

Coping with romantic relationships

Sometimes during depression it's difficult just being with yourself. Trying to carry on a romantic relationship with someone else (a boy- or girlfriend, a spouse) can seem all but impossible. And indeed, depression can be a time of trial for a relationship. That said, there are opportunities for deepening a relationship through depression, and strategies to help the relationship survive. To begin, though, what if you're "just looking"?

Don't look now

Relationships get started at the most awkward of times, and you never know when the fates are going to toss someone your way. It's a faintly superstitious but possibly accurate maxim that *"the loved one will appear when you stop looking."* During depression romance may be the last thing on your mind, so you might well find yourself faced with Mr. or Ms. Right. Be cautious, however, and question whether what seems to be love isn't just the deep sense of need that depression can bring.

In general, now is not the time to be hoping to start a romantic relationship. Why not?

- A compatible romantic partner is about the most difficult type of person to find. It takes a lot of energy to track such an individual down – energy that might better be spent in the quest for acquaintances (through whom most of us eventually meet our partners anyway).
- Relationships, particularly in their early stages, can be tremendously demanding and draining. You may not have the energy.
- The drive to find someone might be a product of an intense desire to avoid having to look inward for your own strength.
- There's a good possibility that a relationship formed during depression will be based on reliance on the other person. You run the risk of becoming the object of a rescue mission rather than a partner in a relationship.
- Depression changes your way of relating to people. When you get well, you may seem like a stranger to anyone who met you while you were depressed. And if they fall in love with you while you are depressed, are they falling in love with a helplessness and vulnerability that you may not wish to keep?

Coping with communication

A sex therapist once said that “*Every heterosexual couple is in a cross-cultural relationship.*” By this she meant that males and females are typically raised so differently that they might as well be from different cultures. This doesn’t sound the death knell for these relationships, but it does suggest that, as in a cross-cultural relationship, extra work needs to be done on both sides to understand the communication style of the partner. Family therapist John Gray has gone so far as to suggest that “Men are from Mars, Women are from Venus,” joking that men and women act as though they are from different *planets*, not just cultures.

And so? Communication difficulties can pose enormous problems for human relationships. It can be worthwhile to learn about different communication styles and how they are experienced by others. Oh, and lest gay and lesbian readers feel smug, rest assured: same-sex relationships are rife with communication problems too. Books on communication, such as John Gray’s books, Deborah Tannen’s *You Just don’t understand*, or *Messages: The Communication Skills Book* (McKay, Fanning, & Davis, 1995) can help provide valuable insight.

How might communication become more difficult during depression? One answer is obvious. The depressed person often just doesn’t want to communicate, or doesn’t have the energy to try! It takes motivation to push past this reluctance and try to work on problems.

One strategy used by some depressed folks is to write down what they’re thinking and pass along the notes. This gives them time to concentrate enough to figure out what they want to say and allows them to get it all out without interruption or the self-consciousness of having the other person present. This strategy may not be as warm or personable as in-person contact, but it can be much, much better than no communication at all. It helps immensely if you’ve first had an in-person conversation with your partner to explain why you’d like to try communicating some of your thoughts on paper.

Nevertheless, one of the things most depressed people need is someone to talk to about the depression: Not someone to solve all the problems, just someone to talk to. Your spouse, however, may hear your description of the problems as an invitation to get in there and start offering advice about how to handle things. If this is really what you want, fine. If you were hoping simply to be heard and understood, you are likely to become frustrated.

This interaction pattern is particularly common when the listener is a male. Many males are raised to be “problem-solvers.” If you tell them about a problem, they’ll try to solve it – whether that’s what you mean them to do or not. In fact, if you tell them that you just wanted to be heard, they may get confused. “*Why would you tell me about a problem unless you wanted advice?*”

If the woman in a relationship is depressed, the male may see this as the ultimate test of his problem-solving ability. If he offers his great ideas and the spouse takes none of them or responds angrily that she just wants to be *heard*, he may feel that his efforts have been judged inadequate. He is likely to become resentful in return and be reluctant to offer more help, suspecting that his spouse is only getting him to suggest ideas so that she can shoot them down. Result: a classic pursuit-withdrawal pattern in which one partner tries to explain how she feels, while the other avoids what feels like a set-up.

Males who become depressed have often been raised with the idea that they have to solve their problems on their own, or that emotional problems are best solved by ignoring them. As a result, they may be highly reluctant to tell a partner what's going on. Depression isn't easy to hide, so the partner will know something is wrong and may try to find out what it is. The depressed male may then feel as though his defenses are under attack and will withdraw further, causing the partner to "pry" even more out of concern for his welfare: another pursuit-withdrawal dance.

If a depressed male eventually does discuss the problem, he may do so in a classic male problem-solving style. If the partner responds only with empathy and withholds advice, the depressed male may become frustrated. *"I didn't tell you this so you could get depressed too, I wanted you to suggest something. Your 'uh huhs' and sympathy aren't what I need!"* The nondepressed partner will feel attacked for trying to help and may become resentful; the depressed male will then feel guilty and resentful in return.

These individual differences in communication style don't divide strictly along gender lines. Some men want empathy and receive only advice; some women want advice and are disappointed when they get only empathy. How do you know, and how do you cope?

- Don't assume your partner (or anyone else) will know what you want. Spell it out. If you just want to be heard, say so. If you want suggestions, say so.
- If you find yourself feeling resentful, remind yourself that this comes from not getting what you think you need. It may have more to do with a mismatch in communication than from your partner being deliberately frustrating.
- If you find that you can't communicate constructively about your depression with your partner, consider seeking counseling to help discover what's going on.
- If your partner absolutely cannot change gears (if, for example, he's a big problem solver and you just need to be heard), see if there's anyone else in your life who can play that role. As you discovered long ago, your partner is not and never will be "everything you need" like in the hit songs – no partner is.

Coping with the impact of depression

No matter how well you communicate, depression will still have an impact on your relationship. Know this, expect it, accept it, and work with it. Depression can be a challenge to a relationship, but a challenge doesn't have to be a catastrophe. Here are a few observations and suggestions.

- Most people find that depression puts some strain on close relationships. Avoid giving this too much significance. It doesn't mean the relationship is doomed, that you weren't meant to be together, or that now through your depressed eyes you're seeing your partner as he or she really is. It's possible, but not too likely.
- Depression normally brings on role changes. The depressed person isn't as able to carry out the functions he or she usually does. Try to negotiate these changes with your partner openly and clearly, rather than through passive avoidance.
- It's easy during depression to pin all of your hopes on your spouse or partner (*"He/She will save me..."*) and neglect the things you need to do for yourself. Keep up your own efforts.
- Consider couples therapy, especially if difficulties in the relationship seem to have contributed to the development of the depression.
- Try not to make big decisions about a long-standing relationship while you're depressed – unless you have a lot of outside help and advice. During depression your judgment is so affected that you might see futility and hopelessness in the best of relationships. You might become aware that the relationship hasn't been working for you, but leave the decision to maintain or end the relationship until your mood has improved.
- Push to have your spouse or partner included in treatment planning and education efforts. Family members are frequently left out of treatment unless you ask specifically.
- If necessary, educate your spouse yourself. Some excellent books that can be helpful include *"When someone you love is depressed"* by Rosen and Amador, *"Darkness Visible"* by William Styron, and *"On the edge of darkness"* by Kathy Cronkite.

There's one more special challenge for romantic relationships during depression: Sex. Loss of sex drive is extremely common during depression, and it can also be a prominent side effect of antidepressant medication. If you don't keep this in mind, you might be tempted to wonder *"Why am I no longer turned on in this relationship?"* Your partner, too, may wonder what the problem is, and feel deprived, unloved, or anxious about the low frequency of sex.

It's common for the nondepressed partner to become extremely watchful for signs that you might be open to having sex. Holding hands, hugging, even smiling may be interpreted by your partner as a signal that you're ready for sex when you're not. Result: many depressed people become reluctant to give off any signs of physical openness. They'd like to be hugged, but don't want to feel pressured into sex or lead their partner on. So they hold off, stand back, and isolate themselves physically when they might need physical contact the most. Many relationships become entirely affection-free out of a fear that the nondepressed partner will get "turned on."

Here are a few tips for coping with low sex drive during depression:

- **Alert your physician.** If it seems clearly linked to the antidepressant medication you are taking (rather than to the depression itself), see if a medication change would be in order.
- **Communicate clearly.** It's easy for nondepressed partners to forget that low sex drive is a symptom of depression. They frequently think it's a symptom of the health of the relationship, or your lack of love for them, or their inadequacy or lack of attractiveness.
- **Create a sex signal.** In the past, the two of you probably communicated a mutual desire for sex in a very subtle way – a glance, a hug, a touch. These subtleties are now potentially misleading. With your partner, agree on a clear, overt signal that you are open to having sex (like maybe actually saying "*Let's have sex*"). This way your partner will know when you're ready and won't spend the rest of the time guessing.
- **Create a contact agreement.** Discuss with your partner the kinds of physical contact that you feel comfortable with. Create an agreement that the two of you can engage in these types of contact without progressing to sex, and that sex is only on the menu if you give the "sex signal." This way there is no need to avoid physical contact. Both partners can feel free to sit close, hold hands, hug, or give other forms of affection – without the worry that it will lead to sex. When your sex drive returns, you can go back to your usual more subtle way of dealing with intimacy.



Which of the ideas in this handout seems most important to you given your own situation? How could you put this into action in your own life? What's Step One?
