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# MENTAL HEALTH IN RELATIONSHIPS AND SUICIDE ATTEMPTS

Charcoal-stained lips, petechial haemorrhages, and pumped stomachs are a common occurrence in the acute wards of public and private hospitals. These markers and treatments are common for individuals who have ingested toxic chemicals, an overdose of medication, and/or have unsuccessfully tried to hang themselves. These, all in attempts to end their lives and frequently due to conflict or a dissolution of a romantic relationship. In the same breath, we often see individuals present to casualty with stab wounds, abrasions, bruises,

blisters, contusions, and periorbital haematomas (popularly known as a black eye) amongst others. All markers of physical abuse falling under frequently discussed topics of Gender Based Violence and Battered Woman Syndrome in South Africa as well as globally. At the core of these medical occurrences and socio issues lies mental health in relationships.

Relationships immensely impact daily life and can contribute to well-being; they can also, however, be the reason for poor mental health. This is because individuals commonly enter relationships without having

done enough mental work on themselves, resulting in verbal and physical conflict in relationships. In addition, individuals may enter relationships with maladaptive attachment styles formed from childhood or previously abusive relationships perpetuating a cycle of mental instability and abuse.

This article endeavours to explicate the inner workings of the self in relationships and how the self, intertwining with another individual may lead to mental breakdown in a relationship and or after a breakup (divorce, termination of a romantic/committed relationship).

## The Self and Relationships

The self houses core features that allow one to control and regulate impulses, desires, emotions, and other behaviours. Individuals who have a positive intrapersonal relationship with themselves have likely developed healthy: self-esteem, self-acceptance, self-compassion, and a secure attachment style. Alternatively, individuals who have a negative relationship with themselves are likely to experience emotional distress and have an underdeveloped or poor self-reassurance pattern and have a maladaptive attachment style.

## Attachment Styles

How an individual attaches to their partner in their adult life is largely informed by their attachment style from their childhood. According to Bowlby's Theory of attachment, infants form attachments to significant primal figures early in life. These attachment styles are largely informed by the caregiver's responsiveness to infant needs.

### Three Styles of Attachment

#### Secure Attachment:

- Confident in themselves and the ability of their relationships to satisfy their needs.
- Characterised by greater trust and closeness, more positive emotions, less jealousy, more marital satisfaction, sensitive and supportive responses to the needs of their partners.

#### Anxious/Preoccupied Attachment:

- Need approval and affection to enhance low self-esteem.
- Characterised as needy, clingy and greedy in their need for intimacy/acceptance.

#### Avoidant Attachment:

#### Dismissive Avoidant Attachment:

- Confident, self-reliant and proud of independence
- View others as irrelevant – think that intimate involvements with others are full of problems and not worth the trouble relationships have less commitment, enjoyment and intimacy compared to other styles.

#### Fearful avoidant attachment:

- Afraid of being rejected because they have a low opinion of themselves.
- View others as untrustworthy and likely to let them down.
- Others perceive them as emotionally distant & even hostile.

## How Attachment Styles Lead to Mental Breakdown In Relationships

For the individual with a secure attachment style, they are likely to have a positive view of relationships, finding it easy to get close to others, and are not overly concerned or stressed out about their romantic relationships. This may result in the individual being blindsighted when entering a relationship with another individual who has a maladaptive attachment style, or they may stay in a poor relationship in attempts to fix their emotionally broken partner.

For the individual with an anxious attachment style, they're likely to demand closeness, be more emotional, jealous, possessive, and be less trusting. These individuals are also likely to leave an abusive relationship and return because they experience doubt regarding their self-worth. They're also intensely passionate which creates a false immunity to their partner's toxic traits.

For the individual with an avoidant fearful/dismissive attachment style, once in a relationship they tend to distance themselves from their partner. They're also likely to experience a lack of worth in relationships, tending to be dismissive, and seldom express warmth rather focusing on being extremely self-reliant.

## Dissolution of Relationships

Breakups are entailed with a great deal of emotional pain, conflict, and relative trauma. Individuals who experience romantic dissolutions have elevated scores in anger, vengeance, drugs and alcohol use, intrusive thoughts (and difficulty controlling these) and engage in other extreme attempts to re-establish the relationship or cope with the overwhelming emotions of

its termination.

Because of the design of intimacy, individuality is negotiated in an endeavour to integrate identities allowing for a synergetic existence, also known as a relationship. Erik Erikson, known for his theories of development, describes intimacy as finding oneself while losing oneself in another person. If a person fails to develop an intimate relationship in early adulthood, according to Erikson, isolation occurs. Thus, despite relationships having many risks they're important in the human life cycle. It is for this reason it remains vital that when individuals enter relationships, they remain aware of their self (who they are) taking careful note of their own maladaptive coping skills and needs whilst engaging in intimacy (emotional, spiritual, and physical) with their partners. It also remains important to shed, discard or rework the perspective of the self that was actualised in a relationship or linked to a previous partner when the relationship has ended.

## Tools and Techniques for Patients

Practitioners can encourage their patients to scrutinise their childhoods to better understand their attachment styles, for the purpose of developing adaptive coping skills when navigating a relationship. With this, patients can also be encouraged to view themselves as complex unique individuals that require secure and stable loving relationships, by understanding their own brokenness before committing to another individual. Practitioners can also encourage their patients to attend psychotherapy for the benefit of developing psychologically adaptive methods of coping with the conflict or dissolution of a relationship. This assists in patients developing long term practical solutions to their emotional distress related to a relationship, rather than temporary scare tactics that allow individuals to return to toxic relationships.

References available on request. **MHM**