

Decode Your Divorce Part II

**Dealing with Mental Health,
Addiction, and Personality
Disorders in a Divorce
Proceeding**

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INTRODUCTION

Divorce is messy enough on its own. When you find yourself dealing with mental health disorders, personality disorders, and addiction in relationships, family law gets complicated. The last thing that you want is to create more stress or make things more difficult but addressing addiction and mental health is absolutely necessary.

Knowing how to deal with these situations can save you a lot of trouble and give you the peace of mind that you have a solid plan.

Of course, the plan that you need and the path that you take depends on whether the mental health condition or addiction is yours or that of your spouse/partner. EA quick Internet search reveals that both partners in this equation are struggling. Articles talk about getting through a divorce with a mentally ill spouse or how to manage one's own mental health during a divorce.

There are no good guys and bad guys. Mental illness and/or addiction is challenging and painful but it doesn't make the one afflicted the enemy and we hope this resource will work for you whether you are struggling yourself or exiting a relationship with someone who's struggling.

Divorce is listed as one of the top five most stressful situations to deal with in your lifetime. It can wreak havoc on the mental and emotional health of even the most stable person out there. It's a messy process and it rarely ends amicably, and when mental health and addiction are involved, it can get even messier.

Divorce can have a serious impact on your mental health, and vice versa. Understanding the complex relationship between the stressful life event and your own mental health is the starting point for creating a better outcome in your divorce, no matter what you are dealing with.

*While this book addresses “divorce”, we are really talking about any family law matter, whether you are married or not.

**You will also see the term custody and parenting time. Even though Arizona does not use the term “custody” most of the country does. Custody refers to decision making and physical possession of the children.

CHAPTER 1

What is a Mental Health Disorder?

In a divorce, your entire life and personal circumstances impact the process and the outcome. Mental health disorders are one topic that often goes undiscussed, and yet they can have a huge impact on divorces, break-ups, co-parenting agreements, and other relationship issues. By taking the time to learn about mental health disorders, addictions, and other personality disorders and how they can impact your family law case, you will be better prepared to deal with what is coming your way and make a plan.

In this book, we'll cover the basics of mental health disorders and their impact on relationships and issues like divorce, and then we'll take an in-depth look at several different common conditions and their role in and effect on divorces and custody issues. In addition to offering insight and education, we'll also help with tips and tools for managing your own mental health conditions and information on how working with your attorney to come up with a plan will be the ticket to your success.

What Qualifies as a Mental Health Disorder?

There are several different conditions that are listed as mental health disorders. Essentially, any condition that affects the operation or proper function of the brain qualifies as a mental health disorder. The textbook definition refers to these conditions as “disorders that affect your mood, thinking, and behavior”.

Since these neurological or biological conditions affect mood, thinking, and behavior, they can have a tremendous impact on a divorce, which places stress on everyone facing it. It's only natural that mental health disorders would also have an impact on divorce and

child custody proceedings.

Some of the most common conditions include depression, eating disorders, anxiety conditions, personality disorders, and addictive behaviors. These can be caused by external elements and some have a genetic factor to consider, as well. Regardless of the cause, though, it's important to find the right treatment plan and to understand the impacts of those conditions when making a plan.

For those going through a divorce, that also means finding a way to manage the condition during the proceedings for either yourself or your soon-to-be ex-spouse (STBX).

It's important to note that you or your spouse can have a mental health condition or addiction without it being diagnosed. Just because you haven't seen a therapist or sought treatment of any kind doesn't mean that the issues don't exist-- it simply means that they haven't been diagnosed yet.

Some people might be wondering about the verbiage-- we've used a few different terms and will continue to do so. Let's make it clear from the beginning. There is no difference between a mental health "condition" and a mental health "disorder" other than the name. They're interchangeable.

There is a specific list of diagnostic questions that is used to determine whether or not a person has a diagnosable mental health disorder. This comprehensive list covers every aspect of mental and emotional health to see where people stand, what issues they are struggling with, and what mental health conditions that might point to.

People do not have to be diagnosed to have a mental health condition, of course, but getting diagnosed is the first step to getting treated and getting life back on track.

Let's get back to discussing the topic of what qualifies. Up next,

we'll cover addiction and whether it's a mental health issue or not.

Are Addictions Considered Mental Health Disorders?

Yes, addictions qualify as a mental health disorder. They are still being studied, and there is a lot to learn, but there is clear proof that addictive behavior is a mental or emotional issue or both.

There are different types of addictions, beyond just alcohol and drugs, and they can all take their toll on relationships. They can also have a serious impact on the proceedings and outcome of a divorce hearing. Substance abuse is a specific factor in the analysis process and mental health conditions are also factored in when determining custody and parenting time.

There are some proponents and professionals that have been studying addiction who want to put it in a classification of its own. That is, rather than lumping it in with the rest of the mental health conditions, they feel that the research is compelling enough to create its own category of conditions because addiction is not just a mental health condition.

Addiction is a physical, emotional, and mental disease that takes a toll on the lives of billions of people every single year.

We'll talk about addictions more in a later chapter, but for now, you should understand that yes, they are part of the family of mental health disorders. There are also several factors that can cause, lead to, or exacerbate addictions, so those will need to be considered, as well.

Sometimes, people use addiction to escape other mental health issues, or the addiction is comorbid (exists simultaneously) with an anxiety or depression disorder, for example.

How Specific Conditions May Affect Custody and Parenting Time

There are several factors at play here. When a parent has a mental health condition, it could impact their ability to function or be a qualified parent during their time alone with the child. Some parents are unpredictable because they don't manage their conditions well or they are not receiving proper treatment, thereby posing a potential threat to the child.

The judge may not want to grant custody or visitation to a parent that appears unstable or unable to provide a stable living environment for the child, because that would not be in the child's best interest.

In some cases, even when one person has a handle on their condition, their spouse may attempt to use it against them to gain custody, improve their own case, or for other nefarious reasons. There are endless cases of ugly divorces where one spouse has attempted to use addiction, mental illness, or other "dirt" to threaten the other parent's access to the child. Mental illness and addiction are not weapons-- they are serious issues.

That's why it is so important for you to take the time to learn about these conditions and how they may affect your divorce and custody proceedings. You have to be prepared for anything, and after years of experience in the industry, I can tell you that *truly means anything*.

Mental illness and addiction can affect custody and parenting by:

- Limiting how much time a parent can spend with a child
- Requiring supervised visitations for parents that are deemed "unstable"
- Creating situations where custody is denied to a parent because

of an addiction or mental health condition

- Causing a child to be placed in the “system” when there is no fit parent available to provide custody and a stable living environment
- Causing struggles in co-parenting and shared parenting agreements that last well beyond the initial case
- Creating an ongoing point of contention for spouses who are always looking for a reason to create or exacerbate conflict

Children aren’t pawns, but are often used like them during a divorce proceeding, and that can have an effect on the children in several ways. It starts with the custody and co-parenting arrangements, but the real impact is on the child’s relationship with that parent and their own self esteem. Of course, when you factor in the additional impact of the mental illness on parent-child relationships, you can see how the extra strain could only serve to make things more challenging for everyone involved.

The Many Emotions of Divorce

Divorce is an emotional process for everyone! Even the most amicable divorces will have the stress of the separation and major life changes involved. Of course people’s emotions are going to be on high alert. Every divorcing couple experiences the following:

- Anger
- Sadness
- Grief/Feelings of Loss
- Stress and Anxiety

- Uncertainty and Fear
- Resentment

Mental health disorders, personality disorders, and other emotional issues affect several areas of daily life. Divorce is already an emotionally-charged process, full of so many feelings and issues that need to be resolved, including those mentioned above. Adding a mental health disorder or addiction to the mix only makes those feelings that much more apparent and difficult to deal with.

In some cases, divorces are amicable and the only real stress will be any impact caused by mental health disorders or addictions. However, that is far more often the exception than the rule. In the following chapters we will dig into the specific emotions, conditions, and ramifications that come from divorcing and mental illness.

Anger and Resentment

Anger can be a dangerous and unpleasant emotion, but it is one that is all-too-often at the center of many divorces, custody cases, and relationship battles. People struggle with communication and conflict, and in many cases, end up left with nothing but anger and resentment because they were unable to succeed at their relationship or because the other person hurt them in some way. It is often said that anger is a secondary emotion and the primary emotion underlying anger can be many things, hurt, pride, rejection, fear, sadness, etc.

When people struggle with borderline personality disorder, bipolar disorder, or even addiction, anger can fuel the fire. Unresolved anger can even lead to addiction or substance abuse in some cases, and can exacerbate just about any emotional condition, including depression and anxiety.

When people are angry, their bodies are anxious and in a state of unrest. It's only natural that their already-taxed mental and emotional

state will respond in kind. This also goes hand-in-hand with resentment. People tend to develop these feelings when they are in a dissatisfying relationship or when their partner isn't living up to their expectations.

If left unaddressed, a sense of resentment can become the kryptonite for any relationship, even after a divorce. In order to maintain any level of contact, it will be imperative for the spouses to be able to forgive each other and move forward. Digging in to the underlying primary emotion with a counselor can help resolve or evolve the emotion of anger. When mental health disorders and mood disorders are factored in, that can be nearly impossible to fathom, but it is possible! A great therapist coupled with a very willing participant can tame anger.

Sadness

For people who struggle with depression and bipolar disorder, specifically, sadness can be an emotion that makes divorce more difficult. The feeling of heartbreak and having to rearrange your life, along with that sense of failure that many people get after realizing that their marriage isn't going to last, is often made worse by existing mental health conditions related to depression and moods.

Mood disorders characterized by bouts of mania and depression could also be exacerbated by divorce, making the depression periods last longer or causing anxiety and undue irritability during the manic episodes. There are so many variables to consider here, which is why you should pay attention to the specific condition that you or your soon-to-be ex are dealing with and how it could be affected by the emotions involved in divorces and custody cases, including sadness.

When you are sad, you may not be motivated to try as hard at things. This could run over into your divorce case. Even when your attorney is doing their best to get the outcome that is fair for everyone, you

might find yourself sabotaging things or not caring, which can be a sign of depression or other conditions that may need to be addressed.

If you or your STBX have already been diagnosed with some type of depression or other mood disorder, it's probably going to be difficult to keep things balanced during the divorce process. That is, of course, unless you are prepared.

Grief/Feelings of Loss

A lot of people don't like to think about it, but there is a sense of loss that comes with divorce and breakups. There is a natural grieving process that takes place, and it can be more or less severe for different people. The feelings that you have are never wrong, though, whether they are serious or just fleeting, and they are yours to have.

Often, people will try to avoid the loss or dealing with the related feelings. When people already struggle with mood or mental health disorders, it can be further worsened. Some might turn to drinking or drugs, spiral into a worsening depression, see increased anxiety as a result of grief, and more.

There is so much that can happen and grief is a tumultuous enough experience on its own. Adding mental health and mood disorders to the mix only adds fuel to the fire. Your entire world is changing when you go through a divorce. Trying to maintain your mental and emotional wellbeing can be a challenge for anyone.

Stress and Anxiety

When you hear the words "divorce" and "custody", your blood pressure probably immediately shoots up. These two terms, and their actual practices, cause a serious amount of stress and anxiety for many people. For those who already struggle with anxiety, it can be immediately and consistently overwhelming. Having a plan can mean

the difference between getting through the process and experiencing a good long term outcome vs. having a complete breakdown or settling for a terrible outcome just to make the litigation stop.

Anxiety is a serious condition that comes in several forms. It is agitated, exacerbated (made worse) and brought on by stress. It can affect people's day-to-day lives and keep them from being able to live to their fullest. In some cases, it can lead to things like avoidance anxiety.

What's avoidance anxiety? This is a characteristic of anxiety conditions and some forms of ADHD marked by an inability to function or complete tasks due to anxiety or stress about them. For example, someone with a looming deadline for work might put it off until the last minute because they are anxious about where to start.

In the case of a divorce, there is a definite timeline in place and it is essential that everything is done in a timely fashion. Being unable to complete paperwork, make appointments and court dates, and struggling with other tasks can all make the process that much more difficult. It can be easier with a qualified lawyer on your side, but it still won't be a walk in the park so you will want to be prepared.

Uncertainty and Fear

There is much fear and uncertainty for couples and children involved in a divorce and custody case. The entire process is stressful and everyone's lives are changing-- it's a big deal. Of course you're going to be fearful of what's to come, stressed and uncertain about the future, and unsure of how to proceed as a result.

For those who struggle with anxiety and other conditions related to fear and stress, this added uncertainty will only serve to make things worse. Although you can plan and try to prepare, there is never an exact timeline or roadmap through the divorce and custody process.

This can create undue stress for those who struggle to just “go with the flow” or for those who can’t overcome their anxiety to handle the divorce process accordingly.

Throughout this book, we’ll talk about several mental health and mood disorders, as well as how they are marked by their own uncertainties and how they can affect the entire divorce process, and vice versa. In most cases, you can avoid a lot of issues by being prepared, but there is never anything that will remove all of the uncertainty.

To a certain degree, you have to do your best to educate and prepare so that you can minimize it, but you also have to accept that there’s going to be a level of uncertainty that comes with the process. If you hire a trusted attorney, many of the extreme emotions, including fear, can be addressed and handled before they become major issues.

Talk to Your Attorney and Be Prepared

The best thing that you can do, after reading this book, is to sit down with your attorney and discuss your specific situation. Take the time to consider all of the factors at play, who has the condition and how it might impact the divorce or custody case, and what you can do to ensure that the outcome is still fair, regardless of the circumstances.

Ask questions that are relevant and of concern to you. Feel free to take notes as you read and make a list of things you want to talk about. That way, even if it’s not fresh in your mind, you’ll be able to reference your notes and get the conversation started. The best way to handle a mental health disorder or addiction in a divorce, as with anything, is to be prepared.

There are many factors at play here, but a little bit of planning can go a long way. With a prepared, educated attorney and the right information on your side, you’ll have a much better chance of handling

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a divorce or custody case with minimal stress or conflict, even when there's a mental health disorder or addiction involved.

Ask your attorney any questions that you have about your case. If you are worried that your spouse who suffers from schizophrenia could be awarded sole custody and know that isn't safe for your child, for example, you need to start building a case. If, conversely, you're recovering from an addiction and know that it won't impact your parenting, but your spouse plans to use it against you, you'll also need to start building a case, albeit a different one.

That's why you need to hire a qualified divorce attorney and immediately sit down to discuss things like mental health and addiction, as well as their role in or potential impact on your own case.

Starting with the next chapter, we're going to discuss the specific issues and conditions, as well as how they impact divorce and custody (and vice versa). We'll include celebrity examples to help personify the conditions and offer tips to help you formulate a plan and manage your own conditions or divorce case when mental health disorders and addictions are involved.

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CHAPTER 2

Addiction

Addiction affects billions upon billions of people around the world. Right now, the United States is facing a serious heroin/opioid epidemic that is taking lives by the minute, in fact. The opioid crisis is very real, but there are many, many more addictions that could be at play in your relationships and divorce proceedings. Addiction is a condition that affects the body in several ways.

Typically, most people will tell you that addiction is merely a symptom of a larger disease of being dissatisfied with one's self or station in life. People turn to addiction to cope, escape, and drown their sorrows or make themselves feel better without actually making any improvements. Some people are more inclined to become addicted to various substances than others. People may have what is known as an "addictive personality".

This is partially based on genetics, mental health conditions, and other environmental factors at play. Of course, there is also still a lot of missing information about how addiction happens and research into this complex condition is ongoing.

What we do know is that addiction has a serious impact on people's relationships and personal lives. Of course, it's going to have a huge impact on your divorce proceedings.

What Does Addiction Look Like?

Addiction comes in many forms. No two people are the same, nor will they experience the same type of symptoms, the same addiction, or even the same path to recovery. The CEO who hides his alcoholism by having drinks with clients is just as much struggling with addiction as the homeless junkie who trades in cans to collect enough cash to get high-- they're just struggling in different ways.

The first thing that you need to understand about addiction is that

you can't assume anything. You need to remove any semblance of what you think you know and start fresh. Addiction is a complex disease that affects every population group, regardless of race, age, sex or gender, creed, color, religion, and so forth.

Anyone can suffer from addiction and people can be addicted to almost anything.

Addiction is a behavior. The object of the addiction is merely a symptom. The person addicted to drinking vodka and the person addicted to shopping have the same disease: addiction. They just have to address their specific symptoms and means of expressing their issues to find a resolution that works based on their circumstances.

The most common culprits we think of are alcohol, illegal drugs, or illegal use of prescription drugs. But there are many others addicted to social media, hoarding/collecting stuff, internet pornography, etc. Each addition has their own various effects on people's lives, and especially on their divorce and custody situation. Even if they don't create legal troubles, such as in the case of drug charges, incarcerations, or arrest records, they could cause serious drama, stress, and unnecessary complications for everyone involved.

What does addiction look like? You can't pin it down to a "look". Everyone struggles and if you or your partner is fighting an addiction of any kind, it is going to further complicate the divorce process. It may also take its toll on the children, parental relationships, and custody, but that all depends on the circumstances and situation.

Addiction looks like anyone who is struggling with a dependency that causes them to lose sight of priorities, put themselves and others at risk or in the way of physical harm, and who is trying to control their lives or balance their emotions, or even just escape, typically by using alcohol and drugs.

Common Symptoms of Addiction

Aside from the obvious signs (such as in the case of substance abuse and openly using drugs), there are some symptoms that you can look for to determine if someone is struggling with an addiction. The

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symptoms are different for everyone, but for the most part, people will experience similar emotions and struggles.

Anyone that is struggling with an addiction usually also has symptoms and behaviors like:

- Difficulty controlling their addictive behavior
- Using drugs or alcohol (or other addictions) to cope with problems
- Having obsessive thoughts or being hyper-focused on the object of addiction
- Excessive risk-taking or dangerous decision-making in an effort to obtain illegal substances or even just for the sake of the thrill
- Taking larger-than-normal doses to feel numb or achieve the “high” feeling that comes with many illegal substances
- Withdrawing from hobbies, family and friends, and social activities
- Becoming secretive or secluded, or otherwise hiding or lying about their behavior or activity
- Legal or financial issues
- Difficulty finding or keeping steady employment
- Difficulty managing daily life, paying bills, or handling responsibilities
- Sacrificing work, family time, or other obligations for the sake of the addiction

In addition to all of these behaviors and signs, people may also experience physical symptoms of addiction, specifically when it’s in regard to substance abuse (drugs and/or alcohol). These include things like:

- Insomnia, sleeplessness, or other sleep issues. Sleep disruption, staying up for days at a time, and other problems are all common among those who are struggling with addiction.
- Appetite changes can happen as a result of drug or alcohol abuse. Alcohol and most illegal drugs will suppress people's appetites, so they may lose weight. Others may gain weight as a result of binge-eating with their addiction, or as in the case of marijuana use where appetite increases.
- Appearance changes are often present in people who are struggling with addiction. They may stop taking care of hygiene or not change their clothes regularly, resulting in a tired, disheveled look or they may just be unkempt, exhausted, or otherwise not "themselves".
- Disease or bodily damage due to using substances or illegal drugs. Cancer is the big one people think about, but infections, liver problems, stomach problems, heart issues, and even seizures can result from using drugs and alcohol to excess or abusing them in any capacity.

One of the biggest and most dangerous symptoms of addiction that most people don't talk about is withdrawal. When people try to quit drinking or using drugs on their own, they may have a variety of different physical symptoms that present themselves, including cravings, nausea and vomiting, mood swings and irregular behavior, trembling, sweats, insomnia or extreme tiredness, seizures, hallucinations, and more.

Some withdrawals, including alcohol, can be far more deadly and dangerous than the actual addiction itself. People who have serious issues with addiction should seek professional help rather than just trying to quit cold turkey. In severe cases, people who try to get sober have actually died from withdrawal symptoms because they stopped too suddenly or didn't seek professional assistance.

For those who are dealing with addiction, these are just some of the most common symptoms and behaviors that will need to be addressed or that could point to an issue in the first place. When you know what

to look for, it will be easier to get to the bottom of things and get the right assistance.

Wine Moms

Before we get into the celebrity examples of addiction and its impact on divorce (which will be a helpful story, I promise), I want to talk more about a new trend that is making its way around the suburbs of America: wine moms. “Wine mom” culture is hip right now and while it’s being publicized as a fun, cool thing, it is also leading many women to develop a dependency on alcohol as a way to deal with their stressful lives as parents, which is not a good outcome for anyone.

There aren’t many people talking about this just yet. After all, it’s relatively new and there’s still that whole stigma attached to having an “addiction” (*GASP!*), but it’s becoming an issue that needs to be talked about. Women feel pressured to drink or may feel like it’s “okay to drink” in situations where they may not normally or otherwise, simply because of the culture that is perpetuating the Wine Mom as the cool parent to be.

Wine Moms are just the latest in a frightening trend of addiction “trends” and phases that we’ve seen over the years. Of course, addiction is not something that should be seen as a trend, because it’s a very individual condition. However, situations like this make it hard to explain otherwise.

Especially with COVID-19, homeschooling, working from home, and other life stresses, parents and spouses are more stressed than ever before. it’s not a far leap for the Wine Mom to become an addict, and it’s just one of the many ways that addiction could impact your divorce and custody case.

The Opioid Crisis

Today, there is an issue bigger than most addictions that is plaguing the country: the opioid epidemic. From prescription drugs to heroin, opioids have been creating addictions that destroy lives and families for several years now. It has become such a crisis, in fact, that drug

manufacturers are now being targeted in lawsuits to hold them accountable for their part.

In late 2019, Purdue Pharma filed for bankruptcy after being charged with several federal crimes related to the crisis, due to the related fines that were assessed for their role in making OxyContin and other drugs readily available even though information was known about their extremely addictive nature.

This happened again in 2020, when Mallinckrodt filed for bankruptcy as a result of their charges related to the opioid crisis. As the federal government continues to crack down on these companies that are promoting the use of dangerous drugs for the sake of profit, it's likely only going to continue.

Unfortunately, the damage has already been done.

For millions, that means the loss of their spouse or significant other, if not due to overdose or death, due to divorce or breakup as a result of the addiction. There has been a surge in rehab facilities becoming available and a focus on helping people find better ways to treat their pain and other conditions beyond harmful opioid-based drugs, but it's still not enough.

Many people who are dealing with their own addictions to heroin and other opioids may also have coexisting mental health disorders. Whether they are diagnosed or not, the coexistence of mental health and addiction create much bigger issues for people going through divorce, a breakup, or serious custody battle.

Not only that, but there are instances where the courts or one spouse might look at the history of drug abuse, specifically in relation to the very dangerous family of opioids, and decide that this makes someone unfit to be a parent. This could impact the custody outcome, even for those who have since gotten sober and found a path to recovery that works for them.

As the nation continues to struggle with the opioid crisis, many relationships and families continue to dissolve and devolve into chaos. The damage may have been done, but the fallout has barely started.

While dealing with addiction during a divorce is difficult for anyone, it's even more challenging for those who are facing an opioid addiction, as well as their spouses and children.

Celebrity Examples

If you want to see a few different ways that divorce goes down when addiction is involved, we can take a look right at Hollywood. Some of the most famous Hollywood breakups and courtroom battles were fought over addictions to drugs and alcohol. Below, we'll talk about what happened to three major celebrities just to give you a glimpse of how things can go.

Robert Downey Jr.

In 2001, after four years of being estranged, Deborah Falconer filed for divorce from Downey, whom she married in 1992. They separated in 1996, which was due largely to his drug addiction. At the time of the divorce filing, Downey had just been released from prison for drug convictions and was being investigated for current drug possession charges.

Despite all of the struggles, somehow Downey's lawyers were reporting that he was seeing his son regularly. His wife filed for sole custody and requesting supervised visitation only for Downey, after advising that her husband had allegedly gone to get drugs one night and left their son alone with his assistant. She claimed he was unfit to provide a stable environment for Indio, the couple's son.

It doesn't end there, though. In 2014, Indio was arrested for alleged cocaine possession, further indicating that whether through nature or nurture, there's a good chance for children of those with addictions to also struggle. All of this complicated the family's life, including their divorce and custody arrangements over the years, resulting in Robert Downey Jr. missing a large part of his son's life because of his drug problems.

Ben Affleck

Ben Affleck also struggled with addiction. He turned to drinking after having some personal issues and only opened up about it publicly in recent years. Affleck first got sober in 2001 and did well for several years. After a couple of years of sobriety, he decided to try “drinking like a normal person” again, which lasted for a while, but then it eventually started snowballing.

He married Jennifer Garner in 2005, started a family, and started to increase his alcohol consumption, quite heavily. It was hard for him to admit and accept his alcoholism, but it was harder to see the toll it was taking on his family and relationship. He would come home from work, drink until he passed out, and then get up the next day and do it all again.

In 2015, Affleck and Garner got divorced, which caused even bigger issues with his drinking. He felt disappointed in himself and he didn’t want to have to deal with a split family with his children. Again, he turned to drinking, before eventually getting himself together and getting sober. Now, he and Garner share joint physical and legal custody of their three children. They even stipulated to work well together as co parents. They agreed in court documents to the following provision in their parenting plan:

"Neither party shall make derogatory or insulting remarks about the other ... in the presence of or within hearing distance of any of the minor children. Each party is restrained from arguing, yelling, or using profanity directed at the other party in the presence or within hearing distance of any of the minor children."

Bradley Cooper

The divorce and custody issues of Bradley Cooper aren’t as well-known as some, except among those who follow celebrity news regularly. However, they’re still worth discussing because they had a huge impact on his life and the life of his entire family. He started drinking as a way to deal with his being slowly removed from the air time of *Alias*, the hit ABC show that starred Jennifer Garner. He

became really depressed about feeling like a failure and turned to drinking.

Since he felt defeated already, he felt that he needed a change anyway, and asked to be written out of the series. Cooper has struggled with addiction for years, which started with painkillers and eventually evolved into a steady cocktail of painkillers and alcohol. This went on for years, until age 29 when Cooper decided to get his life back on track. It's been just over a decade, and today Cooper isn't just sober, but he's helping others find their sobriety and resolve their personal lives and relationships when they struggle with addiction.

How Can Divorce and Co-Parenting Stress Exacerbate Addiction?

There are several factors at play in your divorce and co-parenting situation. If there is an addiction involved, yours or that of your spouse, that will factor in, as well. However, a lot of people don't think about the other side: how divorces and custody issues affect the addiction.

It's not hard to believe that a lot of people develop addictions or indulge them during divorce and custody proceedings. After all, you're essentially putting your family's life in the hands of the courts-- of course, it's scary and stressful.

The legal process of divorce is messy. custody is messy. Apart from the legal process, the relationship issues, the constant stress at home, or the struggles of living in-between as you're trying to figure things out, can all add up and have a huge impact on people who are already struggling with addiction. That's why this book exists-- to help you better understand what you're up against so that you can come up with a plan.

Here are some other things to consider when it comes to the impact that divorce and co-parenting can have on addictions:

- Change of any kind is stressful for anyone. For those who struggle to cope or have had addiction issues in the past, this is a change and all of the uncertainty and fear can create a need to seek an escape or way to numb themselves.
- When people find out that they might be losing part of their lives, they often feel a huge sense of loss, grief, and perhaps even failure. The legal process of divorce doesn't leave much time for grieving, so people tend to bury their feelings to power through. This could lead to excessive drinking or drug use for anyone, and especially for those already battling an addiction.
- People often feel guilt or shame over getting divorced or "failing as a parent" or spouse. Thus, they may start drinking or using drugs as a way to numb those feelings or make themselves feel better about the situation.

As you can see, there are many ways that the stress of co-parenting, custody issues, and your divorce can impact addiction, whether it's yours or your soon-to-be ex's. If you are being proactive, you can work with your attorney to create a plan to manage the situation based on the circumstances surrounding the addiction that's involved.

Let's talk a little more about how you can do that.

Addiction Treatment and Management: Tips and Tools

The best way to prevent problems is to be proactive. Reacting doesn't stop anything-- it just gives you a chance to recover and save face. With a proactive approach to addiction in your own family law case, you'll be able to put a plan in place so that you're ready for whatever comes your way.

The good news, for those worried about the wellbeing of children and other vulnerable parties, is that courts have a lot of experience in dealing with addiction. Family courts are no strangers to these issues and they will often take immediate action if a threat is present in relation to the stability or safety of the environment that the individual

and/or the children may be living in.

Speak up immediately if you have any concerns about the safety or wellbeing of either yourself, your soon-to-be ex, or your child(ren). Be honest, but be transparent and real with the courts and your lawyer. If you are displeased with your partner's drinking habits, you shouldn't tell the courts that they're a terrible parent. They might still be a good parent that just needs a little help. Ask yourself how the drinking specifically effects your children.

You wouldn't want the same done to you, after all. Divorce and custody doesn't have to be a bitter, ugly battle. In fact, it's better for everyone if it isn't. Keep the following tips in mind to help you avoid it all costs when you are also dealing with an addiction at the same time.

Make a Plan

The best and most important thing that you can do for yourself and your family law case is to come up with a plan to manage the addiction through the legal process. If you are the one with the addiction, this could mean coming up with a plan to attend more meetings or support groups, keeping trusted friends on call, and staying away from environments that might further encourage a slip-up. Of course, this is just an example.

Working with a qualified attorney will help you come up with the best solution. If you are divorcing someone who is struggling with addiction, you might need to start educating yourself on addiction and how the disease works so that you are prepared to handle it.

In all cases, you should also be age-appropriately honest with the children involved. Addiction is a disease, and the addicted parent isn't "bad". They're sick. Normalize talking about it and encourage your children to come to you with questions or concerns.

The goal here is to make things smooth for you, but also for the children involved. Thus, a large part of your plan should include helping them through this difficult time. You'll also want to talk to your lawyer about necessary protections and ways you can prevent the

addiction from impacting your case or your wellbeing. For example, you might want to discuss protecting financial assets so the money doesn't get spent on fueling the addiction.

Perhaps you'll need to seek monitored visitation, restricted custody, treatment agreements, or even a protective order. Regardless, you need to make sure that you know your options and are prepared for the battle ahead. By understanding all of the legal aspects and putting certain protections into place, you'll be able to feel safer and regain some of the control that you have been missing in this whole process.

Acceptance

Like addiction recovery, divorce is something that people have to accept. Addiction can damage a lot of relationships. The personality changes, emotional issues and manipulation, and even financial struggles can all push spouses so far apart that there is no return. There are several other elements at play, though.

For example, imagine if one partner gets sober and is able to improve themselves as a person. They may realize that they're actually *not compatible* with their spouse or that they are heading in different directions. Still, many people continue in their marriages, ashamed to consider divorce because they don't want to admit failure.

Divorce isn't a failure. It's a step forward, and it's a chance for both of you to be happy. You shouldn't feel anything negative about getting a divorce, especially if there's an addiction involved that's being seriously impacted or that is affecting the relationship. Often, the fuel for addiction in divorce is the fact of the split itself-- people feel like they've "failed" their marriage when that's not the case at all.

Other Tips

- Make sure that you choose an attorney that's experienced with divorce and family law, as well as addiction and other mental health or emotional issues. Having someone with experience on your side can make all the difference in the outcome of your case.

Decode Your Divorce Part II

- Consider the children first and foremost. If children are involved in your divorce, do whatever is necessary to protect them from the dangers of the addiction and provide as stable of an environment as possible. If you are the one struggling with addiction, be willing to work with your lawyers and the courts to do what is necessary for an outcome that is fair and agreeable for everyone.
- There are several factors impacting court decisions when substance abuse is involved, including:
 - The severity of the addiction or substance abuse and its impact on parenting ability
 - Any history of criminal activity or charges
 - History of violent behavior towards children or the other parent
 - Drug and alcohol testing
 - Steps taken to seek treatment or ensure a commitment to sobriety
- It's not just drugs and alcohol. As discussed, there are certain other behaviors and activities that can create troublesome and life-altering addictions for some people. Shopping, gambling, and even sex addictions have all been the cause of several relationship issues, including divorce and custody disputes. Don't think that your case "doesn't count" if it doesn't involve substance abuse.

Decode Your Divorce Part II

CHAPTER 3

ADHD

Attention Deficit Hyperactivity Disorder, or ADHD, is a serious neurological condition that affects millions of people and has very real impacts on people's lives. Men are typically diagnosed more often than women, but anyone can suffer from this condition that impacts people's ability to concentrate, focus, and otherwise accomplish routine daily tasks like keeping a job, maintaining friendships, or completing tasks.

Previously known as ADD, this condition can present challenges for those affected, including impulsive behavior, extreme procrastination, and trouble meeting deadlines or making commitments and sticking to them.

There are several different symptoms of this condition and it manifests itself differently in every individual person. Understanding the impacts of ADHD, what it looks like, and how it can impact your divorce or family law case will make the entire process less stressful and uncertain.

This condition affects about 4-5% of American adults, and while it was considered a childhood condition in the past, studies have shown that it often carries into adulthood.

In some cases, it may not even present or be diagnosed until adulthood.

However, when it does, it can have a variety of consequences and impacts on people's lives, relationships, and families. ADHD is still a mystery to many, often considered a "fake" diagnosis for hyper kids in decades past. Today, the information is teaching us more, and what we're learning is that people with this neurological difference experience the world differently.

That means that while someone without ADHD might be able to

stick to a routine, complete tasks on time, and even work ahead, someone who suffers from this condition could struggle with extreme procrastination and feel like they physically cannot be any more effective than they are.

It's not a made-up condition and it's not one that makes life easy, by any means. But there are treatment options. It can also add complications to your divorce and custody case. Before we get into that, though, let's talk a little more about what ADHD is and what it looks like, and then we'll offer some tips and tools to help you manage your situation appropriately.

Understanding ADHD, Its Causes, and Symptoms

The exact causes of ADHD aren't known entirely, but this condition can cause the body's activity levels and impulse controls to be off-balance, which leads to hyperactivity, impulsive decisions and behaviors, difficulty focusing, and more.

The American Psychiatric Association (APA) recognizes this as a condition that is found in both adults and children alike. The symptoms are typically common between the age groups, but the impact on your life can be quite different.

A child struggling with ADHD has parents and other adults to help get them on a path to managing their condition effectively. They will be able to start off in a better place and therefore might not end up struggling as much as an adult.

An adult that is facing this condition, however, may see a much bigger impact on their life because while children are being treated, adults with ADHD are being told they just need to be more "disciplined" or they should "pay attention more" or "just sit still".

The solution to ADHD isn't "just get over it". Unfortunately, until that stigma is removed from our society, people might continue to assume that they can do nothing about their ADHD but try to cope. This can lead to a variety of damaging effects on your personal

relationships, including your marriage and familial relationships, and it can complicate things like divorce and co-parenting even further than they already are.

Over 60% of the children diagnosed with ADHD will still exhibit symptoms as an adult. That's not counting the number of adults who were never diagnosed in the first place. This condition is largely underdiagnosed, so it's hard to get accurate statistics.

So, what causes ADHD? Again, the exact cause isn't known, but it's believed that genetics play a role, brains of people with adhd are different, but not all adhd brains look the same. The combination of symptoms over a period of time will qualify an individual for a diagnosis. Research suggests either chemical deficiencies or a structural difference, can be the cause, but studies are ongoing to learn more and further investigate the cause. Until then, the best they can do is continue to treat the condition and try to help people learn how to cope.

Are ADD and ADHD Different?

Until recently, ADD and ADHD were classified as two separate versions of this condition. The former was usually diagnosed in older adults and didn't have as much of the "hyperactivity" aspect as the type diagnosed in young children and a small number of adults. However, through further research, it has been determined that it is more accurate to call this condition ADHD across the board.

Some people will still use the term ADD to refer to this condition. Understand that they are interchangeable and that the latter used to be a disorder diagnosis all its own. Therefore, while it isn't as readily used anymore, anyone who says that they have been diagnosed with this condition is probably correct.

ADD is simply an outdated term that was once used to describe the more inattentive ADHD that was centered around forgetfulness, lack of focus, and disorganization and/or procrastination. Thus, if someone tells you that they have either of these disorders, they may just have a different type.

What ADHD Looks Like

People who struggle with ADHD, at any age, typically experience a range of symptoms related to impulsiveness or inattention, or both:

- Poor attention to detail
- Difficulty starting and finishing tasks
- Trouble focusing or regulating their attention
- Poor organizational and time management skills
- Forgetfulness
- Fidgeting and restlessness
- Talking excessively or often interrupting others
- Impulsiveness or acting without thinking

Typically, the intensity of the symptoms will decrease over time and most adults will lose the “hyperactivity” part of the condition entirely. However, some will still struggle with all areas when they are dealing with ADHD. Everyone is different.

There are several different challenges that come along with this condition. It can affect a variety of elements, from things like emotional regulation and attention or focus to poor time management, procrastination, and even an inability to complete tasks that can make it difficult to maintain or find employment.

Those who have ADHD that was undiagnosed and untreated in childhood will typically have more struggles than those who are newly diagnosed or who have had the condition and been seeking treatment for years. All of these symptoms and issues can add up over time, creating a situation where people eventually struggle with relationships, friendships, and establishing social connections because of their impulsivity, lack of follow-through, and a low tolerance for irritation.

The Seven Types of ADHD

Although there is some conflicting research out there, so far it appears that there have been seven types of this disorder that have been classified to date. Each has its own specific symptoms that are the focus and the treatment paths might also be different. The differences are often minute, but typically founded in the way that people respond to or express their ADHD.

Classic ADHD

The most often diagnosed, classic ADHD is marked by hyperactivity, an inability to sit still and focus, excessive talking and interrupting others, and related symptoms. This condition affects millions and is generally the starting point for ADHD diagnosis that helps find the exact right type and best corresponding treatment solution.

Those who have this type of ADHD have shown decreased blood flow in their cerebellum and prefrontal cortex. There is also evidence of an effect on dopamine production.

Inattentive ADHD

This is the form of this disorder that was formerly simply referred to as “ADD”, and is marked by intense difficulty focusing and staying on task. This type shows lower activity in the prefrontal cortex along with low dopamine levels. These people are not impulsive or hyperactive, but instead are introverted, daydreamers, and often easily distracted.

Those with inattentive ADHD often have marked procrastination habits and disorganization that adds to the mental clutter and makes the condition harder to manage.

Overfocused ADHD

People with this form of attention-deficit hyperactivity disorder have all of the classic symptoms, but they also possess a difficulty in shifting their attention or breaking thought patterns. Their brains typically show overactivity in the area responsible for shifting gears, which can make it difficult for them to break their focus. This hyperfocus can make it hard to be flexible or move from task to task, which can affect several areas of life, including work and relationships.

Often, these people are almost fixated on their thoughts or activities and there is nothing that can be done to break their focus until their brain is ready.

Temporal Lobe ADHD

This is a rarer form of ADHD that affects things like memory, learning, and behavioral regulation. People with temporal lobe ADHD typically struggle with remembering things, and may be slower learners in some regards. They are also quick to anger and might even display signs of mild paranoia.

Brain scans show reduced activity in the prefrontal cortex along with abnormalities in the temporal lobe, which affect cognition and emotional regulation. All of this is generally seen in addition to typical ADHD symptoms like restlessness and an inability to focus.

Limbic ADHD

Limbic ADHD is basically a depressed version of the disorder. It often looks like the typical symptoms of ADHD combined with a general low-level sadness or loss of energy. To some, it might not seem like ADHD at all because of the lack of hyperactivity or “jumping around” characteristic of many types of the condition.

This type is caused by overactivity in the limbic center of the brain, which is responsible for mood control, along with decreased activity in the prefrontal cortex. The combination can be difficult for many to find relief from without appropriate diagnosis and treatment.

Ring of Fire ADHD

Ring of Fire ADHD is much more severe than other forms. Plus, rather than focusing on overactivity in one area of the brain, it shows as a ring of hyperactive energy around the entire brain. The symptoms of this condition include hypersensitivity to noise, light, touch, and other environmental factors, as well as unpredictable moods, fast talking and obsessive thoughts, and excessive worrying or oppositional behavior.

Anxious ADHD

This version of ADHD is usually marked by excessive anxiety. In some cases, the anxiety leads to the inability to focus, but it could also go the other way. ADHD symptoms are often confused with some anxiety symptoms when they display like this, such as an inability to get things done because of avoidant anxiety that is caused by ADHD.

This condition is the opposite of most forms in that there is high activity in the area responsible for dopamine production, which causes the excess anxiety in many cases.

The Impact of ADHD on Relationships

When people are unable to follow through on their promises and plans, it can become difficult to live with. Even the individual will eventually start to loathe themselves, or at the very least get frustrated with their own inability to provide the same level of attention and dedication that they are getting from their partner. This can lead to serious issues that stem from feelings of inadequacy or a sense that one partner just “doesn’t care”, even when they do.

ADHD makes people impulsive and makes focusing on things difficult. It can make it hard to communicate with a partner who can’t focus on a conversation. It can add challenges to parenting and family life when one partner forgets things or can’t follow through on plans. There are so many different ways that it can go, but it never goes well.

ADHD can cause issues in relationships when:

- Someone has intense emotions and feelings as a result of their ADHD, but the feelings aren't mutual or are too intense for their partner.
- A partner is hyperfocused on work, kids, or other aspects of life, taking away from the attention on their spouse, intimacy, and other areas.
- Inappropriate or angry outbursts interrupt otherwise "normal" conversation or behavior.
- The affected partner forgets important dates, or even just regularly forgets things as a part of routine tasks. Despite being a symptom of the condition, it can get frustrating for some.
- The lack of focus affects intimacy so far that it inhibits a couple's sex life or keeps them from spending "alone time" together because one partner cannot focus on the other.
- One partner struggles with negative self-image and a lack of confidence from past "failed" relationships that carries over into the current relationship.
- The partner with ADHD is constantly questioning the love, trust, and commitment of the other, which can drive a wedge in even the best relationships.

Of course, these issues may initially be hard to identify because the ADHD partner will also use their hyperfocus and intense emotions to shower the new romance with love and attention, which is one winning quality for those struggling with this condition in relationships. Over time, the negative aspects of the condition will begin to appear, and that can often make some partners feel misled or lied to when the good turns sour.

These are just a few examples of how ADHD has an impact on relationships. Essentially, any and all of the symptoms of this condition can show up and affect people's ability to relate to others. When it

impacts the primary relationship and affects that trust and intimate connection, it can be irreversibly damaging.

Even when ADHD is properly managed, it can be a lot to handle. People affected by the condition are often open about warning potential partners of the condition, but some may be ashamed and take the former route of hyperfocusing on the good so that they don't have to talk about the potential bad.

Even with the best intentions, the condition will start to affect relationships over time if it is not properly handled and understood. That's why the best thing that you can do is to know what you're dealing with and have a plan for how to handle the entire divorce and custody process, including the ADHD of you or your soon-to-be ex.

How Does ADHD Manifest During Divorce?

There are a few different scenarios that could play out here. In rare cases where ADHD is severe or becomes a central issue in the relationship, it could lead to divorce. For starters, if someone has impulse control issues, it could affect their spending habits, which are often a financial stressor in any marriage. Some people could struggle with intimacy because of their inability to focus or commit time to their partner.

There are many ways that ADHD can impact a divorce, be a factor in the decision, and even manifest during the divorce process and make things more difficult. ADHD affects relationships in several ways, and many partners report that sex and intimacy are at the top of the list, followed closely by explosive anger and the constant disruptions that lead to exhaustion, thereby limiting alone time, relaxation, and normalcy in the relationship.

In the divorce process, that explosive anger can become a serious point of contention if it is not controlled. The stress of ending a marriage and trying to move on with life is a lot for anyone, and for people who struggle to balance their emotions, it can be almost unbearable. During a divorce, ADHD can show itself in ways like:

- One partner's spoken desire to improve things, but lack of follow-through
- When a partner says they will be less angry, but can't control their outbursts because of the stress
- Being disorganized, losing paperwork, missing appointments, and even struggling to complete necessary forms and steps in the process because of procrastination and other symptoms of ADHD.
- Jumping around and losing focus in day-to-day activities, which can put further strain on the relationship.
- Some parents struggling with ADHD could lose track of time or get hyper-focused on activities and be late to pick up children or meet the other parent for custody arrangements or appointments. This could affect the court's decision on custody if it happens too frequently as it appears pretty unstable.

Basically, all of the symptoms of ADHD are going to be 100 times worse during the divorce process. If there are custody issues at hand, the stress could be even greater, as could the impact of the condition on the outcome. That is why it's important to have a qualified lawyer and a solid plan for managing your or your partner's ADHD during the divorce process and beyond.

Terry Bradshaw

In this celebrity example, we only have one but it's a good one. Terry Bradshaw is famously known for his relationship issues, although few people know the details behind the situation. After four marriages and a public fight with depression and ADHD, Bradshaw sought help through therapy and medication and then spoke out about his own struggles in an attempt to help others.

Bradshaw's existing mental health issues were compounded by struggling relationships, and in 1999 his third wife sought a divorce after 16 years of marriage. That was what finally sent him into a total

tailspin, where he reported constant anxiety attacks, bouts of crying, insomnia, and other struggles. His depression and ADHD led him to drinking and anger. He spent some time drinking so much that he told USA Today “I wasn’t sure if I was going to drink myself to death”.

Instead, he got help and now tries to help others. Despite his football success and the rest of his career and life accomplishments, Bradshaw feels that this is the lesson he was put here to teach-- that the stigma surrounding mental illness needs to be removed so that people can get the help that they deserve. Like Bradshaw says, and as we discussed in the chapter on addiction, these people are sick, not “bad”.

Tools, Tips, and Management Resources for ADHD in Divorce and Custody Situations

For those not already in treatment, seeing a licensed mental health professional, psychologist, or psychiatrist will be first on the agenda. Even outside of any relationship or legal issues, people need to help themselves by seeking treatment through counseling, medication, and other therapies that are available.

If you or your soon-to-be ex are dealing with an ADHD condition that isn’t being actively and properly treated, that needs to happen before anything else. Your lawyer can advise you on the best course of action, whether you’re the one seeking treatment or you are trying to get your spouse to seek help.

In some cases, the courts will want to see a psychological assessment, which can only be obtained by going to the right doctors and being diagnosed with ADHD and other mood disorders or mental health conditions. Make sure that you start the discussion right away if this is one of the factors impacting your divorce proceedings or custody situation.

If you are the one struggling with ADHD, it could result in difficulty dealing with the often overwhelming stress that occurs during separation and the legal process of divorce. Make sure that you keep your therapist on call during this process and keep track of your

own moods and focus.

If you start to feel overwhelmed, ask for help. Another way to reduce your own stress is to hire a qualified divorce and family law attorney that will assure that you get a fair outcome and that you don't have to worry about any of the details.

A lawyer will take care of most of the stressful and laborious parts of your divorce or custody hearing. They will be able to educate you and reassure you along the way, and will make the entire process less stressful. This can help reduce the incidence of your ADHD rearing its ugly head and getting things off track.

If you have a partner who is battling ADHD, it could make communication and cooperation difficult. Their lack of motivation and inability to follow through on tasks could drag things out and make it quite difficult, in some cases.

You may need to work out an arrangement with them, and in serious cases, you may even need to get the court involved to encourage them to get it together so that you can get things taken care of and start moving forward.

Planning ahead is always the biggest and best tip when it comes to dealing with any kind of obstacles in divorce, and especially when it comes to mental and emotional issues. You never know what will happen and there's no way to know what to expect, which is why having some plans in place is a must. You will want to plan for situations that come up unexpectedly, as well as use preventive measures to avoid as many issues as you can.

If you are willing to put in a little extra work, no matter how ADHD factors into your divorce or custody cases, you will be better prepared for whatever happens. You can't prevent everything, but you can prepare for it.

CHAPTER 4

Anxiety, PTSD, and Reactive Attachment Disorder

Another common group of mental health conditions that have an impact on divorce and custody, and vice versa, are anxiety, PTSD, and RAD, or reactive attachment disorder. These conditions cause a number of different symptoms and when one or both partners struggle with them, it can make the entire process of divorce more difficult for everyone involved.

Anxiety is a general term that refers to several different specific conditions that include things like panic disorder, social anxiety, generalized anxiety, PTSD, and others. PTSD is a condition all its own, but it is also sometimes included under the anxiety umbrellas because it is so similar in the symptoms and treatment or management of the condition.

When someone feels the symptoms and feelings related to these conditions, they are often stressed, anxious, worried, paranoid, and even sometimes totally unable to function in “normal” society. People have lost jobs and families over these conditions, and it’s not uncommon at all. Some people even lose their lives. It’s a serious issue, but it’s one that you can work through, with the right knowledge and a good plan.

In this chapter, we’ll discuss how anxiety, PTSD, and RAD can all be factors in a divorce and what you can do to prepare so that there are minimal issues along the way. First, though, let’s take a look at these conditions and what they are, as well as their causes, symptoms, treatment options, and more.

What are These Conditions and How are They Related?

These conditions are often lumped together because they share several symptoms. However, they also share two common feelings: panic and overwhelming fear. People with any of these three conditions have a very deep sense of fear or panic, either at all times or due to certain events or situations.

PTSD and Reactive Attachment Disorder fall under the anxiety umbrella, but they are technically classified as Trauma Disorders. Although each condition has its own symptoms and manifestation, at the root, this is what they share and why we're discussing them together instead of creating separate chapters for each.

These conditions have several different causes, but they are all typically some form of stress response by the body, as a way of coping. In some cases, there may also be genetics or chemical imbalances at play, but there is a lot to still be understood about these conditions.

What we do know is that they can have a serious impact on personal relationships, including marriages and parenting relationships. There have been many instances where relationship issues have led to or made these conditions worse, as well. Divorce and family law issues are stressful, even when they're amicable. It is just a difficult process to go through, emotionally and otherwise.

When you add in mental health disorders that are exacerbated by stress, you're looking at a whole different level of complications. In order to better understand how to handle these conditions during your divorce, let's take a little time to learn more about each of them.

Anxiety

Let's start with anxiety. This is the biggest and most common condition in the group. Anxiety comes in many forms and can have many causes. Like many mental health conditions, there is still a lot being studied about anxiety conditions and how they come about. However, it is believed that there are genetic factors, chemical causes,

and environmental factors that can all have their impact on the development or seriousness of an anxiety condition.

The most common types of anxiety conditions include:

1. Generalized Anxiety Disorder
2. Social Anxiety
3. Panic Disorder
4. Agoraphobia
5. Obsessive-compulsive Disorder (OCD)
6. Post-Traumatic Stress Disorder (PTSD)
7. Separation Anxiety
8. Other specific phobias

Anxiety conditions have a lot of different symptoms and behaviors and they typically cause people to avoid situations, people, or events that cause them undue stress. Some people will just be generally anxious all the time, which can be exhausting, to say the least.

Anxiety is basically the brain's response to unnecessary stimuli--something, somewhere in the brain says "panic", so it does. When the body or the environment doesn't give it a reason to be stressed, people without anxiety will calm down. Those with anxiety will turn that panic into anxiety because they are looking for some way to expend the emotion.

This is a very complex condition and it can impact people's lives in several different ways. The type of anxiety that a person has will also affect their treatment options and other circumstances, so it's important to seek appropriate help and get the right diagnosis. In the next section, we'll talk about the common behaviors of anxiety and then we'll discuss some of the causes more in-depth.

PTSD

Post-Traumatic Stress Disorder, or PTSD, is a condition that affects more people than we know. It is one of the most under-diagnosed anxiety conditions because a lot of people are ashamed to seek treatment in the first place. PTSD is commonly known among combat veterans and those who have lived through major traumas, but the size of the trauma doesn't dictate whether or not you end up with this condition.

A man whose wife dies unexpectedly in her 40s, beside him in their sleep, will probably develop some PTSD for various reasons, and especially related to sleeping and going to bed.

Someone who is traumatized by the sound of gunshots won't be able to make it through the Fourth of July without earplugs or a sleeping pill.

There are all levels and types of PTSD, and none are any more or less valid than the rest.

The important thing is to get PTSD diagnosed and treated. This cannot be done on your own and if it is left untreated for too long, there may be irreparable damage caused. Long-term PTSD has actually been shown to increase the risk of suicide and substance abuse, along with other risky behaviors and lifestyles.

Post-Traumatic Stress Disorder happens when the body isn't capable of processing the original trauma or stress. As a result, it unnecessarily responds to otherwise-safe stimuli with a panic or fear response.

People will often struggle to form or maintain personal connections, as well, which is why relationships are so affected. The incidence of divorce among those suffering from PTSD is staggeringly higher than those without the condition. It's often hard for couples to work through trauma together, and especially if only one of them was affected.

Reactive Attachment Disorder

A more extreme symptom of PTSD for some, and a condition all its own for others, RAD is a condition where people lack the ability to connect to others or the world around them. As the name suggests, people's brains are reacting to a situation that was traumatic, and thereby caused them to feel that it would be safer to stay detached from the rest of the world.

Until it can be proven that things are “safe”, people will not be able to form bonds or build healthy relationships, which can tear families apart.

Reactive attachment disorder affects more people than you might think, including many that have never been properly diagnosed. If you have a spouse or know someone who seems detached, “in another world”, timid and introverted, or otherwise unable or disinterested in making connections, this condition could be at play.

It often comes with PTSD and other traumatic situations, but not always. The way that it affects people varies, depending on what they have been through, but the effects are always stressful, anxiety-inducing, and often create a lot of depression and anger, as well.

Reactive Attachment Disorder is also relevant in the case of divorce and custody when it is found in children.

Children who have been neglected emotionally, physically, or otherwise could struggle to form emotional attachments with their parents or others, eventually developing this condition. It interferes with natural emotional attachment and can also affect things like stress management, positive thinking, self-love, and more. Some with this condition will react violently toward parents or other authority figures, which can become dangerous to everyone.

Children who go without having this condition treated will likely continue to experience the symptoms of the condition as adults. This can make it difficult to function on a daily basis, let alone thrive or excel.

What Behaviors are Associated with Each?

Several symptoms are shared between these conditions, although each also has its own to consider. They're grouped together because of their likeness, after all. However, understanding the minute differences between each could also help people ensure that they get the right diagnosis. Understanding the behaviors and symptoms of these conditions is the first step in preparing for the divorce process, as well.

In this section, we'll again go one-by-one through the conditions and list their common behaviors and symptoms so that you can have a better idea of what you may be dealing with. You can use the information as it applies to yourself or your soon-to-be ex, whatever the case may be.

Many of the symptoms and behaviors of these conditions are rooted in fear and a sense of feeling unsafe, which we've discussed. You can probably imagine some of the most common symptoms, even if you haven't experienced these conditions firsthand. Of course, there are also others that are less known that might surprise you.

Then, there are those that make it easy to differentiate what conditions you are dealing with, such as the stimuli-based panic attacks often associated with PTSD. Keep reading to learn more about the behaviors of these conditions and what you should be looking for, as well as how to respond.

First up, let's talk about anxiety.

Anxiety Behaviors and Symptoms

People with anxiety will have different specific behaviors based on the type of anxiety that they have. However, they will generally have a sense of fear and uncertainty, feeling anxious when presented with certain situations. They could worry excessively, struggle with sleeping or eating as a result, and even have difficulty functioning in everyday life.

Anxiety can manifest itself in so many ways. Some people get jittery

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and obviously nervous. Others get physically nauseous or develop stress headaches. Still more people might even experience fainting spells and extreme panic attacks as a result of their anxiety condition.

Some of the most common symptoms and behaviors of anxiety include:

- Agitation and irritability
- Restlessness and an inability to sit still
- Socially withdrawn or isolated
- Inability to function properly to meet responsibilities at work, school, or home
- Agoraphobia (fear of open spaces)
- Inability to perform routine tasks like personal care and daily living duties
- Increased stress levels
- Constant state of worry and panic
- Worried or stressed for “no reason”
- Feeling of helplessness or worthlessness
- Feeling in danger or despair
- Feeling detached or dissociated from the world
- Difficulty concentrating or racing thoughts
- Always fearing or thinking the worst
- Uncontrollable thoughts or obsessive thinking

This is not a comprehensive list, of course, and there are plenty of other symptoms and signs that could point to anxiety. In fact, this list doesn't even include any of the physical symptoms that often present in people who are struggling with some form of anxiety disorder.

That's right-- that tightening in your chest when you're anxious isn't a heart attack. It's just anxiety. These conditions can cause several physical symptoms that usually only serve to make things worse because then, people worry about the physical manifestation, as well. If you or your spouse has an anxiety condition, you could experience things like:

- Shortness of breath or difficulty breathing
- Insomnia and increased tiredness
- Headaches or muscle aches
- Digestive distress, including vomiting
- Chest pain or pounding heart
- Cold or clammy hands and feet
- Dry mouth
- Excessive sweating
- Numbness or tingling in feet/hands
- Fainting

Again, this is not a full list of possible physical symptoms, but it does cover a lot of the most common ones that people experience. As you can see, there are going to be several ways that an anxiety condition and its related symptoms could affect someone's life, including their marriage, parenting abilities, and more.

Whether you're the one struggling with the condition or you are trying to come up with a plan to deal with your spouse's anxiety disorder, understanding what you're up against is the most important

part.

Remember, anxiety disorders are different for everyone, so your plan for navigating them during your divorce or custody case will depend on your specific circumstances. Now that you know more about what you are dealing with, it should be easier for you to make a plan.

PTSD Symptoms and Behaviors

PTSD is just like anxiety in that it will manifest itself in several ways. Some people have extreme anger, while others will experience deep bouts of depression. Still more will be anxious and uncertain or withdrawn and emotionally detached. Every person is different, but there are some common behaviors and symptoms that you can look for.

Of course, you'll want to leave it to the professionals to diagnose the condition, but it is fairly safe to assume people experiencing these symptoms could be suffering from PTSD. Many people with this condition will experience anxiety, including any or all of the symptoms and behaviors listed above.

In most cases, the symptoms are intensified or more severe. Often, those who suffer from PTSD will have frequent flashbacks of the event or the moments right before or after it. On the other hand, some people will block out the event(s) entirely. Not only that, but they may also avoid situations that remind them of the traumatic experience that they had.

In some cases, they may react poorly to stimuli that remind them of the event. In the example from earlier where the husband lost his wife unexpectedly, it would be understandable if he was anxious to hear sirens or see flashing lights for a while, after having the emergency in his own home.

The difference here is that the symptoms of PTSD, unlike anxiety, are generally urgent and unexpected, very obvious, and difficult to recover from in many cases. Depending on the severity of the trauma, the severity of the symptoms could be worse for some than others.

People with this stress condition generally develop it when their body and brain feel like safety is a threat. There are several different kinds of events that could lead to this condition, but it ultimately presents itself in much the same way regardless of the root cause.

There are usually three main categories of symptoms that are used to diagnose PTSD:

1. Re-experiencing traumatic events through flashbacks, nightmares, and other distressing memories or recollections.
2. Emotional avoidance or numbness in regard to reminders of the trauma or event.
3. Increased emotional arousal, including insomnia, irritability, difficulty concentrating, and being easily angered or irritated.

Memory loss or the inability to retain information is another common symptom of PTSD that many people don't discuss. However, as the brain is trying to process the traumatic event, it eventually runs out of the ability to handle new information, making things like getting a job, performing in school, or even just handling daily tasks difficult.

In addition to the impact that forgetfulness and its related behaviors could have on a relationship or parenting situation, it can become frustrating for the affected person. Trying to function when your brain literally will not cooperate can be infuriating, to say the least. Because people don't always understand this condition, however, some people feel overlooked and like no one knows what they are going through.

Thus, PTSD often leads to isolation, homelessness, and even suicide in many instances when it is left untreated or not treated correctly.

The suicide risk for people with PTSD is quite high because of the frustration, despair, and lack of available support and resources. It also increases for those who see a bigger external impact on their lives--those who lose a relationship or who are cut off from their children may be more likely to commit suicide or feel suicidal with PTSD than

those who have fewer external manifestations of their condition.

Fortunately, the availability of support and resources is improving and when you work with the right legal team, you'll never have to worry that you're not getting the resources or assistance that you need when this condition is a part of your divorce or custody case.

Behaviors Associated with RAD

Reactive Attachment Disorder shares some symptoms with PTSD and anxiety-- namely, the withdrawn, detached mode that many people fall into. Even the infants and children suffering from this condition will withdraw socially and not form emotional bonds with their families or others. They may even struggle to be emotionally and physically expressive with others or about themselves, and may act out or "rebel" as a way to try to deal with their feelings.

This condition can affect people's ability to manage their stress and emotions and can present itself differently in adults and children. However, the basic symptoms are the same-- a detached, anxious, or isolated sense of being with emotional distress or the inability to regulate emotions.

That's a lot, so let's break it down a little. People with RAD are detached. They don't connect well, socially or emotionally, with peers, family, or anyone, really. They are often left to feel isolated and will hold back their emotions or avoid interaction altogether. Many people with RAD avoid physical touch and are irritable or unusually angry or sad.

People with this condition usually have behaviors and symptoms that include things like:

- Withdrawal or avoidance
- Keeping to themselves
- Indiscriminate social choices
- Inability to be comforted

- Lack of affection or not seeking affection
- No attachment to family or caregivers
- Inappropriate attachments
- A tendency to act younger or older than their age
- Tendencies to seek affection in dangerous ways

There are different types of this disorder, which is why the symptoms and behaviors seem to run the gamut. Typically, when we discuss Reactive Attachment Disorder in relation to divorce and custody situations, we're referring to the children involved.

However, as we've discussed, it can affect adults also, typically when left untreated as a childhood condition. In adults, it manifests as isolation, inability to form social bonds, and difficulty in relationships, including marriage and family relationships. This can have a huge impact on any marriage and subsequent divorce.

Conversely, those who are already struggling with this condition and a failed marriage or loss of a child in a custody case could create an added sense of loss and further their attachment issues. People with this condition may see a failed marriage or custody loss as another reason to stay detached and avoid interpersonal relationships, which could impact them well into the future.

There's still not a lot known about how this condition impacts adults because it is mostly studied in children, but as we learn more about the adults who are never properly treated and diagnosed, it becomes clear that more research is needed. For now, you'll want to read up as much as you can, talk to your lawyer, and make sure that everyone is on the same page and ready to deal with this condition regardless of what it entails.

What Causes These Conditions?

The exact cause of every single case of anxiety, PTSD, and RAD is not known, and it may never be. However, what we do know is that

several factors are involved. People often have major life events or traumas that contribute to these conditions. Some may have a genetic predisposition or they may have a chemical imbalance that also factors into play, but again research is ongoing.

It's fairly common for therapists and other professionals to attempt to root out environmental factors that could contribute to these conditions since most are believed to have a combination of causes rather than just one. Here's what we know about what causes these conditions to this point.

Anxiety: Besides chemical and genetic factors, there are several situations that can contribute to anxiety. Traumatic events or experiences that affect people's feelings of personal safety or wellbeing are involved in many cases. Research tends to point to the fact that most anxiety conditions are caused by multiple factors or risks, rather than one static situation, event, or circumstance.

PTSD: While some people, again, may be more genetically or chemically inclined to develop PTSD, it typically stems from experiencing a traumatic event. Not every trauma results in PTSD and there is no real standard for what constitutes a "trauma" since everyone is different. The most familiar instances of this condition for people include those seen in veterans and people from abusive situations or relationships.

RAD: Reactive attachment disorder is believed to be largely caused by a lack of attention during infancy and young childhood. Children that are neglected or that don't have strong parental attachments in their lives could develop this condition, causing them to struggle to form relationships for the duration of their lives if it is left untreated. Genetics and chemical issues are less at play here, although any of these could always be a contributing factor to mental health conditions, including RAD.

The Potential for Future Understanding

As research continues, we will hopefully learn more about how these conditions are caused, and therefore what can help treat them and alleviate the symptoms for people. Understanding the cause may

also help salvage some relationships and save a lot of people from the risk of divorce.

Of course, for some, the knowledge of where these conditions come from could be just that: extra knowledge. But then you also have to remember that this insight could help you down the road, and even help you in setting up the best possible legal plan for handling your divorce or custody case when these conditions are involved.

How Can Anxiety, PTSD, and RAD Affect Divorce and Custody?

All of these conditions center around a couple of basic emotions or issues: fear, trust, and a general feeling of being unsafe or in danger. As such, they all have a serious impact on personal and professional relationships, including familial relations, marriages, and parenting. During your divorce or custody case, these conditions can be exacerbated, or vice versa.

People who are suffering from these conditions will struggle to develop attachments and may not feel like they can trust other people. They may struggle to be vulnerable because they feel like they can only depend on themselves, if that. These people often feel that nothing is safe, although there are milder conditions that may not be as “life or death” in their severity.

As you can guess, all of this emotional turmoil and lack of general trust in the world around them can lead these people to have a lot of different issues in divorce and custody hearings. Their inability to handle daily living could impact their ability to retain custody of the children, for example. Someone with severe PTSD may be put in a position where they are only granted supervised visits because the safety of the child is a concern.

To get a better idea, let’s take a closer look at each of these conditions separately and what impacts they may have on a divorce or custody case. Bear in mind that you’ll have to consider whether it’s yourself or your spouse that is struggling with the condition, or in the case of RAD, if the child’s welfare is a concern.

Anxiety

When dealing with anxiety in divorce and custody cases, there are so many different impacts that anxiety can have. The individual who is struggling with anxiety could be failing to function normally or be able to perform “typical” things like daily hygiene and care, working a regular job, and so forth.

If you’re the one with the condition, you need to discuss the situation with your lawyer and make sure that you follow their advice along with the recommendations of the court to present the best case possible for a fair outcome.

Anxiety can make people more edgy and irritable. It can also create added depression for those who struggle with anxiety-induced depression. Those who have agoraphobia or social anxiety disorders may struggle through the actual hearings and in-person proceedings that have to take place along the way. When left untreated and unchecked, anxiety can even become violent and sometimes angry, creating a serious emotional rift in relationships that can extend to the divorce and custody hearing.

PTSD

People suffering from PTSD can experience a range of emotions that can change on a dime. they can become violent, abusive, and even completely unable to control their emotions. This can be dangerous to partners and children alike, and in some cases, it can lead the courts to determine that the individual may not be fit to have custody.

If not properly diagnosed, treated, and documented in the legal process, PTSD can end up causing a lot of issues for people in the court system. After all, the court is looking out for the best interests of the child and when one of the parents is struggling with a disorder like this, they will usually not be the first choice.

The actual process of divorce and custody hearings can also make the PTSD condition worse for some people. it can add to their sense of failure and the “doom cycle”, showing them that their fears are

somehow legitimate because their life is, in fact, falling apart just as they'd imagined. It's almost a self-fulfilling prophecy.

Even if there are no children involved, a PTSD diagnosis could have a huge impact on the divorce process. It could be the catalyst that leads to the divorce in the first place and it could create a bigger sense of panic and dread than necessary for those involved. Some people will feel like they have "failed again" and thus feel more depressed, suicidal, or guilty about their condition and their role in the failure.

PTSD is trauma, and it's serious trauma. Too often, people don't talk about it and that makes some feel isolated and like they should just be able to "get over it". That's not how it works, though. Embracing the PTSD diagnosis, whether it belongs to you or your former partner, is the first step in navigating the waters of divorce and custody.

Reactive Attachment Disorder

As we've discussed, this condition is usually discussed in relation to the children involved in the case. When children are diagnosed with this condition, it can have a definite impact on the custody outcome. After all, it may be determined by the courts that the neglect of one parent caused the condition, and therefore they are not going to be a good choice for the child or children.

In some cases, the disorder may be the result of another situation or circumstance, but it could still impact the outcome of court proceedings.

In the case of RAD in children, there will typically be an assessment done to determine where the condition developed (if it can be determined) and how it is being treated or handled given the current situation. Then, the courts will decide how to proceed with custody based on the information gathered and the cases presented by parents who are seeking custody.

If there is a spouse in the relationship that struggles with RAD as a result of their own unresolved childhood issues or a rare case that began in adulthood, this can further add struggles to the divorce process because of their attachment issues, unaddressed emotions, and

other symptoms and effects.

Added Stress

Of course, any and all of these conditions will add stress to a divorce hearing or custody case. This process is already a high-stress situation that alters people's lives seriously and permanently. It's only natural that it's going to make people a little extra anxious and worried. Some people may experience temporary anxiety or depression just because they're getting divorced, even.

When you are dealing with any of these conditions and trying to get through a custody or divorce case, you could feel like the odds are stacked against you. Whether you are the one that has the disorder or you are trying to separate from someone with them, it can be a lot to handle.

In conditions based on trauma like anxiety, PTSD, and RAD, any excess stress is only going to serve to make things worse. It can be hard to control these conditions and the related emotions as it is for some people, and when you add in environmental factors like a legal proceeding or relationship going south, it can all become too much to handle. Adding stress to any mental health disorder is a bad idea, but these are especially vulnerable.

Celebrity Examples

In 2017, during a concert in Manchester, Ariana Grande was one of many people who survived a suicide bombing that killed 22 people. As a result, she now suffers from PTSD, which has affected her personal relationships and her life in several different ways. It's likely, of course, that her fans at the show are also struggling with PTSD after being involved in such a traumatic and major event, but they aren't getting the spotlight because they don't have that celebrity status.

Grande actually opened up to the media about her condition, sharing brain scans that show the abnormal brain activity that is often found in those who suffer from PTSD. She wasn't ever sure she'd be able to talk about it, but over time, Grande has decided that she needs

to speak up because others can't.

Although Grande feels like her experience shouldn't be the topic because of the loss of those who died and the impact that it had on all of the other people in attendance, but she also feels that using her platform is the best way to help others, both who need to heal and those who just want to learn more about PTSD and the serious effects that it can have.

Grande has expressed plenty of social and relationship issues that have resulted from the event and the ensuing trauma, and although she is seeking ongoing treatment, she knows it is going to be a long road. There are millions of others like here out there, dealt the same fate, and it is to their benefit that she has stepped up and decided to speak out.

Managing These Conditions During Difficult Times: Tips and Tools

We've spent a lot of time talking about these conditions, but that's because there's a lot to learn. We're not quite done yet, either. Now, we need to talk about how you can manage these conditions or get through your divorce or custody case when these mental health and trauma disorders are involved. We already mentioned hiring a reputable attorney with experience-- that's by far your best bet.

Beyond that, there are plenty of other things that you can do both with your lawyer and on your own to make sure that you are prepared for whatever comes your way. It starts by taking the right steps and knowing what those steps are.

Below, we'll talk about the importance of coming up with a treatment plan, creating a plan for mitigating the legal process, and how you can work with your lawyer to ensure that you get a fair outcome, regardless of the issues or conditions affecting your case.

Have a Diagnosis and Treatment Plan

If you are entering a courtroom and you are going to be involved in any kind of family law case, the very first thing that you need to do is make sure that you have a treatment plan in place. If it is your soon-to-be ex that is dealing with anxiety or PTSD, it will be in their best interests to seek professional treatment, as well. This will show the court that everyone is doing their part to create the best outcome and that the condition should not impact the outcome of the hearing.

Of course, there are some situations where getting a diagnosis could actually create the need to alter the divorce or custody arrangement. For example, if a partner has severe PTSD that is undiagnosed and you are trying to protect your children from the severity of their symptoms, such as an inability to maintain a stable home life because of their extreme paranoia, you would want to have that diagnosis on record so that you have proof for the courts.

If, on the other hand, you are the one with the anxiety or PTSD, you'll want to be sure that your partner isn't nefariously trying to use your diagnosis against you in this way.

Regardless, taking steps to get help is the first way to make it easier to deal with anxiety and PTSD, as well as Reactive Attachment Disorder, when they are part of a divorce or custody hearing.

Consider the Circumstances

Every case and situation is different. Take the time to talk with your lawyer and figure out how the circumstances of what you are facing could affect your divorce or custody issues. Depending on whether it is you or your partner, or even your child, that is dealing with a mental health condition, that will affect the way that things are handled.

Take the time to think of all the possible outcomes and consider exactly what you are up against. When you've chosen to work with an experienced family lawyer that knows how to handle these things, you'll have a much better chance of getting a fair outcome.

You can never truly know how the courts are going to respond, so you'll just want to make sure that you take the time to consider all the circumstances and possible outcomes so that you can prepare for them all.

Make a Plan

Now that you have a better idea of what you are dealing with, you will be able to come up with the best way to approach the situation. Of course, with the right lawyer on your side, you can generally rely on them to handle most of the work along the way. They can advise you on the best course of action, what the courts are used to seeing, how they typically handle various issues, and more. This kind of insight can go a lot further than you think.

If you are trying to navigate the difficulties of divorce or custody and you find that it is making your PTSD or anxiety condition worse, you'll want to talk to your lawyer right away. It's their job to assist you in every way, including by taking the stress off of your plate. The major life changes that you have going on are quite enough, after all.

Have a Strong Support Network

Another very important resource, especially for these trauma-based conditions, is to have a solid support network in place. This network should be one that is filled with people who will keep you in check, hold you accountable, and provide the support that you need throughout your mental health issues and the impending divorce or custody issues that you will be facing.

Both during and after your family law case, you are going to need a lot of emotional and social support from friends and family. Anyone would, and those with trauma-based conditions and anxiety issues are going to need it even more. Being able to talk with people and form new connections will help you deal with the loss of the other ones and keep your emotional and mental health in check.

You can even pick out certain people or types of support for specific situations or circumstances. Perhaps you want to have your

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friends on call for emergencies, but you need a weekly support group to help with your ongoing anxiety treatment during and after your divorce case. It's all about finding what works for you. In this case, you're going to be your own worst advocate. Your lawyer can help through the legal process, but you'll have to find others to help you elsewhere along the way.

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CHAPTER 5

Borderline Personality Disorder

In this chapter, we're going to discuss a less common but still well-known condition: borderline personality disorder (BPD). This condition affects millions of Americans, and like other mental health disorders, it can have a serious impact on relationships, including marriage. It can also impact parenting, families, and the divorce or breakup process, including custody.

Borderline personality disorder can further complicate already difficult relationship issues and make it challenging to navigate personal connections for those afflicted, as well as for those interacting with people who have BPD. Obviously, with a marriage or live-in relationship, the effects are much bigger because of the constant presence of the other person.

Even those who have well-managed conditions may find that they struggle in personal relationships, or that they start to experience personal struggles once relationship conflicts arise. A simple Internet search will offer endless insights, but also endless cautionary tales, regarding BPD and relationships, especially in terms of divorce.

Before we get into how this condition can manifest during or have an impact on divorces and breakups, let's take the time to learn more about what borderline personality disorder is, what causes it, and what it looks like. We'll also discuss common treatment options, and the all-too-common issue of avoiding or sabotaging treatment as a symptom of this and other mental health disorders.

What is BPD?

According to the National Institute of Mental Health, borderline personality disorder is a mental illness that is "marked by an ongoing pattern of varying moods, self-image, and behavior. These symptoms often result in impulsive actions [...] intense episodes of anger, depression, and anxiety that can last from a few hours to days."

There are several subtypes of BPD that have been discovered over the years with additional research. However, they all tend to have similar symptoms and the same basic concept of an inability to stabilize emotions

and impulse control issues.

People with this condition could be uncertain about their own view of themselves and their place in the world, which can result in quickly changing interests, values, and even fast-and-loose moral decisions that can change on a dime.

Because of all of this impulsiveness and uncertainty, people with BPD have a difficult time even developing a sense of self, let alone an ability to form meaningful connections with others. Even when they can, it can sometimes be a challenge for their partner to manage living with the condition and its various effects on day-to-day life.

A Little Background

This condition generally begins or appears during the adolescent or young adult years, and is often found along with anxiety, depression, substance abuse and other impulse control disorders, and other personality conditions. Perhaps the biggest issue, for most, is that the diagnosis of this condition is often overlooked, which can delay or completely prevent recovery.

BPD was officially recognized as a mental health disorder in 1980, which means that it is at least two decades behind the majority of other mental health conditions in terms of research, education, treatment options, and a greater understanding of the condition and how it works. This has created more stigma around this disorder, along with misunderstanding about how it affects people and its causes.

Fortunately, the last few decades have shown some promise and progress for borderline personality disorder. Evidence-based treatments have been found that offer hope for people diagnosed with BPD, but there is still no real “cure” or solution that works for everyone. Like all mental health conditions, it’s largely a balancing act of finding the right treatment plan based on the individual circumstances and condition.

Next, we’ll discuss the symptoms of BPD and signs to look for. After that, you can find out more about the specific types of BPD that people suffer from and what each one entails. First, a few quick facts:

- BPD affects nearly 14 millions Americans (5.9%) at some point in their life.
- 20% of patients admitted to psychiatric units have BPD.

- BPD is 50% more common than Alzheimer's and affects almost as many people as bipolar disorder and schizophrenia combined.
- About 10% of those in outpatient treatment are being treated for BPD.

What Causes BPD and What Are Its Symptoms?

The causes of borderline personality disorder aren't fully known, although it is believed that genetics can play a factor. The condition may also be affected by brain structure and social, cultural, or environmental factors, which could increase the risk of developing BPD or the severity of the symptoms. Later, we'll talk about the three biggest suspected causes, and then we will go over the most common symptoms experienced by those diagnosed with this condition.

Take the time to think about yourself or your partner when reading through this information and see if you can gain any insight to help you deal with the condition both in general, as well as through the divorce process. Your lawyer can help with this, but if you already have ideas in your mind, it will be easier to get a plan together. They can't know what your experience is like, after all, so you'll have to tell them.

The three presumed causes or factors involved in borderline personality disorder:?

Your Brain

Studies have shown that people who are diagnosed with BPD tend to have functional and structural differences in their brain. These variances are more common in areas responsible for regulating emotions and controlling impulses. It isn't clear whether these are risk factors for the condition or if they are simply effects *caused by* the condition, but they offer a promising point of focus.

Your Family History

It has been shown that those who have a family member that suffers from BPD may be more likely to develop the condition than those with no familial connection. This is not necessarily always the case, but there is believed to be

some genetic role in the cause of this condition.

Your World

The environment that people live in, as well as their culture and society, could all have an impact on emotional health, including trauma and adversity. Unstable childhood life, invalidated relationships, distrustful adults, and other conflicts or traumatic events can all lead to a variety of mental and emotional issues, including borderline personality disorder, according to the early research that is available.

The Symptoms to Look For

Whether it's you or your partner that may be suffering from BPD, the list below includes the most common symptoms and signs to watch out for when you think something is amiss.

- Viewing things in extremes, having an “all good” or “all bad” mentality
- Rapidly changing opinions of others, with relationships going from good to bad in a day, or even a matter of hours
- Intense and unstable relationships that result from the shifting feelings and lack of impulse control
- Avoidance of abandonment, whether real or imagined, including cutting themselves off from people as an anticipatory move
- Relationships that swing between extreme closeness and extreme anger or dislike
- Unstable and distorted sense of self or self-image
- Self-harming behaviors
- Suicidal thoughts and ideations
- Impulsive and dangerous behaviors, including substance abuse, unsafe sex, reckless driving, spending sprees, and so forth.
- Intense, rapidly changing moods that can last for episodes of a few

hours to a few days

- Inappropriate and intense anger, or difficulty controlling that anger
- Chronic feelings of emptiness and despair
- Feeling dissociated or detached from oneself or reality
- Difficulty trusting others and irrational fears regarding their intentions

There are several symptoms here and not everyone will experience them all. Furthermore, there might be symptoms and signs that aren't on this list that may also be related to the condition. As we said, it's still newer in terms of being recognized and researched, so there is much to learn.

The 4 Types of Borderline Personality Disorder

Previously, BPD was segmented into two main categories: Avoidant and Histrionic. Today, however, research has shown that there are actually four subclasses of this condition that people may present with, and each has its own symptoms and reactions to various situations. In order to help you better understand the specific diagnosis of you or your soon-to-be ex, here's what you need to know.

Quiet BPD

Also known as discouraged borderline personality disorder, this specific type of BPD has a bit of a misleading name. Those who have this type of BPD tend to direct their behaviors and mood swings inward, which is the opposite of most people with this disorder, who tend to direct their emotions and impulse control outwardly. People with this type may be known as "high functioning", which basically just means that people may not readily show their symptoms externally.

The biggest difficulty with increasing understanding of this condition is when people have types like this where their already difficult emotional balance is further downplayed by the lack of outward symptoms and reactions. People with this condition tend to be filled with self-doubt, internalized rage, self-blame and guilt, anxiety, and emotional attachment issues.

People who have the “quiet” version of BPD will notice symptoms like:

- Suppression or denial of anger and internalized impulses related to that anger
- Withdrawing or avoiding others when you are upset
- Self-blame for conflict
- Poor self-esteem and a sense of guilt or shame about your existence and life decisions
- Feeling like a burden or feeling detached completely from the world around you
- People-pleasing at all costs
- Fears of rejection, abandonment, isolation, and of being alone
- Self-fulfilling prophecies of pushing others away, detaching from connections, and being unable to build connections in the first place
- Having a “thin skin” or tendency to take things too personally

Basically, people who have this type of BPD will have a heavier focus on the internalized part of the condition that fuels guilt, shame, anger, and inward denial of the condition’s existence, in many cases.

This subtype of the condition is part of the reason that there isn’t a lot of information or discussion about BPD-- since people with this version try to minimize the external effects, many people might not even know that someone with this form of the condition is even affected in the first place.

This condition can also lead to depression and anxiety, as well as substance abuse or eating disorders as a way to regain control or otherwise deal with the difficult emotions involved. It is more high-risk than others for dangerous behavior because of all of the internalization, as well.

Impulsive BPD

The next subset of this condition is known as impulsive BPD. This refers to the more general disorder that affects the majority of people and is the one that is most commonly related to histrionic personality disorder. This is the

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type where people are much more extroverted and unable to control impulses. They may display instability in their moods and interactions with others, including symptoms like:

- Charming or flirtatious with others, almost by default or even without realizing it
- Elusive and superficial with others and their relationships
- Easily bored with high energy levels and a lack of focus in many cases
- Risk-taking behaviors with no regard for personal safety or other consequences
- Attention-seeking or overly-dramatic behaviors and moods
- Highly manipulative habits, including manipulating others or putting themselves in the center of attention
- Frequent and not-always true claims and complaints of illness or chronic discomfort, pain, and so forth

Ultimately, people who have this condition are more extroverted about their symptoms and the condition as a whole. Unlike the former subset where guilt and shame ruled the moods, this condition is marked by attention-seeking and extroverted behaviors.

There may be other symptoms and signs of impulsive BPD, but these are the most common ones that have been reported. There may also be general symptoms present and some people may still struggle internally with the guilt, shame, and inability to control their emotions or decisions. However, it will not be as obvious since this condition is marked by more extroverted behaviors that are almost designed to “distract” everyone else from the individual and their symptoms.

It’s not really known how people develop one subset of BPD or another, as the causes of the condition in general are still under investigation. However, it’s likely related to similar causes of the condition in general, such as childhood trauma, brain issues, genetics, and environmental factors, just to name a few.

Self-Destructive BPD

The insecurity and self-loathing of BPD are the highlights of this form of the condition. Self-destructive BPD is generally focused on taking out the irregular and illogical emotions on oneself. The reckless behaviors, impulsive decisions, and sometimes dangerous choices are seen more regularly in this form of BPD than the others.

Self-destructive BPD causes people to make decisions based on irrational information or false facts. They fear being abandoned, so they will cut off all relationships first, or they will manipulate people using their emotions and condition as a way to make them feel guilty or like they “have to stay”.

In some extreme cases and those that border on petulant BPD (which we’ll discuss next), people might use their condition or the symptoms (self-harm, etc.) to manipulate and control others. People may threaten to harm or kill themselves if the other person doesn’t respond accordingly or behave in a way that is acceptable to them.

People may threaten the safety and wellbeing of others as a part of their extreme emotions that they are struggling to regulate. In addition to the main symptoms of BPD, people with the self-destructive type will generally exhibit or experience symptoms like those listed here:

- Self-loathing that leads to poor decision making
- Feelings of bitterness, depression, or that no one cares
- Self-injurious behavior or suicidal thoughts and threats
- Impulsive and poor decision-making, self-sabotage, and high-risk behavior
- Unstable emotions
- Intense lack of self-care ability and unstable self-image
- Substance abuse
- Attention-seeking behaviors

Here, people tend to take the symptoms and false beliefs of BPD out on themselves as a way to deal with the condition or even just as a symptom of the condition itself. Unlike taking it out on others, the emotions are directed inward and deliberately focused on the self-fulfilling prophecy of setting yourself up to fail.

When this condition is present, people believe that no one cares and that they aren't deserving of the attention anyway. They will use that feeling of a lack of care to justify poor decision making, irrational behaviors, extreme emotions, and other unstable and unpredictable behavior.

Petulant BPD

Petulant BPD is marked by a sense of overwhelming anger and frustration that generally leads people to irrational “if, then” thinking-- if you love me, you'll do this.

If you really care about me, you would...

You're just going to leave me anyway

How can you prove that you love me?

These are all common thoughts and statements of those with petulant BPD, since their primary focus is on feeling accepted and not being abandoned. The feelings manifest themselves in a sort of self-fulfilling prophecy. Those who have this type of BPD will often push people away and use the “if you love me” type of thinking in their own relationships, which can lead to a host of issues and conflict along the way.

Those who have this type of BPD will see a lot of difficulty in personal relationships and symptoms that reflect those struggles. Their own feelings and BPD symptoms will be handled or taken out on others as a way of dealing or because they don't know how to regulate and manage their emotions. People who have petulant BPD typically experience symptoms like:

- Inability to express feelings or expressing feelings incorrectly
- Outbursts of anger or anxiety
- A need to control other people
- Social anxiety

- Extreme fear of abandonment and behavior that reflects that fear
- Dissatisfaction in relationships, including a constant high/low or push/pull situation
- Wanting to impose guilt or feelings of shame on others
- Passive-aggressive behavior
- Shutting people out or cutting them off
- Self-harm or self-destructive behaviors
- Using self-harm or suicidal thoughts or behaviors to control others or gain attention

Basically, the people who suffer from this form of BPD are exerting the biggest elements of their condition **at other people**. They are using others and manipulating situations to their advantage, using their mood swings and anger to control others and the world around them.

At the same time, they're constantly searching for validation and feeling insecure and full of doubt, which can result in additional anger, guilt, or other feelings that can exacerbate the interactions with others. For example, when you decide on divorce, your soon-to-be ex may feel abandoned and like they aren't good enough, which could present itself in the form of extreme passive-aggressive behavior, manipulation, and shutting you out entirely.

The difference in shutting others out here is that unlike with quiet BPD, those who suffer from this type will loudly make sure that people know they are being shut out before just cutting them off. They are seeking attention and this is where their impulse control and lack of emotional regulation are displayed.

The Paradox of Treatment Avoidance in Borderline Personality Disorder

Although it is present in other mental health conditions as well, it is most commonly found in BPD that people who are struggling with their mental health will be more likely to sabotage their treatment as a result. This is often seen in various forms, from people avoiding treatment entirely to manipulating their own medications or trying to filter their symptoms as a

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way to minimize the condition and thereby avoid some types of treatment.

Mental health disorders trick the brain into a lot of things. Thinking that it doesn't need help is one of the most dangerous for people who need it.

People who suffer from BPD, in all its forms, have a huge sense of shame and guilt about their state of mental health and self-image. They feel like everyone is going to leave them anyway and some even have a lot of high-risk and self-destructive behaviors. Another problem with seeking treatment and getting ongoing support is that the impulse control exhibited by some makes this impossible.

Someone may be on a good path to successful treatment one day, only to impulsively dump all of their medication and quit seeing their therapist the next day due to an irrational decision. This is part of the issue in understanding this condition, as well as in treating it effectively.

It's hard to help people who are constantly sabotaging themselves. Of course, this is a characteristic of any mental health disorder, even if it isn't as commonly found in others. The brain is attacking and lying to itself, which includes convincing you that it doesn't need the treatment that it so desperately deserves.

When situations of high-stress arise, such as a breakup or divorce, these symptoms can become even worse.

Some people might use their treatment as a bargaining tool or a way to manipulate their partner into doing what they want. Others may simply believe that they don't need treatment, don't deserve to be "happy", and so forth. This is also another reason that there is limited information-- these people don't like admitting they have a mental health condition or asking for help in the first place. No wonder it's hard to study.

How Does BPD Manifest During Divorce and Breakup Situations?

Because of the lack of impulse control and emotional regulation, a borderline personality disorder can manifest (get worse or appear obtrusively) during breakups and divorce with ease. The high stress and emotional turmoil, combined with the dissolving relationship creates a self-fulfilling prophecy for them that, in their minds, ends in that ultimate "abandonment" and proves that they will never be good enough.

Even when someone is high-functioning and thinks that they know how to control themselves or handle their condition, they usually don't. Divorce is a process that has its own stressors and factors involved that people are often ill-prepared for, and as a result, any emotional or mental health issues tend to appear or become worse throughout the process.

A borderline personality disorder is marked by impulsiveness, unfiltered or unmanaged emotions, and a deep sense of poor self-image and self-worth. A breakup, to these people, could be seen as a huge life failure, causing them to spiral further into their condition, develop extraneous depression symptoms, or even increase their anxiety levels.

Another big indicator of BPD and similar mental and emotional conditions is the inability to self-soothe. This can be difficult in times of stress, often making the condition worse or creating issues with managing BPD for those who are facing it. As the spouse of someone with this condition, it can be frustrating to deal with their constant impulsiveness and self-worth issues, but there is a lot more to it than that.

During breakups and divorce, those with BPD will respond differently, both based on the circumstances and on the type of condition that they have. For example, someone with Quiet BPD might just shut down and internalize everything, falling into a bit of a depression. Someone who has Petulant BPD might try to use their even more unstable emotions as a bargaining chip or a way to manipulate the other spouse involved in the breakup or divorce.

For example, they may become increasingly reactive, insulting, or even threatening to the other person. Someone with BPD might make wild, unfair accusations because they are panicked and feeling abandoned and lost. Their condition causes them to lash out and seek attention and validation.

A divorce could be one of the most invalidating experiences for someone with BPD who just wants to avoid that abandonment that they have feared for years.

It's going to impact their condition. Of course, to prevent this, people dealing with BPD should make sure that they have an appropriate treatment plan in place. Along with that, it's important to make a personal plan for handling the stress and getting through the legal process.

Part of that plan should include working with a qualified divorce lawyer that understands the unique effects of divorce on mental health disorders like borderline personality disorder.

Tools to Manage BPD During Your Divorce Case

Of course, regardless of anything else, the best thing that you can do is to have a plan. That plan should include a list of tools that you can use to help manage the condition and its impact on your divorce, a treatment plan for the affected spouse that shows their willingness to improve their state of health and become a better person and parent in any way that they can, and other resources that will help you navigate through the process.

The exact tools that you need will depend on whether you are the one suffering from BPD or if you are dealing with a partner that has the condition. However, it always starts right where you're at-- with education.

Get to know the condition and find other resources beyond this book to learn about how it may impact the divorce. People have shared countless firsthand experiences online, along with their own personal anecdotes and insights. You'll also find tons of professional insights and opinions on navigating divorce with BPD.

Getting Treated is Essential

In any family law case, evidence of treatment or efforts to improve their situation are required. This can include therapy, medication, alternative treatments, life plans and coaches, and other resources that are designed to help people with BPD maintain a sense of normalcy in their day-to-day lives.

If you or your partner is struggling with BPD during the breakup process, a treatment plan should be the first step.

In some cases, the person with the condition may not want to seek treatment, or they may have had a bad experience preventing them from seeing the value in trying again. The self-deprecating and self-injurious behaviors of BPD include foregoing treatment and not taking necessary medications, so it becomes even more difficult to manage in a stressful time like divorce.

Even if it isn't required by the court, getting a treatment plan in place is an important part of the process. It will help everyone get through the split up with less stress and it will make the life-altering changes less overwhelming.

If treatment is required by the courts, it's important to follow their guidelines to the letter. Having an experienced lawyer who can help you set this up or confirm that it is taken care of will give you peace of mind and take the work off of your plate. Courts could mandate things like:

- Inpatient or outpatient therapy and treatment.
- Consideration for medications or other solutions.
- Supervised visitations or parenting restrictions until improvement is seen.
- A case manager to help the affected individual navigate the family law case and their life during the process.
- Re-visiting custody agreements or parenting arrangements after a period of time has elapsed to allow treatment to prove effective (or not).
- Specific parenting or custody schedules based on treatment plans or goals.
- Specific terms of the divorce that are contingent on the BPD being properly treated and managed.

Ultimately, the court is going to do what's in the best interest of everyone involved. If it is a family case and children are involved, there **has to be** some type of treatment plan in place for the affected person. The court wants to see that people are trying to get better, after all, and they're not going to put children in a dangerous (or even potentially dangerous) situation if they can help it.

Consider Your Situation and Make Notes

You don't want to sit around and think of all the possible "worst-case scenario" situations that could occur. This will get depressing and stressful. You do, however, want to make sure that you think about the case that you're facing and how BPD may impact things. Use this information to help you plan for your own case.

You can even use the examples and condition information to determine if this might be what is going on with your soon-to-be ex in the first place. Too often, people withhold information about their mental health. They fear

that their loved one will leave them if they know because they will no longer be “good enough” or because they are “broken”. This can be an initial thing or it can go on for years. Some people try to hide mental illness for years, only for it to come out during the divorce or breakup process.

Take the time to sit down and consider all of the factors in your divorce. Doing this with an unbiased friend or your lawyer could be helpful, as it could point out things that you didn’t see or think about. Look at how the BPD is affecting your life and relationship and figure out how it may become more reactive through the divorce process.

Then, you will be able to make a plan to deal with all of the potential issues that could arise along the way.

Ask Your Lawyer for Assistance

When you’re working with a qualified divorce attorney that understands mental illness and its impact, you will be in a much better position to deal with all of the things that you are facing. Now that you have thought about your situation and how it could be impacted by the divorce, or how the divorce could impact the BPD, it’s time to find a way to prevent as much chaos and stress as possible.

Take the time to consider how the BPD affects daily life, both for you and the other spouse involved, as well as for any children that you have. This will largely impact the decision of the courts when it comes to things like custody and dividing parenting time.

Typically, mental health conditions will not impact the division of assets, although exceptions always exist. If someone is deemed unable to manage a household or handle the responsibility of paying bills because their BPD is so severe, the courts may decide that the other spouse gets the house, for example.

They could even recommend the affected person attend treatment or consider a halfway house situation where they can get help learning how to live and manage adult responsibilities while also being treated for BPD.

The point here is that there are so many variables and the courts are unpredictable. Thus, the best thing that you can do for your case is to make sure that you take the time to review everything, talk to your lawyer, and make a plan. Then, you’ll know that you are avoiding most of the stress and complications simply by being prepared.

Are you starting to notice a trend? Planning and preparation can go a long way, in addition to getting proper treatment, when it comes to dealing with mental health and personality disorders during divorce and family law cases. Up next, we'll talk about preparing for divorce when bipolar disorder and major depression are involved.

CHAPTER 6

Bipolar Disorder and Major Depression

Bipolar disorder and major depression are two conditions that create a lot of excess sadness and apathy in the affected individuals. They can also result in periods of mania and anxiety, and they present differently in every single individual. Therefore, if you or your soon-to-be ex are dealing with either of these conditions, you will need to consider your specific circumstances.

People who suffer from major depression, also sometimes called clinical depression or major depressive disorder (MDD), as well as bipolar disorder, are more likely to end up in divorce than those who do not have mental health disorders. These two conditions are marked by a tendency to withdraw from people, including loved ones.

These disorders may cause people to withdraw even further from their closest loved ones because of the fear of abandonment, feelings of worthlessness, or other symptoms of the condition that make meaningful, intimate connections difficult.

Some people confuse these conditions because they are both marked by major depressive periods. However, in the case of bipolar disorder, there are also highs that go along with the lows. In depression, there is never a “mania” stage-- the person is just constantly in the state of feeling sad and in despair.

To help you better understand these conditions, let's look at the details of each and what we know about their causes. Then, you'll be much better informed to make a plan to get through divorce when you are faced with bipolar disorder or major depression, whether it is yours or that of your soon-to-be ex.

What Are They and Where Do They Come From?

These two conditions, like many mental health disorders, are still being researched and a lot of the causes are still largely unknown. There is some proof that genetics play a role, and environmental issues can factor in, as well. To better understand each, we will talk a little more about what the conditions are and what they entail in terms of prognosis, treatment, and recovery.

We'll also discuss common symptoms and behaviors to look for below. Like many mental health disorders, these stem from a deep-seated place of emotional disturbance. The brain has somehow failed to control the emotions and regulate things properly, which results in these conditions in some cases.

There are also several differences in these conditions that need to be examined. Part of successfully treating and managing mental health disorders is getting the right diagnosis in the first place. By seeing the right mental health specialists, people can ensure that they get an accurate diagnosis so that they can develop a treatment plan that works.

Of course, when the relationship has already reached the divorce stage, that might feel like too little, too late. It's quite the opposite, though-- now more than ever, people need to seek out proper treatment for these conditions. That starts with understanding what they are and what to look for.

Let's dig in.

Bipolar Disorder

Bipolar disorder is one of the most talked-about mental health conditions, and yet there is still not a lot of information about its actual root causes or how it can be prevented, if at all. This condition is also sometimes referred to as **manic depression** because it causes severe highs and lows of mania and depression in most patients. These mood changes can affect sleep, thinking and behavior, energy, and more.

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Some people with bipolar disorder do not seek treatment because of the high periods where they are happy and everything seems perfect. They errantly presume the low spells are just “part of life”, not realizing that most people don’t swing on such extremes regularly.

Bipolar is pretty self-explanatory in terms of its name: two poles, or two mood extremes. People with this condition rarely have a “happy medium”. People will go between feeling sluggish and depressed, even hopeless and suicidal at times, and then back to feeling happy, overjoyed, and even overly-confident about the future. These can almost be false hope, for many.

This condition can also cause delusions and hallucinations during the manic periods, although this is rarer. These people will have a more difficult time dealing with day-to-day life and their condition, generally speaking, than those with milder forms of the disorder.

There are also four different types of bipolar disorder:

1. Bipolar I Disorder
2. Bipolar II Disorder
3. Cyclothymic Disorder
4. Bipolar Disorder induced by substance abuse or other mental health or medical issues

If people don’t fall into the first three categories of bipolar, it is presumed that they have the fourth kind, which may be caused by some other condition or circumstance or may have a cause that is unknown entirely.

All of these different types of conditions and variables can make it difficult to diagnose bipolar disorder effectively, which often creates issues with getting the right treatment or even feeling like treatment is an option, for many. Let’s take a closer look at the three main types of this condition before we move on.

Bipolar I Disorder

This is the most severe form of the condition, which is marked by high periods of mania that last for days, and sometimes up to a week or more. Some cases will have mania that requires hospitalization or result in an inability to function in daily life. Depressive episodes can last weeks, and persons can struggle with both symptoms even if they are in one mood or another.

Self-harm and fear of danger are common in people who have this type of bipolar. They are going to struggle a lot more to find the appropriate treatment, and will likely also balk at treatment as a symptom of the condition.

Bipolar II Disorder

This form of the disorder doesn't have the high mania of the first. It involves a milder "mania", which is just a more elevated mood that may last for a few hours or a few days. Major depressive episodes generally occur infrequently, but they might not even need to be present.

While this form of the disorder is less severe, that doesn't mean that it doesn't still need appropriate treatment and care. People who suffer from this condition may do well with talk therapy and low doses of medication, although alternative treatments and options can be explored, as well. The importance is that it isn't ignored because it isn't "serious enough". Any emotional disorder or mental health condition that impedes the ability to function normally is important enough to get checked out and find a treatment plan for, including this less-severe form of bipolar.

Cyclothymic Disorder

This condition is marked by mild symptoms, which typically include much milder highs and lows in moods that might not be enough to qualify as major depression or mania. People with this condition typically see development in adolescence, and might even seem to function normally at first. However, it is upon further getting to know

someone that they are not just “moody” or hard to deal with.

This condition is the least-diagnosed because people don’t feel like the mood swings are severe enough to warrant treatment. This condition can lead to severe bipolar disorder in some cases when it is left untreated, so it mustn’t be overlooked.

People with this condition may not struggle as much through major life changes like divorce, but that doesn’t mean that they shouldn’t have a plan and think about what they are embarking upon.

Again, anyone who doesn’t fall into these categories above may have bipolar disorder that is caused by something else entirely. Although the research is still ongoing, there are several instances where people have these symptoms but they don’t meet the criteria for abnormal mood changes. It may also be that their condition is induced entirely, or in part, by substance abuse or made worse by another health condition. Finding the right treatment starts with diagnosing the right condition.

Major Depression

Major depression, or clinical depression, is a diagnosis that is marked by severe bouts of sadness, withdrawal from socialization, and feelings of emptiness. There are several other symptoms, which we’ll discuss further below, but it’s a lot more than just “feeling down”. Some people will experience this once or twice in their lifetime. Others will have it for the duration of their life.

There are different levels of depression that can be diagnosed and each has its own symptoms and treatment paths. Major depression is among the worst, which means that it needs the right treatment even more than most. This condition may be found in families, but there are also millions of people with major depression who have no family history or genetic trace of the condition.

Most people feel sad at some point in their lives. everyone goes through periods of slight sadness or depression here and there, but when it becomes intrusive, excessive, or long-lasting, it can be a sign of major depression or another mental illness.

According to the DSM IV, the manual for the diagnosis of mental health conditions, there are several symptoms with major depression beyond just sadness and despair. The biggest indicator is that the symptoms are persistent and long-lasting, often presenting every day for at least two weeks or longer. This is what separates depression diagnoses from people who might just be “in a funk”.

If you think that you or your partner have this condition, it's important to get help as soon as possible to make the divorce process less stressful for everyone. Not only that, but it's important to be healthy in general and that includes mental and emotional issues.

Are There Risk Factors?

Major depression does affect teens and children, but it is often untreated or even undiagnosed entirely. It can also be found in older adults, but again there is often a lack of diagnosis and treatment. Women are more likely to be diagnosed with major clinical depression than men, with about twice as many females affected as males. It's presumed this is related to hormonal changes that are more extreme in women than men, but the exact reason isn't known.

This condition affects almost 7% of the adult population in the U.S., according to research by the National Institute of Mental Health. What's more is that as many as 20-25% of adults could suffer from at least one episode of major depression during their lifetime. Diagnosis in men is underreported since many men are less likely to seek help or even discuss their struggles.

What Behaviors are Associated with These Conditions?

We've already touched on some of the symptoms that you will find present with bipolar disorder and major depression, but to help you better understand the conditions, let's look a little deeper. Again, these conditions do have their similarities, but their differences are what makes the diagnosis, and what will be important for you to remember when you are seeking treatment.

Bear in mind that not everyone will have these same symptoms and that some people's behavior may be different than anything we talk about here. That's the nature of some of these more complex conditions-- there are some cases where people are textbook when it comes to symptoms, and then there are instances where people don't fit the "typical" mold but are still diagnosed.

The Behaviors and Symptoms of Bipolar Disorder

Bipolar disorder comes in many forms, as we already discussed. The symptoms are generally similar, with the only real difference being the severity of those symptoms. Some people may notice differences in their symptoms if they are male or female, but again this is all something to be considered on a case-by-case basis when getting diagnosed and making a treatment plan.

For the sake of pointing you in the right direction, here are some of the common symptoms and behaviors that you'll see if someone is suffering from bipolar disorder.

Symptoms

If people have bipolar disorder, they may present symptoms like:

- Episodes of extreme elation and happiness
- Feeling jumpy or having excessive energy
- A decreased need for sleep or loss of appetite
- Increased irritability or sensitivity
- Fast-talking and racing thoughts
- Thinking they can do several things at once or trying to juggle too many tasks
- Acting on risky behaviors or reckless activities

- Feeling an unusual and misplaced sense of importance, talent, or power in their role in the world
- Feeling down, empty, and hopeless
- Feeling restless or slowed down and unable to do things
- Having trouble with sleep routines, including falling asleep, staying asleep, or sleeping too little or too much
- Increased appetite and weight gain
- Forgetfulness and inability to concentrate
- Not talking or withdrawing from social and family situations
- Feeling unable to accomplish mundane tasks
- Have little to no interest in activities, including sex and pleasure
- Thoughts of death or suicide, self-harm, or general feelings of worthlessness and despair

As you can see, these symptoms run the gamut from mania to depression and can include every possible related feeling and emotion along the way. You or your soon-to-be ex may experience several of these symptoms and they may be more or less severe, based on your specific diagnosis. However, this is a good general starting point to know what to expect.

Behaviors

People struggling with bipolar disorder may have several different behaviors that affect their everyday life and activities. In addition to all of the symptoms above, people who are exhibiting behaviors like those discussed below may have bipolar or another depressive condition. Keep an eye for things like:

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- Making rash decisions and choosing risky paths regardless of consequences or with no thought toward them.
- Self-harming or self-destructive behaviors and lifestyle choices, including substance abuse and other addictions.
- Withdrawing and isolating from family and friends, or being excessively charming and social during periods of mania.
- Often putting on a front that everything is fine and then using the condition to manipulate a partner behind closed doors.
- Inability to regulate emotions that leads to a lot of personal and professional conflict.
- Struggles with finding and keeping gainful employment because of emotional and interpersonal conflicts and the ability to regulate the highs and lows.
- People with bipolar often struggle to manage money and handle basic responsibilities like paying bills.
- Spending sprees may be a sign of mania for those who are exhibiting trouble managing their finances.
- An inability to focus or concentrate can lead to failure to complete daily chores and living tasks, care for children, and other issues.

These are just a few of the things that you can look for when you are trying to figure out what someone is facing. If that someone is you, be sure to note any symptoms or behaviors that you aren't sure of so that you can discuss them with your therapist and get the best resolution possible.

The Behaviors and Symptoms of Major Depression

Major depression is a lot like bipolar in terms of the “low” symptoms, but you’ll see the list of manic symptoms is much shorter

here. Some of the most common behaviors are also similar, but again they have their own indicators that it is depression, not bipolar disorder, that is at play. If there is no mania present and you notice any symptoms on the list below, this may be the culprit.

Even if you can't always pinpoint the symptoms, we've also included a list of some of the most common behaviors. These are often easier to spot and will allow you to get the appropriate diagnosis and treatment by knowing what to look for.

Keep in mind, as always, that this is not a comprehensive list and that not everyone will experience the same things as a result of this or any mental health disorder.

Symptoms

Those with major depression will show symptoms and signs like:

- Long bouts of extreme sadness, hopelessness, or feelings of despair
- Depressed or irritable mood on and off, or persistently
- Loss of interest in activities and loss of pleasure in hobbies, life, sex, and socializing
- Weight gain or loss, difficulty controlling appetite, and related eating issues
- Increased sleep, tiredness, and feelings of exhaustion
- Insomnia, inability to stay asleep, or irregular sleep patterns
- Appearing slow or unable to function at a “normal speed”
- Feelings of worthlessness and guilt
- Shame and feeling not good enough
- Fatigue, energy loss, and difficulty finding energy for even

mundane tasks

- Difficulty concentrating and focusing, as well as trouble making decisions
- Thoughts of self-harm or suicide, or making attempts or plans at either
- Emotional extremes that are out of line with what the situation warrants

These symptoms are usually easy to spot if you are married to someone with the condition, but it may be harder to notice if it happens slowly over time. When these symptoms are compounded by a failing marriage, it can be easy for them to be overlooked. People's perception is often distorted by depression, which means they can't see things as they are and may have delusions or false perceptions of reality in extreme cases.

Behaviors

People who struggle with depression at this level of severity will have several different unusual behaviors that may indicate something is amiss. Based on the symptoms discussed above, you should watch for things like:

- Sleeping all day or sleeping during hours when they are supposed to be doing other things.
- Eating more than normal or eating at odd hours.
- Avoiding social situations or staying in their room or home for days at a time.
- Feeling like everyone hates them and that no one cares if they are around.
- Missing work, school, or other obligations with a lack of urgency and sense of apathy about it all.

- Some people with major depression may use their condition to manipulate their partner or to get the upper hand in a situation.
- Using depression as a tool or weapon against the other person in a way to say “you don’t care about me” to fulfill their false thinking and feelings of worthlessness.
- Withdrawing from or no longer participating in activities that they once enjoyed, such as hobbies, social engagements, or even work parties.
- Falling out of contact with family and friends and isolating themselves to “stay out of the way” and not bother anyone because they don’t feel worth it.

Someone suffering from major depression is going to do whatever they can to fulfill their false beliefs that the world is terrible and their life is miserable and they shouldn’t be here. Their symptoms will typically cause them to spiral into a dark hole that can last for weeks or even months, and may eventually result in hospitalization for their own safety.

Major depression is a serious condition that should never be taken lightly. Even if you think that your partner is using it manipulatively, you can’t assume that until you do your part to make sure they are getting the right help.

These are just some of the behaviors that you might see. Others might be present, as well, but they’ll typically focus on the despair and “why bother” attitude that comes along with major depression.

Take Notes from Kim and Kanye: The Celebrity Example

In this chapter’s celebrity example, we are going to reference perhaps one of the most famous relationships in recent years. Kim Kardashian and Kanye West were in the limelight for several years, and still are, but for different reasons. At first, they had a typical love story that was nothing but good. Then, it took the route that several

relationships do when bipolar disorder is involved.

As time went on, it was discovered that Kanye had bipolar disorder. In true fashion, he didn't want to take medications or seek other treatment. This not only created a rift in their marriage, but it created potential danger and unnecessary stress for the children. He also didn't want to help care for the kids when he was off his meds, making it impossible for Kim to manage life and the family without him being involved and healthy.

Through the years, Kim and Kanye have gone back and forth, on again and off again because of West's inability to stay on his medication and keep his condition in check so that he can be a father and a functional person. Finally, in late 2020, Kardashian decided she'd had enough and filed for divorce.

As Kardashian's close sources tell the media, it's hard to have a family and manage four children when you're living in separate places. Although Kim supported Kanye through everything that he's done over the years, and even tried to make amends for past wrongdoings, it doesn't seem to be able to work for them. Therefore, the two are now in settlement talks.

And to think that perhaps a lot of this could have been avoided if Kanye had just gotten the appropriate treatment and stuck with it. Like BPD, people with bipolar struggle with treatment because they feel like they "don't need it" or they simply don't want to have to take medication to be "normal".

How Do These Conditions Manifest During Divorce?

In the divorce process, things are rarely amicable. The entire end of the relationship can feel like a failure to anyone, and especially to those with mental health and personality disorders. These people have a distorted sense of importance about things in the world around them and as such, they will see the divorce as yet another way they have screwed up, in many cases.

Stress is the name of the game with divorce, so naturally, the mental health conditions that people have will continue to get worse during this time. People with bipolar disorder can experience extreme bouts of depression, or even have manic periods where they think they are infallible and don't need a qualified lawyer to help them through their divorce case.

Someone with major depression might have withdrawn themselves so far from the marriage that when their spouse finally leaves, they see that as a sign that they were right about being worthless. Even though they essentially created their own self-fulfilling prophecy, they will allow the divorce proceedings to continue to fuel their condition until or unless they seek help.

Lashing Out

In some cases, if there is a lot of anger that comes with the manic episodes, people can become mean or even violent. Their reactive behaviors will become harder to control and they will lash out in various ways as a stress response. This could come out in several forms, and if you are the one struggling, you can't guarantee that you will be immune. Be careful to watch for increased stress so that you can plan to avoid these potential risks.

We already mentioned how some people might use their condition or diagnosis to manipulate their partner in one way or another. They may also attempt to pit the children against their spouse or cause other drama because of their condition and insecurities. The anger can come out in many forms, but is often seen in yelling, confrontation, and threats of or perceived violence.

It isn't common for people to get violent as a result of stressors related to bipolar and major depression, but it can happen in situations where things are extremely stressful or where people's conditions are severe and not well maintained or treated.

While a lot of the consequences and issues that arise from dealing with mental health conditions and emotional disorders during divorce are simply annoying and sometimes additionally stressful, lashing out can become dangerous for everyone involved and it needs to be

stopped before it starts.

Court Involvement

There are some instances where the courts may need to get involved because the effects of bipolar or depression can impact the wellbeing of the children or other parties involved in the divorce. Courts will want to see that people are seeking treatment and doing their best to be healthy and functional, otherwise, they aren't going to rule in their favor in most cases.

In family law, the mental stability and emotional wellness of all parties involved are essential to the courts. If someone has major depression or bipolar disorder, it's assumed that they are not in their best frame of mind. The courts may decide that the affected parent is not allowed to have custody of the child or children, or that visits must be supervised.

They may also designate a required treatment plan for the person with the mental health disorder and require their care to be monitored so that it can be assured that they are safe and healthy for themselves and any children involved. The stress of divorce can take its toll, but you shouldn't let it impact how you feel about yourself and your ability to parent if you can help it.

Plus, you should already be getting help (or getting help for your soon-to-be ex) just because it's the right course of action to take. It can be hard for people with these conditions to believe that they are worthy of help, of course, so that's a big part of the process. Sometimes, it takes that court mandate for people to step up and do what needs to be done. This is another area, however, where it's important to use the court mandate as a beneficial tool and not a manipulative move directed toward your spouse or soon-to-be ex.

A lot is going on in a breakup and divorce. When there are mental health disorders like bipolar and clinical depression present, the pile just gets bigger. It can be a lot to handle, but it can also be effectively managed if you know what to do. Read on to learn some valuable insights and tips for managing stress during a divorce to avoid further complications with bipolar and depression.

Managing the Added Stress of Divorce Proceedings: Tips and Tools

You already know that you need to have a plan. That's why you're reading this book, and still reading at this point. Now, however, it's time to discuss the details of how to create a plan and be successful in managing the stress of your divorce or family law case even when depression or bipolar disorder is present.

Here are some tips to consider that will help you prepare for what you are about to embark upon. Of course, keep in mind that the path you take will depend on who is dealing with the mental health disorder and how well (or not) they are handling it.

- Consider past behavior or experience to try to anticipate what may happen during the divorce process. Typically, the symptoms tend to repeat themselves or continue on the same type of path.
- Think about the severity of the condition and the symptoms regularly. Those with milder forms of the condition may be less likely to struggle through divorce than others.
- Make sure that a therapist and proper treatment plan are involved right from the start. Whether it's mandatory or not, it can make all the difference for everyone.
- Make sure that you document everything carefully and keep your lawyer informed of anything that happens that could impact your case.
- If one spouse has a problem with spending excessively related to their manic episodes, it might be a good idea to request the courts to put certain assets into a fund so that they can't be spent entirely during the process of the divorce.
- If you are the one struggling with bipolar disorder or major depression, make a plan ahead of time. Talk to your lawyer and do your best to learn what to expect so that you can reduce

your stress and thereby, the likelihood of symptoms flaring up or creating problems.

- Always make sure that you are documenting everything and letting your attorney handle matters to the letter of the law. When a mental health disorder is involved in the divorce or custody case, even the smallest slip-up or lack of proof can result in an undesirable outcome because the severity of the situation is difficult to prove.
- If you are unable to reason with the individual that has bipolar disorder or another mental health condition, you may be better off letting the courts handle things. Don't try to force things or make them worse than necessary because there are resources available to help you.
- It may take longer to get through the divorce process when mental illnesses like bipolar disorder are severe and out of control. Expect to spend longer than normal trying to work things out, or waiting on the court to handle the details for you if they cannot be worked out amicably.
- Ask your lawyer what to expect from the courts and what your options are. When you work with a qualified, experienced lawyer, you will be able to trust that you are prepared for anything even when there's a serious mental health disorder like bipolar or depression involved in your divorce or custody case.

Safety Concerns

Although it can happen with different mental health disorders, those who have bipolar disorder are often more likely to become outwardly violent during stressful experiences like a breakup or divorce. If you are separating from someone with severe symptoms that has a tendency for self-harm or has threatened in the past to hurt themselves or others, this is an important thing to look for.

Some people become suicidal or think about harming themselves. They may make rash decisions and have delusions or hallucinations

that they have to “save” their children or protect themselves from you in some capacity. These people may also make threats or damage property, and have even been known to exhibit stalking behaviors when under extreme duress during the divorce process.

If any of the symptoms or behaviors of bipolar disorder (or other mental health disorders) become violent or dangerous, you need to find safety immediately and contact law enforcement right away. You should always take immediate action to protect yourself and your children, as well as the individual struggling with bipolar disorder or major depression.

If domestic violence becomes an issue, the courts will become much more involved in the hearing and the custody process and it might be taken out of your hands entirely. This isn’t necessarily the outcome that people want, but it’s always about what is in everyone’s best interest. When it comes to safety, that’s always priority number one.

Hope for the Best, Prepare for the Worst

It’s one of those paradoxical statements that people love to hate, but in the case of divorcing someone when mental illness is involved, it’s absolutely true. You need to hope for the best possible outcome that is fair for everyone involved, but you also need to plan ahead and prepare for the worst possible scenario.

With any luck, the worst won’t be what happens. However, when you are dealing with mental health disorders like bipolar and major depression, you can never really know what to expect. Use the tips and insight above to help you plan for your case and get to know what you’re up against.

CHAPTER 7

OCD, Eating Disorders, and Hoarding

Now, we're going to move on to a group of mood disorders that are much more outwardly obvious even in those who try to hide their symptoms. These three conditions are notorious for causing relationship problems and all kinds of self-worth issues for those who struggle with them, and there is often a great sense of shame, as well.

It's no wonder people can't be their best selves in relationships when dealing with these issues. They can't even be their best selves for themselves. How are they expected to do it for anyone else?

Although eating disorders and hoarding aren't typically thought of by those who think of mental health issues, they do fall into the same family of conditions. Although the exact causes aren't known for many of these disorders, they all manifest in similar ways or as a result of similar feelings.

The obsessive nature of the negative thoughts that come with these conditions can be intrusive, affecting nearly every area of a person's life if they are not seeking appropriate treatment and assistance in overcoming their condition. There are several different factors at play, but the common link is becoming more and more obvious as research continues.

Making the Connection

In this chapter, we'll take a look at these three conditions and the nature of obsessive-compulsive tendencies in general, as well as their role in marital and relationship issues and how they can affect and be affected by divorce.

The recent media focus on hoarding conditions through reality shows like "Hoarders" and "Hoarding: Buried Alive" has spurred new

research into these conditions and brought them to light for many who previously were left in the dark with nowhere to turn. Of course, bringing things to light doesn't mean they go away-- it just means people now have a better guide for how to deal with the conditions and getting their lives back, thanks to an increase in visibility and resources.

What Are They and Why Are They Grouped Together?

Obsession and compulsion.

These are the two factors of all three of these conditions. While it may be quite obvious with obsessive-compulsive disorder, given the name, some people aren't aware that the basis of conditions like hoarding and disordered eating are based in struggles with regulating compulsions and obsessive or anxious thoughts.

Some critics will still argue that there is a clear difference between each of these conditions and that behavior-based hoarding and compulsion-based hoarding are two separate issues.

That may be the case, but the similarities are still there. Serotonin dysfunction is largely the cause of hoarding disorders, OCD, and disordered eating, and it has been shown that as many as 40% of those who have OCD are also diagnosed with hoarding or have hoarding tendencies or behaviors.

Hoarding has recently been classified as a form of OCD, and while disordered eating is still categorized on its own, it has been noted that it too shares several symptoms and basic elements with the obsessive disorder. There is a definite relationship between the three conditions and even though research is limited, practical application is seeing a lot of similarities.

Professionals around the world have noticed a definite correlation between these conditions in their treatment of people over the years. It's quite possible, according to many, that people who presented with OCD, hoarding, and/or eating disorders could have any and all of the

conditions. It's almost as if we're learning that OCD is more of an umbrella and that hoarding and other conditions are nested underneath.

These conditions also share some common symptoms and behaviors, and they have tendencies that are common throughout most of the people who are diagnosed. Those who suffer from hoarding and eating disorders show tendencies like:

- Genetic or familial history of the condition(s)
- Social factors or social dysfunction
- Depression
- Anxiety
- Marked indecisiveness regarding both major and minor decisions

One other commonality between hoarding disorders and eating disorders is that the actual issue is usually just a symptom or a means of control. That is, people aren't really struggling with eating or collecting items. They are struggling with much bigger emotional issues that are resulting in them trying to control their lives in some other way. Hoarders do it by collecting things. Those with eating disorders do it by trying to control their eating to a dangerous extent.

As research continues, we'll likely see more similarities between these conditions and learn more about how they are affected by various factors and vice versa. For example, one study reported that as many as 64% of the people who are diagnosed with eating disorders also have anxiety conditions, including OCD.

Next, we will discuss the three conditions, as well as their causes, symptoms, and other things that you should know. This information will be a good precursor to the effects that each has on marriage. And of course, we've got a prime celebrity example for you in this chapter, too, along with helpful tips and tools to get you through the divorce process when you're dealing with OCD, hoarding, or eating disorders.

What Are Symptoms and Causes of These Conditions?

Aside from sharing the common obsessive and compulsive behaviors and thoughts, these conditions also have a host of other symptoms to consider. The exact causes aren't known, although several factors are believed to have an impact. To give you a better idea of what to expect, let's look at each one individually.

Obsessive-Compulsive Disorder

OCD, or obsessive-compulsive disorder, is a serious condition that affects millions of people. It is part of the family of mental illnesses and has its own symptoms and effects to consider. This condition may be brought on by external factors like extreme stress, but it's believed that there may also be genetic factors at play. Like most mental health conditions, OCD does not really have an exact defined cause or group of causes.

However, research is ongoing and it's believed that genetics, social and environmental factors, and other mental health disorders or medical conditions can all play a role in the development of OCD and other compulsive behaviors and conditions.

Some people consider OCD to belong to the family of anxiety disorders. While they are related and anxiety is often a symptom of OCD, there is a lot more to the condition than that. OCD is marked by repeated and obsessive thoughts that fuel compulsive behaviors, rituals, and habits. This is generally a co-occurring disorder, which means it's rarely found on its own. It usually is diagnosed along with anxiety, eating disorders, hoarding disorder, or substance abuse.

People struggling with this condition also have feelings of unease and apprehension, which is what fuels the behaviors and repetition that is designed to soothe the related anxiety. Whereas individuals with conditions like BPD might not be able to self-soothe effectively, those with OCD have found a way to self-soothe through their compulsions.

To better understand this condition, we'll divide the symptoms and

signs into the obsessions and the compulsive behaviors that may follow.

Obsessive Thoughts

- Fear of harming oneself or someone else
- Fear of losing personal belongings or items
- Fear of being polluted or “tainted” by dirt or germs
- Excessive attention to false beliefs and superstitions
- Having a belief or urge for everything to be symmetrical, linear, or otherwise orderly
- Thoughts that are out of one’s control that are anxiety-inducing and interfere with daily life
- Violent or disturbing thoughts or beliefs regarding habits and activities
- Suspicions that a partner is unfaithful, even when completely unfounded
- Constant awareness of bodily sensations like breathing, blinking, your heartbeat, and more
- Aggressive or dangerous thoughts directed at yourself or others

Compulsive Behaviors

- Excessive time spent on cleaning or hygiene
- Repetitive habits, including obsessively arranging or ordering items in and around the home
- Constantly checking on things like switches or door locks

- Hoarding items and objects unnecessarily
- Counting, tapping, saying words, or other repetitive behaviors designed to quell anxiety or reduce intrusive and obsessive thoughts
- Fear of touching public items like doorknobs, toilets, and so forth
- A compulsive need to count items, actions, or even just to count for the sake of counting
- Doing tasks a specific number of times
- Inability to control thoughts and behaviors that are deemed excessive and take up more than an hour of the day
- Doesn't derive pleasure from performing behaviors, but feels slight relief from the anxiety and stress caused by the obsessive thoughts
- Can experience significant problems with daily routines and functioning because of the intrusive nature of the thoughts and beliefs.

This is the biggest difference that sets OCD apart from regular anxiety conditions: people are literally unable to stop performing the behaviors that calm the thoughts, which can impede their ability to function on a daily basis. The OCD can interfere with interpersonal relationships, daily tasks, and even work, causing people to struggle to maintain gainful employment. Not only that, but OCD may also present along with a tic disorder in some individuals, further complicating the situation.

Suspected Causes and Risk Factors

Again, there is no definite or singular cause of OCD that is known. However, there are some causes and factors that have been proven to be more commonly involved in those diagnosed with this condition. Many people are diagnosed with this condition by the time they reach

their 20s, although some don't see onset until their adult years.

The exact causes may vary for each person, but the reported risk factors are pointing the same direction as other mental health disorders: every individual is different. Genetics may have a role in the development of OCD, and especially for those with a first-generation connection, such as a parent or sibling that has the condition.

The structure of the brain may also be an indicator that OCD is present in some individuals, although studies have only been done on those already diagnosed. Therefore, while the brain scans of people with this condition and those with "healthy" brains can be compared now, research is still ongoing to see how this correlates and if they can use the information to predict or anticipate a diagnosis in the future.

Of course, environmental factors are always a concern when it comes to the development of certain mental health disorders, personality disorders, and addictions. There have been associations made between this condition and childhood trauma, although other traumas can also lead to the development of this condition. Further research is necessary to create a better understanding of this relationship and its impact.

Hoarding Disorder

Hoarding disorder, as we mentioned, has gained a lot of popularity in recent years because of reality TV. However, TV doesn't show you the **real hoarding disorder**. You see what they want you to see-- the extremes, the drama, and the cases that offer shock value. It's entertainment, at the end of the day, and it offers a skewed view of what hoarding is and how it affects people's day-to-day lives.

Hoarding is a persistent difficulty in discarding or otherwise parting with personal possessions that have been acquired. This behavior presents itself regardless of the actual value of the items in question. Several people with hoarding disorder collect old newspapers, recycling, and other items that most would consider "trash" because they believe they have meaning and significance and need to be saved.

Hoarding may be related to compulsive behaviors fueled by

obsessive and anxious thoughts about waste, shopping, getting things free, finding unique items, and otherwise collecting things that aren't really what they seem. The hoarder will see items differently than everyone else. Where you see a pile of old newspapers, they might see a project they just haven't gotten to yet.

That collection of food waste in the kitchen is an attempt to not add to the landfills in the world, for those anxious about the environment. And so it goes on.

Many times, people with hoarding disorder know that their thoughts and even their hoarded items are irrational, unhealthy, or otherwise not what they “should” be doing. However, they cannot help themselves because the condition is debilitating to the point that it takes control.

This behavior often has detrimental effects on the individual's life, including with their emotional, physical, social, and financial wellbeing. It can affect relationships, in several ways, and it often leads to breakups, divorce, and relationship problems with children or parents that struggle with the condition.

Hoarding disorder can even lead to legal problems, such as eviction or their home being condemned if it is left untreated and unmanaged.

Let's take a look at the common symptoms and behaviors to look for, then we'll talk a little bit about the potential causes.

Symptoms

The following symptoms might indicate that someone is struggling with hoarding disorder and not just a “packrat” or “cluttered person”:

- An inability to throw things away
- Severe anxiety or distress caused by attempting to declutter or discard belongings, even when it seems like garbage to others
- Difficulty organizing and categorizing their possessions

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- Indecisiveness about what to keep and where things should go
- Distress or embarrassment over their condition, the state of their home, or their possessions
- Suspicions of others touching or discarding items that can be threatening or become dangerous
- Obsessive thoughts and behaviors, such as fear of running out of an item and saving things for the future, checking the trash for accidentally thrown-out items, and so forth
- Functional distress or impairments, such as social isolation, loss of a living space, relationship issues, financial struggles, health hazards, and other risks
- Personal health and safety are not considered in regard to the hoarding situation or behaviors for most people struggling with this condition

The biggest symptom and outcome of hoarding is one that can be seen even by strangers in many cases: a diminished quality of life caused by living in unsanitary or unsafe conditions, without heat, running water, or other creature comforts because of the disorder. People often have no appliances, no working kitchen, or no plumbing.

Rather than letting someone come in to clean up and fix the broken items, people will continue to live with the dysfunction until they can no longer manage. Some people will not change, even after an intervention, as we've seen in some of those TV shows where individuals were dealing with the city because their homes had been condemned.

Hoarding can also lead to a host of feelings among those affected and their family and friends. It causes resentment, anger, depression, and division between families. It can also impact the social and emotional development of children who are raised in hoarding situations. Unlivable conditions or extreme cases could lead to divorce, eviction, custody loss, financial distress, and even jail time or fines for people who violate the law as a result of their hoarding.

Suspected Causes and Risk Factors

For those struggling with hoarding, there may never be a singular cause that is the root of everything. There is still a lot of research ongoing about this condition, but it is believed that trauma can lead to hoarding conditions, as can extreme anxiety that goes untreated in those who have compulsive tendencies already in place.

The reasons that people hoard are varied, but this condition generally presents with others that are related to anxiety or ADHD, with an extreme focus on the inability to regulate what is important in terms of “stuff”. People who have hoarding disorder are also often diagnosed with:

- Obsessive-Compulsive Disorder
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Obsessive-Compulsive Personality Disorder (OCPD)
- Anxiety disorders
- Depression
- PTSD (Post-Traumatic Stress Disorder)

Genetics is believed to play a role in the development of most mental health conditions, including hoarding, although the exact extent is still largely unknown. Environmental factors can also contribute to hoarding, such as traumas, major life events, and even social or familial drama or discord.

Disordered Eating

More commonly known as eating disorders, this family of conditions has been renamed by several to help better describe the disorders and show that the eating habits are just a symptom of the actual condition here. Regardless of what it’s called, though, it’s an issue that affects millions of Americans and others around the world.

Women are more likely than men to struggle with eating disorders. Several different types of disorders can develop, but they can all have dangerous health consequences for those who are affected. Some people have even died as a result of malnutrition or other ill effects caused by eating disorders.

As many as 13% of all young adults may experience an eating disorder by the time they reach age 20. The obsession in these disorders is focused on the food or the shape and size of the body, and several different factors cause them. It's estimated that more than 20 million women and 10 million men in the U.S. alone struggle with an eating disorder at some point in their lifetime, although there are probably millions more who don't report their condition or seek help out of shame or embarrassment.

One of the most important things to understand about disordered eating is that the eating habits are merely a symptom of the condition - generally, there is a much larger issue at play that may have little to nothing to do with food or body image at all. While many people with eating disorders are concerned about body image and weight, it isn't always the case.

Before we get into the details of the causes and symptoms, though, let's take a look at the most common types of eating disorders and what they look like.

Anorexia Nervosa

This type of eating disorder is characterized by a desire to control food intake by consuming less or consuming no food at all. People develop dangerous eating habits in their attempts at control that can lead to a host of health issues. This condition is marked by weight loss or lack of appropriate weight gain by restricting calories, compulsively exercising, and through other means.

Anorexia affects people of all ages and genders, as well as races and ethnicities. There have been instances of this condition found throughout history for thousands of years. This condition is diagnosed in those who have an intense fear of weight gain that results in restriction of their food intake in some way with no regard for their

physical or developmental wellbeing.

It also includes a disturbance or distorted view of the body and denial of the seriousness of the condition and the state of their body, due to the delusion that the disorder creates. People are often preoccupied with calories, exercise, food, dieting, and other related topics. They may develop unhealthy food rituals, deny hunger, and even refuse to eat certain foods or in certain settings.

The focus here is on weight control and maintenance, often resulting in the body becoming sickly and underweight, malnourished, and otherwise unhealthy.

Bulimia

Bulimia is a condition that is marked by bingeing and purging, rather than controlling consumption in the first place. People with this condition will often have a lot of oral health issues and dental damage from the constant purging. Stomach issues, such as ulcers and other digestive complaints, are also common among people suffering from this condition.

People with bulimia will go through periods of binge eating, followed by periods of purging, almost as a way of self-soothing to deal with anxiety, obsessive thoughts, or their own struggles with food and weight. People will often eat in hiding, eat excessively for hours, or lack control over their consumption in various ways. There will also be inappropriate behaviors and thoughts involved in the bingeing and purging, such as the belief that it is okay to overeat since they are going to purge anyway.

People who are dealing with this condition and aren't just purging as a part of anorexia could see daily or weekly behaviors that last for weeks or months, which results in this diagnosis. Often, you will be able to notice when someone is struggling with this condition because they are weird or fearful about eating in public, try to hide their eating, or are seen always heading to the bathroom after meals.

Physical symptoms related to self-induced vomiting will also start to present themselves over time. Some may become irreversible if the

condition is not addressed and resolved promptly.

Other Eating Disorders and Food Obsessions

There are also millions of people that struggle with other obsessive thoughts and compulsive behaviors surrounding food, which can lead to all kinds of disordered eating habits that don't fall into the previous two categories. There are more than a handful of named and diagnosable food disorders in addition to anorexia and bulimia, and they all have their own causes and symptoms to consider.

However, for the most part, they can be generalized in terms of their symptoms and what their underlying causes might be. There is also the commonality that food may be the focus, but that it might have nothing to do with food at all. Some of the other conditions that fall into this family of conditions include:

- Binge Eating Disorder
- Orthorexia (Obsession with healthy eating)
- Avoidant Restrictive Food Intake Disorder
- PICA
- Rumination Disorder
- Laxative or Dietary Supplement Abuse
- Compulsive Exercise

All of these conditions can affect people of all ages and are the reason that this category was changed to a more encompassing name of disordered eating. There is also a category for unspecified eating disorders that affect people but do not fall into the categories listed above.

Symptoms and Behaviors

Despite the exact details of the condition at hand, people struggling with eating disorders will typically have similar symptoms and behaviors. These will be emotional, behavioral, and physical and could point to any of the conditions that have been discussed. While some will be more obviously indicative of one disorder or another, some behaviors are seen in most disorders, as well.

Emotional and behavioral symptoms include things like:

- General attitudes or behaviors focused on the control of food, weight loss, dieting, and other related topics
- A preoccupation with calories, weight, fat, diets, and body image
- Discomfort eating in public or around others
- Ashamed of their eating habits
- Skipping meals or only eating small portions
- Developing food rituals as a means of controlling intake or consumption
- Withdrawal from family, friends, and usual activities
- Frequent dieting or changing diets on a regular basis in an attempt to produce better weight loss results
- New practices or trends with fad diets and food elimination (no carbs, no sugar, etc.)
- Extreme focus on body weight and concern over body size, shape, and weight or weight gain
- Frequent looking in the mirror or weighing oneself
- Extreme mood swings related to anxiety and lack of proper

nutrition

Physical symptoms that can be seen in people with eating disorders include:

- Noticeable weight fluctuations that never seem to stay for long
- Stomach issues, such as cramps and indigestion, constipation, and more
- Difficulty concentrating or focusing on daily life and activities, both due to malnutrition and an obsession with the eating disorder
- Sleep problems or difficulty finding the energy to do things
- Abnormal labs and blood tests, such as low thyroid levels or low potassium
- Feeling cold or an inability to regulate body temperature
- Dizziness and fainting
- Calluses or cuts on the fingers from self-induced vomiting
- Dental problems, including enamel loss, sensitivity, and cavities
- Swelling of the throat, salivary glands, mouth, or face
- Dry skin and nails, as well as dull or brittle hair
- Muscle weakness and fatigue
- Cold, clammy hands and feet
- Swelling of the feet
- Yellow skin
- Impaired immune function and poor healing abilities

This is quite a list, and it's still not a comprehensive one. There are dozens of different symptoms and behaviors that could indicate an eating disorder. The symptoms may also be different depending on the type of eating disorder that is present, so keep that in mind. If you notice that someone is eating differently or has a strange new focus on food and body weight, it might be a sign that something is going on.

Causes and Risk Factors

The causes and risk factors that we know of concerning eating disorders are similar to those involved with hoarding and OCD. Experts believe that there are several factors at play here, including genetics, but there is still much to learn. These disorders are more common in women and teen girls than men, but they can be found in people of all ages, genders, and ethnic backgrounds.

Body image and identity issues are also common foundations for those who are struggling with eating disorders. Although more research needs to be done, there is a lot of information that suggests that people who are struggling with their body or their identity are more likely to turn to eating disorders as a form of control. Of course, likely, they're also predisposed in another way, but again that remains to be seen.

Research is showing that these disorders are caused by a combination of factors that involve genetics, behavioral and psychological factors, biology, and social or environmental elements. There have also been some early studies on the difference in brain activity of those who have eating disorders, which have shown that there are notable differences to continue to investigate.

Some common risk factors for eating disorders include:

- Emotional stress or trauma
- Anxiety conditions
- Body image issues
- Genetics

- OCD and other mental health disorders
- Biological factors, such as a predisposition to addictive or compulsive behaviors

How Do Obsessive Conditions Manifest in Divorces and Coparenting?

Obsessive thoughts and compulsive behaviors can impact every single aspect of someone's life. If these conditions are interrupting their daily life, of course they are going to impact relationships and affect how people get through things like divorce and custody arrangements. People already struggling with OCD may develop irrational obsessive thoughts that they have failed somehow and have to make up for that failure by developing a new routine or habit.

It may even be simply that their already-intrusive habits and activities have created a disconnect in their relationships and caused their partner to become bitter, resentful, or otherwise unable to deal with their condition. In the case of hoarding, it's usually that the other person simply can't understand the reason for keeping all of the stuff, which can drive a wedge in even the closest relationships.

People with obsessive conditions tend to be overly-critical of others and may appear to be judgmental or rude when, in reality, they are usually just expressing the anxiety that is related to their condition. In relationships, this can put a strain on everything, from intimate connections to everyday life, and even parenting when the criticisms are aimed at or expressed in front of the children.

Accommodating or Enabling?

Several spouses and family members of those struggling with OCD, hoarding disorder, or some type of eating disorder will inadvertently make the situation worse or at least not help things by accommodating their loved one or trying to ensure that they are placated to avoid outbursts, conflict, stress, or other upset both in the individual and in the relationship.

While this might seem like an effective way to cope with someone who has these conditions, it's not going to do anyone any good. It will allow the person to continue their rituals and habits without seeking help to resolve their condition or get treatment.

It will also create a lot of resentment and anger in those who are “putting up with” these compulsions or accommodating the person who is exhibiting symptoms and behaviors of obsessive conditions.

People often accommodate those with OCD and other compulsive disorders by:

- Putting up with unclean, unsafe, or just plain unusual conditions in the home due to the OCD or hoarding disorder
- Make excuses or lie for the individual affected by covering for them when they miss work or other obligations
- Giving reassurance to appease the negative obsessive thoughts
- Helping to complete compulsions or encouraging ritual activity as a means to self-soothe
- Waiting until compulsions or rituals are completed, regardless of how much time it takes or what the circumstances are
- Making decisions or doing things for the person with OCD or compulsive mental health disorders because they are unable to do it themselves
- Providing the person with items to enable their compulsions and negative habits, such as buying excess cleaning products to quell their compulsive cleaning habits

It might seem like you are helping someone when you allow their behaviors, even if you somehow structure or limit them a little. However, all that you're doing is encouraging them to continue with the same unhealthy behaviors and not seek treatment to find solutions that are healthy and effective.

If someone finds themselves taking on additional responsibilities,

making decisions, avoiding talking about important topics, or even making excuses for their partner, it isn't going to end well for anyone involved.

That's why you need to realize that this is, in fact, a disorder and that there is help available. It should be about finding the right treatment, not just enabling the person to live however is least disruptive for them. Indulging conditions like OCD, hoarding, and eating disorders are only going to serve to make them worse.

Divorce as the Catalyst

There are many reports that people often develop eating disorders and other obsessive conditions as a result of the stress that comes from divorce, or see their existing conditions worsen. Just as these conditions can impact relationships and lead to divorce in the first place, they can also become a symptom of the process and create further difficulties, whether or not they were present before.

There are plenty of articles on the impact of divorce and how it can lead to eating disorders, both in men and women alike. In some cases, teens and children of couples that divorce are the ones that will develop OCD or an eating disorder as a result of the event. Stress has its own impact on everyone and those who are predisposed to mental health disorders like OCD and hoarding should not be surprised if these conditions present during or after the divorce process.

Divorce is a big period of loss for people. They feel insecure and often as if they have failed. They may feel like they have no control over their lives and that their actions have resulted in the unhappiness of others. Often, people feel like they "can't do anything right" or that they are somehow unlovable because their partner wants a divorce.

False emotions can cause a lot of issues in the divorce process for those who struggle with OCD, eating disorders, and hoarding. All of the stress and drama can fuel the negative thoughts and encourage further obsessive behaviors as a means to self-soothe and deal with the stress.

Celebrity Examples

In this chapter, we'll offer a few different examples of celebrities that have struggled with OCD, eating disorders, and hoarding in their lifetime. Thanks to an article published by Inspire Malibu, there's a list of celebrities that are among the 2.2 million people struggling with OCD and similar conditions. This insight is comforting to some. Even if you just take it at face value, it's handy knowledge to have.

Katy Perry

Katy Perry is notorious for her struggles with the media and paparazzi, but she's also one that suffers from OCD that affects every aspect of her day-to-day life. Perry reports that she is a germaphobe who has "crazy cleaning rituals" that she follows. She also reports needing order and having tendencies toward organizing things alphabetically or otherwise habitually rearranging and cleaning things.

David Beckham

Soccer star and famous Spice Girl husband David Beckham struggles with the rituals of OCD and has for his life. He reports that he's tried to stop the behaviors on his own, but it hasn't been effective. Beckham's need is to have things in straight lines or pairs, and when he attempts to avoid these habits, he finds himself succumbing to other self-soothing behaviors.

One of those includes his own self-proclaimed addiction to the pain of getting new tattoos. For some, this could be therapeutic, but for Beckham, it's almost an escape, according to what he has told interviewers in the past.

Howard Hughes

Howard Hughes is known for being an innovative genius of the industrial revolution throughout the 20th century, and he died in 1976 at least in part due to his own severe OCD and hoarding tendencies. Hughes was known for spending four months in a dark movie

screening room. He surrounded himself with Kleenex boxes, stacked and sorted continuously, and stored his urine in bottles to avoid leaving.

Some of Hughes' odd habits were so impressionable that there are several films about his mental decline and how it often overshadows the genius that was his life.

Howard Stern

Stern is not one to shy away from making a scene, but it wasn't until 2018 when he finally came clean about his OCD issues related to cleanliness and self-soothing behaviors to thwart unresolved anxiety. He admitted to spending hours in the bathroom before work, just touching things until he calmed down and felt ready to go.

Lena Dunham

Lena Dunham started her career with a show that chronicled the lifelong battles she'd had with OCD and other anxiety issues. In interviews, she talks about how she wants to help remove the stigma of mental health conditions and open the dialogue so that kids can say "I am anxious" as easily as they can say "I hurt my foot".

Howie Mandel

The comedian that is most recently known for his roles as a game show host and judge for the hit "America's Got Talent" is no stranger to OCD. Mandel has been open about his condition for years, even publishing a book titled "Here's the Deal: Don't Touch Me", referring to his germophobic behaviors and inability to interact with others as a result.

Mandel has become an advocate for OCD and openly admits that if he wasn't properly treated and on medication, he would likely be hospitalized or institutionalized.

Justin Timberlake

This pop icon might not seem like he has any issues, but he will be the first to tell you that he's struggled with OCD and ADD his entire life. This makes it difficult to focus and can create a complicated life, to say the least. However, Timberlake seems to manage it well, despite realizing and admitting the challenges.

When OCD is co-existing with other conditions like this, it can become even more complex to manage. Plus, a lot of the symptoms are similar, so it can even be hard to get to the right diagnosis in the first place.

In case you thought you didn't know anyone who struggled with OCD, hoarding, and eating disorders, now you can think again. All of these people are dealing with similar battles, and despite their fame and fortune, their lives might not be as picturesque as you might think. They've all had their share of relationship struggles, ugly divorces, custody battles, and other struggles that have resulted from their disorders, just like regular people.

Tools and Tips for Managing These Conditions Through Divorce and Beyond

If you or your soon-to-be ex are struggling with OCD, hoarding, or eating disorders, several different things could be going on. Divorce and separation are stressful, taxing experiences. If the individual with OCD or hoarding disorder doesn't agree with the split, it can become even more harrowing and confrontational in many instances.

Fortunately, with the right plan and insights, you will be better able to prepare for your divorce hearing or custody case and know that even with disorders like OCD, eating disorders, and hoarding, there is hope for getting through the process relatively unscathed.

Here are some of the most useful tools and tips to keep in mind to help you manage your own or your soon-to-be ex's mental health issues during a divorce or other family law case or relationship separation.

Decode Your Divorce Part II

- There needs to be a treatment plan in place. No matter who is facing the condition, not having a treatment plan or seeking proper care could cause the courts to intervene and rule in the other partner's favor.
- Part of that treatment plan should include having a therapist available and on-call for emergencies and stressful situations that arise to help avoid further negative behaviors or worsening of the symptoms.
- Those who are dealing with someone else's obsessive condition should consider finding a support group for loved ones and family members. Even an online group could go a long way in creating more understanding and making the process easier for everyone involved.
- Always work with a qualified family law and divorce attorney that is familiar with mental health conditions and how to handle them throughout the process. This will give you the peace of mind that things are under control, even when you feel like you don't have much control of your own.
- Remember that if you are dealing with someone with these conditions, you don't want to enable their behaviors to a point that is unhealthy. Instead, encourage them to seek help and offer support in healthy ways, such as providing an alternative for them when they feel like indulging in a compulsion.
- Be mindful of the situation and do what you can to reduce the stress for everyone involved. As long as you're aware of the situation and have a good lawyer on your side, it will be a lot easier for you to get through the process, whether you're the one dealing with the obsessive disorder or it's your soon-to-be ex that has OCD or other compulsive conditions.

Obsessive-compulsive disorder, and its family of related conditions, is one of the most challenging for many people. Now that you are armed with more information, though, it should be less stressful for

Billie Tarascio

you to get through a divorce when dealing with these conditions.

CHAPTER 8

Narcissistic Personality Disorder

It's 2021 and thanks to the Internet and social media, narcissism is running rampant across the nation and around the world. This condition has been around for centuries, of course, and it has plenty of causes and risk factors involved. However, the self-important nature of social media and the “me” focus of many things these days creates a perfect storm for an increase in cases of narcissistic personality disorders.

Narcissists can be almost impossible to deal with. We've seen plenty of that recently, in light of all of the issues surrounding Donald Trump and his presidency. We'll get to him more a little later in the Celebrity Examples section (spoiler alert), but for now, it's just a point of reference.

Narcissism affects millions of Americans and seems to be more prevalent in men than women. It usually appears in young adulthood, although it can show up in later life, as well. In this chapter, we'll discuss what narcissistic personality disorder is, what it looks like, and if there are any causes or risk factors that you should be informed about.

As mentioned, we'll also talk more about this disorder and how it relates to the behaviors of Donald Trump, along with all of the issues that it has created along the way. Plus, you will find insights on how this condition can impact relationships and divorce, and what you can do to prepare for your divorce when you are involved with someone who has narcissistic personality disorder.

What is Narcissism?

Narcissism, essentially, is just an inflated sense of self. Narcissistic personality disorder is a condition that is marked by this characteristic,

as well as several others. People with this condition have a deep need for admiration and attention and often lack empathy for the people in their lives. They spend years in and out of troubled relationships because their own sense of self doesn't allow them to become intimate and vulnerable with or empathetic toward someone else in their lives.

When people with this condition don't get the attention or admiration that they feel owed, they may become unhappy or angry. They could be withdrawn or depressed, lash out at others, or present a "fake" personality to attempt to gain more attention and adoration from those around them. The most effective treatment for NPD is talk therapy, which is why it's helpful to understand the symptoms, behaviors, and causes that are involved.

Behaviors and Causes

This disorder has several different symptoms and behaviors that may be involved. The exact type and severity of symptoms will vary from one person to the next. First, let's look at some general symptoms and behaviors, and then we will discuss what happens when a narcissist feels criticized or attacked.

General behaviors to look for include:

- An exaggerated or over-inflated sense of self-importance or self-worth
- An outspoken sense of entitlement
- Requiring constant and excessive attention or adoration
- Expecting to be recognized as superior, even without accomplishments proving that superiority
- Will not associate with people they believe are "inferior"
- Are preoccupied with success, power, and brilliance or finding the "perfect" partner
- Exaggerating their talents and accomplishments

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- Expecting special favors or compliance with their high demands without question
- Looking down on others and monopolizing conversations
- Taking advantage of others or manipulating people to get their way
- Being jealous of others or believing that others are envious of them
- Acting arrogantly or haughtily
- Presenting themselves as boastful, pretentious, or conceited
- Insistence on only having the best of everything, even if not deserved or earned
- The unwillingness or inability to recognize the feelings and needs of others

When someone with narcissistic personality disorder feels attacked or criticized, they may respond abruptly or extremely, in ways like:

- Feeling depressed or moody for falling short of being perfect or meeting people's expectations
- Have interpersonal problems or feel attacked easily
- Become angry or irritable when they aren't given special treatment or attention
- React with contempt or belittle others in an attempt to make themselves appear superior
- Struggle to regulate their behaviors and emotions or control their impulses
- Hide feelings of insecurity, vulnerability, and shame or humiliation as a result of their perceived criticisms or shortcomings

This isn't a comprehensive list of every possible symptom or behavior, but it's a fairly good collection of signs that could indicate that you are dealing with someone who needs more help than you might be able to provide as a partner.

If you're the one struggling with these issues, you shouldn't feel ashamed or humiliated. You should know that there is help out there and you can find a treatment that works to alleviate the symptoms that you are struggling with in relation to narcissistic personality disorder.

Whether you're already at the divorce point or you are trying to avoid ending up there, all of this information can be helpful. However, the best thing that you can do is seek professional help from a licensed therapist that can help you work through your issues.

Treatment Avoidance

Of course, given the many symptoms of this condition that focus on an inflated sense of self, it's not surprising that people who have this condition often don't want to think that anything is wrong. They may feel like they don't need help or that they aren't even "sick" and that people just need to realize how great they are. Those who do seek treatment typically do so for addiction or substance abuse, or another mental health disorder.

Those who have narcissistic personality disorder may also see treatment as another criticism or knock to their self-esteem. This could make it difficult to ask for help or to even follow through with treatment once it has been sought. People may sabotage their treatment, or even allow their feelings of shame and vulnerability that they don't tell people about to prevent them from asking for help at all.

Naturally, this can lead to a host of relationship issues and daily struggles for people who have NPD. They will have difficulty interacting with others and building appropriate interpersonal relationships, among many other symptoms. And all this will continue while they carry on believing that they don't need treatment and that everyone else is the problem.

The Trump Example

Donald Trump is a name that the world will likely never forget. In the wake of his own narcissism, he became the 45th President of the United States and took everyone along for what was one very interesting and unsettling ride, if you ask most people. Trump was notorious for doing whatever he wanted and giving himself an over-inflated sense of importance.

He was the President. The most important official government authority in the country. And somehow, he still felt the need to continue to exaggerate his role and his level of importance in the world. If that's not characteristic of narcissistic personality disorder, what is?

Therapists across the nation have weighed in, published articles, and outright declared that Trump is what is known as a “textbook” narcissist. His disagreeable nature, need for grandiose gestures with little substance behind them, and over-inflated ego are all telltale signs that if he were to seek treatment, he would likely be diagnosed with NPD.

Think about how the election results turned out—no matter which side you're on, you can see the problem with his inability and complete disregard to concede and allow the electoral process to play out. He was only interested in getting his way, and when he didn't, clearly it was everyone else's fault and he had been slighted.

It doesn't get much more obvious than this. The relationship issues and familial stress can also be seen in Trump's not-so-private life that is filled with family drama, multiple divorces, and a clearly unhappy union with his now-wife and former First Lady Melania Trump.

How Does Narcissism Affect Relationships and Divorce?

We already touched on this a little bit, but there is a lot more to cover. Narcissism causes that one person to have an inflated sense of self-importance, which can also cause them to be neglectful of their partner, their responsibilities and role in the relationship, and other

aspects of daily life. If you search the Internet for information on narcissism and divorce, you'll find tons of articles with titles like:

Tips for Divorcing a Narcissist

Is Your Partner a Narcissist? How to Get Out, Fast

What You Need to Know About Divorcing a Narcissist

This is a clear indicator that there is something to be discussed here. For starters, narcissists are notoriously difficult to deal with because they tend to see themselves as superior and place the blame and fault for things on others. They are charming and likable, which makes it easy for them to find people initially, but the narcissist will be more likely to have short-term relationships that don't end well because few people will put up with their behavior for an extended period.

Narcissists will also become agitated and angry when they are rejected or feel threatened, which means that the charm can disappear at the drop of a hat. They could overreact to even the smallest perceived slight and punish anyone who doesn't accept their own superior view and an over-inflated sense of self.

Narcissists will also use their abilities to manipulate others into getting their way, further fueling their belief that they are powerful and superior to people around them. They will lie and mislead people, gaslight their spouses and loved ones, and do whatever it takes to serve that inflated ego and those insecurities about not being good enough that cause them to want to be superior.

Narcissism can impact intimate relationships. It can become dangerous, and may even involve emotional or mental abuse in addition to gaslighting and other habits or behaviors. This condition can also inhibit a person's ability to be an effective parent. They might see any slight from their own children as a threat or attack that is on their level, without realizing that it's probably just the kid being a kid.

There are so many different ways that narcissism can impact your relationships, and that's why so many people that suffer from this condition end up in divorce or have multiple marriages in their history.

Some people will tolerate this behavior or will be able to go on without realizing that it's happening, for a short period. However, eventually, most people will want to leave.

For some people struggling with narcissistic personality disorder, that decision to leave could be the catalyst that sets off a much more dangerous chain of events. This is why even if you think it won't go "that far", you should always have a plan just in case.

Tools and Tips for Managing Your Condition and Your Case

If you are divorcing someone with narcissistic personality disorder, there is a lot on your plate. The divorce itself is stressful and creates a lot of unresolved and negative feelings. When you add the unique feelings and behaviors of narcissism to the mix, it just gets even more complicated. Fortunately, just like any other mental health disorder, you can manage it so long as you take the time to come up with a plan and know what you are up against.

If you are the one dealing with NPD, the first thing that you need to do is take the time to find reputable treatment options. It can be hard to accept help, but it is out there. If your soon-to-be ex is the one with the narcissistic personality disorder, you should encourage them to find a treatment solution, as well.

Always choose an attorney that has experience in working with cases involving narcissism and other personality disorders. Not only will this give you peace of mind that you are working with someone who knows how to handle various situations that could arise, but you are also giving yourself the chance to learn more about the condition and better prepare for the case yourself.

Spouses often seek therapy or support groups that can assist them with their feelings of anxiety and depression, loneliness, or other feelings that have been brought on or exacerbated by years of abuse and living with a narcissist. You should consider this, even during divorce, and perhaps especially during divorce so that you have the support network that you need and know that you are not alone.

Here are some other tips for managing the divorce and custody process when you are dealing with narcissism or narcissistic personality disorder.

- If the narcissist will not cooperate or is unwilling to get help, you should distance yourself and document everything if you need to prove to the courts that you are the better parent or that the other person should seek professional help as part of the divorce.
- You cannot force someone to get better. You can't even force them to try. When you're dealing with a narcissist, it's going to be almost impossible for them to change until they are absolutely ready for it. Don't try to force the situation or think that if you just offer an ultimatum, it will all work out. The narcissist will almost always choose **themselves**.
- If their behavior becomes dangerous or threatening, you should report it immediately and do what you need to be safe. Although some conditions are mild and don't present a lot of serious risks, when things go too far, it can get risky for everyone involved. This is especially common when a partner leaves or asks for a divorce.
- Narcissists are also experts at manipulating situations and telling people what they want to hear. They may lie to you, your attorney, judges and mediators, your children, other family members, and other court-appointed professionals as a means of getting their way. This is why it's best to get everything in writing.
- Assume the worst. As we mentioned, you never know what could happen. Even the least severe cases could be severely impacted by the prospect of divorce or the entire legal process. Mental disorders, especially when untreated, can become volatile and dangerous without warning if they are properly provoked.
- Don't blame the individual. Even if they are refusing help, it's likely just a symptom of their condition. Try to work with them

or if it's beyond that point, at least just know that they are sick, not just being a jerk for no reason. It can be hard not to get mad at narcissists because of the way they behave, but you need to be mindful.

- At the same time, don't let these people walk all over you. Yes, they are sick, but if they continually refuse to do anything about it, it's their cross to bear. Make sure that you set boundaries and give yourself the chance to get out of a bad situation if that's the right course of action.

These are just a handful of tips, but they should help point you in the right direction. Of all of the mental health disorders we're discussing in this book, this is probably one of the most difficult to deal with. The symptoms and behaviors are complicated, but they often come off as mean or self-involved, which can leave a bad taste in even the most compassionate partner's mouth.

CHAPTER 9

Paranoia

Some people might not realize it, but being paranoid is a medical condition. It's a personality disorder, to be exact, and it's one that is much more severe than a lot of the issues that we've talked about thus far. While some people may have milder forms of this condition, it never presents itself in a truly "mild" manner.

Paranoia, in and of itself, is a major fear. The feeling is one of being threatened or having people watching, judging, or otherwise acting against you. Even when people know that there is no truth to their fears, it can be difficult to overcome them even in the best circumstances. When it comes to clinical paranoia, on the other hand, it's a whole different story.

This clinical condition is rare, but it has extreme symptoms and behaviors that are marked by the general disbelief that nothing is real and everyone is "out to get you". There is a fine line between general anxiety and making the transition across the threshold to outright paranoid thoughts.

Since this condition is rare, it can be difficult to find the information and resources that people need. However, they are out there. In this chapter, we'll talk more about paranoia and how it manifests as a mental health disorder, as well as how it could impact divorce and lead to further issues down the road.

What is Paranoia?

Also known as Paranoid Personality Disorder, paranoia is a condition that affects millions of Americans, although it often goes undiagnosed or misdiagnosed. This condition involves intense feelings of fear and anxiety that are often related to the thought of threat, persecution, or a conspiracy against the individual. Many conditions have paranoia as a symptom, but it is also a condition all its own.

This is why there is often an issue with misdiagnosis-- not only do the symptoms have to be severe for a diagnosis of PPD, but they have to prove to not just be a symptom of another mental health disorder. These thoughts are going to be intrusive and interrupt people's ability to think clearly and rationally. These thoughts can also become delusions, which means that people will continue to believe the thought even in the face of irrefutable evidence.

Treating paranoid and paranoid personality disorder is usually done through a combination of medication and talk therapy. Cognitive-behavioral therapy seems quite effective at helping retrain the brain and eliminate paranoid thoughts and delusions. Of course, treatment can also be difficult because of the mistrust and emotional guarding that is present in most people with this condition.

Progress on these conditions is often slow, which can be discouraging to some people. However, slow is better than no progress at all and those who have the condition will need to adjust to the idea that it will take some time.

Paranoia is not feeling "paranoid" when you feel uneasy or anxious. It's not that occasional passing suspicion that something is going on. In the case of the actual personality disorder, it's a serious condition marked by several symptoms and behaviors that are clearly more than everyday anxiety or worry.

What Causes This Condition and What Are Its Symptoms?

Paranoia can be a symptom of other conditions, as we discussed. However, it can also be a condition all its own. In that situation, the exact cause has yet to be determined, although there are several risk factors believed to be at play. That includes everything from genetics to environmental factors, as well as other mental health conditions, and more.

Although the exact causes aren't yet entirely known, this condition still has quite a list of symptoms and behaviors that you can look for if you are concerned that your partner or soon-to-be ex-partner is

suffering from a paranoid personality disorder.

People may develop this condition as a result of ongoing sleep deprivation and added stress. While one or two sleepless nights aren't a big deal, the body needs rest and when it gets overly-exhausted, the brain tends to play tricks on itself. That can result in paranoia. When tension adds up, even if it's a happy event like a wedding or a new baby, that can also cause the brain to become paranoid or for this disorder to present itself.

Now, let's take a closer look at the behaviors and symptoms associated with the clinical diagnosis of paranoia.

- Being defensive and taking everything personally, to an argumentative point, even with strangers
- Being easily offended
- Hostility and aggression
- Not being able to accept criticism
- Believing that they are always right and being unable to let their guard down
- Not being able to confide in others or trust anyone
- Fear of being vulnerable
- Irrational and intrusive fears, thoughts of disaster or panic, or other paranoid delusions
- Reading more into people's behavior than what is there, such as accusing people of having ulterior motives when none are present.
- Being preoccupied with preparing for the delusions and worst-case scenarios
- Altering their life or daily habits based on irrational or false thoughts or fears

There are several ways that clinical paranoia can present itself, but these are the most common behaviors and symptoms. When people are experiencing these symptoms along with others, that is when another mental health disorder may be at play.

Of course, you also have to remember that sometimes, this condition is found with others or as a more severe exacerbation (worsening of) an existing mental illness that is otherwise untreated. The sheer uncertainty is what makes this condition so hard to treat and manage, and why most relationships with a paranoid person end up in a breakup or divorce. When children are involved, it can become even more dire.

Before we get too into that, though, let's take a look at the difference between paranoid thinking and "run-of-the-mill" anxiety. Then, we'll discuss how this condition can affect relationships and divorce, and vice versa.

Anxiety vs. Paranoid Thinking

Anxiety is often the basis of most paranoid thinking. Paranoia, essentially, is just an exacerbated anxious thought. Of course, it's a bit of a double-edged sword because paranoid thoughts can also create their own sense of anxiety.

Most people experience some type of anxiety at some point in their life. When things are stressful, especially, people can be anxious, hesitant, and otherwise hyper-focused on the world around them. Some people may flippantly call this "paranoid", but it's rarely actually the clinical definition.

We all have thoughts of paranoia and extreme worry at one point or another. It's when those thoughts become intrusive and start impacting daily life that you need to take action. If you are worried about being clinically paranoid, you probably are just an anxious person or you may have an anxiety disorder. If you feel constantly panicked and it never seems to let up, this may be a sign of something more serious.

Still more severe are the symptoms of paranoia. Even if the

individual doesn't recognize what they are dealing with, the people around them will. These symptoms are much more than any type of anxiety and can even lead some people to believe that there is nothing wrong except for whatever it is that they are paranoid about.

It's important to know the difference. Even though this is a rare condition, it still affects millions and you will want to make sure that it's not happening to you or your soon-to-be ex. No matter how much bad blood there is, you wouldn't want to wish ill on them in any capacity.

Here's another way to look at it:

Anxiety says, *"I am worried, but I know those worries are false or can be reassured as such."*

Paranoid personality disorder says, *"Everything and everyone is out to get me and even if you have evidence, you cannot prove otherwise."*

Essentially, it's the difference between knowing your fears are irrational and not being able to rationalize at all.

How Does Paranoia Affect Relationships and Divorce?

There are several different ways that paranoia as a clinical disorder can have an impact on relationships and the divorce process. Many relationships where one partner has paranoia that is untreated or not well-treated end up in divorce simply because the two cannot find a way to work together or find a solution to the issue.

The biggest problem, as with many mental health disorders, is that the majority of people with PPD don't think anything is wrong except for all of their delusions and irrational fears. They aren't sick—they're founded in all of their suspicions and they will ignore all evidence that says otherwise, quite blatantly. If nothing else, they will challenge and question the proof as a way to further "prove their point".

Although paranoia can have a variety of effects on relationships,

here are some of the most common behaviors that drive a wedge between couples and make the divorce and custody process that much more stressful.

Hostility

People who suffer from PPD are unnecessarily hostile because they are constantly in fear of whatever is in their minds. They develop a sense of hostility toward the world around them in general, and even more so at those who try to challenge their paranoid delusions and irrational fears. To the paranoid person, all of their fears and thoughts make sense and are rational.

Of course, if you challenge them, they are going to respond in kind. In a relationship, even something like setting boundaries or standing up for yourself could seem like a challenge, leading to serious conflict. Some people can even become hostile toward their children or let their paranoia affect what their children can do or how they can live their lives. It is different for everyone and those who have more severe conditions will typically have more difficulty with things like hostility toward family members and romantic partners.

Stubbornness

Stubbornness is another major element that factors into PPD. Because people believe that they are always right and that they are seeing things that no one else does, they trust no one and refuse to back down. Even in the face of obvious proof that something is false, the paranoid person will continue to insist that they are correct and their fears are well-founded.

This, again, could trickle down to the children or the way that they are raised, including everything from controlling behavior to being judgmental or criticizing their own children unwittingly. It could even impact the child's ability to have normal friendships or enjoy typical activities.

Fear and Constant Questioning

If you've ever been truly afraid, you can understand what a terrible feeling that can be. That sense of overwhelming panic that makes you question everything, even in the most mundane situations, can be more than a lot of people can handle. In the case of paranoia, that fear is exponential. This often results in constant questioning and living in a heightened state.

Both of these things create stress for the person with PPD and their partner, as well as their children, friends, and other family members. It can be hard to live with someone that trusts no one. This is often seen as a paranoia symptom in those with PTSD, for example, where something traumatic has created false beliefs that people have not yet been able to overcome.

Controlling Behavior

A person suffering from clinical paranoia could inadvertently express their fears by controlling others, or trying to. They may feel the need to say what their spouse or children can and cannot do, and may be resistant to people engaging in activities without their involvement. This could prevent spouses from having their own friends, prevent people from being able to go out as they please, and more.

Controlling behavior isn't necessarily about being in control with this disorder. It's about protecting people from the perceived threats of the paranoid person. Therefore, they may not understand what they are doing wrong, or think they're not doing anything wrong at all.

These are just a few of the common behaviors or reactions of those who struggle with paranoid personality disorder. With so much distrust and guarding, it's no wonder that they struggle with personal relationships, including marriage, family, and the process of a divorce when it all comes crashing down.

Osher Gunsberg

Osher Gunsberg is famous for a few different things, namely as the host of the hit TV show ‘The Bachelor’. Now, however, he’s become famous for breaking the silence and speaking up against mental illness. Gunsberg believes that if people can talk about mental health, they can help remove the stigma surrounding it. Unfortunately, self-stigma may never go away, and he knows that all too well.

Osher Gunsberg, like many, didn’t want to take his medication or seek treatment for the condition. He thought that he was fine and he didn’t want to have this “thing” be an actual condition and to accept the fact that his delusions were not only incorrect, but they were completely unfounded.

He offers a perspective that several have shared, but rarely in the public spotlight. Because of the stigma, he worked hard to realize that even though he didn’t want the medications and the treatment, he needed them. Despite not wanting to have this condition, Gunsberg realized he DID have it, and he needed to address it.

After all, as he says, if you happened to find a mole on your body that appeared cancerous, you wouldn’t just be like “okay, that’s fine”. You’d do something about it so you didn’t die. He hopes that by speaking out about his paranoia issues and initial resistance to getting treated, he will be able to help reduce the stigma and encourage other people to seek help, as well.

Gunsberg is an example of the best-case scenario when it comes to dealing with mental health disorders, but he will be the first to tell you that it wasn’t always that way. He spent years denying his condition, avoiding treatment, and trying to pretend like he had everything under control.

He went through a divorce, hit rock bottom, and dug tooth-and-nail to get back on top. Now, he wants other people to spend less time in his shoes and more time living, and loving, their lives.

He even started a podcast where he talks about anxiety and paranoia and his struggles.

Managing Paranoia: Tips and Tools for Handling Your Case and More

The important thing here is to be able to distinguish between anxiety and actual paranoia. In the case of the latter, you will want to seek professional treatment and make sure that you are getting the attention that you deserve. If you are dealing with a spouse with this condition, you should encourage them to get treatment if at all possible.

Of course, the odds are good that if you could have resolved things amicably, you would have already done so and wouldn't be reading this book. However, some people don't consider trying to suggest getting help because they don't want to rock the boat. It can sometimes be the best way to go, though.

To manage a divorce and custody case with someone that has PPD, it takes time to understand the condition. The information above should have provided plenty of insight to help get you on the right path. Plus, a simple Internet search will help you find as much information as you could want about this condition and how to deal with it in your life, your relationships, and even your divorce.

In this section, we'll go over some important topics and tips to help you navigate divorce and other relationship issues when paranoia is involved. Although it's different for everyone, there are some obvious similarities and issues that will affect everyone or that should at least be on your radar.

Safety Concerns

In some situations, people with paranoia or other severe mental health disorders will become a safety risk to themselves or others. The extreme belief that they are right in their delusions and the fear for their own lives, in some cases, can cause people to do things that might be even more unsafe. As a result, it's going to be important for you to evaluate the situation if you think this is a concern.

Partners may lash out unwittingly, or become violent or aggressive

without warning. Even those with the best of intentions will struggle to contain themselves if properly provoked. Divorce and custody issues are often a provoker for the best of them.

If you are genuinely concerned for your safety and the safety of others, or if you are worried about the individual that has paranoia, you should contact the appropriate authorities and resources right away. They might not appreciate it at first, but when everyone is safe and they get the help that they need, they will thank you in the end.

Document Everything

If you are dealing with someone irrational and delusional, it can be difficult to keep things on track. They may lie, manipulate, or tell you what you want to hear so that you won't challenge their delusions or tell them that they are "making things up".

Paranoid people don't want to be wrong about their fears. Worse than that, though, is being wrong about their paranoia in the first place. If you try to challenge them, it can become an issue. They may go back on things they said, make threats that you need to document, or otherwise create a situation where you need to establish a paper trail.

If the courts have to get involved, this is a surefire way to ensure that the outcome is fair. When you have records of everything, there will be no way to challenge them or create a "he said, she said" routine in the courtroom that could drag things out for months at a time.

Understand the Condition

Part of paranoia is a total distrust of anyone and everyone. If you are dealing with someone that has this condition, the best thing that you can do for them, and for yourself, is take the time to learn about the condition and all that it entails. This will help you figure out exactly what you're up against and know what the best course of action will be for your specific circumstances.

People with this condition often truly believe that nothing is wrong with *them*. They will blame everything on their unfounded fears and

delusions and wait for someone or something to come along and “save” them or prove them right. Paranoia is an extreme condition that is marked by high levels of stress and constant worry, along with changing behaviors or planning routines to prevent potential perceived threats.

This is not a condition people can control. They won’t just be able to “stop being paranoid”. In fact, for as rare as this condition is, it’s also that complex in terms of treatment. Along with antipsychotic medications, the best solution for paranoia is cognitive behavioral therapy, which involves a sense of willingness and openness on the part of the individual, but it can be effective. Therefore, understanding can go a long way.

Reassurance

Although it can get tiring, you can help the struggling paranoid person by offering reassurance. Even though it may sometimes be ineffective, it may also help them break a thought pattern or remind themselves that it is, in fact, not dangerous even though their brain is telling them otherwise. If you haven’t reached a point where you cannot communicate or interact with the other party, this could help everyone through the divorce process.

Of course, it can be hard to reassure someone that they haven’t done wrong if they have. You have to remember that if it’s all because of the PPD, then it’s a disorder that needs treated, not a mistake that someone needs to be held accountable for. Reassure them that you are trying to do right by everyone, but that they need to get treatment and get things back on track if you are going to work things out.

Minimize Stress

Whether it’s you or your soon-to-be ex that is struggling with stress and paranoia through the divorce process, the best thing that you can do is to eliminate as much additional stress and worry as possible. During a divorce or breakup, it can seem like reducing stress is about as easy as telling someone to “not think about the pain” after surgery.

However, if you can find ways to make the process more agreeable and work it out without taking it into the courtroom, that could help. Never put yourself in a compromised position for the sake of the person suffering from this condition, but always be willing to try to work things out in a way that is fair and agreeable for everyone, even if there wasn't a mental health disorder like paranoid personality disorder present.

Assume Nothing

Just because someone suffers from PPD doesn't mean that they cannot function, contribute, or create a successful life on their own. It may be more difficult, but it can be done. Some people who have more severe forms of paranoia might not be as successful, but you shouldn't rule it out just because of a diagnosis. You mustn't set yourself up to fail by making false assumptions.

Paranoia is a unique condition that doesn't follow any rules. You have to figure out how to work with it and make it work within your situation so that everyone gets a fair outcome. Don't make assumptions or judge the situation before you have a chance to investigate and make a plan. That never ends well.

Fortunately, when you have the right legal support and a solid plan, even with someone who is battling PPD, getting through the legal process of divorce and custody doesn't have to be a huge stressor or hassle. Keep these things in mind and remember to choose a qualified divorce lawyer that has experience with cases affected by or involving personality disorders and mental health disorders.

CHAPTER 10

Schizophrenia

Schizophrenia is next on our list, as we're saving the most severe mental health disorders for last. This is a personality disorder that can affect children as well as adults, and it comes in several different forms. This condition has been known to create a lot of stress and turmoil in families and relationships because it is volatile and causes people to behave erratically.

When it is left untreated or undiagnosed, schizophrenia could become aggressive or lead to neglect, verbal abuse, or even accusations based on the delusional state or paranoid thinking of the person with the disorder. This is not a condition that typically sees "mild" cases, and proper treatment is essential in order for people to be able to function.

According to research, of those who are on disability for a mental health disorder, the number of people diagnosed with schizophrenia outranks all the other conditions significantly. This condition can be disabling in several areas of life when it isn't properly treated, and forming lasting relationships can be one of the biggest challenges for those with schizophrenia.

In this chapter, we'll discuss what this condition is, what factors may be involved in its cause, and what it looks like. We'll also talk about how schizoaffective disorder, the clinical term for this condition, can impact relationships and manifest itself during the stressful divorce process.

Plus, as always, we'll close with tips and insight to help you plan for your own case, no matter what you're dealing with.

First up, let's learn more about schizophrenia and what it looks like.

What is Schizophrenia?

Schizophrenia is a disorder that affects how people behave, feel, and think. In many cases, people with this condition feel like they are out of touch with reality, which can create stress for them, as well as family and friends. Fortunately, treatments are available and much more effective than ever before.

This condition is typically diagnosed in the late teen years, but can be diagnosed as late as the early 30s in some people. Men are typically diagnosed at an earlier age than women, and diagnosis usually follows a major episode of psychosis where the symptoms of schizophrenia are obvious. In rare instances, this condition will present in young children.

Children have the biggest difficulty with appropriate diagnosis and treatment, as do those in their teens. The body's constant hormone fluctuations that come with age can wreak havoc on the brain and body and further exacerbate conditions like schizophrenia. Even though childhood onset is rare, it can be much more severe than people anticipate when it comes to this disorder.

This condition is severe and persistent, affecting about one percent of the total population. It includes distorted thoughts and experiences, weakened ability to function, and inability to form relationships or even handle self-care in some cases. This disorder poses a great deal of challenges for both those affected and their families.

New treatment options are offering more hope for those affected, with more effective medications and supportive treatment that includes integrated therapy and substance abuse treatment, family interventions, and supported living and employment assistance where needed.

When it comes to divorcing someone who has schizophrenia, it can be a touchy process for everyone involved. Of course, a lot of it starts with understanding. On that note, let's take a look at the causes and symptoms of this condition.

What are the Causes and Symptoms?

Like many mental health conditions, schizophrenia isn't entirely understood. However, there is an association with abnormal brain structure, activity, and chemistry. Also, about a third of those affected have some family history, and there are several social, environmental, and other biological factors that could be involved. This is a complex condition and there is much yet to learn.

Professionals do agree that there is a certain vulnerability to develop symptoms or issues due to having this disorder, such as substance abuse when other symptoms become unmanageable. The good news is that regardless of the cause, about $\frac{2}{3}$ of those who are diagnosed and treated will see significant results from recovery and be able to establish a productive, enjoyable life.

As more research becomes available, providers will be able to offer more assistance to those facing this condition and their families, which may help reduce the instance of divorce or relationship stress as a result of the disorder.

There are some early warning signs, and although they are not exclusive to schizophrenia, they can be an indicator that something is wrong and help should be sought. These include:

1. Flat expressions or a lack of emotion in the face or eyes
2. Depression and withdrawal from social and familial situations
3. Suspiciousness, paranoia, or hostility
4. Extreme reactions to criticisms or perceived threats
5. Inability to express emotions or inappropriate emotional expressions
6. Insomnia or excessive sleeping
7. Inability to concentrate or memory issues

8. Irrational or odd statements, strange speaking habits or incorrect use of words

That last warning sign is a big indicator for schizophrenia and other dissociative conditions. When you notice people start acting “odd” in a potentially worrisome way, you want to seek help immediately.

Now, let’s look at the symptoms of this condition for those who are beyond the early warning stage.

Symptoms

There are several different symptoms that could be indicative of schizophrenia. Some people may experience all of them, while others may only have a few. People with this disorder typically have issues with cognitive and social functioning, but that can be expressed in several different ways. As more information is gleaned about this condition, that list of potential “ways”, or symptoms, continues to expand.

These symptoms are divided into three main categories, which we will look at below.

Negative Symptoms

Negative symptoms refer to the symptoms that result in a negative activity level, as the name would suggest. These factors involve lack of motivation and emotions, and other disinterest related to the condition. Usually, people will experience things like:

- Lack of motivation or difficulty planning and starting activities, even including daily living and hygiene tasks
- Less pleasure (or no pleasure) derived from everyday life and activities that were once enjoyed
- Withdrawn with less speaking and conversational engagement
- A “flat affect”, or emotionless voice and reduced or no emotion in their behaviors or facial expressions

- Difficulty showing emotions and engaging socially
- Apathy or inability to follow through on obligations, tasks, and even hobbies or enjoyable activities

Basically, any apathy or lack of doing in their daily lives that is related to this disorder could be classified as a symptom. When people are plagued by the psychosis (which we'll discuss in a moment), it can be difficult to maintain energy levels or interest in much of anything because of the stress and uncertainty.

Psychotic (Positive) Symptoms

These symptoms typically include abnormal behaviors, unusual thinking patterns, and altered perceptions, including changes in vision or other senses. This list includes symptoms that are only found in those with schizophrenia and no other mental health disorders. These are the more obvious symptoms that most people think of when they hear the term 'schizophrenia' and include:

- Hallucinations, such as seeing or hearing things that aren't actually there
- Delusions, and paranoia that are not supported by fact, but are very real and very firmly held by the individual
- Thought disorder, including disorganized speech and thinking, unusual thought processes, and more
- Bizarre behaviors that cannot otherwise be explained or classified

The psychotic symptoms may be more or less extreme, depending on the individual, but they are usually far more noticeable than the other behavioral changes that come with schizophrenia. If left untreated, these people could continue to devolve into their own little world, creating an even bigger need for a treatment plan.

Cognitive Symptoms

These are the symptoms that are marked by cognitive impairment or mental dysfunction. Some people may have more pronounced symptoms in this area, while others might not have as much that they can relate to. Specifically, you'll find symptoms like:

- Difficulty processing information and using that information to make decisions
- Trouble paying attention or focusing on day-to-day activities, including work, school, hobbies, family life, and social interactions
- Problems with information retention and short-term memory recall
- Other marked mental or cognitive impairments that result from the distracted or altered reality that these individuals sometimes create or live in

Cognitive symptoms are the most difficult to pin down, but they are typically used to narrow down the diagnosis when combined with the negative and psychotic symptoms of this disorder. There may be other cognitive effects not listed here, as well.

Famous Schizophrenics

Schizophrenia is also one of the mental health disorders that is associated with several famous people, including some that might even be called geniuses of their time. Some of the people below were diagnosed while others are just suspected to have been affected based on posthumous information and research, but they all show many common behaviors and symptoms.

Whether you know anyone on this list or not, you can clearly see how despite their success, they were plagued by the struggle that comes with schizophrenia and how it impacted their lives.

Syd Barrett

Founder of Pink Floyd and musician Syd Barrett was not only notorious for his musical ability. He was also famously known for being schizophrenic. The English artist, guitarist, and songwriter led the band in its early years and is credited with naming them, although he was ousted in 1968 when front man David Gilmour was added to the group.

It was rumored that he left due to substance abuse and mental health issues, but he never publicly admitted or discussed any of it. He was reportedly diagnosed with schizophrenia, but again that was never confirmed. He ended up living with his mother for the majority of his late life before dying of pancreatic cancer, likely related to his battle with severe diabetes.

His constant isolation, odd behaviors, and inability to live a “normal” life on his own all indicate that he was likely a schizophrenic, according to the experts.

Eduard Einstein

Son of the famous Albert Einstein, Eduard was diagnosed with schizophrenia when he was 20. He lived with his mother in Zurich after the couple split up and Einstein emigrated to the United States. He was highly intelligent and wanted to be a psychoanalyst as a young adult. However, by the time he was 20, he’d been clearly diagnosed with schizophrenia.

Eduard was institutionalized several different times, finally dying in an institution at the age of 55. His case was one of the more obvious and extreme, offering a much more “textbook” example of what people expect.

Zelda Fitzgerald

Zelda was the wife of famous author F. Scott Fitzgerald, but she was also a novelist herself and a dancer. She was even dubbed the “first American flapper” by F. Scott, and they became a bit of a celebrity

couple for their time. However, Zelda struggled with paranoia and delusions, especially in regard to whether her husband was faithful. There were a lot of rumors about their relationship and how it could have affected her condition.

In the year 1930, Zelda was admitted to an asylum in France and diagnosed as a schizophrenic after months of dedicated treatment and observation by the best medical professionals at the time. She spent most of the rest of her life living in various psychiatric facilities and hospitals throughout Europe and the United States.

Jack Kerouac

The famous American poet and novelist Jack Kerouac was also famous for being known as a “tortured soul”. He was in the U.S. military for a while, but then he was diagnosed with dementia praecox, which today is what we call schizophrenia. After just 10 months, Kerouac left the military with a formal diagnosis and notation that he may express “schizoid tendencies”.

He was also a heavy drinker throughout most of his life, which led to his death in 1969. He had an internal hemorrhage that was caused by cirrhosis in his liver. Many people believe that he drank as a way to medicate the condition and quiet the voices and delusions.

Mary Todd Lincoln

The wife of one of America’s most famous presidents, Mary Todd Lincoln was also believed to have schizophrenia. Despite supporting her husband throughout his career and doing her best to care for her family, she was plagued by severe migraines, several other illnesses, and mental disorders, including bipolar disorder and possibly schizophrenia.

She had quite the history throughout their life together, including losing three sons and seeing her husband shot and killed. This all compounded with her existing mental illness and other issues, creating a lot of violence and outbursts throughout her lifetime. Although there is no record of official diagnosis, many historians and experts agree

that schizophrenia was likely at play.

Vincent Van Gogh

Everyone knows that some of the best minds of our time were also some of the most eccentric and unstable. Van Gogh lived during a time when this condition had not yet been identified, but professionals that have done research believe that schizophrenia was indeed the culprit for his issues. In fact, his eccentricities and unstable moods led to an impressive 150 posthumous diagnoses based on his life and eventual suicide by gunshot to the chest.

Brian Wilson

The famous Beach Boy wasn't just a musical genius. He was also known for drug abuse and hallucinations, and was diagnosed with schizophrenia in his 30s. He had a difficult childhood that led to years of substance abuse and mental illness, but he was also seen as one of the most creative and innovative popular musicians of his time because of his unique brain.

Wilson struggled with self-destructive behaviors and suicide attempts for years, finally admitting to auditory hallucinations in the 1970s after his father's death. He released a series of solo albums throughout the 90s and in 1988, he was inducted into the Rock and Roll Hall of Fame. In 2007, the Kennedy Center honored him for his lifetime contributions to performing arts.

These are just a handful of the famous people who have been diagnosed with schizophrenia over the years. Most work in the creative arts, as musicians or actors, while some are lifetime researchers and scholars. There are artists, clinical psychologists, and so many others that are known for various accomplishments but that also suffered greatly as a result of this personality disorder.

How Does This Condition Manifest During Stress and Divorce?

Mental health and personality disorders each have their own stress response, but they do all respond to stress with an increase in symptoms or episodes of certain behaviors. In the case of those with schizophrenia, their dissociative state may become even more exacerbated or they may spend more time in their hallucinations and delusions as a way to escape the stress.

These people have trouble establishing social connections and intimate relationships because of their paranoia and fear, so if they have managed to find marriage, divorce is a common outcome. Spouses do not know how to handle the condition and trying to help someone whose condition literally tells them that they don't need help can be a daunting task.

It can be extremely challenging to attempt to care for or even live with someone who experiences psychosis and delusions like many severe schizophrenic episodes include. The majority of people with this condition who are married were fortunate to meet their partner prior to the onset. Those who have this condition and are aware of it tend to stay single for that reason.

For those who were able to find a spouse and attempt to get married and lead a "typical" life, eventually the fallout will come. That can lead to so much additional stress and make the disorder worse. Here are some of the impacts to keep in mind.

Difficulty Connecting

In relationships and divorce, people who have schizophrenia will become even more withdrawn and isolated, which creates further difficulty in creating connections. This could make it challenging to connect with lawyers, case workers, and others that are involved in the process. It could also lead to questions of parenting ability and change the outcome of custody in a court hearing.

People with severe schizophrenia are, and appear, completely

detached from the world around them, often living in their delusions for lack of an ability to escape or simply because it feels safer. The more stress there is, the less these people will reach out to others. That can make it difficult to resolve conflict and get through important processes like divorce or family law cases.

Communication Issues

People with schizophrenia aren't great communicators to begin with. If there is stress and added emotional turmoil, they are going to continue to withdraw and internalize. This can make it difficult to work out post-breakup arrangements, custody, and even just to discuss the conflicts or try to reach an amicable arrangement before taking the case to court for a judge to decide.

There are so many different communication issues already present in divorce and when you add in a mental disorder with so much psychosis and detachment, it can become increasingly complex for everyone involved.

Living in a “Different World”

One of the biggest parts of schizophrenia is the sense of being detached from reality or living in a different one. This can make it difficult for people to understand the gravity of divorce and other family law issues. It can also increase their struggle in getting through the process. Much like withdrawing from communication, schizophrenics might retreat to their alternate realities or delusions as a way to cope with stress.

Inability to Manage Daily Living

When divorcing a schizophrenic, “what happens to them” is an important question. In most cases, these people are limited in their ability to care for themselves, handle basic functions like paying bills and maintaining employment. Thus, they may end up having to live with family or be institutionalized if their condition is too severe. In these cases, custody isn't even an issue because if the individual cannot care for themselves, it's likely that they cannot care for a child.

Of course, this will be for the courts to decide, but in extreme cases, this could be a matter that needs to be discussed-- what happens to the person with schizophrenia after the divorce is over if they cannot live on their own?

It can become an issue that needs to be resolved, for the safety and wellbeing of everyone involved.

Tips and Tools to Manage Your Condition and Your Case

We'll start with the same advice we've offered for all of the conditions that we have discussed thus far: treatment should be step one if it isn't already in place. No matter who is dealing with the condition, a divorce case will be much easier for everyone if there is a proper treatment plan in place for the person struggling with schizophrenia.

This may even be a necessary part of a custody or parenting agreement. Of course, this condition is one of the most severe when it comes to the issue of treatment avoidance. Many people are so wrapped up in their delusions and hallucinations that they truly believe that they don't need help or that the treatment is actually the enemy.

Support and Reassurance

The individual affected with schizophrenia needs support and reassurance from those around them. If it's you, ask your family and friends, as well as your lawyer, therapist, and other people in your life, for help along the way. If it is your soon-to-be ex that has this disorder, try to encourage them to do right by themselves.

That includes encouraging them to stay in treatment and continue to take medications or attend therapy sessions. You should also be respectful and remember that their delusions are very real to them. Do not demean or belittle them, but try to help them find a solution that works. If you can, find support groups that may be able to help you deal with what you are going through.

This is a complex, difficult disorder in any capacity. With the added stress of divorce, those affected could devolve further into their delusional state and not be able to do what is required of them. Although it's not an instant or guaranteed cure, a little bit of reassurance can go a long way.

Safety Concerns

With an extreme psychosis like what often comes with schizophrenia, safety issues are often a paramount concern in breakups, divorce, and even daily life. People who struggle with schizophrenia often have angry or irrational outbursts that are fueled by their delusions and paranoid beliefs. This can become dangerous for the individual if they become self-destructive.

It can also be dangerous for spouses, partners, and children. In most cases, people don't intend to be violent or harmful, but the outbursts are a symptom of the condition. Because people are paranoid and often living with delusions, they can have an unrealistic level of fear that results in putting their own safety or the safety of others at risk.

In the event that you think safety is an issue for anyone in your divorce or relationship, you need to contact the appropriate authorities as soon as possible. The police may need to get involved, but in many cases, the individual may just need to be reevaluated or hospitalized until they can be deemed safe to return to normal life again.

Other Tips

Schizophrenia is unpredictable and difficult to handle in any circumstance, let alone during the process of divorce. Here are a few more tips to help you along the way.

- Have a treatment plan in place or make sure that the spouse in question is seeking the appropriate treatment. This will be paramount to reducing the stress and uncertainty, as well as any additional symptoms appearing, during the divorce process.

- Make sure that everyone is on the same page about what is going on. If the schizophrenic is out of touch with reality, you may be able to work with your lawyer to get an incompetence motion filed to assist with the process when the other person cannot or will not engage in their part of the divorce.
- Don't confuse the outbursts of schizophrenia with actual violent tendencies or domestic abuse situations-- while these people can get violent, they are not criminals. They are ill and they need proper assistance to get better. If you do call the cops, make sure you tell them straight away that mental health is involved.
- Work with an attorney that has experience in mental health issues within divorce and custody. They will be able to help you navigate the process and understand what you are up against, as well as to prepare for whatever stresses and surprises arise. This will not be a smooth process, but it doesn't have to be a nightmare, either.
- Perhaps one of the most important tips for dealing with schizophrenic behaviors and individuals: never challenge their paranoias or delusions. No matter how obviously false they are, the individual believes these things to be true and if you tell them otherwise, they may react unexpectedly or dangerously. At the very least they will not feel that they can trust you as a resource when they need help.

CHAPTER 11

Neurodevelopmental Disorders

Although they're not the same as traditional mental health disorders, neurodevelopmental disorders can have a similar impact on divorce and custody issues. There are a few different conditions that fall into this category, but we'll cover the most common ones. Neurodevelopmental disorders are those that affect the brain and its development, often resulting in social and learning disabilities, emotional issues, and more.

People with these conditions notoriously have an inability to self-soothe and self-regulate when it comes to emotions and thought processing. The level of severity will depend on the exact condition and the individual, with some people being very high-functioning and able to live a fairly normal life. Others may need full-time care or never be able to live or function independently.

There is often a misconception that these conditions are mental illnesses, but that is not necessarily the case. While they are related and often exist in the same individuals, they aren't the same. Let's take a closer look at that, and then we'll get into some of the disorders in this category and their impact on relationships and divorce (and vice versa).

They Are Not Mental Illnesses

Although neurodevelopmental disorders often include a predisposition toward mental health disorders, these conditions themselves are not lumped in the same group. They are considered developmental disorders, more related to cognition and brain function than emotion and "psychosis".

Those who have autism or another neurodevelopmental disorder are often plagued with conditions like anxiety and antisocial behavior.

OCD and obsessive behaviors may also be common. One big issue that these people do share with those struggling with mental illness is an inability to self-soothe. Not all people with these disorders will have these issues, but they are more common.

People with neurodevelopmental conditions are also 3-6 times more likely to develop mental health disorders. Not only that, but those conditions are less likely to be properly diagnosed and treated because they may be more difficult to recognize. All of this creates the perfect storm where it makes sense that some people might think that these classify as mental health conditions.

ADHD is often classified as a neurodevelopmental disorder, in addition to being a mental illness. For the sake of this book, we felt it needed its own chapter and that these issues should be discussed separately. For now, let's take a look at autism, down syndrome, and other disorders, including their symptoms and possible causes.

Autism Spectrum Disorder (ASD)

Autism is a condition that is still undergoing a lot of research, but we have learned a lot more about it in recent years. This condition is found in children as early as 18 months of age and can show up at any time in childhood or adolescence. Typically, people who have milder symptoms may not be diagnosed as early, if at all.

This condition has gained more publicity in recent years as research has helped bring more cases to light. Several factors could influence the condition and several different symptoms that could present, depending on the type and severity of the condition. In the sections below, we'll get into more detail about this condition and its symptoms, as well as potential causes and challenges.

What is ASD?

Rather than a single disorder, Autism Spectrum Disorder, or autism, refers to any condition that falls within the diagnosis criteria of several subtypes of this condition. It is known as a "spectrum disorder" because every individual has their own set of challenges and strengths,

as well as the various symptoms that they experience. Some cases may be more severe than others, with everyone experiencing different levels of ability or cognitive impairment.

As of 2013, the American Psychiatric Association grouped a few different disorders into what is now known as Autism Spectrum Disorder:

- Autistic Disorder
- Childhood Disintegrative Disorder
- Pervasive Developmental Disorder-Not Otherwise Specified
- Asperger Syndrome

The signs of autism generally present themselves by age two or three, although some may take longer to develop. Research supporting early intervention to improve quality of life is also promising. When these therapies are started as early as possible, children seem to develop more positively and avoid more severe complications or struggles with autism.

Several different factors could influence the impact of autism and its severity, although the exact causes remain unknown. It is thought that genetics, along with environmental factors, may have a role.

Autism affects as many as one in every 54 children in the U.S.

This broad range of conditions is characterized by nonverbal communication or lack of speech capabilities, social challenges, repetitive behaviors, and related behaviors. We'll discuss the symptoms more below. This condition also often comes with sensory issues, medical conditions like seizure or stomach disorders, and as mentioned, some mental health disorders and attention issues.

Symptoms

The symptoms, signs, and behaviors of ASD are different for each individual, but they are similar enough that they have been collectively

categorized into certain attributes and types of behaviors to assist with diagnosis. Some people may experience fewer or more symptoms. They may also be different in their severity levels for each individual, and this is not a comprehensive list.

However, if you're trying to navigate relationship issues and divorce, the list below is enough to help point you in the right direction if you're trying to figure out if someone you love might have autism. While it's more widely recognized and diagnosed in children now, many adults have spent years living undiagnosed or misdiagnosed, and that can lead to a lot of issues.

Here are some signs and symptoms that could indicate an autism spectrum disorder.

Early Warning Signs

- They don't respond to their name by the time they turn a year old
- They are interested in playing or interacting with others
- They are unable to self-soothe or may reject physical contact
- Some may crave excessive physical contact
- Infants may not reach for parents or may not form attachments

Other Symptoms and Signs

- They prefer to be alone and often spend most of their time in isolation, self-entertaining
- They avoid eye contact and often look down when forced to interact with others
- They reject comfort when they are upset
- They are incapable of understanding emotions

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- They cannot form healthy emotional attachments
- They are very blunt and logical, and often say things they “shouldn’t”
- In severe cases, some may get angry, violent, or otherwise difficult to manage
- They don’t learn the same way as “typical” children
- They often have one or two areas where they are very smart or interested, even if they seem like they have learning disabilities
- Delayed speech and language development
- Repeating
- Flat voice or speaking in a singsong voice
- Not able to recognize jokes and sarcasm
- Problems with staying on topic
- Self-stimulating behaviors
- Fixations on objects or activities
- Routines, rituals, and getting upset when those are disrupted
- Eating difficulties or picky eating habits
- Impulsiveness
- Lack of coordination
- Limited rational thinking capability
- Short attention spans

As you can see, this is quite an impressive list, and it still doesn’t cover everything. However, if you notice any of these social,

communication-related, or other symptoms and signs in your loved one, it might be time to discuss whether they have an autism spectrum disorder and find help.

In milder cases, some people can function normally and might only have slight symptoms that don't impact their daily life significantly. This is how some people end up settling down and starting families of their own, and it may only be when times of stress arise that their condition flares up or their lack of social and communicative abilities will start to show.

Down Syndrome

Another major neurodevelopmental disorder that can impact the way that people live and function is down syndrome. This genetic condition affects the formation of the body because of a chromosome issue, resulting in an altered appearance and potential mental health or developmental issues.

This condition can affect children of all races, and it affects boys and girls alike. Down syndrome has a characteristic facial structure in most cases, so it is fairly easy to spot as children age. Pre-testing can be done during pregnancy to check for this and other genetic or chromosomal issues, but that may not always be accurate and it can be prohibitive in terms of cost.

In this section, we'll discuss more about what down syndrome is and what it looks like. Then, we'll move into the other types of neurodevelopmental disorders that could be present before we get to the important part: how these conditions can impact divorce, and vice versa.

What is Down Syndrome?

Down syndrome is a condition that affects the body's ability to develop normally by producing a partial or full copy of the 21st chromosome, giving the baby 47 instead of the standard 46. This can affect many developmental functions and alter the physical appearance of the face. It also often affects coordination and physical abilities,

among other things.

The added genetic material is going to alter the course of development in muscle tone and stature, as well as the facial structure and appearance. The people with this condition are typically shorter in stature, have low muscle tone, and have a slight upward slant to their eyes. Of course, every individual is unique and some may have different degrees of physical appearance related to the condition.

Down syndrome wasn't named until 1866, although there are plenty of allusions throughout art, literature, and history. The condition was recognized by John Langdon Down in a publication that led him to become the "father" of the syndrome. Although it had been discussed previously, he was the first to suggest it as a separate and distinct condition of its own.

Down syndrome is the most common chromosome disorder in the United States, with one in every 700 babies born with this condition. That's about 6,000 babies each year, and there's still so much to learn about how to treat and manage this condition.

Like the family of ASDs, down syndrome is also often found with other medical conditions, commonly stomach issues or seizure disorders, as well as emotional and mental health disorders. Each individual will have their own degree of severity. It is more likely for this condition to be found in babies born to women over the age of 35, but several other risk factors could be involved that are still being studied.

Types of Down Syndrome

There are three major types of down syndrome that are known today. The majority of people can't tell the difference because it is mostly on a chromosomal level, but it's important for accurate diagnosis and treatment, as well as to improve the life expectancy of those with the syndrome.

Trisomy 21

This type of down syndrome affects 95% of those diagnosed. In this condition, each cell has three separate copies of that 21st chromosome instead of two copies.

Translocation Down Syndrome

This type is only found in about 3% of people with down syndrome. It occurs when that extra 21st chromosome is present, in whole or in part, but it is “translocated” or attached to a different chromosome, rather than being a separate copy.

Mosaic Down Syndrome

This condition is found in about 2% of those diagnosed with down syndrome. This means that there is a mixture of the genetic variables of chromosome 21. Some children will have three copies while others will have only two copies, so the confusion between typical and atypical can result in less severe symptoms and features than those with the other two types.

Concerns Regarding Life Expectancy

Historically, those with down syndrome were not expected to have a long lifespan. In the early 1900s, children often only survived to age nine or 10. In the later part of the century with the assistance of antibiotics and other advances, the age increased to the early 20's.

The majority of those with this condition will live a relatively full life, and while the life expectancy used to be much shorter, more than 80% of those diagnosed today will live to reach age 60 or older. This is due, largely in part, to the advancements in clinical treatment and corrective heart procedures that are often needed by those with this condition.

This condition is genetic but has several different suspected causes. Research is ongoing as to how the actual defect occurs or what can be

done to prevent it, but more study is needed. As time goes on, it is likely that they will continue to learn more about this condition and how to better treat it. For now, let's take a look at the symptoms and signs of this condition that you'll want to keep an eye out for.

Symptoms

The symptoms of down syndrome are just as varied and unique as the individuals with the condition. However, there are some general things that you can look for when it comes to down syndrome. These include:

- Physical symptoms or abnormalities that were discussed, including face shape changes, small ears, a shorter neck, and small hands and feet
- Shorter in stature with loose joints and poor muscle tone
- Birth defects
- Hearing loss or chronic ear infections
- Eye diseases
- Heart defects from birth
- Coordination issues
- Social dysfunction or inability to empathize
- Emotional struggles
- Learning disabilities
- Impaired speech and cognitive processing
- Lack of attachment or excessive attachment to parents, family, or other caregivers
- Short and long-term memory issues

- Lack of “filter” or often speaking honestly or saying things that they shouldn’t without regard to others or their feelings

Other NDs

In addition to the two major conditions listed above, people may also have general learning disabilities, conduct disorders that affect behavior, vision and hearing impairments, or cerebral palsy, just to name a few.

Any condition that affects the development of the brain as it relates to emotions or functioning can be classified in this family when it doesn’t meet the qualifications to be a mental health disorder.

These conditions can all have an impact on relationships in several ways, including the general inability to establish them for those with more severe conditions. Of course, many people who are only dealing with minor symptoms of these conditions may never be diagnosed, or may not be diagnosed until adulthood.

Such as the case with autism, where more adults are learning about their diagnosis because more children are being diagnosed and treated, so will it go with other conditions like this. Many people have spent years trying to figure out what is going on, or have simply labeled themselves “different” and done nothing, but when these conditions are present they need to be properly treated.

Either way now is the time to find out and find the right help, because it’s out there.

Up next, we’ll take a look at just how these disorders can impact relationships, including romantic connections, families, children, and more. Then we’ll discuss how you can manage divorce when you’re dealing with someone who has a neurodevelopmental disorder.

The Impact of Neurodevelopmental Disorders on Relationships

Many people with conditions like these struggle to develop

appropriate emotional and social skills. They may not have interpersonal abilities or they may lack attachment capabilities, causing them to isolate or not be able to connect to others.

Those who have less severe forms of these disorders may be able to find and establish healthy relationships, although their condition could take a toll on things over time. For example, some people might have to do their laundry on the same night every week. They might have to abruptly leave events when the sensory overload becomes too much. They might not be able to interact socially or manage daily living tasks, in some cases.

People who have these disorders usually also cannot know what “not to say”. That filter that we have that tells us what’s polite or proper-- they might not have one, thereby causing them to say whatever is on their mind, no matter how brutally honest it could be. This can quickly become taxing on a relationship, in several different ways.

From Partner to Parent

The biggest issue that people find when it comes to having relationships with those who have some type of neurodevelopmental disorder is feeling like they are constantly taking care of someone. Even if the case is milder at first, stress can exacerbate things or the disorder could just worsen over time. This can create a lot of resentment and affect relationships in several different ways.

When you are expecting to have a spouse and end up having another child, essentially, it can be hard to adjust and adapt. Even the most loving relationships can fall apart because the one partner feels like they are constantly taking care of everything and no one is taking care of them.

Lack of Intimacy

With this “parent” relationship and the lack of emotional capability on behalf of those with neurodevelopmental disorders, there is often a lack of intimacy and connection in personal relationships and

marriages. They may feel love and want to be with someone, but these people often struggle with attachment and aren't sure how to act in certain situations, which can lead to avoidance of many things, like intimacy and sexual experiences.

In any marriage, even when you know this might be an issue going in, it could begin to take its toll over time. Everyone needs someone that they can connect with and be vulnerable with, but those with this type of disorder just may not have that capability and it is no fault of their own.

Safety Concerns

We discussed violence and anger with these conditions, which all comes back to the lack of emotional regulation. In milder cases, there isn't as much of a risk to be concerned with. However, many people with down syndrome and autism spectrum disorders are unable to regulate their emotions or have outbursts of anger that they often cannot control. This can create a dangerous situation for everyone involved. When it is a child, it is usually manageable.

When it is an adult that is having outbursts or getting violent, it can get out of control quickly. You should have a plan in place to ensure everyone's safety and make sure that the individual is seeking specific treatment to assist them with regulating emotions and controlling anger.

If you have to get the authorities involved, be adamant in letting them know the person has a disorder, and they're not just an angry maniac. That way, they can respond to the situation appropriately and get your partner the care that they need.

Sometimes, the danger or risk gets too much, leading to divorce because people can't live in fear.

Inability to Parent

The individual with the neurodevelopmental disorder may not understand important emotional and social cues that come with

parenting. Most people figure parenting out and get a “feel” for it as they go, but these people may never be able to do so. Furthermore, they may feel like this isn’t their responsibility or they may be resentful of having to do the work because they don’t have the emotional capacity to appreciate the hard parts of parenting.

In severe cases, these people may not physically or mentally be able to care for children on their own, leaving them dependent on their spouse to do all of the work. That’s where we get into the topic we just discussed above, when you go from partner to parent. It’s a struggle for everyone, but it can be especially taxing on the children, so keep that in mind.

How These Disorders Can Manifest During Divorce

The divorce process is a stressful one for even the most level-headed individual with no mental or developmental impairments. When you put additional stress on people who already struggle with daily functioning and emotional regulation, it’s only going to make things worse. In the divorce process, some people may not understand the formalities and rules that must be followed. They may be stressed out by the legal process or not know how to move forward.

If people have more severe conditions, it may be necessary to think about their care or living arrangements after the fact. If you are caring for a person with a disorder like this and plan to separate, where will they live after the fact? Do they have family that can take them in or will they need to live in a special facility? Is that even an option?

All of this just compounds the stress and gives you so much more to consider along the way. Everyone is stressed, and in many cases, the spouses of people with these disorders feel guilty for leaving, but they can’t continue with the way that things are. They are exhausted, physically and emotionally, and often are responsible for carrying most of the weight in the relationship.

When divorce is going amicably, a settlement might be an option. However, depending on the condition of the spouse that has a

neurodevelopmental disorder, the outcome may be impacted. For example, they may have limited custody rights because of their condition or they may only be able to see the children with supervised visitation.

Throughout the entire process, several speed bumps can come along. The best thing that you can do is to be prepared and have the right legal support on your side. Next, we'll help you plan with some tips and insight.

Tips and Tools to Prepare for a Smooth Legal Experience

Regardless of the issues that are at hand, no one wants the divorce process to be stressful. It will be, naturally, but you can do your part to reduce that stress. Remember that the individual that has a neurodevelopmental disorder is going to need a little more attention and care than most people. They may also not be able to represent themselves effectively in the legal process without a good lawyer. It's best if you can resolve things amicably, but that may not always be an option.

Start by taking the time to talk to your lawyer and come up with a plan. Discuss the nature of your circumstances and your soon-to-be ex so that you can go through every possible scenario of what might happen. Then, you will be prepared no matter what comes your way.

Here are some other tips to keep in mind:

- Make sure that the individual knows they aren't being "punished" or doing anything wrong. They often lack the cognitive ability to understand something as complex as divorce based on emotional issues or a lack of fulfillment, so they will simply feel like they were "bad" and are losing you because of it.
- Remember that these people are not damaged or defective, and they are not hateful or outright violent. Their anger stems from an inability to regulate their emotions and they are dealing with

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a challenging disorder. In most cases, they are doing the best that they can, but they just aren't that great at intimate and long-term relationships.

- Make sure that there is an ongoing treatment plan that includes future daily living goals and help for the affected person. Giving them the tools to set themselves up for success can make the divorce that much more amicable for everyone involved.
- Sometimes, the individual's family can get involved and take advantage of their limited mental state to try to work things in their favor or attack you or your character. Try to avoid this if you can and make sure that you always document everything and allow your lawyer to handle any communications with anyone during the process.
- Some people may spend their lives in and out of institutions, which can be taxing on any relationship. In the divorce process, make sure that you're focused on doing what's best for everyone, not just finding the "quick solution" to get things resolved. Your lawyer will be able to help you find the best path.
- Try to explain as much as you can to your spouse or partner, if you can and aren't in a place where communication is no longer possible. If they are willing to try to understand, you can at least do your part to make sure they understand that it isn't a fault of theirs and that people are just different, because it truly isn't their fault that they can't manage, regulate, and express emotions like everyone else.

Having a plan will help everyone get through the divorce with less stress. You'll be ready for any of the surprises that pop up (and they will), and you won't have to lose as much sleep wondering "what comes next".

Dealing with neurodevelopmental disorders in a divorce takes extra time and effort on everyone's part, but it doesn't have to be stressful or complicated. Hire the right lawyer, have a good strategy and do your

best to help the individual who is struggling so that everyone gets a fair outcome.

Afterword: Can Mental Health and Medical Records Be Used in Divorce?

Now that we've discussed how much of an impact all of these conditions could have on divorce, there's an important question that needs to be addressed:

Aren't medical records private?

Yes, and no. In the case of a divorce or custody hearing, medical records, including mental health records that could indicate various conditions, may be subpoenaed by the judge to determine the grounds for divorce or confirm or assign parenting time and custody arrangements.

If either spouse has seen a counselor or sought treatment for mental health, personality disorders, substance abuse, or neurodevelopmental disorders, the records may be relevant to the divorce case. Therefore, they may be provided to the court to prove the claims that the condition has become too intrusive or too much to handle, or that it has impacted the relationship in irreparable ways that are no one's fault.

It's important to talk to your lawyer about the rights and laws in your state and that are relevant to your case regarding sharing medical records. If it is relevant to the divorce hearing and necessary to get a fair outcome, it should be able to be admitted to court. However, as with everything, each case is different so you'll have to see what applies to you.

You can choose to only release relevant records, or argue for the release of only the absolutely necessary documents. In some cases, people will even request that some of the information be redacted so that only the relevant information is made publicly available to the court.

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While some people see these records as negative or something that could be used against them, you have to also remember that these kinds of records could strengthen your case. You could use them to show your own proof of treatment, such as in the case of substance abuse. You could also use it to show that you are working on your issues in therapy, allowing you to garner more parenting time or eliminate the need for supervised visits, for example.

Medical records can be used in court in the case of divorce and custody, within certain restrictions and limitations. It will ultimately be up to the court to decide what to allow and which information to use in its decision, but making as much available as possible will guarantee the outcome that is best for all involved.

CONCLUSION

If you hadn't noticed, there has been one major theme throughout this book. Regardless of the mental health or personality disorders that you are dealing with, planning can go a long way. Divorce is already messy enough and there is more than enough stress for everyone. Reducing any external factors or further impacts could help save a lot of headaches.

It can also give you the chance to learn more about the issues at hand so that you are more educated for the future. It might even change your perspective or help you better understand your soon-to-be ex. Even if all of this is too little, too late, it still can be beneficial. After all, just because you don't want to be married doesn't mean that you can't get along and remain amicable in the future.

Treatment is a big part of the entire process. No matter what you are dealing with, whether it be an addiction, schizophrenia, or autism, having proper treatment and care in place for the affected individual is a critical part of the process. Many courts will require it and some will make it a mandatory part of their ruling for the future of the relationship or to keep custody rights, for example.

It's Different for Everyone

Different doesn't have to be bad. Divorce is an individual experience and it has several factors involved that go well beyond you or your partner's mental or emotional health disorders. You just need to take an honest look at the situation and be willing to learn so that you can prepare for what's ahead. It will also be beneficial to choose a divorce lawyer that is experienced with these types of cases. They will have the knowledge and sensitivity to handle the delicate nature of these conditions and be able to help you get a fair outcome.

Mental illness has been found to increase the incidence of divorce by as much as 80%. It can be taxing for anyone and no matter how much you love someone, it sometimes just isn't enough. Fortunately, there is a lot of information out there to help navigate the process.

Hopefully, even through the stress and struggle of the impending divorce, this book has brought at least a little relief in knowing that you now have a plan and can move through the process with less stress and get a fair outcome for everyone.

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