

TRANSCRIPT OF AUDIO FILE:

BEGIN TRANSCRIPT:

THERAPIST: Hi, how are you, today?

CLIENT: I figured you were running late.

THERAPIST: (chuckles) I just had to run for something quick. Sorry about that.

CLIENT: Good. It's chilly out. I didn't get a coffee so if I seem slow and unable to think... (chuckles) I have a closing today.

THERAPIST: Oh, good.

CLIENT: Which I've got to squeeze I've just got another day with all kinds of stuff. It kind of stresses me out to have things all lined up throughout the day. The closing is a quarter to three and then I've got to meet Jess's mom to put the car seat in the car so she can go pick up Lucille. She wants to take Ian so it's not a shocking for Lucille, so they need both car seats. Then I've got to come back and get Ian for Cub Scouts. It's the big pack meeting. I've never been to a pack meeting, so I don't know what we're going to do there. Ian is sleeping over. [00:01:24]

THERAPIST: Are you like a den dad or something or are you just going?

CLIENT: No. I'm just an adult. In the Cub Scouts, you've got to go with your kid. You don't just drop them off, which I imagine maybe the older kids just get dropped off. I don't know. He's going to sleep over. Did I tell you how I lost a bedroom?

THERAPIST: Yes.

CLIENT: He's going to sleep in my bed tonight. He's going to learn to skate tomorrow. It goes through March. That seems like an awful long time to teach kids to skate. I would think at some point they'd give them a stick and a puck and I don't know. So I've got to do that tomorrow. His Cub Scouts are visiting the fire station at 10:00. Neat. (both chuckle) I really got the winner's share of the farm. All the male players on my team are going out Saturday night and Sunday I have the football game. [00:02:56]

THERAPIST: What are you going to do with all your free time?

CLIENT: Well, hopefully Ian will go to bed early. Sunday morning I'll probably end up sleeping late. I'll probably be a little hung over. The whole thing just makes me anxious. I don't know if it's just the closing that's making me anxious or if it's just having all of these things to do. I had a week of kind of coming home and just doing titles and working from home. I've been going to the office, but going home in the afternoon there are no real pressure or stress on me to get things done. Where today I've got I mean I've got plenty of time I've already got documents. I had to order an updated payoff, so I've been waiting on that. [00:04:16] I went and saw Dr. Micah on Tuesday. At first she was cutting back my Wellbutrin, and then at the very end she asked me, "Are you depressed?" I go, "A little bit." She was like, "Oh, we don't want to go down on the Wellbutrin if you're depressed," so I have to lie to her next time. "No, I'm not depressed. I'm feeling great." (chuckles) [00:04:52]

THERAPIST: You want to go down and I guess your concern is making you more anxious? Could you tell her that, that that's more of an issue than your depression?

CLIENT: I guess I could. I see her after Thanksgiving.

THERAPIST: I don't know. It seems to me sort of characteristic that the actual story is a perfectly reasonable story, but you're thinking you'd better tell her a different story because somehow that seems more like it could get you what you want even though the actual story is, like I said, not only pretty reasonable, but would serve you just as well. [00:05:38]

CLIENT: I'll try it, then. (both chuckle) I'm glad you're picking up on these things.

THERAPIST: Good.

CLIENT: I couldn't remember. She said to go up on the Prozac and I can't remember if she told me not to go up on Prozac; but I'm going up on it anyways. I'm now taking 25mg of the lamotrigine in the morning.

THERAPIST: What's that?

CLIENT: The lamictal.

THERAPIST: Less than or more?

CLIENT: More. So I'm taking 100 at night and 25 in the morning. I think she's trying to get me on that and the Prozac and that's it; maybe the Klonopin. I don't know. As needed, which is all the time. I don't seem anxious when I go to bed because I fall asleep on the couch and I wake up all discombobulated. [00:06:54]

THERAPIST: Good.

CLIENT: Hunh.

THERAPIST: I mean not the discombobulated part, but...

CLIENT: But not being anxious. Yeah.

THERAPIST: And it sounds like it has something to do with having all this stuff to do. I guess my impression is that most of it isn't stuff that, in itself, is hard or worrisome in terms of what it involves. It's more like things have kind of got to go right. You're not going to have a lot of time to be worried or be down or be distracted, so maybe you're kind of worried of what will happen if you're feeling one of those ways. [00:07:37]

CLIENT: Or just if there is some hiccup somewhere. I'm always wary of hiccups, you know? Like they've got to get a bank check. Are they going to be able to get a bank check? They've got to bring like \$6,000 to closing, so is she going to have time to do that? Maybe she will, maybe she won't. I don't know. I'm not taking the risk of a personal check for \$6,000. I guess you have to. The only way to be safe on a deposit is ten days.

THERAPIST: Oh, really? [00:08:25]

CLIENT: Yeah. I guess maybe at that point a bank can't dispute it against another bank.

THERAPIST: You mean if it hasn't been returned in ten days, it's good?

CLIENT: Right. So Bank of America, if you deposit large amounts of money, will hold it for ten days, which I tell people they should get wire. First I tell them they shouldn't do Bank of America, but they should get the money wired because the bank takes too long. (pause) I didn't have anyone to go to the game with so I sent out an e-mail. Now I'm getting all of these e-mails. (sighs) Is it time? Are we done?

THERAPIST: Not yet.

CLIENT: There was a lot of traffic, too.

THERAPIST: Does this feel like just something else you just had to do this morning?
[00:09:48]

CLIENT: No, not really. It's like I did some work this morning. Taking a shower I don't know why I just always feel is a chore; but I had to take one today. After two weeks, I've got to take a shower. I need a haircut. I should have gotten one today. I always buy Supercuts. Do you go to Supercuts? You get the \$100 haircut.

THERAPIST: It's \$50, I think.

CLIENT: It's gone up.

THERAPIST: Just after my Pilates class.

CLIENT: It's always a roll of the dice when you go to Supercuts. You never know who you're going to get. Shockingly, my hair is not easy to cut. They're afraid of me being bald and then on the top if it's too short, it sticks straight up. I'm like, "Just cut it short. It will grow back." It saves me money because it's the less I have to get my hair cut. Cut it short and I'll let it grow long. I go like four times a year. [The break depends on the year.] (ph?) (pause) [00:11:58] I was hoping we were somehow going to avoid Ian playing hockey. It's just very expensive. You've got to buy him equipment every year. They can get used equipment, but there weren't any used helmets. He had to buy a new helmet. Jess bought it, so I don't care as much. At some point, it gets expensive. It should be entertaining, though, him learning to skate, falling all over the place, those little kids. He hasn't been signed up yet, so I'm anxious about that. I've got to sign him up and then we bring the check. [00:12:50]

THERAPIST: Where is it?

CLIENT: You know where YMCA is? There's a rink two blocks from the house. He's already been to the fire house, but...

THERAPIST: Can't take too many trips to the fire house.

CLIENT: I guess not. [00:13:21] This Cub Scout stuff is kind of frequent. There are lots of things to do. There is another meeting. There is a den meeting. I'm trying to get it all straight between den/pack.

THERAPIST: He is a busy fellow.

CLIENT: He is.

THERAPIST: Soccer and hockey and Cub Scouts.

CLIENT: Soccer is gone.

THERAPIST: Right.

CLIENT: But, yeah. He's got a lot of energy, you know? If he's just sitting around the house, he just bounces. He doesn't do it when he comes over to my place. He just kind of sits, hangs out and watches TV. He's pretty mellow. We go out to dinner and he's mellow. But when he's home with Jess, he pushes her a lot more than he pushes me. In fact, he really doesn't push me at all. [00:14:16]

THERAPIST: In what ways does he push her?

CLIENT: Just not listening.

THERAPIST: Bouncing around, not listening...

CLIENT: "Don't bring food in here," and he brings food in here. "Don't bring food in here," and he brings food in here.

THERAPIST: Up on the couch.

CLIENT: Right. So... I don't know why he acts really different with me. Just probably because he's around her enough that he knows her buttons. He hasn't figured out mine yet. Or maybe he fears me. I tickle him.

THERAPIST: You know, there could be any number of reasons. I don't think it's that he's not around you enough not to know your buttons. He would learn those pretty fast. [00:15:24]

CLIENT: When he does come over he does spend a lot of time downstairs running around, so he gets a lot of his energy out. They're so loud.

THERAPIST: I don't know. I'm very much speculating here, but it sounds like Jess is sort of on him a fair amount and worries about him a lot; and he could be kind of pushing back.

CLIENT: That's probably it. That sounds more like Jess.

THERAPIST: That's why I'm careful to say that I don't really know, but he just doesn't do the same thing with you. There could be some of that on his side, too, where he feels a little needier for her in a way. You know mom comforting stuff like that. He kind of gives her a hard time because of that, which sometimes kids do. [00:16:22]

CLIENT: Or is just trying to get attention.

THERAPIST: Maybe it's to compete more with Lucille if it's around her. Sure.

CLIENT: He's used to me ignoring him.

THERAPIST: No. It's probably not that. I mean, I don't know how much you ignore him, but it's not something kids get used to.

CLIENT: I don't ignore him that much. He asks so many damned questions.

THERAPIST: He sounds like a very energetic, vigorous, curious, active kid.

CLIENT: Yeah.

THERAPIST: That's great. I mean, it's especially tough for the people who have to look after him all the time, I mean those are very nice qualities. (both laugh) I'm not saying it's not the easiest one for you, but it's pretty nice.

CLIENT: It will be interesting. He doesn't really seem I don't know. He's kind of skinny, so it's like I don't know how he would do getting banged around in hockey. When they're little they don't go flying into to each other; they just kind of bang into each other and fall down. They don't know what they're doing unless they have another brother, and then they dominate. I notice that with soccer. All the kids with older brothers were much better. I had a kid who scored seven goals who has two older brothers. [00:18:12]

THERAPIST: They play with them more and they have to play up to their brothers.

CLIENT: Like Lucille when she starts soccer she'll be much better than when Ian started soccer because she's already been kicking around a ball. Lucille's another year-and-a-half; it'll be two-and-a-half years before she can play. Instead of being cranky sitting in her little stroller, at

some point she'll become more wanting to play and run around. She does that some, too, but sometimes she just wants to sit in the stroller and be cranky. She doesn't want anything else. It starts early. (chuckles) I see you're choosing your words carefully.

THERAPIST: How to respond to that one.

CLIENT: (pause) I need coffee. I'll just go home and make coffee. It's such a pain, though. Go home, the three or four minutes it takes it takes it awhile. You've got to wash the pot out, empty the thing, put the filter in, and put the coffee in. I don't know why. These little things in life just get in my way. The hiccups. (pause) I wonder if Lucille is going to go with her grandmother when she picks her up today. [00:20:10]

THERAPIST: You mean she might get cranky?

CLIENT: I'm hoping. I'll be upset if she doesn't, if she doesn't go, "Mama, mama, mama, mama." Stand up in the car seat and go, "No."

THERAPIST: (laughs) Is that what she does?

CLIENT: That's what she did to me.

THERAPIST: Wow.

CLIENT: She did not want to go with me. When we got home she literally stood in the driveway and was going, "Mama, mama, mama, mama," "Don't you want to play?" She went, "Mama, mama, mama, mama." So I just sat down and waited it out. Luckily Jess was only ten minutes. [00:21:48]

THERAPIST: It's hard being the daddy.

CLIENT: Yeah. She doesn't see me often enough.

THERAPIST: How often do you see her?

CLIENT: I haven't seen her since Saturday.

THERAPIST: Once or twice a week?

CLIENT: Yeah, and not always for long periods of time. Sometimes she won't interact with me if she's cranky. There should be a coffee shop in this little square. You can never have too many coffee shops. (pause) [00:23:05] I guess at some point I'm supposed to feed Ian.

THERAPIST: You're going to need to feed him, I think.

CLIENT: I've got to figure out what to do. It's such a pain in the ass.

THERAPIST: We should stop for now. I'll see you on Tuesday next week, but I'm out on Friday.

CLIENT: Okay. That's right, next week. I hope you weren't worried.

THERAPIST: No.

CLIENT: That I do it enough.

THERAPIST: No. You did that often.

END TRANSCRIPT