

Studying Suicide in Modern Ireland: New Directions and Old Conundrums

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Introduction

Few activities in human life attract and hold both popular and scholarly attention as much as suicide. Western Moral Philosophy has for centuries found it a burden too heavy to put down. To be sure Christianity proscribed it (often severely), especially after Constantine institutionalized the religion, but a belief system founded on divine self-sacrifice, which beatified its early martyrs who almost always eagerly embraced their doom, and which advised self-abnegation, could never fit its ambivalence about the deliberate ending of the physical self into a straight-jacket of simple categorical rejection. The secular descendants of Moral Philosophy – some parts of medicine, at least what came to be called Psychology and Psychiatry, most social sciences, and, indeed, pretty much any branch of knowledge that made understanding the human subject (in its physical or moral being) its business – found in suicide its own conceptual limits. If the Enlightenment thinking about the fundamental aspect of the human person was true – unitary, rationally-calculating, drawn towards pleasure and avoiding pain, but most of all self-preserving – then everything from deliberate self-harm to unresistingly embracing one's certain doom, could only be set at the limits of reason. Thus, we have the default stance of suicide analysis: that the individual was not in possession of his or her right mind, *i.e.*, was somehow sick – physically, psychologically, and/or morally. And, of course, we have the corollary to this stance – that if this dis-ease could have been ameliorated, then no ending of life would have been contemplated and/or carried through.

Suicide and Social Explanation

This non-rightness of suicide, of course, explains its theoretical fecundity for that part of the Western philosophical tradition that wanted to modify the Enlightenment model of the individual. It was in suicide, for example, that Durkheim could find the most persuasive signature of the Social, understood as its own, self-generating order of reality. That this superorganic realm was superordinate to the individual could be proved, in his view, by how society could at times demand or, at other times, through its breakdown, allow, the dissolution of that individual. On this terrain, Durkheim argued, the Hobbesian individual needed to concede the presence of a greater power that could, like the sovereign, kill the body or, at the very least, fail to restrain its self-destructive urges.

It is hardly surprising, then, that analyses of suicide have tended to fit into fairly conservative

political agendas. Emile Durkheim is rightly credited in making suicide an object of social scientific study (as the 'Father' of Sociology), but as Lisa Lieberman (2003) points out, he was heir to several decades of francophonous work on suicide statistics that had already seen the ways that variability in suicide rates across time or across the population could be mobilized to focus broad anxieties about social change (and the supposed loosening of social mores) in particular, largely reactionary, directions.

At the same time, of course, there has always been a way of calculating suicide, within reason, a reckoning that is often an unwelcome ghost at the banquet of grief that the suicide prepares for his or her loved ones. First, there is the undeniable planning (and very often accompanying deception) inherent in many acts of suicide. Such preparation (and the seeming disregard for the consequences of the act) can be an object of strong moral critique. Ireland recently had this critique publicly produced by Dr James McDaid in 2002. While the now-infamous 'Selfish bastard' comment (see Mac Giolla Bhain 2008:ch 7) was fiercely critiqued from the standpoint of suicide as an 'obvious' manifestation of mental illness, and therefore not an object of moral choice, this construction of the suicide as the ultimate egoist did garner some support from the Irish public. At the same time, there are also those suicides that can be grimly acknowledged as principled protest, ones, indeed, that we grudgingly admire: historical figures, such as Socrates, many Romans who used to be an important part of moral instruction in the West, such as Cicero; even the dénouement of the fanatical defense of Masada (in which the Zealots engaged in mass murder/suicide to deny the Roman army their victory parade) have all been used in Western education at one time or another as moral examples – the triumph of moral principle over life itself.

Suicide and Ireland

Few people in Ireland are unaware of the so-called suicide 'epidemic' – complete with 'at-risk' populations (young males), in specific demographics (working class in rural and peri-rural settings), and generalized warnings alongside targeted interventions aimed at addressing this issue. There is an eerie familiarity in the form (and indeed in much of the substance) that these arguments take – the population at risk for schizophrenia and asylum committal in the literatures bemoaning the decline of rural Ireland in the 1960s and 1970s, for example, overlaps tolerably well with this same demographic (e.g., Brody 1973; Murphy 1975;

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Scheper-Hughes 1982). The same term, *anomie*, appears in both these explanatory frames. While Durkheim imbued this term with its specific sociological meaning – a disconnect between individual expectations and social realities – it appears in most Irish work as a synonym for devitalization. It is here that ethnographic engagement with suicide is stressed most productively, where the experience-near engagement with a human subject, who is perceived to have plans and motives, confronts an experience-distant explanatory term that conceived suicides as objects of forces largely beyond their understanding. In this case, the ethnographer can expect little help from the Psychologist, insofar as suicide is understood as an evident manifestation of severe mental illness. These studies do not pretend to resolve this issue, but they do explore this complex interface between agency and its lack.

The Papers

Garcia's contribution is drawn from her thesis '*Suicide and Self-Destruction Amongst 'the Lads': Expectations of Masculinity in Post-traditional Ireland*'. Suicide is presented as one of many risks of self-harm that are part of the lives of these 'lads'. Alcohol use and abuse, risky, potentially self-destructive behaviors (such as, reckless driving, often under the influence), and a seeming unconcern for the health consequences (physical or psychological) of their activities are all part of so-called 'lad culture'. Garcia did not attempt to construct a psycho-social autopsy of any one suicide but, instead explores local gendered understandings of risk and vulnerability that the self-directed violence of some of the 'lads' invokes.

Walker's paper is based on her work '*Suicide Among the Irish Traveller Community 2000-2006*'. This was the first nationwide count of suicides among the Irish Traveler Community. Conducted over seven years the study focused on the collection of testimonies from social workers from all over the country who were in contact with Traveler Communities. Walker presents interesting insights into the high levels of suicide after a death within the Traveler Community, especially during the time of funerals, and cultural specific death and grief rituals. She focuses on gender differences, the continuing problem of social exclusion and alcohol abuse.

Sheehan's essay is based on his PhD thesis, '*An Anthropological Exploration of 'Suicide' and 'Self-harm' in Blanchardstown, Co. Dublin*' (2003). This study was based on a collection of narratives from those bereaved by suicide, people with a history of self-harm, alongside the testimony of health professionals and coroners. For his paper Sheehan compared narratives of men and women, and explained the subtle differences in the concepts of death, risk, self-harm, and suicide, which were evident in these gendered narratives.

Bryan and Maycock move their analysis in a different direction, challenging the universalizing narrative of 'at risk' LGBT-identified youth as the

dominant frame through which young LGBT people's lives in Ireland are understood. Their paper seeks to trouble the assumption of an automatic relationship between LGBT identification and suicidality. They argue for a more nuanced analysis and interpretation of LGBT suicidality, as part of the need to recognise the diversity of LGBT lived experience.

All of these papers point out the strength of qualitative (especially ethnographic) approaches to the study of suicide, not just as a sort of supplement to the experience-distant sociological/public health analyses of suicide, but as a means of reimagining the field of study as such. Suicide is, ultimately, a decision made by a specific person in concrete social-historical circumstances. However impaired one might construct the decision-maker, the question of agency remains central in both the social determination of the category (separating it, for example, from death by misadventure), and the ways that society imagines intervening in future decisions of this type. Ultimately it is incomprehensible without a principled contextual understanding of communities and individuals, alongside the shifting meanings of key cultural concepts, such as gender, agency, and risk.

References

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