

TRANSCRIPT OF AUDIO FILE:

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BEGIN TRANSCRIPT:

THERAPIST: How are you?

CLIENT: (inaudible) didn't set my alarm and it didn't go off so Zorg (sp?) woke me up at 12:35 saying, "Don't you have an appointment with Chad today?" (laughs) So I may be still a little bit zonked.

THERAPIST: Oh, okay. (chuckles) Glad I gave you long enough to wake up.

CLIENT: (laughs) Thanks. Yeah, I think I'm awake. I was mostly worried that I was going to stumble out into the street and once I got outside, I was like, "Okay, Tanya (sp?), you really have to pay attention."

THERAPIST: I see, yeah. (pause)

[00:01:00]

CLIENT: So I went out for drinks after church last night with sort of not the normal crowd of parishioners that I usually go to but the crowd of the paid musicians and one of the priests and some of other people. I feel like I've been doing some more socializing recently and (inaudible at 00:01:28) good but man, it makes me just not during it actually but afterwards, I can't stop picking apart things that I said and things that I said wrong and reasons for them to hate me and all that. So it feels sort of paradoxical that I had a nice evening out with some friends, it is something that makes me feel sort of bruised and anxious and I don't know. (pause) May be particularly vulnerable but I don't know. That's the way I am. So it is. (pause) [00:02:19]

It's funny, I sort of was worried about my drinking and about that I was drinking a lot more. James and I just haven't really bought any beer in the last month, like, just haven't done it. And I just don't really notice. So, that makes me happy. (laughs)

THERAPIST: (laughs) [That's good] (ph). [00:02:58]

CLIENT: I mean, not quite as happy as I could because I would like to be drinking beer but when I notice I think that but most of the time I don't really notice. (pause) I had some nice beer last night though so [I'm doing good] (ph).

THERAPIST: (overlapping talking) That's probably good.

CLIENT: Yeah, it was good. (pause)

THERAPIST: (clears throat)

CLIENT: (sings softly) (pause) [00:04:00] I felt like, this morning at least, I keep getting upset with James and I don't know whether it's that he's doing things differently that I am more sensitive to the things that he says than usual or that I am different. Yeah, like, we're driving into therapy and the traffic is frustrating so he sort of is snippy with me and it is like, the most predictable occurrence in the world. It's not really okay but I also told him that it's not really okay and it keeps happening and I don't It's something that I am sort of willing to put up with (inaudible at 00:05:00) I don't like this but it's not that big of a deal and I know what's going on and we sort of talked about that and went (ph) like, "Okay, that's fine." And you know it just gets under my skin. Actually that pretty much just gets under my skin every time. I try for it not to and I try different ways of handling it but it just keeps getting under my skin. (pause)

[00:06:00] But on the way I back I mentioned I haven't forgotten wanting to get a tent. And -

THERAPIST: A tent?

CLIENT: Yeah, a tent. And his immediate and only response was "Yeah, we really can't afford that right now." And I was like, "I really know that we can't afford it, I really know!" I just feel like I'm trying to tell you that I'm lonely and I want companionship and I feel like I'm being rebuked for wanting things at all. And that's not really a reasonable response on my part. It's sort of a jump, I feel like, to ask him to see this code in what I said. (laughs) On the other hand, I don't think it's a jump for me to want his knee-jerk response to me saying that I want something to be like, "We can't afford that." [00:07:04]

THERAPIST: Especially when he knows [that could or should know that he'd know that] (ph).

CLIENT: Yes. Yeah. (pause) (soft singing)

THERAPIST: Also, (pause) notice that you didn't sort of describe what happened; what you were saying, what was going on, that really (inaudible at 00:07:55) before, I guess on the way to the therapy session. And that's fine but I, (pause) I guess what I wondered is whether you were concerned that (pause) [I imagined] (ph) two things but I didn't feel (inaudible at 0:08:19) it would just make you feel worse to explain it, like, it would make you feel worse about how much it bothered you.

CLIENT: I think that's probably it. That it's, (pause) it's sort of easier to refer in broad strokes to this dynamic that I feel like I've talked about before and it's also so naked (ph) (laughs) I feel like I'm under the impression that I've talked about it to you before but maybe not. [00:08:57]

THERAPIST: (laughs) I don't know, I guess not, knowing what had happened as (laughs) (inaudible at 0:08:59).

CLIENT: Oh! (overlapping talking) I'm like -

THERAPIST: (overlapping talking) I don't. Yeah.

CLIENT: James is frustrated in part James is frustrated with driving and we try to make a left turn off of Comet onto the church and we could only see the right hand side. I said, "This is your turn." And he said, "Is it? I don't think Is that what the sign says? I don't think it's my turn." And I was like, "No, I guess that's not what the sign says." But it was actually the turn before (ph) a different road on both sides of the street. So we missed it and he had to make a U-turn. And so he was frustrated and I could sort of feel him wanting to make it my fault but it was clearly (laughs) I was the one who said "This is your turn" because I remembered it. So there was that and then he didn't actually try to make it my fault but you could sort of -

THERAPIST: You could feel it.

CLIENT: I could feel it. [00:09:50]

THERAPIST: And then when we parked, we were looking for parking, and we ended up in one of the spots that was that had to have quarters instead of taking in a credit card and we didn't have quarters and then we had to move and (pause) and he was just grumpy with me about it. I don't remember what he said, I just remember him being grumpy with me. You know, I just (pause) He and I have sort of talked about this several times and he sort of made it clear when we talk about it that he's not upset with me, he's just pissed about the driving and that spills

over and I sort of find it unacceptable that it spills over. But I recognize that that's just something that people's emotions do sometimes and I don't know how much is reasonable to ask him to not indicate that he's frustrated in any way.

THERAPIST: Right. [00:11:04]

CLIENT: Because I also have a problem where if he expresses frustration, I take it as being about me.

THERAPIST: Right.

CLIENT: Even if he's not actually making it about me.

THERAPIST: Right.

CLIENT: Yeah. (pause) But I feel like [I actually think it] (ph) that bad but I think my expectation was that if I describe it that it will be sort of freshly painful it will be like reliving it and be freshly painful. Whereas if I just sort of allude to it or talk about the dynamic, then that is something I have more control over.

THERAPIST: Right. (pause) (clears throat)

CLIENT: Yeah, I was feeling like a big bruise today and I don't really know why. (pause) Yeah, I'm not sure why. [00:12:07]

THERAPIST: Yeah, (inaudible at 00:12:08) (pause)

[00:13:00]

CLIENT: (inaudible at 00:13:09) pretty tough, actually. (pause) [You know? I'm in ] (ph)

THERAPIST: I mean, not in any external way. I mean, I didn't have (inaudible at 00:13:24) crowded though (ph) anything obviously bad happened or [anyone said anything mean.] (ph)

CLIENT: Oh!

THERAPIST: (overlapping talking) Nothing like that.

CLIENT: Sounds really fun! It's sort of like after I came home and it started getting tough.

THERAPIST: Yeah. (pause)

[00:14:00]

THERAPIST: (sighs) There's (pause) I know this is sort of a (inaudible at 00:14:54), I'm not quite sure what to do with this You mentioned kind of feeling bruised after last night, you mentioned James getting under your skin this morning, and you mentioned feeling like one big bruise. We talked about cutting last week and [that was on your mind a lot, I think, from what I know.

CLIENT: Yeah, I also did self-injury today.

THERAPIST: Uh-uh.

CLIENT: (begins to cry) Hmm! (laughs)

THERAPIST: Yeah.

CLIENT: (laughs) It's like a super power!

THERAPIST: (laughs) (pause) I guess, unwittingly, I reiterated a little bit of my ex ray vision. (chuckles) [00:15:59]

CLIENT: (laughs) I love it! No, that's okay. (pause)

CLIENT: There's something else [00:16:49]

THERAPIST: Too, and maybe this is making something out of nothing but, like (pause) (inaudible at 00:17:15) complicated. My thought was, I was struck when you said "It's like a super power" because maybe I'm saying something interpretive but you know what it's like to be interpretive. You've interpreted lots of things, I mean, more -

CLIENT: Yeah.

THERAPIST: You know? And (pause)

CLIENT: Maybe I'm a little more comfortable being the one doing the interpreting.

THERAPIST: Yeah. (inaudible at 00:17:46)

CLIENT: [Maybe I just want to feel like, I think it's one of the reasons I take all of this sort of therapy. It's kind of like, stuff I'm quite familiar it makes sense to me.] (ph)

THERAPIST: [00:18:05] Yeah.

CLIENT: (sighs) But (inaudible at 00:18:10) it's comfortable.

THERAPIST: Right. (pause) I guess, okay, here's me (ph) -

CLIENT: I also don't -

THERAPIST: Yeah, go ahead -

CLIENT: I'm sorry, it's just it also doesn't (pause) It continues to surprise me that I am interpretable in that way.

THERAPIST: Yeah.

CLIENT: It shouldn't. But it does.

THERAPIST: Yeah, this is sort of (inaudible at 00:18:40) It's like there's some kind of envy (ph) going on where it sort of I think the idea that what you're saying or presenting is interpretable or that there is something that is already on the surface. (pause) There's just something about people getting under your skin or getting a little bit into you that seems to be getting reiterated and where maybe this is it, actually seems to be (pause) I guess I imagined that maybe there is something a little bit defensive about framing it that way. What I have in mind is (door closes) (pause)

CLIENT: About framing it as getting under my skin? [00:19:52]

THERAPIST: Yeah. Like, (pause) like maybe it's kind of more out there already than you like to think that it is. You know, like, maybe James' just pissing you off. (laughs) Right? You know what I mean? I know what you mean and understand (ph) and that one is vague and I (inaudible at 00:20:16) never would have gone anywhere with it but like (pause) It sort of makes it less like you should necessarily be in control of it or you should expect yourself to be in control of it. If we think about it as like, James getting under your skin or it's If I have super

ex ray vision than it's not like it's kind of out there already in what you're saying or that you're You know, in a way, unconsciously maybe even wanting me to know or trying to communicate it. [00:21:03]

CLIENT: Yeah, no. It's always the trouble of the part of me that really wants people to know and part of me that really doesn't.

THERAPIST: Sure.

CLIENT: So. (pause) (cries and blows nose)

THERAPIST: [I'm just about out?] (ph)

CLIENT: No, it's okay.

THERAPIST: (inaudible at 00:21:48)

CLIENT: [00:21:57] I don't know (pause) It feels to me like I never stop thinking that I should be able to control it. That like, there's not a way that I could phrase it that would make me feel like it wasn't incumbent on me to keep it. So to say like, "Yeah, sometimes things are just out there" is to say like, "I've really failed in some way."

THERAPIST: I see. (pause)

[00:23:00]

THERAPIST: And I imagine that's more so in your own eyes and on your own behalf than say, on mine.

CLIENT: I'm sorry?

THERAPIST: I imagine that since [the failure] is in your own eyes and on your own behalf rather than like, as you feel it in mine In other words, I don't think you're imagining I think you've failed so much as you're feeling like according to you, this is not how you're supposed to be.

CLIENT: [I don't know.] (ph)

THERAPIST: Okay.

CLIENT: That's one of those things that Yeah, I know that that's not the way that you feel and it's not the way that everybody feels and maybe I do still feel that pretty much everybody that I meet thinks that I should keep myself under control.

THERAPIST: I see. [00:24:00]

CLIENT: I don't know. It's sort of hard (pause) hard to tell.

THERAPIST: Uh-uh (pause)

CLIENT: [00:24:58] I was waiting for a train yesterday and somebody was yelling cunt (ph) and it sort of surprised me that like like, how afraid that makes me feel. (pause) It's like, seriously? Come on! (laughs) But (inaudible at 00:25:26) still sort of freak out. (pause)

[00:26:00]

THERAPIST: Yeah, I think that what you're describing is actually feeling more connected to and reactive to people that you would like to be or than you (inaudible at 00:26:31) like to be. (pause)

CLIENT: Yeah.

[00:27:00] (pause) Sort of a way of thinking about the it had not occurred to me. I mean, because like, I want to be connected to people but it's hard for me to exceptionally (ph) being connected to people means that the things they do won't matter to me and I won't (ph) just be able to absorb that.

THERAPIST: Uh-uh, sure. (pause)

[00:27:57] I think it also is sort of an explanation anyway for what you were saying before about how you also want people to know. (pause)

CLIENT: Yeah. (pause) You know, I can't sort of figure why I would think that people knowing that I cut myself is why I would think of that as a shameful thing but really, like, that it bothers me when James is sniffy with me, that that is something that I'm ashamed of? I don't know. You know, afraid and also ashamed.

THERAPIST: [I think that] (ph) it seems less obvious that you would the same, like it's easier to (inaudible at 00:29:02).

CLIENT: Yeah. (pause)

[00:29:57] It feels sort of like So, I write this blog, you know, like once every two or three months I'll write something. And it's a public blog and I will post a link to it on Facebook and it never fails to sort of surprise and terrify me when people read it. (laughs) Like, I (laughs) What is wrong with me? (pause) I don't know. I wonder why I'm, I'm not sure about this but I wonder whether I'm ashamed of not being able to keep things under control or ashamed that I want to tell people about these things. (pause) I don't think I want people to know. (pause) [00:31:12]

THERAPIST: Are both kinds of shame related to how much people matter? (pause)

CLIENT: I don't know. (pause) Yes? (laughs)

THERAPIST: I mean, I guess (inaudible at 00:31:39) like, you know (pause) You know, sort of an immediate [lowered tone] (ph) sort of way like, it just shouldn't make that much God damned difference if James is being sniffy if you know that he does this and you know what the context is and you brought it up with him before, like he just shouldn't matter so God damned much in that moment in what he's saying so literally, you shouldn't want people to know so much. People shouldn't be that important that you care that much to tell them something. (pause) [00:32:15]

CLIENT: (inaudible overlapping talking)

THERAPIST: (overlapping talking) I don't want you to step back, of course, if the right people matter a lot but I guess I'm wondering if there's somewhere another way.

CLIENT: Yeah. I think it feels like I just shouldn't relieve these things from people.

THERAPIST: Uh-uh

CLIENT: Like, I shouldn't need James to be nice to me as much as I do.

THERAPIST: Uh-uh (pause)

CLIENT: So yeah. [I get that.] (ph)

THERAPIST: Uh-uh (pause)

[00:33:00]

THERAPIST: I can (inaudible at 00:33:23) because I think you always feel a lot of shame when you feel like you need people. Or not always but those two seem to go together.

CLIENT: Yeah. (pause) Yeah. (pause)

[00:34:00]

CLIENT: [00:34:55] Sorry, I've been sort of (sighs) getting upset and I don't [know what I'm about] (ph) like, being here talking to you and so. I don't really know what to say about that. That it happens.

THERAPIST: I see. (pause) Through the last few minutes?

CLIENT: Sorry?

THERAPIST: Through the last few minutes?

CLIENT: Yeah. Yeah. (pause)

[00:36:00]

CLIENT: [00:36:56] (cries) Yeah, it's scary for me to think about how much I need to be here, how much it helps. I know yeah. (pause) It just feels sort of unbearable to say it.

THERAPIST: Uh-uh (pause) (inaudible at 00:37:26] makes you feel both really ashamed and also really afraid that [that means go.] (ph) (pause) And that even (inaudible at 00:37:51) my knowing that -

CLIENT: Yeah.

THERAPIST: We (inaudible at 00:37:59). (pause)

CLIENT: (sniffing)

[00:39:00]

THERAPIST: [00:39:57] You know it seems like that's really kind of (pause)

CLIENT: (cries)

THERAPIST: The main thing, or one of the main things that you were shame and worried about (inaudible at 00:40:17), meet and how that would like, drive me away. And the way you deal with that is to (pause) feel like you shouldn't or you know more of the doctor (inaudible at 00:40:38) thing, sometimes feel like you don't. Like, (pause) it's on you if you're not more in control of how you're affected by someone you need or you're not more in control but you tell them. [00:41:05]

CLIENT: Yeah. I feel like one of the things that is very scary for me about this relationship [as well] (ph) like, the things that I do to sort of stay control of the situation, don't really work very well here.

THERAPIST: Right.

CLIENT: Which I know is the point. (laughs)

THERAPIST: (laughs) That's really terrible. Absolutely Yeah, I understand. (pause)

[00:42:00]

CLIENT: It also feels like there's a relationship, there's probably a relationship, between the things that I do to stay in control of the situation not working and how much I need to be here and that's a little scary. (sniffs) (pause)

THERAPIST: And I guess somebody that running (ph) kind of unclear, like, historically it's not hard to imagine where I came from but in terms of your actual (inaudible at 00:42:59) unclear, why it's so bad to need or rely on someone, how you imagine that causes them, or us, to leave. I mean, historically in a general way it's not hard to imagine where it came from but there must be some way in (ph) your mind that that works and that part, at least to me, isn't clear. (pause)

CLIENT: Hmm.

THERAPIST: But -

CLIENT: Yeah, it sort of feels like a connection that's so obvious that [why would he pick] (ph) at it to me. I guess not. (laughs) (pause)

THERAPIST: Well, we should stop. (inaudible at 00:43:56)

END TRANSCRIPT