

## CHAPTER 1

# THE BASICS

**Who? What? Where?**

**When? Why?**

## **What is suicide?**

At its simplest, suicide is the act of killing oneself on purpose. The word *suicide* comes from the Latin *sui*, meaning “self,” and *caedere*, which means “to kill.” But this definition is deceptively simple, because in reality suicide is many things to different people: tragic, shocking, horrifying, enraging, mysterious, a relief, a shame, a stigma, a shattering legacy, a cry for help, a release from pain, selfish, heroic, insane, a way out, the right choice, the last word, punishment, revenge, a protest, a weapon, a political statement,

tempting, desperate, upsetting, unsettling, a mistake, angry, hurtful, dramatic, a cop-out, devastating, and unforgivable.

In the pages and chapters that follow, you'll see how the act of taking one's life can be so many things, and more.

- *What about someone who drinks himself to death?  
Is that suicide?*

It's not exactly like shooting yourself or swallowing a fatal dose of pills, but the results are the same. Some people call this type of suicide *indirect suicide* or *slow suicide*. Other forms of behavior that could be considered indirect suicide or slow suicide include knowingly engaging in sexual behavior that will expose you to HIV, continuing to smoke if you have emphysema, and eating sweets if you have diabetes.

- *Is it considered a form of suicide to refuse medical treatment?*

Some people consider this a form of indirect suicide, but it really depends upon the circumstances. For someone who has a treatable but potentially fatal condition, refusing medical treatment is a decision that many would view as suicidal. But for someone who is in the end stages of a terminal disease, refusing treatment may very well be a rational, appropriate choice, especially if treatment will simply extend life and not improve it or even maintain its quality.

- *How many people commit suicide in the United States?*

The official number is approximately thirty thousand people a year, but the real figure may be as high as three to five times that number because many (if not most) suicides go unreported.

Statisticians also speak in terms of the *suicide rate*. By this, they mean the number of people per 100,000 who take their lives. On average, the annual suicide rate of all Americans is about 12 per 100,000 people.

In 1993, suicide was the ninth leading cause of death in the United States, behind HIV, which killed 38,500 people, and ahead of homicide, which took 25,470 lives.

- *Why are so many suicides not reported?*

Doctors, medical examiners, and coroners have long spared families the added grief, stigma, and shame of having suicide listed as the official cause of death.

In my father's case, his official cause of death was pneumonia. Technically, this was true. But it was also true that the pneumonia was a result of an overdose of a prescription medication. Because the true cause of death was not listed, my family didn't have to deal with the public stigma and shame of my father's suicide, at least as long as no one talked about the true cause of death.

Denial also plays a part in the underreporting. For some families, denial may lead to the belief that their loved one's death was accidental, whether that person took an overdose of pills, shot himself or herself, or intentionally drove into a highway overpass at high speed. And the medical examiner or coroner may be willing to go along with the family's denial in order to spare them from having to confront the truth.

- *Do life-insurance issues have anything to do with why people don't want suicide to be listed as the official cause of death?*

Many of the people I talked to in the course of researching this book were under the mistaken assumption that when

thought he suffered plenty while he was alive, so I always imagined he was in heaven.

Not everyone takes such a benign view. If you adhere to traditional religious beliefs, depending upon your religion, those who commit suicide may wind up in hell. For example, when it comes to Islam, as noted in the *Encyclopedia of Religion*, "Muhammad proclaimed that a person who commits suicide will be denied Paradise and will spend his time in Hell repeating the deed by which he has ended his life."

- o **Does everyone have thoughts of suicide?**

Most people have had casual thoughts of suicide at one time or another, especially when faced with life's frustrations and disappointments. This is perfectly normal, although if the thoughts are more than casual and don't pass quickly, there is reason to be concerned. Please see chapter 6, "Treatment and Prevention," for a series of questions about what to do if you're feeling suicidal.

- o **Do suicidal feelings pass?**

In most cases, yes. People who have casual or even less than causal suicidal feelings will eventually get over them. But there is much more involved in answering this question. Please see chapter 6, "Treatment and Prevention," for a complete answer.

- o **Can you tell if someone is feeling suicidal?**

Often, you can tell. Most people who are feeling suicidal give clues that something is wrong. For a detailed answer to this question and a list of possible warning signs, see chapter 6, "Treatment and Prevention."



What are some of the most common myths about suicide?

There are many, and I list some of them here. I've drawn this list from several sources, including a list first prepared in 1961 by Edwin S. Shneidman called "Facts and Fables on Suicide" and the chapter titled "Suicide Myths" in Rita Robinson's book *Survivors of Suicide*.

- ✓ People who talk about killing themselves won't do it.  
Wrong. People who talk about wanting to die need to be taken seriously, because some people who talk about it do it.
- ✓ There are no warning signs.  
According to Edwin Shneidman, "Of any ten persons who kill themselves, eight have given definite warnings of their suicidal intentions."
- ✓ Young people are more likely than old people to kill themselves.  
People sixty-five and older kill themselves at a higher rate than those aged fifteen to twenty-four.
- ✓ Bad weather drives up suicide rates.  
Spring is the time of year when people commit suicide in the greatest numbers.
- ✓ People who make one attempt will never try it again.  
Most people who attempt suicide will never try it again. But 10 percent of those who attempt suicide once will eventually take their own lives.
- ✓ Suicide is against the law.  
It's not, but if you're caught assisting in a suicide, you can be charged with a criminal offense in all fifty states.
- ✗ Most people leave suicide notes.  
They don't. Only one in five or six people who commit suicide leaves a note.

✓ People who are suicidal want to die.  
Not necessarily. Most people who are suicidal are ambivalent. And some of those who are consciously using suicide as a cry for help or a threat accidentally wind up dead.

✓ Suicide is genetic.  
Though there is no "suicide gene," there are, as Rita Robinson notes, "sociological and biological factors in families that might seem to dispose them to suicide." For example, you're several times more likely to commit suicide if you come from a family where someone has killed himself. Though the reason isn't entirely clear, part of it has to do with the example set by that relative and part of it may have to do with inherited characteristics ranging from depression to dark temperament.

✓ Poor people are more likely to kill themselves.  
or  
✓ Rich people are more likely to kill themselves.  
As several experts have said to me, "Suicide is an equal opportunity killer."

✓ Once a suicidal crisis has passed, the person is out of danger.  
As Edwin Shneidman explains, "Most suicides occur within about three months following the beginning of improvement, when the individual has the energy to put his morbid thoughts and feelings into effect."

- Do people plan their suicides?  
Many people who commit suicide do so on impulse and make no significant plans in advance. This is, perhaps, part of the reason only one in five or six people who commit suicide leaves a note. Others do plan their suicides, making preparations over a period of days, weeks, or months.

Ruth was in her eighties, and had recently been incapacitated by a fall, when she first started thinking about ending her life. "I wasn't in any kind of a rush, but I've always been very organized about things. So I made a list of all the things I needed to do, from finding out exactly how I was going to do it, to saving up the right pills, to making sure all of my papers were in order, to giving away some things that I'd been saving for various people." Ruth spent several months preparing for her suicide before actually following through with her plan. In chapter 4, "Suicide and the Elderly," and in chapter 5, "Attempted Suicide," Ruth talks at greater length about her experience.

#### ○ Do animals other than humans commit suicide? Why?

Because it's impossible to interview animals other than humans about suicide, it's difficult to know for sure if what appears to be suicidal behavior is in fact suicidal behavior. But there are cases that look like the real thing. As explained by reporter Natalie Angier in a *New York Times* article dated April 5, 1994, "Biologists have identified numerous examples of creatures that sacrifice themselves for their kin, from termites that explode their guts, releasing the slimy, foul contents over enemies that threaten their nest, to rodents that deliberately starve themselves to death rather than risk spreading an infection to others in their burrow."

Then there's the issue of depression, which apparently isn't restricted only to humans. Kathy, the dolphin who played the title role in the 1960s television show *Flipper*, was moved to a small steel tank following the cancellation of her show, where she had little contact with people. Her trainer, Richard O'Barry, related the story of her death in his arms in a January

1993 article in *Smithsonian* magazine. "[She] committed suicide. I don't know what else to call it; it was deliberate. Every breath is a conscious effort for a dolphin, and she just stopped breathing. She died of a broken heart."

Another story, one that I found particularly compelling, was told in a *San Francisco Examiner* article dated April 13, 1994. Octavia, a fifty-eight-pound octopus, lived in captivity in the Cabrillo Marine Museum in San Pedro, California. With tentacles measuring twelve feet in length, she didn't have a lot of room to stretch out in her four-foot-deep, six-foot-by-six-foot tank. On a Sunday night when no one was at the museum, she lifted a drainpipe two inches in diameter out of its fitting, and the water drained out. She was found dead the next morning.

Perhaps lemmings are best known for what appears to be their suicidal behavior. The lemming is a furry-footed, six-inch-long rodent that lives in northern climates. Every four years lemmings migrate en masse in search of adequate sources of food to feed their growing numbers. Apparently they go off in a random direction, one following the other, in a straight line. No matter what the obstacle, they don't alter their migratory course, which can be suicidal, especially if a cliff or a large body of water gets in the way.

#### ○ What is suicidology?

Suicidology is the study of suicide and its prevention. The word was coined by Edwin Shneidman, who along with Norman L. Farberow conducted pioneering research in the 1950s and 1960s on the subject of suicide that challenged long-held assumptions.

o Who commits suicide?

Fathers, mothers, grandparents, children, siblings, friends, rich people, poor people, famous actors, big-city policemen, straight athletes, gay teens, old people, young people, black people, Hispanics, whites, Native Americans, schizophrenics and manic depressives, alcoholics, the clean and sober, healthy people, terminally ill people, those from stable families where there's never been a suicide, and those whose families are hopelessly fractured. No group is exempt no matter how you slice the human family pie. That said, people from some groups commit suicide in greater numbers than do people from others. In the questions that follow, I'll take a look at some specific groups and how their risk of suicide differs from the norm. I'll also try to tell you why, but that isn't always as clear as the numbers.

*V.S.A.* o Who is most likely to commit suicide?

\* White men aged sixty-five and older are the most likely to commit suicide. But in general, those more likely to commit suicide are older and male, tend to be isolated, suffer from some kind of mental illness such as depression or schizophrenia, and have drug and/or alcohol problems.

o Why white men aged sixty-five and older?

At first glance, you would think that in comparison to any other segment of the population over sixty-five, white men would be in the best position and therefore the least likely to commit suicide. When it comes to economic status, they are indeed in the best position. But after they turn sixty-five, white

men experience considerable loss in terms of their jobs, status, and health. All segments of the over-sixty-five population face similar challenges, but white men apparently have less experience coping with disappointments and setbacks, have further to fall in their status, and have fewer familial resources in comparison to other groups. For more information on suicide among those sixty-five and older, please see chapter 4, "Suicide and the Elderly."

o Is it true that more men than women commit suicide?

Yes. Of the approximate thirty thousand people a year who take their lives, twenty-four thousand are men and six thousand are women.

o Why so many more men than women?

This is one of those questions for which there's a lot of opinion and conjecture, but no clear answers. While far fewer women than men kill themselves, three times as many women as men try to kill themselves. Is this because more women than men want to die? Or is it because women are more likely to express their suicidal feelings than men but aren't usually as determined as men to actually kill themselves? Or is it that women are simply not as effective in killing themselves as men? Generally, women choose less lethal methods, like pills. But do they choose less lethal methods because they don't really want to die, or because they're less violent than men, or because they're more concerned with disfigurement, or because they have less access than men to guns?

\* These aren't the only possible explanations, but they are among those most commonly stated.

and hopelessness, which leaves them more vulnerable to suicide, particularly as they age and lose status.

- *Are people who have had a suicide in their family more likely to commit suicide? Does suicide run in families?*

Recently, I read in the newspaper a letter written to a national columnist by a woman who had lost several family members to suicide. On Christmas Day 1952 her sister committed suicide at age thirty-three. On April 8, 1992, her son committed suicide at age thirty-three. Two days later, her son's thirty-two-year-old wife committed suicide. And two months later, her son's mother-in-law committed suicide. Certainly, in this family, it appears that there is a more than coincidental pattern.

Another example is the family of writer Ernest Hemingway, whose father committed suicide in 1928 with a Civil War-era pistol. Ernest killed himself in 1962 by gunshot. His younger brother shot and killed himself in 1982. And one of his sisters also committed suicide.

As the son of a man who committed suicide, I have been concerned about this question ever since I first learned that those who have had a parent commit suicide are at greater risk of committing suicide themselves. That said, there is no clear agreement as to why family members are at greater risk of suicide. Grief and the depression that may follow a suicide (or any death, for that matter) are certainly contributing factors. Genetics may be involved as well, since depression and schizophrenia, which are leading factors associated with suicide, can be passed on through genetic material. Also, personality traits may be inherited that make a person more or less able to cope with life's challenges, and perhaps even self-destructive

colonial America, if you committed suicide, you could not count on a standard church burial. In Massachusetts, for example, the "Self-Murther" act, which was passed in 1660, stipulated, "If any person Inhabitant or Stranger, shall at any time be found by any Jury to lay violent hands on themselves, or be wilfully guilty of their own Death, every person shall be denied the privilege of being Buried in the Common Burying place of Christians, but shall be Buried in some Common High-way where the Select-men of the Town where such person did inhabit shall appoint, and a Cart-load of Stones laid upon the Grave as a Brand of Infamy, and as a warning to others to beware of the like Damnable practices."

In England during that same period, the deceased was tried posthumously in the coroner's court. If found guilty, as George Howe Colt explains in *The Enigma of Suicide*, the usual penalty was "property confiscation and burial at a cross-roads with a wooden stake through the heart." The only way to avoid this fate was for a jury to rule that the deceased had acted from insanity. The last recorded burial at a crossroads as punishment for suicide took place in 1823.

Colt notes that the colonies were more lenient. For example, he cites William Penn's charter to Pennsylvania in 1700, in which he recommended "that if any person, through temptation or melancholy, shall destroy himself, his estate, real and personal, shall, notwithstanding, descend to his wife, children, or relations, as if he had died a natural death."

#### o Why do people commit or try to commit suicide?

For those of us who have lived through the suicide of a loved one, this is the question that is just about guaranteed to haunt us for the rest of our lives. And even if we know some of the

specific reasons a loved one has taken his or her life, we're still left wondering why. Why did the person do it? Was it hopelessness? Was it the emotional pain of depression? What could it have been? And why didn't the person ask for help?

In answering this question, I'll talk about many of the reasons people kill themselves, from the personal to the political. But if you're looking for an answer that will satisfy your desire to know why your loved one chose to commit suicide, I'm afraid you'll probably be disappointed, because for most people, there is no satisfying answer.

As you read through the reasons that follow, keep in mind that although a reason may be listed here, its presence in someone's life is not necessarily sufficient reason for that person to commit suicide. For example, many people experience sudden loss, such as the death of a spouse, but don't commit suicide; yet for other people, who may already be struggling with depression, the death of a spouse could be the event that pushes them over the edge.

#### PSYCHOLOGICAL/PHYSIOLOGICAL REASONS

##### *Depression*

I'm not talking here about the everyday kind of depression we all have experienced. This is major, incapacitating depression—what the writer William Styron in *Darkness Visible*, his remarkable book about his own suicidal depression, calls “the despair beyond the despair.” It’s the kind of depression that is so painful it leads some people to take their lives. Styron writes, “The pain of severe depression is quite unimaginable to those who have not suffered it, and it kills in many instances because its anguish can no longer be borne.” For more on this subject, see the discussion of the question on depression later in this

chapter. I also highly recommend Styron’s eloquent and insightful book, in which he describes his descent into and recovery from a suicidal depression; it is listed in the appendix.

##### *Schizophrenia, Personality Disorder, etc.*

People who suffer from a variety of mental disorders have a higher risk of suicide.

##### *Alcoholism and Substance Abuse*

People who abuse alcohol and other drugs are at higher risk of suicide. Besides the personal and professional stresses they bring on, alcohol and substance abuse also impair judgment and allow people to act on self-destructive feelings they might not otherwise respond to in such a drastic way.

##### *Illness and Physical Infirmit*y

Physical pain, infirmity brought on by old age or illness, and terminal disease all lead some people to take their lives. Some of these people commit suicide because their pain is unbearable. Others are afraid of not being able to care for themselves, and still others are concerned about placing a financial, physical, and emotional burden on their families.

Some people who are terminally ill ask for and receive assistance in taking their lives. For more information on this topic, see chapter 8, “Assisted Suicide.”

##### *Revenge, Anger, Punishment*

After thirty years of marriage, Leslie finally got up the courage to ask her husband for a separation. “The fact is I knew in the first

months of the marriage that this was a mistake, but it took me a little while—and putting three kids through college—to finally make the move. I was always afraid my husband would do something crazy if we divorced, so I only asked for a separation." Leslie's husband moved out, and over the next several months they remained in contact and continued talking, although Leslie was firm about not wanting to get back together. "It was our thirty-first wedding anniversary, and I was feeling a little down. I came home from work, walked in the front door, and there he was sprawled on the entryway floor. There was blood everywhere. Do you think he was trying to tell me something? I try not to blame myself, because I know that's what he wanted."

Leslie's husband used his suicide to send a very definite and angry message. Other people use suicide or the threat of suicide in the same way: "If you won't do x, I'm going to kill myself." Or the thinking, particularly among young people, may go: "I'll kill myself and then you'll really be sorry." Ironically, if these people kill themselves, they won't be around to witness the punishment they've inflicted on their loved ones.

**FOR THE COMMUNITY, FOR THE  
GREATER GOOD, FOR A CAUSE  
*Sacrifice for Others or the Community***

A year ago I heard a story on the news about an elderly couple in Florida. She had Alzheimer's disease. He had severe asthma. Money wasn't a problem. They had \$10 million in the bank. In their note to their family, they explained that they knew they had enough money to be cared for but preferred that the money be spent on young people who could make things better for everyone. The couple went into their garage, got in the car, turned on the ignition, and died. The pastor at their church said they took "the high road to death."

This story reminds me of traditional Eskimo culture, where in lean times the sick and/or elderly went off on their own to die in order to conserve the community's limited resources and to ensure the community's survival. A more contemporary example is that of an unemployed parent who commits suicide knowing that the insurance money will assure the family of the financial support he or she cannot provide.)

Another example, which we may not think of as suicide, is that of a soldier who sacrifices his life in order to save his buddies, or a mother who throws a child out of harm's way knowing that she'll be sacrificing her own life in the process.

One more example is the story of a young man who killed himself at age twenty-seven. His mother wrote a letter to the editor of the *New York Times* in response to an article entitled "Quest for Evolutionary Meaning in the Persistence of Suicide." She wrote: "Peter, who was brilliant, left us a 60-minute tape, honestly describing his condition of pain, which began when he was 17. In the next 10 years he managed to do a tour in the Army, finish college, teach math in a Roman Catholic school in Guam and write three books for major publishers—while continually fighting the lure of death. He described his own condition for us, strikingly telling us he had 'a missing part,' he was 'a Rolls-Royce—but without spark plugs.' Yet underlying all of this in the last year of his life was his paralyzing fear that he would become violent. I have often wondered if my incredibly sensitive son killed himself to make sure this never happened."

**Politics**

Suicide is used on rare occasion to make a political statement, as it was by two men in their twenties in Korea in 1987. Both men were apparently distraught over the failure of opposition

leaders to unite behind a single presidential candidate and intended their acts of self-immolation as a protest.

Suicide bombers also use suicide to achieve political goals. For more on that subject, please read on.

### *Suicide Bombers*

These are people who sacrifice their lives in order to accomplish an assassination or widespread destruction of life and property for a political and/or military goal. Often they are motivated by the belief that in committing this act they will achieve honor and, depending on their religious beliefs, gain quick entry into heaven.

During the waning days of World War II, decades before they became relatively commonplace in the Middle East as a part of war and political struggle, suicide bombers played a role in the Pacific. Japanese kamikaze pilots, who were named after the "divine wind" that destroyed Genghis Khan's ships as they sailed toward Japan, crashed their planes into enemy ships, sacrificing their lives in order to disable or destroy their targets. As reported by the Associated Press in 1994, these attacks resulted in the sinking of thirty-four American ships and the deaths of 4,907 sailors—"a fifth of the Navy's casualties in

### *Social Custom*

For hundreds of years in India, it was customary—George Howe Colt refers to it as a blend of choice and coercion—for a woman "to throw herself on her husband's funeral pyre to prove her devotion." The practice is called *suttee*, and although it was outlawed by the British in 1829, it occurs on occasion to this day. (Colt, pp. 136–37)

### **SUDDEN LOSS, TRAUMA, OUTSIDE THREAT**

#### *Loss of a Loved One*

Whether it's the sudden death of a loved one or a best friend, or the breakup—or threatened breakup—of a marriage or relationship, some people are driven by loss to take their own lives.

In 1993, when football player Jeff Alm, a Houston Oiler, accidentally crashed his car into a freeway guard rail, killing his best friend, he shot and killed himself only moments later. As reported by the Associated Press, "Alm, apparently distraught, . . . took a shotgun from the trunk of his car and shot himself in the face."

Another example is that of a young woman in Queens, New York, who jumped from the sixteenth floor of her family's apartment house two days after her fiancé was murdered by a man who had been obsessed with her. Apparently it was the shock and grief over her loss that led to the suicide.

#### *Loss of Job, Economic Distress*

During hard economic times, when companies lay off employees or farms are threatened with foreclosure, some people, consumed by depression and a sense of hopelessness, see no way out of their predicament other than suicide.

#### *Sexual Orientation, Gender Conflicts*

It might seem a bit odd to place the topic of sexual orientation and gender conflicts (for example, men who want to be women and women who want to be men) in this section, but many of the problems experienced by gay, lesbian, bisexual, and transgender people have to do with the pressures and prejudices of

society. These added pressures and prejudices can result in psychological conflicts and depression as well as alcoholism and drug abuse—all of which put members of these groups, especially adolescents, at greater risk of suicide.

#### Public Humiliation, Scandal

On more than one occasion we've seen the headlines: So-and-So Public Official About to be Indicted Commits Suicide. One of those times the public official was someone I used to work for—the borough president of Queens, New York. I'd been his speechwriter briefly in 1984. Shortly after he was implicated in a bribery scandal, he attempted suicide and wound up in the hospital. I remember seeing all the negative press coverage after his release and thinking, *He's going to try again*. I could just imagine the screaming headlines intensifying his depression and making him feel even more humiliated and trapped by his situation. And, in fact, he did try again, this time putting a knife through his heart and dying on the floor of his kitchen.

Of course, it's not only public officials caught in scandals or in humiliating circumstances who feel trapped by their circumstances and see suicide as the only way out. They're just the ones we're more likely to hear about.

#### *Outside Threat*

All kinds of outside threats—including genocide, war, blackmail, and extortion—have driven individuals as well as groups of people to commit suicide.

Eve R. Meyer, the executive director of San Francisco Suicide Prevention, told me the story of her parents' escape from a concentration camp during World War II. When they were prevented by a guard from crossing the border from France

into Spain in their attempt to flee the Nazis, they decided they would kill themselves rather than risk being caught and returned to the camps and certain death. Ms. Meyer said, "I didn't learn this story until I was an adult. My brother told me how my father took my mother's hand and the two of them turned to my brother and grandmother and took their hands and said, 'We're not going back. We're going to walk into the ocean.' My brother, who was eight or nine, fought them, but they dragged him across the beach to the water's edge. The guard caught up with them and told them it was a mistake and said they could go through. My parents never talked about it."

Nearly two thousand years earlier, 967 Jews killed themselves at Massada, in what is now Israel, rather than submit to the Roman forces that had encircled their mountaintop fortress.

The most poignant contemporary story I came across in which an outside threat contributed to a suicide was that of Kiyoteru Okouchi, a thirteen-year-old Japanese boy who committed suicide by hanging himself from a tree in the family garden on November 27, 1994. Andrew Pollack of the *New York Times* wrote a compelling account of what led Kiyoteru to take his life. As Pollack reported, "For more than a year, four of his classmates had been demanding money from him, sometimes hundreds of dollars at a time. Once, when he would not comply, they held his head under water in a river. Another time they forced him to undress and left him in the gymnasium in his underwear." The young boy left behind a suicide note and a diary in which he gave a detailed account of the extortion and named his tormentors. Included along with the suicide note and his diary was a note to his mother promising to pay her back "the roughly \$11,000 he had taken to give the bullies."

o Do suicide notes offer any clues as to why people kill themselves?

It turns out that only about one in five or six people who kill themselves leaves a note behind. And even those who leave notes don't necessarily reveal anything that would be helpful in understanding what led them to kill themselves. As George Howe Colt writes in *The Enigma of Suicide*, "For many years researchers believed that notes held a key to understanding motivation for suicide, but several dozen studies have revealed little more than that suicide notes reflect the range of emotions of suicidal people."

That said, there are suicide notes that provide valuable insight regarding the motives or the circumstances that led to a suicide. For example, the thirteen-year-old Japanese boy I wrote about above left a note in which he explained how he had been subject to the bullying and extortion of his classmates. In his note he said: "They took money from me, including 1,000 yen my grandmother had given me and the money I planned to use for having my hair cut. I had to cut my own hair. I should have committed suicide earlier but did not for the sake of my family."

Included in an exhibition of suicide notes at a New York City gallery was one that also offered tragic insight into a child's suicide. As reported in the *New York Times*, the note said, "Dear Dad, Don't fell sory or sad. I lied and lied. I got an f in english because it was a 10th grade class. I carry on in school up in [heaven] I wonder if they have a football team up in [heaven] and I'll go look for Grampa and Granny. Happy Easter." The boy who wrote the note was only twelve, and he shot himself.

I didn't learn that my father had left a suicide note until my mother handed me a photocopy of it ten years after he died.

She found it tucked in a drawer and thought I'd be interested in seeing it. I was, although I was disappointed that there was no mention in the note of me or my sister and brother. In the handwritten note he talked about being in a lot of pain and how we'd be better off without him. This was not an easy letter to read, although the rest of it was about practical matters, such as legal documents and his savings account. The whole thing was remarkably dispassionate, especially given the monumentality of the moment. I don't know how I could possibly have done so, but I promptly lost the copy of the note and have never been able to find it. There are no other known copies, and the original was apparently misplaced shortly after my father's suicide.

Not everyone who leaves a message behind leaves it in the form of a note. Some people leave tapes, as did the comedianne Joan Rivers's husband, Edgar Rosenberg, when he committed suicide in 1987. According to an account in *People* magazine, he left two manila envelopes, one for Joan and one for his daughter, Melissa, in the Philadelphia hotel room where he took an overdose of Valium mixed with alcohol. "Each [envelope] was marked with three kisses—XXX. They found that in his meticulous way, Edgar was putting their affairs in order, sending them papers for estate planning, lists of the contents of the house, bank account numbers, his case of keys. . . . On tape cassettes were his personal messages."

o Why do young children attempt or commit suicide?

More than three hundred children a year, aged five to fourteen (three quarters of them male), take their own lives. Hundreds, perhaps thousands, more try, and with each passing year, as they choose increasingly lethal methods, more are succeeding. Many of the children who attempt or commit suicide

suffer from depression, often as a result of having been abused or neglected. Some try to kill themselves to join a loved one who has died. Others, like the Japanese boy mentioned earlier, are bullied or teased by their peers and see no other way out.

The Olympic diving champion Greg Louganis attempted suicide for the first time when he was twelve years old. Since early childhood Louganis had suffered from depression. At the time of the attempt he was feeling alienated from his adoptive parents and his classmates at school. What pushed him over the edge was the news from his doctor that he'd have to quit gymnastics because his already damaged knees couldn't take the continued pounding of his daily workouts. He said, "I'd hoped to compete in gymnastics at the Olympics one day, but now that dream was gone. . . . I went into my parents' medicine cabinet and took a bunch of different pills, mostly aspirin and Ex-Lax. Then I took a razor blade out of the cabinet and started playing with it over my wrist. I started to bleed, but I didn't go deep enough to cut any veins or arteries. It also turned out that I didn't take enough of anything from the medicine cabinet to cause myself harm. . . . Afterward, I was even more angry and depressed, because I didn't see any way out."

Louganis's depression went undiagnosed for years and contributed to two more suicide attempts in his teens and early twenties.

o *What role does depression play in suicide?*

Depression plays a tremendous role, but not just run-of-the-mill depression. Everyone has experienced plain old "normal" depression. It's awful. You feel melancholy. You lack energy. It's like having a bad cold, and, like a cold, it passes relatively quickly.

The kind of depression I'm talking about here is "major" depression or clinical depression, the kind that doesn't go away so quickly, lasting two or more weeks. According to the National Institute of Mental Health, fifteen percent of the people who suffer from this form of depression ultimately commit suicide.

Symptoms of major depression include a depressed or irritable mood, a loss of interest or pleasure in usual activities, changes in appetite and weight, disturbed sleep, motor retardation or agitation, fatigue and loss of energy, feelings of worthlessness, self-reproach, excessive guilt, difficulty in thinking or concentrating, and suicidal thinking or suicide attempts.

If you're experiencing this kind of depression or someone you love is in the midst of a major depression, do not ignore it. It is serious, and it requires more than kind words and warm milk. You need to find a mental-health professional who has experience in treating people suffering from major depression. Call your doctor or local community mental-health center to get a referral. Or call one of the local crisis centers listed in the appendix of this book. Major depression can be treated, so make that call and get help for yourself or someone you care about.

o *Is it true that people whose suicidal feelings result from clinical depression are at greater risk of suicide once they start treatment?*

This may sound crazy, but it's true. People who are severely depressed and suicidal may be so impaired by their depression that they don't have the energy or wherewithal to follow through on a desire to commit suicide. Once treatment begins

and the patient starts coming back to life—but before the depression and suicidal feelings are gone—there's the danger that the person will now have enough energy to act on his or her suicidal feelings. Mental-health professionals who treat major depression know this and closely monitor their patients. This is one reason it's so important to seek the help of a mental-health professional who is experienced in treating major depression. It's not enough to see your family physician for a prescription for antidepressants. Major depression isn't bronchitis, and there's no magic pill that will cure it.

○ Is schizophrenia a cause of suicide? *No.*

Schizophrenia, which is a type of mental illness, does not cause suicide, but approximately 10 percent of those who suffer from it eventually commit suicide.

○ What role does alcohol play in suicide?

Alcohol plays an enormous role in suicide. As the psychologist Paul G. Quinnett points out in his book *Suicide: The Forever Decision*, alcohol removes fear and exaggerates moods—good and bad. Under the influence of alcohol we're likely to think and do things we wouldn't when sober. That's one of the appealing aspects of alcohol: it can take us out of ourselves and give us the freedom to think, do, and say things we wouldn't when sober. Unfortunately, when it comes to acting on bad feelings, including suicidal impulses, alcohol is a particularly deadly lubricant. Studies have shown that around 90 percent of alcoholics and more than a third of nonalcoholics who commit suicide had been drinking prior to taking their lives. And then, of course, there are those people who use alcohol to

o Are there warning signs?

After her son's suicide, Carolyn read everything she could about suicide and discovered that there had been warning signs that she never picked up on. Determined that this would never happen to her other children, she kept a close eye on them for any signs of trouble. "I just about drove them crazy, because a lot of the signs are the kinds of things you might expect from any young person, suicidal or not—from problems with school to bad moods."

Not every moody or depressed young adult is suicidal. Nor is every high school student who suddenly starts getting bad grades necessarily thinking about ending his life. But it's important to pay close attention to moody or depressed young people, and to the following warning signs:

- Talking about wanting to die or making suicidal threats.
- Problems in school, at work, or with the police.
- Withdrawal from friends and/or family.
- A sudden change in personality and/or behavior.
- Giving things away, especially prized possessions.
- A significant change in sleep patterns or eating habits.
- A sudden lack of energy and/or enthusiasm for friends and activities.
- More aggressive and impulsive behavior (e.g., violent outbursts).
- A history of physical or psychological illness.
- Running away.
- An unwanted pregnancy.
- Drug and/or alcohol abuse.

- Rejection by a boyfriend or girlfriend.
- The recent suicide of a friend or relative.
- A sudden and extreme neglect of appearance.
- An obsession with songs, poems, books, or movies with suicidal themes.
- Previous suicide attempt(s).

This list is obviously very broad, and the vast majority of teenagers and young people who exhibit almost any of these behaviors—alone or in various combinations—don't attempt or complete a suicide. But some do, and because of that possibility it's important to pay attention, listen, and, if necessary, get help.

o How much of a factor is drug and/or alcohol use?

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Alcohol especially is a significant factor. More than half of all adolescent suicides and suicide attempts are associated with alcohol. In other words, the person who attempts or commits suicide has often been drinking immediately prior to the attempt.

o Does rock music lead teenagers to commit suicide?

Rock music does not lead teenagers to commit suicide. But if your child or friend is obsessed with songs of any kind that deal with suicide, you have reason to be concerned, because this could mean he or she is having thoughts of suicide.

o How much of a factor is the availability of firearms?

Guns are a huge factor and can turn an adolescent cry for help into a final act of desperation. For young people especially,

In terms of behavior, according to Shneidman, the person who is planning to commit suicide may give away "prized possessions, such as a medical student giving away a valuable microscope." Or the person may suddenly prepare a will. He or she may also behave differently than normal, changing usual eating, sleeping, work, and sexual patterns.

Shneidman describes as situational clues "traumatic events in a person's life, such as illness, the breakup of a relationship or the death of a loved one."

Not everyone who expresses a desire to end life does so verbally. Donna, a full-time mother of two young daughters, got a letter from her mother in which she talked about her wish to die. "Mom had been in and out of the hospital for drug and alcohol problems for years, so it's not as if I hadn't thought about the possibility of her accidentally overdosing. But until that letter, it really hadn't occurred to me that she would actually kill herself. Well, maybe it crossed my mind, but I didn't want to think about it. And it wasn't even that she said, 'I'm going to kill myself,' but she talked about being tired and how she would go to bed at night wishing she wouldn't wake up in the morning. Wouldn't that scare you?"

- *Can you give a detailed list of the warning signs?*

The following list is drawn from several different sources, particularly Rita Robinson's *Survivors of Suicide*. Keep in mind that most people exhibit some, or even many, of these warning signs at various points in their lives yet never go on to commit suicide. Others, however, do.

- Threats of suicide (e.g., "I'm going to shoot myself," "I don't want to go on," etc.).

- Preoccupation with death, including talk of hopelessness, helplessness, and/or worthlessness.
- Previous suicide attempts.
- Depression.
- Trouble with school or work.
- Alcohol and/or drug abuse.
- Risk taking.
- Isolation: withdrawing from friends and family.
- Personality changes and/or odd behavior.
- Difficulty with sleeping, loss of appetite.
- Moodiness, including anger and crying.
- Giving away prized possessions.
- Getting one's life in order, including the preparation or changing of one's will.
- The sudden appearance of happiness and calmness after a period during which some of the characteristics listed above were present.

- *Is there anything a doctor can do to find out if someone is at risk of committing suicide?*

Absolutely. People who are experienced in treating those who are suicidal can assess risk by first conducting an interview with the person who is believed to be suicidal. The information from that interview is then used by the mental-health professional to assess whether the person is suicidal and, if so, the severity of the danger. Current assessment techniques are more an art than an exact science, but they are an important way to begin identifying some of the people who are at risk.