Suicide and Society: The Sociological Approach

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Abstract:
Suicide is a worldwide issue with an increasing trend. Suicidal behavior and tendency to this behavior are becoming a part of postmodern humanity. This paper focuses on an analysis of the issue of suicide based
of sociological theories of suicidal behavior. These we divide based on the most influential work devoted to this issue *Suicide* from Émile Durkheim. The common denominator of the above mentioned authors is that they have conceived suicide as a social phenomenon condition- al to the level of social integration of individuals to society. We work with a hypothesis that suicide is an individual act which is carried out as a result of social factors and that suicide can be studied as a social phenomenon.

Various transformations in modern so- ciety today offer the main context in which to study the phenomenon of suicide. These transformations affect all areas of social life: culture; politics; values; lifestyle; consumption models; stratification; education; mobility. There is not a single area exempt from the transformation processes linked with modernization, globalization, and transition from the communist system to the post-communist one. The Europe of today has been experiencing considerable turbulence extending to all aspects of social life. Regardless of the political situation dominated by the political elite exercising rather vulgar and despotic forms of democracy, we are predominantly interest- ed in processes within the cultural and religious subsystems of society. We consider these subsystems to be pillars of stability and integrity of society as a whole. Therefore, every attack to weaken cultural and religious capital leads directly to the disintegra- tion of the whole system. The nature of the second demographic transition has brought profound changes in value orienta- tions and moral attitudes of today’s so- ciety. In the microspace of an individu- al it has become increasingly difficult to create one’s own identity; answer funda- mental existential questions; or create a meaningful horizontal and vertical world of relationships and coherent support sys- tem. Instead of an individual’s identity being formed in the process of primary and secondary socialization, it is often de- formed, having been influenced by de-so- cialization of family, school or peer envi- ronments. Mesospace of a community life has also suffered consequences caused by the lost community (*Gemeinschaft*) and modernization processes of the industrial and post-industrial society (Kardis, 2012).

**Sociological Theories of Suicide**

With the evolution of sciences in the Modern Age interest in suicides shifted from the religious and philosophical posi- tions to the humanitarian sciences and med- icine. Since 19th century we can talk about factual research of suicide in Europe. With development of sociology scientists stopped looking at suicide as an individual (psycho- logical) phenomenon but as a phenomenon which resulted from interaction of the individual and his or her social environment. Since the 1970’s interest of sociologists has been renewed but by the end of century re- search shifted to the field of medicine and general health (Douglas, 2015). Sociolo- gists Wray, Colen and Pescosolido consid- er Durkheim’s *Le Suicide Etude de Sociol- ogie* from 1897 to be a fundamental work of sociological interest in suicide. Based on that work they divide research of suicides to three chronological periods:

- Pre-Durkheim’s approach
- Durkheim’s work
- Post-Durkheim’s approach (Wray, Co- len, Pescosolido, 2017).
This paper used this approach in analyzing of sociological approach towards suicides.

**Pre-Durkheim’s Approach**

American Sociologist Richard Sennet claims that the view of the modern world on suicides is the result of Durkheim’s work, but there had to be other concepts upon which Durkheim built his work. By the end of 19th century European intellectuals dealt with issues of rising suicide on national levels. They found this was because of the breaking bonds with the agrarian way of life and the rise in one’s personal freedom. (Veit, 2017). I will devote this chapter to understanding of suicide in works of Italian Psychiatrist Henry Morsellini and first president of Czechoslovakia Republic Tomas Garrigue Masaryk.

In 1882 Morselli published his work *Suicide: An Essay on Comparative Moral Statistics*, in which he analyzes statistics of suicidal behavior in Europe and United States since beginning of 19th century. He concludes that the number of suicides increases faster than geometrical progress of natality and mortality. It is interesting that as a psychiatrist he was looking for causes of suicide in society that surrounds a person but he refused any psychological base for suicidal behavior. Into his thesis he applied Social Darwinism and survival of the fittest - modern man fights with his mind but modern age may confuse a person’s judgment and that’s when he feels weak and abnormal. Morselli claimed that suicide was a social-physiological phenomenon and not pathologic because it is part of society from birth. As prevention of suicidal behavior Morselli proposed development of correct thoughts which will help us reach our goal in life and reconsolidation of moral character (Wray, Colen, Pescosolido, 2017).

Except for political events Tomas Garrigue Masaryk was interested in sociological studies: In 1878, in Wien he vindicated his habilitation thesis *Suicide as a Social Mass Phenomenon*. It was his first scientific work and its aim was an analysis of suicide from sociological and religious-ethical points of view. Masaryk had seen a connection between an increase of suicide and crisis of modern society and claimed that suicide as a work of education, progress and secularization. Masaryk understood suicides in relation to happiness and unhappiness in human life hence it is the result of losing one’s purpose of life and is a manifestation of desperation. Masaryk also worked with Darwin’s theory of natural selection where mentally weaker individuals are losing the social fight. When dealing with the relation between religiosity and suicide Masaryk maintained the opinion that there was a higher number of suicides among Catholics than Lutherans. Masaryk saw a result in more liberal attitude of Lutherans towards modern age than strict Catholicism. As a tool of prevention for suicidal behavior Masaryk proposed a return to a religious life (Masaryk, 2002).

**Durkheim’s Work**

Sources of Durkheim’s philosophy can be found in philosophies of Rousseau, Montesquieu and in theories of August Comte. But Durkheim’s work is special because his theoretical knowledge has been applied by him in sociological practice and thanks to this the development of this scientific discipline occurred. The practical side of sociology is elaborated in his work *The Rules of Sociological Method* where he denotes the term social fact:

“Therefore these are forms of dealing, thinking and feeling that have remarkable character that they exist outside of individual consciousness. These forms of actions or
thinking don’t just exist outside of individual but they are also gifted with imperative and suppressive power with which they intrude themselves upon him whether he wants it or not. Stress is an important sign of these phenomena and proof of this is that it manifests itself right when I attempt to resist.” (Durkheim, 1926, p. 36).

Social facts are different opinions, approaches, attitudes, tendencies in society that influence humans with different intensity; while some direct him towards family life others can make him commit suicide.

As we have mentioned earlier, in 1897 Durkheim published *Le Suicide* in which he specified his theoretical knowledge from *The Rules of Sociological Method*. He offered the hypothesis that even if suicide seemed like an individual phenomenon it was the result of an impact of social facts hence collective factors. His publication was supported by extensive statistical data of suicidal behavior in Europe and proved that suicide was the result of social background of a given country. Based on his research he defines four types of suicide according to an individual’s integration to the society.

“At each moment of its history, therefore, each society has a definite aptitude for suicide.” (Durkheim, 1951, p. xlv)

The first type of suicide according to Durkheim is *egoistic suicide* which we talk about when a human is not able to integrate him or herself into a society or a group. Durkheim points out specific examples of how collectively lived religiosity significantly reduced levels of suicide. Religion had a beneficial impact not because of the specific nature of religious conceptions. Religion protects humans against self-destruction via tenets of protection and respect of one’s own life but the most important feature here is society. Society advocates a collective state of mind, supports the existence of faith and mutual practices. The stronger collective values are the stronger protection of tenets was hence protection of life. But the very contents of tenets are secondary. Integration of a person to society and awareness of collective life are important in prevention of suicidal behavior (Durkheim, 1951). Nowadays, a sad example of egoistic suicide are victims of cyber harassment who are humiliated and subsequently suppressed of social life with peers via social networks. The feeling that they don’t belong anywhere is obstructing them to talk about their problems with an adult (or any other competent authority) and the only solution they see to social suppression is suicide (The Roadrunner Theorist, 2017).

As the old saying goes “too much of a good thing” the same rule applies to the level of integration of humans to society. If she or he was bonded to a group in very unhealthy way and her or his existence only had meaning in connection with the group social pathologies occurred. In our case the result is *altruistic suicide*. A person was so hinged on the group that he was willing to take his own life for the group (Durkheim, 1951). As an example we can mention Sect Davidian or Peoples Temple (Vojtisek, 2010). We will work with the term altruistic suicide in the next chapter where I discussed closer Islamic suicide bombers.

The third type of suicide is called by Durkheim *anomic* which originates as the result of the decay of social values and norms in a given society. This violation of social harmony was manifested by crisis or prosperity one way or the other the result was loss of clear rules for lives of individuals. A person did not know how to behave; what rules to follow; feelings of desperation occurred. Suicide was the result of feeling of being left by society which makes no sense to him (Durkheim, 1951). Anomia also occurred in society as a result of natural catastrophes
after which a person lost literally everything and is not able to start again. Even if the society itself did not change a person’s living environment and sub-quivalent view of the world was devastated. An example can be the study of the *Centrum for Mental Health and Welfare* in Japanese city Sendai which was built three years after the devastating earthquake in Japan in 2011 (Sendai city mental health and welfare center, 2017).

The last type of suicide, according to Durkheim, is *fatalistic suicide* which he saw was caused in a society which oppresses individuals with too strict rules. That individual had the feeling of powerlessness because he knew he could not change any order of society by his actions and therefore chose the last fatal act (Durkheim, 1951).

### Post-Durkheim’s Approach

Sociological study of suicides continued after Durkheim’s work and in 1930 French Sociologist Maurice Halbwachse published the study *Les causes de suicide* deepening Durkheim’s conclusions. In 1933, Luise Dublin introduced a significant statistical work *To be or Not to be: a study of Suicide*. In 1947, Dr, Gabriel Deshaiese denied sociological determinants in his paper *Psychologie du suicide*. He defined mental illnesses as a main cause of suicide. Ten years later, American Psychiatrist Donald Jackson connected psychological and social determinants as factors of suicidal behavior in the same way as Andrew Henry and James Short do in their study *Suicide and Homicide: some economic, sociological and psychological aspect of aggression* (1954). In 1968, Austrian Psychiatrist Walter Pöldinger published the study *Die Abschatzung der Suizidalität* where with help of statistical data (Wray, Colen, Pescosolido, 2017). He analyzed the issue of suicide from sociological, medical and psychological views.

In present millennium suicides entered into popular literature through the work of French Journalist Martin Monastier in the book *History of suicides* which presents comprehensive publication of willing death in history of humanity. The most up-to-date comprehensive scientific publication was published in 2013 at the conference *Suicide in Eastern Europe, Commonwealth of Independent States, and the Baltic countries: Social and Public Health Determinants*.

How objective can sociology be under the influence of totality?

I can’t describe that objectively. The fact is that in his 1969 article *Developmental Tendencies of Czech Sociology* published in the *Czech Sociological Magazine* at the end Karel Gall says:

> “It is understandable that for Marxist Sociology that is based on the philosophy of dialectic materialism idealistic philosophical conceptions cannot be relevant which Czech sociology depended on- with the exception of few Marxist Sociologists.” (Gal- la, 2017)

*Czech Sociological Magazine* published a review of the book *Suicidality in Czechoslovakia from a demographic and sociological perspective* by Ladislav Růzicka which stated that in Czechoslovakia there were two forms of suicide data *Demographic Statistics and Ministry of Health*. In the article, the Reviewer concludes that “even in Soviet Union techno-economical and subjective aspects theft occurred.” (Potuzil, 2017). We must acknowledge to our comrades that they even admitted the possibility of the existence of suicide in the Soviet Union. Even though we must count with propagandistic adjustment of data of suicide in the countries with Communist Governments.

The most available statistical source of suicides in Slovakia after the creation of
the Slovak Republic is the National Centrum of Health Information. Relating to scientific studies in 1994 Czech Psychologist Josef Viewegh published *Suicide – a Psychologist’s Perspective* and subsequently in 1996 *Suicide and Literature* in which he views suicide in terms of centuries and adds samples of historical literatures. In 2001, Hana Vykopalova published *Socio-pathological Phenomena in Modern Society*. A significant work is the monography *Suicidality in the Population of the Czech Republic in the Period of Social Transformation* published by the Charles University in Prague containing valuable demographic and statistic indicators.

In 2007, a paper *Suicidal Behavior* was published by Clinical Psychologist Jana Kocourkova and Psychiatrist Jiri Koutek. Their research focused on the clinical view of suicidal behavior but they also gave therapeutic steps of prevention of this pathologic phenomenon in society. The topic of suicide reached research of science of religion in bachelor thesis of Anna Melanova from *Institute of Science of Religion of Masaryk University* in Brno. Her paper *Suicide in the Ancient and Medieval Christianity from a Theological Perspective* from 2011 analyzed sources of the Christian view on suicide; the view on noble death; views of the fathers of Church on suicide.

Suicide is a worldwide issue with an increasing trend. 28 countries of the world do have in process national strategies of suicide prevention that are focused mainly on prevention in the sphere of Mental Health. For suicide prevention to be successful there must be inter-disciplinary cooperation which includes medical and social situation of people. In the context of Slovak Society, desocialization takes on various forms and has many expressions within social, political, and cultural environments. A prime example of Slovak desocialization is the disintegration of the family. Sociological surveys confirm that the social disintegration in present day Slovakia reflects an ever-increasing secularization, and family life illustrates this truth in many ways. Three important examples are 1) the increased availability and effectiveness of contraceptives, 2) the weakening of informal cooperative norms which create social capital, and 3) the decrease in the number of marriages. These indicators attest that the disintegration of family life is a consequence of the shift in values toward a postmodern, individualistic culture. It is quite troubling that Slovak Society – not to speak of Western societies at large – has succumbed to postmodern ideals in which the values of individualism take precedence over the values of altruism (Fforde, 2010).

The Anomic Society in which we live individualizes and a person can choose who he or she is going to be and where will each belong in the pluralism of ideas. Since nothing is right nor wrong there is no table point in the time of crisis. Suicidal behavior and tendency to this behavior are unfortunately becoming part of postmodern humanity. Despite that in Slovak Society the taboo exists towards suicides there is no common discussion and suicides are pushed to the edge of interest and are being called *mad men*.

References: