K: So, lately I’ve been thinking a lot about how much I miss our son. So, when I get sick, I get really melancholy. And… I’ve been sick for about 4 weeks now, and I’ve been melancholy the entire time. And I’ve just been wanting our son to be move back in.

C: Yeah. So, he was here for a lot of the pandemic and moved out… first week of November or so?

K: Yeah. As soon as his new bed came.

C: Yeah.

K: Because he bought a new bed.

C: He was like, “I don’t want to sleep on the couch anymore. I want to sleep on my nice, comfortable bed.”

K: He didn’t have to sleep on a couch. It’s a foldaway bed.

C: So, it’s a couch.

K: Yeah, but it’s a foldaway bed that he just chose to never unfold.

C: Yes.

K: And instead, what we’ve done is – so, I think we’ve talked about our beds before.

C: Yes.

K: And we have like a 7-layer bed. And his bed was 4 layers, I think? So, he brought his 4 layers of futons and – just basically bed mats

C: Yeah.

K: And put them on top of the couch. And he was like, “this is super comfy.” And I was like, “no, when your bed comes, you’re going to be like ‘why have I been denying myself a bed for years’

C: (laughs)

K: Because I offered to buy him a bed 5 years ago

C: Right.

K: Or 6 years ago now, when he first moved out. And he was like, “no thank you.”

C: Yeah, and I think you and I know why we’ve chosen not to have beds.

K: Because they don’t make king-sized beds in Japan.

C: Right. But when we left the U.S., he was still sleeping on bunk beds. Which are basically useless as far as comfort.

K: No, he had a really comfortable bunk bed. We would fall asleep in his bed with him – at least, I would sometimes. It was super comfy.

C: Yeah.

K: And he had a bed when he was here that was super comfy.

C: He did. Yes.

K: And through various bad behaviors, he lost his room. But we’re not going to talk about that. We’re not going to put him on blast. It was a private time during his teenage years.

C: It was. He was just very bad at finding things. He was like, “I don’t know where my room is anymore.”

K: (laughs)

C: Now, he keeps better track of it.

K: Yeah. And so… he moved out when he was 20. And that’s… the age of adulthood here in Japan. And… it wasn’t as smooth of a move out as I wanted it to be. And then he moved back in in March, and then he moved out again in November. And, again, it was not – there was no ceremony. He was just like, “okay, I’m going now. Bye.” And there was like this big, long talk leading up to it about how he would sleep here during the week

C: Mhm.

K: But go home on the weekends and sleep. And he hasn’t slept here since.

C: No.

K: So, we’re like two months on – or a month on, a month and a half now

C: Well, and he only lives a 10-minute walk or a 20-minute drive away. So…

K: It’s not a 20-minute drive.

C: How long does it take door to door?

K: It’s a 20-minute walk. It’s a 10-minute drive.

C: Okay. I get those two mixed up because, door to door – like, when we call him and say, “hey come over” it seems like it takes a while.

K: It takes him 15 to 20 minutes to leave his house.

C: Okay. See, I don’t see that part.

K: Yeah. He’s like me. Like, if you told me, “okay, we gotta go right now,” I’d say, “okay.”

C: (laughs)

K: The fastest you can get me from bed to front door is about 20 to 30 minutes. It takes me 10 minutes to put my shoes on.

C: Sometimes, yeah. I’ve seen you move faster than that when you were truly like running late someplace, but… your usual speed, yeah, is 10 minutes or so to put your shoes on.

K: Yeah. I don’t rush.

C: Not anymore.

K: I’ve never rushed. When have you ever known me to be someone who rushed?

C: There was a time when you were supporting us financially, and you were teaching, and every once in a while, you would be running late, and you would rush.

K: It was really rare.

C: It was really rare. Yes. And I feel like you were only doing that because you knew that all our hopes were resting on you. Financially.

K: Yeah.

C: But we’re not in that position anymore. Neither one of us is bearing that – that brunt alone.

K: Yeah. So, right now I feel like the best medicine in the whole world would be my snuggling in bed with me. And I just – I feel so selfish and needy, so I haven’t asked him for it.

C: Mhm.

K: Because if I asked him to, he would completely come over here, move in – move back in – and lay in bed with me the entire time that I’m sick.

C: Right.

K: And it does actually make me feel better. Like, I don't know if it’s the pheromones or the exchanges that happen – like the chemical exchanges that happen between a mother and child, but the other day he came over, and I was like, “snuggle me.”

C: Mhm.

K: And it felt like medicine. It felt like I was wrapped in medicine. And then I felt like, “okay. I have to let him go home now.” And so, I released him back to his home. I know that, when he hears this, he’s going to be like, “you should’ve just told me. I would’ve stayed the night. It’s not a big deal.”

C: (laughs)

K: But I feel like it’s a huge deal because I’ve always worked really hard for him to not be my worry doll.

C: Right.

K: And not be where I put any of my sickness or pain.

C: Well, I think that’s something that he’s always felt is like… autonomy. And, so, I think for him it’s not a big deal because you’ve worked so hard to make it not a big deal. If that makes sense.

K: But I think having to be this close to me when I’m this sick… knowing that you have the same illnesses. I think it becomes really heavy.

C: Yeah. I think so.

K: And so, I don’t want him to always have to stare in the face his future.

C: Right. Right.

K: He wants to be a parent, and, when he was little, there were ways that we got around it, so that he just didn’t notice that I was sick all the time.

C: Yeah.

K: And that is, when I would get sick, we would just like do a Scooby Doo marathon.

C: Mhm.

K: And… he thought it was funny that I would fall asleep every time Scooby Doo came on. Like, I’d miss it. And then we’d have great talk time because – after – when I would wake up from my nap, he would tell me about all the different Scooby Doo, Scrappy Doo – like

C: After first being sure that you didn’t want him to rewatch it so that you could watch it with him this time.

K: Yeah. And he would just… word shower and tell me all about it. And I would be very interested and engaged, and then he loved sleeping in the big bed.

C: Yeah.

K: And so, sleeping in the big bed was not a big deal for him. He was just like, “this is a party.” And he looked at it more as like a sleep over. And then as he started to get older, it became more obvious. And then it was real heavy for a couple of years. And we had to kind of work our way around to where it’s not as heavy, but I think it’s still – I don’t think it’s ever gotten light like it used to be when he was little.

C: Yeah. I think just him… knowing that you were in the hospital for 6 months – there was not any kind of working around that.

K: Yeah.

C: And so… that was a little bit… tough. I think that’s when he kind of became cognizant of it, which was like 12, 13.

K: Yeah.

C: When… it wasn’t possible o hide it from him. But he’s very loving.

K: Not when he was 12 or 13, when he was 9. No, when he was 10 or 11.

C: 10 or 11? I get mixed – yeah. Yeah, you were right. Because we came here permanently when he was 12.

K: Yeah.

C: Because you moved here a couple of years before we did to learn the language and get everything set up. And then ended up coming back, and I always get that gap mixed up.

K: Yeah. And… then he was like really mad at me

C: Mhm.

K: And he had to, like… test me to see that I was strong and sturdy because, even after the hospitalizations were over, it was still a lot of years being sick.

C: Yes.

K: And not being able to function. And the digging myself out of that hole and understanding how to manage my two illnesses. And they would be easier to manage if just once a year, I could go to the hospital.

C: Right, right.

K: And stay in the hospital for a week. And have them do all the stuff they need to do – like a once-a-year tune-up. But they always want to do more. They won’t ever just do like the minimum. Which is keep me on I.V. fluids – nothing by mouth – pain management. Just do that for a week, and my body’s – my body’s fine. So, I do as close to that at home as I can.

C: Well, and I think that’s part of how our annual, week-long trip got… the way that it got.

K: Yeah.

C: Which we haven’t been able to do this year because of COVID and because everybody is being completely irresponsible here in Japan. So… just… record-surge and all of that bad stuff. Because I think going to a hotel for a week and knowing that you can pick just one thing, and it’s gonna be consistently available… whatever that thing is. Like, whether it’s something at the buffet or a particular room service thing or something

K: Yeah.

C: Because they have a consistent – consistent… selection of food that is not always possible at the grocery store.

K: Yeah.

C: So, I know, today, I went to the grocery store to get things, and… the list sometimes includes 3 or 4 backups for a particular item because there’s no guarantee that anything in particular will be there.

K: Yeah. And so that’s… really challenging and really hard. And I feel bad because I don’t know what else to talk about. Like, other than I’m tired and I’m sick. I think I’m getting a little bit better.

C: You seem to be getting a little bit better, but you have been tired, and you have been sick. And I think that one thing you’ve done a really good job at over the years is helping our son understand the things that make things permanently worse.

K: Yeah.

C: So, I feel like… as crappy as it is, you kind of going first – which because you’re older is gonna happen – you’ve been able to steer him away from things that would make him permanently sicker.

K: Yeah.

C: So, I don’t think that he will have it as bad as you despite having the same illnesses.

K: Yeah. We can already see it because, at his age, I was a lot sicker than he is.

C: Yes.

K: Because we didn’t know about the HCP. So, I’ve known my whole life that I had lupus – so, I’ve dealt with my lupus as any young person would. By just ignoring it.

C: Mhm.

K: And then being hospitalized when it got too bad. And… then… when I found out I had HCP; it was a whole new thing to learn. A whole new set of things to learn. And my hereditary coproporphyria, because it’s reactive to the sun, being in Japan – I was working a lot. Because I don't have a car.

C: Right.

K: And so, I was spending a lot of time in the sun, which meant I was always sick. And it got so bad they told me, “you need to return to the United States because we think you’re going to die.” And it was just so strange – and it was a lot of years discovering what was wrong. I think we’ve said all this before. I have wicked déjà vu today. And I feel incredibly boring, which makes it incredibly challenging to do a podcast.

C: I know but see I’m finding this really interesting – and I’m not having déjà vu about it, which is weird because I have déjà vu ordinarily.

K: Yes.

C: So, I’m having jamais vu – that’s the word for it. The feeling that you’ve never experienced something before.

K: Mhm.

C: Because I don’t feel like we’ve had this specific conversation. I know we’ve talked about HCP – we’ve talked about that – but talking about your experience of it, and your experience of it as a parent – I don’t think is something that we have done before.

K: Mm. It’s a really deeply personal thing.

C: Yeah.

K: And I’m feeling a little bit guarded about it. Because I feel so… I think the – how vulnerable I feel. How frail I feel. And how besieged I feel. Is really hard to explain. And how hurt and angry I feel.

C: Yeah.

K: Like, all of those emotions are really… hard for me to cope with right now. And so… part of feeling besieged and under siege is that… on one hand, I want Rasta here. So, I know he’s safe.

C: Mhm.

K: And… then I also want him here, so he can hold me and make me feel good. And I want him here, so I can… have this thing that I do where I like rub his hair. So, I can rub his hair and smell his neck and have him close to me and feel that love and safety that… and comfort that I only get from him laying in bed with me. And it just – it’s such a good feeling. It feels like medicine. It’s so good. And it makes me feel so secure, and it makes me feel so safe. It is one of the best feelings in the world. But he’s 26, and he’s going to be getting married soon, and I don’t know how to explain to his wife that I need him to come over because I’m sick, so I can lay in bed with him.

C: So that you can fall asleep.

K: Yeah, so I can fall asleep. I need my son to put me to sleep kind of thing. Because, the other day, after he… was over and he laid in bed with me, I slept for like 10 hours.

C: Yeah.

K: And… I don’t – I don’t know if anybody will ever understand that unless they have a chronic illness themselves.

C: Yeah, how certain things can just kind of… be that feeling of safety and comfort. I see people on Twitter get it from pets. Which, I’m not a pet person – and you’re not a pet person – so I don’t think either one of us get that. But… Rasta has such unconditional love for you.

K: Yeah.

C: And for me, too. I’m not feeling left out on this. I’m just saying, for you is the relevant part here. That I think there’s that… sense of absolute safety. Like…

K: Yeah.

C: He might thoughtlessly hurt your feelings – just like I might – but he’s never going to intentionally hurt your feelings

K: There’s been times that he’s intentionally hurt my feelings. But when I’m sick, he becomes a particular kind of gentle.

C: Mm.

K: He knows the exact type of gentle… I need. And he just comes and he’s really good at not taking up any emotional space and just comes with such a beautiful, big open heart. And it’s just pure – this pure outpouring of love. And he’s been sending me really loving messages every day – which I asked him to do – which helped a lot. I save them, and then when I’m feeling really just… los-lonely girl, and I’m like “okay, nobody loves me. Everybody hates me. Guess I’m gonna eat worms.” And then I look, and there’s a message from him, and it’s really quite – a buoying. It makes me feel really good.

C: Yeah.

K: Because being this sick, it’s really hard to see any… self-worth. It’s hard to have self-worth when you have a chronic illness. Which is really common among people with chronic illnesses to have difficulties feeling like they have worth.

C: It is.

K: And with disability.

C: And I can see how it coming from him – not just because he’s your son but because he has the same illness – so you know he knows exactly how you’re feeling.

K: Yeah.

C: Because, although I have things… they’re not your things. And sometimes they’re in conflict, and I don’t feel exactly the way you feel. Just like you don’t feel exactly the way I feel.

K: Yeah.

C: But he’s got that thing of you know that he has felt – whatever you’re feeling, he’s feeling exactly that. So, I think it doesn’t take very many words to tell him where you’re at.

K: Yeah.

C: You can just be like, “I’m at this spot” and he knows… just by the way you move your hand what spot you’re at.

K: Yeah. So, it makes me kind of sad for him for when I die. He’s not gonna have anyone, and he’s gonna be int eh spot where I am now. Because his child will not have hereditary coproporphyria.

C: Right.

K: Because it’s passed on through the mother’s genetic bloodline rather than… the father. So, it has – it can only be passed down from mother to child. And so… if he were my daughter, he could pass it on to his children. People are like, “what about when he has – if he has a daughter?” No, it doesn’t work that way. His daughter will still not have my maternal DNA because I’m not – not going to be his child’s mother. Hello. Follow the genetics.

C: It’s autosomal recessive. So, if he has a daughter, his daughter could be a carrier but wouldn’t have it.

K: Yeah. And if his daughter marries somebody whose mother also had it or who had it, they would not then produce it. It dies out with him.

C: Mm.

K: It’s a really strange disease. Really, really strange disease. So, my mother’s mother had it. My mother had it. And I have it. And my son has it. So, every female in my maternal bloodline has had it.

C: Yeah. And I know when we looked it up

K: My great grandmother had it, my great-great grandmother had it

C: And when we looked it up

K: On my mother’s side. And they all died really young.

C: Yeah. In their 50s.

K: Yeah.

C: When we looked it up… before you got diagnosed. We looked at all the different things and the groups that are more likely to get it, and… when we went and saw your doctor, your doctor was like, “you don’t have it.” And when he looked it up, he said, “well, you know, only Jewish people – it’s like much more prominent amongst Jewish people and Swedish people. And you’re neither one.” You were like, “actually”

K: (laughs) Yeah. Actually, I’m Jewish. But right on.

C: Yeah. So… it just – I feel bad for you, but my feeling bad for you doesn’t carry the same kind of… sympathy and empathy that Rasta’s does. So, I agree that he is – he is good medicine for you.

K: It’s hard, too because, like, he’s good medicine. He’s not married yet. But… with his last girlfriend, there were issues with how much I talk to him. It was upsetting for her, and… she was not the right girl for him. They broke up. But I just – I don’t see how anybody tolerates that much intrusion into their life. Like… they need to have – I believe every couple needs to have time that is private and their own.

C: Yeah.

K: And that’s important for intimacy. And if… one of your – one of the partners is always on call. Always on edge. There’s an edge to that that doesn’t – that Rasta doesn’t deserve to have in his life.

C: Mhm.

K: Like, I don’t think he’s feeling amazing this week. I think, you know, we had a hard run this year. It was one of the best years, but we’ve been super busy. And I think we can all use a break. You know. So, giving him… and letting him take part of that break. And letting him have that break is important to me. It matters.

C: Yeah, I think for the last 6 weeks, you have been working just… enormous amounts. And there have been no holidays to break it up. We didn’t take Thanksgiving as a holiday here.

K: Yeah. Japanese thanksgiving.

C: Right.

K: It fell on a Monday, and I – Monday’s my day off.

C: Yeah. And… so, we just… kind of worked through it. And all 3 of us were working, and I think that… that’s been… usually off-set – and I know I said this earlier – it’s been usually off-set by a trip. But we haven’t been able to do that. So… yeah.

K: Yeah, working 16-hour days definitely – definitely was too much for my body.

C: Yeah

K: Not getting enough sleep.

C: You’re in the dissertation phase, so you’re writing your dissertation. You’ve been working really… hard on that. And really hard at your practice, and… hard in our new venture. Like, working 3 jobs.

K: Yeah.

C: It’s exhausting. And

K: And I think I didn’t pay attention to my diet. I didn’t pay attention to… keeping myself hydrated. And I just ran myself into the ground. And now, not having Rasta here living with us, I just feel so… lonely.

C: Mhm.

K: And so… alone. And lost. And there’s this thing that happens because you’re autistic that, when I’m 100%, I get 75% of what I need from you.

C: Mhm.

K: And when – that percentage goes down like in lockstep. So, now I’m functioning about 10%. And so… you have to subtract that from what you’re able to give me. And so – it’s like bare minimum. I’m getting bare minimum from you. And I think this is important for people who are with someone autistic. That they understand that this is not pointed. This is not… pretend. This is not… done with any malice.

It’s just, like… I wrote you – so, today with the grocery shopping I think is a good example. I wrote you a note last night, and I sent it to you via Line. I usually send them to you via email, but I was so too sick to sit up and write an email.

C: Mhm.

K: So, I did it by text from my iPad. I hate sending emails by my – by iPad. But because I sent it to you by Line, you woke up last night and responded to it. When you woke up last night and responded to it, I thought, “fuck. He’s not going to remember anything that I asked him to do, and he’s not gonna check his Line.” I did not send you an email because I was too sick, and I didn’t have the spoons to send you a thing that says, “check your Line messages.”

C: Yeah. The same reason you didn’t send an email in the first place.

K: Yes. So… I knew that when I woke up this morning, I was going to be… in the catch-22 of “reward me because I did everything right” on your side of the street because you want emotional reward when you put yourself out for me. Like everybody does when they put themselves out for someone. And in the emotional reality that you did it all wrong. And that’s… really painful for both of us, I think.

C: Yeah. Yeah. Because I did check my email. I thought – I’ll check my email in case there’s anything that’s changed. And then when you mentioned later, “I sent you Line” I thought, “okay, yeah. I remember waking up to that, reading it, and going back to sleep.” Because I’m hyper-vigilant in my sleep. But I also didn’t remember what happens in my sleep unless I’m reminded of it later.

K: Yes.

C: So, yeah. It’s a… it’s a tricky thing. And so, I don’t feel… attacked or criticized or anything by you saying this. I do think that if you… have a partner who is autistic – is what I can speak to, but I’m assuming it applies to ADHD and other kinds of neurodivergence – that the specificity of communication that I need from you in order to do things the way that you want… takes a lot of effort.

K: Yes. At the exchange rate of 75%

C: Right.

K: Like, if I can get you to do something above 75% that I want, it’s a banner day.

C: Mhm.

K: And that’s usually… leaves you feeling very oppressed and upset. So, I’ve set my expectation at 75 because I can get 100% of what I want from you, but it means standing over your shoulder and telling you step by step by step.

C: Right.

K: And that’s a really negative dynamic in a romantic relationship.

C: Yeah.

K: So, I don’t do that. So, I’ve said, “hey, I’m willing to forgo this 25% if you’re willing to forgo that I’m never going to be ecstatic with what you do.”

C: Mhm.

K: “It’s going to be really hard for me to be like jump up in the air and be like oh my god you’re perfect.” When I’m like… mm. I can see these things. So, the – usually when you do something for me, it needs some sort of adjustment.

C: Right.

K: And… so, on your side of the street, it’s… you’re hardly ever able to get “wow, you’re amazing.” And on my side of the street, I’m hardly ever able to get exactly what I want.

C: Yeah. I do think that’s the tradeoff. And… we’ve tried other tradeoffs with that, and that seems to be the one that – that has both of us feeling as good as we can on a consistent basis.

K: Yeah. And I think that, when I’m sick, I’m… less specific about it. I think that I do give you, like, more celebration. But when I’m sick, there’s no celebration when it’s wrong. I’m just like, “no. This is wrong.”

C: Yeah. Yeah.

K: Because it has to be so… precise for me to get better.

C: Yes.

K: Like, what I eat has to be perfect. And what I drink has to be perfect. Like… today, for example, I – there has to be floating, full chunks of ice in the water. It has to be ice cold, and I can take three sips at a time. If I take more than three sips of water, it will cause me physical pain. But I have to take three sips of water at regular intervals to stay hydrated. But not so much that I’m activating my GI system.

C: Right.

K: It’s a whole thing. (laughs) It’s a thing, man. Speaking of which… it’s time for my three sips of water.

C: We go through a lot of ice at this time. Which is okay because we have an automated ice maker. So, I just – I’m sure to keep it filled up, so that we always have ice.

K: Yeah, and that’s – that is the one thing you do perfectly. We’ve never run out of ice.

C: Thank you.

K: You are perfectly obsessed with us always having ice.

C: I am, and I think it’s because the ice maker doesn’t work perfectly.

K: What do you mean?

C: I mean that it doesn’t actually work right. So, the way that the ice maker works is it dumps all of the ice right in front of the sensor that determines whether or not to make more ice. So, if I don’t – and I have tested this out but not so much that we’ve ever run out of ice – but if I don’t open the ice drawer and shake it to level out the ice, it just doesn’t make more ice even if we’re almost out.

K: Well and plus, there’s another component, we have to fill up the thing of water that attaches to the ice maker.

C: Yes.

K: And so, if that thing runs out of water – and you’re always very careful to keep that full of water and keep that clean

C: Right.

K: And connected. Because the connector has to be cleaned or it gets gunky and gross. And there will be stuff in the ice. (laughs) If the hose that sucks into it – so, we have clean ice.

C: Yeah, but it’s different – in the U.S., we had one that’s hooked directly into the water supply, so we never had to worry about that.

K: Yeah. I think most refrigerators that have an ice maker in the U.S. are directly hooked up.

C: I think in the U.S., yeah. I think in Japan

K: It’s a really common thing.

C: Yeah. I think in Japan, it’s a lot more common to have things that don’t hook up to a water supply.

K: Yeah.

C: There seems to be no assumption that there will be a water supply. Like, the… washing machines, the driers, the dishwashers – all of them have ways to… either use a completely external water supply like our ice thing does

K: Yeah.

C: Or have an extremely long hose that goes to the water, so that you can get it because of the… centralization. We have basically 3 spots in the apartment that have water, and every apartment above and below us has exactly the same 3 spots.

K: Well, and I have a girl friend who wrote a book – I can’t remember the name of the book she wrote – but when she moved here 25 years ago, she moved to… a little tiny town out in the middle of nowhere, so that her husband could… become a karate master. They lived in a dojo, and they didn’t have running water.

C: Mhm.

K: And she raised 3 kids here. And I was just like – her story is so fascinating because she met this man, and they became good friends. And they drove around Europe together, and then ended up in Japan. And he’s like, “I’m gonna live here.” And she’s like, “okay. I want to live here with you as well. Will you marry me?” And he was like, “yes, I’ll marry you.” And… they’ve been together ever since. And her and I bonded over the fact that we both proposed to our husbands, and that we both – kind of – our lives just kind of followed our husband’s aspirations but not in a way that it was like “poor us.” But in a way that it led to something really cool.

C: Right. So, I want to be clear that you did not propose to your husband.

K: Yes, I did.

C: You proposed to me, and then I became your husband.

K: Yes.

C: But I was not your husband at the time that you proposed.

K: I have proposed to you numerous times since we’ve been married, so I have proposed to my husband.

C: Okay, this is true.

K: And she proposes to her husband.

C: Okay. And I propose back.

K: Yes.

C: At a different time. You’re not like, “will you marry me?” And I’m like, “will you marry me?” It’s not a compete – competitive like that.

K: Yeah, no. No. So, her and I bonded over that. And then… she lives way out in the boondocks that are really far, so we don’t see each other very often. But we’re… in touch electronically.

C: Yeah. In Japan, it’s called “inaka.”

K: Yeah.

C: Which translates to something like “the middle of nowhere.”

K: Yeah. She’s big-time inaka, and she’s proud of it. And her kanji’s beautiful because she spent… that’s how she spent her days.

C: Mm.

K: She spent her days doing calligraphy.

C: See, I think no matter how much time I spent on calligraphy, mine would just be awful. It’s actually worse now than it was when I first started learning it.

K: Oh, that is such a misrepresentation.

C: Is it? You think it was awful back then, too?

K: I think it’s a misrepresentation that you’ve bene practicing it.

C: Oh. Oh, okay.

K: (laughs)

C: It’s call-out Chad time?

K: Yes.

C: Okay, yes. I have

K: Like, has anybody been paying attention to this entire episode?

C: (laughs)

K: Kisstopher is sick and just reading Chad for filth.

C: I have not been practicing writing kanji, and I have made the specific decision that I’m never going to practice writing kanji aside from our address because… I don’t write in English, either. So, why would I practice writing in Japanese? So, I do practice reading it.

K: Well, and aside from our name and address, we don’t – nobody wants us writing in kanji.

C: Right.

K: It’s no…

C: And sometimes even then, they’re like, “no, no. Let me copy it for you.”

K: Yeah.

C: Except at the bank. At the bank, they’re like, “we’re sorry, we can’t even touch this paper.”

K: Yeah.

C: “And if you have made a mistake, you must fill it out [again].”

K: Yes.

C: “Let us bring you 50 copies, so you can get one of them correct.”

K: Yes. So… banking is rather strict here. So, I’m super proud – Chad did something that was really awesome for me today. He figured out a way for us to record from bed because he has figured out that I am so sick all of the time that we actually need to record from bed. So, we’re using the new microphones but still recording from bed. And… Chad’s using like a boom mic – excuse me – like a boom mic system.

C: Yeah.

K: And I’m using a mic stand on a little tripod. It’s the smallest tripod I’ve ever seen in my life, and it’s so cute. So, it’s set like on the bed – it’s set on this beautiful leather… thing I bought him.

C: Portfolio.

K: Portfolio I bought for you like over 20 years ago.

C: Yes.

K: Yeah. It’s absolutely stunning. Sorry, it’s leather. It’s gorgeous. That’s the whole thing of it.

C: Yeah.

K: And then… on top of that is the tripod for the mic. And then this ginormous mic. Like, the mic is bigger than the tripod.

C: I’ll admit, I was dubious when the tripod arrived. I was like, “I don’t see how there’s gonna be enough room for the cable and that” because it’s the fat XLR connector. So, I – I just was astonished when it actually worked.

K: And so, you’re on a – that’s a boom, right?

C: Yeah, that’s a boom. Yeah.

K: So, describe it. Because it’s really interesting – when you were setting it up, I didn’t – I knew you what you were doing, and I was like, “I hope it works for him.”

C: (laughs) So, it’s a swing arm boom. And… it’s got the mic cage, and I – right now, I have it pointing horizontally, but it can also go vertically. And I have it attached to my desk, which is near the bed, so… most days, if I don’t have meetings, I work out near the bed, so that you and I can talk on days that you’re not working. On days that you and I both work, we go to our separate corners, like we’re boxers. Like we have to go to our separate corners. So that I’m not… hearing your – your therapy sessions. But…

K: Yeah, because I like there to be three doors, and I’m on the side of the house that has the kitchen because my office is on the side of the house that has the bathroom.

C: Yes.

K: So, it was like, “oh, this doesn’t work.” Because I would just do paperwork.

C: Right.

K: I wouldn’t see clients there. And then, when we had to start seeing clients, I was like this makes no sense. Because you can’t go to the bathroom because, even though you can’t hear me, if anyone hears a toilet flush, they’re going to think that person’s right in the room. Because our toilet is really loud.

C: Yeah, even though it’s a low-flow toilet. I don’t know why it’s so loud. I think

K: Like, the last bit of water – at the beginning and the end of the flush

C: Yeah. It’s very

K: It’s like huge like – it echoes through the hallway. It’s so weird. It’s so weird.

C: But you know the thing about it is that

K: I feel like flushing the toilet so they can hear it, but I’m not going to.

C: Yeah.

K: It is really loud.

C: It is quite loud.

K: It is cacophonous.

C: But we’ve been living in this apartment for 12 years now.

K: Yeah.

C: Yeah, 12 years. No, 13 years now.

K: Mm.

C: And it has never once clogged.

K: Knock on wood.

C: Okay, I’ll knock on wood, but I’ve said this before, and it still hasn’t.

K: And I’ve always knocked on wood, hello.

C: But when we were in California, we had a plunger because it would happen on a regular basis.

K: Yeah. WE had so many plumbing problems in the house.

C: Yeah.

K: We had – we replaced the pipes twice.

C: Yes.

K: In a 10-year span. And it was – it got clogged on a regular basis. It was just…

C: It was very odd. But here, the

K: But they were low-flow toilets. But I don’t think that America gets toilets in the way that the Japanese do.

C: Yeah, I don’t think so.

K: Because our toilets do everything.

C: So, the other thing is that… even if the noise wasn’t there – if the only time that I could use the bathroom was between clients for you, then you wouldn’t have any time to use the bathroom.

K: Yeah. But the only reason that exists is because of how lo – how loud the toilet is.

C: Yeah.

K: It’s really loud. It’s really quite obnoxious.

C: It really is.

K: I don’t like it. Every time I flush it, I feel like, “ew. No privacy.”

C: (laughs) There really isn’t because it – it backs directly onto our neighbors for the aforementioned plumbing centrality.

K: Yes. We hear other people flushing their toilets.

C: Yes.

K: and I’m like, “what the hell?” So, I don’t – I don’t like it. But the way that we’ve flipped our house, our bedroom is next to our neighbor’s living room.

C: Yeah.

K: so, I like that privacy.

C: And there’s a concrete wall between us. So, I feel like I only ever hear 2 sounds from any neighbors. One is toilets flushing. Which I have no idea how far up and down the building they hear that.

K: And they hear our vacuum.

C: Yeah. And then the other one is that there’s a piano teacher somewhere in the – somewhere in the building.

K: Yeah. We don’t know where. I think on – on the 5th floor? I’m not sure.

C: I’m not sure. It carries throughout. And it’s actually part of our agreement when we bought this – that we would not play the piano outside the hours of 8 am to 8 pm.

K: Yeah.

C: And they never do, so I have no complaints.

K: Yeah.

C: Like, you know. But I could tell

K: So, there’s this drummer girl on YouTube that I love that… Nadia – I don’t know what her last name is

C: Nandi.

K: Nandi.

C: And I don’t remember what her last name is, either.

K: If you look for the little girl who challenged the Foo Fighters to a drum off, you’ll find her.

C: Yeah. Dave Grohl. I think if you just put in “Nandi” you’ll probably find her, but if you put in “Nandi Dave Grohl” you’ll definitely find her.

K: Or if you put in “little girl beats Dave Grohl in drum off”

C: Yeah.

K: Then you’ll find her. And the first thing I said was, “I would hate to be her neighbor.”

C: Yes. That is the first thing you said.

K: And then her very first song was about her grumpy neighbor

C: (laughs)

K: Being angry that she played the drums all day Saturday. So, she doesn’t play the drums – she has like a really strict routine where she doesn’t play it every night. I just thought it would be so obnoxious to be next to the 9-year-old who’s mastering every instrument in the world.

C: Mhm.

K: You know. We don’t think about the cost of genius for the people around it.

C: Oh, yeah. Yeah. Just the… the impact on the people around.

K: Yes. So, like, in the summer – how y’all kept me hot – it’s now winter, and y’all are keeping me cold. Because we can’t turn the heat on. And I’m freezing.

(laughter)

K: And I’m sick. Because, in Japan, we don’t have central air. But in the Untied States, we could – like, the furnace was so noisy. It was obnoxious. It was noisier than the aircons are here.

C: Yes.

K: The individual heating and cooling units.

C: Yeah, and we had our issues with that, too. I’d have to go wiggle the wires to make it come on. It was a whole thing.

K: Yeah, so Rasta when you hear this, don't feel bad that you haven’t been hugging and kissing your mother every day. That you don’t come over to snuggle me. Because that’s like the whole point is that you have a life. And that you have a private life. And that you’re able to build an intimate life with whomever your partners may be. I don’t know why I pluralized partners, but you know.

C: Maybe he’ll be poly. He’s not at the moment, but… you never know.

K: No. Our kid is so monogamous.

C: (laughs)

K: He’s so mono. But I just want you to know that you shouldn’t feel bad or guilty about it. Instead, you should feel loved that I’m prioritizing your mental and emotional health because you should not be anybody’s wooby. And I tell that to everybody. If you’re your partner’s wooby, that’s not appropriate. Being your partner’s caregiver and support person, that – you know – hey, that’s part of being with someone who’s disabled.

C: Mhm.

K: And there are times where, even when I’m sick – like even today there was some caregiving I had to do for Chad. Because he is disabled. And that’s just the name of the game. And there are days where he is super sick, and he has to do caregiving for me because I’m disabled. That’s just the name of the game. And so… I feel like just saying, “fuck Dr. Phil.” You can be a caregiver and still have a romantic

C: I think if you don’t ever want to be somebody’s caregiver, just be single.

K: Yeah.

C: Because there’s no guarantee that anybody will be… as healthy one day as they were the previous.

K: Well, and who doesn’t want to give – like

C: “I don’t care about you.”

K: Yeah.

C: Like, “I don’t want to care about you.”

K: Yeah.

C: Yeah, that

K: I like Squirmy and Grubs because she said like – not the movies – “who doesn’t want to feed their partner popcorn?”

C: Okay.

K: Like, how is that not sexy and cute? And then like kiss their partner. Who doesn’t want to do that?

C: Yes.

K: And she gets like the best seats everywhere she goes. Her partner’s in a wheelchair, and she’s like looking at all of the positives. And she says when she goes out without her partner, and she has to carry stuff, she’s like, “where is Shane? Where’s Shane?”

C: (laughs)

K: “I hate carrying things.” Because he carries everything for her. And she’s like, it’s so weird. So, there are – there are pluses and minuses in every dynamic.

C: So, do you feel that way? Because when we go out, I carry everything for you.

K: No, I always have a backpack.

C: Oh, yeah. For balance.

K: Yes. Because I’m very top-heavy.

C: Yes.

K: I have ginormous boobs that are size EE. So, I have to have a backpack as a counterbalance, and I use walking sticks to help with that.

C: Yes.

K: Or else it’ll cause back problems. So, why do you think you carry everything? How’d that become part of your delusional narrative? Because that’s delusional.

C: I think I carry packages? I’m not sure.

K: What do you carry, babe?

C: See, now I’m wondering, what do I carry?

K: What do you carry? Because you can barely manage your own bag, and you have one walking stick. So

C: Okay, yeah. These days.

K: You wear dark glasses, and you walk with a walking stick, and you have a very pronounced

C: I think when

K: Limp.

C: When I was younger

K: You have severe mobility issues.

C: When I was younger

K: When did you ever carry my stuff? Never.

C: There were years that I carried your son on my shoulders.

K: Okay, that’s your baggage. Not mine.

C: (laughs)

K: I told you not to. I told you not to.

C: You did.

K: The fact that you were carrying him when he was 12 on your shoulders, that was an obscenity.

C: That was just because he couldn’t see over the crowd, so he just hopped up on my shoulders so he could see at the aquarium.

K: Yes. Yes. That’s completely normal. Like, “just hop up on my shoulders 12-year-old.”

C: Guys do it with their girlfriends, so… how is that not normal?

K: At rock concerts?

C: Yeah.

K: Okay. You got me there.

C: Thank you.

K: Well, we hope that this was entertaining, and I love you Rasta. And I hope that you’re feeling warm and comfy in your jammies. Because Rasta – we all got new winter jammies. It’s something that we do every 5 or 6 years is we all get new winter jammies. And they match. And we love them. And the fabric is amazing. But they are not paying us for any sort of shoutouts. We will not say their name.

C: Thank you. Because yeah.

K: Yeah, because they could’ve paid us 100 bucks, or they could’ve just given us free jammies.

C: Just free jammies. Even

K: And we would’ve announced who the jammy company were.

C: Yeah.

K: Would’ve given them like a good midroll review and everything.

C: Yeah, midroll review. Yeah, that’s what it is.

K: Yeah. That’s what it’s called. A midroll review.

C: You’re totally right.

K: That’s like in the middle of the podcast, you mention something rather than at the beginning or end so people can cut it off. That’s a midroll.

C: Yeah.

K: That’s the linga franca. Is that – that was off. That was awkward.

C: That’s the lingo. Linga franca means the language of money.

K: Yeah. That’s what I meant. So, yeah. Leave it in because that was cool.

(laughter)

K: So, we have a really cracking take two with lots of cool stuff going on with our project. With Chad’s book. New stuff has happened.

C: Yeah.

K: That we’re very excited about, and we hope that you follow us on over to the take two. And if not, we’ll talk to you next week. Bye.

C: Bye.