Critical Suicidology: Transforming Suicide Research and Prevention for the 21st Century
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A well-known problem among suicidologists is that population level risk factors identified from studies of the prediction of suicide are poorly associated with individual prediction. Consequently, we have many unanswered questions regarding how suicidality develops within the individual and how social context may contribute to suicidal behavior. Critical Suicidology presents an argument for qualitative analysis of the development of individual suicide risk couched within a sociocultural context. The authors posit that the field of suicidology has placed an overt emphasis on suicide as an intrapersonal psychological problem; a primary argument of this text is that historical and systemic oppression as a result of gender, race, ethnicity, or culture play a nontrivial role in the development of suicidal behavior and that practitioners should focus on these factors in treatment. The book is comprised of 13 chapters that use a poststructural philosophical lens to examine suicidal behavior in populations at risk for suicide deaths, such as indigenous peoples, LGBTQIA individuals, and individuals with multiple suicide attempts. The text also includes chapters on suicidal behavior in populations at heightened risk for suicide attempts but not deaths, including adolescents and adult females. Chapters in this text are broken into three sections; the first is designed to critique current prevention and research approaches, the second offers insider perspectives on suicidal behavior, and the third describes alternative approaches to suicide prevention and research based on qualitative and narrative methodologies. The authors, who include psychologists, social workers, sociologists, social justice advocates, education specialists, and individuals with lived experience, examine how historical, societal, and cultural factors may influence suicidal behavior. The multiple contributors to this book vary in their success in presenting this argument.

We were particularly impressed by chapter 3, describing the contribution of historical trauma in the suicide of native peoples (Wexler & Gone) and the case study included of a novel approach to culturally rooted suicide prevention in indigenous peoples of Nunavut, Canada (chapter 12; Kral & Idlout). In addition, two chapters in which individuals with lived experience share their perspectives on the obstacles they encountered in seeking help during their crises provide firsthand accounts of improvements mental health providers can make in their own practices. As such, Critical Suicidology could be a useful resource for clinicians, preventionists, or policy makers seeking to improve prevention or intervention for historically marginalized or at-risk populations. It should be noted that the book does not address suicidal behavior in middle aged or elderly males, two populations at a highly increased risk for suicide death. Although some may view this exclusion as a weakness, the omission seemed a deliberate decision on the part of the authors due to the book’s focus on suicide as it relates to systems of historical and societal oppression.

Critical Suicidology is less successful in informing suicide research practices. The weakest chapters review epistemological debates of the limitations of quantitative, “positivist” research methods used in psychological research of suicide, such as the difficulty in identifying social and historical mechanisms for increased suicide risk in quantitative approaches, while presenting an unrealistic emphasis on the utility of qualitative research in suicidology. In many chapters, the authors argue that researchers should completely abandon current quantitative approaches in favor of equally rigorous narrative and qualitative approaches. The qualitative poststructural philosophical analyses of suicide did not easily translate to the application of current psychological research practices in suicidology (e.g., hypothesis driven quantitative methods). For example, Dr. Rob Cover provides a compelling interpretation of LGBTQIA youth suicide via Queer Theory, arguing that suicide occurs as a result of systemic oppression catalyzed by a socially constructed gender binary. However, due to the lack of operational definitions or testable hypotheses offered through which to examine this phenomenon, the suicide researcher is left with few concrete leads to examine through empirical investigation. In contrast, chapter 5 (Fullagar & O’Brien) presents fascinating conclusions from
qualitative analyses of women who attempted suicide and presents a discussion on sociocultural factors that may be unique to female suicidality, thereby demonstrating the value of this work.

*Critical Suicidology* successfully informs culturally sensitive suicide prevention practices and can promote discourse around the social and historical context in which suicide occurs for at-risk populations. It could be an interesting text in suicidology courses to promote an understanding of inclusion and diversity in our field. However, this text falls short of its goal to revolutionize suicide research methodology.