

BEGIN TRANSCRIPT:

THERAPIST: It's so pretty. Did you cut bangs?

CLIENT: Yeah. I got a haircut.

THERAPIST: So . . . ?

CLIENT: I felt good about our couple's session on Wednesday, so that's good.

THERAPIST: How so? You talked about sex?

CLIENT: No, we didn't, actually. We talked slightly about the sleeping situation. That was the first part Dr. Farrow brought up and she suggested that we not try to sleep in the same bed for a month, although she said if there was a night that I felt okay, that I could try it if I wanted. [00:01:05] So I think that was a tiny bit frustrating because it's been close to three months. Not that there is a right or a wrong amount of time and I'm sure it's different for anyone after something like that, but I said to her that it seemed to me that part of a healthy, normal marriage would be sleeping in the same bed. She said, "I realize that's your idea of a healthy relationship, a marriage, but it's different for all kinds of couples. A year from now you could still not be sleeping in the same bed and you could be seeing me or not seeing me. It might just be . . ." (sighs) So on the one hand, I guess it feels nice to know that she takes what happens seriously enough to not pressure or say "this is what a typical marriage looks like and you should be striving for it;" not putting on any types of pressures or goals. [00:02:16] On the other hand, I think for me, someone who is pretty typically goal-oriented, it's hard to have nothing in mind to be striving for. I guess I also feel like the idea of sharing a bed, if you're married, to me it seems like the norm. It seems like something you would even take for granted. That seems just like eating dinner with your spouse would seem or sharing a bathroom – (chuckles) all kinds of things that would just be part of what you pretty implicitly signed up for when you got married. So I think that's a little tough. [00:03:00]

THERAPIST: You didn't sign up for getting assaulted, so that changes the expectations and what I think is important, though, is that you're figuring out what feels right to you. Not what Dr. Farrow thinks, not even what I think, not what society thinks or doesn't think, but what is right for you and Ivan and in a negotiation of what feels right and comfortable for you and what feels right and comfortable for him; and I don't think there is a right answer about that.

CLIENT: I think that's tricky for me because, on the one hand, as I was trying to describe, our relationship is kind of bizarre right now because on the one hand, we'll have dinner together and we'll talk about our day. We'll relax together and we'll have fun. It will be wonderful and I feel like we're really moving forward and this is good. Of course, I wish it had happened sooner, but it feels really positive. [00:03:58] And I'm feeling more and more inclined to kind of confront my own discomfort with certain physical parts of the relationship and stuff like that, because that feels important – not the most important thing in the world, but it feels important to continuing to

make things healthy and establishing or achieving what we had originally hoped for. So there is that, and there is the other part where we have these conversations and we do couple's counselling and then sometimes in those moments, of course, we're talking about the websites and we're talking about the assaults and we're talking about really troubling things, obviously. In those moments it feels like a completely different relationship and it feels hard to go back and forth sometimes. I think I'm getting a little better at integrating that they are both true and that one doesn't overcome the other. [00:05:00]

THERAPIST: My guess is that's probably where Dr. Farrow is coming from and is almost just trying to give you permission or have you acknowledge that it's okay if you take another month. It's part of her not just wanting to shut out that that happened and pretend it didn't. Do you know what I mean? And so you could say back to her if you wanted to, "I'm actually not doing that. I am ready to have him back in the bed and I'm very aware of what happened last time. It's going to be scary." But my guess is that's where it's coming from, to really keep honoring the fact that that happened and have it be part of the story right now as you're figuring out what to do.

CLIENT: Yeah. It did. We tried two different nights this past week and I initiated it. Ivan is never asking, which is still good. So the first night, it was okay and then I woke up really early in the morning. [00:06:02]

THERAPIST: "Initiated it," like sexual contact or just to be in the bed together?

CLIENT: No, like "would you like to sleep in the bed tonight? That feels okay to me." So the first night I felt okay, and then I woke up really early in the morning, at some point, and I just felt scared and I said, "Ivan, I'm sorry. Would you mind moving to the couch?" and then I fell back asleep for a while and then, still pretty early in the morning, I said, "Ivan, why don't you come back to bed? I feel okay." So we tried that and that was not ideal, but it was okay. And then last night Ivan slept in the bed and he came to bed after I did, but it was okay. I didn't wake up scared during the night. And so part of it surely is still being scared from what happened, but also it took me a long time to get used to him not sleeping in the bed initially, and I'm wondering if it's not just getting used to someone else being in the bed again. That's part of it. [00:07:01]

THERAPIST: Sure.

CLIENT: But I do wonder if we can have more nights that are positive and I feel okay. That would be a good thing to build on.

THERAPIST: You may need just the exposure to the once-frightening situation over and over and over again and sort of start to breaking the fear, breaking that that automatically is frightening, to have it be that you kind of live through it a number of times where nothing happens and everything is fine to let the anxiety calm down. I think that's part of what you've been saying. "It almost feels like I just have to get used to this again."

CLIENT: Right. I don't think I feel good about the part (sighs) . . . I think I could go a year and say, "I'm still really angry that this happened and I'm still really scared and I'm still really . . ."
[00:08:00] I think that could easily happen, but I don't think that would really be helpful to either of us. I guess I would like to say that. I don't think I've ever felt like I'm punishing him, but I don't want to keep using that as a reason.

THERAPIST: I wonder, Ramona, do you feel like you could share that, what you just said, about your thoughts about what Dr. Farrow is saying? Can you share that with her? "I hear what you're saying, but I kind of feel like this is where I am." Just sharing yourself, because I think that would be helpful for her to know when you're just thinking about something or you're thinking something isn't actually where you are.

CLIENT: I think I did, kind of. I think I did; and she said, "I understand this is frustrating." Also, it feels like sometimes in our sessions, clearly we've got some really important things to talk about and we did spend the majority of the session talking about the websites and processing that; and that felt really helpful because we were getting stuck at home in our conversations.
[00:09:07] That was really great. It was a really great use of time. And because of that, because there are those big things that we're still trying to work at, it feels like smaller things, like Ivan sleeping in the bed or has it been close to a year since we've had sex, things like that, that I'm already embarrassed to talk about and have kind of been taught that it's inappropriate to talk about, don't feel as important or appropriate to bring up. But I don't know anything about couple's therapy or marriage, I guess, in general; but I get the impression, I get the thought, the intuition that not sleeping in the bed together for a really long time or not having sex for close to a year, that even though there are things that may be going on and that there is a real reason that it's not happening, that could become a problem in and of itself.

THERAPIST: You mean in other words, does it take on a life of its own, aside from the fact that there were problems that caused you to stop having sex to begin with? [00:10:02]

CLIENT: Right, that you can't just say because there were legitimate problems that caused that, that that isn't an issue. And I also don't think it's right if we're trying to move forward and we're trying to gradually – I don't know that we just dismiss it because it's awkward to talk about in couple's counselling or because there are bigger things.

THERAPIST: No. It's the very place that you want to be talking about it and what a lot of couples talk about in couple's counselling is sex and things like that, intimate parts of their lives that are working and not working. I think I would just keep framing it, though, as this is a question to be asking yourself. I don't really answer for you. This is for you to ask yourself where we are and what are we ready to be talking about? [00:11:00] Let's say a couple comes in and the man has had an affair and there is devastation. So they start working on the betrayal and what wasn't working in their relationship that that happened. It takes a lot of work on that to get to a place where you're interested in having physical contact with each other again, right? That is not to say that maybe one of the factors was that they were both so scared to have sex with each other, that they didn't for a long time. That has to get addressed in their couple's therapy also if

the relationship is going to work, but if the question is “are you muscling through trying to reach that problem?” without having created a real platform of feeling like, “Yeah, I want to work on that problem. I feel safer. I feel better in this relationship. We’ve done a lot of processing with this stuff. I don’t feel as angry about the betrayals. I’m ready and wanting to start working on this other part with you;” versus feeling like you need to get to that because that’s what married couples do and we had better look like a married couple really soon or else there is a major problem here. [00:12:13] Do you know what I mean?

CLIENT: I do. I do. And I think we’ve actually not done a ton of things that a typical healthy married couple would do because we’ve acknowledged . . . I mean, Ivan lived somewhere else for three months. I think we’ve done some significant things.

THERAPIST: That’s what I mean. So you’re wanting to work on bringing up sex in couple’s therapy. Is that coming from a kind of pressured place, like “we should be doing this,” or does it feel like, “No, I feel actually like we’ve really done a lot of trust building in processing?” Not that you won’t continue to do that, but enough has happened that there is a foundation now where you’re feeling like you might want to work on intimacy. [00:13:00] Do you know what I mean?

CLIENT: Right. And I feel a mix. I feel like Ivan and I have worked harder and harder to integrate things that we should be doing as a healthy couple – things like talking about our days when we get home or sharing a meal together. This is the point of the conversations three times a week, to tackle those issues. I don’t know. I guess I feel like we’ve come pretty far there.

THERAPIST: You’ve done a lot of work on it.

CLIENT: Yeah, and it’s been consistent and I feel really good about that. But when it comes to the physical part, we’ve done some, but I guess I don’t want . . . It’s so uncomfortable to talk about. I guess I don’t want another year to go by and the most we’ll ever do is kiss or make out and it’s because these really serious things happen; because I think it could be, on the one hand, kind of fair to say that. It’s not made up. It’s a real trauma in the marriage, but on the other hand, I think at some point you don’t have to pretend that it didn’t happen or completely let it go, but you also can’t be like, “We can’t do this, this, this, and this because . . .” [00:14:12]

THERAPIST: Absolutely. Or it’s funny that the trails could be, for a long time, the leading reason why you’re not having sex, but you could be reaching a sort of tipping point where they become – and I know this is a weird way of being – but almost a kind of way of avoiding sex because it’s scary or avoiding working on intimacy, too.

CLIENT: Oh, no. I think that’s very clear in what Ivan describes sometimes. He talked about the websites last week and he describes it as – this sounds bizarre; it was bizarre – but he said it’s almost like white noise, like the website, like a platform for thinking about things that he wanted, but wasn’t allowed to talk about with me and didn’t feel like he deserved to talk about with me, couldn’t address, couldn’t bring up. It was a terrible thing to even want and Dr. Bourd has described it as a depersonalized state. [00:15:11] He is so much thinking about that with me and

it sounds bizarre and I'm a little reluctant to accept it, but it highlights to me Ivan doesn't feel okay about approaching that topic and I don't either. I wouldn't talk about that normally anyway, but I almost feel like – and this is me; I'm not blaming Dr. Farrow – but I feel like I'm waiting for permission, like it's okay to sleep in the bed. You're okay enough to do that. It would be okay if you felt comfortable and you wanted to have sex that would not be you being a doormat or us saying that the trails are okay; and I don't know what to do with that. [00:15:59]

THERAPIST: I definitely don't think it would be, for one, as long as you were feeling like you were interested. It is being a doormat if you're feeling like, "I don't want to. I don't want to go anywhere near him, but I feel like I should for his sake," or for some other prescriptive societal sense. That's different. If you're feeling like, "I want to try this, even though I'm terrified of it. I don't know what to do and it's hard to even talk about it, but I kind of feel like this is worth working on for me, for where I am." That's not being a doormat. You've had plenty of time. I think there are ways even working on your sexual life could help some of the anxiety of the betrayals calm down. I know that sounds a little strange to say, but if you and Ivan knew you were being more intimate and could just work on that with each other, then the reasons for the things going into bubbles that have nothing to do with each other, start to disappear. [00:17:06] You're actually daring and working on bringing it into the relationship and sharing it more, Ramona. So I think absolutely it can be helpful if you're feeling like, "That's kind of where I am. We'll keep working on this other stuff, but we've done a lot of work on it, enough that it feels like that's worth trying.: I wouldn't want it, for example, like you start to kiss him and you feel like, "I can't do this. I can't do this. This is traumatizing," or something along those lines. "All I can think about is the list" or things like that. But also with that, Ramona, people don't know. When couples have had whatever form of betrayal or hurt happen between each other and they start trying to connect again, whenever they do in a physical way, it's up and down how it goes. It's not a linear process. You can have one day that it feels great and it is exciting and another day where it doesn't feel good and you're brought back to old stuff and you have a conversation about old stuff again. [00:18:09] But I've heard you say that you're ready to start working on this.

CLIENT: We made out over the weekend and it was nice, but I was really scared. Yeah, I was really scared.

THERAPIST: Do you know of what?

CLIENT: It was nice because Ivan and I just started kissing and then we started making out more, but he would ask, "Is it okay if I put my arm around you like this or if I do this?" and that was nice and I felt good about that, but I also said, "Ivan, I just don't want you to get mixed messages or the wrong message." He was like, "That's okay. I understand what this is and what it isn't and I understand that it doesn't mean . . ." because I don't want him to ever think that that means . . . I think that's really been one of my worst fears. [00:19:02] I don't know – that the websites were okay or, even if he wasn't really thinking about the thought of having an affair, that it wasn't hurtful.

THERAPIST: I don't think he is going to forget that. I don't think it means that at all.

CLIENT: I also don't want him to think . . . Something that has come up again is, "Ivan, I wish you would write something for me. I would really love to hear positive things. "

THERAPIST: Write me a love letter or something.

CLIENT: And it's hard for him. He's like, "I've sat down a number of times and I just don't think I could ever write something that's complete or right." It sounds typical of Ivan, but it's also kind of frustrating because I'm clearly not asking for a . . . It could be a sentence. (chuckles) It doesn't have to be the only thing he ever gets to say to me and it has to be perfect.

THERAPIST: Have you said that to him?

CLIENT: Yeah. (chuckles) [00:19:59] Maybe it's even scary for him. As much as I feel like I've been rejected, I think he's felt pretty inadequate, so that's hard. I said, "Ivan, I actually want you to know that is hurtful to me," because I explained to him that in the beginning when we first started working, I felt like there was really a lot of harsh criticism from me. I felt like most times it was based in something very legitimate that I had the right to be upset about at whatever level. Maybe not initially, but eventually it would come out really harsh or cruel – really unproductive ways of saying it. I feel like I've worked exceptionally hard and we've now gotten to the point where it's pretty minimal that I'll say anything and when I do, I try to be exceptionally tactful and I try to frame it instead of "you didn't do this" more like "Ivan, I would really appreciate it if you could . . . That would be great." [00:21:04] But I said I sometimes worry that we get to be at the other end of the spectrum where I'm not saying anything or I pretend like something doesn't bother me as much because I don't want to be critical because that's been really highlighted in our couple's counselling. I think it was even highlighted to the point where, while Ivan was making these websites or doing these things, that's what we were talking about those weeks. The problem even just became that I was critical, not that Ivan was not doing whatever when, in fact, they both were, to a certain extent. So I told him that sometimes I'm scared that he won't ever write something and that's my fear, but that I'm scared of that. I told him that sometimes I'm scared that he won't move on from Subway. Sometimes I'm scared that he won't reach a healthy weight; and I'm not a horrible person for feeling those things. [00:22:02] I'm not saying it in a way that's cruel or unkind.

THERAPIST: That's the difference. That's the difference.

CLIENT: I would love you to reach your potential and I want you to be healthy.

THERAPIST: Just as he can want you to work on things in you, too. That's actually a loving thing. That doesn't have to be scathing criticism.

CLIENT: It felt good to get it out there instead of not saying anything, at the risk of being told that I'm critical. Ivan wanted to take me out last weekend. He wanted to take me out on a date, but I just kept coming up with reasons why it shouldn't work out. "Oh, Ivan. You didn't really plan in

advance. Let's not worry about it. Let's just watch something on TV tonight," which he didn't. He really didn't plan in advance. He just came up with it that day. While I could say, "I wish you had planned something, but sure; let's go out," it's scary. [00:23:02] It's so scary to me to make out with him. It's so scary for me to agree to him taking me out on a date. It's so scary . . .

THERAPIST: Scary to go on a date because . . . ?

CLIENT: I think I'm scared of being disappointed. So if I kind of cut him off in advance and say "I don't think you planned anything; I really wish you would and let's just forget about it and stay in," that's so much easier than letting him try to plan something and taking whatever happens. Just like I think it's a lot easier to say "let's not even think about or talk about having sex," because the couple's counselor has even given me a way out of even addressing that; and it's scary.

THERAPIST: It's funny, because I wonder if there could be ways – how do I put this – in that dynamic, you're playing off of each other. [00:24:05] If one of the things you're worried about is of him planning something – sort of planning it or not planning it – really well or in advance and then it's not great, is that he disappoints you and you'd rather not be disappointed. I could imagine that also hovering over writing you a letter. What if it's disappointing, if you read it and you feel like "this is all you have to say about me?" He's terrified, too. As much as you say to him that it could just be a sentence, you might be disappointed if it were just a sentence. Do you know what I mean? I think it's scary for him also, not just because he's afraid of being rejected. I think that's part of it and what we're talking about, but also for him to be so intimate as to write down positive messages, that's a lot of intimacy. [00:25:01] "This is what I love about you." He's working on that, too. That's his first step into kissing, for example. In some ways, it's even more intimate than kissing to say "these are all the things I love about you." I think what could help you talk about this with him is you're not saying – fundamentally, at least – "I'm critical. I'm worried that you will never be able to write something because then you'd be a disappointment to me." I know it could even feel that way inside you. But in a different way you're saying, "I hope that whatever makes this scary for you is something we can change so that you're not as scared of saying loving things to me." Do you know what I mean?

CLIENT: Yes. [00:25:51]

THERAPIST: It's a different twist on it than just that he'll be disappointing, but rather that his anxiety about himself, about his love for you, about his perfectionism, that those could soften so that he could feel free to write you a few sentences; and that yours maybe could, too, so that you guys can have room for tolerating each other as imperfect. (pause)

CLIENT: I think sometimes, if I say to Ivan that I'm a little disappointed about something, even the note, he hears and I've heard him say back and we had a discussion about this that I hope is helpful, he is like, "I'm a disappointment to you." I said, "Ivan, that's not what I'm saying. I'm allowed to be disappointed about some things, have a small disappointment that this didn't happen." One day it was as little as "Ivan, do you want to shave?" because he hadn't shave and

he needed a haircut and he didn't put in his contacts. [00:26:59] He needed to do a little grooming, but it wasn't like you're gross, get away from me. And he was like, "I'm a disappointment to you." I said, "But that's not what I'm saying." Sometimes it's hard because I think he feels that. Whether or not I said anything, he feels like he's a disappointment. It's hard for me to, I think then, not to retreat into not saying anything and act like it's not a problem or not scary.

THERAPIST: I wonder if it would be helpful to the word "sad" instead of "disappointed?" Maybe he would be able to stomach that a little bit more and actually hear that. In part, Ramona, that is what you're saying. That's what's so funny about the slight connotation of the word "disappointed" versus "sad." Disappointed implies there is something I don't like about you. [00:28:02] Sad implies more like I really wish you would do this for me because it's important to me and you didn't and it makes me sad. I just wonder if he could own more of the thing you're talking about, whatever it is, instead of immediately hearing you saying you're disappointed and he's a disappointment. He so quickly goes there. He may go there anyway with sad, but . . .

CLIENT: I've tried that a little bit, at least around the note thing, the card thing. I said "I feel sad" or "it's a little hurtful" or "I worry that maybe you don't have anything to say. Even if that's not true, that's how it can feel to me."

THERAPIST: Is he able to say why he hasn't so far?

CLIENT: It's a couple of reasons and one of them is that since he wrote or created the websites or the lists, he's like, "I feel like all my writing is a bad thing to do," which is hard for me to take in because it feels like such a cop-out. [00:29:13] It feels like he's actually using what's been so hurtful to me as a further weapon. That doesn't feel okay. And then he also said, "I've sat down and I've tried and I thought and I thought, but I just couldn't put together something that is complete or good enough." I actually think those both might be kind of true for him, but really hard for me to take in because, to me, it boils down to "I didn't do this because it's difficult," which is scary to me because not doing something because it's difficult is not okay to me. Sometimes I think it's more of a reason to do something. (pause) [00:29:59]

THERAPIST: I also wonder if those aren't the reasons. You're pretty sure the first one is certainly not the reason. It really doesn't make sense that all of writing now is so evil that he can't write something loving. But even the second one; it just feels like there is some unconscious anxiety, some hang-up about what it means to step into this with you, be that intimate, share what he thinks, that he's still working on in the same way you're working on what it means to actually make out and be on the couch together and have his hands on your body; that kind of thing.

CLIENT: Is that a possibility, that he really is so afraid of failure that he just doesn't try certain things? Sometimes I feel like Ivan is equally afraid of success than of failure.

THERAPIST: Absolutely. Absolutely. [00:31:00] What happens if he sends you this great, loving letter and then you're going to go have sex with each other because it's become so intimate then? He's terrified of that – I think as much, if not more than you, Ramona. I know it's a strange construction, but I believe him when he says that this was really that Ivan said this stuff was about you. It's more just a reflection of him being so terrified and so filled with guilty feelings about wanting to bring this into the relationship with you, that he couldn't. That's the stuff that has to get worked on. It's like why? Why does sex feel so shameful and bad and guilty that you couldn't share that with each other more; talk about it? Even to talk about it, you're saying, is new.

CLIENT: I have told Ivan kind of what you said to me, which is that I'd really like whatever he's feeling, including any type of anger or depression, any of that to be able to be part of the relationship because I think anger and all kinds of other emotions are a natural healthy part of relationships in general and that that's okay. [00:32:10] It's really okay to get angry about something. It's really okay to feel all kinds of things.

THERAPIST: Including erotic feelings. That's part of being a human.

CLIENT: And to bring his actual thoughts and things into a relationship equally without feeling ashamed of it or feeling . . . (pause)

THERAPIST: How did it feel when you were making out over the weekend?

CLIENT: It felt a little scary. It was nice because Ivan was like, "It's okay." Afterwards I was like, "I feel like I don't want to do anything wrong. I don't want to feel bad about it." He was like, "You don't need to feel bad about anything. There is nothing wrong with this." And that felt good to hear. [00:33:01]

THERAPIST: He said that to you?

CLIENT: Yes. Because I don't want to feel guilty or ashamed for making out with my own husband.

THERAPIST: Do you know where it is that that got construed as wrong in your history?

CLIENT: I think part of it, for sure now, in my mind Ivan did all these things and now this is what I do with him and what does that say about me? I think it comes back to what I think and feel about myself as a result of being with someone who is doing some things right now that are hard for me to accept?

THERAPIST: It's interesting, though, because as much as I hear you on one level that that's part of what's going to be in your mind, I also wonder of your own early, deeper-rooted anxieties and shame and guilt about sexual feelings could glom onto that, in a way. What does this say about me that I'm having sex with someone or that I'm making out with someone who did this to me?

[00:34:00] You could say that. In other words, let's say he never did any of that. The same kind of feeling could be there around sex. What does it mean about me? Am I gross, dirty, a doormat – that kind of person – that we're doing these things together?

CLIENT: For me it's always hard to integrate into life and not feel embarrassed, to have that be a normal part of the day or the week or whatever. I think in some ways, it's too big of a deal for Ivan and me. It just never got to be a normal part of – I don't want to use the word "routine" because that's exactly what people don't want. Do you know what I mean?

THERAPIST: Integrated.

CLIENT: Yeah. Not a huge deal.

THERAPIST: You can have dinner together, have sex, and then watch a movie, wake up, brush your teeth next to each other; and have that all be sort of seamless as part of a marriage.

CLIENT: I think on a smaller level, and this sounds horrible, but it's true for me. [00:35:05] (pause) Sometimes I don't want to have children yet. I feel pretty sure that I want to have children, but in my 30's.

THERAPIST: That's what's so horrible?

CLIENT: No, no. (both laugh) No, there is nothing wrong with that. I just sometimes feel scared or have this irrational fear that that can happen.

THERAPIST: That you can get pregnant?

CLIENT: Yeah. If you even have sex, honestly, and it's not like I don't understand birth control. To a certain level, I don't as much because, like I said, no one ever had these conversations with me. But I think to a certain irrational level, it scares me.

THERAPIST: To get pregnant?

CLIENT: Yeah, of course. That's not at all what I want and there is no reason why that would need to happen as a result of having sex, but that is something in the back of my head that makes it a little less comfortable. [00:36:01] Also even just thinking Ivan and I feel like we're in an okay place now and we're making so much progress and I feel so good about that. I'm feeling so comfortable with him and, obviously, if I'm feeling more comfortable with him physically, what if . . . ?

THERAPIST: That having a baby . . .

CLIENT: Well, no. But even the thought of what if tomorrow I found out something crazy? What if tomorrow he finally said, "You know what? It's all been a big lie and the websites were exactly

what they looked like.” I think that’s unlikely, but I guess my point is that I’m not ready to commit to Ivan in terms of “we will be 80 years old and old together” yet. Of course, that is my hope that that’s the by-product of all our hard work, that I feel secure. I also feel like he’s making decisions that I would be okay with bringing into a family. [00:37:00]

THERAPIST: I think it’s so good you’re saying this, Ramona, because here, in a way, you’re articulating your own answer to the question we were talking about at the very beginning. It’s how much are you ready for? What feels right? I think it’s really important that you’re able to say it – not that you shouldn’t be saying this, but you found your own voice and are saying, “There isn’t enough trust yet that I’m 100% sure that we’re going to be together.” Do you know what I mean? You’re getting there, but you’re not there yet where you totally trust again in every way or that he won’t wake up tomorrow and tell you something that’s shocking. This might sound like a little strange thing to say, but in that way, it’s almost as though where you are is dating. What’s coming to mind is why would Ivan sleep in the bed every night? People sleep in the bed every night when they have a sexual relationship. [00:38:01] Otherwise, you don’t sleep in the same bed as your friends, right? That’s why so often I wonder about maybe the leading edge of things actually is how physically intimate you are, rather than getting back to a normal sleep in the bed, sleep in the bed, sleep in the bed; and then eventually you think about kissing each other. No, that’s actually kind of not the way the order of things work. If you’re thinking about dating someone you’re getting to know them; you’re getting to trust who they are; you kiss; you make out; you go to third base. And as that’s happening that’s getting more and more introduced as something you’re sharing with each other. You’re making out and seeing whether that’s okay that that happened. Do I find out something shocking the next day? When he gets what he wants sexually, does then everything else fall off all of a sudden? Do you know what I mean? You’re just trying to kind of take it slowly, but building trust each step of the way, which I think is what you’re doing. [00:39:07] I just think even thinking about this dating – when people don’t know each other, you don’t know whether you can trust this person. You kiss them and you see what happens next. Do they get fearful? Remember? You know; that kind of thing. You’re in that place of trying to see if you can build up trust again. Get used to kissing. Live in it for a while. See how it feels until it feels less scary and then you incorporate something else – starting to dare yourself to hold hands walking down the street, or whatever is the thing that hasn’t happened yet that is not a huge thing. It’s a little scary, but you could try and it’s not so frightening that you then will feel regretful if you find out something shocking or risqué because you’re still in the process of building trust.

CLIENT: I think that’s the scary thing for me. [00:40:02]

THERAPIST: Which is hard because I think it would be scary anyway. Sex. Even if there were 100% trust, it’s a frightening topic.

CLIENT: Right. I feel like part of me just wants to know that we’re going to sleep together in the same bed over and over and nothing bad is going to happen and that I don’t have to feel ashamed of doing something like having sex and then the next day, something like that would happen again. (pause)

THERAPIST: Let's start, as you're thinking that, noticing what feels good that you can register as "I like doing this," even if it's something as simple as holding a hand or his head on your shoulder or your head on his shoulder – whatever is a contact that feels good and just letting it register what is yours that feels good. You don't want to be pushing into any territory that doesn't feel good, including being too terrified that you'll get shocked the next day, but taking it kind of one day at a time, all right? Bye.

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: So next week, then. There are some that you can get out ten, but I didn't have that [big of a machine.] (ph?) Sorry. I'm not with it. (pause)

THERAPIST: How are you?

CLIENT: I guess this week some really good things happened and some not-so-great things happened, so I guess it was just a mix. (scoffs)

THERAPIST: Up and down?

CLIENT: Yeah.

THERAPIST: Would it be helpful to talk about those things?

CLIENT: I guess I'm just not sure where to start. At the beginning of the week we celebrated Ivan's birthday. I took him out to a place we've never been. [00:01:01] It was nice. We had a nice evening together. I think most of the week was pretty good together. (pause)

THERAPIST: (inaudible at 00:01:20)

CLIENT: I just don't know where to . . . I have a lot on my mind and I'm not sure how to organize myself.

THERAPIST: It's hard to talk about or it just feels like there is so much?

CLIENT: Probably both. No, some really good things. Ivan and I had some physical intimacy, not sex, but we had some physical intimacy; and that felt a little scary, but okay. [00:01:56] Ivan was really very clear that I shouldn't feel pressured to do anything or feel obligated to do anything and that I should feel comfortable; so that was a good experience. So I think overall things went pretty well. Friday night, unfortunately, we had planned to have a certain dinner together and then watch a movie together and we ended up watching part of a TV show. It sounds dumb – and it is dumb to a large extent – but the content of the show is like a Lifetime show and it was a

reference to some kind of sexual immorality. Ivan clearly felt uncomfortable and he said to me, “I feel bad. This must be hurtful to you” or “it must be bringing up thoughts or memories.”

[00:02:59] It was just tough. We started talking about it and then we ended up arguing about it and it went from me saying how much I don’t understand the websites to me feeling like he hadn’t been held accountable growing up to a lot of frustration and anger and a lot of crying on my end and not really getting to resolved, but somewhat resolved maybe. And then the next morning Ivan was getting ready for work and we seemed okay. His parents sent him new khakis for his birthday as part of his gift. He has to wear black pants or khakis for work and I was like, “Why don’t you try on your new pants?” because his old pants are in really bad shape. It started off the morning really terribly. He was really upset and kind of aggressive and it was because they are a size that – it is his size, but they don’t fit because he’s gained a lot of weight.

[00:04:08] He got angry and he apologized at some point. He was like, “I’m sorry that I’m taking it out on you.” But I felt so frustrated and I told him. I probably should not have, but I told him I felt so frustrated that I feel like out of everyone in his life, I’ve been the one who has mostly acknowledged that he struggles and sometimes he uses food to cope and that I want him to have healthy ways to cope and I’ve been supportive. There was a time when I would go to the gym with him at 10:00 at night because he doesn’t want to be around other people and he’s self-conscious; he doesn’t want to go alone. We have given up eating certain foods. We don’t buy certain foods. I feel like I’ve tried to be supportive and whenever he goes to the gym I’m always like, “Oh, that’s wonderful. You can feel so proud of that. That’s great.” (sighs) [00:05:00] I guess I just feel so angry because his parents, when he goes home, are like, “Have a whole pizza.” They just . . . He’s not angry at them. And I get it. I’m the one that’s there. But that’s just so . . .

THERAPIST: So he’s getting angry at you?

CLIENT: He’s angry about it and then he’s taking it out on me. It would be like if he had a bad day and came home and was taking it out on me, but knowing it had nothing to do with me. I get that and I get that we all do that sometimes and it’s not okay, but it just felt really frustrating and I guess leveled on top of our discussion from the previous evening, I just feel so angry with his parents and I feel like I’m not supposed to feel that, like it’s not helpful or productive or even appropriate necessarily. But I feel so angry with them and I guess I feel frustrated because sometimes I take the brunt. [00:06:02] Maybe he is deep down really angry that they taught him to cope this way and that it’s been unhealthy and they didn’t get him help, but it only comes out at me and I’m so angry about that. I know it’s not helpful, but part of me sometimes wants him to get angry at them about it – not inappropriately, but to just be able to say, “I’m really angry that this is neglected and I really wish I had gotten help when I was young.” This goes back to childhood that it started and sometimes I really want that and I feel like I want that for him; but selfishly I also kind of want it for me because I guess I resent, to a certain extent, helping him with some of these things because I don’t want to have that responsibility. It’s not that I don’t care. I obviously do. [00:07:01] I guess I feel like that’s more of a parent’s role if your child has that problem from a very, very young age. Why am I dealing with that? It went downhill from there.

THERAPIST: It isn't fair for both of you, for people, that the stuff their parents didn't do for them ends up being a legacy they have to deal with as adults; and then not only does Ivan have to deal with it, but it affects you, too, his significant other person. I wonder: why do you keep saying, "I know this isn't helpful, but I wish he would get angry at them?" Why do you think that isn't helpful?

CLIENT: Because if I ever told my sister or my mom, "Oh, my gosh. I'm just so angry with his parents right now. I'm so angry that they're avoiding this; they never helped him with this." [00:08:03] On top of it, they have called me judgmental or really critical for saying "Ivan really does have an attention deficit disorder" or "Ivan really does need help with his depression," instead of ever saying, "We really wish we had done something about this. That wasn't right and we're so grateful that you love him and take care of him." Something like that. I guess I feel super angry that I have never heard anything like that and I maybe never will.

THERAPIST: You won't, unless they go into intensive therapy.

CLIENT: But every time I tell that to my mom or my sister they get kind of sharp with me and it's not going to do anything.

THERAPIST: Will your parents? I wonder if your mom is getting kind of unconsciously defensive of her. If you can say that about Ivan's parents, then what can be said about yours? [00:08:58]

CLIENT: I think that's very possible, but then Emma then always says, "Sometimes I think you hold his parents responsible; but he's now 27. He can make the choices. I think **you're more angry at him** and you're redirecting it at them." I'm sure that's true to a certain extent. I can imagine with couples in general, if you're upset with your spouse, you might not (chuckles) be inviting the in-laws over. I guess I could understand that, but it really feels like . . . It's just tough because I'm so angry about it and I guess I just wish they would say something like that to me.

THERAPIST: It's such an understandable wish.

CLIENT: I'm not asking for that, like I don't think I have this idea like I want them to say, "We were terrible parents and we just can't live with ourselves." I'm not looking for that. I know that they love Ivan; I just think that it's really sad that they neglected some really serious things and I am honestly very angry because it negatively impacts him. [00:10:08] But it also has had a really negative impact on my life and that may be selfish but . . .

THERAPIST: Of course you would have feelings about them, Ramona. It isn't fair. It's affecting both of you that he was neglected in so many different ways as a child.

CLIENT: I don't know. It's difficult. And I even said to him the one time, because he gets defensive and he gets protective when I say that I'm so angry and "I'm so sad that this wasn't done for you and I really wish this had been different. There is no reason why you've had to go

through years and years of certain struggles and everything that went with it.” [00:10:59] He is very defensive and protective and I said, “You know, Ivan . . .”

THERAPIST: Protective of his parents?

CLIENT: Yeah. And very defensive, very defensive.

THERAPIST: I think that’s probably what’s happening more than anything else when you get into places feeling so angry at his parents. Angry feelings towards them make a lot of sense, actually. It seems totally reasonable for you to be feeling that, but you can get into places where it’s so strong and it’s as though if they would do something differently or could say the right thing right now, it could make some of these situations feel better. I wonder if, at those moments, what you are actually feeling in a way is the anger for both you and Ivan because Ivan isn’t feeling it. Do you know what I mean?

CLIENT: Definitely. Definitely.

THERAPIST: It’s sort of your way of the urgency about saying, “I want to get through to you, Ivan.” [00:12:01] If he were able to go around and say, “I’m so furious at my parents. I’m getting it, how much they didn’t do for me, did to me, and what they missed and what they could have done.” I think your anger at them would subside some. Not go away, but it would feel like a relief that finally Ivan gets it. He’s getting it. It’s starting to channel in the right places. But when he isn’t, I think you’re the one left holding all the anger at his parents. Do you know what I mean?

CLIENT: I do. I definitely do because sometimes I get angry at myself and I think, “Why can’t I let this go?” I can definitely look at it and say, “This is so sad. I wish they had gotten help for themselves.” I mean, they struggle with a lot of the same things for themselves and Ivan – or even just to let him know that they were struggling with it, but that they wanted him to . . . I really wish that would have happened and sometimes I wonder why, if I am an independent person, why can’t I look at it and when we visit them just say, “That’s their issue and we can’t turn back the clock.” [00:13:12] Like that’s their problem and I’m not going to feel bad about it and if they think I’m judgmental for having said that he’s depressed and that he sees someone, then that’s their issue and it’s sad that they didn’t speak out for Ivan. I’m not able to do that and I wish I could just say that it doesn’t bother me. I wonder if I could feel more like that if Ivan said to me, “I know this is how they act. I know it’s not healthy. We’re going to visit, but I completely understand.”

THERAPIST: I think so. In other words, if you knew that you and Ivan were visiting his parents on the same page, where he got it, you got it, he’s sad and angry, you’re sad and angry for him about his family, and you’re a team where he’s not defending them, then I think it would feel different. [00:14:14] You would still have all these feelings inside, but it would feel a little bit more like, “Okay, I will contain these feelings and keep my mouth shut, visit the in-laws, get it over and done with, because he and I are together. I know that he gets it.” I don’t know how often it has felt like Ivan actually does get it. He’s going back and forth right now, but I think a lot of the time

it feels like he ends up protecting them in his mind because he's scared to [get in the way of that] (ph?).

CLIENT: And that's frustrating for me. Something else that comes to mind that probably isn't fair, is this absolute, positive fear like, "My gosh. I never would want to have children with someone who would rather watch their child struggle and suffer than say to them and the rest of the family 'they have a problem and we're getting them help and there is nothing wrong with that.'" [00:15:12]

THERAPIST: That they were that avoidant themselves with their heads stuck in the sand that they would sort of turn away from Ivan's suffering. It's horrible.

CLIENT: I think I really magnify it, though, and then I'm like, "What if Ivan was like that? What if we ever had children and he was like that?" (sighs) I know I do that to myself.

THERAPIST: Ramona, I don't think that's just doing something irrational to yourself. That's something that makes sense that you would be cautious about that. That is Ivan's tendency. If he didn't have you right now helping him with this part, he might be still avoidant. I think he's gotten better at it so I think the likelihood that he would do that with kids now is so much less than two years ago. [00:16:00]

CLIENT: It's still really scary.

THERAPIST: Yeah. Yeah. So maybe also when you're mad at his parents, you are actually, in addition, mad at him, too, that he might keep avoiding.

CLIENT: No. It's like the one night, I guess it was Tuesday night, it was a recent thing. I got a text from his dad out of the blue. His dad, no one in his family will contact me. They will not. It's back to that. Actually the whole thing at Christmas of "we just didn't know what to say" and I said that I didn't think that was fair and his dad was like, "I convinced myself that it wouldn't go well or that you would project it. Ivan gets his avoidance from me." And I thought that was probably insanely huge.

THERAPIST: He said that? Wow.

CLIENT: That was probably really huge for him to say. And then the assault happened again in January and it was the same process, like they don't say "we just want to let you know that we're here." "Are you okay?" [00:17:09] Not to get in the middle, but just to acknowledge that I exist and that something bad happened to me. (sighs) And that's really, really difficult on top of that. There is just no contact. So out of the blue I get a text that is like, "Ivan hopes to visit at the end of April. We really hope that you'll join." It was something along those lines. I was like, "Ivan, (scoffs) I didn't know anything about this." He was like, "I talked with him this morning and that's not what happened. He said he wants us to visit and he found out that Subway is closing at the end of April for a while and decided that would be a good time to visit." I told him, "I wish you

and I were more of a team, where you and I said 'we know your dad wants us to visit; let's figure out a time that works for us or a plan that works for us and go to him,' instead of you and your dad being the couple that decides." (scoffs) [00:18:09]

THERAPIST: It could have been that they had just spoken that morning and you hadn't even seen Ivan. Seeing Ivan, you think he wouldn't have, in other words, brought it up with you?

CLIENT: I think he was avoiding it. He was like "I was going to bring it up" but I know . . .

THERAPIST: You think he knew before that morning?

CLIENT: No. I think that he knows that his dad is always saying he wants us to visit and we don't visit enough, but I think there was plenty of time for him to tell me about it in between and he is nervous about it. It just felt like . . . I don't know. For his dad to text me and tell me what my husband is thinking, it's like "hmm." It doesn't feel good and it's hard because Ivan was going to get eleven days off. They're redoing the store and originally he was like, "You and I should go away." And I said, "Let's modify that. [00:19:03] What if you do spend some time looking for jobs and then what if we take a day over the weekend and we go somewhere local and do something fun? We can plan on that as a reward." From that we've gone to now it's going to be five days and his dad is banking on two to three of them. I'm like, "How are we going to get obligations done and what happened to our plans?" It just always feels like his dad becomes the priority. They become the couple and I'm the third wheel.

THERAPIST: Because it's also odd of his dad, I guess, on the heels of that conversation to text you and say that.

CLIENT: Ivan made him.

THERAPIST: He made him?

CLIENT: Yeah.

THERAPIST: Ivan was scared to tell you?

CLIENT: No. He's like, "I know exactly what Ramona is going to say. She's going to say that you guys never talk to her and that it doesn't feel good that when it's around a holiday or when you want to see him to be like 'you're so welcome to come.'" [00:20:05] It doesn't feel so great, especially because it always just feels like they're awkward and uncomfortable around me like I did what Ivan did. There is an awkward pause as I walk into the room, as if I did that, as if I've been betraying their son and lying to him. It's just not okay. Ivan made him text me.

THERAPIST: He's trying to help out Ivan, then. He's trying to encourage his dad to do what you were hoping his dad would do more of?

CLIENT: Yeah. I think Ivan is really caught between a rock and a hard place because he knows it's not right that they are reacting this way, but he also can't make them. And then when he does, essentially it's obvious that they do it because of that. [00:20:59]

THERAPIST: In other words, you can't change his parents. They're going to be his parents, right? They're not in therapy. They're not going through this process. They're not working on themselves, but you and Ivan can work together on each other. So Ivan tried to say, "Dad, can you please reach out to Ramona?" But in this circumstance, when he did, you also got upset with the way he did and ended up feeling like you and Ivan, then, weren't in the conversation together. Do you see what I mean? In other words, Ivan could say "I was trying to do a good thing."

CLIENT: No, he did. He did. It's just like I feel like it's not good, what his dad does.

THERAPIST: Like putting the pressure on?

CLIENT: Yeah. And kind of guilt-tripping and it's just really bizarre to me to not talk to someone for months and months and then, when they really want to see their son and they feel like they can't just invite him, then it's like because he forced him to text me, then I'm good enough to talk to and I guess I'm angry about that. [00:22:01] On top of which, his parents can't say what Ivan did was wrong – not to be like, "We're so ashamed of our son. He's a horrible person." No. I don't want that. I would just like them to say some kind of acknowledgement that it's really tough to go through or give me credit for sticking with Ivan when I could have just left; or even just to say we love our son, but we don't support what he did. I guess maybe looking for that is the wrong thing.

THERAPIST: Again, it's so understandable, but I don't think you'll get it. So it's sort of like what do you do with that, then, that you won't? What do you do with those feelings, because they would be being different people if they could do that? They would all of a sudden be someone else and not themselves. That means actually holding their son accountable for something, which they've never done. [00:22:58]

CLIENT: Now I think it's my fault, but I can't let it go when at Christmas he's like, "I understand that Ivan crossed a boundary that you guys agreed on as a couple," and I just wanted to go through the roof because (sniggers) that's a distortion of what happened; and that's not even all that happened, even if it was the truth. It's such a slap in the face after never asking if I'm okay. It's like diminishing, normalizing, minimizing.

THERAPIST: He's doing exactly what they've always done with Ivan, glorifying, minimizing the problems; pretend that what really happened didn't happen, which is really not doing him any service. It didn't as a kid and it's not now. It's horrifying, Ramona. What do you do with those feelings, that this is what they're going to keep doing this with him? They're going to keep being themselves.

CLIENT: He says that he, at some point, has said to them, has said to his dad that he was upset that they didn't get him help before, I think, for at least the depression; and I don't know if that's true. [00:24:07] He brought up that sometimes when Ivan would try to talk to his dad, his dad would just tell him that he was moody, that that happened a lot. He said he brought that up, that that didn't feel very good when he did try to confront and it was put back on him and avoided.

THERAPIST: I think what's going to be ultimately important for you and your feeling this so much is Ivan's knowing, coming into your realm himself. People can confront parents about things and sometimes it goes nowhere. It does nothing good, but it's very different if Ivan knows it. Do you know what I mean?

CLIENT: Yeah. I think it would feel different if we went to visit and his dad said something like that and he said to me, "That's not what happened and that's not okay. I can't change them, but you and I are in a completely different place." [00:25:06]

THERAPIST: Right. In so many ways, that's often the best that married couples hope for with each other. Parents have their difficulties. There are issues. There are things that the parents will never understand, but if you both get it together – him about your parents, too.

CLIENT: That's what I said. I said, "Ivan, I could completely understand if, at some point, you said to me that you're so angry that your parents didn't do this or that." I would think that was normal.

THERAPIST: And supportive, even.

CLIENT: Right. I think it's hard. I guess, in some ways, I feel like if you have something not positive to say about your parents, it's one thing for you to say it. It's another for someone else to say it because they're still your parents, so I guess I feel like that's where he comes from a lot. [00:25:59]

THERAPIST: So you can have compassion for that?

CLIENT: Yeah. It's hard, I think.

THERAPIST: I wonder if you might try saying to him, instead of saying when you get into this place, "I'm so angry at them I can hardly take it" or whatever expression is that "Ivan, I just need you to know how angry at them I am." If you were to say instead what I just said to you a few minutes ago about what I think is actually happening – and this happens with you and Ivan a lot, where the anger that is to be had gets placed in one of you or the other. And the other one gets to get evacuated from anger. So this happens and what has historically happened is that you would be having all the anger at his parents. I think in part, you're trying to get through to him. You're trying to be like, "Ivan, don't you understand what they did to you?" because he's not in it and he has none of it, which is even more infuriating. You want to get through to him even more. [00:26:59] I wonder if instead you were to say, "Ivan, I feel sometimes like I'm in this place right

now where I feel like I'm left holding all the anger for them at them." Could he then think wait, maybe there is some he has that is hard for him to own or hard for him to bear or hard for him to sit with? Because I think that can happen a lot, that your defenses have an easier time holding anger. His don't, right? We know that. He has a really, really, really hard time expressing anger about anything to anyone. So starting to articulate that he does have anger. Believe it or not, he does. It's just coming out in subtler and in more unconscious ways. If you're saying "I feel like I have all the anger for him right now; I wonder where yours has gone?" That may help him, rather than you just being like "I'm so angry" that he gets even more defensive and backed away. [00:28:01] It's trying to sort of say "I think some of this actually is yours and it would help us both if it were more yours." (pause)

CLIENT: I think it brings a lot of mutual stress, at least, so I don't know how to say it. I wouldn't text his dad back and say, "Oh, Ivan and I had plans. I don't know about that." And Ivan was like, "I know what he's texting you, but that's not what happened. That's not what I said. He brought it up and he pinpointed this weekend, but that wasn't my idea." It's really hard and I'm like, "Can we wait a while?"

THERAPIST: That's what also sort of gets a little lost in this – what does Ivan want?

CLIENT: That's the really impossible thing because this has happened before, where Ivan's dad will tell him what he wants and Ivan will not disagree with his dad. He will not say no to his dad. [00:29:05] He kind of worships his dad and he's been like his best friend more than his dad. So if his dad says "we really want to see you and we want this weekend," if I said "sure, let's do it," he would do it immediately. He gets off the phone and he talks with me and he's like, "We were going to do that and it's not a lot of time and I didn't necessarily agree to that weekend." It's like when he talks with me we're on the same page. And then he could get back on the phone with his dad and in two seconds he would do whatever his dad wants and that's all he ever wanted. I have told him before, "I just want to know what you want, even if it's not what I want. I just want you to have a presence and an independence."

THERAPIST: Because that also would feel differently if Ivan decided he wants to go home to visit his family and approached you and said, "Ramona, I know we had these plans, but I'm kind of thinking I would like to see my family at some point in the next few months. I wonder if that would be a convenient time.?" [00:30:01] You might disagree. You might be annoyed, but then it's Ivan; you are having a conversation with Ivan's voice – your voice and Ivan's voice – instead of feeling like you're getting either Ivan complying with you or complying with his father and having no idea where he actually is in the middle of all of that. It wouldn't be unreasonable, in other words, if he said at some point, "I'm going to visit my family." That's within reason. That's a reasonable thing to want. It wouldn't be unreasonable for you to say, "It's uncomfortable for me. I don't want to go." And you could then negotiate and talk about it and try to work it out because you're disagreeing then; but it's yours then, instead of feeling like it's Ivan's dad's voice.

CLIENT: I really wish that that could happen. It's also kind of tough because I feel like we've spent more time with his family because when we were dating, they were closer. They were a lot

closer. His dad very much guilt-trips and it's not okay. [00:31:00] So every other year there is a week-long family vacation in Michigan with extended relatives that they see every two years and pretty much don't talk to the rest of the time, which is fine. It's fine to have extended family that you're not close with. When you have a big family, you can't be best friends with every single person and there is nothing wrong with that, I think, but they just go every other year and they're really angry because I said, "Ivan, I don't think that's reasonable. And by the way, you and I have never gone anywhere together other than our honeymoon." (scoffs) It's 12 hours to get to Pittsburgh minimum and then another 12 hours in the car with his whole family to Michigan. I'm like, "You don't even know or like those relatives very much. I know it's a family thing, but if we're going to go visit family why don't we go and see your grandparents?" It's just difficult. And then his dad gets very it's my fault and he thinks that I don't want to be close to him.

THERAPIST: You get pitted against his family, then. [00:32:02] It's like Ivan doesn't have enough of a sense of self yet to be able to say, "Wait, do I want to go to Michigan? What do I even feel about going to Michigan?" He is either left with appeasing you or appeasing his family, but there is no center yet to figure out what would actually be Ivan's desires. I get how when anything like this comes up it's going to be a struggle right now to actually try to say – maybe the more you say, "Ivan, shut me up for a second. Shut your dad up. What do you want to do with this eleven days or five days?" Whatever – it's turned into five days.

CLIENT: That's the really hard thing because before I really even knew, he just told me about it and he was like, "Why don't we go away?" and that came from him. I didn't even know he was going to have days off and he and I negotiated.

THERAPIST: (crosstalk at 00:32:53) You know how, let's say, you make a plan and then something else comes up and you actually realize "Oh, no. That's important to me. I want to do this?" [00:33:03] We don't know if seeing his family is important to him right now or if he feels like he's only doing that to comply with his dad. Was he offering to do something only because he felt like that's what you want or did he really want to do that? All of this is what you're trying to get at: "What do you want to do, Ivan? Your dad is offering for us to come home. Do you want to do that? I want to talk with Ivan. I don't want to talk to your dad. I want you and I to have a conversation together about my wants and needs and your wants and needs and how we figure out how to navigate this together." He is so used to just sort of putting out the fire by appeasing the person in front of him.

CLIENT: It's hard because when he did go visit alone he talked to me on the phone. It was getting close to dinnertime and they sat down and started to eat without him. We were on the phone for too long; it was maybe an hour and they had finished dinner. So he missed an hour of family time, but he was there for four or five days. [00:34:04] It was so intense. His mother swore at him. She said that he sees me every day and he shut off his phone that night. Two days later he flew home because they were so angry that he missed some family time. I'm like, "You were with them all weekend. Maybe you shouldn't have missed dinner."

THERAPIST: Right. That's one of the other things: why is he not saying, "Ramona, we're about to sit down for dinner. It's not the most opportune hour, but I will call you right after dinner and we'll have time to talk then."

CLIENT: Then he would also been in all afternoon and not spending time with his family as a result, so I guess I feel like . . . I don't know. I think that's a lot. I don't feel like his mom should be swearing intensely.

THERAPIST: (inaudible at 00:34:56)

CLIENT: Yeah. And none of them were home. It's not like in the whole weekend this was the only hour they were going to have together. It's nothing like that. [00:35:06]

THERAPIST: Don't get me wrong – her reaction is not appropriate no matter what, but he also could not sleep all afternoon, for example, if you're there for a short time. Take an hour nap, set your alarm, wake up. Or if you do, then spend dinner and say to you "I'll call you right after dinner." Something is getting in the way of doing that, but still the reaction is so scathing, so guilt-tripping.

CLIENT: Yeah. I don't think they like me at all. (scoffs) That's okay. (pause)

THERAPIST: It's hard.

CLIENT: I feel like my parents have been pretty . . . I mean, Ivan has been there for holidays since what happened. My parents sent him a big package for his birthday. They are able to be nice towards him after feeling really hurt about what he did to me and his parents are, I feel, acting just the opposite. [00:36:04] It's like I did all those things to Ivan so they don't even want him on the phone with me.

THERAPIST: It's almost like they're shooting the messenger. You're the bearer of that news. Your presence indicates what Ivan did wrong, so they can't take it. That's really hard for you, Ramona. It's really cruel to him, too, what they're doing. It's sort of sabotaging what you and he really want.

CLIENT: But I think they view their core family as more important, far more important.

THERAPIST: It's really sabotaging their son's development, once again. It's actually good for Ivan that he's built this relationship and wants to work on the relationship. They should be fighting to keep you around him. Do you know what I mean? [00:36:59] But instead, it feels like they're sort of acting like maybe this is a way to get him back in the fold, alienate you or ostracize you, which is not good for him. It's moving away from his independent development.

CLIENT: I think his dad would be very happy if he moved home. I think it would be horrible for Ivan.

THERAPIST: And do you hear what they're doing, then? This thing that would be horrible for their son, they're hoping would happen. Selfish needs.

CLIENT: It's like keeping an animal in a cage. It's so selfish. It's hard because I don't want to come between him and his family. His family loves him and he loves his family, but it's hard not to have feelings when his mom says that she doesn't think she knows me. I spent so much time learning all about their family and their extended families and their jobs. [00:38:08] I've spent so much time doing that and to hear her say that she doesn't think she knows me . . . When they had an exchange student from another country, just a teenager living with them, and he's their exchange son; not the exchange student that lives with them, he's their son and I'm like . . . (pause)

THERAPIST: Ouch. (pause) [What are you feeling?] (ph?)

CLIENT: There was something else that I wanted to talk about, but I think I'm avoiding it because it's uncomfortable. When we watched the TV episode and that thing came up, it wasn't like what Ivan did, but it triggered. [00:39:02] Anyway, when I find us talking about the websites and the list and the folder, I feel so stuck. I feel so like I don't know what to do here because Ivan just keeps telling me that he loves me and it's not what it looks like and he never wanted to have an affair or he couldn't think about having one. He describes the websites as like the white noise you put on in the background. He just wanted to fantasize about that. It's so hard to take in. The list – he describes it as things that he was angry about, things that he wanted to remind himself that he should be really grateful for. He's like, "I wanted to show myself that I was being so stupid," and it's so hard to take that in. It's impossible. How do I let it go and move on? I don't want to punish him, but I also don't want to act like that's not super hurtful. [00:40:05] But I don't want to hang onto that either forever and just be like "well, you hurt me" and that be the end of our relationship. It's just really so painful to think about them, I find myself feeling really bad about myself. I find myself struggling with thoughts about, not actually hurting myself, but – I don't know if mantra is the right word the types of thoughts that I was having before, which is frustrating because you helped me work so hard to get out of that pattern of thinking. Sometimes I just feel so hopeless when I think about it or I feel it, like I just can't; I can't bear it.

THERAPIST: You know when you said this is something you're avoiding talking about because it's hard to talk about, what part were you thinking? What's hard right now, bringing it up?

CLIENT: It's embarrassing, but I also think of my mom who has barely talked about it with me because she's like, "You've got to let it go. [00:41:07] You can't keep bringing it up. You can't keep talking about it over and over and over," which I definitely have not done with her. It's like somehow, six years after my dad's affair, she's still making a comment on Christmas Day related to that, insinuating that type of thing is happening again. I feel like sometimes, when I bring it up, I'm there. I'm not there. I can rationalize that I'm not there.

THERAPIST: You have a history with her and them never having processed it, so that she would hang onto it.

CLIENT: And I don't want to do that. I really don't. I'm already sick of talking about it. The other day I just thought, "What if Ivan and I stopped having these three-times-a-week conversations? They are so exhausting."

THERAPIST: That's a lot.

CLIENT: Plus couple's counselling. Plus individual. [00:42:00] It's exhausting to keep talking about these websites, especially when I just crumble inside every time I think about them. There is nothing . . . It's so hard. The worst part is, I think, is it's probably very true. It's probably a very complicated answer that probably was not related to wanting to have an affair. It probably was something really complicated like a fantasy or like a detachment from reality, but that's really hard to process and really hard to bear. I wouldn't go tell my friends, "Ivan and I had this rough patch, but it's not what it looks like. It's totally fine." Or to think of us in like five or ten years and looking back and feeling okay about staying with someone like that.

THERAPIST: I actually don't even think it's atypical when this kind of thing happens. It's not usually that the person has actually wanted to have an affair. Do you know what I mean?

CLIENT: No.

THERAPIST: No? (chuckles) [00:43:03]

CLIENT: I mean, I believe that about Ivan. I believe that that is not what he was doing, but that doesn't mean that it doesn't feel really rejecting and really betraying.

THERAPIST: I think that's more of what maybe you and I want to get into more is what nerve this hits inside of you that pulls you back into such a place of self-loathing. Do you know what I mean? I think even if Ivan is doing all his own independent processing of what it meant and why he did it and how it was not an affair and it was his own revenge fantasies and his own insecurities, right? He's doing all that; you're still left with the punch of that list in your own gut that hits your nerve and self-esteem. [00:44:00] It may be up to us to start to kind of get into the list more. You've done a lot of processing it with Ivan, but maybe here, bringing up what's on it, bringing up what hit what nerve, what it feels like, why you go, what's happening when you go into a state of self-loathing right now?

CLIENT: Would it be okay to bring it in?

THERAPIST: Absolutely. I think it would be really helpful.

CLIENT: I really want to get to the point, if Ivan and I are going to keep moving forward, I really want to get to the point where I can have something that reminds me of its existence without feeling like that inside.

THERAPIST: Yes. I think that would be so useful.

CLIENT: And Dr. Farrow said, "I'm not recommending it, but I'm saying that sometimes I say to my individual patients that when they're working on something and it's hard to explain, that they bring in the spouse." She asked Ivan how he would feel about doing that with Dr. Bourd and, obviously, I'm all for whatever helps to explain it because that's really important to me.

[00:45:03] I guess that's something he's going to raise.

THERAPIST: I was having the fantasy, at least, of would it be helpful for me to talk to Dr. Bourd so I can kind of tell you what he says. I think any of the above options – even having you there – because then you get to hear his own therapist's words, his sense, not even filtered through me; but I am happy to do that, also. You and Ivan talk about what feels comfortable to the two of you. I think that makes a lot of sense to not just hear from Ivan, but to keep hearing from the expert in the room that this is actually what it seems like it is about, to hear that confirmation from Dr. Bourd.

CLIENT: It makes it more credible.

THERAPIST: Yes.

CLIENT: It makes it like someone who gets caught red-handed; it's more credible if someone objective was not personal . . .

THERAPIST: "No, it wasn't about that." Yeah. I think that's a great idea. [All right, so we'll start there next week. I know it's hard.] (ph?)

END TRANSCRIPT

BEGIN TRANSCRIPT:

THERAPIST: You (ph) changed (inaudible) with.

CLIENT: (clears throat)

THERAPIST: Have the list. (chuckles)

CLIENT: Oh! OK! I think—you didn't have to print it. I just thought—

THERAPIST: I went not to do it, but then I thought, "It's so—there's so much on here. It'd be helpful to—"

CLIENT: There is a lot. I actually—

THERAPIST: “[Reference it.] (ph)”

CLIENT: My thought was—I thought I was going to print it. And then I actually opened it yesterday, and I was just like, “So like I have to close this immediately.” (chuckles) So I made an excuse, and I didn’t.

THERAPIST: It’s an overwhelming list.

CLIENT: It is.

THERAPIST: It’s extremely long. I don’t think I’d realized he’d written it also about himself. So what’s it like even having sent it to me, and reading it or opening it?

CLIENT: (sighs) I mean, I felt bad sending it to you, because I didn’t expect you to like look it over before our session, but I also didn’t want you to feel— (sighs) But then I thought, “At least, you know, if I’m not going to open it and look at it, or I’m not going to print it, I should at least (chuckles?) get it to you somehow. But I—yeah, it just brought up a ton of anxiety, like even just seeing the topic, like glimpsing the topic. I just closed it immediately. (chuckles) I just like couldn’t—(sigh)—but I— [00:01:14]

THERAPIST: So that—even that reaction is really important. There’s a way it kind of shows what you were talking about last time we were here, how much is still frightening about all this. Like it’s a kind of phobic PTSD kind of reaction. That means it’s not been processed yet enough to—

CLIENT: Right.

THERAPIST: To move past it. So what have you and Ivan talked about with the list lately? I wonder what. You’ve had a lot of discussions on your own and also on couples therapy. I just wonder.

CLIENT: So last night, like we had our money meeting. And right after it, that’s when I sent it. And Ivan is like, “What are you doing?” And I’m like, “I’m getting (ph) this list. [Me and] (ph) Dr. Rosa are actually going to start talking about it.” It’s been hard to. Like I’ve been avoiding talking it. And actually we had a scheduled conversation last night, and we didn’t talk about it. And I think I purposefully—now (ph) it isn’t, you know, intentionally or consciously, but derailed, you know, away from talking about the list. Because we have talked about it somewhat, but every time we do, I get stuck. And I get furious. And I get frustrated. And I get confused. And I feel like we’re going down a rabbit hole. Like it’s not— (sighs?) [00:02:36] (pause)

THERAPIST: Going down a rabbit hole. Meaning that’s—the conversation kind of evolves in that kind of feeling?

CLIENT: Yeah. It just doesn't feel helpful. And it almost feels—and I don't mean it to sound as accusing as it is—it almost feels like he's making up answers. Because I'll ask him about specific things on the list, because some of it is so bizarre kind of. And I'll ask him about specific things, and he'll give me an answer. And like the next time we talk about it, it'll be a different answer. And I'm like, "Oh, so which is it?" "It's both," or like— And I feel like I'm trying to test or trying to get some— Making sure that he's not just wiping it away. "Oh, it wasn't about anyone else," when in reality it was a fantasy or it was a something. And he told Dr. Farrow how its, the file's name is SI for Self Introspection. But and like what the heck is that? (chuckles) (sighs) (pause) And then—sorry.

THERAPIST: Oh. Go ahead.

CLIENT: He—it's—so it was in a folder called LAR. And I—

THERAPIST: LIR?

CLIENT: AR.

THERAPIST: AR.

CLIENT: And when—

THERAPIST: [Life After Ramona] (ph), right?

CLIENT: I found it, that's what I finally came up with. I'm like, "Oh, my gosh! That's what that is." And there was dead silence. And then it wasn't until last week, when he's like, "Actually it was Life Amongst Regrets." And I was like, "Wait a minute, wouldn't you have corrected me way back when? Or said like, 'Oh my gosh! That's such a horrible—' like, it wasn't that?" And that (ph) just seems very, some of it just seems very suspicious to me. And I'm already very suspicious, because I found my husband hiding things.

THERAPIST: You'd said to him, "Does that mean Life After Ramona?" Originally? [00:04:18]

CLIENT: I didn't ask him. I just said, "Oh my gosh!" And then, like I said what I thought it was. And there was just silence. And he didn't—

THERAPIST: [And he's] (ph) in the room, in other words? You said that to him?

CLIENT: I think we were on the phone. Because I think it was when he lived down the street, down the road. (pause) And there was silence. So, yes (ph), technically he didn't, you know, agree with it or refute it but—

THERAPIST: Yeah, but that's—he's agreeing. That's what it means. He doesn't refute it.

CLIENT: It was just—it's very bizarre. And like until last week, I never heard this other one. But he came up with it immediately. So it wasn't like in the couple session he thought about it for a while and like came up with a weird excuse. So it was just like very bizarre.

THERAPIST: He's had time in between to think about what else to say it stands for.

CLIENT: He could. Yeah, that's very possible. And I don't know. I'm very—I guess I'm scared to know. And I'm scared not to know. [00:05:14]

THERAPIST: This story sounds like it does mean Life After Ramona. It doesn't sound very like—

CLIENT: Right!

THERAPIST: [I need] (ph) the rest of the story.

CLIENT: There's a whole file describing how he was going to move to New Orleans, and have a house, and get two dogs. And he like, "That was just, you know, that was a self-punishing type of thing. I was so sad that I was going to be alone, and that I wasn't going to have anything." And I said, "It doesn't sounds as destitute as that if you're going to get a new job and get a house. And it doesn't actually sound like 'I'm going to go live like in a small apartment and continue to work at Subway forever.' It doesn't sound like a depressive—" (clears throat) (sighs) I think part of the reason why I'm so anxious about talking about it with Ivan, especially alone, is because I don't want to be led down—

THERAPIST: Lies. [00:06:01]

CLIENT: Yes! And I don't want to spend time buying into it, and trying to understand, and engaging in potentially just fantasy, and reinforcing it.

THERAPIST: It almost sounds like he's really not in a place where he's ready to talk about it in an honest way. The way you're—I mean, so do you hear that to me it sounds absolutely unambiguous that it means Life After Ramona? Like it doesn't—I don't think it meant what he said later.

CLIENT: It sounds bizarre.

THERAPIST: Is that hard to hear? You almost want that not to be true or?

CLIENT: Well, of course. If I heard an alternate, of course I'd rather hear that.

THERAPIST: Yeah. It just doesn't—it fits so well. And the fact that he didn't deny it, you know? Any person at that moment would say, "Oh, no. It didn't mean that. That's not what it meant."

CLIENT: That's—I sometimes find myself almost—it's wrong, but I sometimes almost find myself testing him. Like saying, "Are you sure you weren't looking for someone else?" And then I kind of gauge like his amount of indignation or amount of like being upset about it as whether or not it's genuine. Sometimes I get worried, because it doesn't seem like he's as upset about it. (pause) But we've also talked about it a few times. It's not like—I don't know. That's not really fair, but I'm that I guess desperate to figure out exactly what was going on. [00:07:26]

THERAPIST: I mean, even if we assume it did stand for Life After Ramona —and it's incredibly hurtful—I mean, I just think it's helpful to begin to sort of, for you to even sort of say to yourself what it is. You know what I mean? And just be in that. And be in that he is probably, it seems, lying to you about some of these things. That doesn't have to mean the end of your marriage. Right? I mean, it— Ivan is incredibly shame-prone. And he is incredibly oriented towards covering something up so as to avoid the shame of the truth.

CLIENT: Yeah.

THERAPIST: So we expect—you know that's his vulnerability. You know that was something that was going to be—like, you know, when I said to you, "It's not going to be fixed overnight." And especially around this list. It sort of makes sense that he's going to try to make some things up a little bit. I'm not saying that excuses it. I'm just saying, like that actually quite fits the picture with how he functions. This list probably brings more shame to him than anything else. This and the websites. And so there may be moments he's trying to sort of get around it, or not say something that he's afraid will be too hurtful or makes him feel too ashamed of himself. [00:08:44]

CLIENT: Well, but then, even with the Life After Ramona explanation, I think I'm a little scared to pursue that. Because Ivan has been—whenever he was describing it in that context it was, "I was sure you were going to leave me. It was inevitable that you were going to leave me. You were so unhappy, like I was never good enough," blah blah blah. And even that feels like an alternative to the like all these websites and the list. Like he was leaving or he was, you know, rejecting me.

THERAPIST: This is why I say even if it says—if even if we sort of say it did say Life After Ramona, that's what it meant—that doesn't mean that it's sort of exactly more proof that he was about to go have an affair. Do you know what I mean?

CLIENT: I do—

THERAPIST: Like people could write—

CLIENT: It's just really hurtful. [00:09:29]

THERAPIST: It's extremely hurtful. I'm not—there are so many reactions you'll have to it meaning that. But I'm just—it, you know, that was occurring to me. That people could—there

could be a total defensive self-protective maneuver to think Life After Ramona, if he's thinking you're so fed up with him, that he thinks you're going to leave him any day now. So he's protecting himself by like planning out his life without you. Do you know what I mean? Again, doesn't excuse it. Doesn't mean you shouldn't have tremendous amounts of feelings about this. But there are so many explanations still for what is happening inside him psychically (ph), even though he's writing Life After Ramona. Do you know what I mean?

And that's—I think the more you're just in probably what really was. And for him, too! The more he can get with Dr. Bourd into, "Yeah, it's good (ph) for Life After Ramona. And why was I writing that? Why?" You know, what was happening? Was it self-protection? Was it aggression? Was it—was he really thinking about leaving in some, you know, reality-based way? Even if so, why? You know, was he fed up with feeling criticized, but still loved you? Do you know what I mean? See how that's really different then like, "Ugh! I can't stand Ramona anymore?" [00:10:43] (pause)

How are you?

CLIENT: I'm just—

THERAPIST: It's a lot.

CLIENT: Like, yeah, overwhelmed. And now I'm even thinking—like the title of this was like SI. And he's like, "That's Self Introspection." What if it wasn't Self Introspection? And I don't know. And it's just—even if it is, you know like, "Oh, she'll leave me," he really did make a list, a really, really long list. And some of those things—it's just—like I can't. I don't even want to talk about it with him. Because I can't wrap my head around it.

Because some of them are genuine, like very direct criticisms of me. Very direct. Very clear that he's angry about something. So I can get that. I can wrap my head around that. It seems like a really inappropriate and unproductive way to get it out. It's not even like he (cries?) sat down in a down in a journal and just said, "I am so angry that she was complaining that it was a really big family thing." (sniffles) It's not like that. (sighs)

And then there are things on there that are pretty compatible with me. And then there are things on there that are completely like I could never be. I will never be taller. (cries?) I will never be—you know, like just certain things on there. And then I'm like, "What is that?" That's the really bizarre like— [00:11:58]

THERAPIST: As I'm reading—what's, so what stood out for you? [Do you think] (ph) there are things that are particularly hurtful, like taller?

CLIENT: Yeah. Like roughly 5'3 to 5'9, I think he wrote. Which just seems like the most like cutting. Like to honestly look at someone and be like, "You're not tall enough." He's never complained to me about my height. Never! Not even in a joke. Liked that I was petite. Like just

never—and I'm like, "Are you kidding me?" It's like he—then it feels like he's like building, you know like a (cries?) like a Barbie. Like a—like these are the features I want. And that's just so different from saying (sighs), "I wish my spouse didn't complain about really big family gatherings." It's just really, really different.

THERAPIST: It is really different.

CLIENT: (sighs) [00:12:50]

THERAPIST: And that's kind of maybe what's hard to grapple with that (pause) that's what he's doing. It's exactly the feeling I had reading the List of a Woman. This is not—he's not describing a human being. Do you know that? Like there's no person who fits that bill. No woman. No man. He—it's a total, total idealization. It is as though he's building a robot, who is perfect at this and perfect at that. And perfect at this and perfect at that. And perfect at this. (pause) There's not a single human being who will fit that bill on the face of the Earth.

So already, it feels like it's—there's something inside, where he's struggling with dealing with just humanness. Like people do get annoyed at each other's families in marriages all the time. (pause) Right? Or people are different heights. Or people have lost their temper or, you know. To be a human means you can't have the list that [is what he has described] (ph). [00:13:57]

It's so in stark contrast to his list for himself. He's (ph) really human. He lists his imperfections, right? He puts depression, for example. I'm trying to think of what else. But—he puts a lot of positive things about himself, too—but he put seminary dropout. You know, like it's actually not a self-idealization. He's putting himself as a human being. [As he's real] (ph), perhaps a bit needy. (pause) Averse to angry conflicts. (pause) There are ways it feels—the self-introspective side of it feels actually quite accurate in many ways. I don't know if you had that sense.

CLIENT: I guess I felt like a lot of that was accurate. But then the like—I think it actually says, "Woman Looking For," which is—

THERAPIST: Woman Looking For. [00:14:47]

CLIENT: Underneath his list. Like really (cries?) hurtful, obviously. He's none of—(pause) he's none of those things. I remember it when I like came across the list. And I just like had it up on my computer. And Emma saw that. She yelled like so many times. She's like, "He is none of those things!"

THERAPIST: This part is not?

CLIENT: And it's just like—so what is that? Woman Looking For? Like how is that self-interested? Like how is that? He's like, "Oh, it's what I want to be. It's what I'd like to be. It's what I—" But why is Woman Looking For? Like why? That makes no sense to me. I don't understand that. (sighs)

THERAPIST: The way it's even getting constructed in other words. Like what—

CLIENT: It's like a personal ad!

THERAPIST: Yeah.

CLIENT: And— (sighs)

THERAPIST: Instead of saying, "Gosh. I wish I were better at these things."

CLIENT: Yeah! Or—it's not Ramona is looking for, even. It's not even like that type of a fantasy. It's like –it feels very, very disconnected from my existence. [00:15:43]

THERAPIST: And from his existence. I mean, I—

CLIENT: I think, yeah. Maybe pretty unrealistic.

THERAPIST: Both.

CLIENT: (sighs)

THERAPIST: It's a real kind of fantasy bubble that's really removed from reality in so many different ways. That part.

CLIENT: (sighs) When I first confronted him about the height thing, he said—he's like, "Because if I was ever alone again," he's like, "I wouldn't want someone that ever reminded me of you." And that (sighs?) feels hurtful. And then a while ago, I asked him about it again. I'm like, "I cannot wrap my around this. I do not understand. I've never heard you complain about my height." (sighs) [00:16:28]

THERAPIST: And?

CLIENT: And he said—he's like, "You're going to think I'm a pig." And I said, "OK." And he's like, "Because I wish that when we hugged like your face was closer to mine." And I said— (cries?) I was like, "So what is that? So it's about me. It's not about me. Which is it?" He's like, "Oh, it's both." I'm like, "How is it both?" (sighs) And I told him I thought he was piggish for making a list like that, which didn't help. But I'm furious. And it doesn't make it okay to say something like that, but I'm just unbelievably furious like that it exists. And then it just feels like we can't talk about it, because he's, I feel like almost inevitably, defending it. And that inevitably is like more hurtful to me.

THERAPIST: It is not. It's far away from reality. You know? But what his explanations all, except for this last one sounds like actually more fits closer to probably what was in his mind at the

time. But he's otherwise so far away from what his real intentions are, it sounds like. So it's hard. You can't talk about it. You're only going to get kind of fantasies about it. [00:17:39]

CLIENT: It's just—it feels—it just feels bizarre to me. And it's not like he wrote, "I wish she was taller. I wish we could, you know, I wish her face was next to mine when we hugged." He didn't write that. Roughly 5'3 to 5'9. It was like as if—it would be like if I wrote an ideal weight for him. (cries?)

THERAPIST: Yeah, that's—so another reaction I had to it, Ramona —and I know this is maybe hard to hear, but it felt incredibly demeaning. Not just to you, but kind of—it's a real objectification of a woman period. Do you know what I mean? It does feel like he's kind of sadistically constructing a perfect Barbie doll. And that that's the only woman who's good enough. [00:18:27]

CLIENT: But I don't—that would sound very narcissistic. And his list of like—

THERAPIST: It is narcissistic. (chuckles)

CLIENT: Woman Looking For clearly is—I mean, he's not. I don't know how he jumps from like the list that's mostly realistic, but he leaves out a lot of things. He jumps from that to like Woman Looking For, completely unrealistic, completely like boy he would have to be some kind of (chuckles) top surgeon model to fit that list. And then like 75 things that—and I, I'm really really angry. (sighs)

THERAPIST: Yeah. It's cruel.

CLIENT: (sighs) And I'm especially angry—

THERAPIST: It's very cruel.

CLIENT: Because I know that. I know what he felt about me being critical and I feel like I've worked on it a ton as a result. Not just because of his feelings, but because I needed to as a person. But then on top of it, I really felt like, you know, I'm pretty responsible. I actually, I don't know that I call myself smart, but I finished grad school and did well. And (gasps) I have a full-time job. Like I really, I work hard.

THERAPIST: There are many things on the list actually you (ph) do describe you. [00:19:32]

CLIENT: (sighs) I guess I just don't—where he's coming from—I don't get how he looks at me as like able to pick me apart completely. And I don't know if that's what it—if it's like coming from his own self-criticism, but I just feel like I've at least held down and make like—(sighs) I've been able to function a lot more than he has for the majority of our marriage. And (sighs) and that's what makes—ugh, I'm so angry. Like how? I'm so angry.

THERAPIST: You must be furious. (pause) Say more about the anger.

CLIENT: I just feel like he picked me apart piece by piece by piece by piece by piece, piece. And I'm thinking like, "Wow." Like I (gasps) finished college with a full tuition scholarship. And then I got a scholarship and went to grad school. And then I had a high GPA there. And then I got a job at a great hospital. And like, it's not good enough. [00:20:31]

I like kept us afloat when he like refused to apply to jobs. Like I took out additional loan money. I worked over the summer. I worked in the fall semester of my second year. I like, I feel like I helped him up. I feel like (cries?) I got him help for his depression and ADHD, which I am still furiously furious about. Because gosh darn it, why didn't his parents? Or why didn't he? (sighs) Like I feel like I work really hard. I have friends. Like I function as a (cries?) a real person. I do my chores. I like, I've always been honest with him! Like I'm responsible, and I'm honest, and I'm (cries?) not throwing in the towel the minute he screws up. And I guess, I don't feel like he's done these things for me. So I don't know where he gets off, quite frankly, like tearing me to pieces when I— (cries?) [00:21:23]

THERAPIST: (clears throat)

CLIENT: I just, I don't know what else he wants from me. When I think of how stressed I was sometimes during school—like breaking out in hives every single day one finals week, because everything going on at home plus that—like I just, I'm so— (pause) Not having like quite enough to eat sometimes some weeks because we didn't have enough money, because he like just would not work full time. And going through school like that.

And I **just am so angry** that after all that—like not only is he not grateful, not only does he like screw up my (gasps) graduation weekend—then afterward he has the nerve to be like, "This is what I'm really looking for." It feels—I feel used. I feel completely used. (sighs) And it really fuels the fire when I'm like, "Why can't you just write something nice about me?" And he's like, "It's too difficult." I really like want to almost physically like shake him by the shoulders. And be like, "But you had—"

THERAPIST: This wasn't difficult.

CLIENT: "So much time. Like so much time. And unlimited energy evidently to do this. But you can't like work on a resume or write something nice about me. And I'm seriously pissed." (sighs) (pause) (sighs)

THERAPIST: Boy, this wasn't hard. [00:22:53]

CLIENT: I also—it like destroys me that he was able to do this. And we kept going to see Dr. Farrow. And he was able to sit there. And we talked about—I can't count how many sessions we talked about me being critical. And how to be less critical. And how to like— And I feel like that

was the bulk of so much of it. And every time, it'd (ph) be like, "Ivan, do you have anything to bring up?" "No, not, not really."

And I'm like—I feel like an idiot. I feel like a schmuck, because my husband was making a list like this. And we're actually going to couples counseling, and she has no clue. I have no clue. I don't know if Dr. Bourd—I feel like he didn't know. He says he told him about the Match.com one after it happened. And I felt like kind of hurt, because it's not—I understand that he has to, you know, respect confidentiality and he's not necessarily able to go tell Dr. Farrow like, "Hey! You guys need to talk about this in couples." But I'm like, "We're seeing three different people, and I still can't figure out what the heck is going on?" [00:23:53]

I just like (sighs), "How can you do? How does this never weigh on your mind?" Especially for someone who's so prone to guilt and shame and anger. Like how can it not weigh? Like if I did something like that it would torture me. And I would have to come clean! He's like, "Oh, I did think about these things every day. Just like with seminary." He's like, "Every day it like played on my mind." And I'm like, "Really? Because wouldn't that get to be unbearable very quickly?" (sighs) It feels so disrespectful. It's not like just that he screwed up. It's like then not even enough respect to come clean.

THERAPIST: [He hid that] (ph) for a long time in both instances. (pause) [00:24:37]

CLIENT: (sighs) He said—on the list he has like someone who wants children. And I told him I thought that that was incredibly particularly cruel. Because that's more than I'm unhappy with my wife. That's more than I could be attracted to someone who was like this instead. That's like I want a whole life, and a whole family, and a whole—and that's like a whole different level. And he's like, "Yeah. Every time I read the list, I would stop at that one and just cry, because you're the only one I want to have children with." And I was like, "Really?" Then like—

THERAPIST: He's feeding you lines because he doesn't know what to say right now about it.

CLIENT: (sighs) So what is that? Like was he thinking about like an ideal woman and that's part of it? I don't know.

THERAPIST: So one on the things I wonder about the sequence of it. Starting with this list of it—again, leaves out a lot of things, you're right and maybe a number of these things actually do have elements of idealizing himself still. Right? Just for the record, I don't mean this is a perfectly (inaudible 00:25:42) at all, as much as I was only trying to say there he is at least—it's not a Ken doll he's describing in himself.

CLIENT: No.

THERAPIST: Do you know what I mean?

CLIENT: Yeah.

THERAPIST: So he is—there's some degree of like pointing out his flaws as a person that happens in the first list. Then he moves to Woman Looking For. So what I start to wonder if there's a way this is a massive defense against his own feelings of inadequacy. That he feels like he is not an adequate partner for you. He's not a provider. He's not a defender. He's not stable. He's not aspiring. You know? Like there—these actually are things you've articulated that you would like in a partner. Right? I mean, even just having aspirations, responsible, clean. Right? So in a way, it's a description of the things that you're looking for that he feels he's not. [00:26:49]

So it starts to make me wonder is like has—was he drowning in so much of this sense of inadequacy, in your eyes? Whether that's what you felt or not, what he was doing with your criticism really (ph) not, or what he's doing with your really appropriate judgments of the things he was not doing well. Do you know what I mean? Was feeling like, "I'm such a horrible human being that I don't like—I'm nowhere near what Ramona wants." Right? And that he then goes on this kind of self-protective attack of saying, "Well, here's my ideal woman." Right? Like, "I'm going to describe now a perfect Barbie," as a way of protecting himself from his own inadequacy. [00:27:35]

Again, none of this excuses it, Ramona. I think this list is incredibly actually bizarre. It's a very strange thing to have done. It's very atypical. Even when people go and have affairs, they don't make a list like this. And extremely hurtful and cruel. (pause)

And yet, I think there are ways. The explanation that makes the most sense is that he was being—going on the attack to protect his own sense of inadequacy. That is narcissistic. That's actually what people who are narcissistic do, for example. Like deep down, you feel so like your own worthless piece of shit, for example, so you devalue, demean, pick apart other people, because you feel like inside that's in some ways unconsciously what you're doing to yourself. [00:28:31]

CLIENT: Like he can only feel better about himself if he—if other people are less or inferior?

THERAPIST: At least in this bubble, that's like the only way of protecting what he's—his own like really deteriorated self-esteem at this point—is to build up and say, "Well, this is the perfect image I want." I don't think he always is doing that with you. I don't like—in other words, I wouldn't say he has narcissistic personality disorder in a formal kind of way, where there are people who go about the world all the time putting and demeaning other people down. That's not the way Ivan is in his character.

But in this bubble, there's a way it feels like he's—it's his desperate effort to protect his self-esteem. And it's really primitive. I mean, that's what I think when I say it's bizarre. It's kind of an indication of how degraded his own sense of himself is, or how kind of convoluted and complex it is, that he'd have to go through this. And that I think in some ways, Ramona, is more what is hard to grapple with, the bizarreness of it. Do you know what I mean? [00:29:41]

CLIENT: I can't wrap my—I just like I can't. Can't get an explanation that seems helpful or adequate. And I feel like I can't just certain pieces on that go.

THERAPIST: (pause) I think it makes sense like that you can't get an explanation. I think one of the reasons it's hard for three people even on your treatment team to explain it is that it's pretty strange. You know, there's a lot of—it feels like sort of sadism, and cruelty, and defensiveness, and attack, and belittling, and demeaning that is otherwise not where Ivan lives. [00:30:31]

Like I start to imagine, you know, how little he's able to confront. Imagine this as a kind of all of a sudden he finally let out all of his rage, that he's got to have for a lifetime of even being mad at his parents. Like I think half of this is—has nothing to do with you. Most of it has nothing to do with you. But holds inside it like this one space where he was able to let out the angry feelings that he's stuffed under the rug his entire lifetime.

CLIENT: (sighs)

THERAPIST: That doesn't mean you have to be okay with it, Ramona. Like this, you know, it makes sense that this would be profoundly hurtful and hard to get over. That it's really hard to wrap your mind around every piece of this.

CLIENT: (sighs)

THERAPIST: But I do think it makes sense that it's a kind of bubble of rageful (ph) feelings that came out. That I, you know, in the long run think are good for his development as a person. To get, like have the anger be more a part of his daily life when he's frustrated with something. Direct confronting. Confront his parents. Assert himself more. Not in this way. [00:31:51]

CLIENT: (sighs)

THERAPIST: (pause) And you're grappling with the question of what do you do with the fact that, at this stage at least, his way of managing angry feelings was so kind of sublimated in cruel directions.

CLIENT: I don't know. And I feel—(sighs)—I feel so much anger, but I feel especially angry because while we're spending so many sessions talking exhaustively about ways that I can be less critical, words that I shouldn't use. Like (sighs) just flat out ignoring certain things that don't happen and not saying a word about it. Like getting to, really kind of getting to the extreme where like things work if I shut up. [00:32:34]

And meanwhile Ivan is so much more critical in such an underground like way. I've never said—like as much as I've gotten angry about things, I've never sat down and picked him apart by 75 like characteristics and just like while I'm at it I'd also like it if he was, you know— Like, that's what makes me— (sighs) It just feels like he and his parents sometimes have just been

like I'm so critical, and I'm so judgmental, and anything to avoid reality. But then he's able to do this. And it's so much more. (sighs) [00:33:11]

THERAPIST: Again, because it's so not what he does anywhere else in his life, it's like—I don't know how to describe this—like, you know, imagine, kids need to help their aggressions get shaped and worked into being effective in society. It's like this part of him that is so unintegrated that it is very volatile, rageful, cruel, destructive. And it exists kind of in a bubble inside. And I think probably there are ways it still does.

Like it doesn't sound like he's worked through this enough to say, "Yeah, this is this bubble of rage. And I'm so sorry it came out at you. It's meant for other people. And I was having a hard time asserting myself in the relationship. And this is the only way it came out, to protect myself. I couldn't talk to you, for example, to your face about—" Not these things on the list, but I think if you were to be able to talk about the normal things that were bothering him in the relationship, and coming and say, "Oh, well, here's what I want to work on," or "I'm upset with Ramona for this," in the couples therapy session, he wouldn't need—there's no need for going in to like sort of back channels for this kind of thing to have happened. [00:34:29] (clears throat)

CLIENT: I've asked him. I said, you know, wish we could have—I wish he could confront me, you know. Like I want it to be appropriate and respectful, not like this. But I wish he would confront me and even just say like, "Oh, Ramona, you know, I get that it's overwhelming, but I did—I was upset a little bit that you, you know, (sighs) said that, you know, 12 people for a small family gathering was large for you." Or like, "It makes me feel like you don't want to hang out with my family." Or—and I don't know what more. You know, asking him to do that. I don't know what more I'm supposed—

THERAPIST: You're not. You're not. You're not. This is not on you. [00:35:06]

CLIENT: It's just—it's so angering when you try to get someone to—and then they do this instead. And it's so much more hurtful then even an inappropriate, like even if you yelled at me like you never want to see my face! That would have been (chuckles?) less hurtful. At least it would have been direct.

And it's worse because he never came clean and showed me this. I found it. And as much as I like (sighs) don't want to violate privacy, I'm so grateful. I'm absolutely, like I'm unbelievably infinitely grateful that I did, because what if he had never told me? What if it had continued? What if he added to the list every time he got angry and decided that, "No, everything's great. We're not going to talk about it."

I also don't get it because I guess we spent—you know, we did spend a lot of sessions talking about how critical I am. But (sighs) for the times when we did talk about whatever we, you know, like the job thing or about the— (sighs) Why didn't he even bring it into couples counseling if only to like be defensive and not want to talk about his stuff? I just don't understand how. [00:36:11]

THERAPIST: Because he was incapable. And I think this is what—I don't know that he is capable, yet, of doing that in his own development. Bringing it into your, the room, and to your face. Do you know what I mean? Like that actually requires a level of mature assertiveness that he— In front of you, in front of Dr. Farrow, maybe even in front of Dr. Bourd it's only, "It's all my fault. It's all my fault. It's all my fault," right? That's—he can't assert in front of another person. It's only in a private, like small bubble microcosm that he's able to let these feelings out. I wonder, Ramona, have you brought this list into couples therapy? (pause) What would you think about doing that?

CLIENT: (sighs) To be honest, I worry. Because I feel like Dr. Farrow buys—I feel like she buys a lot of his explanations. And that's not—I'm not questioning her skills. But I think her job is particularly difficult, because she, you know, she can't take sides, and she can't— You know, just because Ivan did this horrible thing, doesn't mean that she then says, "Well, everything about—like it must be what it looks like." And I get that. And it's really complex. But then sometimes I feel powerless, because if he said something like, "Oh, I don't want to be reminded of you in the future," she'd be like, "Oh, okay." And I worry that that would happen. And maybe that's not fair. Maybe that wouldn't happen. Maybe she'd be like, "That sounds like an excuse." But I guess I feel like I— (sighs) [00:37:42]

THERAPIST: But so if you—if you say, "I would like to explain that he said that, but he earlier or after the fact, said that 'Actually, you're going to think I'm a pig.'" So you need to say that to her. You need to—that needs to be said out loud, because that— There's not— It's unequivocal when you describe that. You know what I mean? It's not—it's kind of hard to fight, or protest, and [see it] (ph) a different way.

I also think frankly, Ramona, reading the list, she may be inclined just to buy his excuses. It's hard for me to imagine that because of—I think it would be important for her to read the list on her own. Because there's a punch that gives you a sense of what you're grappling with, what's going on inside him, that just is sort of data. Do you know what I mean? Rather than hearing it from you and your interpretation, or hearing it from him and his interpretation, here it is. So she can just sort of get a kind of a little bit unbiased view of it first. I think I would be helpful if she was willing to read it in advance. I know it's going to be hard for you and for Ivan in different ways to bring it in there, but— [00:38:56]

CLIENT: I'm just—I'm scared of that. And I'm also— So, Ivan is going to talk with Dr. Bourd again today about potentially me coming into a session, which wouldn't be in for another two weeks. Which I guess I'm annoyed about. But I even feel a little scared about that. Not because— I mean, I barely—I don't really know Dr. Bourd. I've met with him like once. But part of me is so scared to, I think honestly, like trust someone outside of you to have like an objective (sigh) or to be able to say like, "These are maybe cop out excuses." Or—I just—and I don't want to engage and spend time investing in and encouraging Ivan to buy into those types of things if they're completely not true. [00:39:40]

THERAPIST: We had a brief exchange, Dr. Farrow, Dr. Bourd, and I, about this question of you're going in. And (pause) I after the fact ended up having a little, some hesitation. I think Dr. Bourd has some hesitations. Just really wanting to make sure it's going to be helpful to the both of you to do that. And one of the concerns is that what he might say to you, if—

CLIENT: Who?

THERAPIST: Dr. Bourd. If you had a private conversation, and he were to tell you what he really thought, would, might be different than what he would say in front of Ivan at this stage in their relationship.

CLIENT: Why is that? [00:40:24]

THERAPIST: In other words, there may be times that— (pause) If he's working right now with Ivan's defensiveness around it, sometimes you're not going to immediately confront the defense, and say like, "You're wrong about this. You're making up lies." Right? I'm not saying—I'm reading beyond what he said. Because I don't know. I don't know his full opinion about all this. But I do know that he said,—to be honest with you, this is sort of almost a direct quote—"I have a hard time buying into what he says all the time." He says when he's in the room, and he's explaining it, it sounds convincing. But when you think about it sort of out of the heat of the moment, it still doesn't add up and doesn't make sense. So I am saying that to you because the side of what I think you might want to accomplish going in there is just hearing more of Dr. Bourd opinion. And that's kind of his two cents at this point. (pause) [00:41:27]

If I said to you—for example, let's say I didn't believe something you were saying—but if I just said to you, "I don't believe you," you might never come back again. So he [maybe put and partly] (ph) sort of pacing himself with how to constructively, slowly, over time challenge some of the defenses. Like people's defenses exist for a reason. If I were to say the minute, the first day I meet someone, "You're defending yourself in this XYZ," like people—it's not palatable. So he may—they may be at a place where it's just slow going to get to that point. He's not directly confronting some of it. Again, I'm extrapolating a little bit. And I wouldn't want him to sort of, to you get the impression that he thinks everything's fine, just because he's not directly confronting it.

CLIENT: OK. [00:42:22]

THERAPIST: That said, maybe this will force Dr. Bourd to actually confront some of it in a way, because you're both in the room. You know, I don't know. There could be upside (ph). But I just know he wanted to be thoughtful with Ivan about kind of pros and cons. And (pause) likewise I want to sort of check in with you about what you hope it will do, what it might not do even though you hope it'll do.

CLIENT: I think I'm looking for (pause) essentially you to like— This doesn't make sense. But when you're able to look at the list, and you're able to say like, "This doesn't add up," I really

appreciate that and value that. And I feel like it's objective. You have no like personal agenda in (gasps?), you know, defending Ivan or defending me. And I guess I'm looking for someone to do that with Ivan and me. Because I feel like until that happens, he's able to keep—we're going to keep going down this rabbit hole of, "It's this. Oh, wait, it was this. Oh, it was kind of both. Oh—" And that's not helping. It's actually more hurtful. But I don't know how to, how to do that.

[00:43:34]

THERAPIST: Yeah. (pause) So maybe I can encourage—I don't know if Dr. Bourd has read the list directly. Do you know if he has?

CLIENT: So, Ivan said that he had like put it onto his phone and read it to Dr. Bourd at some point. But I don't know exactly how accurate—

THERAPIST: Read the whole thing?

CLIENT: That is.

THERAPIST: That would take up ten minutes of a session just reading it.

CLIENT: I don't know how accurate that is.

THERAPIST: Yeah. So, I can ask him has he seen the list (chuckles) or did he hear the list. It sounds like Dr. Farrow definitely has not.

CLIENT: Nope.

THERAPIST: And I can encourage both of them to take a look because— And say—you know, this is again, I'm in some ways in your corner here,—but that you're feeling like he's— There's an accountability that is not happening until that happens in a way that feels like you're really getting at what this was, so you know what you're working with, that you can't move forward past this.

CLIENT: (sighs)

THERAPIST: How would that feel?

CLIENT: I think that would help. [00:44:37]

THERAPIST: What I don't know still is where the best place like if—certainly with Dr. Farrow I think it's really appropriate. And I think she'll hear from me that I, you know, that you're feeling like he needs to be held more accountable. (pause) I don't know whether Dr. Bourd and Ivan will decide on, in their relationship is it helpful and healthy enough to have you in. Would you be open to it if they decide yes? Does that—like how do you feel about it?

CLIENT: I'm a little scared.

THERAPIST: [Oh, that would—] (ph)

CLIENT: And it's not—how do I put this? When you—when we separated, when Ivan lived somewhere else for three months—and you said you need to stop talking with Dr. Bourd at all, like that was just like— I always worried, and I still worry that like he knew about the websites. He knew. Like maybe he knew about the list and never said anything. And I know that that's his job—

THERAPIST: He didn't! Just so you know. At least—yeah, he wouldn't lie to me. (chuckles?)
[00:45:35]

CLIENT: But then I also wonder like did Ivan really have an affair and Dr. Bourd knew about it the whole time, but he— You know, he's doing his job. Like he's not allowed to say anything, but also like oh we separated, and then things never—you never just like started talking again or like, you know. (sighs) He has figured out a lot, but he's able to let it on because he would—but you know, Ivan wouldn't continue to confide in him. I worry about that. So I guess I essentially don't trust him a lot. And it's—I understand that that's his job, but it feels frustrating, someone trying to figure out what's going on.

THERAPIST: Just so you know, at least what I know about that, there are things you were telling me that Dr. Bourd didn't know yet. So when I would ask, "Do you—have you heard about this factor?" I would not explain any details and he would say, "Shocking. No idea," you know.

CLIENT: I sometimes even wonder that Ivan is able to do this in their sessions. Like able to not—he was clearly able to see (chuckles?) an individual therapist for months and have—

THERAPIST: We got to stop.

CLIENT: OK.

THERAPIST: But I'll shoot that e-mail out to both of them, and—

CLIENT: OK.

THERAPIST: You and Ivan can keep talking about it. I understand your hesitation with Dr. Bourd. So— (pause)

CLIENT: Will you be here next week?

THERAPIST: I will. Monday.

CLIENT: OK. Great.

THERAPIST: Yes.

CLIENT: Thank you. [00:46:53]

THERAPIST: I'm in Monday. Not always. Not in here. (inaudible)

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: I guess I want to pick up where we left off.

THERAPIST: What's on your mind? I'm curious.

CLIENT: I felt like it was helpful it was pretty helpful last session to start talking about it even though it's really difficult. It felt good in that kind of...to release some anxiety about talking about it, to finally start talking about it. So in that sense, that was really good. It felt good to hear your perspective on it that felt...I don't know, it felt legitimizing how I felt about it that it really is something hurtful and it really is very bizarre and it... I guess that felt good because of course no one else has been able to do that for me because I'm not going around sharing it obviously, for good reason. So thank God...it was good. [00:01:11]

THERAPIST: (inaudible) have someone else react to it (inaudible) almost...

CLIENT: Yeah, and to even hear you say like, if their explanations [that Ivan] was giving for things on the list that kind of can't add up, can't go together, that maybe he's trying to figure out. And to hear that from you an objective third party felt helpful because I'm really struggling to try to figure out what it is and why, and it sounds like Ivan is too. On the other hand, you talked about it couple's this past week?

THERAPIST: Yes, we had an exchange, just so you know. We talked (inaudible) no. Or two cents about about (inaudible) session, and... the three of us talked. Dr. Bourd also was on the e-mail to you (inaudible) we all just shared some thoughts about what was transpiring. But I'm so curious to hear your perspective. [00:02:12]

CLIENT: Yeah, I actually almost was like...I thought a couple of times about asking you if we could talk for just like a couple minutes because I was so worked up actually. But I got over it. But I felt that it was not helpful, and that's not a critique of Dr. Farrow I just don't know how to talk about it together in a couple's setting, and we're not making progress at home clearly if Ivan's like, one week it's this answer, and the next week it's another answer, and we're not making headway. And I felt a little reluctant because I'd e-mailed it to her and I said, "If you don't have time" because I'd just seen you the day before and I said, "If you don't have time, I completely understand. But at some point Dr. Henderson suggested you might want to look at

this before we're in the room. And we'd really like for that to happen before we talk about it in the session." So she's like, "Oh, I've got a couple minutes to look at it." So I feel like maybe she wasn't very well prepared which isn't a critique; I mean we could have put it off another week or so but she kind of left it open, and she said several times, "I don't know how to do this. I want to be honest with you, I don't know how to approach this, it's like a hot potato." [00:03:34]

Which, I feel so...I feel bad, but I have mixed feelings because on the one hand, of course you want someone to work with who's really honest but on the other hand, it didn't inspire confidence that she... I'm looking for her to take the burden off of like, how to deal with this and how to...relying on her expertise and experience, and she's like, "I have no idea." So I didn't feel very good. And I told her what I told you which is that I was worried that sometimes Ivan brings in explanations, and she really engages and follows it which is hard because on the one hand, it wouldn't be great if she just like, for either of us, said, "Well, I don't know if that's true." But on the other hand, it's like, I'm the only one in the room who's like... We're dealing with a history of my husband lying to get out of trouble, you know, hiding things to get out of trouble, so maybe when he's discovered hiding something, it's prudent or common sense to say like... "Want to be a little skeptical of these answers before we take one as gospel." And it feels like I'm the only one in the room who thinks that that's legitimate, but it's obvious to me. I know Ivan's trying to work on this with Dr. Bourd, but I don't... (sigh) It's really tough, but he said, he's like, "No, the list has nothing to do with Ramona. I did it to hurt myself and I was just punishing myself." And she's like, "Well, I've heard you say that so many times, Ivan." She's like, "I really believe you, and if I was your individual therapist, I would spend so much time talking with you about that."

And I just like kind of wanted to leave the room because she became very sympathetic and compassionate towards Ivan. It was how the list was hard for Ivan. And I'm sure to an extent I'm sure it is. I'm sure it was painful to Ivan and maybe part of it was kind of masochistic, but on the other hand, I guess to me... (sigh) I'm biased, I know I'm you know, clearly... But like sitting in a couple session hearing how it's hard for Ivan and punishing to Ivan and it's not like there's almost no acknowledgment that he wrote these horrible things about me, and horrible is the really nice word for some of them. It felt horrible. [00:05:55]

THERAPIST: It sounds like a pretty messy session. There's so so much going on in the session that is really hard to get a hold of for all three of you. I don't I have to tell you that I don't take that as just a bad sign. There's a lot of turbulence and (inaudible) I worried when I heard how the session happened that I might have set you up for something that was going to be really disappointing no matter what because bringing the list to couple's therapy is going to be very different than bringing the list here. Do you know what I mean? The complexity of what you're both having to (inaudible) together and what she's holding about both of you...and what she doesn't know about you, and what she doesn't know about Ivan that I would know about you and Dr. Bourd would know about Ivan, right?...means that you're not going to get the same exact reaction from her as you would from me. And I worry maybe I set it up for you in the kind of feeling that it would be exactly the same, that she's have the exact same reaction, you know what I mean? [00:07:11]

CLIENT: Yeah, I don't think it's realistic for me to think that, but I think I kind of did. I guess I struggle with the idea of couple's therapy in this context because I guess I think it would be easier if Ivan and I had an argument about something mutual and we wanted to talk about how we argued about it or, what each of us brought to the table, what each of us did wrong. In the list, I feel whether it's... No, I think it's correct. I feel like I have no fault. I didn't write the list. I didn't... There wasn't something I did that...he... I mean maybe he's angry at me for a number of things, but it's not like... There wasn't something I did, and he reacted directly to it. He did it in secret. I didn't even know it was happening. I feel so blindsided. And this is really a Ivan thing, not an us thing. But it's affecting us. So I think it's really hard in the session when each of us is supposed to be taking responsibility and accountability because it feels horrible for the person who was betrayed. It feels horrible. [00:08:18]

THERAPIST: It totally did that, this is where it's really... It's further complicated by the fact that Ivan doesn't get it yet. He gets parts of it, so when she says, "I believe you, Ivan about...that this was self-punishing," I believe him too. I absolutely believe that was a big layer of it. I don't think that's the whole explanation, though. I think there are other layers too that he's not aware of yet. So what as the couple's therapist do you do when you have one person who just isn't there yet? He's not here in the place you're wanting him to be to have the kind of dialogue that you were hoping to have. He can't have it yet.

Does she call him out on what he doesn't get? Probably not actually that appropriate because he just isn't there yet. It won't be palatable. He'll get really turned off by it. Like, that's the work of his individual therapy. And yet, it sounds like what ended up happening was, you guys had been in this place before where then you get increasingly angry and upset. And Dr. Farrow said she had a little bit of a feeling that you were even like not that you said this out loud, but questioning her professionalism, like she didn't know what she was doing, or...really didn't get her to understand it. So she's experiencing your criticism of her, and then all the criticism, the person criticizing in the room becomes you. Rather than, it's Ivan. Do you see what I mean? [00:09:49]

CLIENT: But it feels so **frustrating** because, quite frankly if it makes me a horrible or critical person, it doesn't feel great when you discover this list, and you finally bring it to couple's and she's like, "Oh, I spent a couple minutes. I don't know what to do, but let's talk about it." It felt like for me it's huge and sensitive, and for her I feel like it's an hour of her day, it's a client, it's a patient. And for her she...it's not personal, but it feels like...it's not a problem for her. And it's not supposed to be, I get that. It's not supposed to be, but it felt like she didn't care. And that's me. She's never like said anything like that, but I guess for me it was like so huge and I felt so like..."You spent a couple minutes and your telling us you don't know what to do. Maybe I would feel a lot better you said, 'I think the next time we meet, I'll be more prepared, but let's not tackle something so traumatic when I'm unprepared.'" And I know that's critical, but this is like really important to me, so it wasn't like..." [00:10:57]

THERAPIST: And I get how she disappointed you in that moment that response.

CLIENT: Well, and then (overlapping voices) I brought in my skepticism of like, Ivan is giving answers for things that are like, it's one or the other, some of them they can't both be true; "Oh it's about someone else in the future." "No, it's about you." Which is it? And I just suggested we not engage every possible answer, that we take some time, or that this has happened, that we at least acknowledge that this has happened. And Ivan's like... Ivan got really defensive...he got really defensive. And he's like, "I hear you saying like, well, don't believe me, I'm just going to lie." And Dr. Farrow's like, "Isn't that what you're saying?" And in that moment I felt like it wasn't professional, quite frankly, and I felt like she was taking sides, and I think with her being so sympathetic about Ivan saying it was hurtful to him and hard for him, it was going to be impossible for me to feel like she wasn't taking sides, because even with his list in the room, Ivan is still a victim. And I'm like (sigh) what do I do with that? It feels impossible. [00:12:06]

THERAPIST: I wonder for you Ramona if something like that... I wonder what stopped you from saying at the beginning of the session, "If you haven't had a chance to read it in detail, I don't feel that's safe talking about it today." Or, "Dr. Farrow, if you feel like you don't want to read it " which I would also respect if she felt like, especially as the couple's therapist, I could imagine if I'm the couple's therapist, if I start reading this list that was sent to me by you, I don't know Ivan... I wouldn't know if Ivan on board with my reading it. It would feel a little bit like taking your side and kind of doing something intrusive a little bit.

So I'd want to talk to you about the frame first for, "Do I read this or not? Do you read it in the session out loud? How does Ivan feel about it?" you know, this kind of thing. So that it has a safe context to think about how to explore it together because it's an unusual thing to have this kind of thing brought into the room. I wonder if that's what she meant when she said, "I don't know what to do with this," meaning like, "We need to be thoughtful about what this means in our work to bring this is in." But it doesn't sound like it got conveyed in a way that you understood that. It felt more like she just felt in over her head, kind of thing, or... [00:13:34]

CLIENT: Yeah, she just kept saying, "I don't know how to handle this," and I kept saying, "We don't have to talk about it today. I just wanted to send it." I even said in the e-mail, "I understand you probably don't have time to read it before our session. That's fine. I just want to send this. And hopefully you can at some point look over it, and at some point we can have a session on it." I think I made that really clear, but then she kept saying she had no clue what to do. And I guess I do have an expectation from someone who has expertise and experience, and...a really highly paid professional, that they...if they're like, "I have no clue what to do," that they'd find a more tactful way to say that, and then say, "Let's do this when we're more prepared since I just got it." And I know that's really critical, and I'm not supposed to be critical, but...

THERAPIST: It's not that you're not supposed to be critical, Ramona. If you didn't have criticism, we'd have a problem, ok? (chuckle) Seriously. Being critical is an important part of who people are being able to make judgments about things that are disappointing and things that are feeling good enough. I...When I'm sort of having what evolved and ended up being a feeling in the room that, "Ramona's critical again" you guys haven't been in that place for a while. Do you know what I mean? In that process and that space. At least I don't know if this is how it's felt to

you, but – Dr. Farrow conveys to me that she's over the past number of months had tremendous empathy for you, and pain for you, and even feeling like she's not even sure how you could go back to Ivan after the things he's done to you. Do you know what I mean? [00:15:15]

CLIENT: Yeah, but she doesn't really say that. In fact, I told her when she really started to sympathize with Ivan, I said...I thought that the list was really bizarre. She's like, "Yeah, no. I can see. I would be angry. I'd be wondering if I wanted to be with this person." And it felt very different from your response. and I get what you're saying I shouldn't be expecting the same response. But it felt... This is my lens I don't think she's actually a biased, you know, like...it just felt like we were tackling as a couple's problem as opposed to something like, we both played a role in it. And that there's so much sympathy for Ivan.

THERAPIST: And this is what's so hard. Her job is to find the couple problem do you know what I mean? And I get what you're saying. It's sort of disappointing to bring in something that is just his problem, or if he brings in something that is just your problem. She's leaving her role a little bit if she starts to just focus on your problem, or just focus on his problem. But at the same time, that could be named as a dilemma in a way that might feel like, "Oh she gets it that this is a Ivan issue," but our job in this space is to kind of think about how this played out together. And it sounds like that's not getting named, and I hear how that feels like you're getting blamed for something that has nothing to do with you. [00:16:37]

CLIENT: Well, and it feels like [Ivan's getting] (ph) a ton of sympathy for something that he really did. And I'm sure it is painful for him. I'm sure the assaults and the websites and the lists, like...the life after Ramona vault (ph), like I'm sure this is something very painful and very shaming and very...I'm sure he feels unbelievably...I'm sure he feels some really horrible things. But I think I become a doormat when then we sit and talk about how exclusively or the majority how terrible it is for him. And I'm like, "Wait a minute. I came into couple's therapy to talk about this heartbreaking list that my husband wrote about me, and now I'm supposed to be there to support and care for him." What happened? and he comes into a role where he gets very defensive which I'm sure if I was in a couple's session and we were talking about something I did like that, I'd feel defensive too. And he gets angry and defensive as opposed to breaking down and being vulnerable, and...

THERAPIST: And yet it's also probably that he's getting angry. That's been a hard feeling for him to have. Wouldn't want that to be (overlapping voices) [00:17:43]

CLIENT: Yeah, it just doesn't feel good that it's like defensive.

THERAPIST: Not when it's something he screwed up about, right. So here's another thought on all this, Ramona, just thinking about how hard the session was last week. Even bringing it here was really anxiety provoking and painful and difficult even though it's important and you felt like it's really useful. I wonder if this has been kind of another elephant in the room for you and Ivan that has been... It brings up so much bad feeling for both of you including if even just one layer for Ivan is so much shame that he wrote this list, that he almost can't even stand to be in his

own skin. So much hurt for you, so much anger, so much sadness, so much confusion that you mostly have avoided it for some time, or when you do get into it, it doesn't go anywhere useful that feels like you're kind of metabolizing it. It made sense to me that when this list emerged on the scene of consciousness, it was going to be really turbulent both here and in couple's therapy.

So part of what I even as horrible as that session felt, as angry as you probably are at Dr. Farrow in ways that she handled it I wonder if this was sort of inevitable because it's bursting through of something terrifying for both you and Ivan. And when you're both terrified, you retreat to kind of...your safer difference of places. This is what I was trying to say in my e-mail response, kind of in your defense about how this part transpired, is that I think you end up holding the anger and criticism for you and Ivan as a couple so often. And that because your natural place even as a child to an unusual degree was to be a fighter. You would say, [you used to] (ph) bargain with your parents...to get them to pay a bill where some other kids would have just been...sort of folded over and played dead and died in that context, you really remained the fighter on behalf of what you wanted and needed. So you hold the anger for you and Ivan. He holds the shame and hurt, and I actually think some of that is yours, and some of the anger is his. And you guys sometimes get polarized around this on the surface when you are most vulnerable. And this was a real vulnerability coming on the scene, so it makes some sense that you'd get like the polarization of shame and anger...on the surface would be what happened in the context (ph) of this. And my hope for you and I said all of this to Dr. Farrow about what my senses about what might have happened in the process is that you can both find your way back more towards the center, so there's room for you to be hurt, vulnerable, shamed even filled, Ramona, with your own self-loathing I don't mean in the same way as Ivan as much as... This list I think makes you feel horrible about yourself. [00:21:03]

CLIENT: It does, and when I told Ivan that I wondered if it wasn't just a little bit narcissistic that he builds himself, and this woman looking for like fantastical... It's a complete fantasy, you know this list he builds himself up, and then he tears me down piece by piece by...I mean like... Really intensely that that feels narcissistic. And he's like, "I'm telling you that the list was about me and about hurting myself, and you think it's about you, and you think I'm narcissistic." And I was like, "How can you say that? How can you imagine finding a list that your spouse wrote about looking forward (ph) and not feel...how could that ever not be personal? How could that ever not be...(pause)

THERAPIST: And yet it may have less to do with you than you think. In other words, I think this is in a way where you are (inaudible). The list if he's attacking someone, I think it's actually, factually, not you as much as it is some relationship with his parents and his history. Do you know what I mean? [00:22:21]

CLIENT: But when I have said to him like, "Ivan, I wonder if you aren't really angry for so many years of your parents neglecting things; I wonder if you aren't really angry at yourself for letting things go, like dropping out of seminary instead of getting help; I wonder if you aren't really angry about that, or you really are angry because then you married someone who wanted you

to be like in reality very much.” And that was what came out in a lot of harsh, critical ways, and then even when it comes out in loving, less critical ways, it’s still really hard for him to hear confrontation. And I wonder if he’s not super angry about that. And he’s like...he doesn’t think. He’s like, “Oh, I am angry at my parents, just not like you are.” And I don’t know. I feel like he doesn’t...I don’t know. I can’t figure it out, and there were times when I said to him what you suggested, that we need to share the anger about something...

So he keeps saying he recently started saying he wants to leave Subway, and he wants to get a new job. And I’m like, “That’s great.” (inaudible) last Sunday, he was like, “Would you help me with my resume?” I said, “Sure.” He never got it out. And then a couple times during the week he was going to work on it never got it out. And then yesterday Emma was over for Easter, and he’s like, “I’m just going to go next door for a little bit, give you guys some time. I think I just want to work on my resume a little bit.” I’m like, “Ok.” He came back, he’s like, “Oh, I went through my e-mail.” And I knew where this was going, and I said Later we talked, and I said, “Ivan, I wonder, like I get so anxious and frustrated with this situation. That a year ago, you were just going to work at Subway until you could find something else, and here we are.” And I said, “I think it would be so helpful if we could each vocalize...you know like if we shared feeling frustration or anger or even not to use the D word, but like disappointment...And if you came to me and said, ‘Boy, I wish...I’ve got to get on this. This is a mess’ instead of me always...” (sigh) The worst part is, he says that he and I don’t know if it’s true or not, but he always says, “I do feel that.” I’m like, “Then why don’t you come and say it? Why don’t you be the one to bring it to the table? With the lists and with the websites and stuff, he says how hurtful it is for him and how painful, or... I said, “Ivan, why is it that I’m the one who wants to talk about it then? Why aren’t you saying, ‘This is on my mind every single day. I feel horrible. I just need to talk with you.’ “ I don’t know how to make that happen. I don’t know how for us to share. And I feel like if Ivan could take on more anger about what he did with the list and...if he could verbalize that, then I could have some space to be hurt and be in pain and be vulnerable and...” [00:25:11]

THERAPIST: In this case it’s not so much anger at the list. You’re talking about if he could take on accountability for what he did. That’s different than being angry at you. (overlapping voices)

CLIENT: Like share the feelings about, “So I’m really angry about the list, or I’m really frustrated or confused about it.” And if he could share...I don’t know. If he could take on some of the feelings of being angry that it happened, or sharing (overlapping voices) or sharing the anger that led to making it. Then...instead of him being the vulnerable, hurt one, and then I have to...I can’t sit down, and like...

THERAPIST: This is what’s so complicated about his psyche. He’s so angry at himself that he can’t speak about it. And this is where it becomes a cop out a little bit. Do you know what I mean? There’s a well-known paper, The Grandiosity of Self Loathing. The idea, if I hate myself more than anyone else in the world, then in a way you become protected against people hating you for the things that are disappointing about you because you’re the biggest hater of yourself of all. And yet it can garner empathy because you’re so hard on yourself. Do you know what I mean? [00:26:21]

CLIENT: It's like the same thing that happened right before he left. It's like the time I came home and he was like, he had his propped up, watching TV with the air conditioning on, eating a meal or whatever. And he was just like, "Aw, I'm so sorry. I should not have the air on. I'm wasting money. Aw, I can't believe I'm sitting here with my feet. I should be work " Just like wallowing in self-pity over something that I never criticized. And I'm like... I don't want to feel sorry. I don't want to feed into it. It's so frustrating. And just like when he talks about how hard the lists and how hard the assaults and how hard all of that is on him I'm sure it is, but I feel like it's so inappropriate or so unfair for me to be expected to be his shoulder to cry on because I'm like, "Wait a minute. You did all this horrible stuff to me, and I'm helping you out? What the heck?" (sigh)

THERAPIST: I understand that feeling.

CLIENT: I feel like the roles should be switched. [00:27:23]

THERAPIST: It's like in a way, Ramona, you're up against now, what do you do with the fact that he can only progress in his self-awareness as fast as he can progress? Do you know what I mean? What if you have some more ideas? It's not that we know I don't know the definitive quality, what the list means, I'm not [meeting with him] (ph), but what if you can have some ideas about it that are more well developed than his ideas?

CLIENT: I don't know how we get anywhere. So even if you and I talk about it and you say, "I think he's really really angry at his parents and himself and you for the..." How do I share that with him in a way that we can move on?

THERAPIST: Well, what if even Dr. Bourd says things like that to him and he can't take it in? Do you know what I mean? Like if he sort of like Dr. Bourd has spoken a lot about trying out ideas that...many of them don't Ivan doesn't take up...as either not ready or their just now resonating or... So a lot of things don't...he just doesn't take in. Some he does, but a lot of things he doesn't. So it's even...I guess I'm trying to share this part with you because it's even like, even his own individual therapist what if there are pieces where he is and pieces where he isn't? Not to devalue Ivan either because there may be places in here where there are things that I could say to you that are not palatable to you or intolerable or frustrate you. Like if I start to say you could come across as critical of Dr. Farrow in a way that made her uncomfortable, you know? I don't know whether you can take that in or hear that about yourself or not, and I might be inclined not to say it sometimes because we're still working on layers of that, you know what I mean? So I don't think this is only Ivan and Ivan's problem and this is not just you and Ivan any person in individual therapy, there are things people are ready to hear and not ready to hear. And yet I think there are things he's not ready to hear. My experience with you is, you're pretty receptive even if there's something you really don't want to hear or maybe (ph) disagree with, you often will kind of think about it, want to think about it out loud to receive what I'm talking about and mull it over at least. Do you know what I mean? [00:29:59]

CLIENT: I think so, but something I worry about with Ivan and I've tried to talk with him is I think he is paralyzed by fear of failing, and paralyzed by fear of succeeding. So on his birthday, I was like, "What do you want to do this year? What do you want to see happen? You're 27, like what do you...?" He's like, "Oh, I want to discover." Like, ok. A couple weeks ago, I was like, "Oh, you want to look for a new job. What kind of jobs do you want? What do you want to do like, as a career?" He's like, "I want to change the world." I'm like, "Oh, those are wonderful things." But I also said, "Ivan, you know, I think they are, maybe purposefully even if unconsciously, like so vague and huge and so like...after a year you could be like, 'Sure, I discovered things.' " You know, you can't really fail or succeed at that. And then I noticed he doesn't make short term goals. He doesn't...so if I want him (sigh)

THERAPIST: He's really different from you. [00:30:59]

CLIENT: He is, and sometimes I used to like that because he wouldn't put tons of pressure on himself and be so hard, and he would be able to tell me, "Ramona, you worked... Let's take a break." You know like, that used to be attractive, but then we like pulled so far apart, where now I think he'd almost rot (ph). Like it's terrible to me, like disgusting to me that's like a harsh word, but that he'd rather just stay at Subway... Because he might get a good job that would be challenging. He could get fired. Then he would be pressured to get another...like a job higher up, or like... (sigh)

THERAPIST: You know, I had a thought that I didn't say out loud last week but stayed with me when I was corresponding with Dr. Bourd and Dr. Farrow, about you know when I said it felt like he was making a list for a party? That was like a description of a party? It made me wonder if there's a way that he's felt like what you were looking for was a Ken doll. And I don't say that to say that is what you're looking for, but I wonder if Ivan has been feeling like, "I'm not that guy. I'm not going to be...I'm a wanderer. I want to discover. I don't want to get on a career trajectory and have goals by the end of the year." Maybe for defensive reasons, maybe because that that's not who he is. I don't know all of it yet, how much it is defensive. But I wonder if he like, also part of the list is him saying, insisting, "This is me. I'm not a Ken doll." Like his, the description (inaudible) he's actually really spot on in some places like some of them, undesirable qualities to you. [00:32:44]

CLIENT: Yeah. And to him.

THERAPIST: And to him. Or even [somewhere] (ph), he's saying, "This is me, that I'm not This is me! I'm not going to change it. Like, that's kind of the way I am." You know, I just wondered if there was a way he was picking up on there being things you want from him I think some of which have to do with him growing up, and being in reality which are going to be good for him no matter what. Maybe some of which are kind of like what your image of who you want to be married to is. And what if it's not him? Like, what if there are ways that he's never going to be that person?

CLIENT: And then, are you saying that he made the list about a woman to kind of get back at me because he felt like I did that to him?

THERAPIST: Again, I would say that unconsciously. I don't think he's conscious of it. I think it does still remain a kind of way of punishing, like, "If only he could be the perfect Ken doll for the Barbie, this is how...this is his decrepit self." Do you know what I mean? The way it reads, it is also really masochistic, it's masochistic, and it's sadistic. It's getting you back a little bit. Like, "If you want me to be a Ken doll, then I'm going to want you to be a Barbie" kind of thing. I don't think he's conscious of that though, yet. So you can say that to him. (inaudible) I think he will, at this point, you have that experience last week of...he'll just say, "No, that's not what it's about." I think there's a lot of self-loathing that he's not more like a Ken doll. You know what I mean? I think he then does articulate a layer of it that makes you feel like, "Oh, does he want something? Or is there something he thinks is a perfect image that I'm not?" that hits a nerve inside you about your own history and your childhood of self-loathing. And I think when you are filled with self-loathing, you also get like (inaudible) you get more on edge and ready to go on the attack. [How are you feeling?] (ph) [00:34:47]

CLIENT: I just um [It's hard] (ph) I just um. I wasn't expecting that sorry. (crying) I'm just thinking of the list and I'm thinking of...And I guess I don't really understand because I...I'm not saying I'm a great wife, or even a great person but I feel like I was really... When we got married, Ivan knew what he was getting. And I have been exactly what I said I was. I said, "Oh, these first two years, I'm going to go to school, why don't " and Ivan said he was going to work full time. I went to school. I finished. After I went to school, I was going to get a full time job. Got a full time job. Like, I've... I guess I don't... If Ivan's disappointed, and he feels like I'm not good enough, or I'm not what he signed up for, like, I don't understand because I think I have been responsible and honest, and I've worked really hard, and I've followed through on my promises. And I think my life path I haven't dramatically changed and said, "Oh, I think (sigh) just kidding, I'm going to be just the opposite." So I don't understand. [00:35:56]

THERAPIST: Just so you know, I'm not saying that the purpose of the list is him actually articulating what he's disappointed in. So let me (inaudible) clarify the difference. He could attack you not from feeling disappointed in you but from retaliation at feeling attacked. Do you see what I mean?

CLIENT: But why? But I don't... So we got married, and Ivan was going to have his master's before we got married, and he was going to teach full time, he was going to have a full time job, he was going to get a PhD, he was going to teach on like a college level. He had like somewhat of a life plan mapped out. And whatever it makes me, it makes me, but the fact that he went from like, even the beginning steps of that, just completely not only was it not true, it wasn't because he changed his mind; he failed. And he never got back up. And then years of working in food and beverage industry and he's still like, "Oh, it didn't get to my resume." And I don't think it's fair to marry someone and like purposefully trick them about what your current trajectory is and then berate them...because they're disappointed. I didn't think Ivan was ready to get married

because I knew he was going to work at a pet store and then construction and then a restaurant and then like... (sigh) [00:37:16]

THERAPIST: You were transparent about who you are from the very beginning so that he is knowing what he's getting into. Nobody's perfect, right? And you're saying, "I was myself." He probably knew your anxiety, he knew your bold directness, he knew you organized and focused even more when under pressure and anxiety rather than loosening up. You didn't know what you were getting into in some parts of who he was.

CLIENT: But it's not...I guess I'm so angry because if Ivan feels like I created a Ken doll, it's because he created that image for me. If having his master's before we got married and teaching or getting a PhD if that was the Ken doll, he perpetuated that. And I bought into it, and I never...(sigh) Just because I wanted that, I never sat down and said, "Boy, I wish he was thinner, I wish he was short, like I wish he like, I wish he..." (sobs) It's like so much more than what he did in that list to me is so much more than me saying like, "Boy, I wish you would get back on a career path. It doesn't have to be teaching, but like figure out what you're passionate about, explore something, try something," and I feel so...like why am I all of a sudden not good enough? I guess for him to be able to do that and then turn around and be like, "Boy, you followed through on everything and you were just not remotely good enough. And I wish you were taller, and like..." [00:38:44]

THERAPIST: I don't think he's feeling like you're not good enough, Ramona. That's what I want to keep hammering home. Do you see how it's very different? "I actually think this person's not good enough" vs. "I'm going to attack the person because I feel attacked." In other words, "I'm going to attack " It's a defensive attack because he feels so much like a piece of shit himself.

CLIENT: But I don't understand that. I don't understand then it that's how he felt, why didn't he sit down and say, "I feel so disappointed in myself and ?"

THERAPIST: That's what you're up against and how... What do you do with how complicated his psyche is around this?

CLIENT: I worry that there's not a lot of point in trying this in couple's therapy if he's not ready. I even worry that there's not a lot of point in going to a session with him and Dr. Bourd if Dr. Bourd is going to essentially dance around it.

THERAPIST: (overlapping voices) my reaction.

CLIENT: Well, if he's... I don't appreciate it all or get it all, and I haven't really heard what he thinks about it, or if they ever even talk about it. I would not know. [00:40:06]

THERAPIST: He brought it in. He didn't bring the actual list, but they talked about it in detail the session last week he told me that. The list.

CLIENT: I didn't even know that. But I don't know if he would talk to Ivan and be as upfront as he would be when he's talking to you. And if that's not going to happen, I think that would be really hurtful to me if he's going to be...I think that would be like...(sigh) I know he might need to do that as part of the process with Ivan, but if Dr. Bourd is ready to talk about it here, and Ivan's like still back here, and he has to meet him where he is, I don't think that's going to feel good to hear, "Oh, I know you're still grappling with this."

THERAPIST: My guess is, from the way Dr. Bourd is describing the meeting and...it's going to be somewhere in the middle. But I say that to you know to sort of think about, ok what if it's somewhere in the middle is that worth it to you? We've talked a lot also about whether or not to have this meeting, period. I'm not thinking that it's the greatest idea ever for Dr. Bourd to have the list. I think that will feel shaming to Ivan in a way that's not productive to actually have the concrete list. [00:41:17]

CLIENT: (inaudible) Ivan asked me to send it to him.

THERAPIST: He did?

CLIENT: He did. I haven't yet because he's clearly open (ph), he's away right now, and I...

THERAPIST: So I would suggest to you that if that's what Ivan wants Ivan sent it to him. Because otherwise it's going to set up this dynamic already that like, here you are the sort of tattling wife "I'm going to send to your individual therapist, so that he knows what you've done." If Ivan would like that, Ivan should take accountability and say, "Ivan then you forward it. I'll forward it to you, you forward it to him," so that it's his report of it. I think it will go much better if that comes from him. Does that make sense?

CLIENT: It does.

THERAPIST: I think Dr. Bourd will say a lot of things like, "It's really confusing." That I don't think you will my guess is you will not feel like he's just validating Ivan "Oh, poor Ivan, you feel so bad about this." It's not going to be an answer. But I think he will be trying to say to you part of what I'm saying is like, "What do we do with how confusing and complex this is?" What if it is that he's...this is an expression of his self-hatred, for example? It's a very bizarre way to express your self-hatred still. Do you know what I mean? It's really convoluted and sort of...everything's getting turned inside out. It would be easier if he expressed his self-hatred by sitting down and saying, "I hate myself, I hate myself, I hate myself." You know what that's like. That feels clear and transparent. This is not transparent, and that's what makes it confusing.

I have a feeling that's kind of along the lines of what you'll hear from Dr. Bourd, so you might want to think about whether that would feel useful to hear from him or not. I think it still could be. He's on board with it at this point because he says Ivan he doesn't get the sense...he was worried a little bit, "Was the meeting you pushing for it? And that was kind of like Ivan had to go along with it?" And I said I hadn't heard you pushing at all, that it was suggested to you in fact

by Dr. Farrow. You and I talked and (ph) I said I thought it could be valuable if it was thought through. And he said Ivan hasn't been feeling like you've been pushing for it, that Ivan has said, "We need help. Could you please help us talk about this?" So I think it could be valuable with a caveat if you go in, prepared that it's not going to be me. In other words, he's going to have his different mind anyway, he might think different things. He's going to know things about Ivan that I don't know. And he will also trying to attend to the fact that Ivan is this individual patient while you're in the space too, so it's going to just be a different dynamic. But...still could be useful. [00:43:47]

CLIENT: I think I'm a little scared that because he knows I assume he knows so much about what Ivan's been experiencing he's presumably, even if he's not saying things to Ivan, he's getting a lot of what's going on behind it or the dynamics. I'm scared that he would never tell me or that he would never And I get, I mean Ivan is his patient. Not me. But I just don't want to... (pause) I will say, like, there was one good thing that happened out of it last week, and that was, Wednesday we really argued about it. I was so worked up. I was so upset. Ivan just wouldn't really talk to me. He said he didn't know what to say. He's like, "Oh, I think you need space." And not until Friday, but Friday one of the first things he said to me when I got home was, "I really want to take accountability, and I am really sorry for the way I got defensive, and I am willing to talk about it and write about it and do what it takes. And I am so sorry that it hurt you." And that was huge, I think, for him. And it wasn't me saying, "I think you should apologize," or, "I'm upset about this." [00:44:52]

THERAPIST: That's great. So something's begun. That's the other part just to kind of hold in mind about this. It was going to be really turbulent when this came into the room of your relationship like, in the room, so you would both kind of stare at it together. And there still is the chance really good things could come about that initial hurdle, getting through, you know? I think this is a good moment. Something, something Ivan's beginning to say about it that could continue with Dr. Bourd eventually (inaudible)

CLIENT: I know we need to stop, but I just don't like, should I... It sounds like maybe we should wait to talk about it in couple's is that...?

THERAPIST: Um. (pause) I think it's hard to talk about when Ivan when Ivan doesn't have the awareness that you're looking for. You know what I mean? [00:45:54]

CLIENT: Yeah, but that... Should we wait until he's done more like... Dr. Bourd can get him there?

THERAPIST: Maybe so. You know? I mean I think if there's room for you to say kind of calmly, clearly, that this feels like something that is not your fault not that there aren't lots of other things that you're accountable for and that it was really hard talking about it last week because you feel like it has become somehow you and your issue. And you just get the sense, maybe in order to (inaudible) to be more useful, Ivan needs to work on it a little bit more individually...before you

can explore it in couple's therapy again. And if he ever feels like he wants to talk about it, you're all ears. Ok?

CLIENT: Thank you.

(background noise)

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: It's nice being back pretty soon actually.

THERAPIST: It will be a little easier to continue (inaudible at 00:17)

CLIENT: Yeah, and I realized Monday **I really missed it.**

THERAPIST: That's new for you to say.

CLIENT: It is. I think it's probably good, because in the beginning I think you tried to tell me I didn't necessarily trust it or want to rely on you or feel safe about doing that. So that's probably progress for me.

THERAPIST: I think so. It's like, you know, maybe a little bit of development of being able to rely on someone some when you've had so little space to do that in minimum ways as a child. You had to become so self-sufficient, Ramona. [1:09] Take care of everything on your own. Fight to take care of everything on your own while everyone else around you wasn't doing their job. I know we left off in a hard place. A lot of feelings. I certainly can guess about a lot of the feelings. I'm still so curious to hear from you, you know, what exactly about the items you rattled off. What hits you? How do you take them?

CLIENT: Right. Well, Ivan and I actually **talked about those specific items** just a little bit over the weekend in a way that was **safe and productive**. So we can get to that in a minute. I guess they're all related, but different ones strike me in different ways. [2:16] So for example, the wants to have children one, that one is, you know, obviously very deeply, hurtful, painful. On a different level, because it's not a superficial like a ' It's not one of the ones that is, you know, something that Ivan is genuinely bothered about by me, but, you know, posed in a really cruel way. It's not one of the ones that's just like ' A couple of them are just really petty and childish. Just like, for the heck of it. It's one that says ' That one, I think, is more hurtful in some ways because it's, depending on what you take from it, it's indicative of being more mature and more serious about a future relationship.

THERAPIST: Oh, I see.

CLIENT: So someone who's just like, super furious at their spouse and tears them apart not matter ' I mean, very unhealthy in like, especially the way he went about it. But that's different from like, boy in a future partner, it's really important that we have children. [3:25]

THERAPIST: So there's something I still don't understand about that one through you. Do you want to have children?

CLIENT: Yeah. So that's the kind of bizarre thing.

THERAPIST: That's what I thought.

CLIENT: I mean, we hadn't talked about it seriously. It wasn't one of the reasons we got married at all, and it was understood that it was way, way, way down the road. But we had never ' Ivan, we both expressed some desire that that's something in the future. So that's weird. And Ivan has told me, he's like, yeah, whenever I got to that point on the list I would just like, it would ' I don't know how he worded it, but he would get so upset and so sad, because he's like, I only ever want to touch whenever I'm with you. And it feels ' I don't know whether or not to take that in, because it feels like ' I don't know what it's doing on that list.

THERAPIST: And that's why ' I read it over right before you and I had even met as a kind of third-party reading list. I guess I didn't find that one hurtful at all, 'cause it seemed to me he was describing you.

CLIENT: That's part of my problem with wrapping my head around the list. Because he's like, some of it, I just wanted to remind myself how fortunate I was and how glad I ' It was self-punishing, is how he describes it. But then, when he says, I'd get to that and it would just, you know, I would just stop, because I only ever want to have children with you. So is it about someone else? Is it about reminding himself that he likes this about me? Is it kind of punishing in that he's like, hurting me, but also ' **It's very bizarre and I don't know how to take it** [5:16]

THERAPIST: Can I ' I can't know either what's exactly in his head. It felt like ' You know when I say it felt like describing a Barbie doll. It felt like he was thinking about what is the perfect woman. And in his mind, a perfect woman would want to have children. And in that regard, it feels like you fit the bill. In his fantasy of a perfect woman, also wouldn't get frustrated and think of how many people is a large family gathering. In his mind, you don't fit the bill. Right? Totally unfair and idealizing again, as though the perfect woman would not ever get frustrated with anything. Right? Again, that person doesn't exist. [6:04]

CLIENT: Which I hear you, but at the same time, when that one creeps in, I think maybe he does with he, you know, was with someone who also came from a super loud, large, in each other's business family and they had no problem with it. That person would exist.

THERAPIST: And yet that person would not have something else. Do you know what I mean? That's what I'm saying. I

CLIENT: No, I'm not defending. It's hard, 'cause I actually thought one of the things Ivan liked about me was that he liked that I'm private and I'm more quiet and reserved and I'm not ' and he ' I've noticed when he's with me, he tends to be more like that when he's with his family. All of a sudden, he is yelling at the top of his lungs at the table, just like everyone else.

THERAPIST: Really?

CLIENT: Yes. Like where they sit down to play a game and he's just as loud and like, he doesn't ever do the noisy thing, I think. I say noisy in that they're very public about very private things. And extended family's really private things. [7:03]

THERAPIST: It's so common in couples therapy that the very thing that you love could almost identify as the reason why I married this person is that thing that starts to frustrate you however many years into the relationship sometimes. For the first year, sometimes it takes ten years to get into the relationship. But you could find each other because of the way you complement. He wanted to have something quieter. You wanted maybe to have something that could get louder in some ways. But then, when you actually had that ' a lot of that ' you also can get annoyed at it, right? He could get annoyed at things being quiet and if they're too quiet.

So all that fits in the range of ordinary things people would get frustrated with each other about and then both want and also reject at the same time in each other. It didn't strike as him being so specific about I want to have kids with this ' like another woman at that point. It just felt like that's on his list of things that would make an ideal person. And in fact, that's a place where you guys have common ground. [8:17] Unless there's something ' I thought maybe Ramona has told him she didn't want to have kids or something like that.

CLIENT: So that's been ' The only thing I know about that is that there have been times when Ivan has kind of ' So, I mean, his parents had told my sister before we got married that we didn't need to wait very long after we got married to have children which, needless to say, it put me through the roof. None of their business. I really don't like ' It's so inappropriate. Anyway, so that drives me insane. But then, Ivan had ' I had said oh, you know, maybe in I don't know eight or ten years, you know, like a while. And I think he would be willing to think about it sooner, but not dramatically sooner. So I don't know that there was any huge discrepancy.

THERAPIST: It doesn't sound like it.

CLIENT: No, I don't think so.

THERAPIST: You never said I think I might not want to have kids.

CLIENT: No, which would be different.

THERAPIST: It's very different from I want to wait for a while.

CLIENT: And the only thing I know since the list and the Web sites and such is that I've kind of told Ivan I'm willing to keep trying and keep working on this then, see what happens for a while. But I, right now, don't feel comfortable to, you know, mentally or emotionally committing to yes, I will have children with you, yes, I will stay with you for the rest of my life, yes we will have a home together. Like, a real house or ' You know, I just ' I can't go from finding a list to that and going back to that [9:37] And so I've been up front about that, which I'm sure is hurtful for him. But he would ' I would hope he would think I'm crazy if it was anything different. But that's after the list, so I don't -

THERAPIST: That's after the list. You didn't say ' Yeah. It just didn't feel personal at that point.

CLIENT: But there are things on there that ' like, one of them literally is, plays musical instruments. I have learned to play like, five musical instruments. So I guess that's okay. I guess he likes that. That's all right.

[Laughter]

THERAPIST: And he loves that you want to have children.

CLIENT: But that's why it doesn't make any ' He didn't sit down and say boy, I need to remind myself, I really love these things about my wife, even though I really get angry about these things. And in the meantime, I feel not so great about being a seminary dropout was one of the things on the list. [10:37] You know, like ' it just was very different. And it's hard to ' I think that's one of the reasons it's so hard to take in the list or so hard to talk about it. Because he really will point to ' if we talk about different things on it that you have completely different motives and meanings. And how do you believe that.

THERAPIST: That's why I keep returning to the feeling that it's a list of an ideal person. And that ideal person actually includes a lot of you. There are a lot of things that describe you that it sounds to me like he's ' like, he's talking about what would be a perfect person to him, a perfect woman. And you fit the bill. And, the way he attacks you and maybe is dealing with having felt attacked for the way he's imperfect is to like, talk about the particular things he might consider in his mind, your flaws or things that irritate him. Do you know what I mean? Whereas, his own description of himself is very ' it's flawed, actually. [11:41] It's not a perfect description, but he says it as though this should be good enough. And now, I'm going to describe the ideal woman, which is a kind of way of attacking you in some respects, but not all. This is the part ' the not all could be the part about attacking himself, still, because he's describing so much of who you are. It's why, when I hit on something like sexy, as I'm reading it, I didn't know whether to take that as he thought you were or were not sexy.

CLIENT: that was a little ' like, hurtful, too. Because, Ivan has told me that. He's like, oh, I think you're so sexy. And it's nice to hear, but I always act and I am kind of like, embarrassed when

he says it or I'm like ' or I'll like, roll my eyes, you know, if he says I look nice when I'm wearing like, my pj's and I have my hair up. [12:33] But ' so that one, I don't know.

THERAPIST: Why roll your eyes?

CLIENT: I think I feel uncomfortable hearing really positive ' I just feel uncomfortable with it.

THERAPIST: Hearing positive things about you?

CLIENT: Yeah. I think to a large extent I do. Or, I feel like it's not true or it's said out of niceness or obligation. Or, I grew up not hearing, you know, that my parents were proud of me very often. And I'm not like ' But that was their ' It wasn't that they weren't They just said that they didn't ' I think ' If I could step back, they didn't want to be like Ivan's parents. Over the moon proud, over everyday normal things. Or, acting like Ivan was a rocket scientist when he's fine. You know, there's nothing embarrassing about him being a normal student in college. You know, so I think that was the '

THERAPIST: But they err in such an opposite direction. Do you know that?

CLIENT: I think it can be ' it can feel a little extreme. But either way, I think calling it I feel uncomfortable around.

THERAPIST: And of course you feel uncomfortable now, because it's not built into the fabric of how relationships work. That people recognize really positive parts of you. They see them, love them, admire them, speak about that, talk to you about them, applaud them in front of you. [14:02] That's not what your parents did, so it feels really, really uncomfortable. I mean, this is the funny part about the list is that there are ways to me, I have to say to you. As much of what's on that list is admiring you as criticizing you. Do you know what I mean? I mean, there are some that are clearly criticisms that would not ' the family, you know. Right? So that's clearly a criticism. But then, these other ways it feels like he's actually describing what he loves about you. And I think it's just as uncomfortable for you to hear compliments as it is for you to hear and think about what you feel like is inadequate about yourself.

CLIENT: I think that's very true, but I think another part of it is, it's hard to stomach both. Like, it's hard to believe that someone who thinks that I'm just like, I don't know, that a more ideal person would be more at home like, in a really big family gathering. Like, to hear that in the same sentence as oh, I really think you're sexy. It's hard to stomach both. It's also really hard ' and this is something I think growing up with was very clear for me. It's hard to hear from someone that they love you or you're really important to them, and their actions will not show that. [15:13] If Ivan really thinks that I have all these great qualities and, you know, he's really ' that he's trying to remind himself how fortunate he is, why won't he be honest with me? Why doesn't he respect me? Why doesn't he hold up his end of the bargain?

You know, if you felt that you were with someone like that, wouldn't you want ' It's just really ' It's really hard. And sometimes, even when Ivan says he loves me, it's really hard, since the lists and the Web sites and stuff, it's really hard to say it back. And I'm not sure that it's that I don't feel it. It's just like it feels like a slap in the face. It feels like ' It feels like my dad telling me how important I am to him when he's never home. You know like, that's ' It feels like the same thing. And it's like, in some ways almost crueler than just being upfront and saying, no, you're not very important and I'm not home, and that's how it is and we shouldn't bond. [16:10]

THERAPIST: I understand. I mean, so it's left you in your devilment with this feeling when someone says something positive to you, they probably don't really mean it. Like, words become not that important.

CLIENT: Or, if they do mean it, they're not going to back it up, so really, what's the point.

THERAPIST: This is you saying to Ivan, don't worry about it. You don't need to plan anything. It's fine. We don't need to go on a picnic, you know. Or, rolling your eyes when he says you look pretty in your pajamas and your hair up. Like, that's that kind of protective mechanism. Like, you don't really mean that. And don't worry, I'm not going to take your compliment and run. Because the alternative is that you go, really? You think so? And you feel it. And then, if he actions bear out again, this feeling that he doesn't think so ' you're devastated.

CLIENT: It feels worse. It's also hard for me on a level to think that about myself. I think it's hard to take in a compliment if you can't see any truth in it.

THERAPIST: Well, especially if you haven't been told that by your own parents. [17:09] Like, did they say to you things like, you're pretty or you look so beautiful in that dress?

CLIENT: I think that was hard for them in some ways. I actually ' I don't know what brought it up, but the other day, I was thinking back on this time in church and this is going to sound really bizarre. But I mean, Emma and I ' I don't know. We always ' we dressed nicely. My parents always made sure we had nice clothes. We had like, restrictions on when we could start makeup and stuff like that. But there was a girl in our church who was ' she was incredibly nice. She was so sweet. She came from a really sweet family. They were all so sweet. And I remember my mom talking to her mom when I was around. And she just said how her daughter had so much inner beauty. And the woman's daughter, not us.

And she's like, I think sometimes my girls get caught up in ' or what did she say like ' something I don't know. Something to the effect of how we weren't as developed in that way. [18:12] And this other woman's daughter was really, really overweight. But that doesn't mean she was completely unattractive, but I just ' and she ' It was clear she didn't really care about her appearance very much, which is fine. But I remember feeling so lousy because I think Emma and I were honest and respectful and we were going to church with our parents and not putting up a fuss about it. And I remember thinking I shouldn't have to feel like I don't have that type of ' because '

THERAPIST: That you don't have ' I think I'm not following. That you didn't have '

CLIENT: That **we weren't as equally beautiful on the inside** as it were, because we didn't struggle with the same things that her daughter was. Because I mean, Emma had braces. I had tons of acne. Like, we had our own issues, but it just felt bad. [19:03]

THERAPIST: Like, it didn't somehow feel that she was saying her daughter has this inner beauty, but you don't?

CLIENT: Yeah. Just like she wished that we ' that her own daughters were more like that or whatever.

THERAPIST: Your mother said this.

CLIENT: Yes. Just something like oh, I wish my daughters were more ' I think sometimes they, I don't know if she used the word superficial. But, you know, that we weren't as ' which I thought was really unfair.

THERAPIST: Into appearance in some ways?

CLIENT: Yeah. But I thought it was such an extreme. Because it was clear ' I mean, this other girl never dated, just was not interested in boys, not interested in personal ' Like, not even as much as basic hygiene or, you know, staying fit or ' And there's a difference, obviously.

THERAPIST: And so, do you remember ' So your mother said, I wish my daughters were more like that about this _

CLIENT: Just ' She said something like she wished that we would ' I don't know. That we sometimes forget or we think that that's ' I can't remember how she put it. [20:08] But I remember it was always ' I don't know. That stuck with me and that was when I was still in high school.

THERAPIST: That's so, so hurtful and so sad.

CLIENT: It's okay. I mean, I just remember thinking like, I never looked down at this other girl, because she ' because she was really overweight or because she didn't really care about her appearance. And she was really nice. She was very beautiful on the inside. But I just with that, because Emma and I had different issues like acne and braces, **I wish that we weren't looked down by our mom.**

THERAPIST: That's the point, Ramona, is that there's a way of loving your inner beauty and not having to criticize your appearance or criticize you for valuing what you put on your body. [21:04]

Do you know what I mean? There's a way of upholding both. Being proud of lots of different parts of you.

CLIENT: It's okay. I just '

THERAPIST: It's not okay. It's not okay.

CLIENT: I mean, I'm over it.

THERAPIST: No, you're not. So this is why we're talking about it today. These kinds of things get inside in your heart, in your sense of your self-concept and they're exactly why, when you read this list now, it hits so many nerves. If you were over it, the list would be like, oh, what is Ivan doing with all this stuff? Like, what's his problem. It has nothing to do with you or very little to do with you. To do with you in a way that's like okay, yeah, you're annoyed at me, because I get annoyed at your family functions. We can talk about that in couples therapy. I'm not perfect and someone else would be annoyed at something else. It would not be a big deal. But these hit nerves that were made raw as a child because of what was missing, you know, with the neglect of someone just admiring, actually admiring your physical appearance. I know that in the way your mom was talking about it starts to sound like it's shallow. But you can fall for an entire person including what you see, what you feel for him. It's like, they weren't in love with you. Really in love with you. [22:09]

CLIENT: Again, it's so hard, because my parents have always, you know. In fact, my mom, how many times ' The one thing your father and I have always agreed on is how much we love both of you. Which is like a double '

THERAPIST: What does that mean if you're never home or don't come out of your bedroom.

CLIENT: A double-edged sword. 'Cause it's like '

THERAPIST: They're words. They start becoming words, Ramona. They're just words. And kids see through that.

CLIENT: I think it was more ' I mean, my mom was very, very tough and critical, and I don't think she ' I don't think it ever even occurred to her most of the time that she was. I think it still doesn't most of the time. She says that no, her parents didn't tell her that they were proud and that they, you know, they had very strict rules. And in fact, evidently my grandmother would sometimes tell her that she wasn't strict enough with us which I was like ' you kidding? But just little things like her telling me how much she weighed when she graduated high school. Or the time Emma like, she was ' Emma was in all the musicals. Emma is incredibly musically talented. And this one guy remarked how like, teeny or like, tiny she was when he lifted her like, for this dance scene or whatever. And my mom made fun of her, because she felt flattered. You know, she felt flattered.

THERAPIST: Oh, my goodness. Your mother made fun of her for feeling flattered.

CLIENT: Yeah. She had mocked her a little bit. And it's not like Emma then started, you know, not eating, because this boy said she was so petite. She was just flattered. For that reason Emma will never talk about anything dating remotely with my parents, I think. [24:04]

THERAPIST: You know what you're starting to articulate that I don't think I've ever heard or understood in quite this way before. But your mother, when she's telling you her own weight when she graduated from high school, she's putting her parents up on a pedestal and then, attacks the two of you if you do that at all. Do you see what I mean?

CLIENT: I don't think she ' I don't think she means to, though.

THERAPIST: I'm not saying it's conscious. I don't think it's ' It's completely unconscious. But it's almost slightly competitive with you.

CLIENT: No. I mean, yeah, it can be. When I got married she spent the whole time we went looking for dresses looking at mother of the bride dresses, she got like, seven dresses.

THERAPIST: Wow.

CLIENT: That was tough, yeah. Just ' But I don't think it's ever ' So my mom would never ' I have never heard my mom say that she thinks like, that she looks beautiful, which I don't know if that's a normal thing, if moms would normally do that ever, if they would ever look in the mirror and say, boy, I look nice or, you know. But I've never heard her say that. She like, won't take photos. The vast majority of the time, she won't get in a photo, 'cause she's like, I hate the way I look. I'm such a fat slob. Like, she'll say things like that about herself. [25:24] And so '

THERAPIST: She's full of self-loathing.

CLIENT: My mom suffered with depression for I think the majority of my life.

THERAPIST: That's not just depression. In other words, not just the diagnosis of actual real self-hatred and puts herself down and models that then through you, too. Like, this is how to feel towards yourself. And then, plays it out a little bit with you and Emma. You know, like you both get a little demeaned if you start to feel proud of something in your appearance. That gets knocked down pretty quickly instead of her saying something like, you know what, I've suffered my whole life feeling bad about myself, but I so hope you guys don't. I think you're beautiful people in and out. And I think you look great in that dress. Good for you. Or, I'm so glad, that's such a nice compliment he said that to you. You know? That just like allows you to have feeling beautiful or feeling admirable. Feeling lovable. Feeling beautiful on the inside. Whatever the compliment may be. It got sort of knocked down, because she in some ways can't tolerate the two of you growing past that either. [26:50]

CLIENT: It's a little weird, because lately, she ' she's told us how she'll like tell, like when she goes for her doctor's appointment, she's like, I give them updates on your girls. That's so embarrassing. Don't do that, Mom. Or, when she went to visit my great and uncle and her cousins and such, because this one aunt was a super close sister of my grandmother's. She's like, and I told them all about you and what's going on with you. And of course, they always ask, which is true. They're always sweet like that. [27:27] But she's like, yeah, I **was bragging**. And this is bizarre for my mother. It was very bizarre for her.

THERAPIST: New.

CLIENT: It's so new. My jaw almost dropped, actually, 'cause we were talking about my one second cousin. She just had ' they just had another child, a new baby boy. And they did photo shoots and they made a fuss because they have two girls and now they have a boy. And my mom's like, oh, they make such a fuss. She's like, **he's not half as cute as you girls were**. And my jaw almost dropped, because this is like, my mom would never, ever, ever like, say anything like that. That was a pretty big deal.

THERAPIST: She's changing.

CLIENT: I mean, maybe. It's just ' But then, I still ' I don't know. I think Emma and I feel the same way.

THERAPIST: Of course. You can't just start saying that when you're ' how old are you?

CLIENT: Twenty-five.

THERAPIST: It doesn't undo what was missing for 24 years. And it can even make you suspicious right now like, why is she saying that? What does it mean? Where is it coming from?

CLIENT: Yeah. My sister. Somehow it came up over the weekend. Her title changed at work. She's now clinical director of consulting and I was like wow, Emma, that's awesome. And she was like, embarrassed. She's like oh, no. I didn't change my business cards or anything. She's like, it's not a big deal. [28:51]

THERAPIST: That's so sad both of you. It's hard to have goodness and hard to have that recognized by people. It reminded me of your getting your job. And it was more just sort of like more just okay, thank goodness there's the relief of the anxiety. But there's certainly nothing good about this. It was so hard to really be proud and celebratory. Or for you even now to look back on your accomplishments in your life and be thrilled at what you've done instead of be focused on what you haven't done or what's to be done next or, you know, the endless list of things that show you haven't reached a point of adequacy yet. [29:41] It's so hard to take in what you've done and be proud of it. It's not an internalized a parent who's really proud of you and showing you. And boy, does this flesh out more understanding about what this list triggers in you, Ramona. This is so, so vulnerable. It's almost like there are compliments, there are little

criticisms, and yet inside you, even compliments you're ready to get taken away. They can't be real.

CLIENT: Another one in that group of items was comfortable with her own body. [30:40] And that really struck a nerve in me, because that's something that Ivan actually has articulated to me.

THERAPIST: Meaning, wishing you were more comfortable?

CLIENT: And that's been really hard to take in.

THERAPIST: He said that to you even before the list? Do you know what he means when he says that?

CLIENT: I mean, we talked about it a little bit over the weekend, and that actually was helpful. But I told him part of my problem with even reading that was ' So I, you know, I do have trouble being comfortable, not just with sex with my own body or, you know, I have trouble being comfortable in a swimsuit. I have trouble being comfortable if I'm sitting on the couch and watching a movie. Like, what am I doing? I just have trouble being comfortable with things like that. Just relaxing or enjoying. [31:55] That was always a hard kind of ' that was kind of a trigger with me and Ivan, because when we got married I had never had sex. And for me, it was excruciatingly painful, 'cause actually it has never not been. But anyway, it was hard that '

THERAPIST: It's never not been.

CLIENT: And so it's hard, because that was like ' so the reason I was so uncomfortable was because it was so new and so foreign and so previously filled with guilt, shame, forbidden, you know. And that's not just a switch you turn off or on. And that was hard, because I was looking ' or I was expecting or, I don't know, that Ivan would be more supportive and more patient and more like, of course you're not comfortable with this. It's really weird for both of us. And sometimes I would hear him say ' and sometimes I will say, Ivan has said a lot of times you have no reason to feel self-conscious, you are beautiful. You shouldn't hide. You have nothing to feel embarrassed about. I don't know. It doesn't change it for me.

THERAPIST: It's so ingrained. It's not going to change by him saying that once or twice. [33:10]

CLIENT: I mean, it's nice to hear that, but it's really hard to feel comfortable with it. It's even hard if I try to feel comfortable with it. Like, the times when we have had sex, the next day or transitioning into the next activity or whatever, not feeling weird or uncomfortable or ashamed or dirty or, you know, wrong. And it was interesting, because over the weekend, we talked about it a little bit and I said that I ' that I also felt a little like, he had nerve to say that to me. Because I was like you have ' I feel like you have never been self-conscious about your body or about anything related to sex. And of course, it's never been uncomfortable for you. And '

THERAPIST: Never ' you mean literally hasn't or were you being sarcastic?

CLIENT: No, no, no. Truly. It's clearly not been painful for him. And sometimes I was like, I wondered, because there have been times when Ivan's ' his hygiene or his grooming has been less than amazing or like, he really habit ' like, he really is very overweight and really ' And I was like, I feel like you ' that's you're never self-conscious. And he's like, actually, I'm always self-conscious. He's like, whenever we have ' he's like I'm very ' I'm very embarrassed and self-conscious. Then, I was shocked, because Ivan has never articulated this. Ivan has never been reluctant about anything as the result. [34:43] And then I wondered if he '

THERAPIST: (inaudible at 34:44) saying that?

CLIENT: Yeah. So then I wondered if the comment came from truth and that he really wishes I was more comfortable. But also, in that he doesn't like that about himself.

THERAPIST: Which in a way, stops being a kind of critical attack, but as something in health, if you were coming into a couples therapy. You might both want more. You could say, yeah, we're really uncomfortable. We're self-conscious about our bodies and it inhibits our capacity for physical intimacy. And we want to work on it. That doesn't have to be just a scathing attack. Do you know what I mean? [35:21] Even if there's something true about it. You're acknowledging I am uncomfortable in my body. I think he's right about that. And he's trying to say to you look, I am, too. It may override, you know, some physical desire may override it sometimes. But it sounds like he also has a lot of other anxieties about himself he carries around all the time. So you know, one of the things that makes me wonder like, even before you get to sex, that's the loudest example possible. But even just your body in a bathing suit or your body sitting on a couch even fully clothed, relaxing. It's like, it's hard pleasurable experiences of your body are really foreign.

You know, even that you start with saying even sitting on a couch, watching a movie could feel like awkward or stiff or I don't know what to do with my body. [36:18] That it's hard ' a starting point of describing it, it's hard to just relax. Just relax. Relax in a bathing suit. Don't worry about it. Enjoy it. Or watching a movie. Or letting your body literally, physically relax into the couch. Put your feet up, you know. Lounge back, put your head on his shoulder. You know, whatever it is. There's been so much anxiety in your childhood. A kind of hyper-vigilant attention states. When you're in a fight or flight kind of mechanism. It's your body in a preparedness tension. There's no room for like, pleasure. Relaxation. That only comes when things are okay and you know everything's fine. You never knew everything was fine growing up.

CLIENT: It's also like, I had the TV on yesterday. Ivan was called in to do an extra shift. And I felt better, 'cause I got up and I like, did the dishes and I wiped down the counters. And the TV was still on. I was listening to it. But I felt so much better. Or, but the times when we have had sex, I am like, in my mind, almost thinking like, you know, I feel like I've wasted the evening or I've wasted the morning if I, you know, wasn't up by a certain time or slept in the next morning as a result. Or like, you know, this isn't okay.

THERAPIST: It's like, any pleasure is a waste of time. [38:00] If that's all it does is bring like good feelings. Wasteful. Not productive. That's a painful way to be in life.

CLIENT: It's more ' I feel some amount of guilt or some amount of shame or some amount of need to say to Ivan when I got home like ah, I didn't start working on the closet. You know, like just some kind of '

THERAPIST: Whereas, he might love it if you said, I didn't work on the closet today. I decided to read a book instead or watch a movie.

CLIENT: That's where I think we get ' one of the things I loved about Ivan was that he would try to help me de-stress and show me that I didn't have to ' And then, we tipped the scales I think.

THERAPIST: It's like you're both really good at one side of it and you need to rub off a little on each other to come towards the center. But when the going gets tough, go back to these extremes. And you get frustrated with each other, understandably for it. Him, for getting frustrated with you for like, why can't you relax a little and like, do something pleasurable. Stop and smell the roses. It's not a waste of time, you know. I think, Ramona, though, part of what we're identifying for you is that like, in trauma, overt trauma states, when you were waiting for dangerous things to happen all the time which you were in many ways. Like, the bills not getting paid or coming home to filth and feeling like you're kind of drowning all the time in things not being taken care of. The responsibilities of not being followed through on. It's when responsibilities get followed through on enough that people get to relax and have pleasure. Play a game. Have sex. Watch a movie. Whatever it is. That is like an ordinary adaptive, healthy part of existence alongside taking care of responsibilities.

Your parents did not take care of responsibilities. So it left you preoccupied, vigilantly, with trying to get things done. And in a state of pretty acute anxiety all the time. And I don't know that your body yet knows it's not the same. [40:20] You're not in your family childhood. It's not the same. Your place is a lot cleaner. You can let it go today and it will be okay. Nothing bad's going to happen. You can clean it tomorrow. You can watch the movie tonight. It takes bodies a while to catch up to know literally in ourselves okay, I can relax. Like, you might want to try it one time when you're sitting on the couch and you notice feeling stiff and awkward or uncomfortable.

Have you ever done progressive muscle relaxation before in CBT? Like, just try and see what happens if I just try to tell myself that it actually is okay to relax right now. Nothing bad is going to happen. So once you get on board with that, how to then let it go through your muscles to just see what it's like to just start to melt into the couch a little more. Let it go a little more. [41:20] It also makes me wonder what it was like for you physically in your family. What kind of physical affection was there?

CLIENT: Yeah. When we were little, we were hugged all the time.

THERAPIST: By both of your parents?

CLIENT: Mostly I guess, my mom. And there was a time when we were really little when we would wait up for my dad and we'd like, run to the door and he would hug us. So yeah.

THERAPIST: And like snuggle, and read books and all that? Close, physical, relaxed contact?

CLIENT: That, maybe not so much.

THERAPIST: So when you say we were hugged and kissed all the time, do you mean like '

CLIENT: When we were little.

THERAPIST: Little? How old?

CLIENT: Maybe elementary mostly? And I remember getting a little older. I don't know how ' maybe end of elementary or like, middle school that I would go not tuck my mom in, but I would go and say good night to her. I would have this like, routine and I would always say, good night, God bless and I love you. And I would like, sometimes she'd be asleep, so I'd like, take off her glasses, 'cause she always reads before bed, and turn off the light. [42:33] It's not like, you know, it's not like I was taking carel mean, I guess I was in a small way. But it's not like, a big deal. And I was past the point I think, of being tucked in on my own.

THERAPIST: You're tucking your mom in, though. Do you realize that?

CLIENT: Yeah. But I guess it didn't' bother me. I think it was something I felt good about.

THERAPIST: You got tucked in when you were like, smaller?

CLIENT: I think so. I don't really remember. I slept ' Emma and I shared the same room like, in the same bed when we were pretty little. And then, she moved down to her room.

THERAPIST: How about being physical with her? Was that relaxing?

CLIENT: I guess we hugged sometimes. To this day, it's really hard and awkward for Emma to hug. Even when my parents always kiss us on the cheek when they see us and when we leave, it's awkward for her. Uncomfortable. Or, if I go to hug her after we hang out, I think it's a little weird for her. [43:45]

THERAPIST: So she has it, too, in a way. This kind of '

CLIENT: She's much more reserved physically than I am.

THERAPIST: Again, both speak to a kind of ' what wasn't there to make everything feel along these lines, normal and comfortable, you know. I was thinking about you in a bathing suit how

complicated it becomes, because there's the one side where you can be anxious about your body. Like, literally, does it look okay, or insecure about shape or size or, you know, things like that. There's another side where it's also in a way, anxious to feel good in your body. Like, what happened with your mother, you know, these comments we're talking about where she's kind of like, don't feel too good about your body. I wish you focused more on your inner beauty. Those inhibit the feelings of pride or even like, I know this may be a strange word to say, but exhibitionism that is so normal in people.

Like, the idea of having joy and pleasure in being looked at. And like, feeling sexy or feeling vivacious or feeling someone's eyes go to you is such an ordinary, pleasurable experience. You know, little kids. You can watch two or three year olds flaunting their dress-ups and this and that, and look at me, I'm beautiful. That's where it's really loud, this kind of look at me and I love it when you look at me that is so healthy to have. And it gets integrated slowly into the fabric of who a person is. But you and Emma saying that kind of, look at me, whatever version it took got kind of criticized. [45:50] So this leaves you damned if you do and damned if you don't in a way. Like, there are even inhibitions about feeling good in a bathing suit. What is the feeling you're having with like, this feels great. I love it if someone's looking at me strutting down the beach or something. You know, that wasn't allowed either. We've got to stop. I'm so glad we had these back-to-back and I'll see you Monday. Ramona, are you around Memorial Day?

CLIENT: Geez, I haven't even thought what date it is. It's always Monday, but what date is it?

THERAPIST: The 26th, I think.

CLIENT: I'm sure we probably have off work.

THERAPIST: You probably might be here. 'Cause I was not going to work, but I actually may be back in the office and I'm just 'figured I'd check with you, 'cause I know a lot of people travel also themselves.

CLIENT: No, I don't think I was planning to go anywhere. But yeah, thank you.

THERAPIST: I'll let you know as soon as I know for sure.

CLIENT: Okay.

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: Well, unrelated to other things, I got really great news this weekend. I was so excited. Emma told me this is typical of her, she's so reserved. But she's like, well, I just wanted to let you know I've been thinking about going back to school. And I applied and I start my Ph.D. Wednesday. I'm so excited.

THERAPIST: You didn't even know she had applied?

CLIENT: No. Which is very typical of her. She's so private. She hasn't even told our parents yet. But that was nice. So I took her out to dinner and we celebrated a little bit.

THERAPIST: Ph.D. in what?

CLIENT: She did her MA in psychology and her MS in behavioral analysis. And she's a BCBA, so now she'll I think this is also behavioral science.

THERAPIST: So in psychology or in -

CLIENT: I think behavioral science. Yeah. [1:03]

THERAPIST: Where?

CLIENT: Simmons.

THERAPIST: So staying local.

CLIENT: So that was nice, too. Because selfishly, it would have been sad if she had moved. So that was really nice.

THERAPIST: It's really exciting.

CLIENT: It is so exciting. So that was really nice.

THERAPIST: I don't know if it stirs other feelings, too, besides happy for her?

CLIENT: No. I'm so excited for her. I just kept saying She's acting like she didn't get in. You know, someone who wouldn't tell her family. I mean, she even found out earlier in the week. She's like, well, I wanted to tell you in person. But she didn't tell her roommate. She didn't tell anyone. She didn't really want to celebrate. So that's like -

THERAPIST: So self-protective and private.

CLIENT: Right. I think she's almost afraid to tell our parents, because she could already hear my mom maybe saying, like, how are you going to handle it all. Or, isn't that expensive, or how are you going to get that, you know. And she'd rather not. That would be my guess. [2:11]

THERAPIST: Is that familiar for her? In your life that she's kind of kept to herself as a way of coping?

CLIENT: Oh, yes. The same reason why, you know, if she was dating anyone, she wouldn't tell my parents. The same type of thing. So it's just kind of sad, because this is something huge. Like, she should be celebrating. That's a really big deal. She's like, it's not a big deal. I don't want to make a big deal out of it. I was like, it is a big deal. And if it If the roles were switched, she would say it was a big deal. So I felt kind of sad. And I'm a tiny bit worried, 'cause she mentors grad students at Simmons. Plus, she has her full-time job. Now they're saying that she could teach classes at the college as well. She could also be a research assistant to her advisor. Like, work on some of his projects. [3:05] So it's just a little worried about her, because she already sometimes tilts towards taking on a lot. Working really, really hard.

THERAPIST: You can see in her the trauma of your family. It's so unusual and atypical and a sign of how much damage has happened.

CLIENT: It's really sad, because I, you know, even with everything, it's really sad that she still she probably still hasn't told them. And it's just a shame.

THERAPIST: And you have this to some degree, too. You know, when something really good happens that is an achievement or an accomplishment of yours, it's really hard for you to stay in a place of feeling just joyful and proud and celebratory and excited and sharing news. It's more like, that just the relief of having checked something off a list and you immediately switch over into what's next that I need to drive myself forward on. It's so hard to pause and like, give yourself a pat on the back. That's not internalized for either one of you that that's really important and there's a moment of someone inside you, a parent inside you being so excited for you. [4:37] You're able to do that for each other, some. You're excited for her looks so genuine and pure.

CLIENT: Oh my gosh, I was screaming and hugging her. And she's like, it's not a big deal. We were like, going to go out for pizza anyway, because she's So she's presenting at this association for behaviorists international conference in Milwaukee this weekend. It's like Emma, it's a big deal. Let's go out to dinner or something. So we planned to get pizza or whatever. And I was like, let's go somewhere nicer. Like, let's do something and celebrate. She's like, it's not a big deal. I don't even want to like But if it were me, she would -

THERAPIST: She'd do it.

CLIENT: Yeah, she'd be very different. [5:19]

THERAPIST: What happens if you say to her, you know if it were me, you would -?

CLIENT: I did.

THERAPIST: Can she get it?

CLIENT: She knows.

THERAPIST: It's so great you have each other.

CLIENT: Yeah. No, I'm really grateful.

THERAPIST: She's lucky to have you, too. I know you often talk about how much she takes care of you, but you take of her, too. At least this time, it's so clear. It's really great. I'm happy for you that she's going to be around, too.

CLIENT: Yeah. No, I'm excited, 'cause she has been thinking about this for a couple of years. And at one point, she talked about a program in West Virginia or whatever. Like, she talked about a couple of different So I was wondering if she was going to move eventually. So this is really nice. But yeah. [6:13] This is so good for her.

THERAPIST: What about you? Where's your mind on this?

CLIENT: I think sometimes I'm so excited for her, but sometimes I do worry a little bit that she that inadvertently we become like our parents a little bit. And I wonder that she sometimes could be a little like my dad and work really long hours and do so much extra, and not take care of herself. Really stretch herself thin and that she doesn't. Like, we both were so adamant, so clear what my dad did was so hard on him and sad for him. But also, so hard on everyone and really took away He doesn't have hobbies. You know, he doesn't have friends really anymore. He doesn't Like, nothing. [7:18] He doesn't, I guess also, you know problems in his relationship with my mom. And sometimes I worry, although I would never tell my sister.

I'd like to see her date someone. She doesn't have to get married. She doesn't have whatever is right for her is right for her. But sometimes I wish she would be interested in that. But she's at work all the time. And then, on the weekend she'll hang out with me sometimes. And sometimes I wish I don't know. That would be nice for her meeting Sometimes I'm really scared that she'll see my parents and she'll see what Ivan and I have gone through and she'll think that, why even bother. I feel a tiny bit responsible there, even though I know that's maybe not completely fair. [8:06] It would be nice to see if she could you know, someone who would take care of her or help her find time to relax. Or tell her, you know, how proud they are. That it is a big deal, you know, that would be nice.

THERAPIST: So it's not just TV night. She has her own life partner, not yours.

CLIENT: It would be nice, but it would I'd like to Not that you have to have a significant other to have a to be happy or anything like that. I don't believe that at all. But sometimes I wonder if that wouldn't if she wouldn't enjoy that.

THERAPIST: Well, you're cognizant of the ways she defensively throws herself so extremely into work the way your father did. She has a tendency and will that, over time, kind of erode her capacity for relating even to you, Ramona. And I know you guys have a pretty decent

relationship, but there's a way if work is that much of what drives her, it's it is a part of your relatedness as a sister if you, for example, to wish that she had a significant other, so that you were kind of on the same page about that in your development in life. [9:19] Or that you both had kids one day. Or that you both would do things together as a foursome or something. You know, that's -

CLIENT: No, that would be nice. And sometimes a lot of times like, Ivan works Saturday evenings, not that you should know that. So she'll come over and hang out and we'll end up We'll find a Pinterest recipe and we'll make it and like, watch a movie. Like, have a girls night in or whatever. And that's nice, but sometimes I think like, why isn't she out on date? You know, like, why isn't she doing something. You know, not like it's great that we're like, best friends. We're not just, you know, we don't do it out of obligation. We like to hang out together. It's wonderful. We plan things together. But sometimes, I wish I don't know. I wish she would do more like that. But anyway.

THERAPIST: What are you thinking?

CLIENT: I don't know. I don't know that I have a lot more. I just worry about her so much. That's all. [10:33]

THERAPIST: (inaudible at 10:38)

CLIENT: I just I worry, 'cause she's so private. So, so, so private. She could honestly be dating someone occasionally, and I would never know. She had a boyfriend in college and she never told anyone. She went, after college she and her friend, and I think maybe her boyfriend at the time, too. They went to the beach for a few days. She didn't tell anyone, because she knew my parents would probably not approve and provably have lots of adjustments and questions. But she should have been able to do She's just so private, and I worry that she's so private to the extent that it's okay for me to get in a little bit, but it would be so hard for her, for example to I guess, date someone and let them know that eventually they'd find that my dad is a workaholic and my mom You know, to really get to Because if you're with someone for a long time, you eventually -

THERAPIST: It's another family. [11:36]

CLIENT: Yeah. And that that would be a lot to take in.

THERAPIST: What's your understanding, Ramona, of privacy? Because you certainly have that some. Maybe not to the extreme that she has, but with your parents, you've learned over time to keep a lot of things to yourself. It doesn't go that well when you share. What's your sense of your sister's privacy? What would happen growing up around?

CLIENT: I think she always kept it private, because she was so busy taking care of me. And so she, for example, would not come to me and say that she had a problem, because she was

essentially mothering me a lot. [12:17] Which think is It would have been appropriate had she been my real mother. You know, when if like, if your mom's going through something difficult, it might not be completely appropriate for her to lay it all on the child, and expect them to be equal or even like, even almost like a parent figure to her. You know what I mean? Like, to problem solve and listen and give input and not reciprocate, you know? So I think that's really tough, because she's always felt pressured to do that. And sometimes, even if she tells me like, she had a long day at work and I'll say something like, oh, well, get off the phone. Go put your feet up. Please, get some dinner or something. Or, I'll worry about her and I'll make a comment about it later. Like, I know you had a long week, and she'll She's like, **I don't want you to worry** about me. I don't even want to tell you if I had a terrible day or if something went wrong, because then, you'll worry. And she doesn't want that. [13:15]

THERAPIST: What would it look like as kids when you say she would always mother you?

CLIENT: I mean, she would help me clean up my room. I mean, she would make sure that I covered my books before school started. I mean, she would make sure that we did something for dinner. She would be the one, you know, to listen and talk about things. She would play like, the intermediary when things were so difficult with my parents. She would know things. Because she was older, she would know more about what was going on there and she wouldn't tell me. You know, she would keep me as distant and protected as possible. The only this is so silly to even bring up, but the only birthday party I ever had at my parents' house was for my 16th. And it was because my sister cleaned up the house, not my parents. And like, I still remember my mom saying, your sister's hands are red from scrubbing, and reminding me that I should really be so grateful to her. But I just felt so horrible because -

THERAPIST: Oh, my goodness. She said that?

CLIENT: Yeah. And she meant it in a, look how much she cares about you and that she did this. But it felt horrible, because it shouldn't have to be like that just to have friends over.

THERAPIST: It was meant also to guilt you, in a way.

CLIENT: I mean, maybe. But she would be the one to make sure that those things happened. [14:44]

THERAPIST: So she's really a parentified child. It's the role she stepped into.

CLIENT: Yeah. No, all the time. She would help my dad with his business.

THERAPIST: Oh, my goodness.

CLIENT: Oh, yeah. I mean, I did at some point, too. But never as much as she did. She's the one who would like, kind of take charge and organize things. If we were going to clean up part of the house, she'd be like, okay now you do this and I'll do this.

THERAPIST: And where's your mom when that's happening? She's in her room or would she come and join sometimes?

CLIENT: No, not really. I remember she helped me we made it into a game. Like, taking care of the birds. We made it into a waitressing game. Like, how many just water and food. But, you know. So I don't know. But I think because she took on that role so much, it was really hard for her to step into just being able to be my sister and I don't need to be taken care of. And then, I feel horribly guilty, because with everything that's happened with Ivan, she I think has felt even more like she needed to step into that role. [15:51] And it's also, with the academic piece, it's really hard. Because I feel like she can never quite get over it. So at her college graduation, my mom begrudgingly went, pretty much. She made a scene at the graduation which I don't think Emma knows about.

THERAPIST: What? Begrudgingly why?

CLIENT: Because she just has huge issues going to graduations.

THERAPIST: Why?

CLIENT: She even brought it up at my graduation last year. Because she dropped out of college. And so she always like, makes it into oh, I felt so horrible. I felt so self-conscious. I'm the least educated person here. And it really I'm sure she maybe she does feel that, which is so sad. Because none of us would ever say like, mom, I wish you would have finished college. I've never said or thought that. But it's just so sad. Because in doing it, **she completely robs whichever one of us is graduating**. So she made a huge scene at her college graduation. It was shortly after **my dad's affair**. She Emma and her friends and their parents, they were all going to out to dinner that night to celebrate. And Emma wanted to go. [17:06] And she ended up going alone, because My dad's like oh, you know, maybe we can go. Because they had kept saying, no. But then, at graduation, at the day he went to take my mom's hand and she like, jerked away. And she's like, no. And Emma was humiliated. And she had to go alone while her friends had their parents there. And it's not like It is a big deal, actually.

THERAPIST: Your mom wouldn't go to her graduation dinner.

CLIENT: No. I mean, it wasn't like, a school thing. It was like, she and her close friends and their parents were all going to go out to dinner. And my mom was like, no, I won't go. Because she was angry at my dad, which was horrible to punish Emma for. On top of which, she was begrudging when we got there, wouldn't get out of the car. Locked the car. Finally got to graduation, wouldn't stand near my dad. She took a nap during it. It was horrible. And Emma didn't know all of that. But it was like, what she did see and what she did know. It was really, really horrible. And Emma's never It wasn't until my college graduation that my mom apologized to Emma for that. [18:09] And that was five years later. So she just had a horrible And during it,

my mom often would not even go like, Emma went to school an hour and a half away, but she wouldn't go to her -

THERAPIST: Where did she go?

CLIENT: Franklin and Marshall. It was a really good school. And Emma did very well. And she wouldn't go to her voice recitals. Emma studied opera. She was really great. She wouldn't like, go to concerts. Emma was in the symphony. She just wouldn't.

THERAPIST: Why?

CLIENT: I think in part, because she didn't want to go with my dad and in part because she doesn't like to leave the house. And it would mean being in a crowd and it would mean -

THERAPIST: So part the agoraphobia.

CLIENT: Probably.

THERAPIST: Part, she's so wrapped up in anger at her father that that gets in the way of doing anything with him for her daughters.

CLIENT: It's just really bad. And then, when Emma graduated with her first masters from Northwestern, my mom didn't come. [19:05] My dad did. And then, when she got her second masters from Simmons, Emma didn't go to the graduation, so nobody went. And I wonder if that isn't already on her mind. I am not going to this graduation, I don't want to deal with it. Like, the fact that I'm even going to this program is a secret.

THERAPIST: Why would she tell your parents, in a way. I mean, it fleshes out more of the adaptive part of the self-protection. What do they have Does your mother especially have to have that information at that point if she's not even going to show up to recognize it.

CLIENT: Yeah. It's really hard. Emma has even mentioned my mom forgets where she works sometimes. Emma has worked there for like, six years, and now she's at the head of the My mom won't remember it. She came to visit twice, and she still hasn't seen where Emma works. And Emma would never complain about it or say like, I feel really hurt that you don't support what I'm doing. [20:07] That you went shopping instead of just coming to see where I work all these years, with the kids. So that's really sad. I know at least my dad, if she tells my dad about it, he will be so proud and so enthusiastic. Because when it comes to school and work, he's all about that. He's so supportive of learning. He's so supportive of work. 'Cause I think it's what he can relate to.

THERAPIST: It's really serious neglect of both of you that happened. You make what's the face?

CLIENT: It's my It is what We can't change it. It's really hard, 'cause I just feel sad for her. This is such a This is so wonderful.

THERAPIST: What about you though, too. You know, you make that face, and I know that statement from you, it is what it is. I think there are ways that you get what happened, but I don't know if you ever really have sort of had the space to have the feelings that are there about what happened.

CLIENT: I don't I think I've had them somewhat. But it doesn't do any good. And my mom like, making her comments about how and I just pray that she doesn't say anything when Emma eventually tells her. I just In fact, Emma's like, I have to get them both on the boat at the same time, or else there would be a fight over who was told first. [21:50] It shouldn't be how it is, you know? 'Cause there was a fight when she got into Northwestern. There was a, you told your dad first and why didn't I hear it at the same time. It's just like, it's not about you. But I mean, the comment about how like, she dropped out of school and this is terrible. And she's the least educated. And that's so unfair. It's so unfair, because why would -

THERAPIST: It's so self-centered. It's so narcissistic.

CLIENT: It's really hard, because telling her that would never end well. It wouldn't help. It wouldn't change it. For my wedding she told me so many times, if I had my choice, I wouldn't go. So many times.

THERAPIST: Oh, my goodness, Ramona.

CLIENT: Your dad has ruined it. I don't want to walk with you. It's not the same family. It's just like, this has always been Picking out my dress, she's like, well, they are expensive. You say you're only going to get married once. She just can't Sometimes I think it's maybe over her stuff with dad. [23:00]

THERAPIST: It has nothing to do with you

CLIENT: But it just really does.

THERAPIST: Every part of your life, she relates to from her own feelings and experience.

CLIENT: Which I think is probably natural for parents.

THERAPIST: No, it's not. Not to this extreme.

CLIENT: I mean, 'cause if it was in a positive tone, if it was oh, I'm so excited that you get to go back to school. I loved it when I got to. You know, if it was that type of a -

THERAPIST: I have to tell you, though, if that's all it was, that too would feel shallow. That the only reason I can love it for you is because it was great when I did it? That's not actually seeing you.

CLIENT: No, but it would be so much better than -

THERAPIST: It would be better. But it's sort of like a smidge next to what you actually should have had, which is separate recognition of your separateness as a person. And being happy for you is something that makes you happy. Not because it made her happy. There's no separateness there. It's all about me, still. [24:01]

CLIENT: But it's What do you do? What do you do?

THERAPIST: Is it weird to you to hear my say that I think it does do something to have the feelings?

CLIENT: It's not weird, because I think that's what you expect to hear from a psychologist. Right.

[Laughter]

CLIENT: You should be you should explore your feelings. And it makes a lot of sense, but I think for me, exploring my feelings meant saying like, it is unbelievably hurtful that you want to Or, poor Emma, I don't think she ever said anything to my mom about her graduation. Or, you know, it doesn't help. And it happens again and again and again and again. And if I sobbed to her. If I told her how angry or hurt I was, she would perceive it as criticism. She would be very unkind, I think. 'Cause we've tried this type of thing before. I think the fighting for whatever we needed growing up, if it looked like not talking to them, coaxing, begging, bargaining, yelling, you know, whatever it looks like to try to get what we really needed. It never got it. And at the end of the day, you have to kind of come to accept if they don't want to do it, they're not going to do it. [25:14]

THERAPIST: So what I mean by it, having feelings is not necessarily telling your parents about your feelings. You might want to do that or try that again one day. I don't know. But separate from a communication to them, I'm talking about just having them in here as extremely valuable. And maybe even that doesn't quite make sense. Like, why would you get all upset about something if they are not going to change who they are.

CLIENT: Right. And I think to some even if I'm not actively feeling them, I'm aware that it's hurtful, it's cruel, it's competitive. It really robs me or my sister of something really good that we It's so sad. [26:15]

THERAPIST: You're so intellectualized though, saying that. Do you hear yourself? It's like, you could be telling me a children's short story or something about the story of your life. It's really devoid of affect. And I get, Ramona, that that's been adaptive for you to do it. You learned it did

no good. Your tears even did nothing. Your feelings about it. Your having all the loss feelings. Your having all the anger feelings went nowhere in that relationship. Where I'm unsure about and say that I tilt towards it being valuable is that I think, when you get triggered into being in places of tremendous self-loathing. Like, in your relationship with Ivan around the list, around your own career trajectory and unfolding.

These kinds of things where you get this into this place periodically where you hate yourself. [27:12] Horrible. I mean the words of the, you know, I said that the start of your last the journal entries you sent me last week, and I just read the first few lines of the first one which (inaudible at 27:21) I think this place inside you is related to your feelings about the way you were treated. And that the more in here we can start connecting those things up, even if you never breathe a word of it to your parents. You know it does no good there. They're not going to change who they are. I think it starts to settle and shift your own self-esteem by having had the feelings in connection to where they really started. So that at a job, so that in the relationship with Ivan. So that in a relationship with someone else if you don't stay with Ivan. Wherever it is that there's a calmer, more confident sense of yourself inside. [28:05] I don't Does that make any sense?

CLIENT: Maybe. I just don't know what that would look like. And it's hard to trust. I mean, I guess I would trust you. But it's hard to believe that that would really do that. 'Cause again, I think I've had a lot of opportunities that I have taken to cry or be really hurt. Or, even if it was in private.

THERAPIST: That was another person, though.

CLIENT: No, maybe not always. Emma, I think has a good understanding. But she would never come to me and say, I don't want to tell them, because I still I worked my butt off in college, and that's how my parents responded, you know.

THERAPIST: You have more self-awareness at this point than she does, then in a way.

CLIENT: No, I think she knows. I think she just -

THERAPIST: You do?

CLIENT: Oh, yeah. I think she knows what they did was completely wrong, and she knows that she worked hard and I think she has a good I hope she has a good feeling of that. But she would never tell them, because she knows it wouldn't change anything. [29:23]

THERAPIST: She has a hard time telling you that, too.

CLIENT: Well, yeah. 'Cause she has to protect me. And that if I were to say something like that, she has to be there to listen, not to reciprocate, because she's still taking on the -

THERAPIST: She's a good example, then, for looking at her for a second instead of you. Even though she may have a lot of awareness that what they did is being really, really wrong and hurtful, she's structured now around pain of that. So that she's very, very counter-dependent. So independent that she doesn't rely on anyone, right? That's going to carry with her for the rest of her life until she looks at this.

CLIENT: It's just I don't know. It's so hard, because even if I could try to get her to talk about it, or, even if What do you do? We go home and my mom So my sister is a blue-eyed blonde. She's colored like my dad and I look like my mom in terms of She's so pretty.

THERAPIST: I can picture that.

CLIENT: Right? People always say we look like twins, because of our bone structure, or they say like, you're really from the same parents. But she So anyway, she's so beautiful. But my mom will make comments sometimes. She'll be like, hah, you're so blonde, or something like that. And it always drives me insane.

THERAPIST: As though it's a criticism.

CLIENT: Yes. It always drives me insane, because it's like a People say like, oh, blonde moments. Or, you know, people will say that. But it's so cruel. Or sometimes, she'll look at Emma. And because Emma was a lot healthier than I was in college and she went out with friends sometimes, and she didn't obsess and obsess and obsess over her grades. And she was so much happier. And she's tried to teach me that. And I wish I had been more like her. I probably would have enjoyed school a lot more. My mom looks as that and she thinks She's not impressed. [31:26]

THERAPIST: By her. Or enjoying school.

CLIENT: Emma's not as nerdy, because she or not as grades weren't as high all the time. It's just like, even if Emma could It's just so hard. Going home, I know it sounds ridiculous, but going home is just so freaking hard. Even being on the phone with her is so hard.

THERAPIST: I believe it, Ramona.

CLIENT: And it shouldn't be.

THERAPIST: Why should it not be? I feel like the healthier you get, the harder actually, you're going to be it is to be around here. That's your health that you recognize how hard it is to be around someone who doesn't see anyone else but herself. It's painful.

CLIENT: But what do you do, because I've said to my mom, and she It doesn't really end well since mostly she gets angry. You know, would you consider seeing someone again for to, you know, to talk or to She still a lot of the time's actively grieving about losing her mom a few years

ago. [32:38] How would you feel about that? And mostly she uses it as a way to bring up my dad. Like, he won't pay for her to see this one person that she was seeing that wasn't licensed, and therefore, insurance wouldn't cover her. And I said, there are plenty of licensed people around. It's so hard.

THERAPIST: And you've tried your whole life. You were a fighter as a kid. Trying to get through to her.

CLIENT: The thing is, and I realized this with Ivan, too. The really hard thing for me about depression which probably shouldn't be, since I struggle with depression. Still, is that it doesn't, at least growing up, it doesn't feel like mental illness. **It feels like a choice.** I know it's not a choice, because I've had it and I've been there. But growing up, **watching your mom not get out of bed, not get dressed, not help with the house. Not go to things.** Telling me how she couldn't make it out the side yard to our wash line when we were little. That she was that agoraphobic. [33:43] It felt like Or, like, every Saturday night she would consistently be sick, so that she couldn't go to church the next morning. Couldn't see people. Couldn't get out of the house. Couldn't do something with my dad and the rest of us. It felt like a choice. It felt like Or, you know, if she was harsh. Or, asking for her to help with something and it resulted in a lot of anger or really, really not nice things. **It felt like someone not being nice to you.** It felt like **someone not taking care of you.** It felt like **I have a lot of anger about that.** And sometimes even with Ivan when he's like, oh, it's so hard to do this. I don't have confidence. Or, it's so It's like it's really hard to accept that. And I don't think it's entirely the depression. I think part of it is how you handle it or respond to it. [34:45]

THERAPIST: I don't think, Ramona, you give yourself enough credit internally for understanding that you actually are speaking about something else besides the depression. In both of them.

CLIENT: I don't know what that is, though.

THERAPIST: Right. You keep sort of, almost like, chastising yourself a little bit. I know I should understand, it's not a choice. It's just depression. People can't help it.

CLIENT: What kind of person looks at their mother or their own spouse and sees that they can't get out of bed or they won't see anyone. They won't get dressed in the morning?

THERAPIST: What kind of daughter wouldn't look at that with rage?

CLIENT: But I mean, I'm old enough to be mature and to say like, wow, that's so difficult, and can you imagine living like that.

THERAPIST: See, I don't know that that's maturity.

CLIENT: I don't But I feel like that's what it should be, you know? Just like, if she had any If she was in a wheelchair, I wouldn't be like, boy, you can't, you know, help with this thing, and I'm really angry that I always have to do it. I wouldn't respond that way. [35:51]

THERAPIST: So here's the difference. I think when you are cognizant of feeling angry and hurt and betrayed and pissed off on Sunday morning, because she's sick again. You are picking up on something that is different and separable from being depressed. And I think that calling depression and calling it anxiety collapses these things that are really important to be kept separate all into something that kind of lets her off the hook, just as it does with Ivan. You have had depression. What have you done with it? You went and got treatment.

CLIENT: Right. But that doesn't mean there weren't times when I coped unhealthily. Or times when I mean, I channeled it different ways. That doesn't make it I may have been more adaptive. But like [36:45]

THERAPIST: But Ramona, you've also sought help more than once because you had awareness of this being a struggle. Because you didn't want it to be a struggle, because you wanted to work on it. It's hard work to seek help. It's hard work to do this work. It costs money. It costs time. You're doing it. And that is so much more than you can say for your mother. This is the part where I'm saying, you can be up. There are lots of people who have depression in the world, right? It's a very, very common diagnosis. About fifty percent of the United States population has it at some point. A depressive episode in their life.

CLIENT: But can I ask, is there a difference I'm sure everyone experiences depression. Like, you know, you feel down sometimes versus I am depressed and this is a long-term thing that I'm getting help with. And, you know, like extremes like my mom.

THERAPIST: Yeah. There are gradations where people can have a mild, moderate, severe, long-standing, pervasive depression. You may consider her having long-standing, severe, pervasive depression. [37:49] There are still people who have that who approach it in a very different way than the way it sounds like your mother did. It is in part, what do you do with it, then. This is what you were handed. You can say the same thing for cancer. Someone gets a cancer diagnosis. What are you going to do with it? And you can see the person's personality then play out a variety of different ways that they actually choose to handle that diagnosis. Some of which even lead to longer life. It's been proven now, if you get into a support group for cancer, you live longer through cancer. We're not even talking mental health. We're talking about a physical disorder. Because you've handled it differently. [38:32] So I think you're picking up on an overlay or maybe you would say rather the underlay, the foundation on which the depression is happening is character logical. So personality based. The tendency to give up.

The tendency to avoid. The tendency to blame other people. The tendency to make excuses. The tendency to think only about oneself rather than thinking about other people. Right? There are people with severe depression who would, as a parent, have acted differently than she did as a parent, including saying to you, if she's so depressed she can't get out of bed, this is what

I'm struggling with. I'm so sorry this is affecting your life. Here's what we're going to try to do to help you guys, so that this doesn't impact your life as much as I think it will. We're going to get a babysitter. We're going to help. This kind of thing. [39:33] Come in, I'll read you a book once a day. You know, the kinds of things that have attentiveness to you as a separate person were not there. And that that is possible, even in the middle of a serious depression. And you didn't get it. I think you're picking up in a way in your mother and in Ivan the depression gets used in a kind of passive-aggressive way. Your mother is highly, highly hostile towards your father.

CLIENT: Yeah, I know that.

THERAPIST: **She's hostile,** whether she knows it or not, consciously, towards you and your sister, too. All the time. So many things you've described to me have to do with nitpicking at you and cutting you down or belittling and demeaning some success of yours.

CLIENT: I don't think she thinks of it that way, though.

THERAPIST: I'm sure she's not thinking of that consciously. That would make her a sociopath or a kind of monster. That's not her. But I think she's not aware of the aggression that comes out towards you and Emma by her being so, so, so passively withdrawn. So unwilling to set herself aside to do something for the benefit of one of you. It might be very understandable, for example, to go to a graduation if you haven't graduated yourself, and have a lot of feelings inside. That would be so reasonable and understandable. What you do when you're a parent is you say okay, I'm not going to talk about that out loud. I'm going to go anyway and have my own private experience with this that I'll bring to a therapist or talk to my husband around or talk to a friend about. But not vent at my daughter's graduation and refuse to go. It's really aggressive. [41:35] What are you feeling?

CLIENT: I feel like she would never she never means it to be. She did graduate from nursing school. She went Like, I didn't see her for a year during one of my years in elementary school. Because she went she wanted to be a nurse, so she went. She got her LPN. I don't think either of my parents meant or even though that they were being aggressive or negligent or cruel. But somehow, they both end up essentially putting themselves first. Or with my dad, it's really his business. And that's hard. 'Cause it's hart when they say how important you are to them and how they would do anything for us. It's, when the chips are when you're really in that situation, absolutely they would. It was just a shame, not the rest of the time. [42:51]

THERAPIST: If you're clarifying, it does not feel like even unconsciously there's an aggressive, destructive element of avoidance to you. It feels more like it's just being totally self-preoccupied and unaware that the impact on you is so hurtful.

CLIENT: Maybe unaware, but also, I don't know what the what a real way would be to describe it with my mom. It's like sour grapes. When I saw a counselor at that time, it was before we got married. But I kept saying how hard it was to hear her over and over if she had it her way, she wouldn't go. She bought seven dresses. She just would not It was about her. And it was so hard

to keep hearing that. And she's like, oh, it's bringing up feelings of her marriage. It's bringing up She had a broken engagement. She got divorced in her first marriage, and now in this marriage there's been an affair, and still hasn't gotten over that. [43:58] So I could understand. You know, it's really hard to take in someone else's success if you feel pretty not good about yourself. It might be hard to just be completely openly happy for them. I still wish there were something in her that let her keep that to herself or -

THERAPIST: That's the part that feels hostile. It's one thing even to recognize I can't feel happy because I feel so much envy that I want to run the other way. But the venting out loud.

CLIENT: I don't think she has a sense of a filter, though because she's so isolated. It's so much She's now even moved into a separate room in the house. I don't think she even really sees my dad much. It's the Pats and phone calls mostly. So I think it you're not socially engaged, you probably do lose track of what is okay to say and what's not. [44:55]

THERAPIST: So in which case, you're describing it more like she's unaware of this is back to being unaware of your separateness. So she's not even thinking about the impact on you, Emma, your sister hearing this or you or in your marriage, your wedding. She's only like, in her narcissistic bubble just venting and spewing from that place and not thinking about the fact that this other people will have a reaction not what she's saying. [45:26] Which is different than being overly hostile. I think that's what, in a way, what you're saying. It feels like she's just like in her own warped bubble of place, and just not thinking about other minds in the room.

CLIENT: No, it's true. It occurs to her. And I think confronting her about that, or saying wow, that's so hurtful or so she would even still sometimes justify it. But this really is true, or your dad really did ruin this. Or no, really, I think everyone's looking at me and saying -

THERAPIST: (inaudible at 45:59) For your own self-awareness, your own development about what impact that had on you exactly. You know, for example, the more I get to know that, it starts to help flesh out a little bit more about how it's been hard to see Ivan as separate sometimes from you.

CLIENT: Yeah.

THERAPIST: And so if his shortcoming becomes your shortcoming, and it actually isn't. It's his shortcoming.

CLIENT: It's been hard to see the separation between his depression and coping mechanism as well. I know. I wish we had more time.

THERAPIST: I know.

CLIENT: So next week I got your e-mail, thank you. And I meant to respond, but I know you're away. So if you have any other times, I would -

THERAPIST: Yes. And I also don't know, Ramona. It seems like the kind of work you're doing these days. It's a lot to get over here. But if you ever wanted to go back to finding a second time.

CLIENT: That would be wonderful.

THERAPIST: If it's crossed your mind.

CLIENT: No, it has. It would be wonderful. I just don't know schedule wise how feasible. I think it would probably have to be early in the morning and then, maybe one day a week. It could be like, you know, I could take out work hours if it doesn't conflict. But I probably couldn't get away from work twice a week.

THERAPIST: Right. What if it were 8:00 in the morning, or something like that? Is that late enough? I mean, is that early enough or is that -

CLIENT: I could do earlier, 'cause I'm supposed to be at work at 8:30.

THERAPIST: And you're saying, you could do earlier?

CLIENT: I could do earlier. Yeah. I could come here and then Usually it takes around a half hour to get there.

THERAPIST: But I mean, if you could could you come in a little late two mornings a week? A little bit late?

CLIENT: Yeah. No, I think that's very potential, because I usually I have the hours. I have the extra hours and I can always put in extra hours. It's just if something conflicts that I can't possibly miss. That's the tricky But yeah. [48:11]

THERAPIST: So I'm going to have an 8:00 actually an 8:00 on Tuesday and an 8:20 on Thursday opening soon. So I don't know if -

CLIENT: So I could never probably do Thursday, because I have a 7:00 a.m. meeting at work. That's one of my extra. So I couldn't miss that. But Tuesday I think, very likely. A very good possibility.

THERAPIST: Okay.

CLIENT: And that would probably work maybe better either way.

THERAPIST: Either way than this time.

CLIENT: Probably. 'Cause it seems like I can't predict the schedule.

THERAPIST: So once I don't know for sure when that's going to be free, but I think I think it's going to be early June. One of the first couple weeks in June. So once I know that for sure, I'll let you know.

CLIENT: That would be great, thank you.

THERAPIST: Would you want to try to keep this as a second time?

CLIENT: We can. I just think it's going to be like a -

THERAPIST: Variable.

CLIENT: Yes. Very much so. But then, next week if you have any other times. I know you're out on Monday.

THERAPIST: Yes. I'm just looking quickly. I do. I have somebody out. So I could do 8:00 on Tuesday.

CLIENT: Next week?

THERAPIST: On the 27th. That will work?

CLIENT: Let me just check. Can you pencil me in and I'll e-mail you and confirm. That would be lovely. 'Cause I don't want to miss.

THERAPIST: And if that doesn't work, I have a midday Friday. 8:20 Thursday you couldn't do.

CLIENT: No, unfortunately. But 8:00 on Tuesday.

THERAPIST: 8:00 Tuesday.

CLIENT: Okay, thank you.

THERAPIST: Great.

END TRANSCRIPT

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THERAPIST: So this time seems like it might work better? Is that-?

CLIENT: I think maybe, since I can't really predict the Monday mornings. It's sporadic. So I can check and make sure that it's okay with my boss that I just switch. And that should be okay, I would hope.

THERAPIST: And Tuesday mornings you think overall on this are better, as far what you've missed.

CLIENT: I hope so. I certainly hope so

THERAPIST: Just let me double-check that I It may even end up being free next week, after all. And if not, I do have a 7:10 opening Tuesday morning. So if So one or the other. 7:10 will still get you in early. Okay. So Let me know, 'cause I think that's going to be free.

CLIENT: Okay, thank you. And let me know if it is available next week, maybe, just in case that doesn't work.

THERAPIST: And if not, 7:10 might also be doable. So should we assume one or the other of those and not the Monday, or do you want to let me know?

CLIENT: Yeah. I want to let you 'cause I'll check, but I have no way of knowing. I haven't seen the new work schedule yet.

THERAPIST: It's been a while, which is funny. It hasn't been.

CLIENT: No, it hasn't. [1:26]

THERAPIST: Somehow we added a day. How are you?

CLIENT: Okay. I guess okay. Over the weekend was a little rough. But I mean, I'm okay, really.

THERAPIST: Where are you?

CLIENT: I keep hearing myself just say I'm okay. But I am. I guess I want to say with Ivan things are maybe looking hopeful. It's hard because sometimes I realize that now, sometimes things that are happening that are so much better that I could have expected a long time ago feel like, because they aren't at another place, they feel like a disappointment. [2:34] But it's funny Not funny, but it's interesting, because a while ago, that amount of it would have been huge.

So I think in some ways that is nice, because having higher expectations and a higher likelihood that they could actually happen, that's good. But even if it's disappointing if they don't. If that makes sense. It's a different type of disappointment. I'm trying not to use the word disappointment with Ivan. But I had told him I felt let down. So I'm sure it was hard for him to hear. It's a little tricky with the job thing. He's not trying to apply. And it's hard, because he isn't

compliant or following through as much or is aggressive or ambitious or however you want to put it. But that's the other **He's a lot more than he was before**, so it's -

THERAPIST: That's what I keep wondering is what **is that what you're referring to** that makes you lead off saying that **things are feeling a little more hopeful?** [3:43]

CLIENT: Yeah, I think so. But it's still hard, because I realize it's not it still would be quite realistic to say, he's quite old enough. He's quite He's had plenty of time to I don't know, not relax. I don't know what the word is, but his job at Subway hasn't been, you know, like, he's not working there all the time and stressed. And you know, he can't possibly apply to jobs. So he's had plenty of time to I think it's been over a year. **So this past week I guess he applied to eight or nine** I think in the end? Maybe, yeah. Eight or nine. **So that was good.** I mean, the goal was 12. But that's still huge for him. And he had only applied to one before last week, to my knowledge. So **he actually got serious about it this week.** [4:41]

THERAPIST: **That's a real change.**

CLIENT: It is. It is. And I feel bad, in a way, because for example, we had a little deal. He was going to apply to 12 jobs, and then, Sunday afternoon we were going to go to the beach and reward him and just have a goal kind of to look forward to. 'Cause I think for him, it's not enough to feel really satisfied. He also **So it was disappointing because, you know, he didn't make it there.** But it still, you know, **him applying to eight or nine jobs in a week for him is huge.** So I guess I feel a little conflicted. [5:28] Friday night I got home, and he's like oh, I planned we were going to go out to dinner. We never like, I can't even remember that last time we went out to dinner together. And he was like yeah, but then I looked and they took out more in my loans than they were supposed to. Which is true, that actually happened. They took out a lot more this month. There was a clerical error which isn't his fault. No, I mean, it's happened before.

But I mean, I heard him on the phone with them and they had a record that he had called earlier in the day. So **he really was spending time trying to fix that.** But it was just That, you know, generally wasn't his fault. But then he's like, so, that pretty much took the rest of, you know, what was in my account. And he's like, so And I found out he hadn't been checking on his loans, because I found out, because I went to the store and **I was going to pick up flowers for you.** And I was like, oh, that's nice. But I didn't because my account So there again, you know, it's not it's so much better like, the fact that he was thinking about getting flowers or thinking, we could go to dinner. We could have a real date. [6:39] It's huge, but then, I also felt a little guilty, but I also felt a little I felt let down, you know. And it makes it hard then, I think. And it makes it more hard for me to say, that would be so nice. Because, you know. And then, we talked a little bit about Ivan had said, towards the end of June I guess, like, after our anniversary this year, **maybe we could go away just one night.** We've never gone on vacation another than our honeymoon. **That would be so nice.** Nothing extravagant, but, you know, like somewhere. So many beaches nearby. Like three nights in a row this past week he's like, I'm going to book it tonight. I'm going to get it done. And we've been talking about it for a few weeks, off and on and more or less, I've been hinting. And then, he's like, now I really can't.

And I was like, yeah, I know, but I have this feeling you didn't plan anything. You didn't He made it sound all along like, I have a place picked, I have the whole thing planned out. All I have to do is book it. And he's like, that's true, I didn't. He was One of those nights he was just going to force himself to find a place. [7:48] I think, you know, really well-intentioned. And I think he probably did feel overwhelmed or a little bit like I mean, I know this is like a coping mechanism. It's not just me, or not to take it personally. But on the other hand, he did come clean pretty quickly and say, you're right. I didn't. Which is actually very important. So it's hard, you know. 'Cause I feel let down here and there. And I feel like It's weird, but tone of the thoughts that came across my mind over the weekend was, I just wanted attention. Or, I just wanted affection. I just wanted I really wanted that, because. Anyway.

THERAPIST: It's so tricky in many ways. It's a fine line you're having to walk together in order to work on this in your relationship and particularly for him to work on this part of himself in the relationship, in that you are going to be disappointed when he tells you the things that he really wants to hide from you. [9:02]

CLIENT: Right. And I don't want him to hide them.

THERAPIST: You don't want him to hide them. And that's what I think you're trying sort of The more you can say in yourself and to him again, out loud, both things. This is so much preferable to my not knowing the real truth. I'm less so much less disappointed than having you lie to me. And, I do still feel some disappointment.

CLIENT: That's the part I think is hard for him to hear. I think it's hard for him to hear it no matter how valid or how gentle. It's really hard for him to hear. Because I think in some ways, he hears that within himself so much. And I can imagine it would be, you know, if you were trying to do something really nice. If I was trying to do something really, really nice for him and I just wasn't getting it together for whatever reason and then he said, oh, I feel let down that you didn't. [10:02] That would feel I'm sure that would be sad.

THERAPIST: It is important, though, that you both find a way for your feelings to get to exist. In other words, if you end up feeling like, I have to tip-toe around this so much, because he's feeling so much that I should not say anything about it or can't have my experience. That's as much of a problem as him lying. Do you know what I mean? That's its own really symptomatic thing that's happening. It may be that what you have to do recognize that whenever you are going to say let down or disappointed or whatever it is that it's you don't have to be that loud about it and he will get it. [11:05] Do you know what I mean? Or, that it's held in a kind of with love as it gets spoken, instead of the chastising side of disappointed, which I think you've been doing. I mean it's so different the way you talk about it, even in here, than where it used to be. Where, that side I think would feel so scathing to him that it would pull him back into line because it was so painful to get it wrong. I think this side of you that's been increasingly having a feeling and sharing it, but also understanding the context not being as personal as you once might have thought it was. And increasingly, try to help him understand. He just has work more

to do to figure out what's happening that stops him from going and looking up where to go stay in a hotel. You know what I mean? [12:06] Like that what his internal experience is isn't at least to me, is not clear. Like, what where it breaks down and why.

CLIENT: Yeah. I mean he's talked I think he's used This weekend he used the word, **disconnect**. He **realizes that what he wants and what he does, they don't match up**. He desperately wants a new job. It's such a struggle to get him to sometimes He really wants us to do something nice together. But it's so hard. And he has expressed I mean, he's anxious. He's ashamed. He's overwhelmed. He copes with avoiding. I imagine it's pretty much the same. He's told me that Dr. Bourd describes it as a which is a little weird to hear, but a self-defeating perfectionism. Like, it's never going to be good enough, so I don't do it at all. Which is so hard to work with, because it's like, I can do so much and I can only encourage so much. And at a certain point, it doesn't feel reasonable. I've felt that before.

There are things I know for a fact I've put off, because then like, oh, I feel so bad I have put it off. [13:24] Not crucial things. But I know what that can feel like. But I also I guess I don't understand why it doesn't reach a point pretty quickly where Ivan is like, but I'm going to, you know, push through it. And I've even said to him sometimes, don't you feel relief or feel so much better when I put off something, even if it's like, insignificant and I finally check it off my list. I feel so much better. And half the time I think, it wasn't that bad. I could have felt this a while ago. And Ivan's like, no, I don't feel that. I just feel more I just feel terrible I didn't do it sooner. It's hard. And it's hard, too, because sometimes I feel he he's come really far in this department, but sometimes it's like, he won't help himself. And it's hard to be sympathetic, you know, if I keep hearing him say, I don't want to work at Subway. I just wish I had something else. I'm not qualified for anything. I'm not doing any You know, it's hard to continually be sympathetic.

Because then, you know, so apply to a job. It's really hard. [14:27] But I actually felt that we had a really good or productive couples session last week where Dr. Farrow talked about times to just we had an exercise in her in the session. But **we've also tried to do it somewhat at home where Ivan just talks about how he's feeling** about whatever. And I just listen, and that's kind of the job of it. I don't problem solve. I don't pour out sympathy. I don't So she said, that can be really helpful if we each have times where we can just do that. And then, she said there can also be times when it's time to do something about it, and we can talk about that, too, which is nice.

THERAPIST: The space to have him have his experience more, I think is really a very useful sentiment. Because he's so used to I think you're both so used to clicking into what do you do about it. And then, **he clicks into shame that he hasn't done it sooner**. [15:32] That just being able to get to know what his different feelings are about all this, without there being any response about what to go do differently from either one of you, including him. I mean a part of what you're doing by just listening is **teaching him how just to listen to his own inner experience and get to know it better**.

CLIENT: And I told him it's incredibly helpful for me, because it's such a different experience. I have tried to tell him if I hear him sit down and say, I feel anxious, I feel overwhelmed about this

job thing. I just really need something. I said, that's such a different experience from me having all the anxiety and all the worrying and all the like Oh, my gosh, why don't you apply to Or, it's just such a huge, huge difference. Because I think there, there is definitely a disconnect where he says he feels all those things, but he rarely will talk about them. And I've tried to encourage that if he can talk about that more, it would actually help us both. [16:33] 'Cause then, I don't feel alone. I don't feel like it's all on me. I don't feel -

THERAPIST: And you don't feel like then he's not in reality. So the urgency (inaudible at 16:46) understand this is a problem. If you hear he gets it's a problem. It's funny, because the problem doesn't go away. But when you know that he understands it -

CLIENT: It's huge.

THERAPIST: Then, you get to relax a little bit. Like okay, he gets it. He feels it, too. You're not left holding the ball for all of the anxiety. No, that's great.

CLIENT: So I think that's good and I hope we keep doing that (inaudible at 17:13) This weekend was I said it was a little rough, because this weekend I found myself turning back inwards, feeling disappointed in Ivan or feeling less important and feeling really horrible about myself and having some not so great thoughts. So that was not good.

THERAPIST: Do you have a sense, Ramona of what was there Did this grow out of a particular context? Was it him not -?

CLIENT: It was a series of small disappointments. And then, oh, I lied about this. And I happened to talk to my mom and she had finally found out about Emma's program. And I was like, you know, that was hard for her and I wish it wasn't so hard for her to tell you -

[AUDIO ENDS ABRUPTLY]

END TRANSCRIPT

BEGIN TRANSCRIPT:

CLIENT: There's actually something that I've been wanting to, I don't know, ask about or talk about that I keep Every time I leave here I think, oh, I wanted to So a few weeks ago when Ivan made the fake business card, whatever and he talked about it in couples. I was kind of struck, and I just keep coming back it a little bit, Dr. Farrow response. And she talked about how young people in general sometimes cope with fantasy. And that as they get older, it's less and less, although sometimes they'll come back to it. That's what she said. That it's not like no one else does this at all. I don't know if she said there are different degrees of it. But she said it happens. And she said that anyone in my shoes would She's like, there are people who would say, I'm not dealing with this and who would leave. And then she said, there are people who would she used

the word muddle. She said like, try to kind of muddle through and see where it went. And that it was interesting.

I don't think she realized after that, she's like, then there are people who would leave. [1:21] I don't think she I don't know if that was like a slip. Like, her way of saying, most people would leave, this is unacceptable. Or, if she was really just, you know what I mean, kind of lost her place. But it struck me and it felt very different. And of course, the opposite side being, muddle through. I don't know if anyone wants to look at their marriage and say, oh, I muddle through. But it struck me. And I found myself saying in the session that, you and I had talked about, you know, with Ivan working on this, it won't be you used the phrase, **it won't be a linear change**. It won't be perfect across the board. And that small things are to be expected and could maybe be tolerated even if they're not okay. [2:05] Larger things happening again, maybe not. But that I couldn't expect it to happen overnight. And so I said that I didn't know whether or not to interpret it as **one of the little blips in his progress** or if it was just proof that it was very much still there and maybe never going away. But I just keep coming back to her comment and thinking about it.

THERAPIST: Thinking what? I wonder what you made of that.

CLIENT: Well, it sounds a bit I guess I feel a tiny bit judged. Or I feel I think you and I have talked a little bit about my feeling or being aware of so if Ivan does this, how do I feel about myself for being someone who does that or what does that say about me. And **if I'm someone who chooses to muddle through, that doesn't feel very good**, obviously. It also doesn't paint a picture of, this could change. [3:04] It's like, muddling through is just getting by.

THERAPIST: It's funny, 'cause I wonder if, when you hear some of these ways of reflecting back from Dr. Farrow that it gives a kind of vehicle for you to kind of project onto her some of what your own anxieties are about this.

CLIENT: Yeah.

THERAPIST: Because you've been upset when it feels like she doesn't validate enough how bad things are, that she doesn't get it. And if only she got it, she would tell you to leave him kind of thing. Do you know what I mean? That she clearly doesn't understand it. And you've also had times like this where you feel upset that in some ways, she's saying, it's so bad, you should leave and what's wrong with you that haven't left yet. Do you know what I mean? And so the fact that, I mean, it feels like she can get it wrong in either perspective. I wonder if it starts to kind of show what plays out inside you about how you're trying to get the right answer and are so judgmental of yourself for the expression, muddling through. I for example, don't feel judgmental at all of somebody muddling through. [4:39] It's an admirable pathway in times of struggle and uncertainty. It can be an admirable pathway to decide you're not wanting to do that anymore. So I just wonder what maybe it's some of your voice coming in to criticize what muddling through means. And what does that mean in your own head for yourself, you know?

CLIENT: Yeah. I can't hear words without my own. It would feel different to me than, I'm sure, to someone else. I don't know. When I hear muddling through, I just keep coming back to settling and just scraping by and just tolerating it. Putting up with it. Being a doormat. Staying married for the sake of saying you're staying married or like, just so you know, someone would leave, someone would muddle through, someone would hint. You know, it feels very. And I'm not saying, again, she might have. I don't know what she's really saying, but again, the coincidence of leave/stay/leave sounds it's weighted. [6:00] And sometimes I do worry or wonder if someone who, for a living, sees all kinds of couples with all kinds of problems thinks geez, you know, take a hint, this hasn't been working. What does that say? And I don't know. I can't quite figure out if things like the business card or things like Ivan's making so much progress. **Ivan is continuing to make progress.** But, you know, what if what if it comes up again and again and again. What if it does get worse again? I can't predict. There are no guarantees in marriage, which I don't like.

THERAPIST: What if I sort of don't know how to put this. She's working on it as a defensive style, I think. And I think he's becoming more aware of it, just as you're becoming more aware of how attacking you could be of other people when anxious because of deep inside, how much you're attacking yourself. And that both realms of attack are self-protected against actually feeling unlovable and not enough and all those kind of insecure feelings from your childhood. So you guys are both working on this?

What if one way of putting it is, what if when the going gets tough under stress, he resorts to some of this even 20 years from now? [7:34] Because that's actually what people do. Just as my hope is for you, this gets better and better and better. But **under times of stress and duress, people kind of move back in time.** I mean, and they're even in their developments. Sometimes that happens because we're human. What if he does that? Or, another way of putting it is, what if it reaches a level where it's no longer anything you could even consider pathology, but it is still a very different style of being in a world.

What if he's someone who, for pleasure, likes to play Dungeons and Dragons. That is the realm of where he would love to go into a fantasy land. And for you, for pleasure, you just would never enjoy that. [8:22] It doesn't click for you. So even at the level where we're no longer talking about pathology at all, and healthy people do this and function, it still doesn't have to mean that you click. That could be someone who you really, had you known that this is how much he used and loved fantasy, you wouldn't have married him. Or, it's just not. It's not kind of where you relate in the world. It's not how you function and cope enough in the world that it feels relatable. You know?

CLIENT: I'm not sure if I follow all of that.

THERAPIST: So I guess all I'm trying to say is that there's one, what if the linear change goes like this and slowly, over time, it gets better and better. And yet, there are still times where it dips down. That's part of what you're having to say. Is that enough? Is that good enough. The second realm is what if even the pathology part of it is better, but retreating to fantasy is still something he does for fun? [9:24]

CLIENT: But see that, I knew Ivan enjoyed playing D&D with his friends sometimes.

THERAPIST: Yes. And that all feels okay.

CLIENT: It did. I didn't enjoy it. I tried to play with them once. I didn't It wasn't horrible, you know, unbearable. But it's just like, eh. I'd rather play a board game. So that wasn't so we enjoy different hobbies. I feel like every couple has different hobbies, and they don't necessarily You have some common ones, but you don't have to do everything together. So it would be okay if he went over and played whatever role-playing, board game with Helen's boyfriend. Who cares? It's probably good for him.

It's very different when it comes into getting a job or talking about wanting to have sex or, you know, what if in the future it came and I just started to think, and maybe this is too much, but what if one day we wanted to get a house and instead of researching and looking into it he was off doodling about this fantasy house. What if we wanted to have children and he coped in a similar I just worry. [10:33] And like, the little business card thing probably would not have bothered me even half of much, had it not followed everything else. I think I think that's not the end of the world. But I wonder if in bigger areas in really important areas if it's always going to come back to that, or if it becomes loud again, I can't Then, it really I feel we slip back into I'm mommying him or responsible or feeling very much alone.

THERAPIST: I may have misheard you, but for some reason I thought you said, when you were quoting Dr. Farrow that she said, sometimes people do this they use fantasy. Did she say something about it being young or kids?

CLIENT: She said, young. She didn't say I think she may have even said, 20s. Which I'm sure children I mean, children use children aren't always engaged in realty. They're children. But she did say, young adults do this, and that it becomes less and less. And that, sometimes, even when they're older they'll still, once in a while, it will come out.

THERAPIST: I mean, it's not my experience that it's ordinary to the extent that Ivan's doing it. Do you know what I mean? So just What's funny is I still think you're sort of playing with, what does she actually think. Because on the one hand, she's saying this is normal. At least you're hearing that she's sort of normalizing it.

CLIENT: I'm hearing her say other people do it. That doesn't mean that it's okay, I guess. But other people cope this way. [12:07]

THERAPIST: On the other hand, it's just muddling through. You know what I mean? In other words, that kind of makes it as though it's not normal and it's something you're really just having to compromise with right now.

CLIENT: What do Can I So like, the business card thing which has now been a long time, and I wish I had talked about this sooner. But I mean, what is How do I know if that's I'm really working hard on this, but there, you know, here's a slip. And it's huge or loud, and it didn't So he spent a few minutes fantasizing about what he wished he could be if there were no limits. Is that a small slip, or is that Was that a fair question?

THERAPIST: I can't know from just the action of that. Do you know what I mean? It's sort of like saying, if someone goes out and is an alcoholic and has four drinks one night, is that a small slip or is that a sign of a much more pervasive problem starting again. In isolation, you can't know. So I think it's more that you're looking to what's happening on average, every day. If that's a blip, and if you saw several of those in a row or periodically or frequently, then it's becoming a pattern that is pretty intractable. I don't know what your sense is for example, Ramona, right now. How's it going with pulling his head out of the sand and approaching applying for jobs and approaching things in the relationship with you? [13:49]

CLIENT: He I think things are going well. I think something I said this to my sister. It sounds dumb, or it sounds like it's never good enough, but the more things progress, the higher my expectations are, and the more I can feel let down when something doesn't happen. And her words were, she's like, it can feel that way, I think Ramona, because, you know, he's able to make a lot of progress. But then, when he really targets one thing, something else kind of slips, and he's not able to really be consistent and maintain while improving somewhere else, and that that's hard for him, which sounds very true. [14:30]

THERAPIST: Can you give me an example when you say that?

CLIENT: Sure. So he he's been doing I mean, he's been targeting, trying to apply to a dozen jobs a week. He did nine jobs, then twelve jobs, then eleven jobs this past week. He's doing really well. He's doing really well for someone who's been like, paralyzed and unable to think of applying for a job for over a year. He's doing really well. And he's getting excited when he talks about the jobs. And so that's great. But also, in the past couple of weeks I've been like, oh, you know where And again, this is me like, things are going well. We can do even better. I've noticed like, this chore or whatever like, we should maybe do that more often. I just maybe we could figure out who does what. Like, I'll do the floors and you do the whatever. You know. Or, do you Ivan, since you do a lot of the cooking, do you want me to do more of the cleaning than you do. [15:35] And he hasn't been able to talk about that. Hasn't been able to engage in it very much. Similarly, this is going to sound dumb, but he had talked weeks ago about inviting my friends over this coming weekend, because my birthday's coming up. And he was like yeah, let's do it. We did it last year. It was great. I've got it under control. You don't need to worry about anything.

And we talked recently and found out that he wasn't he didn't plan anything out. And he has now, but kind of the last minute. But he wasn't able to. And I said, you know what, are you that anxious about messaging people on Facebook or sending an e-mail or, you know. He's like, I am. I'm like, is it really that bad? And he's like, yeah. It's so overwhelming. It's so He can't bear to like 'cause he want talk to his friends. He won't He hasn't been able to face them since, you

know, most of them since the whole seminary thing, which is so sad, 'cause that's been so long now. [16:38] And I know he has friends who are all very human, who've had plans, who haven't worked out. It's not like they all have perfect lives, and he can't bear to say that his isn't. But that was I don't know.

So it's like, he's able to You know, on the one hand, he's very introverted. He's really struggling with isolation and stuff. But he's able to apply to jobs. But then, like, the idea of even glimpsing Facebook long enough to send like, a message to a few people is like, I can't bear. I can't even It's hard, because he gets very paralyzed and withdrawn, and then I become more like, you've got to push through this. And eventually, he hears me saying, just do it, which he said Which is really hard, because I validate that he could feel overwhelmed and anxious and But at the same time, if you say that for years and years, at some point, it becomes almost a I mean, so what are you going to do about it? Are you just going to say that forever and have no friends? That sounds harsh.

THERAPIST: You're wanting him then, to e-mail his friends, not your friends.

CLIENT: Mine.

THERAPIST: Oh, your friends. So even there he's anxious.

CLIENT: Oh yeah.

THERAPIST: Why with your friends is he anxious?

CLIENT: I mean, they're pretty much his I mean, as close to having friends here as he has, because he doesn't hang out with anyone from work. He won't talk to -

THERAPIST: But why is he anxious?

CLIENT: Because it means Because well, like he told me weeks ago it was because he couldn't do anything about it, because it had to be perfect, so he couldn't do anything.

THERAPIST: So it's his perfectionism.

CLIENT: 'Cause it wasn't actually perfect. Yeah. Which is crazy and hard for me to understand. Because when I want something to be perfect, I get obsessive. Or, I, you know. So it's hard to believe that It feels like, to me, it feels apathetic, or lazy. Or, and excuse. Oh, it has to be perfect, so I'm not doing anything.

THERAPIST: And yet, this is actually where there's some there is something common about this style of being perfectionistic that is very common for people to avoid in perfectionism, as much as it is for people to overly obsess in perfectionism. You know, people who come in for example,

for writer's block and procrastination stuff. It's because, when you get down to it, it's because they're so worried about not doing a good enough job that they can't just get to it.

CLIENT: Yeah. No, we actually talked about that. Ivan said, that's why I mean, he would do so many of his papers the night before in college. And he's like, it's because no draft was ever going to be good enough. And it was never -

THERAPIST: It's very common. [19:12]

CLIENT: But I can't believe that something you would crank out the night I mean, some people You can do. Sometimes you can pull an all-nighter and be very successful. But consistently, could it ever be better than something you worked really hard on and learned a lot from.

THERAPIST: Oh, probably not. I don't know.

CLIENT: And like, why does that make sense to you? At some point don't you see that that's like, counterintuitive and counterproductive?

THERAPIST: What's intuitive though, about it, just to get inside it, is that if you wait 'til the last minute, then you know that it's not going to be a perfect paper, and it can't be. So then, in some ways you get in that -

CLIENT: Your fault.

THERAPIST: Right. It's all I have to do is what I have to write for at the time I have, which is eight hours left, and it'll have to be good enough, 'cause I have to hand it in. It's crazy. It's not rational. And I totally get what you're saying, but I'm just That's the inner thought process is then, I don't have to judge myself so harshly [20:03] If then what I hand in is now perfect, because it's not perfect because I ran out of time, instead of the fear of facing, oh my gosh, if I write it a week in advance and then I think it's a terrible paper. And what if I can never get it better. And so now I know that the reason my paper isn't good is because of me instead of because I ran out of time.

CLIENT: No, but that's like I shouldn't say this, but it's like really It's really hard to live with that. It's really hard to validate that.

THERAPIST: Especially if you're on -

CLIENT: It's really hard to not take it in as like, you just didn't care. You just did it at the last second. You threw it together. How is that perfectionistic? Or, is it really I mean, how painful can possibly be to face that you have friends I mean like, or to take that first step. I have tried to coax him so many This is wrong, I'm sure. But I've tried to coax him so many times. Like, just send one of your friends, you know, an e-mail or a Facebook message or a text or something. Just anything. It doesn't even have to be a conversation. Just anything. Because he pulls away,

and pulls away, and pulls away. And I worry that at some point, it's been a couple years since he's seen them and they aren't even going to be real friends anymore. They're going to be people he used to be friends with. [21:19]

THERAPIST: Why is it important to you that he be in touch with them? Just out of curiosity.

CLIENT: I think it's important to anyone to have friends and to have an identity outside of their relationship. And to I mean, I think your self-esteem in part It's important to have people who like you and that you like them and have common interests. To socialize. To have, you know I think it was actually wonderful that he had hobbies that, you know, he would do with his guy friends and I didn't need to be a part of it. Like, that's really important. I guess I just keep saying it's important, and you're asking why.

THERAPIST: Well, I hear you take it as an absolute given that that's of course, that's important for all people. And at some level, I think that's true. I think there's another level though, where people vary in how much having lots of friends is important to them.

CLIENT: No, and I'm not saying he needs to be the popular kid or have tons of friends. But I see You take away why it's important, why is being isolated so bad. He's so cut off. He's so I mean, he's drowned in shame over the seminary thing, so he can't face Our one friend just finished seminary. He can't talk to Carla and Mason, because Mason just finished seminary. Like, I'm sure he can't. [22:45]

THERAPIST: Yeah. It then perpetuates the same, 'cause he hasn't just faced these people, owned up to it and then you move on. It's probably not a big deal to the relationship at all.

CLIENT: Exactly. And I've tried to tell him so many times. Even other friends. I mean, we went to a Christian-based school. We went to a Lutheran school. A few people went to seminary after that. (inaudible 23:07). One of our friends, he's like, I don't know what happened with Liam, but he went to seminary and he didn't get a call. And that has to be tough on him. But I'm like, why don't you reach out to him and find out what's going on. He can't do it, even though I know if he told Liam what happened, he'd be like, that's so tough, I wish you had told me. You know. And eventually, they'd move on. And Liam would say, yeah, and this happened to me. And that's embarrassing, too. I wish he could get to that. I think that would be so good for him to help overcome some of the shame. To find out not everybody else's plans worked out perfectly either. [23:51] It's okay. Not to normalize or minimize what he went through at seminary. But it doesn't have to define the rest of his life. And he can't -

THERAPIST: Is he interested in working on this part of things?

CLIENT: I'm not sure. I mean whenever we hang out with my friends, he's really into it. And there have been a couple of times when like, he's gone with my ex-boyfriend or, you know, just the guys, and they've done stuff. And that's good. And I think they get along well. But they're really not friends. It's different than making your own. I have this I shouldn't have this either, I'm

sure. But I kind of have this secret hope that if he got one of these teaching/tutoring whatever jobs, that first of all, he would feel really good about that and he would be excited to talk about his day, instead of oh, it was the same. You know, he's never excited or passionate. But also, that he'd make friends that had common. He'd have his own thing. And I could tag along to hang out with his friends.

THERAPIST: This is exactly what I'm wondering. It's so common when people get themselves into the feeling that they're deep inside a hole of especially of self-esteem. That you don't want to see anyone until you feel like you've gotten yourself out a little bit. So for example, if he's ashamed of working at Subway, to go see friends means they say, oh, so what are you doing these days? And he has to face all of the shame that's happening right now, not even about the past. [25:25] That it's possible, I could imagine, that as he gets into a place where he feels a little bit better about what he's doing that he can then say, okay, I want to bring this to someone else. And then, he starts to make new friends and new jobs. You know, people aren't friends with all their college friends forever.

CLIENT: No, and I'm not trying to force. But I mean, not a word. Like, we have friends who are having a baby. Like, he can't. Friends who have gotten new jobs who have moved to. He just has so much trouble.

THERAPIST: He has shame. 'Cause I'm sure when he hears that they're having a baby or they've got a new job. There are all forward movements in their lives.

CLIENT: Yeah. I will say though, and this is bizarre. But we have one friend. Okay, it's Ivan's friend from high school. They I mean, he was Ivan's best man. They've just stayed friends even though they didn't go to the same college or anything. And this guy is very, very, very, very Catholic. And I don't say that because there's anything wrong with being Catholic, I just mean he's very clear on what he thinks is okay and what's not okay. And it was nice, because he and Ivan differed on what they their theological, whatever, philosophies. And they would talk about that and enjoy that and respectfully disagree. Which was good for Ivan. [26:43] But he Ivan told him eventually about seminary and about even what was going on with me and him to some extent, which is bizarre. Because of all his friends, he is by far the most judgmental. The most, this is how it should be, type of person. And it's so bizarre. It's so bizarre. I mean, I'm glad that he was able to talk to him.

THERAPIST: But he picks the one person who's going to play out the punishment and the judgment. Do you know what I mean?

CLIENT: But why would you do that when you have other friends that you were equally close to that would be more forgiving and supportive?

THERAPIST: Because he's Ivan. Meaning, that is there he lives. In extreme judgment, self-judgment and chastising. Do you know what I mean? He's in some ways, expecting and waiting for that to come. So to tell someone who'd not going to do that? I mean, that doesn't jibe

with how he treats his own self. He tells probably unconsciously on purpose the one person who will also join him in judging him. This is him and the whip, right? It's all about self-chastising. Kind of constantly to an extreme that's really destructive to him. It doesn't let up and allow him to just be human. [28:16]

CLIENT: I think selfishly, a very small part of it, but a true part of it is, I think Ivan would be a happier, healthier person if he were able to get over a lot of this shame.

THERAPIST: Of course.

CLIENT: And I would love I mean, who doesn't want to see that in their partner? Who doesn't want to see someone like, who has friends and wants to go out and have fun like -

THERAPIST: I was wondering that too, when I asked you why it's important. I can imagine that being a person you're more drawn to who has friends, who's not afraid.

CLIENT: Well, I don't want to see him sad and ashamed, and so shut down that he can't even send a text. He shouldn't feel -

THERAPIST: It's not sexy, for example.

CLIENT: It's not. And I feel like a horrible person even thinking -

THERAPIST: Why?

CLIENT: Because, what kind of person looks at their spouse and says, they're really depressed and they're so isolated and they're so down that they can't even You know, we can't necessary do stuff with our friends, because they can't bear to face them. Who's able to look at that and say well, I'm not very attracted to that?

THERAPIST: A human person. That's the kind of person.

CLIENT: I mean, maybe, but it feels very It's hard. Because, when Ivan was talking about the list or talking about the big things things that he's very deeply ashamed of. He doesn't respond the way I would. If I I mean, I don't know what it's like to be in his shoes. But if I had done something pretty damaging like that to Ivan and I think I have with the criticism. Different, but I mean at the same time, I think I have, you know, sat upright and looked at him and said, let's talk about this. Let's work on this. I know this is happening. And it's a very different response from when we talk about what he's And he's like, cowering over. He's mumbling. He's looking at the floor. I mean, it's like, it's the end of the world. And so it's really hard to How do I say this without being the worst person in the world? It's really hard to be the person who was wronged when the person who did it to you is like, acting like you just physically beat them half to death. [30:32] And that sounds Oh, my gosh. That sounds horrible, but it's what happens.

THERAPIST: See, Ramona, that's where it's so tricky in your relationship. And I think that's where he gets you. And sometimes, maybe even where things get a little stuck in the couples therapy. Because he's so successful at making it be that he's the victim. Even if we take the word, victim out for either one of you, it is quite ordinary for a person so to say, for example, he wants to have more of a sexual relationship with you. That's his wish. One of the reasons you may not be interested in that, is because he's cowering in shame all the time. That's not -

CLIENT: But how do you say that to someone?

THERAPIST: It's hard to hear. But there are ways to begin to put it into words. That this actually is part of the system of how people get drawn to each other or repelled by each other. People do say, in couples therapy, you know, 20 years into treatment, I'm not attracted to you right now, because your self-esteem is in the and this is hard to hear, 'cause you're already feeling this way, but it has an impact on the relationship. Do you know what I mean?

CLIENT: I do. But I've never been able to say that to him. And in fact, I've There have been times in the past few weeks or so when I've Ivan and I have talked about becoming physical again or starting to have sex again which is like, I'm so embarrassed even to say that. But I could never initiate anything with Ivan. [32:07] Or I could never say like, how do you feel about trying that this weekend. Or, you know, I could just never say that to Ivan. And I also sometimes wonder, with everything that's happened, I wonder if it isn't natural to feel not drawn completely drawn to him or feel like, sexy or feel like I did when we started dating. You know, like, anyone who went through that wouldn't be like, yeah, let's make out now, you know. That doesn't necessarily But sometimes, I worry is it that or it like, there's something wrong with me or something's wrong with how we just don't love each other that that's not happening.

THERAPIST: There's a lot of things going on.

CLIENT: I don't feel as a Sometimes I think when he would get a new job and he would come home. I just picture this. He would come home, and I'd say, how your day was. And instead of it being doom and gloom or like, oh, nothing new. It was busy. Or, I had to stay late. It would be something exciting or something enjoyable and he would be, you know, smiling and enjoying himself. And maybe his day maybe he did something really awesome and my day was really boring. Or, he could have a night where he's like, do you mind if I just go out with the guys. You know. Or, just being a more independent, dynamic, motivated. This is horrible. Less depressed, less ashamed, less feeling horrible about himself. [33:38]

THERAPIST: One way of saying it to him that might be palatable. It's something you can try on for size inside yourself. I don't imagine you ever said to him, you're sexy.

CLIENT: No.

THERAPIST: Probably in the whole history of your marriage. So it's new for me to say those words to you as something that could possibly come out of your mouth. Instead of pointing out

how he's not sexy or whatever word, romantic or appealing or attractive when he's doing the thing that repels you, you could start to comment in some way when he does something that excites you. So you could say, man, is your motivation today sexy. Or something that's like, wow, I feel so excited to be around you when he comes home and says, I got a job. And you see so the parts of him. So I actually think, Ramona this is true for you. As much as you don't use that language with me a lot of the time, you do start to sound and look and feel to me, drawn to him when he starts doing like, acting like a mature adult and motivating and organizing and he cleaned the house. Or, whatever he did that feels like, oh my gosh, he's getting stuff done. You look like you're really drawn to that person. It's when he doesn't that you get repelled.

So starting to play around with noticing when he does that. And some way that you could tie it so that he knows that's actually something you find attractive. [35:09] Right? That's someone you could have sex with. That's someone you could want to walk over and kiss, because you're loving who he is this day. Motivated. On top of stuff. Successful. So even just playing around with that language when something good happens that makes you feel that towards him. Let him know. So that he may also It's a way for him to start beginning to pair that oh, so if I get oh, 10 job applications done in the next three days, then maybe she'll want to kiss me? I never thought about it that way. But that's actually kind of the way it works. He's acting more like an adult. Period. Like, even not being a child. Instead, he's being an adult. It's not sexy to be in the mother-child role. It's not a sexy role. Just start to help him connect that a little bit when you feel it. I think it's a way of noting positive instead of a negative that isn't as critical.

CLIENT: How do I There are times I wish even he would hold me or hug me or kiss me or just be more But I don't know how to say that, and I definitely don't know how to initiate that. And here's something that I feel really horrible about for thinking or feeling. Ivan is Ivan struggled with his weight since he was a child.

THERAPIST: Can I pause you for one second. Really horrible. Really horrible. Really horrible. It's a monster that you're describing that you feel about yourself, Ramona.

CLIENT: Well, because who looks at their spouse and says, I don't feel as attracted to you, or I don't feel this is sexy, because you don't take care of your body?

THERAPIST: Lots and lots and lots of people. That comes up in couples therapy all the time.

CLIENT: But how do you say that without being superficial and shallow and not caring about like -

THERAPIST: Some of it is superficial. [37:09] Some of it is. Appearance is part of what people get drawn to in each other. Some of it is motivation around self-care. A person who cares enough about himself that he's interested in taking care of all parts of him, including appearance. Is someone you then feel motivated to be around. It's as though It's kind of like, you think of it in the extreme. You don't shower. You don't bathe. You don't cut your hair. You are disheveled and then, you're supposed to go sleep with someone? I mean that's not actually the

way sexiness and relatedness and people get excited about each other involves appearance. It can involve different aspects of appearance and people can be drawn to different parts of appearance. It doesn't have to be an exact body or an exact outfit. But appearance, and general self-care around appearance is part of how people get drawn to each other. It's a slice of the whole pie. It's not the whole pie. It's part of it. For humans. [38:16] You're so mean to yourself, Ramona. The image you have.

CLIENT: It feels like I'm mean to him, because he He struggled with this since I mean, ever. Since he was a little kid. He's always been overweight. He's been bullied through school. He's been I mean, and it was drilled into him like, coping through food, being comforted through food. He will still go home, and his mom will be like, have more, have more. Like, let me get this for you. Like, it's a huge way that they relate. It's a huge way that they celebrate. It's huge. And it's so hard, because he could exercise all day every day, and it still wouldn't get to the root of the problem. But at the same time, I selfishly I think Ivan He can be very handsome when he cleans up which is also hard for him to do. [39:07] It's hard for him to shave every day. It's hard. But yeah, part of me wishes he would lose the weight, and that would be really attractive. And I wonder what that -

THERAPIST: Has he been going to the gym?

CLIENT: He goes sometimes. And he does We just got really healthy food. I won't buy certain foods for myself, even, 'cause then, it won't go well.

THERAPIST: It's a delicate subject. I'm not saying to you that it isn't hard for couples to talk about, to bring up with each other in ways that aren't shaming to each other. It is part of the relationship, though, that it's very common to eventually make it into the room between two people. And it may be that you can say You begin by talking about this. And my worst fear is to make this feel worse or to shame you. Or, to be a monster or and yet, I'm interested in being physically closer to each other. It's because I want to work on this with you and I want to be closer to you that I sometimes wonder if how you take care of your body isn't something that could be an impediment to us. [40:38] You know? I think the more that you're brining in that it's out of It's not just out of criticism. You're actually wanting to bring it up, because you want to get closer. Do you know what I mean? It's another place where you can also say hey Ivan, sweetie if he comes home from the gym. Or, something that begins to kind of link I like it when you take care of yourself. I'm drawn to that person. Let me kiss that shaved face. Or whatever it is. You go grab his hand, and give him a kiss on the cheek after he's done that.

That's part of what will also reinforce He'll start to associate self-esteem. His own appearance will start to be like oh, maybe I'll shave tomorrow if that's what happens when I shave. That you shouldn't be afraid also of expressing affection and admiration for those moves, so that you're communicating with him without being shaming. That you really think that way of taking care of himself is cool, and that's someone you're drawn to. [41:38] When you said, a few minutes ago, I could never go and you were talking about initiating. Why? When you said that, I wasn't quite sure what that meant?

CLIENT: I'm just so self-conscious and so embarrassed and so still It's also really hard to imagine It's really hard to imagine having sex with my husband after what's happened, and me not being wow, he did that to you. And eventually, you just like I don't want it to mean that it's okay. That it erases it. That he doesn't have to work on things. I don't want it what does it say about me. It's so scary. And I just am so worried. I think that I'm a little bit like him. I'm so worried about it going wrong. Or, I'm so worried that he'll be critical of it that I would That it seems like a small just to have it be part of the relationship seems like, at least I know then what it's doing. [42:44] I know what's happening. Whereas, if you bring it in What if, you know, what if I find out something else? Or, what if something else goes wrong? Or, what if we don't fully get through digesting the list and stuff. Or, what if Dr. Farrow really meant, you are crazy for being with someone who did that to you. And I'm sleeping with them? It's scary to me.

THERAPIST: And what if you feel that some and those feelings also can become a vehicle for avoidance?

CLIENT: No, I think they definitely can. And I guess I should point out, too. Even when we were dating, Ivan would still initiate kissing and making out and stuff. And I was very on-board with it. It was very much an agreement. But I just would never I think I'd just be too shy or too worried or too self-conscious. What am I doing that's wrong? Oh, I should feel guilty about this. [43:42]

THERAPIST: It reminds me a little bit of us getting started. Like, today I was quiet and I didn't say anything to kind of help you get started. And I can imagine a little bit of some of that same thing. Like, can I start talking? Is there something I'm supposed to say? Am I allowed to just start where I want to start? In many ways, initiation of sex. I mean, it's a one kind of particular example of what it means of having the initiative and freedom to be yourself in your desires all that time. Including starting a therapy session. Can you just start with whatever you want to start with and it's okay. It's good. It's welcomed. There's no way of getting it wrong, 'cause it's you.

CLIENT: Something I'd like to talk about more is how 'Cause my mom tells me, no matter how good some of your friends look, no matter how great some of their relationships look. No matter how many new cars or new houses, everybody has problems. Everybody. And I still can't really believe that. [44:57] But I don't I wonder how couples who have problems, how do they integrate having sex, and then, the next day saying, boy, you know, this bill's overdue. We've got to work on this. And then, you know, the next day having sex. How does that work and that it's okay? And I don't and when I go the other end and withhold, because we can't have sex until the relationship is perfect, so we'll never have sex. But I know. Another time.

THERAPIST: It's a great question for us to come back to when you return. Tuesday, I think works mostly?

CLIENT: No, it should work. I'll confirm. But that shouldn't be a problem. And then, I'll e-mail you about the other dates when I find out my work calendar.

THERAPIST: So what I wrote back I don't know if you got my response.

CLIENT: I did. I just haven't been on the network yet to see. But I think you were saying the 23rd.

THERAPIST: Yes. The 24th, I'm out of the office the whole day, so I can't do Tuesday. If you can do that, go back to Mondays. We can do Tuesday next week, Monday if you can't. Then, Tuesday again. This is Oh, no, then we're good. The only thing is that the following week so the week of July 7th, I'm out that whole week actually, so we'd miss the 8th. But basically, from the first onward Tuesdays would work. I know it's a little chaotic.

CLIENT: Thank you very much.

END TRANSCRIPT