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Dear Arizona Marriage and Family Therapists:

I am writing my last newsletter column as chair. It has been an amazing two years and I want to thank you for your involvement with the Arizona Interest Network of the American Association for Marriage and Family Therapy! As I reflect on my first newsletter article, I could not image that the “turbulent times” I wrote of would encompass the entirely of these past several years.

The “unprecedented” times have expanded from the public health crisis to unprecedented political and social tensions, challenges to our economy and education systems, and even our understanding of what is truthful and the role of the news and the media. I continue to believe that marriage and family therapists and the skills we bring are needed now more than ever.

Two years ago I outlined three goals to the Network leadership, goals which I believe are still strategic and warranted. While I am pleased to report that we have made progress on all three of these, the progress has been slower, and more difficult that I imagined. I continue to believe we need to prioritize our collaboration and partnerships with the board, other professional behavioral health associations and organizations, schools, community groups, and constituents.
Second, I think we still need to be intentional about partnering with underserved communities at risk for violence. And lastly, our future continues to depend on the development and innovation of our leaders and members.

Despite the challenges of the last couple of years the AZ Network remains in a strong position financially. We are one of the most financially secure networks in AAMFT. Through years of fiscal stewardship dating back through multiple past chairs/presidents we can enter next year with a solid balance. Covid has accelerated changes in the expectations of conferences and workshops. More events are offered online which provide a convenience and lower overhead that in-person trainings cannot match. This will require changes in our approach to continuing education events as well as our annual conference and trainings.

I wish we could have met in person more often. My years on the AZ Network leadership team have been personally and professionally rewarding.

It has been the people I have met and the relationships that have been built which I remember and which have shaped me professionally. While my term as chair ends with the close of 2021, the Network is in good hands with Casey Heinsch and Chair-Elect Rachel Thomas. If there are ways I can assist you, or if there are ways you are interested in getting involved, please don’t hesitate to contact me.
Let me start by saying that this article is going to assume that issues with sex in couples work are NOT arising from trauma, abuse, compulsive sexual behaviors or infidelity. Rather, this is aiming for the ‘tale as old as time’: Disconnection. Do these sound familiar?

- “I don’t feel connected, so why should I give them sex?”
- “All they want from me is sex!”
- “Sex is for them, not for me. And I don’t want to do something for them anymore.”

Classic, high desire partner (HDP), low desire partner (LDP) cycle here. If you work with couples, you’re well acquainted with this dynamic! The lower desire partner typically has emotional needs that aren’t being met and they feel uncomfortable or just plain unwilling to have sex when they feel so disconnected. The high desire partner has physical needs that aren’t being met and aren’t comfortable (or willing) to have vulnerable conversations when THEY feel so disconnected.

What WE know is that sexual needs are CONNECTION needs, just like emotional needs. Perhaps a consistent “dosage”, if you will, of dopamine to the brain à la sex is what the HDP needs to feel safe enough to open their soul to their partner.

This becomes a predicament fit for the anecdote “what comes first: the chicken or the egg?”

Here are two things I know for sure:

1. Connection begets connection
2. Withholding connection (sexual or emotional) will NEVER yield the connection that the withholder desires (whether it be sexual or emotional)

In essence, as with all cycles, something has got to give. Someone has to stop their part in the perpetuation of their dynamic.

Typically, I begin with the emotional needs and try to ask the HDP for patience and to open up and be vulnerable. And sometimes it’s just still isn’t enough for the LDP- who, by the way, is USUALLY the EFT pursuer.
So. Let me tell you why my head is here. On my business Instagram, I do a lot of Q&A’s and during a discussion about sexual needs being CONNECTION needs and not pervy, carnal desires (well only, at least!), someone submitted saying that her counselor explained this to her and asked that SHE look at her libido, her turn ons, her own experience of pleasure and try to tap into THAT while they work on some emotional connection and communication skills.

My reaction? “Whaaaaa?? That’s not how I would go about it…”

But then she said, “we are a much stronger couple when we are having sex [more often].” And even though she describes herself as having a “way lower libido”, she acknowledges, “It makes a drastic difference for us.” She continued to describe to me that her embracing sexuality for PLEASURE instead of connection (while working on improving emotional connection in therapy) made her husband 100x more engaged and vulnerable and she started to see this “drastic difference” in their connection.

My mind? A little blown, honestly.

I haven’t tried this, and I would need to feel pretty confident about it to go for it with the couple because I can see how this could burn a LDP out- but- can it engage the withdrawn HDP? Is sex the proverbial "chicken" that, if first, produces the ‘egg' of emotional connection?

I think we have to tread carefully to not get into the zone of ‘duty' and unwanted sex. And as mentioned at the beginning of the article, this is not suitable for trauma, abuse or infidelity. But if we could light a sensual fire in the LDP, accompanied with some psychoeducation on the HDP's driving force behind this need for sex as being connection, would we help the HDP open up emotionally for the LDP?

I don’t know, my fellow MFT’s! This is a question I pose. Someone out there is doing it and seeing success with this "sex first" approach to increase emotional connection. I’m intrigued!

As always, I love to hear from you! If you have feelings about this, shoot me an email! kendree@synctherapyaz.com

Also! Let’s connect on your businessinstagrams: @sync.therapy
It has been 18 months of uncertainty, frustration, new opportunities, and lost expectations. Besides the physical loss of loved ones, relationships, jobs, and much more, it’s imperative to recognize the other component of COVID-19-ambiguous loss.

Ambiguous loss consists of two subtypes. One type of ambiguous loss is when there is physical absence with psychological presence, like divorce or miscarriage. There can also be psychological absence with physical presence, like dementia or an addiction. Ambiguous loss is something to address with all clients, but even more so due to current circumstances. Incorporating the changes into a systemic framework can allow clients to recognize the magnitude of this pandemic - both short and long term.

On top of helping clients navigate and find stability, it’s important for clinicians to recognize what has changed for them.
How have you had to adjust your expectations, cancel plans, or recognize that you feel drained because of all of the uncertainty? Do you give yourself enough time and space to address these changes within your own life/relationships?

What is your "new normal?"

The flip side of loss is the regrowth and possibility of a “new normal.” Just as you recognize ambiguous loss, you can also acknowledge what is to come. Many clients lost a dream job to stumble upon their new passion, or found time to focus on a new hobby or activity. New traditions and rituals unfolded and relationships strengthened. Focusing on not only the present, but the future as well, can help clients make the possible unknowns a tiny bit less daunting.

But how do we emphasize this with clients? It depends!

Can you listen for opportunities to validate and normalize the loss of safety and expectations that they're verbally processing? Or is it asking more open-ended questions and externalizing the ‘new path’? As always, use your best judgement of how to support and challenge clients during this time of figuring out what lies ahead.

The push to get out and get through the pandemic has intensified clients’ needs for stability and “quick changes” rather than sustainable ones. As clinicians, we can help slow down clients to acknowledge their own ambiguous loss. Can we acknowledge the ruptures and gains using a systemic lens?

What have you lost and what you gained during this temulchuous time?
ANNOUNCEMENTS & UPDATES

We are proud to announce an in person conference on April 8th with Rachel Thomas, LMFT and Bonnie Lewis, LMFT in their presentation "EFT: An Attachment-Based Approach that Works with All Systems" 7 CE's! April 9th with Dr. Sarah Bald and Casey Heinsch, LMFT with their presentation "Understanding Neurodiversity In The Therapy Room and Beyond" for 3 cultural CE's. More details will follow!

The leadership team is looking for local speakers to present topics to local MFTs. Please contact us at arizonainteresstnetworkaamft@gmail.com for more details. We are working on improving our approval process and finding new voices from the valley!

We want to extend a special thank you to Justin Smith for his service as our chair and further extend a warm welcome to the new Chair-Elect, Rachel Thomas!
NOTES FROM THE EDITORS

Please feel free to reach out with any questions, comments, or concerns.

If you would like an article published in the next newsletter (Winter, anticipated January/February), please send your article and bio to Kendree at kendree@synctherapyaz.com.