



Bipolar and Relationships

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Bipolar Within a Relationship: Making it Work

Relationships are hard work. To make a relationship successful, you need honesty, communication, similar interests, a strong support network and many more positive attributes, and so does your partner. The saying goes, “It takes two to tango” but it only takes one to make a relationship undesirable. Another necessary quality in relationships is stability. Unfortunately, stability can be in short supply if you or your partner has bipolar disorder.

Bipolar works to add instability and unpredictability to your life through changing symptoms. Manic and depressive states wreak havoc in relationships, because your partner does not know how to respond to you. If your symptoms are too high, there is nothing your partner can do or say to improve the situation. This leads to them feeling inadequate and disappointed.

For the record, someone being “nice one minute and angry the next” is not someone with bipolar. Gaining education from reputable sources on the diagnosis and treatment of bipolar disorder is important if you believe that your spouse or partner has bipolar disorder.

People tend to be diagnosed with bipolar disorder during their late teens and 20s. This is problematic since these are the ages when most people are actively dating and getting married. Chances are good that when you began dating, your partner displayed no signs of mental illness, but as the relationship continued, signs of bipolar became evident.

Skills for the One with Bipolar

Whether it is intentional or not, there is a lot of pressure put on the person with bipolar in the relationship. There is pressure from the outside and pressure from within. If anything goes wrong in the relationship, it will be the simple conclusion for others to point fingers at you. The goal should not be avoiding blame and mistakes, though. The goal should be to make the relationship as rewarding as can be. Here’s how:

- **Treatment** – With bipolar disorder, the question is not *if* treatment is needed, but *what* treatment and *how much* treatment. People with bipolar disorder generally have fewer symptoms being on one or a combination of medications to reduce depression and stabilize mood. Medication consistency is so crucial and necessary for anyone with bipolar. When symptoms change, you may feel that medication is no longer needed. Stopping medication can throw your symptoms into chaos. Medication is so helpful for bipolar which means it is helpful for your relationship/marriage. Individual therapy, group therapy, support groups are available. Be creative and willing to experiment to find a good balance and maintain symptoms.

Next page: finding success.

Skills for the One with Bipolar

- **Monitor** – Insight, self-awareness and self-monitoring all mean essentially the same thing: knowing yourself, your symptoms and your triggers. Without the ability to accurately monitor your symptoms, you cannot react to changes in symptoms. Use tracking sheets, journals and charts to identify and understand the trends and patterns. Also, investigate your emotional and behavioral reactions to these trends. Does feeling better make you want to stop your treatment? Does feeling depressed make you want to end your relationship? Asking these questions increases your awareness.
- **Communicate** – In any good relationship, your partner is your teammate. They fill your gaps and you fill in theirs. Honest, open, assertive communication helps ensure that she stays your teammate and not your opponent. Even the greatest treatment and self-monitoring is useless if you do not have someone at home to reinforce what you have learned. Check in with your partner throughout the day, not only when situations become poor. Let her know what you are doing to improve your symptoms and the relationship and what she can do to assist.
- **Well-rounded** – Being in a relationship means that your life continues to exist outside of the relationship. Putting too much time, energy and emphasis in the relationship puts all of your eggs in one basket. If your relationship is doing poorly, you are doing poorly. If your relationship is doing well, you are doing well. This puts too much pressure and responsibility on the relationship to dictate your state. Instead, seek out a range of outside supports, groups, friends, family, teams and organizations. If you can effectively diversify yourself, you become more resilient and flexible when stressors increase.

Skills for the Spouse

Being in a relationship takes love, kindness and sacrifice. Being in a relationship with someone with bipolar takes these and much more. Some estimates put the divorce rate at about 90% if one or both people in the relationship have bipolar. That statistic is grim, but with practice, patience and persistence, you can be in the 10% that find success. Here's how:

- **Treatment** – Being married to someone with bipolar impacts you. It influences you in many, immeasurable ways. Some will be positive while many will be negative. Considering treatment will provide you with resources, solutions and interventions to improve the relationship. People married to someone with a chronic health issue are more prone to feelings of depression and anxiety. Online and in-person supports group are available for people married to someone that has mental illness. Individual therapy can allow an outlet to discuss your frustrations, hopes and fears. This opportunity can recharge your batteries and make you better able to manage your feelings at home. Without release, feelings tend to come out in unforeseen ways.
- **Monitor** – You have twice the monitoring to do. As important as it is for your spouse to monitor their feelings and symptoms, it is equally important for you to monitor his symptoms as well as your own. His insight will change with his symptoms. Typically, when moods become elevated and mania presents, insight decreases. Tracking the symptoms and triggers from your point of view will offer another perspective that can be used with behavioral interventions or that can be used by the psychiatrist to make a medication change.

Next page: knowing when to walk away.

Skills for the Spouse

- **Communicate** – Your communication task is far more difficult than someone in a typical relationship as well. Chances are high that the way that you communicate with your partner is met with different reactions based on their moods. When he is depressed, you may need to be more subtle and gentle. When manic, you may need to be highly assertive and possibly bordering on aggressive with communication. Recognize and accept his mood before you attempt to communicate to produce the best results.
- **Well-rounded** – Your relationship is likely more stressful than most others. When stress is high, supports

need to be even higher to counteract. Schedule plans to leave the home, meet with friends, exercise, attend church or support groups. Too much worry or involvement in the relationship leads to less sense of self. Without a strong sense of who you are outside of the relationship, you cannot maintain the objectivity needed to truly help your partner. Your happiness is surely swayed by your partner, but you cannot allow his symptoms to be your symptoms. Separation is needed.

When to Walk

What are your limits? What are you willing to tolerate? Why are you staying? What makes you afraid to leave? As mentioned, most relationships where at least one person has bipolar end in divorce. This does not mean that you are giving up or that you do not care about the other person. It only means that you are able to recognize that this relationship is not beneficial and should not continue.

Often, but certainly not all of the time, the changing symptoms associated with bipolar disorder trigger verbal or physical abuse to occur. No one should be subjected to this type of treatment or stay in a relationship if this transpires. Usually, these behaviors only increase over time rather than diminish.

There is great benefit in making a list of "deal breakers." These are behaviors or statements that, if the other person completed, would signify the end of the relationship. For example, physical abuse would surely be a deal breaker. These apply to the person with bipolar as well as the partner. Too often, the partner is able to manipulate, scapegoat or emotionally harm the person with bipolar during their vulnerable times. Each person in the relationship must maintain a sense of value for themselves and the other.

Conclusion

When bipolar is a part of your relationship, acknowledge the role that it plays. Understand the challenge that you face. If you choose to move forward, find ways to make treatment, self-monitoring and communication the core of the relationship. Outside of the relationship, spread yourself into other areas and explore avenues towards diversification. While doing this, set your expectations to a realistic level. Problems will arise in any relationship. As long as you know what is unacceptable and what is not, success can be achieved.