

Lori Gottlieb Maybe You Should Talk to Someone

Lori Gottlieb: [00:00:00] So I think that people. Inherently have a place of knowing inside of them that somehow the other voice has got much louder and that, that voice is so quiet. They can't hear it. And so I think my job in a lot of ways is to help them to get to that place of knowing to go back to that place, , so that they can figure out what is right for them.

Jill Stoddard: [00:00:23] you are listening to Lori Gottlieb on Psychologists Off the Clock.

Diana Hill: [00:00:27] We are four clinical psychologists here to bring you cutting edge and science-based ideas from psychology to help you flourish in your relationships work and health.

Debbie Sorensen: [00:00:44] I'm Dr. Debbie Sorensen, practicing in Mile high Denver Colorado

Diana Hill: [00:00:48] I'm Dr. Diana Hill practicing in seaside, Santa Barbara, California.

Yael Schonbrun: [00:00:52] From coast to coast. I'm Dr. Yael Schonbrun, a Boston-based clinical psychologist and assistant professor at Brown University.

Jill Stoddard: [00:00:58] And from sunny San Diego, I'm Dr. Jill Stoddard author of Be Mighty and The Big Book Of Act Metaphors.

Debbie Sorensen: [00:01:04] We hope you take what you learn here to build a rich and meaningful life.

Diana Hill: [00:01:07] Thank you for listening to Psychologists Off the Clock.

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Diana Hill: [00:01:28] We're also affiliates with Dr. Rick Hanson's online Neurodharma program and his Foundations of Wellbeing programs, you can find out more about them at our website offtheclockpsych.com where you'll get a \$40 discount

Jill Stoddard: [00:01:41] if you or someone, you know, is currently struggling with anxiety, worry or stress during these really tough times in 2020, you can go to my website to get the first three chapters of my book. Be mighty for free. Just go to www.jillstoddard.com and sign up for my email list. I will never spam you. I just send a newsletter about once a month.

And if you sign up, we will send you the introduction and the first two chapters, and you can check it out and see if you think it might be helpful to you. and if you order B mighty from my website, I will also send you a free journal to be able to do the exercises that are provided in the book.

Hey everybody, before we get started today, just wanted to give a little sound quality warning when Yael and I were recording the introduction to this episode, , my air conditioner turned on unbenounced to me. , so there is a whir in the background during the introduction, but it does go away as soon as the introduction is over and you will have clean sound for the remainder of the

episode.

So hang in there and enjoy this episode.

I'm here with Yael today to introduce our episode with Laurie Gottlieb the author of maybe you should talk to someone and if you're a therapist who's listening, you have probably read this book because this book has just absolutely rocked the therapy world.

And it was truly exciting, I think for all of the co-hosts to have Laurie on the show and there are so many juicy tidbits in here, and I think what I love the most is that whether you're a therapist or not, you really get this inside, look into the world of therapy .

And one of the things that I appreciated most that Laurie was talking about. Was the way that she chose to include herself as a therapy client in this book, because she felt like it would be disingenuous to write about her clients and not write about herself. And what it made me think about was when I first became a therapist and started asking clients to do exposure work, which is facing your fear.

And I felt like I had my own. Little hidden secret that I had all these fears that I wasn't equally facing. And I started doing my own exposures, right from the beginning of graduate school. I went to six flags with a friend and classmate and did some , Ferris wheel exposures to get over my fear of Ferris wheels.

And I now have a print in my office, of a Ferris wheel that sort of signifies. Doing that work. And so I really related to Laurie on that point. , and I think there were just so many other relatable parts of this interview. And I'm curious, yael what stuck out to you?

Yael Schonbrun: [00:04:35] Yeah. I loved her book. I gobbled it up and I had been talking about it with therapist colleagues for so long.

There's so many elements that just really speak to my soul, but one of them, I think is the sort of vulnerability. Being a therapist that we're sort of in this position of presenting ourselves as having a lot of confidence in how to navigate uncharted territories, our own, as well as other people's.

And there's just such an honesty that she brings to discussing that we often don't know, we have sort of skills and tools that can help us. Pushed through, but sometimes we also don't know and it, it reminds me of one of the first clients that I ever saw in graduate school. I just remember sitting there and thinking to myself, maybe you should go see someone and then I thought, no, that's supposed to be, yeah.

Yeah. This Lord, even within sir, therapist's circles that we're supposed to be really confident in. And I just love her vulnerability and I think that's right. In a way really useful for clients because it's not like anybody has the answers. And I, I find myself more and more, the longer that I'm in this career, sharing, disclosing with people that, you know, I struggle too.

So like when I'm doing communication training with a couple, I'll say, you know, this is really hard. I do this for living and I still get called out all the time by my spouse for. Not being a good listener for shutting down for, you know, thinking emotionally, instead of really opening myself up to what he has to say.

And so I think so many parts of this just really normalized the experience of being human or walking through life and in ways that nobody else has ever

experienced before.

and the stories are just so relatable, the patients that she describes and as well as her own story.

Jill Stoddard: [00:06:29] Yeah. Yeah. They really are.

And she talks about how they appear to be so different, but at the heart, there's a lot of similarity. And I know that one of the things, I also really appreciate about this book and I believe was one of her intentions is to try to reduce the stigma that does still exist around, Mental health treatment and psychological struggles. And, you know, I'm noticing a push on social media now where therapists are talking about when they saw their therapists, , you know, and similar to what you're talking about disclosing like we're human beings too. And this isn't a situation where I am well and I have all the answers and you are ill and I need to fix you.

And I do think there was some level of, of seeing things that way in the past. And that's. Really changing. And I think part of what changes it is books, like maybe you should talk to someone. And Laurie also now has a brand new podcast called dear therapist. Um, that's excellent. They just dropped their, their second episode.

So for people who want to get more of her, , she's out there in that way too. And I think it's just, it was such a gift to have her on the show. And I think she's just lovely. So I hope you guys enjoy this episode with Lori Gottlieb.

I am beyond thrilled to introduce my guest for today. The amazing Lori Gottlieb, Lori Gottlieb is a psychotherapist and author of the New York times bestseller. Maybe you should talk to someone which is being adapted as a television series. In addition to her clinical practice, she writes the Atlantic's weekly dear therapist, advice column, and contributes

regularly to the New York times and many other publications.

Her recent Ted talk is one of the top 10 most watched of the year. A member of the advisory council for bring change to mind and advisor to the Aspen Institute. She is a sought after expert in media,

such as the today

show. Good morning, America. CBS this morning, CNN and NPRs fresh air. Her new iHeart radio podcast.

Dear therapist produced by Katie Couric brings counsel to listeners ears. , laurie. Welcome. Thank you so much for being here.

Lori Gottlieb: [00:08:39] Well, thank you so much for having me.

Jill Stoddard: [00:08:42] So let's dive right in. I am a huge fan. I love all of your writing. I've read a number of your articles and I absolutely fell head over heels for maybe you should talk to someone I loved, the back and forth between your story, your client's stories, and even the teachable moments that you put in to kind

of just talk about therapy or therapists in general.

it was seamless and so well done. And I really loved the vulnerability that you.

Brought to this book, you know, admitting to the deep internet dive you took into your on therapist. I mean, it was all just very real, very funny, very relatable. , and I'm curious of all the many, many clients I'm sure you've seen over the years.

How did you choose these main clients to focus on in your book? What was special about them and their stories?

Lori Gottlieb: [00:09:31] Right. So just for people who haven't read it, the book follows, um, pretty much four main patients and there are others sprinkled throughout. And then there's a fifth patients in the book and the fifth patient is me as I go through my own struggle with my own therapist.

And, um, you know, one of the things that was really important to me in choosing the stories that I would be telling in this book was that I wanted people to be. As surprised as I am as a therapist. So I think that when, when people come in, you have a certain idea about who they are. And inevitably, as you get to know them. , you start to feel all kinds of different things about this person, and you start to see how similar you are to even people who seem very, very different from you. And so, yeah. I really feel like one of the themes of the book is that we're all more the same than we are different. And so I chose people who look very, very different on the surface in terms of age and gender and the problem that they're struggling with and their family histories and their personalities.

And, you know, as you start to get to know them, you start to see, wait a minute. I find a piece of myself in every single one of these people. I

Jill Stoddard: [00:10:42] love that. That's so true. I hadn't picked up on that, but that makes perfect sense.

I know all therapists are dying to know this part and a good chunk of our audience are other mental health professionals.

, how did you go about handling the confidentiality issues and, you know, getting permission from these folks? I know you I'm sure disguised some information, but how did you handle that, that part of the situation.

Lori Gottlieb: [00:11:06] Right. Well, first of all, part of that was in the selection process, meaning that I was very careful about who I would ask permission from meaning there might have been, a particular case that I wanted to include in the book, but I felt like asking that person.

, would be problematic for them clinically. I didn't, I didn't include anybody that was currently seeing just to be clear. So there was no, that would be just blurring so many boundaries that I wouldn't be able to do that. but I think when I was thinking about, you know, what cases did I want to include?

for example, somebody who I knew had a tendency to people, please, I didn't want to ask that person because I felt like that person would just say yes, even if that person felt like she didn't want. The story in, because that's something that we had worked on a lot. , and in other cases, I think, , you know, somebody who like always wanted to be my favorite patient, you know, that would not be a good person to ask because they would somehow read into this, you know, this kind of fantasy that they had about being my favorite patient.

So, , I was careful about who I chose and then of course, you know, I asked permission, , and I had to change. All the identifiable details, anything that you

can Google, as you know, there's a, as you said, there's that scene in the book where I Google stalk my own therapist, there's a lot that you can find on the internet.

And so I had to be really careful and I really wanted to honor these people make sure that everything that was written about them, even those moments that, you know, we're not the most because we all have those, that they were, they were treated with absolute respect.

Jill Stoddard: [00:12:41] Yeah. And so did you run any of this by them before it went to print?

Did you have to get permission after the fact?

Lori Gottlieb: [00:12:48] I did not. Um, you know, these are people who trusted that. I mean, don't, don't forget. I was a writer long before I was a therapist. So people who come to me have read, generally have read something that I've written, you know, maybe it's a profile in the New York times or the Atlantic or whatever it might be.

And they've seen that I've incorporated. Material from the therapy room into my work. I think that they trusted that I would handle it. Well, I also have in my informed consent before anybody even steps into my office, that I can write about anybody as long as is I disguise their identities. and so I didn't feel like that was enough permission.

, just because the, you know, this really goes into their lives deep, deep way. So I got additional permission in this case. But I didn't, I didn't want them to read it in advance, , because I wasn't going to have them sort of edit their stories with me. It was my telling of it, the story. Right. That makes sense.

Jill Stoddard: [00:13:42] Yeah. and so, I mean, one of the greatest things about this book, and I think I saw you say somewhere, maybe on Twitter recently, that part of the reason that you wrote the book was to try to. , reduce some of the stigma around mental health and mental health treatment and, you know, even successful therapists get their own therapy.

And I think one of the critical elements is how incredibly honest you were about your own experiences. ,

But this is

obviously a shift, right? Like therapists usually keep their private lives. Private. That's really different. how does it feel for you now to know that your current clients know so much about you and about your personal life and what kinds of things did you take into consideration as you were deciding?

What or how much to reveal in the book?

Lori Gottlieb: [00:14:30] Well, it's really funny because as you know, from reading the book, this wasn't the book I was supposed to be writing. So originally I'd written this piece for the Atlantic called how to land your kin therapy. Why our obsession with our kids have Venus might be doing them to unhappy adulthoods and that piece went.

Viral in a very big way. And publishers wanted me to write that book and I felt like I did not want to write that book. I felt like I said what I wanted to say in the piece. And I also felt like I was really interested in what was going on with the adults. I remember at the time the new Yorker. Said something about all the over parenting books that were out.

And they said another parenting book at this point would just be cruel. You know, it's like, if you want to call parents down, it, all we do is make them more anxious. you know, so I, I didn't want to do that. And I said, I'm really interested in what's happening with the adults. And they said, Oh, you want to write a happiness book?

I said, no, I don't want to write a happiness book, but you know, I'll make it my own. And, and it was really hard because. That it turns out they really did want to happiness book. And so, ironically, the happiness book, right? It was making me miserable. I was said it was the miserable depression, inducing happiness book. And I couldn't get myself to write it because it wasn't meaningful to me. I feel like happiness as a byproduct of living your life in a meaningful way is what I think we're all striving for. But happiness as a goal in and of itself is a recipe for disappointment. And so I couldn't get myself to do that.

And so I ended up counseling that book contract and, um, and deciding, you know, what I have the privilege every day of going in and seeing the human condition and seeing life as it really happens in to me, that is so inspiring and interesting, far more interesting than any of these other topics. And so I said, I, I want to bring people into that world.

And so originally I thought, well, I'll, I'll write about these stories, but then I thought it feels disingenuous. To not write about what was going on with me at the same time. And I say at the very beginning of the book, that my most significant credential is that I'm a card carrying member of the human race that I use my humanity to help other people.

I don't think anybody wants to go in and see a robot or see like the blank slate. Right. I don't, I don't disclose things about myself in the therapy room. I don't mean that, but I mean that I'm very human in the room as we all should be. And so . When I decided to write this book, everyone said, Oh, it's not commercial people.

Aren't going to read it like, you know, the happiness book or that, or the kid book. Right. The parenting book. But I didn't care because I thought, well, if three people read this book, but it, it helps them to change and grow. And I say, what I want to say, then that's fine with me. And so I turned in my first draft and I just let it ride.

Cause I'm like three people are gonna read this, so who cares? I'm going to be really totally, you know, I'm just, I'm gonna, I'm gonna write what I want to write in the most authentic way. And I turned in the book to the publisher and they just. Went crazy for it. They were like, I laughed, I cried. I saw myself in every single person.

I, you know, it really resonated with them. And so I thought, Oh, maybe 300 or 3000 people might read this. Maybe I should clean myself up a little bit. Yeah. Mmm. But I didn't. And I think, you know, the book I spent more than a year already on the New York times bestseller list. And I think that the reason that so many people are reading it and are responding to it and are seeing themselves in it is because I didn't clean myself up.

So I think that, I think that that's where the vulnerability, , Is really important where we can say, Hey, we're so afraid to take off the mask, but look, what happens when we do, we realize that we are all connected, that we are not

alone.

Jill Stoddard: [00:18:11] A hundred percent. And I think we need that more than ever right now.

And you know, it's interesting that we're talking about this now, because of course being in this global pandemic where so many of us are working from home and

as therapists,

you know, this is really the first time that we, as therapists are truly going through the same thing that our clients are going through.

And it's the first time in therapy where my clients are asking me all the time, how are you? You know, not the superficial. Hi, how are you? Good. How are you?

But they know that I'm going through this really hard thing too, and they want to make sure I'm okay. And I know that I can't say, Oh, I'm fine. How are you?

Because they know it's disingenuous. And so it's really required, you know, kind of letting go of some of those rules that were sometimes taught in school. Um,

and to be more real and to be more human and to go ahead, like, I know they care and they want to really know for real how things are for me and for my family.

And, and I think it has done much more good than harm for sure. I've noticed a greater closeness. I mean, it's the common humanity, like you say,

Lori Gottlieb: [00:19:25] Yeah, I think there's sort of a leveling that's happened because of COVID where, you know, we're, we're all doing this from our real environment. That's right. Our home environment.

So for the first time we're seeing inside their homes, they're seeing inside ours.

Um, and, and I think that that, that kind of humanizes the interaction more than maybe it does in an office. Even if you make your office feel very warm and welcoming.

And I think the other piece of it is that, um, you know, I think as a therapist, you learn how to be real and how to, how to be human with someone

without crossing those lines into, and now we're friends and we're having chit-chat.

Right. Um, so I think that when people ask, how are you, you can give an honest answer, but you're not going to give the same answer to your client that you give to your friend. If there's a, there's certainly a difference there.

Jill Stoddard: [00:20:18] Right. There are still boundaries. They've maybe just shifted

a little

bit in this current reality.

I mean, I loved the article that you just wrote. I think it was called the toilet. Isn't it?

Lori Gottlieb: [00:20:28] Yeah. And then you're talking.

Jill Stoddard: [00:20:30] Right. Yeah. And talking about how, you know, you have clients who are doing their therapy sessions from their bathrooms, because

it's the only place they can get privacy. And I'm noticing the same thing, but mine are often in their cars, not driving, just sitting in their driveway.

So in their cars.

Lori Gottlieb: [00:20:44] Yep. I've had that. I've had people in their closets, uh,

Jill Stoddard: [00:20:48] people

Lori Gottlieb: [00:20:48] in their cars, um, people yeah. On the toilet that, what I said in that New York times piece was that, You know, this woman was, was sitting on the toilet with the seat down and so that she could have privacy. And she was, her mother was in a nursing home and there was a confirmed case of COVID there and she was crying hysterically.

She was so worried. Her mother was going to get sick and die. And she accidentally in the middle of sobbing, leaned back and, um, flush the toilet with her elbow. And, and it was this and all of a sudden you're this like whoosh and it surprised both of us. And, and it was a very funny moment and I was afraid to laugh because of what she was talking about.

And she said to me, am I the only person who does this, you know, from, from the toilet? And I said, no, the toilet has become the new couch. And I immediately regretted that because it felt very glib given what she was talking about, but she laughed. And then I laugh because I think laughter is contagious.

And at the end of the session, she said to me, you know, everything. You know, you said today was really helpful, but what mattered the most to me was that we laughed together. That's what helped the most. It reminded me of who I was before all this happened. And it reminded me of who I still am and who I'm going to be when we emerged from this.

And I think those that you, you know, you have them in different ways in your office, but something like that never would have. Yeah. It happened in the office in exactly the same way.

Jill Stoddard: [00:22:14] Right. Yeah. And, and I think it's another example too, of, you know, kind of learning by experience that it's okay to break some of those and I'm doing air quotes.

Not that anyone can see me, but you know, some of those therapy rules that

we learn and you talk about those in the book too, you talk about, um, you know, your therapist Wendell throwing the tissue box at you, and you talk about eating food with the client, John. Right. And, , like, how do you go about deciding, you know, what the rules are, what rules to, to so-called break and when to break them?

Or do you think these things just kind of happen organically? Like you use your clinical judgment in the moment?

Lori Gottlieb: [00:22:52] Well, I think you always have to use your clinical judgment. I think that being a therapist is a little bit like learning to be a concert pianist. Right? so you have to learn, the scales are not a concert pianist, but becoming like, , a pianist to improvise, right?

So you have to, you learn the scales, you learn everything perfectly, you know, you learn the technique, but then once you have the technique down that gives you , the frame from which to improvise. And so, , I think the same thing with therapy is that you're trained in a certain way, but you're not just gonna.

Do therapy like that. Now, once you have that training, once you have that framework, you know, the scales, you know, you know, all the rules, you know, how it works. , then you can improvise in a responsible and intentional way. I think that people really need to think about why are they doing what they're doing

in that moment?

So what I really loved about. Seeing my therapist going to Wendell and Wendell's kind of this quirky unconventional guy. Who's not, unboundaried, he's just quirky. , so, you know, it's not like he's sitting there talking about his life or disclosing things. , but he very much brings his whole personality into the room in a way that is so effective.

And that was one of the things that I really learned. It was like I was going to therapy with him. And at the same time, I felt like I was getting great training, just being a patient of his. So I would literally go from his office to my office and I would sometimes, , You know, almost like Cyrano, you know, try something that he tried, but make it my own.

And, , he really taught me a lot about, because I, I had much less experience at the time that I went to him. He was a much more seasoned therapist than I was. , I came to this as a second career and so. I really sort of got my footing, uh, through that. And I really feel like I, you know, I think we all learn all the time, his therapist and we grow and evolve.

And I think that that was a real wake up call for me about, Oh, this is what. Good therapy can look like.

Jill Stoddard: [00:24:50] Yeah. , it is interesting as a therapist in therapy, you know, I often think about , how did, what you learned in therapy kind of shift the way you do your own clinical work?

And I think my experience has been the same that. What I learn about myself in therapy, isn't necessarily the thing that changes how I am as a therapist, it's seeing my therapist as a therapist and saying, Ooh, these are the really effective ways of being or doing that. I would like to model myself. is that basically what you're saying with Wendell?

Lori Gottlieb: [00:25:26] I think for me, it was both. I mean, I think that certainly learning more about myself makes me a better human in all realms of my life. , but I also think that one of the things that new therapists struggle with is this idea of on the one hand, they feel like they don't know anything because they don't. Um, and on the other hand, there's my, my very first session was actually, maybe you should talk to someone where, um, this woman comes in and she's. You know, crying hysterically, um, you know, like 30 seconds into the session and she starts sobbing hysterically. I've never sat in a room with a client before. , this is my internship and, , I don't even know, do I look at her so that she knows that I'm with her? Do I look away so that she doesn't feel like I'm like the stranger is staring at her? She sobbing hysterically and I don't even know about what, cause I don't know. Anything about this person yet. , you know, just things like that, you know, what is it like to sit a few feet away from somebody who's sobbing hysterically that you've never met before?

, and how do you sit with them through that? What does it mean to be present for them? And then, you know, at the end of that session or in the middle of that session, at some point in that session, I realize, like I keep looking at the clock because I want to make sure that, you know, I'm going to end at 50 minutes and I don't know yet how to do that.

I've never done that before. So I don't know, you know, how do you, how are you present in the session and also had, you know, sort of the rhythm of the session.

And so, you know, kind of, when it's going to add to it, you have a sense of where you are in the, in the trajectory of the session. And she's talking to talking to looking at the clock and I realized the clock hasn't moved and I go, no.

And I realized the battery is out in the clock. This is my very first session. There are no cell phones in the room. I don't know, you know, I don't know what to do. , and then at a certain point she looks up and she says, Oh, this went so fast as an overall ready. And I look to where she's looking and she's looking somewhere behind my head and I turn around on the wall behind me.

I've never stopped in that particular room before either. There's a, and she had been looking at it though all time and I didn't even know it was there. So, you know,

when you, when you first start out, you

really don't know anything. So there's that. And then I think there's also the sort of false self that takes over, which is that false confidence.

But I think you want to bring in, like I'm a therapist, right? I think that certainly when you start your private practice, maybe you feel that way a little bit. Cause you've, you've had your training at that point, but you really know nothing, you know, very little, um, And so I think that you get to a point in your work where you start to really come into your own and you really it's, you know, no two therapists are alike, so it's not like going to a cardiologist and like they might run the same tests and they might come up with the same conclusion therapist will have a lot of overlap in terms of how they view a case, but really the experience of being in therapy with two different therapists.

Is vastly different because of who these people are and what kinds of personality traits they bring into the room and their styles, their personality styles, and how they work with patients. And so I think that that's where the confidence comes from now is that, you know, going to therapy with Wendell and, and, you know, people can read all about that in.

Maybe she talked to someone really showed me how to find. That voice for myself, how to find that own comfort zone for myself. Yeah. And I really enjoy being a therapist so much more when I see when I come from that perspective. Yeah,

Jill Stoddard: [00:28:49] absolutely. I mean, it's, it's sort of infusing the heart

and the art into the therapy

and

it allows us to be creative.

You know, I think we would get burnt out if we just opened a treatment manual and followed it like a recipe for every person. And I don't think that would work very well either. And finding that stride of who you are as a therapist, I think is also what, what makes it really, um, fulfilling. Right as a therapist.

I mean, there's many things that make it fulfilling, but I think that creative piece of it is a big part of that.

Lori Gottlieb: [00:29:25] Yeah. And I think the other thing is I write and maybe stuck to someone about how I have this word taped up in my office, ultracrepidarianism. And it means the habit of giving advice or opinions outside of

one's knowledge or competence.

And I love it, that word because it reminds me that. People know what they need to do. They just need guidance to figure that out. That I can't tell people what to do. I see a lot of couples in my practice and sometimes I, you know, I know exactly what I would do. I know whether I would stay with that person or not, or I know what I would do given whatever difficulty they have, but maybe that's not the right decision for them or just people making other choices in life.

Right. So I think that people. Inherently have a place of knowing inside of them that somehow the other voice has got much louder and that, that voice is so quiet. They can't hear it. And so I think my job in a lot of ways is to help them to get to that place of knowing to go back to that place, , so that they can figure out what is right for them And, and I think that's the way that we can really help people in the longterm.

Jill Stoddard: [00:30:33] Yeah. Yeah, I agree. I want to ask you a little bit about your writing process if that's okay. you know, I'm someone who, who loves to write as well. And I have more recently discovered more personal writing, you know, personal essay, memoir type writing.

and I find

that I learn a lot about

myself as I write, you know, the process of writing is it's like the process of writing kind of includes making sense of what happened. , there's a book, I think it's Vivian, Gornick called the.

situation and the story are you familiar with that book?

Lori Gottlieb: [00:31:07] Yeah, she texts.

So she talks about

Jill Stoddard: [00:31:08] that situation is like what happened? The plot. , and then the story is like the emotional experience that preoccupies the writer. So like the insights, the wisdoms it's like, I think she calls it. The thing you really came to say, ,

Lori Gottlieb: [00:31:23] That's funny. So I talk in the book about how I'm always listening for the music under the lyrics.

And there's a whole chapter about how the presenting problem is generally not really the problem. Yeah.

Jill Stoddard: [00:31:36] It is similar to that.

Lori Gottlieb: [00:31:38] Yeah. And so I talk about how the lyrics are, are sort of, you know, the content of what they come in with. I'm here because of X, Y, or Z. And the music is what is the underlying struggle or pattern that got the person into this.

Predicament in the first place. And, and, and what is that, you know, what is that, that we're going to really be exploring in here.

Jill Stoddard: [00:32:00] Right. And so just like in therapy, the process of talking about it is a big piece of what helps clients figure it out. Right. Has that been your experience with writing? Like when you went to write this book, you, you already knew what the situation was or what the music.

Was right. Or the lyrics I forget, which was which the lyrics. But did you, like, as you were writing, were there things that you learned about yourself as you know,

a woman, a partner, a mom, a therapist, et cetera, as you were writing the book, the process of writing teach you some things.

Lori Gottlieb: [00:32:36] Yeah. I mean, so it's really interesting.

My whole Ted talk is about this, which is that I feel like, like when people come in, they're telling me a story and. I feel like, because, especially because I have a writing background, I feel like my job is they sit in the therapist. Chair is really mostly as an editor, helping people, you know, we're all unreliable narrators. We all come in and we tell a story in a certain way, and we're leaving out entire chunks of the story. We're emphasizing certain parts and the protagonist is going in circles and the supporting characters all messed up. And so it's kind of like, and helping them to revise this faulty narrative.

I think that that's true of all of us though. So when I was writing the book, , you know, it, what's great about nonfiction is you already know the plot because it's not eviction, but I think that you discover certain things. As you revisit stories at different points in your life. So I was writing about something that happened in the past, and now I'm revisiting it many years later.

And as you revisit it, you start to see things that maybe couldn't see even at the time, even though you've, I saw that you had really processed this. And I think that one of the things that I really found in writing the book was every chapter is in conversation with the other chapters. So, even though I'm weaving together the stories of all of these different patients.

You're following these different stories in, in, you know, one chapter will be about this person and then we leave their story. We go to somebody else's storm and come back to the other person's story. Um, all thematically related, right ways that partly was not even conscious. Because you start noticing how the threads are connected.

So I think that was a really important, , process. And also not only for me, but for my patients. So many of them, you know, have said in different ways. Wow. I really, even though I felt like I really understood things as we, you know, I saw things a certain way through our work. I started on an even deeper level just reading about

Jill Stoddard: [00:34:31] it.

Oh, that's really cool. That must be incredibly rewarding for you too.

Lori Gottlieb: [00:34:37] Yeah, I back, it was almost like a different kind of therapy and kind of being able to put those stories on paper and think about them from that perspective.

Jill Stoddard: [00:34:48] Yeah. That's so great. I love it. , I want to ask a couple questions telling you before we started recording that, , that I think my cohosts might've been having a little bit of envy that I got to be the one to interview you because we're all big fans.

, so I wanted to ask a couple of questions for them since they don't get to talk to you directly. And so this question is from Debbie, my cohost. Debbie. , and she said that one of the things that she loved most about your book was how it really reminded her of the power of the therapeutic

process and how it can really take time to unfold.

And she's noticed in her own work that she'll sometimes feel impatient or

discouraged. Um, you know, kind of wondering if she's helping her clients enough. So Debbie was wondering if you ever feel that way and what advice you might have. For therapists or even clients, but therapists who are feeling stuck or wondering if their B is even helping.

Lori Gottlieb: [00:35:48] Yeah, well, first of all, hi, Debbie. When you hear this, I, uh, you know, I have that chapter in the book about a client that I feel really stuck with, and this is the, the chapter where this. This young woman comes in and she's having difficulty with, um, you know, some relationship and, uh, relationships, and then also friendships.

And for example, her coworkers go to lunch and they don't stop by her office and ask her to come to lunch, to get they're very friendly, you know, around the office, but they don't like actively seek her out to socialize. And they're sort of a group that does, and she doesn't sort of understand why that is or what she's.

Doing to make people want to keep their distance from her. And of course we all know that what happens in the therapy room is a microcosm of how people act outside of the room. And, um, You know, I tried all different, very relations the room. I very much work with the relationship that's going on between me and the client in the room.

And, , so it's not just like people are bringing in like an outside problem of the week and that we're talking about it removed from how. This person and I interact, and I think that's very helpful to have something happen in the moment in the room that they can then take outside because it's very safe and there's far less shame when things happen in the room.

So, , she just, you know, no matter what I tried, um, it just. It failed. And I would go to my consultation group every week and I would, I would talk about this and they would give me suggestions and everything I tried would fail. And yet when I would bring up the fact that she was so disappointed with me or felt like I wasn't helping her, she did not want to go see someone else.

, and so there was this, this kind of catch 22. Yeah. Well, you're ineffective, but I don't want to, you know, but I don't want to leave. Cause sometimes you're effective, you know, she'd like throw me a bone. Um, and. Uh, eventually I ended up ending treatment with her. And so I think that sometimes. It's not the right match or the person isn't ready or I'm not effective enough, whatever it is, but I don't want to waste people's time.

So in the book, I was really, it was really important to me to show here are some, here are these, you know, these stories that I want to share with you. Most of the time, you know, as we know as therapists, most of the time we, we, you know, people are really helped by the work that they come in to do in therapy.

And then sometimes it doesn't work. And I wanted to include that case because I felt it was really important to show that, you know, it's not like every single time, um, it's going to go swimmingly. Right.

Jill Stoddard: [00:38:31] Well, and that certainly validated it for both therapists and clients alike to read that. And that just because it doesn't go well with one person doesn't mean it won't go well with another or, or doesn't mean that you're a bad therapist or that you're a client who's somehow doing something wrong.

And I also think it's a good reminder for. Us as therapists that sometimes we feel so compelled to fix it and help and push and push. And you know, you like,

wouldn't keep giving someone the same medicine. If it, you know, you wouldn't give someone an antibiotic that wasn't actually clearing up their bacterial infection, you would switch their medicine.

And I think, you know, we need to remember. That it's just as important to recognize when maybe we need to stop. Just like you're saying you did, rather than continuing to try to shove a square peg into a round hole.

Lori Gottlieb: [00:39:22] I think that if, if I'm more curious about the client than the client is about him or herself, Um, that person is not ready to do the kind of work.

At least the kind of work that that I do as a therapist. Maybe they want something different. Maybe they want a coach. Maybe they want, you know, maybe they want something that's different from what I'm offering. Right.

Jill Stoddard: [00:39:44] Yeah, absolutely. Well, I know we're running short on time, so I have one last question and this one is from my cohost Yael

Lori Gottlieb: [00:39:52] okay.

So she had said

Jill Stoddard: [00:39:54] that she, you know, she loved all the unique narrative arches of the various patients. And of course your story as well, but she really felt like she connected with. I don't remember her name, but it was the elderly woman who you talked about, who got the second chance at life, Rita, Rita. Um, and so Yael was wondering if you could speak to this theme, like why is it never too late to learn, to build relationships, to create meaningful work?

Um, and what are the ways that even elderly people who might think it's too late could be going again? The way Rita got a second chance. Second. Yeah.

Lori Gottlieb: [00:40:28] Yeah. Well, thank you. Yell for I'm giving Jill that question. So I thought it was really important to include Rita because, cause I feel like one of the things that's really important for me when people come into the room is I want to know, not just why are they here, but I want to know why now why this week, this month, this year.

Did they decide to pick up the phone and call it therapist when maybe the problem has been going on for a very long time. And so to me, I'm not just looking at, what's not working, but I'm scanning for strengths. I'm looking for readiness. So there was some strength that made them say, okay, I want to go talk to somebody about this, even if they don't even know what they're doing.

A lot of people think they're coming in to change other people, you know, like I'm coming in because my partner is so problematic. That's why I'm here. Did they quickly learn, wait a minute.

Jill Stoddard: [00:41:18] I might have not heard of this word.

Lori Gottlieb: [00:41:21] Um, you know, so, but I, but I think that just the fact that someone calls and they said, you know what, I, I really want to understand this better something I need to change.

I need a change, whatever that change is. , and I think that's great. So just the fact that they're, there, there is a strength to me. And so you wonder, okay, this woman comes in, she's about to turn 70, she's had some marriages that haven't worked. She has her adult children who are strange from her because of the way she was as a mother and, and the pain that she caused them and she wants their forgiveness and they won't even talk to her.

And I think that, you know, it's apparent that she's kind of looking for the wrong things, but what I really, what really. Stuck out about her was her loneliness. Like she really had no social connections at all. I always wonder when people come in, how are their lives? People, her life was not people at all.

She literally had no one. And so, , What I thought the work would be, would be about, , really like bringing her back back into the human race, you know, how can she make social connections? And of course you see that what happens is, , I don't want to spoil it for everybody, but she ends up having this full life in terms of family romance, , getting back with her kids in certain ways.

, and not in like a storybook happy ending way, but in a really realistic way. And I think a way that she never imagined was possible even when she was younger. So I think that for her, it was not too late to change because. She was ready to change. It was just so fearful of it. And what, what she suffered from was something called Terra phobia, which is fear of joy.

And we all know clients like that, or just people in the world like that, where they've they've had such. Bad experiences whenever they get their hopes up, whenever something feels good. So in her case, like her depressed mother would then, um, you know, be very present, but then she knew it would always go away.

So like, joy was not pleasurable. It was anticipatory pain because it was going to go away. So you can't do so why

Jill Stoddard: [00:43:25] bother?

Lori Gottlieb: [00:43:25] Right. Right. And so, you know, it's not worth , the disappointment, the downfall, right. When it, when it goes away. And so she did everything in her power to keep joy at Bay and, and there were many other things going on, but, um, but I think that I really liked it.

Sharing that story, because it's not an isolated story. There are lots of people like that who come later in life to therapy and they never, because just generationally, maybe people didn't really talk about things or therapy. They thought it was something different from what it actually is, and they didn't get the help that they needed.

And they get to a place where they say, wait a minute. Aware of my mortality. I'm really aware. I think, you know, Julie is this young woman. In the book who's in her early thirties. And she said, she comes back from her honeymoon. She ends up having cancer and, and it's, it's about how she asked me to stay with her until she dies.

And what Julie does is she kind of holds up that mirror of life has a hundred percent mortality rate. Most of us don't know how we're, when we're going to die. And so we need to be really intentional about how we live our lives. Sometimes that doesn't happen for people until they become real his age.

And they start to say, wait a minute. I I'm realizing that I don't, I don't know how long I have, and I don't want to live like this for the rest of my life. And so a lot of people do come to therapy at that age. Um, Partly because the stigma, you know, is different in today's culture than it was when they were younger.

And partly because they start to become very aware of the limitations of how long we live being shown. Yeah. And so I was really, I was really, um, I think people really enjoy read a story just because I think it, it holds up a mirror to them and

helps them to say, wait a minute, I'm not read as age yet. Maybe, or maybe they are, but how can I live my life? With intention every day. And I think COVID has done that for us too. Right. Where a lot of us are saying, what are my priorities? Who are the people that are important to me? Who are the people that I don't really need to spend a lot of emotional, real estate on? What are the, the, um, endeavors and activities and career, um, things that I do that I really. Want to focus on or not focus on. So, um, I think that we shouldn't need a global pandemic or cancer diagnosis or, um, the idea that we're going to die and our kids will never talk to us again for us to really say, wait a minute, I need to pay attention to my life and be present now. Yeah.

Jill Stoddard: [00:45:51] And I think that's a good piece of what the book does is, you know, by holding up those other people's stories. It reminds the rest of us that we can think about these things now and make changes now and, you know, be inspired by Rita and have hope because of her story and the other folks' stories as well.

and I am very, very glad that the book didn't only reach three people or 300 people or even 3000 people, and

that it's had as much success as it has, because it really is. Wonderful. And I do think the more that is out there, um, you know, and the more celebrities talk about struggling with mental health issues and the more mental health professionals talk about going to therapists, the more and more this will be normalized in our culture and given the.

Tens of millions of people who struggle with anxiety and depression and other issues, you know, it's so, so important. So thank you for the work you do.

Lori Gottlieb: [00:46:48] Oh yeah. You know, I, I feel like it's a mission and I feel like, you know, with my column that I write every week in the Atlantic, I feel like I'm.

Normalizing people's struggles with the way that I answer, you know, as a therapist, as opposed to no, don't talk to your mother-in-law, you know, it's not that kind of vice column. Um, and, and you know, the new podcast casts that we have coming out, , next week, , it's a podcast that Katie Kurt's producing for iHeart.

And my cohost guy winch is a fellow therapist like me. He's also done some Ted talks. And he's the advice column this for Ted. And of course I'm the vice columns for the Atlantic and we're coming together so that people can hear how to therapists talk about everyday problems. And how do we think about them? How do we talk about them? And then we have the guests on and how do we talk to people in real time? And I think that normalizes for just even people who aren't interested in therapy, people who, you know, maybe they've been in therapy, maybe they know someone in therapy, maybe they're, um, Therapy curious, maybe their therapy adjacents maybe they have no interest in therapy, but they do have it just in the human condition.

And to hear other people talk through their problems with therapists who, you know, who are talking to them like normal people. And then we give them some suggestions and then they go out and try them. And then they come back and tell

us how it went, which I think is the most important part, because I feel like. As therapists, we want to hold people accountable. It's not just what you come in and do in the therapy room every week. It's what you do in between sessions. What are you doing with this insight? We say insight is the booby prize of therapy because yeah, all the insight in the world, but if you don't make changes out in the world, I just useless.

And so, um, we, we learn a lot, not only from what worked, but also from what didn't work. And so we're really excited to bring the podcast to people too.

Jill Stoddard: [00:48:30] I'm excited too. I mean, just like the book, it's such a cool, unique idea and format for doing this kind of work. And I think people will get a lot out of it and see how, you know, these therapy processes are maybe not as intimidating as they might think, and I've listened to the trailer already and have subscribed.

So I'm really looking forward to listening when

Lori Gottlieb: [00:48:51] Ryan started.

Jill Stoddard: [00:48:52] So, Listeners, you can find out more about Lori's books and articles and talks and the new podcast at her website, [Lori gottlieb.com](http://LoriGottlieb.com) or by following her on Twitter, which is at Lori Gottlieb one and Gottlieb is spelled G O T T L I E B. Um, and she's on Instagram at [Lori Gottlieb underscore author](https://www.instagram.com/LoriGottlieb).

So Lori, this has been such a treat. Thank you so much for talking to us and. You know, I personally, and I'm sure our listeners to really look forward to seeing everything else you have coming down the road.

Lori Gottlieb: [00:49:28] Oh, thank you so much for the conversation. It was absolutely my pleasure.

Diana Hill: [00:49:31] Thank you for listening to psychologist off the clock. If you enjoy our podcast, you can help us out by leaving a review or contributing on Patreon.

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Jill Stoddard: [00:49:43] We'd like to thank our interns, Dr. Katherine Foley-Saldea and Dr Kati Lear

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