

When Harry Forgot Sally: Opinions Toward Caregivers Seeking New Relationships

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Purpose

The purpose of this study was to examine if the public believes the healthy spouse of an individual with dementia should be able to begin a new intimate relationship. The time elapsed since diagnosis serves as a key contextual variable.

Background

The effects of dementia extend far beyond the individual and often result in a renegotiation of marital roles and declines in marital satisfaction, positive communication, and intimacy. In some cases, a healthy spouse's ambiguous loss experience may present a decision of whether or not to engage in a new intimate relationship. Compounding this choice are factors such as religion, education, their social support network, loneliness, and desire for emotional and relational intimacy.

Greater levels of emotional and social loneliness have been shown to emerge for a healthy partner when:

- their partner has health problems,
- their partner does not reciprocate emotional support
- the frequency of conversations with their partner decreases, and
- their sexual activity diminishes in frequency.

As cases of dementia become more prevalent in the United States, so do the challenges for healthy partners. In these cases, spousal caregiver strain may occur through the stresses that result from renegotiation of the spousal roles, reduction in engagement in shared activities and emotional support, less frequent and meaningful communication, a decline in intimacy and marital satisfaction and an increased likelihood of depressive symptoms.

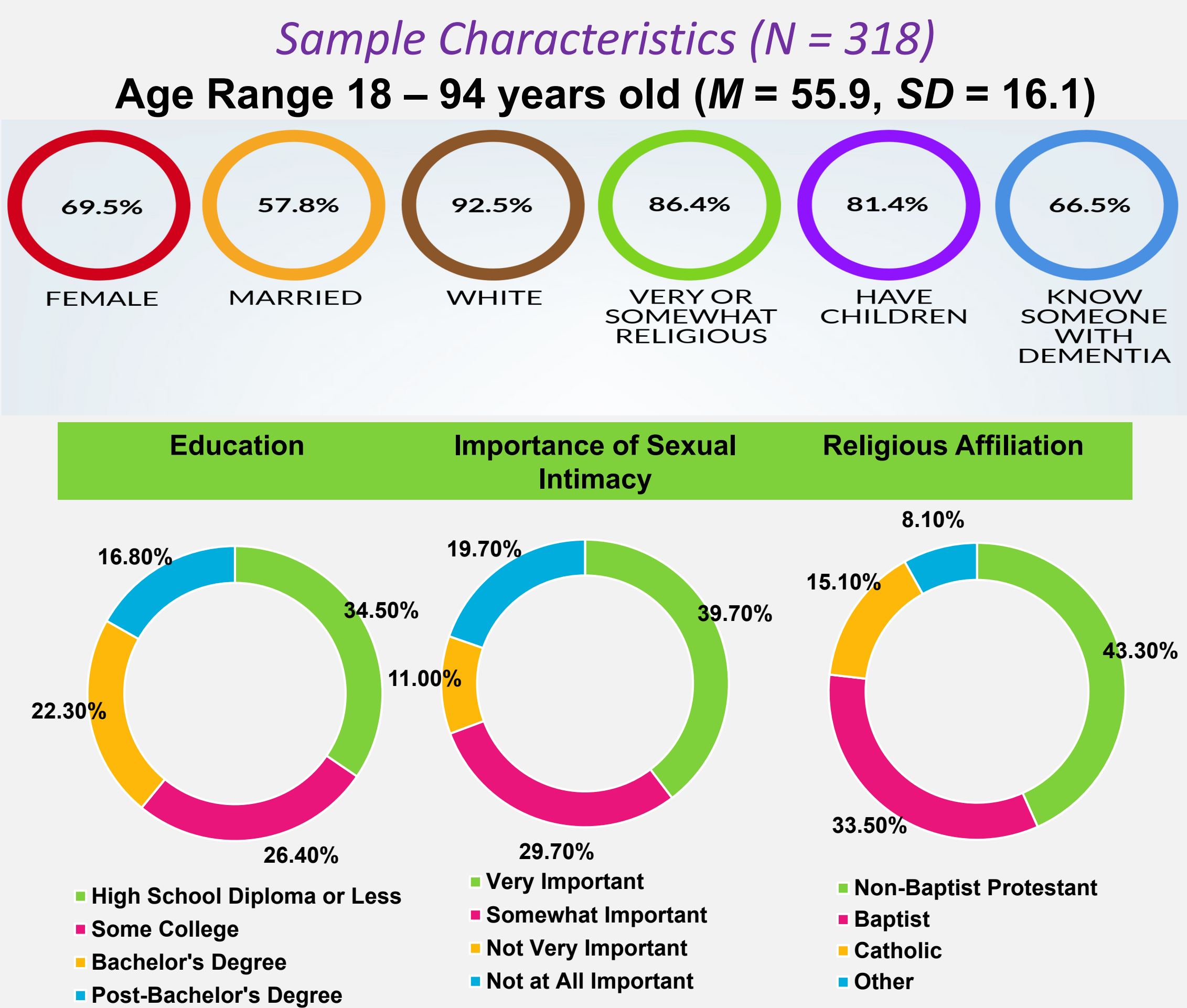
For the purpose of this study, time is portrayed as either months or years. Based on a review of the literature, we hypothesized that:

- (H1) There would be more support for an extramarital relationship beginning years versus months after spousal recognition has ceased.

Given the extant literature indicating the influence of respondents' education and religiosity, we hypothesized that:

- (H2) Education would have a statistically positive, and religiosity a statistically negative, impact on opinions toward a healthy partner's engagement in a new relationship.

Methods



- Procedure*
- List-assisted random-digit dialing of household telephones in a southern state.
 - The oldest or youngest individual of a given sex living within the household was selected.
 - Though respondents were not compensated for their participation, these procedures resulted in a cooperation rate of 34%.

- Design*
- 2x2 factorial vignette.
 - Independent variable randomly manipulated.
 - IV = **gender** (female or male) and **time passed** (months or years).

The Vignette

Now a few *months/years* have passed and they have grown distant; *David's/Amy's* dementia has worsened to the point that he/she does not even recognize *Amy/David* anymore. *Amy/David* has been lonely but recently developed a close friendship and fondness for a widowed neighbor. Given the circumstances with *David's/Amy's* dementia, *Amy/David* is considering the possibility of starting a new relationship with the widowed neighbor.

Q1: Given the circumstances, do you think it would be appropriate or inappropriate for *Amy/David* to have a relationship with *her/his* new friend, and would you said it is *highly, somewhat, or slightly (in)appropriate?*

Q2: Briefly explain in your own words why you chose that answer.

Results

- Results.*
- 61% said it was *inappropriate* for the spouse to begin a new relationship.
 - 50% said *highly inappropriate* versus 14% who indicated it was *highly appropriate*.
 - 60% said it was *inappropriate* for the spouse to begin a new relationship after *months*.
 - 62% said it was *inappropriate* for the spouse to begin a new relationship after *years*.
- Respondent Characteristics.*
- **Religiosity** was the only statistically significant characteristics influencing a respondent's opinion.
 - For each unit increase in religiosity, respondents were half as likely to say it was highly appropriate for the vignette character to begin a new relationship.
 - **Education** was statistically nonsignificant ($p = .056$), but the confidence interval for the effect size [1.00,1.54] suggests that education may still have influence on attitudes.
 - Crosstabulation analysis (though non-significant) indicated **separated or divorced** respondents were twice as likely to suggest it would be appropriate to begin a new relationship compared to **married or widowed** respondents.

Qualitative Rationales.



Conclusions

- The purpose of this study was to examine if the public believes the healthy spouse of an individual with dementia should be able to begin a new intimate relationship with time passed from the dementia diagnosis as a key contextual variable.
- Results indicate that understanding whether or not it may be appropriate for a healthy partner to engage in a new relationship is complex, and is informed by a mix of family history, religious doctrine, legalities, and personal beliefs.
- The decision of a healthy partner to engage in a new relationship can potentially be met with challenge by even their own family members and medical providers.
- It is prudent for those working with cases of dementia to think systemically, and to be cognizant of the potential influencing, and conflicting, factors that may serve to inform a healthy partner's decision as they contemplate engaging in a new relationship.
- This research suggests that there is a need to educate families about the potential choices facing their loved one experiencing cognitive decline and their healthy partner, and to help families engage in productive listening, dialogue, and empathy.