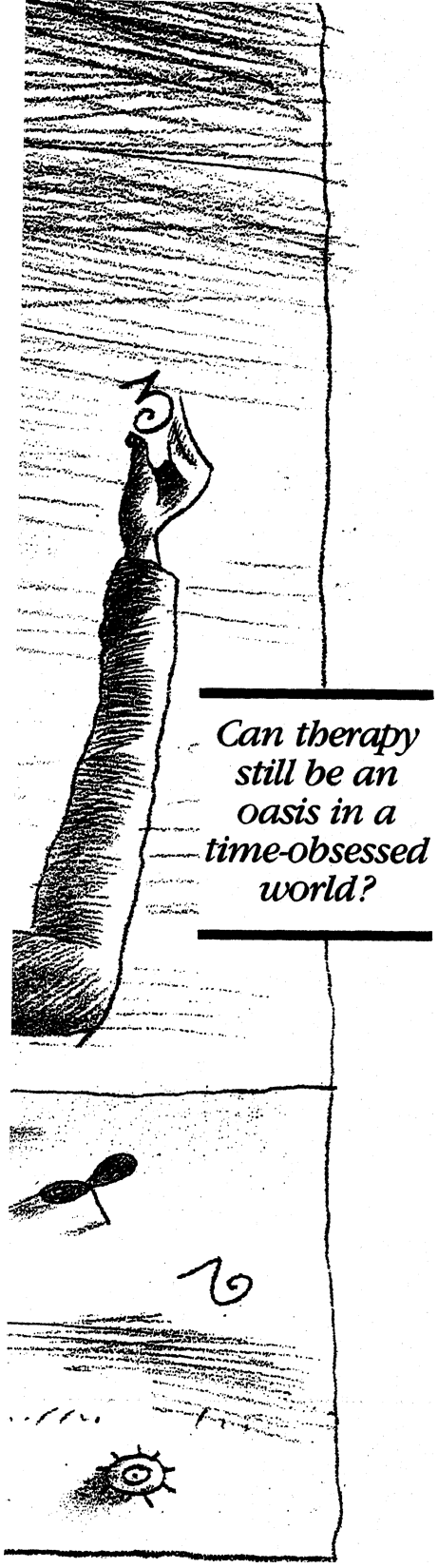


Can therapy still be an oasis in a time-obsessed world?

STOPPING THE CLOCK

IT HAD BEEN ONE OF THOSE DAYS, BOTH TOO SHORT TO get everything done that needed doing and far too long— a grueling, losingrace against the clock. I returned home after seeing my last client and began throwing dinner together, while my 8-year-old son, who had spent the day in the school-kid version of the rat race, played an alarmingly fast-fingered game of Nintendo in the living room. Through the accelerated staccato of the game's bleeps, chirps and tinny electronic music, he yelled at me impatiently, "'When will dinner be ready?" "Thirty-five seconds," I barked back, looking at the microwave dial. "That's too long!" complained this child of the nanosecond generation.

"That's iir I exploded. I yanked the microwave plug from the wall, picked up the bulky thing in my arms and staggered out the back door to the garbage can, where I dumped it, "Healthy Choice" macaroni-and-cheese dinner still inside. Back in the house, I looked at my son,

BY MICHELE RITTERMAN

now standing in the kitchen staring wide-eyed at his suddenly crazed mother, and said, "The next time you ask, it will be two hours! We are going to eat like normal people from now on! We are going to have a life around here again." Then, I cut up a large pile of vegetables and steamed them with rice at a mercilessly slow pace.

At that moment, I was in a rage against time—clock time, busyworid time, crude, technological time—that was destroying the delicate human rhythms of home time, flattening out all the small hills and valleys of human interaction, all the subtle moments, both pleasing and unpleasant, happy and distressing, that make up the ongoing ebb and flow of family life. It took me a little longer to realize that all of us—my husband, my children, myself—-had allowed the outside time pressures of school and work to invade our home and completely absorb what used to be savored as family time. We were all unintentionally but routinely sending one another messages that time spent with one another— down time, slow time spent listening, talking and being with the people we loved most—was actually less important than the fast time imposed by our external obligations. We were in such a rush to relieve the pressure of immediate needs ungratified for too many hours—to eat, to have a drink, to catch some quick, distracting entertainment, to unwind—that we couldn't take the time to slow down, create a more comfortable, liveable pace for ourselves, allowing us the rapport that is supposed to be one of the rewards of family life. Not only were we bringing outside time pressures inside when we got home, and logging them into our home technologies of choice-computers, Nintendos, microwaves, faxes—but we were doing it separately, individually, each of us on our own personal treadmill. As a family, we were out of synch with one another, like a small orchestra in which each musician plays a different tune to a different beat—all of them way too fast.

This undoubtedly sounds very familiar to most therapists. We, ourselves, are not immune to the multiple versions of time-crunch stories we hear from clients every day. And yet, however sensitive we arc to the time pressures on our clients, we are only just beginning to understand the depth and pervasiveness of time itself as a fundamental issue in therapy. Indeed, it may be that the way people experience and structure time is more critical in their life difficulties than any other single factor. Problems that therapists have typically treated as .symptomatic of individual psychodynamics or family life-cycle issues—marital difficulties, childhood misbehavior and poor grades, depression, anxiety, phobias—might better be linked to the dissociation and despair induced by the chaotic state of a society that lives in a time climate of perpetual frenzy.

It is by now a truism that social/public time is out of synch with personal/private or "natural" time, that *objective* time is often at odds with *subjective* time. Every article written about time these days, including several others in this issue, makes the point that while, traditionally, we have lived time at a slower pace, marked by the biological rhythms of nature—the rising and setting sun, the changing seasons, the cycles of birth and death—today we live by the frenetic technological rhythms of the cybernetic clock, the constant, staccato, uneven beat of computer and fax, telephone and television, stop-and-start traffic, security alarms and beepers. And yet, as therapists, we still don't fully appreciate how pervasive this tempo has become in the psyches of our clients, nor how deeply inured we all 'are—therapists and clients alike—to the impact of the same unnatural rhythms on our own practice.

WE DON'T REALLY NOTICE HOW MANY OF OUR CLIENTS' PRESENTING PROBLEMS ARE DEEPLY LINKED TO THE DEBILITATING, FORCED MARCH OF PUBLIC TIME.

We don't really notice how many of our clients' presenting problems are deeply linked to the debilitating, forced march of public time: the parents who "can't control" their teenage children actually never sec them or each other because their divergent schedules rarely intersect; the single parent who hits her small child is driven to abuse by her exhaustion and frustration at working the double shift of provider and caregiver; the husband and wife who have no **sex** life and almost no conversation both work at careers that leave them too tired and irritable to talk or make love; the woman who can't control her binge eating uses food as a release from her high-pressure job and solace for her personal loneliness; the middle-aged man who drinks more than a few too many every night is afraid he'll be "downsized" out of a job unless he proves his indispensability by working evenings and weekends; the child who beats up his baby brother is daily embarrassed by his teacher, who makes an example of how "slow" he is at solving math problems. These clients are symptomatic, all right, but the symptoms are emblematic of a society in which people do not have time to be human.

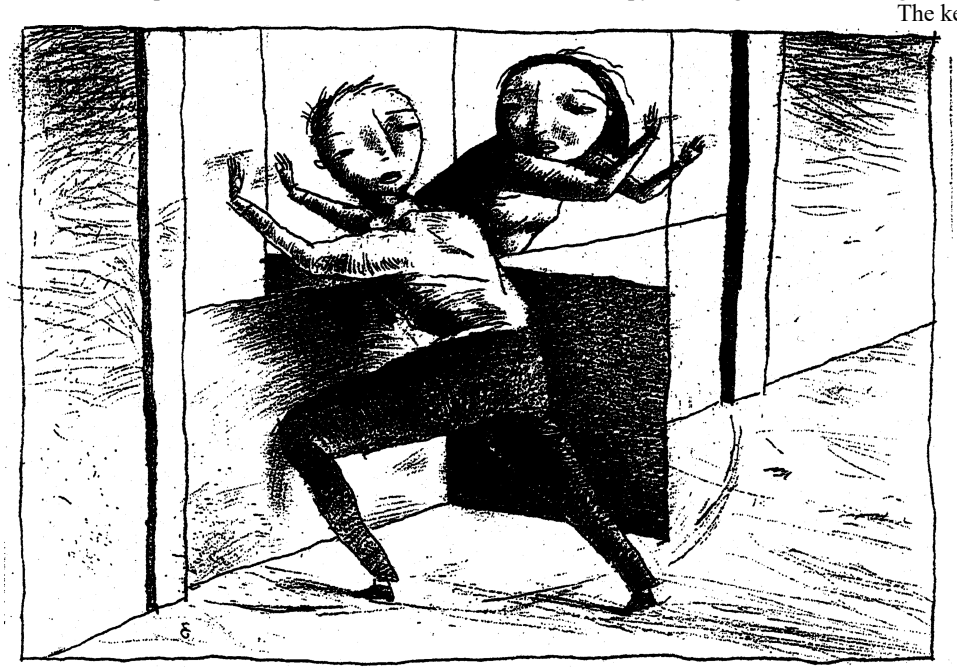
THE CURRENT ENTHUSIASM FOR brief therapies not only reflects a realistic appreciation of their effectiveness and economy, but a profoundly ingrained belief that faster is automatically better—faster cars, faster computers, faster food, faster therapies. Part of this infatuation with speedy therapy is dictated by managed care, of course, which pressures therapists to prefer clinical problems that can be quickly polished off, and treat the rest as if they could be. But the drumbeat for greater cost efficiency in therapy (read: quick and cheap) only reflects long-entrenched social patterns. As a society, we are impatient with people who don't get the answers in a hurry, *who* aren't quick studies, who can't change fast enough to keep up with the times. So therapists, too, collude uneasily with the clock.

Kathleen, the daughter of an alcoholic mother and verbally abusive father, is a good-looking, successful career woman subject to mild depressions. Her boyfriend, Matt, loves her—as long as she is self-assured, competent and vivacious. When Kathleen feels down or shy or seems too quiet, passive or vulnerable, Matt doesn't like her so much; he flirts with other women, suggests that perhaps they should separate for a while, get more

"distance" from the relationship, perhaps date other people. Matt has been on Prozac for six years, and he hates even the memory ofhisold, depressed self. He prefers feeling confident, upbeat, quick-witted, sharp, able to handle 10 tasks at once, and he wants his girlfriend to be that way, too.

Kathleen came into therapy because she was distressed about their relationship. Matt wanted her to take Prozac, and she was thinking that might be a good idea. I asked her why she thought so, and she said/'I want to get up to speed with Matt."

What*s a therapist to do? Try to help Kathleen allow herself time to experience what she feels, however negative, even if it means losing Matt? What if all she wants is the quick fix?



Or, we sec Benjamin, a 25-year-old *wunderkind,* already powerfully situated near the top of a Fortune 500 corporation, who suffers from debilitating anxiety attacks before he leads meetings or conducts international conference calls. He is very busy and medications are convenient; instead of beginning the tedious process of exploring his feelings of deep failure and fear that he will be uncovered as an impostor, why not simply give him a prescription for Xanax? Clearly, that better meets the needs of the marketplace. Not a week passes that I don*t receive flyers urging me to upgrade my clinical skills as a psychologist by learning to prescribe drugs for every presenting complaint from PMS to grieving and depression.

Ironically, at the same time that therapists are being relentlessly prodded to hurry our clients along—get 'cm in and get 'cm out—we are seeing more of the kinds of problems that cannot possibly be treated according to assembly-line procedures. How can we hustle through therapy the woman raped by her father throughout her childhood, the child who has witnessed mass shootings of children at a school playground, the father who cannot get over his depression and guilt since his son, whose homosexuality he could not abide, has died of AIDS?

Legions of therapy-outcome studies show that the single most important factor to clients in therapy, crossing all theoretical and clinical boundaries, is the feeling of empathy, understanding and support from the therapist Indeed many argue that the connection is the therapy. But this therapeutic connection not only takes time, it requires a sense of temporal spaciousness within the formal time frame (however many or few the number of sessions), in which therapy takes place. Within the" therapy hour, it is not bookkeeping time, but natural, biological time, that people need.

MILTON ERICKSON, *THE* GREAT hypnotherapist, used to say that if you want to destroy something, analyze it—break it down into its constituent parts. As technological time breaks our temporal experience down into smaller and smaller, disjunctive increments—each day a long, draining sequence of interruptions and unconnected time bytes—it destroys our capacity to concentrate, to take full advantage of the sustained, unseg-mented time needed *for* the unfolding of understanding, the possibility of healing.

When I was a graduate student, my teacher, family therapy pioneer Braulio Montaivo, graphically made the same point about time. He crunched a smooth piece of paper into a little ball and tossed the crumpled, shapeless thing into the middle of a table. While we watched, the paper unfolded slowly, like something growing and developing at its own pace. The key to therapy, he said, was to block off a temporal space, create a calm hiatus in the ongoing rush of circumstances that were, in effect, crumpling and distorting the lives of our clients. Therapy, said Montaivo, provides an "open-ended context'* of time, "a framework of temporal imprecision," in which clients can allow a different, more healing sort of reality to unfold.

Successful therapeutic interventions often work because they detach clients from the imposed time frame of their ordinary lives, allowing diem to inhabit, however briefly, a subjective time frame based on inner psychic and biological rhythms and the natural flow of personal interaction. In an article called "Observations on Two Natural Amnesias,"

Montalvo points out that within therapy, "no systematic ordering of time is necessary. 'Start any place,' *We are in no rush.* Take your time,' are the watchwords that allow for the possibility of reflection and concentration." Just as the measurement of time during the open-ended hour of the session was purposely. left imprecise, so is the proposed time of therapy's ending, which is not determined by a pre-ordained number of sessions, but by some moment in the unpredictable future when certain general goalscan be expected to bemet—"We'll finish when Janice feels better. When she stops hollering, you'll know we are almost through."

There is no question that such imprecise limits have been vulnerable to abuse, as managed care advocates and brief therapy champions have relentlessly informed us. Nonetheless, the freedom from time constraints in die therapy of the old days was, indeed, freeing. Today, how can we encourage people to "take their time," "don't rush" when we know full well that our corporate overseers are measuring every therapy minute with a stopwatch? "Time is money," we can almost hear the accountants breathing over our shoulders while we're encouraging our clients to allow themselves the time to feel, to think, to talk the slow, painful, sometimes halting language of self-revelation, a tongue that almost never comes in quick, glib soundbytes.

Is it possible to both expand and contract therapy time, to create within clients an inner feeling of temporal spaciousness and openness, a larger sense of *subjective* time, which is the prerequisite for change, while being quick about it?

In *A Simple Theory of the Self,* psychiatrist David W. Mann writes, "Each of the cardinal diseases of psychiatry is marked by an extreme experience of the mood and pace of time, from the soaring insouciance of the manic to the worm-crawling dread of those depressed; the shocking deceleration of time, when anxiety strikes; the eerie absence of time for the schizophrenic." Tlierapists need to learn that they may not be able to *take* as much clock time for therapy as they once did, but that they can extend the *experience* of time within the limited temporal framework they are given.

Milton Erickson was a wizard at time transformation, magically lengthening the clock's 60 or 90 minutes into a luxuriously unhurried, unmeasured, apparently timeless stream. Using his gifts for trance induction, he began playing with the dimension of time from the instant you sat down with him—even before that, in the way he moved, using his body to set a different pace, like a metronome gradually slowing down. When you began to go into trance with him, he slowed down time even further by speaking in a slow, deep voice, saying things like, "Take ail the time you need." Suddenly, you realized that in 60 seconds you could open your own mind, experience mentally a completely different, transformed world.

We, too, can make the subjective expansion and appreciation of time one of our most valuable interventions, helping our clients leam to play with time, rather than be victimized by it, to resist internally the mad rush of society's clock time, while identifying and establishing their own inner, personal time flow. In my own practice over the past few years, I have developed various approaches, occasionally borrowing from standard methods of time management, but mostly helping clients make better use of their own internal, biorhythmic sense of time.

THE FIRST STEP OF THERAPY RE-volving around what might be called "time healing," whether with individuals, couples or families, is to establish a kind of mind-body rapport between myself and my clients, a $tate of synchronicity between us before any discussion about problems or presenting complaints takes place. To make therapy time truly count, we must take a little time at the beginning to disconnect from our respective dock times and get in synch—breathing together, moving together—so that we are in the physical and psychological state of relaxed concentration in which good therapy occurs.

This consciously meditative approach to the beginning of therapy not only establishes syndhronicity between therapist and client, it gives clients a chance to begin living, at least for the hour of therapy, in subjective, rather than objective time. And it is in subjective time, often in the tiniest microseconds of temporal time, in which emotional life is largely lived. Louise, *for* example, is a highly successful and good-looking 53-year-old executive. Her presenting problem is that at the moment whenShe feels the most intense love for her boyfriend, Roger (who clearly loves her, as well), she experiences an anxiety attack—her heart starts beating very fast, her breath quickens, she gets a queasy, sick feeling in her stomach and wants to flee.

When in therapy, we concentrate on these few seconds, we discover the logic in the tiny time gap between Louise's feelings, "I realty love Roger," and "I must flee." She remembers painful childhood interactions with her mother, her running into the house, aglow with love, only to be met by her mother's stem, rejecting, disapproving face. The logic that continues into Louise's future is, "If I feel loving and loveable, the beloved other will punish and reject me." So far, this is (psychodynamicalty) unexceptional.

But if we use that subjective time sense, concentrate and lengthen the gap between "I love" and "Therefore, I will be punished," we can help Louise leam to insert into her thinking a whole range of remembered experiences—siblings whom she loved and who loved her back, friends who reciprocated her affection, a beloved teacher who praised and encouraged her—that short-circuit, interrupt and ultimately cancel out the former logic. Drawing on other memories, Louise can actually leam to make her subjective sense of time stop at the moment when she experiences the feeling, •<! love." At that point, instead of automatically inserting her standard, "Therefore, I will be punished," she can instead train herself literally to pause for a few seconds and allow herself to be washed over with the emotionally gratifying experiences of being loved on these other occasions.

This is a learned skill for therapeuticalty manipulating an internal, subjective sense of time, whereby she stops time, creates an open space of time, and fills it with the kind of emotional material that renders the former logic *illogical.* The new logic might read something like, "I love, and I *have* been loved in return, so there is no reason to flee my feelings of love." It is the personal creation of a new time frame that allows Louise to make this literal leap of logic.

IF SYNCHRONICITY IS IMPORTANT in any session between client and therapist, it is critical to doing couples therapy—indeed, acquiring and maintaining synchronidty may be among the most important bonding skills couples need for forming a good, lasting relationship. Helping couples improve their skills at conflict resolution, communication patterns and sexual functioning, without addressing their time rhythms—if they each live in different biological and psychological time zones—is like trying to dance a waltz to a hard-rock beat.

This attention to time in couples' relationships has traditionally entailed a mechanical rearrangement of living

patterns so that each can literally take more time for the other. Couples are encouraged to rearrange work schedules, turn down promotions that would make them busier, renegotiate childcare responsibilities, get up an hour earlier, schedule "dates,** go away for weekends alone without the kids—a hundred-and-one standard therapeutic prescriptions for shoehoming a little more "quality** time into a time frame already bursting at the seams. We might suggest, for example, that Jim, a 33-year-old self-employed electrical consultant *"who* gets home an hour or so before his wife, Joyce, an insurance salesperson, might postpone unwinding in front of the tube with a beer until he has picked up the clothes he has strewn across the bedroom floor. For her part, after a high-pressured day at her firm, Joyce might *spend* a few minutes on the couch with Jim to give him a kiss and chat about their days before leaping into her jogging clothes so she can get on with her more aerobic form of unwinding. Through this rather clunky, but effective little assignment, both Jim and Joyce know that each did, indeed, pause a moment to think of the other when first entering the house after a hard day at work.

But if the inner experience of that "quality** time is as mechanical as the prescription itself, not much of value has been gained. If there is no change in the *inner* sense of the time taken for the kiss, for cleaning up the clothes, the kiss will be perfunctory, duty-bound, without any vital current of compassion or empathy. The therapists job is not simply to crank out these behavioral assignments, but to try the much more difficult and delicate work of creating a felt pause deep within the bodies and minds of the couple while they are engaging in the task itself—so that it is a living, timeless moment of human synchronicity. It is the therapist's job to explore those moments in depth, to find out what goes on within that relatively tiny, but cxperientially momentous, flicker of time.

HOW CAN A THERAPIST, IN THE limited time allowed by managed care, get to the center of this teeming emotional undercurrent, the subjective time frame that makes or breaks the external interventions? Consider Leslie and Michael, a typical *90s couple. Leslie, 37, is the project director for a multinational firm, a challenging, demanding job that often keeps her working late and requires frequent business trips, but provides a good salary and many attractive perks. Michael, her husband, the owner of a small, trendy restaurant, supports her career goals, even though she has more power and makes more money than he does (and is also subject to quite a lot more work-related stress). He likes their six-figure income, and he also takes a certain pride in having enough emotional security not to be threatened by his wife's relatively greater career prestige.

This couple looks as if they should be posing for a magazine spread about successful, politically correct families of the '90s. But Leslie comes into therapy. by herself at first, depressed and frightened. Both of her aged parents have recently become quite ill, and she has realized with shock and horror that one or both of them might soon die; death is on her mind, anyway—a beloved cousin has just died quite unexpectedly. Leslie says she feels "irrationally frightened" about her children; while all three are doing fine, she cannot shake the terrible sense of dread that something terrible might happen to them. She reports a nightmare in which she knows they are in great danger somewhere, but cannot remember their names or where she has left them. Finally, she and Michael are not getting along; their **sex** life is just about nil, and they fight a lot, mostly about "little stuff,** she reports— who is going to pick up the kids, whose turn it is to cook, when and whether they should **go** away for a weekend trip.

Leslie yearns to be a good mother. She remembers her own mother, an apparently satisfied, full-time, cookie-baking mom who always seemed to have time to talk with her daughter, teach her how to cook, and play with her. And even though, Leslie says bitterly, by now she should know better, she still has the same warm fantasy on the commute home, about how wonderful it will be to get home to her welcoming children and just be Mommy for the evening.

But even on nights when she can get home as early as 6:30, Leslie walks into an explosion: The housekeeper makes a run for it, the kids start quarreling for her attention, her fax machine sends urgent messages, her business phone line is usually ringing, the dinner **is** still sitting packaged and cold in the refrigerator and freezer. While she rushes around the kitchen, still in her high heels, punching microwave buttons, throwing plates and silverware at the table, a portable phone nestled in her shoulder, shc*s also worrying about the conference that didn't go so well that morning, wondering if she and the kids have clean clothes for tomorrow, and whether she has time to do a load of laundry before bed. Future, present and past are all congealed in one frantic, extended episode of fragmented time segments.

Leslie knows she is "too busy,** and that she has more tasks to perform than time slots in which to fit them, but this is only the mechanical part other problem. The real issue, which is slowly sapping the vitality from her own and her family's life, is the profoundly stressful and disruptive impact ofherbusyness on body and mind. Leslie feels a sense of emotional disconnection from what she is doing, from her own children; feeling the scratchy irritability and dim, unacknowledged undercurrent of inchoate, undirected rage, as she performs her daily tasks like a zombie.

She soon has a ready target for her rage, however. By 8:30 or 9 pJn., the children are fed, bathed and ready for bed, when Michael, having finished his own long day, walks in. Before he even doses the door, he catches Leslie's harassed and resentful look, feels a familiar stab of irritation, and begins a round of preemptive complaining himself: Leslie forgot the kids* pediatric appointment, so he had to leave work at 12:30—the busiest time of day

IF THERE IS NO CHANGE IN THE INNER SENSE OF THE TIME TAKEN FOR THE KISS, IT WILL BE PERFUNCTORY, WITHOUT ANY VITAL CURRENT OF COMPASSION OR EMPATHY.

in his restaurant—to take them for their checkups. He scolds his oldest child for again leaving her new bicycle outside on the sidewalk. He engages the younger two children in an impromptu game of hide-and-seek, getting them wildly excited when Leslie has just managed to calm them down. Meanwhile, Leslie's business phone rings again, and she answers it on the first ring, immediately getting involved in a long discussion of tax law. Michael grabs some bread and cheese and a beer from the refrigerator and storms upstairs, grumbling about the "irritable bitch" he has married.

Both Leslie and Michael acknowledge that they "don't have enough time," but they do not really understand how their approach to time is virtually shredding their physical and mental well-being, the psychological and biological substrata of their relationship. When asked what die problems are in their marriage, they blame each other—Leslie's sexual coldness, Michael's selfish needincss; Leslie's failure to consider his needs, Michael's sexism in expecting her to do so; Leslie's inability to discipline the children and so forth. They have devoted their lives to creating a family that, by and large, runs as well as a highly functional, very productive little factory. Every minute counts, and every minute is spent as efficiently as possible. And therein lies the problem: This family needs to become *nonfunctional* in some way, to make time for the inefficient use of time—for touching one another, for just being with one another, for connecting based on how it feels to be together.

Before we could address marital problems, both Leslie and I felt that she needed to rethink her time priorities. She liked the intellectual challenges of her work, not to mention the perks and the income, but not enough to ruin her life. With Michael's begrudging approval, she quit her job and took another, for less money, that allowed her to take three afternoons off a week, did not require much travel, and wouldn't require her to have an office in her home. She got rid of the home fax, the special business line and the E-mail terminal. Because the experience of time is so deeply physical—felt quite literally in our heartbeat, breathing patterns, blood flow and hormone levels—1 encouraged Leslie to begin a program of meditation and physical exercise, both to reduce stress and to make her more conscious of what I call her "animal self." Walking or bicycling in the park, enjoying the outdoors, as well as sitting quietly alone in meditation,

taught Leslie how to breathe again, how to collect herself, bring her mind into better synchrony with her body, reconnect to the natural cycles of the day, the seasons of the year, as opposed to the fragmented segments of clock time. This may not sound like marital and family therapy, but the fact is that Leslie cannot make time for Michael or her children until she can learn to take time for herself, which means to treat herself, not her job, as the true measure of how she should spend her time.

Once Leslie felt stronger, less fragmented, more centered personally in her own rhythm, it was time to bring Michael and Leslie together for marital therapy aimed at creating a sense of truly being together. The marriage, to put it simply, could not work well until both spouses were dancing to the same beat The failure of synchronous timing between Leslie and Michael—geared to

INSTEAD OF THE GRANDEUR OF THE SEASONS, OUR TOW IS DEVOURED BY AN ARMY OF ANT-LIKE INTERRUPTIONS SWARMING OVER THE MINUTES OF OUR LIVES.

natural, biological and personal rhythms, not the mechanical beat of public commercial time—is at the core of their marital struggle.

The assignments for Leslie and Michael were not, on the surface, very radical—they were to schedule "micro-vacations" of a couple of hours, or half a day in the middle of the **week** to take a walk in the park together, enjoy the sound of birds and the sight of old trees on a rolling greensward, or have lunch downtown;
they both consciously attempted to slow down when they came home at night instead of immediately firing off a volley of complaints about what the kids and Leslie have failed to do, or not done right, I suggested that Michael begin by breathing slowly and consciously before he gets home, then open the door, pause, take the time to fully greet and kiss each child separately, let each one tell him something about the day. Then he should take some time to greet Leslie, ignore momentarily the status of his dinner, really allow himself to concentrate on her, on experiencing the little interlude of their coming together for the first time all day.

To increase their synchronicity, I suggested he let her talk, while he really listened, but that she should consciously slow down and breathe while she spoke, to get into a more natural rhythm (and include other subjects in her own conversational repertoire besides business).

Like many time-stressed people, Leslie and Michael had become so physically and psychologically habituated, if not addicted, 10 the rush of their time, that they had to learn to *tolerate* slowness before they could enjoy it. The assignments were active forms of meditation, reminding them to approach their relationship, even the most pedestrian daily moments, with mindfulness, savoring each second. When both partners get into die habit of being mindful together with each other, they will also develop defenses against the invasive influence of social time upon their private and emotional lives. They will literally learn to be human beings, living in human time.

IN THE MIDDLE AGES, THE NATURAL. rural rhythms of countryside and manor, set by sunrise and sunset, planting and harvesting, winter and summer, were broken onty by the great church bells tolling the canonical hours—the times during the day set aside for devotions. The measurement of time was bound to the physical necessities of nature on the one hand, the church's spiritual demands on the other. And while the exigencies of both nature and church could be relentless in their demands for human obedience, neither seems anywhere near as ruthless as the clockwork technology that tyrannizes us today. The idealistic belief that high-tech inventions, from fax to

microwave, speeding every daily activity, might actually allow us more time now appears laughably naive. Instead of the grandeur of the bells and the seasons majestically tolling our days, our time is devoured erratically by an army of ant-like interruptions swarming over the minutes and hours of our lives.

We can, if we will, take back some of the personal time that has been robbed from us by the impersonal forces of our society. In my house, for example, taking a cue from my practice, we each began to try, in our own ways, to slow down our internal pace. My husband, a cardi-ologist and emergency-room doctor, for whom the ability to work fast is a professional and often life-saving neces-

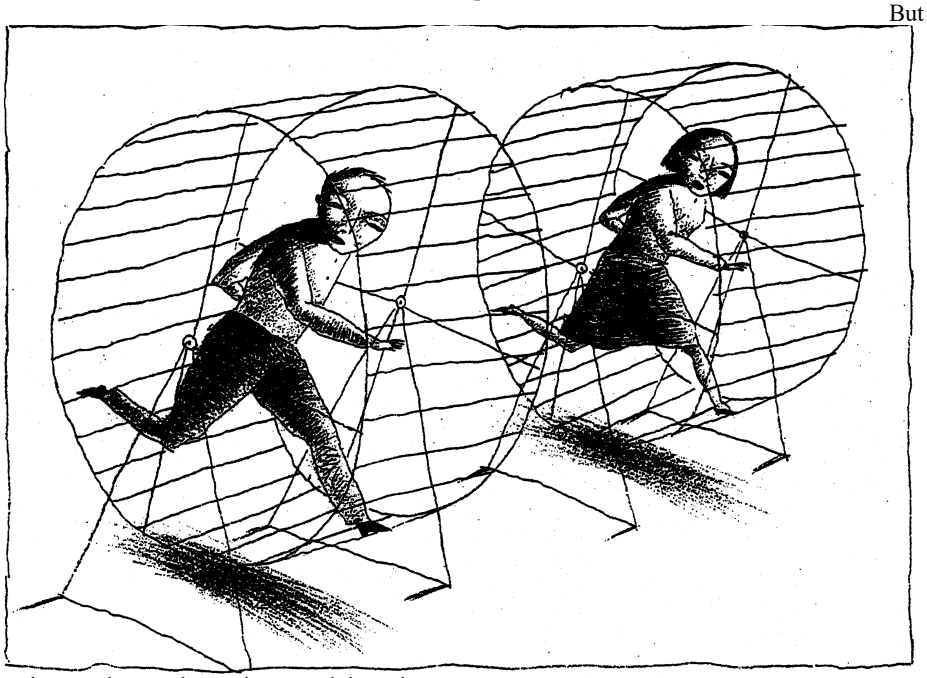
become interested in the concept of subjective time, and consciously gives himself totally to each activity, "taking his time," so to speak, to utterly immerse himself in whatever he does.

And I spend more time running and walking through a lovely park near our home, learning from myself how the rhythms of my body fit the changing seasons, the different moods of the woods at different times of day. I find a sense of inner discipline in the meditative experience of truly *being* in this place, and feel a spiritual connection with the earth, a paradoxical "grounding" in the awareness of my own animal nature.

This singular process within each separate one of us has been the sercn-

time. When I get wound up in the frenzy of trying to be the perfect therapist, perfect mom and perfect liousekeeper, I can count on one of my kids giving me "The Look," which reminds me to stop, breathe, slow down. Uke members of a chorus who each practice their parts separately before singing as a group, we have learned from our private disciplines to create a better ensemble, to "sing" together in richer, more vivid harmony.

As we haven't yet moved into a mountain cabin without phones or electricity, the process of creating time in our time-murdering world is still a struggle—and making time takes time; it can't be done in an instant. You could say we are on the slow road to enlightenment. But it



sity, took up drumming, studying the hypnotic rhythms of master drummers. My 16-year-old daughter, Miranda, has shed some of her frantic social life in favor of meditation and the study of modem dance, which together allow her to reconnect with **her** inherent gracefulness and sense of timing. She is also consciously trying to savor her studies, approaching books and reading assignments as if they are a kind of feast for the mind that she now has the time to fully enjoy.

My 14-year-old son still moves pretty fast, flashing like lightning from one mental set to another—from reading to writing a short story to practicing the violin to shooting hoops. But he, too, has

dipitous catalyst for synchronicity between us all, as well. It is well known that one calm person can have a soothing influence even in a beehive of human hyperactivity. As each member of our family becomes more quietly receptive to his or her own internal biorhythms, we all become more sensitive to those of one another. And as we become more attuned to one another, and more attached to dancing in time together, we are less tolerant when one breaks the rhythm. When my husband bursts into the house after a typically crisis-ridden day, unaware of how much tension he carries with him, we all stop and give him "The Look" until he, in effect, says, "Oh," and begins to calm down, get into synch with family

has its rewards. Now, for example, while we don't all sit down every night at precisely 7p.m. to a table of starched linen and sparkling silver, we actually try (and often succeed!) to make some time for an evening meal, which we all eat together in some tranquility and pleasure. At the very least, while we're all moving around the kitchen and dining room in the loose choreography of getting dinner ready, we can still share a good, synchronous laugh about the time Mom went crazy and trashed the microwave. •

Micbele Sitternum, PhJD., is in private practice. Her new book. **Taking the Vertical Plunge in Couples Therapy,** ***will be published by Brunner Mazel. Address: 3908 Lakeshore Ave., Oakland, CA 94610.***