The denial behind youth suicide

Richard Eckersley

This week's *4 Corners* program on ABC TV once again drew our attention to youth suicide. As is often the case with the media, it focused on the latest cluster of deaths, this time in Melbourne's south-east, and dwelt heavily on the 'human interest' of intensely personal tragedies and their impacts on families, friends and communities.

And so, as is also usually the case, the program missed the opportunity to explore the deeper dimensions of what is happening to young people's health and wellbeing. The failure is understandable. You won't get this perspective from psychiatrists and psychologists, for whom suicidal behaviour is an individual illness requiring treatment. You won't get it from governments, who take their cue from medical professionals.

To the extent that social explanations are offered, they tend to focus on structural changes in the family, education and labour market: conflict and breakdown, exclusion, disadvantage, joblessness. Too much blame is directed at parents, too much is expected of teachers, and too much emphasis is placed on medical interventions (although all have an important role to play).

It's more from the arts that a different understanding comes. As French Nobel Prize-winning writer Albert Camus commented: 'There is but one truly serious philosophical problem, and that is suicide. Judging whether life is, or is not, worth living amounts to answering the fundamental question of philosophy.'

Theo Padnos, an American prison teacher with a doctorate in comparative literature said of youth violence: 'In a world stripped of meaning and self-identity, adolescents can come to understand violence itself as a morally grounded gesture, a kind of purifying attempt to intervene against the nothingness'.

This also applied to violence against the self. Intentional self-harm (which can become suicidal) reflects a deeply human need to turn intangible suffering into tangible pain, to transform the passive experience of suffering into something we can actively control. As one young woman, whose body was criss-crossed with scars from self-inflicted cuts, revealed: 'When I saw the blood, I stopped thinking about what was happening inside. And I just focused on that, and that was really powerful: that something external could grab all of my attention and I could think about that, rather than what was going on inside my head'.

Australian novelist Ruth Park, in describing in her autobiography growing up in New Zealand during the Depression, wrote: 'Whatever hardship came our way was all on the outside. Inside we knew, without doubt, that Life was aware of us and somehow had us in its care'. She does not elaborate, but she is not talking specifically of God or religion; she appears to be describing a sense of intrinsic worth, spiritual comfort and existential confidence instilled by a web of influences: church, yes, but also family, community, school and nation.

These are all ties that modern Western culture, with its emphasis on materialism and individualism, tends to loosen (my own research showed strong associations between national youth suicide rates and measures of individualism). It can leave young people dangerously adrift, at the mercy of relentless (and ruthless) consumer pressures and the superficial, distorted and transient connections of the mass and social media.

It leaves too many young people stuck 'inside their heads', mixed up, struggling to make sense of their lives and to deal with a welter of emotions that becomes too confusing, too painful. The self is being hollowed out. Loneliness, isolation and self-absorption co-exist with constant, even obsessive, connection and social activity.

American literary scholar William Deresiewicz observes in a 2009 essay, 'The end of solitude', that the contemporary self wants to be recognized, connected, visible. 'This is how we become real to ourselves – by being seen by others. The great contemporary terror is anonymity.' His students have little time for intimacy, and no time for solitude, he says. There is no mental space that is not social.

Our cultural focus on the external trappings of 'the good life' increases the pressures to meet high, even unrealistic and inappropriate, expectations, and so heightens the risks of failure and disappointment. It leads to a constant need to make the most of our lives, to fashion identity and meaning increasingly from personal attributes, achievements, possessions and lifestyles, and less from shared cultural traditions and beliefs. It distracts us from what is most important to wellbeing: the quality of our relationships with each other and the world, which contribute to a deep and enduring sense of self-worth and existential certainty.

We struggle to understand the intangibility and subjectivity of what lies behind youth suicide - and young people's wellbeing more generally. Added to this are the multiplicity of other factors implicated in youth health problems, and the complexity of their interactions. At a personal level these include changes in diet, sleep, physical and outdoor activity, experience of nature, drugs, sex and relationships. At a societal level are the broader changes in the worlds of family, education, work, religion, leisure and entertainment, the natural environment - and an increasingly uncertain global future.

Modern Western culture - our collective worldview, values, beliefs and priorities - is a fundamental determinant of all or most of these things.

One specific influence raised by the *4 Corners* program was that of the social media on individual suicides and suicide clusters. Researchers have warned that sensational or detailed media coverage can contribute to suicide clusters, especially among adolescents. American psychologist Madelyn Gould, who has studied suicide clusters, was quoted by the BBC in 2008 as saying: 'It's like the first person who commits suicide becomes a sort of role model for those who come afterwards. And if you are vulnerable and depressed then the fact that someone has gone ahead and done it might be enough to tip the balance inside your mind. Suddenly, suicide becomes a realistic option.'

It seems plausible that social media like Facebook could have an even more potent role because of the more personal connection between people. Gould says that victims of cluster suicides are usually not best friends, but they know each other, or have heard of each other. Social media would greatly enlarge that pool. Certainly the suicide on which the program focused – that of a teenage girl who disclosed her growing distress to her 600 Facebook 'friends' – suggests this hazard. There was a sense that Facebook provided not so much a source of support as an audience before which her despair was played out.

Maybe it did both. New technologies often amplify both the good and bad in human behaviour. With the intended benefits also often come unintended harms. This goes for social media. The program showed local young people responding to the spate of deaths by setting up a Facebook page to assist their peers, with links to online sources of help. But it also hinted at Facebook's darker role in effectively 'turning up the heat' (as also happens with cyber-bullying).

Can the social media romanticise or glamorise suicide, especially for teenagers? Can they crowd out more intimate and supportive relationships? Have suicide clusters become more common in the last decade or two because of the growing importance of social media in young people's lives?

Youth suicide rates have fallen significantly in Australia since 1997 (although data quality is an issue with the trend). But suicidal behaviour and self-harm remain a concern, a part of a widely perceived crisis in mental health. While youth suicide is rare (284 deaths among 15-24-year-olds in 2007, a rate of 10 per 100,000), it remains the second biggest killer of young people, and it represents the extreme end of a spectrum of distress that affects many, many more. This distress contributes to more suicides in later years (the suicide rate is highest among those in their thirties).

Youth suicide has been on the political, health and scientific agenda for over 20 years. Yet, as a society, we still fail to understand and deal with it appropriately because neither governments, nor the health and education professions, nor the media will face up to what this existential predicament means and what is causing it.

It is an unwitting conspiracy that serves to maintain a social status quo increasingly hostile to young people and their wellbeing. Awareness of these matters needs to become part of parenting, teaching, public health - and of media reporting and political debate.

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See also:
Eckersley, R. 2011**.** Challenging accepted wisdoms about young people's health. *Croakey*, 22 April. http://blogs.crikey.com.au/croakey/2011/04/22/challenging-accepted-wisdoms-about-young-peoples-health-and-wellbeing/