

My Partner Was Just Diagnosed With a Chronic Illness...Now What?

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When one person in a couple is affected by a chronic illness, the other person lives with it as well—chronic illness is a family affair. The challenge lies in finding ways to address the illness as a team so that neither of you feels as if you are alone. Here are some tips to help you strengthen your teamwork:

Managing Your Feelings

When one person in a couple is diagnosed with a chronic illness, both partners are likely to experience a range of emotions — all of which are normal, predictable reactions to this kind of life-altering news.

- **Shock:** For some people the news is so startling and puzzling that they simply cannot absorb it. It may take several days or weeks for them to be able to think about next steps for dealing with this unwelcome intrusion in their lives.

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- **Fear:** For those people who know very little about the illness—or those who have known someone with a very disabling form of the disease, the first reaction may be fear or panic. They may be quick to assume the worst about the disease and its potential impact on their future.
- **Anger:** It isn't at all unusual for people to feel angry and frustrated by the diagnosis of a chronic illness of themselves or a loved one. Certainly no one asks for this kind of challenge and many react with resentment to the unfairness of it.



- **Relief:** For any couple that has had to wait months or even years for an explanation of puzzling, uncomfortable symptoms, getting the diagnosis can be a relief. This can be particularly true for those who have been worried about a potentially fatal disease.

- **Denial:** Some people react to the diagnosis by shoving it under the rug—telling themselves that it couldn't possibly be true or that the doctor has made a mistake. Denial can

be a very effective coping strategy during the early days of a chronic illness—allowing people to take a brief “time out” before beginning to deal with the realities of the diagnosis. However, denial that persists for weeks or months can undermine effective communication between partners over important treatment decisions that must be made.

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It is important to remember that any and all of these reactions are “normal.” Each person is going to react in his or her own way to the diagnosis of a chronic illness. The challenge comes from the fact that partners don’t necessarily experience these feelings in the same way or at the same time. For example, one may be immersed in denial while the other is awash with anxiety or anger, making it difficult to communicate and problem-solve effectively.

Help is available if any of the feelings become unmanageable. Organizations and support groups associated with various diseases can be found on the internet. A family counselor with expertise in serving patients with chronic illness can also help couples communicate more comfortably.

Protecting Your Partnership

A chronic illness can affect the relationship between partners in a variety of ways:

- It can become harder to share uncomfortable feelings and fears
- Changes can occur in the roles and responsibilities of the relationship
- Plans and expectations for the future are disrupted
- There may be changing sexual feelings and responses

Keeping the Communication Lines Open

Talking about tough issues is never easy, and challenges related to a chronic illness are no exception. Neither partner wants to upset the other by talking about things that are scary or unpleasant and most people tend to shy away from discussing problems that have no easy or obvious solutions. Yet finding ways to talk openly about these challenges is the first step toward solving problems and feeling the closeness that comes from good teamwork. Couples counseling is an ideal setting for starting some of these difficult conversations.

Dealing with the “Third Wheel”

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maintain feelings of intimacy in such a situation is to make sure that you and your partner work together to adjust and adapt while directing any feelings of frustration at the **disease** rather than towards each other.

Coping when the “Rules” Have Changed

Chronic illness has a way of creating chaos. “This isn’t the way life was supposed to be” is a common reaction among couples whose daily lives have been changed by the chronic illness Multiple Sclerosis. When shared expectations and dreams are threatened by a chronic illness, partners can team up to identify tools and strategies that allow them to pursue their shared goals and avoid blame and guilt.

Planning for uncertainty is a good way to feel more in control of the uncontrollable.

Handling Unpredictability and Uncertainty

No one can predict how a chronic illness is going to behave from day to day or over the long term.

This kind of unpredictability leads many partners to

wonder, “What can we count on from each other?” and “What can we plan for today, tomorrow, and in the future?” Faced with this kind of unpredictability, partners can maintain a greater feeling of control by engaging in joint planning and problem-solving, whether it’s a back-up plan for tomorrow’s family outing or financial planning for the future. Planning for uncertainty is a good way to feel more in control of the uncontrollable.

Managing Your Valuable Resources

A chronic illness can be very greedy, consuming more than its share of a couple’s money, emotional energy, and time. When a disease is allowed to strain the existing resources, people can feel drained, and resentful, particularly if other important needs go unmet. An intimate relationship thrives best when both partners’ needs are recognized and important resources are shared. The goal is to try to keep the chronic illness from claiming more of the emotional and financial resources than it truly needs. Some of the coping mechanisms mentioned above can help preserve a couple’s emotional reservoir.

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Maintaining a Balanced Partnership

In long-term relationships, partners tend to divide the responsibilities of everyday life. When a chronic illness makes it difficult or impossible for one partner to carry out some of his or her responsibilities, the other partner may need to take on those responsibilities. The key to maintaining balance in a partnership is to strive to divide responsibilities in such a way that both partners experience giving and receiving. If one partner begins to feel that he or she is no longer contributing to the relationship, and the other feels that he

or she is carrying the full load, neither will perceive that the partnership is working, and loss of partnership is a major threat to intimacy.

Intimacy and sexuality are important components of a healthy and contented life.

Enjoying Your Sexual Relationship

Problems or concerns about sex are very common. In fact, more than 10 percent of men and women *without* any illness or disability report having at least some challenges where sex is concerned. Fortunately, there

are many sources of help and support. The primary care physician can usually identify the source of any sexual dysfunction and offer both medical and non-medical treatment options and/or referrals to specialists. But more often than not, the person with the chronic illness needs to raise the issue since most doctors don't routinely ask about it.

Intimacy and sexuality are important components of a healthy and contented life. They do not have to disappear from the lives of couples when one partner has a chronic illness. Instead, partners can find satisfying ways to overcome the barriers.

Changes in any or all of these areas of daily life can affect a relationship's delicate balance. While the challenges may at times feel overwhelming, many couples have found effective and satisfying ways to deal with the intrusion of a chronic illness. For many couples, confronting the challenges of a chronic illness draws them closer together, deepening their sense of connectedness and commitment. However, it's important to remember that you and your partner don't have to negotiate all of these challenges by yourselves. Your health care team should be a resource for helping you keep your relationship strong.