

Episode 35: Perfectly Hidden Depression, A Conversation with Dr. Margaret Rutherford

Liz Higgins (00:02):

Hey, y'all! Liz Higgins here, and welcome to the Millennial Life Podcast, where my main goal is to share conversations that will inspire you and drive you toward the life and relationship you desire. I'm here to share what I've learned as a licensed therapist and relationship coach specializing in millennial relationships and wellness, as well as transformative conversations with other professionals. Thanks for listening and enjoy today's episode!

Liz Higgins (00:33):

Hello everybody! Welcome back to the Millennial Life Podcast. I am incredibly excited to have a conversation with today's guest. Dr. Margaret Rutherford has been a psychologist in private practice for over 25 years, and is the author of "Perfectly Hidden Depression: How to Break Free From Perfectionism That Masks Your Depression", which came out in November 2019. And if you haven't heard of this book, no worries! We're going to post links to all of Dr. Margaret's, uh, books, and you know, where you can reach her, and all that fun stuff in the Show Notes. But... I highly recommend this book for you all because, from one driven millennial entrepreneur, visionary person to another, I know that perfectionism, people pleasing, going into overdrive, and managing all the things can impact you and can really lead to issues later on in an inability to really have deep, authentic intimacy.

Liz Higgins (01:37):

So, Dr. Margaret, welcome to the podcast!

Dr. Margaret Rutherford (01:41):

Thank you so much, Liz. I appreciate it. You know, uh, we were talking before... My son will turn 27 here in a couple of months and he and I have had so many conversations about this and, and you know... One of the things that, that I'm, I'm so aware of in y'all's generation is that the world is, I mean, the world has gotten so much smaller. And, and, and, and bigger, but smaller in the way that you, you know everything about, so much about what other people are doing. That it's so much harder to have faith that what you're doing is the right thing or the important thing, or the vital thing, you know, for you, because you've got so much to compare to. I think it's really tough on y'all.

Liz Higgins (02:28):

SO true! I mean, that hits home so hard. It's like the information overload out there from parenting to relationships, to how we impact the world in a better way, to environmental issues... It's like, you just, you feel so called to leave a legacy, to be a part of something great. But it is overwhelming.

Dr. Margaret Rutherford (02:49):

Yeah, I think so. So, um, so, you know, I'm glad to be here and let's dive into this!

Liz Higgins (02:56):

I have to say one of the things that I just really appreciate too, that I wasn't expecting is in your book, you shout out to the millennials! I like that you did that.

Liz Higgins (03:05):

I so appreciate that. 'Cause you know, I think our generation has gotten a bad rap, um, in a lot of ways. And so, to see you kind of shining light in your book about just, uh, the opportunity and how you see our generation really trying to take strides to change things positively with mental health and relationships. It was very cool to see that.

Dr. Margaret Rutherford (03:25):

Well, and, but that's exactly what I've seen. And when I was doing the research for the book, I was so struck by, um, the, the concern that a lot of the university students are having for one another realizing that suicide rates are going up exponentially (in y'all's age group as well). And so, you know, it's like, we've got to do something. We can't just keep on promoting the myth that, you know, the smarter you are, the more driven you are, then the happier you are - because that's a myth. And I'm delighted to hear there's a thing called, um, uh, Stanford Duck Syndrome, which I love. And of course it was devised by somebody from Stanford. And they said, you know, when you think about a duck, the duck is gliding across the pond (or the swan, or whatever.) And you know, you don't see the little feet paddling furiously underneath. All you see is the glide. And I think that's what so many people try to look like. They try to look like they're gliding along where the effort to maintain, or just even keep afloat, is tremendous.

Liz Higgins (04:35):

Absolutely. Yes. I can see that image for myself, at times, and clients that I've worked with. It's like, it's crazy. It's craziness sometimes. So, your book really was intriguing. In that, in that you came to this conversation about depression (and what you call "perfectly hidden depression") from a different angle. And it was really transformational to read that. And I just want to start by hearing you kind of define for listeners what that is, you know, as opposed to like the 'regular, clinical' depression that we, we see.

Dr. Margaret Rutherford (05:09):

Sure. What I call 'classic depression' in the book, right. Let me say this first and foremost - I've never really wanted to write a book. I was fine just, just being a therapist and, and - because I love my work! And, um, it's been very, very meaningful to me, but I wrote a post, a blog post (now back in 20... Gosh, 2014. That's right.) And I was thinking about some of the people that I saw and how, how they struggled to connect with, to express their more painful emotions. They could talk about

them. They could say, 'Oh yes, I'm sad.' But to actually connect with, especially in front of me or... And they would tell me, 'Oh, I never cry' or whatever. So I was thinking about all these people and thinking about what, how they were like one another. And so I wrote this post called "A Perfectly Hidden Depressed Person. Are You One?"

Dr. Margaret Rutherford (06:12):

I just kind of grabbed that out of the air, and it went viral. I never had a post go viral before! And I was writing for The HuffPost at the time, and they put it on The HuffPost. And I got, literally, hundreds of emails the next day and 24 hours saying, 'This is me. It's like you're walking around in my head. You know, how, tell me more about this.' So I went looking to see what was out there in the popular literature about perfectionism and depression or this, this inability to connect with pain or to let anybody else see it actually. And of course I found Dr. Brene Brown's work, which was eloquent. I must have been living under a rock to not know about Brene Brown, but, um, I... But I couldn't find... I could find scholarly articles, academia articles on perfectionism and depression, but I couldn't find anything other than workbooks on perfectionism that really just stressed how to get out of it. How you stop being a perfectionist, which is fine.

Dr. Margaret Rutherford (07:18):

And they've done very, one of them was very popular. Um, but I wanted the why. Because I feel like as a therapist, if you don't figure out the why, that really... You may change for a while, but you're going to go, you're going to drift back. Because you don't understand the roots of the problem. So that became something that I have dedicated the last seven years to actually. And I, I'm, I'm still learning. I'm still... I heard about a woman named Susan David just two weeks ago, who has done some wonderful research on, on toxic positivity and it's um, so anyway, I'm getting ahead of myself. So I asked for people... I started, I just started writing about this. I started writing more blog posts about, well, what is this? And at the bottom of the blog posts, I would ask for people to, uh, volunteer to interview with me.

Dr. Margaret Rutherford (08:21):

Um, and sure enough, I got probably about 80 responses in a couple of months. And I called some of those out, because they weren't appropriate. And I did over 60 interviews: a brain surgeon, uh, a motivational speaker, interestingly enough, an ad exec, a graduate student. And all of them had this same kind of story to tell me, that as children, that they had adapted to the kinds of families that they grew up in. And a lot of that adaptation was about beginning to hide the way they really felt about things. To become someone who, uh, either was over - tremendously, overly responsible, who was silent about what was going on with them, who was abused or neglected, and they learned to just keep their needs to themselves. There were lots of paths to get there. Oh, also some of them were the star of their family.

Dr. Margaret Rutherford (09:24):

They were the, the kid that always, you know, never had any problems. Oh, their parents would say something to them like, 'You know, we never have to worry about you.' Well, guess what that engenders - that creates a sense of, so I must never create a problem. Right? So, um, there were lots of ways to get to this adaptation, but, uh, being, uh, frankly being of another ethnicity, um, here in the United States. Being Asian or African-American or Hispanic, um, I think can also, um, that those cultures sometimes do not promote, um, true self-expression of, of who you really are.

Or maybe it would even been dangerous to have done so. So, um, I think that the concept is, let me share, I don't think I'm, I'm narcissistic enough to think that I've come up with another whole diagnosis on my own, in the whole profession of psychology.

Dr. Margaret Rutherford (10:24):

But I do think the syndrome is important for mental health professionals to understand. Because we are missing these people. Uh, the rates of perfectionism and suicide are correlated and they are going up. Um, tragically... About this time last year, I met two women from Florida. They were wonderful. Now they're friends. Um, but sadly, they had reached out to me because one of their friends had killed herself. She had the perfect looking life, uh, three kids, great husband, good career, you know, very successful, very engaged in the community. Uh, but she had hung herself. So she was serious about this. And her husband found my book on her night table.

Liz Higgins (11:15):

Wow.

Dr. Margaret Rutherford (11:17):

Yeah... I cried when I heard that. Um, because there are way too many people who feel... Who are looking for answers, but don't know where to look. And we, mental health professionals (and just friends and partners and you know, who, whoever you are) we need to recognize this pressure, um, that a lot of people are living under as very, very dangerous.

Liz Higgins (11:43):

And it's... Something that's really resonating is how subtle this can... Subtly, I guess this can, where as therapists, you know, we meet a client and we hear their story unraveling. It's like, okay. You start to see where maybe some of that syndrome developed in childhood, or how they learned to put their needs aside to take care of others, or become a little adult real fast or whatever. But for that particular individual, it's like, that's, it's their normal. And so people don't maybe catch the fact that how they've been living, how they are experiencing relationships and intimacy, or their life is not super clear for them.

Dr. Margaret Rutherford (12:24):

Right on target. Um, you know, in fact there was a psychiatrist who wrote, gosh, where was it? Guardian, "The Guardian", back last March. Um, she's from Scotland. And she wrote an article about how, uh, when psychiatrists are, you know, when they see somebody walk in the room and the person has a bright smile on their face, they go "not depressed", you know? Just automatically, not, not depressed. Um, I tell a story in the book on... The very, very first story is a woman that I had diagnosed with anxiety. Um, and she, well, long story short, she tried to kill herself. Um, and I just felt like, wait a minute. What, what, what, what did I miss? You know? This was years ago. And, um, I wish then that I had had this thought, (and maybe I could talk about this) but I do think that something else that is underlying it and that's very important is that this kind of perfectionism is really fueled by curiosity and generosity and, um, you know... You just want to your life to be full and, and, and you've worked very hard to make that happen. You're enjoying the process of what you're doing, right?

Liz Higgins (14:03):

I'm, I'm so glad you're differentiating that! Because I wonder if people listening are even wondering, like, is there a good version, a healthy version of perfectionism versus what, you know, can kind of lead to that path of hidden depression?

Dr. Margaret Rutherford (14:17):

There is a debate about this by, uh, in the research world that I've read about. There's some people who don't think there's any kind of perfectionism that's really helpful because it can involve some kind of pressure, but that's not my particular thought. 'Cause I certainly, um... When you, when your perfectionism, when you can... When you know it's there and, and you're working on something and you get frustrated, if you can kind of laugh at yourself and go, 'That's my perfectionism, now just calm down', you know? Once you have that kind of perspective on it, I think you can manage it. And that makes it more constructive. Um, but when it is fueled by these voices of inner criticism - The Musts, The Shoulds, The Have To's - you better, you know, you must not let anybody see that you're struggling. Um, that is when it's really a problem because there's no true sense of fulfillment. The only thing that you got your eye on is the accomplishment.

Liz Higgins (15:18):

Right? Right. And so you really... Somebody that's more on that wavelength of it will really be selfcritical. And I'm curious to hear... So there's a lot of that inner critic, self-critical narrative going on. But these people are typically pretty generous and giving and accommodating for others. Right? And that's what makes it maybe even hard for loved ones or friends or people on the outside to even know that they're grappling with something like this.

Dr. Margaret Rutherford (15:53):

You're exactly right. I mean, no one is walking up to these people and saying, 'Are you sure you're okay? You don't seem like yourself.' Um, so now they may be saying things to them, like 'You know what, if you think you want to take a break, you've been working pretty hard' or I, you know, maybe a spouse might say, or someone who's living with the person might say, 'You know, I don't think you're sleeping very well.' Uh, they, they might have some concerns about the busy-ness of this person's life and they never seem to not have something to do. They're not very good relaxers, but, um, that's the kind of a concern. And, you know, people have said, well, how will... How's a mental health professional or a medical doctor supposed to understand that something exists that this person isn't willing or able to talk about?

Dr. Margaret Rutherford (16:46):

And my answer to that is, it's kind of like in the cardiovascular world, um, before they knew what women's heart attack symptoms were, or what, what might have, you know, what showed the presence of heart problems in women was different than men. Then, they were assessed using the male criteria. And often the women got told, 'No, you're fine. You don't have a heart problem.' And then they'd have a heart attack. So the cardio, uh, cardiologist changed their rubric when they understood that there was something else they needed to look for. And that's what I am trying to spread the word about. I'm not the only one I'm sure, but I'm trying to spread the word for the idea that mental health professionals, medical people, friends, partners, spouses, parents, need to understand that, um... That if your loved one, or if you, don't ever reveal anything that you're

struggling with or your vulnerability. Or you didn't, then there's, there's a problem. And if you're hearing these inner critics, then that's a huge problem and it can get the better of you.

Liz Higgins (18:06):

Yeah. Yeah. I'm wondering, do you see a prevalence with perfectly hidden depression in males versus female experience? And what are the differences?

Dr. Margaret Rutherford (18:20):

You know, I've been asked that question several times. And I'm not a researcher, I'm a clinician. So, um... But in the perfection literature, I have not seen, um, research talk about a greater number of women or a greater number of men. I mean, obviously women come into therapy much more often. We are typically people who, um, or, you know, that might be more available or more ready to talk about those kinds of things. But, I think that there are a lot of women who... Like the woman that I had talked to you about (her name was Patricia) who killed herself. Um, all suicides are up. Both male and female suicides are up. So, um, interestingly enough, they did not go up in 2020, which -

Liz Higgins (19:15):

That is interesting!

Dr. Margaret Rutherford (19:17):

Yeah. It's, it's, uh, it's, uh, I, at first didn't really believe it when I first heard it. But that, yeah, the, it didn't, it didn't go up significantly. So, um, I, you know, I, I don't, I don't know if there would be more... but my personal, um. The people that have come in to see me, have been about half women and half men who have heard that I'm doing this work. Um, so, yeah.

Liz Higgins (19:45):

Yeah, I'm kind of wondering a little bit about how for somebody listening, who's starting to have this experience of, 'Okay, what you're talking about might be me' - what, but this is like a new concept! I mean, what would be some ways for a person to check in and self-analyze of, you know, 'Is this me? Do I have this perfectly hidden depression thing going on?'

Dr. Margaret Rutherford (20:09):

Sure. Well, um, you can go to my website, drmargaretrutherford.com. And you'll find there a whole lot of blog posts about perfectly hidden depression. And one of them is a questionnaire that has not been empirically validated, but... (Um, in fact, I may actually change it up a little bit the next time.) I, uh, I'm working on a second workbook, but, um... Basically, I came up with some yes or no answers for people who, again, not... These aren't, these are, this is what a pained person would look like. For example, one of the questions is, um, you know, do you keep a schedule? Or, or, or let's see... One of the questions is do you, uh, even after you accomplish something and you did it very well, do you enjoy the success of it? Or do you enjoy, you know, and "yes" or "no". And so things like that that you could tell in your life, if you were... Uh, one of the questions is if you were abused as a child in any way. If you were you able to tell your family. And if you did tell them, were you not believed or where you scorned?

Dr. Margaret Rutherford (21:24):

So, you know, I began to try to assess what was going on with these people. And it's, it is a way you, you get a quantitative score. And so you can kind of see where you are on the spectrum of perfectionism (as far as my own evaluation is concerned.) And then there are 10 traits, um, that I was able to pull together (again, from all those interviews, basically; really, and my memory of my own patients) um, that I think can be helpful. Things like, again, the perfectionism with a critical voice. Uh, uber-responsible to the point of you, you feel guilty if you're not the person doing it. You worry and you have a lot of need for control. You would like to stay in your head. You're very overly analytical. You discount trauma. In fact, if I use the word trauma with some of these people they go, "What are you talking about? I don't have trauma in my life."

Dr. Margaret Rutherford (22:20):

Um, and you know, you, it's very hard for you, you're a really good friend to other people, but you don't let people know you very well. Uh, you often say, you know, I need to focus on my blessings and gratitude... And you don't understand that even blessings have underbellies. You're very successful at work, uh, unless you procrastinate, which was pointed out to me. Which is not something I talked about in the book. But several people have said to me, 'I fit every criteria, except I'm not successful because I procrastinate too much.' So those are interesting topics that I'm gonna cover next time. But it's all the, all the kinds of things. Now I do want to say that you can identify with perfectly hidden depression and have a true other diagnostic kind of, uh, disorder. You can have panic disorder, you can have OCD. You, you actually may likely have an eating disorder, whether you admit it or not, because eating disorders are all about control. Um, you can have bipolar. I mean, it doesn't mean that you're not, you wouldn't necessarily be classified as having a true mental illness.

Liz Higgins (23:34):

Yeah. I, I'm wondering too, with people that do resonate with those, like "criteria" of the PhD - do you find that an internal experience they have relationally is resentment? Because I think that, you know, perfectionists, people pleasers, they can be in such overdrive and doing so much (relationally speaking, too) that, they're I, I, I dunno. I just wonder if there's a connection to kind of reaching that boiling point where it's like, 'What about me? Does anybody see me?'

Dr. Margaret Rutherford (24:12):

Oh... Yeah. Of all those people, um, that interviewed, um, I asked them this question. I said, "Why would you reach out to me?" Now these people, you know, they were, they're out in their garages whispering, they were locked up in their offices. I mean, these are not people who had talked about it. About a third, maybe, had been in therapy. And some of them had been in therapy unsuccessfully because the therapist didn't get it. But they said to me, 'The reason why I reached out to you is because I don't want anyone to live the life I've lived. I am so incredibly lonely. So lonely.' And you know, that just was a heartbreaker for me, kind of a soul-wrencher actually. And then about the resentment, I think that's really tied into this worry and need for control. And so you're worried about something or it's on your radar.

Dr. Margaret Rutherford (25:11):

You take control of it because you think, you know, if it's going to be done, I'm going to do it because I know I'm going to do it well. And I don't, you know, blah, blah. And then this resentment

comes, because people are letting you do it and they get accustomed to you overfunctioning... So it's like "here you take it." Um, and then you get really resentful and then guess what you do? You start worrying or shaming yourself for that resentment. And, you know, it's just a snowball. And that leads to more worry and more resentment. And, um, yeah, it, that can be a big problem, which of course, you've got to hide, so you can't actually talk about it.

Liz Higgins (25:52):

Right. Right. Which, which really stands out to that piece of 'perfectly hidden'. Like you, you become an expert at concealing the whole process, and not letting anybody see the pain and the suffering that you've got going on. Because what, what would happen if...? Yeah.

Dr. Margaret Rutherford (26:11):

You bring up an excellent point and that is, this is a little different from what's called "high functioning" or "smiling depression". This was a distinction that I struggled with in the book. I don't, I don't do it very well. I finally figured out kind of how to talk about it. Um, high functioning depression, uh, again, in my, in my thinking, uh, those are folks that have that, that are, that are aware they're depressed. They may have even been treated for classic depression. Um, they fit criteria for classic depression, meaning that they have depressed mood and they know they do, or their family knows they do. They don't do stuff that they really, you know, get pleasure out of anymore, but they get up and they put a smile on their face and they go to work and they take their meds and they go to therapy and they exercise and they're managing their mental illness.

Dr. Margaret Rutherford (27:07):

And they, you know, it's called "smiling" or "high functioning" depression. And those folks can feel pretty lonely too, because they can feel like, 'everybody believes this persona I've got out there. And, and yet, you know, I'm really depressed.' Only the closest people to them know that they're actually depressed. These people that I'm really trying to reach are, well, let me say the high functioning depression folks might actually benefit from reading the book. It's not that they're not there. They are there, right? The group that I'm actually even more concerned about are the people that would deny that they're depressed. Um, you know, a young woman comes to mind that I saw, gosh, now maybe four or five years ago. And she told me at the end of treatment that she had a plan to die by suicide when she walked in my door. But I promise you, she came in, she was smiling and happy.

Dr. Margaret Rutherford (28:10):

And she said, 'I, uh, I'd seen you on Periscope.' Remember Periscope? I don't even know if it's still going on, but I tried out Periscope for a little bit. And she said, 'You were talking about this thing called perfectly hidden depression.' And she was smiling like she was in a beauty pageant. And, and she said, 'I have it. I know what it is. I know exactly what you're talking about.' And then she looked at me, Liz, and she said, 'But I can't talk about it. I'm gonna, I'm gonna have to do this very slowly.' She said, 'But I have to, because I'm not, I'm not doing well.' And I looked at her and I said, 'It's okay. You, you're in control - not me - of how fast we go.' And sure enough, she... She was engaged to the perfect looking guy (who was actually abusive to her.) Um, she had a severe eating disorder. Um, she had significant depression based on, uh, gosh, I mean her family history. Uh, she didn't see her father after she was four years old because he had hit her in the face so hard that it required multiple surgeries. So anyway. This woman had a lot of things to unravel and

she did some great work. And I talked with her, maybe last year at some point, and she said, um, you know, that therapy had saved her life - literally.

Liz Higgins (29:49):

Wow. Wow. What an incredible reflection to hear you make just on how these people come to you, and their therapy experience. And if, you know, if you just went based on what you were seeing, you would have no idea, no idea.

Dr. Margaret Rutherford (30:07):

I probably would have died. Well, it was obvious to me she had an eating disorder, but so, and I might've, might've stayed there. Because she talked very lightheartedly about what had happened to her. Um, and so you have to be very careful that you're listening for this, again, this... You're listening for this knowledge that you now have that if someone's life does look too perfect, it probably... There's something there you gotta know.

Liz Higgins (30:42):

You know, we're in such an interesting world, this moment in time... And just how much access we have, even through social media of seeing other people's quote unquote, perfect lives on their Instagrams or whatever, we just create these stories in our head about that. And that just feed that negative comparison cycle and that make us feel such a scarcity about our own self, or life, or whatever. And it's just hearing you say that, it's like, give, give yourself permission to the truth, which is that that is not the whole story. There's more!

Dr. Margaret Rutherford (31:19):

You know what, a patient of mine said, she said, you know, nobody takes a picture of their two year old pooping in the shower. Right? Nobody puts that on Instagram. So,

Dr. Margaret Rutherford (31:32):

Um, you're right. Yes. And you know, there are all kinds of theories about how social media has influenced that - mostly negatively. And you know, I remember reading something, gosh, now several years ago, about this person saying, you know, we now know, we don't just know about the celebrities or famous people or people we look up to in a general way. We know what kind of deodorant they use. We know the kind of restaurants they go to. We know the food they eat. We know, you know... And so all this information about, well, if I want to be like that person, or if I want to be as successful as that person, then that's what I should be doing. And that's a lot of pressure.

Liz Higgins (32:13):

A lot of pressure. So tell us, tell us, how do we work through, how do we work through this? How do we work through HPD, um, PHD. PHD. What is that whole process?

Dr. Margaret Rutherford (32:28):

Yeah. Uh, um, I'll tell you a funny story. So I had proposed to my publisher (and to everybody else that would listen) um, this book. But in the book, it was only description as the way I was thinking about it. And this publisher said, 'Well, that's nice, but we're not going to publish the book unless you give us a treatment strategy. And you have two weeks.' No pressure. Okay. So the little

perfectionist came out in me and I said, 'Well, okay, two weeks.' So really what I did was I thought about the stages... And they're not, they're very interactive, but the stages that almost everybody I see, um, goes through. And I put them in a form that they liked, which was The Five C's of Healing. You know, that's kind of a marketing thing, which I really hated. But anyway, I knew I had to do it.

Dr. Margaret Rutherford (33:26):

Um, and so I started out with just, um, Consciousness. You have to be conscious that your perfectionism is a problem, that it is... If it started out constructively, it has not ended constructively. And, and how that actually that consciousness, that mindfulness is necessary for you to begin to look at yourself, um, in perspective. The second stage is Commitment. And this is particularly difficult for people who... They know they're miserable, or they know they're lonely, but it's kind of working for them. And in many ways there are a lot of benefits to their life, the way it is (or seeming benefits, you know, seeming benefits.) Um, and so to commit to changing that... I mean, it reminded me of a talk I heard by Harriet Lerner on eating disorders years and years and years ago. And she said when you try to work with an anorexic who wants to give up her control, the control has been her best friend.

Dr. Margaret Rutherford (34:34):

She's always been able to count on that. These perfectionists are the same way. Um, you're asking them to give up the thing that they have counted on to be there for them. And to... It's steady, it's there, it's consistent, it's reliable. They can always count on it. And so that's what you're asking them to really try to change. And it takes a - and of course, one of the funny things they will also do, is they will tend to start with the hardest thing. I had somebody who was reading my book and she said, 'Oh, I had to put it down.' And I said, 'Oh, why?' And she said, 'Well, I didn't really get the first exercises. So I just jumped to the trauma part of it.' And I went, 'Uh, okay. So that's the hardest part, the trauma timeline. And, you know, that's a problem.'

Dr. Margaret Rutherford (35:25):

So you have to slow these people up. So consciousness, commitment. The third is a very cognitive behavioral kind of thing of what rules are you following? It's called Confrontation, where you look at the rules in your life and are they really working for you or are they not working for you? Are you still following some rule that really, you began again, to sort of hide or to, to fit in or to do what you were supposed to do? Then you're following these rules. So there's a, there's a model for that. The fourth stage is (it does involve the trauma timeline), it's called Connection. It's learning how to express emotion. A guy comes to mind that I saw that, um, really looked at me straight in the eye, very successful guy, very nice guy, and said, 'But why would I want to express my feelings?'

Dr. Margaret Rutherford (36:24):

And I said, 'Well, let's look at that. You have a very successful career, but you've had three affairs. You've been suicidal. Do you think that's working for you not talking about your feelings?' Well, no. And I said, 'You know, if you don't express those feelings, if you don't recognize them, then they're going to affect you in ways that you don't understand, that you cannot see.' So connecting with your emotions is a way of, of getting what you're facing out in front of you, instead of it being influential and blinding you to certain things. You're going to work with it. Right? Then the last stage is actual Change. And I, I make some, you know, try this, try this, try this, try this. Um, because... I don't know about you, but I learned through the years that insight is wonderful. It helps you connect the dots a lot, but really where you get hope is from your behavior change, from changing the way you feel, changing your beliefs, changing your behavior. And THAT gives you hope. And so I wanted to end the book on a really hopeful note.

Liz Higgins (37:32):

I think that's amazing. And, you know, I was just thinking back to the, the gentleman, you mentioned just a couple of minutes ago, who was like, why would I look at my feelings? Or why would we talk about that? And do you think like for him and maybe many, many others, what I want to ask? Like what, what is that, is that like, uh, just that disconnect of never having really been that way, therefore not seeing the connection between, you know, lack of emotional understanding or expression and XYZ behaviors? Or, 'cause I hear that too, you know? And I don't want to just say it's only from men because it's not. But I think guys do get a bit of a reputation, um, from women sometimes too, that they're emotionless. That they don't do feelings.

Dr. Margaret Rutherford (38:22):

Sometimes they get scorned when they do, you know? 'Oh, you're not acting like a man,' you know? Exactly. So, well, let me, let me tell you another story about this guy. So he'd been suicidal literally. I mean, dramatically suicidal. His whole marriage almost fell apart. Um, but it didn't. And he told me he'd gone home in October and he had his whole family over for Thanksgiving or Christmas or something. And as his dad - no one was saying word about what had happened - and as his dad was leaving, his dad reached out and put his hand on my patient's shoulder and said 'That hospital thing... It's okay now, right?'

Dr. Margaret Rutherford (39:08):

That was the extent of the conversation. And he grew up in that kind of home. He was Mr. High School. He did things he didn't want to do. And he was incredibly successful at it because his parents wanted him to. And he had this drive to, I mean, he, he did everything. I mean, literally everything. And he had chosen the career he'd chosen because someone told... Someone, another adult, told him they thought he would be good at it. He had, he had spent his whole life trying to get approval and, and morphing himself into who others needed him to be. And in our work together, he actually changed careers because he didn't... He, he, he loved being around people, but he worked in a profession that was, he was very isolated. And so he changed his whole life around. It was really amazing to watch him work.

Liz Higgins (40:11):

That is amazing. I mean, it sounds like a journey from a bit of self-abandonment to really finding himself, reconnecting with self. And that's, that's amazing. I have, I have two more questions that I want to pose to you on this conversation and they might seem kind of contrasting, but one is grief and the other is about gratitude. And you talk about both in the book. And can you say a little bit about like... Because you had quite a bit in there about grief, what does grief have to do with perfectly hidden depression and this work of, you know, finding your way out of it?

Dr. Margaret Rutherford (40:52):

Really good question! Um, I don't think people who really identify strongly with this syndrome have ever allowed themselves to grieve. Um, because when you're grieving, you're very vulnerable. And they may - again - have said, 'Oh yeah, we're really sorry that cousin Jeff died,' or, you know, whatever. But they don't know how to connect with it. And, um, they don't have that kind of compassion for themselves that would allow them to see that something, they've lost something. And that and that they need to grieve that loss. That's not a permission they can give themselves because of a lack of self-compassion. And so I do talk about grief a lot because I... Often, when I'm working with someone like this, they kind of look at me like, 'What are you talking about, grief? You know, sometimes I get a little sad, but you know, um, you gotta take what life gives you and make lemonade out of lemons,' and blah, blah, blah, which is true.

Dr. Margaret Rutherford (42:10):

I mean, living in the positive side of the glass, or, you know, in the half full side of the glass is where you want to go. And you want to stay positive. But to be able to connect with, you know, the glass is half full and half empty by definition, you want to be able to connect with grief, and sadness, fear, and confusion, and disappointment, and anger. So that's the connection there. Um, gratitude is, you know, uh, it's a wonderful feeling to feel. And certainly there are lots of gratitude journals going around these days. And, and that's the way. But you can, uh, hide, uh, things in gratitude. You know, I'm very grateful to have written a book and, and to have it published. I am so grateful, forever honored by that. Writing a book nearly killed me. I mean, I got sick all the time. I, you know, I wasn't moving as much. It really... I mean, my medical doctor, my primary care doctor said, 'I think you came in with something wrong with almost every symptom in your system, in your body. Your stomach, your head, your...'

Liz Higgins (43:28):

Your body was telling you 'Stop! I've had enough.'

Dr. Margaret Rutherford (43:32):

It really did nearly kill me. So, yeah, that was, um, one of, you know, I'm very grateful, but at the same time, I can recognize that it was a very rewarding, but stressful thing to do. And so many blessings are like that, that they carry with them either a lot of responsibility or they carry with them a lot of hard work or they carry with them. Um, just, you know, so I think you, you can feel both. You can both feel gratitude and grief all at the same time.

Liz Higgins (44:06):

That is so true. And I know, through reading your book and hearing you talk today, it's like choosing to do this work is choosing to embrace the full emotional landscape of you. And that doesn't always feel perfect. It doesn't always feel wonderful, but it will grow you. And it will be so fulfilling to be able to know all those parts.

Dr. Margaret Rutherford (44:32):

I like to use this example, um, just 'cause it's kind of dramatic and graphic. You know, I have three letters after my name. I'm very proud of those three letters. I worked hard for those three letters. PhD. I also have been married three times. My last marriage is over 30 years. So, you know, I

think I finally got it right. But that's not a fact that I'm proud of, or that I'm, um... I've certainly carried my own sense of shame about that. And it was a confusing decade. And, um, I made mistakes - hurt people, hurt myself. I don't think either one of those facts about me define me. They're both true. They're both accurate. And I might be judged, or evaluated somehow, because of them. Some people might think, 'Oh, she's been married three times. Well, she's weird or she's goofy.' And somebody might say, you know, 'Well, she has a PhD.

Dr. Margaret Rutherford (45:28):

Well, that's great. You know, she must be really smart.' I, neither one of those facts define me anymore than the other one does. And I think that people carry such shame about mistakes, and about when we fall, and when we struggle. Um, and they, they want to hide it because they literally believe that it, now that's defining them. That's what, that's who they are. And I've learned through the years that that's, you know... I tell you who I learned it through. I learned it through Maya Angelou. Mm. She, uh, was the Poet Laureate for Bill Clinton and, um, really wonderful human being. Very talented and, and wise in many ways. And she wrote a book called "Wouldn't Take Nothin' For My Journey Now". It's a tiny little short book of essays. And I was just starting my practice. This was in 1993, I think I got the book.

Dr. Margaret Rutherford (46:28):

And in one of the essay, she talks about how she was voted, like, Woman Of The Week, Woman Of the Month, or Person Of The Month (or something) in New York City. And she was celebrating, and she got really smashed at this, uh, bistro. And she sat down with this group of men and really sloppily talked about, and questioned them about, 'Why won't a man love me?' And 'What's wrong with me?' And just made an ass out of herself. She said, uh, it's kinda like you do something and you wish that, you know, you, you could change your name and move to Canada, basically, after a night like this. I've had several of those moments in my life. And so... But I thought about it and I put that book down, Liz, and I said, you know, this is the way I wanna live my life.

Dr. Margaret Rutherford (47:23):

This kind of transparency that, yes, I have faults. I have weaknesses. I have vulnerabilities. I have nights that I got smashed and did stupid things. But I also have this to offer, and that to offer. And I... It took me several years to get there. Um, because I think back then I had just gotten degreed and I was starting my practice. And I needed to think that, you know, I knew all the answers... But I was, I was nervous about becoming a therapist, so I surely wanted to try to get it right. But I learned that getting it right for me at least was about being very settled in who I am. Both - again - my strengths and my vulnerabilities.

Liz Higgins (48:16):

That's beautiful. Thank you for sharing that! I... I'm just going to take it in and receive it. And I hope that listeners can do the same because it's, it's a really beautiful reflection of kind of coming full circle with yourself and deciding, discerning who you want to be. And that you have the capacity to, to be that and to do that. And it's not just judged by the accomplishments, the money, the external things that we gain. That's all good stuff, but it's, it's not the whole of who you are. So, thank you so much! This has been such a great conversation. If you are loving what you're hearing (as I am!), please go to the Show Notes and check out more from Dr. Margaret Rutherford. And

did you mention that you're working on a second book? Because we all need to stay in the loop on that!

Dr. Margaret Rutherford (49:09):

Yeah... This may be the last time you see me standing. The publisher is interested in seeing what I might be able to offer. They have not guaranteed me anything on it yet. In fact I'm... Right now it's in the concept stage, but I have... My own thoughts have, um, amplified about this topic. And I have found other people like, uh, Dr. David who I just talked about a few minutes ago, that I'd really like to incorporate some of her work into the book. And some others. And so I'm working on trying to see if I can, uh, um, make it something that they think will work in the marketplace. And will be helpful. Yeah. Yeah.

Liz Higgins (49:53):

That's amazing. Well, I will definitely be keeping in touch on that. Because your work really is incredible! And I've really enjoyed the book and what it had to offer me on a personal level, but also just shedding a new lens onto how I even experience clients and what they're going through. So thank you again for being with us today!

Dr. Margaret Rutherford (50:12):

You're welcome. Thank you Liz. Very much.

Thanks again for listening to the podcast. If you like the show, leave us five stars or write a review. If you're interested in learning more, sign up for my free ebook "The One Barrier to Commitment All Millennials Face" at millenniallifecounseling.com.

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