Conflict management in couple relationships: The experiences of individuals with Asperger syndrome and their partners.

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Editorial comment

Despite growing evidence that individuals on the autism spectrum maintain long-lasting intimate relationships, little is known about how they and their partners experience their relationships and how they manage interpersonal conflict. This paper explores the views of six individuals with diagnoses on the autism spectrum and their neurotypical partners (NT). Ten themes emerged, some of which were common to both partners, some common to only one. The findings in this paper lead to recommendations for how professionals may help to guide couples in understanding and managing their relationships.
Introduction

Over the last decade, there has been a growing attempt to broaden and advance our understanding of the role of conflict management in couple relationships. A number of studies, for example, have considered how relationship conflict acts as a risk factor for the onset of psychological conditions (Fincham and Beach, 2010; Whisman, 2007). Yet we still know very little about how particular psychological features affect couple relationships and conflict management. This is particularly relevant for those who have social-communication challenges, as communication is an important element of relationship functioning for most couples, and is crucial in managing conflict and resolution (Gabb and Fink, 2015; Gottman, 2012; Fincham and Beach, 2010).

Many individuals on the autism spectrum form and maintain intimate and long-term relationships with partners. A review by Howlin and Moss (2012) noted that across eleven independent studies an average of 14% of participants on the autism spectrum were classed as in a long-term intimate relationship while Lau and Petersen (2011) reported that 40% of parents of children on the autism spectrum in their study disclosed a diagnosis on the autism spectrum for themselves or their partner. Although practitioners may wish to offer support that is tailored to the relationship needs of these couples, there has been surprisingly little scientific research on how individuals on the autism spectrum and their partners experience their relationships and how they express interpersonal conflict, and attempt to negotiate and resolve such conflict. The current research therefore provided the first exploratory study of the experiences of individuals on the autism spectrum and their partners and their strategies for conflict management.

In the neurotypical population, research has shown that empathy and flexibility to change affects the quality of couple communication (Bloch et al, 2014; Gottman, 2014) and that self-reflection and understanding of a partner’s perspective is critical for successfully negotiating a beneficial outcome to disagreements or conflict (Benjamin, 2003; Evertsson and Nyman, 2011). We therefore explored whether people on the autism spectrum might experience
interpersonal conflict in a different way because of their social-communication challenges in understanding the perspectives of others and inflexibility in thinking and behaviour, as reported by researchers (Baron-Cohen et al, 2013) and in autobiographical accounts by autistic individuals and their romantic partners (eg Hendrickx and Newton, 2007; Slater-Walker and Slater-Walker, 2002).

This pilot study focused on couples in which one partner had a diagnosis on the autism spectrum and the other partner was neurotypical (NT). A qualitative non-comparative study was conducted, drawn from narratives of the experiences of six couples, recorded during a semi-structured research interview. The first aim was to identify themes that were relevant to interpersonal conflict between couples using thematic analysis (Braun and Clarke, 2006). The second aim was to identify types of conflict management strategies used by participants during interpersonal conflict situations, such as whether they agreed on the nature of the conflict and whether they negotiated and resolved it.

Method

Participants

Six individuals (five males and one female) diagnosed with Asperger syndrome (AS) and their NT partners took part in this study. In total, there were seven male participants, aged 21-73 years old (mean = 38.8 years, standard deviation (SD) = 19.30) and five female participants, aged 28-70 years old (mean = 43.2 years, SD = 18.93). Five couples were in a heterosexual relationship and one in a same sex relationship. Relationship lengths ranged from nine months to 45 years. Two couples were married, three cohabitated and one lived at separate addresses. Two couples had children; three of the eight children had a formal diagnosis on the autism spectrum. Eight participants described themselves as White-British and the remaining four were of Asian, Eastern European and Mediterranean ethnicity. Regarding educational qualifications, some partners held more than one qualification; nine held a General
Certificate of Standard Education, five held a first degree, three held a postgraduate degree at Masters/Doctorate level. Some of the participants (three male partners and one female partner) held a national vocational qualification. Five participants (three AS partners and two NT partners) stated that they were unable to work due to disability or health/mental-health conditions. Five participants worked part-time (two AS partners and three NT partners) and two participants (one AS and one NT partner) were retired.

**Procedure**

Ethical approval was obtained from the University School of Psychology Research and Ethics Committee. Our procedures adhered to the British Psychological Society principles of ethical practice. Six members (AS and NT) of the local autism community advised on procedures for the interviews in the pilot phase of the research. The National Autistic Society and Autism Adult Support Services in Wales, UK, assisted in recruiting participants through online postings and email circulation. Inclusion criteria were: (1) at least one partner with a formal diagnosis on the autism spectrum, (2) both partners 18 years or over and (3) relationship length at least six months. A booklet was sent in advance to each participant including the interview schedule, the socio-demographic questionnaire.

Six semi-structured interviews were conducted. Couples were interviewed together by the interviewer (BW) in a designated family interview room on University premises. The decision to interview couples together was based on piloting feedback; barriers to being interviewed alone included absence of support (which could affect social interaction with the researcher) and the potential for increased tension between partners post-interview. Throughout the interview, the interviewer ensured that each partner had equal time to express their views and recall their experiences.

The interview questions were designed to elicit participants' personal views about their day-to-day relationship, ranging from sharing housework to communicating and expressing
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affection. Questions also included potential challenges encountered in relationships and issues that can be important to the couples including trust and fidelity, financial management and parenting. The opening question, ‘Could you tell me a little about how you met?’ led to further probes that elicited narratives from the couples about conflict events they had experienced. Example probe questions included, ‘Is there anything specific that has challenged your relationship? If so, how have you coped with or managed those challenges?’.

The questions were designed to be open and were framed to avoid leading the participants. The final interviews ranged in duration from 1 hour 20 minutes to 3 hours 5 minutes. There were breaks for refreshments. The interviews were audio digitally recorded and later transcribed verbatim.

Analysis

Thematic analysis was used to identify the main themes present in the narratives of each partner. Data analysis involved an iterative cycle of re-reading the transcript, and noting and highlighting the frequency of topics, in order to produce preliminary codes that grouped into emerging themes across the data-set (Braun and Clarke, 2006).

In the second step of the analysis, all conflict events within the six interviews were identified. We applied Hartwick and Barki’s (2002) accepted definition of couple conflict to identify the presence of a conflict event (ie presence of disagreement, interference and negative behaviour). As each conflict event was identified, the nature of the conflict was noted (the problem causing conflict eg washing dishes in a ritualised way). Finally, conflict management categories were assigned, based on definitions of agreement, negotiation, and resolution provided by Evertsson and Nyman (2011). We applied the following scheme: 1) agreement about nature of conflict (yes, both members agreed there was a problem versus no, each saw it differently); 2) conflict negotiation, if there was an apparent intention or effort to negotiate the conflict (by either or both partners or not at all); 3) conflict resolution, if the partners
achieved resolution (yes, no). Narratives were also coded for how resolution was obtained and what negotiation styles were used.

To ensure the reliability of the coding, samples of the conflict events (41%, \( n = 12 \)) were coded independently by two researchers (BW and a research assistant) using the scheme above. The first and the last conflict event in each interview were selected for this sample. The percentage of inter-researcher agreement per conflict event was defined as the number of agreements reached between coders divided by the total number of codes applied. Inter-researcher agreement was 80.3%. The first author then applied the coding scheme to the remaining conflict events (\( n = 17, 59\% \)).

**Results**

A total of 29 conflict events were identified across the interviews and extracted for further analysis. The nature of interpersonal conflict included a range of topics such as housework (eg methods and household products used), money management (eg incurring debt) and physical and mental illness (eg emotional and physical support).

**Themes**

*Emotional reactivity*

This theme was common to both partners. Emotional reactivity described the presence of an emotional reaction when in the midst of conflict. It was reported by AS partners in 76% of conflict events and by NT partners in 83% of conflict events. Typical examples from the AS partner include “I was very angry” and “I saw red”, and from the NT partner include “I was upset” and “I cried/wept.” In one event partners reported laughter as an emotion expressed during a conflict event. This was linked to positive negotiation and resolution of the situation.

*Practical solutions*
This theme was common to both partners. Practical solutions described practical ways of dealing with conflict situations. It was found in 28% of conflict events described by AS partners and 59% of conflict events described by NT partners. Typical examples from both partners include “we worked it away”, “I made a big effort to change” and “I don’t do that anymore (.) We solved that”.

*Difficulties relating to understanding their partner’s perspective*

This theme referred only to the partner on the autism spectrum, and was identified in 76% of conflict events by either of the partners. For example, AS partners said “I just did not understand what she meant” and “I didn’t understand her”. AS partners also relied on the NT partner being more explicit about his/her thoughts and feelings in order for them to understand their views: “She needs to tell me because she knows I don’t get these things”. NT partners said “I feel like we are talking through a wall”, “our biggest problem is communicating because he doesn’t seem to understand me” and “I have to remind him to not talk over me”.

*Difficulties with change or doing things differently*

This theme referred only to the partner on the autism spectrum and described conflict associated with changes in an AS partner’s routines, rituals and personal items. It was found in 48% of conflict events. Typical examples from AS partners include “I get really anxious when I am doing it another way” and “I will do my things (hobbies) on that day only”. Two AS partners reported changing their routine (using a day to go out with NT partner that was usually spent on the AS partner’s hobby) or way of doing things (allowing NT partner to wash the dishes his way) in order to accommodate the NT partner.

*Over-persistence in conversation and demands*

This theme referred only to the partner on the autism spectrum and was identified in 28% of conflict events. This theme linked conflict to the AS partner repeatedly talking about a situation or issue (verbal rumination) to gain resolution or closure, dominating conversation or cutting
across or talking over a partner. Typical examples from the AS partner include “The difficulty I have is if the conversation’s been left” and from the NT partner “We’ve talked about this six times already”. Over-persistence with demands overlap with the two other themes which refer only to the partner on the autism spectrum. Verbal rumination was also linked to emotional expressions of anger for two of the AS partners.

Avoidance

This was a theme that referred only to the NT partner. NT partners used avoidance as a strategy to manage conflict in 55% of the conflict events. This included stonewalling behaviour, which is characterised by one partner refusing to communicate or co-operate (refusing to answer questions, putting a problem ‘on hold’) rather than confronting the issue (Gottman, 2014). For example, NT partners said “I told him to give me space” and “I didn’t want it [argument] to continue so I left the room”. NT partners’ avoidance style was used when AS partners over-persisted in conversation and demands to close an argument and where AS partners refused to do things differently.

Taking responsibility

This was a theme that referred only to the NT partner and described conflict situations where NT partners assumed responsibility. NT partners reported assuming responsibility in 28% of the conflict events. This included financial management, choosing weekend activities to do as a couple, ensuring an agreed method of communication was consistently used and assuming responsibility to prevent the AS partner from an attempt to commit suicide.

Attributed partner’s behaviour to AS

This was a theme that referred only to the NT partner. NT partners attributed AS symptoms as a factor in conflict in 24% of conflict events. These events were also the ones where AS partners appeared to struggle to understand the NT partner’s perspective and also where rigid
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routines were important to the AS partner. These events were also where anger and distress were reported.

Passivity

This was a theme that referred only to the NT partner. NT partners spoke about their own passive behaviour in 14% of conflict events. Typical examples include “I just let him continue with it”, “I gave in” and “I just let him rant”. Passivity in NT partners was reported in the same conflict events where AS partners found it challenging to do things differently and over-persisted in demands and conversation.

Living separate lives

This was a theme that referred only to the NT partner. NT partners spoke about living separate lives whilst together as a couple in 7% of events. In these situations the conflict related to the AS partner’s challenges with doing things differently. In one event the NT partner stated it was the way she coped. Both situations were also the events that NT partners reported using avoidance.

The ten themes did not occur in isolation. For example, AS partners’ challenges with doing things differently and AS partner’s challenges understanding the NT partners’ perspective appeared connected to negative emotional reactivity for both partners.

Conflict Management

Agreement about the nature of the conflict

In 76% of conflict events partners agreed about the cause of conflict. In 14% of conflict events partners disagreed about the cause. Finally, in 10% of conflict events couples agreed that a problem was causing conflict but made different attributions about the nature of the problem.

Conflict negotiation

Couples responses indicated that in 38% of conflict events both partners attempted to negotiate to resolve a problem causing conflict. In 7% of conflict events only the AS partner
attempted to negotiate. In 24% of conflict events, only the NT partner attempted to negotiate. In 27% of conflict events neither partner negotiated. Finally, in one conflict event neither partner reported negotiation.

*Negotiation style*

Styles of negotiation included collaboration, solving problems in a creative manner (“One of the things we find helps, is Zack will write down how he’s feeling and then I’ll write a response and we’ll work through it that way”), accommodating a partner’s difficulties (“If I get obsessed with something she’ll help find information and help talk it through”) and withdrawal which was used by partners that disliked conflict and in situations with high emotional content (“I was upset and needed space”, “It really distressed me and I wanted him to leave me alone”).

*Conflict resolution*

Couples reported resolving an argument in 20% of conflict events. In 10% of conflict events partners did not mention or report resolution. The majority of conflict events were therefore unresolved (n=20; 68.9%).

*Discussion*

“What I am not capable of is guessing someone else’s criteria, which is not explicitly stated” (Keith Newton, 2007).

The first aim of this study was to identify themes that were relevant to interpersonal conflict. Of the ten themes identified, only emotional reactivity and practical solutions referred to both partners. Three themes related uniquely to the AS partner with respect to their challenges in understanding another’s perspective, and their difficulties with change and their persistence in behaviour. The remaining five themes referred exclusively to the NT partner’s avoidance, responsibility, passivity, separateness and attribution of behaviours to autism. The second aim of the study was to identify types of conflict management strategies used by participants. We found that for most of the conflict events, couples agreed about the problem they were facing.
and reported active attempts to work together to solve it. However, resolution was rarely achieved, which suggests that the challenges couples face may be related to the efficacy of negotiation and problem solving.

Although only three of the themes that emerged in the thematic analysis related exclusively to the AS partners’ autistic features, these were strongly represented throughout the conflict events. The dominant theme found in three quarters of the conflict events referred to the AS partners’ challenges relating to understanding their partner’s perspective. Associations between empathic attunement and relationship satisfaction are well documented in relationship research with couples in the general population and understanding how to respond to a partner’s emotional needs and empathise are deemed to be central to couple communication (Cohen et al, 2012; Ickes and Simpson, 1997; Schulz and Waldinger, 2004).

AS partners also reported that they relied on the NT partner for clarity in order to understand their partner’s perspective. In some of the events where the NT partner provided that clarity, successful outcomes in negotiation and problem solving were obtained.

In contrast to the AS partner only one of the NT partners reported having difficulties understanding their partner’s perspective (“I feel that we are talking through a wall”). However, this was a comment made about the challenges the AS partner had with understanding the NT partner’s perspective. Nevertheless, there were apparent difficulties for the NT partner in responding in a sensitive manner to behaviours that were perceived to be linked to AS within conflict situations. The most dominant theme for NT partners was avoidance.

The AS partner’s insistence on routines, rituals and sameness was a theme identified in nearly half of all conflict events. Restricted and repetitive behaviours, rigid routines and narrow interests are prevalent in adults (eg Barrett et al, 2015) and may pose challenges in establishing and preserving relationships (Urbano et al, 2013). Our data suggest that where the AS partner struggled significantly with change there were also difficulties in the ability to negotiate or resolve arguments. However, two couples’ narratives showed attempts by the AS partner to do things differently in order to accommodate the NT partner’s needs, even though
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this might be associated with distress. A related issue found in just over a quarter of conflict events was the AS partner’s persistence in conversation and demands. Some NT partners in our study appeared overwhelmed by this persistence and there appeared to be possible links to their passivity or avoiding behaviour.

When we analysed the types of conflict management strategies used within these conflict events, we found that most couples were in agreement about the nature of the conflict and the majority of these reported making efforts to negotiate a resolution to most conflict events. Yet, successful negotiation was only achieved in 38% of cases in which both partners were in agreement about the problem. Difficulties understanding each other’s perspective may have influenced this outcome. Negotiation styles are theorised to vary as a function of two dimensions; concern for self and concern for others (Sorenson et al, 1999). The narratives indicate that both AS and NT partners struggled to manage this balance and that the NT partner reported being more accommodating. This may reflect a greater general ability to be flexible. However, NT partners also exhibited what can be considered as potentially counter-productive strategies, such as withdrawal. While this is consistent with negotiation strategies used by couples in the general population (Bevan et al, 2014; Gottman, 1994, 1999; Papp et al, 2009), in our study we found five themes (avoidance, responsibility, passivity, separateness and attribution of behaviours to AS) that were exclusive to the NT partner. Some of these distinctive themes in the NT partner are likely to have influenced the outcome of negotiation.

Couples’ narratives about resolution showed that some of the problems that caused conflict were resolved. However, most couples in this study acknowledged that some of the problems experienced were ongoing. These problems were never totally resolved but were managed on a situation-by-situation basis. This appeared to happen more often when the AS partner struggled with doings things differently, over-persisted with conversation/demands and did not understand the NT partners’ perspectives. This could increase the demand on the NT partner to have higher levels of understanding, empathy and tolerance, which may not have been achieved.
Despite disagreement and difference of viewpoints, couples reported that they had, or were attempting to find ways to adapt to ensure that the reported problems did not permanently overwhelm their relationship. Importantly, the rate of conflict non-resolution in this study (69%) is similar to that reported among couples in the general population (68%; Gottman, 1999, 2014). However, as mentioned above, the different themes emerging for the AS and NT partners give insight into how conflicts tend to be negotiated in potentially distinctive ways in these relationships. For example, the AS partner’s willingness to negotiate but inability to change or do things differently, may prompt negative responses from the NT partner. This may be indicative of the NT partners’ difficulties understanding or accounting for their partners’ AS features when in a conflict situation and to the notable lack of reference throughout the narratives of the NT partner’s challenge in understanding the AS perspective. Future research should trace the link more specifically between individually distinctive ways of responding by AS and NT partners and their success or challenges as a couple in negotiating and resolving conflict situations.

Limitations

A number of limitations are acknowledged. The sample was smaller than anticipated despite advertising widely. Non-participation might reflect the difficulties autistic individuals experience with social communication, discussing personal matters, changing environments and meeting new people. It is also conceivable that some views and concerns were withheld during the course of the joint interviews. This may have led to an underestimation or distortion of the nature of conflict, its frequency, causes and course. In addition, the couples taking part in this study were willing to talk about their relationship and therefore may not be representative of neuro-diverse couples. Regarding diagnosis, there are more men diagnosed on the autism spectrum than women (Lai et al, 2015). In this study five of the six AS participants were men and most of the NT participants were women. Furthermore, narratives about emotions (eg anger, upset) may be gender specific and not indicative of AS. For example, men may be
more likely to report anger and women may be more likely to report feeling upset. This may have had implications for the themes that emerged from the analysis.

The wide age range of the couples (21-73 years) and the range in relationship length (9 months-45 years) is another limitation. For couples at an early stage in their relationship, the NT partner may have less knowledge of autism, particularly its unique presentation in their partner. However, the constant factor was AS across the 6 couples, and we were able to identify common themes and conflict management strategies from the interview transcripts. Replication with a larger sample is required to establish whether the themes and strategies identified in this pilot study pertain to other couples where one or both are autistic. Complementary research methods may also be warranted to overcome the challenge of discussing potentially sensitive relationship matters in an interview context.

**Implications for practitioners**

“We need advice that is clear, concise, and specifically aimed at quick, effective solutions”

(Ashley Stanford, 2013)

This was an exploratory study and it is difficult to make strong recommendations. However, the results do highlight issues to consider when working with couples. We suggest that practitioners make a careful assessment of both partners to include how autism symptoms relate to empathy, inflexibility and persistence and how adverse negotiating styles affect the couple relationship. When providing therapy to couples where one partner is autistic, particular effort should be made to enhance the understanding of each other’s perspectives in order that the NT partner is better aware of the features associated with the condition.

It is important that couple therapists and NT partners remain vigilant that understanding partner feelings, thoughts and perspectives is an ongoing challenge for the AS partner and that alternative strategies are needed. We suggest that practitioners consider strategies and techniques that partners with AS can access and that these do not require the AS partner to
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Use inference. It may be that practitioners will need to use a written, verbal or visual scenario of a situation that the couple has experienced in order to explain inference and understanding a partner’s perspective. It is essential that therapy provided is flexible, sensitive and accommodating to the features of the condition. Strategies that require changes to an AS partner’s routines and rituals could be counterproductive and therefore should be carefully managed with minor changes instigated over time. Approaches that provide a logical and clear explanation of the consequences of certain behaviours and how they may affect each partner may be more readily accepted and understood by the AS partner.

Concluding comments

Our findings indicate that the couples in this study were able to agree about the nature of conflict and appeared motivated to solve it. While these results are consistent with research into couples in the general population, we found that specific difficulties in negotiating and resolving problems could be traced to the themes that were different for each partner. These include challenges with understanding others’ perspectives, repetitive behaviours and rigid routines (AS partner), avoidance style, and difficulty accommodating AS behaviours (NT partner). Appropriately trained professionals working with such couples should be aware of these differences and help both partners to gain insight to the specific implications of differences within the couple relationship context. Acknowledgment and acceptance of a partner’s personality and difference alongside compassion and understanding will assist couples to actively cope with unresolved problems. We recommend techniques that help to increase awareness and that offer practical, explicit guidelines to support couples to build on their relationship, celebrate their strengths and value their differences.
References


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