

Children and Divorce

Physicians have a great privilege practicing medicine, but pay for that privilege by carrying a weighty responsibility. We need to make decisions all of the time with important implications for health, and truly do, not rarely, need to make decisions with life and death in the balance. I have been fortunate to save lives, and I have lost patients, always worrying that I might have done something different, something more. Be that as it may, I believe there is no greater responsibility than parenthood. And the way we care for our children is one of the great opportunities in prevention.

For a variety of complex reasons, divorce is very common in modern society, particularly in the US. Much about divorce, from the reasons to the outcome, is intensely personal. But the frequency of divorce makes it a social problem, and therefore one that can be discussed in the context of public health and preventive medicine.

A lot has been written about the psychological impact of divorce on children and how to minimize its harm. While I have not made a life's work of studying this literature, I believe the best of it is consistent with common sense. Children need to know they are loved. Children need to know they are not at fault. Children need, unless denied by tragedy, two loving parents.

Several outcomes of divorce in this country have dire implications for the health of our children. The

abandonment of children by one parent-the proverbial "deadbeat _____" (typically "dad")-is a violation of the responsibility of parenthood, and leaves permanent scars. No matter how nurturing the remaining parent is, the child grows up wondering why one parent didn't love them, and often concludes they may not be worth loving. Life is difficult enough without placing such a burden on small shoulders.

Equally bad is a situation when a parent, wishing to remain involved in a child's life, is marginalized due to a court fight. With young children in particular, the courts often prioritize the mother. In this situation, a parent wishing to participate in childcare and rearing may be reduced to the role of providing financial support from a distance. That is not parenthood. There are certainly stories about so-called "deadbeats" who actually want to be involved in their child's life, but aren't permitted to be. In a child's heart, a loving parent is home; there is no such thing as "visitation".

The responsibility of parenthood is profound and inviolate. While reducing the rate of divorce might be a good thing for children, there isn't much to suggest that maintaining a marriage that isn't working does anyone any good. But preserving a child's birthright-access to, and involvement with-two loving parents, must be a constant priority thought the turbulence of divorce. Houses and property can be



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divided up, but the only way to split a child in two is with Solomon's sword.

I certainly hope not to offend anyone with the moral tone of this column. I am not intending to impose a particular morality on divorce. I am speaking from a physician's point of view, and in particular, true to the column's purpose, from the perspective of preventable harm. I do not profess to know how to modify the complex social and cultural factors that preserve a high divorce rate. But I do know, from both the available scientific evidence and common sense, that the harmful effects of divorce on children can be minimized and perhaps prevented if parents universally accept that the responsibility of parenthood supercedes all else. Perhaps parents in a painful divorce can express some of the pain and anger in a competition to see who can more consistently put the children first, and fight for their unfettered access to two loving parents. Difficult as such an investment may be, it will pay back huge dividends-children who grow up knowing they are loved, and returning that love with interest.

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Preventive Medicine Column

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