

Marriage and AD/HD: A Couple's Survival Guide

Arthur L. Robin, Ph.D.

**Wayne State University, 313-966-0602,
arobin@med.wayne.edu**

Michael had lost track of time at the office and was late for the 4th time this month picking up his son from latchkey. Wondering whether the latchkey teacher would have more complaints about 8 year old Christopher's aggressive behavior, he nearly rear-ended a truck and completely forgot to pick up the milk and dry cleaning, as Melanie had requested. Melanie was angered but not surprised, figuring it was just two more examples of how Michael was self-centered and did not really care about her or the children. She was sick and tired of Michael's not remembering being told things, tuning her out, and failing to live up to his commitments or promises. So when she confronted Michael about today's foibles and listened to his latest lame excuses, something snapped, she shouted, "I can't take it anymore. You're just like Christopher. Either you go right away to see that Doctor Jones who diagnosed Christopher as having AD/HD last week and find out what's wrong with you, or I want I divorce. Then, at least I will only have one child; taking care of your messes is like having a second child." Michael angrily cursed Melanie and locked himself up in the den with his computer, regretting the day he decided to get married.

Michael and Melanie's interchange illustrate how undiagnosed AD/HD can impact a marriage. The deficits in executive functioning, inhibitory control, and attentional processes which are the core characteristics of AD/HD predispose an AD/HD spouse to be forgetful, disorganized, and distracted, failing to meet responsibilities, communicating poorly, and overreacting emotionally. Such AD/HD spouse behaviors spur negative reactions and blameful attributions from the non-AD/HD spouse, putting distance between the spouses and eventually leaving the marriage in shambles. Today you learn how to cope with AD/HD in a marriage.

I. I conducted a survey and found the following Ten Top Problems in Marriages with AD/HD

- A. Zones out in conversations- communication
- B. Doesn't respond when spoken to- communication
- C. Doesn't remember being told things- task completion

- D. Has trouble getting started on a task- attentional
- E. Under-estimates the time needed to complete a task- task completion
- F. Doesn't finish household projects- task completion
- G. Leaves a mess- organization
- H. Doesn't plan ahead- organization
- I. Says things without thinking- impulsivity
- J. Has trouble dealing with frustrations- impulsivity

I will discuss how to cope with these 10 problems. First I will give some general principles, then apply them to each of these problems.

II. Adjust your Attitudes- the first step for a couple to cope with AD/HD

- A. AD/HD spouse- Acknowledge the impacts of AD/HD on your marriage and accept responsibility for your poorly self-regulated actions. Stop denying, minimizing, and avoiding the issues. Learn how to respond non-defensively to negative feedback about your AD/HD behavior. After all, this is your life partner, not your critical parent.
- B. Non-AD/HD spouse- Transform blame into empathy. Correctly attribute AD/HD behavior to AD/HD, not to malicious intent or lack of caring. Recognize that your spouse may have had a lifetime of criticism before meeting you and may therefore be super sensitive to your negative feedback. You have to be patient and kind but assertive- hold him/her accountable, but do so with love.

III. Understand some basic principles for coping with AD/HD

- A. Maximize medication
- B. Learn effective communication and conflict-resolution techniques
- C. Work as a team to creatively apply organizational and time management techniques
- D. Make your physical and social environment AD/HD-friendly
- E. Accept the person, change the behavior
- F. Break tasks into small units and tackle them one unit at a time
- G. It takes twice as long for the person with AD/HD to get half as much done
- H. Ask for external help as needed- doctors, therapists, coaches,

- professional organizers
- I. Keep a disability perspective and practice forgiveness
 - J. Anticipate problems and plan to prevent them from occurring
 - K. Put yourself in your spouses shoes and act and you would like to be treated
 - L. Back everything up. Always have a Plan B.
 - M. Make liberal use of humor.
 - N. Look for childhood issues that are coloring how to interact with your spouse.

Please note that some of the ideas in the following sections are based upon Michael Bell's excellent article, "Dealing with the impact of AD/HD on marriage," Attention, 9 (5), April 2003.

IV. Zones out in conversations, doesn't respond when spoken to

- A. Make the environment AD/HD friendly by eliminating distractions (TV, radio, computer, kids) and picking a good time for a serious conversation (not dinner table with kids)

- B. Recognize what good listening means for your spouse: you value his/her opinions, care about him/her, think what s/he has to say is important

- C. Make sure you are covered by medication during common interaction times, e.g. evenings & weekends

- D. Exert the extra mental effort to really listen to your spouse. Do not
 - 1. think about what you were just doing
 - 2. think about what you are going to do when your spouse finishes talking
 - 3. think about your response to your spouse's comments
 - 4. think about unrelated topics
 - 5. Use brief relaxation and imagery to clear your mind to focus on your spouse

- E. Anticipate and prevent zoning out by using agreeing to speak in short sentences and using communication techniques such as the "dialogue." The dialogue is a structured interaction during which the couple agree to discuss one topic and follow several

pre-set guidelines.

1. The spouses take turns being the speaker (sender) or the listener (receiver).
2. The sender expresses his/her feelings or thoughts about the topic in a series of concise, non-accusatory statements.
3. After each statement, the receiver mirrors back the sender's statement by paraphrasing the message which was heard. The receiver does not add any of his/her own thoughts or feelings to the message; the message is simply reflected back to the sender.
4. Over time, the partners learn how to validate each other's communications by not only paraphrasing the content but also empathizing with the feeling tone of the message.
5. During the dialogue, the each partner takes at least one turn at being the sender.

F. Get your AD/HD spouse's attention before communicating something important

1. Don't talk from another room
2. Use a gesture or loving touch- squeeze hand, kiss, hug, etc.

V. **Doesn't Remember Being Told Things**

A. Make sure you are covered by medication during common interaction times, e.g. evenings & weekends. Save important requests or information for the times that medication is active.

B. Make the consistent use of memory prompts a habit for life, even when it seems boring, inconvenient, or unnecessary.

1. Alarms on wrist watches, clocks, palm pilots, computers, kitchen timers, etc.
2. To do lists. Work as a couple on making and updating To do lists.
3. Leave messages on home, work answering machines, voice mails, digital recorders
4. Send yourself E mails or ask your spouse to send you reminder E mails
5. Sticky notes and stickers- office, home, car
6. Always carry planner, palm pilot and refer to it regularly
7. Agree that spouse will call or page you as a reminder, e.g. before leaving the office
8. Set up the memory prompt as soon as you are asked to do or remember something

9. Always carry pen & paper, a small notebook, or a digital recorder
- C. Plan a regular time of the day or evening when you and your spouse will review whatever needs to be done the next day
- D. Do not react defensively and escalate to a major conflict when your non-AD/HD spouse expresses annoyance about your forgetting something you were told. Acknowledge your mistake, outline a remedial plan to avoid similar mistakes in the future, and thank your spouse for the helpful feedback. If the feedback was given very critically, nicely ask your spouse to try a different way of giving you feedback in the future.

VI. Has Trouble Getting Started on a task, Not Finishing Household Projects

- A. With the help of your spouse, break the task into small chunks and schedule yourself to work on one chunk at a time, using your calendar or planner.
- B. Have your spouse use hugs, kisses, and other affectionate behaviors to reinforce or reward you for completing each chunk of the task. For example, at the designated time to start the task, instead of nagging you, agree that your spouse will affectionately touch you as a cue to get started.
- C. With your spouse, make and prioritize a list of the major household projects you need to complete. Divide up responsibility between the two of you. Establish times when you will each work on your own tasks, but will touch base with each other to keep each other on task.
- D. Work on only one major household project at a time
- E. Hire out any chores, household projects which you have avoided for over a month
- F. Do the unpleasant chore that you normally would avoid before anything else. Train yourself to operate in this manner.

VII. Under-estimates the Time Needed To Complete A Task, Being Late

- A. Determine the average amount of time by which you under-estimate how long a task will take to finish. Add this amount of time to the time you estimate it will take to complete any task, and schedule the extra time.
- B. Ask others who have completed similar tasks how long it takes
- C. Train yourself to stop the task at the end of the allocated time and finish at another time or day, no matter what.
- D. Schedule “Make Up” times in your planner/ palm pilot every day. Use these times to finish any incomplete tasks from earlier in the day, and if there are none, do a fun activity.
- E. Log the actual time it takes to do repeating tasks and check the log before planning a time to do the task the next time it arises.
- F. Promise less to your spouse so you can deliver more when you complete the chore
- G. Never give into the urge “to do just one more thing before I leave the house.”
- H. Always call your spouse if you are going to be more than 10 min. late
- I. Use alarms, phone reminders from your spouse, etc. to tell you to wind down your day at the office
- J. Always work with a clock right in front of you. Train yourself to look at the clock frequently and track your progress towards completion of a task
- K. Consult the time management and organization section of help4adhd.org, under “Living with AD/HD.”

VIII. Leaves a Mess, Not Planning Ahead, Organization Problems

- A. Obtain the help of a coach or professional organizer.
- B. Assign clear-cut places to all of your clothing and personal belongings so it will be easier to put them away.
- C. Schedule regular “pick up” times to deal with clutter around the house
- D. Work on your mental set about avoidance. Train yourself to Avoid Avoidance when it comes to clutter, putting things away, etc.

- E. Deal with paper when your first encounter it
- F. Ruthlessly throw things away
- G. Tackle one room or portion of a room at a time when it comes to organizing things
- H. Work as a team with your spouse on organizing parts of the house

IX. Says Things Without Thinking

- A. Be aware of your tendency to impulsively blurt things out and repeatedly tell yourself to “watch it,” “be careful,” “don’t say something I will regret.”
- B. Write things down and check them out with your spouse before you say them in a public setting
- C. Make “censoring rules” for yourself and enlist your spouse in helping you to enforce them. For example, “I will never talk about our health and finances to anyone outside our family.” “I will not criticize my spouse in front of other.” Write on index card; carry it.
- D. Engage others in conversation about themselves and their interests. Purposely try to say very little about yourself until you have learned about the other person.
- E. Arrange a non-verbal signal for your spouse to give you if you are starting to say things that should not be mentioned and practice noticing this signal.
- F. Try to be aware of how others’ are responding to your conversation. If others are giving verbal or non-verbal signs of boredom or fatigue, cut it short.
- G. When you hurt your spouse’s feelings by something you say, don’t negative his/her feelings. This makes it worse. Be patient, listen, try to find out why your words were hurtful, and then apologize if appropriate. Don’t become defensive and needlessly escalate the situation.

X. Has Trouble Dealing with Frustrations

- A. Agree with your spouse to hire someone to do tasks that you find frustrating, e.g. the lawn work, income taxes, paperwork, cleaning the house, etc.
- B. Exercise regularly, and use physical outlets for your anger.
- C. Learn relaxation, meditation, yoga, or similar techniques and incorporate them into your daily life to counteract frustrations
- D. Excuse yourself and remove yourself temporarily from the frustrating situation, conversation. But don’t avoid it.

- Eventually, you have to deal with it.
- E. Help your spouse learn what words to use to help you calm down during an argument

XI. Michael and Melanie After They Got Some Help

We rejoin Michael and Melanie six months after the AD/HD diagnosis. They attend marital therapy weekly, an adult AD/HD support group monthly, and Michael takes 72 mg. of Concerta each morning and 15 mg. of Ritalin at 6 PM each evening. Michael is also considering hiring a coach to help him at work. They recently returned from a national adult AD/HD conference, where they met many other couples with similar experiences and felt a sense of community and connectedness.

The stimulant medication helps Michael stick to his priorities, finish tasks that he begins, listen to Melanie attentively, and control his impulsive response tendency when he is angered by Melanie's words until he can carefully consider the best way to respond. It also helps him control himself in dealing with Christopher's challenging behavior. Melanie goes with him to his medical follow-up visits and gives him feedback to help judge the effectiveness of the medication.

The couple learned that repairing the damage to their marriage was real, hard work. It has been very difficult for them to break the pattern of accusatory- defensive communication. They have been practicing a communication technique called the dialogue. They have needed a great deal of guidance from their marital therapist to replace arguments with dialogues, and they still slip back into their old ways at times.

Accepting and embracing organizational tools has also been a challenge. Since Melanie considered AD/HD to be Michael's problem, she failed to understand why she should provide him with reminders to perform his responsibilities and use his planner. After all, he was an adult and should be responsible for his own behavior. To give him reminders and prompts seemed like a form of "co-dependency." This had been drummed into her head over the many years that she saw her father unsuccessfully try to overcome his alcoholism. Only when the marital therapist presented coping

with AD/HD within a “rehabilitation model” where organizational tools are prosthetic devices akin to crutches did Melanie consider that it might really be her role to participate in helping her husband use organizational tools.

Their therapist helped them come to regard the inevitable AD/HD slipups that occur as “AD/HD moments,” to be identified and coped with, combining humor and forgiveness with effective time management and organizational tools. With medication, Michael gets more of the household projects completed than he did in the past, and with organizational help he keeps his piles under better control than before, but he still tends to leave his clothes out and forget to hang up the towels. Instead of “melting down” regarding the clothes or towels, Melanie gives Michael a gentle tap on the shoulder, which has agreed to accept as a signal that there is some forgotten mess he needs to attend to. It has taken several months for Michael to stop getting defensive about this signal and attend to his messes, but he knows how much it means to Melanie so he does it for the sake of the relationship.

References

- Bell, M. T. (2003). Dealing with the impact of AD/HD on marriage. *Attention*, 9(5), 18-23
- Bell, M. T. (2002). *You, your relationship, and your ADD*. Oakland, CA: New Harbinger Press.
- Haverstadt, J. (1998). *ADD & Romance*. Dallas, Texas: Taylor Publishing
- Kilcarr, P. (2002). Making marriages work for individuals with AD/HD. In S. Goldstein & A. Teeter Ellison (Eds.), *Clinical interventions for adult ADHD: A comprehensive approach*. (Pp. 220-240). New York: Academic Press
- Robin, A. L. (2002). Snapshots of an AD/HD marriage. *Attention*, 9 (2), 21-27.