

**DR. KEESHA EWERS:** Hello everybody. This is Dr. Keesha Ewers and you're joining me today for the Women's Vitality Summit. We're going to be talking about all kinds of issues in this Summit that have to do with energy, life giving force and how to maintain that in the world that we live in today.

My guest today is Dr. Keith Witt who is a licensed psychologist, a teacher and an author. He's the founder of the School of Love. He can be found at [drkeithwitt.com](http://drkeithwitt.com) where he offers his School of Love lecture series, Therapist In The Wild web series and Integral Conversations, audio and videos on health, love, relationship, sexuality, spirituality, developmental, psycho- development, psychotherapy and all those kinds of related topics.

He's given three TEDx talks that are all also available on his website. He's written five books: Integral Mindfulness, Waking Up, Sessions, The Attuned Family and the Gift of Shame.

It's very clear why I have invited Dr. Keith to be on the Summit because obviously, relationships and the relationship with ourselves is one of the most important aspects of maintaining vitality in our life and in our world.

Welcome to the Women's Vitality Summit, Dr. Keith.

**DR. KEITH WITT:** I am honored and happy to be here.

**DR. KEESHA:** I am so happy to have you on this because the word "vitality" means life and energy, it means spirit, it means balance, it means sparkle and passion.

As a therapist who has seen something like over 55,000 therapy sessions, what would you say is the biggest vitality sucker that you see when you work with women? And it may be non-gender specific. It may be everybody.

**DR. KEITH WITT:** As you mentioned, everything is relationships – relationship with ourselves and other people.

I think the biggest vitality sucker that I see with women I work with is culture. It's the culture that they move in which is basically the water we swim in.

Modern culture puts a lot of demands on us that if we try to respond to all of them will make us sick.

Historically, culture has regulated people. It really regulates people, tries to regulate people. The season will regulate people.

We're in a culture now where the demands of the culture are for us to just keep on going and going and going until we break down, which is why 70% of medical problems are stress related.

So men and women both, but especially women, really want to say yes to what they feel they should do. If you say yes to everything you feel you should do, it will kill you.

We all have to have a little bubble of self that cushions against the cultural demands to work too hard, that pushes against the cultural demand to get too much done. It pushes against the cultural demands to be up on every single television show or movie. It pushes against the cultural demands of to do everything and be everything.

We need to be able to listen to the inner voices of our body and our heart, mind and spirit and to develop rhythm of action and rest, rhythm of relationships and solitude, rhythm of development that works with our body-mind system, and then maintain those bubbles of equilibrium in the face of culture that demands to push further.

**DR. KEESHA:** That's such an important piece, what you said about tribes and seasons and other cultures regulating us. We've gone outside the purview of the seasons regulating us.

This is one of the things I do. I'm both a psychotherapist and in medicine. You're absolutely right. I think it's even higher than 70%. It's up in the 90s now according to the World Health Organization of things that are related to stress in terms of the body breaking down.

Watching screens up until we fall into bed with exhaustion is not getting us anywhere fast.

I love what you're saying here about the bubble and probably not inviting the electronic screens into the bubble is a good thing.

**DR. KEITH WITT:** Absolutely. There are a lot of studies that show that the light from screens is not good for us at night. Too much of it is not good for us.

Children who watch more than three hours of television a day test lower on creativity scores and their minds are different. Their brains have less activity in certain areas.... Every time there are new capacities for stimulation of connection, we up level. We have new capacities for greater complexity but also, there are new pathologies that come.

These are the pathologies of the screens. We have screen addiction. For instance, 30% of the time spent on the internet is people procrastinating. The internet is interfering with other things getting done.

Screens are like any other substance. They're like food, they're like drugs. If we don't regulate them, they get out of control and they hurt.

**DR. KEESHA:** Procrastination is 30%. Of course, then you mentioned the 'should' that women fall into. I always say "Please don't 'should' all over yourself."

**DR. KEITH WITT:** Yes, very well said.

**DR. KEESHA:** 'Shoulding' all over yourself only gets you in trouble in terms of being overwhelmed, over-committed and broken down. Again, you're speaking through the place where the 'shoulds' come up: "I should be doing this."

That overwhelm happens and people need to decompress and they turn to screen. That's the ostrich – putting your head in the sand. The problem that you should have thought happened three hours ago in terms of solving it is still there when you're done with your screen.

I see that a lot too. I get so many patients that say "I'm just overwhelmed with my life."

Now, when we talk about 'should' and overwhelm and perfectionism, which I'm just going to throw in there along with those, then that brings me to a term that you do a lot of work with and that's 'shadow work'.

I love to have you introduce that idea here.

**DR. KEITH WITT:** Yeah, I have a book called *Shadow Light Illuminations at the Edge of Darkness: An Integral Journey in the Shadow* coming out later in the summer.

I'm fascinated with the coming together of the traditional psychotherapy models and the new neurobiology that's come out in the last 35 years.

The way that consciousness works is that our brains do a lot of information processing non-consciously. It's called by neuroscientists the adaptive unconscious.

Our brains are reacting to internal cues and external cues all the time. They're sending up information. They're sending up stories and impulses and emotions in 100 milliseconds, 200 milliseconds, one two tenths of a second.

Our conscious self observes that material at a half second to a second and a half. We're always following our non-conscious. There's shadow material coming up in our unconscious guiding us and influencing us mostly out of our awareness.

When we become aware of that material coming out, we're bringing into the light. It's not shadow anymore. We have more choices, we have more options.

This is really a big deal in relationships because when people in a relationship like you and me right now, we create an inner subjecting field. Your conscious and non-conscious are communicating with my conscious and non-conscious.

Usually people are aware of the conscious conversation, not much aware of the unconscious one, and yet the most important one is the one below the surface, the one that has to do with my intentionality and your intentionality; the one that has to do with my state of being and feeling and your state of being and your feeling.

When those areas are congruent with what we're saying and we're doing that, we're engaged socially and we're emerged in each other, we are feeding each other's vitality.

When those become disruptive, when we feel threatened, our nervous system sends us stories and feelings that have to deal with threat. Then we enter the

defensive state where we disconnect from each other, we have to start to get impulses.

Those defensive states--everyone has them--those defensive states conflict with the other person when we're uncomfortable and then we'll have a shared defensive state and interactional defensive state or relationship defensive pattern. That's where most of the suffering comes from. I see that all the time.

If we're aware of that, if we can see it, if we can bring it out of the shadow and into the light, we can adjust that defensive state back to social engagement, back to a sense of compassion and connection to ourselves and other people.

An awful lot of psychotherapy, whether psychotherapy is known or not, is catching people in defensive state and helping them regulate those defensive states in the state of healthy response.

With couples, it's helping them discover how they unconsciously go into those defensive patterns, having them observe the bad habits that are there and then show better habits.

All of these are governed by multiple influences coming up from our adaptive unconscious, coming up from the shadow all the time waking and sleeping.

**DR. KEESHA:** So the shadow, we could also call the ego, the ego state part of it. That's very simplistically put obviously.

**DR. KEITH WITT:** The ego state that we're not aware of. If I feel threatened by something that, say I remember back in 1976, when one of my students said "I hate your pants."

Say I feel threatened and I have the impulse to be defensive. If I'm not aware of that, I might just get defensive. If I have awareness of that defensive impulse I can go "Yeah, you're being defensive. There's a better way of relaying it. What don't you like about these pants?" After she told me, I never wore those pants again. The difference between being aware of the subtle influences and not being aware of the subtle influences is the difference between having freedom of choice and being driven by non-conscious choices.

Adult development generally involves progressively waking up to more awareness of yourself, more awareness of the world. Development in relationship is progressively waking up to more nuances of the relationship, more awareness of your purposes of the relationship, more sense of freedom of emotion, to make healthy choices rather than unhealthy choices.

**DR. KEESHA:** I'm going to put this into some terms that maybe people can see in their own lives. I worked with a couple yesterday. Her car broke down and she sent a text to her husband who was teaching a children's class at church and wasn't looking at his phone. She said "Car broke down, have to call AAA."

He saw it afterwards and there was no other text after that. So he assumed that her car had broken down in the driveway. That is not what happened.

When he got home, she was just getting home and was madder than a wet hen. When he saw her anger, he instantly went into defensive stance. It created a rally that lasted for hours and lots of shouting and screaming and the kids going outside to play because of it.

He was in front of me asking "How can I have done this differently?" I said "What triggered you when you saw your wife's face?" He said "I just knew I was getting blamed for something that wasn't my fault. She should have put in the text where she was."

Guide people through that because I think we're not aware why we're getting triggered. We went deeper in that. Where is that being blamed for something you didn't do? Where is that trigger rooted in? Of course, that's back in his childhood from some things that happened in childhood.

I think that people don't get "Okay, this is an unjustifiable act that's being committed against me" and they don't know what happens when they get triggered. Of course, you and I both know that means you're putting gasoline on a flame and creating a bonfire when you're both in that defensive stance.

This is not maintaining a healthy relationship in a hectic world because there are so many of these moments in a hectic world where you're misunderstood or you read something incorrectly from your partner and go straight into defense.

Talk to that a little bit, how this actually works and what people can do with that.

**DR. KEITH WITT:** This is a great example. Let's use your example. First of all, our nervous system reads that we're unsafe or threatened. It instantiates a defensive state.

A defensive state is characterized by amplified or known emotions, distorted perspective, destructive impulses and diminished capacities for empathy and self-reflection.

What that state does is it prepares us for violence because human beings have been evolving in the last 3 million years mostly to protect themselves from other human beings.

We have been evolving to protect ourselves from snakes and bears. We've been evolving to protect ourselves from other human beings which is the biggest threat to us.

That defensive state prepares us for fight or flight. That diminished capacity for self-reflection stops us from focusing ourselves on what we have to do with the situation. The diminished capacity for empathy blocks out the other person so we can desert them or attack them. That empathically resonates with somebody who we consider as an attack.

The course of evolution of humans affects all of us. By the time we hit adolescence, we've been practicing defensive state for 14 or 15 years.

We're really not neurologically able to be aware of defensive states until 14 or 15 years. We have to have a certain level of self-reflection to be able to self-observe them. We don't have that until 12 or 13.

When that states happens, and I have it with you, you immediately feel threatened by me and you instantiate a defensive state. If you and I are a couple, those states become coherent with each other. We have an escalating conflict.

In that escalating conflict, we're driven by the distorted perspective and the amplified emotion and the disruptive impulses if we're not aware of them, if they're in shadow, if they're visible to us.

This couple when the fight started completely lost what their purpose was as a couple. They completely lost what was going on inside each one of them. They completely lost what their job was as a partner.

Instead, they surrendered to the disruptive impulses because they weren't empathically connected to each other. They keep hurting each other, not feeling the other person's pain. Because they weren't self-reflecting, they weren't aware of how they were attacking and defending and so it went for hours.

As it went for hours, they were accumulating damage to the relationship. This is a really big deal.

Relationships are these little inner subjective bubbles that we have with each other. When people get together, there's a certain kind of relationship entropy that starts where if they're not aware of how the relationship grows, it tends to deteriorate.

We can talk about that later if you're interested.

And so with this couple, if this couple was working with me and processing this, at some point the conversation will be "So you came in, you got angry. When you got angry, you started defending yourself instead of deconstructing the conflict."

The conflicts are cooperative. They cooperated with each other for several hours when they were angry with each other. If either one of them stopped cooperating with the conflict, it wouldn't have kept going the way it was.

For instance, he could have said "I'm really sorry. It wasn't the right thing but I understand. You felt deserted. I'm sorry. I don't want to feel deserted either."

She could have said "I understand that you thought you were doing the best thing. I was assuming you would know. Sorry I got angry, I just got upset. My car broke down. I had to call AAA."

That's not cooperating with the conflict. The conflict at that point begins to de-escalate. If the other person cooperates with the de-escalation, they get back to love. Getting back to the love is the bottom line because as they get back to



love, now they're not putting negative stuff in the relationship. They're putting warmth and care into that relationship.

Even more, they're beginning to wake up a little bit in how they typically behave in this situation. They're becoming a little bit more able to love each other. So, whenever we're working with couples, we're always working with that.

How do we develop these defensive states? Well, as you said they may begin actually before birth. We have a genetic predisposition that affects how we self-regulate. Attachment history affects our capacity to de-associate.

Between 10 to 17 months, children begin to develop defensive states. They develop their capacity to feel shame. Those defensive states, projection, denial, all that stuff are accelerated into when we're old enough to begin to regulate them and deconstruct them.

In newer relationships, we're going to form relational defensive patterns with other patterns. It will happen when we're threatened. It happens to everybody. Learning how to love somebody is learning how to deal with your defensive states and there is learning how to use them to grow.

**DR. KEESHA:** This is what we went through with the couple. You have to go back to that self-inquiry, the ability to say "What's happening with me right now?"

I think the minute that you decide that's not important and you move into the the escalation process, you've gone into the part of brain that says "I'm in danger, red alert, all hands on deck, we are fighting."

That escalation then leads to fatigue of the adrenal glands, adrenal fatigue, which then can make your thyroid go upside down and have hypothyroidism that leads to hormone imbalance eventually.

Because if you're a zebra being chased by a lion and you think you're about to be lunch, it's not too safe to stop and reproduce. You have no libido, you probably get constipated because it's also not safe to stop and go to the bathroom.

So a lot of women come in to my office with these issues: "I've gained weight, I'm doing everything I know, I'm working out, I'm eating well, I'm still gaining weight like crazy."

The number one cause of their low libido is relationship dissatisfaction. So I start asking them if they like their partner. And I'll get tears. "Oh he cheated on me five years ago" or "He's this, he's that" and this escalation and deterioration of the couple occurs. As you mentioned, that's not growing, it's deteriorating and there's a lot of garbage in there now.

That's an adjustment inside that relationship bubble and the couple has just lost their way.

So I say "I know you came to me for bio-identical hormones because your neighbor feels better because I gave them to her, but this is individualized. The hole at the bottom of your boat is your relationship issues. We need to work with that so that when I do help your hormones, it will stay put. Right? It's not just going go out of the bottom of the boat because you keep having these conflicts with your partner about this."

So I love what you're saying and pulling that together to say this is a big vitality sucker. So many women in my office say it's such a huge thing. So let's talk about that. You sound very much like a Wall Street banker, right? If the stocks aren't appreciating, they're depreciating.

**DR. KEITH WITT:** It's true. Well you know, you speak the language that your client is most comfortable with. The message in them is you're losing in your relationship, you want to win it. How do you win? You love your wife better and you help her love you better. That's how you win.

**DR. KEESHA:** Nice.

**DR. KEITH WITT:** If you're speaking to someone where fairness really matters: "It's really not fair if you guys aren't loving each other enough." You speak the language that is most comfortable for the person.

**DR. KEESHA:** Uh hmm.

**DR. KEITH WITT:** You know, what I really love about what you're saying is that there is an interplay between self-care and relationship care that's crucial and this society has problems that we're not genetically prepared to handle.

One is that it demands from society to keep on pulling out until we collapse. The other one is a lot the problems in America are problems with excess.

We didn't evolve in an environment where there was too much of everything. We evolved in an environment until there wasn't enough of everything a lot of the time.

So we have to develop new capacities to deal with an environment where there's too much sugar, there are too many carbs, there's too much stimulation, too much light. You know, there's too much, too much, too much.

We have to learn how to find out what's the right amount for my body, for my system, and then bring it into the relationship. And I'm really glad you mentioned sex because sex of course comes up a lot.

**DR. KEESHA:** Uh hmm.

**DR. KEITH WITT:** I did my first experiment training in 1975 when part of my practice was doing sex therapy for the last 42 years.

**DR. KEESHA:** That's what my doctorate is in.

**DR. KEITH WITT:** Oh great. Well then you're aware that when we bond, we go through different stages. We go through less romantic infatuation and intimate bonding.

That's one thing that isn't taught. What is quite striking is if you take sex education in America and you compare it to, say, Holland. Holland in the 60s decided they were going to have enlightened sex education. They began to teach kids pro-pleasure, pro-sexuality, pro-information stuff and you got families involved. So everybody was talking about sex in the family.

They did a study after 5-10 years and they found that the girls still found that sex was for boys, so they added a component to sex education about girls being responsible for their pleasure, boys being responsible for their pleasure. Now in 2016, 80% of girls and 91% of boys say that the first sexual encounter was a

wonderful encounter with someone that they love. They have one seventh the amount of teen pregnancy and one seventeenth the amount of abortions that our teenagers have.

Two thirds of American teenagers say they were rushed or they had their first sexual experience and that they regret it or they had it because of the opportunity.

Ninety percent of the Dutch kids had said it was something wonderful that they were able to talk about it with their family.

So this is the whole culture that decided to become healthier about sex and now 13 years later we have kids that are way more healthy. They also taught them about the stages of sexual bonding.

For men and women, desire leads to arousal during lust. When you're hooking up with someone, you're doing romantic infatuation in that six or eighteen month joyride.

Well when the journey ended, they found that with many women, arousal leads to desire because the infatuation effect or because women's sexuality is different than men's. Men's is more visually-oriented, and women's is more duty-oriented and action-oriented.

And so women that don't know that the shift from desire leads to arousal, think arousal leads to desire. Although I don't feel that I should say no because that's what their parents taught them.

Instead of having a conversation with the partner we know, what's the way that we can use our eroticism to enhance our lives, enhance our vitality and enhance our love?

And she has a partner who's able to work with the context and who's cooperative with her. And she's able to work with his sexuality which is more visually-oriented. Guys kind of stay with desire leads to arousal. They can cooperate to a place where there's a sense of both of them feeling fulfilled.

Jerry Gauman did a study for the transition into parenthood with a whole bunch of couples. And he found that for most couples, 70% of them, three years after

the birth of the baby were doing worse. More distressed, more angry, more defensive, sex was worse.

So he developed a training program that taught them about being affectionate, he taught them about being responsive, he taught them about being interested in each other's needs.

It was one weekend of training that he did with a whole bunch of people who were going to have babies. Three years later, 70% of those people said that sex was better, they were closer with each other and there was less anger.

So this is a cultural pathology that we have, an entire group of people, that we have responsibility to help each other and that we need to understand that men's sexuality and women's sexuality is different. And then in a monogamous relationship, we better have an explicit and cooperative understanding about how we're going to handle our love affair. That's at the heart of all marriages.

**DR. KEESHA:** I'm circling back because this is something that I talk about. Telling women that they're not broken when they come in to see me and say they're never in the mood and they feel sorry for their poor husband.

**DR. KEITH WITT:** Awww.

**DR. KEESHA:** I know. So I tell them "Listen, 69% of women after one year in a committed relationship feel desire after arousal. It is not a linear thing like it is with men." We have so many different pathways into intimacy and it can be emotional, it can be all the different levelling as we speak. It can be power, it can be all the different things we talk about for women's sexuality that I'm not going to go hugely into. But 69% percent of women after one year in a committed relationship!

So all of our listeners, you're not broken if you're one of those women. You're normal. You're more normal than the ones that are spontaneously in desire all the time.

**DR. KEITH WITT:** That's right. Not only that. If you have a responsive partner and you're both willing to receive influence, you can work with each other so that if someone stopped either one of you on the street and said, "Do you feel fulfilled

in your love affair, your relationship with your partner?" then 80% percent of the time you'd be able to say yes.

You do that by helping each other, loving each other and expanding your eroticism. I ask women a lot if they ever they don't feel like it. I say "So your guy starts making love, do you feel like it after about five minutes?" And most of the time they go "Oh yeah! I'm really into it after a little while."

**DR. KEESHA:** Uh hmm.

**DR. KEITH WITT:** And I ask "Do you ever think about that when he asks you to make love when you're tired or you don't feel like it?" She goes "No, I haven't." And the reason that she hasn't is because our culture taught her to not think about that.

**DR. KEESHA:** Exactly. We have a message of "I have a headache. I have to wash my hair. I'm not in the mood" and I think that what's so important. I always say Nike had this right when they say "Just do it" and I'm going to give some caveats here for our listeners.

This is if you're in a safe relationship. You love your partner, you feel loved by your partner you're not in a coercive partnership. But if you're in a safe partnership where you love, you think your partner is fantastic, then try this.

I often say it's really important to think about this: "Do you love to exercise every single day?"

"Well no, I have to drag myself to the gym."

"How do you feel after you've been working out for a few minutes?"

"I feel really great and I'm always glad that I did it."

"Well think about this with intimacy time with your partner, too. Don't you always feel good at the end of it? If you do like your partner and you have enjoyed your sex life before."

That oxytocin gets going, your neurotransmitters get to take a ride, your brain loves it. Everything about sexual intimacy, if you're in a good relationship that's healthy is fantastic.

So obviously there are caveats to this for people that have never had a libido or who have painful intercourse, some of these, that's a whole other thing. But if you used to love sex with your partner and now you're having a harder and harder time because you're getting busier and busier and more and more stressed, and you've been dumping garbage into your relationship bubble, then this is one of the ways to start dumping it out. I think that's a really important thing.

And I want to tell my patients too "You have to take your vagina to the gym." It is a muscle and when you get to be past 40, you have a higher risk of peeing your pants when you go running or you sneeze or you cough.

Sex and squeezing your vagina around your partner's palace, that peanuts, if you're in a heterosexual couple, it's so important because that gives your body resistance. The vagina gets resistance as it squeezes. And you run less of a risk of having to pee your pants for the rest of your lives when you get old. It's a great win-win situation.

**DR. KEITH WITT:** It's a really great motivator and I recommend Kegel exercises all the time.

**DR. KEESHA:** Kegels don't work, Keith, if you...

**DR. KEITH WITT:** ...if you don't have anything there.

**DR. KEESHA:** If you have a problem already, yeah, exactly. Then it's like bending your bicep muscle with nothing in your hand. No weight and no resistance. Expecting yourself to get a really cut bicep muscles.

You actually have to have the resistance. So if you don't have a partner and you're listening to this, the Kegel Master, you can buy one in Amazon. I have no affiliation with them but I think that's a fantastic thing. Or Ben Wa balls, just anything that's going to give you some resistance. Think about it as the rest of your body.

I don't know why we leave our vagina out when we start talking about working out, it needs a workout.

**DR. KEITH WITT:** I love that. I wouldn't make plans just about the balls.

**DR. KEESHA:** Yeah.

**DR. KEITH WITT:** For exactly this reason, while I was having this conversation with her two days ago. And there are a couple other things about this.

It's rare that a couple will come in to psychotherapy for couple's counselling and describe having a mutually fulfilling sex life.

**DR. KEESHA:** Right.

**DR. KEITH WITT:** Jerry Gauman, when he was studying couples, found that there was one discriminator between couples that were stressed about sex and couples that said they have plenty of sex. And that was when one person asked to make love and the other person said no, the person who asked did it with love, compassion and was positive.

Now, Jerry Gauman is not an analytical guy so he said that one characteristic reflects plenty of sex versus sexually distressed couples. But if you think about it, that characteristic is the tip of the iceberg because if that person is able to meet that and know it is love.

There's a person that (1) is confident about their sexual relationship, (2) feels like they're engaged in a cooperative activity with their partner and trusts the partner would be involved in their sexual relationship, and (3) feels a relaxed sense of well he can't do it know, we'll be able to do it the other time that works for both of us.

It requires a lot of sophistication, communication and a lot of understanding about how sexuality works. I tell my clients a lot, there's really no activity that you can do for a half hour on an hour that has as many positive effects physiologically and psychologically as making love with your partner.

**DR. KEESHA:** Uh hmm.

**DR. KEITH WITT:** For no other reason, typical sexual activities are good for about a 20 minute aerobic exercise. That's not bad.



Unfortunately, your sexual relationship is like the canary and the mineshaft. It's not often when these disturbances, when we have distress, when we have unresolved issues that are gaining momentum.

One of the first things to be compromised is that sense of safety that's required for intimacy and these are the women you're talking to and the women that I talk to. They don't feel safe.

You know if a woman doesn't feel safe, it's very, very difficult to relax into love making.

**DR. KEESHA:** It's the most vulnerable place that you could possibly be. You're never more vulnerable as a woman than when you have opened yourself up figuratively and literally in that way. So there has to be safety.

**DR. KEITH WITT:** And that's why it's the guy's responsibility to help her feel safe. It's her responsibility to help him help her feel safe.

**DR. KEESHA:** Yes.

**DR. KEITH WITT:** It's that cooperative move towards mutual safety. The couple that you were mentioning earlier, they're not safe, because if one of them has a misunderstanding or if one of them gets angry, they're risking losing each other for three painful hours. That's not a safe relationship for them.

That lack of safety will cause them to have less sharing, to have less vulnerability which will cause them to have more distance which means they'll have less vitality in their relationship.

The safer you are, the more you can open your heart to someone, the more interesting your conversations become, the more vitality you create. When the time will come where you need to say making love, you are actually talking about making energy. We are generating energy that it fills us both up.

And that's true what we have in intimate conversation. That's true if we could cross the room to each other with smile rather than a frown.

I tell couples and then teach couples all the time, when you're around with your partner, you want to be feeding that intersubjective bubble of your relationship warmth. You want to be feeding it care. You want to be feeding it interest.

And if you're not, you want to be noticing it and you've mentioned this earlier.

Self-observation is the basis of almost all psychotherapeutic practices and at the basis the all of contemplative practices.

The ability to observe ourselves, acceptance and caring intent is the first step to being able to change. After that, there's an awful lot of knowledge that we need about what's more or less healthy.

In microclinical metrolist, I begin with talking about metrolist practices. And now in all these dimensions of relating, there's a lot of research following this that's more or less healthy. So let's be mindful of what we're doing and then chose the healthy option.

In the couples, it's always true to more love. That's always the healthiest option.

**DR. KEESHA:** The thing about self-inquiry and self-reflection leading to empathy, which you mentioned earlier, if you have empathy, you cannot hurt your partner. That's the bonus of doing that work and it is work. It's much easier to go in to your default, the big groove that's already been created in your brain that's habituated over maybe even decades for you.

It requires work to go down and really ask what's happening and do the self-reflection piece of it. So with that being said, I also want to tell our female listeners about something you said that is so important. It's the man's responsibility, or the partner's whether it's a woman in a same sex relationship or anything like that, the partner's responsibility to make safety happen.

It's also the one that isn't feeling safe's responsibility to articulate what that looks like for them. I think women are very guilty across the board of wanting their partners to mind read. I see that all the time, where they're really not willing. "Well if he or she loves me, then they would know what I need, right?" Do you hear that?

**DR. KEITH WITT:** Well yeah. I've heard that for over 43 years.

**DR. KEESHA:** It's a lose-lose situation. When you said winning means loving your wife better and more or loving you're partner better and more, I think that that's a really important thing to not lose sight of.

You have to be able to speak to what it looks like for you to be safe so your partner knows. It's the same with pleasure. You have to be able to describe what it is that gives you pleasure to your partner. I'm all about bringing sex to the dinner table and talking about this with the kids. Pleasure is important. You get to have it. You have permission.

**DR. KEITH WITT:** Well I think that's great! I would hear that forever. If somebody were to ask "When do you start talking about sex with your kids?" I would say "Whenever you have a talk."

**DR. KEESHA:** Right.

**DR. KEITH WITT:** That's when we started talking about everything.

**DR. KEESHA:** Uh hmm.

**DR. KEITH WITT:** Because there wasn't anything we didn't talk about. Also, there are certain dynamics that are generated by what type of person we are. Men tend to be more masculine type people, and women tend to be more feminine type people though all of us have a masculine and a feminine in us.

A guy being able to be comfortable in his masculinity and being able to make the feminine in his partner feel cared about, that increases the neurotic polarity in that couple. A feminine person being able to feel safe in their femininity, they'll appreciate and notice and enjoy her masculine partner, and that contributes to the neurotic polarity of the couple.

Part of that is, yes, the guy has to help the woman feel safe and part of this is evolutionarily method... Women are actually genetically programmed to be more frightened at male anger than men are programmed to be frightened at female anger. It makes sense in a hunter-gatherer group, male anger is the biggest danger to the group.

Women tend to affiliate when they're mad and guys tend to go out by themselves so they won't hurt anybody.

So a guy has a responsibility to manage that part of themselves so they can provide safety to their partner. Like you said, guys need direction in cooperative health.

Now we're talking about the tone as the dialogue. People tend to talk about stuff and they're not aware of the subtext; the conversation conscious to unconscious. Miscommunicating would possibly in tone and facial expression and so on.

Almost any message delivered contemptuously is experienced as an attack. Even if I say "I love you" but I say it with contemptuous tone, you're not going to like it. So the awareness of tone and focusing on using tones that say "I care about you, I respect you" for both men and women is vital.

In the marital entropy that happens when people ... themselves to their relationship, they tend to lose sight of that and they begin to normalize using their patient tones, their hostile tones, dismissive tones. If you practice and they practice, after a while they stop noticing it. All they know is that they're feeling dissatisfied.

In therapy, of course, what we do as practitioners is we bring those tones to attention and ask them to use the one tone that it respectful and ask doesn't that feel better? If you want that from your partner, you need to offer that to your partner.

If you offer that to your partner and they can't give it back, then there's a problem that you share. Get some help from somebody to learn how to reciprocate in that area. Make that part of your responsibility in this relationship.

We feel that we have responsibilities to work, we have responsibilities to get the kids to school, we have responsibilities cleaning the house, we have responsibilities going to the bathroom. But a lot of people don't realize, we have responsibilities to get enough sleep, to exercise and eat healthy, to make sure that we're feeling the kind of love we want from a partner feeling love from us that we want them to feel.

If we have a responsibility and that's not happening, then ask for help from others to help us to be able to do that. That's not an option, that's a responsibility.

**DR. KEESHA:** That's a self-care technique and I think it's so important. Again, the number one cause for the women's lack of sexual desire is an unsatisfactory or perceived unsatisfactory relationship.

Dr. Keith, we're winding down to the end of this really wonderful time that I've been able to spend talking to you. I so appreciate your wisdom.

I want our listeners to know how you came to do the work that you do, a little bit about your story. It's a really interesting one.

**DR. KEITH WITT:** I was born in the 1950s in Hawaii and then was raised in Los Angeles in Orange Grove. Los Angeles used to have orange and lemons groves before they got torn down.

That generation was essentially emotionally autistic. People didn't really understand psychological constructs. I was a sensitive person who was born to be someone who needed intimacy and contact.

I didn't like the relationships I saw, I didn't like the culture, I didn't like the Vietnam war, I didn't like the draft. I didn't like the way it seemed that people never talked about what was really going on and I went in a profound agitated depression.

When our parents got us into family therapy, there weren't a lot of family dynamics going on. My parents were joking and stuff, drinking at that time.

I didn't try to kill myself, but I longed for death, which is really a sign of depression. So my parents talked to the therapist and one day when I was 15, my dad said "Let's go to the sports cars, Keith."

So he drove me around and we stopped in front the Well's Neuropsychiatric Clinic and said "You're going to be here for a while."

**DR. KEESHA:** Oh my goodness.

**DR. KEITH WITT:** Yeah. He had my suitcase packed at the back of the truck, I could still see it.

**DR. KEESHA:** Wow!

**DR. KEITH WITT:** So in this hostel, they had therapy there, they had an arts and craft place and pingpong table and all that stuff.

Also, they liked electroconvulsive therapy and they gave me 23 electroconvulsive therapy treatments.

Electroconvulsive therapy is a pretty crazy thing. You know they strap you to a gurney and they put an apparatus on your head and they shoot electricity in your frontal lobes. You have a grand mal seizure and when you wake up, you are disoriented and you have amnesia, but temporarily you're not depressed. I don't know why they gave me 23 of them. I never asked them about it. These days, that's malpractice to give that many to adolescents.

**DR. KEESHA:** Right.

**DR. KEITH WITT:** One thing that happened, besides having amnesia and getting disoriented, is I wasn't depressed for a period of time for the first time in several years. In that clarity as a 15 year old, I went "Okay, so what kind of life do I want?"

The one thing that I was aware of was that I wanted intimacy. I wanted real intimacy and the only time that I ever experienced it was really in psychotherapy sessions, where people were speaking authentically.

Also, I wanted to be a healer and I wanted to be a warrior. Those were archetypes that I could feel added luminance for me.

So I get out of that hospital and I entered a karate class and I started studying psychology. Three years later, I had my black belt in karate and 10 years later, I had my first license. Then I never looked back. That launched me into all these studies and all these systems and eventually led me to David Davis' work; it led to categorical perceptual psychology.

I write extensively about interrelational psychotherapy. The basis of it was that understanding of the trigger, my warrior nature, and it triggered my healer

nature bringing that into the world. In doing that, it led me to the original thing that we talked about in this session which is it's all relationships.

When I look back at the start, when it was dark, I felt disconnected but that didn't mean that I was. I was connected with everybody. There were people that loved me, all that I was and the new me, they cared about me but I couldn't feel them.

Throughout all of my work as a psychotherapist, I've seen that's where a lot of suffering comes from. People can't be aware of the connections that are existing. Even on a spiritual level, we're connected in spirit all the time. It's not a matter of whether we're connected or not, it's a matter of whether we can feel that connection.

We develop the sensor through contemplation, through self-awareness, to be aware of how we're connected to spirit, how we're connected to ourselves, how we're connected to other people, and that awareness first of all regulates. Awareness always regulates.

Second of all, we can keep adjusting towards love. We can keep adjusting towards loving connections. Being aware with acceptance and caring of all the different parts of ourselves. We didn't adjust to loving connections with other people.

If you look at the research, that's what happens when people develop. They develop towards a wider embrace, more acceptance, less violence, more care, more sense of respect for others. That's how people develop morally, that's how people develop interpersonally, that's how people develop psychosexually.

In those of us that are calm, like you are and I am, we're called to help people accelerate that development and to find the arrested development places. Those places where they feel isolated, where they're not aware of the connections that they need to be aware of or cultivating the ones they need to cultivate.

We help them with that. We help them love themselves more, and we help them be more connected to spirit, we help them love and be loved better by other people.

**DR. KEESHA:** Beautiful. You have a whole school for this including a program, right? Loving Completely.

**DR. KEITH WITT:** Yes. The program came from a friend of mine named David Reynold. He said "Keith, if you could do a program on relationships, what would be different about it?" And I said "All the programs I've seen are great programs but they're all partial. They leave out the neurobiology, they leave out the development, they leave out parenting, they leave out the stages of sexual involvement." He said "So why don't you create one that would have all of them?"

So we created a full spectrum. We've created Loving Completely where we begin with five questions. I encourage people to ask other people about themselves.

I call these questions the five stars. The first one is "Is there erotic polarity between me and this other person?" so that you can be aware of the energetic polarities between you and other people.

The second one is "Does this person take care of themselves psychologically, maintain their health psychologically and physically?"

The third one is "If I was in a relationship with this person and maybe and there is conflict, would we be able and willing to do what it takes to get back to love?"

The fourth one is "Would this person show up as a parent or a family member?"

The fifth one is "Does this person have purpose, something sacred, and do they feel the sense of respect and care or would they provide me purpose?"

If you ask yourself those questions, you begin to observe those things in yourself and other people. So first of all it helps you choose better, then you move outwards from those five questions. You move to move to all the dimensions: psychological, physical, spiritual, relational and developmental, that all influences how we love.



In the program, I designed 73 modules, Each one focusing specifically on what's going on in a particular area and what are some practices that people could do by themselves and with their partners to enhance their capacities to give in and receive love.

There are related materials in my book that you can get on Amazon and there'll be similar related materials in my book on Shadow Light that should be up for summer.

**DR. KEESHA:** Nice.

Well thank you so much. I so much appreciate you spending this last hour to talk about your field of expertise and vitality and women's health. This is not gender-specific obviously.

Coming back to the definition of vitality being sparkle, bounce and passion, everything that you talked about, is exactly what we need to be working on and looking inside for, in our relationships with others in order to capture that back again or to build up for the first time. I think that the relationship bubble of self-care with your own self is where it begins. I really, really love everything that you said. Thank you for sharing it.

**DR. KEITH WITT:** Yeah, it's been wonderful talking with you. By the way, I like what you're doing with women and please keep it up. I want all the women to feel their vitality. I want them all to feel that feminine light and to nourish it.

Because, speaking for all men, that's what keeps us going, that's what nourishes us like sunlight nourishes plants. Not only does that nourish us, we need to get good in helping nourish that in women. Not just our partners at home.

**DR. KEESHA:** I agree. Eastern philosophy call it Shakti, and the more that women can build that energy and find it in themselves, then not only does their sex life get enhanced, which is a lot of times why people think about that, but that cosmic energy, that Shakti, that moves to your body when you fill it with another partner is exactly what generates the vitality and the passion and the sparkle and the balance to do everything you love in your world.

I would say libido is a tiny slice on a pie chart of your whole life and if that's not doing well then a lot of places won't be doing well. It's the canary in the mine. I think it's a really important piece to be looking at.

So thank you so much. I think we've got it covered with the men and the women here and working on relationships with this talk, and you've got more resources to keep going and digging deeper and learning how to do that self-inquiry.

And again that's [drkeithwitt.com](http://drkeithwitt.com), is that right?

**DR. KEITH WITT:** Yes, [drkeithwitt.com](http://drkeithwitt.com).

**DR. KEESHA:** That's where you can find his program Loving Completely. Wonderful, thank you Dr.Keith.

**DR. KEITH WITT:** Much love to everybody.