

# **Navigating Partner Relationships During Crisis**

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Presented by:



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## Navigating Partner Relationships During Crisis

Melissa Rosen, Sharsheret's Director of Training and Education:

Good afternoon, everyone. We're going to start in just a second.

Thank you for joining us. My name is Melissa Rosen and I serve as the Director of Training and Education for Sharsheret. I want to welcome you today to Navigating Partner Relationships During Crisis. Before we begin, I have a few housekeeping items to share. This webinar is being recorded and will be posted on Sharsheret's website along with the transcript. Only the presenters will be shown on the posted video. Still, if you would like to remain anonymous for today, you can shut your video off or change your posted name and instructions on how to do that will be posted in the chat. You may have noticed that all participants were muted upon entry. Please remain that way throughout the presentation. We recommend that you keep your presentation on speaker view, this will enable you to see the presentation, the presenters and the slides clearly. You can find this option in the upper right hand corner of your screen.

Melissa Rosen:

We received many, many questions before this webinar and I want to remind you that if you have additional questions now, please enter them throughout the presentation in the chat box, which you can find at the bottom of your screen and we will do our very best to answer all of your questions. As a reminder, Sharsheret has been providing telehealth services to the breast and ovarian cancer communities for almost 20 years. And although we could never have imagined the world the way it is today, through our services we have been preparing for this moment to continue to be there for you each and every day. Among our many programs to help women and their families navigate different aspects of the cancer experience, I want to highlight a few that may be of particular interest for you.

Melissa Rosen:

One of our many wonderful programs that our clinical team can connect you to is our Link program. If you're looking to connect with someone who's been there, we can find a peer support match for you. And as we look for a match, we take into account your exact diagnosis, your stage of life, and your specific concerns. We look to match you with someone who truly comprehends what you're dealing with. And we understand for those who are living with advanced or metastatic disease, your concerns may be different. Our Embrace group on Facebook is geared specifically to you and your needs. This group is a closed group moderated by a member of the Sharsheret clinical team. And you can become a member by answering a couple of simple questions. We'll post a link to that in the chat box as well.

Melissa Rosen:

Finally, I want to make you aware of our Spungen Foundation Family Focus program and kit. This program is to educate and support caregivers, all caregivers. Spouses, siblings, parents, friends, adult children, those caring in person and those caring from afar. If we can help them, then they can help you in a better manner. As we move into the webinar itself, I want to remind you that Sharsheret is a national non-for-profit cancer support and education organization, and does not provide any medical advice or perform any medical procedures. The information provided by Sharsheret is not a substitute for medical advice or treatment for specific medical conditions. You should not use this information to diagnose or treat a health problem. Always seek the advice of your physician or qualified healthcare provider with any questions you have regarding your condition.

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Melissa Rosen:

Today's presenters are truly wonderful. They have a relaxed and engaging way of talking about a very important topic and a wealth of experience in it. Dr. Lisa Blum is a licensed clinical psychologist who specializes in promoting healthy couple and family relationships. She is an EFT certified therapist and supervisor in emotionally focused couples therapy, one of the few research validated therapies for helping couples and families strengthen relationships and build stronger connections. Dr. Blum is in private practice in Pasadena where she co-founded the EFT Resource Center, a center for therapy and workshops for individuals, couples and families.

Melissa Rosen:

Our second presenter today is Dr. William Saltzman, and he is a clinical psychologist and professor of marriage and family therapy at California State University, Long Beach, where he directs the MFT graduate program. For the past 25 years, Dr. Saltzman has worked nationally and internationally developing and implementing treatment programs for children, couples and families contending with serious and chronic illness. He's trained and supervised thousands of mental health providers in the community and published over 50 articles. With that, I'm going to turn the program over to doctors, Blum and Saltzman. And thank you again for being here.

Dr. William Saltzman:

Thank you so much, Melissa. And thank you, Jenna, as well for inviting us to be part of this wonderful community that has built up over with the last 20 years. So Lisa, maybe you want to say hello as well.

Dr. Lisa Blum:

I do want to just say hello to everybody. Thank you for joining us and I'm so happy and honored to be with your organization and with all of you today.

Dr. William Saltzman:

So we've got a lot of stuff to cover, but we also want to make sure we save time to respond to whatever questions or concerns you come up with during this webinar. So I think we're going to talk for about 40, 45 minutes and then have an open question and answer period so please use the chat function. I'm going to say a few words upfront and cover some of my experience in research over the last, actually about six, seven years working specifically with the cancer community. I had the great opportunity to be taught by my clients and the survivors at Cedar Sinai Medical Center and Cancer Support Community in Los Angeles and cancer support community is part of this large national area of, I think they have 50 sites nationally to provide community based, free services for folks contending with all kinds of cancer.

Dr. William Saltzman:

One of the two takeaways that I had from this really life changing experience for me, one was that just the diagnosis of cancer or genetic vulnerability is life changing, but not only of course for the survivor, but also for the partner or spouse in so many ways. And this is born out by the research, which shows in fact really high levels of anxiety and depression, even post traumatic stress, both in the survivor and the caregiver. Also, the idea that the illness and the roller coaster of treatment over time presents as a long term stressor across families. A second takeaway is that certain qualities of that primary relationship play a central role in how well the survivor does, not just in terms of psychologically in adaptation, but also even medically in terms of their compliance with the medical regimen, but also in terms of their immune functioning in various ways.

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Dr. William Saltzman:

And this is also born out in a large and growing literature that shows the importance of relationships, in terms of the adaptation for both the survivor, as well as the caregiver and managing anxiety and depression across the long, often tumultuous journey from diagnosis through various forms of treatment across the various phases of survivorship. So in brief, the important role of relationship seems to be especially true in the case of breast cancer in genetic vulnerability. Studies on recurrent breast cancer show that survivors that report high levels of support and communication report less negative appraisal of the illness and the caregiver, and less of a sense of helplessness and despair. And there's been many studies that try to really break out what are the specific types of communication or support that are most helpful, and is finding that kind of the effect of responsiveness and involvement and engagement, the quality of the connection between partners is critical as well as expressions of caring, concern and compassion.

Dr. William Saltzman:

And this really kind of parallels with the findings that I find in my, I did a three year longitudinal randomized study at Cedar Sinai, and Cancer Support Community, which we introduced a 10 week, which is a very brief kind of an intervention, designed for us to first identify the strengths of each couple, each partner couple we worked with, and identify also possible gaps in how they were working together or gaps in the ways of relating or supporting each other, and then trying to train or graft on additional ways of working together. And what we found was that in fact, as we increase the effect of involvement and engagement and responsiveness, we found improvements in the quality of life and emotional wellbeing for both survivor and caregiver, as well as reductions in anxiety and depression.

Dr. William Saltzman:

And these were sustained over time. So these types of findings go to the heart of what we're talking about today, which is the idea that the quality of these important relationships is really important. And also the hopeful view that these relationship dynamics are changeable, even possibly in a short amount of time, even if couples and partners are locked into perhaps painful or really stuck types of habits of relationship, we've found that change is possible that new skills and relational habits can be learned. You can change the culture within the family in ways that better support both the survivor and the caregiver. So looking at this first slide here, we see, the cancer and the couple, so that's what I've been talking about here. Just the real close interaction of course between how the illness and the various types of treatment profoundly affect that relationship. But there's this feedback loop in terms of how this couple is as this is the context, the relationship is the context for dealing with the cancer and even with helping in the recovery. So this is a profound, close dance that is at work here. Next slide.

Dr. William Saltzman:

And we've got an added piece here now with the pandemic, this introduces another level of stress and a unique kind of a burden on the relationship. And even one of the, we've got a preview of some of the questions that were brought up by people in attendance here. One of them was that, is it just me or is the fact that I'm not talking to anyone else and I'm kind of locked in 24/7 with my partner, is that what makes him seem to be more annoying than usual? And the answer is yeah, probably. Of course being locked in these quarantined situations, I'm pointing to my room because I've been in this room for six months with my wife and my son in another room. But this really highlights perhaps the fault lines that are maybe even preexisting in relationships, areas that there are gaps in support and relation, but being kind of locked in here, it can kind of put all of our relationships at risk or put added stress on them.

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Dr. William Saltzman:

And when you add to it the preexisting condition of the cancer diagnosis, that heightened vulnerability during this time is an added stress as well. So at this point, I want to turn it over to Lisa to jump in here and talk about the way that these stress burdens accumulate. Lisa.

Dr. Lisa Blum:

Thank you, Bill. Yeah. So not only is there cancer and COVID, but look at everything else that's going on in our world right now that adds greatly to how activated our nervous systems are getting. So when we think about all of the political instability, no matter which side of things you may be on, just it's all in turmoil. When we think about the racial unrest that's been happening, when we think about the devastation to our economy right now, we are talking some major, major activation for all of our nervous systems in the world, the whole world right now. And the effect of all of this stress on our nervous system, and this is chronic stress on our nervous system. This isn't something that comes, you deal with it and it goes, this is things going on for months and months and months. This stress shows up for us in many, many ways. So it's impacting our bodies and our minds profoundly.

Dr. Lisa Blum:

It may be affecting whether you don't have an appetite or you feel like you want to eat all the time. It can very much be affecting your sleep and whether you're waking up in the middle of the night or early in the morning, or can't calm down when you're trying to go to sleep. It can be affecting just your level of energy. There can be an exhaustion and just a lack of any get up and go. There can be just every kind of stress reaction you can imagine. Racing hearts, skin breakouts, everything from this kind of chronic stress. And so all of this is terribly exhausting to our minds and our bodies. And so our question that we're dealing with today is at a moment like this, when we are going through such a terrible time as a world and also if you're going through the terrible time of cancer or cancer threat, isn't this the moment where we need our partners more than ever?

Dr. Lisa Blum:

Isn't this the moment where we feel like we want to be able to turn to our partner and feel calmed and soothed and loved and supported and feel better, feel like we have a little haven in the storm with our partner. And how is it that sometimes this can feel like it's the last thing we're able to do for each other and things seem to go so terribly wrong in these moments? How is it that we could be wanting to be loving and caring and kind to each other, and maybe are able to do that some of the moments, but then a moment later, we end up bickering and sniping at each other and turning away in anger and hurt, maybe going to bed in silence? Why now, why is that happening now? And that's the question that we want to really answer today, is an understanding of what's happening in our nervous systems that is making it feel harder than ever to connect with our partners and find soothing and calm and an antidote to all of this stress and anxiety.

Dr. Lisa Blum:

What's happening that makes that harder and how do we turn that on its head? How do we change that dynamic and this negative pattern that we can get into with our partners under stress and how do we help our relationships become truly the source and the font of soothing and calm. And so that's what we're going to talk about today. And it helps to understand, to get out of the stress reactions, it helps to understand how we get into them, because there is really a very logical reason for all of this. And so it's

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helpful to remember, and probably many of you do know this that under stress, our brains have really a very limited repertoire of options. And under stress, we typically go into flight, fight or freeze.

Dr. Lisa Blum:

And flight is, I need to get away from this, this is too much. Fight is, oh yeah, you just said that to me. Well, listen to what I have for you. And freeze is a kind of like deer in the headlights feeling where you're just shutting down and there's not a lot that you feel able to respond to in that moment. And why only these three, what's happening in that moment? Well, many of you may know, have heard about or read about something called the amygdala hijack. So just to remind you really briefly, our brain has a couple of different systems for dealing with incoming information. And usually we have a mix of emotion and rational logic to be able to process what's happening to us and make more reasoned assessments and more reasoned decisions about things, that's because we're using the neocortex or the frontal cortex to help us with the rational logical part. And we're able to use our limbic brain, which is the emotional system of the brain, emotion and memory that really helps us respond more emotionally.

Dr. Lisa Blum:

And normally, if you're not under severe stress, we're using both, we're using emotion and memory and we're using logic and reason and we can come up with a more measured response. But under chronic stress, which we are, you are right now, the brain defaults to the survival mechanism of the limbic system, because the limbic system is the one that lets you go to immediate action, to react really fast when there's a threat and you can see the survival utility of that. It's helpful to be able to react fast if you're under danger, but it's sort of like under chronic stress the brain reads everything as being a threat. And so our limbic system is reacting fast and negative to things that are coming in that on a different day at a different time might not feel like a threat at all. So an amygdala hijack is when the amygdala, this particular part of your brain is reacting to incoming stimuli as threat. And it's just telling you to go into fight, flight or freeze without really having the opportunity to assess and think through how threatening is this situation.

Dr. Lisa Blum:

And so it's when you find yourself yelling at your kids or verbally striking out at your partner or having a reaction that seems somehow so out of proportion to what might really be going on in the moment. And it's often the time where afterwards we feel bad and we feel, ugh, why did I react that way? That was too much. My partner didn't mean that, that's not what I wanted to say. And part of how this happens then between the partners is that both of you are really in this state of chronic stress. Both of you are having amygdala hijacks happen often because both of you are going through these incredible chronic stressors that we're talking about. So the way this might go is, suppose you want to tell your partner something you're feeling, perhaps you've had a hard day or perhaps it was a struggle with a child or a work mate or a bad appointment at the doctor's and you want to talk about it.

Dr. Lisa Blum:

So you think you're turning to your partner like this little kitten on the left. I just want to tell you how I feel, but because you are anxious, because you are stressed, maybe internally agitated, you are showing signs that your partner is reading. Your partner is reading your voice, your rhythm, your tone, your partner is reading the turn of your mouth or the clench of your teeth. Your partner's reading everything about your body language. Even your respiration rate, unconsciously, your partner might not be aware that they're reading this and because of your internal tension and stress, when you turn to talk to your

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partner, it can look like you are approaching your partner like this tiger on the right. They experience you as coming at them with this intensity or this agitation. And so what happens to your partner's brain, your partner's brain goes into a fight, flight or freeze response, and they're seeing something threatening coming at them. And so they respond harshly or too fast or cut you off. Or tell you to cool your jets or something.

Dr. Lisa Blum:

And when you are in a vulnerable state wanting to talk to your partner, but your partner is responding to you in a sharp way, then your fight, flight or freeze is triggered and you are now yelling something back at your partner or telling them that they never listen to you, or why can't they be more understanding. And so around and around it goes, this is where our brains are in the state of activation. And it makes it much harder. Even in our closest relationships, even with a partner that you know is kind and loving, or a partner that maybe you're struggling with, but you know you should be able to work this out, but these mutual amygdala hijacks that we trigger in each other make it so much harder to connect, to feel comforted or soothed, and so the state of our brains is what is creating this emotional disconnection between us. And emotional disconnection feels awful. It feels like you're alone.

Dr. Lisa Blum:

And I want to just mention, please feel free to put your questions as we go in the chat box if there's something that perhaps I didn't say as clearly as I could, I'm happy to go back and answer it later. So please feel free to ask any questions that are coming up as I'm talking. So the question is when we have this naturally occurring situation of our brains under threat, kind of triggering each other into emotional disconnection, what is it that we can do to change this? Well, the answer is a simple one, but not always an easy one and that's that we have to find ways to sooth each other. And I just loved this carving here, this statue of two people really holding and soothing each other. You know soothing works because if you think about a child and you either might have kids or you've seen children, or you were a child once, you know that when a child is having a meltdown, when a child is losing it or crying, what does a loving and calm adult do in that situation?

Dr. Lisa Blum:

The adult goes and picks up that child and holds them and maybe rocks them, or perhaps needs to take them out of a crazy environment, to a calm, quieter room somewhere so they can breathe together and they can calm down. This is soothing. This is basic human soothing, and we don't need to do this just for children, we need to do this for each other as adults. It is something that never goes away. Our need for this never goes away. And I'm going to mention just a really quick couple of things about attachment theory, because it explains how we as adults need this just as much as kids do. So here's a little quote from Winnie the Pooh, one of my favorite childhood books. And here you have Piglet, who's sidles up to Pooh and says, "Pooh." "Yes, piglet?" "Nothing," says Piglet taking Pooh's paw. "I just wanted to be sure of you." This is the essence of what we need from our partners, to be able to be sure of them, to know that they are right there with us when we are our most scared, our most stressed.

Dr. Lisa Blum:

This is a built in survival system for humans. This is how we calm our nervous systems, how we feel safe and how we sooth each other. Love is one of our most basic needs and it goes from the cradle to the

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grave. It is not something that we grow out of, or that we stop needing after the age of about 10. It is something that we always need and it's necessary like food and water. It is not something that we can adult our way out of and we are never so self-sufficient that we don't need someone else on this planet to respond to us. We need to know that if we call out, we will matter enough for someone to come to our side and to just take their paw and just be sure of them. And part of the experience of being human, is that being in any way separated or apart from the person who is our primary person in the world is an experience of isolation and loss, and it is inherently traumatizing.

Dr. Lisa Blum:

Our brains read distance from a loved one as a danger cue, a danger signal of life or death importance. And you can understand how that has evolutionary value. We are much more likely to survive in the world if we have each other's backs and I can access you quickly. So how is it though that our partner can be just across the living room from us, and can still feel a million miles away? And how is it that we can sometimes get so worked up and feel so alone, even in the midst of a relationship, a commitment, a marriage, a home, a family, how can we still feel so apart? And it has to do with that ability to emotionally connect. We have to be able to feel like our partner is not just physically present, but emotionally present with us. And you can see that when we are able to offer that kind of presence with each other, look how both the child and the mom here feel that sense of calm and peace and connection.

Dr. Lisa Blum:

And that secure connection gives us a safe haven from this very scary world, and it gives us a secure base to be able to venture out boldly and bravely into the world. And as human beings, it's our ability to reach for another, to seek calming and comfort for ourselves, that really is our strength. We are able to reach out and ask for the hand of another to help us become stronger and more resilient as a result. The Dalai Lama talks about the fact that whenever he's facing something scary or difficult or feels unsure of himself, he is mentally able to recall his mother's voice and imagine sitting next to her and holding her hand and that becomes his source of strength and resilience. This, what I'm sharing with you right now is not just lore or even sort of clinical anecdote, this has actually been proven in science. So the need for another and how connection to a close other helps us calm and sooth.

Dr. Lisa Blum:

So I want to tell you about this study really quickly, and then we will definitely be moving on to how you build this emotional resilience with your primary person so that you can get more of this good calming and soothing that we all so much need, and that you especially need when you're going through the multi-crises that you may be going through or facing now. So really quickly, there's a researcher by the name of Jim Cohen who's a neuroscientist at the University of Virginia, and he did these MRI studies exploring stress and connection. And they asked these women participants to go into an MRI machine. And they were told that on the little screen, over your head, you're going to see a red X pop up some of the time. And when that X pops up, you may or may not get a mild or moderate shock on your ankle.

Dr. Lisa Blum:

And they had three conditions. One in which the woman was in the MRI alone, the woman was in the MRI with a stranger holding her hand, or the woman was in the MRI with her partner, her spouse or her



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romantic partner holding her hand. And what they were looking at is what happened in the women's brains when that little X came on the screen indicating a danger, a threat, something bad might happen. I might get this shock. And they were reading particularly the parts of the brain that activate when there's fear or anxiety or stress. And so what they found was that when the woman was in the MRI machine alone and the little X would go off, the fear centers of her brain would light up. Meaning there was fear and anxiety, and afterward the woman would report, I was very anxious and the shock on my ankle hurt a lot. So high anxiety, high pain.

Dr. Lisa Blum:

In the second condition, when a stranger was holding her hand, the fear centers in the brain still lit up but less. And the woman would report moderate anxiety and moderate pain on my ankle. Mind you, it was the same stimulus every time, the amount of pain never changed, the number of Xs never changed. In the last condition, when the partner was holding a woman's hand, very few fear centers in the brain lit up, very little activation and the woman would report hardly any pain at all. And no, I wasn't very anxious. So what is this telling us? This is telling us that even our perception of stress, whether this is a big stress or a little stress, and even our perception of pain, how much did this hurt? Mind you, it was the same minor shock every time. How much this hurt changes is based on whether we have a loved and trusted person at our side holding our hand.

Dr. Lisa Blum:

So that connection really can modulate and mediate how much stress and pain we experience when we're going through something in the world. As a PS, there was an additional condition in which the woman was holding the hand of her partner, but it was not a very closely connected relationship. It was a distressed relationship where they were in a lot of conflict, and this did not have a protective effect, this woman experienced higher levels of pain, higher levels of stress, much like when she was alone. So it's really about the quality of the relationship that feels nurturing, soothing, safe and connected, that is able to actually help us face better the anxiety and stress that we're dealing with in the world.

Dr. Lisa Blum:

Again, thoughts or questions about that, please share them in the chat box and we'll be happy to answer them after. So the take home of all of this is that there is something called effective dependency. That to be emotionally connected, what we think of as dependent is actually a way to be stronger and more resilient and more autonomous. That it's the connection and that ability to reach for the other that helps us be able to face these very significant challenges better. I had a client who I worked with for a number of years who was going through breast cancer treatment, and she had a very loving relationship with her husband. But he also had a pretty intense job that did not allow him to come to every appointment that she had. Sometimes she had to go alone.

Dr. Lisa Blum:

And what she told me is that when her husband couldn't go with her, particularly like to her chemo treatment, that she would sit and meditate and try to imagine the feeling of his hand on the small of her back, because that was something that made her feel very soothed and comforted, even when he couldn't physically be there with her. So it's that kind of ability to draw on the comfort and strength from our partners that is strength giving. So earlier Bill mentioned these three words, accessibility, responsiveness and engaged. And I'm going to come back to these and talk about this a little more when we talk about the strategies to get here, because I want to make sure we leave enough time for that.

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But it's this idea that I can reach you if I need you, you're accessible to me, you will turn and be responsive to me and that you will really give me your attention, that I matter to you because we want to be able to feel our partners put down their phone or their work or whatever they're doing and engage with us and give us their attention.

Dr. Lisa Blum:

Whether you are able to respond to your partner in an accessible and responsive and engaged way, really depends a lot on where your nervous system is. And the reason I'm just going to take a moment more to explain this is because we have to get our nervous systems into the right place to be able to respond to our partners in this kind of accessible and responsive and engaged way. So the window of tolerance is the place in the middle, that green zone, where our nervous systems are not under severe stress. We're able to be flexible, we're able to use both emotion and logic and rationality to process things we have to deal with. But often under severe stress, we go into either the red zone or the gray zone. And the red zone is a hyper arousal. It's sort of more of the fight part of fight, flight or freeze where we are over-reactive, it's hard to think clearly, we're emotionally distressed. We react at the drop of a pin, and it's very hard to be measured in our responses.

Dr. Lisa Blum:

On the other hand, sometimes our brains go into the flee part of fight or flight, into the flight part, where our nervous systems are shutting down to suppress the feeling of being overwhelmed. And here we can feel lethargic or numb or checked out or spacey. And we don't really feel like we can muster a response to whatever's being presented to us. And the problem is that when we are not in the green zone and we're in the red zone. We can sometimes in the red zone, we can act like firecrackers, just popping off to things that come to us, or we are checked out like this couple is where we're just disconnected and we can't find that emotional connection. So all of this is to say, to hopefully make a case for why the strategies we're going to share with you now for really calming, so that you can connect, so that you can be back in the green zone are the things that are so necessary to actually rebuild your emotional connection. And that is the thing that will really help your resilience and your strength going through these multiple crises.

Dr. Lisa Blum:

So here first I have a set of things that are about helping each other calm down mutually using each other, using the resources of each other, to together get yourselves back into that green zone and calm down. So one of the first categories starting on the lower left and I'll work over is physical contact and comfort. And we talked about this already when you think about that baby who's having a meltdown. Imagine the adult just standing over the baby, going, you're really overreacting, you need to calm down right now. This is not acceptable. That would never work, right? We know that we need to pick up that baby. We need to do that with each other. We need lots of different kinds of physical contact and comfort. We need cuddling. We need holding. We need long hugs. We need stroking. We need neck massages. And here I'm not necessarily talking about sexual contact, although for some that may feel very relieving and soothing and comforting. And so that certainly can be on the list, but I'm not specifically talking about that here.

Dr. Lisa Blum:

I'm talking about just physical affection and comfort the way we would with a baby. Breath work is really important. And by breath work, we mean any of the breathing that you've learned through yoga or

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through meditation or through Tai Chi, but doing it together, sitting with each other and breathing together. There's something called a couples breath where you either stand chest to chest, or if you have big height differences, you might find it easier to lie down on the bed and get your chest at the same height together facing each other. And you just spend a few minutes trying to really relax into a shared breathing rhythm. This really connects our nervous systems and helps them both come down. It's called, co-regulating. Also, as funny as this may sound, really gazing into each other's eyes, taking a few minutes to just sit quietly and gazing into each other's eyes has enormous co-regulation ability for couples. And especially if the gaze that you're sharing is a loving one with your partner, just even without words, that helps us sooth their nervous systems.

Dr. Lisa Blum:

Funny as it may sound, tossing a ball back and forth with each other, a ball, a hacky sack, an orange, there's something about the rhythmic nature of it and engaging each other in eye contact that helps us calm our nervous systems. So intentionally doing something physical together is very important. I want to jump over to the right for a minute and talk about time together, because it goes with any of these things. We're leading such busy crazy lives and doing so many different things that we need to manage in a day, that something that often falls off the list is time together. So intentionally creating, even if it's 15 minutes a day where you're giving each other your full attention, that is incredibly important. And that goes actually with the rituals and routines, because setting aside very reliable practical times that you can have these moments of contact and connection really help.

Dr. Lisa Blum:

So that might mean in the mornings, a cup of coffee together before everybody's running off to do the things they have to do that day. That may mean a lunchtime check in on the phone for 10 minutes where it's just about, hey, how are you today? That might mean a Wednesday night, it's our favorite show, we get our favorite meal and we sit down together and we have this routine of always doing this. It's about setting up things that are reliable and a regular part of your week that build that emotional connection. So let me know, Bill, do you want to talk a drop about the conversation practices, just reflective listening and empathy that can really help couples build emotional connection?

Dr. William Saltzman:

Oh, sure. Yeah, that'd be great. And I think I'll tie it in also to some of the comments or questions that we got just before we started here. Some of the people asked about, what do I do, sometimes I want to tell my partner just to be positive, getting kind of frustrated or angry because they're stuck in kind of a downward spiral and they're just kind of cynical or down and this kind of thing. Can I just tell them to be positive and want to say that, that is one of the key things I think in doing this work is not so much to try to impose, see, when you're saying that, I want you to be positive or I'm not liking the way you are. You're coming at that possibly in the red zone or maybe in that stilled with kind of like the Panther. And you're not able to hear your partner.

Dr. William Saltzman:

So part of this is choosing the moments that you two engage. And this is when you're in that window of tolerance so that you can be, you don't have to respond instantly to the other person. You can take a little while and say, let me come back to that or even say, may kind of bookmark that and make some time later. So when you feel a little more regulated yourself so that you have created some space so that you can check in with the partner and one of the great ways to do this is to, they can read you, that

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you're not in this fight contentious place, but you have some receptivity so you can hear them and have a great way to communicate, to help your partner to cool out as if they feel that they are heard by you and the way you communicate that is to use reflective listening, which you can, they say something, and then you try to summarize or kind of reflect back even just kind of keywords that they're saying.

Dr. William Saltzman:

And for this moment you're putting aside your stuff, you want you to be positive. I'm mad, I'm pissed off at you about this, but for you to be able to push that aside so that you can hear them and just reflect back. And that is a key thing. And that's also helpful. One of the other questions that you guys came up with was how do you have conversations about the scary stuff and what do you do? Because there is sometimes as the survivor, you're presented with scary things, scary decisions to make. Things that are very isolating that make you feel alone, in that moment you want to reach out to your partner. How do we talk about these things? I think a key thing here once again, is to choose those moments to honor and to give respect to the importance and the weight of these topics.

Dr. William Saltzman:

So you just don't, while you're in the red zone or the dark zone, you don't just pop off with this, choose those moments as well. And with the idea that also that you don't have to come to resolution or solve something all in one sitting, you can have multiple passes on these big topics. But a key thing is, is to start to choose the moments as well as use this kind of reflective listening, even if one person does that, that can help the other person co-regulate and chill out a little bit. So I don't know if you want to add anything to that, Lisa, but the conversation-

Dr. Lisa Blum:

That's beautiful.

Dr. William Saltzman:

... is really key. And just the thing that you can rebuild the way that you converse, even if you can have this habitual really toxic ways of talking, especially for the hard stuff, especially when you're in that activated state, learn to become mindful of that and know that this is not the time or the place for me to jump into some delicate stuff.

Dr. Lisa Blum:

Right. I want to add one quick thing to that and then I want to pause here, because I know we have questions and I want to leave the rest of the time to answer them. One other thing, if you find yourself in the red zone or in the gray zone, which is sort of shut down and unable to respond during a conversation, it's really helpful to take a constructive timeout. So the constructive timeout is different from, I can't talk to you. You're crazy. That's not a constructive timeout, but being able to say, you know what, I realized right now I'm just kind of shutting down. I can't find a response. You can say, you know what? I realized I'm just crazy right now and I don't have a good answer and I need to just take some time for myself. I will come back to you at, and then to give a specific time.

Dr. Lisa Blum:

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So that might be 20 minutes. It might be two hours. It might be the next morning, but to actually commit to a time to come back to the conversation and pick it up again then is way better than trying to have the conversation if either one of you is not in the green zone. And that is a way that you build liability and predictability in your relationship, that both of us are working toward being able to communicate really safely with each other so that we can both feel heard and held. Let me just pause there because I imagine Melissa, we might have questions popping up and I want to leave the remainder of the time for that.

Melissa Rosen:

Thank you both so much. That was absolutely fascinating and incredibly practical. We did have some questions pop up in addition to ones that were asked prior. So let's just start with them and see where that leads us. So one of the questions that came in was, what advice can you give for someone who is in a relatively new relationship and is dealing now with cancer and COVID, how does it being a new relationship impact your advice?

Dr. Lisa Blum:

So it means that there's not as much of a history to draw on, which can be a good thing and a bad thing. There might not be as much of a history of conflict or strife, so that's good, but it also means that there's not as much predictability or reliability around knowing that the other person will be here for me. So what I would say is you have to make the need for that predictability more explicit. In other words, you have to talk to each other about the fact that my gosh, here we are in this new relationship going through these two major crises of cancer and COVID, and what does that mean for us and how can we show up for each other? And how do we make sure that neither one of us is getting overwhelmed.

Dr. Lisa Blum:

You have to be able to talk explicitly about what's happening in the relationship. You don't have to do it all at once. It can be in parts, little bits at a time, but being able to talk together when you're both in that green zone will build that sense of emotional connection and safety. It will be that sense of safe haven, but even in a new relationship, we could talk about these very difficult things.

Melissa Rosen:

Thank you. Thank you. Another different situation that came up in the questions was, same question, different situation, long distance partnership, what recommendations do you have there?

Dr. Lisa Blum:

Bill, if at any point you would like to take the question, please just signal and jump in.

Dr. William Saltzman:

You start, I'll jump in.

Dr. Lisa Blum:

Okay. That gives me an opportunity to talk about the orange square here that I didn't talk about, which is that accessibility, responsiveness, engagement. So these are important, whether you're in the next room from each other, but especially important if you're across time zones from each other. And so really making very explicit agreements about how will we be accessible to each other. And what that

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means is literally, how can I reach you? So like just a quick example, I as a therapist, I'm in sessions back to back much of the day. So how does my wife and my daughter reach me if I can't be interrupted in a session? We make an explicit agreement. You will text me and at five minutes to the hour when I have my quick break, I will make sure that I look at my phone.

Dr. Lisa Blum:

If I can't respond then, I will let you know when I'll be able to respond. So I'll text back, got your message. I can respond at 1:00, so that I am being both reachable and responsive in a time where we may not have direct access to each other. And the engagement part is when we do connect, say on a Zoom call, if we're long distance partners, can I really have your full attention? Will you put aside everything else, will you turn off the pings and dings on your phone? Will you be fully present with me during that time so that I know I matter, and I know I'm important to you. And being intentional about accessibility, responsiveness, engagement, it takes thought and planning and intentionality is a big part of what builds emotional connection.

Dr. William Saltzman:

I can't add anything to that. Lovely, thank you.

Melissa Rosen:

Okay. Let's try and shoot for two more questions. One is, how can you manage it when each person in the relationship deals with a health crises very differently?

Dr. William Saltzman:

We were running into that a lot in our practice as well. It applies to the differences from your family of origin, we have different kinds of learned and built in responses, the responses to crises. I think one of the first important things is to name the difference, we can assume, when someone is over or under reacting to the health crisis or to COVID, that can really put you at so much odds and a lot of the couples and families were dealing with some perceived threat of infection is much higher than others and they have much more rigid reactions and others less so. And it put them in odds in so many ways. So the first thing, instead of getting into a, that kind of habitual amygdala hijack way of reacting to each other is to name the differences.

Dr. William Saltzman:

And to notice that it's not that this person is being insensitive or not getting it or being out of touch, it's that you guys come from a different frame of reference. So we want to decriminalize these differences in reactions and start to get a sense of, and maybe start to have some conversations about how they're thinking about both the illness or the threats and what is standing out for them, what is activating them. And so just naming it and decriminalizing in that way and help to kind of bring it down a bit. So it's not going at each other.

Melissa Rosen:

Thank you. That was very helpful. With cancer treatment, breast and ovarian cancer treatment comes a lot of reactions. There may be pain or exhaustion. If there's hormone therapy, there may be mood swings. The question came in, how can I work toward emotional stability with my partner, when I don't feel emotionally stable in the first place?

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Dr. Lisa Blum:

Yeah. So I wanted to share one other slide that speaks to that directly because we also had some ideas for how to help oneself calm down and get in the green. And we don't have enough time for me to go into all the details in this, but you can really pick the strategies. And by the way, I'm happy to provide a list of all the strategies, both the mutual strategies and the individual strategies to you, Melissa and then afterwards, perhaps it can be available to the participants here.

Melissa Rosen:

Absolutely.

Dr. Lisa Blum:

Of all the ways that we can first really work on getting ourselves calm, but I don't want to leave out also asking your partner for help in that. So in other words, part of this number that we resource others and that's how we actually get stronger is to be able to say, look, my lovely partner, I've done these three things because I'm really working on trying to center and ground myself and get myself into the green zone. But because I have you here, I will be able to feel so much better if you can also help me do that. For example, by tossing this ball with me for a few minutes or holding me for 10 minutes at night before we go to sleep or wrapping me in a blanket and making me a cup of tea and sitting with me. That it is both the doing for yourself and there is much here that one can do for themselves, and asking your partner to do it with you, to help you. That is really the most powerful resourcing and ability to be resilient. We are not alone in this.

Melissa Rosen:

Thank you. Thank you so much. And in fact, I want to thank both of you for offering to provide us with lists of these actual techniques. That was one of the questions that came in and we can send that out in an email to anyone who's registered and also post that on our website, so that's amazingly helpful. I want to thank you both for sharing your expertise. I found it incredibly helpful. I'm sure all of you did as well. And I want to thank our sponsors for today's webinar, the Florence and Lawrence Spungen Family Foundation and the Sigmund and Edith Blumenthal Memorial Fund.

Melissa Rosen:

Finally, an important reminder, Sharsheret is here for you and your loved ones during this time. We provide emotional support, mental health counseling and other programs designed to help you navigate through this cancer experience. All are free, completely confidential and one-on-one. In the chat you'll find our contact information, but our number is (866) 474-2774, or you could always email us at [clinicalstaff@sharsheret.org](mailto:clinicalstaff@sharsheret.org). Our social workers and our genetic counselor are available to each of you. You are our priority, your health, your wellbeing and we're going to get through this together.

Melissa Rosen:

We have several exciting webinars on a wide range of topics planned for this fall. Please check out our website regularly to see what's coming up. But the next one we have scheduled is for September 9th, join Sharsheret in the Kitchen for a free live cooking demonstration with Dini Klein, the founder of Prep and Rally to help make your holiday healthier and simplified. This program is actually part of the Sharsheret in the Kitchen series, which brings nutritious meal options to our holidays to help empower all of us about our risk for breast and ovarian cancer by making healthy diet choices. That does it for today. You will receive the information we discussed in a follow up email. You can also see in our chat

box right now, a link to order the Spungen Family Focus kit. And you will receive a link to fill out an evaluation. And if your question wasn't answered, we will do our best over the course of this week to email you privately for an answer to the question. Thank you all so much. Have a wonderful day and stay well.

### **About Sharsheret**

Sharsheret, Hebrew for “chain”, is a national non-profit organization, improves the lives of Jewish women and families living with or at increased genetic risk for breast or ovarian cancer through personalized support and saves lives through educational outreach.

With four offices (California, Florida, Illinois, and New Jersey), Sharsheret serves 150,000 women, families, health care professionals, community leaders, and students, in all 50 states. Sharsheret creates a safe community for women facing breast cancer and ovarian cancer and their families at every stage of life and at every stage of cancer - from before diagnosis, during treatment and into the survivorship years. While our expertise is focused on young women and Jewish families, more than 15% of those we serve are not Jewish. All Sharsheret programs serve all women and men.

As a premier organization for psychosocial support, Sharsheret’s Executive Director chairs the Federal Advisory Committee on Breast Cancer in Young Women, Sharsheret works closely with the Centers for Disease Control and Prevention (CDC), and participates in psychosocial research studies and evaluations with major cancer centers, including Georgetown University Lombardi Comprehensive Cancer Center. Sharsheret is accredited by the Better Business Bureau and has earned a 4-star rating from Charity Navigator for four consecutive years.

Sharsheret offers the following national programs:

#### **The Link Program**

- Peer Support Network, connecting women newly diagnosed or at high risk of developing breast cancer one-on-one with others who share similar diagnoses and experiences
- Embrace™, supporting women living with advanced breast cancer • Genetics for Life®, addressing hereditary breast and ovarian cancer
- Thriving Again®, providing individualized support, education, and survivorship plans for young breast cancer survivors • Busy Box®, for young parents facing breast cancer
- Best Face Forward®, addressing the cosmetic side effects of treatment
- Family Focus®, providing resources and support for caregivers and family members
- Ovarian Cancer Program, tailored resources and support for young Jewish women and families facing ovarian cancer • Sharsheret Supports™, developing local support groups and programs

#### **Education and Outreach Programs**

- Health Care Symposia, on issues unique to younger women facing breast cancer
- Sharsheret on Campus, outreach and education to students on campus
- Sharsheret Educational Resource Booklet Series, culturally-relevant publications for Jewish women and their families and healthcare Professionals

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