Anna: Mental illness and Marriage. This is Stay Happily Married episode number 228.

Announcer: Welcome to Stay Happily Married, your source for weekly updates on the latest tips and advice to build a happy and healthy marriage.

Anna: I'm Anna Riley, and I'm your host today. Welcome to the show. What kind of impact does a mental illness have on a marriage?

In today's society it's becoming more and more common for individuals to be living with some sort of mental health condition or illness, like anxiety or depression. And while there are many issues that present themselves in different, unique ways, oftentimes the effects on a marriage are very similar.

In addition to anxiety and depression, some people suffer from more extreme conditions like post-traumatic stress disorder and substance abuse problems. When these issues creep in without the proper treatment, their impact on a relationship and the individual can be fundamentally detrimental.

Talking with us today is Dr. Nerina Garcia from Williamsburg Therapy and Wellness in Brooklyn, New York. Nerina is a licensed clinical psychologist who has worked with many different cases and even a program set up to help individuals affected by the 9/11 terrorist attacks. She helps couples and individuals dealing with mental illnesses ease the suffering and build a network of support. Welcome to the show, Nerina. I'm so glad you could join us today.

Nerina: Thank you so much for having me. I look forward to our conversation today.

Anna: Absolutely. I think that we should first maybe start by dispelling the stigma and negativity that's attached to mental illnesses because they're not exactly what many people think they are, right?

Nerina: Right. It's unfortunate that people, when they think of mental illness, they think that it's something to be ashamed of or embarrassed about and they should not reveal it to anybody. But actually, it is really common to have a mental illness. The National Institute of Mental Health keeps track of numbers, and in a one year period they estimate that about 26% of adult Americans will have some sort of mental illness. And that can be from anxiety disorders to a substance abuse problem. And the numbers they last released were in 2008, so since then we've had a bad economy and a lot of natural disasters, and those kinds of stressors usually increase numbers. So I would estimate that those numbers are actually higher.

So if you think that, at least, a third of our American population has a mental health problem, then it's not something that people should be embarrassed about or feel like, "Oh, I'm the only one" because actually you are one of three people in a given year....

Anna: You're right. Exactly.

Nerina:that is suffering from this.

Anna: So would you say it's fair to say that it's relatively common for, at least, one partner in a relationship or a marriage to be suffering from something like anxiety or depression or even something more extreme, like post-traumatic stress disorder?

Nerina: Extremely, yes. I think it's very common. We know that stress levels are increasing. People are reporting more and more stress in the last couple of years, especially around the economy being the way it is, with people losing their jobs or worried that they are going to lose their jobs. So, stress leads to other problems like anxiety and depression and PTSD and substance use. So I would be surprised if you didn't have large numbers of marriages impacted by this.

Anna: Right. So do you see, I guess, maybe more people being diagnosed properly now or is that still an issue with getting a proper diagnosis or an accurate diagnosis? I know that I've heard some people will have an issue, and they don't even realize it's something like anxiety or depression, and then they try to maybe self-medicate and then that makes the issue worse.

Nerina: Exactly. Exactly what you're saying. I think we are better diagnosing because we are trying to get to our primary care physicians and teach them what to look out for. But from diagnosis to treatment, we fall short. Either people don't have health insurance, or they don't have mental health coverage, or the coverage is not sufficient or people are just too embarrassed. So they're like, "Oh no. This is private." So they might be told by their doctor, "Hey, this seems something to be concerned about. You should look into seeing a therapist," but then they don't follow through. But definitely with the diagnosis piece of it, I think we're more knowledgeable and more able to diagnose better.

Anna: Right. Okay. So if one partner in a relationship or a marriage, for instance, has a mental health issue, what do you see as the most common problems that develop in the relationship?

Nerina: Whether it's anxiety, whether it's depression or whether it's PTSD, whether it's substance abuse. The most common symptoms that are typical of all of those illnesses, is irritability, social withdrawal, memory problems, and concentration and attention problems. So, a lot of couples will complain that their partner snaps at them or gets easily angry at them. Or is moody, or they withdraw and they don't want to go to social functions any more. They don't want to go to the family dinners anymore. They don't want to go out with their partner anymore and go to movies or share things they used to share.

Or, this is something I saw a lot in my practice, is the memory problems got in the way. Because, say a wife tells her husband, "Hey, can you move the laundry from the washer to the dryer and help me out?" And the depressed partner would maybe go to the washing room and forget what he was supposed to do, because he's forgotten or his concentration isn't all there. So then the wife feels like, "Wow, you don't really want to help me. The one thing I asked you to do, you didn't do. You couldn't follow through." So then it starts fights because these symptoms carry out in everyday tasks that really interfere with the quality of the relationship.

Anna: Right. So do you think that maybe, kind of, initially if a partner doesn't know that their partner has some sort of mental health condition, like anxiety or depression or something that, at first when the partner with the condition is acting different or a certain way, the other partner will be like, "Wait, what's going on? Our relationship must be changing," or "They must not love me anymore. What's happening between us?" And they don't recognize that it's actually just the individual, their partner, who internally is having these issues, and it doesn't really have to do with the relationship.

Nerina: Yes. So these problems when I say depression, anxiety, they don't usually show up in a 24 hour period. They usually develop slowly. So the person with the problem, if they have say, depression, their life starts to change a little bit at a time and they don't notice that they are different. They just are not feeling as happy, but you know they don't necessarily notice this drastic change, that, "Oh now, I'm

socially withdrawn." Maybe a year later, when they look back they're like, "Wow, I never go out anymore." But it's sort of a slow transition for that person. Now the partner's slowly noticing these changes as well, and they're likely to blame themselves, or attribute these changes to their relationship, like: "Oh, maybe my partner doesn't love me anymore, that's why they don't want to come out..."

Anna: Right.

Nerina: ...and come to a family dinner. Are they mad at me? Do they not care about me or our relationship, or the kids," if there's kids involved. So it's so important that if that partner notices changes, they sit down with their loved one and say, "Hey, I'm noticing changes and it makes me sad to see these changes. I think we need to do something."

And join with your partner. Say "we". "How do we get us out of this?" You know, not "you", like you need to get better." That just makes people draw away and turn into themselves. So, using lots of "I" statements like "I feel sad when you don't come out to family dinner anymore." and "How do we help you feel better?"

Anna: Yeah. Like, we're in this together.

Nerina: Yes. And if it's "You know what? Let's go to someone who can maybe help us. Let's figure this out together and get someone who can help." Now, your partner might not want to do it, they might be like, "Oh I'm fine, I'm just going through a rut right now." But really push, because this is not just about the health and quality of your partner who's hurting, but about your marriage. People who are suffering from mental illness, their marriages suffer. Their physical health suffers. People who have depressions or severe mental illness often have shorter lifespans because they just don't go to the doctor. They don't take care of themselves so great. So this is really important. So don't ignore it. Don't say like, "Oh, you know what? He'll get better, he's right. This is just a rut." Even if it is a rut, like, just go talk to the specialist that can say, "Yeah, you know, this doesn't sound so severe." or, "You know what, guys? It does seem like you guys need some treatment here, and we know we can help because there's treatment out there that can help."

Anna: Right. And it's not always just medication. Because some people are kind of, against that perhaps, and they don't necessarily want to be on medicine but that's not always the only answer, right?

Nerina: Exactly, yeah. People who come to my practice, I would imagine, and this is important, when you're seeking out a therapist talk to them. When you call, talk to them and say, "What's your philosophy? What do you practice?" If they are like, "I only medicate, I only believe in medicine" and you don't believe in that, then don't go to that person.

Anna: Right. Find someone else.

Nerina: In my practice I first see what's going on with the person, and we really work together to try to make changes. Now, if those changes don't happen, and it's a very severe case, then I might recommend doing some medication consultation. Just to see if maybe medicine would help. But I'm not going to say first thing you walk in the door, "OK, here's some medicine." That's sometimes what our American society is doing right now. Sort of pushing meds first, because they think it's a quick fix. You know, like, we'll write a prescription; go take it home. The kind of lasting effects treatment is more therapy, where you come and you talk about what's really going on. And cognitive behavioral therapy is one specific

type of treatment. That's the kind of treatment I tend to specialize in where we really figure out what's getting in the way and we start to make changes.

So, if someone is really depressed, then we need to get them to move. You know, not to sit on the couch or stay in bed. We need to be action oriented. So we figure out what's getting in the way of you being more active and you also have to figure out, well, what's making you sad. Is it the quality of your relationship? So then, what needs to change in your relationship? Is it that you just went through a natural disaster like Hurricane Sandy and you've lost your home? Or you're scared that another big storm could come and so you're worried about your safety? Then we need to figure out how do we help you feel safe. Unfortunately, a lot of people will turn to self-medicating, like drinking or drugs or even over- eating, to try to soothe themselves and that's not the way to go.

Anna: That's yeah. Because their just creating their own coping strategies and they're not always the best.

Nerina: Right. I mean, basically what they're doing is they're numbing out from their pain, their emotional pain, but that emotional pain doesn't go away. If it's based in pain from childhood, just drinking it away is not going to make it change. Or if it's because you don't have a job and you're worried about paying the bills, drinking is not going to solve that problem.

Anna: Right. Exactly.

Nerina: And in the long run it's going to create more problems.

Anna: Mm-hmm. Right. So, you were talking about, a little bit before, if a partner starts to recognize changes and they should sit down with their partner and say, "Hey, I see these things happening and this makes me sad about this going on or that going on." And you said, it's likely or not completely likely. But maybe the partner, the one partner, will say, "No, I don't need help I'm fine." and you said kind of push the issue. How would you recommend pushing the issue in, I guess, a caring, nice way so they don't get too overwhelmed and the one partner doesn't just think, "Oh, well, you're just trying to make this a big deal and it doesn't have to be a big deal or..."

Nerina: Yeah and "You're not really concerned about me, you're just blaming me."

Anna: Right, right.

Nerina: One way that I try to get people to discuss with their partners these concerns is talking about how it impacts them directly. So often the partner who's hurting, who's anxious or depressed might not feel motivated enough to take care of themselves, but they still love their family. And they still want their family to be happy and healthy. So appealing to that can help maybe motivate the person to say, "OK, I'll go to a doctor. I'll go to a therapist and say whatever you want me to say and we'll figure this out."

So saying things like, "Look honey, I've noticed changes. I don't think you're as happy or I think you're anxious, a mess right now, and it's really impacting our marriage." Or, it's really impacting our family. Or "The kids are starting to notice," or "I feel really sad that things are different, and I want us to go back to the happy couple we were. Do this for the family. Do this for us. If you're feeling bad and you don't want

to try it for you, do it for us." That can sometimes get the person to sort see outside themselves and, at least, consider it.

Anna: So, before there is any kind of proper treatment going on within the relationship or for the individual who's suffering from whatever kind of mental health condition, if these partners start to act angry towards each other and irritable, what kind of problems can stem from that? Because obviously anger is not a good thing to have towards your partner on a regular basis and so, if there's not a treatment plan in place, it seems like that could lead to bigger problems and a lot of maybe, resentment and stuff.

Nerina: Yes, so at a basic level, if you're yelling at each other or calling each other names, you're disrespecting each other and these types of things are, it's not like a little bug bite that eventually is going to go away and you won't even remember where you were bitten. These are things that you remember. Like "Oh, he called me 'Lazy' or worse things." So that can be really damaging to the relationship and the love that someone holds and the respect that they have for each other. And worst case scenario, it could lead to abuse. Whether it's physical abuse where someone snaps and they physically hit the other person or psychological abuse where they're verbally attacking them and calling them names and belittling them so that the trust and the love erodes. So, at any level, that's just not good. And when someone is that angry, anger is sort of what you see when there is hurt. Usually, people who are angry are not just angry people, they are hurting at some level. Whether they feel disappointed, they feel scared, or they feel sad. And it's easier to feel angry than it is to feel sadness and fear.

So if the partner notices that their loved one is becoming more and more irritable, then maybe try to have some empathy and sort of wonder, "Why are they so angry now? They weren't like that before." So just try to be a little empathetic there. And also, if they're really cranky and really irritable, really angry, don't put up with that, as a partner. Call a time out. Time outs are not just good for toddlers. It's really effective. Say, "Hey, you know what? I don't know what's going on. We're yelling at each other. Let's take a deep breath right now and let's just take a few minutes. You go to your corner. I'm going to go to this room. I'm going to go take a bath. I'm going to go do the dishes, or I'm going to for a walk." Take a few deep breaths. Clear your mind and then come back when you guys are not in the heat of the moment, upset about whatever it is you were upset about.

Anna: Right, right. I see that, for sure. I think that the ultimate thing for what we've been talking about though is that there are these problems and they are present and they are happening and they're there and people do have to deal with them, but there is a lot of help out there and there are resources for people.

Nerina: Yes. It's a matter of being motivated. And the stats tell us, people keep records. Only about 13% of people who have these mental health issues, are really getting minimally adequate care. So, not enough people are reaching out for help. So, if you're noticing this, look online. Ask your local doctor, pediatrician, "Hey, where can I go to get some help for my partner or for myself?"

Maybe, consider couples therapy so that you guys can learn to communicate better. Sometimes, when people have these problems, they don't really communicate very well. They can't think clearly. So learning skills of how to talk to each other kindly can be really useful. So, help is out there. There's therapy. Some people really trust their religious professionals, ministers, or priests. So reach out to them.

It's a matter of seeking support and knowing you're not alone, and not feeling shame about it. So it doesn't matter where. And just sort of seek out support from loved ones who are going to supportive and not put you down. For, "Oh, just be strong. You're going to be OK." That's not enough. We need someone who's going to say, "You're suffering and that's normal and that's OK, but there's a way to feel better."

Anna: Right. Definitely. So Nerina, is there anything else that we should know?

Nerina: I think the only thing that I would recommend is for partners to, if they notice that their loved one is changing and suffering, and they notice that they're more sad, more withdrawn, really irritable or agitated. Then try to understand that that person is not doing it on purpose. That it might be a biological thing that's going on. So, would you blame someone for having diabetes or heart disease?

And try to be empathic to the pain that that person's having and to not pull away from them. But remember that you're partners and try to do things like, do activities together. Like go for walks together. Drag your partner out of bed and say, "Hey, we're going to go for a walk" or play cards, or do things that you used to do together and try to focus on positive things. If your partner is like, "Oh, I'm never going to get a job. It's never going to happen." then you, as a partner, say like, "I know it feels really scary right now, but let's focus on what we do have." And try to stay positive. Like, "Oh, did you hear our neighbor just got into a car accident, bad things keep happening." It's like, "Yeah, that's a bad thing, but you know there's good things, too." So trying to remember that the focus, if they're staying in the negative, you help pull them into the positive.

Anna: Mm-hmm. Right. Absolutely.

Nerina: And, if you're finding that your partner is not treating you with the respect you deserve, then you guys need help. Because that's just going to damage your relationship and you don't need to be a martyr. That's not what marriage is about.

Anna: Exactly.

Nerina: It's about helping each other and being partners, but it's not about being a punching bag, whether that's physically or verbally.

Anna: Right. Yeah. Well, Nerina, thank you so much for talking with us today and being on the show.

Nerina: Sure.

Anna: To find out more about Nerina and her practice, Williamsburg Therapy and Wellness, you can visit her website at www.drnerinagarcia.com and I'll spell that for you, that's D-R-N-E-R-I-N-A-G-A-R-C-I-A.com. Or you can call 917-816-4449. She is in Brooklyn but keep in mind that she said she can do Skype appointments and phone consultations.

Thank you so much for joining us today, and I hope you'll join us again next week. For more information about this show and future episodes, visit us at stayhappilymarried.com. I'm Anna Riley. Until next time, stay happily married.

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