over here and it's like, "Alright. You know, to a certain degree, if I'm estranged from my kids... I'm already estranged from my kids. Just in speaking my truth, I've already estranged my kids." [00:24:09]

THERAPIST: Is that true?

CLIENT: To one degree or another. You know, my middle son calls me and we talk and that relationship seems fairly stable. My youngest son, like, we never really talked all that much anyway, certainly phoning and texting... He's super busy with what he's doing. I don't think that that really, you know... I think the relationship that's the hardest is my daughter and, you know...

THERAPIST: Tell me about that.

CLIENT: Yeah. You know, that I, you know... I was the apple of her eye kind of thing. So, you know, I know that that is greatly impacting my decision making process and like...

THERAPIST: How?

CLIENT: You know, because I will go there. I will go... It's not worth all of the pain, you know, that she's feeling. Or it's not worth all the pain that, you know, it's causing to everybody.
[00:25:11]

THERAPIST: You mean to leave. But it's there. You know, like all the pain, it's there. You have uncovered what has always been there. It's like counseling, right, where you don't necessarily cause your clients pain but you often dig stuff up that's there. So it's there. Right? It's... You know, this is not going to be undone. Right? So saying, "I've changed my mind. Let's make it work."

CLIENT: Oh yeah. You...

THERAPIST: Yeah.

CLIENT: You can't... It's like... And I always get in that scenario...

THERAPIST: Yeah.

CLIENT: ...where it's like, "Okay. Okay. So it's not worth it. What do you got to do?" Well, you've just got to go back into the way it always was.

THERAPIST: No. What would you say to your daughter if you could?

CLIENT: I called her up and we had an hour and a half conversation. And I'm just like, you know, apologizing, "Sorry this is as difficult as it is. It's hard for me to be in the place. But I, you know, I recognize, you know, years of not being open and honest and, you know..."

THERAPIST: Good for you. [00:26:15]

CLIENT: You know, I really tried to lay it all out there for her.

THERAPIST: And how did she receive it?

CLIENT: (SIGH) You know, she was able to say things, you know, that she's hurt and upset that, you know, "I always knew when I was hurt and upset, you know, who I would go to. But, you know, now I'm hurt and upset and I don't know who to go to, you know, because the guy I'm hurt and upset about is you." So...

THERAPIST: No. This situation is hurting her.

CLIENT: I know.

THERAPIST: You know...

CLIENT: I know. I've taken a huge amount of the blame for this and I'm doing it. You know, I continue to buy into that story and I'm allowing that story to happen. [00:27:01]

THERAPIST: Why?

CLIENT: (SIGH) I think ultimately it's like deep down I don't want to hurt anybody. (LAUGHTER)

THERAPIST: Seamus, the situation is hurting people.

CLIENT: I know.

THERAPIST: You are not hurting people. You know, a couple of things as I see... You know, I know how painful this is. I know how painful this is not only looking at you and hearing it. But I know how painful it is because I lived it. It's not the same situation. But I definitely lived it. You're having an open dialogue with your daughter who's struggling and you're struggling. It's not where you start the dialogue. It's the process of the dialogue. And it's hard. But the fact that you're having a dialogue and now the whole family will struggle with figuring out what this means and who we are as a family. But the process of the dialogue and the fact that you care enough to have the dialogue and to communicate, right, you know, you have to in some ways trust the process. [00:28:05]

Right? You know, you can tell her and your son, "This is painful. Right? I can't live this way anymore, right, but this is painful. I don't want to be doing this. But this is not a truthful existence." However you explain it... And you can hear what she has to say. But the fact that you're communicating about it... You can't change the fact that it's painful for her. But you can't change the fact that it's painful for you either. Oh my. I still remember how just watching my parents go through all this pain and then we're in pain. My older brother's at school. My younger brother and I are at home. My parents are splitting up. And it was a whole painful family existence. Right? And it was rocky. I won't tell you it wasn't rocky for a while. However, my relationship with both of my parents and every relationship is different definitely, you know, got worked through. And it's because you love your children. You love them enough to have a dialogue with them. Right? And so taking all the blame on yourself is not honest because this is not a situation of finger pointing. [00:29:11]

That's not honest. It's a situation that, you know, we... You know, this didn't work. Here are some reasons why it didn't work. But it's not all Seamus' fault. Seamus is the one who said, "It's not working for me anymore."

CLIENT: And he's... You know, and the comeback is, "And he's also the guy who's not willing to put any energy into making it work again."

THERAPIST: Well, maybe. Maybe not.

CLIENT: Yeah.

THERAPIST: Right? I mean, this is what you and Mary are in the process of deciding. But taking all the blame on yourself, one, it's dishonest. It's completely dishonest. Right? You know, from everything we've talked about, this marriage hasn't been a healthy marriage for a really long time. Right? It's just that you're not willing to live with it anymore. That does not make you the bad guy. It's easier in some ways if you take the brush and you paint yourself as the bad guy because then you have some control over the things that are happening. "Seamus' the asshole. Seamus' the bad guy." [00:30:09]

But it's not the truth. Right? That's why people do it because, in some ways, it gives you the control. You can say, "I'm sorry for causing you pain." You can take it onto yourself and you think you're making it easier. But that's just as dishonest as living in a relationship that you don't want to be in.

CLIENT: Hmm. Interesting.

THERAPIST: It's not the truth. You know, and I have many conversations with my parents. Right? My dad was probably willing to be a little more honest than my mom. My mom was like, "Some of it's your business and a lot of it's not." But I wanted to know what happened. You know, why did this happen? I wanted to know for myself. I wanted to know for my interest as a budding counselor. I wanted to know... I think that's why I'm so interested in couples and write about couples and do couples counseling. And I wanted to know for myself before I got married, right, what happened. And my perspective on my parents' separation because they never got divorced, right... [00:31:07]

What has changed over time, right, from my late teens to early twenties, to my early forties where I am now, my perspective has changed. Right? But my relationship with my parents, my ability to talk to them about it and to kind of look at it and to even see how their relationship changed over time, you know, has been a developmental, in some ways, healthy experience. But you can't do that if it's not honest. Right? Stop taking all the blame. It's not... You're lying. It's just another lie. Take the parts that belong to you.

CLIENT: I think I'm trying to stay with that. But that's, you know... So I try to stay in my, you know, part. [00:31:55]

THERAPIST: Sure, sure.

CLIENT: But that's the only story that gets heard.

THERAPIST: Your story or...

CLIENT: That, you know... The narrative becomes, "You shut down in this marriage."

THERAPIST: Okay. Well...

CLIENT: And I keep trying... You know, it's like, "Yeah. But, you know, from my side of the couch, what it felt like is you shut down."

THERAPIST: You both shut down.

CLIENT: Yeah. We both shut down.

THERAPIST: Well that was the contract.

CLIENT: And I'm like, "Let's not do the blame thing here."

THERAPIST: Well, you both shut down. That's the contract. That's how you were able to stay together this long. That's the contract. If you don't talk about the serious things and we don't look how broken it is, we just, you know, continue to live our lives this way. And that was the agreed upon contract for a long time. Right? And now you're looking at the contract and you don't like the contract anymore. Well, people can change their minds about the terms of the agreement. It's just painful. And you can always say it's painful. Right? You know, "Your mother is not the bad person. I'm not the bad person. It stopped working. It stopped working for many, many reasons. You know, it stopped working." [00:32:57]

You can decide, Seamus, if you want to go all out and give it a try. And you can communicate honestly through the whole thing and say, "I'm trying. It doesn't feel right," or, "I'm trying. It feels dishonest," or, "I'm going to give it a try. Right? But my trying may not look like how you want it to look." (PAUSE) Right? It's... You're in the painful, the most painful part of it. But if you continue to point the finger at yourself and say it's all Seamus' fault, that doesn't... You think it's helpful in the beginning because it allows you to have a measure of control. But it's really not helpful because it's not true. You know, we can't go back to that falseness of it's all Seamus' fault. Yes, you shut down. And she shut down too because that's what people do when they get hurt. You know, if you think about it, you've been shut down for years to protect yourself. You know, she shut down by seeking Lisa and you shut down by becoming solitary. (PAUSE) It's not easy. How are you doing with all of what I just said? [00:34:03]

CLIENT: Oh, I'm with you on it. Really, I am. You know? I continued to get to this place of like... (PAUSE) You know, and is it just anger? Is it the little boy who's just too hurt, you know, to get beyond the place of like, "I don't care." You know, it's like... I can't bring myself to want to put the work into it to make it work.

THERAPIST: It could be you're just done.

CLIENT: You know, because it's like (SIGH) I know that she's up here, trying to hang onto just, you know, the bare threads of the relationship. And it's like, "Well, maybe if that was really the

only issue.” But then it’s like, you get underneath the surface and it’s like... I’m like trying to imagine what my life looks like, you know, staying and moving forward in that relationship. And it’s just like, “My gosh.” [00:35:01]

THERAPIST: My gosh what?

CLIENT: I just... You know, it’s stifling. It’s claustrophobic. It’s, you know... I can’t imagine, you know, how we, you know, we figure that out. You know, and is it just my lack of desire? Is it just my hurt? You know? And, again, you know, have we processed that? Does it feel like I’m really just reacting from a place of, you know, just being angry and hurt? Maybe it is. But I’m like... It doesn’t change the fact that that’s what I feel.

THERAPIST: Sure.

CLIENT: And what I feel is... What I keep saying and it doesn’t... Nobody wants to hear it. And I get that. It’s not a popular thing to say. I haven’t got anything. You know? [00:35:57]

THERAPIST: The emotional well is dry.

CLIENT: And I’m supposed to, you know, I’m supposed to sign up. I’m supposed to stay signed on to that. And I’m like... And just trust that if you do that in good faith, it all comes back.

THERAPIST: Well, I don’t know about that. I don’t know that that’s where you have to trust. You know? Whatever you choose to do. Okay. Let’s say you decide, you and Lisa decide, “Okay. I’m going to give this six months. Okay. Or I’m going to give this four months or whatever and I’m going to try,” but you’re honest throughout the trying. Some days trying... You know, I do a lot of couples work. And some days, it’s absolutely hopeless and the hopelessness that I feel... And I’m not talking about you and Lisa specifically...

CLIENT: Mary. But that’s okay.

THERAPIST: Mary. Why do I keep saying Lisa? Oh my goodness.

CLIENT: Well...

THERAPIST: (LAUGHTER) Where did that come from? You know, but... You feel the hopelessness of the couple and it’s palpable. And you think, “Oh my. You know, I’m not doing any good. This is not doing any good.” And then something shifts. Okay? [00:37:07]

If nothing shifts, you and Mary have an answer. Right? So you’re not telling me you’re ready to move out tomorrow. Right? That this... You know, you’re also saying, “I don’t know if I have the emotional energy to do this.” But you still got to do something, I think for yourself, I think for yourself, I think for your kids. You have to do something. Whatever the something is, you have to do something. Whether it’s you can commit to going to couples counseling once a week,

right, and saying your truth there. Whether it's you're trying positive psychology. It doesn't matter if you feel a hundred percent in or two percent in or five percent in, right, you're just going to kind of observe the process. "How much do I have? Does it change for you?" Because, in your changing, Mary is changing too. She's already changed. Right? She's already changed to accept the possibility that this might not work. Right? [00:38:01]

And her reaction is, "Get out." Right? Even though you feel that and you feel the neediness. So you have to decide for yourself even if you don't have the emotional energy, what do you need... If the end result is you're going to go, what do you need to going away that takes care of you that you are not stabbing yourself to death? (PAUSE) You know, I... You know, my own parents, you know, said they were separating, then nothing happened for months and then my mom kicked him out. I remember because my dad was downstairs helping me with my homework and we heard this crash and she was taking all his stuff out to the car. And, as a seventh grader, I didn't really... I was very pissed at her. But, as a grown up, I realized... I kind of get it. "You've said you're separating. One person doesn't want to separate. The other person's like, 'Look, you've got to go because I need some self-protection here.'" Right? [00:39:01]

And they separated and then they did some marriage counseling. And then they decided to try again so they moved back in. Right? And it didn't work and this time my father left. Right? And although they left... I was very active with both parents. I stayed with both. My brother and I stayed with one one week and then the other. So they were always both involved. But it took them a while to figure out what is going to look like. And it was tense for a while. And then we figured out what it was going to look like. Right? But it wasn't clean. It's not going to be clean. You're not packing up leaving tomorrow.

CLIENT: Yeah. And I can't move back down.

THERAPIST: No. (PAUSE) No. Not today. You can't see that today and maybe never. But it certainly can't be by force.

CLIENT: Yeah. Because that's what it feels like right now.

THERAPIST: Sure.

CLIENT: It feels like it's by force.

THERAPIST: The kids are coming back to stay with you over the summer? Is that what the issue is? (PAUSE) Yeah. Okay. [00:40:03]

And tell me... Are you staying in one of their rooms?

CLIENT: My daughter who's not living with us anymore.

THERAPIST: Okay. And so she's not coming back for the summer. Okay. So what might that picture look like for you?

CLIENT: I don't have a problem with it. But evidently it's a big problem for her. You know, it's like, "Okay. I just sleep up here." But I get the fact that, yeah, it's making me comfortable but it's not making her comfortable.

THERAPIST: Nobody's going to be comfortable. You're not going to be any more comfortable sleeping in that bed than she. It's an appearance and the appearance has been blown wide open. Right? So moving back down there is not going to change a thing. It's just going to mean you're angry and resentful. Right? You know, that... You know, maybe one day you decide to move back down and give it a shot. But that's not today and maybe you never decide that. But that can't be forced. It's not going to work. It's not going to happen. [00:41:01]

(PAUSE)

CLIENT: Yeah, yeah. And I feel like, you know, if the pressure keeps up on the other issue, then I feel like, then it puts me in a place where I'm not making rational decisions. Then I feel like I'm a trapped animal.

THERAPIST: Well, sure. But I think you can be clear about that and say, "Look. Pressuring me and making ultimatums doesn't help. And I'm not moving out. I'm not ready for that yet. You know, that's not going to work. Right, this is a process and it's going to take some time." And, you know, everybody has angry and hurt feelings. The public face of the marriage has been blown up. The private... The kids know. The private face has been blown up.

CLIENT: Yeah. [00:41:57]

THERAPIST: There's no more keeping up appearances. It's no more about keeping appearances. That's kind of done. You know, so moving back down to the marriage bed, it doesn't change anything. It makes everybody uncomfortable.

CLIENT: Right.

THERAPIST: You know, so she can't make you leave. And I'm saying that because you're going to feel pressure to leave because you're taking on the role of, "I'm the asshole who's making all this..."

CLIENT: Yeah. (SIGH)

THERAPIST: But that's not true. She can't make you leave. It's just going to be uncomfortable. But it will be uncomfortable no matter what you did. We're in the range of uncomfortable. If you decided, "Yes. I'm going to give this one hundred percent," it'd still be uncomfortable as hell. It'd still be painful as hell.

CLIENT: Yeah, yeah. (PAUSE) Yeah. (SIGH) (PAUSE)

THERAPIST: This really sucks, doesn't it?

CLIENT: Pretty much.

THERAPIST: Yes.

CLIENT: But, again, I need to be in the story of this is not all my fault.

THERAPIST: It is not. Do you remember what you called the story last week?

CLIENT: Yeah. [00:43:01]

THERAPIST: What was the name?

CLIENT: Two kids riding the train.

THERAPIST: Two wounded kids driving the train. Right? So two wounded kids. Nobody has more power whatever it feels like. Are driving the train and kids don't drive well... So the train crashed.

CLIENT: Yeah.

THERAPIST: Right? So it's not her fault and it's not your fault and two people contributed to this relationship. Right? There are lots of faults to go around but that doesn't make the picture any clearer. Yes. Could you have been more open? Yes. Could she have been more open? Could she have worked on her sexual abuse? I mean, there are so many factors here that it's really not that simple. Stop contributing to the story that Seamus the asshole shut down and now he's leaving because that is not the truth, it's not helping you, it's not helping her, it's not helping anyone. [00:43:55]

CLIENT: Yeah, yeah. (PAUSE) Yeah. So and then I need a narrative for (PAUSE) "But you're not willing to jump back into this either."

THERAPIST: Well, you're not. You know? You're not. She wasn't willing, in some ways, to kind of continue working on sexual abuse issues because she's not. And some of it is because she's probably not capable. It's too deeply painful. It's too threatening. She couldn't and she can't. But you're still committed to going to counseling and you're not leaving the house. You know... You are communicating with her. And strangely, you are communicating more than you ever have.

CLIENT: Oh yeah. We know that.

THERAPIST: Yeah. So you're not trying in the way that she thinks trying looks and that you think trying looks. But you haven't left either and you haven't said it's over either. You know, she can say that too. It's not just your decision, Seamus. [00:45:03]

You know, so when the counselor's like, "You need to make a decision," no, it's kind of a two people decision. Right? It's... Lisa could say, "I'm done."

CLIENT: Mary. But that's okay.

THERAPIST: Why... I've... It's always been Mary. (LAUGHTER) Where did I get Lisa from?

CLIENT: Well, I threw Lelena in there. It's my friend who...

THERAPIST: Lelena your friend. Oh there's a Freudian slip.

CLIENT: I know.

THERAPIST: That's where Lisa came from.

CLIENT: Yeah.

THERAPIST: Sorry. Two L names.

CLIENT: (inaudible at 00:45:27)

THERAPIST: Yeah. I don't want you to listen to that on tape.

CLIENT: (LAUGHTER)

THERAPIST: You know, it's two people's decision. Don't... And so, when you hear that, say, "Hold up. Hold up here." Right? That's not honest. Okay. "I'm the person who definitely introduced the idea that I can't continue in this way. But the two of us have a decision to make here." You don't have to leave that house. It's just more uncomfortable, right, especially since you don't have anywhere to go and it's your house. The two of you have that house. [00:46:03]

CLIENT: Yeah.

THERAPIST: You buy into the, "You're an asshole. It's my fault. You're leaving." Right? Then you're going. It's true. You'll figure out a way and you'll go and it don't know that that's the most honest way of dealing with it.

CLIENT: That's what I'm feeling and it's like, "Don't back me into that place. Don't back me into that story."

THERAPIST: Yeah. Don't allow yourself to be backed into the place. Right?

CLIENT: Okay.

THERAPIST: You don't have to allow yourself to be... You can be honest and say, "I'm feeling backed in and I'm not going to stay backed in. Right? I'm not. I'm not ready. I'm not ready. Or this is not what I want." You can understand why Mary wants a decision. I completely get that. In some ways, it's a fair question but that's not where you're at. And if you don't have the financial resources and that's not where you're at, that's not going to happen. [00:47:01]

You know, she could also decide to go. Right? So I'm... You know, expect it to be messy and ugly and painful. You're touching it but you're not in that part yet. You're in the uncomfortable part, the hurting part, the grieving part. But then there's the angry part and the, you know, all of those kind of ugly little parts. They're there. They're always there. (PAUSE) So don't let yourself be backed into the corner. Just don't go in the corner. Say, "I'm not going in that corner." (PAUSE)

CLIENT: Yeah, yeah. (PAUSE) Well, I feel like, yeah, whatever the outcome of this is, I've clearly made it enough of a case that going back is no longer a possibility.

THERAPIST: Going back to what was will never happen. Right? But we don't know what is. We just... You know, we talked before about putting the nuclear option on the table. [00:48:09]

It's like World War II, you know, where it's been destroyed and you're in the middle of the wreckage. Right? The two of you have crashed the train. Now what? Is there something? Right now, you don't know. You can't touch that there's something. And maybe there's nothing. Right? But we don't know yet because it's still too soon. Right? And what trying looks like today doesn't look like tomorrow. Right? Trying can just be saying good morning every day. That can be what trying looks and feels like to you because that's all you've got and that has to be okay because that's all you've got. (PAUSE)

CLIENT: Yeah, yeah. And we'll see what happens with that because I... (PAUSE) My gut level feeling is that that's not going to be accepted very well. [00:49:07]

THERAPIST: I don't think so. But, you know, none of this is easily acceptable because you guys want two different things. Right? This is not a... This is a lose lose temporarily. We're in a temporarily lose lose. It feels like a zero sum game. Right? But it's more complicated than that. (PAUSE)

CLIENT: (SIGH)

THERAPIST: Right? So I guess I would say stand in your truth and your honesty about accept responsibility for the things, for yourself. But don't accept responsibility for the stuff that's not yours. (PAUSE) None of this is easy. It's pretty fucking shitty. [00:49:57]

CLIENT: Yeah. It is. So... (SIGH) Yeah.

THERAPIST: And Seamus, don't forget. If you have to... Is your business completely dissolved?

CLIENT: Pretty much.

THERAPIST: Right. But if you had to make a living...

CLIENT: Yeah.

THERAPIST: You don't think so?

CLIENT: It's complicated.

THERAPIST: Sure it is.

CLIENT: It's complicated because the situation that I've worked out. Transitioning out of that business, the boys that used to work for me, you know, are running my tools and my shop for me.

THERAPIST: I get it. You know. But, you know, you could think about working for them. You could think about teaching part time.

CLIENT: Oh, I know. There's a lot of different options.

THERAPIST: Sure.

CLIENT: And clearly, if I get to that place where it's like there appears to be no other solution than for me to move and, again, I'm hearing what you're saying... You know, but...

THERAPIST: Quietly make inquiries because all it does is give you ideas of options. Then you feel less backed into a corner. [00:51:07]

CLIENT: Yeah.

THERAPIST: Because right now it feels like, "I don't have a job. She's got all the financial resources and you're going to school." You have always been able to take care of yourself and your family. That's not going to change. It's a messy time. Quietly make inquiries. A little bit here, a little bit there. Because then you are lining up logistics should you need to line them up. (PAUSE) You know, in some ways, it's scary. But it's more empowering. You're not taken by surprise if things get ugly, you can't stand it, then you have options because you have some plans in place. And if you don't need to exercise them, fine.

CLIENT: Yeah. And I probably need to exercise them anyway. You know, I probably... Even if we stay together, it's like, "Well, yeah." You know, this makes sense for me to be... [00:52:05]

You know, I was counting on the business to supply some income, you know, some part time income to this endeavor while I was doing it anyway. That doesn't seem to be working out. So I need to be... I need to be doing something anyway. I get that.

THERAPIST: Remember. You always (inaudible at 00:52:21) well. You know, so it's complicated. It's stressful. It's painful. But you always reinvent yourself very, very well. You have options.

CLIENT: Yeah. I have options and I don't have to operate from the scarcity mentality.

THERAPIST: That's right.

CLIENT: And I know that. So...

THERAPIST: You've got many options. You can stay there. You can stay with a friend for a while. You can get a job and go... I mean, just think through your options because far... Less than it being scary, it becomes more about planning. And this isn't a plan you have to kind of share with anybody. You can kind of...

CLIENT: Right. [00:53:05]

THERAPIST: ...just do it quietly so that you are prepared whatever happens. It's a way of taking care of yourself.

CLIENT: And a friend told me, you know, and keeps calling me. It's like, "Have you gone and seen a lawyer yet? Have you gone and seen a lawyer yet?"

THERAPIST: Yeah.

CLIENT: "No. I have not."

THERAPIST: Well, you know, that may be on the list but it doesn't have to be first on the list. Right? It's not bad advice. But livelihood, of course emotional health, livelihood, lawyer, maybe even in that order...

CLIENT: Yeah. It's hard.

THERAPIST: Yeah. It's a lot.

CLIENT: It's a lot.

THERAPIST: How are you doing right now?

CLIENT: (SIGH) I think I'm doing okay.

THERAPIST: Yeah.

CLIENT: I think I'm doing okay. It's just like... You know, I didn't need the good news of like it's only going to get worse before it gets better.

THERAPIST: Sorry. [00:53:57]

CLIENT: Yeah. You know, like I'm living in a kind of fairy tale world or something.

THERAPIST: I don't think that you are. You know, I don't think that you are. But I want you to be prepared. Right? In some ways, I think that... And I've seen this with many of my friends. They... Good men who care about their wives but it's not working, who want it to go better than it does because they want low conflict and it doesn't typically work that way. It just doesn't have to absolutely wrench you and destroy you in the process. You know, and that happens in some ways by preparing yourself. You know, and I don't want you to be unprepared.

CLIENT: Yeah. (PAUSE) (SIGH) Yeah.

THERAPIST: You know, but this is not... This is not Seamus the asshole who started this. You know, it was going to come to this point at a certain point in time probably for you it could have happened ten years ago. It could have happened ten years from now. As long as you were going to decide you weren't willing to pretend anymore and you can't... It was killing you. It was killing you. [00:55:11]

You know, remind me. One day I'll give you some of those early sessions. It was killing you.

CLIENT: Yeah. I know. I know. And I wouldn't have been in here if it wasn't. So...

THERAPIST: Right?

CLIENT: Yeah.

THERAPIST: Will you keep me posted? If something happens and you need to get in touch with me, right, e-mail me. I'll call you.

CLIENT: Yeah. I will. I will. Are we on for...

THERAPIST: Our regular time.

CLIENT: Now, I... I, you know, get, you know, the reality of this, you know... There's going to have to be a termination at some point.

THERAPIST: Well, there is and there isn't. There is... There will definitely be a temporary break as I, you know, go into labor. I am here... Let's see. There's one Tuesday we're moving. So there's one Tuesday I'm taking off. But I am here until I go into labor. (LAUGHTER) [00:56:05]

So that could be anywhere into August.

CLIENT: Okay.

THERAPIST: And then after I take off probably about twelve weeks, then I'm back. Right? So, you know, so we'll have a break. It doesn't... You know, as long as you're a student here, I can see you.

CLIENT: Yeah, yeah.

THERAPIST: So, you know, and I have... You know, the nice thing about our motto here is that we do have the ability to do long term counseling. So don't worry about that.

CLIENT: Okay. No I just...

THERAPIST: You're taking summer classes, right?

CLIENT: Yeah. I think. (LAUGHTER)

THERAPIST: Yeah.

CLIENT: I hope so. Oh yeah. The amount of stuff that's gone on in the last eight weeks is just...

THERAPIST: Unreal.

CLIENT: ...mind boggling.

THERAPIST: Mind boggling is a good word for it.

CLIENT: So...

THERAPIST: Check in with me if you need to please.

CLIENT: Yeah, yeah. I... Yeah. I got into a couple places where it was just...

END TRANSCRIPT