

Divorce, Separation, and Suicide Risk



From Science to Practice

Using Research to Promote Safety and Prevent Suicide

Overview

Divorce and separation can play a role in the risk of suicide.^{1,2,3,4,5,6,7,8,9,10} Research shows that the risk for suicide is greater among men and women who are divorced when compared to men and women who are married.^{4,6,8,10,11} And while some studies have found that men are at heightened risk for suicide as the result of a divorce compared to women,^{1,4,8,10} the evidence is mixed regarding differences in suicide risk across gender.¹

Service members and Veterans who have experienced a separation or divorce may be at an elevated risk for suicide that could persist for several years after the divorce itself.¹² In some cases, the divorce process is the endpoint in a relationship impacted by multiple struggles that can increase suicide risk (e.g., one partner's substance use, violence between partners).^{3,13} In other cases, the divorce can lead to new concerns that increase suicide risk (e.g., shame, financial difficulties, housing instability).^{3,13}

Not all individuals who have gone through a breakup, separation, or divorce will experience these problems. Additionally, breakups of other types of long-term committed relationships can increase suicide risk, even if the partners were never legally married.¹⁴ Marital status is variable throughout the lifespan which could impact the interpretation of the study results included in this review.

Key Findings

Marital Status and Suicide Risk

- Divorced individuals have more suicidogenic risk factors than the general population.⁸ Risk factors for suicide among divorced individuals include increased symptoms of depression, elevated financial pressure, and higher rates of alcohol misuse.⁸
- Divorced individuals have a higher suicide rate than married individuals.^{6,8,11,13} Data from the U.S. National Longitudinal Mortality Study (NLMS) from 1990 to 2011 included a sample of 1.5 million people, of which, 2,013 had died by suicide. Compared to married individuals, divorced individuals were 1.97 times more likely to die by suicide.⁴ Individuals who were separated but not divorced were about 1.52 times more likely to die by suicide than their married counterparts.⁴

- Both men and women are at increased risk for suicide after a relationship breakdown compared to men and women whose relationship remains intact.^{8,10} On average, divorced men have four times greater risk for suicide than married men, and divorced women have nearly three times greater risk for suicide than married women.⁸
- Women who are divorced or separated are 1.46 times more likely to die by suicide compared to married women. Men who are divorced or separated are two times as likely to die by suicide than married men.⁴
- Men may be at greater risk than women for suicidal ideation, suicide attempt, and suicide completion after the breakdown of a relationship, but more evidence is needed.^{1,13}
- If men are at greater risk for suicide than women as the result of a relationship's breakdown, sociological explanations derived from the existing literature suggest the following:
 - The inflexibility of men's social roles may be a contributing factor as it could lead to emotional

Marital Status and Suicide Risk Across Gender

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distress. When a relationship breaks down and men's idealized masculinity is compromised, feelings of shame may arise.¹⁵

- Marriage in general may be a more beneficial for men than women as it is thought to be protective against risky behaviors that are often viewed as masculine.¹⁵
- In a divorce, men may be more likely to lose their family, their children, and their home.¹⁵ And loss of control over a partner and sexual jealousy when a former partner begins a new relationship with someone else may be more prevalent among men experiencing a relationship breakdown.¹⁵
- Men may be less likely than women to have a supportive social network which could increase feelings of loneliness following the dissolution of a relationship.^{10,15}
- Men may have a more negative perception about court proceedings, for which suicide could be a consequence.^{4,16}

Timing of Divorce and Subsequent Suicide

- The risk of suicide is affected by the recency of divorce. Among individuals who died by suicide within ten years after a divorce decree was made, over 20% died within the first year. After one year, a downward trend can be observed in which fewer individuals died by suicide every 6 months after divorce.²
- Among individuals who died by suicide within five years of their divorce, the risk was greatest within the first three years with 37% dying within the first year after divorce, 22% dying two years after divorce, and 19% dying three years after divorce. Eleven percent (11%) died four years after divorce and 11% died five years after divorce.⁹
- In a study that used time-to-event analysis,² divorced suicide decedents in the Colorado Violent Death Reporting System from 2004 through 2015 were matched with divorce decree, using multiple identifiers. Those whose suicide death was linked to a divorce decree were more likely to have had problems with a current or former intimate partner, more likely to have had issues with alcohol, and more likely to have had criminal legal issues. They were less

likely to have had any contributing physical health issues compared to those individuals whose suicide death was not linked to a divorce decree.²

- Individuals whose suicide death has been linked to a divorce decree tend to be younger than 35 years of age. And those who are younger than 35 years have a lower probability of survival at the 1- and 3-year marks compared to those who are older.²

Veterans and Active Duty Service Members

- Among Veterans and active duty service members (n=3,795,823) who served between 2001 and 2011, and who were followed either until their death or until the end of 2011, the increased risk of suicide death persists long after divorce.¹² Quarterly personnel data were collected to examine associations between stressful life events and suicide death. There was a 27% increase in risk of death by suicide for participants during the quarter in which they experienced a divorce. The risk of suicide increased to 48% within the first three quarters after a divorce. The risk of suicide decreased slightly by quarter four and beyond but remained high at 33%.¹²
- A 2015 study using predictive modeling found that, among VHA patients in the top 0.1% tier of predicted suicide risk, 47% were divorced and 22% were married.¹⁷ By comparison, for the overall VHA patient population, 19% were divorced and 54% were married.¹⁷
- A higher proportion of Veteran suicide decedents with PTSD were divorced when compared to Veteran suicide decedents without PTSD. However, there was no correlation between PTSD and current problems with an intimate partner immediately before suicide death.⁷
- Suicide rates among Veterans increase after transitioning to civilian life, and Veterans who are separated, divorced, or widowed at the time they of their transition from military service have a 43% increased risk for suicide death than their married counterparts.¹¹
- Active duty service members who had experienced a separation or divorce in the past 12 months were nearly four times as likely to report having had suicidal thoughts in the past month compared to service members who were either currently in a relationship or continuously single.⁵ Recurrent hostile disagreements between partners were significantly associated with increased likelihood of having suicidal thoughts. In the context of a recent separation or divorce however, service members who experience a high number of hostile disagreements



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were over eight times more likely to endorse suicidal ideation compared to other service members.⁵

- Among service members who have experienced a divorce or separation, having conversations about their relationship instability in which they talk about or

contemplate divorce or separation was associated with a significant decrease in the likelihood of experiencing suicidal thoughts. By having these types of conversations, service members may experience some relief due to their readiness or desire for a divorce or separation.⁵

Ways You Can Help

- Develop a safety plan for situations that reveal evidence of suicidal intent or behavior. VA provides a **Safety Plan Quick Guide**.
- Work with substance misuse treatment providers to integrate appropriate treatment into care for Veterans with substance or alcohol use disorders. The VA/Department of Defense “Management of Substance Use Disorders” **clinical practice guideline** offers guidance on the treatment of Veterans with a substance or alcohol use disorder.
- Assess Veterans at risk for suicide for perceived social support. For LGBTQ Veterans, communities can be small. It may be more likely that their limited contacts will be divided by the divorcing partners. Depending on the nature of the relationships with family, LGBTQ Veterans may be reluctant to seek support due to fear of outing themselves. VA’s National Center for PTSD **provides measures**, including the Deployment Risk and Resilience Inventory-2 and associated Postdeployment Social Support Scale.
- Connect Veterans with **VA’s Office of General Counsel** if they need legal services. VA has a list of legal service clinics as well as the VA Veterans Justice Outreach Specialist program.
- Provide Veterans who are struggling with relationship challenges with resources, treatment options, and self-help tools. Many VHA facilities and Vet Centers offer couples counseling. **VA’s Make the Connection** has videos, information on signs as to when Veterans should reach out for support, a free and confidential self-assessment to get feedback on their relationship challenges, and more.
- Ask Veterans who are currently undergoing a separation or divorce about their housing situation. If they are uncertain where they would stay, you can access resources and information at the **VA National Center for Homelessness Among Veterans**.
- Ask about Veteran patients’ experiences with intimate partner violence (IPV). Use the IPV screening protocol as mandated by VHA. VA has an **Intimate Partner Violence Assistance Program (IPVAP)**, which supports the practice of screening for both IPV and suicide risk, as risk for one can increase risk for the other.

There is no single cause of suicide. It is often the result of a complex interaction of risk and protective factors at the individual, interpersonal, community, and societal levels. To prevent Veteran suicide, we must maximize protective factors and minimize risk factors at all of these levels.

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