QUESTION: My husband is a post-polio survivor who will be 75 later this year. He started to experience new weakness at the age of 70. I recognize his weakness, as I am 70 and have degenerative disk problems so weakness is not new to me. I have told him to go to your website and read Post-Polio Health so that I am not always the “bad guy” bringing him information. He needs to see things himself and remain informed. Do you have other ideas as to how to approach the subject with him?

Response from Rhoda Olkin, PhD:
I can empathize with your position of wanting to save your husband time and energy and move him further along in his discovery of weakness management. As a therapist, I often find myself wishing I could give clients the benefit of my own disability experiences and save them much time and aggravation. But I cannot do this because it is not helpful to them; I have to respect their pace and development. It is a truth universally acknowledged that it is hard, if not impossible, to change another person. So change yourself:

1. Make “I” statements. Most people do not want or like advice. So rather than make suggestions for your husband, you might read Post-Polio Health yourself, and then leave it lying around, without mentioning it. Or talk out loud about how you are managing your own weakness. Not in a “Look how great I am” way, but just musing out loud (e.g., “I don’t think I can manage the grocery shopping and laundry in one day. I’m doing the shopping today, so the laundry will have to wait.”). Rather than saying “It is helpful to rest in the afternoon,” say, “I hope we can have dinner out tonight. I’m going to rest up first.”

2. Go about your life, inviting your husband but not insisting. For example, you could say, “I want to go to the movies tonight. I do hope you will come with me, but I will understand if you do not.” And then …

3. … go to the movies with or without him. Don’t diminish your activity level to match his.

4. Talk about your fears. There is a reason you want your husband to manage his weakness. Perhaps it is a fear of being alone either because he becomes housebound or more disabled or because he dies before you do. Perhaps you had dreams of traveling together and now that dream is gone. Perhaps you fear he will get increasingly depressed as his functioning decreases. Perhaps you worry he will lose out on being with his grandchildren. Whatever the fears, talk about them (remembering to use “I” statements).

5. Ask him about his fears. In a neutral place and time, say that you notice he seems reluctant to read about post-polio, and you wonder what that is about. Be curious, not critical. It can be hard to read about symptoms (I always get symptomatic when reading about

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breathing problems!). And scary to face uncertainty in potentially diminishing functional capacities. Join with your husband around these issues; do not try to talk him out of them, but empathize with them. Sometimes when a person feels validated then he or she becomes more ready to problem solve.

6. Try to distinguish reluctance and fear from depression. If you think your husband might be clinically depressed, take action to seek couples therapy together.

7. Utilize social support – friends, family, community. This is good advice for everyone as they age.

Uh oh, I just violated my own tenet, and I am giving advice!

Response from Stephanie T. Machell, PsyD:

You say you recognize your husband’s weakness. You refer to his “need” to see this and inform himself. You also say that you are the “bad guy” for bringing him the information, which I assume means he is reacting negatively to you when you share what you’ve learned with him.

All this implies that your husband isn’t ready to recognize his own weakness, or to inform himself about PPS. Until he is, efforts to push him to do so are a step ahead of where he is.

How do you make him ready? You can’t. And the more you force the issue the more he may resist. As long as he is not putting himself or someone else in danger he has the right to take whatever time he needs to be ready – and the right never to be ready at all.

You’ve already expressed concern and shown him where he can find out more. If he is falling more as a result of his weakness, or if he is unable to participate in activities that matter to him, or if there are other consequences of his weakness that you observe, you can share your observations with your husband. If others he respects and listens to have observed his weakness and its consequences you can encourage them to share their observations and concerns with him as well. Suggest he share your observations with his doctor, and recommend he share resources with him as well, including the PHI website.

To avoid being the “bad guy,” share your observations in a neutral manner, at times when you are both calm. Use “I” statements and encourage whatever positive changes you see, no matter how small. Avoid blame and judgment, including the phrase, “You need to ...” It doesn’t work. Guilt doesn’t either.

It’s frustrating and hard to wait for someone to be ready to see something that is so clear to you. But it’s up to your husband to decide what he wants to do next.

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