Depression and Divorce
How does depression affect marriage and relationships?

By Kathleen Doheny
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The 20-something couple, married just a few years, was eagerly looking forward to the birth of their first baby.

Labor and delivery went fine, and the baby was born healthy. But problems began when the new mom, overwhelmed by motherhood, suffered depression.

"The husband had to take care of everything," recalls Joan R. Sherman, MFT, a licensed marriage and family therapist in Lancaster, Pa., who saw the couple in counseling. When he was at work, he worried that his wife was so depressed she wasn't paying needed attention to the baby. He became so worried he secretly set up a "nanny cam."

She got more and more depressed; he got more anxious, angry, and resentful.

As this case history suggests, depression that affects one partner has an effect on the other partner, the relationship and ultimately the entire family. Nearly 15 million American adults, or about 6.7% of the U.S. population age 18 and older, is affected with a major depression in a given year, according to the National Institute of Mental Health.

Statistics about how frequently depression affects one partner in a relationship are elusive, say Sherman and other experts. But mental health counselors like Sherman say depression often leads couples to seek counseling, fearful the depression will lead to divorce.

Depression and Divorce: Inevitable?

The depression itself doesn't lead directly to divorce, experts say. Rather, it is the consequences of not addressing the depression.

"I don't usually hear, 'I got a divorce because my wife was depressed,'" Sherman tells WebMD. Much more typical: "My spouse became distant and had an affair."

"Depression can lead to other problems," agrees Constance Ahrons, PhD, professor emeritus of sociology at the University of Southern California, Los Angeles, and an author and speaker based in San Diego who has researched and written about divorce. Affairs aren't the only problems, she says. Often, one partner may get so depressed he stops working, and that can lead to a cascade of other problems.

But there's hope, mental health experts say, if couples address the depression. Try to understand how it affects each partner, determine its roots, keep communication open, and get professional help if needed.

Depression: Partners in Agony

Depending on the extent of the depression, the depressed spouse often tunes out and gives up on life. A depressed person may sleep too much, or too little. Depressed people
often stop eating much, or overeat, and may have difficulty concentrating and conversing. "The depressed person often feels responsible, but they feel like they can't do anything about [their inertia]," says Ahrons. "Many of them don't even know why they are depressed."

Meanwhile, the other partner feels compelled to pick up the slack, especially if there are children. They may be very understanding and sympathetic at first, say Ahrons and Sherman.

**How Depression Can Lead to an Angry Marriage**

But as exhaustion and frustration increase, the feelings of the unaffected partner may turn to anger or resentment. If the depressed partner doesn't enjoy engaging in activities the couple used to do together, that's another source of irritation, Ahrons says. "The other partner either has to do things on their own or stay home, too," she says.

If a partner has never been depressed, he or she may have a hard time understanding the mood disorder. That can be difficult if you're a very upbeat type, Ahrons says. She says she often hears an upbeat partner say of a depressed spouse: "Why can't he just pull himself up?"

The partner who isn't depressed may also feel cheated, says Dan Jones, PhD, director of the Counseling and Psychological Services Center at Appalachian State University in Boone, N.C. That's understandable, he says, because the depressed partner is typically not much fun.

"Most people fall in love because they are enjoying each other's company and having fun together," he says.

"The depressed person will [often] give the impression he doesn't care," he says. "It's hard to feel intimate with someone [who looks like he does not care]." he says. There is often a loss of interest in sex by the depressed person, which further strains the relationship.

If the depression persists for months, or years, both partners can feel the distance between them widening. The non-depressed spouse will often think: "How can he be depressed? "We have a happy marriage," says Anita H. Clayton, MD, professor of psychiatry and neurobehavioral sciences at the University of Virginia, Charlottesville. But sometimes, one has nothing to do with the other. Other times, the depression is due to marital dissatisfaction.

**Unraveling the Roots of Depression**

Some depression is transient, such as when a partner loses a parent or other family member. Within a few weeks, typically, the person feels a bit better.

Other times, the depression might continue or reoccur several times. Having a history of depression makes it more likely to have another episode, says Clayton. "With the first depression, we can usually link it to some event," she says, such as job loss, or a serious medical problem. "We can identify a trigger."

"The more episodes you have, the less likely it is linked to an event," she says, perhaps because of underlying brain changes.
Getting Help for Depression in Marriage: What Works?

If a couple decides that professional counseling is needed, the depressed partner may want to go alone first, Jones says. Or, he has found that some nondepressed partners try to persuade the depressed person to get help and the partner won't go.

Seeing a therapist together can give a couple valuable perspective, he says. "The therapist mediates," he says. "It's not a blaming session, but rather the therapist helps the depressed person recognize they are contributing to [the problem]. If they improve the depression, they could improve the marriage."

In a study, Italian researchers reviewed the data on whether couple therapy was a better way to treat depression in one partner and found no difference between couple therapy and individual therapy on the symptoms of depression. But couple therapy better reduced "relationship distress," they report in the journal *Psychiatric Quarterly*.

Often, talking about the depression -- whether alone or with a partner in therapy -- brings up other issues in a marriage that, when addressed, help ease the depression, Sherman says.

**Combining Talk Therapy With Antidepressants for Depression**

If depression doesn't improve with behavior or talk therapy, a physician may decide to prescribe an antidepressant, or may prescribe it along with the therapy.

Antidepressant medications can help, Clayton says. "Medications and therapy are often very useful." If the depression is milder, one or the other may be enough, she says; if it is more severe a combination treatment may be better.

In a study published in the *Journal of Consulting and Clinical Psychology*, Stanford University researchers compared medication alone, talk therapy alone, or a combination in 656 patients with chronic depression. They concluded that the combination produces a faster, fuller remission of chronic depression.

Like many medications, antidepressants can interact with other medicine, and cause side effects. Patients should always tell their doctors about the medicines they take, and call the doctor if they notice side effects. Another class of antidepressant may be prescribed.

**Depression and Relationships: Prognosis?**

Sometimes, the partner of a person with depression will feel responsible, and stick with the marriage even if they’ve become more of a caretaker than a spouse.

But more often, if the depression continues for years, the partner does get tired of it and seeks divorce, Ahrons says.

Which couples are most likely to stay together? Those who acknowledge depression as a problem, try to relieve it, and keep talking with each other.

Remember the young couple at the beginning of this story? The new mother and her husband actually strengthened their marriage once they acknowledged the depression and sought treatment, Sherman says.
When she counseled the couple, the wife acknowledged she had ambivalence about becoming a mother. Her husband took issue with her housekeeping and his displeasure only grew worse when motherhood reduced available time to clean. The marital dissatisfaction may have contributed to her depression.

So they worked on those issues. He eased up on housekeeping standards. She talked through her ambivalence about motherhood. It was mainly rooted, Sherman found, in her lack of confidence.

"Her depression lifted once they started talking," Sherman says. Their relationship improved.

"The last time I talked to them," she reports, "they were doing well."

SOURCES:
Constance Ahrons, PhD, professor emeritus of sociology, University of Southern California, Los Angeles; author, We're Still Family: What Grown Children Have to Say About their Parents' Divorce.
Joan R. Sherman, LMFT, licensed marriage and family therapist, Lancaster, Pa.
Anita H. Clayton, MD, professor of psychiatry and neurobehavioral sciences, University of Virginia, Charlottesville.
Dan Jones, PhD, director, Counseling and Psychological Services Center, Appalachian State University, Boone, N.C.
National Institutes of Mental Health: "The Numbers Count: Mental Disorders in America."
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