

Someone to Be With

Friendship, therapeutic companionship, and the work of undoing aloneness

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A client can have people to call in a crisis and still have nobody with whom to spend an ordinary afternoon. They may be listened to when something has gone wrong, yet feel unsure whether anyone would want their company when there is nothing to explain. The loneliness is particular: somewhere along the way, being together has become something that needs a reason.

In [A Place Among Others](#), I ask readers to become more precise about the connection they miss. Friendship may offer shared pleasure, practical help, familiarity, an interested listener, or room to remain oneself while belonging. The therapist's task begins with the same precision. What is absent from this person's relational life? What have they already tried? And what happens to that absence when they are here with us?

Sometimes the therapeutic relationship offers a form of relationship that has been missing: dependable attention, continuity, room for feeling, and another person who remembers. Therapy can make those qualities available in an actual encounter. They become something the client can experience, question, dislike, receive, and perhaps eventually recognize elsewhere.

This also asks something uncomfortable of us. We can reproduce the absence. A client who earns friendship through usefulness may become exceptionally useful to the treatment. Someone accustomed to entertaining others may keep us interested while remaining unknown. Someone whose wishes have little room elsewhere may become an agreeable participant in a therapy organized around our wishes for them. The work can proceed while the loneliness remains intact.

The container that may be missing

A relational container is an ordinary arrangement with emotional consequences. Someone makes time, remembers what matters, follows through, and can hear a difficulty without immediately changing the subject. There is enough reliability for experience to continue across encounters. There is also enough room for two people to be different.

For some clients, the missing element is continuity. They have intense conversations but little dependable contact. For others, it is permission to need something, or the possibility of being liked without having a problem to solve. Another person may have reliable, loving friends whose lives have become crowded by illness, parenting, or work. Their loneliness belongs partly to conditions that neither insight nor a better request can immediately change.

Therapy provides an unusual structure: an agreed time, protected attention, a continuing relationship, and responsibility for attending to the client's experience. Within that structure, the client may discover what it is like to arrive without organizing the encounter for someone else. They may also discover how much they dislike needing that structure, how suspicious they are of paid attention, or how painful it is to leave it.

Those responses belong in the container too. If we welcome closeness but become defensive about its cost or limits, the client may learn that certain truths threaten the relationship. The frame becomes more trustworthy when its realities can be spoken about. Fees, time, availability, interruptions, and eventual endings influence what our care means.

We should be able to say that the relationship matters and remain honest about its form. The therapist's responsibility gives the client freedoms they do not have in friendship. They do not have to balance our disclosures, provide us with company, or protect our sense of being helpful. Friendship has its own possibilities: mutual choosing, shared life, spontaneous contact, and an interest in each other's experience that extends beyond a professional purpose.

Undoing aloneness: help that reaches the person

Diana Fosha places undoing aloneness at the center of AEDP. Her account concerns the experience of facing intense emotion without adequate relational help, and the possibility of encountering that emotion with someone actively engaged in helping. In *Wired for Healing*, she emphasizes that sympathetic presence alone may be insufficient when a person needs assistance staying with and making use of difficult experience. [1]

The clinical question is specific: what is this person still having to do alone, even while I am here? They may be speaking freely while monitoring whether we can bear what they say. They may accept our account of their loneliness while feeling that the actual wish has been missed. Our presence has to become useful to the experience they are having.

Lipton and Fosha describe an AEDP stance in which the client can affect the therapist and encounter a responsive person. [2] This offers a demanding standard for companionship. A client should be able to discover that their words change our response. If they tell us that a question feels intrusive, our next move needs to show that we heard them.

Undoing aloneness can therefore begin with a correction. "You keep asking what I feel. I want you to hear what happened." We may need to put down a well-intentioned intervention and listen differently. The client becomes less alone partly because we join the experience they are trying to bring, rather than requiring them to join the experience we are trying to produce.

For a lonely client, this can matter beyond the session. There may be a growing distinction between being accommodated and being accompanied. Someone can listen politely while remaining unavailable to what matters. Someone else may stumble, ask, receive correction, and stay involved. That difference can help the client examine the relationships they have, without turning our way of responding into a standard every friend must meet.

Co-regulation and the possibility of companionship

Co-regulation concerns how people influence one another's emotional experience. In clinical practice, we attend to whether that influence helps the client remain present, feel, think, and choose. A quieter voice, a clearer explanation, a pause, or help organizing an overwhelming situation may make experience more manageable. The useful response depends on the person and the moment.

Williams and colleagues distinguish a person's tendency to seek interpersonal emotion regulation from how effective they perceive it to be. [3] Reaching toward people and finding

that reaching helpful are different matters. Clinically, someone may contact friends often while receiving little of what they need. Another person may rarely ask, although a particular relationship has offered useful support. Frequency alone tells us little about either situation.

Companionship includes something further. We can want another person because life is more enjoyable, interesting, or bearable in their company. Shared attention need not be organized around distress. A friend can be someone with whom to notice a ridiculous sign, enjoy a meal, argue about a novel, or sit through a disappointing film.

Fosha's distinction between the attachment and intersubjective strands of AEDP is useful here. One concerns help and protection when experience overwhelms; the other includes companionship, play, shared interest, and enjoyment. [1] A therapist may be highly competent at helping a client through distress while scarcely meeting the person who is curious, funny, opinionated, or simply glad to be with someone.

Trevarthen and Aitken's developmental review describes active engagement with other people as important to early communication and learning. [4] Its application here is a clinical inference: relational life deserves attention beyond the management of difficult states. Infant research does not establish how an adult therapy session should proceed. It does invite us to take shared interest seriously.

A client's enjoyment of our company need not immediately be interpreted as avoidance. Nor does every pleasant exchange need deepening. Sometimes the experience worth attending to is that two people found something interesting together, and the client did not have to be distressed to have a place in the room.

When the therapist misses the friendship that is wanted

Consider an independently invented example. Elena, recently divorced, has several friends who check on her. They ask how she is coping and encourage her to talk about the separation. She appreciates their care. She also misses having someone to wander through a shop with, cook beside, or call about something unimportant.

In therapy, she says, "Everyone is very good to me. I just feel like a person people are looking after." The therapist wonders whether she has difficulty letting others know her needs. Elena becomes quieter. Asked whether that fits, she says, "I've told them. They keep offering to talk. I don't want another talk about my divorce."

Her correction changes the formulation. Disclosure is already happening. The missing experience is ordinary company, including the freedom to be more than someone recovering from a loss. The therapist acknowledges having moved too quickly toward a problem in how she asks. Elena says she sometimes feels a similar pressure here: she arrives thinking she should bring something important enough to justify the hour.

They become curious about that pressure. Elena expects that describing an enjoyable visit to a neighborhood market would be wasting therapeutic time. She wants to tell the story, including an argument she overheard about tomatoes. With her agreement, they give the ordinary experience some room, without deciding in advance what it must reveal.

She enjoys telling it. The therapist is interested. Then Elena feels angry: "It's embarrassing that I pay someone to want to hear this." A moment that seemed warm has become painful. If the therapist rushes to defend the genuineness of the relationship, Elena will have another person's feelings to consider.

Instead, they acknowledge both realities. The interest was real, and the arrangement is professional and paid. It cannot give her the unpurchased, freely chosen place in someone's everyday life that she wants. Elena says she feels relieved that the therapist is not trying to convince her the hour should be enough.

This exchange offers something consequential without resolving the loneliness. Her account has changed the therapist's account. Enjoyment and objection have both remained welcome. The relationship can contain a wish that exceeds what it can supply.

Being needed, being enjoyed, and being known

A person may enter friendship through the role they know best. They become the adviser, organizer, dependable helper, or entertaining companion. These can be expressions of real affection and ability. Difficulty arises when the role becomes the only dependable way to belong.

The client article separates four places to look: whom we choose, what we expect, how we participate, and where we keep investing. In therapy, those distinctions help us avoid explaining every difficulty as fear of intimacy. A client may be able to receive care but keep choosing people with little interest in reciprocity. They may have interested friends yet rarely make their own wishes visible. They may be facing a genuine shortage of available people.

Several responses can coexist inside the same person. One wants company; another resents asking; another prefers to become indispensable rather than risk an uncertain invitation. We can hear the competing concerns without deciding which is the client's truest voice. Each may know something about the costs of connection.

We also need to examine the place we reward. Do we become most animated when the client brings a problem we know how to solve? Do their thoughtful interpretations make us feel effective while their ordinary preferences leave us searching for clinical significance? A person can become accomplished at therapy in the same way they became accomplished at friendship: by anticipating what makes the other person want them there.

Bowen's account of differentiation directs attention to approval pressure and the capacity to retain a considered position within relationship. [5] Applied to the therapist, the question becomes whether we can remain useful when the client is unimpressed, disagrees, or wants something we cannot provide. Our need for their approval deserves a place in supervision. The client should not have to manage it for us.

What truthful company can offer

In Tolstoy's *The Death of Ivan Ilyich*, Gerasim provides concrete bodily assistance and a kind of company that Ivan finds difficult to obtain elsewhere. Much of the surrounding household participates in a pretense about his condition. Gerasim can acknowledge the reality and attend to the person living through it. [6]

The scene is often remembered for its tenderness. Its practical specificity matters too: Gerasim notices what helps, supports Ivan's body, and responds to his requests. Recognition has consequences. Ivan's suffering does not become less real because someone stays with him; it becomes possible to experience a measure of comfort within it.

This is a literary scene shaped by illness, service, and unequal social position. It cannot supply an ideal of the endlessly available therapist or friend. Its question for our work is whether we can acknowledge what is actually happening and let that acknowledgment affect what we do.

For a lonely client, truthful company may involve admitting that their life currently lacks something essential. We need not reinterpret every absence as an opportunity for growth. We can help them examine what might change while recognizing what cannot be supplied today. A wish may become clearer before there is someone available to answer it.

Taking the learning into friendship

Elena chooses a small experiment. An acquaintance has mentioned enjoying the same market. Elena asks whether she would like to go together for an hour the following weekend. Her prediction is that the invitation will be heard as a request for emotional caretaking. She makes the activity and time clear, leaves room for a refusal, and keeps a plan she could enjoy alone if the other person is unavailable.

The acquaintance agrees. They enjoy some of the visit. Conversation becomes awkward when Elena mentions the divorce and receives advice she does not want. She says she would rather keep looking around, and they do. Later she feels pleased about the outing and lonely again when she returns home.

In reviewing it, the therapist resists declaring a breakthrough. Elena's prediction was only partly borne out. Advice arrived, but her preference could also be heard. There was ordinary company without immediate intimacy. She is interested in another outing, while recognizing that this acquaintance may never be the person she calls in grief.

The therapist also asks what Elena contributed to the encounter. Did she show interest in the other person? Was the time agreement respected? Could both shape what happened? Friendship includes the other's experience. A legitimate longing does not entitle us to unlimited attention, and having a limit does not make the other person incapable of care.

The modules use NOTICE to keep the learning answerable to experience: notice the encounter, open to a possible explanation, test it, initiate a small experiment, check what happened, and extend the learning. Elena's mixed result supplies the next question. She can carry both the enjoyment and the remaining loneliness forward, rather than having to turn the outing into evidence that the problem is solved.

A therapist might select one relevant passage from [A Place Among Others](#) or one module from [Friendship, Loneliness, and Community](#). Agree on a small task and review the result together. Reading, private rehearsal, an access inquiry, or deciding to pause can be more appropriate than contacting someone. The material gives the next conversation something specific to return to; completion does not establish change.

A relationship that can survive disappointment

The therapy itself will include missed meanings, limits, interruptions, and losses. Its usefulness depends partly on what happens when these become visible. A client may discover that disappointment can be spoken about without having to withdraw the complaint or end the relationship. They may also discover a limitation that requires a change in treatment.

Eubanks, Muran, and Safran's meta-analysis found an association between rupture resolution and better treatment outcomes. Its separate analysis of rupture-resolution training did not find a significant overall outcome benefit. [7] The findings support attention to repair while leaving important questions open. They do not make a well-worded acknowledgment sufficient.

Repair has to touch the event. If we repeatedly interrupt, we need to change how we listen. If we misunderstand an access need, the arrangement may need changing. If a limit remains, we should help the client encounter the actual limit rather than offer warmth that obscures it. Their anger can deserve company even when our answer cannot become yes.

It matters, too, that successful therapy does not require our becoming uniquely irreplaceable. A client may need a long period of dependable support. We can respect that need while helping them build a life in which several people and places can matter. Plans for breaks and endings belong within that continuing work, alongside grief and the reality of available support.

Carrying the pathway into the week

The five modules in [Friendship, Loneliness, and Community](#) offer a practical way to carry this inquiry between sessions. A therapist and client can choose the part that fits their work, then return to what actually happened.

Module 1, *What Kind of Connection Am I Missing?*, helps the client bring this distinction into focus through one ordinary encounter. In session, we might return to the moment after a gathering: what had they hoped would happen, what actually happened, and what remained wanted? The answer may concern recognition, shared pleasure, practical help, or rest. The therapist can help the client carry one particular wish and one expectation about its reception into the next module, without turning a wish for company into a demand for greater sociability.

Module 2, *Familiar Roles and the Friends We Choose*, makes these questions usable through comparison. The client considers two friendships, including one with more room for them, and separates selection, expectation, participation, and continued investment. We can ask whether the same role appears with us, while leaving room for a different account. Elena's correction matters here: an explanation about hiding her needs would miss the needs she has already expressed. The clinical task is to locate where a change might help, then carry a considered choice into the next encounter.

Module 3, *Reaching Out, Being Known, and Receiving Care*, brings the inquiry into a manageable exchange. The client distinguishes what they wanted, what they asked, what answer arrived, and how they received it. In therapy, we can help shape an invitation that fits the actual wish and leaves the other person free to answer. We can also attend to what follows a welcome response: does the client receive some company, begin earning it through favors, or discover that the offer does not fit? Receiving care remains an experience to explore, rather than an outcome to require.

Module 4, *Disappointment, Repair, Limits, and Loss*, helps distinguish what kind of response the event requires. Elena may want less advice; someone else may need to acknowledge a confidence they breached or stop pursuing a repeatedly unavailable friend. The therapist can help separate a request for clarification, responsibility for harm, a necessary limit, and grief for what cannot be obtained. Our own repairs give this work an immediate setting. We also attend to the client's impact: an apology should not require the injured friend to provide reassurance, and an unanswered request remains unanswered.

Module 5, *A Sustainable Place in Friendship and Community*, asks what can continue beyond an isolated good encounter. Elena might consider another market visit, while looking elsewhere for a closer conversation and preserving time she enjoys alone. Another client may need a shared organizing role, transport, a quieter setting, or permission to receive help. Together we review the actual costs and welcome: is there room to contribute, receive, differ, and leave? A return visit can supply further information. The aim is a workable rhythm of belonging, with enough flexibility to revise it when health, obligations, or relationships change.

Keeping someone in mind, and returning to the world

In Coleridge's *This Lime-tree Bower my Prison*, the speaker remains behind while his friends walk. His attention travels toward the landscape he imagines them seeing, and especially toward Charles Lamb's possible enjoyment. The poem moves between separation, remembered companionship, and the immediate world around the speaker. [8]

Its movement offers an image of connection that can remain alive during absence. It is no instruction to be grateful for exclusion or to replace unavailable company with imagination. For some clients, however, remembering a particular encounter can help them retain something of what occurred: someone was interested; a preference was heard; a disagreement did not erase affection. Others will find that memory brings little comfort. We need to discover which is true.

The therapeutic relationship may become one such encounter, held in mind between sessions. Its value can extend into the client's discernment: they recognize an available person, stop investing in repeated disregard, allow a modest pleasure, or find words for a kind of company they had not known how to name.

Undoing aloneness begins wherever the person no longer has to carry an experience entirely by themselves. Companionship gives that work a wider horizon. There can be someone to help when life is overwhelming, someone to enjoy an ordinary afternoon with, and room to be a person whose presence matters across both kinds of day.

References and further reading

1. Fosha, D. *Wired for healing: Thirteen ways of looking at AEDP*. AEDP Institute. Sections VII-VIII distinguish undoing aloneness, active help, and the attachment and intersubjective strands of the therapeutic stance. Clinical theory. [Read](#).
2. Lipton, B., & Fosha, D. (2011). Attachment as a transformative process in AEDP: Operationalizing the intersection of attachment theory and affective neuroscience. *Journal of Psychotherapy Integration*, 21, 253-279. Author manuscript, particularly pp. 12-17, on responsive therapeutic engagement. [Read](#).
3. Williams, W. C., Morelli, S. A., Ong, D. C., & Zaki, J. (2018). Interpersonal emotion regulation: Implications for affiliation, perceived support, relationships, and well-being. *Journal of Personality and Social Psychology*, 115, 224-254. Abstract reports five studies distinguishing tendency and perceived efficacy; no psychotherapy outcome claim is drawn here. [Read](#).
4. Trevarthen, C., & Aitken, K. J. (2001). Infant intersubjectivity: Research, theory, and clinical applications. *Journal of Child Psychology and Psychiatry*, 42, 3-48. Publisher abstract of a developmental review; adult clinical implications here are interpretive. [Read](#).
5. The Bowen Center for the Study of the Family. *Differentiation of self*. Institutional account of Bowen's theory, including approval pressure and realistic dependence. [Read](#).
6. Tolstoy, L. (1886). *The Death of Ivan Ilyich*, chapter VII. Gerasim's practical assistance and acknowledgment of Ivan's condition. Literary interpretation. [Read chapter](#).
7. Eubanks, C. F., Muran, J. C., & Safran, J. D. (2018). Alliance rupture repair: A meta-analysis. *Psychotherapy*, 55, 508-519. Abstract of two meta-analyses; association of resolution with outcome distinguished from the nonsignificant overall training result. [Read](#).
8. Coleridge, S. T. (1800). *This Lime-tree Bower my Prison*. University of Toronto, Representative Poetry Online, text from the *Annual Anthology*. Poem and notes. [Read poem](#).