

Case Study

## Relationship Analysis of a Couple Coping with Parkinson's Disease: A Case Study

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### ABSTRACT

The aim of present pilot case study was the in-depth analysis of the relationship of a couple coping with Parkinson's disease in terms of criticism, interpersonal emotional intelligence, relationship satisfaction, and responsiveness. The purpose of the study was to identify the dynamics of the relationships for which interventions can be designed to improve the quality of relationships of such couples. Partner Responsiveness Scale: Romantic Partner version, The Couples Satisfaction Index, a questionnaire based on Daniel Goleman's concept of emotional intelligence and a one-item to measure perceived criticism were administered. The results indicated that higher emotional quotient, higher perceived partner responsiveness and higher relationship satisfaction with reasonable levels of perceived criticism had a positive impact on the quality of relationship of the couple. Future research can focus on conducting a quantitative and longitudinal research and designing specific therapeutic interventions focused on promoting relationship satisfaction, responsiveness, strengthening emotional quotient and reducing perceived criticism for improving and furthering the relationship between such couples.

**Keywords:** *Parkinson's disease, coping, relationship satisfaction, criticism, interpersonal emotional intelligence, responsiveness*

Parkinson's disease is one of the most common neurodegenerative disorders which affects both motor and non-motor functioning of an individual. The number of people diagnosed with Parkinson's disease in India are more in comparison to other countries owing to its large population (Surathi, et. al., 2016), but the frequency statistic is less due to this area being less researched (Singhal, Lalkaka, & Sankhla, 2003). The prevalence studies have been done on smaller clusters of people belonging to a distinct socio-cultural group because of the diverse nature of the population and thus, cannot be generalized (Surathi, et. al., 2016). However, studies have found that men are more susceptible to Parkinson's disease than women and the possible role of estrogen has been implicated in several studies (Yadav et al., 2012). The prevalence rate of PD has been predicted to increase twice by 2060 and the availability of an accurate diagnostic assessment remains a challenge (Tolosa, et. al., 2021). It is imperative to detect the early signs and symptoms of Parkinson's disease for the

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better management of functionality of the patients in the later stages (Davie, 2008), and with the further development artificial intelligence the detection of the early signs of Parkinson's disease using SPECT (Single Photon Emission Computed Tomography) images has yielded promising results and can therefore, revolutionize the accuracy of the diagnosis (Mohammed, He, & Lin, 2021). Since the disease is progressive and has no cure, the holistic management of Parkinson's disease is crucial, especially because of the added challenge of the ageing population (Adinarayana, Babu, & Devi, 2014).

In India, unlike the West, the institution of marriage is considered as a very sacred union, not only of two individuals, but of two families. It is presumed to be a one-time event and divorce as a practice is looked down upon. Though the times are changing, Indian society is by and large still patriarchal with specific roles assigned to both the partners in a relationship. Women are ascribed to a more submissive role and are traditionally expected to be more feminine as compared to their male counterparts, who are referred to as the heads of the family and are expected to be highly masculine. (Sharma, et. al., 2013; Issac & Shah, 2004). Studies across generations have shown that masculinity has remained a relatively stable aspect surrounding the gender role of men (Basu, et. al., 1995). Women are seen as nurturers and are supposed to take on caregiving roles while maintaining the social stereotype of complete dependency on their husbands (Thara, 1998). However, the wave of social change has positively impacted the socially ascribed roles that women are supposed to undertake not just in a society but in a relationship, as well (Sankeetha, 2020).

In a marriage or a relationship, when one person is diagnosed with a chronic and progressive illness like Parkinson's disease, the impact is shared, as the caregiving role must be undertaken by the partner. (Sundström & Jola, 2021). There is a sudden change in the dynamics of the relationship because of added responsibilities and shift of power from the person diagnosed to their partner (American Parkinson's Disease Association, n.d.) and this can lead to psychological, emotional and financial pressures (Sundström & Jola, 2021). Existing research suggests that the non-motor symptoms of Parkinson's patients can have a negative impact on their relationships with others (Khoo et al., 2013; Soileau et al., 2014), especially with their caregivers (Hiseman and Frackell, 2017) because cognitive deficits can make even everyday interactions challenging (Saldert and Bauer, 2017). Other reasons that have been found to affect relationships include facial masking (Wootton, et al., 2018), difficulty in recognising and verbalizing one's emotions (Ricciardi, et al., 2015) and loss of empathy (Pomponi, et al., 2016) which can have a bilateral negative impact on both the partners involved (Greene & Griffin, 1998).

As the disease progresses, the dependency of the patient on their caregiver increases, thus, resulting in caregiver burden (Drutyte, et. al., 2013). In addition to feeling anxious, fatigued and stressed (Drutyte et al., 2013), it has been found that caregivers often experience sleep disturbances too (Happe and Berger, 2002). All of this coupled with many other physiological and behavioural changes can result in frustrations which can lead to criticism (Interian, et al., 2021) and affect interpersonal emotional intelligence (Lin, et al., 2016), relationship satisfaction and responsiveness (Champagne & Muise, 2021). Research evidence suggests that working on the above-mentioned dimensions can significantly improve the quality of relationships of couples coping with Parkinson's Disease (Interian, et al., 2021; Champagne & Muise, 2021). Also, the acceptance of the diagnosis and a positive outlook have been found to help couples live a more balanced and content life (Smith and Shaw, 2017). Therefore, the present study aims to understand in-depth the relationship of a

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couple coping with Parkinson's Disease in terms of criticism, interpersonal emotional intelligence, relationship satisfaction, and responsiveness.

### *Criticism*

Criticism is a way of expressing negative emotions to a partner which can have a detrimental impact on the relationship (Cano & Tankha, 2018; Higgins, 2015). It has been found that both perceived criticism and emotional reactivity to criticism are positively associated with caregiver distress which can lead to difficulty in sustaining the relationship (Interian, 2021; Lee, et al., 2021).

### *Interpersonal Emotional Intelligence*

Studies have differentiated emotional intelligence into two dimensions: intrapersonal and interpersonal emotional intelligence (Gignac, et al., 2005). Interpersonal emotional intelligence refers to the capability and willingness of an individual to establish and maintain meaningful and close social relationships and interactions (Sellars, 2006; Hayden, 2018). While Goleman (1995) proposed that emotional intelligence is crucial in forming and maintaining interpersonal relationships, Saarni (1999) built upon the idea and propounded the importance of emotional competence as a contributor to the quality of interpersonal relationships.

### *Relationship Satisfaction*

Relationship satisfaction refers to the value judgement of a relationship and is therefore subjective (Keizer, 2014). Positive correlations have been found between relationship satisfaction and health related quality of life, caregiver burden and severe depressive symptoms in caregivers, and increased neuropsychiatric symptoms in people with Parkinson's disease (Heine, et al., 2021).

### *Responsiveness*

Responsiveness embodies the ability of the partners to interact in a way such that they understand each other, value, and support each other in achieving their personal needs and goals, thus, strengthening their relationship (Reis & Clark, 2013). Couples feel closer to each other, more satisfied and committed in relationships where they perceive that their partners are more responsive. (Reis, Clark, & Holmes, 2004).

## **METHODOLOGY**

For the current study, a case study method was adopted to analyze the relationship of a couple from Assam: the male diagnosed with Parkinson's Disease and the female in the role of the primary caregiver. Three questionnaires measuring the dimensions of responsiveness, satisfaction and emotional quotient were administered along with a one-item measure that has been used in numerous studies to assess perceived criticism. To assess responsiveness, Perceived Partner Responsiveness Scale: Romantic Partner version (Reis, 2018) was used. To measure satisfaction, The Couples Satisfaction Index (Funk & Rogge, 2007) was administered. To determine emotional quotient, a questionnaire based on Daniel Goleman's concept of emotional intelligence from the textbook of McGraw- Hill (Kinicki & Williams, 2018) was employed. To gauge perceived criticism a one-item measure which asks how often "My partner criticizes or belittles my opinions, feelings, or desires." was used which has been gleaned from a larger 9- item scale, the Communication Danger Signs Scale (Stanley & Markman, 1997) and has been utilized in multiple studies as a valid measure for perceived criticism (Champagne and Muise, 2021).

### DISCUSSION

For couples coping with neurodegenerative disorders like Parkinson's Disease, maintaining relationship satisfaction can be challenging and can result in caregiver burden (Caap-Ahlgren & Dehlin, 2002). A couple from Golaghat, Assam, male aged 65 and female aged 54, married for 29 years and diagnosed with Parkinson's Disease 16 years ago were taken as participants M and F, respectively. Despite the difficulties that accompany progressive disorders, we found that the measures on emotional quotient for the participants were high in the four dimensions of self-awareness, social awareness, relationship management and self-management for participant F and the same for participant M except for the dimension of self-management which was found to be moderate and can be a direct implication of the disorder. This suggests that affective empathy is maintained between the couple and is supported by the findings of a study conducted to assess reduced empathy scores in patients with Parkinson's Disease (Schmidt, et. al., 2017).

We found that both the partners gave a score of 2 on a 3-point likert scale (1 = almost never, 2 = occasionally, 3 = frequently) for the measures of perceived criticism, which indicates that both have a moderate perception of criticism in their relationship. The scores of participants M and F on the measures of perceived partner responsiveness were found to be 160 and 144 out of 162, respectively, which can be translated as high perceived partner responsiveness. However, a slight difference was found between the scores of the patient and that of the caregiver, thus, suggesting that the progression of the disorder might have resulted in the patient being a little less responsive in the relationship than their caregiver. Higher responsiveness can be attributed to higher scores in the construct of relationship satisfaction (Champagne & Muise, 2021) where participant M and F scored 148 and 134 out of 161, respectively.

From the findings, it can be confirmed that higher emotional quotient, higher perceived partner responsiveness and higher relationship satisfaction with moderate or low levels of perceived criticism might have a positive impact on the quality of relationships in case of progressive disorders and in general. Additionally, it can also be implied that higher the level of emotional quotient, perceived partner responsiveness and relationship satisfaction between the couple, less will be the perceived criticism. Disorders like Parkinson's Disease have been found to have debilitating effects on marital and romantic relationships, thus the implications of the present study can lead to psychologists helping couples coping with progressive disorders to strengthen their emotional quotient, foster responsiveness and relationship satisfaction while reducing perceived criticism and develop specific therapeutic interventions to nurture these dimensions for a better quality of relationship and life.

Limitations of the present study include the method (case study) which cannot be generalized to a larger population of couples coping with Parkinson's Disease. The study was also limited due to the cross-sectional nature which cannot attribute the changing dynamics of the studied dimensions over time. Hence longitudinal research is suggested which can consider the aspect of caregiver burden which has not been emphasized on in the current study. Future research can focus on designing specific therapeutic interventions for promoting relationship satisfaction, responsiveness between couples coping with Parkinson's Disease, strengthening individual emotional quotients, and reducing perceived criticism between the partners.

## CONCLUSION

The current pilot study investigated the impact of criticism, interpersonal emotional intelligence, relationship satisfaction, and responsiveness on the relationship of a couple coping with Parkinson's Disease. It was found that higher emotional quotient, higher perceived partner responsiveness and higher relationship satisfaction with reasonable levels of perceived criticism might have a positive impact on the quality of relationships in case of progressive disorders. Furthermore, it can also be inferred that higher the level of emotional quotient, perceived partner responsiveness and relationship satisfaction between the couple, less will be the perceived criticism.

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### **Conflict of Interest**

The author(s) declared no conflict of interest.

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