

PSYCHOLOGY RESEARCH PROGRESS SERIES

Suicide and the Creative Arts



*Steven Stack
David Lester
Editors*

NOVA

Psychology Research Progress Series

SUICIDE AND THE CREATIVE ARTS

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Suicide and the Creative Arts

Steven Stack and David Lester (Editors)

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Psychology Research Progress Series

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**STEVEN STACK
AND
DAVID LESTER
EDITORS**

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Dying
Is an art, like everything else.
I do it exceptionally well.

Sylvia Plath

CONTENTS

The Contributors		ix
Chapter 1	Introduction: Issues and Summaries of Chapters A Summary of the Chapters	5
Part I:	Painting and Traditional Visual Arts	13
Chapter 2	Suicide and the Arts: From the Death of Ajax to Andy Warhol's Marilyn Monroe <i>Karolina Kryszinska</i>	15
Chapter 3	The Suicide of Ajax: A Note on Occupational Strain as a Neglected Factor in Suicidology <i>Steven Stack</i>	49
Part II:	Suicide in the Movies	55
Chapter 4	Suicide in Movies: Gender and Choice of Suicide Method <i>Steven Stack and Barbara Bowman</i>	57
Chapter 5	The Legacy of Lucretia: Rape-suicides in Art, 509 BC - 2008 <i>Steven Stack and Barbara Bowman</i>	63
Chapter 6	Suicide Films about Adolescents <i>Burcu Sevim</i>	79
Chapter 7	Pain and Altruism: The Suicides in John Wayne's Films <i>Steven Stack and Barbara Bowman</i>	93
Part III:	Suicide in Literature	111
Chapter 8	Suicide Motives in 61 Works of Popular World Literature and Comparison to Film <i>Steven Stack and Barbara Bowman</i>	113
Chapter 9	Suicide in Detective Fiction <i>Fred Mench and Lisa Honaker</i>	125

Chapter 10	Suicide in the Opera <i>Beverly Vaughn and David Lester</i>	137
Part IV:	Understanding Suicide through the Arts	147
Chapter 11	Suicide in Literature <i>David Lester</i>	149
Chapter 12	The Psychodynamics of Suicide in Sophocles's Plays <i>David Lester</i>	159
Part V:	Suicide in Artists	167
Chapter 13	Suicide in Artists: National Epidemiology <i>Steven Stack</i>	169
Chapter 14	Suicide in Creative Women <i>David Lester</i>	189
Chapter 15	Vincent van Gogh <i>Maurizio Pompili</i>	201
Chapter 16	Artist Suicide in the Cinema <i>Steven Stack and Barbara Bowman</i>	215
Part VI:	Contagion	229
Chapter 17	Copycat Effects of Fictional Suicide: A Meta-analysis <i>Steven Stack</i>	231
Chapter 18	Gloomy Sunday: Did the "Hungarian Suicide Song" Really Create a Suicide Epidemic? <i>Steven Stack, Karolina Kryszinska and David Lester</i>	245
Chapter 19	The Kabuki Effect <i>Karolina Kryszinska and David Lester</i>	253
Part VII:	The Creative Arts and Psychotherapy	257
Chapter 20	Poetry as Therapy: The Life of Anne Sexton <i>David Lester and Rina Terry</i>	259
Chapter 21	Masked Depression and Suicidal Ideation in the Drawings of Schizophrenic Patients <i>Dalia Merari</i>	271
Part VIII.	Conclusions	299
Chapter 22	Future Work: Points of Departure and Data Sources <i>Steven Stack and David Lester</i>	301
Index		311

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Chapter 1

INTRODUCTION: ISSUES AND SUMMARIES OF CHAPTERS

Why study artistic depictions of suicide? The visual arts including paintings, sketches, illuminated manuscripts, wood cuts, photographs, prints, sculptures, and others, as well as literary forms including novels, plays, poems, diaries, autobiographies, and short stories, can offer insights into the nature and causes of suicide. Art also has some direct practical applications to suicide prevention. Drawings and other art creations of suicidal patients can be used as assessment tools. Artistic activity can function as an effective form of occupational therapy for patients. Artistic work itself has been thought of as a life-saving behavior for some suicidal artists. Artistic depictions of suicide can also have a contagion effect, causing suicides among members of the real-world audience. Guidelines are still needed for institutions such as the motion picture industry for minimizing possible copycat effects of suicides in feature films and other artistic displays of suicide. Perhaps one of the most important reasons for studying suicide art is for insights into the motives for suicide.

ART SUGGESTS MOTIVES FOR SUICIDE

Artists portrayed many motives for suicide long before the rise of the science of suicidology in the 20th Century. As we shall see, motives including social factors such as death of a loved one, honor, economic strain, and betrayal in love have roots in many historical artistic products. Sophocles's plays, dating from 2,500 years ago, contain several motives that are still found today. Modern psychiatric motives for suicide including substance abuse and depression were portrayed long before the emergence of psychiatry. Further, many of the early theorists on the causes of suicide, including Freud, Horney, Laing and Stekel, were significantly influenced by the writings of artists (Deats & Lenker, 1989). In his letters to an artist friend in Vienna, Freud stated that everything he had learned was to be found in the layers of meanings in his friend's art, a product of the profound intuition of his friend (Freud, 1961, pp. 344-345). Dostoevsky's *The Gambler* portrayed suicidality in the context of pathological gambling nearly 100 years before the American Psychiatric Association declared pathological gambling to be a psychiatric disorder in 1980. It is plausible that additional motives for suicide are contained in artistic works which have been overlooked by

contemporary suicidologists. For example, strict adherence to the norms of the Southern subculture of honor drives the suicide of William Faulkner's character, Quentin Compson, in *The Sound and Fury* (1929). This particular subculture has not been subject to rigorous research as a risk factor for suicide.

Film, a widely consumed art form, has been neglected in work on suicide in art. This omission may create a bias in the generalizations of some recent works on suicide art history. For example, both existing book length treatments of suicide in the pre-film visual arts (Brown, 2001; Cutter, 1983) see a transition from portrayals of suicide as heroic before the birth of Christ to portrayals of suicide that are non heroic or pathetic in the post renaissance period. Cutter (1983, p. 111) argued that the heroic theme in paintings ended in 1844. However, the historical trends in the depictions of motives for suicide may vary among art forms. Heroic suicide is alive and well in a newer visual art form, film. An argument can be made that film images of suicide have emerged as the leading artistic format for the presentation of suicide images, replacing paintings and related venues perhaps a century ago. The history of suicide in art needs to be expanded to include a century of film. Possibly we are actually in a period which has returned to heroic depictions of suicide.

Figure 1 juxtaposes the portrayal of heroic suicide over two millennia of art, one depiction from an event in 30 B.C., and another from an event occurring in 1945. On the top is one of the oldest and most frequently painted narratives of heroic suicide, Cleopatra. This Queen of Egypt had just been captured after her army had been defeated by the Romans. She was to be brought back to Rome by her captors. In order to avoid dishonor, public humiliation and possible execution by her enemies, she cheated them through suicide. Her method was to allow herself to be bitten by extremely poisonous snakes which she kept as a tool for suicide if it ever became necessary.

On the bottom of Figure 1 is the suicide scene from a depiction of officer suicide at the end of the battle on Iwo Jima, 1945, from *Letters from Iwo Jima* (2006), directed by Clint Eastwood. The Japanese commanding officer seeks a suicidal end. It is clear that the Americans have won the battle for the island. He has also been severely wounded by shell fragments. He manages to rise to a kneeling position and orders his assistant to cut off his head with his sword, an act supported by his cultural codes. Although this portrayal occurs two millennia later, like Cleopatra, he commits suicide out of honor and an allegiance to a military code. His suicide is not due to long-term depression or other common, widely used individualistic explanations of suicide.

Altruistic-oriented suicides are common in American film and now include portrayals of the acts of suicide martyrs/bombers, a variety of altruistic suicide that is often difficult to fully comprehend using dominant psychiatric explanations of suicide. Heroic portrayals of suicide are not dead. Nearly one in five American feature films employ heroicism and/or a related theme of altruism (suicide for the benefit of the group), as a driving force behind suicide.



Figure 1. Heroic suicide over 2 millennia. The Death of Cleopatra (30 B.C., at top), Rapheal Sadeler, 1575-1632, British Museum. (In the background her servants view her body). Letters from Iwo Jima (2006, Warner Brothers, Director: Clint Eastwood)(1945, below). The Japanese commander requests assisted suicide by the sword of his assistant.

As we shall see, the history of suicide in art, especially if film is included, may be subject to continuities as well as changes in the motives for suicide. While the visual arts may have drifted away from certain causes of suicide, such as heroicism, these causes may actually live on in other art forms including film and opera. The present volume stresses a holistic approach to the study of suicide in art. Patterns in one art venue may be both similar and different to those in other venues. Hence, caution needs to be exercised in making generalizations on the basis of one or a few modalities of artistic creations.

ART PRODUCES SUICIDE CONTAGION EFFECTS

A second broad reason for studying art is that portrayals of suicide in artistic works may, under some circumstances or contexts, trigger imitative or copycat suicides in others. For example, an analysis of the rise in the frequency of suicide in American feature films over a half-century documented that they predicted the rise in youth suicide (Jamieson, 2001). Analysis of which types of portrayals may trigger copy-cat suicides, as well as which

varieties of depictions might deter suicide, is of key interest in the prevention of suicide. The present media guidelines of the World Health Organization (2008) cite 28 evidence-based studies on the contagion effects of news stories. However, given a relative lack of research attention to suicide portrayals in film, no specific guidelines for the film industry have been developed.

If media depictions of suicide stressed negative definitions of suicide (e.g., disfigurement of the body, that suicide is a waste of life, that only the foolish suicide), then the risk of suicide should decline. A meta-analysis of over 400 findings from copycat research on media effects on suicide in the real world confirmed this hypothesis (Stack, 2005). News stories emphasizing negative definitions of suicide were apt to reduce, not increase, suicide. The same could be conceivably true of art. If film, the major mass producer of suicide images in the modern world, contained enough negative definitions of suicide, it is plausible that the suicide rate might decline. At present, there are relatively few strong negative portrayals of suicide in feature films in the United States.

ART DEEPENS OUR UNDERSTANDING OF SUICIDE

While many of the basic causes of suicide are known, the level of understanding of these causes varies. The better artistic depictions of suicide can tighten up or deepen understandings of suicidal behaviors and careers over the life course. Suicide art can express a cause or a range of causes of suicide, including survivor reactions to the event, in a holistic fashion. As such, artistic depictions of suicide, especially in their narrative forms, can be used as a teaching or learning tool. Students, professionals, researchers and the general public can turn to the better artistic portrayals of suicide in art to learn about the nature and causes of suicide. Some work is already available on teaching about mental illness through art, particularly the movies (Wedding, Boyd & Niemiec, 2005). The present volume offers some leads on how art can also be used for teaching and learning about suicidality. While the basic linkages between many risk and protective factors for suicide are well-known, the specific ways in which they combine with other risk factors, life events and other conditions, such as lack of protective factors, are not as well understood. Of course, art can also increase public misunderstandings about the nature of suicide. One needs to be selective in making recommendations on using art as a teaching tool.

ART SHAPES AND REFLECTS PUBLIC ATTITUDES TOWARD SUICIDE

Cutter (1983, p. x) argued that art has more an effect on the attitudes about suicide among the public than do scientific works. The images and narratives found in art capture the attention and imagination of the public in a way that the written scientific article or treatise cannot. Art can be used as a rough index of popular opinion about suicide. This includes attitudes concerning the desirability of and causes of suicide. Further, besides reflecting public opinion, art can conceivably change public opinion. For example, Cutter made a convincing argument that efforts at suicide prevention can fully succeed only when artistic

images are reshaped from the current ambivalent portrayals to ones providing consistent anti-suicide messages.

ART IS ENJOYABLE

Various art forms, from detective novels to feature films to paintings, are to be enjoyed. The narratives and stories about the events leading to suicides have a human interest quality about them that is not as applicable to the relatively dry treatments in scientific venues. Members of the audience of suicide narratives in art can identify more easily with the characters in the stories than the readers can identify with hypothesis testing in quantitative scientific papers. Given the widespread enjoyment and identification functions of art, it is possible that art has shaped public understandings of suicide as much or perhaps even more than the scientific study of suicide.

A SUMMARY OF THE CHAPTERS

The chapters in the present volume are a mixture of original and modified versions of previously published articles. They are mostly original ones written expressly for this volume.

Part I: Painting and Traditional Visual Arts

Our book is divided into eight parts. Part 1 focuses on a historical analysis of the oldest art forms, the visual arts including paintings, prints, sketches, and sculpture. In Chapter 2, Karolina Krysinska traces the forces that shaped artistic portrayals of suicide in these venues over three millennia. She organizes much of the discussion around six themes in suicide art derived from Cutter (1983). Three themes have dominated much of the art of suicide from antiquity through the renaissance: heroic, stigmatized (villain), and irrational (person has temporarily gone mad). Since the 19th Century, there have been three related themes: depression, ambivalence, and a cry for help. Examples of the first three include Cleopatra(heroic), Judas(villain), and Ophelia (the latter is driven to a state of insanity by the cluster of traumatic events including the sudden death of her father, who was murdered by her lover, Hamlet). Krysinska also considers a biographical approach: how the suicide of the significant others of artists affect their artistic products. The suicide of Carles Casagemass, Pablo Picasso's best friend, led to Picasso's well-known blue period and a collection of paintings commemorating his friend's suicide. The power of art, which contributes to which artistic representations become popular, is illustrated by the current banning of some depictions of suicide bombers/martyrs. For example, an exhibit of the painting by Dror Feiler, *Snow White and the Madness of Truth*, was closed in Sweden in 2004 after protests by the Simon Wiesenthal Center. The painting depicts Islamic Jihad member, Hanadi Jaradat who killed herself and 21 others in Haifa.

The utility of the narratives associated with these visualizations of suicide is illustrated in Chapter 3 on the suicide of Ajax. Often the stories about suicide contain causes which have

not yet been systematically explored in research studies on suicide. Steven Stack takes one of the oldest of these portrayals, that of Ajax, the ancient Greek warrior, and determines if the motive for Ajax's suicide, occupational strain, holds up using current data. Curiously, Ajax's motive for suicide, being passed over for promotion, has been neglected in suicide studies for 3,000 years. Using data on 18,000 deaths, Stack finds that job demotions, a closely related form of occupational strain, is the second most important predictor of suicide today (of 16 predictors tested). Art often contains insights into motives for suicide that can help scientists to improve their understanding of the reasons for suicide.

Part II. Suicide in the Movies

Movies constitute a largely unexplored area in the art of suicide. Watching movies has become the number one leisure pursuit in the United States, but relatively little is known about how they portray suicide and to what extent they affect suicide attitudes and behavior. Since previous books on art and suicide (Brown, 2001; Cutter, 1983) do not cover film, or call for its study in future works, we devote considerable attention to suicide in the movies.

In Chapter 4, "Suicide in movies: Gender and choice of suicide method," Steven Stack and Barbara Bowman suggest that suicide films may affect choice of suicide method. It has been known for a century that men are more apt than women to choose guns as a means for suicide. However, the reasons for this are not fully clear. In an analysis of over 1,000 suicides in a century of film, Stack and Bowman demonstrate that men are far more likely than women to be portrayed as using firearms for their suicides in the movies. Through social learning and the socialization process, men may learn that firearms are the culturally acceptable method of choice for suicides among males. Hence, the analysis of patterns regarding aspects of suicide in film can contribute to our understanding of suicide in society. Herein, the authors contribute a new, supplemental explanation of the gendered nature of choice of highly lethal suicide methods in the real world.

In Chapter 5, "The legacy of Lucretia," Stack and Bowman note that, while rape victimization is a rather neglected risk factor in scientific research on both females and (especially) males, it is an important risk factor for suicide. The neglect of rape in studies of suicide is not the case, however, in art history. In the history of painting, Lucretia, a rape victim from 509 B.C., has been the most frequently painted suicide. Has rape been largely ignored in film as it has largely been in suicide studies? Stack and Bowman test the possibility that the rape-suicide theme lives on in contemporary film and find that Lucretia left a legacy extending into narratives in over a century of suicide movies. The core of the chapter focuses on aspects of 44 rape-suicide movies. A qualitative analysis finds mixed evidence for the extent to which the rape-suicides in film follow aspects of the social contexts of Lucretia's rape-suicide.

In Chapter 6, "Films on adolescent suicide," Burcu Sevim describes the common developmental issues facing adolescents and then illustrates how aspects of these problems are portrayed in a set of eight films from the world cinema. Included are the five suicides in *The Virgin Suicides* (1999). While complex, the causes of the suicides of the five sisters included over-protective parents who isolate their daughters from the outside world, locking them inside their house, after a sexual transgression.



Figure 2. *The Virgin Suicides* (1999, American Zoetrope, Director: Sofia Coppola). The police discover the suicide by car exhaust of Lux Lisbon, the last of the five sisters to suicide.

In Chapter 7, “Pain and altruism,” Stack and Bowman apply a biographical approach which takes suicidogenic conditions and values from the actor’s own life as predictors of suicide motives in his films. For example, shortly before his death, John Wayne was in terrible pain from stomach cancer and asked twice for his revolver in order to end his own life. This was preceded by over 15 years of bouts with pain from other cancers and surgeries. The suicides in Wayne’s films, in turn, are over three times more apt than other films to present chronic, excruciating pain as a cause for suicide. Significantly, Wayne commits suicide in his last film, *The Shootist* (1976), as a result of intolerable pain from cancer.

Part III. Suicide in Literature

Chapter 8 by Stack and Bowman on popular world literature provides the first systematic overview of the motives behind the 104 suicides in 61 popular works of world literature (those with *Cliffs Notes* guides). Further, to assess the impact of themes in world literature on film suicides, 1,217 suicides in film are also analyzed. The analysis finds that the motives in modern film largely reflect those in world literature. For example, altruism or heroicism drive 17% of the suicides in world literature compared to 18% in film. Relationship problems including adultery, betrayal and divorce are found in 34% of the suicides in world literature and also 34% of film suicides. Economic strain, cheating the executioner (committing suicide to avoid punishment), and psychiatric morbidity (e.g., depression, substance abuse) do not differ between literature and film. However, literature is significantly different from film on one motive - death of a loved one - where a full 21% of the suicides in literature emanate from this stressor compared to just 7% of those in the movies. Psychiatric morbidity, while stressed in contemporary suicidology, does not appear as a dominant predictor of suicide in either popular world literature or film.

Currently there are over 5,000 detective story novels in print and annual sales top a half billion dollars. The suicides in this popular literary venue often express a theme found in analyses of suicide notes: the wish to kill. Of the 51 detective story suicides analyzed by Fred Mench and Lisa Honaker in Chapter 9, 14% are suicides staged as murders, often to implicate someone the victim hated. Other motives shared by the suicides in this set of narratives are emotional pain (24% of the suicides) and incurable illness (12%).

Perhaps the artistic venue that carries the highest incidence of suicide is that of the opera. In Chapter 10, Beverly Vaughn and David Lester report that 27% of the 104 most widely produced operas contain suicides. Unlike suicide in the real world, suicide in opera typically involves female victims (58%). The female suicides tend to be motivated by unrequited love and/or intense rejection by a lover. In addition, many are portrayed as suicide pacts where a woman suicides due to the death of her lover. Many of the operas are set in the distant past with portrayals of heroic suicides of women such as Dido, Cleopatra and Lucretia, as well women committing suicide after the deaths of their lovers as in *Pyramus and Thisbe*, and *Romeo and Juliet*. A reliance on such old narratives might help explain the preponderance of female suicide and their motives in opera today.

Part IV: Understanding Suicide through the Arts

A principal reason for reading and observing the arts is to deepen one's understanding of suicide and the process or development of the suicidal character. David Lester in Chapter 11 provides an overview of ways in which suicidologists can use literature and suicide. Suicides in literature can offer illustrations of psychological and psychoanalytic explanations of suicide. Furthermore, in the biographical or autobiographical approach, the works of a suicidal author or artist can offer clues to the nature and causes of their own suicidal behavior. In addition, literature can be used to understand social or cultural predictors of suicide. In the latter case, Lester offers his own analysis of the link between the seven suicides in Isben's plays and Norwegian culture.

In Chapter 12, David Lester assesses the nature and causes of three of the most famous suicides in world literature: Jocasta, Haemon, and Antigone in the plays by Sophocles. As pointed out by Lester, many of the motivations for suicide that have played out over the subsequent 2,500 years after Sophocles plays, both in art and scientific treatments of suicide, are contained in these suicides. Suicide motives depicted by Sophocles include trauma or grief over the death of a significant other, shame over deviant behavior (incest), reunion fantasies, blocked anger, and suicide to escape suffering.

Part V: Suicide in Artists

Part V of the volume turns to a focus on research regarding suicide in artists themselves. Artists as an occupational group tend to have a higher than average risk of suicide. Why this is the case, however, has not been systematically researched. Much of the evidence for a high incidence of suicide and mental disorders among artists comes from case studies of famous artists (e.g., Virginia Wolff and Vincent van Gogh). Research is needed as to the

extent to which work on famous artists is applicable to the much larger numbers of ordinary artists.

This section opens with Chapter 13, the largest study of American artist suicide to date, 646 cases over an eight-year period. It includes all artist (as well as nonartist) suicides in a national sample of deaths in the United States. In this chapter, Steven Stack develops a supplemental explanation of why artists in general do have a higher than average risk of suicide. In many instances, the specific occupational world of artists is a client-centered occupation in which the worker is dependent on clients. For many artists, work involves short-term contracts and other insecurities such as a high incidence of part-time work. As such, artists share a higher than average suicide rate, as do other client-centered/dependent occupations. As anticipated, not all subgroups of artists are at an enhanced risk of suicide, perhaps because not all groups are subject to the same level of client-centeredness.

While women tend to have a significantly lower suicide risk than men, it is not fully understood how the pathways to suicide among women differ from those among men. In Chapter 14, David Lester analyzes the deaths of six famous female artist suicides and compares them to a control group of six famous female artists who died from other causes. The key difference seemed to be that affective disorders are more common among artists who commit suicide than among artists dying natural deaths. Four of the suicidal women had such a disorder, compared to none of the females dying of natural causes.

Detailed case studies of famous artists can offer further details and understanding of the development of suicidal careers. In Chapter 15, Maurizio Pompili reviews many of the previous explanations of Vincent van Gogh's pathway to suicide. Consideration is given to his heavy drinking, his argument with Gauguin in 1888, his hospitalization, his self mutilation, his repeated failures at achieving intimacy in personal relationships, materials from his personal letters, and insights from van Gogh's funeral in July 1890.

In Chapter 16, Steven Stack and Barbara Bowman provide the first analysis of patterns in the portrayals of the suicides of artists in feature films. Drawing on the files from their Hollywood suicide project, the authors compare the psychiatric oriented motives behind the suicides of 104 artists in film to those 1,196 film-suicides of persons in other occupations. Artist suicides in the movies are found to be over three times more apt than nonartist suicides to be portrayed in terms of depression, alcoholism, and related psychiatric motives. Possibly this is driven by the popularity of famous artist suicides such as that of Vincent van Gogh, Sylvia Plath, and Virginia Wolff which are typically defined in terms of psychiatric motives.

Part VI: Contagion

Part VII of the book turns to copy-cat or contagion effects of publicized artistic portrayals of suicide. The research base on this general issue is still relatively thin. However, related phenomena that have been studied more thoroughly suggest that movies may play an important role in pathways to suicide. For example, a meta-analysis of 40 studies on smoking behavior among youth determined that the greater the reported number of films seen in which the stars smoked, the greater the odds that youths would initiate and maintain their smoking behavior (Charlesworth & Glantz, 2005). The number of movies watched was often more important than other contributing factors including peer and parental smoking behavior. The methodology underlying these studies is a measure that is comprised of the number of movies

that youths have voluntarily watched on their own time that have characters who smoke in them. It seems probable that persons who voluntarily watch a large number of movies in which the characters commit suicide may be at enhanced risk of suicidal behavior. However, research using this important insight from smoking initiation research has yet to come to suicide studies.

In Chapter 17, Steven Stack provides the first meta-analysis of social science research on possible copycat effects of fictional portrayals of suicide. Fictional depictions of suicide encompass movies and television shows such as soap operas. As is the case for the copycat effects of nonfictional media portrayals, such as widely publicized news paper stories, the findings on fictional copycat suicide are quite mixed. Some studies find a significant effect while others do not. Stack presents the first findings that begin to unravel the contradictions in previous work. For example, research that matches the method of suicide in the fictional portrayal (e.g., jumping in front of a train), with the incidence of suicide by the same method in the real world, is far more apt to report significant copycat effects than research studies that do not do so. Some persons, who may have committed suicide anyway, may simply copy the method of suicide of the media-based model.

In Chapter 18, Steven Stack, Karolina Kryszynska and David Lester analyze elements of the historical record on the alleged wave of suicide attributed to a famous Hungarian song, *Gloomy Sunday*. While the evidence suggests there was an increase in the incidence of suicide surrounding the period of the popularity of the song, it is difficult to disentangle the apparent rise in suicide from its historical context. The rise in suicides may have been due to audience mood in Europe in the 1930's. It was associated with the presence of a large number of depressed persons as a result of the Great Depression and the rise of Nazi oppression against the Jews. In fact, the film version depicts the suicide of the song's composer in this context. In the movie *Gloomy Sunday* (1999), the pianist first refuses to obey the command of a Nazi officer to play the song in the Jewish restaurant where he performs. Only when his estranged girlfriend asks him to play it, and surprisingly sings it for him (something he had always wished her to do), does he capitulate. However, he commits suicide immediately after the song has ended.



Figure 3. *Gloomy Sunday* (1999, Studio Hamburg, Director: Rolf Schubel). The suicide by gun of the composer of *Gloomy Sunday*.

Our treatment of contagion concludes with Chapter 19 on the “Kabuki Effect.” The Werther Effect is a term that suicidology coined to typify the imitative or copycat effect. It refers to a character, Werther who commits suicide in Goethe’s novel, *The Sorrows of Young Man Werther*, in 1774. However, as Karolina Krynska and David Lester point out, contagion effects have occurred earlier in world history. In particular, there were apparent copycat effects stemming from suicides in plays in houses of prostitution in Japan. Performances of these “kabuki plays” in the early 1700’s in Japan were banned because they were thought to have a contagion effect.

Part VII: The Creative Arts and Psychotherapy

In Chapter 20, David Lester and Rina Terry discuss the idea that art can serve as a form of therapy, a form of suicide prevention for suicidal artists. A case analysis is provided for Anne Sexton, an American poet who committed suicide at the age of 45. They argue that the crafting of poetry enabled her to distance herself somewhat from her own negative emotions. This distancing by transposing suicidal themes into fiction enabled her to survive as long as she did. With the demise of her writing talents, which resulted in a lessened ability to distance herself from suicidality through her craft, she took her own life. This case study also illustrates the theme in many films concerning artist suicide. The loss of artistic talents or skills contributes to many suicides in film, including those in the three versions of *A Star is Born*.

Artwork from mentally troubled patients has the potential to serve as a diagnostic tool. Chapter 21 by Dalia Merari focuses on the artistic expressions of a sample of schizophrenics. In particular, she keys in on a phenomenon she has encountered over a period of time with her patients: masked depression. Importantly, the art-oriented measure of depression has proven to be the only way to uncover the existence of depression among some of these individuals. Merari provides a history of the use of art work as a measure of psychiatric disturbances. Many examples of the drawings by her own patients are provided, and an analytic framework for identifying masked depression is discussed.

Part VIII: Conclusions

Recurrent limitations of the field of art and suicide suggest points of departure for future research. These include the description and analysis of photographs and music, two neglected artistic venues. Furthermore, Eastern portrayals of suicide in the arts are under-studied and may have followed different historical trajectories than those in Western art. American films have attracted the most attention in the limited work on film suicide. The preliminary findings need to be compared to films in other nations. An overview of some of the most important sources for data for future research are provided. These include the American Film Institute Archives, online digital art collections of major world museums, web pages offering literally thousands of photographs on the subject of suicide, and selected web sites on music and film.

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PART I: PAINTING AND TRADITIONAL VISUAL ARTS

Chapter 2

**SUICIDE AND THE ARTS:
FROM THE DEATH OF AJAX TO
ANDY WARHOL'S MARILYN MONROE**

Karolina Kryszyska

*The melancholy is something painful
and reaches down to the roots of our human existence
too deep as to leave it to the psychiatrists
Romano Guardini*

This is a story about suicide in the Western art. It looks at the period of almost three millennia: from the first known image of suicide – death of Ajax represented on a Corinthian seal (c. 700 BC) to images of suicide in modern art. Andy Warhol's *Marilyn Diptych* (1962), a series of over twenty silkscreen paintings of the movie star who died from a barbiturate overdose, became an icon of 20th Century popular culture and recently was voted the third most influential work in the history of art (Higgins, 2004).

Writing about suicide in the arts is not easy, and the well-known adage “talking about music is like dancing about architecture” applies here well. Given the wealth of material and its visual nature, a comprehensive review of the subject, including reproduction of paintings and other images, is beyond the scope of the chapter. Readers are invited to embark on their own journey, tracing in museums, books, art magazines and on the Internet pieces of art mentioned in the text. Such a journey will be fascinating, although at times difficult emotionally. Looking at images of people who died by their own hand, be it real suicide cases (such as Marilyn Monroe) or mythical and religious figures (such as Ajax or Judas) is an intimate encounter with an image of self-inflicted and intentional death. Ron Brown, author of a seminal book on the subject, *The Art of Suicide* (2001), observed that having an interest in this topic sometimes evokes feelings of disgust or horror in others and a suspicion of harboring a “morbid desire”.

The *Concise Oxford English Dictionary* (Soanes & Stevenson, 2008) defines art as “the expression or application of creative skill and imagination, especially through a visual

medium such as painting or sculpture, and works produced in this way.” It defines the arts as “the various branches of creative activity, such as painting, music, literature, and dance.” Suicide has been frequently represented in the arts, and Fred Cutter in introduction to his book *Art and the Wish to Die* (1983) reported that “in eighteen months we identified more than 250 artists who had painted suicide themes and a smaller number who had themselves committed suicide” (p. ix). Given the wealth of iconography of suicide and its complexity, it is necessary to narrow down the scope of research and organise the available material. Following Brown (2001), this chapter deals with suicide in painting, sculpture, ancient and medieval ceramics, illuminated manuscripts, print, book and newspaper illustrations. Although it is difficult to find representations of suicide in stained glass, there are at least three examples: *Suicide of King Saul* in Chartres Cathedral in France (detail from lancet beneath the North Rose window, c. 1230), *Cleopatra and Dido* by Edward Burne-Jones in the Combination Room of Peterhouse College in Cambridge University, and Narcissus Quagliata’s *Stained Glass Suicide* (1975). Discussion about how suicide is represented in the media of the 20th Century popular culture, such as movies, advertising, classical and popular music (including the opera), cartoons, photography, and Internet art is beyond the scope of this chapter, and some of these topics are covered in other chapters of the book.

This chapter focuses on iconography of suicide in the Western art, that is, the art of European countries and those parts of the world which follow predominantly European cultural traditions, such as North America. Nonetheless, visual representations of self-inflicted death (and self-mutilation) can be found in Asian art and in Indian cultures from Mexico and South America. For example, scenes of ritual self-disembowelment (*seppuku*) and lovers’ suicide (*shinjū*) were frequent in Japanese *ukiyo-e* paintings (*uki* - floating, *yo* - world, *e* - pictures: “pictures of the floating world”), woodblock prints and book illustrations showing life in the great urban centres in the Edo or Kokugawa period (1615-1868) (Kryszinska & Lester, 2006; Pang, 2005). *The Suicide of Saigo Takamori* by Tsukioka Yoshitishi (1877) and *The Lovers Gompachi and Komurasaki* by Kitagawa Utamaro (c. 1790) are just two examples of such images. In Indian art, the self-burning of the goddess Sati, Shiva’s wife, and other images of the Vedic practice of self-immolation of a widow on her deceased husband’s funeral pyre (*suttee* or *sati*) can be found frequently (for example, *Sati Throws Herself in the Sacrificial Fire of Her Father Daksha to Avenge a Slight to Her Husband Shiva*, Rajasthan, c. 1825 and *Shiva Carrying Sati's Corpse on His Trident*, Himachal Pradesh, c.1800) (Whittaker, 1989).

Moving to another part of the world, visual representations of suicide have been found in the ancient Indian cultures in Mexico and South America. An image of a deceased woman with a rope around her neck in an ancient book of the Yucatecan Maya in Chichén Itzá, the *Dresden Codex* (*Codex Dresdensis*, 11th-12th century), is believed to show Ixtab, a Mayan goddess of suicide (Jones & Molyneaux, 2006). Ritual sacrificial bloodletting is represented on lintel 24 (c. 725 A.D.), an ancient Maya limestone carving from Yaxchilan, in modern Chiapas in Mexico. It shows a queen, Lady Xoc, drawing a barbed rope through her tongue and in front of her, her husband Shield Jaguar, the ruler of Yaxchilan, is shown holding a torch (Jones & Molyneaux, 2006). *Codex Mendoza* (1540–1541), an Aztec codex describing the history of the Aztec rulers, their conquests and descriptions of daily Aztec life, contains traditional Aztec pictograms with Spanish explanations and commentary. These include an image of a man falling from a building – a scene of the suicide of Moquihuix, the fourth ruler

of Tlatelolco who killed himself in 1473 as a result of a defeat in a military conflict with Tenochtitlan (Umberger, 2007).

This chapter will first present how the subject of suicide in Western history, literature, mythology and religion has been reflected in the mirror of the arts and will present major themes in the Western iconography of suicide over the last three millennia. The second part of the chapter will be devoted to personal stories of suicide in artists' lives: artists as survivors of suicide of a significant other and artists who took their own lives.

I

Looking at major themes in representation of suicide in the Western art from antiquity to modern times and their evolution and revivals, one can hardly fail to notice that both literally and metaphorically "suicide has been pictured as beautiful, heroic, bold, as well as ugly, criminal, cowardly" (Brown, 2001, p. 10). The meanings and visual representations of suicide have changed over the centuries, reflecting the evolving cultural and philosophical understanding of the behaviour and attitudes towards it, with frequently co-existing contradictory meanings and representations. For example, in medieval Europe and in Victorian England, suicide in the context of male valour and feminine chastity was praised as heroic and glorious, while it was stigmatised in another context as an expression of sin and/or madness (Edwards, 2005). The very word "suicide" was coined only in the mid-17th Century and, before that, terms such as "self-killing" were used. Changing the words affects the meaning of the behavior (Edwards & Osborne, 2005; van Hooff, 1990). Consequently, it is difficult and sometimes impossible to cluster together or compare the actions of ancient Romans such as Cato or Seneca, biblical kings such as Saul and Samson, semi-mythical heroines from antiquity represented by Lucretia, and the "fallen Victorian women" drowning themselves in the river Thames. In some cases, the changing titles ascribed to a piece of art showing suicide illustrate the evolving meaning of the act. For example, the famous ancient marble statue of *Ludovisi Gaul and his Wife* (or *Gaul Slaying Himself and his Wife*, c. 220 BC) had at least five titles between 1623 and 1704: *Paetus and Arria*, *Fulvius and his Wife*, *Macareus and Canace*, *Pyramus and Thisbe*, *Sextus Marius* (Brown, 2001). At the risk of being facetious one could say that at least these titles refer to suicide. The marble statue showing the death of Seneca (*The Dying Seneca*, a Roman copy from the 2nd Century after a Hellenistic original) did not have such luck. The statue has also been known as *The Elderly Fisherman* and *The Slave* (Brown, 2001)!

An analysis of the iconography of suicide calls for a consideration of the socio-cultural and historical context embedded in the wider art-historical problem of textual reading. "The issue of representation assumes the coexistence of a variety of texts, visual, verbal, semiotic, philosophic and political, and demands a diversity of approaches" (Brown, 2001, p. 11). Edwards and Osborne (2005) write about "scenography of suicide" and its "moral and semantic framing" as follows: "Suicides can be staged in many different ways: as theatre, as gesture, as refusal, as affirmation, as pedagogy. In this sense suicide is not just an 'act' but at its limit can be a kind of 'ethical work', a moment of truth that is the culmination, as the Stoics would have it, of an on-going labour of learning how to die. (...) We still have too little sense of the changing ethical and discursive practices that surround suicide and

especially the senses in which such practices presuppose suicide as a particular kind of performance with particular kinds of intended effects” (p. 174).

Still, one has to be aware that “to examine images with a view to revealing how cultural attitudes towards suicide are reflected in art, denies the images a creative role” (Brown, 2001, p. 9). Indeed, there seems to be a reciprocal relationship between suicide imagery in the Western art and its concurrent cultural and social meaning(s). Henry Wallis’s painting *The Death of Chatterton* (1856) not only showed a “romantic suicide,” but it was one of the artistic milestones contributing to the romantic notion of suicide in the literature and in the general public’s attitude to self-inflicted death (Marchwinski, 1987). Eduard Manet in *The Suicide* (1877) – an image of a lonely a man who had just shot himself - stripped the death of its heroic connotations, presented its realistic details, and did not provide any clues to the question “why?” thereby challenging his contemporary late 19th Century audience used to seeing heroic suicides in historical paintings (Ilg, 2002). Images of suicide have also been used across centuries to underline and reinforce the moral, social and political values and ideologies of the time. For instance, during the French Revolution iconic images of suicides of ancient revolutionaries and patriots, such as Seneca and Socrates painted by Jacques-Louis David became praise-worthy examples of Royalist sacrifice, Republican virtue and liberty (Brown, 2001).

II

In his comprehensive review of the iconography of suicide, Cutter (1983) identified six *self-injury themes* prevalent in the Western art after the Renaissance (i.e., after 1350): heroic theme, suicide as a stigmatised act, irrational theme, depressive theme, ambivalent theme and suicide as “a cry for help.” Cutter based his classification on three criteria: the motivation of victim, the morality of suicide, and feelings induced in the viewer. The *heroic theme* (1484-1844) presented suicide as a rational and reasonable solution to contemporary dilemmas and a good behavior affirmative of virtue. The viewers’ reaction was admiration for the hero or the heroine, and they were encouraged to follow this virtuous example. This theme was based on historical or mythological accounts of suicide in the context of patriotism (e.g., Hasdrubal’s wife), the aftermath of a military failure (e.g., Ajax), sacrifice for a greater cause (e.g., Samson), devotion to ethics (e.g., Socrates, Cato), expiation of dishonour (e.g., Lucretia), preservation of dignity (e.g., Sophonisba, Cleopatra, Dido), and the loss of a lover (e.g., Pyramus and Thisbe, Hero and Leander).

The theme of *suicide as a stigmatized act* (1660-1854) seems to be an opposite of the heroic theme. However, both co-existed quite comfortably for almost two centuries. The stigmatised suicide was conceptualised, in line with the Church’s view of suicide as a mortal sin, as an evil end befitting an evil life motivated by a rational pursuit of immoral goals. The intended reaction of viewers was rejection and contempt. Good examples of the genre are found in the 18th and 19th Century British art: William Hogarth’s *Marriage à-la-mode* (1743–1745) and *Gin Lane* (1751), Thomas Rowlandson’s *She Died for Love, He Died for Glory* (1814-1816) and William Powell Frith’s *Road to Ruin* (1878).

According to Cutter (1983), the advent of the *irrational theme* (1827-1880) followed the Industrial Revolution and changing conceptualisation of mental illness, especially the

consideration of social and psychological factors in its etiology and in the treatment of psychiatric patients, initiated at the end of 18th Century by Phillipe Pinel, a French physician. These changes resulted in the adoption of a more neutral and relative moral position towards suicide, reducing the stigma, and placed emphasis on the irrationality of the act, now viewed as unreasonable means to a desired end. The viewers' reaction was sympathy or pity towards the victim rather than condemnation. Examples of the irrational suicide theme in the arts include lithographs and prints by Honoré Daumier: *Imagination: The Misanthrope Contemplates Various Ways in Which He Might Put an End to His Life* (c. 1838) and *The Drowned One* and *The Hanged One*, from *Sentimental Passions* (c. 1850) and Gustave Doré's *The Death of Gérard de Nerval* (c. 1856). Eugène Delacroix's *The Death of Sardanapalus* (1827), Rodolphe Bresdin's *The Nightmare* (1880) and paintings of the drowning Ophelia painted by Eugène Delacroix (1844), John Everett Millais (1851-1852) and numerous other artists also belong to this genre.

According to Cutter (1983), representations of suicide in 20th Century art can be grouped into three partly overlapping themes: the depressive theme (1887-1927), the ambivalent theme (1930-1961), and the theme of suicide as a "cry for help" (1938-1967). The *depressive theme* presented suicide in a morally neutral manner and considered apathy as the main motivation behind the act. The viewers' reaction was a feeling of regret, sadness, and pity. The emphasis was put on sadness of suicide victims, their lack of energy and lack of enthusiasm for life so well expressed in Eduard Manet's *The Suicide* (1877) and Auguste Rodin's *Burgers of Calais* (1878). Expressionist art such, as Frans Masereel's novel in woodcuts *City* (1925) with images of suicide, Kathe Kolwitz's *Man with Noose* (1925) and George Grosz's *Rear Building*, *Four Flights up* (1916), *Suicide* (1916), and *Foreclosure* (1922), fits into this theme, sometimes even showing the ugliness and violence of suicide, as in Grosz's engravings.

The other two themes, *ambivalence* and *suicide as a "cry for help,"* present suicide in a morally neutral manner, and see the motivation behind the death either as inexplicable (ambivalent theme) or obscure ("cry for help"). The ambivalent theme stressed the shock value of the art, evoking mixed reactions in viewers and drawing their attention to the painful sense of unhappiness experienced by suicides and their ambivalent wish to live mixed with the desire to die. Cutter (1983) included several pieces of art in this category. For example Ernst Barlach's *Dead Day* (1907), Heinrich Kley's *The Bride and the Bridegroom* (1910), Paul Klee's *Suicide on the Bridge* (1913), Franklin Watkins's *Suicide in Costume* (1931) and Max Beckman's *Actors* (1942). Andy Warhol's *Suicide (Purple Jumping Man)* (1962), Roy Lichtenstein's *Drowning Girl* (1963), John Altoon's *Suicide* (1966), Narcissus Quagliata's *Stained Glass Suicide* (1975) and Max Ernst's *Thursday* (1933) all illustrate the "cry for help" theme. Here suicide is presented as a morally neutral act with obscure motivation, evoking a feeling of confusion in the viewers. However, the art demands their attention.

III

The earliest known visual representation of suicide is an image of Ajax impaled on a sword on a small seal from Corinth (c. 700 BC). The death of Ajax was a popular theme in the ancient arts and progressive moments of his suicide, from initial preparation through

jumping on (or bending over) the sword, until the actual moment of self-impalement, and images of his dead body, became a frequent topic of artistic creations. Many images of Ajax's suicide have survived until today and can be found on at least thirty eight ancient items such as gems, vases, little bronze statues and reliefs (van Hooff, 1990). These include *Ajax Preparing for His Death* – showing him kneeling over the sword with its blade facing up and its handle buried in the ground - on a black-figure krater attributed to Exekias (c. 540 BC) and *Ajax Impaled by His Sword* on a black-figure krater from Corinth (c. 600 BC). The latter shows not only the body of dead Ajax, but also his two friends - Odysseus and Diomedes who found the corpse. According to Brown (2001), Odysseus is showing a gesture of dismay (his hand is placed on the back of his neck) and one can see his despair and disbelief - an expression of pain and suffering of a friend bereaved by suicide.

According to van Hooff (1990), images of Ajax belong to the category of *mythical and heroic suicides* in the ancient arts. Among other examples of this type of suicide are images of Dido's self-immolation in *Vatican Vergil* (426 AD), the suicide of Croesus on a pyre on an ancient Greek vase, and the self-immolation of Heracles on a red-figure pelice found at Vulci and attributed to Cadmos (c. 450 BC). A sculptured relief showing Socrates drinking hemlock was made towards the end of the Hellenic era (200 BC) when the philosopher had already become one of the legendary suicides (Cutter, 1983). The heroic suicides were usually presented just before the moment of death - the intent to die is highlighted in order to increase the dramatic tension of the death (van Hooff, 1990).

Suicide was also represented in antiquity as a part of "iconography of power" (van Hooff, 1990). This relates to images of defeated enemies who preferred to kill themselves rather than be captured (*suicides obsidionaux*), such as the famous marble statue of *Ludovisi Gaul and his Wife* (or *Gaul Slaying Himself and his Wife*, c. 220 BC), which is believed to be a part of a monument erected by Attalos the First to celebrate his victory over the Gauls at Pergamon. An image of the suicide of Decebalus, a defeated Dacian king, can be found on Trajan's Column in Rome and on an earthenware cup from southern Gaul.

There are stories of painted images of *lovers' suicides* in the ancient Greek book *Eikones (Imagines)* which is considered to be a source of information on ancient painting (van Hooff, 1990). Although the authenticity of the descriptions is debatable, its authors, members of the Philostrati family, discuss the works of art which one of them saw in a private villa in Naples, and these include images of lovers expressing "exemplary loyalty or mourning up to the point of suicide" (van Hooff, 1990, p. 174). The Pompeian frescoes (c. 79 AD), which have been preserved, include images of the lovers Pyramus and Thisbe, and of Narcissus who, according to some versions of the myth, perished from self-neglect or even killed himself with a sword from desperate and unfulfilled (self)love. Van Hooff (1990) also mentions an ancient statue of Jocasta made by Silanion in the 4th Century BC. However, very few images of love-related suicide and suicide in general, have survived from antiquity. The scarcity of visual images of suicide in ancient Rome and Greece, including representations of Lucretia and Cleopatra (so popular in later centuries), is rather surprising given that there was no general taboo on presenting and discussing this type of death (van Hooff, 1990). Regarding Lucretia, there are only three known ancient images of her suicide, all on Etruscan funerary urns from the 1st Century BC. Van Hooff (1990) points out that the Etruscans had a penchant for morbid stories which may account for a relatively high number of images of Ajax found in Etruscan graves and their interest in Lucretia's death, apparently presented in a hostile manner - "the Roman lady is shown naked from the waist up" (p. 177).

IV

In contrast to relatively liberal attitudes towards self-killing in antiquity, Christian views of suicide and the attitudes of the Catholic Church towards self-inflicted death have been very restrictive and extremely negative since the early Middle Ages (Alvarez, 1971; Minois, 1999). The punishment for such death was severe for the body and the soul of a suicide, and for his or her family and worldly possessions. William Blake's *The Wood of Self-Murderers: The Harpies and the Suicides* (c. 1824–1827), one of 102 drawings and 9 etchings for Dante Alighieri's *Divine Comedy* (early 14th Century) presents an allegorical vision of the Christian afterlife in line with the medieval world-view (Harris, 2003a). In a dramatic way, Blake's drawing shows the seventh circle of hell, the place where those who commit suicide reside and suffer for their act. "In the illustration, Dante (red [clothes]) and Virgil (blue [clothes]) are led by Nessus, the Centaur, to the Wood. Dante hears moaning but cannot detect its origin until Virgil proposes that he break off a twig from a tree. The tree bleeds and cries out in pain as its branch falls to the ground. Looking closer, we see that the forms of souls are embedded in these thorn trees, thrown helter-skelter, some right side up, others upside down, as is the woman in the tree to Dante's right. The Suicides have been uprooted from their bodies and are now randomly dispersed. Their tender leaves are eaten daily by Harpies (half woman, half vulture), who are shown in the treetops. (...) The Self-Murderers, having fallen into the material world and having committed a seemingly senseless act, are punished by constant pain – a part of themselves dying each day only to regrow and be destroyed" (Harris, 2003a, p. 229).

Besides this dramatic picture of the suffering of suicides as conceived by a medieval mind and illustrated several centuries later by the English 19th Century artist, there are pieces of art from the Middle Ages which show biblical episodes of suicide, especially Judas's death, and images of mostly feminine personifications of the vices, such as *Ira* (Wrath) and *Desperatio* (Desperation). There are seven cases of suicide in the Old Testament, including the deaths of Abimelech's and Saul's sword-bearers who died with their masters. The biblical suicides are all males (Abimelech, Samson, Saul, Ahitophel and Zimri), and their images are found in illuminated medieval manuscripts dated between the 9th and the 15th Centuries.¹ Such images were frequently used as means to educate the illiterate masses and usually show, like their antique predecessors, sanitized images of death. The best known image of biblical suicide in the Jewish art is an illustration from a Hebrew manuscript (c. 1325) showing the death of Haman and his sons along with the suicide of his daughter who died by jumping out of a window to atone for an unintentional offence that she had committed towards Haman (Brown, 2001).

Although from the mid-14th Century on, more secular and heroic images of suicide were patronised by the nobility, and the biblical themes became less popular, images of biblical suicides continued to be painted in later centuries. These include Pieter Bruegel's *Saul's Suicide* (1562), Richard Dadd's *The Death of Abimelech* (1855), Gustave Doré's *The Death of Samson* (1856) and *The Death of Abimelech* (1866) and E. Fuchs's *Samson Pulls the Pillars Down* (1965). Images of death of Saul and his armour bearer, Ahitophel and Samson

¹ Cutter (1983) compiled comprehensive lists of medieval representations of biblical suicides, which can be traced by interested readers.

are depicted on 17th and 18th Century Delftware tiles showing biblical vices and virtues (Brown, 2001).

The popularity of the Old Testament suicides was overshadowed by the image of Judas. His is the only suicide in the New Testament, and it became a medieval icon of bad death, conceptualised as a sinful end to an evil life and a befitting punishment for betraying Christ and lacking faith in God's forgiveness (Brown, 2001). The association of Judas's death with Jesus's crucifixion made it the most popular theme in the Christian imagery of suicide and "offered the most potent of binaries to the death of Jesus" (Brown, 2001, p. 50). The New Testament gives two versions of his suicide: (i) hanging ("When Judas, who had betrayed him, saw that Jesus was condemned, he was seized with remorse and returned the thirty silver coins to the chief priests and the elders. (...) Then he went away and hanged himself" *Matthew* 27:3-5); and (ii) bursting ("With the reward he got for his wickedness, Judas bought a field; there he fell headlong, his body burst open and all his intestines spilled out", *Book of Acts* 1:18).

On the whole, it was Judas's hanging that was depicted in the visual arts of the Middle Ages. Brown (2001) noted that "two significant elements are brought together in images of Judas: the rope as a befitting end for the execution of a villain and the stigmatization of suicide. His desperation is connoted and often his sin prompted by the Devil. Though hanging was already signification of despair, *desperatio*, the most blameworthy of motives, this is signified in Judas's death by other means such as the inclusions of a demon" (p. 74). For instance, an image of hanging Judas accompanied by two demons holding the ends of his rope is a part of a capital frieze of the Saint-Lazare Cathedral in Autun in France (c. 1120-1130).

The earliest surviving image of Judas's suicide (*The Death of Judas*) was found on an ivory casket panel from the mid-5th Century. Although only a few images were made over the next four centuries, from the 9th Century on, the number of representations increased and, in the Romanesque period (1050-1350), the imagery of Judas's suicide developed further. Cutter (1983) listed over one hundred images of death of Judas in illuminated manuscripts, frescoes, mosaics, sarcophagi, sculpture and ivory from 4th Century to 1350. Evolving theological interpretations of Judas's suicide were mirrored in its changing iconography and, in the 13th Century, his death became related to guilt. An interesting example of this is a drawing from the so-called *Psalter of St Hildegard* (12th century) which shows "Judas hanging, not from a tree, but from the gallows. His hair is tousled, falling onto his neck, and ravens are flying around his corpse. What we see is a scene of judgement; nothing about it reminds us of suicide. (...) Later in the Middle Ages, the gallows which substituted the hanging-tree, became an iconographic formula for the representation of the scene, especially in the manuscripts of the *biblia pauperum*" (Schnitzler, 2000; p. 116-118). Following the progressing secularization of suicide, images of Judas lost their popularity and practically disappeared from visual arts by the end of the 15th Century with a few exceptions, such as James Tissot's *Judas Hanging Himself* from the series *The Life of Christ* (c. 1886-1894) (Brown, 2001).

Judas was not the only personification of vice, and medieval Christian iconography included many feminine personifications of *Desperatio* (Despair) (Minois, 1999). Giotto's fresco in the Scrovegni Chapel in Padua in Italy (c. 1305) shows a woman symbolising *Desperatio* who hanged herself with a rope. She is accompanied by a devil fluttering over her shoulder. This figure is contrasted with *Spes* (Hope). A similar visual image of the sin-virtue opposition is found in the porch of the Amiens cathedral in France where Hope is contrasted

with Despair, here represented by a male throwing himself on a sword. *Ira* (Wrath), contrasted with *Patientia* (Patience), was generally personified as a woman stabbing herself, and such images can be found in illuminated manuscripts created between the 9th and 11th Century (Cutter, 1983). In a similar vein, although created several centuries later, a woodcut *The Impatient Man* in the first children's encyclopaedia, Comenius' *Orbis Sensualium Pictus* (1658), shows an image of a man falling on a sword.

The medieval iconography of suicide which abounds in images of hanging Judas and which is so closely related to condemnation of suicide based on theological grounds, seems quite outdated from a point of view of modern suicidology and psychology. Still, a modern spectator can find psychological wisdom and empathy with the suffering of a suicidal person in some medieval images. For example, a close link between despair (hopelessness) and suicide visualised in Giotto's *Desperatio* – “a death caused by desperation that offers no clues to motive or cause other than hopelessness itself” (Brown, 2001; p. 78) - is not distant from Shneidman's conceptualisation of suicide stressing the role of hopelessness-helplessness in the etiology of the behaviour (Shneidman, 1993). William Blake's *The Wood of Self-Murderers*, based upon *Divine Comedy*'s medieval image of hell of suffering experienced by suicides, could be taken as a metaphor of psychological pain (*psychache*) and depression leading to such a desperate act. “The Self-Murderers (...) are punished by constant pain – a part of themselves dying each day only to regrow and be destroyed” (Harris, 2003a, p. 229).

V

Although Lucretia's suicide was frequently discussed in Early Christianity, there are only a few known images of her death which have survived from the Middle Ages, for instance Pierre Remiet's *The Suicide of Lucretia* (14th century). After the advent of the Renaissance and re-awakening of artistic interest in female body, Lucretia and other heroic females from antiquity became a popular object of arts. “Drawing on the visual precedents of antique models, Renaissance Humanism permitted the portrayal of male and female deaths, and many of these representations were very similar to their Classical forbears. In the early seventeenth century, the continuity of antiquity's heroic deaths is apparent in iconography of suicide” (Brown, 2001; p. 92).

Following the *Zeitgeist* and changed patronage over the arts, now mostly in the hands of nobility interested in secular and heroic themes, from the 15th Century onwards the number of images of heroic and lovers' suicides escalated. Lucretia was probably the most frequently painted female suicide from Roman history. She was usually considered to be a personification of female honour and embodiment of virtue (although in later centuries the interpretations of motives of her suicide changed, even to the point where she started to be perceived as a comical figure dying an unnecessary death) and a historical figure who through the means of her death contributed to the overthrow of monarchy and establishment of the Roman republic (Donaldson, 1982). It is not possible here to list all images of Lucretia's self-stabbing following her rape. Cutter (1983) identified over one hundred artists who painted her death from the mid-15th Century to the early 20th Century! Among the most famous are paintings by Albrecht Dürer (1518), Lucas Cranach the Elder (c. 1532) and Rembrandt (1664 and 1666) (Harris, 2008c) and, although the popularity of the subject waned by mid-18th

Century, Lucretia's images can be found in paintings by Richard Dadd (1854) and Giorgio de Chirico (1922).

There are many paintings showing the scene of Tarquin's rape of Lucretia which preceded her suicide, including *Rape of Lucretia* by Titian (c. 1570) and *Rape of Lucretia* by Tintoretto (c. 1580) (Harris, 2008b). At least three women painters (Artemisia Gentileschi, Elisabetta Sirani and Angelica Kaufman) painted Lucretia's rape, a subject particularly cogent and traumatic for women (Harris, 2008b; Wolfthal, 1999). Cutter (1983) observed that Sirani's (1664) and Kaufman's (18th Century) renditions of the subject emphasise the feminine perspective, and Sirani's used "gestures [which] seem more classically feminine than a male artist might use. Sirani seems to have chosen a moment after the rape, when Lucretia realises the full enormity of the outrage (...) and is showing the moment at which Lucretia gets the idea to stab herself with Tarquin's knife. Her interpretation is not so much on exhortation to choose death over dishonour, but rather it is a solution for the significant loss of her honour" (p. 176). Artemisia Gentileschi might have been herself a victim of rape perpetrated by her notorious art teacher Agostino Tassi. However, her rendition of the rape scene hardly revealed – maybe in an attempt to distance herself from the trauma - any personal disturbance or strength gained from the experience (Donaldson, 1982). Gentileschi's *Tarquin and Lucretia* (c. 1645-1650) follows the established conventions of the genre, and the "female interpretation does not basically question, disturb, or refashion the predominantly male myth" (Donaldson, 1982; p. 20).

Cleopatra, Sophonisba, Dido, Arria and Hasdrubal's wife are other ancient suicide heroines who died in order to preserve honour and dignity, and who became popular subjects of art after the Renaissance, including sculpture and vase paintings (Brown, 2001; Cutter, 1983). To mention a few examples, Cleopatra's suicide was painted by Antoine Rivalz (17th Century), Boulanger de Boisfremont (1828), Arnold Böcklin (1872) and Alexandre Cabanel (1887); Sophonisba's death by Niccolo Renieri (c. 1500), Giambattista Pittoni (c. 1730) and Francesco Bartolozzi (1744); and Dido's self-immolation by Henry Fuseli (1781) and Joshua Reynolds (1781). An engraving by B. Pinelli (c. 1810) shows the deaths of Ceccina Paetus and his wife Arria, and images of Hasdrubal's wife are found in Johann Ohnefurcht's work (c. 1400) and Ercole de Roberti's *The Wife of Hasdrubal and her Children* (1490-1493).

Socrates, Seneca and Cato, the three great ancient philosophers and politicians who died by their own hand, became venerable examples of heroic lives and deaths frequently discussed in ancient and classical literature. However, they were rarely represented in visual arts in antiquity. Brown (2001) pointed out there was a gap of 200 years between Socrates' death and its first surviving image! This changed in the modern times and, between the late 15th and mid-19th Centuries, they became popular icons of male heroic suicide (Cutter, 1983; Edwards & Osborne, 2005). Their suicides were immortalised in seminal paintings by Peter Paul Rubens (*The Death of Seneca*, 1608), Benjamin West (*The Death of Socrates*, 1756) and Jacques Louis David (*The Death of Socrates*, 1787). The scene of Cato's death at Utica was painted by Pietro Testa (c. 1640), Gianbettino Cignaroli (1759), Guillaume Guillon Lethiere (1795), Pierre-Narcisse Guerin (1797), Pierre Bouillon (1797), Louis-Andre-Gabriel Bouchet (1797) and others. The 20th century images of Socrates's death painted by Jan Cox (*The Death of Socrates*, 1952 and 1979) show a de-heroised version of the scene.

Ancient love stories, such as those described in Ovid's *Metamorphoses* (c. 8 AD) and Geoffrey Chaucer's *The Legend of Good Women* (c. 1374-1386), abound in suicide and became a popular source of artistic themes following the advent of the Renaissance. Cutter

(1983) listed almost one hundred artists who depicted the story of Pyramus and Thisbe starting with a Pompeian fresco (79 AD) and continuing until the mid-20th Century. These include images of Pyramus and Thisbe created by Hans Baldung (c. 1530), Abraham Hondius (1625-1630), Nicolas Poussin (1651), Johann August Nahl (1790), Lawrence Alma-Tadema (1906) and John William Waterhouse (1909). The story was popular also in the Middle Ages when the lovers' deaths was sometimes interpreted in religious terms, with the lion representing either evil or the devil and Pyramus being seen as a son of God who allowed his own death (Brown, 2001). Some elements of Ovid's version of the tale can be traced in William Shakespeare's *Midsummer Night's Dream* (c. 1594) and *Romeo and Juliet* (1597) (e.g., mutual hatred of lovers' parents and a tragic misunderstanding regarding death of one of the lovers). Shakespeare's tragic story of lovers from Verona became an inspiration for numerous paintings and other images, including *Romeo at Juliet's Deathbed* by Henry Fuseli (1809), *The Reconciliation of the Montagues and Capulets* by Frederic Lord Leighton (1854), *Romeo and Juliet: Juliet Wakes up in the Grave* (original painting by J. Northcode, R.A., engraved by P. Simon) and *Romeo and Juliet (Act IV, scene V)* (an original painting by John Opie, engraved by G.S. and J.G. Facius).

Many paintings illustrate the story of Hero and Leander. Evelyn de Morgan's *Hero Awaiting the Return of Leander* (c. 1885) and Lord Frederic Leighton's *Last Watch of Hero* (c. 1887) show Hero anxiously waiting for her lover, while paintings by Peter Paul Rubens (c. 1605), Nicolas Regnier (c.1626) and William Etty (1828-1829) show the drowning of Leander and the anguish of Hero which led to her suicide. Some versions of the tale of Procritis and Cephalus hint at Cephalus's suicide attempt or suicide following the death of his wife (Brown, 2001; Smith, 1867). Bernardo Luini's fresco *The Despair of Cephalus* (c. 1520-1522) shows Cephalus attempting to strangle himself with a cord. Piero di Cossimo's *A Satyr Mourning over a Nymph* or *The Death of Proctis* (c. 1500) show Procritis tragic death which might have led to her husband's suicide.

Some of the versions of myths and stories about an ancient Greek lyric poet Sappho and the mythical Narcissus mention their suicides. Sappho, suffering from unrequited love for Phaon leaped from the cliffs of Leucadia, and Narcissus, hopelessly in love enchanted by his own reflection in the water, died either of thirst or killed himself (Keys, 2004). During 1775-1875, Sappho became an object of great interest in European arts and literature (Stein, 1981) and *Sappho and Leucade* (or *The Death of Sappho*, 1801) by Antoine-Jean Gros, which shows the dramatic moment when Sappho is ready to jump from the cliff, epitomises the notion of a romantic suicide (Marchwinski, 1987). Other images of the unhappy poet include Gustave Moreau's *Sappho on the Cliff* (1872) and *Sappho* (c.1893), Charles Mengin's *Sappho* (1877) and Gustav Klimt's *Sappho* (1888-90). Among the images of Narcissus spellbound by his reflection are paintings by Carravaggio (c.1597), Nicolas Poussin (*Echo and Narcissus*, c.1627/28), John William Waterhouse (*Echo and Narcissus*, 1903), and Salvador Dali (*Metamorphosis of Narcissus*, 1937). Narcissus's image also adorns a Pompeian fresco (c. 71 AD). Arachne is another mythical suicide shown in the arts, for instance in Jacopo Tintoretto's *Athene and Arachne* (c. 1475-1485), Diego Velazquez's *The Spinners* or *The Fable of Arachne* (c. 1657) and in Gustave Doré's illustration to Dantes's *Purgatorio* (1861). It is practically impossible, however, to find an image of Arachne's or Narcissus's suicidal deaths.

VI

The richness of visual representations of ancient mythical, historical and literary suicide in the arts is truly impressive. Although the iconography of suicide in ancient times is rather disappointing, the revival of ancient themes which started in the Renaissance produced a rich and varied body of works. In this rich tapestry one can disentangle several major threads related to the aesthetics of suicide, taboos surrounding the topic and gender-related issues.

Almost all images of suicide derived from ancient sources show estheticized and sanitized deaths and un mutilated bodies (Brown, 2001). Edwards and Osborne (2005) observed that in ancient Rome “the character of a particular suicide was virtually never evaluated in relation to religious prescription. (...) This was a culture both familiar and irretrievably distant - by virtue of religious difference in particular - which could offer suicidal role-models to the modern Western world; the morality of the deaths of Cato, Seneca and others was much debated in later periods. Their death scenes, described in detail by Roman - and some later writers - could themselves be seen as estheticized. (...) One might argue that the political impact of such suicides was contingent on their esthetic form” (p. 176).

Images of Ajax impaled on his sword or Lucretia thrusting a dagger through her chest hardly ever realistically show the inevitable wounds or blood. Images of ancient heroic suicides show rather the intent to kill oneself than the mutilated bodies. For example a drawing of Phaedra by Reinach (derived from ancient sources) pictures her just standing with a rope in her hand. This is very different from a mid-20th Century representation of the cruel lover. Leonard Baskin’s *Phaedra Hanged* (1967) does not spare the viewer any of the violence of suicide and the trauma of the onlooker. Likewise, Frida Kahlo’s *The Death of Dorothy Hale* (1938), Andy Warhol’s *Suicide (Purple Jumping Man)* (1971) and Edward Dwurnik’s *The Death of a Poet* (1973) show the very scene of suicide and the maimed body without any attempt at concealing the brutality of death. An interesting exception to the ancient and neo-classical rule of esthetics of suicide is an illustration from a 14th Century manuscript by Pierre Remiet *The Suicides of Antony and Cleopatra*, which shows a decomposing and worm-ridden body of the queen. According to Brown (2001), such a composition is not an accident. It is meant to contest the heroism of pagan deaths and a deprecatory vision of an “abject, worm-ridden body of Cleopatra” (p. 52). Others suggested that Pierre Remiet’s deep, even obsessive fascination with death went beyond the prevailing medieval *memento mori* sentiment and made him a “master of death” showing realistic and gory details of dead bodies (Freeman Sandler, 1998).

The way in which suicide was presented was closely related to social and religious taboos and attitudes regarding this type of death, artistic conventions and the type of patronage over the arts (Cutter, 1983). The changing patronage over the arts (private in ancient Rome, public in ancient Greece, Church-dominated in Middle Ages and private during the Renaissance) deeply impacted the way suicide and the body were represented. For instance, although suicide episodes from the Bible were a frequent subject of medieval art, the gruesome Apocrypha stories such as the story of Razis who unsuccessfully attempted suicide by impaling on his sword and jumping from a tower, and who finally died by tearing out his entrails, cannot be found in medieval iconography, and “the restriction of ecclesiastical patronage of the church to sacred themes from the Bible and an aversion to such macabre

topics may well be the reason” (Brown, 2001, p. 86). It was believed as well that the choice of suicide method revealed its motives and, in antiquity and the Middle Ages, some means of suicide (especially hanging) were perceived as particularly stigmatised and vulgar. Thus, a rope was a symbol of Phaedra’s and Judas’s final demise, while Ajax’s and Lucretia’s self-stabbing had a flavour of male and heroic deaths (Brown, 2001; van Hooff, 1999).

The gender and social class of ancient and neo-classical suicides is of interest and the issue will come back in discussion of the iconography of suicide in 19th Century art, especially in Victorian England. One will not find pictures of the deaths of people of lower social status, such as plebeians and slaves among the images of heroic suicides, and the small number of female images may imply the same low social status of women (Brown, 2001). In antiquity, male suicides were most often represented. Males were the ones who had responsibility in the public domain and could die a good death for the sake of the country. Brown (2001) pointed out that the woman’s position in the famous ancient marble statue of *Ludovisi Gaul and his Wife* is peripheral. Gaul’s wife is “just a woman” deprived of any peculiarities of a “Gaul” and she is a passive object of death. It is her husband who is the active party in their murder-suicide.

Images of suicide heroines, such as Lucretia, stressed their courage and devotion to male wishes and values and, according to Cutter (1983), glorification and idealization of their deaths aimed to imprint in women a preference for death over dishonour and to minimize the risk of their promiscuity. There might have been another reason to paint the heroic women - their exemplary behaviour gave moral justification to paint semi-nudes and, “while the artist attempted to convey the tragic and moral aspects of suicide, he could not resist the sexual impact of the model on his and his patron’s masculine awareness” (Cutter, 1983, p. 168). The popularity of heroic painting of women peaked in the 16th Century and practically disappeared in later centuries when it gave way to images of stigmatized and irrational suicide (Brown, 2001).

VII

From the late 18th century onwards, the theme of a heroic suicide based on heroic motives and derived from antique sources lost its appeal and popularity and gave way to images of suicide associated with clinical problems, libertarianism, flawed character and moral weakness (Brown, 2001). According to Cutter (1983), this is suicide perceived as a “stigmatized act” and illustrated by English artists William Hogarth, Thomas Rowlandson and William Powell Frith. William Hogarth’s series of six pictures entitled *Marriage à-la-mode* (1743–1745) tells a story of an 18th Century upper class family and the tragic consequences of a ill-considered marriage based on desire for prestige and money. This is a story of greed, marital conflict and infidelity which culminates in the final, sixth painting in the series entitled *The Lady’s Death*. The painting shows the Countess (Earl Squanderfield’s wife) poisoning herself with laudanum after the death of her husband who was fatally wounded by her lover after he had discovered the affair. The Countess’s lover is executed at Tyburn for murder. In a similar manner over a century later, William Powell Frith painted a narrative series of five pictures entitled *The Road to Ruin* (1878) which showed the Victorian audience the dire consequences of gambling. It is a story of demise of a rich young man

which starts during his college days (the first picture in the series, *College*, shows a group of young men drinking, smoking and playing cards) through *Ascot*, *Struggles*, *Arrest* to *The End* in which a desperate man in a messy loft is locking the door and looking at a pistol on the table.

The theme of suicide related to moral weakness was repeated by Hogarth in his print *Gin Lane* (1751), which was issued by the artist along with *Beer Street* in support of the *Gin Act 1751*, which was passed in order to reduce consumption of spirits in Great Britain. The two prints were designed to be viewed together to show a contrast between the evil consequences of drinking gin, including madness, infanticide, and suicide (a hanging figure in a dilapidated house) and the merits of drinking beer, such as health, thriving commerce and industry. Thomas Rowlandson's colour aquatint *She Died for Love, He Died for Glory* from *English Dance of Death* series (1814-1816) shows a satirical dissipated version of the story of Hero and Leander – a suicide pact of two lovers with an image of death as a skeleton wiping his brow and watching the scene. The caption under the aquatint points out passivity of death: "Death smiles and seems his dart to hide, when he beholds the suicide." According to Brown (2001), the picture shows in a gendered form two types of suicide: "for the man, a heroic voluntary death and for woman, *dolor* [sorrow] suicide as a result of irretrievable loss" (p. 137).

VIII

The 19th Century was marked by a plethora of (sometimes contradictory) conceptualizations of suicide which was reflected in the iconography of self-inflicted death. Suicide could be seen as a crime or a mystery, as a befitting end of an immoral life, or as a consequence of social victimization. Sometimes it was considered bizarre, sometimes sad, and at times comical. "In the nineteenth century, the myriad evidences of suicidal discourse imply both that its compass was widening and its representations resist simple compartmentalization. In fact, during the course of the 19th Century and forward into the early years of the twentieth, the superimposition, one on another, of the many ideas conveying 'suicide' imply that it has no leading sense; it still remained a part of moral discourse but many other things too. Rather, it imported variant and very different constructions" (Brown, 2001, p. 146). Also, the means of artistic expression and communication changed, and popular culture, especially the print market, became a powerful and easily accessible medium for suicide imagery.

The subject of suicide and contaminated femininity seems to have dominated the discourse of visual arts and literature of Victorian England to the point that "Victorian Londoners were inundated with images of drowned women" (Nicoletti, 2004). Although statistically suicide was more prevalent among males than females, the images of female suicides permeated social and artistic narrations of the time, while representations of male suicide were scarce (Nicoletti, 2004). For both males and females, suicide was linked to moral decline, but there were significant differences between the perceived motives and methods befitting the two genders. While female suicide was linked to sexual dishonour, such as prostitution, adultery and unwanted pregnancy, male suicide was perceived as an escape from worldly dishonour. "Among women, suicide by drowning was shown as the reluctant last

resort of the seduced and abandoned (and therefore starving and despairing); whereas among men, suicide by shooting, throat-cutting, or hanging was presented as the quickly chosen escape of the proud, the weak, or the wicked from financial ruin, disgrace, or retribution” (Anderson, 1987, p. 196). In popular imagination, befitting the moral double standards of the era, suicide was a means for regaining female chastity and a retribution for adultery, sometimes encompassing murder-suicide of a mother and her child (Anderson, 1987; Brown, 2001). It was represented in the arts accordingly.

A classic example of such suicide narrative is Augustus Egg’s triptych *Past and Present* (1858) consisting of a series of paintings showing the dire consequences of marital infidelity (Edelstein, 1983). The triptych shows a moment when a husband discovers his wife’s love affair, an image of the homeless wife with a child huddled under the bridge possibly contemplating suicide, and a scene when two daughters from the unfortunate marriage learn about their father’s death. The final picture is supplemented with a subtitle (which originally accompanied the untitled triptych when it was first displayed at the Royal Academy in London) which reads “August 4th – Have just heard that that B- has been dead for more than a fortnight, so his poor children have now lost both parents. I hear she was seen on Friday last near the Strand, evidently without a place to lay her head. What a fall hers has been.” Of special interest is an image of the deserted wife under the bridge abundant with references which were easily understood by the Victorian audience. There are numerous posters displayed under the arches of the bridge, including playbills for two contemporary theatre plays - *A Cure for Love* by Tom Parry and *Victims* by Tom Taylor. Both plays, although comedies, tackled the topic of unhappy and mismatched Victorian marriages and their unfortunate consequences such as extramarital affairs and suicide (Edelstein, 1983).

Drowning and jumping became two archetypal female suicide methods at the time and the stereotype was reinforced by real-life cases, images in the visual arts and in the press and stories told in popular theatre plays, such as W. T. Moncrieff’s *The Scamps of London*, Charles Selby’s *London by Night* and Edward Stirling’s *The Bohemians*. The association was so strong that any image of a young woman lingering near deep water (epitomised by Martha from *David Copperfield* in a wood engraving *The River* (1851-1882) by Hablôt Knight Browne, a.k.a. Phiz) was immediately linked to suicide as an aftermath of sexual seduction and betrayal, and “a girl standing near a riverside in the early morning might attract casual joking calls of ‘What, are you going to drown yourself so early?’” (Anderson, 1987, p. 197). Suicide by drowning reached the notoriety of being a morbid London tourist attraction, and in the early 1870s John Diprose’s book *London and London Life* featured a thwarted drowning suicide attempt as a typical sight one could encounter in London by night (Nicoletti, 2004)!

Images of drowned women were omnipresent in the visual culture of England in the 1840s and 1850s, and Gustave Doré’s illustration to Thomas Hood’s poem *The Bridge of Sights* (1872) “with its darkened arc of a bridge, forlorn female figure, and hulking church dome” (Gates, 1988, p. 138) is a classical example of the genre. Other notable examples include Augustus Egg’s *Past and Present* (1858) and George Frederic Watts’s *Found Drowned* (1848), title of the latter painting was a reference to a daily column run by *The Times* which published lists of women, predominantly prostitutes, who were found drowned in London. The scenography of such artistic images of suicides was quite particular. It showed a moonlight sky, a church dome in the distance, the sanitized and esthetically displayed body of the drowned woman and a bridge arch which framed the woman’s body. The arch reinforced the drama of death and might have been either a reference to religious altar paintings or a

reminder of a womb or an egg which “encloses women in symbols of their beginnings, their power, or their fall” (Gates, 1988, p. 140). The famous John Everett Millais’s *Ophelia* (1851-1852) and its French counterpart, *The Christian Martyr* (1855) by Paul de La Roche, are framed in a similar womb-like arch. The theme of a drowned woman can also be found in Russian art in Wassilij G. Perow’s *Drowned Woman* (1867) and in Germany in Max Klinger’s series of prints *Eine Mutter* (1881) and Käthe Kollwitz’s *Suicide by Drowning* (leaf 4, from *Scenes of Poverty*, 1909).

An image of a woman jumping from a height (especially from a bridge), which often bore an uncanny resemblance to an image of a flying angel or a witch, was also very popular in the iconography of female suicide during the Victorian period (Brown, 2001). Unlike drowning, which was associated with passivity, deadness and lack of will, jumping was perceived as an act of self-assertion and autonomy. Woodcuts showing the suicide of Margaret Moyes became prototypes of the genre (Gates, 1988). Margaret Moyes, a 23-year-old middle-class woman, attractive and possibly educated, jumped from London’s Monument on September 11, 1838 leaving behind a suicide note saying “You need not expect to see me again, for I have made up my mind to make away with – Margaret Moyes” (Gates, 1988, p. 40). Her suicide, an open statement of despair committed in a public place, did not fit the suicide stereotype of a “befitting-end-of-a-fallen-woman,” and it was rendered sensational and newsworthy by broadsides and newspapers. In Victorian society it achieved notoriety similar to that of murder cases, and the cheap sensationalist press was full of detailed descriptions of the accident and speculations regarding Moyes’s motivation. Such texts were often illustrated with woodcuts showing the deceased young woman and circumstances of her death, for example, *Self Destruction of a Female by Throwing Herself off the Monument* (1839) and *Particulars of the Coroner’s Inquest Held on the Body of Margaret Moyes* (1839). Unfortunately, imitative suicides followed and their images also could be found in the cheap press, such as *The Suicide of Robert Hawes* (1839) and *Another Dreadful Suicide at the Monument, by a Young Woman* (1842). The graphic reporting of these deaths led to a public outcry against cheap sensationalist literature and awoke public interest in suicide prevention. As a result London’s Monument was caged and thus made inaccessible to potential suicides (Gates, 1988).

Woodcuts showing Margaret Moyes’s suicide became prototypes of images of jumping (or flying) women, and probably the most famous of these is George Cruikshank’s etching *Suicide of the Drunkard’s Daughter* (from *The Drunkard’s Children* series, Plate VIII, 1848) with a subtitle *The Poor Girl Homeless, Friendless, Deserted, Destitute, and Gin-Mad Commits Self-Murder*. Similar images illustrated popular fiction novels, melodramas and plays, such as G.D.M. Reynold’s *Mysteries of the Courts of London* (1844-46) with *The Leap from the Window*, Dion Boucicault’s *After Dark: A Tale of London Life* (1868) and Charles Selby’s *London by Night* (1844) (Gates, 1988).

IX

In Victorian visual arts and literature suicide was a gender-related behaviour, which not surprisingly, a century later, became a feminist issue subjected to literary and feminist critiques and analyses (Anderson, 1987; Brown, 2001; Gates, 1988; MacDonald & Murphy,

1990). Moreover, suicide in Victorian England was strongly embedded in the context of social class. Although in general female suicide by drowning was seen as the conventional aftermath of sexual misbehaviour, for members of “the middle class, the female suicide was essentially a sinner; for the working class, she was a victim. For the former, suicide was an inevitable final retribution for fornication or adultery” (Anderson, 1987, p. 199), and the way such deaths were presented in visual arts varied accordingly. Realistic images of desperate women facing adversities of life epitomised by George Cruikshank’s *Suicide of the Drunkard’s Daughter* were found in easily accessible and affordable printed media and fitted working class sentiments. The massive oil paintings (such as Watt’s *Found Drowned*), etchings (for example, *Bridge of Sighs* by Gerald Fitzgerald, 1858) and engravings which showed sentimentalised, passive and glamorous (up to the point of having erotic undertones) dead bodies of drowned women were addressed to the middle classes. Sometimes such images were meant to awaken the conscience of the middle-class Victorians to the plight of the working classes, such as, a plate by A. Harvieu *He Drew Nearer to the Extremest Verge* illustrating F. Trollope’s novel on young factory workers entitled *The Life and Adventures of Michael Armstrong, the Factory Boy* (1840).

In the 19th Century, not only in England but also in a broader European context, suicide started to be linked to social issues. A French neo-impressionist painter Camille Pissarro, who along other French artists became involved in the socialist-anarchist movement, made a series of 28 drawings entitled *Les Turpitudes Sociales* (1890) (Herbert & Herbert, 1960). The drawings showed images of poverty, hunger, money, stock exchange, capital, religion, wage slavery and suicide. The drawing of a hanging man (*Le Pendu*) has an inscription “a millionaire is too heavy, he troubles the harmony of interests, he disrupts the equilibrium of rights, he crushes the poor.”

The Victorian female suicides might have been perceived as social victims or sinners but, as had happened to their heroic predecessors such as Lucretia and Cleopatra, images of their dead bodies were estheticized and sanitized (Brown, 2001). Nicoletti (2004) points out that although “Victorian audiences were not ignorant as to the appearance of drowned corpses, yet their visual representations of female suicide never comply. (...) Victorian writers and artists transformed their subject’s corrupt life and violent death into a peaceful martyrdom. They left the woman’s body unscathed because Victorian art and literature constructed suicide as a redemptive act for unchaste women.” Despite this, Victorian audiences were not always spared the graphic images of suicide since contemporary newspapers delivered gory images of the pornography of violence (Brown, 2001). The most notorious newspaper was *Illustrated Police News*, one of the earliest British tabloids, which featured sensational melodramatic reports of deaths. The “newsworthy” suicide cases were illustrated with wood engravings such as *The Suicide of Two Girls* (jumping from a bridge; October 24, 1868), *A Man Crucifying Himself* (June 26, 1869), *The Suicide of Alice Blanche Oswald* (jumping from a bridge; September 21, 1872), *The Suicide by a Guillotine* (February 12, 1876), *Singular Attempt at Suicide* (self-crucifixion; June 24, 1876), *An Extraordinary Suicide* (decapitation; August 19, 1876) and *Suicide on a Railway* (December 23, 1877) (Brown, 2001).

In the 19th Century, suicide, especially among the middle classes, became an object of satire and humour, which often focused on males who failed in marriage or in love affairs and hinted at their sexual problems (Brown, 2001). Such satires include English wood engravings *Mr Mantalini Poisons Himself for the Seventh Time* by Hablot Knight Browne (a.k.a. Phiz) (an illustration for Charles Dickens’s *Nicholas Nickleby*, 1839), *A Cure for Love: No cure:*

No pay (1819) (a cartoon after Cruikshank), and French lithographs by Honoré Daumier: *Imagination: The Misanthrope Contemplates Various Ways in Which He Might Put an End to His Life* (c. 1838) and *The Drowned One* and *The Hanged One*, from *Sentimental Passions* (c. 1850).

X

From about 1780 on, the concept of romantic suicide developed and remained popular in the arts until the beginning of the 20th Century (Brown, 2001). An English poet and forger of antiquities, Thomas Chatterton (1752–70) who poisoned himself with arsenic at the age of 17, became a hero of the Romantic Movement. His death became an icon of romantic suicide and was immortalised by Henry Wallis's painting *The Death of Chatterton* (1856) showing the dead body of the beautiful young poet seductively draped over a bed. An earlier image of Chatterton's suicide, John Flaxman's ink drawings *Chatterton Taking the Bowl of Poison from the Spirit of Despair* (or *Despair Offering a Bowl of Poison to Chatterton*, 1775) and its several versions, started the "visual cult of Chatterton" which turned him into a martyr of art and a victim of society guilty of alienating a romantic artist (Brown, 2001; Williams, 1960). According to Brown (2001), Flaxman's drawing hints at apotheosis of Chatterton who is taken up onto a chariot by a goddess: "like Herakles of antiquity, Chatterton is bypassing death to become immortal" (p. 136). Chatterton's death contributed to the debate on the causes of suicide by moving the focus from reason and intellect linked to heroic suicide to impulse, intuition, mental illness and depression, an approach flagged in the 17th Century by Robert Burton in *The Anatomy of Melancholy* (Brown, 2001).

The female equivalent of Wallis's *The Death of Chatterton* was John Everett Millais's *Ophelia* (1851-1852). This Pre-Raphaelite painting of drowned Ophelia, a heroine of Shakespeare's *Hamlet*, became the iconic prototype of romantic female suicide (Fontana, 1998). The painting has its own tragic history: Elizabeth (Lizzie) Siddal, who at the age of 19 modelled for the picture, fell seriously ill (possibly from pneumonia) while posing as a floating Ophelia in a bathtub filled with water and died from a laudanum overdose fourteen years later (Harris, 2007a). Ophelia's death became a popular subject of paintings and drawings, and Cutter (1983) listed eleven artists from the mid 18th Century to the mid-20th Century who painted it, such as Henry Fuseli (1770), Eugène Delacroix (1844), Leonor Fini (1938) and David Irnshaw (1980). Other romantic paintings of suicide are *Sappho and Leucade* (or *The Death of Sappho*, 1801) by Antoine-Jean Gros and *The Burial of Atala* by Anne-Louis Girodet de Roucy-Triosson (1813). A scene of the suicide of Gérard de Nerval (1808 –1855), a French Romantic poet and writer who hanged himself, is a subject of Gustave Doré's lithograph *The Street of the Old Lantern (The Death of Gerard de Nerval)* (1855) and Célestin Nanteuil's lithograph *Rue de la Vieille Lanterne* (1855) which shows the site of de Nerval's suicide in Paris.

Other 19th Century images of suicide include oil paintings by Leonardo Alenza (*Satire of Suicide Romantic*, 1839), Octave Tassaert (*An Unfortunate Family or Suicide*, 1852), Antoine Wiertz (*Suicide*, 1854), Édouard Manet (*The Suicide*; 1877), Adriano Cecioni's sculpture *Suicide* (1865), de Toulouse-Lautrec's lithograph *La Pendu* (1892) and Felix Vallatón's woodcut *Le Suicide* (1894). Manet's *The Suicide* (1877), one of his paintings showing the

threat of death and loneliness of modern mankind, revolutionised the Western iconography of suicide (Harris, 2008d; Ilg, 2002). The painting shows a man with indistinct facial features lying on his back on a bed with a revolver, which he had just used to shoot himself, still in his hand. Such an image of suicide did not fit the rules of academic historical painting which were prevalent at the time and which regarded suicide as a “privilege of a *grand homme*, of the hero, who in this way concluded the irreconcilable clash between his ideals and his convictions on one side, and reality on the other” (Ilg, 2002, p. 181). Manet’s anonymous male suicide² is very different from the celebrity suicides painted by masters of the historical genre. Unlike David’s Seneca or Delacroix’s Sardanapalus, he is not a historical figure serving as a didactic example of heroism and virtue, and the viewer is deprived of clues or narrations regarding the motives and circumstances of the death which abound in the other paintings.

XI

Some of the 19th Century suicide art themes continued into the next century. However, “(...) in the twentieth century representation of suicide became truly problematic. In the godless remains of Europe after World War I, suicide’s meanings were primarily linked with depression; subsequently suicidal representation took on certain ambivalence, as if life itself were deemed pointless. It was in Germany, and above all in the anxious images of Expressionism, that the extreme motif of suicide was most prevalent in the first part of the twentieth century” (Brown, 2001; p. 201). In Cutter’s classification, images of suicide created in the 20th Century, at least until the 1960s which was the last decade discussed in his book, can be grouped into three major partly overlapping themes: depressive, ambivalent and suicide as a “cry for help” (Cutter, 1983). It seems, however, that the 20th Century iconography of suicide escaped the neat and relatively clear-cut categories prevalent in earlier centuries, and modern suicide imagery has escaped the confines of high culture and has merged into a kaleidoscope of popular mass media such as film, television, newspapers, magazines, photography, music and Internet art. Suicide as tragic and comical, realistic and metaphorical, in stories of real life tragedies and the commercialized pornography of violence became a part of the everyday landscape of popular culture.

One of the icons of the 20th Century art is Andy Warhol’s *Marilyn Diptych* (1962) which has been recently voted in a survey commissioned by the sponsor of the British Turner Prize as the third most influential painting in the history of art after Marcel Duchamp’s *Fountain* and Pablo Picasso’s *Les Femmes d’Alger* (Higgins, 2004). The series of colour and black-and-white silkscreen paintings of Marilyn Monroe were made soon after her death in August 1962 and were based on a publicity photograph from the movie *Niagara* shot in 1953. According to the art critics, “Warhol found in Monroe a fusion of two of his consistent themes: death and the cult of celebrity. By repeating the image, he evokes her ubiquitous presence in the media. The contrast of vivid colour with black and white, and the effect of

² There has been speculation that the picture shows French artist Jules Holtzapffel who shot himself at his home in April 1866 after his works had been rejected by the jury of the Salon, the official art exhibition of the *Académie des Beaux-Arts* in Paris. Alternatively, the suicide of Manet’s assistant Alexandre, who hanged himself in 1859 or 1860, might have been an inspiration for the painting (Harris, 2008d; Ilg, 2002).

fading in the right panel are suggestive of the star's mortality" (TATE Online, 2004). The movie star who died by suicide became an inspiration for other artistic images besides Warhol's diptych, for instance Sahri Sherman's *The Death of a Goddess* (c. 1962) and Guily Joffrin's *The Death of Marilyn Monroe* (1963). The *Wikipedia* entry "Marilyn Monroe in popular culture"³ lists thirty five visual media artists who used Monroe as a basis for their work.

Among Warhol's famous silkscreens reproduced serially and often painted with bright colors is the *Death and Disaster* series (1962-1963) which includes *Red Car Crash*, *Suicide* (*Purple Jumping Man*), and *Orange Disaster*. The cropped images are taken out of a journalistic framework, and among them is a picture of a man who has just jumped from a building. The series is considered to be a very powerful and disturbing expression of artist's lifelong fascination with death and injury, as well as his commentary on the state of media affairs in the United States - their tendency to trivialise violence and personal tragedies and to transform them into public spectacles (Honnef, 2000).

Among other famous 20th Century images of suicide is Frida Kahlo's painting *The Death of Dorothy Hale* (1938). Dorothy Hale was the widow of Gardiner Hale, a New York portrait painter and a personal acquaintance of Kahlo, and the inscription at the bottom of the painting gives details of her death: "In the city of New York on the 21st of the month of October 1938 at six in the morning, Mrs Dorothy Hale committed suicide by throwing herself out of a very high window of the Hampshire House building. In her memory, [section deleted] . . . this *retablo* [i.e. a Latin American devotional image], having executed it—Frida Kahlo". Three progressive moments of the suicide are visible in the painting: the initial fall from the window, the falling body and the mutilated dead body lying on the ground. The last image is particularly graphic and realistically shows the unnaturally twisted body of Dorothy Hale and blood on her body and the pavement (Harris, 2003b).

The new media of artistic expression and new themes have been emerging with the advent of the new century and these include controversial artistic images of suicide bombers. For example, in 2001, a recreation of the scene of a suicide attack which showed Ezzaldin Almasri who killed himself and fifteen people at a Jerusalem restaurant and which was displayed at An-Najal University in the West Bank, was closed by Yasser Arafat (BBC News, 2001). In Sweden in 2004, a public display of an artwork depicting a small ship carrying a picture of Islamic Jihad bomber Hanadi Jaradat who killed herself and 21 bystanders in a suicide bombing in Haifa sailing in a pool of red-coloured water (*Snow White and the Madness of Truth* by Israeli-born artist Dror Feiler) was closed following protests from the Simon Wiesenthal Center (CNN News, 2004).

Politically and culturally charged artistic representations of suicide by hanging can be found in contemporary Australian Indigenous art (Hunter, Reser, Baird, & Reser, 1999). Hanging it is not only the most frequent method of suicide used by Aboriginal and Torres Strait Australians, but also a means of death which has acquired over the last two decades deep political and cultural meaning related to the history of oppression and genocide, especially in relation to Aboriginal deaths in custody. "Countless paintings with similar [hanging-related] themes have been painted by young Aboriginal men in custody and hung in similar community exhibitions around Australia. The hanging theme is pervasive, powerful, and immediately resonates with young Aboriginal viewers" (Hunter et al., 1999, p. 44).

³ http://en.wikipedia.org/wiki/Marilyn_Monroe_in_popular_culture

Suicide-related Internet (or Net) art which uses Internet as its primary medium has been emerging and posing questions regarding the nature of life and death in cyberspace. For example, an on-line persona of *Mouchette* created by an anonymous artist on an interactive website <http://mouchette.org> sees virtual life as a form of death: “the body must be annihilated completely. Everything organic or biologic has to disappear from the communication: no more voice, no more breath, no more flesh, no more eyes... a perfect and total disembodiment! No wonder you hear so much about suicide on my site. Virtual life is a technologically complex form of suicide. Of course, subsequently, one can be reborn on the Net as a new entity, in a form that one would choose and fabricate, as a living being with no teeth, no saliva, no skin, no smile. Instead, this being would have pixels, code, text characters” (Santorineos, 2005, p. 205).

XII

One of the questions arising from a study of iconography of suicide is a question regarding the relationship between artists’ personal lives, especially own experience with death and suicide and their art⁴. Are artists who paint images of suicide suicidal themselves? If this is the case, does their artistic expression serve a cathartic role or increase the risk of suicide? Can we see or trace indicators of suicide risk in paintings and other forms of art created by artists who died by their own hand? Does a personal experience of a significant other’s suicide affect the content and form of art? Unfortunately, the current state of knowledge does not allow providing unequivocal answers to such questions, and the literature on the subject gives differing opinions (for example, see discussion regarding Rene Magritte’s art below).

According to Cutter (1983), art has a cathartic effect and “artists who paint themes of self-injury in Western art are not the ones who die from self-injury” (Cutter p. 36). His opinion is supported by Pöldinger (1986), who says that the relationship between depression and art is not simple and may vary in individual cases. He believes that art can play a psychotherapeutic role and there is a negative and a “very special” correlation between suicide in real life and suicide in art. In support, Pöldinger quotes Goethe’s words regarding the suicide epidemics which followed publication of his *Sorrows of Young Werther* (1774): “what do I care, I got rid of my problems; what others do, does not interest me” (Pöldinger, 1986, p. 267). Pöldinger contrasts Austrian Expressionist painter, illustrator and occasional writer Alfred Kubin (1877-1959) with German expressionist painter and printmaker Ernest Ludwig Kirchner (1880-1938). Kubin who died of natural causes at the age of 82 frequently created fantastical, often macabre images (e.g., *The Suicide*, 1950) which might have been his way of coping with severe psychic crises and suicidal tendencies. Kirchner labeled as “degenerate artist” and persecuted by the Nazi totalitarian system, killed himself in 1938, but never portrayed suicide in his art.

Apparently, there is little evidence in the work of Jochen Seidel (1924-1971), a German painter working in the United States, hinting at his preoccupation with suicide and his work

⁴ Readers interested in the broader subject of links between creativity and psychopathology are referred to excellent literature on the subject, including Jamison’s *Touched with fire. Manic-depressive illness and the artistic temperament* and Ludwig’s *The price of greatness: Resolving the creativity and madness controversy*.

might have been an effort at self-healing and response to loss (Roman & Stastny, 1987). Seidel's father's younger brother died by suicide before the artist was born, his father died by drowning (probably a suicide) when Seidel was ten, and his mother's lover died by suicide when Seidel was 16. Seidel himself suffered from serious depression and psychosis, abused alcohol, was hospitalized several times and made numerous suicide attempts. He hanged himself from the ceiling of his New York studio at the age of 47. According to Roman and Stastny (1987), Seidel's art does not give hints regarding the manner of his death, but they raise "the matter of his bathroom mirror, which he had transformed into a work of art, just as he had done with any other parts of the studio. He painted the left half of the oval mirror in black and spelled the following words around it: 'I am happy, yes, I am... I AM SUI SEIDEL'. He thus confronted himself daily with the dividedness of his personality – the 'happy' part on the right and the 'suicidal' on the left." (Roman & Stastny, 1987, p. 284).

With the (dis)advantage of foresight one has to be cautious when looking at art created by artists who died by suicide and not give in to the temptation of looking for hints of suicidality, especially where there may be none. For instance, Jackson Pollock's *Figure Composition* (or *Untitled*, 1941-1942) was named *Ten Ways of Killing Myself*, probably in the light of artist's death in a single vehicle accident which was (erroneously) interpreted as suicide (Cutter, 1983). The Pollock-Krasner House and Study Center, the former home and studio of Jackson Pollock and his wife, Lee Krasner, protested against such an interpretation: "whoever decided to call these drawings [in this way] has done a disservice to Pollock's intent" (Brown, 2001, p. 208). The author of the present chapter was reminded by Anna Żakiewicz, a curator of art collection of Stanisław Ignacy Witkiewicz, a.k.a. Witkacy (1885-1939), a Polish painter, photographer, playwright, novelist, and philosopher who died by suicide, not to take literally the images in his art (Żakiewicz, personal communication, September 9, 2008). This comment was in reference to Witkacy's *Self-Portrait* (1933) with an inscription "let the dilettante of life itself, who stands at the brink of a grave, die in peace" [Polish original "Dajcie spokojnie umrzeć stojącemu nad grobem dyletantowi życia samego w sobie"]. Apparently, the content of the picture relates to a literary figure of Manfred Giers - from a drama entitled *The Anonymous Masterpiece* (*Bezimienne dzieło*) (1921) – who had dug a grave in order to be able to mediate in peace and quiet. According to Żakiewicz, "the reality of art and the reality of life can be very distant realms... I would like to warn against taking it seriously (i.e. making literal translations of distant facts into each other) and looking for nonexistent content in humorous/metaphorical/literary inscriptions in Witkacy's works. It works in a different way" (Żakiewicz, personal communication, September 9, 2008).

Nevertheless, trying to stick to the facts, being cautious and avoiding naïve psychological interpretations, the following paragraphs are an attempt to collate a selection of images created by artists who died by suicide or who have been affected by suicide of someone close. This may seem a morbid exercise, but looking at artists' self-portraits and suicide-inspired art, and remembering their personal lives may be a way of learning from their deaths and honoring their lives and the lives of their significant others. The list of painters and visual artists who died by suicide is extensive (see Appendix 1). Cutter (1983) compiled a list of forty one artists from the mid-16th Century to 1975, and Jamison (1993) provided names of fourteen artists who died by suicide and three who attempted to take their lives (Paul Gauguin, George Innes, and Dante Gabriel Rossetti). Schildkraut, Hirschfeld and Murphy (1994) found two suicide deaths (Arshile Gorky and Mark Rothko), two instances of paternal

suicide (Philip Guston and Franz Kline) and two single vehicle accidents (Jackson Pollock and David Smith) in a group of fifteen Abstract Expressionist artists of the New York School.

Sometimes artists who died by suicide became an inspiration for the art of others. For example, Eugène Devéria's lithograph *The Death of Constance Mayer* (1775-1821) shows a scene of the suicide of a French painter, Marie-Françoise Constance Mayer-La Martinière (1775-1821). A French artist Pierre Paul Prud'hon who was Mayer's teacher and partner also painted her portrait: *Portrait de Marie-Françoise Constance Mayer-Lamartinière* (c. 1804). Mark Rothko's death inspired Salvador Dalí's *Gala Contemplating the Mediterranean Sea, which at 30 meters becomes the portrait of Abraham Lincoln (Homage to Rothko)* (1976). The choice of colors used in *Gala Contemplating the Mediterranean Sea* is related to Rothko's famous color field paintings and, according to Hartman (2008), the painting was Dalí's outlet for dealing with personal traumas, such as the death of his infant brother who died before Dalí was born.

A special place in the history of art belongs to Elizabeth (Lizzie) Siddal (1829-1862), an artist, a model and wife of the famous Pre-Raphaelite painter, Dante Gabriel Rossetti (Hawksley, 2004). Siddal died from a laudanum overdose at the age of 33 following the stillbirth of her and Rossetti's child and her prolonged depression. She was immortalised in John Everett Millais's *Ophelia* (1851-1852), modelled for Holman Hunt (*A Converted British Family Sheltering a Christian Priest from the Pursuit of the Druids*, 1850) and for Rossetti's paintings (*How They Met Themselves* (1851-1860), *Paolo and Francesca da Rimini* (1855) and *Regina Cordium* (1860)). Over the period of their relationship Rossetti made numerous oil portraits of Siddal (1853 and 1854) and personal drawings, including *Elizabeth Siddal Asleep* (c. 1854), *Elizabeth Siddal Painting at an Easel* (1850s), and *Elizabeth Siddal Seated in a Basket Chair* (1850s). Among Rossetti's portraits of Lizzie Siddal is *Beata Beatrix* (1870), a painting showing a scene of beatification of Beatrice from the closing lines of Dante Alighieri's *Vita Nuova* (1295). Rossetti worked on the painting for six years after Siddal's tragic death, and the picture links Siddal and Beatrice - "the red dove, a messenger of love, was associated by Rossetti with Siddal. It bears a white poppy, a symbol of sleep or death and the source of laudanum, the cause of Siddal's death. In the background is Dante (right) looking towards Love (left), dressed in red and holding a flame" (Harris, 2007b, p. 1228).

Many of the painters who died by suicide left self-portraits, for example, Marie-Françoise Constance Mayer-La Martinière (e.g. *Self-portrait*, 1801), Lizzie Siddal (e.g. *Self-Portrait*, 1854), Maurycy Gottlieb (*Self-Portrait*, 1876), Richard Gerstl (*Self-Portrait*, 1901), Ernst Ludwig Kirchner (*Self-Portrait as a Soldier*, 1915) and Jan Cox (*Self-Portrait*, 1944). The famous Dutch neo-impressionist, Vincent Willem van Gogh (1853-1890) was among the most prolific self-portraitists of all time and, during the period 1886-1889, he painted over thirty self-portraits. These include *Self-Portrait with Bandaged Ear* (1889) and *Self-Portrait with Bandaged Ear and a Pipe* (1889) which show the artist after he had cut off a part of his ear in December 1888 (Harris, 2008a). Stanisław Ignacy Witkiewicz left numerous self-portraits - paintings, drawings and photographs, the latter often showing Witkacy's *alter egos* and humorous shots (Franczak & Okołowicz, 1986). A monograph on Witkacy's art (Jakimowicz, 1985) lists eight oil self-portraits painted between 1910 and 1939, the year of his suicide.

Some of the art gives hints of artists' mental suffering and experience of suicide. According to Schildkraut and his colleagues (1994), "one can see 'the raw suffering' in Gorky's nostalgic paintings of his mother and of his homeland; in Rothko's black and gray

paintings relating to tragedy and death; in Kline's tragic clown paintings; and in Guston's paintings of ropes, reminiscent of his father's hanging, and in his portraits of suffering Holocaust victims" (p. 486). A catalogue from a recent exhibition of the works of Jan Cox (1919-1980), a Belgian painter who died by suicide, pointed out "in addition to an enigmatic self-portrait and representations of birds flying freely as a sign of hope ('I am alive again, I am fluttering again, I am chatting again...'), *the Dood van Socrates* [*Death of Socrates*] (Antwerp 1980) occupies a crucial place at the beginning of the exhibition. The old Greek philosopher is not just the symbol of Greek antiquity, which inspired Jan Cox all his life, but is also the symbol of man in search of knowledge, wisdom and insight in good and evil. Like Socrates, Cox committed suicide" (Koninklijk Museum voor Schone Kunsten, 2008). A cartoon *Better Luck Next Time* (1834) which shows a failed suicide attempt by hanging was created by an English artist and caricaturist, illustrator of Charles Dickens's works, Robert Seymour (1798-1836) who died by suicide. A model for the face of Jessica in *Shylock and Jessica* (1876), a painting by Maurycy Gottlieb, a Polish-Ukrainian Jewish painter (1856-1879), was Laura Rosenfeld. Apparently, Gottlieb's marriage proposal was rejected by Rosenfeld and contributed to his suicide a few years later (Shinar, 1998). Man Ray's abstract airbrush painting *Suicide* (1917) was intended to be part of Ray's own suicide - he planned to point a loaded gun at the picture and pull the trigger with a string while standing behind it (Brown, 2001).

XIII

The suicide of a significant other influenced some artists' work. In 1901, a friend of Pablo Picasso, Catalan artist Carles Casagemas killed himself with a gunshot at the age of 20, apparently after an unhappy love affair with Germaine Gargallo, a young Parisian prostitute (Chalif, 2007; Harris, 2003c). Casagemas's suicide triggered the famous melancholy Blue Period ("It was thinking of Casagemas' death that started me painting in blue", Picasso after Leal, 2000, p. 56) and was immortalized in Picasso's art. The posthumous images of Casagemas include *The Death of Casagemas* (1901), *Casagemas in His Coffin* (1901), *Head of Dead Casagemas* (1901), *The Burial of Casagemas (Evocation)* (1901) and (probably) *La Vie* (1903). In the last two paintings, as well as in *Portrait de Germaine* (1902), one can also see Germaine Gargallo's face. *The Burial of Casagemas* is an allegorical picture bearing resemblance to El Greco's *The Burial of Count Orgaz* (1586-1588) and was painted mostly in blue. In Chalif's (2007) words, the image "shows nine mourners, all dressed in blue robes, in grief at the shrouded body of Casagemas. The mausoleum awaits the corpus. Above the death scene, Casagemas ascends to heaven on horseback, embracing his obsession, Germaine, while surrounded by three erotic whores and a vision of maternity, a mother with three children, as well as two other nudes. The nine figures in the 'heavenly' realm give balance to the nine earthly figures below." (p. 411). *La Vie* is similarly powerful and enigmatic and, although it has received much interest, "its true intent and themes will forever remain unknown. However, the work is suggestive of concepts of sorrow and impotence, fertility and creation, magic, and death and redemption. Casagemas is at once condemned for his human frailties and simultaneously resurrected for eternity. Picasso becomes Casagemas, as Casagemas becomes the painter, standing in his studio. Images of magic, Germaine pregnant with the

child of the impotent Casagemas, are balanced with maternity, a mother protectively holding her child” (Chalif, 2007, p. 415).

The art of the famous Belgian surrealist painter Rene Magritte (1898-1967) might have been significantly influenced by his mother’s death by suicide. Magritte’s mother, Regina née Bertinchamps, drowned herself in the Sambre River on February 1912, after several suicide attempts, when Magritte was 12. Magritte hardly ever talked about his mother’s death, and the only feeling he remembered in relation to the incident was “intense pride at the thought of being the pitiable centre of attention in a drama” (Sylvester, 1992, p. 12). It is not certain whether Magritte did see his mother’s body recovered from water with her face covered by a nightdress, but for some psychoanalytically oriented biographers this fact (or such an image in Magritte’s fantasy) shaped his art (Sylvester, 1992; Viederman, 1987). Paintings showing death by drowning, such as *Musings of a Solitary Walker* (1926), *The Garment of Adventure* (1926) and *The Flood* (1928); images of covered faces, such as *The Symmetrical Trick* (1928), *The Central History* (1928) and *The Lovers* (1928) and transformed heads, such as *The Rape* (1934), as well as paintings of nightdresses, such as *In Memory of Mack Sennett* (1936), have been interpreted in the light of Magritte’s childhood suicide trauma. According to Sylvester (1992), “(...) The prototypal back view appears in *The Musings of a Solitary Walker*, which is one of the two paintings which undoubtedly has to do with death by drowning, and the other, *The Flood*, also involves concealment of a face. There can be no doubt whatsoever as to the closeness of the link between the legend of the mother’s death and one of the most recurrent and persistent and significant elements in Magritte’s’ iconography. It is only impossible to say whether that element is a way of dealing with traumatic feelings about a certain hidden face or whether an obsession with hidden faces was imposed upon a tragic even of which there was no clear picture and which was, therefore, a blank to be filled in” (pp. 23-24). A series of *Perspective* paintings made in the late 1940s and early 1950s based on famous works by Jacques Louis David (*Madame Recamier*, 1800), François Gérard (*Madame Recamier*, 1805) and Édouard Manet (*The Balcony*, 1868-1869), in which Magritte substituted coffins for the human figures might show his preoccupation with death themes (Viederman, 1987). Not everyone agrees with this way of seeing Magritte’s art. For Paquet (2000), such psychological interpretations are “absurd” and “quite untenable” and, instead, “it is the literary, intellectual and philosophical elements which must be followed up if one is to even approach an understanding of this artist’s extraordinary work” (p. 24).

Some of the images created by the Norwegian symbolist painter and printmaker Edward Munch (1863-194) might have been tainted by his personal experience of a suicide threat by a woman whose romantic advances he had rejected. Munch’s art frequently dealt with themes of death, illness and mental anguish epitomised by the famous *The Scream* (1893). His personal experiences, such as the death from tuberculosis of his mother and sister when he was still a child and his anxiety, agoraphobia and ideas of persecution which lead to hospitalisation in 1908-1909 frequently found a reflection in his art (Steinberg & Weiss, 1954). Although versions of the story vary, between 1899 and 1902 Munch was involved in a romantic relationship with Tulla Larsen, and there was a possibility of them getting married. When Munch decided to end the relationship, Larsen in an attempt to get him back staged a suicide by overdose and/or threatened suicide with a gun. During this incident Munch sustained an injury to his hand, either trying to get the weapon from Larsen’s hand or when she tried to shoot him in the hand (Hodin, 2004; Steinberg & Weiss, 1954). At least three of Munch’s paintings which show a lifeless body of a man, and a standing woman seems to be

related to the shooting incident and its emotional after-effects: *Still Life (The Murderess)* (1906) and *The Death of Marat I and II* (both 1907) (Smith, 1992).

Lizzie Siddal was not the only model and an artist's lover who died by suicide and whose face was made immortal through the arts. Jeanne Hébuterne (1898-1920), a young French painter, model and partner of Italian artist Amadeo Modigliani, killed herself and their unborn second child by jumping out of the window a few days of his death from tuberculosis (Harris, 2005). Hébuterne was Modigliani's favourite model and posed for at least twenty portraits. Marie-Therese Walter (1909-1977) was a model for Pablo Picasso's paintings and sculptures, his lover and a mother to his daughter. She hanged herself four years after his death. Her face can be often recognised in Picasso's art, for example, in a sculpture *Head of a Woman* (1931), an oil painting *The Dream* (1932) and among Picasso's famous "Weeping Women" images produced between 1927 and 1943. The latter series, a collection of oil paintings, prints, drawings, and sculptures showing traumatized or grief-stricken women, are linked to Picasso's intimate relationships with three women: Olga Koklova (one of his wives) and his mistresses Marie-Therese Walter and Dora Maar (Springer, 1996-1997). According to Springer (1996-1997), "the stretch of years spent with Koklova was represented by imagery ranging from classical madonnas to a series of protoplasmic screaming heads. Most of the canvases depicting Walter present a reposed, sensual, and undemanding personality, while Maar is portrayed through images that are alternately anguished or radiantly alive" (p. 48).

A complicated relationship between French painter and printmaker Pierre Bonnard (1867-1947), Marthe de Mélny (his model and life-time companion) and Renee Monchaty (an aspiring artist, his model and lover who killed herself in 1925) can be traced in some of his paintings (Watkins, 1998). In 1918 Bonnard met Monchaty and asked her to model for him. Monchaty became his lover approximately two years later while Bonnard was in a continuing relationship with de Mélny, his companion since 1893. It is believed that Bonnard's decision to marry Marthe on August 15, 1925 was a trigger for Renee's suicide a few weeks later. She died either by drowning in a bathtub or by a gunshot (sources mention different suicide methods; it was also erroneously suggested that Renee's death prompted Bonnard to marry Marthe). Some of Bonnard's paintings show both women - blonde Monchaty and brunette de Mélny - for example *Young Women in the Garden (Renée Monchaty and Marthe Bonnard)* (1921) and *After the Meal* (1925), while other images show Monchaty on her own, for example, *Renée Monchaty* (1920). In some controversial interpretations, a picture of Marthe in *The Bath* (1925), showing her as a corpse-like stretched out nude, may be associated with Renee's suicide by drowning. However, in Watkins's words, "many a painter has suffered a loss without conjuring up a corpse as he paints his wife" (Watkins, 1998; p. 327).

A Polish artist Stanisław Ignacy Witkiewicz (a.k.a. Witkacy) killed himself by taking an overdose of Veronal and by cutting his throat in the summer of 1939 after the Soviet invasion of Poland on September 17, 1939. His death was a part of a suicide pact with his lover, Czesława Oknińska who survived the attempt. Jadwiga Janczewska, Witkacy's fiancée committed suicide by gunshot in February 1914, a year after they decided to get marry and after her death, in 1923 Witkacy married Jadwiga Unruh (Micińska & Dagler, 2005). Witkacy painted images of both women, Janczewska and Oknińska, and also took their photographs (Franczak & Okołowicz, 1986). For instance, *Composition with a Sleeping Woman* (1920) most probably shows the scene of Janczewska's suicide, and there was a portrait of Czesława

Oknińska (year unknown) made by Witkacy which has not survived until our times but has been preserved in a photograph.

XIV

The sheer number and variety of visual images of suicide in the Western art is both impressive and disconcerting. What can be learned from the study of suicide in the arts? Cutter (1983) proposed to use “suicidal art” for the purpose of public education and suicide prevention since “examples of suicidal art have far more impact on the public than do scientific words. Images garner attention and are able to communicate ideas even though the content is nonverbal” (p. x). The series of articles *Art and Images in Psychiatry* in a prestigious scientific journal *Archives of General Psychiatry*, utilizes the skills, knowledge and insight of artists to support the education and learning of mental health professionals. It reminds us of the words of Sigmund Freud written in a letter to his Viennese peer Arthur Schnitzler, an artist and physician, in May 1922: “(...)Whenever I get deeply absorbed in your beautiful creations I invariably seem to find beneath their poetic surface the very suppositions, interests and conclusions which I know to be my own. (...) So I have formed an impression that you know through intuition – or rather form detailed self-observation - everything that I have discovered by laborious work on other people.” (Freud, 1961; pp. 344-345).

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APPENDIX 1: ARTISTS WHO DIED BY SUICIDE⁵

Julia Acker (1898-1942) - Jewish-Polish figurative artist
Angel Acosta Leon (1930-1964) - Cuban painter
Georgette Agutte (1867-1922) - French painter
Henry Alexander (1860-1894) - American painter
Pedro Reinaldo Álvarez Castelló (1967-2004) - Cuban artist
Soares Dos Reis Antonio (1847-1889) - Portuguese sculptor
George Copeland Ault (1891-1948) - American painter
Belkis Ayón Manso (1967-1999) - Cuban artist and lithographer
Cees Bantzing (1914-1985) - Dutch artist
Fred Barnes (1923-1987) - American architect
Ralph Barton (1891-1931) - American cartoonist and caricaturist

⁵ The list was compiled based on Cutter (1983), de Negroni and Moncel (1997), Demyttenaere (2000), Jamison (1993) and own research with assistance of Karl Andriessen. The author acknowledges that given language limitations some of the artists who died by suicide might not have been identified through the search and included here. In some cases it is not clear whether the death was accidental or intentional, e.g. Rosso Fiorentino, Ray Edward Johnson, Ernest Lawson, Pietro Testa and Pieter Jacobszoon van Laer.

Francesco Bassano the Younger (1549-1592) - Italian Renaissance painter
Jeremy Blake (1971-2007) - American digital artist and painter
Mies Blomsma (1905-1938) - Dutch graphic artist
Oscar Florianus Bluemner (1867-1938) - German-born American Modernist painter
Francesco Borromini (Francesco Castelli) (1599-1667) - Italian Swissborn Baroque architect
Eugene Louis Boutier (a.k.a. Edgard) (1862-1937) - French sculptor
Patrick Henry Bruce (1881-1936) - American cubist painter
Bernard Buffet (1928-1999) - French Expressionist painter
Rembrandt Bugatti (1884-1916) - Italian sculptor
Bupalus (6th century BC) - Greek architect and sculptor
Dora Carrington (1893-1932) - English painter
Carlos Casagemas (1881-1901) - Spanish painter
Benjamin Chee Chee (born Kenneth Thomas Benjamin) (1944-1977) - Native Canadian artist
Bertrand Cheval (1932-1966) - French painter
Jack Ralph Cole (1914-1958) - American comic book artist and cartoonist
Jan Cox (1919-1980) - Belgian abstract and figurative painter
Edward Dayes (1763-1804) - British watercolour painter and mezzotint engraver
Elmyr de Hory (c. 1905-1976) - Hungarian-born Spanish painter
Emanuel de Witte (1617 – 1691) - Dutch perspective painter
Giovanni Battista di Jacopo (a.k.a. Rosso Fiorentino or Il Rosso) (1494-1540) - Italian Mannerist painter
Trivolis-Pierris Dimitrios (1785-1809) - Greek sculptor
Oscar M. Domínguez (1906-1957) - Spanish surrealist painter
Bede Evelyn Dominick Elwes (1931-1975) - English portrait painter
Robert Fagan (c. 1761-1816) - Irish painter, diplomat and archaeologist
Rosso Fiorentino (1494-1540) - Italian painter and decorator
John Bernard Flannagan (1897-1942) - American sculptor
Jacques France (1834-1894) - French sculptor
Günter Fruhtrunk (1923-1982) - German geometric abstract painter and printmaker
Emil Fuchs (1866-1929) - Austrian-American sculptor painter, sculptor and etcher
Colin Fulcher (a.k.a. Barney Bubbles) (1942-1983) - radical English graphic artist
Thomas Galvin (1927-1993) - American architect
Richard Gerstl (1883-1908) - Austrian painter and draughtsman
Mark Gertler (1891-1939) - British painter
Gregory Gillespie (1936-2000) - American magic realist painter
James Gillray (or Gilray) (1757-1815) - British caricaturist and printmaker
Henri Goetz (1909-1989) - US-born painter and engraver
Jack Goldstein (1945-2003) - Canadian-born American artist
Arshile Gorky (1904-1948) - Armenian-born American Abstract Expressionist painter
Maurycy Gottlieb (1856-1879) - Ukrainian Polish Jewish painter
Antoine-Jean Gros (1771-1835) - French neoclassical/romantic painter
Benjamin Robert Haydon (1786-1846) - English historical painter and writer
Jeanne Hébuterne (1898-1920) – French model and painter
Jules Holtzapffel (died 1866) - French painter
Ray Edward Johnson (1927- 1995) - American Pop Art artist
Starr Gideon Kempf (1917-1995) - American kinetic sculptor, architect, and artist

Ernst Ludwig Kirchner (1880-1938) - German expressionist painter and printmaker
Herman Krzyder (1881-1935) - Dutch painter and draftsman
Max Kurzweil (1867-1916) - Austrian Art Nouveau painter and graphic artist
Yefim Ladyzhensky (1912-1982) - Ukrainian-born Israeli artist
Ernest Lawson (1873-1939) - Canadian-American painter
Le Dominiquin (1581-1641) – Italian painter
Wilhelm Lehmbruck (1881-1919) - German sculptor
François Lemoyne (or François Le Moine) (1688-1737) - a French rococo painter
Robert Léopold (1794-1835) - Swiss painter and engraver
Mark Lombardi (1951-2000) - American Neo-Conceptualist and an abstract artist
Robert Malaval (1937-1980) - French painter
Arman Manookian (1904-1931) - Armenian-born American artist
Marie-Helene Martin (1931-1977) - French poet, painter and sculptor
Pierre Molinier (1900-1976) - French painter and photographer
Alfred Henry Maurer (1868-1932) - American modernist painter
Marie-Françoise Constance Mayer-La Martinière (1775-1821) - French painter
Daniele Nadone (1979-2005) - Italian post-modern painter and photographer
Nikolai Vasilyevich Nevrev (1830-1904) - Russian painter
Juan O’Gorman (1905-1982) - Mexican painter and architect
Wolfgang Paalen (1905-1959) - Austrian-born Mexican painter
Julius Mordecai Pincas (a.k.a. Jules Pascin) (1885-1930) - Bulgarian-born French painter
Alejandra Pizarnik (1939-1972) - Argentinian poet and painter
Joseph Presser (1907-1967) - Polish-born Armenian painter
Leno Prestini (1906-1963) - American artist
Bernard Requidot (1929-1961) - French painter
Johan Rham (born Johan van Roosen) (1943-1967) - Belgian/Flemish artist
Mark Rothko (born Marcus Rothkowitz) (1903-1970) - Latvian-born American abstract expressionist painter and printmaker
Katherine Linn Sage (a.k.a. Kay Sage) (1898-1963) - American Surrealist artist and poet
Petrus Graf Schaesberg (1967-2008) - German art historian, artist, editor, and teacher
Jules Schmalzigaug (1882-1917) - Belgian painter
Rudolf Schwarzkogler (1940-1969) - Austrian performance artist
Jochen Seidel (1924-1971) - German-born American artist
Kurt Seligman (1900-1962) - Swiss painter
Roger Serras (1942-1978) - Flemish poet, painter and graphic artist
Robert Seymour (1798-1836) - English artist and caricaturist
Elizabeth Eleanor (Lizzie) Siddal (born Siddall) (1829-1862) - Pre-Raphaelite artist, model and poet
Nicolas de Staël (1914-1955) - Russian-born French artists
Jan Štursa (1880-1925) - Czech sculptor
Otakar Švec (1892-1955) - Czech sculptor
Jean Tabaud (1914-1996) - French portrait painter and war artist
Octave Tassaert (1800-1874) - French painter
Pietro Testa (1611–1650) - Italian High Baroque printmaker and draftsman
Henry Tilson (1659-1695) - British portrait painter
Tiberio Tinelli (1586-1638) - Italian early-Baroque painter

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- Pietro Torrigiano* (1472-1522) - Italian sculptor of the Florentine school
Patrick Joseph Tuohy (1894 – 1930) - Irish portrait, narrative, and genre painter
Jacques Vailland (1879-1934) - French painter
Eduard van der Null (1812-1868) - Austrian architect
Tinus van Doorn (1905-1940) - Dutch painter and sculptor
Vincent Willem van Gogh (1853-1890) - Dutch Post-Impressionist artist
Pieter Jacobszoon van Laer (1599-1642) - Dutch painter and engraver
Henri Benedictus van Raalte (a.k.a. H. van Raalte) (1881-1929) - English-born Australian artist and printmaker
Carel van Yper (c. 1510-1562) - Flemish painter
Floris Verster (1861-1927) - Dutch painter
Edward Matthew Ward (1816-1879) - English Victorian narrative painter
Watanabe Kazan (1793-1841) - Japanese painter, scholar and statesman
Charles Wiegels (1883-1908) - German painter
Stanisław Ignacy Witkiewicz (a.k.a. Witkacy) (1885-1939) - Polish painter, photographer, playwright, novelist and philosopher
Eugene Witta (1897-1960) – Swiss-born French architect
Juozas Zikaras (1881-1944) - Lithuanian sculptor and artist
Unica Zürn (1916-1970) - German author and painter

Chapter 3

**THE SUICIDE OF AJAX:
A NOTE ON OCCUPATIONAL STRAIN AS
A NEGLECTED FACTOR IN SUICIDOLOGY**

Steven Stack

One of the main purposes of examining qualitative case studies from art is to gain insight into the social and psychological causes of behavior, including suicide. This brief chapter illustrates the utility of applying insights from one of the oldest surviving portrayals of suicide in art, that of the Greek warrior Ajax. It tests a hypothesis derived from the case of Ajax that occupational strain contributes to suicide risk, based on data from the contemporary United States on 15,739 psychological autopsies. It demonstrates that a variety of occupational strain, job demotion, is a leading independent predictor of suicide. Other leads from artistic works are mentioned as points of departure for future investigations.



Figure 1. The suicide of Ajax, British Museum.

THE SUICIDE OF AJAX

Figure 1 portrays the suicide of Ajax, an ancient Greek warrior. This is the most commonly portrayed suicide in the art of antiquity. A total of 45 of the 104 surviving suicide art objects of antiquity analyzed by van Hoof (1994) were of Ajax.

Ajax was the son of the King of Cyprus, King Telemon. This legendary hero is discussed in ancient works including Homer's *Iliad* and the *Odyssey* (Homer, 1951; van Hoof 1994). Ajax was portrayed as a mighty Greek warrior both in size (he had enormous stature and frame) and in deed. He was considered second in bravery and ability only to Achilles. While he was brawny and brave, Ajax was, however, slow in speech.

In the Trojan Wars, Hector, the mightiest Trojan, fought Achilles. Achilles was slain. Ajax bravely fought Hector and the Trojans in an effort to rescue the body and armor of Achilles. It was Ajax that engaged Hector in single combat. It was Ajax that managed to rescue Achilles' body so that it would not be desecrated by the Trojan army.

Given the loss of Achilles, the Greeks had to select a new leader for their army. The top two candidates were Ajax and Odysseus. The Greeks decided to have them each give a speech on their qualifications, leadership abilities, and goals for leading the Greek army. This gave Odysseus the advantage since he was a great orator, while Ajax was not gifted in the art of public speaking. Odysseus's abilities at oratory were chosen over the bravery and brawn of Ajax. Ajax felt humiliated, disappointed and angry. Reports of the event often note that he ran out of the tent and in a blind rage killed a flock of sheep that he mistook for the enemy. He then fell on his sword, a manner of death that was to become the Roman ideal, ending his life (Brown, 2001; Cutter, 1983; Homer, 1951; Encyclopedia Britannica, 1911; van Hoof, 1994).

Ajax's occupation was in the military. He was a high-ranking officer who expected that his bravado would be rewarded. He had just fought the mightiest warrior on earth to save Achilles's body from desecration. Instead of choosing him, the Greeks had chosen someone whose deeds were measured in words rather than actions on the battlefield. In short, he was passed over for a promotion. His perception was that he deserved the promotion given his merits and occupational accomplishments. Although his suicide took place over three millennia ago, the insight contained in it can apply to any occupation in any point in time. His suicide resulted from a dimension of occupational strain.

From the standpoint of modern strain theory (e.g., Agnew, 1992; Stack & Wasserman, 2007), there was a gap between his desired goals (promotion) and his present conditions. This gap was clearly perceived as unfair. Further, the decision had been made - it was final. This was not a case of anticipated strain - it was realized strain. Not only had he been passed over for a deserved promotion but, in addition, the promotion went to someone he thought not nearly as deserving as himself. The values that determined the decision were based on oratory not valor. Ajax's sense of basic militaristic values was violated. Valor had not been adequately rewarded. In these circumstances, Ajax committed suicide.

THE AJAX EFFECT TODAY

Modern research on economic strain and suicide has focused overwhelmingly on structural factors that are amenable to measurement in existing datasets. Such measures

include unemployment, poverty, and income (e.g., for reviews see Hawton & Platt, 2000; Stack, 2000). Research on unemployment, in particular, has been extensive, and the results have been consistent. At the individual level of analysis, unemployed people tend to have a suicide rate of at least twice that of comparison groups such as the employed population. While we have a good research base on some variables such as unemployment, little is known about many possible dimensions of economic strain, including occupation-based strain.

Hawton and Platt (2000) correctly called for new research on economic strain and suicide. These include strain related to the phenomenon of underemployment. Persons employed at a level that is lower than their qualifications (education, experience, work related abilities, etc.), such as an individual with a PhD driving a taxicab, are apt to experience a gap between their actual work situation and their desired work situation, and to have an above average probability of being dissatisfied with their work.

METHODOLOGY

The present chapter uses data from the National Mortality Followback Survey of 1993. This survey was based on a national representative sample of deaths in 1993. The dependent variable was death by suicide (=1) versus all other cause (=0). The data referred to psychological autopsies done by trained professionals. Complete data were available on 1,302 suicides and 14,437 deceased controls.

Economic strain was measured as job demotion. Persons experiencing a job demotion in the last year of life were coded as 1 and others coded as zero. Control variables included measures of psychiatric state including an index of depression, substance abuse, and suicidal ideation. Sociological control variables included religious activities and living alone. Controls for opportunities for suicide included the presence of a firearm in the home and residence in a nursing home. For further details on the measurement of variables see Stack (2009). Since the dependent variable is dichotomous, logistic regression techniques are appropriate.

RESULTS

The results of the logistic regression analysis are provided in Table 1. Controlling for a total of 15 independent variables, persons who experienced job demotions were fully 6.72 times more apt than others to die through suicide. This is a very strong relationship. The logistic regression coefficient is more than five times its standard error ($p < .0001$). Job demotion was the second most important predictor of suicide. Suicidal ideation, that is, persons who had shared suicidal thoughts with significant others during the last year of life, were 10.8 times more apt to die through suicide than those who did not share such thoughts. Curiously, after controlling for suicide ideation, it was found that depression did not have a significant association with suicidal risk. Much of the research that documents associations between depression and suicide does not control for suicidal ideation. In results not fully reported here, the strong association between job loss and suicide held up in separate analyses for men and for women.

Table 1. The effect of job demotion on risk of death by suicide vs. all other causes (N= 1,302 suicides; 14,437 other deaths, National Mortality Followback Survey, 1993)

Independent Variable	Logistic Regression Coefficient	Odds Ratio
Job Demotion	1.91*	6.72
Sociological Controls		
Religious Activities Index	-.172*	0.84
Lives Alone	.63*	1.89
Opportunity: Firearm in House	1.28*	3.58
Opportunity: Resident in Nursing Home	-.63*	.53
Psychiatric Controls		
Depression Index	-.09	.98
Suicide Ideation	2.38*	10.8
Binge Drinking Frequency	.05	1.05
Demographic Controls		
Age	-.01*	.988
Gender (male=1)	.05	1.06
Race (White=1)	.85	2.35
Constant	-3.22*	—
Model Chi Square	1944.3*	—

* P < .05

Note: for the purposes of brevity additional demographic controls not shown.

CONCLUSIONS

The oldest, recurrent artistic depiction of suicide, the warrior Ajax, suggests that occupational strain may trigger suicide. Being passed over for a desired promotion has been a factor unexplored in scientific studies of suicide. Now, three millennia later, a related index of occupational strain, job demotion, was found to be a significant predictor of suicide. Out of 16 predictors including standard psychiatric and sociological variables, job demotion was the second most powerful predictor of suicide. The results are based on the best available dataset, comprised of over 15,000 psychological autopsies. Occupational strain, which we might label the term the “Ajax effect,” deserves attention in future studies of suicide.

There are leads as to new and understudied risk and protective factors for suicide to be gleaned from artistic accounts, although sometimes they are presented in a disguised form. Many of these points of departure are found in the present volume. As Lester points out in his chapter on suicide in literature, art can offer insights into cultural factors that contribute to suicide. For example, in William Faulkner’s *The Sound and Fury*, a college freshman from rural Mississippi at Harvard University commits suicide due to a lack of validation of his deep-seated adherence to the Southern subculture of honor. The lack of validation of cultural values underlies other suicides in art (including Ajax).

Altruism has also been neglected in suicidology. For example, several chapters in the present book demonstrate a recurrent theme of altruistic suicide both in film and literary depictions of suicide. In art, people often commit suicide for the benefit of the group. Artistic

illustrations may sensationalize this pattern (e.g., Bruce Willis blows up a gigantic asteroid in a suicidal act to save the whole world from certain destruction in *Armageddon* [1998]). However, such examples should serve to remind us that, under some conditions, people commit suicide for the benefit of the group. In particular, the notion that suicidal individuals often commit suicide because they perceive that they are a burden to others (Joiner, 2005) has a direct link with a type of altruistic suicide. Suicide is seen as of benefit to at least one significant other in these circumstances.

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PART II: SUICIDE IN THE MOVIES

Chapter 4

SUICIDE IN MOVIES: GENDER AND CHOICE OF SUICIDE METHOD

Steven Stack and Barbara Bowman

For decades the male suicide rate has been three to four times that of the females. Currently, the suicide rate of men in America is over four times that for women. In 2002 there were 25,409 men and 6,246 women who died by their own hands. These figures translate to gender specific rates of 17.9 per 100,000 per year and 4.3, respectively (Centers for Disease Control, 2006). It is well established that a proximate cause of the gender gap in suicide rates is that females are more apt than males to use less lethal methods of suicide such as poisoning, while males are more apt than females to use highly lethal, violent methods such as firearms (Canetto & Sakinofsky, 1998; Denning, et al., 2000; Kposowa & McElvain, 2006; Lester, 2000; Maris, Berman & Silverman, 2000). Choice of method clearly explains some of the variation in suicide rates by gender. However, there has been relatively little rigorous research on the social and psychological factors, which underlie the gendered selection of suicide methods.

Several hypotheses have been advanced to explain the association between gender and choice of suicide method. Some researchers have contended that women use less lethal methods because they are less intent on dying than men (Denning, et al., 2000; Rich, et al., 1988). However, there is substantial evidence against this motivational hypothesis. Studies of both parasuicide and completed suicide have shown no significant difference in the intent to die between men and women (Canetto & Sakinofsky, 1998; Denning, et al., 2000). A biological hypothesis has been advanced and argues that men are more neurologically predisposed to aggression, thus placing them at a higher risk for violent means of suicide (Denning, et al., 2000). A third set of hypotheses has been advanced under the rubric of differential socialization (Canetto & Sakinofsky, 1998; Denning, et al., 2000; Lester, 2000). Some researchers have contended that women are less apt than men to use violent methods of suicide (e.g., firearms, jumping, and cutting) since women learn to value physical attractiveness more than men (Denning, et al., 2000; Kposowa & McElvain, 2006). Suicide by violent methods such as firearms or jumping from tall buildings can seriously disfigure the body, and violate the norm of a "neat death." Other variants of the socialization hypothesis

include the learning of the value of relatedness (Denning, et al., 2000). Women are said to subscribe to this value orientation more than men. Women are less apt to use violent methods than men since women do not want to traumatize those who discover their bodies. However, it has been noted that these socialization hypotheses have generally not been rigorously tested empirically (Canetto & Sakinofsky, 1998; Kposowa & McElvain, 2006). While they have intuitive appeal, measures of key concepts such as the value of relatedness and the value of physical attractiveness are typically absent in the research to date.

The present study does not seek to resolve the debate over the relative importance of the various hypotheses on gender and choice of method. Instead, it draws attention to an important agent of socialization to gender roles: the mass media. In particular, it contends that women and men learn about gendered suicide methods in the narratives in films. Its central hypothesis is that method of suicide is a cultural and gendered idiom, which is learned and reflected in feature films.

Feature films constitute a major educational institution. Watching movies is the number one leisure activity in America. Americans spend more time watching movies than they spend consuming other sources of information such as books and magazines. Hollywood's movies provide a continual source of images, ideas, beliefs, attitudes, and other "data" about the social world (Bulman, 2005; Vera & Gordon, 2003).

Suicide is a rare event. In a typical year, only a small proportion of Americans report knowing anyone personally who suicided (Davis, 2005). To the extent that we typically have little information based on first hand experience with suicide in our personal social networks, we may disproportionately rely on the mass media for our source of information about suicide. Based on a bibliographic and Google search, the present authors estimate that over the last century, Hollywood has produced over 2,000 films that contain one or more suicides. Relatively consistent patterns in these films can be taken as markers of cultural definitions of suicide in America.

The narratives and images contained in cinematic productions of suicide provide cultural scripts or meanings about the causes and consequences of suicide, the demographics of suicide such as age, gender, and marital status, the treatment for suicidality, reactions to suicide by significant others, and the methods of suicide. To the extent that the methods of suicide are gendered in film, it would be anticipated that the methods of suicide would be gendered in the real world. This does not necessarily mean that the films cause people to select particular methods. The nature of the causal relationship between art (film) and society is complex (Bulman, 2005; Vera & Gordon, 2003). The direction of causality is assumed to be bi-directional wherein suicide method in film may influence suicide methods in the real world, while the methods for suicide in the real world may also influence the portrayal of suicide in film. The present investigation does not seek to unravel cause and effect. The mission of the present analysis is simply to determine if the cultural scripts on patterns of suicide method and gender in film correspond to those in society. If so, film may be an important agent of socialization on gender and choice of suicide method.

Web-based filmographies were searched under the heading of "suicide." The Internet Movie Data Base (imdb.com), the largest online collection of films was searched as well as additional websites including allmovies (www.allmovies.com). Further, two web sites that specialize in films of the 1990s and 2000s were scrutinized: kids in mind (www.kidsinmind.com), and screen it (www.screenit.com). To be used in the study a film had to meet the following six criteria. (1) the film was produced by the American film industry.

Foreign films were omitted. (2) It was based on real life circumstances. Horror films, science fiction films, and animated films were omitted. (3) It dealt with a completed suicide. Films with only suicide ideation and plans or unsuccessful attempts were omitted. (4) It had to be a feature film of at least 60 minutes in length. (5) It had to be circulated in movie theatres. Films made only for television were excluded. (6) It was produced recently, between 1990-2006. A total of 121 films met these criteria. They contained 148 suicides.

The first dependent variable is a binary variable where 1 = a firearm was used as the means of suicide and 0 = all other means. Firearms include handguns, shotguns, and rifles. A second dependent variable encompasses all nonviolent methods in film, where 1 = a non-violent method as defined in previous work (Denning, et al., 2000; Stack & Wasserman, 2005), and 0 = all other methods. Non-violent methods include poison, drug overdoses, gases and vapors such as carbon monoxide poisoning, use of plastic bags, and drowning. There are two independent variables used to predict the dependent variables. First, gender is coded as a binary variable (0,1) where 1 = male. A control is introduced for time (year) to capture any trends in the media's portrayal of gender and method of suicide. Since the dependent variable is a binary variable, logistic regression techniques are employed (Borooah, 2002).

There were 42 female and 106 male suicides portrayed in the feature films. For females there were three gun suicides (7.1%). For males, there were 49 gun suicides (46.2%). Table 1 provides the results of the logistic regression analysis. Controlling for year, males are significantly more likely than women to use firearms in suicide ($B = 2.48$, standard error = 0.64, $p < 0.0001$). Based on the odds ratio, men are 12.0 times more likely to use guns than women. The coefficient for the time trend variable is also significant ($B = -0.11$, standard error = 0.048, $p < 0.027$). Based on the odds ratio, each year lowers the probability of a firearm suicide by 10 percent. From the Nagelkerke r-squared statistic, the model explains approximately 24.5% of the variance in the dependent variable.

Table 2 presents the findings for the analysis of non-violent methods. Controlling for year, males are significantly less likely than women to use non-violent methods in portrayals of suicide ($B = -1.51$, standard error = 0.40, $p < 0.0001$). Based on the odds ratio, men are 78% less likely to use non-violent methods than women. The coefficient for the time trend variable was not significant ($B = 0.05$, standard error = 0.05, $p > 0.05$). From the Nagelkerke r-squared statistic, the model explains approximately 14.4% of the variance in the dependent variable.

Table 1. The effect of gender and time on the portrayal of firearm suicide in feature films, 1990-2006, logistic regression results

Variable	B	Standard Error	Wald Chi-Square	Odds Ratio
Male (1)	2.48*	0.64	15.18	11.97
Year of film	-0.11*	0.48	4.84	0.90
Constant	210.28*	96.69	4.73	-----
	Nagelkerke r-squared=0.245			
	-2LL= 162.87 Model Chi Square= 29.02*			

* $p < 0.05$

Table 2. The effect of gender and time on the portrayal of non-violent methods of suicide in feature films, 1990-2006, logistic regression results

Variable	B	Standard Error	Wald Chi-Square	Odds Ratio
Male (1)	-1.51*	0.40	14.56	0.22
Year of film	-0.49	0.05	0.97	1.05
Constant	99.04	100.27	0.97	-----
	Nagelkerke r-squared=0.144			
	-2LL= 162.67 Model Chi Square= 15.71*			

* $p < 0.05$

Why men are more likely than women to choose highly lethal methods of suicide is an important question, especially since men's rate of suicide is four times that of women. The present study builds on the cultural scripts or socialization perspective on choice of method (Canetto & Sakinofsky, 1998; Denning, et al., 2000). It argues that the suicide victims in film present role models for suicidal men and women in the real world. It finds that men are twelve times more likely than women to be portrayed as suiciding with guns, a highly lethal mode of suicide. In turn, men are substantially less apt than women to be portrayed as using non-violent methods of suicide such as drugs and drowning. These patterns in film correspond to the patterns in society.

A strength of the study is that it is the first to apply the socialization perspective on suicide method to an analysis of film. It is successful in relating the cultural patterns encompassing gender and suicide method in film to the corresponding patterns in the real world.

A weakness of the investigation is that it is not clear to what extent suicide victims take into account the cultural role models in cinema in choosing their method of suicide. Other research has demonstrated that fictional depictions of suicide in film and television are not as apt to influence the overall suicide rate in society compared to nonfictional media portrayals of suicide such as news stories about real people who have suicided (Pirkis & Blood, 2001; Schmidtke & Schaller, 2000; Stack, 2003). However, previous research has found that highly publicized fictional portrayals of suicide by a *specific method* often are followed by an increase in suicides by that method of suicide (Pirkis & Blood, 2001; Schmidtke & Schaller, 2000; Stack, 2003). For example, the fictional portrayal of a young man who suicided on the rails in Germany was followed by an increase of 86% in the suicide rate of young males on the rails over the following 70 days (Schmidtke & Schaller, 2000). In New York City, in the year following the publication of *Final Exit*, a book recommending suicide by asphyxiation by plastic bag, the number of suicides by that method in New York City increased by 313%, from 8 to 33. A copy of *Final Exit* was found near the bodies of 27% of these suicide victims (Stack, 2003). The results of the present study are consistent with the hypothesis that suicide methods in society will correspond to suicide methods in film.

The policy implications of the findings relate to gun control. The chances for preventing suicide are reduced with the use of highly lethal methods. If Hollywood producers could decrease the portrayal of the highly lethal suicide methods, especially in the case of portrayals

of male suicide, the male suicide rate may very well decrease. Less than ten percent of women use guns in film. If this were true in the portrayals of male suicide, over a period of time the cultural scripts associated with male suicide method would be expected to change. To the extent that men learn from film to employ guns in their suicides, the male suicide rate would be expected to decline over the long term, to the extent that they modeled the nonviolent method of suicide in a new genre of film.

Future research on suicide attempters is needed to document the extent to which the attempters report following the cultural scripts in film. In addition, research is needed to explore possible changes in the presentation of gender and method of suicide for earlier periods in American film history, for other nations, and for other genres of film such as science fiction.

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Chapter 5

THE LEGACY OF LUCRETIA: RAPE-SUICIDES IN ART, 509 BC - 2008

Steven Stack and Barbara Bowman

While rape is a known risk factor for suicidality in both men and women (e.g., Shrier, et al., 1998; Stack, 2006; Stepkoff, 1998; Ullman & Brecklin, 2002; Walker, Archer & Davies, 2005), it has received relatively little attention in suicidology. Textbooks on suicidology, for example, generally do have rape in their indexes (e.g., Hawton & van Heeringen, 2000; Lester, 2000; Maris, Silverman & Berman, 2000). There is also a relative lack of attention to the extent to which and how rape-suicide has been covered in the many forms of art. It is clear that one portrayal of rape-suicide, that of Lucretia, has been covered extensively in the visual arts, notably in paintings and prints (e.g., Brown, 2001; Cutter, 1983; Harris, 2008; Hults, 1991). It is not clear, however, if the nature of the portrayal of rape of Lucretia has developed a legacy of its own in literature and film. The present paper fills this void in the literature on images of rape-suicide in art history.

THE RAPE-SUICIDE OF LUCRETIA

The most celebrated image in the history of visual arts of suicide is that of Lucretia (Figure 1). Lucretia was raped in 509 B.C. by Sextus Tarquinius. Sextus was the son of the Roman tyrant, Lucius Tarquinius Superbus, who had seized Rome without the support of the common people. According to the ancient writings and records of Livy, Ovid, and others, Lucretia placed such a high value on female chastity that once violated she had to take her own life in order to preserve her honor.

Sextus and his friends had been away engaged in the war at Ardea. In a lull between battles, they bragged about their respective wives' virtues. They decided to make a surprise visit to Rome to see if their wives were well-behaved and faithful in the absence of their husbands. While all of the men had thought their wives would be resting quietly at home, all but one were whiling their time away at a loud banquet and engaged in still other pleasures. In

contrast, Lucretia, the wife of Collatinus, was found at home spinning wool. Her virtue and beauty inflamed the sexual desires of Sextus. She represented something of a seduction challenge since she had such a reputation for valuing sexual faithfulness.

Sextus gained entry to her home given his high social status. He brought a male slave with him. After dinner he was able to sneak into her bedroom with the slave. Sextus threatened to kill her and his male slave, and place their naked bodies side by side so as to suggest she had committed adultery with a mere slave. Adultery with a slave was, at the time, punishable by death. Only under this threat did she submit to him.



Figure 1. The Suicide of Lucretia. Print by Franz Crabble (1520-1530). British Museum, London, England.

After her submission to Sextus, she planned her revenge. She called a meeting of her father, husband, and others, including her friend Lucius Junius Brutus. She came dressed in mourning attire. She announced the rape and the circumstances which drove her to sexual surrender. She first managed to get her father, husband and Brutus to pledge an oath for revenge against the Tarquins. She then pulled a dagger, stabbed herself in the chest, and died. Livy noted that her apparent motivation was self-punishment, because no breach of marital chastity is excusable.

Brutus then pulled the dagger from her chest and implored all in attendance to put aside their grief, turn their remorse around into anger and rise against the monarchy of Rome. They carried the body of Lucretia into the streets. The Romans were shocked at the suicide and the story of the brutal rape. At the Roman forum, with Lucretia's body spread before him, Brutus was able to elicit a feeling of outrage from the crowds. The enraged people drove the King into exile from Rome. The King was replaced by two consuls, Brutus and Collatinus. The Republic of Rome was formed (Harris, 2008a, 2008b; Cutter, 1983; Hults, 1991; Livy, 2006; Matthes, 2001). The suicide of Lucretia then, unlike the vast majority of millions of suicides to date, actually changed world history.

Given such factors as the coverage in the writing of the ancient historians (both Livy and Ovid), the fact that her suicide resulted in the establishment of the Roman Republic, and the fact that she upheld the cultural value of chastity, an important value of her period, Lucretia's suicide has captured the imagination of artists as well as academics, feminists, and historians (e.g., Baines, 2003; Brown, 2001; Cutter, 1983; Donaldson, 1982; Duncan, 1948; Harris, 2008a, 2008b; Hults, 1991; Jed, 1989; Matthes, 2001; Minois, 2001). In fact, Lucretia's suicide is the most frequently painted rape-related suicide in art history (Cutter, 1983). Table 1 provides the number of artists who have painted Lucretia's suicide and the number who have painted the suicides of other popular suicides in art history.

With 137 artists painting one or more depictions of her suicide, Lucretia's suicide represents the most celebrated suicide image in art history. The suicides of the Queens of Egypt and Carthage (Cleopatra and Dido) have not received nearly as much attention. The paintings of Lucretia also spanned five centuries from those of DaGiovanni (1430-1495) through the paintings of DeChirico (1888-1922). The image of her suicide has endured over a long period (Cutter, 1983). Lucretia's act has been considered one of the prime examples of heroic suicide.

Table 1. Number of artists who painted one or more depictions of selected famous suicides

Suicide	Number of Artists who Have Painted the Suicide
Lucretia	137
Cleopatra	97
Dido	63
Judas	51
Sophonisha	41
Ophelia	11

Source: Cutter 1983

While there is no question that Lucretia established a legacy in the visual arts such as paintings and prints, it is not clear how much this rape-suicide influenced the portrayal of rape-suicide in literature and film. While there is evidence that Lucretia's suicide is often mentioned in literary works, including a poem by William Shakespeare dedicated to the memory of her rape-suicide (Duncan Jones & Woudhuysen, 2007), the extent to which rape *per se* is covered in alternative art venues is unclear. The importance of the legacy of Lucretia rests in part on whether or not, and the extent to which, key aspects of her suicide are replicated in additional art venues including literature and film.

The present paper has four missions. First, it compares the extent to which rape-suicides have been portrayed in popular works of literature and, especially, modern films. Second, we are concerned with a qualitative analysis to uncover patterns in the way that rape-suicide is portrayed in film. For example, do the survivors of rape-suicides, that is the significant others of the suicide victim, take on the role of avengers? Do they act as did Lucretia's family and seek revenge on the rapist? Third, we raise the question as to whether the frequency of the presentation of rape-suicide has changed over a century of film. In particular, given the rise of the women's movement, and the associated enhanced sensitivity of rape as a social issue, or for other reasons, has there been a decline in framing suicide in terms of rape in American films? Fourth, we explore if rape-suicides are more apt to be portrayed as leading to revenge by those left behind than other suicides in film history. The elements of the second goal are in need of some elaboration.

Elements of Lucretia's Legacy

Through a qualitative analysis, the present chapter explores the presence of the following three elements of the narrative concerning Lucretia's rape-suicide. First, there is the element of community conflict. The rape-suicide is nested in a long-standing conflict between the tyrannical ruling class in Rome and the common people. The rulers are very unpopular. The rape is seized upon to run the rulers out of the city. It is not as if the rape alone would have been sufficient to make the rulers unpopular and subject to exile. There is a long-standing conflict greater than that brought about by the rape.

A second element of the legacy is the element of status inequality between the offender and the victim. The offender is part of the ruling class, and the victim, while not poor, is not part of the ruling elite. Hence, there is the pattern of inequality of general social status where the victim is the subordinate.

Third, there is the element of the survivor as an avenger. The family of the rape victim leads a march through the streets of Rome and uses the rape to wrest power from the ruling elite. The ruling elite is exiled and the significant others of the suicide victim become the new rulers of Rome. Lucretia's suicide is a clear example of a type of reaction by suicide survivors - revenge. In her case, the evil deed of Sextus drove her to suicide. Her review of the suicide in the presence of her family was a crying out for revenge. Lucretia's suicide was perhaps the first artistic depiction that carried the theme of the survivor as the avenger, not as a grief stricken person that does nothing about the causes of the suicide.

With respect to its second goal, the present investigation will explore whether or not the three elements of Lucretia's rape-suicide have survived two millennia of storytelling. Are the narratives found in modern film portrayals of rape-suicides framed in terms of community

conflict, status inequalities and survivors as avengers? Is this legacy of Lucretia's rape-suicide replicated in cinema?

METHODOLOGY

Sample of Rape-Suicides In Literature

Herein, popular literature refers to works of world literature that are widely read. The operational definition of popular world literature is based on the availability of *Cliff Notes*, widely used summaries of literary works for classes in literature both at the high school and college levels. A total of over 200 existing *Cliff Notes* corresponding to 239 works of popular world literature existed at the time of data collection. Summaries of these works were read, and Google searches were performed using appropriate keywords to locate suicides in them. A total of 104 suicides were located in 61 of these literary works. Summaries of these suicides and the circumstances that surrounded them were read in their respective *Cliff Notes* summaries as well as other bibliographic sources. Many chapters and sections of the literary works themselves were read to deepen our understanding of the motives behind the suicides.

In order to be considered a rape-related suicide, a suicide had to meet one of the following criteria. These criteria are taken from strain theory (Agnew, 1992) and refer to three modalities of strain: anticipated strain, noxious stimuli, and vicarious strain. Suicides where a victim is clearly committing suicide in order to avoid being raped are counted. In other words, the anticipation of a rape, if it drives the suicide, is defined as a rape-related suicide. Second, rape constitutes a noxious experience. Suicides that occur after a rape, for example by a person who is in distress over the rape or one who is experiencing post-traumatic stress symptoms, are defined as rape-related. Third, there are possible suicides stemming from vicarious victimization in rapes. For example, the case where a mother whose daughter is raped and wherein the daughter becomes seriously ill or dysfunctional as a result, might contribute to suicidality in the mother. To the extent that a significant other is emotionally distressed over a rape and commits suicide as a result, we classify such suicides as rape-related. Finally, there are vicarious offender rape-related suicides. It is possible that an offender in a rape might be driven to suicide over extreme guilt or shame over his/her own behavior. It is anticipated that nearly all rape-related suicides would fall into the first two categories.

Sample of Rape-Suicides in Film

A sample of suicide films was generated through a search through six web-based filmographies. The single best source was the film archive of the American Film Institute (www.afi.com). In order for a film to be included in the present investigation as a rape-related suicide film, it had to meet the following criteria: (1) have one or more completed suicides, (2) at least one suicide needed to be rape-related using the criteria described above, (3) the film had to be produced by a United States film company, (4) the film had to circulate through American theatres (films made for television were omitted), and (5) the film had to

depict suicide in real life circumstances. For this reason several genres of films were omitted including horror, science fiction, and fantasy films.

Applying the criteria, 5 literary works met the criteria for inclusion as rape-related suicides. A total of 44 suicides in movies met the same criteria as having a rape-related suicide.

Figure 2 illustrates a suicide due to anticipated rape. In a scene from *Enter the Dragon* (1973), a young Chinese woman has been chased into a warehouse by seven thugs. It is clear, as they close in, that they will rape her. She is in a state of apparent trauma. She picks up a piece of broken glass, stabs herself, and dies.

Control Group

In the case of film, a control group of suicide films was constructed from all films meeting the criteria for inclusion, except that the suicide did not need to be rape-related. Any completed suicide would qualify the film for inclusion in the control group, as long as the film also met criteria one, three, four, and five listed above. In all, a set of 1,249 film suicides met the criteria for inclusion in the study.

The analysis will proceed through three stages which address four issues. First, a simple quantitative table is constructed to determine if literature or film is more apt to carry on the legacy of Lucretia's rape-suicide. Second, a qualitative analysis is done to uncover themes in the portrayal of the context of rape. That is, for example, is rape-suicide used as a tool to present a social problem such as racial/ethnic conflict? Third, through a quantitative analysis we determine if there has been any change in the degree of coverage of rape-suicides in the movies over a century of film. Fourth, a second multivariate logistic regression analysis will be performed to determine if rape-suicides are more apt than other suicides to trigger feelings for revenge in the survivors.



Figure 2. Suicide scene from *Enter the Dragon* (1973, Warner Brothers, Director: Robert Clouse). Cornered in an old warehouse by thugs, SunLi suicides with a piece of broken glass to avoid gang rape.

ANALYSIS

Quantitative Analysis: The Legacy in Literature versus Film

Table 2 presents the results on the frequency of rape related suicides in popular works of world literature compared to the frequency in the cinema. Only 5 portrayals of rape-suicide appeared in literature over 750 years. These five represented 4.8% of the 104 suicides portrayed in popular world literature. It is noteworthy, however, that three of these were found in a single work - Chaucer's Canterbury tales (circa 1350).

Table 2. The percentage of rape-suicides in popular works of world literature and modern cinema (N=5 rape-suicides in literature, N=44 in modern films)

	Literature	Film
Rape-Suicides	4.8% (n=5)	3.4% (n=44)
All Other Suicides	95.2% (n=99)	96.6% (n=1,249)
Totals	100% (n=104)	100% (n=1,293)
	Chi Square= .0561, p=.454, p > .05 Not significant	

In film, of 1,293 suicides, a total of 44 were rape-related. A list of these films is provided in Appendix 1. While the percentage of suicides in literature that are rape-related in literature is higher than the percentage in film (4.8% vs. 3.4%) this difference is not large enough to be considered statistically significant. The standard chi square statistic has a value less than its critical value, indicating that the difference could be due to mere chance variations. Hence, in relation to the sheer frequency of coverage of rape in their respective portrayals of suicide, these two art venues, literature and film, may be tapping a common cultural definition of suicide as it relates to rape. World literature and modern cinema are about equally likely to portray suicide as a result of rape situations.



Figure 3. Birth of a Nation (1915, David Griffiths Corporation, Director: D.W. Griffith). Oldest surviving rape-suicide scene. A young Caucasian woman flees from an African American male (far left) who apparently desires to rape her. As he closes in, she opts for suicide and jumps off a cliff.

Qualitative Analysis: Elements of the Legacy

The next issue is to assess whether or not each of the three aspects of Lucretia's rape-suicide is portrayed in modern cinema. Are the social contexts of community conflict, status inequality between offender and victim, and survivors as avengers present in cinematic portrayals of rape-suicide more than two millennia after Lucretia's case?

Community Conflict: A primary theme involves rape in the social context of community conflict. Race and ethnic relations often constitute the specific locus of such long standing conflict. The oldest surviving rape-suicide film, *Birth of a Nation* (1915), illustrates racial conflict. The narrative is told from the point of view of the Ku Klux Klan. A significant set of scenes in the early part of the film depicts a frightened young Caucasian female being chased through the woods near her plantation by an African American male. The event is portrayed as taking place in the early reconstruction period after the Civil War. As the African American male gets closer and closer to the female, she is in sheer panic, believing that she will be raped. She is trapped between the African American male and a cliff. She opts to jump to her death. The suicide scene is shown in Figure 3.

Two film versions of James Cooper's novel, *The Last of the Mohicans* (1936, 1992), also place rape-suicide in the context of racial conflict. An English General is fighting the French and Indian War. His daughter is kidnapped by some vicious Native Americans. She opts to jump off a cliff to her death in order to avoid being raped by their leader. Other examples of the race/ethnic conflict context include *The Prairie Pirate* (1925). Here the Caucasian female sister of a rancher is tending the ranch as a group of Mexican bandits ride up. She flees into the safety of her cabin. However, they force their way in. She retreats into the basement and takes her own life to avoid gang-rape by the Mexicans. In *Seven Women* (1966), a Caucasian woman plays the role of a doctor in the Far East. She and her six assistants are captured by the invading Mongols. She tricks her Asian captor, the leader of the army, into letting her assistants go, by promising him her body in return. She then poisons him and commits suicide to avoid being gang-raped by his Asian followers. Ethnic conflict underscores a gang rape in *Town Without Pity* (1961). Four American soldiers stationed in post war Germany brutally rape a German girl.

Status Inequality: A second pattern in the rapes was status inequality between the victim and offender. In the four versions of *Riders of the Purple Sage*, the kidnapped sister comes from a humble background. In contrast, her would-be assailant is the leader of a wealthy class of Mormon cattlemen. In *Girl's Town* (1996), a work supervisor rapes his employee. In Hitler's *Madmen* (1943), the powerful German army organization enslaves helpless college girls to become their sex slaves, and one commits suicide to avoid being a sex slave. In the American military, a drunken captain rapes a lowly Navy nurse in *In Harm's Way* (1965). The suicide scene is illustrated in Figure 4.



Figure 4. In *Harm's Way* (1965, Paramount, Director: Otto Preminger). Navy nurse Annalee is found dead by nursing colleague Maggie. She took an overdose of sleeping pills after being raped by Captain Eddington (played by film star, Kirk Douglas).

The nurse commits suicide shortly thereafter, leaving the ring that her boyfriend, an ensign, had given her in an envelope in a suicide note. In *Port of Missing Girls* (1928), a young girl commits suicide in response to her rape by her teacher. A psychiatrist is portrayed as breaking professional norms in *Sylvia's Girls* (1965). He rapes an attractive patient who has been working as a prostitute. The confused patient commits suicide. According to medieval folkways, a member of the nobility, such as a duke, would often have the right to have sex with a woman on her wedding night before the woman's husband could do so. In *The Night of Love* (1927), a married woman opts for suicide in order to avoid being ravished by a duke under these circumstances.

Survivors As Avengers: The case of Lucretia involved survivors as avengers. Rape is a terrible crime. It seems reasonable that the survivors might have a higher than average probability of desiring revenge. This is indeed the case in many of the rape-suicide films. In four film versions of Zane Gray's novel, *Riders of the Purple Sage*, the survivors do just that. The sister of a Texas Ranger, Lassiter, is kidnapped by the Mormons. She commits suicide in order to avoid rape by a Mormon leader she despises. When Lassiter finally tracks down the Mormons who are responsible, there is much bloodshed. In *The Prairie Pirate* (1925), the rancher, played by then film star Harry Carey, seeks revenge on the gang responsible for his sister's suicide. In *Enter the Dragon* (1973), the sister of a world class karate fighter, played by Bruce Lee, commits suicide to avoid being raped by seven thugs in a warehouse. The rest of the movie involves the karate fighter's revenge on those responsible and their friends. In *Birth of a Nation* (1915), the attempted rape of a Caucasian girl by an African American contributes to the formation of a whole social movement, the Ku Klux Klan.

The sister of an ex-Confederate colonel is raped by a Mexican in the Clint Eastwood film, *For a Few Dollars More* (1967). The Colonel (played by Lee Van Cleef) teams up with a bounty hunter (Clint Eastwood) to track down the rapist. After many adventures and misadventures, the Colonel ultimately engages in a duel with the rapist. The rapist is killed. In addition to killing the rapist, the Colonel and the bounty hunter manage to exterminate the entire Mexican gang. All of them have prices on their heads. The Colonel gives his entire

share of the reward money to the bounty hunter. All that the Colonel really wanted was revenge for the rape-suicide of his sister.

A brother hunts down and kills the rapists of his sister in *The Fugitive* (1925). In *A Clockwork Orange* (1971), a crippled husband gets revenge on a psychopathic rapist who raped his wife while he was forced to watch. In a few films the female relatives or friends seek revenge on the male rapist who is perceived to be responsible for their significant other's suicide (*Girls Town* 1996; *Apaches of Paris* 1915). However, it is typically men who seek revenge for rape-suicides (see also *The Outlaw's Revenge* 1916; *The Rogue Song* 1930). In an old version of *20,000 Leagues Under the Sea* (1916), Captain Nemo engages in a life-long hunt for Charles Denver, the rapist that caused his sister to commit suicide many years ago.

There was one unusual case of a vicarious rape-suicide where a young woman is raped by her stepfather. He flees after the rape. The mother is so appalled that she commits suicide. Years later, the daughter gets revenge and kills the wicked stepfather (*Peyton Place*, 1957). The film *Pariah* (1998) was banned shortly after it played in a limited number of theatres. It illustrates the graphic, prolonged gang-rape of an African American college student. She commits suicide that night by slitting her wrists in her bathtub. The bulk of the movie deals with revenge of her boyfriend against the skinheads. He even becomes a skinhead in order to get close to the rapists and deal them justice.

Due to space considerations, other patterns in the portrayal of rape-suicide are not fully analyzed here. However, one recurrent theme in rape-suicide movies will be discussed briefly: the theme of kidnapping.

Kidnapping: Women who commit suicide in rape-oriented themes are often victims of kidnapping. The four versions of the popular film, *Riders of the Purple Sage* illustrate this pattern, as do the two film versions of *Last of the Mohicans*. Further, a couple is kidnapped in *Lust Weekend* (1967). After being forced to engage in repeated sex acts with their captors, they form a suicide pact and end their lives. A teacher is kidnapped in a small Western town and opts for suicide to avoid rape in *Texas Jack* (1935). A married woman tourist commits suicide in order to avoid rape by her captors after being kidnapped in *The Gilded Spider* (1916). Paula in *The Heart of Paula* (1916) commits suicide after feigning a promise of sex to her kidnappers. She did so only after they freed her lover who was also a captive. A wife is kidnapped and suicides to avoid rape in *The Folly of Revenge* (1916).

Some caution should be exercised in interpreting the above qualitative results. There are, of course, many exceptions to the four patterns noted above. For example, in most cases, the survivors of rape-suicide did not seek revenge. In most cases there was not status inequality, and so forth. Nevertheless, it is noteworthy that three aspects of the rape-suicide of Lucretia live on in films, films that were made two millennia after her death. In particular, the legacy of Lucretia was found to live on in film in terms of community conflict, survivors as avengers and, to a lesser extent, status inequalities between the offender and victim. In contrast, the context of kidnapping is apparently a modern construction of rape-suicides. It does not logically flow from Lucretia's rape-suicide.

Table 3. The effect of period (post 1980 films) on the portrayal of rape-suicides in American Feature Films (N=1,293 suicides, 44 rape-suicides)

Variable	Logistic Regression Coefficient	Odds Ratio
Post 1980 Film	-1.39*	0.248
Female Suicide Victim	0.368*	1.44
Artist Occupation	-0.55	0.57
Constant Term	-3.25*	—
MODEL Chi Square	20.79*	

* Associated Chi Square statistic statistically significant, $p < .05$.

Quantitative Analysis of Trends

To assess the extent to which there was any change in the relative frequency of rape-suicides in film over a century, the century was divided up into two parts. These parts corresponded to the period where the women's movement had already been firmly established and a previous era. Films were divided into pre-1980, and 1980 and thereafter. The results of an analysis not fully reported here using alternative cutoff points (e.g., post-1970) were essentially the same.

The results of a logistic regression analysis are provided in Table 3. Controlling for the other predictor variables, films made in 1980 and thereafter were 75% less likely to connect suicides with rape than films made before 1980. Hence, the portrayal of rape-suicides has declined in film in recent decades. As anticipated, women were more likely to be portrayed as victims in rape-suicides than men. From the associated odds ratio in Table 3, women are fully 1.44 times more apt than men to be so portrayed in the cinema. There are only two films that portrayed men as the victims of actual rapes and only a few where men were vicarious suicide victims of the rapes of others (e.g., sisters). The control for occupational status as artist, was not associated with rape-suicides.

Table 4. The predictors of survivors being portrayed as seeking revenge in suicides in American Feature Films (N=1,293 suicides)

Variable	Logistic Regression Coefficient	Odds Ratio
Rape-Suicide Films	2.63*	13.95
Post 1980 Film	-1.45*	0.23
Female Suicide Victim	0.36*	1.13
Artist Occupation	-0.09	0.90
Constant Term	-3.08*	—
MODEL Chi Square	65.81*	

* Associated Chi Square statistic statistically significant, $p < .05$.

Quantitative Analysis of Survivors as Avengers

From the qualitative analysis, it appeared that a large proportion of the significant others of rape-suicide victims sought revenge. This is consistent with a key element of Lucretia's suicide, where her family led a rebellion in Rome against her rapist and his powerful kin. To ascertain to what extent rape-suicides are associated with cinematic portrayals of survivors as avengers, a distinction was made between films where the survivors seek revenge versus all other survivor reactions. The dependent variable becomes revenge (0,1). The predictor variables include rape-suicide film (0,1) versus all other suicide films. Further controls are added for period, where we distinguish between recent films and older films (pre-1980). It could be that suicide films are less apt to frame survivors as seeking revenge today. It may be that, for example, film makers are more apt today than in earlier periods to follow the advice of some professional suicidologists who claim that suicide is carried by an autonomous individual and, as such, other people and institutions should not bear the wrath of significant others (e.g., Jobes, et al., 2000).

Table 4 presents the results of a multiple logistic regression analysis of the predictors of a film having survivors seek revenge. Controlling for the other variables in the equation, rape-suicide films are fully 13.95 times more apt than other films to portray suicide survivors as avengers. The logistic regression coefficient greatly exceeds the standard requirement of significance at the $p < .05$ level ($p < .0001$). There is also evidence that the element of revenge for suicide victims is becoming less common in contemporary films. Films made in 1980 and thereafter are 77% less likely than pre-1980 films to portray survivors as avengers. The remaining predictors do not significantly differentiate the survivors as avengers versus nonavengers in films.

CONCLUSIONS

This chapter assesses the presence and the extent of aspects of the influence of Lucretia's suicide in the sixth century B.C. on the artistic portrayal of suicides over three millennia. While her rape-suicide was the most popularized image of suicide over two millennia of paintings, this has not been the case in two alternative art venues. Five percent or less of the suicides in popular world literature and modern cinema are rape-suicides. However, literature and film do not differ in the extent to which they portray suicide as a result of rape or fear of rape. This finding suggests that these two art venues may be reflecting a latent cultural variable that defines the circumstances of suicide.

A qualitative analysis was done which suggests that three elements of Lucretia's rape-suicide have established something of a legacy in modern film. Many of the 44 films portraying rape-suicides frame the suicide in terms of community conflict. Others stress status relations wherein the rape victim is a subordinate of the offender. Further, there are many rape-suicide films wherein the rape is followed by a long journey for revenge. Many significant others spend months or even years hunting down the rapist who they blame for a suicide.

Multivariate analyses were performed to address additional questions. First, have rape-suicides become less frequent in recent times given such issues as a greater sensitivity

regarding rape? An analysis of over 1,200 film suicides indicates that there has been a near disappearance of the rape-suicide in modern film. This is curious since rape is now known to be a predictor of suicidality (e.g., Stack, 2006; Ullman & Brecklin, 2002). While it cannot be proven, the present findings would be consistent with the hypothesis that rape has become a more sensitive issue given the rise of the women's movement. Additionally, public perceptions of rape have changed in modern times. Rape may no longer carry the stigma that it once did. Rape may not represent as strong a blow to honor in contemporary American culture as it did in earlier times and in different cultures. If so, contemporary American filmmakers and producers may be less apt to portray suicide using the theme of rape. There is some counter evidence that suggests that rape-suicide is gathering attention in another country and art venue: opera. An opera by Britten entitled *The Rape of Lucretia* was recently created and performed in London and is available on DVD (Britten, 2005).

A second multivariate analysis explored the interesting phenomenon that many rape-suicide films portray the survivors as thirsty for revenge on the rapist. A key question was the extent to which rape-suicides are more apt to trigger a desire for vengeance than other suicides in film. The results were quite marked. Rape-suicide films were over thirteen times more apt to portray survivors as avengers than other suicide films. These results perhaps provide the greatest evidence for support for the legacy of Lucretia in modern rape-suicide films. While there are other social and economic situations that might trigger a desire for revenge among survivors (e.g., job loss, job demotions, assaults, break-ups or betrayed in an intimate relationship), it is the rape-suicides that are by far the most apt to trigger a desire for revenge. As Lucretia's family sought and obtained their revenge for her rape-suicide, so do the significant others of many rape-suicides in cinematic history.

APPENDIX 1. FILMS WITH RAPE-SUICIDES : TITLES , YEAR OF CIRCULATION AND VICTIM CHARACTERISTICS

Title	Year	Victim Characteristics
Apaches of Paris	1915	Female student
Birth of a Nation	1915	Young female, daughter of plantation owner
The Chapman Report	1962	A boy allows 4 of his friends to gang rape his girlfriend
A Clockwork Orange	1971	Married, rich woman raped by intruder
Enter the Dragon	1973	Young Asian woman, anticipated gang rape
The Folly of Revenge	1916	Wife of an artist
For a Few Dollars More	1967	Raped by intruder in home
Fortune and Men's Eyes	1971	Anticipated rape of Caucasian male prisoner by Caucasian male cell mate
The Fugitive	1925	Girl suicides to avoid gang rape by desperadoes
The Gilded Spider	1916	Female tourist is kidnapped and suicides to avoid rape
Girl's Town	1996	African American female student raped by her Caucasian employer

APPENDIX 1. CONTINUED

Title	Year	Victim Characteristics
The Heart of Paula	1916	Paula agrees to sex with villain to free her lover, but once he is freed, she suicides
Hitler's Madmen	1943	Student
Hot Spur	1968	Female ranch owner is raped, kills the wrong assailant, suicides out of guilt
In Harm's Way	1965	Navy nurse raped by commanding officer
Last of the Mohicans	1936	General's daughter, anticipated rape by Native American who kidnaps her
Last of the Mohicans	1992	General's daughter, anticipated rape by Native American who kidnaps her
The Light	1916	Prince Zarak drugs a female admirer into having sex with an adversary. Coming out a trance, she kills Zarak and then herself.
Lust Weekend	1967	Female, suicide pact, rape victim
Lust Weekend	1967	Male, suicide pact, rape victim
Mad Bomber	1973	Rape victim suicides in mental institution
The Mexican	2001	Young girl, anticipated rape by forced marriage
The Night of Love	1927	Gypsy girl
The Outlaw's Revenge	1915	Sister of a farmer
Pariah	1998	African American female student, a gang rape victim of skinhead gang
Peyton Place	1957	Female maid, vicarious rape victim, her spouse raped her daughter
Pleasure Plantation	1970	Brother murders man who raped his sister, brother suicides over guilt, vicarious rape-suicide.
Pleasure Plantation	1970	Brother of rape victim engages in suicidal duel in effort to regain family honor--vicarious rape-suicide
Port of Missing Girls	1928	Female dancer, raped by teacher.
Prairie Pirate	1925	Caucasian female, sister of Ranch owner, anticipated gang rape by Mexican bandits
Riders of the Purple Sage	1918	Kidnapped Caucasian female, fears rape by Mormons
Riders of the Purple Sage	1925	Kidnapped Caucasian female, fears rape by Mormons
Riders of the Purple Sage	1931	Kidnapped Caucasian female, fears rape by Mormons
Riders of the Purple Sage	1941	Kidnapped Caucasian female, fears rape by Mormons
The Rogue Song	1930	Woman is raped and suicides
Seven Women	1966	Female doctor tricks Mongol chief who would rape her, poisons him, and suicides to avoid rape by his followers
Sylvia's Girls	1965	Female prostitute
Texas Jack	1935	Female teacher
Town Without Pity	1961	German female, gang raped by American soldiers
La Tosca	1918	Female opera singer
Il Trovatore	1914	Girl offers herself to a count to save her lover, but

		then suicides to avoid rape
20,000 Leagues Under the Sea	1916	Rich princess, anticipated rape
Uriel Acosta	1914	Woman suicides to avoid rape
Xiu Xiu The Sent Down Girl	1999	Young Chinese girl repeatedly raped, horse herder

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Chapter 6

SUICIDE FILMS ABOUT ADOLESCENTS

Burcu Sevim

Adolescence is an important period in the life span. Through the transition from childhood to adulthood, the individual experiences many changes which can cause great stress (Wodarski & Harris, 1987). First of all, physical changes due to maturation, such as hormonal alterations, take place, and the adolescent's body loses its childish appearance. The adolescent may be offended by this appearance which may result in a decline in self-esteem.

The bodily changes also include sexual maturation. The sexual impulses may become very intense during this period, and the adolescent needs to either satisfy or control these demands (Eskin, 2003). This is also an important period for sexual identity formation. The adolescent may have homosexual impulses which may be rejected by society or family, causing greater stress for the adolescent.

In addition, psychological and social changes take place in adolescence. Adolescents become more self-focused and question and re-evaluate the values of the society and their family. Most prohibitions seem senseless for adolescents. Moreover, adolescents are not satisfied with the rights that they have attained (Yorukoglu, 1998). Adolescent want more freedom and respect. The peer group becomes of first priority as compared to the family (Eskin, 2003) because it provides a ground for the exchange of thoughts, criteria for self-evaluation, and social support when needed. The adolescent shares ideas and constructs a world-view similar to the group. The adolescent makes use of the peer group for individuation (Wodarski & Harris, 1987).

Although the adolescent tries to become autonomous, the family is still a secure shelter because the adolescent is, in fact, very vulnerable to threats. Even unimportant things may depress or frustrate the adolescent. As a result, intense reactions, hostility, and ups-and-downs in emotions may inevitably occur. Feelings of loneliness, emptiness, meaningless and helplessness in this period may lead the adolescents to look for solutions which are destructive or harmful for them.

In brief, many physical, psychological and social changes take place in adolescence. Adaptation to these changes is very hard and stressful. The solutions found to cope with this stressful period may cause greater stress and damage to the adolescent. Using or abusing

drugs, participating in gangs and committing suicide may be some of these dysfunctional solutions.

Suicide is one of the leading three causes of death among people between the ages of 15-34. These statistics consist only of the cases reported as "suicides." The situation may be worse than it seems to be because some cases of suicide are reported as accidents or homicides because of lack of investigative staff or because of the pressure for confidentiality from family (Wodarski & Harris, 1987). The attempts to deny that it is a suicide may be motivated by religious views, moral beliefs or the family members' unwillingness to accept the situation (Capuzzi, 2004).

As mentioned before, adolescence is a stressful and difficult period for the individual, and suicide rates are very high at this stage of life. Suicides at different life periods share similar characteristic, but there are some differences as well. Adolescent suicides are reported to be similar to Durkheim's anomic suicide (Wodarski & Harris, 1987). Durkheim (1897) stated that rapid changes in social order or social norms give rise to suicide. In adolescence, the individual experiences a state of anomic normlessness because the individual does not know precisely what is expected of him or her. Furthermore, there are changes in life to adapt to, and this confuses the individual.

In conformity with the general phenomenon of suicide, girls attempt to commit suicide more than boys whereas boys have more success in completing suicide than girls. There are differences in methods that are used for committing suicide. Generally, attempters use ingestion and overdose, whereas firearms are the most common means for completed suicides (Capuzzi, 2004). Hanging and gassing are the next most common methods. However, males use firearms and hanging more than females, who prefer to use gassing and ingestion to commit suicide.

There are several risk factors for suicide for adolescents, with identity problems as one of the leading reasons. Adolescence is an important period in identity formation, and identity problems may be the result of frustration at this stage, which may lead to repression of anger, making suicide more of an option. The adolescent needs to separate from family and begin the process of individuation. However, if there is an identity problem, the adolescent may develop an overdependence on family relationships for the affirmation of his or her identity. Family members may discourage separation, and the adolescent may become involved in interpersonal relationships which will lead to a conflict. Suicide may seem to be the only choice to resolve this conflict. Another factor related to committing suicide for an adolescent may be low self-esteem which may result from the distorted self-image of the adolescent. The lack of self-esteem may lead to the feeling of rejection and alienation so that it will be hard to form close relationships. Then, through "tunnel vision," the adolescent will see the situation as helpless and hopeless, with no other options.

Depression is another risk factor for suicidal behavior. The adolescent alternates between feeling up and feeling down. To combat or mask depression, the individual may try alcohol or drug use/abuse or may act out. However, if the adolescent feels intensely depressed, this may result in suicidal ideation or acts.

The family also has a great influence on the lives of adolescents. Lack of communication and intimacy, parental rejection, a nonsupportive, hostile family environment, divorce or separation in the family, a history of previous psychiatric illness or previous suicides, the chronic illness of a parent, loss of a family member, economic insecurity for the family, high parental expectations, sibling rivalry, and physical (and sexual) abuse are some of the

predictors of adolescent suicide (Henry, 1987). In addition, the rebelliousness and individuation needs of the adolescent may cause conflicts with parents, leading to increased feelings of loneliness and lack of family support.

Relationships with girl/boyfriends may be problematic, especially since adolescents experience feelings of sadness and love dramatically. A break-up or disagreement may depress an adolescent more than it would an adult. Additionally, the peer group has an important place in the adolescent's life. The adolescent's self-evaluation is based on comparing him/herself with peers. When the adolescent is isolated, he/she can not answer the questions "Who am I? How am I?" which facilitate identity formation. In short, problems in relationships with boy/girlfriends and peers may lead to feelings of isolation and loneliness so that the adolescent may withdraw from others. This withdrawal may be a strong indicator of suicidal ideation.

There are other risk factors for adolescents such as having a psychiatric illness or a chronic physical illness (Capuzzi, 1994), being exposed to community violence, and having a shameful or humiliating experience (Capuzzi, 2004).

In addition to assessing these risk factors, the presence of suicidal ideation and plans should be considered. A suicide attempt is often a cry for help, and adolescents who plan or intend to commit suicide usually let others around them become aware of the situation. Sometimes it may be revealed by directly talking about suicidal intent, but sometimes the adolescent gives indirect cues such as careless acts, changes in social patterns, and alcohol and drug use or abuse. The adolescent may have difficulty in concentration and school performance. Eating and sleeping patterns may change. The adolescent may develop an unusual interest in how others feel. This is a signal that the adolescent is trying to get others interested in his or her pain. Stories, songs, games, drawings and movies chosen by the adolescent may become focused on death. If there is a plan to commit suicide, the individual may suddenly show improvement after a period of depression, leading others to think that things are getting better whereas, in fact, the adolescent may have made a decision to commit suicide. The adolescent may try to put personal affairs in order after making such a decision, and withdrawal from social relationships can be a strong cue for suicidal ideation.

In conclusion, suicide is one of the leading causes of death for adolescents, and the suicide rate among adolescents is very high. Since adolescence is not an easy period, parents and teachers should watch carefully for the risk factors and cues.

ADOLESCENT SUICIDES IN MOVIES

Movies are a reflection of reality. Bitter or sweet, everything relevant to life can be projected onto the screen. Suicide occurs in many films, and the audience is forced to face an issue that they typically might wish to avoid and deny. Adolescent suicides are present in many movies as the basis or as a part of the general theme. Some movies concerning or including adolescent suicides are reviewed in the following sections.

Dead Poet's Society (1989)

"Hey Captain, my Captain!"

"Carpe diem.../ Seize the day..."

Director: Peter Weir

Based On: "Dead Poet's Society" by N. H. Kleinbaum

Cast:

Robin Williams – John Keating

Robert Sean Leonard – Neil Perry

Ethan Hawle – Todd Anderson

Josh Charles – Knox Overstreet

Gale Hansen – Charlie Dalton

The Welton Academy is a school for boys which has four pillars: Tradition, Honor, Discipline and Excellence. The sons of privileged families have the opportunity to be students at this academy, and Todd is one of these lucky boys. His older brother went to the Welton Academy, and he has to be as successful as him. Likewise, his roommate Neil has to meet his parents' expectations, including being a successful student and becoming a doctor in the future. His father decides which courses he should take, which social activities he should participate and to what extent he should allocate time to them.

The new teacher, Mr. Keating, who is an old student of Welton Academy, treats them differently from the other teachers. He preaches "Carpe diem" which means "Seize the day." He avoids clichés and uses different ways to teach freedom of expression and non-conformity such as ripping the introduction out of a book or standing on a table to see the world from a different viewpoint. Mr. Keating communicates with the students in a different manner, and this affects them all.

One day, they come across the yearbook of Mr. Keating and learn about the Dead Poet's Society which was a group dedicated to searching for the meaning of life by gathering in a cave and reading poetry. Neil and his friends restart the society, and they try to seize the day. Neil decides to act in a play without his father's permission. He gives a great performance, but his father gets very angry and decides to take him out of the school and send him to military school. That night, he kills himself with his father's gun.

After Neil's suicide, his friends are questioned about the Dead Poet's Society and it is concluded that Mr. Keating is responsible for Neil's death. Mr. Keating is fired. However, this decision does not prevent students from admiring Mr. Keating. They stand on their desks saying, "Hey Captain, my Captain!" although the headmaster tells them to stop, thereby showing that they understand what Mr. Keating has tried to say.

In this movie, the excitements and needs of adolescence occur within an oppressive environment. Neil's family behaves in a strict way, albeit for the good of their son, but they ignore Neil's need for friendship and intimacy. Furthermore, their expectations make Neil feel more anxious and disappointed because he has to concede a lot while he desires to do things that are not allowed. In addition, he is not sure whether he will meet his parents' expectations for him. What Mr. Keating provides encourages and supports him, and Neil tries to resolve this conflict by lying. When this does not work, things get worse. Neil feels embarrassed and helpless with no way out except death.

Perhaps his suicide is a way of taking revenge or rebelling against his parents, because he can not express himself and discuss issues with them. He does not exist as a separate individual. Life seems meaningless to him if he lives the way his parents want him to, without paying attention to his opinions. It may also be that Neil feels guilty when his father criticizes him. However, before Neil commits suicide, he dresses like he did in the play, and this shows that he is glad about what he did and that he does not regret it. He stands up for what he wanted to do and did by ending his life. However, the parents avoid taking responsibility for Neil's death, and Mr. Keating becomes the scapegoat.

The Virgin Suicides (1999)

Doctor: What are you doing here, honey? You're not even old enough to know how bad life gets.

Cecilia: Obviously, Doctor, you've never been a 13-year-old girl."

Director: Sofia Coppola

Based On: "Virgin Suicides" by Jeffrey Eugenides

Cast:

James Woods – Mr. Lisbon

Kathleen Turner – Mrs. Lisbon

Kirsten Dunst – Lux Lisbon

Josh Hartnett – Trip Fontaine

A. J. Cook – Mary Lisbon

Hanna Hall – Cecilia Lisbon

Leslie Hayman – Therese Lisbon

Chelsea Swain – Bonnie Lisbon

Mr. Lisbon is a mathematics teacher living with his wife and five adolescent girls in a small town: Cecilia (age 13), Lux (age 14), Bonnie (age 15), Mary (age 16) and Therese (age 17). These girls are very attractive, but they are not allowed to do many things that their peers do, such as dating and going to parties, because Mr. and Mrs. Lisbon are strict and religious parents. The story starts with the suicide attempt of the youngest sister, Cecilia. Later that year, the Lisbons have a party after the suggestion of a doctor that it might make Cecilia feel better. Mr. and Mrs. Lisbon stay at the party. The night ends with a tragic event when Cecilia commits suicide and dies. The same day, a branch of the tree in the garden is pruned. Mr. Lisbon denies that the death was a suicide, and the death is recorded as an accident. The other girls do not talk with anyone about the incident. When the new semester starts, they behave as if nothing has happened, but everyone else is well aware that something important has happened.

Lux flirts with many of the boys at school. When Trip, the most popular boy at school, falls in love with Lux, she invites him home to meet her family. They sit and watch television, and Mrs. Lisbon controls the communication between Lux and Trip. Despite this, they start to date, and this relationship continues until they make love at the Homecoming Dance. That night Lux does not go home which upsets her parents. Trip abandons Lux in the morning and never calls her again.

After this, Lisbon girls are taken from the school and isolated at home. Their parents think that home is safe and secure for them. In fact, it gets harder for them to breathe. They communicate using light signals and telephone calls with boys who are aware of the girls' hard lives. Lux waits for Trip to call, but he never does, and so she starts to sleep with whomever comes to the house. After months of confinement, the girls ask for help, and the boys decide to take them out for a drive. When they get into the house they find Lux smoking a cigarette. She goes outside to wait, and the boys find the dead bodies of Therese, Bonnie and Mary. Lux kills herself using car exhaust in the garage. Mrs. Lisbon never understands why this has all happened because she thinks there has been love in their house and that the girls have been happy. Mr. and Mrs. Lisbon leave the house, and the tree in the garden is cut down.

In the movie, the story begins with a suicide attempt which is a cry for help. The doctors suggest letting the girls socialize as their peers do, but the parents cannot give up their strict approach. The girls' needs to be with their peer group and to have relationships with the opposite sex are not satisfied. Moreover, the expression of emotions and communication in family is limited. They do not talk about their sister's suicide but try to go on as if nothing has happened. Furthermore, the parents are not aware of their children's needs, and they try to protect them by imposing rigid restrictions. They take them from school and isolate them. Isolation makes them feel alone and helpless. They have other problems, such as a broken heart, that has been ignored as well. So there is no solution left and they solve the problem by ending their lives.

Girl Interrupted (1999)

"I know what it's like to want to die. How it hurts to smile. How you try to fit in but you can't. How you hurt yourself on the outside to try to kill the thing on the inside"

Director: James Mangold

Based on: "Girl, Interrupted" by Susanna Kaysen

Cast:

Winona Ryder – Susanna Kaysen

Angelina Jolie – Lisa Rowe

Brittany Murphy – Daisy Randone

Vanessa Redgrave – Dr. Sonia Wick

Susanna is an eighteen year-old girl who does not want to go to college. This is an unusual choice among her peers, but Susanna does not want to be like her mother. Furthermore, she sleeps with the husband of her mother's friend. Later she attempts suicide by ingesting a bottle of aspirin and drinking four glasses of whisky. She denies that she has tried to kill herself, but she knows something is wrong. A friend of her father has a session with her and recommends that she should have a stay in a clinic. She gets into a taxi and goes to the Claymore Psychiatric Hospital without saying goodbye to her parents because they think it is better to leave with a less emotional scene.

At the hospital, she meets Lisa, a sociopath, and Daisy, who does not let anyone get in her room. Daisy leaves the clinic to live in a house that her father has bought for her. Lisa and Susanna become friends, and they run away. Lisa steals money, and they go to visit Daisy.

She has a reasonable life in a pretty house, but she still hurts herself and uses valium, indicating that she has not fully recovered. Lisa brings up the fact that Daisy's father sexually abused her and that Daisy enjoys it. That hurts Daisy, and she kills herself the next morning. After Daisy's suicide, Susanna faces her own thoughts of death and goes back to hospital. In the end, she gets better and goes back home, back to her life.

There are two suicide attempts in the movie. First, Susanna attempts to commit suicide. She says she has not tried to kill herself at first, but later she admits that she has tried to stop the emptiness in her head and the depression. She tried to fit into life, but she cannot. She sleeps with Toby (her former boyfriend) and tells him her thoughts about death. She has only a few male friends. Her father, an economist, relates to her without expressing any emotions and with little communication. At graduation, Susanna falls asleep, and her father thinks that this is typical of her. Her mother is not close to her and tries to not express her feelings towards Susanna. When her parents visit Susanna in the hospital, they are concerned about what to say to the visitors in the New Year more than the need of Susanna to be with them. She is taken to the hospital by a taxi alone, and she leaves the hospital and goes home by taxi alone. Her parents do not show up when she needs them. Susanna thinks that home is not very different from the psychiatric hospital because, in both places, everyone is crazy. Despite this, she does get close to Lisa and other patients at the hospital. Eventually she faces how she feels and what she wants. She admits that she has been suicidal and that she wants to get better, at which point she begins to recover.

Daisy is an older patient in the clinic, with a special room and rules. She eats only what her father brings from his chicken restaurant. She is a pretty girl who feels superior to the others. Her father buys a house for her and, although she has not recovered, she leaves the hospital, which makes the other patients angry. Lisa wants to hurt her and humiliate her. Daisy continues to hurt herself and to take valium. She does not seem to have anyone to provide social support except her father. It is not clear whether what Lisa says about the incestuous relationship is true, but it may cause Daisy to feel that she has lost the only social support she has. Daisy may also have been hurt by what Lisa says about wanting to be Mrs. Randone (which would make her Daisy's step-mother) and her defenses may have been broken by facing the truth that her father has been sexually abusing her.

Ben X (2007)

"Everything is dare."

Director: Nic Balthazar

Based on: "Nothing Is All He Said" by Nic Balthazar

Cast:

Marijko Pinoy – Mother

Greg Timmermans – Ben

Ben, with a diagnosis of Asperger's syndrome, is a teenager different from his peers. He lives in his own world but tries to live a normal life. The most important thing for him is an online computer game at which he is very successful. He meets a girl, Scarlite, in the game and tries to reach her. At school, he has been bullied and tortured. His classmates record him in a shameful situation and put this on internet. He is so humiliated and embarrassed by this

that he makes a plan with Scarlite. His mother, brother, father and father's girlfriend also help him. They record Ben apparently committing suicide by jumping and, at his funeral, they play this recording. The bullies and classmates who are at the funeral are held responsible for what has happened to Ben. They feel ashamed, and so Ben gets revenge. Ben remains different from others but is happy now with Scarlite, his imaginary friend.

In this movie, it is clear that Ben has a psychiatric problem. His parents are divorced, and his mother takes care of him. He also has a little brother with whom he does not know what to do. The bullies torment him because of his difference, and he feels humiliated and alone. With the help of Scarlite, he makes a plan to commit pseudo-suicide so that he will take his revenge, and the plan works. He finds a solution using suicide, but it is only pretend. He does this to express himself and let others know how he feels. He does not actually commit suicide. However, adolescents may commit suicide as a way of sending a message or to make those left behind feel guilty.

Ben has several advantages that may prevent him from actually committing suicide. Some of his teachers realize the difficulties with which he lives, and they support him. They also protect him against bullies. This may have decreased his feelings of loneliness and kept him in touch with the real world. Another advantage is that his mother supports him and takes care of him. Although his father does not know what to do, he helps him in recording the video. The existence of Scarlite is also a resource for him even though she is not a real person.

Mr. Jones (1993)

"I can't...I can't stop the sadness!"

Director: Mike Figgis

Cast:

Richard Gere – Mr. Jones

Lena Olin – Dr. Elizabeth "Libbie" Bowen

Lauren Tom- Amanda Chang

Mr. Jones is a handsome man with a diagnosis of bipolar disorder. In his manic episodes, he spends a lot, make compliments to many women and is full of joy. However, his agitation and will to fly causes problems. Dr. Libbie Bowen thinks he is suicidal, but he denies this. As he becomes depressed, he is hospitalized and, for Libbie, he becomes more than a patient.

Amanda is a girl who has attempted to commit suicide three times before, and therefore, is hospitalized. She seems happy at the hospital. She plays table tennis with Mr. Jones, attends activities regularly and makes jokes. However, in therapy sessions, she reveals that she is not happy. While talking about her insensitive mother, she suddenly starts to cry. She talks about her father as well, a very traditional man. She says she is not afraid of death; in fact she believes that death means relief and warmth. After a while, her parents decide to take her out of the hospital because she is well enough, and they have a large supportive family. Amanda does not want to leave, but she cannot refuse. Furthermore, her parents insist that she does what they want. There is a friend of the family, a therapist, who will have a few sessions with Amanda so that she does not need to continue treatment with Libbie. Although

Amanda's therapists do not think that it is a good decision to let her go, she leaves. Later a phone call comes to Libbie informing her that Amanda has killed herself.

In this movie, the tradition-bound parents' pressure on Amanda and the lack of communication seems to be the source of the problems. Amanda does not want to leave the hospital, but she cannot refuse. It is as if she feels that she does not have a right to refuse. The rigid treatment by her parents makes her feel alone and helpless. In the hospital, she gets the support she needs, and her family cannot give this kind of support. After she has been separated from the people she wants to be with, such as Libbie and the other patients, she feels more isolated and hopeless, seeing suicide as the only way out. Her previous attempts, which may have been signs of asking for help, indicate a high risk of completing suicide in the future.

28 Days (2000)

Gwen: Doesn't it hurt?

Andrea: Feels better.

Gwen: Than what?

Andrea: Evrything else.

Director: Betty Thomas

Cast:

Sandra Bullock – Gwen Cummings

Viggo Mortensen – Eddie Boone

Azura Skye – Andrea

Gwen is an alcoholic who has been sentenced and sent to a rehabilitation center to be treated. She stays with Andrea, a 17 year-old girl who has been using heroine. Andrea has been hospitalized and rehabilitated several times before, and this is her last chance in a rehabilitation center where she does not want to leave. She hurts herself when she feels down. Gwen witnesses Andrea cutting herself when she is disappointed that her mother has not visited her. Andrea thinks her mother is embarrassed about her and does not want to see her, so she looks for a greater pain than she feels by being rejected. Gwen cares for her and treats her like a child. Andrea feels better but does not talk about her problem with the counselors. As the time to leave the rehabilitation center gets closer, Andrea gets more aggressive. It is hard for her to go out and stay with a rejecting mother. Gwen writes a sketch to make her feel better, but it is not enough. Andrea takes an overdose and dies. For some, it is suicide but, for others, it is an accident. The doctor tries to reassure Gwen by telling her that "Andrea did not kill herself," but Gwen does not believe this and decides to change her life.

Andrea is an adolescent who needs the care of her mother, but she feels guilty and rejected because her mother does not come to visit. She gets the attention she needs from her friends in the rehabilitation center which is why she does not want to leave although she has to. Leaving means losing intimacy and attention. Furthermore, she feels attached to the group in the center. They live together, they have similar goals, and they help each other to reach those goals. When they fail, they continue to give support to one another. Getting out of the clinic means losing this important group and facing rejection and the hard problems that have to be coped with alone. These lead Andrea to use drugs again. Whether it is a suicide or not,

Andrea felt that she would not be able to cope alone and chose to use a tactic which was not adaptive and functional for her.

One Flew over the Cuckoo's Nest (1975)

Nurse Ratched: Aren't you ashamed?

Billy: No, I'm not.

Nurse Ratched: You know Billy, what worries me is how your mother is going to take this.

Billy: Um, um, well, y-y-y-you d-d-d-don't have to t-t-t-tell her, Miss Ratched.

Nurse Ratched: I don't have to tell her? Your mother and I are old friends. You know that.

Billy: P-p-p-please d-d-d-don't tell my m-m-m-mother."

Director: Miloš Forman

Based On: "One flew over the cuckoo's nest" by Ken Kesey

Cast:

Jack Nicholson – R. P. McMurphy

Louise Fletcher – Nurse Mildred Ratched

Brad Dourif – Billy Bibbit

Will Sampson – Chief Bromden

McMurphy is a criminal who has been accused of assault and sentenced to prison. He convinces the staff that he needs psychiatric care, and so he is sent to a mental hospital where he expects to be more comfortable. However, he cannot find what he has been looking for, because the ward he stays in has been run by an authoritative nurse, Mildred Ratched. McMurphy does not fit easily into the hospital routine and, even though his behavior cause some patients to progress, Ratched tries to control McMurphy, and a struggle to gain power over other patients starts between McMurphy and Ratched.

McMurphy forms close relationships with Billy Bibbit, who is a suicidal, stuttering young man, and "Chief" Bromden, who is a muscular Native American with schizophrenia. Billy has been humiliated and dominated by nurse Ratched, and McMurphy sees him as a younger brother who needs to be taught how to have fun. The Chief is viewed as deaf and unable to speak, but he reveals to McMurphy that he is only pretending to be a deaf-mute.

One day, McMurphy brings two girls and some alcohol to the hospital. The patients drink while Billy flirts with one of the girls. When the situation is discovered by the staff, Nurse Ratched threatens Billy to tell his mother. When Billy asks her not to, she blames him, saying that he should have considered the consequences of his acts. Billy breaks down in tears like a child, and he commits suicide when he is alone. McMurphy gets angry and tries to strangle Nurse Ratched. McMurphy is punished with a lobotomy operation.

In the movie, Billy is a young man with childish characteristics, and he is trying to mature. He needs to be socialized and become an individual. He needs to "experience life" but, in an institution where most patients choose to be by themselves and where strict rules are practiced, he is not able to have experiences. Billy is isolated from living the normal life that a young man is supposed to live. He cannot make friends of a similar age, he cannot have a girlfriend, and he is frightened of people. McMurphy realizes his needs and tries to help him, but the rules and the characteristics of the institution restrict the fulfillment of Billy's

needs. Furthermore, the authoritative figure, Nurse Ratched, maintains strict control over patients.

The cues about Billy reveal that the support from his family is not sufficient. He does not have a close relationship with his mother and is afraid of being punished by her. Billy's needs for separation and identity formation are frustrated, and the lack of communication and intimacy in his family leads to feelings of helplessness and hopelessness. With the feeling of guilt imposed by Nurse Ratched, he prefers to end his life.

Suicide Club (2002)

“Well then, goodbye everybody!”

Director: Sion Sono

Cast:

Ryo Isjibashi – Detective Kuroda

Akaji Maro – Detective Murata

Masatoshi Nagase – Detective Shibusawa

In a subway station, fifty-four adolescent girls gather after school and jump in front of a train by holding hands and with smiles on their faces. This event affects whole the country, especially high school students. A group of students talks about the event on the roof of a building, and they decide to do the same thing. They stand at the side of the roof, holding hands. After counting down, most of them jump and die. The ones that cannot jump stand there shocked and looking down at the dead bodies. After a few seconds, feeling that they should have jumped as well, they too commit suicide.

The movie raises many issues, but the part that is relevant here is the adolescent idealization of others and imitating what they do. This is a normal part of the identity formation process, but the choices made can be unhealthy. Adolescents do not think deeply and see the dangers in what they do. They also conform to their peer group's decision even though they do not want to. This movie is an exaggerated example of this issue.

2:37 (2006)

“Sometimes being young is the toughest job of all.”

“People are scared of dying...I'm not...”

Director: Murali K. Thalluri

Cast:

Frank Sweet – Marcus

Teresa Palmer – Melody

Charles Baird – “Uneven” Steven

Joel Mackenzie – Sean

It is a normal school day, but a tragic event takes place at 2:37. A student's dead body is found in the toilet with wrists cut. The stories of six students who have serious problems that may lead to suicide are then told. Melody is pregnant, and the father of the baby is her own

brother. Her parents always emphasizes her brother's priority, leading Melody to obey him, and he wants to be with her. She tries to talk to her mother about it, but the attempt to communicate fails.

Luke, a successful football player, is a very popular young man at school. He has a beautiful girlfriend, Sarah, but he gives the feeling that he has been running away from her. He also treats Sean, who is known to be homosexual, badly. Behind all these behaviors lay the homosexual impulses of Luke which he tries to hide but cannot resist and, in fact, he has already had intercourse with Sean. Perhaps because he is afraid to be humiliated or excluded, he tries to appear perfect, but this becomes a greater burden day by day. Sarah, Luke's girlfriend, is crazy for Luke, and she thinks she knows him very well. She has been living in a fantasy world that she has created.

Sean has accepted his situation. His problem is Luke's opposition to their relationship which causes him great pain. He is also humiliated because of his homosexuality and tries to calm himself by using drugs. Stevie has a serious health condition. He has to change his pants a few times a day because of problems with his urinary system. His classmates make fun of him when they realize that his pants are wet, and he has to face this each day.

Marcus, Melody's brother, is motivated to be very successful. His parents see him as a means to achieve what they want, and their expectations cause great stress for him. Marcus constantly struggles to win his parents' approval. He is so focused on succeeding that he does not realize that Kelly likes him. At the end of the movie, the audience learns that the student found dead is Kelly. She commits suicide because she thinks that there is no meaning to existence when you do not exist for others. She commits suicide to inform others that she has existed.

In this movie, many problems experienced by adolescents are presented. Each adolescent has the potential and reasons to commit suicide. The movie gives the details of their lives and asks which one has chosen to commit suicide. At the end, the answer is given, but it could have been any one of them. Different lives and different problems without social support and hope may eventually lead to suicide. Melody may commit suicide because of the difficult situation she is in. She may feel ashamed and hopeless. She does not have anyone with whom to share her problems. Furthermore, there is no sign that the incestuous sex will not happen again. Luke is confused with what he is and what he has to be. To solve this conflict, he could choose to end his life. Sean uses drugs to forget his problems which could lead to greater stress, and he could commit suicide. Sarah is living in a fantasy world, and facing the truth could be too much for her. She could find it easier to end her life. Stevie experiences shame everyday, and nothing is going to get better. This could cause hopelessness and withdrawal, ending with suicide. Marcus, who is so concerned with succeeding, could end up being unsatisfied and fail. He could choose to die instead of living with this disappointment.

DISCUSSION

The stresses of adolescence and the patterns leading to suicide are reflected from different points of views with different stories. However, there are some commonalities in the adolescent suicides covered in these movies. First of all, the effect of the family is a major factor for the adolescent suicides. Generally, the adolescents have problems in their families,

such as divorce of parents, loss of a parent, parental rejection, and lack of communication and intimacy. Paying too much attention or putting pressure on the adolescent have negative effects on the relationships between parent and adolescent. Adolescents then try to find other ways to fulfill their needs. When there is no way to do this, they may end their lives. In the movies, they are often humiliated or ashamed of something so that they experience a crisis which could, and sometimes does, lead to suicide. This illustrates how sensitive adolescents are. Furthermore, the lack of social support makes them more vulnerable to threats. Support from family members, teachers or friends has great value for adolescents.

Adolescence is an important period in terms of the risks for and needs of the individual. The high rate of suicide among adolescents warns us about the attention that we must pay to our children during their adolescence. Adolescents need to be taken care of just like a baby does, but in different ways. For adolescents to form a healthy identity and stand on their own feet, we need to consider how they live, how they feel, and what goes through their minds. Unconditional support is the critical thing during this period.

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Chapter 7

**PAIN AND ALTRUISM:
THE SUICIDES IN JOHN WAYNE'S FILMS**

Steven Stack and Barbara Bowman

According to the film archive of the American Film Institute and other sources, there are over 1,300 completed suicides in a century of American produced films (www.afi.com, accessed, January 26, 2009). The variation in the portrayal of motives for suicide in the cinema – economic strain, altruistic/heroic, relationship problems, pain, death of a loved one, psychiatric morbidity and other precipitants – has not been systematically addressed in the literature. The present investigation tests aspects of a biographical approach to explaining some of the variation in the types of suicide motives in film. In particular, it focuses on biographical experiences and values of a major film star, John Wayne, and relates them to the motives for suicide in his films. Two aspects of Wayne's background are analyzed: his experience with physical pain, and his patriotic values as witnessed in a large number of films on heroism. Given his status as one of the foremost stars in film history (Campbell, 2000; Mann, 2003; Roberts & Olson, 1997; Willis, 1997), it is plausible that the way in which Wayne's films framed suicide influenced the framing of suicide in the films of others, including more recent cinematic superstars.

Extreme pain is a noted predictor of suicidality (e.g., Ratcliffe, Enns, Belik & Sareen 2008; Walker, Walters, Murray, et al., 2008). John Wayne had many years of encounters with physical pain. In 1964, after years of smoking up to five packs of cigarettes a day, Wayne had his left lung removed. In 1978 it was determined that the cancer had spread. His stomach was removed. Additionally, the cancer had also moved to his intestines. He had a terminal condition, and there was nothing to be done. In April 1979, while experiencing intense pain in the hospital, he asked his son Patrick, as well as his mistress, Pat Stacy, for his .38 revolver so that he could take his own life. They both refused. Shortly thereafter he went into a coma and passed away on June 5, 1979 (Donnelley, 2005; Mann, 2003). Curiously, Wayne's personal involvement with extreme pain and even his request for an assisted suicide had parallels to some of the suicides in his films, especially his last movie, *The Shootist* (1976).

Heroic suicide, and a more general suicide form, altruistic suicide, have attracted relatively little attention in professional contemporary suicidology (Stack, 2000; Stack, 2004;

for exceptions see Blake, 1978; Spero, 1978; Townsend, 2007). However, artistic expressions of heroic suicide were common two to three millennia ago and included those of Samson, Cleopatra, Dido, and Lucretia (Brown, 2001; Cutter, 1983). While instances of contemporary suicide bombers and martyrs are frequently in the news, there are clearly many suicides motivated out of a desire to relieve others of a burden (Joiner, 2005).

Wayne is renowned for his cinematic representation of heroic and altruistic deeds. These included heroic acts in war films, Westerns and police/crime dramas. His best known war films include *Back to Bataan* (1945), *The Fighting Tigers* (1942), *The Fighting Seabees* (1944), *The Flying Leathernecks* (1951), *In Harm's Way* (1965), *Sands of Iwo Jima* (1949), and *Green Berets* (1968). His better known Westerns include *El Dorado* (1967), *The Horse Soldiers* (1959), *Red River* (1948), *Rio Bravo* (1959), *Stagecoach* (1939), *The Searchers* (1956), *The Shootist* (1976), and *True Grit* (1969). His extremely high level of patriotism was linked, by his widow, to his severe sense of guilt about not serving in World War II (as many of his good friends and many Hollywood stars such as Clark Gable, Douglas Fairbanks, Henry Fonda, William Holden and James Stewart had done), even though he had been classified I-A as capable of service (Campbell, 2000; Roberts & Olson, 1997; Wayne, 1987). He is the only leading man of his generation to have avoided military service, possibly because he feared that even a few years off the silver screen would greatly reduce his chances of stardom (Campbell, 2000, p. 471). Notably, his counterparts in Hollywood did volunteer, leaving Wayne with greatly increased opportunities to capture key roles and become a superstar, apparently contributing to his guilt (Wayne, 1987). Nevertheless, he called on other men to sacrifice their lives when called and defined them as soft if they did not comply (Campbell, 2000). In any event, it is anticipated that his strong interest in heroic, patriotic roles in his movies would affect the framing of cases of suicide in his films. In particular, heroic suicides generally are for the benefit of others, including those suicidal acts that save the lives of other people (Durkheim, 1897; Stack, 2004).

The biographical approach to explaining the variation in motives for suicide in the cinema is based on the assumption that actors in the film industry can influence the ways in which suicide is portrayed. Such influence can be exercised in a number of ways, including the acceptance or rejection of scripts and the modification of suicide scenes in scripts. A superstar such as John Wayne could readily reject roles and scripts which were not to his liking. For example, Wayne refused an offer to costar in a Western with superstar Clint Eastwood, as well as an offer to star in *All the Kings Men* (one of the top box office hits of the late 1940's) on the basis of his perception that the scripts violated American values (Mann, 2003; Roberts & Olson, 1997). It is hypothesized that his status as a superstar who could pick and choose among scripts, as well as his patriotism, might affect the way that suicides are portrayed in his movies. While it is assumed that Wayne's movies would not be unique in their portrayal of the causes of suicide, it is hypothesized that the causes would be significantly different from the other movies of his times.

The present chapter first describes its methodology, how the films were selected and how the principal causes of suicide were defined. We then move into detailed case studies of the suicides in the eight films with John Wayne that have one or more suicides. Finally, the frequency of the principal causes of suicide in these films (pain and altruism) is compared to the frequency in other suicide films of Wayne's day, that is, are John Wayne's films significantly different in their portrayal of the etiology of suicide from other films?

METHODOLOGY

An exhaustive search through six web based filmographies, including the American Film Institute's Archives (www.afi.com) , Eye on the Media (www.eyeonthemedias.net) , Internet Movie Data Base (www.imdb.com) Kids in Mind (www.kidsinmind.com) , Screenit (www.screenit.com), and SOLOS (Survivors of Loved Ones Suicide, 1000deaths.com) was carried out to locate films with completed suicides.

In order to be included in the set of John Wayne films, a film had to meet two criteria: (1) the film starred or co-starred John Wayne, and (2) there had to be one or more completed suicides. Films with lower levels of suicidal behavior, such as suicide attempts and suicide ideation, were excluded.

Table 1. Suicides in films starring John Wayne: Title, year, character and motives

Title	Year	Character	Motives
Circus World*	1964	Mr. Alfredo, circus performer, high wire	Wife's infidelity, rejection in love
El Dorado*	1967	Luke MacDonald, cowhand	Pain avoidance, shot in stomach
Green Berets*	1968	Vietnamese soldier	Kills enemy with chain of claymore explosives
In Harm's Way*	1965	Annalee, Navy nurse, a rape victim	Traumatic experience, raped by boy friend
In Harm's Way*	1965	Captain Eddington, USN	Guilt over rape; altruism, goes on a suicide mission.
Sea Chase*	1955	Mr. Keller, German military general, Elsa's father	Economic strain, could not support family, Great Depression
Sea Chase*	1955	Eric Carson, military	Was engaged to Elsa (spy for Germany), she drove him to suicide for unspecified reasons
Sea Chase*	1955	Walter Stemme, seaman (merchant marine)	Altruistic, so ship will not be taken by enemy
Shepherd of the Hills	1941	Aunt Mollie Matthews, elderly mother, head of family of moonshiners, rural Arkansas.	Extreme grief, traumatic life experience: she accidentally kills her own son, Pete, by gunshot, sets her cabin home on fire as a funeral pyre
The Shootist*	1976	John B. Brooks, aging gunfighter	Pain avoidance, dying of stomach cancer, altruism an economic burden on widow
Three Godfathers	1949	Abilene Kid, bank robber	Altruism: dies of thirst to give water to a baby
Three Godfathers	1949	Pedro, bank robber	Altruism: breaks leg, suicides not to slow down mission to save baby

* In top 50 films of the year.

No box office data are available before 1950.

Of the over 140 films in which John Wayne was an actor (he played bit or minor parts in many of his early films in the 1920's and 1930's), we located eight which met the criteria for inclusion in the present investigation. These films are *Circus World*, *El Dorado*, *The Green Berets*, *In Harm's Way*, *Sea Chase*, *Shepherd of the Hills*, *The Shootist*, and *Three Godfathers*. The films contain twelve suicides and are listed in Table 1. All of these films, for which data are available, were in the top 50 films of the year in terms of box office data. For example, *Sea Chase* was #10 in 1955, *El Dorado* was #12 in 1967, and *The Green Berets* was #10 in 1968. No reliable box office data are available before 1950 (Jamieson, 2001), but it is likely that his two films from the 1940's did well since he was well known starting with his performance in *Stagecoach* (1939).

It is assumed that, through the socialization process over the generations, the meanings of behaviors including suicide in these films have had an impact on American culture. All of the suicide films of Wayne have been reproduced and are currently available in DVD format.

Pain

The concept of pain as a source of suicide has several components. We follow a general strain theory of suicide and use three principal varieties of pain (Agnew, 1992; Stack & Wasserman, 2007). First, there is actual physical pain, such as that from a gunshot wound, advanced cancer, and other ailments or injuries. Second, there is also anticipated pain, pain that is perceived as apt to happen in the future. One might be diagnosed with cancer, for example. While at present there is no pain or minimal physical pain, the anticipation of encroaching severe pain can be perceived as a cause of suicide. Third, there is vicarious pain. The actual or anticipated extreme pain of a significant other might conceivably be felt by another person and contribute to their suicide. In some actual cases of homicide followed by suicide, for example, a spouse performs a mercy killing of their partner and then, perhaps out of guilt, loneliness or fear of punishment by the law, takes his or her own life. Two of Wayne's film met the criteria for pain as a contributor to suicide.

Altruistic Suicide

Altruistic suicide is broadly defined in Durkheimian fashion as suicide that is motivated by sacrifice for the group. Following Stack (2004), altruistic suicide is characterized by the following features: excessive social integration, support by public opinion as an acceptable form of suicide, benefiting society materially or culturally, and marked by positive emotionality. First, altruistic suicide is characterized by extremely high level of bonds to a group. They commit suicide for the love of something greater than themselves. This may be for a person, to save lives, or for some cultural value. Second, altruistic suicides are condoned by cultural beliefs. Third, society benefits from altruistic suicides. Lives are saved, for example, if a soldier jumps on a hand grenade in battle to save his comrades. The suicides of defeated generals in war may also be altruistic if that is part of the cultural expectations of military organization. Fourth, altruistic suicides are often pursued by calm persons in a positive emotional state surrounding a culturally approved act of self sacrifice. This is in

contrast to ordinary suicides where the person may be in a negative emotional state of major depression near or at the point of suicide.

In defining altruistic suicide as benefiting the group in some way, it is important to keep in mind that the smallest group is a dyad such as husband and wife or parent and child. Altruistic suicides include those in war (e.g., actor Jimmy Cagney jumps on a hand grenade to save his fellows in *The Fighting 69th*), but also in various contexts in civilian life. In some cultures, for example, in times of famine, the elderly were expected to disappear to the wilds of nature and freeze or starve to death so that there would be more food available for the young. Using the criteria described elsewhere (Stack, 2004), six of the twelve suicides in Wayne's films had altruism as a contributing factor to the suicide.

Coding of Motives

First, detailed summaries in the previously mentioned six web based filmographies of suicide films were scrutinized. Contributing factors such as death of a loved one, rejection in love, adultery, economic strain, physical illness, depression, and substance abuse were coded in a datafile. As a check on these codes from film archives and reviews, copies of most of the films were obtained in DVD or VHS format. All eight of John Wayne's films were obtained and watched in their entirety, typically twice.

Control Group

Wayne's films were compared to the films of his period. This period is defined as the stretch of time from Wayne's first suicide film (*Shepherd of the Hills*, 1941) to his last suicide film (*The Shootist*, 1976). In order for a film to be included, it had to meet the following criteria: (1) have at least one completed suicide (films restricted to suicide attempts or ideation were excluded), (2) be based on real life situations (horror films and science fiction films were excluded), (3) be American made (foreign films were excluded), (4) be a film that circulated in theatres (made for television films were excluded), and (5) was shown in American theatres during the period 1941 to 1976. A total of 427 suicides were found in films meeting these criteria for inclusion in the study. A total of 257 of the 439 suicides (58.5%) were in films which were watched first hand in their entirety. In all but two instances, the motives behind the suicides discussed in abstracts of the film were reiterated in the film itself as judged by the coders. Efforts to obtain the remaining films failed for a number of reasons, mainly (a) they were never made in VHS or DVD format, (b) they were out of print, or (c) copies on inter-library loan were not obtained due to the lack of cooperation of lending libraries. Up to six motives for suicide were coded for each film suicide, but most had between one to three principal contributing factors. The present study distinguishes between films with pain as a motive versus all others, and films with altruism as a motive versus all others.

In the analysis that follows, first a synopsis of the causes of suicide in each film is provided. Frame grabs are provided, when available in the film, for the suicide scene in each movie. Second, we perform a logistic regression analysis of suicide films from the same

period as the Wayne films in order to ascertain if the motives for suicide are different between the Wayne films and all other films.

CASE ANALYSIS

Circus World (1964)

Matt Matthews (played by Wayne) is a circus owner/manager touring Europe. Fourteen years earlier he had an affair with Lili Alfredo, a married woman whose husband refused to give her a divorce. Lili was in love with Matt. Mr. Alfredo was a star high-wire performer. Mr. Alfredo had an apparent history of adulterous relationships, but could not handle the same indiscretions in his wife. He falls to his untimely death, on purpose, during a performance. The wife is so distraught with feelings of guilt, she joins a convent. Matthews adopts her daughter Toni, and raises her as her own for 14 years. Matthews finally tracks Lili down, reunites her with her daughter and, once again, she performs at her craft in the circus.

El Dorado (1967)

Cole Thornton (John Wayne), a gunfighter, has come into town to assist Bart Jason in a dispute with the MacDonalds. Luke MacDonald has been instructed by his father to stand guard on a hill top on the edge of the ranch. Luke is to fire a shot if anyone comes into the canyon where the family ranch is located. Luke sees Thornton riding into the canyon and fires a shot. Thornton mistakenly thinks he has been fired at and returns gunfire. Luke is seriously injured with a painful stomach wound. Mr. MacDonald had told his sons how the pain from stomach gunshot wounds intensifies over time and becomes unbearable. Thornton departs to get help. However, already in terrible pain from a .30-.30 slug in his stomach, Luke draws his six gun and kills himself.



Figure 1. *El Dorado* (1967, Paramount, Director: Howard Hawks). Luke MacDonald about to commit suicide due to excruciating pain from a bullet wound in the stomach.

The Green Berets (1968)

Wayne plays Colonel Mike Kirby in command of a force of Green Berets. His garrison is attacked. He and several soldiers are stationed in a lookout tower when it is hit by a mortar shell fired by the advancing North Vietnamese troops. The tower tumbles to the ground, but the men survive the fall. The Colonel orders his men to pull back. However, one stays behind and madly digs through the rubble. He is searching desperately for a detonating device to set off a string of claymore mines to kill the droves of approaching Vietcong troops. He manages to set off the claymores, but one of them is also set to blow the tower, and so he dies in the string of explosions. He is a minor character. However, it is a heroic act, an effort to save his fellows who are greatly outnumbered.

In Harm's Way (1965)

This movie contains two suicides, both involving naval officers. The first is Navy nurse Annalee. She is in love with Jere, the son of Captain Rockwell Torrey (played by John Wayne). Wayne has not seen Jere in years since his divorce from his ex-wife. After Torrey wins a decisive naval battle, he is promoted to Rear Admiral and wins the respect of his son who then enthusiastically volunteers for hazardous duty aboard a PT boat. However, Captain Eddington (played by Kirk Douglas) learns that his promiscuous wife was killed in a bombing attack. Tormented by the memories of his wife's infidelity, the drunken Eddington asks Annalee out on a date. They swim in the ocean. Eddington refuses to give Annalee her clothes back. He grabs and rapes her on the isolated beach. Later, Nurse Maggie Haynes, Torrey's girlfriend, finds a suicide note next to Annalee's body on her bunk in their barracks. It reports that the suicide was due to the rape and the apparent pregnancy of Annalee. Annalee had no history of psychiatric morbidity and was, until the rape, portrayed as an agreeable, happy person.

The second suicide involves the offender in the rape, Captain Paul Eddington (played by Kirk Douglas). He hears inadvertently that Annalee has committed suicide through an overdose. He is not suspected of rape, but he apparently fears that this will come out and, if so, he would face court-martial. He commandeers an observation plane and heads out into the ocean to find the Japanese fleet that is suspected of moving toward the American base. This is a "certain death" mission since the fleet is so far from the base that the plane cannot carry enough fuel to make it back. Importantly, the location and size of the approaching fleet is vital to the allied defense of the islands.

While on his certain death mission, Eddington refuses to answer calls from the naval air command until he is near the Japanese fleet. He is ordered to come back, and then ordered to stay under the cover of the clouds given that the fleet is heavily guarded by many Japanese fighter planes. His observation plane would be helpless against such an attack. Eddington manages to count 17 ships including 12 destroyers, 4 cruisers and the prized, gigantic Yamato, a super-sized new ship the size of four city blocks. Eddington is repeatedly ordered to stay in the clouds and head back to the base. Possibly he could crash into the ocean, survive, and be picked up by a rescue mission. Eddington failed to equip himself with a parachute before he boarded the plane (another sign of suicidal intent). Moments before his death, Captain Eddington is ordered one last time to retreat into the cover of thick clouds at

10,000 feet to elude the Japanese Zero fighter planes that have spotted him. He refuses and says he wants a closer look at the ships he has spotted below. Fully exposed in the air, away from the cloud cover, he is an easy target. One Zero hits his plane with a machine gun blast, but misses his body. Nevertheless, he persists in flying further into the open. He has already reported all of the information that is vital to the war effort. He is not so lucky with the next Zero. Its volley of bullets include one that hits him in the head. He dies instantly.

There are several apparent motives behind this suicide. It has an altruistic element - he helps the war effort through taking on a certain death mission, he is escaping a court martial for rape, and he feels guilt over the rape and subsequent suicide of the Admiral's son girlfriend.

Sea Chase (1955)

Wayne plays Karl Kirchner, the skipper of the *Ergenstrasse*, a German merchant marine vessel. Germany has invaded Poland, and the British navy wants to intern Karl's ship, which is docked in Sydney, Australia. He disobeys orders to surrender the ship and slips away in an early morning fog. There ensues a dramatic sea-chase lasting for weeks across the South Pacific. Nearly out of fuel, its lifeboats having been chopped up for wood, the *Ergenstrasse* stops at a deserted island to cut a new supply of wood for its engines. During a wood-cutting break, Seaman Walter Stemme is badly bitten by a shark. He develops gangrene and will die without proper medical attention. Stemme overhears how Kirchner is debating whether or not to surrender the ship to the British navy (which is closing in) so that Stemme will receive the medical treatment he needs. However, this would risk the imprisonment or even execution of all members of the crew as war criminals. The crippled Stemme manages to break a glass case containing two German Lugers in the infirmary room. He kills himself so as not to endanger the lives of his shipmates, an act of clear altruistic suicide.



Figure 2. In Harm's Way (1965. Paramount, Director: Otto Preminger). Captain Paul Eddington (Kirk Douglas) is killed by machine gun fire from Japanese zeroes swarming around his observation plane. He had been ordered repeatedly to retreat into cloud cover, but refused even after he relayed the needed information.



Figure 3. *Sea Chase* (1955, Warner Brothers, Director: John Farrow). Captain Karl Ehrlich (John Wayne) holds the German Luger pistol with which seaman Walter Stemme has just killed himself. Stemme prevented the surrender of the ship. Elsa Keller (Lana Turner) grieves.

Sea Chase also tells the story of two additional suicides from the past. Wayne's co-star Lana Turner (a superstar of her time) plays Elsa Keller, the daughter of a former German General. Her father committed suicide in the Great Depression because of economic strain. He was unable to support his family in the way in which they had been accustomed. The third suicide involved a former fiancé of Elsa. Captain Kirshner alleges that she destroyed the fiancé as she had done to other men she had been involved with. It is implied that her fiancé, a British friend of Captain Kirshner who was apparently in the military, may have discovered that she was a German spy. In both of these cases the suicide was portrayed as apparently the product of external causes: financial strain and betrayal in love.

Shepherd of the Hills (1941)

The Matthews family runs a moonshine distillery deep in the hills of the Ozarks. The superstitious rural community blames its hard times on the ghost of Matt's mother, who died about the time his father apparently deserted his family many years ago. A mysterious stranger comes into the community, buys land, assists the villagers, is very friendly towards the Matthews kin, and is generally a "good shepherd." Ultimately it is revealed that he is the long lost father, a person Matt has vowed to kill out of revenge and to lift the alleged curse on the area. As Matt runs towards his rifle to kill his father, Pete, the son of Aunt Mollie Matthews, grabs it. He is about to throw it over a cliff when Mollie seizes the butt end. Mollie hates Matt's father even more than Matt. In the struggle over the rifle, it accidentally goes off, and Mollie kills her own son. In extreme grief, she later quietly lays her son on the floor of her cabin. In deep sorrow, she lights a circle of candles around him. She pours a ring of kerosene around him and ignites it into a circle of flames. She stands stoically by the funeral pyre. She kills herself by fire as the cabin becomes an inferno.



Figure 4. *Shepherd of the Hills* (1941, Paramount, Director: Henry Hathaway). Aunt Mollie Matthews accidentally killed her son Pete. In extreme grief, she lights a funeral pyre around his body and dies moments later as the cabin is engulfed in flames.

The Shootist (1976)

Wayne's last film involved an outlaw assisted suicide. In *The Shootist* (1976) he plays John B. Brooks, an aging gunfighter dying of stomach cancer. He travels to Carson City to get a second opinion on his condition from Dr. Hostetler (played by James Stewart), a doctor he trusts and who nursed him back to health after receiving severe gunshot wounds twenty years earlier. Dr. Hostetler confirms the diagnosis of cancer and gives Brooks six weeks or less to live. Brooks insists on details on the pain he will experience. Dr. Hostetler reluctantly provides details. The pain is expected to be unbearable, and, if he is lucky, he will go into a coma. Not even the bottle of pain killer (opium-based) will quell the pain when the end is near. The doctor notes that Brooks, unlike the doctor, is a brave man. Hostetler argues that Brooks should consider that a man as brave as he should not die a death that he just described. This is an apparent call for a suicidal act. Brooks decides to die in Carson City and takes a room in the house of a widow, Mrs. Rogers. Unfortunately for Mrs. Rogers, there ensues a gun fight with two would-be assassins who enter his room late at night and are killed by Brooks. This proves to be too much excitement for the other guests in her rooming house to bear. They all leave, taking away Mrs. Rogers' source of income to support herself and her teenage son Gillom. While she first orders Brooks to leave, she softens her position once she discovers he is a dying man. Gillom later expresses anger at his former hero, Brooks, whose very presence is threatening to bankrupt the family by driving guests away from the boarding house. Brooks is also seen as a threat to public safety as knowledge of his presence in the town has made national news - even the *New York Times*. Additional gun fighters might come

into the town and disturb the peace. The sheriff chides him for costing the tax payers \$10 a week to post a guard outside the boarding house to protect Mrs. Rogers from further disturbances. Brooks is therefore a burden to the town as well as to the Rogers family. The episodes of pain become more frequent.

Brooks ultimately takes the advice of his old friend and doctor, Hostetler. He plans a gun battle where he is certain to be killed. Brooks has Gillom deliver independent messages to the three most skilled gunfighters in the area: Jack Pulford, a faro dealer; Cobb, the owner of a local dairy business; and Mike Sweeney, a man who hates Brooks for killing his brother Albert some years ago. Each is instructed to come to the Metropole saloon the following day, which is Brooks' birthday, January 29, 1901. A fierce gun battle ensues. Brooks is shot by Sweeney and Pulford. He manages to kill all three of his invited assailants. However, as he stumbles and staggers from his injuries, he is shot in the back by the bartender. He succumbs to hits by both barrels of the shotgun. Gillom enters and kills the bartender as he desperately tries to reload. As Brooks dies from his multiple wounds, all four assailants lay dead. His suicide releases him from pain, which would soon become unbearable. The suicide also lifts the financial burden from Mrs. Rogers and the town, and the burden of endangered public safety from undesirables out to make a name for themselves by assassinating Brooks.



Figure 5. *The Shootist* (1976, Paramount, Director: Don Siegel). John B. Brooks (suffering from terminal stomach cancer) in the process of “suicide by outlaw.” He sustained handgun wounds by four assailants, but succumbed to a barrage from both barrels of a sawed off shotgun.

Three Godfathers (1949)

In *Three Godfathers*, Wayne stars as Robert Hightower, a bank robber. Together with his accomplices, Pedro and the Abilene Kid, he is on the run after a bank robbery. As fate would have it, as they approach a water hole on their planned route of escape through the desert, they find a woman stranded alone in a covered wagon. She has just delivered a newborn baby and is dying. Her last wish is for the three men to bring her baby back to town to safety. Wayne and his fellows reluctantly agree. Unfortunately, they are nearly out of water, and they

discover that the waterhole is dry, having been dynamited inappropriately by the woman's now deceased husband. To make matters worse, their horses run away into the desert. The three men walk towards a mountain which marks the way toward the distant town. Their water is almost gone. They carefully ration the water among themselves. However, the Abilene Kid persistently refuses his share. He insists that the baby be given his allotment of water. As anticipated, the Kid ultimately collapses and dies. Pedro and Wayne stumble for miles towards the mountain. Unfortunately, Pedro trips down a rocky hill and breaks his leg and is unable to travel on his own power. Wayne offers to rig a stretcher which he could drag behind him. Pedro refuses, knowing that this would only slow Wayne down and they might all perish as a consequence. Pedro asks Wayne for his pistol. Pedro alleges that he needs it to keep coyotes away while Wayne sends help back. Wayne gives Pedro his pistol. Moments later we hear a gunshot. Wayne pauses, but does not go back.

Emergent Themes

Suicide due to extreme pain is apparent in two of the 12 suicides in Wayne's films, the case of Luke McDonald in *El Dorado*, and in Wayne's last film *The Shootist*. The suicide of J. B. Brooks in *The Shootist* is remarkably close to Wayne's own biography. Wayne and Brooks were both in extreme pain at the end of their lives, and both suffered from cancer.



Figure 6. The Three Godfathers (1949, Argosy, Director: John Ford). Pedro and Robert Hightower (John Wayne) pay their last respects to the Abilene Kid. The Kid has just perished after repeatedly refusing to drink his share of the scant supply of water. He allocated his share to the baby - an altruistic suicide.



Figure 7. *The Three Godfathers* (1949, Argosy, Director: John Ford). Robert Hightower (John Wayne) leaves his handgun and gun belt with his friend Pedro, who has broken his leg. Moments later we hear a shot ring out. Pedro has committed an altruistic suicide.

The more frequent theme running through Wayne's films containing a suicide is altruism. About half of the suicides in Wayne's movies are for the benefit of others. Captain Eddington commits suicide, in part, to benefit the US Navy and to increase the probability of their success in the major naval battle that is inevitable and soon to come. He dies obtaining much needed information on the location and size of the encroaching Japanese fleet. Seaman Walter Stemm commits suicide to save more than a dozen of his shipmates aboard the *Ergenstrasse* from capture and possible execution by the British navy. At other times, the altruistic suicide may be for the benefit of a single person. Two men sacrifice their lives to save a baby in *The Three Godfathers*. The strong theme of altruistic suicide typically takes on a heroic tone. This tone is consistent with the heroic themes in Wayne's movies as a whole (Campbell, 2000; Mann, 2003; Roberts & Olson, 1997).

All of the suicides in John Wayne's movies are social in their etiology. They are, then, largely attributed to external, not internal, causes. This is in contrast to the scientific literature in suicidology where the cause of suicide is largely reduced down to the level of the individual in such terms as a life-long battle with inherent depression or substance abuse (Lester, 2000).

The next issue is the extent to which pain and altruism are themes in the etiology of suicide in the other films of Wayne's era. That is, is the degree of emphasis on altruism and pain in Wayne's film similar or different from other films of this period (1941-1976).

Table 2. Percentage of John Wayne vs. 1941-1976 period films containing pain as a motive for suicide (N=439 suicides)

	All Other Films	Film Starring John Wayne
Pain is a motive	3.0%	16.7%
Pain not a motive	97.0%	83.3%
Total	100% (n=427 suicides)	100% (n=12 suicides)
Chi Square 6.56*		

P < 0.01

STATISTICAL ANALYSIS

Table 2 presents the results of the cross tabulation of pain in John Wayne films. Fully 16.7% of Wayne film suicides attribute the suicide to pain as compared to just 3.0% of period films starring other actors, a statistically significant difference. From this contingency table, we can surmise that Wayne films are more than five times as apt to relate suicide to physical pain as compared to all other suicide films of the period.

A multivariate logistic regression analysis was performed as a check on this preliminary bivariate finding. The dependent variable is the presence of pain as a cause of suicide (0,1). In a preliminary analysis, a control is incorporated for gender where 1=female and 0=male. Most of Wayne's film suicides are men (the exceptions are the grieving Aunt Mollie in *Shepherd of the Hills* and the Navy nurse in *In Harm's Way*). From the odds ratios, controlling for gender of the suicide victim, Wayne films were 6.07 times more apt than the other suicide films of the period to attribute the suicide to pain. Females were 26% less likely than males to have their suicides attributed to pain.

Table 3 provides the results of the analysis of the effect of Wayne films on the attribution of suicide to altruistic motives. Fully 50% of the Wayne films attribute the suicide to altruistic motives. In contrast, only 14.8% of the control group films attribute suicide to altruistic motives, is a statistically significant difference. These results suggest that Wayne films are over three times more apt than the other films of his period to attribute suicide to altruistic motives.

Table 3. Percentage of John Wayne vs. 1941-1976 period films containing altruism as a motive for suicide (n=439 suicides)

	All Other Films	Film Starring John Wayne
Altruism a motive	14.8%	50.0%
Altruism not a motive	85.2%	50.0%
Total	100% (n=427 suicides)	100% (n=12 suicides)
Chi Square 10.94*		

P < 0.001

A multivariate logistic regression analysis was performed as a check on this preliminary bivariate finding. The dependent variable is the presence of altruism as a cause of suicide (0,1). A control is incorporated for gender where 1=female and 0=male. From the odds ratios, controlling for gender of the suicide victim, Wayne films were 5.12 times more apt than the other suicide films of the period to attribute the suicide to altruism. Females were 70% less likely than males to have their suicides attributed to altruism. In both analyses, preliminary multiple logistic regression models reaffirmed the findings from the simple bivariate analyses.

DISCUSSION

Two patterns in Wayne films were found to be significantly different from a control group of other films of his era. First, from the multivariate analysis, Wayne films are fully six times more likely than other films to attribute suicide to pain. While it is difficult to establish any causal connection between pain in the Wayne films and pain in the personal life of Wayne, there is an apparent association. Both of the films where severe pain causes suicide (*El Dorado*, *The Shootist*) were made after Wayne had his lung removed (1964). It is also noteworthy that pain avoidance in the other films of the period included many instances of anticipated (not actual) pain, such as four suicides in the movie *On the Beach*. In Wayne films, actual extreme pain caused the suicides.

Half of the suicides in Wayne's films are altruistic, typically for the benefit of others, and typically events which save the lives of one or more people. From the multivariate analysis, the Wayne films were fully five times more apt to portray altruistic suicide than the other suicide films of the period. That the Wayne film suicides take place in altruistic and heroic contexts is consistent with his life. While he never served in the military, he is renowned for his devotion to patriotism and love of country (Campbell, 2000; Davis, 2001; Mann, 1997; Roberts & Olson, 1997; Wayne, 1987). Altruistic suicide would be in keeping with the cultural value of heroism and sacrifice for others found throughout his 140 plus movies.

Given Wayne's popularity, it is plausible that his emphasis on altruistic suicide influenced the framing of suicide in other films. For example, there is evidence of possible imitation of altruistic suicides by the superstars of the post-Wayne period. Bruce Willis, a contemporary macho superstar, for example, commits suicide through exploding a bomb on an asteroid headed to earth, which would destroy life as we know it on the planet, in *Armageddon* (1998). Tommy Lee Jones, who was also portrayed as dying of cancer, flies an old Russian space shuttle (loaded with atomic bombs and headed for earth), into the moon. He thus saves the entire planet in *Space Cowboys* (2000). Most recently in *Gran Torino* (2008), superstar Clint Eastwood, who is also portrayed as dying of cancer, stages his own suicide by gang members. He has them inadvertently shoot him to death in order to send them all to jail. In so doing, this will improve the quality of life of his Hmong neighbors, who were tormented by the gang. These and other cases of superstar suicides follow John Wayne's theme of dying for the benefit of others. It is not possible to prove that Wayne influenced the suicide scenes of subsequent Hollywood suicides, but there is an apparent association between macho superstar status and altruistic suicide.

In any event, American suicide films have altruistic suicide as one of their principal themes. Altruistic motives are associated with approximately one of every seven film

suicides. Possibly Wayne's films reflected this general theme and helped to perpetuate it. If so, this process was apparently not followed by British film makers. A preliminary analysis of 81 suicides in British films found only one film with an altruistic suicide. The degree of emphasis on altruistic suicide in American film may be unique in the Western world. The influence, if any, of Wayne on altruistic suicide in film may be largely American-based.

The research base on altruistic suicide is quite thin. However, the cinematic theme of altruistic suicide is related to an undercurrent in suicidology that suicide often results from a perception that one is a burden to others. A recent theoretical scheme developed by Joiner and his colleagues has the perception of being a burden as one of its central predictors of suicidality (Connor, Britton, Shorts & Joiner, 2007; Joiner, 2005). This concept of burdensomeness ties directly into the notion of altruism. If one is a burden to others, then one's suicide will be for the benefit of others. For example, if one perceives that one is a financial burden, an emotional burden, a burden on those who must care for their physical needs, and so on, suicide eliminates or reduces the costs imposed on one's significant others. In this sense, many suicides can be viewed as "altruistic," for the benefit of another or a group. Hence, at a higher level of abstraction, cinematic emphasis on altruistic suicides, such as those that save lives in the Wayne films, is relevant to research on suicides that are committed to help alleviate the burden to others that flows from a suicidal person's presence in a group. In these cases the suicide gives life or improves the quality of life of those left behind.

Some caution needs to be exercised in generalizing the results of the present investigation. In general, many, if not most actors, who star in films may not have very much control how suicides in the film are portrayed. The biographical approach to explaining the variation in the way suicides in film are portrayed may be best applied to actors who have achieved high levels of stardom. John Wayne reached this level by the 1950's. His films made the top ten lists on an annual basis for a quarter of a century, a feat that has yet to be matched. Many veterans have reported that their reason for serving was in part related to viewing one of his war movies (Campbell, 2000; Davis, 2001; Roberts & Olson, 1997; Wayne, 1987). As late as 2007, over thirty years after his last film, he was the third most favorite film star in a 2007 Harris poll (2007). In June 2008, British rock star Billy Idol released a commemorative song entitled "John Wayne." While many ordinary actors may not be able to pick and choose roles, and may not be able to influence the manner in which suicides are framed, superstars are more apt to have these choices. Nevertheless, it is assumed that the way in which movies featuring superstars frame the causes of suicide is an important social fact. Such movies are assumed to have more influence than ordinary films over the portrayal of suicide in future films.

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PART III: SUICIDE IN LITERATURE

Chapter 8

SUICIDE MOTIVES IN 61 WORKS OF POPULAR WORLD LITERATURE AND COMPARISON TO FILM

Steven Stack and Barbara Bowman

Art has influenced the writings of many psychiatrists, psychoanalysts, and psychologists. Alexander, Freud, Horney, Laing, Shneidman, and Stekel all made reference to literary characters when they delineate their concepts of neurotic characterology (Brown, 2001; Cutter, 1983; Deats & Lenker, 1989; Foy & Rojcewicz, 1979; Shneidman, 1985). Nevertheless, the analysis of suicide in art has been dominated by the humanities. Such research has tended to explore suicide in a single work such as a novel or play (Barraclough 1992; Miller 2005; Paskow 2005; Salemi 1988; Williams and Joiner 2004). For example, Paskow (2005) assessed the motives behind the suicide of the lead character in *Madame Bovary*. There are some works that analyze multiple suicides, but they tend to be restricted to works by a particular author such as Shakespeare (Kirkland, 1999) or a particular period (e.g., Berman, 1999; Gentry, 2003; Kaplan & Schwartz, 2000; Preti & Miotto, 2005). Research is needed to ascertain cultural patterns in literature as a whole. The present study fills this gap and focuses on motives for suicide in a large number of popular literary works.

The present investigation makes three contributions. First, it provides the first systematic taxonomy of motives for suicide in a representative sample of popular literary works of fiction. Second, it provides a taxonomy of motives in a sample of popular American feature films on suicide. Third, it explores the similarities and differences in the presentation of motives for suicide between these two art forms. It is possible that the two art forms may be both expressions of a latent cultural factor or definition of suicide.

METHODOLOGY

Major literary works were defined as those where a *Cliff Notes* summary is available. *Cliff Notes* are widely used by secondary and college students desiring a detailed overview and critique of literary works being assigned in English classes. A list of 239 titles covered by

the Cliffs Notes series was obtained from Roberts (1997). Sixty-one (25.5%) of these works contained one or more suicides. (See Appendix 1, List of Literary Classics Containing Suicides by Author, Title, Character and Motive for Suicide). A total of 104 suicides were found in the 61 works. A representative sample of 1,217 suicides in film was taken from six film-oriented webpages including those of the Internet movie database and American Film Institute (Stack & Bowman, 2007).

A TAXONOMY OF MOTIVES

- (1) *Altruistic* suicide refers to Durkheim's (1897) suicide for the benefit of the group (Stack 2004). For example, Willy Loman commits suicide (disguised as a car accident) in *Death of a Salesman* so that his family can collect insurance money.
- (2) *Cheating the Executioner*. Suicide can be motivated out of a desire to avoid being killed by one's adversaries. Goneril in Shakespeare's *King Lear* is exposed for the murder of her sister. Knowing she will be put to death for her crime, she commits suicide (Kirkland, 1999).
- (3) *Death of a loved one* includes the suicide of Ophelia in Shakespeare's *Hamlet*. She commits suicide after hearing that her father has been accidentally killed by her lover, Hamlet.
- (4) *Economic strains* include unemployment and extreme downward mobility, as in the suicide of Lily Bart in *House of Mirth*.
- (5) *Psychiatric* motives encompass mental disturbances and drug addiction. Alcoholism is given as the underlying cause of suicide of Simon Stimson, the church organist in Thornton Wilder's *Our Town*.
- (6) *Relationship problems* include rejection in love as illustrated by Anna's rejection by her lover in *Anna Karenina*.

Table 1. Percentage of suicides by motive, literature and film. N=104 suicides in literature, 1,217 suicides in American film

Motive for suicide	Percentage of Literary Works with Motive	Percentage of Films with Motive	Chi Square Test of Significance
Altruism/heroicism	17.3%	18.4%	.781
Cheating the executioner	17.3%	11.2%	3.49
Death of loved one	21.2%	7.2%	24.33*
Economic	10.6%	11.4%	.79
Psychiatric	7.7%	13.6%	2.89
Relationship problems	34.6%	34.0%	.902

* $p < .05$

For the suicides in literature, the motives for suicide were derived from the text in *Cliff Notes* and other web-based sources, as well as reading many of the works and sections of the works where the suicide is the focus of the discussion. In the case of the films, the motives were derived from detailed summaries of the film, most notably from the archives of the American Film Institute, and also five other web-based bibliographies. As a check on these sources, most of the films containing the suicides were watched in their entirety first hand. In all, 55% of the suicides in film were viewed by the present authors. The remaining films could not be obtained in large part because they were never produced in DVD or VHS format or were out of print. An effort to obtain some out-of print-films from libraries on interlibrary loan failed due to the lack of cooperation of the lending libraries. Fully 99% of the motives for suicide derived from detailed plot summaries of the film were found to be correct after viewing the films first-hand. Hence, it is assumed that the motives in the written summaries of films are valid indicators of suicide motive.

The dependent variables in the present study are six binary variables referring to the presence or absence of each of the six motives for suicide. Since the variables are dichotomous, logistic regression techniques are appropriate (Borooah, 2002). The central independent variable is also a dichotomy: type of art form, literature=1 and film=0. In the multivariate analysis, gender (1=male, 0=female) is added as a control variable. Gender is an important predictor of suicide (Lester, 2000; Stack, 2000), and it may be differentially represented according to the type of art form (literature vs. film).

RESULTS

Table 1 summarizes the bivariate findings, comparing motives for suicide in literature with those found in the cinema. Altruism is linked to 17.3% of the suicides in literature compared to 18.4% of those in film. This difference is not significant. Death of a loved one is significantly more apt to be found in literature than in film (21.2% vs. 7.2%). Literature and film do not differ significantly for the remaining four motives. For example, relationship problems are present in 34% of the suicides in literary works and 34% of the suicides in films.

Table 2 summarizes the results of the multivariate logistic regression analyses. These largely replicate the results in Table 1. From the results of the six regression analyses in column 1, only two indicate that literary works are significantly more apt than films to frame suicide in terms of one of the six motives. As in the case of the results from Table 1, controlling for gender of the suicide victim, literary works are more apt than cinematic works to frame suicide in terms of the death of a loved one. From the relevant odds ratio (OR), literature is fully 2.94 times more apt than film to attribute suicide to the death of a loved one. In addition, literary works are more apt to frame suicide in terms of cheating the executioner (OR=2.05) than are films. For the other four principal motives, there is no difference between literature and film. For example, there is no significant difference between suicide in literature and suicide in film in the extent to which they portray suicide as stemming from altruistic motives.

From the second column of Table 2, the gender of the suicide victim was highly predictive of motive in all six analyses. Controlling for type of literary work (literature vs. film), men are, for example, 1.94 times more apt to have their suicides portrayed in altruistic

terms than are women. Men are also more apt than women to have their suicides tied to a desire to cheat the executioner (OR=2.35) and to economic strain (OR=3.15). Men are less apt than women to have their suicides portrayed as due to death of a loved one, relationship problems, or psychiatric problems.

CONCLUSION

Patterns, if any, in the presentation of suicide in world literature are largely unknown. The present chapter contributes to work on art and suicide by exploring the cultural idioms in popular major literary works. Literary suicides are from a sample of 61 works of literature summarized in the popular series, *Cliff Notes*. These works contain 104 suicides. Motives for suicide are coded and compared to motives in a representative sample of 1,217 suicides in American film. The distribution of suicide motives in literature versus film is: altruism (17 vs. 18%), death of loved one (21 vs. 7%, $p < .05$), economic strain (11 vs. 11%), cheating the executioner (17 vs. 11%), psychiatric (17 vs. 14%), and relationship problems (35 vs. 34%). Multivariate logistic regression analyses largely confirmed these bivariate patterns. All motives are gendered with, for example, males being more apt than females to suicide due to economic strain (OR=3.15) and out of heroic/altruistic acts (OR=1.94). The cultural definitions of suicide in popular works of world literature are largely reflected in modern American films. However, both deviate somewhat from suicide in the real world, often emphasizing heroic suicide and suicide as a way of escaping punishment for crimes. Future work is needed to compare the cultural definition of suicide in art to a scientific definition based on the actual distribution of the causes of suicide in modern society.

Table 2. Presentation of each of six motives for suicide: by type of art (literature vs. film) and gender

Dependent Variable (Motive, 0,1)	Odds Ratio: Type of Art (Literature vs. Film)	Odds Ratio: Gender (Men vs. Women)
Altruism/heroicism	.64	1.94*
Cheating the executioner	2.05*	2.35*
Death of loved one	2.94*	.63*
Economic strain	1.27	3.15*
Psychiatric	.27	.59*
Relationship problems	1.06	.41*
	* $p < .05$	

APPENDIX 1. LIST OF LITERARY CLASSICS CONTAINING SUICIDES BY AUTHOR, TITLE, CHARACTER AND MOTIVE FOR SUICIDE

Title	Author	Character Who Suicides	Gender	Method	Motive
The Aeneid (19 BC)	Virgil	Dido, Carthaginian Queen	F	Stabbing	Aeneas abandons her
All the King's Men (1946)	Robert Penn Warren	Lawyer	M	na	Shame over wrong-doing
		Judge	M	Gunshot	
Anna Karenina (1877)	Tolstoy, Leo	Anna Karenina	F	Train	Rejection in love and by society
Antigone (441 BC)	Sophocles	Antigone	F	Hanging	Condemned to death
		Haemon	M	Stabbing	Grief
		Euydice	F	Stabbing	Grief
Antony & Cleopatra 1600	Shakespeare, William	Antony	M	Sword	Death, fatalistic
		Cleopatra	F	Snake venom	Death, fatalistic
		Antony attendant	M	Sword	Altruistic
		Charmian, attendant	F	Snake venom	Altruistic
		Eros, attendant	M	Sword	Altruistic
The Awakening (1899)	Chopin, Kate	Edna Pontellier, 28	F	Drowning	Sexism
The Beloved (1987)	Toni Morrison	Unidentified female on slave ship	F	Drowning	Fatalism

Appendix 1. Continued

Title	Author	Character Who Suicides	Gender	Method	Motive
Bible- Old Testament	Various	Abimilech	M	Stabbing	Heroic
		Samson	M	Crushing	Altruistic
		Saul	M	Stabbing	Heroic
		Saul's assistant	M	Stabbing	Heroic
		Ahithophel	M	Hanging	Betrayal, political
		Zimri, King	M	Fire	Guilt, avoid capture
		Ptolemy Macron	M	Poisoning	Political shame
		Razis	M	Cutting	Heroic, avoid capture
		Seventh Brother	M	Fire	Avoid execution
		7 th Brother's Mother	F	Fire	Avoid execution
Bible- New Testament	Various	Judas Iscariot	M	Hanging	Guilt
Brothers Karamazov (1880)	Dostoyevsky, Fyodor	Pavel Smerdiakov Servant	M	Hanging	Murder
The Canterbury Tales (14 th century)	Chaucer, Geoffrey	Maidens of Lacedaemon	F	na	Escape rape
		Hasdrubal's wife	F	Jumps/fire	Escape rape
		Lucretia	F	Stabbing	Avoid rape
		Appius	M	Stabbing	Shame, incarceration
Catcher in the Rye (1951)	Salinger, J.D.	Student, boarding school	M	Jumping	Escape bullies
Cat's Cradle (1963)	Kurt Vonnegut	President Manzano	M	Stabbing	Dying of cancer

Count of Monte Cristo (1846)	Dumas, Alexander	Fernand Mondego	M	Gun	Abandoned by wife & son, recently convicted
		Heloise de Villefort	F	Poison	Exposed for murders
Crime & Punishment (1866)	Dostoevsky, Fyodor	Svidrigailov	M	Gun	Rejection in love by Dunya
		Servant	M	na	Abuse by Svidrigailov
		Young Girl	F	Drowning	Sexual abuse
Death of a Salesman (1949)	Arthur Miller	Willy Loman Salesman	M	Car crash	Altruistic Economic strain
Divine Comedy (1321)	Dante Alighieri	Pietro delleVigne	M	Concussion, bangs head on cell wall	Political betrayal, shame, innocent
Divine Comedy (1321)	Dante Alighieri	Dido, Queen Carthage	F	Stabbing	Abandoned by Aeneas
Divine Comedy (1321)	Dante Alighieri	Brutus, Senator	M	Stabbing	Political shame Escape execution
Divine Comedy (1321)	Dante Alighieri	Cleopatra	F	Poison	Escape execution, capture, humiliation, death Antony
Divine Comedy (1321)	Dante Alighieri	Citizen of Florence	M	na	na
Divine Comedy (1321)	Dante Alighieri	Cassius, Senator	M	Cutting	Escape execution, political crimes
Divine Comedy (1321)	Dante Alighieri	Judas Iscariot	M	Hanging	Extreme guilt Murder
Dr. Jekyll & Mr. Hyde (1886)	Robert Louis Stevenson	Dr. Jekyll, Scientist	M	Poison	Murder Altruistic
Don Quixote (1605)	Cervantes, Miguel	Grisostomo, Shepherd, Ex-nobleman?	M	na	Rejection in love by Marcela

Appendix 1. Continued

Title	Author	Character Who Suicides	Gender	Method	Motive
Dream of the Red Chamber 18 th century	Xuequin, Cao	Chin Chuan	F	Drowning	Disgrace
		Second Sister Yu	F	Poison	Death of Grandmother Jia
Frankenstein (1818)	Mary Shelley	Frankenstein	M	Exposure, cold	Guilt over driving master to death, killing wife, best friend of master
Ghosts (1881)	Henrik Ibsen	Oswald Alving	M	Overdose morphine	Dying of syphilis
Giants in the Earth (1927)	Ole Rolvaag	Per Hansa farmer	M	Exposure, frozen in snowstorm	Altruistic, to save wife from same fate
Go Down Moses (1942)	William Faulkner	Eunice, a slave	F	Drowning	Shame sexual-daughter giving birth to mixed race child out of wedlock.
The Great Gatsby (1928)	Fitzgerald, Scott	Car mechanic	M	Gun	Murder suicide Grief over wife's killing
Hamlet 1600	William Shakespeare	Ophelia	F	Drowning	Grief, father's murder by Hamlet
The Handmaid's Tale (1986)	Margaret Atwood	Concubine of Glen	F	Hanging	Fatalism
		Concubine	F	Hanging	Fatalism, altruism
Hedda Gabler (1890)	Henrik Ibsen	Hedda Gabler, housewife	F	Handgun	Fear of scandal, guilt, encouraged suicide/provided pistol used in suicide/accidental death
House of Mirth (1905)	Edith Wharton	Lily Bart	F	Poison	Economic strain, extreme downward mobility
The Iliad (8 century BC)	Homer	Ajax, warrior	M	Sword	Shame over loss of expected reward/position

Jane Eyre (1847)	Charlotte Bronte	John Reed, wealthy family	M	na	Economic strain, substance abuse, gambling
The Joy Luck Club (1989)	Amy Tan	Concubine, mother of An-mei Hsu	F	Poison	Altruistic, obtain freedom for daughter
Jude the Obscure (1895)	Thomas Hardy	Little Father Time, child	M	Hanging	Altruistic homicide/suicide poverty
The Judgment (1913)	Franz Kafka	Narrator	M	Jumps from bridge	Argument with father, rejection
Julius Caesar	William Shakespeare	Portia, wife Brutus	F	Fire	Distraught over political events
		Brutus	M	Cutting	Avoid execution
		Cassius	M	Cutting	Avoid execution
		Titinius	M	Cutting	Avoid execution, honor superior
King Lear	William Shakespeare	Goneril	F	Cutting	Cheats executioner, exposed for murder of sister, lover's triangle
Les Miserables (1862)	Victor Hugo	Javert, Policeman	M	Drowns	Altruistic
Light in August (1932)	William Faulkner	Mrs. Gail Hightower, wife of minister	F	Jumps	Probable adultery
Lord Jim (1900)	Joseph Conrad	Captain Brierly	M	na	Guilt
		Lord Jim	M	Gun-assisted suicide	Incompetence resulted in murder, guilt
Lost Horizon (1933)	James Hilton	George Conway	M	Jumps	Grief, Maria's death
Macbeth	William Shakespeare	Lady Macbeth	F	na	Guilt, murder
Madame Bovary (1857)	Gustave Flaubert	Emma Bovary	F	Arsenic	Betrayal in love, financial ruin

Appendix 1. Continued

Title	Author	Character Who Suicides	Gender	Method	Motive
Moll Flanders (1722)	Daniel DeFoe	Banker's wife	F	na	Divorce, husband marries Moll
Mourning Becomes Electra (1931)	Eugene O'Neill	Orin Mannon	M	Gunshot	Guilt, drove mother to suicide
		Christine Mannon	F	Gunshot	Grief, lover killed
Mrs. Dalloway (1925)	Virginia Woolf	Septimus W. Smith, veteran	M	Jumps	Post-traumatic stress disorder
My Antonia (1917)	Willa Cather	Mr. Shimerda, immigrant	M	Long gun	Extreme economic strain, wilderness, immigration
No Exit (1944)	Jean Paul Sartre	Peter	M	Gunshot	Grief, child murdered
		Florence	F	Gas	Murder-suicide
Oedipus the King	Sophocles	Oedipus	M	Self – blinding, possibly leading to death	Incest
		Jocasta	F	Hanging	Incest
One Flew Over the Cuckoo's Nest (1963)	Ken Kesey	Billy Bibbit, mental patient	M	Cutting	Anxiety
Othello (1600)	Shakespeare	Othello	M	Cutting	Grief, murder
Our Town (1938)	Thornton Wilder	Simon Stimson	M	Hanging	Alcoholic Social rejection
The Outsiders (1967)	S.E. Hinton	Darrel Curtis	M	Suicide by cop, gun	Grief
The Ox-Bow Incident (1940)	Walter Clark	Gerald Tetley	M	Hanging	Guilt, lynching
		Major Tetley	M	Falls on sword	Grief, cheat executioner
Return of the Native (1878)	Thomas Hardy	Eustacia Vye	F	Drowning	Rejection by husband
Romeo & Juliet (1600)	Shakespeare	Romeo	M	Poison	Grief
		Juliet	F	Cutting	Grief

Sister Carrie	Theodore Dreiser	George Hurstwood	M	CO gas	Economic ruin, homeless, pneumonia, rejection in love
The Sound & the Fury (1929)	Faulkner, William	Quentin Compson	M	Drowning	Obsession with sexual deviance of sister
Streetcar Named Desire (1947)	Tennessee Williams	Allan, young boy	M	na	Rejection by Blanche over his bisexuality
Things Fall Apart (1958)	Achebe, Chinua	Okonkwo, Nigerian Chief	M	na	Murder/suicide
Turn of the Screw (1898)	Henry James	Miss Jessell, Governess	F	Jumped off tower	Death by execution of Quint, possibly pregnant
Ulysses	James Joyce	Bloom's Father	M	Poison	Grief, death of wife
The Wild Duck (1884)	Henrik Ibsen	Hedvig, daughter	F	Pistol	Severe rejection by father

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Chapter 9

SUICIDE IN DETECTIVE FICTION

Fred Mench and Lisa Honaker

If you walk into Hedda Gabler's study and find the lady of the house stretched out on the floor with a bullet in her head and a pistol in her hand, your reaction would probably be, "Poor woman. So bright and with so much to live for. Why would she do this to herself?" You would need to know her whole story and then consider her state of mind.

If you walk into the study of Colonel Arbuthnot in any detective story and find the lord of the house stretched out on the floor with a bullet in his head and a pistol in his hand, your inevitable question would be, "Poor man. Who could have murdered him and attempted to make it look like suicide?" You would then need to read to the end of the story, where you would find out who the sneaky murderer was, why he did it, and how it was carried out. You would not need to ponder the nature of the human mind or soul, just whether the puzzle was well handled.

If, at the end of a Russian novel, the heroine throws herself in front of a train, you know it is suicide. If, almost anywhere in a detective story, someone seems to have thrown herself in front of a train, you can be pretty sure she was pushed or is setting up someone she hates to take the rap for murder.

Suicide is a plot device or event in serious literature. It is, in fact, pretty common in real life, and the real number of suicides is probably disguised by the fact that, as a kindness to the friends and family, many deaths listed as accidents (that car that drove into the tree on a straight stretch of road or the overdose of prescription medicine) were really suicides. It is also possible that some of the deaths listed as murders were actually suicides, but either something or someone intervened to change the appearance of the site or of the death, or the person committing the suicide contrived it to appear that way, for reasons of his own. This last possibility, however, while fairly common in detective stories when suicide does occur, is either very rare in real life or is always done so well that no one ever discovers the deception. In detective stories, the deception is always discovered by someone, even if not by the police.

In real life, suicide may occur at a rate double the murder rate, yet it is relatively rare in detective fiction. Why is this so?

DEFINING THE GENRE

As a genre, detective fiction is remarkably focused on the reader's experience and expectations, since the drive to read detective fiction is premised on solving the puzzle that its plot presents. Signal efforts to define the genre - from S. S. Van Dine's "Twenty Rules for Writing Detective Stories" (1928) and Monsignor Ronald Knox's tongue-in-cheek "Father Knox's Decalogue: The Ten Rules of (Golden Age) Detective Fiction" (1928) to W. H. Auden's "The Guilty Vicarage" (1949) - suggest the ways in which reader expectations actually determine the form itself. Knox states that "the criminal must be someone mentioned in the early part of the story but must not be anyone whose thoughts the reader has been allowed to follow," and Van Dine insists that that "no willful tricks or deceptions may be placed on the reader other than those played legitimately on the detective himself." Auden even attempts to define the genre's readership, saying it is composed primarily of "professional men," well-read in their own fields, and interested in intellectual pursuits, who cannot stomach other forms of daydream literature, but who suffer from a "sense of sin" and fantasize about its removal through the discovery and punishment of the story's guilty party (157).

While the genre appeals to a more inclusive audience today than the one Auden imagined in 1949, the rules that he, Van Dine, and Knox lay out for the genre have remained influential. Their rules, particularly Auden's, provide a great deal of insight into audience needs and satisfactions, and go a long way toward explaining why suicide is rarer in these books that take death as a principle of composition than in life.

Auden famously argued that detective stories allow their readers to "indulge in the fantasy of being restored to the Garden of Eden, to a state of innocence, where [they] may know love as love and not as the law" (158). In detective fiction, the reader enters a world whose apparent innocence is rendered false by the crime that places the members of the society under suspicion. Real innocence may be restored only when the true criminal is discovered and removed.

Auden then broke the genre into a series of elements in order to make clear how detective fiction creates this effect. He dictated requirements for the setting, suspects, victims, crimes, culprits and detectives - and tied those components specifically to issues of reader interest and satisfaction. He argued for the closed society so that the reader has a fair shot at figuring out the crime, a victim for whom the reader feels both sympathy and suspicion, suspects whose innocence remains questionable for the reader, a defiant culprit whose hubris has led to the crime and whom the reader will feel merits punishment, and a detective in whom the reader can place his trust, one who is either the "official representative of the ethical or the exceptional individual who is himself in a state of grace" (154). In this capacity, the detective must restore the balance of the aesthetic and the ethical by bringing the criminal to justice.

While detective fiction may feature other crimes, murder is the only one that really satisfies its readers. To illustrate this point, Auden lists three classes of crimes: "(A) offenses against God and one's neighbor or neighbors; (B) offenses against God and society; (C) offenses against God." Class A concerns crimes for which restitution to the victim is possible. Auden notes that stolen goods may be returned to their owner or rape may be forgiven. Murder, he says, is the only crime in which restitution cannot be made to the victim, and so society and its representatives must demand retribution or offer forgiveness on the victim's

behalf. Thus the reader's interest parallels society's interest. The reader, like the characters under suspicion and the society that has been corrupted by the crime, requires this retribution, the sense that justice has been served and society has been restored to order. Readers who wish to solve the puzzles that detective fiction presents prize endings that provide not only logical coherence but ethical coherence as well.

While suicide also abolishes the victim, as an offense against God it remains an essentially private matter. It is a crime in which "neither the criminal's neighbors nor society has any interest, direct or indirect" (149). Further, "as long as a death is believed to be suicide, even private curiosity is improper; as soon as it is proved to be murder, public inquiry becomes a duty" (149). To insist, then, that an apparent suicide in a piece of detective fiction is just what it seems may put the reader in the position of taking an unseemly interest in an inherently private matter. The victim has removed herself from society. There is no justice to pursue, no one to punish, no retribution to be made on anyone's behalf. Thus, longtime readers of detective fiction, as our introduction noted, will immediately assume that a suicide occurring before the conclusion of a piece of detective fiction is not what it seems or assume that its investigation is necessary to uncover or untangle another crime, and is therefore worth pursuing on society's behalf.

Suicides that occur at the story's resolution present other problems. An ending in which, once discovered, the criminal commits suicide to avoid capture and/or retribution is ultimately unsatisfying. While, according to Auden, the "murderer must have no future," execution (prosecution in its most extreme form) is the preferred ending because it offers the criminal the chance to repent and society the opportunity both to punish and forgive. Though, practically speaking, murderers often do not repent at the end of detective stories, and we usually see little evidence of society's forgiveness - unless the detective is G. K. Chesterton's Father Brown, readers require either that these culprits be given the opportunity to repent, which can be forecast through their capture, or that the detectives act in self-defense or in defense of others in killing them. The restoration of innocence means that even the guilty must be treated with honor.

Madness and suicide, according to Auden, are the only other options to execution, and they are not satisfactory because, if the criminal is or goes mad, he *cannot* repent, and, if he commits suicide, he *will not* repent. Suicide operates as a further act of hubris, denying society both its right to punish and its opportunity to forgive. The murderer's suicide may satisfy the reader's need to see the murderer safely removed from society forever, but it frustrates the desire for justice.

While the rules above may seem prescriptive, it is worth noting that almost none of the detective fiction we would consider worthwhile follows them. In fact, toying with the reader expectations that these rules describe, creating additional tension and anxiety by flouting some expectations while preserving the intricate logic and plotting necessary to satisfy others, has produced some of the genre's most memorable works by some of its most famous practitioners. Suicide, as an inherently dissonant element within the genre, is sometimes used as a means to that end.

Suicide is central, for instance, to the puzzle Agatha Christie creates in *And Then There Were None*. The book's murderer is a judge with a terminal illness, who kills himself after exacting his own form of justice on characters who had previously managed to escape prosecution for their crimes. Christie throws readers into this puzzle by giving them no detective to follow, leaving them in the same situation as the novel's characters (though with

more knowledge of individual backstories) as they try to discover which one of them is killing off the others after all ten are left for the weekend on an island estate. To throw suspicion off of himself, the judge fakes his own murder with the help of one of the other characters, a doctor, who is later discovered drowned. The plot ends after one of the two remaining characters kills the other, whom she thinks is the killer, and then hangs herself. Readers are left alone on the island with no answers as the plot ends. The solution comes in a postscript featuring a literal message in a bottle (the judge's confession) that washes ashore later. Readers' anxiety, created by the lack of a detective, gives way at the end to ethical qualms about whether or not justice has, in fact, been served. While we might agree that the characters themselves deserved to die, we question whether or not the judge had the right to murder them. Both the murders and his own suicide testify to the judge's lack of remorse or repentance.

Similarly, when Christie famously flouts another of the central rules of the form by having the narrator, Dr. James Sheppard, turn out to be the murderer in *The Murder of Roger Ackroyd*, readers wonder not only at the brazen nature of this betrayal of their expectations but also at the fact that detective Hercule Poirot advises the murderer - as a *kindness* - to kill himself in order to protect the man's elderly sister from shame and infamy in their small English village. The book ends with the murderer's farewell and his preparations for his own death. Thus, while we must applaud the murderer's discovery and removal from society, we are left uneasy with Poirot's solution, a "kindness" that is cold-blooded and seemingly criminal in itself, one that makes us complicit in a knowledge that we cannot use to prevent Sheppard's suicide.

Other writers, including Edgar Allan Poe, who was said to have invented the genre of detective fiction, and Sir Arthur Conan Doyle, who, in Sherlock Holmes, created its most famous detective, also tested the limits of the form so much (see the killer orangutan of Poe's "Murders in the Rue Morgue," or the long sojourn in Utah in Doyle's "A Study in Scarlet," for example) that it might be worthwhile for us to establish even more concretely a working definition of detective fiction.

FURTHER DEFINITIONS AND EXCEPTIONS

First, we will exclude spy stories and thrillers (conflict between good and evil, or between us and them), Gothic tales, romances, and studies of murderers whose guilt is known (and so there is no puzzle). An exception to this latter might be the inverted Dr. Thorndyke stories of R. Austin Freeman, where the puzzle is how Thorndyke will figure out the mystery that readers already know from the beginning.

Once those exclusions have been made, we have arranged the remaining types of detective stories as follows:

- (1) The cozy, golden-age, puzzle, with a closed society, low violence, and a simple story. Christie was a master of this form. *And Then There Were None* and *The Murder of Roger Ackroyd* both fall into this category, as do her Miss Marple stories.
- (2) The police procedural, perhaps with multiple threads, possibly unrelated. The police may be better than crooks though not always. This genre is typically high in violence.

- (3) The private eye's investigation: if male, lots of physical action, beatings of the detective; if female, often lighter with a more cooperative cast of characters. Raymond Chandler's novels featuring detective Philip Marlowe (*The Long Good-bye*, *The Big Sleep*, e.g.) define the former, and Sue Grafton's alphabet series (*A Is for Alibi*, *B Is for Burglar*, e.g.), featuring detective Kinsey Milhone, the latter.
- (4) The lawyer's/DA's investigation: generally legally intricate, but also featuring lots of hands-on action. Trials often occupy a large part of the story (Erle Stanley Gardner for both).
- (5) The coroner's or other lone wolf official's investigation: the main element is inquiry into a single case.

The shared features of these types include: (1) at least one murder (or suicide), without which both gravity and mystery are likely to be missing; (2) at least one detective (official or not), sometimes brighter than the reader, occasionally bumbling or slow; and (3) a puzzle that is not immediately solvable, whether it's a whodunit, howdunit or whydunit, or all three. (The howdunit is typically the locked room murder, which may turn out to be a suicide.)

Differing features include: (1) settings - cozy/familiar or distant/exotic - in time and place; (2) mean streets or court room; (3) multiple threads versus a single one (though a single thread may have more than one murder/suicide and remain the same case. Police procedurals tend to multiple threads, and cozies to single threads, with the occasional red herring that distracts the investigator for a bit); (4) point of view, with first person common, especially for private investigators or sidekicks (think Dr. Watson or Archie Goodwin); and (5) novels versus short stories, with short stories more likely to have a single thread and tighter puzzle, often with a twist at the end.

The books that we have looked at do not include the second or the fifth types, and very few have the fourth. Most contain the first, and some the third. As our above discussion of the problems suicide presents in detective fiction makes clear, certain types of stories are less suited to suicide than are ordinary novels.

Within the detective stories we do consider, as the discussion above has also suggested, there are various plot possibilities involving murder and/or suicide:

Murder Seen as Murder

Here the problem is who, how and why, and this is the most common. The "how" is most often the locked room mystery. The "why" is what gives the author the most chance at character portrayal. The "who" is the puzzle, and calls for some red herrings. A sub-possibility is that the deceased had contracted his own murder (e.g., Michael Chabon's *Yiddish Policeman's Union*).

Murder Disguised as Suicide (Intentionally or Accidentally, by the Murderer or Someone Else)

Here the problem is initially why, and only later who or how. The locked room can be used here to suggest that no one could have done it, and, therefore, it must be suicide (see

John Dickson Carr's *The Case of the Constant Suicides*). Conversely, someone must figure out that it could not have been suicide (or that it didn't have to be suicide) and then treat it as murder.

Murder Mistaken as Accident

Here there is no initial problem, only the obligation of the author to enable someone to figure out it was not an accident. This is a most logical way to handle a murder in real life, but it does not crop up very often in our stories.

Suicide Seen as Suicide

Here the problem is why, and that gets the author into the mind and background of the deceased. This does not seem to be too common, except for a minor death (as in Carolyn Hart's *Scandal in Fair Haven*) or in a past death that will cause someone to commit murder in the course of the story. (An exception to this limitation is Michael Underwood's *A Clear Case of Suicide*, where the opening suicide is central to the whole story.) A variant is a real suicide that is deliberately engineered or provoked by someone (which almost happens in Dorothy L. Sayers's *Gaudy Night* and does happen in Amanda Cross's *Death in a Tenured Position* and J. D. Robb's *Rapture in Death*).

Suicide Disguised as Murder (Intentionally or Accidentally, by the Victim or by Someone Else)

Here the initial problem is who, how and why, but then the author must allow someone to erase the reasons for concluding the death was a suicide. A common set-up involves the deceased seeking vengeance on someone who can be framed, with the archetypical example being Doyle's "The Problem of Thor Bridge."

An alternative version is someone coming along and changing the circumstances so that it will be seen as murder (perhaps to clear the deceased or to implicate someone else). For the latter, see Christie's "Market Basing Mystery." Two motives for this are avoidance of the suicide clause in an insurance policy or vengeance for the death on the person whom the conniver judges to be guilty of driving a friend to suicide, especially through blackmail.

For a more unusual case, Earlene Fowler's *Steps to the Altar* involves a wife and best friend who flee, allowing themselves to appear guilty of murder, so that the suicide victim can be buried in consecrated ground (There is a German short story with a similar twist, except that this involves sheep helping out their shepherd.)

Suicide Taken as Accident

Here there is no initial problem other than the usual obligation of the author to lead someone to figure out that it was not an accident. Possibilities include the deceased or someone else wanting the death not to appear self-inflicted (as Poirot's in *Curtain*), or the manner of death being ambiguous, such as a car slamming into a tree.

Accidental or natural death is not a factor unless it is misinterpreted as suicide or murder, and the detective must figure out that no one is to blame. This, the most common manner of death in real life, constitutes an ironic twist in a detective story since everyone, readers and characters alike, tend to assume that the deaths in the stories are purposeful and were caused by someone tainted by a moral fault.

A few of the novels we looked at do not exactly meet our definitions of the detective story, but they have been included anyhow because of the use made of suicide or the supposition of suicide. The two most striking examples of this are Daphne du Maurier's *Rebecca* and Jodi Picoult's *The Pact*.

Rebecca is probably well known to most readers of this book, perhaps through the 1940 movie version with Laurence Olivier and Joan Fontaine, in which Maxim does not shoot his wife, but instead she falls accidentally and dies while confronting him. He still disposes of the body in the same way on a scuttled boat, and the initial verdict when a body is later found at some distance, after some time and battering, is accident. But, when the scuttled boat is found and Rebecca's corpse is in it, Max is accused of murder. It is only when the investigator finds out from Rebecca's doctor that he had just told her that she is dying that the verdict is brought in as suicide. The verdict, of course, is wrong, whether gauged against the book (murder) or the film (accident).

The Pact tells us that Chris Harte and Emily Gold, now high-school seniors, have been friends from infancy and lovers for some time now. The book's opening indicates that he and she are together: she says, "I love you." He kisses her, and there is a shot.

The complications begin when Emily decides that she wants to commit suicide and wants Chris to support her or help her, but she will not tell him why. We do not know either, though we do know, as no one else does, that she is pregnant. He agrees to support her in this, as in everything else, but tries to talk her out of it. Finally, he brings a pistol, loaded with two bullets, and she winds up shot through the head. What he explains near the end is that he was holding the gun but had no intention of pulling the trigger. Emily grabbed his hand, squeezed, and the gun went off. Result: she is dead, his prints are on the gun, and it looks like murder. Chris is eventually acquitted.

A significant passage - halfway through the book - is a flashback to when Chris and Emily were very young. The Hartes' dog Charlie was very sick, and the vet could do nothing more. Chris's father took the dog out one morning, let him do a bit of hunting, and then shot him in the head. Chris knew Charlie had died, but not that his father had shot him. His father had killed Charlie because he loved him and set it up so that Charlie enjoyed himself for the period before he died.

Some authors in the sample of detective stories treat suicide as a throwaway, a device for getting rid of a murderer at the end of the book. Some use it at the beginning or even before the beginning to set up an investigation into why the person committed murder (see especially Underwood's *A Clear Case of Suicide*). Some have the suicide disguised as a murder, sometimes up until nearly the last scene when the brilliant detective reveals all. For very few

stories is the purpose to examine the nature of suicide and the persons who commit it. Frequently enough, authors look at the consequences of the death on the survivors and the particular reaction to suicide, but once the victims are dead, authors generally dismiss them. Sometimes the detective will probe the past of the person to determine what precipitated this, and most of the time it will turn out to be a faked suicide to cover murder or a disguised suicide, often to implicate someone else.

In Amanda Cross's *Death in a Tenured Position*, an English professor at Harvard is found dead of cyanide, and the police arrest her ex-husband, though there was no evidence of ill will or potential gain. But all through the novel our investigator sees how badly Janet has been treated by her colleagues, how she has no friends at all and has been very morose. Despite the reader's impulse to see Janet's death as a clever murder, we are convinced (rightly), long before anyone else, that this is suicide. A footnote to this: Caroline Heilbrun, writing under the pseudonym, herself committed suicide at age 77, though very successful and apparently healthy and happily married

In Hart's *Scandal in Fair Haven*, there is a suicide before the novel opens and one at the very end. The one at the end is the typical self-shooting by the murderer who has been found out. The one before the start of the novel is of a young girl who drowns herself in a lake in response to a series of prank obscene letters left in her school locker. The ensuing murders are the cover-up by the mother of the boy who sent the letters in order to keep him from the scandal.

The weirdest of the novels as far as the suicides are concerned is J. D. Robb's *Rapture in Death*, in which four people commit suicide in different ways at different times and place. Reena, a very advanced computer technology expert working for a company that makes virtual reality games in 2058, has programmed the games to cause people with certain patterns to kill themselves.

THE NUMBERS

Since we've already indicated that the ratio of murders to suicides in detective fiction is far different from real life statistics, it is worth looking at how the numbers and types of deaths compare, particularly since it is easier to obtain real crime statistics than fictional ones. Governmental sources are published and readily available, whereas no one catalogs the number and types of death in fiction, mystery or otherwise, on any large scale - despite the fact that the detective book market was 442 million dollars in 2006, and there were 5,580 mystery and detective titles and editions in print (www.beneaththecover.com/2007/07/30/mystery-detective). So it is anyone's guess how many of these fictional deaths involve (centrally or peripherally) suicide.

Since reading 5580 books was not possible within our timeframe, we developed a sample of 51 works that involved suicide. We tabulated the deaths as follows¹: Plain murder (27); Plain suicide (25); Murder disguised as suicide (14); and Suicide disguised as murder (29). We paid special attention to the reasons for that last statistic. (Murder disguised as suicide

¹ The numbers are not the numbers of deaths but the numbers of the stories that had that kind of death. Many had more than one kind or multiples of the same kind.

was almost always so that the murderer could get away with it without being detected. No murder, no investigation, no chance of being caught.)

Compare this with some statistics about real deaths, taken from the Death Statistics for the State of New Jersey for 1999-2003, individual years and the aggregate. (<http://njshad.doh.state.nj.us/death1119.html> New Jersey State Health Assessment Data):

Year	1999	2000	2001	2002	2003	1999-2003
Homicide	298	320	1051*	333	406	2408
Suicide	563	560	588	553	560	2824
Motor Vehicle Injuries	727	772	755	786	761	3801
Non-motor Vehicle Injuries	1,500	1512	1650	1813	1524	7999
All Causes, Including Above and Disease	73,981	74800	74710	74009	73410	370910

* The 2001 figure includes deaths in 9/11.

For our purposes, murders and suicides are most pertinent, but remember that a number of suicides and murders undoubtedly lie hidden in the statistics on motor vehicle and non-motor vehicle injuries as well.

An interview with Glenn M Miller, chief of police at The Richard Stockton College of New Jersey, and former Field Operations Commander in the New Jersey State Police, confirms this suggestion. Of the deaths that he dealt with ruled accidental, he feels a number were suicides (driving off a road into a tree or an overdose of pills or drugs), but there was no proof of intent. Suicide notes, he said, were rare.

Despite probable under-reporting of suicides, the statewide figures show many more suicides per year than homicides, except for 2001. Note that these figures record the deaths of New Jersey residents, wherever they actually died, which is why the deaths of September 11th victims who resided in New Jersey turn up in these figures. Using the highest of these figures, we would expect suicides to outnumber murders by more than a third. This is nowhere near the norm in detective fiction.

Chief Miller met only one case of a suicide designed to look like a murder. A young man hanged himself, but had managed to tie his hands behind his back before stepping off the chair. It didn't look right to the police at first, but they eventually concluded that he had done it himself. His apparent reason was to confuse the police.

Miller investigated two cases of murder designed to look like suicide. In one a doper son slashed his alcoholic mother's wrists. He swabbed down the walls with bleach and removed the carpet to disguise the fact that his mother had not been a sedentary wrist-slasher but had apparently fought all over the room with her son. The police were never able to get a case that the district attorney could prosecute.

The other case did wind up with a conviction, though on manslaughter rather than murder charges. A 34-year-old man serving in the military was deployed but managed to sneak home. He hid in a closet and surprised his pretty 21-year-old wife as she was fixing herself up to go out on a date. He held her hostage for a day or two, beating and abusing her. Then he forced her to call her boyfriend and, while she was on the phone, shot her in the head. He set the stage to make it look like suicide and then claimed that he was elsewhere in the house and knew nothing until he heard the shot. The boyfriend did not come forward, but the police were suspicious because of the staging, including a mistake in the hand supposed to have held the gun.

The lower incidence of suicide versus murder in detective stories may date back to the injunctions against suicide in the genre by Van Dine - who specifically prohibited it - and by Auden who discouraged it. However, it may be of interest to see how authors who include suicides - real, faked or disguised - used these in their stories. Here is a breakdown of some of the details in our test sample, which includes ten short stories and forty-one novels, ranging from 1911 to 2008.

Placing of the suicide in the narrative: of the faked suicides in the 51 stories the preferred place is part way through (6), followed by at/near the start (5), then at/near the end (4) and only 2 before the story started. In the case of actual suicides in the stories, whether disguised or not, at/near the end is the favored position (19, including all the characters who are attempting to escape arrest, see below), followed by at/near the start (12) and before the novel opens (8) and part-way through (7). This preponderance for end of the story suicides in non-faked suicides is logical, a combination of an easy way out for the murderers (generally shooting themselves) and also no logical place to go at the end of a story for a faked suicide, which would require someone to figure out it is a fake and determine what had really happened. That is something for earlier in the story.

What of the reasons for these suicides or faked suicides? For actual suicides in the stories, the commonest reason is escape, either from arrest (10), especially for murder, or from scandal (5), generally involving a blackmailer. Those seem reasonably consistent with real life, as are the 12 suicides from emotional pain or the 6 from incurable illness (or what the person was led to believe was incurable illness). None of the suicides were brought on by physical pain, but in seven cases the person committed suicide staged to look like murder in order to implicate someone the victim hated. (Chief Miller met only one case in which a person attempted this, and that was unsuccessful from the start.) It is interesting to note that there were three cases in which a suicide was made to look like murder, but the staging was by a friend who wanted to get revenge on the person judged responsible. There were also cases where a suicide was staged as murder either to get insurance (which would not have paid if the death was suicide) or to allow the person to be buried in consecrated ground. In most of these instances, the detectives keep the secret to themselves and let it pass as murder, as long as no one was arrested for it.

What weapons were used? For faked suicides, guns were the overwhelming choice (11), followed by slashing/stabbing (4), a tie for hanging and poison/overdose (2 each) and last, leaping (1). For actual suicides in the stories, guns were still the preferred weapon (19), followed by poison/overdose (8) and hanging and leaping (6 and 5 respectively). Four others were from suffocation, explosion or drowning. The stories are set in a number of countries and time periods, but most are in England or the United States and all, except the Judge Dee novel, in a time when guns were available. This is understandable in a gun-oriented society, but it may also be easier to arrange faked or disguised suicides with a gun.

The gender differences in the stories favor men actually committing suicide (32) compared to women (18). This seems somewhat discrepant from the sex difference in suicide in the United States (where men outnumber women by a much higher margin).

CONCLUSIONS

Writers of detective fiction do not feel bound by real life scenarios, except perhaps in the choice of weapons. Suicide is much more frequent in real life than in detective stories. The novels chosen for this sample were not 51 detective novels chosen at random, but rather those in which we already knew or were told a suicide (real or feigned) played a part. If we took 51 detective stories at random, murder would far outstrip suicide as a means of death. Of the 51 stories in the *Complete Father Brown Omnibus* by G. K. Chesterton (Dodd, Mead, 1951), only four have suicide involved (or intended), and of those, only two have people who actually commit suicide. We might get a slightly different proportion if we were not dealing with stories involving a Roman Catholic priest, but murder would still predominate.

So, if you are a policeman and you walk into a death scene and it looks like suicide, it probably is. If you are a detective story reader who encounters a death scene in the narrative that looks like suicide, your chances are very good that it is murder, though it may take 200 pages for that to be apparent to you and to the characters in the novel other, of course, than the great detective.

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 Allingham, Margery (1931). *Police at the Funeral*
 Auster, Paul (1987). *City of Glass*
 Beaton, M. C. (2005). *Death of a Bore*
 Bentley E. C. (1913). *Trent's Last Case*
 Blake, Nicholas (1941). *The Corpse in the Snowman*
 Carr, John (1941). *The Case of the Constant Suicides*
 Carr, John (1942). *Death Turns the Tables*
 Chabon, Michael (2007). *The Yiddish Policemen's Union*
 Chesterton, G. K. (1911). "The Hammer of God"
 Chesterton, G. K. (1914). "The Paradise of Thieves"
 Chesterton, G. K. (1911). "The Secret Garden"
 Chesterton, G. K. (1911). "The Wrong Shape"
 Christie, Agatha (1939). *And Then There Were None*
 Christie, Agatha (1949). *Crooked House*
 Christie, Agatha (1975). *Curtain*
 Christie, Agatha (1923). "The Market Basing Mystery"
 Christie, Agatha (1931). *Murder in the Mews*
 Christie, Agatha (1926). *The Murder of Roger Ackroyd*
 Coffin, Peter (1937). *Search for My Great Uncle's Head*
 Cohen, Jeffrey (2007). *Some Like It Hot-Buttered*
 Collins, Max Allen (2008). *Strip for Murder*
 Connelly, Michael (1996). *The Poet*
 Cross, Amanda (1981). *Death in a Tenured Position*
 Derleth, August (1951). "Adventure of the Dog in the Manger"

- Derleth, August (1951). "Adventure of the Proper Comma"
 Doyle, Arthur Conan (1922). "The Problem of Thor Bridge"
 du Maurier, Daphne (1938). *Rebecca*
 Evanovich, Susan (1999). *High Five*
 Ferris, Monica (2003). *Hanging by a Thread*
 Fowler, Earlene (2002). *Steps to the Altar*
 Grimes, Martha (1994). *The Old Contemptibles*
 Hare, Cyril (1982). *Suicide Excepted*
 Hart, Carolyn (1994). *Scandal in Fair Haven*
 James, P. D. (1972). *Unsuitable Job for a Woman*
 MacDonald, Ross (1971). *The Underground Man*
 Picoult, Jodi (1998). *The Pact*
 Post, Melville (1913). "Naboth's Vineyard"
 Post, Melville (1913). "The Wrong Hand"
 Queen, Ellery (1936). *The Door Between*
 Robb, J. D. (1996). *Rapture in Death*
 Rozan, S. J. (2004). *Absent Friends*
 Sayers, Dorothy (1926). *Clouds of Witness*
 Simenon, Georges (1931). *Maigret Stonewalled*
 Sjöwall, Maj and Per Wahloo (1972). *The Locked Room*
 Snow, C. P. (1959). *Death Under Sail*
 Stout, Rex (1975). *A Family Affair*
 Underwood, Michael (1980). *A Clear Case of Suicide*
 Van Dine, S.S. (1933). *The Kennel Murder Case*
 Van Gulick, Robert (1964). *The Red Pavilion*
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Chapter 10

SUICIDE IN THE OPERA

Beverly Vaughn and David Lester

In their quest for dramatic themes to accompany their music, writers of operas have often incorporated suicidal deaths into the plots. Walley and Kalish (1971) examined the operas produced at least twenty times since 1850 at the Metropolitan Opera Association (New York), the Chicago Opera Company and the San Francisco Company. Of the 104 operas that qualified, 28 involved at least one suicide - 27 percent of all the operas and 41 percent of all the deaths.

Walley and Kalish also examined the ten most frequently performed operas at eleven opera houses around the world.¹ Of these 110 operas, 40 percent contained a suicide. Obviously, many of the eleven lists contained duplicates. Of the 39 different operas on the lists, 26 percent involved suicide. The opera houses differed in their preference for operas with suicide, ranging from Copenhagen, which had only one such opera in its top-ten list, to Parma and Budapest each with six such operas.

For the 104 operas in the three American cities in their first sample described above, Walley and Kalish counted 31 characters who committed suicide. The most common methods for suicide were stabbing (11), poisoning (7) and burning (4). Less common were drowning, guillotine, despair, leaping, crushing and suffocation.² No suicide involved firearms (which is a popular method in America). Unlike the real world, in which American men commit suicide at three times the rate of women, 58 percent of the suicides in these operas were women. Suicide seemed also to be more common in high-status people than in low-status people. Attempted suicide (in which the person survives) was rare in opera, but Feggetter (1980) noted that simulated and/or attempted suicide was occasionally present, as in Mozart's *Così fan tutte* and *The Magic Flute* (in which Papageno attempts to hang himself in despair at ever seeing his promised wife).

¹ Teatro Municipal, Rio de Janeiro; Maly Opera House, Leningrad; Royal National Opera House, Copenhagen; Landestheater, Linz, Austria; Metropolitan Opera, New York City; Royal Opera House, Covent Garden, London; Teatro Regio, Parma; Hungarian State Opera House, Budapest; Teatro La Scale, Milan; Teatro Colon, Buenos Aires; Deutsche Staatsoper, Berlin.

² Not all of the suicides discussed by Walley and Kalish are considered to be suicides by the present authors.

The most common reasons for suicide were the desire to be reunited with a loved one who had died (55%), lost love (32%), and feelings of guilt (13%). Walley and Kalish saw Madame Butterfly's suicide in Puccini's opera as motivated by shame and grief when Pinkerton returns with his American wife to claim his son by Madame Butterfly,³ while Tosca's in Puccini's opera was motivated by fear and sorrow after killing the chief of police and finding her lover dead.

Let us look a bit more closely at the dramatic plots of women and suicide in opera. Utilizing a limited sample of female protagonists who commit suicide in four of the top twenty operas performed in the United States between 2006-2008 (www.operaamerica.org/Content/Audiences/Programs/Cornerstones), with the addition of at one Poulenc opera, as a basis, one finds that such suicides seem to occur in at least three situations.

The first situation involves those women who attempt suicide or who actually commit suicide because of unrequited love and/or as the result of unforeseen rejection, betrayal and/or total abandonment. Two well-beloved 19th and 20th century examples include Madame Butterfly from Puccini's *Madame Butterfly* (1904) and the Voice (the opera's only role) from Poulenc's *La Voix Humaine* (1959).

Elizabeth Bachman in about writing the Puccini opera and Butterfly's ultimate suicide states:

Madame Butterfly, the story of a Japanese geisha who is loved and left by an American serviceman, is an interpretative conundrum. Is it the story of a helpless woman, destroyed by a thoughtless man, who nobly sacrifices herself so that her son can have a better life? Is it the story of constancy betrayed? Or does the opera have different layers of meaning, as specific as the differences between Japanese and American culture and as universal as the nature of true love...

And the real story of Madama Butterfly is not so black and white. The tragedy in Butterfly is not that Pinkerton is evil. It's more modern than that: Madama Butterfly is a tragedy of cross-cultural miscommunication....Yet I began to sympathize [with Butterfly's suicide] when I imagined three years of clinging to a fantasy (that the dashing American naval officer, Pinkerton for whom she had renounced her Japanese traditions and to whose son she had given birth, would return for her) and then being forced to face the fact that my faith rested on a lie, a lie I manufactured myself. Now that would be a blow to tip the balance.

The real tragedy of Madama Butterfly is of two people who loved deeply and sincerely, but who each loved an ideal, not a person. Neither of them really sees the truth of the other. Had they been older and wiser, they would have loved less and they might have avoided this disaster. (www.operaamerica.org/Content/Audiences/Program/Cornerstone/butterfly/maddirnotes.html)

A brief synopsis of the Poulenc's opera, *La Voix Humaine*, exposes another libretto in which a woman also turns to suicide as the emotional brutality and insensitivity of unrequited love, combined with the banality of daily existence, drains her psychological reserves during the painful, abrupt ending of a relationship built on fantasy. In this opera we find the following dramatic development:

A young woman has been interrupted during her call from a lover of five years. He has abandoned her and is to marry another woman the following day. This is the last time they

³ The knife with which she stabs herself has the inscription, "Death with honor is better than life without honor."

will speak to each other. During the conversation, we learn that the woman has attempted suicide. The phone service in Paris being notoriously poor during that era, they are interrupted several times during the agonizing conversation. (en.wikipedia.org/wiki/La_voix_humaine)

The second suicidal situation revolves around women who commit suicide because of the untimely death of their lover or loved one or because of tragic external pressures which appear to irrevocably undermine the future well-being and intimate growth of important romantic or burgeoning relationships. Two prime examples include Aida from Verdi's *Aida* (1871) and Tosca from Puccini's *Tosca* (1900)

Aida, which premiered in 1871, was commissioned by the Khedive of Egypt to celebrate the opening of the Suez Canal. Its story was based upon a draft offered to Verdi by August Mariette, a noted archeologist and Egyptologist and member of the Khedive's personal staff. (The actual libretto was written by Antonio Ghislonzoni.) Although Mariette's story seems to have been based on scenarios from the country's history, there is speculation that he might have been influenced by Metastasio's *Nittiti* (1956) which was, as the staff of Minnesota Opera writes:

Set in ancient Egypt ... and also featuring a love with similarly names characters...the text had been set by 32 composers including Giovanni Paisiello and Stephano Pavesi, since its debut in 1756. Then there is another view that his brother, Eduoard, came up with the tale while visiting August in 1866, then called *La fiancée du nil*. (www.operaamerica.org/Content/Audiences/Programs/Cornerstone/Aida/Aidaafter.htm.)

Regardless of its literary and/or historical origins, the work's dramatic apex is reached in the eerie tranquility of Act IV where, in its closing scene, Radames, the great Egyptian warrior who unwittingly betrayed military information to Aida, is caught in the act of treason and sentenced to be buried alive. He awaits his death in a sealed tomb. However, Radames senses that he is not alone for Aida has decided to share her doomed lover's fate. Her decision to die with Radames - to commit suicide by allowing herself to be entombed alive - lacks the despair and hopeless resignation of Butterfly's self-inflicted stab wound. Nor does it have the absurdity of telephone-service distractions as the Voice struggles for emotional balance. Instead, Aida's suicide has a nobility of purpose and inner calm. She has voluntarily and thoughtfully chosen this fate. Rather than dying because of Radames' cruelty to her, she dies because of Radames' love for her - there can be no life without him.

Tosca, based on a play by Victorien Sardou, also ends in a suicide precipitated and manipulated in many ways by third party jealousy (Scarpia in *Tosca* and Princess Amneris in *Aida*), unforeseen political treachery, and duplicity. Although *Aida* takes place in Egypt and *Tosca* takes place in Italy, both plots end with the female protagonist choosing suicide rather than remaining alive after their lover's death.

While Aida, under pressure from her father, caused Radames to betray his army's route to the battle scene, Tosca's circumstances were vastly different. In Act II, while waiting for a mock firing squad to be arranged for Cavaradossi (Tosca's lover who was inadvertently linked to a rebellion), she decided to murder the evil Scarpia rather than pay the price for Cavaradossi's life by yielding sexually to him. However, Scarpia's malicious revenge reached its icy tentacles into Tosca's world even after his death. For, unbeknownst to Tosca until it is too late, the bullets in the firing squad were real and Cavaradossi died. Cavaradossi's death,

along with the discovery of Scarpia's body, were more than Tosca can endure. To the horror of the approaching soldiers who have come to arrest, she jumped from the castle to her death.⁴

The third situation, while not suicide in its purest form, still offers compelling arguments for its inclusion. This area represents the female operatic character who allows herself to die because of lack of self-esteem, mental or physical abuse, manipulation, familial obligations, unrelenting political and social pressure, desperation, despondency, hopelessness, despair and even arrogance. Gilda from Verdi's *Rigoletto* (1851) is a good example of this protagonist.

In Act III of *Rigoletto*, Gilda overhears Madalena beg her brother, Sparafucile, not to murder Gilda's unfaithful lover, the Duke of Mantua, although this is the wish of Gilda's father, Rigoletto, the profoundly disillusioned court jester to the Duke. She allows herself to be murdered by Sparafucile who has promised his sister that he will kill that first person through the inn and substitute that body as proof to Rigoletto that the Duke has been killed. Gilda decides to be that person.

Although this opera is now one of the standards in operatic literature, Wendy Neikirk wrote in an article entitled, *The Politics and Art of Giuseppe Verdi's Rigoletto* (2005), that the birth and creative development of this opera was not easy:

Verdi's *Rigoletto* was inspired by Victor Hugo's play, *Le roi s'amuse*, a particularly political dissident and dramatic piece...Like Hugo, Verdi also faced censorship. The censors were displeased with *Rigoletto* on many accounts. The story depicted regicide, rape, adultery, disrespect for religion and criticism of royalty, all considered to be shocking subject matters...

Despite its challenging beginning, *Rigoletto* became a great success... Its longstanding popularity is due in large part to its powerful melodies and dramatic orchestration. At its heart, *Rigoletto* offers a moving and complex story, juxtaposing good and evil; purity and promiscuity; pride and humility; and complacency and action. (www.operaamerica.org/Contact/Audiences/Programs/Cornerstones/Rig/rignotes.htm)

Gilda's willingness to allow herself to be the one murdered, a type of suicidal resignation, unquestionably represents a pivotal emotional climax in the opera's dramatic development. Her suicidal sacrifice stands out in stark contrast not only to the Duke's callous, fatuous, self-centered oppression but it also stands out to her father's blood thirst and unrequited lust for revenge on the Duke. This suicidal resignation to be murdered in lieu of the Duke or his surrogate allows Gilda the opportunity to exert a type of manipulative control over the Duke's fate while still placating her father's longing for conclusive revenge.

Feggetter (1980) distinguished three distinct views of suicide in opera. In the 17th and 18th Centuries, suicide was presented as a rational, heroic act. Next, after Goethe's *The Sorrows of Young Werther* appeared, suicide was portrayed as a romantic act. Finally, in the late 19th Century, for example, in the works of Berg and Britten, suicide was cast more

⁴ By the way, there are several amusing anecdotes about memorable Tosca performances. One of the most famous and oft-repeated is the following:

This supposedly occurred at the Lyric Opera of Chicago and involved a British soprano. As Tosca, she was supposed to leap to her death from the walls of Castel Sant'Angelo. Usually, the actress lands on a mattress. But the stage workers had thoughtfully improved her safety by replacing the mattress with a trampoline: the result was that Tosca appeared two or three times from behind the wall...Eva Turner has admitted to being that Tosca in a TV special hosted by Robert Merrill in which he interviewed some of the greatest Toscas of the century, including Eva Turner, Grace Bumbry, Renata Tebaldi, Zinka Milanov, Ljuba Welitsch and Birgit Nilsson, among others. (en.wikipedia.org/wiki/Tosca)

realistically. In this latter group of suicides, suicide sometimes occurred in isolation but also after the protagonist had committed murder.

Feggetter noted that the first view (suicide as a heroic act) was presented primarily in operas about the gods and goddesses of Greece and Rome and historical figures from that time. For example, in Monteverdi's *L'Incoronazione di Poppea* (1642), Seneca commits suicide after the Emperor Nero orders him to do so.⁵ Audiences would have known that suicide was supposedly common in ancient Greece and Rome, but they would also know that suicide was considered to be a sin in their own eras. The setting of suicide in classical times and involving high status people would have made it an acceptable theme.

Feggetter saw Wagner's *Tristan and Isolde* as illustrating romantic suicide. Tristan tears the bandages from his wounds to ensure his death when Isolde arrives because their love is eternal and conceived of only beyond the grave.

Realistic suicide is illustrated by Verdi's *Otello* in which Othello murders his wife, Desdemona, believing her to be unfaithful, but then kills himself in remorse. In Berg's *Wozzeck*, suicide occurs in a common man who, in addition, was depressed and probably psychotic. Feggetter raised the interesting question of whether such a progression in the type of suicide portrayed in opera would be found in other art forms such as drama or novels. For example, Cutter (1972) looked at the progression of suicide themes in artistic works (mainly paintings). From Greek and Roman times through the Renaissance, suicide was depicted as an heroic act, as evidenced by the painting of Lucretia committing suicide after being raped. In the 18th Century, suicide was portrayed as a stigmatized action, as in the works of William Hogarth and Thomas Rowlandson. During the Industrial Revolution, suicide was portrayed as an irrational act as in Daumier's prints. In the latter half of the 19th Century, suicide was viewed as caused by depression as in Manet's *The Suicide* and Toulouse-Lautrec's *La Pendu*, as well as in the German expressionists. Since the 1930s, suicide has been portrayed from a morally neutral position, as in Franklin Watkins's *Suicide in Costume*. Finally, suicide has been seen as a cry for help, as in the works of Andy Warhol, Roy Liechtenstein and Robert Mallary.

Stack (2002) noted that classical operas were written in cultural eras that stressed the concept of honor. If one's honor was threatened or insulted, an emotional and behavioral response was expected, such as a duel (e.g., *Eugene Onegin*), a contract murder (e.g., *A Masked Ball*), or suicide (e.g., *Madam Butterfly*).

Stack used data from a survey of the American public to assess the acceptability of suicide as a response to dishonor and musical preference for operatic music. Those who liked operatic music were more accepting of suicide as a response to dishonor, even after controlling for marital status, having children, age, sex, ethnicity, education, church attendance and political conservatism. It may be that the writers of operas have a fine awareness of what appeals to their audience or, alternatively, that opera fans have their attitudes toward suicide changed as a result of attending and listening to operas (Hofsess, 1992). Stack noted that future research should explore whether opera fans have an increased risk of suicidal behavior in addition to finding suicide more acceptable under some circumstances.

⁵ Feggetter considered this suicide to be altruistic in Durkheim's (1897) typology.

SOME STATISTICAL ANALYSES

The Earl of Harewood (1976) provided summaries of 309 operas. Fifty-seven contain suicides. The percentage of operas with suicides varied greatly from country to country. For Russia, 28% of the operas summarized contained suicides and for Italy 27%; in contrast only 13% of English operas and 14% of German operas contained suicides.

The majority of the operas listed by the Earl of Harewood were from Italy ($n=85$) and Germany ($n=74$), and the difference in the proportion of suicides in the operas from these two countries was statistically significant ($X^2 = 4.41$, $df = 1$, $p < .05$), with a greater proportion of Italian operas containing suicides than operas from Germany.

Sixty-six suicides were identified (excluding the chorus in *Les Troyens* by Berlioz and the crowd in *Moses and Aaron* by Schoenberg. Of these suicides, 44% were male and 56% female. Sixty-two percent of the suicides were motivated by “love” problems. The most common methods for suicide were cutting/stabbing 16, poison 14, drowning 11, and fire 10. There were no associations between sex, the year of the opera and whether the motive was “love” or not.

DISCUSSION

Looking at representative examples of actual suicides in the operatic genre, there are several compelling aspects. First of all, women commit the majority of the suicides. While there are an abundance of examples of warfare, battle, fights, duels, executions, involuntary manslaughters and murders in which men figure prominently, suicide is less often a cause of death for men. (Romeo and later characters based on him, of course, are examples of those rare exceptions.)

Female operatic suicides seem to appear in at least three situations. The first situation involves those women who commit suicide because of unrequited love and/or intense rejection by a present and/or former lover. Some examples include Dido from Purcell’s *Dido and Aeneas*, Norma from Bellini’s *Norma*, Gilda from Verdi’s *Rigoletto*, Butterfly from Puccini’s *Madama Butterfly*, and La Voix from Poulenc’s *La Voix Humaine*.

Second, there are the women who commit suicide because of a lover’s seemingly hopeless situation: he is dying or has died, or their lives together in the present world seem impossible. Examples of this type of female suicide include Aida from Verdi’s *Aida* and Juliet from Berlioz’s *Romeo et Juliette*.

There is a third situation, which, while not strictly suicide, is, however, compelling. This is the female operatic character who allows herself to die because of lack of self-esteem, manipulation, feeling trapped by familial obligations, political and social pressure, panic, desperation, despondency, hopelessness, despair and even arrogance. These examples include Melisande from Debussy’s *Pelleas et Melisande*, Desdemona from Verdi’s *Otello*; Carmen from Bizet’s *Carmen*, and even Clara from Gerschwin’s *Porgy and Bess*.

One final interesting note about female operatic suicides is that almost all the suicides are committed by sopranos! This really isn’t too surprising as the suicide scene is usually one of the, if not *the*, dramatic highlight of the opera during which the leading female protagonist is highlighted. In the vast majority of cases, this leading female protagonist is the soprano.

There are many possibilities for future research. Literary scholars might analyze operas in which individuals commit suicide to determine plot sequence, character development, and why the composer chose suicide as a type of conflict resolution in the plot. What was the dramatic force of the plot that would require a suicide?

Not only may suicide be important in terms of plot development, but the musical ramifications and implications within the score itself could be examined. For example, are certain musical themes used throughout the opera, act or scene which either consciously or subconsciously prepare the listener for the impending suicide? Is there a marked modality change (e.g., does the composer suddenly switch from a major to a minor key)? Are there chordal distinctions (e.g., do we find a plethora of diminished or otherwise altered chords around or during the actual suicide)? Do we find chromaticism? Are there instrumental changes or is a particular instrument favored in this scenario (e.g., does one hear the oboe or solo violin in these circumstances more often than, say, a saxophone or tuba)? Are the orchestrations dense or sparse? Are recitatives always present? What is the favorite key in suicide arias (e.g., F minor or E-flat major).

Table 1. Suicide in Operas

Composer	Opera	Date	Country	Suicide
Monteverdi	Il Ritorno d'Ulisse in patria	1641	Italy	Iro
Monteverdi	L'incoronazione di Poppea	1642	Italy	Seneca
Purcell	Dido and Aeneas	1689	England	Dido
Mozart	Idomeneo	1781	Germany	Electra
Wagner	Rienzi	1842	Germany	Adriano
Wagner	Der Fliegende Hollander	1843	Germany	Senta
Wagner	Gotterdammerung	1876	Germany	Brunnhilde
Donizetti	Lucrezia Borgia	1833	Italy	Lucrezia Borgia
Donizetti	Lucia di Lammermoor	1835	Italy	Edgar
Bellini	La straniera	1829	Italy	Arturo
Bellini	Norma	1831	Italy	Norma/Pollione
Verdi	Nabucco	1842	Italy	Abigaille
Verdi	Ernani	1844	Italy	Ernani
Verdi	Luisa Miller	1849	Italy	Luisa/Rudolfo
Verdi	Il trovatore	1853	Italy	Leonora
Verdi	Aida	1871	Italy	Aida
Verdi	Otello	1887	Italy	Otello
Ponchielli	La gioconda	1876	Italy	La gioconda
Catalani	La Wally	1892	Italy	Wally
Mascagni	Iris	1898	Italy	Iris
Giordano	Andrea Chenier	1896	Italy	Madeleine
Giordano	Fedora	1898	Italy	Fedora

Table 1. Continued

Composer	Opera	Date	Country	Suicide
Auber	La muette de Portici	1828	France	Fenella
Meyerbeer	Le prophete	1849	Germany (France)	Bertha/John/Fides
Meyerbeer	L'Africaine	1865	Germany (France)	Selika/Nelusko
Berlioz	Les Troyens	1863	France	Cassandra(+chorus)/Dido
Gounod	Romeo et Juliette	1867	France	Romeo/Juliet
Lalo	Le roi d'ys	1888	France	Margared
Saint-Saens	Samson et Dalila	1877	France	Samson
Delibes	Lakme	1883	France	Lakme
Massenet	Werther	1892	France	Werther
Moussorgsky	Khovanshchina	1886	Russia	Andrew/Martha/chorus
Tchaikovsky	The Queen of Spades	1890	Russia	Herman/Lisa
Rimsky-Korsakov	Snegurochka	1882	Russia	Misgir
Smetana	Dalibor	1868	Czech	Dalibor
Dvorak	Rusalka	1901	Czech	The Prince
Strauss	Salome	1905	Germany	Narraboth
Schoenberg	Moses and Aaron	1954	Germany	some suicides
Berg	Wozzeck	1925	Germany	Wozzeck
Berg	Lulu	1937	Germany	The painter
Zimmermann	The soldiers	1965	Germany	Stolzius
Puccini	Tosca	1900	Italy	Tosca/Angelotti
Puccini	Madame Butterfly	1904	Italy	Cio-Cio-San
Puccini	Suor Angelica	1918	Italy	Suor Angelica
Puccini	Turandot	1926	Italy	Liu
Montemezzi	The love of three Kings	1913	Italy	Manfredo
Wolf-Ferrari	The jewels of the Madonna	1911	Italy	Gennaro/Maliella
Roussel	Padmavati	1923	France	Padmavati
Stravinski	Oedipus Rex	1927	Russia	Jocasta
Delius	A village Romeo and Juliet	1907	England	Sali & Vreli
Shostakovich	Katerina Ismailova	1934	Russia	Katerina
Walton	Troilus and Cressida	1954	England	Cressids
Britten	Peter Grimes	1945	England	Peter Grimes
Britten	The rape of Lucretia	1946	England	Lucretia
Janacek	Katya Kabanova	1921	Czech	Katya
Janacek	The Makropoulos affair	1926	Czech	Janek
Menotti	The consul	1950	USA	Magda Sorel

Statistical analysis might focus on how long it took for the person to die and where the suicides are located in the opera (for example, do they usually take place at the end of an act)?

Are suicide arias longer than nonsuicidal arias? Is this first and foremost a plot consideration or a musical consideration? Is there a particular form which dominates the suicide aria (e.g., ABA, rondo, theme and variation, or strophic)? What type of operatic singer most often commits suicide? Is it always the soprano? Do the bass or baritone ever commit suicide? What about the tenor? Are there mezzo-soprano or contralto suicides as well? Is the soprano a lyric or a coloratura?

There are many possibilities for future research on suicide in opera.

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**PART IV: UNDERSTANDING SUICIDE
THROUGH THE ARTS**

Chapter 11

SUICIDE IN LITERATURE

David Lester

There is a long history of using literature to illustrate and sometimes test psychological theories (Lester, 1987). For example, theories of suicide have been tested using the content of suicide notes (Leenaars, 1988). Occasionally, suicides (for example, Sylvia Plath) leave a book or poem describing their behavior, and this kind of material may be of use in exploring the unconscious psychodynamics of the suicidal act. In other fields of psychology, folk tales of primitive societies have been studied, for example, for evidence of the societal need for achievement or power (McClelland, Davis, Wanner & Kalin, 1966), and literary stimuli have been used in studies of people's preference for differing degrees of complexity (Kammann, 1966).

Before focusing on the use of literature in the study of suicide, let us explore a few of these general areas of interaction between psychology and literature in a little more detail.

PSYCHOLOGY AND LITERATURE

Understanding Human Behavior in Historical Times

The psychological study of history has created a new discipline, called psychohistory. Psychohistory seeks to enlarge our understanding of historical events and persons by applying psychological theory and knowledge (Hoffer, 1979). Crosby (1979) defined the field as "the form of history which makes explicit use of the concepts, principles, and theories of psychology in order to enhance our understanding of particular people and events in the past" (p. 6).

This joining of psychology and history had long been advocated (Barnes, 1925; Smith, 1913) but developed in depth only in the 1970s. The major psychological theory applied to history has been psychoanalysis (for example, Erikson's [1962] study of Martin Luther), but other theories, such as cognitive theory and trait theory, have also been utilized. Although psychohistorians can use a variety of materials in order to make inferences about the

psychological state of historical individuals and cultures, occasionally literature itself has been used. For example, Hoffer (1974) analyzed school textbooks in the first half of the Nineteenth Century to show how threats to national unity appeared to influence school textbook writers to minimize divisive and unruly episodes in earlier American history, a decision consistent with Festinger's (1957) theory of cognitive dissonance.

McClelland (1958) illustrated the possibility of incorporating quantitative methods into psychohistory. For example, McClelland scored a variety of Greek writings for the need to achieve and found that this need declined steadily in Greece from 700 BC to 250 BC, which fits with the historical events of that period. Hull, Allen and Hoffer (1978) used the manuscripts left by loyalists and revolutionaries in Revolutionary New York to identify differences in a variety of traits, including the needs for order, submissiveness, and conformity, and they related this to the writers' political affiliation.

History and psychology can also interact through literature in attempts to categorize historical events and epochs in psychological terms (rather than in political or economic terms). For example, Manuel (1967) took utopian novels from the last five hundred years and argued that they fall into three clear psychological periods: the utopias of calm felicity (pre-Nineteenth Century), the open-ended utopias of the Nineteenth Century, and the contemporary utopias based on either on the hypothesis of a growing spiritualization of man (the humanistic psychology influence) or on a fantasy of greater sensate gratification (the psychoanalytic influence).

Psychological Analyses of Literature

Psychoanalytic theory (and other psychodynamic theories) have been applied in order to understand better the unconscious motivations of the fictional characters. For example, the motives of suicides in Greek tragedy have been analyzed by Faber (1970).

A frequent task in the psychological study of literature has been the tracing of a significance of a symbol or an idea through its many manifestations in literature, perhaps identifying in the process a Jungian archetype. For example, McClelland (1963) started with the idea that not all people fear death. Indeed, some people, often women, actually seem to look forward to death, with a sense of excitement as well as fear, as if death could be an unconscious equivalent for the final sexual union with the ideal mate (Bromberg & Schilder, 1933, 1936). McClelland's student, Greenberger (1965), found that dying women were more likely to give stories involving illicit sexuality to cards from the Thematic Apperception Test than women who were not dying. Women students in his classes rated "a gay seducer" as more appropriate as a description of death than did the men.¹ Stimulated by these findings, McClelland traced the development of the Harlequin theme in literature. In the typical Harlequin story, Harlequin pursues Columbine, his love, despite obstacles placed in his way by her father, guardian or suitor, Pantaloon. In the dark scenes, Harlequin is definitely connected to underworld figures, and often Columbine dies at the end of the story.

The Harlequin figure seems to derive from an old French character called Herlequin, who is the devil (Driesen, 1904). In an Eleventh Century manuscript by Ordericus Vitalis, there is

¹ It should be noted that subsequent research has not always confirmed these empirical findings (Lester 1966, Lester and Schumacher 1969).

a Herlequin family in the underworld which sometimes appears on earth. In a play written in 1262 by Adan de le Hale, Herlequin is a single character and, in time, variants of the Harlequin story were acted in pantomime and danced in ballet, from the Arlecchino tradition in Italy to the bullfight tradition in Spain, all the way to modern equivalents, such as Agatha Christie's stories of love and death in *The Mysterious Mr. Quinn* (Christie, 1930) and the 1961 Hollywood film *The Last Sunset*.

Literary styles have also been studied. For example, Skinner (1941) attempted to estimate whether the amount of alliteration in Shakespeare's sonnets exceeded chance expectations, and Rokeach, Homant and Penner (1970) analyzed the Federalist Papers to ascertain the authorship of the disputed papers.

Psychological Studies of the Author and the Reader

Psychoanalysis (and other psychodynamic theories) have often been applied to fictional works in order to better understand the author. The first example of the use of psychoanalysis to this end was by Freud (Niederland, 1960), who applied his theory to the novel *Die Richterin* by the Swiss writer, Conrad Ferdinand Meyer (1825-1898). Freud sent an essay to his friend, Wilhelm Fliess, on June 20, 1898, in which he suggested that the novel was an unconscious defense against the writer's memory of an affair with his sister (Freud, 1954). In the novel, a wife murders her husband and rules in his place until her stepson returns and unmasks his stepmother as the murderer. The stepmother thereupon commits suicide, but, in the course of the novel, the avenging stepson has an affair with his half-sister. Niederland notes that Meyer's father died when Meyer was fifteen. His early efforts to write were thwarted by his mother but encouraged by his sister. After his mother's suicide, Meyer lived with his sister in a close and personal relationship until he married in his late forties. She acted as his housekeeper, companion, secretary and advisor.

There have been many studies of the psychological state of individual authors. Bellak (1963), for example, treated the short stories of Somerset Maugham as if they were stories written to stimuli such as those in the Thematic Apperception Test, scoring the stories to measure the psychological needs of Maugham. For example, the *descriptive theme* in "Footprints in the Jungle" is that Bronson brings Cartwright home because he is temporarily in hard circumstances. Bronson's wife has an affair with Cartwright and persuades Cartwright to murder her husband. Though the police discover the crime, they do not have enough evidence to try the couple, who then live happily ever after. Bellak saw the *interpretive theme* as that women can come between men and cause trouble and that sexual passion can motivate murder even in decent people, who may not even suffer remorse. At the *diagnostic level*, Bellak suggested that Somerset Maugham perceived, perhaps unconsciously, women as sources of trouble for men, separating them and destroying them. There is also an Oedipal theme here in which a man has to kill another man in order to obtain a mate; and, finally, passion can overpower the superego, leading to lack of control over aggression.

In general, after an analysis of ten of Maugham's ninety one short stories, Bellak suggested that Maugham had a continuous struggle with his sexual and aggressive impulses. To control them, Maugham tried for emotional isolation and detachment, playing the role of an onlooker toward others. His resulting self-image is that of a mildly ineffective person pushed around by external forces. Maugham saw women as domineering and demanding,

leading men to feel inadequate, a view which is perhaps a projection of his own strong unconscious aggressive drives. Maugham suffered from a conflict between activity and passivity, conformity and nonconformity, and male and female identification, leading to embarrassment and shame, a feeling of inadequacy and a fear of failure. Bellak noted that his conclusions from his thematic analysis of Maugham's short stories was consistent with biographies of Maugham's life.²

Research on the impact of literature on the reader is illustrated by the studies stimulated by the Commission on Obscenity and Pornography (Anon, 1979) which produced a number of studies of the effects of pornography on people.

Other Points of Contact

Goodman (1963) has noted two other areas in which psychology and literature relate. First, psychologizing can be seen itself as a literary genre. A psychoanalytic case history is, for Goodman, a real novel or adventure story. A second relationship that Goodman saw between psychology and literature is in the way that writers have been affected by psychological thought. Goodman noted, for example, how contemporary writing takes into account such psychodynamic ideas as the continuity of dream life, daydreams, waking life, slips, fantasy, and wishful thinking.

A Dissenting Voice

Not everyone approves of this interaction between psychology and literature. For example, Jaffe (1967) argued that a work of literature is contrived, serving only the writer's intent. The literary structure of the play forces the character into particular acts and mannerisms. Thus we cannot learn about real people from a study of literary characters. We can learn only about unreal people. For example, "responses in literature are not only responses *per se*, they are responses to stimuli which have been inserted, so to speak, *in order to* elicit them. It is precisely this which is not true of life" (p. 7). Jaffe pointed out that the situation which causes neurosis in a client was not designed in order to produce the neurosis.

In Franz Kafka's *The Trial*, K refuses to kill himself. This, noted Jaffe, is not a sign of strength or of weakness. K cannot kill himself because of reasons which have nothing to do with some person "K" who does not exist. K cannot kill himself because of the nature of suicide itself in the text and the way it functions in the text. In *The Trial*, suicide by an individual implies that the person has chosen to kill himself after considering, and rejecting, the alternative of continuing to live and because his experience in the course of the text indicates to him that death is the preferred alternative. The act of suicide is a symbol of redemption, postulates values to be redeemed and requires an agent who can assimilate experience and understand these values. K cannot assimilate experience because, in the text, he is the experience itself. He cannot be an agent because of his function in the novel. If K committed suicide, it would falsify the novel. The novel would be another novel, and *The*

² Of course, Bellak's knowledge of Maugham's life may have affected the conclusions he drew from his thematic analysis of Maugham's short stories!

Trial would not exist. Suicide is not a choice which is open to K or even to Kafka, the novelist. Thus, we cannot learn about the reasons people may have for not committing suicide from *The Trial*.

Furthermore, we must beware of rediscovering "facts" from a study of literary works that incorporated those facts. For example, we would be fools indeed to use Huxley's novels to provide support for Sheldon's theory of the relationship of physique to temperament since Huxley was well aware of Sheldon's theory and depicted his characters so as to be consistent with the theory.

However, perhaps we can demonstrate in this essay that, with care and forewarned, the psychologist can find a rich source of materials for the study of suicide in the realm of literature.

STUDYING SUICIDE THROUGH LITERATURE

Understanding Suicide

Faber (1970) has provided several examples of how an examination of suicide in literary characters can throw light on our understanding of suicide. In doing this, Faber explicitly states that he views literary suicides as case studies (though he places the words in quotes) which may serve as archetypes of suicidal behavior and which may provide insights into suicidal behavior.³ Many of the suicides in the plays of Euripides are altruistic suicides, and altruistic suicide is rare in modern times. Few case studies appear in print, and many suicidologists have suggested removing altruistic and fatalistic suicide from Durkheim's (1897) theory since these types of suicide are so rare in modern society (Johnson 1965). Faber's analysis of the plays of Euripides throws light on altruistic suicide.

For example, the suicide of Alcestis, Queen of Thessaly, illustrates some of the possible unconscious psychodynamics of voluntary altruistic suicide. Apollo learns that Alcestis's husband, Admetus, is to die prematurely and makes a deal with the Fates to spare his life. The Fates demand another death in Admetus's place, and only his wife, Alcestis, volunteers to die in his place. The central theme in the play appears not to be that Alcestis has offered to die in place of her husband, but that her husband has accepted her offer! After Alcestis realizes that her husband is going to accept her offer, she is filled with resentment toward him. She acts so as to induce guilt in him in order to punish him for accepting her offer. However, her aggression is expressed in part consciously and in part unconsciously.

On the day of her death, Alcestis does not emphasize the voluntary nature of her death. She speaks of herself as one who is about to be destroyed, implying that Admetus should have protected her from this destruction. She hints of betrayal and abandonment, focusing for example on her soon-to-be-motherless children. She expresses the hope that her daughter will marry a noble husband, implying that her own husband is not so noble. In Admetus's presence, Alcestis breaks down and weeps, whereas with others she is more controlled. As soon as Admetus begins to experience the guilt and to suffer, Alcestis recovers her composure

³ Faber states that he is not interested in how the suicides further the literary aims or "esthetic contraptions" of the authors, their esthetic implications or how they might throw light on the attitudes toward suicide of the society in which the play was written.

rapidly. She then extracts a promise from Admetus that he will not remarry so that he will be less likely to forget Alcestis and her sacrifice.

Faber notes that Admetus is very dependent upon his wife, and it is this dependence that leads him in part to ask for and accept her sacrifice. However, his dependency on Alcestis makes her loss unbearable. He ends up begging her not to abandon him. We have, therefore, a relationship between a dependent person with few inner resources and a self-sacrificing person who resents being involved with a man who needs her in an infantile way, as an object. Admetus uses Alcestis's sacrifice to stop living rather than anticipating the construction of a new life without her.

So, a clinical hypothesis generated by Faber's analysis is that voluntary altruistic suicides stress that they are victims; in contrast, obligatory altruistic suicides tend to protect their egos by transforming the will of others into their own will, that is, they see themselves as martyrs. I doubt that this hypothesis could have been formulated using cases of suicidal behavior found among the clinical material in the files of psychiatric hospitals or psychotherapists' offices.

Understanding a Culture

Suicides in literature have also been used to study a culture. Lester (1972) examined the suicides which occurred in the plays of the Norwegian Henrik Ibsen (1828-1906) to see if they conformed to the patterns described by Hendin (1964) for suicides in Norway, Sweden or Denmark. Hendin used his clinical judgment to argue that suicide in Sweden was usually the result of failure to achieve a high level of performance, suicide in Denmark was the result of the loss of significant others, and suicide in Norway was the result either of loss of a significant other upon whom the suicide was dependent or of guilt over transgressions.

Apart from a brief mention in *Cataline* of the suicide of a woman after rape, there are seven suicidal deaths in Ibsen's plays, as well as five victim-precipitated homicides and two equivocal deaths. In general, Lester found that the suicides had suffered from dependency loss whereas the victim-precipitated murders were experiencing guilt over transgressions. The suicides also appeared to be motivated by the desire to preserve or restore an ideal self-image. For example, in *The Wild Duck*, Hedvig is very attached to her parents, especially her father. Because of her poor eyesight, she does not go to school and has no friends her own age. Hedvig's suicide occurs after her father realizes that she is not his daughter, considers leaving home, and verbally rejects her. Hedvig shoots herself shortly after her father tells her to go away and not to come near him. Her suicide is clearly provoked by the rejection from her father. It would seem to be a dependency-loss suicide, which fits Hendin's description of Norwegian suicides.

Understanding a Suicidal Writer

There are several suicidal writers whose fiction appears to be somewhat autobiographical and, therefore, provides us with some insights into their unconscious psychodynamics which increases our understanding of them, authors such as Ernest Hemingway and Cesare Pavese. However, Sylvia Plath (1981, pp. 183-184) wrote a single poem (*Daddy*) in the months prior

to her suicide which provides a startling insight into the unconscious psychodynamics of her suicide.

In *Daddy*, Plath casts herself as a Jew in a concentration camp versus her father as a Panzer man and as a devil who bit her heart in two. She says that she has always been scared of him, and she calls him a bastard. Yet she says that her suicide attempt at age twenty was an attempt to be reunited with him. She then made of model of her father and married him, but she calls this person a vampire who drank her blood for seven years. Indeed, her marriage to the British poet, Ted Hughes, lasted about seven years. At the end of her poem, she tells her father that he can lie back now, perhaps because, as she says a few lines earlier, that she is finally through.

The Oedipal theme in the poem is clear. The motivation for her first suicide attempt was to be reunited with the father who died when she was eight (though the poem says ten); and, in case he is jealous of her marriage to Ted Hughes (why else is Daddy sitting up in his grave), she is now finally through and, presumably, going to be reunited with Daddy for sure this time (and so he can lie back down to await her).

In addition, there are other elements in the poem. The ambivalence toward her father is evident throughout the poem, but most exquisitely expressed in the final line where she writes, "Daddy, daddy, you bastard...", a juxtaposition of affection (Daddy) and anger (you bastard). Plath also says that, "If I've killed one man, I've killed two." Who are these two? Daddy and her husband? Plath's father died of natural causes when she was eight, but perhaps Sylvia had wished his death when she was angry at him and believes, magically, that her death wish for him contributed to his death, a common belief in children. Or perhaps she feels guilty over other of her actions toward her father before he died? But then, how did she kill her husband? Perhaps psychologically as her stature as a poet grew to equal, and perhaps surpass, his?

There is an interesting feature to this poem in that Plath uses the word "black" six times, a frequency much higher than in her first book of poems (Lester, 1989). According to Piotrowski's (1974) method for interpreting the Rorschach ink-blot test, the use of dark shading predicts a tendency to act-out, rather than quieten down, when anxious or under stress.⁴

DISCUSSION

This essay has attempted to provide an overview of the ways in which psychology and literature can enrich each other's field. For pursuing the understanding of suicide, examples were given of studying suicides in literature in order to generate and confirm clinical hypotheses and of using the writings of suicidal authors to gain a deeper understanding of their motives for self-destruction. Although there are those who reject such uses for literature, a good test of these strategies is whether our understanding of suicide is increased, and I hope that the examples provided in this essay have convinced the reader of their usefulness.

⁴ Lester (1991) noted a similar tendency in the poems on Anne Sexton, who also committed suicide.

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Chapter 12

THE PSYCHODYNAMICS OF SUICIDE IN SOPHOCLES'S PLAYS¹

David Lester

Can we learn about suicidal behavior by studying the depiction of suicide in the arts? This possibility was raised in the previous chapter and illustrated with an analysis of altruistic suicide. This chapter presents an analysis of self-destructive behavior as depicted by the ancient Greek playwright Sophocles in two of his plays, *Oedipus Rex* and *Antigone*.

OEDIPUS

Once upon a time, long long ago, it was prophesied by Apollo's oracle that the future child of Laius and Jocasta, a son, would murder his father and marry his mother. Three days after the child was born, Jocasta gave him to a shepherd to kill.² His feet were pierced with an iron pin ("riveted ankles" p. 45) so that he could not crawl, and he was left to die. The wounds in his feet led to them being scared for life ("The infirmity in your ankles" p. 54), and he was named Oedipus, which means swollen foot, because of the deformity. Loss in early life is a risk factor for suicide since, not only because it is traumatic in itself, but also because it sensitizes the person to loss in later life (Lester and Beck, 1976). Sophocles chose the wrong age, for latency seems to be a more critical period for the experience of loss leading to later suicide (Lester, 1989), but not every detail in Sophocles's theory of suicide is exactly right given current knowledge.

The pain of the wounding stayed with Oedipus all his life:
That piercing pain,
Torture in the flesh and in the soul's dark memory. (p. 62)

¹ Much of this chapter was stimulated by the writings of Faber (1970). Quotes and page numbers are from Sophocles (1956). The chapter is based on Lester (2002).

² Sophocles departed from tradition and had Jocasta, not Laius, give her son to be killed.

It is interesting that, in his act of *focal suicide* (Menninger, 1938), his self-blinding, he pierces his eyes with brooches from his mother's dress, just as she was responsible for his feet being pierced in infancy.

Oedipus was saved from death and adopted by the King and Queen of Corinth. When he learns of the prophecy that he is to murder his father and marry his mother, thinking that his adoptive parents are his biological parents, he flees the city. On his travels he meets four men at a crossroads and, after an argument, kills all of them. One of the men is Laius, his biological father. Here we have an example of "road rage" in ancient Greece, foreshadowing the modern American phenomenon by many thousands of years. Yet it tells us that Oedipus was a violent and impulsive individual, traits that will be apparent in his later actions and which are prominent in suicidal individuals today.

After solving the riddle of the Sphinx, thereby saving the city of Thebes, Oedipus is given Jocasta, now a widow, as a wife. But pestilence and famine afflict Thebes because of the murder of Laius, and Oedipus has to find the former king's murderer.

As Oedipus delves into the historical facts, he learns from Teiresias that he himself might be the culprit. His reaction is to be angry at Teiresias:

....Insolent scoundrel, you would rouse
A stone to fury! Will you never speak?...
Hear him! Such words – such insults to the state
Would move a saint to anger. (p. 35)

His paranoia is directed to his brother-in-law Creon who he accuses of plotting to depose him. Oedipus blames others, displaying an external locus of control (Rotter, 1966).³

Must Creon....
Stalk me by stealth, and study to dispossess me
Of the power this city has given me....
....setting this schemer on me,
This peddler of fraudulent magic tricks.... (p. 36)

Proved plotter against my life, thief of my crown? (p. 40)

Eventually, Oedipus learns the truth – that he himself killed his father and married his mother. His first impulse is to kill his mother, for Oedipus holds her responsible for the fate that has befallen him. Had she not abandoned him, the tragedy would never have happened, for he would have fled Thebes rather than Corinth. In his mind, Jocasta is no longer his wife – she is now his mother!

The king broke in with piercing cries, and all
Had eyes only for him. This way and that
He strode among us. 'A sword, a sword!' he cried;
'Where is that wife, no wife of mine - - that soil
Where I was sown, and whence I reaped my harvest!'
....

³ We might note the possible symbolism of Oedipus as id, Creon as ego and Teiresias as superego. Note also that Oedipus killed his father where *three* roads meet.

With wild hallowing cries he hurled himself
 Upon the locked doors, bending by main force.
 The bolts out of their sockets - - and stumbled in. (p. 60)

He is going to murder his mother!

Wertham (1941) describes the typical matricide as young, aged 15-30, with no previous delinquent or criminal record, hypermoral, excessively attached to his mother, and experiencing loss or betrayal. The murder takes place in the bedroom, with a knife, and the murderer makes no attempt to conceal the murder - - an accurate description of Oedipus's planned murder of his mother.

But Jocasta is dead already (she has hung herself), the second time she has abandoned him. Oedipus's anger is blocked, and he turns the anger 180 degrees and directs it onto himself. Perhaps he also punishes himself because his conscious wish has come true (Jocasta is dead) and he unconsciously feels guilty for wishing it. Therefore, he punishes himself for his sins.

Why does Oedipus not kill himself? Perhaps his rush to slay his mother has expended some of his energy? But he also expresses his fear of meeting his mother and father in the after-life:

How could I meet my father beyond the grave
 With seeing eyes; or my unhappy mother,
 Against whom I have committed such heinous sin
 As no mere death could pay for?... (p. 63)

The Greeks clearly believed that, in the after-life, one possessed the body with which one died. Dying blind, one would be blind in the after-life.⁴

It is usually thought that Oedipus's self-blinding was catalyzed by self-revulsion, guilt and remorse. No so. The psychoanalytic processes behind his focal suicide were known to Sophocles long before Freud formulated them.

JOCASTA

Imagine this. It is predicted that your son will murder your husband, and so you have him killed. Then your husband is murdered. That's odd. Then a young man comes along who is the same age as the child to whom you gave birth, had he lived, with deformed feet as if he had been staked to the ground, and you marry him. Even odder. But more. He even looks like your late husband:

Tall – silver-frosted hair – about your figure. (p. 46)

Jocasta had to have wondered whether her new husband was her son as predicted by the oracle.

⁴ Perhaps Oedipus will also be jealous to see Jocasta, his wife/mother, with Laius in the after-life?

As Oedipus pursues the facts of the case, Jocasta indicates that she does indeed know. She tries to reassure him:

Nor need this mother-marrying frighten you;
Many a man has dreamt as much. Such things
Must be forgotten, if life is to be endured. (p. 52)

She tries to get Oedipus to stop inquiring into the case:

No! In God's name - - if you want to live, this quest
Must not go on. Have I not suffered enough? (p.55)

It is clear that Jocasta wants the truth hidden. She is prepared to continue to live as a wife with her son, *as long as no-one knows the truth*. When Oedipus indicates that he will find the truth, Jocasta goes to kill herself:

O lost and damned!
This is my last and only word to you
For ever! (p. 55)

Jocasta commits suicide out of shame rather than from guilt over her actions (Lester, 1997).

She goes to her bridal bed, but which one? Laius's or Oedipus's? "She cried aloud to Laius," but the Greek word gives us no clue as to the emotion. It could be anguish or it could be anger at Laius for fathering a child predicted to kill him, colluding with the abandonment of the child and then deserting her by dying (though through no fault of his own) (Lester, 1974). Laius was her first love and husband and the one to whom she now turns in distress. Perhaps she prefers reunion with Laius than shame on earth with Oedipus. The classic Oedipus conflict - the son turns to his mother, but the mother turns to his father.

Jocasta has suffered many losses. She lost her newborn son because he had to be killed. She loses her husband when he is murdered. And now she faces many losses - of son/husband and of status. Perhaps this accumulation of loss is too much for her to bear.

HAEMON

In *Antigone*, time has passed. Oedipus has died, and his sons have fought and killed each other in a civil war. Their sister, Antigone, disobeys the King, Creon, and buries her brother Polynices, as a result of which Creon sentences her to death.

After Creon sentences Antigone to death, Haemon tries to reason with his father. He is calm and rational, but Creon behaves like a "castrating" father, accusing his son of being like a woman. To Antigone, Creon says

You and your paramour, I hate you both. (p. 142)

When Haemon comes to reason with his father, Creon responds:

Of course, if you're on the woman's side –

....

Despicable coward! No more will than a woman!

....

Don't toady me, boy; keep that for your lady-love. (pp. 146-147)

Creon indicates that he plans to have Antigone killed, and tells Haemon that

You'll never marry her this side of death (p. 146)

indicating clearly that Haemon can marry her in the after-life. Haemon accepts the suggestion.

Then, if she dies, she does not die alone. (p. 146)

to which Creon replies:

Is that a threat, you impudent – (p. 146)

After Haemon leaves his father, the Chorus warns Creon

And who shall say what a young's man wrath may do? (p. 147)

but Creon does not care. When the Messenger comes to tell the Chorus

Haemon is dead,
Slain by his own –

The Chorus interrupts:

His father? (p. 157)

The Chorus knows that Creon wants his son dead.

To murder someone by goading them or encouraging them to commit suicide was called *psychic homicide* by Meerloo (1962), and Creon clearly illustrates this phenomenon. But there is more to Haemon's suicide. After Creon changes his mind and rushes to the cave to save Antigone.

His son looked at him with one angry stare,
Spat in his face, and then without a word
Drew sword and struck out. But his father fled
Unscathed. Whereon the poor demented boy
Leaned on his sword and thrust it deeply home
In his own side...⁵ (p. 159)

⁵ Demented is translated as "angry at himself" in other versions.

Haemon's response to Antigone's suicide was to kill his father, but he misses. He is, indeed, the castrated man his father described. So with his anger toward his father blocked by his own incompetence, Haemon, like Oedipus, turns the anger on to himself. Haemon probably hopes to join Antigone, his fiancé, in the after-life. But Antigone has other ideas.

ANTIGONE

Antigone has lost her mother, Jocasta, many years ago, and her father/brother, Oedipus, is dead. Her brothers have fought each other, and both are dead. She has suffered great loss.

Antigone decides to bury her brother Polynices against Creon's orders, knowing that the punishment is to be stoned to death. After failing to persuade her sister Ismene to assist her, she asks Ismene to tell everyone what she is going to do. Her first attempt to bury her brother is discovered, and he is unburied. When she buries him a second time, she "screamed like an angry bird" (p. 137) so as to be sure to get caught. Having been caught, Antigone refuses now to let Ismene share the blame (and the glory)

You chose; life was your choice, when mine was death. (p. 141)

Rather than trying to placate Creon, she angrily attacks him, goading him into sentencing her to death - a victim-precipitated homicide (Wolfgang, 1957).

Antigone anticipates a public death, and she compares herself with the death of the daughter of Tantalus. The Chorus, however, reminds Antigone that Tantalus's daughter (Niobe) was a goddess, while Antigone is a mere mortal. This upsets Antigone:

Mockery, mockery! By the gods of our fathers,
Must you make me a laughing stock while I yet live? (p. 149)

And when Creon orders her sealed in a cave, rather than being killed in public, Antigone hangs herself (as did her mother).

But Antigone does not anticipate joining her fiancé Haemon.

So to my grave,
My bridal bower.....
O but I would not have done the forbidden thing
For any husband or for any son.
For what? I could have another husband
And by him other sons, if one were lost;
But....where would I get
Another brother? (p. 150)

It is Polynices who has Antigone's attention. In her death, her bridal-bower, it is Polynices with whom she will be reunited - - implications of an incestuous desire with a brother who, as in such incestuous situations, has been away from Antigone for most of their childhood and adolescence (Lester, 1972).

In her death, Antigone transforms her image. The child of an incestuous marriage, she defies Creon and dies heroically, leaving Creon cast as the villain.

COMMENT

In these two plays by Sophocles, we have the full range of self-destructive behavior laid out before us: completed suicide, focal suicide, psychic homicide and victim-precipitated homicide. We have suicide committed out of shame, suicide motivated by reunion fantasies, suicide as a result of blocked anger, suicide to escape suffering and suicide in order to transform one's image after death. It is astonishing to find the psychodynamics of suicidal behavior so clearly presented some two thousand five hundred years ago!

However, we learn nothing new about suicide from these plays. The self-destructive behavior depicted in the plays illustrates some of the psychodynamic processes often present in the minds of suicidal individuals, but does not present new ideas. We may be impressed by the insight of Sophocles, but our understanding of self-destructive behavior is not advanced.

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PART V: SUICIDE IN ARTISTS

Chapter 13

SUICIDE IN ARTISTS: NATIONAL EPIDEMIOLOGY¹

Steven Stack

This chapter has several aims. It first delineates a sociological model of occupation and suicide, and applies it to the case of artistic occupations. The model is composed of four major components: demographics, internal occupational stress, pre-existing psychiatric morbidity, and opportunity factors (Stack, 2001; Wasserman, 1992). Aspects of this model are then tested in three studies. Study 1 tests the hypothesis proposed by Preti and Motto (1999; Preti, DeBiasi & Motto, 2001) that occupational strain varies among different categories of artists and that these categories will have different levels of suicide risk. Study 1 is based on 26,198 deaths of artists and includes 646 artist suicides. Unlike most previous investigations which are based only on the suicides of eminent artists (Lester, 1993; Preti & Motto, 1999; Preti, et al., 2001), these estimates are based on a representative sample of artist suicides. The vast majority of artist suicides are of ordinary, not eminent, artists. Study 2 seeks to locate the demographic as well as the occupational variables that best differentiate artist suicides from all other deaths of artists. Study 2 is restricted to 3,639 artist deaths including 108 suicides in the census year 1990. Study 3 expands the analysis to the total population of deaths (N=611,000) in 1990. It ascertains the extent to which artists as a broad occupational group are at risk of suicide relative to all other occupational groups. It also weights the importance of artistic occupations against a host of other independent variables in the prediction of death by suicide versus all other causes. These three studies comprise the largest investigation of artist suicide to date.

A MODEL OF OCCUPATION AND SUICIDE RISK

The sociological model of occupation and suicide risk can be conceptualized as a multi-causal heuristic framework (Stack, 2001; Wasserman, 1992). It takes into account four broad risk factors that contribute to the level of suicide risk in an occupation: demographics, internal occupational stress, pre-existing psychiatric morbidity, and differential opportunities for

¹ Data were provided by the Inter-University Consortium for Political and Social Research, University of Michigan.

suicide. These four contributing factors are not mutually exclusive, but can be complementary. For example, an occupation such as policing can differentially attract demographic groups at high risk of suicide (e.g., white males), while promoting opportunities for suicide (availability of firearms for work) (e.g., Stack and Kelley 1994). Due to data limitations the present paper will only be able to test two aspects of the full sociological model: demographics and occupational strain.

DEMOGRAPHICS

Occupations vary in their demographic composition by such factors as gender, age, race, and marital status. These demographic groups vary considerably in suicide risk. Men have a suicide rate four times that of women, whites a rate double that of blacks, and the divorced a rate that is between 2-4 times that of married persons (e.g., Lester, 2000; Stack, 1982, 2000a). Hence, if an occupation attracts persons from demographic groups with high suicide rates, it may have a high suicide rate, if all else is equal. For example, the suicide rate for police officers is often reported as being twice the national average. Stack and Kelley (1994) report a rate for police of 25.6 per 100,000 per year, twice the national average of 12. However, police are overwhelmingly males and Caucasians. The suicide rate for white males of working age is 23.8/100,000. Controlling for these and other demographic variables research has generally determined that police, in fact, do not have a significantly higher rate of suicide (Stack, 2001).

More generally, Charlton (1995) determined that only five occupations of the ten with the highest suicide rates in Britain still had significantly higher suicide rates after controls were incorporated for demographic confounding factors. In an unpublished report on 230 occupations in the USA, only 18 had significantly elevated suicide risk after controlling for age, marital status, and other demographic variables (Burnett, Boxer, & Swanson, 1992).

However, in a study of 32 occupations with a large number of suicides, the suicide risk for artists remained significantly elevated even after controlling for a host of demographic confounders (Stack, 2001). This confirmed the results of earlier investigations of artist suicide risk that had fewer demographic controls (Stack, 1996, 1997), a study of female artist suicide in Britain with several demographic controls (Charlton, 1995), and some investigations of artist suicide risk that had no demographic controls (Depue, et al., 1985; Milham, 1976; Preti & Motto, 1999; Preti, et al., 2001). In the best designed study, artists are found to have a risk of dying from suicide versus natural causes that is 2.12 times greater than the rest of the working age population. However, since artist status is related to demographic controls (e.g., race, gender), once we control for demographics, the risk of suicide among artists versus the rest of the labor force is reduced to 1.30 times greater risk (Stack, 2001, p. 392).

A listing of previous case-control investigations of artist suicide is provided in Table 1. Artists constitute one of the few occupations where there is occupational suicide risk independent of demographic confounders. An explanation of artist suicide needs to draw on other causal factors to which we now turn.

Table 1. Previous case-control studies of artist suicides

Author	Year	Number of artist suicides	Controls: other artist deaths	Controls: non-artist deaths	Artist status	Principal predictors of suicide
Charlton	1995	29	na	na	general	Artist status (females)
Depue	1985	130 actors	3326 actors	na	general	Actor status
Lester	1993	12	6	0	eminent	Substance abuse
Milham	1976	8	na	na	general	Artist/art teachers
Preti	1999	59	3034	0	eminent	Poets & writers
Preti	2001	63	4,564	0	eminent	Poets & writers
Stack	1996	93	Unknown	8,827 cancer deaths 6,198 suicides	general	Artist occupation, age, male gender, white race.
Stack	1997	93	unknown	150,325 deaths	general	Artist occupation; painters, sculptors, craft artists, printmakers.
Stack	2001	94	Unknown	152,441 deaths	general	Artist occupation

Internal Occupational Stress

Stress associated with the performance of work in an occupation can contribute to suicide risk. Features of work such as perceived unfairness in rewards, unfairness in work loads, noxious relationships with supervisors and/or coworkers, client dependence, not being able to allocate enough time to the tasks of one's job that one enjoys the most, having enough time, social isolation and overall dissatisfaction with work can contribute to suicide risk (Stack, 2001). Most of these factors have, to date, been understudied in suicide research.

Client Dependence

Client dependence is the degree to which persons in an occupation are reliant on direct contact with clients for their livelihood (as opposed to being an employee in a large bureaucratic organization with an effective marketing department to drum up customers). Occupations such as sole business owner/operator and physician would be expected to have higher suicide risk than assembly line workers in a large auto factory or mail carriers working

for the postal service. The former are directly dependent on clients for their source of livelihood. Research on 37 occupations determined that those in client dependent occupations had a higher suicide rate, 40.5 versus 25.9 for persons in non client dependent occupations (Labovitz & Hagedorn, 1971; Stack, 2001).

Research from the field of the sociology of work and occupations indicates that most artists are client-dependent. Artists are seen as independent contractors who make a living from short-term contracts with various employers (Menger, 1999). Musicians in a rock band, for example, may secure dozens of such short-term contracts over the course of a year. Painters and sculptors compete for contracts for their art products. While a few artists such as members of symphony orchestras are on long-term contracts, this is not the case for the vast majority of ordinary artists. There is evidence that work arrangements in art are increasingly marked by fragmented and brokered employment relationships (Menger, 2001).

There are several structural features of art labor markets and careers which produce strain for many artists (Menger, 1999, 2001; Throsby, 2007; Throsby & Hollister, 2003). Artists are mostly self-employed, a fact that makes them unlike most other professionals and contributes to their direct dependence on clients. The market for artists has been marked by an excess supply of artists for a very long time. As a corollary, artists are relatively low paid with respect to wage rates paid to highly educated comparable professionals. Artists receive fewer returns on their human capital, or education, relative to other professionals. Further, there is a highly skewed distribution of income among artists, a situation of extreme income inequality, much more than is characteristic of other professions.

Perhaps one of the most important aspects of artist careers is that artists are in an occupation that is most apt to involve multiple job holding. Typically, artists work as artists but also hold down another job to support themselves. These jobs are generally low paid ones in the sales/clerical and service sectors (Menger, 1999). Multiple job holding puts severe constraints on the amount of time artists can devote to their creative work.

Time Allocation

Many artists report not having enough time to devote to spend on developing their creative talents and products (Throsby, 2007; Throsby & Hollister, 2003). This form of dissatisfaction is predictable in relation to the status of the artist. For example, in a study of 291 artists, the higher the income, or the higher the training or the greater the perceived sense of being established in the field, the greater the reported allocation of time to artistic creativity of the artist (Throsby, 2007). Hence, the less established, lower-paid artists experience more role dissatisfaction on this score. However, the extent to which this form of work stress contributes to suicidality is unknown.

Social Isolation

Artists vary considerably in the extent to which they labor alone. Writers such as poets, novelists, and playwrights typically do not coauthor their work with others. Hence, negative reviews of their work by the critics, and rejection of their work by publishers can be a highly personal matter (Stack, 1996). Previous papers (Preti & Motto, 1999; Preti, et al., 2001) have

made the argument that, to the extent that artists rely on themselves to carry out their work (as do poets and novelists), suicide risk increases.

Psychiatric Morbidity

Occupations vary in the extent to which they recruit persons at psychiatric risk of suicide. If an occupation differentially attracts persons with disorders such as manic depression and major depression that place them at risk of suicide, this in itself may enhance the suicide rate of that occupation. The psychiatric disorders may exist before entry into the occupation, and so occupational strain may not be the root cause of such disorders (Bedian, 1982; Stack, 2001; Wasserman, 1992). For example, it has often been hypothesized that the high suicide rate among psychiatrists is due, in part, to pre-existing psychiatric morbidity (Stack, 2001).

Qualitative case studies document the prevalence of psychiatric conditions such as substance abuse, major depression, and bipolar mood disorders in the lives of eminent artists who have killed themselves. These case studies focus on well-known artists including Arshile Gorky (Akiskal & Akiskal, 1996), Yukio Mishima (Turco, 1999), Sylvia Plath (Silverman & Will, 1986), Mark Rothko (Ashton, 1983), Jochen Seidel (Roman & Stastny, 1987), and Vincent Van Gogh (Harris, 2008; Meissner, 1992). While these single case studies deepen our understanding of suicidal pathways, including evidence of early or predisposing trauma, life long struggles against various psychiatric disorders including substance abuse, and clustering of stressful life circumstances precipitating the suicide, it is problematic to generalize on the basis of a few cases to the many cases of artist suicides across time and space.

Lester (1993) determined that five of the six suicides of famous female artists had documented psychiatric disorders compared to only three of the six nonsuicidal female artists. Four of the suicidal women had a major affective disorder versus none of the nonsuicidal female artists (Lester, 1993, p. 94). No difference was noted in birth order between groups. Marital status played a role in the suicides. Four of the suicides were divorced or separated at the time of their suicide compared to none of the controls. Four of the suicides had made previous suicide attempts compared to only one of the controls.

A number of studies document a relatively high incidence of mental disorders among eminent artists, including mood disorders which are most conducive to suicide (Lester, 2000). Jamison (1989) studied 47 living, award-winning, British artists. At least 38% had received treatment for an affective disorder compared to approximately only 1.7% of the general British population. Further, these eminent artists were 19 times more likely than the general population to have received treatment for a bipolar disorder (6.4% versus 0.3%). Similarly, Schildkraut, et al. (1994) estimated that over 50% of 15 eminent artists had some form of mental disorder, predominately mood disorders and preoccupation with death. At least 40% sought treatment, 20% were hospitalized, and 20% were alcoholics. Andreasen's (1987), study based on 30 living writers who attended the elite Iowa Writers Workshop, found that 80% of the writers met the Research Diagnosis Criteria (Spitzer, 1978) for an affective disorder and 43% met the criteria for a bipolar disorder, while 30% were alcoholics. In contrast, for a matched control group of 30 professional workers, only 30% met the criteria for an affective disorder, 10% satisfied the criteria for a bipolar disorder, and 10% were alcoholics. All of these investigations are, however, based on eminent artists. It is not clear if

the suicides of the vast majority of noneminent artists are marked by such high rates of serious disorders.

Research on the psychiatric morbidity of the general population of artists, as opposed to the famous ones, is sparse. Unsuccessful artists have faced different labor market conditions than successful ones. They may experience lower levels of aspirations than successful, famous artists. If artistic productivity and fame are a function of the degree of severity of psychiatric disorders, where the greater the disorder the greater the productivity, we might expect low productivity artists to be in better mental health. Hence, as a group, artists' mental health may not, in fact, differ from that of the general population.

The only national data on mental disorders by occupation for the general population are from the Epidemiological Catchment Area Survey (Eaton, et al., 1990; Mandell, et al., 1992). Two principle disorders have been investigated: major depression and substance abuse. The prevalence of major depression ranged from 0% for occupations including precision textile and electrical equipment repair workers to a high of 13% for data entry workers and computer equipment operators. The prevalence of major depression among writers, artists, and entertainers was 6%, but this percentage was not statistically significant from the average. Turning to substance abuse, ten occupations had a prevalence rate for DSM III Alcohol dependence or Abuse Disorders of more than 13%, twice the general population rate of 6.5%. These were all manual workers in the construction and transportation industries and included construction laborers and truck drivers. The prevalence rate for writers, artists and entertainers was 6.5%, a level which was not significantly different from the mean for the nation. Artists ranked 50th of the 104 occupations ranked on this indicator of substance abuse (Mandell, et al., 1992). . So, for the general population of American artists, these data indicate that there does not seem to be a significant problem of psychiatric morbidity. Of course further research on other disorders needs to be done.

A study of 57 adult artists in Israel did find a slightly higher level of neuroticism (as measured by the five factor personality inventory) among artists (mean = 3.4) than in the general Israeli population (mean = 3.1) (Rubinstein, 2007). There may be cross-national differences in the link between artistic careers and psychiatric morbidity.

However, well-known artists are not a representative sample of artists. The distribution of fame, income and other socio-economic status measures is highly skewed among artists (Menger, 1999, 2001; Throsby, 2007). It is plausible that the set of risk factors driving the suicides of unsuccessful artists might differ from those of the well-known or celebrity-level artists. For example, the low income and failure to achieve fame among the vast majority of artists might contribute to suicide risk among unsuccessful artists. Given that most artists are unsuccessful, this is an important, yet largely unanswered question. It may be, however, that causal factors that apparently drive suicides among successful artists may also be key causal factors in the suicides of the vast number of unsuccessful artists.

Opportunity Factors

Occupations vary according to the opportunities available for suicide including access to lethal means for suicide. The availability of lethal drugs in the medical profession has been linked to their corresponding high risk of suicide (Burnett, Boxer & Swanson, 1992; Stack,

2001; Wasserman, 1992). Artistic occupations are not thought to provide differentially high opportunities for suicide (Preti, 1999, 2001; Stack, 1996).

The present investigation assumes that any elevated risk of suicide among artists is due to a combination of demographic, occupational strain, and psychiatric morbidity factors. With the exception of demographic contributors to suicide, the other components of the model are measured crudely or not at all. Any association between suicide risk and artistic occupation that remains after demographic controls is assumed to be due to unmeasured components of the model.

METHODOLOGY

The data on suicide came from the National Mortality Detail Files (e.g., U.S. Public Health Service, 1994). These are the only source of data on suicide and occupation that cover a large portion of the nation. All mortality data were provided by the Inter-University-Consortium for Political and Social Research (ICPSR) at the University of Michigan.

Study 1 employs the full set of Mortality Detail Files. These are available beginning in 1985, the first year that occupation of the deceased was included in the files, through 1992, the last year that the Mortality Detail Files were constructed. Data on all deaths are included in this data series. However, data on the occupation of the deceased is incomplete. Unfortunately, most states do not report occupation of the deceased to the United States Public Health Service. For example, for the year 1990, data on suicide are from the 21 states which reported occupational data to Washington (U.S. Public Health Service, 1994). These states are Colorado, Georgia, Idaho, Indiana, Kansas, Kentucky, Maine, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, Ohio, Oklahoma, Rhode Island, South Carolina, Utah, Vermont, Washington, West Virginia, and Wisconsin. The number of deaths with occupational data available grew somewhat over the eight years as the number of states in the death-reporting area expanded: 461,476 in 1985 to 622,697 deaths with occupational data in 1992.

Study 2 is restricted to a census year, 1990. In 1990 data are available on the occupation of 611,940 persons who died, nearly a third of the 2,151,890 deaths that year in the USA. Study 2 further restricts the sample to deaths by artists.

Study 3 is also based on the census year, 1990. Its aim to assess the overall risk of suicide among artists against the risk of suicide among other occupations in the labor force.

Some caution needs to be exercised in interpreting the results of the present study since they are based on official suicide statistics. Some undercounting of suicide may exist due to variation in such factors as the quality in the certification of the causes of death by local coroners (Kushner, 1993). However, the measurement errors that do exist in official data are not large enough to preclude meaningful analysis. In fact, even with controls introduced for variation in the professionalization of certification of death, research has shown that the relationships between sociological variables and suicide remain largely the same (Pescosolido & Mendelsohn, 1986).

Study 1

In Study 1 we are concerned with the prevalence of suicide and non suicide deaths among subtypes of artists only. There are a total of 26,198 deaths of artists in the Death Registration Area, for the years 1985-1992. Of these, 646 or 2.46%, were suicides. The remaining deaths of artists were from all other causes of death.

Artists are defined using standard federal occupational codes under the census category "Writers, artists and entertainers." There are nine such categories. They consist of actors and directors, authors, dancers, designers, musicians and composers, painters, sculptures, craft artists, and artist printmakers, photographers, technical writers, and artists, performers and related workers not elsewhere classified (US Public Health Service 1994). In phase 1 of the analysis, suicide risk is calculated on an annual basis for each of these artist subtypes.

Study 2

Study 2 is based on 1990 as a census year and is restricted to artist deaths. A distinction is made between high-risk artist groups versus low-risk artist groups. High-risk artist occupations are defined as ones that have a significantly higher odds of suicide death in most of the 9 years analyzed in phase 1 of the analysis.

In Study 2, we use the information on high-risk artist groups to ascertain the strength of the relationship between level of occupational risk among artists and the odds of death through suicide. Study 2 restricts the analysis to just deaths among artists (N=3,639). In this fashion, artist status is controlled. The dependent variable is a binary variable where 1=death by suicide and 0= death from all other causes. There are four categories of artist occupations in the high-risk group: actors, authors, painters, sculptors, craft artists and artist printmakers, and artist performers and related workers not elsewhere classified. These four categories are combined to form a binary variable (0,1) consisting of 1 = high-risk artist occupation, versus 0 = low-risk artist occupation.

A series of socio-demographic control variables are included in study 2. . First, we include three controls from the previous analysis by Stack (1996). Gender is coded as 1=male and 0=female. Race is coded as white=1 and 0=others. Age is coded in years. In addition to the controls in the previous study, controls are included for marital status. Marital status is captured by a series of binary variables: divorced (0,1), single (0,1), and widowed (0,1). Married constitutes the reference category. An additional set of variables control for the residence of the deceased. First, a control for city size is added, where residence in a city of population size equal to or greater than 100,000 is measured as a binary variable (0,1). Finally, a control is created for region of the nation. A series of binary variables is employed: Midwest (0,1), South (0,1), and West (0,1). The reference category is New England where suicide rates tend to be relatively low (e.g., Lester, 2000).

Study 3

In Study 3 of the analysis the analysis is broadened to include all 611,619 deaths with occupation data in 1990. The dependent variable is a binary variable where 1=death by

suicide, and 0=death by all other causes. The focus of study 3 is to ascertain the extent to which persons in high-risk art occupations and persons in low risk artistic occupations are at danger of suicide relative to other occupational groups. A set of socio-demographic control variables is incorporated into the analysis. These controls are the same as in Study 2.

RESULTS

Study 1: The Distribution of Suicide by Subtypes of Artists

Table 2 presents the results regarding suicide risk for each of the nine categories of artistic occupations. For each occupation the risk of suicide is given for each of the eight available years. The number of suicides is provided in the first row, the number of deaths for artists from all other causes is provided in the second row of data. In the third row the percentage of artist deaths that were from suicide is given. The percentages in the third row marked with an asterisk are significantly different from the percentage of the population of deaths that were suicides in that year. The Chi Square test was used as a test statistic.

Actors

During 1985-1992, 843 actors died. Of these there were 33 suicides. The suicides represented 3.9% of all deaths involving actors. For the general population of all deaths analyzed for this time frame, 1.5% were suicides. In five years (1985, 1986, 1987, 1990, and 1992) the percentage of actors who died of suicide was significantly greater than the percent of the general population dying from suicide. Since actors have a significantly higher incidence of suicide than the general population most of the time, they meet the study's criterion for a high-risk artistic group. The peak year in actor suicide was 1990 where 7.3% of deaths involving actors were suicides. This is nearly five times the national percentage for the general population.

Authors

During the eight-year period, 1,284 authors died. Of these, 58 or 4.5% were suicides. This is three times the expected percentage (1.5% for the general US population). In six years the percentage of authors dying through suicide was significantly greater than the percentage of the general population dying through suicide. The exceptions were 1985 and 1987. Authors qualify as a high-risk group.

Dancers

During the 1985-1992 period, 351 dancers passed away. Dancers tend to be very young, so it is less likely for them to die through suicide. In addition, there is an artistic expectation that dancers will retire early due to the physical requirements of the profession (as in ballet) (Menger, 1999). There are relatively few persons employed as dancers. Dancing is the least common of the nine artistic specialty groups. Only 8 of the 351 deaths involving dancers were suicides (2.3%). In only one year (1989) was the percentage of dancers dying of suicide significantly greater than that for the general population.

Table 2. The distribution of suicides and deaths by artistic specializations by Year, 1985-1992

Artist Sub Type	1985	1986	1987	1988	1989	1990	1991	1992	All Years
Actor suicides	6	4	5	0	3	8	2	5	33
Actor deaths	61	78	89	93	122	109	142	149	843
% suicides	6.6*	5.1*	5.6*	0	2.5	7.3*	1.4	3.4*	3.91
Author suicides	3	4	5	6	9	9	12	10	58
Author deaths	97	103	166	150	156	196	210	206	1284
% suicides	3.1	3.9*	3.0	4.0*	5.8*	4.6*	5.7*	4.9*	4.52
Dancer suicides	0	0	1	2	1	2	1	1	8
Dancer deaths	33	26	31	37	43	58	61	62	351
% suicides	0	0	1.2	5.4*	2.3	3.4	1.6	1.6	2.27
<i>Designers suicides</i>	11	4	12	19	19	17	25	18	125
Designer deaths	728	882	933	1170	1245	1205	1211	1323	8697
% suicides	1.5	1.4	1.3	1.6	1.5	1.4	2.1*	1.4	1.4
<i>Musician suicides</i>	5	12	14	14	17	18	12	21	113
Musician deaths	432	509	627	748	726	717	739	758	5256
% suicides	1.2	2.4	2.2	1.9	2.3*	2.5*	1.6	2.8*	2.14
<i>Painters, sculptors, craft artists, print makers suicides</i>	13	27	17	14	30	34	26	16	177
Painters et al deaths	375	498	520	618	800	731	840	827	5209
% suicides	3.5*	5.4*	3.3*	2.3*	3.8*	4.7*	3.1*	1.9	3.39
Photographers suicides	6	4	12	9	8	12	8	14	73
All deaths	221	262	299	339	356	372	395	393	2637
% suicides	2.7	1.5	4.0*	2.7*	2.2	3.2*	2.0	3.6*	2.8
<i>Technical writers suicides</i>	0	0	2	0	1	2	2	2	9
All deaths	35	39	47	73	62	60	75	77	468
% suicides	0	0	4.3	0	1.65	3.3	2.7	2.6%	1.9
<i>Artists nec suicides</i>	2	5	5	6	6	6	7	7	44
All deaths	150	138	146	186	197	191	234	211	1453
% suicides	1.3	3.6*	3.4*	3.2*	3.0*	3.1*	3.0*	3.3*	3.0
<i>All artists suicides</i>	44	68	73	70	94	108	95	94	646
All artist deaths	2132	2535	2858	3414	3707	3639	3907	4006	26198

% suicides	2.1*	2.7*	2.6*	2.1*	2.5*	3.0*	2.4*	2.3*	2.46
Percent of deaths of the general population that are suicides	1.5	1.5	1.6	1.4	1.5	1.5	1.5	1.5	1.5
All deaths in 1000's	461	514	573	631	610	612	622	623	4646

* The difference between the proportion of artist deaths from suicide and that of the non-artist population (1.5%) is statistically significant, $p < .05$, one-tailed chi square test.

Designers

Of the 8,697 deaths of designers, only 125 or 1.4% were from suicide. In only one year of eight (1991) was the percentage of designer deaths from suicide significantly greater than the percent of deaths that were suicides for the US population (2.1% vs. 1.5%).

Musicians

A total of 2.1% of the musicians who died over the eight-year period were suicides. There were only three years, however, where the percentage of suicides for musician deaths was significantly greater than that for the general population (1989, 1990, and 1992). They did not meet the criterion for a high-risk artistic occupation.

Painters, Sculptors, Crafts Artists, and Print Makers

Of the 5,209 deaths in this group, 177 were suicides. In nearly all years this group had a percentage of suicides significantly higher than that for the general population. The only exception was 1992. They qualify for a high-risk artistic occupational group. Unfortunately, we are not able to calculate suicide risk for categories within this group (e.g., sculptors).

Photographers

Of the 2,637 who died during the 1985-1992 period, 73 or 2.8% died from suicide. Photographers have received little attention in suicidology. Kevin Carter, for example, received the Pulitzer Prize for his photo of an extremely weak starving Sudanese child being stalked by a hungry vulture. The images of this and many other vivid memories of killings, corpses and assorted human suffering in the Sudan haunted him and he took his own life three months after receiving the Pulitzer (Doherty, 2006). In half of the years the suicide risk for photographers was significantly greater than that of the general population.

Technical Writers

A total of 9 of the 468 deaths of technical writers were suicides (1.9%). The percentage of suicides was never significantly greater than that of the general population.

Artists, Performers and Related Workers not elsewhere Classified

This group, which would include comedians, contributed 1,453 deaths. Of these 44 or 3.0% were suicides. In seven of eight years the percent of suicides was greater than the mean for the general population (mean 1.5%, range 1.4-1.6%). This group qualifies as a "high risk artistic occupational group.

All Artists

In all, 646 of the 26,198 deaths of artists were from suicide. Among artists, the percentage of deaths that were suicides was significantly greater than that for the general population in all eight years. However, as we have seen, some artist groups were more apt to have significantly elevated suicide risk than others. The high-risk groups were actors, authors, painters, sculptors, crafts, and printmakers, and artists not elsewhere classified. The low-risk groups are comprised of dancers, designers, musicians, photographers, and technical writers.

The data from Table 2 for the census year 1990 were used to calculate estimated numbers of suicides for each of the nine categories of artists. In addition suicide rates for the nine classifications of artists were calculated. These estimates are provided in Table 3. Rates were calculated using the following methodology. A total of 611,940 deaths had data on occupation of the deceased. A total of 2,151,890 persons died in 1990. Hence, we have occupational data on 28.4% of the persons who died in 1990. Our estimate of the actual number of persons who died in an occupation would be the number based on the death registration area of 21 states divided by 0.284. For example, we found that 8 actors completed suicide in 1990 in the 21 states. For all fifty states the estimated number of actors would be 8 actors divided by 0.284 = 28 actor suicides. In 1990 there were 109,573 actors in the labor force (US Bureau of the Census 1992:3). The suicide rate for actors that year is, therefore, estimated to be 33.4. This is nearly three times the suicide rate of the general population. Estimated rates for subcategories of artists range from a low of 9.4 for technical writers to a high of 56.4 for the category of painters, sculptors, craft artists, and artist printmakers. Overall, artists had a suicide rate of 25.3.

Table 3. Suicide rates by occupation in 1990

Occupation	Number of suicides in occupation (estimated) 1990	Number of persons in occupation in 1990	Estimated suicide rate
Authors	32	105,730	30.7
Actors	28	109,573	33.4
Dancers	7	21,913	31.9
Designers	60	596,802	10.1
Musicians	63	148,020	42.6
Painters, Sculptors, Craft Artists, & Artist Printmakers	120	212,762	56.4
Photographers	42	143,520	29.3
Technical Writers	7	74,292	9.4
Artist, Performers, & Related Workers, nec.	21	93,421	22.4
All Artists	380	1,506,033	25.3

Study 2: Predictors of Artist Suicide among Artist Deaths

The results of the multivariate logistic regression analysis that predicts suicide among artist deaths are provided in Table 4. Since the dependent variable is a dichotomy, logistic regression techniques are appropriate (Menard, 2002).

Table 4. Predicting suicide versus other causes of death in high-risk artistic occupations in 1990

Variable	Logistic Regression Coefficient	Standard Error	Wald Chi Square	Odds Ratio
High Risk Art Occupation	0.61*	.21	8.89	1.84
Marital Status:				
Divorced	-0.014	0.31	0.002	0.98
Widowed	0.92*	0.40	5.23	2.51
Single	-0.35	0.27	1.71	0.70
(Married-reference)				
Gender (male)	0.44*	0.25	3.11	1.56
(female-reference)	1.00			
Age	-0.07*	0.007	98.6	0.92
Race White	0.31	0.34	0.82	1.36
All others=reference	1.00			
Residence Characteristics				
Population > 100K	0.40*	0.22	3.20	1.49
Region				
Midwest	-0.25	0.33	0.58	0.77
South	0.20	0.29	0.45	1.22
West	0.04	0.30	0.01	1.04
New England (reference)	1.00			
Constant	-0.28	0.59	0.23	
Nagelkerke r-squared	0.224			
Model Chi Square	196.53*			

* $p < .05$

Controlling for the other independent variables in the equation, artists in high-risk occupations (actors, authors, painters, and artists not elsewhere classified) were 1.84 times more apt than artists in low-risk occupations (dancers, designers, musicians, photographers, and technical writers) to die from suicide. Judging from the ratios of the logistic regression coefficients to their standard errors, employment in a high-risk artistic occupation is the leading predictor of who dies from suicide versus all other causes of death.

The second leading predictor of suicide among the class of artists is a measure of marital status. Widowed artists are fully 2.51 times more apt than married artists to die from suicide. Divorced and single artists are no more likely to commit suicide than are married artists.

As anticipated, male artists are more apt than female artists to suicide, the odds ratio indicating that men are 1.56 times more apt to do so. Further, a one-unit change in age lowers the risk of suicide by 8%. This is consistent with predictions since the vast majority of people die of natural causes, increasingly so with age. Artists residing in large cities are 1.49 times more apt than artists living in smaller communities to die through suicide. Region of residence of artists is unrelated to suicide risk. Race is also not a significant predictor of artist suicide.

The measures of model fit indicate that the equation is a good predictor of suicide risk. For example, the Nagelkerke r-squared shows that 22.4% of the variance in death by suicide is explained by the predictors in the model.

Study 3: Artist Status as a Predictor of Suicide

Table 5 presents the results of the multivariate analysis of death by suicide versus all other causes. Two artist occupational groups are included. Controlling for the other variables in the model, artists in high-risk occupations (e.g., actors and authors) were fully 2.04 times more likely than persons in non-artistic occupations to die from suicide. In contrast, artists in low-risk artistic occupations (e.g., dancers, and photographers) were not significantly at greater risk of suicide than persons in non-artistic occupations.

Table 5. Predicting suicide versus all other causes of death in all artists in 1990.

Variable	Logistic Regression Coefficient	Standard Error	Wald Chi Square	Odds Ratio
High-risk art occupation	0.71*	.14	24.7	2.04
Low-risk art occupation	0.11	.15	.54	1.11
Reference: all other occupations	1.00			
Marital status:				
Divorced	0.43*	0.03	197.9	1.54
Widowed	-0.02	0.04	0.20	0.98
Single	-0.52*	0.03	235.0	0.59
(Married-reference)	1.00			

Age	-0.06*	0.0007	9115.9	0.94
Gender (male)	1.01*	0.03	1316.6	2.75
(female- reference)	1.00			
Race (White)	1.01*	0.04	617.6	2.74
All others=reference	1.00			
<i>Residence Characteristics</i>				
Population > 100K	0.19*	0.02	73.1	1.21
Region				
Midwest	0.13*	0.03	12.32	1.14
South	0.15*	0.03	0.16.6	1.16
West	0.51*	0.04	172.2	1.67
New England (ref)	1.00			
Constant	-2.17*	0.06	1092.2	
Nagelkerke r-squared	0.22			
Model chi square	199.4*			

* $p < .05$

Most of the socio-demographic variables were also predictive of death by suicide. Controlling for the other predictors, divorced persons were fully 1.54 times more likely than married persons to die from suicide. Each unit increase in age lowered the odds of suicide 6%. Males were 2.75 times more likely than their female counterparts to die from suicide. Whites were 2.74 times more likely than persons of other races to die from suicide.

The residence variables were all significant predictors of suicide risk. Persons living in cities of greater than 100,000 were 1.21 times more likely to die from suicide than their counterparts. Turning to region, persons in the West had the greatest risk of suicide. Persons residing in the Western states were 1.67 times more likely to die from suicide than their counterparts in New England. Persons living in the South and Midwest also had elevated risk of suicide (1.16 and 1.14 respectively).

The degree of model fit is indicated by the Nagelkerke r-squared. This indicates that the model explains 22% of the variance in death by suicide.

DISCUSSION

Previous work on artist suicide has been largely based disproportionately on anecdotal case studies of eminent artists (Akiskal & Akiskal, 1996; Ashton, 1983; Harris, 2008; Meissner, 1992; Roman & Stastny, 1987; Silverman & Will, 1986; Turco, 1999). Two studies do explore the suicides of larger samples of eminent artists and suggest that the subgroup of literary artists, in particular, are at high risk of suicide (Preti, 1999, 2001). However, from this body of work, it is not clear if the *general* (non-eminent) population of artists is at risk, and if certain subcategories of general artists are at and above average risk of suicide, and other categories may not be at an elevated risk.

The present investigation fills this gap in knowledge in. An analysis of annual data on artists' deaths from 1985 through 1992 determined that four of the nine available categories

of artists were at higher risk of suicide relative to the general population in most years. These results are based on 646 suicides by artists, the largest database of artist suicides analyzed to date. The four categories were actors, authors, a blended category of painters, sculptors, crafts artists, and print makers, and a heterogeneous category of artists and entertainers not elsewhere classified (including comedians). In contrast, in most years the following categories of artists were not at a significantly higher risk of suicide than the general population: dancers, designers, musicians, photographers, and technical writers. These results underscore the need to break artistic occupations into groups according to their suicide risk. Some groups of artists are simply not at an elevated risk of self destruction. That authors are in a high risk groups is consistent with the findings of Preti and Motto (1999) and Preti, et al. (2001) who found that eminent literary artists (principally novelists and poets) were at high risk for suicide. Previous work (Preti & Motto, 1999; Preti, et al., 2001) did not have enough cases of most categories of eminent artist suicides to say anything conclusive about the risk in other categories.

A second limitation of previous work on artist suicide concerns analysis of artists only deaths controlling for demographics. The only previous research on risk according to artistic specialty was done on a sample of eminent artists (Preti & Motto, 1999; Preti, et al., 2001). It did not explore whether or not artistic occupations varied in suicide risk after demographic controls. It is also unclear to what extent ordinary (as opposed to eminent) literary artists are at high suicide risk. The present Study 2 fills these gaps. Study 2 explores the risk for suicide among the four high-risk artistic occupations while controlling for a host of demographic variables. Based on a national representative sample of 3,531 deaths restricted to artists and 108 artist suicides in a census year, artists in high-risk occupations have a suicide risk 1.84 times that of artists in low-risk artistic occupations. Artists including authors, actors, painters, and crafts artists are at considerably greater risk of suicide than artists such as dancers, musicians, and photographers. Further work is needed to test hypotheses on the variability of suicide risk among categories of artistic specialties. Possibly some of the variation may be due to variation in psychiatric morbidity and some due to labor market conditions such as under-employment and client dependency in specialized art worlds.

A third limitation of previous research is its inadequate attention to the inclusion of demographic controls and deaths of non artists. There are often no demographic or other controls for demographics that may cloud the estimation of the risk of suicide in the artistic professions (Depue, et al., 1985; Stack, 1997). Work that does control for some demographic confounders finds that artists remain at an elevated risk of suicide (Stack, 1997, 2001). However, additional confounders need to be included (e.g., region of nation, city size) in order to establish this on a more solid basis. In addition, the previous studies do not make a distinction between subgroups of artistic occupations, especially those at relatively high and low risk for suicide. Study 3 of the present investigation fills these gaps in the literature. Artists in high-risk occupations remain at an elevated risk of suicide that is 2.03 times that of all other occupations. However, artists in low-risk artistic occupations have an odds ratio for suicide that does not differ from that of all other occupations. These relationships hold independently of all demographic control variables, including ones that were not taken into account in previous controlled multivariate models (Stack, 1996, 2001).

The present investigation also advanced a new interpretative scheme for explaining the high incidence of artist suicide. Drawing on work from the sociology and economics of artist labor markets, it is contended that labor market strains contribute to suicide risk among

artists. In particular, artists represent an occupational group relatively high in client dependency, a structural feature of some occupations such as the health professions that contributes to high suicide risk (Labovitz & Hagedorn, 1971; Stack, 2001). Artists are similar to independent contractors who continually have to compete for contracts from their clients. In addition, artists are among the most likely groups to encounter the following occupational strains: multiple job holding, unemployment, and under-employment. Their position in labor markets is considerably below that of other highly-educated, professional occupational groups (Menger, 1999; 2001).

This new perspective on artist suicide is not contradictory to previous perspectives that stress pre existing psychiatric morbidity (e.g., Andreasen, 1978, 1987, 1988; Lester, 1993; Schildkraut, et al., 1994; Stack, 1996, 1997). Artist labor markets constitute a structural co-morbidity alongside affective and related psychiatric disorders as co-morbidities at the individual level. Both structural strains and personal strains are seen as contributing to the suicide risk of artists. Labor market strains faced by artists provide, however, a valuable point of departure for work seeking to test a new sociological perspective on artist suicide.

Neglected epidemiological survey research on the distribution of psychiatric disorders among occupations presents something of a challenge to the dominant perspective on artist suicide, which attributes artist suicide to affective (mood) disorders. Research on psychiatric morbidity, including major depression and substance abuse, that is based on large samples of artists and non-artists from the general population, has failed to replicate what has been found based on both qualitative and moderate-sized sample investigations based on eminent artists (Eaton, et al., 1990; Mandell, et al., 1992). The general population of artists is found to have average levels of major depression and alcoholism. These findings are, however, not necessarily contradictory to those based on eminent artists morbidity (Andreasen, 1978, 1987, 1988; Lester, 1993; Schildkraut, et al., 1994). It may be that eminent artists are indeed higher than average in psychiatric morbidity and that explains much of the motivation behind their suicides. In contrast, ordinary artists, while not being higher in psychiatric morbidity, may commit suicide due to their poor economic position in the labor market. Multiple job holding, under-employment, low pay and other strains may contribute to the suicides of ordinary artists just as extreme psychiatric disorders may contribute to the suicides of highly successful artists, those who have reached the top of the highly competitive occupational structure for artists. Extreme mood disorders may play a role in climbing to the top to the extent that the lows experienced in spells of deep depression generate great works of art created perhaps later during the manic phase of the mood disorder. Depression can bring the eminent artist into direct and lonely confrontation with the existential question as to whether or not life is worth living. This experience may actually improve the artistic products of the eminent artists (Schildkraut, et al., 1994). As the eminent Norwegian painter, Edvard Munch, noted about pain and his art: "I would not be without suffering. I owe so much of my art to suffering" (Von Per Amann, 1990, p. 17). Ninety percent of the eminent artists interviewed by Jamison (1989) held that very intense moods and feelings were either necessary and integral or very important to the creation of art. Cognitive changes during hypomania that facilitate artistic production include increases in associational fluency and flexibility of thought (Jamison, 1989).

Variation in the risk of suicide among artist subcategories deserves attention in future work. In addition to the exploration of differentiated art labor markets, there may be variation in the problem of rejection of highly personal artistic products such as novels, poems,

paintings, sculptures, and performances. Lester (1993) notes that even among notable artists, many, if not most, "creative products" are rejected. This insight may help to explain why there is a high risk of suicide among authors whose products are generally written in isolation and alone. Novels and related products are, for example, rarely coauthored. Rejection of the manuscript of a novel for publication or a scathing review of a novel by critics cannot be blamed on others. Novelists work alone and take rejection alone for the failure of their art product. Rejection of other art products that have a collective authorship (e.g., products of a band, an orchestra or art design department) can be handled collectively, as a group. This may explain some of the variability in suicide risk among artists (Stack, 1996). Actors also generally procure contracts alone. They too have a high incidence of suicide.

Some caution needs to be exercised in interpreting the finding of the present study that artists are at an elevated risk of suicide. The finding is based on American artists and, thus, on the American labor market for artistic talent. Available information on European labor markets indicates better market circumstances for artists. There is substantially more public subsidization of the arts in Europe (Menger, 1999). As such, the occupational strains faced by artists would be lower and suicide risk less than in the US. Research is needed to ascertain if artist risk for suicide is, in fact, lower in nations that subsidize artistic institutions more than in the USA.

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Chapter 14

SUICIDE IN CREATIVE WOMEN¹

David Lester

While involved in a project exploring suicide in famous individuals for whom adequate biographies exist, I noted that suicide seemed to be especially common in writers and artists, and this was true of women too. Among the suicides identified were Diane Arbus (an American photographer), Dora Carrington (an English painter), Anne Sexton (an American poet), Sylvia Plath (an American poet), Sara Teasdale (an American poet), and Virginia Woolf (an English writer). The question arose as to why these women committed suicide.

These were creative women. Were their suicides because they were *women*, because they were *creative*, or because they were *creative women*? It is not because they were women. As Lester (1984) has noted, in almost every nation of the world and in almost every demographic group, men engage in fatal suicidal behavior (in which the person dies) at a much higher rate than do women, while women engage in nonfatal suicidal behavior (in which the individual lives) at a much higher rate than do men. Although the total number of suicidal acts is greater in women than in men, women are *less* likely to engage in fatal suicidal acts.

Suicide in creative women may be because they are creative. Andreasen (1987) found that rates of psychiatric disorder were higher in creative writers (of both sexes) than in matched controls, especially rates of affective disorder and, in particular, bipolar disorder (commonly known as manic-depressive psychosis). A high incidence of affective disorder and creativity in the first-degree relatives of the creative writers suggested that this linkage could be genetically-mediated, but the possibility remains also that creativity increases the chances of developing a psychiatric disorder. A high incidence of alcoholism has also been noted in writers (Goodwin, 1988), raising the possibility either that alcohol abuse facilitates creative writing or that creative writing increases the risk of alcohol abuse. Although formal research identified an association, the mechanisms at work remain obscure. Perhaps a detailed study of the lives of creative individuals will help us determine the causal sequence involved? The bias involved in this approach has been called *beta bias* by Hare-Mustin and Marecek (1988) since it assumes that men and women are similar.

¹ This chapter is based on Lester (1993).

The final possibility is that suicide in creative women is because they are both creative and women. It may be that the path of the woman who chooses to be creative is far less easy than that of a man making the same choice. The opportunities may be fewer for creative women, the prejudice against their work greater and their rewards fewer. Viewing women and men as different has been called *alpha bias* by Hare-Mustin and Marecek (1988).

Although the choice of the particular nonsuicidal women and suicidal men for comparison with the suicidal women is arbitrary, an effort was made to chose both artists and writers to match the female suicides and to include non-Americans in the appropriate proportion. The test of the usefulness of this approach will, of course, be decided by the value of the conclusions which will be drawn.

SUICIDAL AND NONSUICIDAL CREATIVE WOMEN

In an effort to understand the role of creativity in the suicide of women, I studied the biographies of six creative women who completed suicide (Diane Arbus, Dora Carrington, Sylvia Plath, Anne Sexton, Sara Teasdale and Virginia Woolf) and compared their lives with those of six creative women who died from natural deaths (Collette, Käthe Kollwitz, Amy Lowell, Edna Millay, Georgia O'Keeffe and Dorothy Parker). In this section, I will explore whether clear differences are apparent between the two groups.

First some simple demographic information.

	birth	death	age at death	birth order ²	field
Diane Arbus	3-14-1923	7-26-1971	48	2nd of 3	photography
Dora Carrington	3-29-1893	3-11-1932	38	4th of 5	painting
Sylvia Plath	10-27-1932	2-11-1963	30	1st of 2	poetry
Anne Sexton	11-9-1928	10-4-1973	44	3rd of 3	poetry
Sara Teasdale	8-8-1884	1-30-1933	48	4th of 4	poetry
Virginia Woolf	1-25-1882	3-28-1941	59	3rd of 4	novels
Collette	1-28-1873	8-3-1954	81	2nd of 2	novels
Käthe Kollwitz	7-8-1867	4-22-1945	77	3rd of 4	painting
Amy Lowell	2-9-1874	5-12-1925	51	4th of 4	poetry
Edna Millay	2-22-1892	10-19-1950	58	1st of 3	poetry
Georgia O'Keeffe	11-15-1887	3-6-1986	98	2nd of 7	painting
Dorothy Parker	8-22-1893	6-7-1967	73	3rd of 3	writing

	marital status	Children	parental death/age/cause
Diana Arbus	divorced	2	none
Dora Carrington	single	0	none
Sylvia Plath	separated	2	father/8/natural
Anne Sexton	divorced	2	none
Sara Teasdale	divorced	0	none
Virginia Woolf	married (1st)	0	mother/13/natural
Colette	married (3rd)	1	none
Käthe Kollwitz	widowed	2	none
Amy Lowell	single	0	none
Edna Millay	widowed	0	(father/7/divorce)
Georgia O'Keeffe	widowed	0	none
Dorothy Parker	widowed	0	mother/infancy/natural

Rather obviously, the suicides died at an earlier age than those dying of natural causes. This premature death has been noted before for samples of female and male writers who were alcoholics (Davis, 1986) and writers who committed suicide (Lester, 1991). No differences were noted in birth order, though Lester (1987) concluded from a review of research on this variable that suicides were more often first-borns and middle-borns and less often last-borns. Finally, only one of the women (Dora Carrington) died within a month of her birth, indicating little evidence, therefore, for a "birthday blues" phenomenon (Lester, 1986).

Only five of the eight married women had children, and only two were married at the time of their death. Four of the six suicides were divorced or separated versus none of the nonsuicidal women. Four of the latter were widowed versus none of the suicides. In one case (Sylvia Plath) the separation appear to play a major role in the suicide. For three others (Diane Arbus, Anne Sexton and Sara Teasdale) divorce left them lonely and isolated, and all three seem to have been worse off psychologically after the divorce although all three had initiated their divorces. The lack of marital stability may have contributed to the psychiatric problems of these women but, alternatively, the psychiatric disturbance may have increased the likelihood of marital instability.

Though early parental loss is often associated with suicide later in life (Lester, 1992), only two of the suicides and one of the natural deaths had lost a parent through death. Among these losses, the writer who seemed to be most obviously affected by it was Sylvia Plath, whose writings indicate that her suicide was motivated in part by reunion fantasies toward her loved/hated father.

	method used	prior attempts/method/age
Diane Arbus	barbiturates	none
Dora Carrington	gun	car exhaust/38
Sylvia Plath	domestic gas	poison/20
Anne Sexton	car exhaust	several overdoses
Sara Teasdale	poison	none
Virginia Woolf	drowning	jumping 22/poison/31

² For surviving children and excluding half-siblings

Suicides are often found to have made prior nonfatal suicidal actions.³ Four of the suicidal women had made prior nonfatal suicidal actions (Dora Carrington, Sylvia Plath, Anne Sexton and Virginia Woolf). Interestingly, all switched methods for their final fatal suicidal action, an unusually high percentage (Clarke and Lester, 1989). Apart from Dora Carrington, the remaining three women who had a history of nonfatal suicidal behavior had been suicidal for a long period in their lives. Research indicates that those who make nonfatal suicidal actions are at higher risk for subsequent fatal suicide. Dorothy Parker made two nonfatal suicidal actions early in her life but died at the age of 73 of natural causes. Thus, four of the five women who made nonfatal suicidal actions subsequently killed themselves.

There is good evidence for alcohol and drug abuse in Anne Sexton (a suicide) and alcohol abuse in Edna Millay and Dorothy Parker (both natural deaths). Though research has shown that suicide is more common in drug and alcohol abusers, and though some theorists (for example Menninger [1938]) viewed alcohol and drug abuse as a form of suicide which he called *chronic suicide*), substance abuse does not appear to be relevant in the present sample of suicidal writers.

Perhaps the most startling results come when we look at the psychiatric disorders of the women. Of course, diagnosis after a person is dead is an unreliable process. However, there is evidence of a major affective disorder in four of the suicidal women versus none of the nonsuicidal women. Three of the suicides had received psychiatric treatment (Diane Arbus, Sylvia Plath, Anne Sexton), and two were psychiatrically hospitalized (Sylvia Plath and Anne Sexton). Virginia Woolf's affective disorder seems to have been bipolar (a manic-depressive disorder), and Sylvia Plath's disorder may also have been bipolar (Brian Barraclough, personal communication, 1974). Depression was also characteristic of Sara Teasdale, though an accurate diagnosis of her psychiatric condition is not possible. In contrast, none of the nonsuicidal women appears to have been chronically depressed or to have had an affective disorder.

	Psychiatric disorder
Diane Arbus	depressive disorder
Dora Carrington	none
Sylvia Plath	depressive disorder
Anne Sexton	depressive disorder
	hysteric neurosis
	substance abuse
Sara Teasdale	depressed mood
Virginia Woolf	depressive disorder
Colette	none
Käthe Kollwitz	none
Amy Lowell	none
Edna Millay	alcohol abuse
Georgia O'Keeffe	neurosis (anxiety disorder)
Dorothy Parker	alcohol abuse

³ The usual terms for these behaviors (attempted suicide and completed suicide) have been rejected as sexist since they imply that the behavior most common in men (completed suicide) is a successful behavior whereas the behavior most common in women (attempted suicide) is a failure. I have chosen to use the terms "nonfatal" and "fatal" suicide behavior/actions here (Canetto and Lester, 1993).

Recently, Andreasen (1987) has published a study of thirty faculty at the writers' workshops at the University of Iowa. Of these, 30 percent were judged to be abusing alcohol and 80 percent to have an affective disorder (both figures much higher than for a comparison group of non-writers). None of the writing faculty were schizophrenic, but two had already committed suicide by the time of the published report of the study.

Andreasen also studied the first-degree relatives of the writers and the comparison group. The relatives of the writers had a higher incidence of affective disorder (in both the parents and the siblings of the writers), but no differences in the incidence of alcoholism. Three of the first-degree relatives of the writers had committed suicide as compared to none of the comparison group's relatives.

Andreasen found also that the relatives of the writers had significantly more creative siblings than the relatives of the comparison group. (The writers and comparison group did not differ in intelligence test scores.)

Andreasen concluded that writing creativity and affective disorder were clearly associated and may have a genetic basis. Andreasen's results are consistent with a study by Kay Jamison on British writers who also had a high incidence of affective disorder (Holden, 1987). A study by Hagop Akiskal revealed that patients with moderately severe affective disorder have a higher incidence of creativity (Holden, 1987).

Holden noted that many of the patients with affective disorder appear to have a bipolar variant, with periods of depression and mania. This is perhaps true of some of the writers discussed in this chapter, such as Sylvia Plath and Virginia Woolf who appeared to have had periods of remarkable energy and enthusiasm. Creative episodes have similarities to mild levels of mania, both being characterized by high energy, a sensitivity to internal and external stimuli, a breakdown of intellectual inhibitions permitting more creative work, and an unusually good ability to concentrate. Holden concluded that a tendency toward bipolar affective disorder may facilitate creativity.

THE ROLE THAT CREATIVITY PLAYED

Being a creative artist involves a couple of risks that most people do not take. First, this intensely personal document that you produce (photograph, picture, poem, essay or novel) must be submitted to others for acceptance. Few writers have *never* suffered a rejection. Most endure many rejections before a work is accepted. This rejection is not merely a minor setback in a career. It is a rejection of an intensely personal product.

Second, artistic productions are reviewed by critics. Reviews are often critical. After all, a critic who praises everything without qualification would never receive acclaim as a reviewer! Critics have to be negative. Even when praising a work they think highly of, they typically find some small area to criticize.

Of the six suicides, Dora Carrington appears to have lost confidence in her ability as a painter, Sylvia Plath had just published her first novel to luke-warm reviews, Sara Teasdale was experiencing severe writer's block, and Virginia Woolf was acutely anxious in the time leading up to publication of her novels and depressed afterwards. Diane Arbus and Anne Sexton seemed least affected by their creative careers.

In addition to these difficulties with their artistic careers, the suicides seem to have been motivated by other factors. For example, Sylvia Plath's suicide seems to be determined more by her chronic depression, her attachment to her deceased father, and the break-up of her marriage than by her career. Sara Teasdale was finding it hard to write again. Poems did not flow easily any more, and a planned biography of Christina Rossetti was floundering. However, more important in understanding her suicide was her failure to develop a satisfying marriage and her ensuing loneliness, her chronic depression, and her growing, unfounded fear of a catastrophic physical illness. Although Virginia Woolf suffered from acute anxiety during the preparation of each novel and depression after the publication, and although her work was no longer held in such high esteem as she grew older, her suicide seems primarily motivated by her fear of her continual depressions. Her suicide seems to be an escape from the unbearable psychological torment she experienced when depressed.

COMMENT

It is clear that depression, both of psychiatric proportions and of moderate intensity, played a role in all of the suicides committed by the writers discussed in this section. It is clear also that for two of the women their fear of being unable to continue to be successful writers played an important role in their suicides. Sara Teasdale and Virginia Woolf feared that their work would never be held in as high esteem as it once was or that they would never be able to write again.

The life of a creative person is not easy. The public exposure of one's innermost thoughts and feelings is hard to endure, and the literary and public reaction to one's work is fraught with potential hurt. When a writer is plagued by severe depression and beset with interpersonal difficulties, it is even harder to develop the resources to withstand the criticism, learn from it or ignore it. Then, the criticism feeds into one's own self-doubts so deeply that it is hard to maintain the self-confidence to continue. Only those with low aspirations or a secure sense of self and with friends and loved ones to support them can withstand the pressure.

COMPARING THE SUICIDAL WOMEN WITH SUICIDAL MEN

Let us now compare the lives of the six creative women who completed suicide with the lives of six creative men who completed suicide. As before, let us first begin with some simple demographic information.

The women and men did not appear to differ in their age at the time of the suicide, their birth order or whether they completed suicide at a time close to their birthday (indicated by an *). With regard to birth order, three of the twelve suicides were first-borns or only children while five were last-borns.

	birth	death	age	birth order ⁴	field
Diane Arbus	3-14-1923	7-26-1971	48	2nd of 3	photography
Dora Carrington	3-29-1893	3-11-1932	38	4th of 5	painting
Sylvia Plath	10-27-1932	2-11-1963	30	1st of 2	poetry
Anne Sexton	11-9-1928	10-4-1973	44	3rd of 3	poetry
Sara Teasdale	8-8-1884	1-30-1933	48	4th of 4	poetry
Virginia Woolf	1-25-1882	3-28-1941	59	3rd of 4	novels
John Berryman	10-25-1924	1-7-1972	57	1st of 2	poetry
Hart Crane	7-21-1899	4-27-1932	33	only	poetry
Mark Gertler	12-9-1892	6-23-1939	46	5th of 5	painting
Vachel Lindsay	11-10-1879	12-3-1931	52	2nd of 6*	poetry
Cesare Pavese	9-9-1908	8-27-1950	41	2nd of 2*	novels
Mark Rothko	9-25-1903	2-25-1970	66	4th of 4	painting

When comparing the suicidal and nonsuicidal women, separation and divorce characterizes these suicides (rather than widowhood). For the men, in addition to those already separated (Gertler and Rothko), two of the remaining marriages were in severe trouble (Berryman and Lindsay). In fact, of the twelve suicides, only Virginia Woolf was securely married.

As noted above, early loss is often found in the lives of suicides. This is especially true for the men. Three of them had lost parents (the father in each case), and two others had lost close relatives with whom they were living (a grandfather in one case and sisters in another). As Bron, et al. (1991) noted, loss of the father seems to be especially important in the histories of suicides, and loss of the father was more common in these samples of suicides than loss of the mother.

	marital status	children	parental death/age/cause
Diane Arbus	divorced	2	none
Dora Carrington	single	0	none
Sylvia Plath	separated	2	father/8/natural
Anne Sexton	divorced	2	none
Sara Teasdale	divorced	0	none
Virginia Woolf	married (1st)	0	mother/13/natural
John Berryman	married (3rd)	2	father/11/suicide
Hart Crane	single	0	(grandfather/13/natural)
Mark Gertler	separated	1	none
Vachel Lindsay	married (1st)	2	(sisters/10/natural)
Cesare Pavese	single	0	father/6/natural
Mark Rothko	separated	2	father/10/natural

⁴ For surviving children and excluding half-siblings

	method used	prior attempts/method/age
Diane Arbus	barbiturates	none
Dora Carrington	gun	car exhaust/38
Sylvia Plath	domestic gas	poison/20
Anne Sexton	car exhaust	several overdoses
Sara Teasdale	poison	none
Virginia Woolf	drowning	jumping 22/poison/31
John Berryman	jumped	in front of train/16
Hart Crane	drowned	wrists/poison/16/32
Mark Gertler	gas	wrists/medication/46/49
Vachel Lindsay	poison	none
Cesare Pavese	poison	none
Mark Rothko	wrists	none

	psychiatric disorder
Diane Arbus	depressive disorder
Dora Carrington	none
Sylvia Plath	depressive disorder
Anne Sexton	depressive disorder
	hysteric neurosis
	substance abuse
Sara Teasdale	depressed mood
Virginia Woolf	depressive disorder
John Berryman	alcohol/drug abuse
	epilepsy
	depressed mood
Hart Crane	alcohol abuse
	paranoia
	depressive disorder
Mark Gertler	depressive disorder
Vachel Lindsay	schizophrenia
	epilepsy
	depressed mood
	paranoia
Cesare Pavese	depressive disorder
Mark Rothko	depressive disorder
	paranoia
	alcohol abuse

As with the women, a fair proportion of the male suicides had made prior nonfatal attempts and half had shown evidence of alcohol and drug abuse. The psychiatric state of the men seems worse than that of the women. Four of the men had depressive disorders, and two others had depressed mood. One was schizophrenic (Lindsay). Interestingly, two new symptoms appear in the men, two of whom may have had epilepsy and three of whom

showed signs of paranoia (delusions of persecution). These symptoms were absent in the women.

THE ROLE THAT CREATIVITY PLAYED

We saw above that the suicidal women were affected by the reception their work received. To recapitulate, of the six suicides, Dora Carrington appears to have lost confidence in her ability as a painter, Sylvia Plath had just published her first novel to luke-warm reviews, Sara Teasdale was experiencing severe writer's block, and Virginia Woolf was acutely anxious in the time leading up to publication of her novels and depressed afterwards. This seems to have been true for the men also.

John Berryman's life was disintegrating because of his uncontrollable alcohol abuse. His confidence in his ability to write had gone, and he no longer had the discipline to finish any creative work. He had a profound lack of self-confidence, preferring to teach undergraduates rather than critical graduate students. Although he had received awards for his writing, his aspirations increased. Once it was sufficient for his work to be published. Then he needed praise, and then he needed to be seen as the greatest living poet. Toward the end of his life, he needed extravagant praise for each draft of a potential poem and could no longer tolerate minor criticism. There were other contributing causes to his suicide, including his inability to stop his alcohol abuse and his disintegrating marriage (primarily a result of his alcoholism).

Hart Crane had struggled hard to get his poetry accepted. His work, when published, often received negative reviews. Furthermore, his lack of education and his abusive personal style made it difficult for him to broaden his scope and write essays and reviews to any great extent. He achieved some recognition and success, eventually obtaining a Guggenheim fellowship. At this point, his personal life and alcohol abuse resulted in an almost complete inability to write. It was likely that he would never produce a major work again. In addition, his alcohol abuse and his inability to form a lasting intimate relationship with anyone, homosexual or heterosexual, provided important motivations for his suicide.

Mark Gertler had doubts about his worth as an artist, especially in comparison to the dynamic trends in art taking place in Paris and the rest of Europe, led by Picasso and Matisse, and he had been depressed and suicidal. His interpersonal crises and physical health added to this career stress and made suicide even more likely.

Vachel Lindsay had never been a very good writer. Most people agreed that he was best as a reciter and performer of his own work. His later writing was criticized as quite poor, and he continued to be in demand only as a reciter. His suicide seems motivated by his deteriorating relationship with his wife brought about by his psychotic behavior, ending with violent assaults, and the stress resulting from the continual demand to keep touring and reciting in order to support his family.

Cesare Pavese was depressed after each novel had been completed, but he had developed many avenues of work in the field of literature, including publishing and reviews. His suicide, though, seems to be a result of his inability to form lasting relationships with women. He had ended up as a grown man living with his sister, suffering rejection from the women with whom he was infatuated and enduring loneliness and depression.

Mark Rothko seemed to be less concerned with doubts about his stature as an artist than with how his art would be viewed after his death. The establishment of a foundation to own, preserve and exhibit his art became a dominant concern to him. His suicide, however seems to have been more motivated by his disintegrating marriage and his physical and psychiatric health.

The creative work of four of the male suicides, therefore, seems to have played a role in their suicide (Berryman, Crane, Gertler and Rothko). This influence was weaker in Lindsay's suicide and barely present in Pavese's suicide.

CONCLUSIONS

It is clear that depression, both of psychiatric proportions and of moderate intensity, played a role in almost all of the suicides committed by the writers and artists discussed in this chapter.

It is clear also that concern over their worth as writers and artists played an important role in the suicides of many of these people, regardless of their gender. In this, therefore, we are supporting *beta bias* of concluding that women and men are similar. Despite the prejudice and sexism that women artists and writers faced in their lives, there seems to be no clear evidence from their biographies that the sexist nature of society contributed to their suicides. Of, course, this lack of evidence does not prove that sexism did not play a role, for the biographies may have been biased against documenting such sexism. Nonetheless, the factors of early loss, interpersonal difficulties, psychiatric disorder and concerns over their value as writers and artists appear to have been the major etiological factors in the suicides of both the creative women and the creative men.

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Chapter 15

VINCENT VAN GOGH

Maurizio Pompili

Early psychoanalytic thinkers unlocked the secret of creativity and art by postulating that there are products of neurosis that artists convey in their work rather than in symptoms and inner conflicts not otherwise compatible with reality. Such a brief statement is particularly true for Vincent van Gogh.

Van Gogh was born on March 30th 1853 and died on July 29th 1890. He was a Dutch Post-Impressionist artist, and his paintings and drawings include some of the world's best known, most popular and most expensive pieces.

He spent his early adult life working for a firm of art dealers. After a brief spell as a teacher, he became a missionary worker in a very poor mining region. He did not embark upon a career as an artist until 1880. Initially, Van Gogh worked only with sombre colours until he encountered Impressionism and Neo-Impressionism in Paris. He incorporated their brighter colors and style of painting into a uniquely recognizable style, which he developed fully during the time he spent in Arles, France. He produced more than 2,000 works, including around 900 paintings and 1,100 drawings and sketches, during the last ten years of his life. Most of his best-known works were produced in the final two years of his life, during which time he cut off part of his left ear following a breakdown in his friendship with Paul Gauguin. After this, he suffered recurrent bouts of mental illness, which led to his suicide.

Theodorus "Theo" van Gogh was born on May 1st, 1857, in the village Groot-Zundert in the province of Brabant, Netherlands. He was the son of Theodorus van Gogh and Anna Cornelia Carbentus. His elder brother was Vincent van Gogh. In 1886 he invited Vincent to come and live with him and, from March of that year, they shared a house in Montmartre. Theo introduced Vincent to Paul Gauguin, Paul Cézanne, Henri de Toulouse-Lautrec, Henri Rousseau, Camille Pissarro and Georges Seurat and, in 1888, he persuaded Gauguin to join Vincent, who had moved to Arles.

In Paris, Theo met Andries Bonger and his sister Johanna, whom he married in Amsterdam on April 17th, 1889. The couple lived in Paris where on January 31st, 1890, their son was born. On June 8th, the family visited Vincent, who was living near Paris in Auvers-sur-Oise. On July 27th, 1890, Vincent shot himself in Auvers.

One plausible reason for Vincent's suicidal action may have been that he wanted to stop being a burden to Theo, who financially maintained not only Vincent but also his own family

and their aging mother. Refusing any kind of medical surgery, Vincent died two days later in the presence of Theo. The next day, Theo reported these events to his wife and to his mother, and departed for Holland.

A few days later, on July 30th, Theo became profoundly depressed and showed serious signs of mental confusion. In September 1890, Theo unsuccessfully attempted to persuade the Durand-Ruel gallery to mount a memorial retrospective of Vincent's paintings. On September 20th 1890 in Paris, Theo, assisted by Emile Bernard, improvised a first retrospective posthumous exhibition in his former apartment. In October 1890, at the request of Andries Bonger, his brother-in-law, Theo was accepted into the asylum of Auteuil, where he was diagnosed with "acute maniacal excitability with megalomania and progressive general paralysis." At the request of his wife, in November 1890, he was transferred to the Geneeskundig Gesticht voor Krankzinnigen (Medical Institution for the Insane) in Utrecht, The Netherlands. There he died two months later at the age of 33 from complications of the final phase of syphilis and was buried at the Eerste Algemene Begraafplaats Soestbergen. Two and a half decades later Theo van Gogh's corpse was transferred to France, and on April 8th, 1914, both brothers were re-buried side by side at the cemetery of Auvers-sur-Oise.

AN ARTIST IN SEARCH OF A MEDICAL DIAGNOSIS

Vincent van Gogh was a wonderfully accomplished artist whose work is now widely appreciated. He created a great number of masterpiece paintings and drawings in just one decade devoted to art. His productivity is even more remarkable when considered in the context of his debilitating illness. He suffered from medical crises that were devastating, but in the intervening periods he was both lucid and creative. He left a profound, soul-searching description of his jagged life in his correspondence that provides the basis for the present analysis. (Arnold, 2004).

Lester (2000), investigating the chronic maladaptive life style of van Gogh, suggested the presence a personality disorder. Vincent was often angry, he quarrelled with everyone, especially with those who were rivals or whom he felt were superior to him. Lester referred this anger to Vincent's mother who was too preoccupied with her own guilt and depression and her subsequent children to provide Vincent with the love he needed. In this scenario, the Freudian view of suicide is that the anger felt toward someone else, suppressed or repressed and directed against the self, may have had a role in determining Vincent's death by suicide.

Vincent found that his childhood anger, as frightening as only that of a rejected child can be, could not be unleashed without fear of a frightening retribution from people much larger and stronger than he. Hoping to appease them through suffering, he turned their expected anger as well as his own against himself. By provoking their anger, he encouraged them to be angry with him, so that he would not be angry with them. In adulthood, this thinking enabled Vincent to pride himself on being "chained to misfortune and failure." "I do not envy the so-called fortunates and the ever successful, as I can see through it too much," he wrote. "Take 'The Prisoner' by Gérôme - the man lying fettered is most certainly in an unpleasant situation, but to my way of thinking it is better to be him than that other fellow who has the upper hand and is nagging him."

At the hospital, Felix Rey, the young physician attending van Gogh, diagnosed epilepsy and prescribed potassium bromide. Within days, van Gogh recovered from the psychotic state. About three weeks after admission, he was able to paint his *Self-Portrait with Bandaged Ear and Pipe*, which shows him in a serene state. At the time of his recovery and during the following weeks, he described his own mental state in letters to Theo and his sister Wilhelmina: "The intolerable hallucinations have ceased, in fact have diminished to a simple nightmare, as a result of taking potassium bromide, I believe." "I am rather well just now, except for a certain undercurrent of vague sadness difficult to explain." "While I am absolutely calm at the present moment, I may easily relapse into a state of overexcitement on account of fresh mental emotion." He also noted "three fainting fits without any plausible reason, and without retaining the slightest remembrance of what I felt." Creative activity alternated with episodes of listlessness to the point of exhaustion. Unpredictable mood shifts of dysphoria alternating with euphoria or with "indescribable anguish" became more frequent. Excerpts of letters written after his first breakdown document his mental states that in the past had been present to a lesser degree.

Several authors have offered a tentative diagnosis of schizophrenia for van Gogh. In view of both the absence of any of the fundamental symptoms of the disorder and the presence of psychotic episodes with amnestic-confusional features and complete recovery, this diagnosis appears improbable, in spite of the fact that late-onset schizophrenia was diagnosed in one of his sisters.

Following two major disappointments (an unrequited early love and a failed career as an evangelist), van Gogh clearly experienced prolonged episodes of depression, experiences which preceded major career changes. He also experienced sustained periods of hypomania or mania. His career as an evangelist ended when he developed altruistic religious mania. A bipolar history of prolonged periods of extremely high levels of energy, enthusiasm, and productivity alternating with episodes of depression is not uncommon among writers and artists, and the hypomanic phase is often not identified (Goodwin & Jamison, 1990). According to Blumer (2002), the artist's increasingly elevated mood during his exciting stay in Paris was probably a factor in his use of absinthe, the substance that precipitated his second major illness. Vincent experienced seizures only after his use of absinthe which has convulsant properties. He never experienced generalized seizures but had only partial seizures, suggesting the presence of a latent epileptogenic zone, most likely in the mesial-temporal area, that was activated by his use of absinthe. As postulated by Gastaut (1956), a perinatal brain lesion may have resulted in van Gogh's severe reaction to absinthe - the partial seizures, the marked interictal dysphoric disorder, and the psychotic episodes with prominent amnesia.

When he became increasingly ill during the last two years of his life, van Gogh did not experience any of the sustained mood changes characteristic of bipolar disorder. Instead, he experienced sudden and brief changes of depressive mood, elation, anxiety, or fury, and his intense artistic efforts were frequently disrupted by episodes of listlessness. These intermittent pleomorphic changes developed after onset of seizures and are specific for the dysphoric disorder of epilepsy. While interictal dysphoric disorder and psychosis tend to become manifest after an interval of years following the onset of epilepsy, there are also patients with dysphoric or epileptoid traits in the absence of overt seizures. These patients often have identifiable subtle brain lesions (Blumer, 2000, Blumer, et al., 1998). Suicide risk has been

reported as major danger in patients suffering from epilepsy (Pompili, et al., 2005, 2006a, 2006b, 2007).

Suicide is most commonly associated with depressive disorders in the general population, but seems to be associated primarily with psychotic disorders rather than depression in epilepsy (Mendez & Doss, 1992; Kanemoto, et al., 1999). Janz (1969) reported that suicide does not occur among patients with ongoing severe epilepsy, but rather in those patients who have just become free from seizures. According to Blumer, et al. (1998), suicide among patients with epilepsy is not the result of psychosocial difficulties caused by having seizures, but occurs in the presence of significant interictal and at times postictal psychopathology. Williams (1956) reported 21 such cases among his 100 patients with ictal emotional experience, and five of the 21 patients had made suicide attempts during the postictal phase. Mendez and Doss (1992) described four cases of suicide in epileptic patients. One patient who had paranoid delusions was a postictal suicide.

According to the literature, the emergence of psychosis is traceable during ictal, postictal, and interictal states. It is possible that psychiatric disorders in epilepsy may result from the inhibitory activity that develops in reaction to excessive excitatory activity of the chronic seizure disorder (Stevens, 1975; Engel, 1989). This mechanism, which is still insufficiently understood, has been named “forced normalization” in cases where the electroencephalogram is normal, or “alternating psychosis” in cases where the clinical seizures have been suppressed. Psychiatric symptoms would be, therefore, the result of an enhanced inhibitory response, most commonly in the prodromal and postictal phases, and rarely during increased seizure activity as in peri-ictal psychosis.

Blumer, et al. (2002) suggested that, if predominance of inhibition results in the persistent suppression of seizures in chronic epilepsy, some patients are at risk of developing the most severe psychiatric complications. Following this model, a dysphoric disorder with suicidal depressive moods, psychosis, or a combination of both may result. Likewise, the acute engagement of inhibitory mechanisms by the seizure event tends to result in peri-ictal dysphoric symptoms that may include postictal depressive mood with suicidality (Blumer, 2002).

One important implication emerging from the study by Blumer, et al. (2002) was that suppression of seizures in long-standing epilepsy may be associated with suicide risk. In their study, the five suicides registered during a 12-year period occurred in patients with long-standing partial seizures and dysphoric disorder, and occurred a short time after full control of the seizures was achieved. Suicide risk in patients with epilepsy seems associated primarily with the often sudden episodes of intense depressive mood during the interictal phase. Blumer, et al. reported that a high suicidal risk has been observed in patients who experience an ictal depressive mood that extends into the postictal phase for a period of one hour to three days. This fact is consistent with Kraepelin’s (1923) observation of dysphoric episodes in suicidal epileptic patients.

Bleuler (1949) reported that the existence of an epileptoid temperament analogous to schizoid or cyclothymic temperaments, before or independent of the respective major illness, was often debated in the premodern psychiatric literature when epilepsy was a major topic. A cyclothymic temperament has been also associated with suicide risk (Akiskal, et al., 2003). More recently, an irritable temperament was reported to be a predictor of suicidal behaviour (Pompili, et al., 2008). Blumer (2002) observed that the early intense emotionality of van Gogh, with the contrasting poles of explosive irritability on the one hand and goodness and

religiosity on the other, may be considered an expression of this temperament independent from his cyclothymic disposition.

Vincent van Gogh's suicide may have been an unexpected event, perhaps precipitated by a dysphoric mood. Remission of the seizures may have favored the final depressive event but, when he had recovered from his severe illness upon discharge from the asylum, the support from his brother, upon whom he had depended totally for his career as an artist, had become seriously threatened. Although the artist had been able to remain productive, a depressive mood became more evident. In the past, he had reacted to crucial losses with marked depression, and this illness probably was the main factor in his death.

SUICIDE

Reflecting his plunging mood Vincent painted *The Undergrowth With Two Figures* in June 1890, one month before his suicide. It has a lonely and depressive style and coloration. In one of his last letters, dated July 1890, he wrote sadly to his brother Theo, "I feel...a failure. That's it as far as I'm concerned...I feel that this is the destiny that I accept, that will never change."

In contrast, one of his last paintings, which he completed in late July 1890, titled *Wheat Field With Crows*, reflects an ambivalence of optimism and hopelessness with the dark clouds of depression slowly lifting up from the skyline. It is common knowledge among clinical psychologists that individuals with bipolar disorder (known as manic depression during Van Gogh's time) invariably attempt suicide while rising up from the depression toward the manic phase. A few days after he finished this painting, Vincent Van Gogh killed himself with a gunshot to the chest.

In December 1888, when his violent argument with Gauguin occurred, his mood began to revert back to the manic state. It resulted in his self-mutilation, which is a common behavior in mental patients during manic excitement. Without access to modern medicine, the frequency of these self-destructive episodes increased until Van Gogh's suicide in 1890.

Theo became engaged toward the end of 1888, married four months later, and became a father in early 1890. Each event coincided with an exacerbation of van Gogh's condition, and he may have started drinking more whenever he felt that his unique bond with Theo was threatened. Shortly before entering the asylum at Saint-Rémy, Vincent had written to his brother, "And without your friendship I would be driven to suicide without pangs of conscience - and as cowardly as I am, I would finally do it." Theo had continued to support his brother without fail. Suicidal gestures by Vincent, reported at the time of his initial hospitalization in Arles and during his stay at the asylum, had consisted of ingesting turpentine, paint or lamp oil, and were carried out in a confusional state. Such an episode was described by the painter Signac (who had been permitted to take van Gogh from the hospital in Arles to visit his studio). Signac described van Gogh as being entirely rational until after suffering a minor attack, at which point he put a bottle of turpentine to his mouth and had to be brought back to the hospital. At discharge from the asylum in May 1890, van Gogh was judged cured by his physician. The artist then moved north of Paris to Auvers-sur-Oise, where he spent the last 10 weeks of his life. Theo had recommended Auvers, where van Gogh could

live near Paul Gachet, a physician and friend of the artist. He abstained from drinking by now and remained free from seizures and confusional episodes.

His art was beginning to gain recognition, and one painting had been sold, but further financial support became uncertain as Theo's health began to fail. There were some bitter words between the brothers, and Vincent felt himself to be a burden. Still, he worked at a furious pace, completing 70 paintings and 30 drawings during his 70 days at Auvers.

The heavenly bodies, so luminous in the past, were now absent from his skies, except for a single peculiar occasion (*The White House at Night With Figures and a Star*). He painted immense fields of wheat under dark and stormy skies, commenting, "It is not difficult to express here my entire sadness and extreme loneliness" (van Gogh, 2000). In one of his last paintings, *Wheat Field With Crows*, the black birds fly in a starless sky, and three paths lead nowhere. He borrowed a gun from his innkeeper "to scare the crows away" when he was painting. There was another episode of fury directed at Dr. Gachet, who had failed to frame a painting by Guillaumin as van Gogh had demanded. Vincent gestured toward the gun in his pocket, but he walked away. In his last letter sent to Theo, he mentioned that he wanted to replenish his stock of paint and asked for help to this end. Three days later, on a Sunday, Vincent shot himself in the lower chest or upper belly in a field outside Auvers. "I couldn't stick it any longer, so I shot myself," he told a friend. He died two days later with Theo next to him. It has been assumed that his *Field With Stacks of Wheat*, a bright picture of grain harvested and sheaved, may have been his very last - a symbol of work completed (Hulsker, 1977).

As a suicide he was not entitled to a Christian burial. His funeral took place on a Wednesday. Eight people came, among them Tanguy, Lucien Pissarro (whose father, Carnale, was going blind) and Emile Bernard. Gachet, of course, was there. The coffin, draped in a white sheet, rested on the billiard table in the café. Theo and Bernard hung some of the Auvers paintings around the room to form 'something like a halo' around the dead man. There was controversy after death as there was in life. The Catholic priest had forbidden the use of the town hearse for the burial of a suicide, so the neighboring township of Méry had to provide one. At the graveside, Dr Gachet tried to make a speech, but no one could understand him since he wept so much. Theo said a few words of thanks. It was over.

VAN GOGH ON SUICIDE

Irving Stone (1984) wrote an impressive book about van Gogh's life. Among the very many interesting situations, here is what Stone reported of a particular crucial moment of Vincent's life:

"... he [Vincent] had seen every one of his eleven companions go through his own particular form of insanity: the noisy maniac who tore his clothes off his body and smashed everything in sight; the man who howled like an animal; the two syphilitics; the suicide monomaniac; the paralytic who suffered from excess of fury and exaltation; the epileptic; the lymphomaniac with a persecution mania; the young blond who was being pursued by secret police" (page 444). "I'm sorry, Vincent," said Doctor Peyron, "but I cannot give you permission to leave the ground again. In the future you must stay within the walls." "You will permit me to work

in my studio?" "I advise you against it." "Would you prefer me to commit suicide, Doctor?" "Very well work in your studio. But only for a few hours a day." (p. 453)

Theo admired his elder brother, probably all his lifetime, but communicating with him proved to be difficult even before Vincent opted to follow his artistic vocation. The communication between both brothers suffered from diverging definitions of standards, and it was evidently Theo who kept on writing letters. Vincent's answers survived, but little of Theo's input. Theo was often concerned about Vincent's mental condition, and he was among the few who understood his brother. The two brothers maintained an intensive correspondence with Theo often encouraging his depressed brother. These letters have been collected and published, revealing of the artist's mind and nature. Here is a brief selection from Van Gogh on suicide divided by year and extracted from letters to Theo (Stone, 1934):

1881

Then, not at once, but very soon, I felt that love die within me. a void an infinite void, came in its stead. You know I believe in God; I did not doubt the power of love, but then I felt something like "My God, my God, why hast Thou forsaken me? And everything became a blank. I thought: have I been deceiving myself? ... "O god, there is no God! The emptiness, the unutterable misery within me, made me think Yes, I can understand that there are people who drown themselves. I but I was far from approving of things, and I found the strength in the manly word of Father Millet " It has always seemed to me that suicide was the deed of a dishonest man." (p. 110)

A little time in the hospital, and then I set to work again, the woman with the baby posing for me. To me it is clear as day that one must live in the reality of family life if one wishes to express that family life intimately – a mother with her child, a washer-woman, a seamstress, whatever it may be. By constant practice that hand must learn to obey this feeling for a household of one's one. To try to kill that feeling would be suicide. (p. 133)

One of the stupidest things about painters here is that laugh at Thys Maris. I think that as terrible as suicide. Why suicide? Because Thys Maris is of much the personification of everything high and noble that in my opinion a painter cannot mock at him without lowering himself. (p. 184)

1883

Well, Theo you must read Madame Bovary; do you remember the first Madame Bovary, who died in a nervous attack? It was something like that, but complicated by the girl's having taken poison. She had often said when we were talking quietly together "I wish I could die now," but I had never paid attention to it.

One morning, however, she slipped on the ground. At first I thought it was only weakness, but her state became worse and worse. It was strychnine she took, but the dose was too small, or perhaps as an anodyne she took chloroform or laudanum, the exact antidote for strychnine.

She had sent off immediately to a doctor in Utrecht. I think it probable that she will get quite well again, but I am afraid a long period of nervous suffering will follow. Now that she tried

suicide and failed, I think it has given her such a fright that she will not easily try it a second time. (p. 275)

1888

Do you realize that I should far rather give up painting than see you killing yourself to make money? If you understand so well that “to prepare oneself for death” the Christina idea (happily for him, Christ himself, it seems to me, had no trace of it, loving as he did people and things beyond all measure, according to the folk who can only see him as a little cracked) is idle- can’t you see in the same way that self-sacrifice, living for other people, is mistake if it involves suicide? For in that case you actually make your friends into murderers. (p. 344)

1889

I reproach myself for my cowardice; I ought rather to have defended my studio, had I had to fight with the gendarmes and the neighbours. Others in my place would have used a revolver, and certainly if as an artist one had killed some rotters like that one would have been acquitted. I should have done better so. As it is I have been cowardly and drunk – and ill as well. Faced with the suffering of these attacks, I feel very frightened too – like someone who meant to commit suicide but, finding the water too cold, struggles to regain the bank (p. 447)

MEDICATIONS AND ALCOHOLISM

Van Gogh is reported to have been a heavy drinker of absinthe, a distilled, highly alcoholic beverage (45%-75% ABV). It is an anise-flavored spirit derived from herbs, including the flowers and leaves of the herb *Artemisia absinthium*, also called wormwood. On Christmas Eve 1888, after Gauguin already had announced he would leave, van Gogh suddenly threw a glass of absinthe in Gauguin’s face, then was brought home and put to bed by his companion. A bizarre sequence of events ensued. When Gauguin left their house, van Gogh followed and approached him with an open razor, was repelled, went home, and cut off part of his left earlobe, which he then presented to Rachel, his favorite prostitute. The police were alerted. He was found unconscious at his home and was hospitalized. There he lapsed into an acute psychotic state with agitation, hallucinations, and delusions that required three days of solitary confinement. He retained no memory of his attacks on Gauguin, the self-mutilation, or the early part of his stay at the hospital. His murderous gesture directed against Gauguin was reported by Gauguin in his memoirs. The scandalous event in the house of prostitution and van Gogh’s subsequent hospitalization were recorded in the local press. Some plausible explanations were later offered for the strange happenings. Already psychotic, van Gogh may have carried out the attack on Gauguin while driven by hallucinatory command voices and may have cut off part of his own ear in self-punishment for his offensive voices. This psychotic logic was perhaps influenced by van Gogh’s knowledge of the bullfight ritual, in which the matador presents a cut-off ear of the killed bull to a fair lady of his choice.

According to Wolf (2001), a striking feature of van Gogh’s famous painting *The Starry Night* is the yellow corona surrounding each star. The use of yellow characterizes many of van Gogh’s paintings, and much speculation surrounds van Gogh’s fascination with this vibrant pigment. Because numerous disorders have been diagnosed posthumously in this

artist, various theories have been proposed to explain how van Gogh's physical state may have influenced his work. Two theories center on why he used so much yellow.

First, he was fond of absinthe, a popular liqueur containing thujone. Excessive consumption of this liqueur may cause the consumer to see all objects with a yellow hue. Investigations conducted in 1991, however, showed that a person must drink 182 litres of absinthe to produce this visual effect, and so we can discount this theory. A second and more likely explanation involves overmedication with digitalis. People receiving large and repeated doses of this drug often see the world with a yellow-green tint. They complain of seeing yellow spots surrounded by coronas, much like those in *The Starry Night*. The artist's physician, Paul-Ferdinand Gachet, may have treated van Gogh's epilepsy with digitalis, a common practice at that time. In one of van Gogh's three portraits of Gachet, the physician holds a stem of *Digitalis purpurea*, the purple foxglove from which the drug is extracted.

WHAT IF VAN GOGH HAD BEEN GIVEN MODERN TREATMENTS?

According to Arnold (2004), van Gogh had manic depression, a chronic mental illness believed to affect many creative people. Although treatment with lithium carbonate is now available, the drug also dampens creative abilities. Many people believe that artists overcome suffering with their creative acts, but suffering may also overwhelm the artist. Had lithium carbonate therapy been available, van Gogh might have defeated his manic depression, avoided his tragic fate, and grown further as an artist. "If I could have worked without this accursed disease, what things I might have done," he wrote in one of his last letters.

What would have been the impact of modern psychopharmacological treatment on van Gogh? Long-term lithium treatment has been associated with reduced risk of suicide and suicide attempts in patients with bipolar disorder (BPD) or other major affective disorders. Baldessarini, et al. (2006), in a quantitative meta-analysis based on 31 studies with information about suicidal acts with and without lithium treatment, the overall incidence of suicidal acts (suicides and attempts) was nearly five-fold lower during treatment with lithium, indicating an approximately 80% reduction of risk.

Cole (1999), in commenting on the issue of creativity as a possible product of psychiatric disorders, stated that creativity *per se* is not something that happens in a vacuum or on while on a "high"! It depends on culture, experiences, background, socioeconomic status, genetics and, often, depressed moods. Creativity, and even humor, is as strong in a depressed state as in a manic state. Even though it will be expressed differently, and not come as quickly, the humor is often very insightful and funny. Moreover, even if we accept that treatment with lithium might have hindered Van Gogh in his painting, it is extremely unlikely that his artistic genius would have been lost while on a mood stabilizer like lithium. His creative capacity, tremendous as it was, may even have been enhanced and improved because of lithium. While people with manic depression often have certain creative capacities, and they make up a disproportionate number of all artists, manic-depression does not make the person creative.

THE ROLE OF THE FAMILY

Plagued by loneliness, Vincent never ceased to yearn for closeness with another human being, but closeness meant for him a merger that was both mental and physical. His fierce, almost mystical determination to achieve this goal was so powerful that it threatened his intended partner. It frightened parents, relatives, women, artists, and even his brother Theo, contributing to the failure of every attempt at intimacy. Learning to expect these failures, he substituted nature, art and books for friends, marriage and children.

To Vincent, death and rebirth were opposite and complementary, but they were also the same - a point of view identical to the "union beyond the opposites" of Hinduism. Like the old man and the child, the cut sheaf and the new wheat, as well as the reaper and the sower, were paired symbols of death and rebirth, but each pair was also a symbol of infinity and eternity. Similarly, he noted that both his tortuous old olive trees and his Provencal harvest scenes contrasted and formed a unity with the paintings of colorful spring growth.

Lubin (1972) has written a brilliant psychological biography of van Gogh. He approached the case of van Gogh through psychoanalysis. He began by highlighting that, "Like the figure in the sermon, Vincent was a stranger on the earth. From the remote Drenthe country of Holland, he had bemoaned the fate that made him "wander and wander forever like a tramp, finding neither rest nor food nor covering anywhere." Later, at Arles, he was to describe himself as a traveler going to a destination that did not exist."

A fireplace was another favorite subject of van Gogh, and its anthropomorphized flames stood at once for death and rebirth. One of his letters quotes a passage from his reading that makes this clear. "To see the flames be born, rise, flicker and supplant one another as if craving to lick the pot with their tongues of fire, and to think that such is human life: to be born, to work, to love, to grow, to disappear." This was not the end, however, for the smoke rose to a star in heaven, "a star that sends its rays through the opening in the chimney as if to call me."

In 1884, Vincent felt in love with Margot. Not wishing to part with a useful helper, Margot's family strenuously objected to her relations with this strange fellow. Unfortunately, Margot was a woman with formidable emotional difficulties, extremely vulnerable to her family's disapproval, and she became "excessively melancholic" and "felt deserted by everybody and everything." When she told Vincent she wanted to die, he tried in vain to rescue her from her family, but this only stirred up more trouble. The drama reached its climax when Margot attempted suicide by swallowing strychnine. She had a convulsion while walking the fields with her controversial friend. Finally, she was sent off to a sanitarium in Utrecht, and the relationship seems to have terminated.

According to Lubin (1972), the fate of other offspring in the family as well as Vincent's may reflect deficiencies in his mother's child-rearing practices, although it would be wrong to draw definite conclusions from this evidence. Like Vincent, Theo also suffered from severe attacks of depression and anxiety. Wil, the only one of his three sisters with whom Vincent had friendly relations, developed an incapacitating psychosis, probably schizophrenia, and was confined in a mental hospital until her death in 1941. Cor, the youngest brother, died in South Africa at the age of thirty-three. An acquaintance claimed that he committed suicide.

Additional light may be cast on Vincent's early relationship with his mother by reviewing his relations with other women. Because of the powerful tendency to repeat behavior patterns,

a man's feelings about women reflect in some measure his attitude toward the first woman in his life. The mate he chooses, the tendency toward success or failure in love, the kind of love relations he seeks, all bear the stamp of this first love, both in its sweet and its bitter components. Vincent's relations with women always ended in disaster. Ursula Loyer and Kee Vos-Stricker refused his love and caused him intense suffering. His association with Sien disrupted his relations with his own family. She herself proved to be completely untrustworthy, and he was forced to abandon both her and her children. His attempts to help Margot in her distress only increased the turmoil in her family and led to her attempted suicide. With Ursula and Kee he was in the position of a child demanding the love of an unloving mother, and with Sien and Margot he reversed this role, becoming a parent whose child could not accept the loving care he offered. In all these relationships the evidence suggests that Vincent unconsciously sought out situations that would result in disappointment and humiliation.

Vincent was also involved in the problems of another ailing woman, known only as "S." Theo had brought her into the apartment on the Rue Lepic, but she caused so much difficulty in the household that he finally issued an edict: "Either she gets out or I get out." Vincent, however, warned him that "by treating her harshly you would immediately drive her to suicide or insanity, and the repercussions on you would be sad indeed and leave you a broken man." S, Vincent observed, was "seriously deranged" and "not cured yet by a long shot." Andries Bonger, a friend of Theo who was also sleeping in the apartment at the time, added, "Morally she is seriously ill." Vincent volunteered to save the day: "I am ready to take S off your hands, i.e., preferably without having to marry her, but if worst comes to worst even agreeing to a marriage of convenience." Considering Vincent's past patterns, his offer is not surprising. His offers to marry Sien and Margot had also been more on the basis of pity than love. His assertion that Theo's mistreatment would "drive her to suicide or insanity" and would leave him "a broken man" suggests that this compassion for suffering women was based on a fear of destroying them and then being punished for it. When the woman was the aggressor, however, like Madame Tanguy, his thoughts could turn to destruction without regret.

The extent to which Vincent was overtly depressed in Paris is uncertain, although shortly after leaving he wrote, "In Paris one is always as sad as a cab horse." One reported episode, perhaps apocryphal, suggests the possibility of a depressive spell. An English dealer named Alexander Reid, who also shared the apartment with the two brothers for a while, became melancholic after being rejected by his sweetheart. Vincent responded to Reid's suffering by suggesting suicide à deux. This appeared to Reid as altogether too drastic a solution.

In these years, he was not yet ready to kill himself. He regarded life as a necessary preparation for death, both from the standpoint of a need to "lead the Christ life" and a need to produce pictures that would ensure his immortality. "I want to be somebody in my time, to be active," he wrote, "so that when one dies one can think, I go where all those go who were daring go." Later in life, however, his attitude was less moralistic. In 1887, for example, he wrote, "It's better to have a gay life of it than to commit suicide," and in 1889, on the verge of acknowledging the impulse that his earlier thought had been staving off, he said that he took the remedy prescribed by Charles Dickens to prevent suicide - a glass of wine, bread with cheese, and a pipe of tobacco.

Resentment toward those one loves and on whom one is dependent is prominent among those who commit suicide. Vincent recognized this when he wrote that killing oneself turns

one's friends into murderers. Largely repressed because it was inimical to his conscience, his resentment toward Theo - his closest friend - was probably a powerful motivating force in his own suicide. The parents' perception of Theo as a handsome, refined child no doubt accentuated Vincent's feelings of being ugly and bad and turned Theo into a new edition of the perfect first Vincent (the first-born child in the family who died and after whom Vincent was named), another competitor with whom he was unable to compete. The fact that Theo had the wife and child that Vincent so devoutly desired for himself would have stirred up these old feelings of jealousy and resentment and, as a consequence, he would have felt more guilty than ever, especially at a time when Theo was having serious difficulties of his own.

His tormenting loneliness and sense of being an outcast were reflections of an omnipresent, though sometimes hidden, depression. They erected a barrier that isolated him from human companionship. Being in a crowd, and becoming aware of the closeness of happier people in it, intensified his loneliness and drove him further back into himself. He longed for intimacy with others, yet sought out solitude. It was the lesser of two evils. When he felt rejected or unsuccessful in a task, the self-doubt and self-depreciation that he felt during his depressions were intensified. Feeling guilty and doubting his own worth, he often thought that others regarded him as bad and worthless. Human intimacy, therefore, threatened him with punishment and shame. As one biographer (Lubin, 1972) has written, the fact that he was self-taught enabled him "to comply with the promptings of his own impulses, to preserve the primal vigor of his instincts and the plenitude of his own resources" but, first of all, it was a necessity that grew out of his need for isolation.

The life of Vincent van Gogh was a never-ending struggle to control, modify, glorify, or deny a deep-rooted melancholy and loneliness. Religion and art were simply different means he employed for this purpose.

Many theories have been advanced to explain Vincent's suicide. He might have experienced fear of a relapse, fear of a loss of creative power, fear of success, jealousy, revenge, self-punishment; or it was the desire to emulate Christ.

From beginning to end, the depression that permeated Vincent's life cast an indelible stamp on his art. From The Hague in July 1882, for instance, he wrote, "In either figure or landscape I should wish to express not sentimental melancholy but serious sorrow." By becoming the recorder of sad people rather than one of them, he disclosed his sadness, but at the same time kept it at a distance. In one of his earliest pictures, *Miners*, drawn in the Borinage soon after he decided to become an artist, he tried to reveal "something touching and almost sad in these poor, obscure laborers - of the lowest order, so to speak, and the most despised." Seeing himself in the same light, the work was a self-portrait as well as an exposé of society.

He was forever sketching pairs of people - companions and lovers who stood together, walked together, sat together, worked together, grieved together, and lay together. Typically, one partner is close to the other. They are arm-in-arm, they embrace, or their bodies touch. In the characteristic van Gogh pair, one figure overlaps the other.

His solitude provided necessary time for fantasy, reflection, study and reading. In his first letter to Theo after deciding to become an artist in 1880, he stressed the importance of his self-isolating proclivities, an explanation that was both a rationalization and an insight. His shocking appearance and his life of poverty and neglect, he said, "was a good way to assure the solitude necessary for concentrating on whatever study preoccupies one."

Vincent was overtly masochistic. This can be seen in the humiliation and physical abuse that he brought on himself, his ascetic habits of eating and dressing, his fear of success, and his self-mutilation. His parents had some awareness of this tendency. His mother feared, "that wherever Vincent may be or whatever he may do he will spoil everything," and his father remarked, "It seems as if he deliberately chooses the most difficult path." His eccentricity made him the butt of jokes, and his sad face stirred a sympathetic response. In part, such behavior revealed his deep unhappiness; in part, it was an exhibitionistic demand for attention and love intended to appeal to an audience that would enjoy mocking him or would be attracted to his misery (Lubin, 1972).

When Vincent wrote, "I resign myself to everything and put up with everything," he was following a childhood pattern of appeasing a mother whom he experienced as unloving and cruel. Having learned early that acceptance was more readily obtained by being the victim than by being the victor, he could testify as an adult, "[I]t is better to be a sheep than a wolf, better to be slain than to slay - better to be Abel than Cain... ..better to be ruined than to do the ruining," and, he added, not long after, "I consciously choose the dog's path."

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Chapter 16

ARTIST SUICIDE IN THE CINEMA

Steven Stack and Barbara Bowman

Occupation and suicide has been the subject of a significant amount of research in the social sciences (Stack, 2001; Wasserman, 1992), but the overwhelming majority of research studies have been restricted to the health professions, especially the occupation of physician (Stack, 2001). Of the 640 occupations recognized by the U.S. Bureau of Labor Statistics, less than 30 have been the subject of one or more journal articles. Caution has to be exercised in disentangling actual suicide risk factors associated with occupational strain *per se* from social and psychiatric covariates of an occupation including pre-existing psychiatric morbidity and demographic characteristics (Stack, 2001; Wasserman, 1992).

One of the better-researched occupations in suicide studies is that of artists. However, previous work on artist suicide has often been restricted to descriptive case studies of famous artists. Other research often lumps all artists together into a broad category with little attention paid to which subgroups contribute the most to suicide risk. A chapter in the present volume makes available for the first time a comprehensive presentation of national data on the distribution of artist suicide by subfield of art (Chapter 13). However, there is no known work on how artist suicide is presented in the cinema. Do presentations in movies reflect the realities of artist suicide or are they a social construction?

The present chapter extends knowledge about artist suicide in the following ways. It makes three contributions to the quantitative literature and five to the qualitative literature on artist suicide and movies. Regarding quantitative contributions, this chapter first explores the frequency of the occurrence of artist suicide in the cinema. In particular, do artists get their fair share of representation in film or are they under or over represented? Second, are some subtypes of artists (e.g., actors or dancers) given a disproportionate amount of attention in cinematic portrayals of artist suicide? Third, with respect to internal motives for suicide that are often stressed in the backgrounds of famous artists like Van Gogh (e.g., major depression and substance abuse), are these motives more likely to be portrayed for artist suicides than suicides of other occupations? A quantitative analysis is undertaken to distinguish suicides in film stemming from internal motives from all other motives. Therein artist suicides are used as an independent variable. The hypothesis is that artist cinematic suicides will be more likely than all other cinematic suicides to be attributed to internal motives.



Figure 1. *Control* (2007, Becker Films, Director: Anton Corbijn). Ian Curtis, lead singer of the popular British band, Joy Division, moments before his suicide by hanging. “I give everything I have on stage, and now they want more.” – Ian Curtis.

The second section turns to a qualitative assessment of five selected apparent patterns in the presentation of artist suicide in movies. These patterns include (1) occupational strain with a focus on loss of creative skills, (2) occupational strain related to artist labor markets and competition for contracts as a cause of suicide (see Chapter 13), (3) the psychological context of introversion in conflict with the extroverted occupational demands of performers, (4) illustrations of standard psychiatric factors, and (5) co-morbidity with physical disease (e.g., AIDS).

METHODOLOGY

For the quantitative analysis, data on the distribution of artist suicides in the real world are taken from Chapter 13 in the present volume. These data are the most comprehensive available on artist suicide at the time of this writing.

Data on suicide in film are taken from the ongoing *Hollywood Suicide* project of the present writers. This project has been ongoing since 2004. Briefly, a list of potential suicide films for inclusion in the project was taken from six web based filmographies including that of the American Film Institute (www.afi.com) and Internet Movie Data Base (www.imdb.com). In order for a film to be included in the study it had to meet the following criteria: (1) include one or more completed suicides (suicide attempts were omitted), (2) involve real life situations, so that suicides occurring in several genres of film were omitted, including fantasy, horror, and science fiction, (3) needs to be produced by an American film company (foreign films are excluded), (4) shown in American theatres (films made for television were excluded), and (5) be feature length (short films of less than 60 minutes duration were excluded). In all, 1,300 suicides in film met the criteria for inclusion (Hollywood Suicide data base, accessed January 30, 2009).

Artist suicides were defined as suicides wherein the usual occupation was in one of the occupational categories recognized as an artist group by the U.S. Bureau of Census and for which data from the real world are available in Stack (Chapter 13). These categories are actors and actresses, authors (including novelists, playwrights and poets), dancers, designers,

musicians, a four fold category of painters, sculptors, print makers and crafts artists, photographers, technical writers, and a residual category of other artists.

In the quantitative analysis, internal suicide motives refer to broad categories of standard psychiatric predictors of suicide. These include substance abuse, major depression, bipolar disorders or manic depression, and schizophrenia (Lester, 2000). Many indicators of such disorders are apparent in the summaries that were read in the six online filmographies as well as the many reviews read in standard sources such as Roger Ebert's in the *Chicago Sun Tribune*, the *New York Times*, and the *Los Angeles Times*. Often film characters like author Roger Wade in *The Long Goodbye*, guitarist Blake in *The Last Days* (2005), or writer Virginia Wolff in *The Hours* (2003) are pictured as patients in psychiatric hospitals. Frequently, their long-term psychiatric care is mentioned in the film summary and/or the film itself. As a check on the motives given for suicide in the filmographies, 55% of the suicides (n=722) were watched in the movies themselves. All movies were reviewed in their entirety in order to pick up any further information on the motives. Up to six contributing factors or motives were coded for each film suicide. However, the vast majority of cases had between 1-3 apparent contributing factors. A total of 183 suicides (14.1%) were marked by evidence of standard psychiatric predictors of suicide. In this part of the analysis, the dependent variable is a binary variable where 1= the cinematic suicide has an internal motive and 0 = all other motives. Since the dependent variable is dichotomous, logistic regression techniques are appropriate.

The key predictor variable for internal motive is artist suicide. Herein, artist suicide=1 and 0= all other suicides. Controls are incorporated in the analysis of the predictors of internal motive. First, whether or not the film was made after 1970 (0,1) was used as a control. It is possible that, given the efforts of suicide prevention organizations and the vast amount of research that has been done since that date on the psychiatric causes of suicide, filmmakers and script-writers are more aware of the psychiatric perspective on suicide. If so, the portrayal of suicide in terms of standard psychiatric predictors may have become more common after 1970. We also included a control for gender of the film suicide victim. Possibly film makers may associate femininity more than masculinity with psychiatric morbidity such as depression.

The qualitative analysis selects five emergent themes from the narratives of artist suicide. The focus is on themes that emerge from these stories that involve strain encountered by artists in their occupation. These, we shall see, include the loss of one's creativity and competition for contracts in artist labor markets (see Chapter 13).

Table 1. Artist suicides as a percentage of all suicides in the U.S. and the cinema

	(A) U.S. (death registration states only) 1985-1992	(B) Cinema Suicides: 1900-2008	Ratio of B/A
Artist Suicides	0.93% (n=646)	7.9% (n=103)	8.5
All Other Suicides	99.17% (n=69,094)	92.1% (n=1,197)	0.93
Total	100% (n=69,740)	100% (n=1,300)	1.0

**Table 2. The percentage of artist suicide in each category of artists:
Society compared to the cinema**

Art Subfield	(A) Percentage of Artist Suicides in Society (1985-1992)	(B) Percentage of Artist Suicides in the Cinema 1900-2008	Ratio of B/A
Actors & actresses	5.1% (n=33)	27.2% (n=28)	5.3
Authors	9.0% (n=58)	14.6% (n=15)	1.62
Dancers	1.2% (n=8)	9.7% (n=10)	8.1
Designers	19.3% (n=125)	0	0
Musicians	17.5% (n=113)	13.6% (n=14)	0.78
Painters, sculptors, crafts artists	27.3% (n=177)	11.7% (n=12)	0.37
Photographers	11.3% (n=73)	1.9% (n=2)	0.17
Technical Writers	1.4% (n=9)	0	0
Other Artists	6.8% (n=44)	20.4% (n=21)	3.0
Total	100% (n=646)	100% (n=103)	1.0

RESULTS

Quantitative Analysis

Table 1 presents the results on the extent to which artists account for suicides in the real world and suicides in the cinema. Of the 69,740 suicides in the death registration area between 1985-1992, 646 or 0.93%, were committed by persons holding an artistic occupation. Of the 1,300 suicides portrayed in the cinema, 103 or 7.9% were committed by persons holding artistic occupations. Hence, the cinema portrays a relatively large proportion of its suicides as artist suicides. If suicides in cinema reflected the occupational structure of suicides in the real world, only 0.93% or 12 of the 1,300 suicides in cinema would have been artists. Artists receive eight and a half times as much coverage in cinematic suicides as they would get if suicides in the cinema followed the same distribution as suicides in the real world.

Table 3. The effect of artist suicide on the portrayal of standard internal psychiatric factors as the causes of suicide

Variable	Logistic Regression Coefficient	Odds Ratio
Artist suicide	1.32*	3.78
Period: Post 1970 film	0.92*	2.51
Gender: female	.06	1.06
Constant	-2.37*	
Model Chi Square	60.89*	

* p<.05

The distribution of artist suicides by artistic field in society versus the cinema is provided in Table 2. The first column provides data on the percentage of artist suicides in society in each subfield of artistic enterprise. The second column provides data on the percentage of artist suicide in each subfield of art in the movies. The last column provides the ratio of cinematic artist suicides to societal artistic suicides. A ratio greater than one suggests that the movies give disproportionately high coverage of the category of artist suicides, while a ratio of less than one suggests that the cinema is under-representing the suicides in an art subfield.

Two artist specializations are over-represented in artist suicides in cinema: actors and actresses, and dancers. While actors and actresses account for 5.1% of the suicides among artists in society, they account for 27.2% of those in the movies, over five times their share in the real world. The bias in favor of this subtype of artist suicide may be an ethnocentric interest in such suicides by the makers of the movies themselves. Suicide among dancers is especially over-represented in the movies. The proportion of dancer-suicides is over eight times what we would expect in the movies, given the relatively small percentage of artist suicides accounted for by dancers in society (1.2%).

Authors are somewhat over-represented (ratio= 1.6) and musicians somewhat under-represented (ratio= 0.78). Photographers, who account for 11.3% of the artist suicides in the real world, appear very seldom in cinematic suicides. Only a mere 1.2% of the artist suicides in film involve photographers. Technical writers and designers are extremely under-represented in film - there being no cases of film suicides in these specialized artistic occupations.

Table 3 presents the results of the multiple logistic regression analysis predicting the portrayal of standard psychiatric causes of suicide in feature films. Controlling for the other predictors, according to the reported odds ratio, films depicting the suicide of an artist are fully 3.78 times more apt than other film suicides to be framed in terms of internal causes. Artist suicides are more likely to be associated with substance abuse, major depression and related psychiatric factors than are the suicides of persons in other occupations. The results also document that films made since 1970 are 2.51 times more apt than the films made between 1900-1969 to portray internal causes for suicide. The gender of the suicide victim is, however, not predictive of attributing the cause of the suicide to internal psychiatric motives.

Qualitative Analysis

This section focuses on five selected elements of the social, economic, and psychological contexts of artist suicide in film. In particular, our mission is simply to suggest new points of departure or to suggest combinations of morbidities that may drive artist suicide in the real world. Our focus is on aspects of occupational strain in artistic employment to explain suicide risk. Two, in particular, are discussed: loss of artistic creativity, and competition for contracts in artist labor markets (see Chapter 13). In addition, illustrations of other patterns behind artist suicide are presented. These include some insights from film on how introversion, combined with expectations to take on an extroverted role as a performer, may drive some real-life suicides in the performing arts (e.g., Control, 2007). Finally, illustrations are provided on more standard interpretations of psychiatric morbidity such as major depression and physical illness or disability, including AIDS.

Loss of Artistic Creativity

The loss of the ability to perform, write, sing, or do other artistic work, is the theme of many cinematic portrayals of suicide. The most celebrated cinematic expression of this type of loss lies in a series of three film versions of *A Star is Born* (1937, 1954 and 1976). These were huge box office successes. The 1976 version, starring Barbra Streisand and Kris Kristofferson, was the fourth most popular film of the year. In the 1937 and 1957 versions, the central character is a washed-up actor. The actor has starred in many hit Hollywood productions but, due to growing alcohol abuse, he is finding it increasingly difficult to find work. The 1976 version shifts the artistic venue to rock music - the falling star is a singer and song-writer. In all three versions, the star is a chronic, long-term substance abuser. In all three instances, however, there is a strong altruistic dimension to the plots and to the suicide. The falling star acts as a mentor to a struggling new artist. Under his tutelage, the struggling young protégé ultimately becomes a superstar. One star falls while another is born. In each of the three films the behavior of the male fallen star threatens to drag down the life of his female protégé. There is a wedding between the old and new stars. The starlets all are about to give up their promising careers to devote their lives to rehabilitating their mentors. However, in each case the mentor commits suicide in order to relieve his spouse of the enormous burden they represent. In addition, they commit suicide so as not to destroy the promising artistic careers of their spouses. Hence, the three versions of *A Star is Born* all attribute suicide not just to substance abuse problems (the standard psychiatric model), but also to a loss of creative ability and a desire to not be a burden.



Figure 2. *A Star is Born* (1937, Selznick International, Director: William Wellman). Washed-up actor Norman Maine (played by star Frederick March) swims out at sunset in a suicide by drowning. The suicide was associated with extreme occupational failure.



Figure 3. *The Long Goodbye* (1973, Lion's Gate, Director:Robert Altman). Author Roger Wade has encountered severe occupational strain, writer's block, co-morbid with alcoholism, adultery and suspicion of murder. He swims out to sea and drowns.

Writer's block is portrayed as a key element in the suicide of Roger Wade in *The Long Goodbye* (1973). In a key line, he states emphatically to a private eye, "Do you have any idea what it is like not to be able to write!!" Once a great writer, he has degenerated into an apparent alcoholic who goes in and out of a mental facility. However, there are other factors that contribute to his suicide. There is a clear relationship problem with his wife. Both are involved in adulterous affairs. In addition, he is under suspicion for murder, although we find out in the end that he is innocent. Under these pressures, after he wakes up from a stupor brought on by binge drinking, he swims out to sea and drowns (Figure 3).

The loss of creative ability is the subject of *Actors and Sin* (1951) in which an actress loses her talent and commits suicide, and her father seeks revenge on the people he perceived as ruining her. In *Marilyn Monroe: The Final Days* (2001), starlet Marilyn Monroe's suicide is presented in relation to a complex set of precipitating factors including her fear that she has lost her ability to act, substance abuse, and failed love relationships. Richard Dreyfus stars as a sculptor who is almost totally paralyzed and unable to do his art in *Whose Life is it Anyway* (1981). He takes the pathway of suicide to end his torments.

Labor Markets and Artist Suicide

Stack (see Chapter 13) has suggested a new supplemental explanation of artist suicide. Artists are more apt to be employed in client-centered situations marked by short-term contracts, intermittent employment, part-time employment, and low income than are other professionals. These strains can contribute to suicidality. Several films develop the theme of client dependency. Such dependency plays out in a variety of forms. These include struggles of underemployed artists to obtain contracts, competition among minor musicians to obtain positions in major bands, and a desire of established actors, who have been typecast in a role they dislike, to obtain contracts for a new variety of more challenging roles (e.g., *The Adventures of Martin Eden* 1942; *Girl* 1999; *Hollywood Land* 2006; *Jeanne Eagels* 1957; *The Music Makers* 1971; *Stage Door* 1937).

In *Stage Door* (1937), superstar Katherine Hepburn stars as an underemployed actress who lives in a boarding house full of impoverished female actresses. One has been preparing

to obtain a contract for a part in an upcoming play, which suits her own character. However, Hepburn gets the part. Her competitor on the glutted labor market jumps to her death from the top floor of the rooming house. In *The Music Lovers* (1971), a composer opts for suicide after he loses his chief patron, a wealthy female admirer, when his secret homosexuality is exposed. He encounters severe difficulty on artistic labor markets and commits suicide. In *The Adventures of Martin Eden* (1942), the quest for success in the artistic labor market results in plagiarism. When the plagiarism is discovered, the writer commits suicide in shame.

Introversion

Several films provide some insight into a relatively unexplored area in suicidology. These relate a personality orientation, introversion, to suicide risk. Introversion by itself may not be a risk factor, but its interaction with occupational stress is linked to suicide in several movies. The best portrayal is provided in a British film (not included in the quantitative analysis which is restricted to American films), *Control* (2007). This is one of three films that deal with the suicide on May 23, 1980 of the twenty-three year old lead singer (Ian Curtis) of the British rock group, Joy Division. Joy Division is now credited with developing a new, innovative form of rock music. Their albums took off after Curtis' death and sold over 2 million copies. Shortly before his suicide, Curtis states, "I give everything I have on stage, and now they want more." Curtis is portrayed as a basically quiet, reserved person in private life who has to exert considerable energy to perform in front of crowds. Curtis and his band had just been awarded a prestigious contract to go on tour in the United States. It was thought that this would catapult them to stardom. The band and their manager were elated at the prospects. Curtis, however, did not want to go. Without him, the lead singer, however, the tour was impossible. He was increasingly burned out from giving too much of himself, engaging in substantial expressions of emotion on stage.



Figure 4. *Last Days* (2005, Meno Films, Director: Gus van Sant). The spirit of Blake leaves his body after his suicide by shotgun.

Curtis's suicide was provoked by occupational strain, but this was also co-morbid with other suicide risk factors. Importantly, he has been diagnosed with epilepsy. Some fits occur when he is on stage, possibly due to the stress he encounters when performing. The fits are getting worse. He is also portrayed as a bigamist. He is married, but unhappily so. He apparently receives inspiration for his work from an ongoing adulterous affair with a Belgian woman who works at the local embassy. His wife asks repeatedly that he give her up. He cannot; he says that it is not easy to do so. He apparently needs both women in order to achieve balance in his art. Ultimately, his wife asks for a divorce. The pressure to go on tour in the U.S., the divorce, and increasingly bad epilepsy coalesce in his suicide. He hangs himself from a laundry rope in his kitchen.

Other film portrayals of the Curtis suicide appear in a British film, *24 Hour Party People* (2004) and *Joy Division Under Review* (2006). His suicide illustrates a conflict between introversion and the demands for emotional expressionism as a rock singer.

The pattern of introversion is illustrated, or at least suggested, in the suicides of other artists. For example, in *Last Days* (2006), a biographical account of the suicide of Kurt Cobain of Nirvana, "Blake" plays the gifted but drug-addicted lead singer of a rock band. The film begins with his coming home to his rural abode after having been treated in a drug rehabilitation center. The first thing he does is to dig up a box of drugs which he had buried in his yard. While the film emphasizes his addiction to hard drugs as a cause of suicide, it is also implies a link between suicide and aloneness. Several scenes suggest that the only thing that apparently gives him peace is being alone with his music at home. He practices for periods alone, strumming new songs on his guitar in a room converted to a music conservatory. He also apparently enjoys swimming naked while alone in a river near his rural home. He has almost no meaningful interactions with others, including friends and contacts in the world of rock music. In the end, he commits suicide in his greenhouse, by shotgun. When his "friends" learn of his death on television, they immediately feel that they should go into hiding, fearing that they will be accused of murder. Drug addiction is co-morbid with other risk factors such as deficits in social support and apparent introversion.

The image of Blake's suicide deserves some attention due to its uniqueness. A naked human figure is pictured climbing out of Blake's corpse. It climbs out the window and disappears. This suggests that the soul of Blake is rising to some form of an afterlife. This is rare in film suicides. It conveys a sense of hope beyond death.

Major Depression, Schizophrenia and Artist Suicide

The psychiatric perspective on artist suicide has often stressed a standard explanation: long term struggles with manic depression and/or major depression. These issues are well-portrayed in a number of movies. An excellent illustration is the well-known suicide of Virginia Woolf in *The Hours* (2003). In her suicide note, she also clearly states that she does not want to be a burden any more to her husband. In that sense her suicide also has an altruistic component.



Figure 5. *The Hours* (2003, Miramax, Director: Stephen Daldry). Author Virginia Woolf's suicide by drowning. Portrayed as a consequence of a long term mood disorder.

A delusional, schizophrenic artist commits suicide by incineration in *Psych Out* (1968). A woman artist suffering from long-term depression, and whose parents reportedly committed suicide years earlier, commits suicide in her garage in *Short Cuts* (1993). Severe substance abuse is the major force portrayed behind the suicide of the model in *Lupe* (1966) and the actress Jean Seberg in *From the Journals of Jean Seberg* (1996). Long term post-traumatic stress syndrome results in the suicide of a film director in *Gods and Monsters* (1998).

Co-morbidity with AIDS and Physical Handicaps

Two recent films depict artist suicide as attributed to physical illness, notably AIDS. In *The Hours* (2003), author Richard Brown is about to receive a literary prize, but he believes that it is not for his work, but for his battle against AIDS. We learn that he has unresolved hostility towards his mother who abandoned him when he was a young boy. While in the presence of his now gay childhood female lover (played by Meryl Streep), who has been taking care of him for some years on visits to his apartment, he tenderly recalls their first night together many years ago, bids her a loving farewell and leaps to his death. An architect commits suicide in *It's My Party* (1996). His suicide is portrayed as essentially a rational response to encroaching death. The AIDS virus has already infected his brain in a way in which he will soon become enter a vegetative state. He takes a mixture of poisons provided by close friends to end his life. *Before Night Falls* (2000) depicts the suicide of a Cuban poet dying from AIDS while in exile in New York City. Physical handicaps and other diseases contribute to the suicides in several other films including *Whose Life is it Anyway* (1981).



Figure 6. *The Hours*. (2003 Miramax, Director: Stephen Daldry). Author Richard Brown jumps from the window of his apartment. His health has deteriorated from AIDS.

Still other patterns in suicide contexts involving two or more film suicides were discovered but will not be detailed here. Other themes uncovered include the wrapping of an artist suicide around a murder, sometimes a murder-suicide (e.g., *The Beautiful, the Bloody, and the Bare*, 1964; *The Last Performance* 1929; *Where Love Has Gone* 1964), numerous cases of betrayal in love relationships (e.g., a film featuring the suicide of a painter, played by superstar Robert Mitchum, *The Locket*, 1946; *Burning Daylight* 1914; *The Moon and Sixpence* 1942), altruistic suicides (e.g., *Operation Dames* 1959), death of a loved one (*The Heart is a Lonely Hunter* 1968), and others. It should be noted that in most cases of artist suicides, the artist does not commit suicide because of strains associated with the occupation of artist, but rather in response to other strains in interpersonal relationships and/or to psychiatric morbidity independent of artist occupations.

CONCLUSIONS

This paper provides the first analysis of the portrayal of artist suicide in the cinema. First, the frequency of artist suicide in society was compared to that in film. Movies over-represent artist suicide - it occurs 8.5 times more frequently in the movies than in the real world. The source of the emphasis of film on artist suicide is unclear. However, actors and actresses are among the most represented subtype of artist suicide, a social fact that suggests an element of egotism by Hollywood decision makers. Hollywood depictions of the suicide of dancers are also more frequent than they occur in society. Among the groups seriously under-represented were photographers. Unlike actors, actresses and authors, few celebrated cases of suicide of photographers exist in popular culture and literature.

A multivariate analysis was performed on the factors predicting coverage of internal motives in the cinematic suicide. Artist suicides were over three times as apt as other film

suicides to be driven by conditions such as substance abuse and long-term major depression. A full explanation of this association will require further research. It is, however, speculated that the association may stem in part from widespread knowledge of famous artist suicides that have been attributed to psychiatric disorders in the media (e.g., Ernest Hemingway, Sylvia Plath and Vincent Van Gogh). Indeed two major feature films were produced on Van Gogh's suicide: *Lust for Life* (1956), which starred Kirk Douglas; and *Vincent and Theo* (1991). Films made after 1970 were also more apt than films made before then to portray internal motives in the etiology of suicide. Possibly through the suicide prevention movement and spread of scientific knowledge, Hollywood has become more aware of these standard psychiatric causes of suicide. If so, they have found their way into the cinematic narratives.

To gain further insight into cultural definitions of the context of artist suicide, a qualitative assessment was done of the 103 stories of artist suicide in film. While it is well beyond the scope of the present work to present all patterns found in this analysis, several were noted. First, attention was drawn to occupational strain as a source of suicide. The context of losing one's creative abilities drove many suicides in film including three films with the same narrative: *A Star is Born* (1937, 1954 and 1976). However, it was duly noted that while loss of creativity is important, it is typically co-morbid with a standard psychiatric factor, most notably substance abuse. It is not clear in film narratives if substance abuse was a cause or an effect of loss of creativity. It is possible that the loss of creative abilities comes first, followed by psychiatric morbidity in the form of substance abuse. In many of these films there is also an altruistic component to the suicide. At least four artists in film commit suicide for the benefit of their spouse. They feel strongly that they have become a burden on their spouse and end their lives, in part, to benefit others. That artists and others may commit suicide, in part, to benefit others is a neglected theme in the scientific study of suicide. However, perceived burdensomeness is one of several key components of a recent theory of suicide (Joiner, 2005). These cinematic suicides can be interpreted, in part, using Joiner's theory.

A second aspect of occupational strain, competition in artistic labor markets, was evidenced in a number of films. Film narratives often resonated with Stack's suggestion in Chapter 13 that artists are prone to commit suicide, in part, by the material conditions they often face on glutted labor markets. The recurrent failures to obtain desired parts and contracts lurk behind many film depictions of artist suicides. This does not mean that the standard psychiatric model is questioned. The labor market perspective on artist suicide is thought to supplement the psychiatric view on artist suicide. Perhaps artists who both fail on the labor market and who have preexisting psychiatric morbidity are the ones most apt to suicide.

Two films, both on rock musicians, were described in terms of a neglected possible cause of some artist suicides. A conflict between music born through an introverted personality with the frequent demands of highly energized, public performances as a rock star on stage is documented in film. This conflict is depicted as driving the suicide of real life rock star Ian Curtis and is implied in the film depiction of Kurt Cobain.



Figure 7. Ian Curtis, lead singer, Joy Division, shortly before his suicide at age 23 (Control, 2007, Becker Films, Director: Anton Carbjijn).

One of the purposes for the study of art is to gain new insights into behavior. Several films have suggested a fresh perspective on artist suicide involving introversion. Some artists are highly introverted and create master works in their solitude. However, they are also expected, if they are in the performing arts, to perform these works in public. Both film and biographical accounts of some musicians suggest that a conflict between introversion and expectations for extroversion in the performing arts drive suicide in at least some cases.

Films such as *The Hours* (2003), *Lust for Life* (1956), and *Vincent and Theo* (1991) can be helpful in deepening one's understanding of the role of risk factors drawn from dominant psychiatric perspectives on suicide such as those stressing major depression. Several films are recommended for those who desire lengthy treatments of new patterns, mainly the role of AIDS in suicide risk.

In general, films concerning the suicides of artists do not argue that being an artist, *per se*, causes suicide. Instead, they tend to focus on standard, non-occupational risk factors including psychiatric morbidity. Films, however, are far less likely to explain the suicides of artists in individualistic or internal terms (e.g., substance abuse or depression). The films on artist suicide, as well as non-artist suicide, appear to be much more likely than research on real-life suicides to stress social factors in the generation of suicide. Rejection in love is, for example, a more common explanation of artist suicide than internal psychiatric causes.

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PART VI: CONTAGION

Chapter 17

COPYCAT EFFECTS OF FICTIONAL SUICIDE: A META-ANALYSIS

Steven Stack

The research findings on media-based copycat effects on suicide have been rather mixed (for reviews see Pirkis & Blood, 2001a, 2001b; Stack, 2000a, 2005). Only some of the time do studies report connections between media coverage of a suicide and an increase in the suicide rate in the real world, and many studies report no contagion effects (e.g., Cheng, et al., 2007; Ishii, 1991; Kessler, et al., 1988; Niederkrotenthaler & Sonneck, 2007; Phillips, 1974; Pirkis, et al., 2006; Shoval, 2005; Stack, 1987, 1990a, 1996; Tousignant, et al 2005; Yip, et al., 2006; for a review see Stack, 2003).

On the positive side, support of a copycat effect has been found in a variety of media venues including studies based on newspaper coverage (e.g., Niederkrotenthaler & Sonneck, 2007; Phillips, 1974; Stack, 1987, 1990c; Tousignant, et al., 2005), studies based on television news stories and documentaries (e.g. Bollen & Phillips, 1982; Phillips & Carstensen, 1988; Shoval, et al., 2005; Stack, 1991) and investigations concerning films made for television and television series (e.g., Gould & Shaffer, 1986; Hawton, et al., 1999; Schmidtke & Hafner, 1988). Further, an imitation effect has been found in a variety of nations representing different cultural and structural contexts. These include Australia (Hassan, 1995; Pirkis, et al., 2006), Austria (Niederkrotenthaler & Sonneck, 2007), Canada (Tousignant, et al., 2005); Germany (Jonas, 1992), Hong Kong (Yip, et al., 2006); Israel (Shoval, et al., 2005); Japan (Ishii, 1991; Stack, 1996) and Taiwan (Cheng, 2007). Imitation effects have also been found for historical periods such as 1910-1920 (e.g. Gundlach & Stack, 1990; Stack, 1988) and the Great Depression (Stack, 1992). However, other research has questioned the existence of a copycat effect (e.g., Berman, 1988; Horton & Stack, 1984; Kessler & Stipp, 1984; Kessler, et al., 1988; Stack, 1990e; Wasserman, 1993). Often there are even contradictory findings within a single study (e.g., Hassan, 1995; Jonas, 1992; Phillips & Carstensen, 1988; Platt, 1987), with some findings supporting a contagion effect and other findings not supporting a contagion effect. Given these splits in the research findings, a key question has become under what conditions will contagion effects occur (Stack, 2000a, 2003, 2005)?

The key predictor of finding a media based copycat effect has been the celebrity status of the role model (e.g., Cheng, et al., 2007; Stack, 1987; Wasserman, 1984). Research indicates that when the suicides of entertainment or political celebrities are widely covered in the news media, suicide rates are likely to increase. A review of 293 findings from 42 studies determined that research exploring the copycat effects of the widely covered suicides of political or entertainment celebrities was 14.3 times more apt to report copycat effects than studies based on other categories of suicides (Stack, 2000a). Recent work on highly publicized, individual cases of celebrity suicides has often found substantial increases in suicide, and these occurred in variety of nations and socio-economic contexts (Cheng, 2007; Tousignant, et al., 2005; Yip, et al., 2006). This principal finding has been interpreted from the standpoint of differential identification theory: that the public is more apt to identify with a suicide story of a well known, respected person than with that of an ordinary person's suicide (Stack, 2005; Wasserman, 1984). However, fictional depictions of suicide, by definition, do not concern real, living celebrities. This, in itself, would suggest less powerful, if any, contagion effects of suicide in movies as compared to news stories about real, celebrity suicides.

CONTAGION INVOLVING FICTIONAL STORIES OF SUICIDE

The present chapter contributes to the contagion literature by focusing on a subtype of suicide stories: fictional suicides (e.g., those in the movies, novels, and plays). Research has found that copycat effects are generally more apt to be found when the media role models are real. A review of 42 studies determined that research based on real suicides was 4.03 times more likely to be associated with copycat effects than research based on fictional depictions of suicide such as suicides in feature films or movies on television (Stack, 2003).

While real suicides are more likely to elicit a copycat effect than fictional suicides, there is evidence that fictional accounts of suicide can elicit contagion effects as well (e.g., Gould & Shaffer, 1986; Schmidtke & Hafner, 1988). However, there is a split in the findings on research restricted to the analysis of fictional depictions of suicide (e.g., Berman, 1988; Collins, 1993; Ellis & Walsh, 1986; Hawton, et al., 1999; Kessler & Stipp, 1984; Kessler, Downing & Stipp, 1988; Phillips, 1982; Stack, 1990e; for a narrative review see Pirkis & Blood, 2001b). Some studies find apparent copycat effects while other investigations do not. A study of New York City suicides found an association between fictional suicide in movies and teenage suicide rates (Gould & Shaffer, 1986). These findings were largely not replicated in subsequent studies in other cities, whole states, and the nation as a whole (Berman, 1988; Phillips & Paight, 1987; Stack, 1990e; see review in Stack, 1990b). Stack (1990e) found that the films coincided with a highly publicized wave of real teen suicides in New York City, a fact which may account for a spurious association between the films and suicide in New York City. Still, other research often reports a copycat effect for fictional stories (e.g. Hawton, et al., 1999; Ostroff, 1986; Platt, 1987; Schmidtke & Hafner, 1988).

The focus of this chapter is to provide the first quantitative review of the literature on the copycat effects of *fictional* suicide stories on suicide in the real world. In so doing, hypotheses are tested on under what conditions these fictional stories will be most likely to elicit copycat

effects. The present investigation is a supplement to a previous quantitative review which was restricted to studies based on nonfictional media role models (Stack, 2005).

REVIEW TECHNIQUES

The traditional technique employed in literature reviews is the "narrative research review." Such a review attempts to assess and synthesize a literature through largely qualitative techniques. Examples of such narrative reviews in the area of media effects on suicide are numerous (e.g., Pirkis & Blood, 2001a, 2001b; Schmidtke & Shaller, 1998, 2000; Stack, 1990b). In these narrative reviews a subjective summary is constructed from a set of reports. The narrative reviews draw samples based either on a selected set of studies, a representative sample of studies, or an exhaustive compilation of all studies. The features of these studies are described and a conclusion is drawn on an X-Y relationship between a dependent and independent variable. Such reviews are inherently subjective since they rely considerably on the interpretation of the author of the review. Narrative summaries may present "vote counts" on the number of studies finding a positive, a negative, or no relationship between X and Y (Hedges & Olkin, 1985; Hunter & Schmidt, 1990; Stack, 2005; Wells & Rankin, 1991).

Why results differ from study to study may or may not be explained in such narrative reviews. If explanations are offered, they seldom consider more than one explanation at a time (e.g., Lester, 2000; Phillips, 1989; Pirkis & Blood, 2001a, 2001b; Stack, 1990b). As such, it is difficult to assess the relative importance of two or more explanations for disparate findings in previous research.

In contrast to the narrative review, quantitative research reviews, such as those in meta-analysis, are more rigorous reviews. They use quantitative techniques to summarize systematically research results and to weight the importance of possible explanations for any discrepancies in the research findings from the past. This method involves taking the findings of previous studies as data for a secondary analysis. The secondary analysis of previous findings is more precise, objective, and replicable than the narrative review (Rosenthal, 1991; Stack, 2003, 2005; Wells & Rankin, 1991).

One limitation of most sociological meta-analyses is that they explore an X-Y relationship without the systematic introduction of any controls for the covariates of X (e.g. Wells & Rankin, 1991; Hsieh & Pugh, 1993). Following previous quantitative reviews (Stack, 2000a, 2003, 2005), the present study employs logistic regression techniques to address this methodological issue. The influence of story characteristics is weighted against other possible predictors of a significant relationship between X variables and copycat effects. These other variables include the characteristics of the dependent variable (suicidality) such as completed versus attempted suicide rates as outcome variables, and the use of age-specific suicide rates.

FORMATION OF HYPOTHESES

At least five general hypotheses can be drawn from the existing literature on conditions that might maximize or minimize the finding of a copycat effect for fictional suicides. These include the matching of method of suicide (e.g., whether or not the method of the model is matched with the incidence of suicide by that method in the real world), the characteristics of the suicide rate variable (e.g., gender-specific suicide rate and attempted versus completed suicide rates), and period effects (e.g., year published).

Contagion of Method of Suicide

A neglected factor in both narrative reviews and quantitative reviews of contagion effects is whether or not studies match the method of suicide of the model with the suicide rate by that particular method in society. Some studies, for example, do not explore the contagion effect on the general rate of suicide, but instead explore the link between the method used by the role model and the suicide rate by that method in society (e.g., Schmidtke & Hafner, 1988; Marzuk, et al., 1994). Perhaps the most direct evidence for a copycat effect involving method of suicide involves research on the publication of *Final Exit*, a guide to be read by terminally ill persons considering suicide. It recommended asphyxiation as a method. The publication of this book greatly increased suicide by that means. In New York City, suicides by asphyxiation increased by 313% (from eight to 33 suicides) in the year of the book's publication. A copy of *Final Exit* was found at the scene of 27.3% of the suicides. However, the overall rate of suicide in the city surprisingly did not increase (Marzuk, et al., 1994). Hence, while it is often clear that the public is aware of publicized suicides and that they often are found to copy the method of suicide, there may be no increase in the social suicide rate after a publicized story. Instead, what may occur is that persons who would commit suicide anyway simply copy the method of suicide in the publicized story (see also Berman, 1988).

Some of the strongest evidence for a copycat effect of a fictional television suicide on actual suicide rates (by the same method as the model) comes from Germany. A study of a West German six part television series on "Death of a Student," found a link between the suicide by train in the movie and teenage suicide rate by jumping in front of trains in Germany. The effect lasted up to 70 days (Schmidtke & Hafner, 1986). These findings suggest the following hypothesis:

- H1. Studies matching the suicide method of a role model with the suicide rate by that method in society will be more likely to report a copycat effect than their counterparts.

Dependent Variable Characteristics: Completions Versus Attempts

Some research has been based on a dependent variable measuring the incidence of suicide completions (e.g. Schmidtke & Hafner, 1988; Stack, 1990e), while other research is based on a dependent variable of suicide attempts (e.g. Ellis, 1986; Fowler, 1986; Gould &

Shaffer, 1986; Ostroff, 1985; Platt, 1987). It is possible that copycat effects may vary by the seriousness of the suicidal behavior of the audience. In particular, studies using suicide attempts as the dependent variable, a more widespread form of suicidal behavior, may be more apt to uncover a suicide contagion effect than studies based on a less common form of suicidal behavior, completed suicide. It is generally estimated that there are approximately ten times as many suicide attempts each year than suicide completions (Lester 2000). The following hypothesis is tested:

- H2. Copycat effects will be less apt to be found for completed suicide rates than suicide attempt rates.

Audience Receptiveness: Age

The extent to which groups of people will engage in copycat suicide depends on their level of social integration, which has been related to age (Stack, 1991). Age categories can be related to levels of social integration and other suicidogenic conditions. These categories have corresponding levels of suicidal moods (Stack, 1991). Some research suggests that young (15-35) and old (over 65) groups are most receptive to suicide stories and copycat effects, while the middle-aged are not (Phillips & Carstensen, 1988; Stack, 1991). Perhaps the middle-aged are shielded since they are highly integrated into society, have the highest incomes, the strongest ties to marriage and the family and the lowest unemployment rate, and hold most of the power positions in society (Stack, 1991). This suggests the importance of "audience identification" with the media-based victim (Stack, 1990d).

- H3. Studies based on the suicide rate of youth will be more apt to report contagion effects than studies based on the suicide rates of other age groups.

Audience Receptiveness: Gender

A previous meta-analysis of investigations of contagion effects of nonfictional suicide stories determined that gender predicted the odds of uncovering contagion effects (Stack 2005). Studies using the female suicide rate as an outcome variable were 4.89 times more apt to report a copycat effect than studies using other outcome measures such as the total suicide rate. Following this lead, the present investigation hypothesizes:

- H4. Studies based on female suicide rates will be more apt to report contagion effects than studies based on other rates of suicide.

Other Hypotheses

It is possible that, given advances in statistical and methodological knowledge, research results might be more consistent in more recent studies than in older research. It may be becoming more or less common to find a copycat effect over time. It is hypothesized

- H5. The more recently published investigations will be more apt than older investigations to report contagion effects.

METHODOLOGY

The set of studies that form the basis for this review are taken from a larger review of both fictional and nonfictional studies (Stack, 2003) and an updated bibliographic search. A set of research studies to analyze was generated by first looking under selected keywords (e.g. "suicide" and "imitation") in *sociofile*, a computerized database containing articles indexed in *Sociological Abstracts*. Existing bibliographic reviews were also consulted (Lester, 2000; Phillips, 1989; Phillips, et al., 1992; Stack, 1990b, 2000a, 2000b). A grand-fathering technique was employed that searched the reference sections of the studies that were found for any additional studies that were missed. Finally, a related database, MEDLINE, was searched in an effort to locate additional research published in medical, psychiatric, and public health journals.

For a study to be included it had to meet all of the following requirements. (1) it had to be an empirical study which related a measure of media publicity of suicide to a measure of suicide in the real world. Measures of media suicide included films on television and suicides in television serials such as soap operas. Measures of suicide included both completed suicides and suicide attempts. (2) The suicide in the media had to involve a fictional suicide, not a real suicide. (3) The study had to demonstrate empirically a significant or insignificant relationship between media coverage about a fictional suicide and suicide measures in the real world.

A total of 26 studies were located. These 26 studies contained a total of 183 findings. The unit of analysis in the present study is each finding.

The dependent variable in the present study is whether or not a finding represents a significant or an insignificant relationship between suicide publicity and suicide in the real world. If a finding represents such a significant and positive relationship, it is coded as a one, otherwise it is coded as a zero. If an equation has multiple story terms (e.g. Kessler, et al., 1988) each term in the equation represents a "finding." Since the dependent variable is a dichotomous variable, logistic regression techniques are an appropriate analysis strategy (Menard, 2002).

Audience Characteristics

Age specific suicide rates are coded as two binary variables: youth suicide (10-34) as 0/1, and middle-age suicide rates (35-64) as 0/1. The elderly suicide rate serves as the benchmark category. Audience receptiveness is also measured in terms of a second gender-oriented outcome variable. Investigations measuring the female suicide rate as an outcome measure are coded as one and other outcome variables are coded as zero. The latter would include male suicide rates and total suicide rates (male and female combined).

Year of publication is coded as a two-digit code. For example, if the year of publication is 1985, year is coded as "85."

ANALYSIS

Table 1 presents the results of the multivariate logistic regression analysis. The matching of the suicide method in the media with the method of suicide in society was a powerful predictor of reporting contagion effects. From the odds ratio, controlling for the other predictor variables, findings based on matched method of suicide were fully 4.40 times more apt than their counterparts to report a contagion effect.

Findings based on completed suicides were no more or less apt to report contagion effects than findings based on suicide attempts as an outcome measure. The logistic regression coefficient is less than its standard error.

The results on age were mixed. Findings based on youth suicide rates as the outcome measure were much more likely to report contagion effects than findings based on elderly suicide rates. From the odds ratio, the former were fully 4.39 times more likely to uncover contagion effects than the latter. However, studies based on middle-age suicide rates were no more or less apt to report contagion effects than investigations using elderly suicide rates.

The gender-specific measure of audience receptiveness, female suicide rate, was unrelated to the odds of finding a copycat effect. Findings based on female suicide rates as the outcome variable were no more apt than other outcome variables to uncover a copycat effect. The logistic regression coefficient is substantially less than its standard error.

Finally, the year of publication was unrelated to the odds of reporting an imitation effect. The logistic regression coefficient is equal to its standard error.

Table 1. The effect of methodology on reporting a contagion effect: A multiple logistic regression analysis (1=contagion effect reported, 0=no effect reported)

Variable	Logistic Regression Coefficient	Standard Error	Odds Ratio
Method of model matched with suicide rate method Reference: No match	1.48* 1.00	.55	4.40
Based on completed suicide rate Reference: attempted suicides	-.18 1.00	.55	.84
Age-specific rates			
Youth rate	1.48*	.39	4.39
Middle-aged rate	.69	.70	2.09
Reference: all other suicide rates	1.00		
Female suicide rate Reference: all other rates	.07 1.00	.39	1.08
Year of publication	-.04	.04	.96
Constant	1.51	3.78	—
Model chi square	28.45*		
Nagelkerke r-squared	0.200		

* $p < 0.05$

N= 183; Findings in 26 studies.

The equation as a whole is a significant predictor of the dependent variable as measured by the model chi square. Further, as indicated by the Nagelkerke r-squared statistic, the equation explains 20% of the variance in the dependent variable. The equation correctly classified 71.04% of the 183 findings.

DISCUSSION

The present paper tested five hypotheses that might explain why some of the research on fictional portrayals of suicide supports while other research rejects the copycat perspective on suicide. Two methodological features of investigations significantly predicted the reporting of findings of a contagion effect. First, studies that explore the relationship between the suicide method of a fictional model and the suicide rate by that specific method in society are 4.4 times more apt to report a contagion effect than studies that do not match suicide methods of model and society. Second, investigations where the outcome measure is a youth suicide rate were 4.39 times more apt to report contagion effects than their counterparts. The latter finding supports the common argument that youth are the most impressionable age group and are, therefore, expected to be most subject to copycat effects. There were three nonsignificant predictors: degree of lethality of the suicide measure (suicide attempts versus completions), gender of the suicide outcome measure, and year of publication.

The evidence that publicized fictional suicides affect the suicide rate based on the method used by the model deserves further interpretation. It is possible that much of the evidence for a contagion effect is really restricted to a contagion effect of method of suicide. That is, persons who may have committed suicide anyway simply copy the method used by the model in the media. In contrast, a related and important question is whether or not the portrayal of a fictional suicide actually increases the suicide rate by all methods, not just the one in the suicide model. If fictional suicides simply increase suicides by the method employed in the media role model and decrease suicides by all other methods by a corresponding amount, there should be less public concern about contagion effects than if fictional portrayals of suicide lead to an overall increase in the rate of suicide (by all methods). Further research is needed to systematically address this issue.

All of the 26 studies of fictional copycat suicide suffer from a limitation: the lack of coverage by more than one media channel. Nearly all of the studies are based on television film portrayals. This is unlike the research on real suicides (Stack 2005). For example, stories on television news are frequently echoed in radio news, internet news, and newspaper news. Suicides in soap operas and films are much less apt than real suicides to be covered on radio, newspapers, and the internet. As such, we would expect fictional suicides to have less of an impact than publicized news stories concerning real suicides.

Future work is needed that follows insights from the methodology used in other lines of research on media effects. For example, in the area of media effects on smoking initiation, large samples of youth are questioned at baseline about smoking behavior, if any. At follow up, they are given lists of recent movies and simply asked to indicate which ones they have seen. The investigators then tally up the number of movies watched in which the stars smoke. Interestingly, the number of movies watched where the stars smoke is often the single best predictor of smoking initiation among youth. A meta-analysis of over 40 such investigations

of smoking initiation found that number of movies watched where the stars smoke is a consistent predictor of smoking initiation. This body of research led to Walt Disney Productions decision to take smoking out of its future films (Stack & Bowman, 2008). Future research needs to be done to determine if the following hypothesis is correct: the greater the number of movies where the stars engage in suicidal behavior the higher the odds of suicide ideation or attempts.

There are almost no systematic analyses of copycat effects of suicide in literature on suicide in the real world (Pirkis & Blood, 2001b). Portrayals of suicide in literature are apparently fairly frequent. A measure of a work's popularity is the availability of a reader's guide of the type used by high school students and college students in English classes. In an analysis not reported here, all literary works (novels, plays) that have readers guides available (e.g., Cliff Notes) were reviewed to determine how many contained suicides. Of 239 titles covered in Cliff Notes, 61 or 25.5% contain one or more suicides. This is a much higher level of suicide content than found in American feature films where less than 5% contain a suicide.

Given the high prevalence of suicide in popular world literature, future work is needed on contagion effects both at the individual and ecological levels. Future work might be based on the assessment of how many popular works of literature that contain suicide have been read (as well as identified with) by suicidal and nonsuicidal youth. Adults who remember and/or identify with the suicides in these and related literary works may also be at relatively high suicide risk. At the ecological level, the high school English curriculum in urban areas and states could be assessed in terms of the number of widely read books with suicidal characters that are read by students (e.g., *Romeo and Juliet*, *House of Mirth*, *Death of a Salesman*). The following hypothesis could be tested: The greater the number of such books that are required reading, the higher the youth suicide rates. Clearly research using these points of departure may prove fruitful.

Finally, the effect of a publicized suicide in the news, in film, in literature and other fictional media may not be captured at all, or fully captured, in the short term. Such fictional suicides, especially if they provide points of identification for individuals, may promote suicide years later. Further, given new technologies (e.g., VHS, DVD copies of movies) suicides in a film may contribute to suicide years or even decades after their mass release in theatres. There is almost no rigorous research that explores such long-term impacts. One exception is the long-term impact of the Russian Roulette scenes in the movie, *Deer Hunter* (1978). Between 1978 and 1985 there were at least 37 confirmed suicides imitating the suicide in the film. Typically, the victim had recently viewed the film and then played a fatal game of Russian Roulette with a revolver (Coleman, 1987, pp. 121-126). Nearly all of these imitative suicides (33/37) happened after the year of the film's release. This is a sign that the full contagion effect of a movie can last more than a year. A much less systematic analysis of exposure to *Deer Hunter* since 1985 found additional cases of imitative suicides including those in 2000 and 2002 (Coleman, 2004, pp. 233-235), fully 24 years after its original release in 1978. Interestingly, popular depictions of suicide in film can, themselves, be included in future films. The feature film "187" (1997) has a lead character who watches the suicide in *Deer Hunter*, and then dies playing Russian Roulette! He was trying to demonstrate to his friends that he was fearless.

The full effect of certain artistic depictions of suicide needs to be assessed in both the short and the long term. The advent of electronic, web-based newspaper search engines such as Newsbank can facilitate such research. Search engines can be used with the relevant keywords to locate cases of imitative suicides.

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Chapter 18

GLOOMY SUNDAY: DID THE “HUNGARIAN SUICIDE SONG” REALLY CREATE A SUICIDE EPIDEMIC?¹

Steven Stack, Karolina Kryszinska and David Lester

Sunday is gloomy, my hours are slumberless.
Dearest, the shadows I live with are numberless.
Little white flowers will never awaken you,
Not where the black coach of sorrow has taken you.
Angels have no thought of ever returning you.
Would they be angry if I thought of joining you?

Gloomy Sunday.

“Gloomy Sunday” is a sad song. The lyrics tell the story of an individual whose lover has recently died. The singer thinks about committing suicide in order to be reunified with the lost lover. The song was written by a Hungarian composer in 1933, and there have been rumors ever since that the song induced people to commit suicide and that it was banned. It has been difficult to distinguish the myth from the facts, and the present paper seeks to explore the rumors and whether there are any facts or data to support them, and to place the suicide phenomena surrounding Gloomy Sunday in context. Gloomy Sunday is especially significant as a suicidal art form since it was recorded many times², played over many decades and aired in many nations. Most songs concerning suicide, such as Ozzie Osbourne’s “Suicide Solution,” have not achieved such status.

English translations of the song were written by both Sam M. Lewis and Desmond Carter. Hal Kemp, with Bob Allen on vocals, recorded Lewis’s version in 1936. A version by Billie Holiday appeared in 1941 and was reportedly banned from the airwaves in America and by the BBC in the United Kingdom. For Billie Holiday’s version, a third stanza was added giving the song a dreamy twist in order to mitigate its reputation as a suicide song. The origin of the song became the background of the German/Hungarian movie *Gloomy Sunday* directed by Rolf Schubel, in 1999, based on a novel by Nick Barkow.

¹ This chapter is based on Stack, et al. (2007-2008).

² Wikipedia (accessed 10/26/2006) lists 39 recordings, mainly in English.

THE SONG AND THE RUMOR

The Wikipedia entry on Gloomy Sunday asserts that codifying of the legend occurred during the Internet age but, of course, the story dates from long before then (see also www.phespirit.info/gloomysunday/). Gloomy Sunday was written in 1933 by two Hungarians: Rezso Seress (who wrote the music) and Laszlo Javor (who wrote the lyrics). (According to Wikipedia, the original lyrics were written by Seress, but they were replaced by Javor's lyrics). Seress was born in Hungary in 1899 and was a self-taught pianist and composer. A rumor is that the song was written for a former girl-friend of Laszlo Javor who killed herself shortly after the song's release, and that Rezso Seress killed himself many years later.³ The widespread knowledge of the rumor is illustrated by Winslow (1980) who, in her detective story *The Brandenburg Hotel*, has a character say that many people in Germany killed themselves after hearing the song (p. 54).

The song did not have an immediate impact initially in 1933, but in 1936 there was a cluster of suicides in Hungary attributed to the song, as a result of which the song was banned. American musicians translated the song and recorded it, the most popular of which was by Billie Holiday and released several years later. The rumor is that the record was also banned in America, France and England.

As many as 17 suicides are reported to have occurred in Hungary by people after listening to the recorded or live performance of the song (and as many as 200 worldwide). There were references to the song or to the lyrics in their suicide notes, they had the sheet music nearby, or the song was playing on a record player.

The entry about Gloomy Sunday on www.phespirit.info (accessed October 26th 2006) reports that suicides associated with the song occurred in Germany (where a young shopkeeper hung herself leaving a copy of the sheet music under her feet). This source also reports two cases (an 80-year old man who jumped from a 7th story window while the music was playing and a 14 year-old girl who drowned herself while clutching the music) without noting where or when these two suicides occurred. This report also described an errand boy in Rome (Italy) who gave a beggar who was humming the tune all his money and then drowned himself in the nearby river.

The website report says that the song was written after the breakup of Seress's own romance. He had difficulty getting the song published at first, but it became a best-seller. Seress had arranged to meet his ex-lover, but she killed herself with poison leaving a piece of paper with the words "Gloomy Sunday" written on it. (Other reports say that it was Javor's girl friend who killed herself). The report goes on to say that, after a woman killed herself in London in 1941 with barbiturates while the song was playing, the BBC banned it, and this ban still persists. The report notes that Seress himself used to play the song himself at the Kis Pipa restaurant in Budapest (where it is still played).

The website www.ql.net reports that Seress was living in Paris and failing to make a living as a songwriter. His girl-friend urged him to get a regular job and left him. The next day, he sat down in his Parisian apartment, on a rainy, gloomy Sunday, and wrote the tune in thirty minutes. It was rejected by the first publisher he sent it to but was accepted by the next publisher. (Other reports have the second potential publisher committing suicide after seeing

³ This information was obtained from www.snopes.com, accessed November 14, 2006.

the music, leaving a third publisher to accept it.) This website reports that the suicide epidemic occurred immediately after it was printed, but the most reliable reports place the epidemic three years later (in 1936).

In addition to the Berlin suicides, this website reports cases of a young secretary in New York City who gassed herself and requested that Gloomy Sunday be played at her funeral, and an 82 year-old man who jumped to his death from the seventh floor of his apartment building in Manhattan after playing the song on his piano.

Morgan and Tucker (1984) in their book *Rumor* evaluated the rumor regarding the “Gloomy Sunday” suicides as “partly true” (p. 15). They state, however, that the song was never banned in America.

EARLY REPORTS

The rumors about Gloomy Sunday are not based merely on recent speculation. There are several published reports from 1936 and 1937 that mentioned the impact of the song.

Time Magazine

Time Magazine, in a posting on Time Archives that dates the posting as March 30th, 1936, said that the suicides began in Hungary in the previous month. A shoemaker named Joseph Keller left a suicide note quoting the lyrics. Seventeen suicides were linked to the song: two who shot themselves while listening to gypsy bands playing it, the others after listening to a recording. Several are reported to have drowned in the Danube while clutching the sheet music. The Budapest police then banned the song. Several American versions appeared in March, 1936. *Time* noted that the melody and lyrics have a depressing effect, and that those recording the version by Bob Allen and the Hal Kemp band were noticeably affected by it when recording it. The spate of suicides in Hungary was also reported by *The Los Angeles Times* on February 24, 1936.

Did the Song Accompany Suicides?

Time Magazine, on January 25th, 1937, reported that Jerry Flanders, aged 24 in Indianapolis, hired a soloist to sing Gloomy Sunday but was arrested in a saloon just as he was about to drink a glass of poisoned beer. *The New York Times*, April 6, 1936, on page 9 reported the suicide of a 13 year-old boy in Michigan (Floyd Hamilton Jr.) who hung himself in the living room of the house in which he lived with his divorced father and had a copy of the lyrics of the song in his pocket. Evidently some suicides or potential suicides were attracted by the song.

Was the Song Banned by the BBC?

Steve Woodhall (personal communication November 29, 2006) did confirm that the song was banned by the British Broadcasting Company in the UK until 2002. A search of the BBC website (November 26, 2006) found that the Billie Holiday version was played on BBC radio on October 23, 2003, and June 12, 2004, and the Branford Marsalis version on December 3, 2004. No broadcasts of the song were found prior to 2002. Also on the website, listeners voted (on a date not specified) for the five saddest songs, and Gloomy Sunday ranked 4th in the nominations. It is clear, therefore, that the song was banned by the BBC as rumored.

The New York Times

Rezso Seress (or Seres) did commit suicide. *The New York Times* on January 14, 1968, page 84, reported his suicide with a dateline of January 13th, Budapest (Hungary). He jumped from a window of his small apartment, shortly after his 69th birthday. The obituary reported that the success of Gloomy Sunday depressed Seress because he was never able to write another hit song. The obituary also reported that some radio stations and nightclubs in the United States banned the song, and the obituary specifically mentions a version by Paul Robeson.

SUICIDE IN HUNGARY

For most of the 20th Century, Hungary had the highest suicide in the world. For example, in 1980, the overall Hungarian suicide rate was 45 per 100,000 per year, and the suicide rate was 202 in Hungarian men over the age of 75 (Lester & Yang, 1998). In 2001, the Hungarian suicide rate was 47. The high Hungarian suicide rate was not simply a result of the socio-political situation in Hungary at the time because the Hungarian suicide rate was the highest in the world between the First and Second World Wars, and the suicide rate is very high in Hungarian immigrants to the United States and to Australia as compared to immigrants from other nations (Lester, 1980). For example, the suicide rate in Hungary in 1933 was 32 per 100,000 per year and 31 in 1936 (personal communication from Tamas Zonda, November 11, 2006). According to data from the World Values Survey (Stack, 1999), Hungary ranked in the top eleven nations out of 35 in the level of suicide acceptability (4.37 on a scale from 1 to 10). Persons in other nations such as China (6.82), Finland (6.14) and the Netherlands (5.98) were even more approving of suicide. It is possible that the strong cultural support for suicide in other nations might interact with popular songs about suicide to precipitate suicides, a topic worth future investigation.

Hungarians are well known for having elevated rates of depression, and the high incidence of depression suggests that a relatively high proportion of Hungarian families have a suicide among its members. Suicide has perhaps come to be seen as an acceptable solution to life's problems. Many famous Hungarian leaders have committed suicide, among them

Istvan Szechenyi (1791-1860), the “Greatest Hungarian”⁴, Pal Teleki (1879-1941), the Prime Minister during the Second World War, the poet Attila Jozsef (1905-1937), and the actor Zoltan Latinovits (1931-1976) (at the very same train station where Attila Jozsef committed suicide and where people still go to die). Although some Hungarians attribute the high rate of suicide to Hungarian culture, there is the possibility that the Finno-Ugrian gene (which is found in Hungarians and the Finns) increases the predisposition to suicide (Kondrichin & Lester, 1997).

If we assume that there was an increase in suicide after the song, it is important to note that at the time of its release in Hungary in 1933, it was the height of the Great Depression. There was probably a relatively high proportion of Hungarians at risk of suicide given widespread unemployment and the political turmoil of the times. The Great Depression marked the peak in the suicide rates many nations in the 20th Century (Stack 2000a), and so it is likely that the political and economic turmoil of the times interacted with the song, contributing to a resonance between the song and the audience. Pre-existing suicidal conditions may have triggered any copycat suicides.

MUSICAL SUBCULTURES AND SUICIDE

Musical and, more generally, artistic subcultures are an understudied phenomenon both in suicidology and related disciplines such as sociology and psychology (for an exception see Weinstein’s [1991] study of the heavy metal subculture). From a sociological perspective, some musical subcultures may attract persons who are at risk of suicide. Through the promotion of cultural symbols and artifacts including concerts, clothing, distinctive hairstyles and albums, musical subcultures pull like-minded persons together. They provide institutional supports for interaction and the reinforcement of subcultural values and behaviors.

Lester (1987) described what he called a subculture of suicide in a group of three teenagers who committed suicide, actions which precipitated an epidemic of non-fatal suicidal behavior among their peers in the high school that they were attending. The group members used drugs extensively, had poor relationships with their parents, and had poor self-images. Interestingly, the preferred music of the group was heavy metal, and they also liked the visual art that accompanied this music – rocket ships, crashing cars, muscular hulks fighting with flaming torches, and crazed rock guitarists in contortions.

The notion of musical subculture has been used to explain the association between several specific musical forms and suicidality at the aggregate/regional level. Links between suicidality and the following musical forms have been established: heavy metal (Stack, Gundlach & Reeves 1994; Stack 1998), country music (Stack & Gundlach 1992; 1995), opera (Stack 2002a), and blues (Stack 2000b). In this perspective music does not in itself drive people to suicide. For example, in the case of country music subculture, pre-existing factors probably account for a macro-level association between country music radio market share and white suicide rates in 49 cities (Stack and Gundlach 1992). Country music fans are already at somewhat higher risk given their higher incidence of divorce and gun ownership, two noted risk factors for suicide (Stack & Gundlach 1992; 1995; Lester 2000).

⁴ He fought in the wars against Napoleon and, later, against Austrian domination of Hungary (Lester, 1996).

CAN A SONG PRECIPITATE SUICIDE?

From a psychological perspective on art, exposure to suicidal art forms might drive some persons to suicide. For example, there was a spate of suicides after the publication of Goethe's *The Sorrows of Young Werther* in 1774, and in the early 1700s in Japan as a result of the suicides depicted in the popular Kabuki plays (see chapter 19 in this book). The psychological perspective neglects, however, the notion of how the social interactions between people in a subculture can also promote suicidality. In addition, a statistical interaction effect is likely. One would expect that already depressed or otherwise suicidogenic individuals would be at the greatest risk from exposure to suicidogenic art.

Gloomy Sunday is a noted example of a suicidogenic song, which could conceivably contribute to suicide among persons already at risk. The lyrics in the original version of the song certainly are sad and suggestive of suicide. There are two stanzas, and the second contains an important explicit suicide-oriented line: "My heart and I have decided to end it all."

American and other post 1930's versions of the song have often watered down the suicidogenic mood of the song. While the line about ending it all in the second stanza is often maintained, as in the Billie Holiday and Sarah McLachlan's renditions, a third stanza is often added in which the problems of the narrator are likened to a dream as in Sarah McLaughlin's version: "Dreaming, I was only dreaming, I wake and find you." Nevertheless, the mood of the song remains sad and could conceivably promote suicidality in those who are already at risk.

The significance of this particular song is manifest in the fact that it has been recorded 79 times, unlike most songs in popular music. The singers that have recorded it include many famous Americans such as Billie Holiday, Paul Robeson, Elvis Costello, and Ricky Nelson. Further, the song is significant since, unlike most popular songs, Gloomy Sunday was recently made into a movie. While the movie received mixed reviews (Ebert 2003; Holden 2003; LaSalle 2003), it holds the record for the longest run time (over 70 weeks) of any movie ever shown in Boston (<http://www.imdb.com>).

OTHER SUICIDE SONGS

Gloomy Sunday is another example of the link that is often found between art and suicide. Web-based lists of songs often contain over 1,000 songs that deal directly with suicide. There are many anecdotal accounts linking such songs to specific suicides of individuals. For example, persons have been found dead next to a recording of Blink 182's *Adam's Song* (Dettmar, 2000). Other suicide songs that have been associated with actual suicides include *Fade to Black* by Metallica and Ozzy Osbourne's noted *Suicide Solution* (Stack, 1998). These recordings have resulted in lawsuits by angry parents of teenage suicide victims.

Cameron, Yang and Lester (2005), in an examination of celebrity suicide from an economic perspective, discussed the suicide of the lead singer of Nirvana, Kurt Cobain, in 1994 and the possible emulation effects resulting from his suicide, since his music and life

style probably appealed to those with a suicidal disposition. In Seattle, after Cobain’s suicide, there was one copycat suicide and an increase in calls to the Seattle Crisis Clinic (Jobes, Berman, O’Carroll, Eastgard & Knickmeyer, 1996).

Since there are many examples of suicide songs, it is possible that there may be an aggregate level association between suicide rates and the incidence of suicide songs on the radio. Future research is needed to assess the macro-level association between the frequency of popular suicide songs and the national suicide rate. Cross-sectional research is also needed. Perhaps in regions that play a relatively high number of suicide songs, the suicide rate is higher.

RESEARCH ON MUSIC PREFERENCES AND SUICIDALITY

Martin, Clarke and Pearce (1993) found that suicidal ideation was more common in high school students who preferred rock and heavy metal music. Those who preferred rock/heavy metal more often were delinquent, risk-takers and drug users, came from broken homes, and had less close family relationships. Lester and Whipple (1996) found that preference for alternative rock and heavy metal music was associated with past, but not current, suicidal ideation in college students. Stack (1998) found that approval of suicide was associated with being a heavy metal music fan, but not after controls for marital status, age, sex, education, conservatism and church attendance, and Stack (2000b) found the same result for liking blues music.

COMMENT

Gloomy Sunday stands out as an icon of the artistic expression of suicide in popular song. Cultural icons of suicide in art (for example, the suicides in *Romeo and Juliet*) may have an especially strong effect on cultural definitions of suicide. The long-term effect of artistic cultural icons can shape public definitions of suicide. By shaping opinion on the causes of suicide, they can also help define public strategies for suicide prevention.

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Chapter 19

THE KABUKI EFFECT¹

Karolina Kryszinska and David Lester

The phenomenon in which a book, play, song or film provokes a number of people in the community to commit suicide is commonly called the Werther Effect after the publication of Goethe's *The Sorrows of Young Werther* in 1774 which purportedly led to young lovers committing suicide in imitation (Thorson & Oberg, 2003). However, an earlier recorded epidemic occurred in the early 1700s in Japan.

Kabuki started in Japan in 1603 as a dance style performed by women who were also available for prostitution. After the government banned women from the stage in 1629, men took over the roles, and drama was introduced into kabuki. After another government crackdown in 1652, kabuki evolved into a more stylized form of drama (internationaleflcafe/japanese-culture-kabuki.htm). The association of prostitution with kabuki was made stronger by the cultural interchange of slang and fashions between the two subcultures, eventually leading to the setting of many kabuki plays in houses of prostitution. The characters became common people, and a popular plot was thwarted love followed by the suicides of the lovers (Shively, 1978).

Among the most popular kabuki plays from this period are "The love suicides at Sonezaki" (1703) and "The love suicides at Amijima" (1721) by Chikamatsu Monzaemon² (1653-1725). The plots involved conflict between obligations and personal feelings - for example, a middle-class merchant falls in love with a prostitute, ruins his life, and commits suicide with her, hoping to be reunited in the afterlife. These double suicides (shinju) presented onstage were imitated by many young people, leading to an epidemic of suicides. Kabuki plots were often taken from real-life double suicides reported in the daily newspapers so that the dramas and actual suicides reinforced each other.

The government became concerned about these suicides and banned performance of the plays in 1723. The government prohibited funerals for the deceased, left the bodies in public

¹ This chapter is based on Kryszinska and Lester (2006).

² Some of his plays were originally written for puppet theater and then adapted for the kabuki performance. The Love Suicides at Sonezaki was performed as a kabuki play in 1719.

view at Nihonbashi Bridge for three days and, if one of the lovers survived, he or she was tried for murder (Takahashi & Berger, 1996).

It is interesting to note that an epidemic of double suicides has never been reported after Shakespeare's "Romeo and Juliet" was first performed. Perhaps national character plays a role in the appearance of contagious suicide?

Another little known epidemic of suicide occurred after the publication of a scholarly book and is described in the next section.

A POSSIBLE SUICIDE EPIDEMIC AFTER WEININGER'S "SEX AND CHARACTER"³

Otto Weininger was born into a Jewish family in Vienna on April 3, 1880. Little is known about Weininger's childhood, but he seems to have identified with his authoritarian father and developed hostility toward his mother (Abrahamsen, 1946). There is the possibility that Weininger's hostility toward his mother was a defense against his strong incestuous desires toward her, and Weininger may have become what is now called a "latent homosexual." Weininger's father did not follow Jewish customs and in fact was rather anti-Semitic, an attitude that Weininger picked up. Weininger converted to Christianity in 1902, as did two of his sisters. Abrahamsen described the young Weininger as narcissistic and grandiose in his self-admiration. Indeed, Weininger believed that he was a genius.

Weininger attended the University of Vienna, focusing on philosophy and psychology. He worked feverishly on his doctoral thesis, neglecting his health in the process, and was awarded his doctorate in 1902. He believed that his dissertation was brilliant, but he had trouble finding a publisher. Eventually, a small publishing house published his dissertation in May 1903 with the title "Sex and Character". Initially, most critics ignored the book, although a few (to whom the anti-Semitism appealed) praised it. However, it soon became popular among young Jews.

In "Sex and Character", Weininger described women as being on the lowest possible level of existence so that even the best woman is inferior to the worst man. He justified this with a pseudo- biological and psychological rationale. Additionally, in the book Weininger proposed the classic division of women into mothers and whores, and Weininger himself decided to become sexually abstinent in 1903. In addition, in his book Weininger depicted Judaism as an inferior religion to Christianity, equating Judaism with the femininity he despised so intensely. Weininger committed suicide on October 4, 1903, in a rented room of a house in which Beethoven had once lived.

In her autobiography, Puah Rakovsky (2002), a Jewish radical born in Poland in 1865 (which was a part of the Russian Empire at that time) described events in the early 1900s. In 1906, her younger sister Feygl committed suicide in Paris by shooting herself in the head. A year earlier, Feygl had tried to kill herself by poison in Bialystok, but was forcibly rescued. When asked why she wanted to die, Feygl had said that life was empty and dirty. At the time of this first suicide attempt, Feygl agreed not to kill herself if she could go to Paris to study.

³ This section is based on Lester (2004).

Another sister, Tsirel, went with Feygl to keep watch on her. However, Feygl shot herself one day when Tsirel was out at lunch.

Rakovsky wrote, "My sister's suicide was neither the first nor the only sad event heard about in Bialystok at that time" (p. 108). Rakovsky noted that between 1903 and 1919, Weinginger's book went through 17 editions and was translated into almost every European language! Young people admired it tremendously, but many became embittered by its message. Many young women, striving for education and self-development, were shattered by the book's conclusions. In Bialystok, seven girls, including Feygl, came under the book's influence and committed suicide, mainly girls from Jewish homes and with some education. The epidemic of suicides affected many cities.

Weininger's book did not advocate suicide, although the suicide of Weininger himself shortly after the book's publication must have added to the book's cachet. What was suicidogenic was its attack on women and on Jews which, combined, appears to have had a tremendous impact on young, Jewish women. That the suicides were committed by educated women may have been accounted for by the fact that only educated young people would have heard of and read the book.

Thus, this "epidemic," if it can be confirmed, was not copycat phenomenon, but it is a phenomenon in which a single book may be held responsible for a suicide epidemic.

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**PART VII: THE CREATIVE ARTS
AND PSYCHOTHERAPY**

Chapter 20

POETRY AS THERAPY: THE LIFE OF ANNE SEXTON¹

David Lester and Rina Terry

In recent years, a number of psychotherapists have explored the use of poems in psychotherapy as an agent of communication between psychotherapist and client (Chase, 1973; Leedy, 1969, 1973). For some clients, it is often easier to communicate important messages either through their own poetry or through the poems of others. Alexander (1990) noted that poetry appeals to adolescents because it can be a form of private expression, and several adolescent suicides have expressed their psychological pain through poetry (for example, Mack & Hicker, 1981). The writing of poems perhaps permitted them to ventilate and clarify their thoughts and feelings without risking ridicule from friends or parents (Roscoe, Krug & Schmidt, 1985). This was especially true if the adolescent was feeling depressed, lonely, sad or misunderstood.

In general, commentators see such expression as cathartic, the useful release of suppressed feelings (Leedy & Rapp, 1973). Alexander (1990) saw poetry therapy as a safe way of expression and as a way of helping people feel better about themselves. At the same time, others warn that, for suicidal clients, care must be taken in cathartic writing not to precipitate an intense suicidal crisis (Greuling & DeBlassie, 1980).

There are many schools of psychotherapy that see self-absorption and contemplation of one's problems as counterproductive. Frankl (1968), an existential psychotherapist, saw preoccupation with one's inner psychological processes as deleterious for the client, believing that action was far more useful than self-contemplation. The viewpoint is found also in the Eastern systems of psychotherapy, such as Morita therapy (Reynolds, 1984).

This raises the dilemma of whether it is beneficial for suicidally-distressed individuals to express their thoughts and feelings through writing, including poetry, thereby ventilating and perhaps communicating the feelings, or whether this tactic is counterproductive because it leads to self-absorption, making the individuals feel worse.

In the present chapter we will explore the value of having clients use their own poetry as a means of working through psychological conflicts and distress by considering the life of the American poet Anne Sexton who committed suicide at the age of 45.

¹ This chapter is based on Lester and Terry (1992).

THE LIFE AND SUICIDE OF ANNE SEXTON

Middlebrook (1991) wrote the first detailed biography of Anne Sexton, and some of the salient features of Sexton's life are important to note here. Anne Sexton was born in Newton, Massachusetts, November 9, 1928, the daughter of a successful businessman (Greiner, 1980). She killed herself with car exhaust in the garage of her house in Weston, Massachusetts, October 4, 1974. She attended Garland Junior College but dropped out after a year. She eloped with Alfred Sexton, a 20-year-old college student, married him in 1948, and had two daughters. Her husband became a traveling salesman, and she became a depressed housewife. She lived for a time in Baltimore and San Francisco while Alfred was in the Navy, before settling in Massachusetts.

Her first daughter was born in July 1953, and Anne Sexton had her first psychiatric breakdown in 1954, the year that her beloved great-aunt died. Her second daughter was born in August 1955, and Sexton was hospitalized for the second time in 1956 after having attempted suicide on her birthday. She began to write poetry partly for therapeutic purposes at the urging of her psychiatrist. She was hospitalized many times and was under the continual care of therapists for the rest of her life, during which time she made many suicide attempts using medications.

Sexton used her experiences of married life and her psychiatric hospitalizations to produce a confessional style of writing. Her psychiatrist encouraged her to join a verse-writing workshop at the Boston Center for Adult Education. She then attended Boston University where she studied (for a brief time in the same class as Sylvia Plath) under Robert Lowell. Once she was established as a leading poet, she taught at Boston University (1970-1974) and Colgate University (1971-1972). Her first book of poems, *To Bedlam, And Part Way Back*, was published in 1960. She was awarded the Pulitzer Prize for poetry in 1967, received a Guggenheim fellowship in 1969, and was awarded many other honors.

Her ten books also attracted negative reviews. Some thought that she dwelt too much on the unpleasant aspects of bodily experience, such as masturbation and menstruation; some thought that her poems were too confessional; and some that her poems were published too soon, without adequate polishing.

Her mother died of cancer in 1959, accusing her daughter of having given her cancer through her suicide attempts, an absurd claim but one that caused Sexton a great deal of pain. Her father died soon after. She remained under psychiatric care and eventually became dependent on alcohol and sedatives. She was prescribed Thorazine, which caused her to gain weight and feel tired. She had an insatiable need for love and reassurance. In her letters to lovers and friends, she treated them as father-confessors and intimate advisors.

In 1974, Sexton decided to stop taking Thorazine because it impeded her creativity. She divorced her husband and, because of the resulting loneliness, her need for friends grew more frantic. She grasped at religion for comfort and stability. Her suicide by car exhaust about a month before her birthday was influenced perhaps by the suicide with domestic gas of her friend Sylvia Plath eleven years earlier.

SEXTON'S PSYCHIATRIC ILLNESS

Although Sexton called her breakdowns psychotic, her first therapist (Dr. Martin Orne) told Middlebrook (1991) that Sexton was not psychotic. He diagnosed her as an hysteric neurotic. However, a reading of Middlebrook's biography indicates that Sexton experienced many depressed and manic episodes, and a secondary diagnosis of bipolar affective disorder seems appropriate.

Sexton's psychiatric disturbance was chronic, lasting from the time of her first breakdown in 1954 until her death. Psychiatric illness also ran in Sexton's family. A great-aunt on her mother's side of the family had a psychiatric breakdown, was hospitalized, and received electroconvulsive therapy. Both of Sexton's parents were alcoholics. Sexton's sister also committed suicide (in 1983, with an overdose of sleeping pills while depressed), and an aunt on her father's side killed herself with a gun in 1975, the year after Sexton's suicide. To some, this may suggest the possibility of a genetically transmitted psychiatric disturbance in Sexton's family, whereas to others this may suggest the presence of dysfunctional family patterns passed on from generation to generation.

SEXTON'S POETRY

Many critics, such as McGill (1977), saw Sexton as preeminently a confessional poet. She wrote, in their view, in order to obtain a clearer sense of who she was. She has been described as a minor poet, often diffuse, formless, strident, and incoherent (Greiner, 1980).

It can be argued, on the other hand, that this description of Sexton's poetry is wrong. The "confessional" mode had already been adopted by many famous poets of her era. The use of "Le moi" was being cultivated in fashionable literary journals everywhere. It seems curious that the major and by far most vitriolic expressions of outrage were reserved for Sexton's poetry (Kumin, 1981). Sexton preferred to think of herself as an imagist based in reality rather than as a confessional poet. In various interviews she insisted that poetry is as much fabrication as it is confession. Even the most brutal truth is shaped by imagination's energy and the craftsman's hand.

Sexton, encouraged to write by her first psychotherapist, came to see that the symptoms of her disturbance were "like metaphors, encoding meanings rich with personal history" (Middlebrook, 1991, p. 64). Her work abounds with powerful images. It is exactly these realistic, often painfully vivid, images that provoked so much of the negative criticism of her work. Yet, Sexton's use of concrete language and sensual detail aid our visualization. In "Ring the Bells," one of her early poems (1981), imagery, rhythm, and metaphor combine so that the reader becomes one of the patients.

And this is the way they ring
the bells in Bedlam....
.....and this is the small hunched squirrel girl
on the other side of me
who picks at the hairs over her lip
who picks at the hairs over her lip all day....

(1981, p. 28)

The small hunched squirrel girl is perhaps too real, an image we do not wish to be made aware of. Nor does the steady, relentless rhythm allow one respite from the poem's distasteful reality. She speaks openly of human experiences that other artists of the day did not yet wish to face.

If she had begun writing later, during the era at the time of her death, the criticism of her subject matter would not have been as intense. Sexton was a precursor of the now celebrated cause of women's liberation. When it was not yet fashionable to write poems about being a woman, she wrote them openly, unashamedly, and without resorting to rhetoric. When Sexton is at her best, her poems bear the mark of fine crafting. Her images are powerful and accessible. Such artistic intensity refutes the depiction of her work as "emotional garbage."

If at times Sexton failed to adhere to the strictest standards of artistic excellence, her attempts might be viewed, in a therapeutic sense, as trying to establish emotional order out of chaos. She appears to have used her writing as a vehicle for grounding herself rather than as a confessional swamp in which to wallow. For example, "Lullaby" (1981) uses the familiar childhood medium of soothing lullabies as a way of articulating her "Bedlam" experience.

.....The night nurse is passing
out the evening pills
She walks on two erasers,
padding by us one by one.
My sleeping pill is white.
It is a splendid pearl;
it floats me out of myself,
my stung skin as alien
as a loose bolt of cloth

(1981, p. 29)

She may have been frequently concerned with who and what she was, but she positioned herself in both the real and imagined worlds in ways that transcend neurotic preoccupation and speak to her extraordinary and persistent vitality as an artist.

If one were to make a sound map of Sexton's poetry, beginning with her earliest work, "Lullaby," through to the poem written close to her death, "Lessons In Hunger," one would find a wealth of human emotion. Recurring "s" sounds often produce a hiss undergirding the poems, hinting at the dangerous undercurrents beneath the often comic handling of the most serious issues. Heavy "o" sounds predominate, moaning through the poems. In "Consorting With Angels," the "i" sounds bring to mind the cry of a person in distress.

I was tired of being a woman,
tired of the spoons and the pots,
tired of my mouth and my breasts,
tired of the cosmetics and the silks....

(1981,p.111)

and the poem continues with words such as still, filled, flies, and white. "The Fury of Abandonment" has k-sounds that suggest choking sounds.

Someone lives in a cave
 eating his toes,
 I know that much.
 Someone lives under a bush
 pressing an empty Coca-Cola can against
 his starving bloated stomach,
 I know that much.....

(1981, p. 370)

and the next few lines include the words cut and claws. Toward the end of her life, the lines of her poems are shorter; the fat is cut away leaving a leaner poem, and still she could find a good image.

.....Your clouds wear white,
 trying to become nuns
 and say novenas to the sky....

(1981, p. 612)

These techniques are not accidental. Sexton used repetition to promote a sense of unity in many poems, a sense of stability in her own confusion and fragmentation. She pulled other poems into shape with rhyme and form. Kumin (1981) wrote of Sexton's suffering for being labelled a "confessional poet," and of her efforts to make the tone more consistent and the rhythm smoother. Sexton always flung herself energetically into this task. Her efforts were able, through the rhyme scheme, repetition, and metaphor, to give the subject matter a dignity it demanded. Middlebrook (1991) described Sexton's work style as follows:

Pouring over her rhyming dictionary, Sexton would work out elaborate sound patterns and rhyme schemes by hand and then, at her typewriter, fill them slowly to the brim with images, sentences, and phrases that finally turned into poems. (p. 74)

In 1958 Sexton worked on one poem, "The Double Image," for three months, trying to "achieve the effect of a spontaneously-sounding first-person voice within the constraints of a complex rhymed stanza" (Middlebrook, p. 94). Typically, she revised twenty or more drafts of a poem. Sylvia Plath described Sexton's poems as wonderfully craftsmanlike. In fact, Sexton once commented that she did not like the idea of keeping a journal or diary because it was not a disciplined form. A poem has more rules (Middlebrook, p. 276).

Thus, Sexton revised her poems extensively. In the process of revision, the poet must concentrate no longer on content, but rather on form. This allows for both the action that therapists deem to be therapeutic and the distancing of the self from one's problems. Because Sexton ultimately chose the moment of her death, one should not discount the therapeutic help her writing afforded her.

This analysis of the impact of Sexton's poetry writing on her psychological state of mind fits well with Ghiselin's (1952) analysis of the creative process in which the creative products

of the mind need management and order urged on them. Creativity, at least that which is communicated clearly to others, requires discipline. For Sexton, the creative process, rather than her psychiatric illness, was able to become the controlling force, and the conscious effort of will involved was a stabilizing influence for her.

Anne Sexton illustrates the dialectic in poetry as therapy, between expression and catharsis on the one hand and cognitive control on the other. To be sure, because her poems were often based on her experiences and emotions, they were outpourings of her individual human experience. Yet, her intense revision of these outpourings gave them artistic form and structure, and elevated her unique experience to the universal experience of human suffering. As she perfected her poems, she was, perhaps, able to achieve an intellectual distancing from and control over the emotions that initially stimulated the content of the poems.

ANALOGIES TO COGNITIVE THERAPY

Burns (1981), in his book on cognitive therapy, suggested many exercises for clients experiencing negative emotions such as guilt, anxiety, and depression. In the theory guiding cognitive therapy, events and experiences in themselves do not produce negative consequences. Rather, it is the mediating thoughts we have after the experiences that lead to the negative emotions. Our lover ends the relationship, and we say to ourselves, "I always fail in these relationships," "I'll never find another lover," or "I must be a terrible person because no one loves me." It is this *catastrophizing* and *overgeneralization* that produces the severe anxiety and depression rather than the event itself. The cognitive therapist wants us to challenge these thoughts. Where is the evidence that we will never find someone to love? Is it true that no one loves us? Even if no one loved us, would that make us terrible persons?

Burns recommended that clients keep a log. When clients experience a negative emotion, they write an entry in which the emotion is logged in, the thoughts that preceded it noted down, as well as the precipitating event. Then clients write down the challenges to the irrational thinking and, finally, indicate the final emotion. Burns noted that this exercise in itself calms the client and gives the client distance from the emotion. Clients are writing about their depression rather than feeling it. In a similar way, writing poetry as Sexton did can be both expressive (and cathartic) and also involve intellectual distancing.

It should be noted that writing about one's feelings and conflicts inevitably involves some structuring of the ideas because writing requires this. It also requires grammatical structure and the choice of appropriate words much more than does mere inner experiencing of the feelings and conflicts. Thus, writing involves some intellectual activity and, therefore, intellectual distancing from the emotions and thoughts.

The craft of poetry provides a way of furthering structuring of the emotions by imposing the structure on a poem, whether it be rhyme, meter, a specific format or other poetic device. The revision process gives the writer a sense of control, and ultimately the emotions, such as anger and depression, become secondary to one's artistic sensibilities. In crafting the poem the client is forced to step back and view the content from an intellectual and non-emotional perspective. This may serve a purpose similar to the writing exercises used by cognitive therapists. Furthermore, the process of revision is a forward movement toward the finished

product that must meet artistic criteria. Thus, even if the content is historical, the process of revision is future oriented.

It may be that mere expression of emotions and thoughts through poetry may be dangerous for suicidal clients as it may lead to excessive preoccupation with the emotional content that mirrors the psychological pain of the client. It is a common finding that socially isolated and withdrawn adolescents who commit suicide leave behind diaries, writings, and poetry in which they had expressed their pain, obviously to no avail. It may be that only when writers are forced to craft their expressive products into formal works of art is there a psychotherapeutic effect. Several commentators, including Kumin (1981), believe that Sexton lived as long as she did because she was able to do this. Had she not been introduced to poetry by her therapist, she might well have killed herself sooner.

SIMILARITIES BETWEEN THE CREATIVE PROCESS AND PSYCHOTIC THINKING

Arieti's (1967) analysis of the similarities and differences between the creative process and psychotic thinking is pertinent here. He noted that poetry uses metaphor as one of its fundamental components, and that a similar use of metaphor (and related figures of speech) occurs in primary process thought as witnessed in dreams and schizophrenic ideation. However, unlike poetry, schizophrenic thought fuses the objects in the metaphor. In poetry a woman may be like a rose, but in schizophrenia the woman becomes a rose. The primary process thinking evident in schizophrenia has no consciousness of abstraction, but in poetry the primary process is used to help the abstract emerge. Thus, poets blend primary and secondary processes harmoniously.

A second feature of the aesthetic process, according to Arieti, is that the concept is concretized. Arieti quoted from the Talmud: "Don't make a woman cry, for God counts her tears." This concrete image suggests a more abstract thought behind it, and a similar process is at work in proverbs. Schizophrenic persons, of course, have great difficulty moving from the concrete image to the abstract thought.

Arieti defined *adualism* as the lack of an ability to distinguish between two realities, that of the mind and that of the external world. Poets use images of the mind but do not confuse these images with reality. They are "as if" statements. The schizophrenic transforms the "as if" statements into reality. "If I were King...." becomes "I am King."

Arieti noted that the emphasis on verbalization, the phonetic sound of the words, is also common to poetry and schizophrenia. But, whereas in schizophrenia this emphasis on verbalization is a regressive phenomenon, in poetry the emphasis accentuates the connotations of the words through such techniques as onomatopoeia, euphony, rhyme, rhythm, and repetition.

The dualism of poetry (and other art forms) is transformed into an esthetic distance so that the poet (and reader) can recognize that the poem has a life independent of the poet and the admirer. Schizophrenics cannot achieve this distancing and have difficulty using secondary processes. Artists, on the other hand, have sometimes tried to obtain psychotic like states (by smoking opium, taking other drugs or getting drunk) in order to facilitate their creativity.

As an illustration of this difference between the primary process in psychotics and poets, Arieti presented the case of a schizophrenic who, when in the midst of her psychotic episode, wrote poems in which people were described as worms and who insisted that people were worms. As her condition improved, her poems changed so that the images were clearly metaphors.

Arieti's ideas have relevance to Anne Sexton who moved from disturbance to poet. It may be that the experience of primary process thought in disturbed episodes facilitates the creativity of the poet, but does the creative work of the artist help the recovery from disturbance? Inasmuch as the recovery from disturbance is often a fragile state, does immersion in the primary process while composing facilitate recovery or trigger relapse? It seems evident from Anne Sexton's life that initially her poetry helped her recover from her psychiatric disturbance (in fact, Middlebrook thought that poetry saved Sexton's life) but, toward the end of her life, writing could perhaps no longer prevent relapse, and indeed may have hastened it.

DOES WRITING HELP OR HARM THE SUICIDAL INDIVIDUAL?: A DISSENTING VIEW

The question has been asked whether writing is (or can be) therapeutic for creative writers or whether it is a stressor which contributes to their psychological disturbance. Silverman and Will (1986) analyzed the life and suicide of Sylvia Plath and concluded that, although she tried to control her suicidal impulses by means of her poetry, she failed in this endeavor. Silverman and Will argued that poetry is successful when it bridges the inner worlds of the creative person and the audience. (We presume that they mean critically successful, for even poor poetry can serve a useful psychological function for the writer, even if it is merely cathartic.) To be successful, poetry must first achieve a balance between the writer's use of the audience to serve his or her own narcissistic needs (a type of exhibitionism) and the desire to give others a way of structuring the terrors and anxieties that afflict us all.

The writer must also achieve a balance between the potentially destructive conscious and unconscious forces motivating the writing and the constructive desires to harness these forces for the purpose of writing creatively. Related to this, the writer must balance primary and secondary process mechanisms. The writer must also compromise between the fantasy permissible in writing and the acceptance of reality necessary for successful living.

When they apply their ideas to Sylvia Plath, Silverman and Will asserted that the successful creative process is successful only when the unconscious forces in the writer operate silently and remain hidden from view. This assertion represents a rather traditional view of creative writing. It would seem to express a preference on the part of Silverman and Will for a particular type of literature rather than expressing a universal truth. For example, the unconscious forces motivating Ernest Hemingway may be under control in his writing, but they are certainly not hidden. More pertinently, the confessional style of poetry, developed by W. D. Snodgrass and Robert Lowell and pursued by Anne Sexton, is in direct opposition to Silverman and Will's view.

Silverman and Will see the transitional period in Plath's poetry as being her final years in the United States. Plath may have had her confidence undermined by the frequent rejections

that writers must endure so that she changed her style. In her new style, she revealed her deepest feelings in her poems, using her experiences to create the poem rather than to simply transform it. Silverman and Will note that she described her early poems as "proper in shape and number and every part" but not alive. Her poems moved from being a reordering and reshaping of experience with a poetic purpose toward becoming expressions of herself. She identified with her poems, which made their rejection even more painful, and Silverman and Will label this change as a "narcissistic regression."

The causal sequence which Silverman and Will propose for Plath has no evidence for or against it. It is simply one reading of Plath's life. Other, equally plausible, alternative paths can be proposed. For example, it is quite likely that Plath's participation, along with Anne Sexton with whom she became very close, in a poetry workshop run by Robert Lowell had a major impact on her writing style. Several members of his workshop adopted a more self-revealing content for their poems, and two received Pulitzer prizes for their work (Lowell and Sexton).

Furthermore, Plath, as she herself clearly recognized, was prone to recurring depressions. In all probability, Plath had an affective disorder, possibly bipolar, and her depressions were likely to reoccur periodically. It is evident from the severity of her depression in 1953 which led to a very serious suicide attempt that she would likely become suicidal again with each new depression (much as Virginia Woolf had).

What is interesting is that, whereas in the early 1950s, her writing may not have helped her cope with the stressors, external and intrapsychic, with which she was confronted, in the later 1950s her switch to a more revealing and personalized style of writing may have helped her survive. Silverman and Will claimed that her writing failed to prevent her suicide. We suggest that it may have postponed her suicide.

In the months prior to her suicide, Plath wrote feverishly, sometimes producing several poems in one day. (We see this feverish activity in the months prior to a suicide also in Anne Sexton.) What would Silverman and Will suggest as a more appropriate strategy for a person confronting intrapsychic turmoil who is not under professional care? It is very likely that the writing helped Plath control her inner turmoil, and some commentators think that the poems she produced were among her finest.

Interestingly, both Plath and Sexton showed manic trends prior to their suicides, writing poems furiously, poems with more emotional expression and less poetic crafting. Rather than arguing that writing poetry contributed in part to their suicides, it makes much more sense to say that, in their final breakdowns, poetry was no longer able to help them deal with the intrapsychic forces driving them as it had in the past. As their inner turmoil increased, both wrote feverishly, almost like a safety valve letting out the steam under pressure in a boiler, but to no avail since the pressure was building up faster than they could release it.

But this final failure of the craft of poetry to keep Sylvia Plath and Anne Sexton alive does not, as Silverman and Will argue, signify total failure. Both were outstanding poets and functioned quite well given their probable affective disorders. We would argue that the craft of poetry kept both poets alive for many years after their self-destructive impulses first manifested themselves and so signifies success.

CONCLUSION

We have used the example of Anne Sexton, who began to write poetry after her first psychological breakdown, to argue that, for individuals in suicidal distress, poetry therapy may be useful. Specifically, the individual takes the raw or primary process urges, subjects them to a crafting process, and shares the result with a therapeutic partner. This crafting permits intellectual distancing from the emotions, which gives the individuals some control over the emotions and conflicts and may enable them to survive the suicidal crises. Sexton's story also raises the issue of whether what appears true for her as an artist - that the harder she worked at achieving the most aesthetic product the more therapeutic it was - might also obtain for the non-artist patient.

For Sexton, it appears that as long as she was able to apply the craft of poetry to her creative productions, she was able to stay psychiatrically stable and even heal. Both Sexton and Martin Orne, her first therapist, believed that her poetry had helped her recover. It may be that toward the end of her life, as her ability to craft her poems declined, so did her mental stability dissipate.

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Chapter 21

MASKED DEPRESSION AND SUICIDAL IDEATION IN THE DRAWINGS OF SCHIZOPHRENIC PATIENTS

Dalia Merari

Numerous studies have dealt with the relationship between creativity and insanity. Many scholars have found that the prevalence of mental illness is higher among outstandingly creative people – artists and scientists – higher than in the general population. In a large study conducted in Germany, Adele Juda (1949) found that the incidence of mental illness among 113 prominent artists (including painters, sculptors, architects, poets and composers) and 118 scientists and their families was significantly higher than in the general population. There was a notable difference between artists and scientists with regard to the type of psychological disorder. Whereas among artists there was a particularly high rate of schizophrenia, the most common disorder among scientists was manic-depressive disorder. Interestingly, both artists and scientists had a high suicide rate.

A higher prevalence of mental disorders among creative persons has also been found in other studies (e.g., Martindale, 1972, 1990; Andreasen & Canter, 1974; Andreasen, 1987; Ludwig, 1992, 1995; Post, 1994, 1996). It should be noted that most studies were conducted on literary creators and scientists. Only a few of the studies included painters and sculptors. In addition, some of the studies suffered from a variety of methodological flaws. Nevertheless, the cumulative weight of the research on this issue leaves no doubt that the prevalence of mental disorders among exceptionally creative people is significantly higher than in the general population.

This chapter, however, has to do with a different aspect of the relationship between mental disorders and art creations. Instead of looking at the prevalence of mental illness among creative persons, it deals with the value of artwork for psychotic patients as a diagnostic tool. The chapter, therefore, focuses on the art expressions of psychotics rather than on the mental illness of artists. It focuses on the patients' paintings, not from the point of view of their artistic value, but from the question of their potential contribution toward a better understanding of the patients' emotional state.

More specifically, this chapter examines a phenomenon that I have encountered in the course of my work with acute schizophrenic patients. The phenomenon, which I call *masked*

depression, was discovered in the paintings of schizophrenic patients in a mental institution. The chapter describes the manifestation of masked depression and suicidal ideation in the paintings of schizophrenic patients in the absence of other indications of the existence of a depressive condition.

This chapter begins with a brief history of the study of mental patients' artwork. It then describes the characteristics of schizophrenics' paintings and delineates the symptoms of depression and suicidal ideation in the patients' drawings. The chapter discusses the phenomenon of masked depression in schizophrenic patients and the unique role of artwork in identifying this state. At the core of the chapter are illustrations of patients' drawings and the circumstances under which they were created. These illustrations provide concrete examples of the manifestations of masked depression and suicidal ideation in schizophrenic patients with whom I have worked in a psychiatric hospital in Israel. (Some of these patients eventually committed suicide). The chapter concludes with a discussion of the symbols in the patients' drawings.

ARTWORK AS A PSYCHO-DIAGNOSTIC TOOL FOR PSYCHOTIC PATIENTS

Academic interest in the art creations of the mentally sick began in the late 19th Century, when two French psychiatrists, Paul-Max Simon and Ambroise Tardieu, and an Italian psychiatrist and criminologist, Cesare Lombroso, published their impressions of the spontaneous paintings of psychiatric patients (Naumburg, 1950; MacGregor, 1989; Malchiodi, 1998). Simon and Lombroso were the first who found an amazing similarity between naïve art and the artistic creations of psychotic patients. Lombroso (1895) looked for the relationship between ingenuity and madness. Later on, the development of the psychoanalytic movement impelled greater interest in the art creations of the mentally ill, whose content was viewed as demonstrating psychoanalytic principles.

At that time, in the early 20th Century, the therapists' approach to the art creations of mental patients followed two different lines. Some writers (e.g., Prinzhorn, 1972) dealt with the esthetic importance of psychotic patients' art. Prinzhorn was a student of art and philosophy who later studied psychiatry. He collected the spontaneous paintings of hospitalized mental patients in several European countries. Most of the paintings in his collection were drawn by schizophrenics who had no earlier training in art. Prinzhorn developed a theory in which the esthetic drive and the need to create art are innate, but schooling and socialization reduce the spontaneity of art creation and suppress it. He suggested that, in the schizophrenic state, the esthetic drive is relieved of the external barriers because the schizophrenic patients shut themselves off from the outside world and turn inward. Their art creations are, therefore, emotionally richer.

Other scholars have been influenced by psychoanalytic theories related to the psychodynamics of free art expressions among psychotic and neurotic patients. With regard to the application of psychoanalytic theory to the interpretation of the art and creativity of schizophrenic patients, especially notable is the work of the psychoanalyst Ernst Kris (1964). In Kris's opinion, the creativity of schizophrenics should be viewed as regression to primary thinking processes. Kris proposed that the schizophrenic thinking process is similar to the

dream process in mentally normal people. Episodes of primary thinking exist in normal people, such as in the art creation process but, unlike the thinking of schizophrenics, these episodes are brief in normal people and always in the service of the ego. The ego is always in control and does not allow the mind to completely ignore the boundary between external and internal reality. Kris suggested that, in schizophrenics, primary thinking is constant rather than transient. Arnheim (1966) pointed out that the content of schizophrenic artwork seems bizarre to the observer. The weirdness is a result of the private, idiosyncratic symbols used by the schizophrenic artist, as well as the peculiar balance and the absence of differentiation between whole and detail, form and background.

The systematic use of artwork as a diagnostic and therapeutic instrument began only in the 1940s, with the work of Margaret Naumburg. Similarly to earlier psychoanalytically-oriented writers, Naumburg (1950) regarded the artwork of mental patients as projections of their unconscious feelings, thoughts and images. However, she went a step further by stressing the value of this form of expression as a means of communication with the patient.

CHARACTERISTICS OF SCHIZOPHRENIC PAINTINGS

The spontaneous paintings of schizophrenic patients have several characteristics. Typically, the paintings follow the patients' free associations, which make the creative work so exceptional and unique. Usually, the paintings cover the whole space of the page and include a plethora of details, which seem to the observer unrelated to each other. The painting looks as if it is drowning in a sea of details. The impression is of numerous items that compete for the observer's attention, none of which stands out as the painting's focus. Sometimes one element in the painting is repeated over and over again, creating an impression of stereotypic rigidity. The composition is sometimes chaotic and random but at times there is an extreme rigid, symmetrical, cold order. Occasionally, the paintings include objects without boundaries that seem to be melting in space. Parts of the same object can be drawn separately. A human body may thus look dismembered, one part at one end of the page and another at the opposite end. The laws of perspective are often ignored; proximal elements may be drawn small, and distant elements may appear large. Often, the use of color follows private associations that represent the inner psyche.

Arieti (1976) claimed that "in the beginning of the illness, the drawing and the painting of schizophrenics disclose an eruption of conflicts and supremacy of feelings. But at a more advanced stage of the illness, stereotypy is resorted to as an attempt to arrest the frightening flux of the world" (p. 205).

SYMPTOMS OF DEPRESSION IN PAINTINGS

In comparison with the literature on schizophrenic paintings, the literature on depressive patients' artwork is relatively slim and usually relates to the paintings' content rather than to form (e.g., Dax, 1953; Naumburg, 1966). Harriet Wadeson (1980), however, conducted a systematic study of the paintings of depressive patients. According to her findings, depressive patients make relatively little use of color in their paintings, leave more empty space, and they

invest little effort in perfecting and completing the painting. With regard to the content, whereas some of the paintings were characterized by depressive affect, in others there was a notable absence of expressed emotion.

In addition to sadness and worry, depressive patients also suffer from difficulty in thinking and lack of ideas, and they tend to focus on a single idea that occupies their mind. They find it hard to change goals and to make decisions. Their characteristic lack of motivation and the slowdown in their general activity may explain why depressive patients' paintings are less common than those of schizophrenic patients. Depressive patients usually prefer dark colors – black, gray, dark blue, dark brown and purple. Their paintings are often characterized by infantile figures. The landscapes are bleak, cold and depressing; the trees are bare; and the sky is dark. These patients prefer winter landscapes, stooped human figures and worried or tormented faces. Sometimes the paintings contain symbols of death, such as black birds, crosses, a coffin and tombstones. The topics of the paintings are also bleak: catastrophes, accidents, doomsday, thunderstorms at night, scenes of desolation, and roads that lead nowhere.

SUICIDAL IDEATION IN PATIENTS' PAINTINGS

To the best of my knowledge, the only detailed study of the expression of suicidal ideation in the drawings of mental patients is that of Harriet Wadeson (1980). She is also the only therapist who mentions (although does not elaborate) the concept of masked depression. Wadeson, who conducted her studies at the National Institutes of Health in the United States, classified the drawings of patients who attempted or completed suicide into several types according to the dominant emotion they expressed. These are listed below:

Anger: Anger is a principal emotion among suicides. Wadeson found that suicidal manic-depressive patients expressed anger in their drawings more often than patients with the same diagnosis who were not suicidal. The anger was directed at the self, and its expressions in the drawings took various forms. Anger was often expressed in the painting by the use of red color, usually in an uncontrolled application. Sometimes the drawing was accompanied by script such as "The End" or "Help." (Some of the acute schizophrenic patients reported in the present study expressed anger in their drawings - see the cases of Avi and Uri below).

Feelings of harmfulness to others: Many of the suicides feel impotent rage and view themselves as causing harm to significant others. Their awareness of this emotion makes them feel guilty.

Self-hate: Self hate is a blend of the two previous emotions. It is expressed in the drawings in dark colors, especially black. Patients' descriptions of their paintings often include themes of failure, guilt, and self-hate. Sometimes they view death as a punishment they deserve.

Hopelessness: Wadeson noted that hopelessness is an "obvious ingredient in suicide wishes" (p. 93). She did not, however, suggest that certain distinct graphical features of suicidal patients may be interpreted as indicating feelings of hopelessness. Her

detection of hopelessness was based on the verbal responses of the patient to the drawing.

Spiral symbol: Wadeson found that the paintings of half of the suicidal patients she worked with (twelve out of the 24) included a drawing of a spiral as an illustration of suicidal feelings. Patients' associations with the spiral were "a whirlpool," "turmoil," and "anxiety." Wadeson suggested that these associations indicated "a narrowing range of possibilities, which led to a feeling of entrapped hopelessness" (p. 98). This interesting symbol did not appear in my patients' drawings.

Wadeson's criteria of anger, harmfulness to others, self hate and feelings of hopelessness are only a partial list of emotions and conditions that are well known as contributing factors to suicide (e.g., Lester, 1992; Maltsberger, 1999; Maris, Berman, & Silverman, 2000).

MASKED DEPRESSION IN SCHIZOPHRENIC PATIENTS

It is widely accepted that most schizophrenic patients, as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM IV, see: American Psychiatric Association, 1994), portray an inadequate affect ("affective flattening"), which has traditionally been considered one of the primary symptoms of the disease (Bleuler, 1962). This inadequate affect is characterized, *inter alia*, by a seeming absence of feelings toward the state of being ill. Thus, in contradiction to their objective miserable condition, schizophrenic patients ordinarily do not exhibit signs of depression while they are in the acute phase of the disease. Initially, it was believed that a depressive reaction appears only after the acute phase. This reaction is commonly referred to as "post-psychotic depression" or PPD (Mayer Gross, 1920). However, it is now well established that a state of depression often exists throughout the acute schizophrenic phase (MacGlashan & Carpenter, 1976; Palansky, 1980; Johnson, 1981; Drake & Cotton, 1986; Mulholland & Cooper, 2000). Drake and Cotton (1986), for example, reported that 21% of their sample of 104 schizophrenic patients met DSM-III criteria for a major depressive episode. The suicide of their patients was strongly associated with the existence of depression, and especially with expressed hopelessness. The common disregard of the existence of the depressive component during the acute phase of schizophrenia is, presumably, a result of the fact that this component usually has no overt clinical expression. It is much easier to discern the depression after the acute phase, when the more salient symptoms of schizophrenia have waned.

The starting point of the study reported here was the question of whether, in spite of the absence of clinical symptoms, there is a condition of masked depression in the acute schizophrenic state and, if so, how can this condition be detected.

Masked depression may be regarded as an emotional reaction to severe sickness. The state of being very sick causes sadness and despair. According to this approach, the depressive affect, which is masked by the more salient psychotic symptoms, can serve as a criterion for functional reality testing and as an evidence of the existence of energy that can be activated in either one of two opposing ways - life or death. In this sense, the depressive response may be considered to be part of coping with the disease, rather than as part of the

disease itself, thus reflecting the “healthy” part of the patient, the part that responds to the situation of being sick.

It is noteworthy that most suicidal attempts of schizophrenic patients take place before or after hospitalization (Tsuang, Fleming & Simpson, 1999). Presumably, this is not only the result of the fact that patients are subjected to more strict observation and control during their stay in a mental institution, but also because, during the acute schizophrenic episode, they cannot muster the necessary energy to plan and carry out the act of suicide. Yet, at least in some cases, the wish to die presumably accompanies the mentally tormented schizophrenic throughout the course of the disease.

The study reported here demonstrates that a depressive reaction, which is generally thought to appear only after the acute phase of the schizophrenic illness, actually exists in some cases in the acute patient in a hidden form, masked by the overwhelming, dominant schizophrenic symptoms. This hidden depressive reaction, which appears in an overt form only after the acute phase, is nevertheless expressed in the patient’s spontaneous paintings. By examining patients’ paintings, it is possible to reveal the emotional reaction which the patients fail to express verbally.

Wadeson (1980, pp.120-129) was surprised to find that expressions of depression could be detected in the paintings of 52 out of 56 acute schizophrenic patients, both in the pictorial content of the paintings and in the patients’ explanations. However, she did not make the connection between these depressive feelings and suicidal ideation and behavior.

IMAGES THAT WORDS CANNOT EXPRESS

The customary form of communication with mental patients, as with other people, is, of course, verbal. Often, however, patients have difficulties in expressing their emotions and cannot put feelings in words. An alternative way of expression is art. Freud noted that sometimes patients found it difficult to describe their dreams in words and preferred visual images. We often use the expression ‘a picture is worth a thousand words.’ Images are pre-verbal. In psychoanalytic theory, artistic images can penetrate the censor’s barriers better than words can. The release of spontaneous images from the unconscious in a symbolic language has a diagnostic and therapeutic value, as it opens for patients an alternative way to express their feelings. For the therapist, this is sometimes the only way to communicate with the patient.

As a diagnostic and therapeutic process, paintings and other artistic forms are unique in offering a channel for spontaneous expressions that are free from the barriers of verbal communication. In the case of schizophrenic patients who have a special difficulty in verbal communication, an approach through the plastic arts often provides the only way for self-expression and genuine interpersonal communication. The patients’ artistic creations are composed of both conscious elements (the individual decides what and how to draw) and unconscious elements (symbols and ideas of whose existence the individual is unaware, or the individual does not recognize their additional meanings which can be clarified only in the course of treatment).

It is customary to think that diagnosing and treating mental patients can be done only through verbal communication. Yet, often the non-verbal treatment process through art

creation establishes a channel of communication and exposes the patient's emotions. The schizophrenic patient's interactions with the surrounding environment and with other persons are rather limited. The artistic creation provides an outlet for feelings that the patient is unable or unwilling to express verbally. Furthermore, it draws responses from other patients (in a group therapy setting) and from the medical staff, who discover a different way of looking at the patient, thereby intensifying and enriching his/her contact with the outer world. A new situation is established, in which the therapist adjusts to the patient's language, forming an alternative system of interpersonal contacts on the basis of non-verbal communication. The patient's expressions are reinforced and can be repeated and intensified.

This chapter includes descriptions of several patients with whom I have worked through various phases of schizophrenic psychotic episodes. Typically, a variety of symbolic elements in the paintings of these patients revealed expressions of depression in the absence of other clinical symptoms of depression. In this sense, the patients' paintings provided the only effective way of diagnosing the patients' depressive condition in the acute phase of the illness.

THE PATIENTS AND THEIR PAINTINGS

The work described here is based on the paintings of hospitalized schizophrenic patients in a mental institution. They included six men and four women, all of whom were in an acute psychotic state. They had difficulties in verbal expression but displayed a marked ability to express themselves graphically. The patients differed in their socioeconomic background, education and art training, as well as in the symptoms of their disease.

The patients' participation was voluntary. They could choose to work on their paintings in a group with other patients, individually in the company of the therapist, or alone. The painting was free and spontaneous - the patients could draw whatever they liked, using colors of their choice.

Death as Savior (Uri)¹

Uri, 25, was hospitalized following a suicide attempt. He was the older child in a two-child family. There were persistent conflicts between his parents in which he was asked to interfere and resolve. He graduated from high school as a mediocre student and later served in the army. After his three years mandatory service, he attended a hotel receptionists' course. Upon completion of the course, he tried unsuccessfully to get a job in a hotel. He became desperate and decided to commit suicide. During his first hospitalization, he was diagnosed as a schizophrenic. Following his discharge he tried unsuccessfully to find a job and then tried again to commit suicide.

In the hospital, he denied having any suicidal ideation. Describing his pre-hospitalization attempt on his life, he said, "Now, I would not even scratch myself." In the hospital he felt sheltered and secure. The therapeutic process and the hospital milieu were, for him, a

¹ A partial description of the case of Uri was published in Merari (1993).

replacement for his family. Uri was active and cooperative. At that time, his medical record revealed “improvement in his condition. There is, however, a conspicuous poverty in expression coupled with increasing ‘closeness.’ The level of conversations is low. The will and drive for death decreased but apathy became prominent.”

Figure 1 is one of a series of paintings in which Uri’s helplessness came to the fore. Using gouache colors, the capsule and the arrows pointing out were painted red while the incoming, piercing arrows were painted blue. Red is a hot and temperamental color, whereas blue is cool and tempered. The specific fashion of their application represents well Uri’s ambivalence, which is underscored by the opposite direction of the arrows. Following the application of the gouache colors, he chose a more moderate color – green, which, as he said, symbolized hope. Indeed, green is generally regarded as representing hope, but in Uri’s drawing it is pale, almost invisible, and painted with a green pencil, which required a special effort to cover an area. The opposite forces acting in this painting are multi-dimensional: The container represents both isolation and protection from the hostile external world. The red arrows symbolize the anger which emanates from his inner world, and the blue arrows represent the external pressures that threaten him from the outside. The hope, which is represented by the green background color, and the tempest, represented by arrows in the center also constitute opposing forces. The figure in the container with the halo above its head looks like a saint.

The clinical description of Uri as an apathetic and feeble patient may be explained by the fact that most of his energy was directed at his inner conflicts as revealed by his paintings.



Figure 1.

Uri’s next painting (Figure 2), *The Cross*, was made of various materials. A floral fabric served for the cross, which was carefully cut and glued to the paper. This piece was made

with the utmost concentration. Using a pencil he wrote, "A cross may also be a flower if one knows how to make things." At this stage, he accelerated the pace of his work. Using a brush and black color, Uri filled in the spaces between the flowers and added the words "apathy, mask." He then continued using green. Being careful about color cleanliness, he wrote, "crucified, crucified" and added, using red, "but nor Jesus, but not Jesus" and the words "fed up." Finally, he covered the painting with orange. The description of the process of painting is crucial to the understanding of Uri's psychodynamics. Along the process, he revealed his ambivalence to life. The cross as a symbol of death and martyrdom is composed of flowers – the symbol of beauty and vitality – and the black lines express depression and sorrow. Initially the painting was well planned and organized, but Uri slowly lost control of his emotions, expressing despair. The various colors have symbolic significance. Following the "fed up" interjection, he became scared of the contents of the painting and tried to conceal and cover his explosive emotions.

The third painting (Figure 3) may be described as an act of emergency following Uri's former painting. In this painting, he calls for help using the words "save me" and "help" in three languages and in a very forcefully colorful and desperate manner. The bars serve to guard against an uncontrollable emotional explosion. It is noteworthy that the paintings of Uri, as well as that of another patient who committed suicide (Avi, see Figure 7), were marked by strong black and red colors. Whereas the black color signifies depression and despair, the red reflects rage and energy. The combination of despair and a forceful rage is, presumably, the volatile mixture which may result in suicide.



Figure 2.

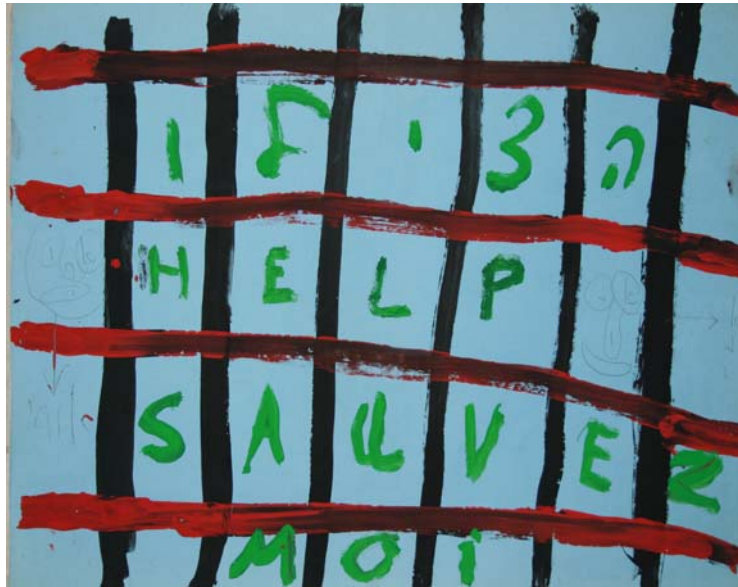


Figure 3.



Figure 4.

Uri's capacity to cope with his condition was very limited. Following his discharge from the hospital, desperation and depression became increasingly dominant. He was then treated at the hospital's day-care center until he had to move to a clinic nearer to his home. The disengagement from the hospital probably resulted in his decision to put an end to his life. Uri viewed death as a savior and redeemer. He had dreams of other worlds and thoughts about reincarnation. He mentioned that the idea of existence after death was initially encouraging

but later became frightening because of the possibility of continued suffering after death. "Here, one may finish off with one's life. In afterlife there is an endless continuity."

It should be emphasized that, during the period when his paintings were made, Uri consciously denied his wish to die. It is possible that the glimmer of hope shown in his paintings was, indeed, part of his complex emotional system. On the other hand, his difficulty in fighting the conflicts, the challenges and the desperation, brought him to form an alternative conception of the world, and the choice of death became the redeeming solution. Uri committed suicide two months after his discharge from the hospital.

Misleading Appearance (Lior)

Lior, 28, was a handsome young man, a second child in a two-son family. His parents reported that he had no noticeable problems until the age of 16. Then he began to feel tense, dropped out from high school, worked at odd jobs, and started psychiatric treatment. During his mandatory military service Lior experienced his first anxiety attack. In the course of a military exercise he grabbed a gun and ran away to the hills. Following a psychiatric assessment, he was discharged from military service. He then finished his high school studies at an evening school and wanted to study medicine. When he was required to take the entrance examination, he had another anxiety attack and declined to take the examination. On the advice of the psychologist who treated him at that time, he left his parents' home, moved to another city and lived on his own. Initially, Lior managed his new life well. He joined a singles' club and was very popular among the members. He organized trips and parties and was active in the club's committees. Friends described him as cheerful, sociable and active.

Lior was hospitalized in an acute state of anxiety following the development of intimate relations with a woman co-worker. His anxiety grew stronger and made him want to commit suicide. During his stay at the psychiatric hospital, he was diagnosed as suffering from schizophrenia. However, in the hospital, Lior denied his sickness. He claimed that he was different from the other patients, said that he did not belong there, and expressed pity for the other patients. Lior approached the therapist on his own initiative with the request to draw. However, he requested to work in a room in which he would not be disturbed and demanded that he would not be asked to explain his paintings.

The first painting (Figure 4) demonstrates Lior's confused, impulsive and aggressive inner world. The painting was unorganized. His associations led Lior to an array of private symbolic contents which reflected his inner mental storm. Thinking disturbances that were not expressed in his fairly coherent verbal expression, were reflected in his painting in the form of condensation, displacement and symbolism (Kris, 1964): fish-head, window-body, etc., typical of a schizophrenic state. Arieti (1976) described similar phenomena as "fusion, diffusion and misidentification" (p. 207).

Several painting by Lior showed clear symbols of death: the coffin and the cross, as well as other symbols, signifying his preoccupation with death. An example of these is shown in Figure 5. In addition, Lior's paintings reflect his feeling of instability and the need to achieve stability. Lior uses symbols of stability – a house, a tree, a chair – which, despite his hard attempt to ground them (the conspicuous color at the base of the trees), are flying high in the air (the houses have wings). Instability is also exhibited in the man-fish figure, whose bulky legs end in a rather narrow basis, made of two slippery fish. Some of the symbols are painted

in a stereotypical, repetitive manner, which is indicative of intense anxiety coupled with severe aggression, shown by the war instruments arrows, sword, tanks and pointed hats (in his first painting). The internal battle can also be seen through a window in the figure's body.

At the time when Lior painted these he was still undiagnosed, and his overt behavior did not disclose that he was preoccupied with these intense conflicts.

Lior persisted in his painting activity. The frequency of his anxiety attacks decreased during the days during which he was painting. Other staff members told me that he had more attacks on Saturdays, when he did not draw. Some of the staff members thought that Lior's anxiety attacks were fake. Lior's impressive appearance and his good verbal ability were misleading. Underneath there was a disordered and scared inner world. Only in his paintings could one see his helplessness and lack of vitality. In his symbolic paintings, death constitutes a solution to his desperate condition (as he explained later, after his discharge from the hospital). At the same time, for Lior, the paintings constituted a catharsis and sublimation of uncontrolled drives. He often said that painting calmed him down.

Several months after his discharge from the hospital, Lior asked to meet with me. At that meeting he asked to see his paintings, which I had kept at the hospital. Then, for the first time, he described what he felt as he was painting - the long hours in which he was sitting, contemplating and painting. He said that the paintings provided an outlet to his destructive drives and enabled him to keep functioning. Only then he confided with me that he had wanted to die, as death seemed to him a solution to his problems, a better alternative than life. The ability to draw with no verbal interference made it possible to him to express his feelings freely.



Figure 5.

Death as Paradise (Stela)

Stela was born in Bulgaria. She was the elder child in a family of two children. She was active and sociable as a child. At school she was a good and ambitious student. When she was 16, her father was hospitalized in a psychiatric hospital. Stela continued her studies in a teachers' seminary and later did her mandatory military service as a teacher. After her discharge from military service, she got married and had a son, but her marriage failed and she divorced her husband. Her son stayed with her. She continued to work as a teacher, apparently with success. According to court's decision, when her son reached seven, he moved to live with his father. After this change, Stela became agitated and had delusions of grandeur, and she was hospitalized. At the hospital, Stela maintained a neat appearance but spoke rapidly and uncontrollably, expressing a stream of psychotic contents. Her condition improved following treatment. She calmed down, her delusional thoughts all but disappeared, and she was able to concentrate. In this condition she was discharged from the hospital and resumed her work.

Not long after her first hospitalization, Stela was hospitalized again following a suicide attempt. This time also she kept a neat and tidy appearance. Unlike her first hospitalization, she did not express delusional thoughts, seemed to be in a good mood, and expressed her wish to be discharged from the hospital and return to normal life. She was sure that she would not try to commit suicide again.

Throughout her hospitalization Stela was very lively. She participated in a variety of activities and helped the other patients. Her spontaneous paintings were optimistic and childish in their style. Her last painting was seemingly also colorful and optimistic. A closer look, however, reveals a deeper, hidden layer (Figure 6).



Figure 6.

The general atmosphere of the painting is pastoral. It shows a garden, sun and blue sky, and projects tranquility. The painting process, however, had an interesting dynamic aspect. Stela's struggle between an emotional outburst and her obsessive inhibitions was expressed in the shifting back and forth from gouache to pastel colors. Whereas pastel crayons enable meticulous drawing, gouache is more amenable to broad, imprecise, impulsive smearing. Stela started her painting with a controlled drawing of the trees and ended it in the tempestuous writing. Unlike her usual style of work, the words were written sloppily. Small case and capital letters interchange in no particular order. At some point, the drawing swept Stela to another world, a world which for her constituted an alternative to life. The door, with the heart-shaped knob (or key hole) that she painted, can lead to an enchanted garden that does not exist in her present life. Presumably, in this painting Stela wandered in the garden not knowing where she would end up, searching for a better alternative to her current existence. Stela committed suicide some time after she did this painting. I, as an inexperienced therapist, felt that I had failed to see the signs and read her message. In McGann's (1999) words: "It takes no special training to connect drawings of guns and express threats with possible homicide. The greater challenge is in reading the subtler messages" (p. 54).

The Fading Figure (Avi)

Avi described his life as a failure. He was hospitalized because of dysphoria, his intent to commit suicide, and dysfunction. Avi was the elder son in a two-child family. His mother died when he was 13, and he described his father as a cold, distant person. After his mother's death, Avi and his younger sister were placed in a kibbutz, where he first encountered social difficulties. During his mandatory military service he was undisciplined. It was hard for him to cope with the military order. After discharge, he discovered his artistic talent. He was admitted to an art school, where he met his future wife and got married. The couple had a daughter, but after a while they divorced. At that time he started drinking. He was hospitalized several times because of dysphoria and dysfunction. When he worked, he used to illustrate children's books.

At the hospital he behaved in a regressive manner. His behavior was highly rigid and stereotypical. Homosexual conflicts surfaced during his psychotherapeutic sessions. This was the background for his wish to prove his masculinity to himself and to others. He tried to express his masculinity in connections with women. However, at the hospital he usually spent his time in his bed. During most of his stay at the hospital, he refused to paint, but he agreed to carve in wood. However, a day before his discharge, he asked to paint (Figure 7).



Figure 7.

Avi started by painting the rooster, turned to paint the sun and the fish, and finally painted the human figure. This male-female face whose eyes are shut is obscure and fuzzy, like a disappearing ghost. It gives the impression of withdrawal. After painting it, Avi seemed upset. He then painted the black and red areas at the left side of the picture.

The symbols in Avi's painting have a universal as well as personal meaning. The rooster represents masculinity. The sun symbolizes warmth and a longing for love. The dark figure whose gender is unclear reflected the difficulty Avi felt concerning his sexual identity. The tendency to act, indicated by the red color, which counters the black color's passivity, points to Avi's hidden energy that was usually overshadowed in his regressive and inert behavior. Avi's overt demeanor created the impression of a weak and powerless person, but his painting showed a different picture. Avi used the red color with vigor and excitement. In using the red color, Avi tried to overcome his feelings of depression and desperation. On the day of his discharge from the hospital his medical file notes: "Discharged in a satisfactory condition; there has been an improvement in his mood and pessimistic thoughts." Apparently, this was not quite the case. Avi looked for an alternative way to his mental torment and chose death as a solution to his condition. A short while after his discharge Avi shot himself and died.

Depression in “Madness” – An Acute Hallucinatory State (Hava)

Hava was hospitalized in a stormy psychotic state, following several suicide attempts. She was a 22 year-old woman, intelligent and tidy in her appearance. She spoke very fast and had a penchant for mysticism and symbolism. She was hospitalized previously, during her mandatory military service. Later she studied painting for about two years, had a clerical job, and functioned well. Then she joined a meditation group, stopped taking her psychiatric medications, and started hearing voices. Her auditory hallucinations had a paranoid content and gave her the feeling that she was being spied on. She repeatedly used the phrase, “the war between good and evil has begun.” She also described a feeling of “schism,” as if there were two persons inside her - the healthy part and the sick part. She was usually euphoric when she described her hallucinations.

In her first drawing (Figure 8), Hava exhibits the essence of Melanie Klein’s theory on object relations. The mother in the drawing holds the baby away from herself, suggesting rejection. In that, Hava perhaps demonstrated the split of the good mother and bad mother, which may be related to the “war between good and evil” that occupied her at the time. As she described her drawing, Hava related extensively to the pastoral background the houses and the view, and ignored completely the central figures. Only after I asked her if she was willing to relate to the figures, she said curtly, “This is a mother holding a baby girl.” Apparently, Hava could not stand the overwhelming emotion evoked by the drawing. She said that she had to go and left the room immediately.

During her hospitalization Hava continued her preoccupation with meditation as a religious ritual and found a symbolic meaning in every occurrence. At that time Hava was usually in a euphoric mood and was rather active.



Figure 8.



Figure 9.

In her second painting, which she called “Summoning You” (Figure 9), Hava started by offhandedly painting the flowers on the lower right hand side of the page, turned to the blue for the sky, and then wrote the words “summoning you” and drew the small, vague figure underneath. She filled the letters and the figure with gray color, keeping a scrupulous watch for the border for a while but then, in a sharp movement, swirled the gray from the top of the page down to the bottom. Finally, carefully and hesitatingly, she painted the red curly line from top to bottom. Hava was rather agitated as she was painting. She refused to explain her creation, saying that it was speaking for itself. Later in that same day she painted her third drawing.

Hava chose to paint her third painting with charcoal (Figure 10). She started with the figure and then turned to the bell and the bird, and finally drew the flowers. She seemed serious as she was painting. Apparently, she planned the drawing ahead of time. When she finished drawing she left the room, leaving the painting on the table.

In her paintings Hava tried to convey the feelings that she found hard to express verbally. Locked in her hallucinatory world, Hava tried to escape the situation in various ways. In the “Summoning You” painting, Hava oscillated between the mystical higher powers beckoning her and the feeling of swirling and collapse. The conflict and ambivalence in the “Summoning You” painting led Hava to paint the woman in the bell. It is unclear whether she chose the topic of this painting under the influence of Sylvia Plath's *The Bell Jar*. However, in this painting, Hava shuts herself off, perhaps trying to defend herself from the voices and the drives. The bird at the top of the bell is a well-known symbol of the soul. In drawing the soul out of the body Hava expressed a possible solution for her feelings of depression, despair, and impasse.



Figure 10.



Figure 11.

Hava did her fourth drawing (Figure 11) a few days later. I have no details of the work process because I found the drawing on the table. In the hospital, Hava mainly used pencils and charcoal for her drawings; only rarely did she use some color. Her preference for pencil somewhat counter-balanced her emotional turmoil at the time, because a pencil is more amenable to control than color. Presumably, the preclusion of color from her drawings helped Hava achieve a more organized result in dealing with emotionally charged topics such as the mother and her baby, the women in the bell, and the severed tree in her last painting that she later titled "The Memorial Candle," with the owl (a bad omen), which depicts a situation after death.

In the days after she did these paintings, as before, Hava displayed psychomotor restlessness in her overt behavior. Her conflicts and depression were expressed only in her paintings. Indications of depression appeared in Hava's drawings in the height of her "madness." After Hava was discharged from the hospital her clinical symptoms declined, her delusions disappeared, but the now unmasked depression appeared in a full-fledged form. At that time Hava was able and willing to describe the drawings she did several weeks before. She said that those drawings displayed the depressive feeling that she had ignored at the time she was in a psychotic state.

THE TREE AS A SYMBOL

One of the significant symbols in the patients' drawings was a tree. This prevalent symbol deserves a special note. A tree is commonly regarded as a symbol of life and continuity. The word "tree" is usually associated with word combinations such as the "Tree of Life," "Tree of Knowledge" and "family tree" (Cook, 1974). Paradoxically, however, in the patients' paintings, trees commonly represented trauma, loss and death. The tree appears in the folklore and myths of many peoples, which often attribute to it human qualities. Similarly to humans, trees have a life cycle of birth, growth, aging and death. A tree may reflect the human personality. Buck (1948a, 1948b), who used a tree as one of the components in the House-Tree-Person projective test, thought that the tree drawing reflects deep-rooted, unconscious emotions of the patient, more so than the person drawing, which reflects more conscious material. According to Buck, the parts of the tree represent different aspects of the psyche. The trunk stands for the respondent's feeling of basic power and inner strength ("ego strength" in psychoanalytic terminology); the branches signify the subject's feelings concerning ability to derive satisfaction from the surrounding world; and the organization of whole tree reflects the subject's internal balance. Hammer (1980) discusses the meaning of various features of the tree drawn by a subject: the trunk, roots, location of the tree drawing on the paper (in particular, resting the tree on the bottom of the page), branches, age ascribed to the tree, the tree depicted as dead, etc. Tree symbols appeared in the drawings of two of the patients discussed above - Stela (Figure 6, the "Paradise" drawing) and Hava (Figure 11, "The severed tree"). In this section I would like to describe some more cases in which trees were the central symbol in my patients' drawings.

As noted above, the trunk symbolizes the individual's basic personality strength. Paradoxically, sometimes an excessive emphasis of the trunk reflects a weak ego, as if it comes to compensate for a perceived weakness of the self, such as in David's drawing (Figure

12). In this drawing the cut-off tree has a dual symbolic meaning. According to Koch (1952), the upper part of the tree represents the subject's relations with his surrounding environment. The treetop symbolizes spirituality, intellectual interests, imagination and fantasy, whereas the bottom part represents the real and concrete. David, who was an acute schizophrenic patient with delusions of grandeur, was ostensibly proud of his intellectual ability but actually felt that it was severely impaired by his illness. He expressed this feeling of powerlessness by cutting off the treetop and trying to stick tight to the ground.

A tree drawn with faint lines shows, as Hammer (1980) suggests, "feelings of impending personality collapse or loss of identity, a stage at which compensatory defenses are no longer looked to with any real hope of staving off the imminent breakdown" (p. 184). This description fits the case of Zeev, who was hospitalized following a suicide attempt. In this case, not only were the lines feeble, but the tree was dead (Figure 13). Zeev was a senior chemist, an intellectual, who tried to convince the therapeutic team that he had not tried to commit suicide. Describing his tree, he said, "One can draw a tree à-la-Van Gogh. I shall not draw a tree like that. I shall draw an original tree. Are you interested in a drawing of my personality? I have not drawn a tree for many years. It came out a dead tree, a dry tree, just like my mood. The tree is wounded in at least three places." I could sense that Zeev was expressing his true feeling and was not trying to impress me, as had done before. He further related the traumas in his life and noted that he had tried three times to commit suicide. He added, "The tree, which is a tombstone, portrays my present situation. I think it symbolized the condition of a human being who reached the end of his deeds and hopes in this world."



Figure 12.

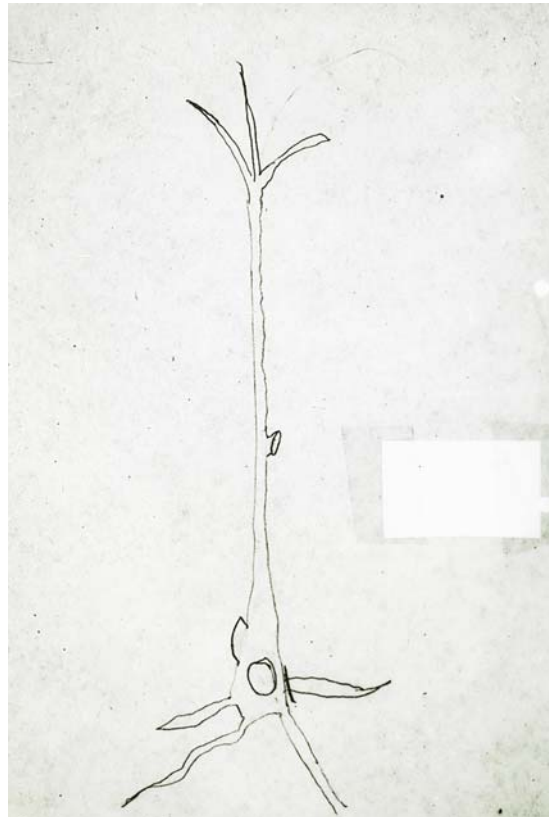


Figure 13.

Another patient, Yossi, refrained from any communication with the staff and other patients and stayed secluded in his room, expressionless. Yossi was a mathematics student, an only son to his parents, and was diagnosed as paranoid schizophrenic. His first tree drawing, shortly after his hospitalization is shown in Figure 14. Of special interest are the three main branches of the tree, which seem to represent Yossi's family. The two large branches on both sides shield the central small branch. Although Yossi invested much time in working on that central branch, that branch is nevertheless constrained by the two powerful branches on its sides. Six weeks later Yossi drew another tree (Figure 15). In the meantime, his father died, but Yossi did not respond verbally to this momentous event. His second drawing, however, revealed how traumatic his father's death was for him. Not only was one of the two massive side branches amputated, but the whole tree looks feeble, rootless and hollow. Clearly, this drawing reflects the great loss that Yossi felt but did not verbalize, as well as his feeling of helplessness and fragility. Only in discussing this drawing did Yossi say that he felt guilty about his father's death and that he thought of committing suicide.

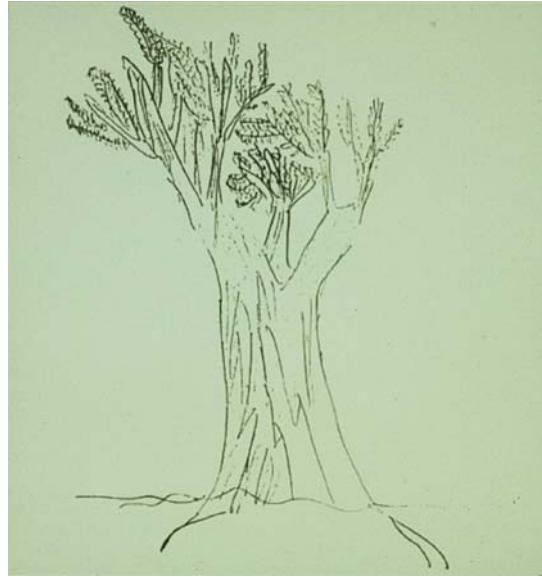


Figure 14.

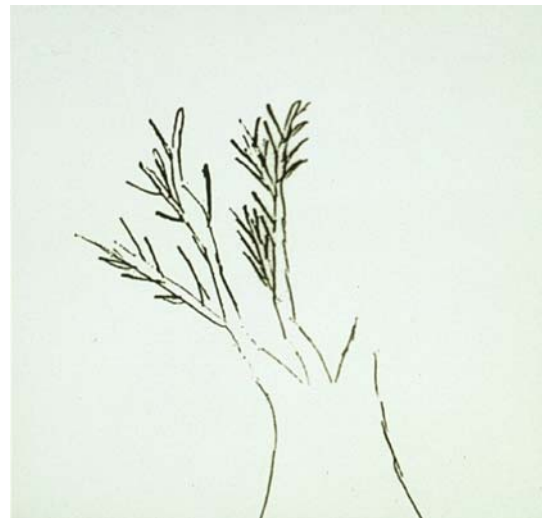


Figure 15.

The symbolic tree, which appears in the drawings discussed above, reflects deep layers of the patients' psyche. In these cases the tree drawing powerfully expresses a conscious or unconscious wish to die. In most of the cases, the drawings were surprising for the therapeutic team, as they stood in contrast to the patients' overt behavior and verbal expressions. In some of the cases, the drawing had a cathartic role and initiated verbal communication with the patient, which was previously impossible. Thus, they served a crucial diagnostic and therapeutic purpose.

CONCLUDING REMARKS: RECURRENT SYMBOLS IN PATIENTS' DRAWINGS

In this chapter, I have presented several case studies demonstrating the existence of masked depression in acute schizophrenic patients, some of whom eventually committed suicide. As mentioned before, a state of depression following an acute schizophrenic attack is well-known in psychiatry and much has been written about its occurrence. Several authors have also described a depressive component in the course of the acute schizophrenic phase. However, I have found almost no mention of masked depression in this phase. It seems that the reasons for this disregard are the difficulty in diagnosis of the depression state and the lack of suitable techniques to identify it. In order to understand the phenomenon, we have to look into the creativity process. In these cases, depression appears as a response to sickness, as an expression of an intensive conflict between dependence and independence - dependence on the condition of being sick versus the desire to find an alternative to sickness and suffering, to gain independence and freedom. Actualization of independence is often perceived by patients as synonymous to "death," as a defense against insoluble dilemmas and inability to contend with reality.

The depressive symptom that appeared in the patients' drawings differed in their form and intensity. Some showed expressions of sadness, and others expressions of loss and despair. These graphic expressions emerged in various periods of hospitalization, and no period had typical characteristics in this regard. The phenomenon seemed to be dominated by the patient's inner condition and by meaningful external factors that influenced this condition. In Yossi's case, depression was a response to his father's death and the accompanying feeling of loss. Yossi's graphic expression was the only evidence of his emotional condition at that time, and no other signs attested to his feelings of loss. The clinical report failed to mention the father's death altogether. Yossi's ability to express this trauma in a graphic form supplied me with a diagnostic instrument, as well as with a channel of communication, and gave Yossi an outlet for communication, catharsis and sublimation. According to Anthony Storr (1972), artistic expression is an individual creation of communication. This is a means of contact whose rules are determined by the individual. The communicative situation is under his total control. For the schizophrenic patient, creative activity is an alternative to satisfactory interpersonal relations. In Yossi's case, drawing was a relatively safe means for expressing forbidden emotions. His drawing "The Tree with the Cut-Off Branch" reflects a depressive response to an external event, which affected Yossi's inner state. This drawing, whose form and content signal depression, represented Yossi's masked emotional condition, in the absence of similar verbal expressions.

In Hava's case, her drawings enabled me to follow a significant emotional process, which led to a special non-verbal communication based on graphic images. Horowitz (1971) writes about communication through graphic images that, in various conditions, can be more effective than verbal communication. Certain kinds of information can be better transmitted in images than in words. In her drawings, Hava unconsciously exposed a depressive state, which was masked by schizophrenic symptoms. Prior to her hospitalization, she had attempted to commit suicide. Hava's inability to look into the depressive emotional world expressed in her drawings rendered her treatment very difficult at the first stage of her stay at

the hospital. Later on, she explained that the symbols of the severed tree, the woman in the bell and “calling you” expressed her feelings of distress, loneliness, and isolation.

The cases described in this chapter are meant to emphasize the special contribution of creativity to diagnosis. The patients had in common the wish to die. This desire was represented in a variety of forms, symbols and images. In these spontaneous drawings, a tree appears in most of the drawings in a variety of shapes. In comparison with a drawing of a person, a tree drawing is somewhat emotionally detached from the drawer, thus making it amenable to unconscious expressions. The trauma is seen in the trees as if the patient tries to express pain that unfortunately he cannot express in other ways. In Yossi’s case, it is the recently cut-off branch; in Zeev’s drawings the trauma is represented by the signs of a long time amputated branches; and in the cases of David and Hava the stem is cut off. The tree reflects the drawer’s attitude to himself and to his environment along the axis of time, from childhood to the present. A tree drawing is supposed to give a basic and stable picture and to change little over time. Therefore, any alteration in a tree drawing is highly significant.

The choice of a tree as a representation of the depressive condition is particularly interesting with regard to the energy necessary to inflict damage upon the tree and, in parallel, to inflict damage upon the drawer himself, as well as concerning the meaning of the damage and its possible consequences. For identifying and interpreting the symbols and their meanings, the therapist should be highly skilled. It is necessary to understand not only the specific meaning of a certain symbol, but also the general patterns. The complexity of the symbols, that seem at first glance to be irrelevant, may prove to have a diagnostic value as well.

The masked depression phenomenon described in this chapter is unique in that the expressions of depression in the graphic symbols of the schizophrenic patients in this sample were somewhat different from the expressions customarily seen in depressed patients. The multiplicity of elements in the drawings and their spread over the page are typical of the style of schizophrenic patients whereas the content, the symbols and the dark colors are typical of the style of depressive patients. Thus, in terms of planning, organization and execution, the drawings of the patients in the sample usually resemble those of schizophrenics, while in content, symbol and color they resemble those of depressives. These characteristics of the drawings highlight the disparity emphasized in this work: clinical reports attesting to an acute psychotic state or apathy in the patients on one hand, and drawings exposing a depressive condition reflecting an existential emotional conflict on the other hand.

An early diagnosis of the masked depression condition is highly important, as it enables the therapist to follow the development of the phenomenon and choose the suitable therapeutic approach. Especially in the early phase of hospitalization, at the height of the acute state, the graphic representation of the feelings of depression can contribute to diagnosis. At this stage the patient’s plastic expressions are often the only evidence of depression and wish to die.

The subject of life and death is woven in the history of the patients in this sample. Some of them attempted to commit suicide before hospitalization, and in the other cases this theme appeared in different variations during their stay at the hospital. Three of them committed suicide several months after their release from the hospital and, since I left the country for some time, I have no information about the other patients in the sample. A reexamination of the messages expressed in their drawings raises the question whether everything possible was done to help them. Uri expressed in his drawings a very insistent desire to be helped. In his

drawing "The Figure in the Container," Uri is a prisoner and a prison at the same time – imprisoned in himself and living dead life. About his drawing "The Cross," he said, "A cross is like a flower, if one knows to extract things from it." Uri urgently searched for an alternative solution for his desperate condition. In his suicide, Uri tried to find an answer that would confirm or deny his ability to live different life. In his last drawing, Uri invested all his energy in containing his drives in an empathic and supportive environment. The drawing served as a catharsis for a while, mainly as an outlet for his anger and disappointment of life. Uri committed suicide a few months after his release from the hospital.

According to Shneidman, Farberow and Litman (1976), suicide attempts are made at a time of post-psychotic remission. The act of suicide is committed at a time when it seems that the patient's condition has improved. Yet, the patient's inner feelings and the stress of coping with life outside the sheltered setting of the hospital bring about the decision to commit suicide. Whereas in Uri's case it is justified to ask whether everything was done to help him, the situation is different in the two other cases. Stela, in her behavior as well as in her drawing, succeeded in hiding her feelings by presenting an optimistic picture. The messages in her drawing were rather vague and disguised for a naïve therapist as I was at that time. Only later could I understand the symbols and the dynamics of the drawing that led Stela to paradise. According to Guntrip (1959), schizoid suicide is not merely an expression of a death wish, but an expression of an unconscious, deep-rooted wish that death would lead to rebirth, a desire to escape from a situation with which the person cannot cope, a wish to return to the womb so as to be reborn with a chance for a better life. Sylvia Plath (Plath Schober, 1975) notes her wish to give up life in order to acquire tranquility and peace. This desire was expressed in the drawings of most of the patients in the present sample.

The suicide of a patient raises many questions concerning the philosophy of therapy. Is a person allowed to decide when should he or she die? Must a person continue to live under any conditions? Is a therapist always responsible for the patient's life? Beyond these questions, a therapist has always a feeling of failure when a patient commits suicide. The thought that something more could have been done is very disturbing and causes extra-caution (sometimes exaggerated, perhaps), especially in the diagnosis of a masked condition.

EPILOGUE

I have learned the power of drawing and plastic art from the creations of the patients with whom I have worked for many years. Curiosity and motivation to study came following this encounter with the spontaneous drawings of the patients in the acute ward. Later I discovered the great value of patients' creations for diagnosis and treatment. At that period, I had the feeling that the patients themselves provide the foundation for this area, and they dictate the therapeutic approach. The therapist should create suitable conditions for each patient and, by doing so, the barriers to and difficulties in emotional expression are broken. The road to communication is paved, and through this, the confidence and motivation to draw significant spontaneous drawings is generated.

I remember a young woman who had been hospitalized because of a desire to jump from high places in order to commit suicide. This was a classical case for verbal psychotherapy, as was decided after the first interview. Soon it became clear, however, that the patient

conversed in a stereotypical manner and did not permit herself to discuss meaningful subjects. In that period she spontaneously started to draw naïve drawings. Judging by the first collection of her drawings, it was hoped that the plastic medium might serve as an avenue to reach her inner world. After some time, the classic psychotherapeutic treatment was replaced by art-psychotherapy. This case brought about a drastic change in the conception that had prevailed in the hospital up to that time. The idea that psychotherapeutic treatment could be done only in traditionally accepted ways was replaced by an openness to other forms of treatment.

This episode marked a breakthrough in my road and also presented me with a great challenge. In a process of regular individual and group supervision, I discovered concepts and developed sensitivities, reexamined mistakes and looked for alternative roads.

Some of the patients with whom I worked were, indeed, in a condition of continuous anguish and did not have insight into a way for a meaningful change in their life and feelings. There were those who tried several times to commit suicide and eventually succeeded. The immediate reaction of the therapist in these cases is a feeling of a personal failure. On the other hand, the therapist does not possess the patient's life and wishes. There is no simple solution for this psychological and philosophical dilemma.

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PART VIII. CONCLUSIONS

Chapter 22

FUTURE WORK: POINTS OF DEPARTURE AND DATA SOURCES

Steven Stack and David Lester

Having surveyed and contributed to the literature on suicide and the creative arts, this volume closes with a discussion of selected points of departure for research. These are meant to stimulate some of the most needed investigations, research that would fill important gaps in our knowledge. Included in this brief survey are neglect of non-Western art, neglect of major art venues including film, photography and music, and a topic of importance to contagion research - the weighting of positive versus negative definitions in images. These are not the only possible avenues of inquiry. Many suggestions have already been made in the previous chapters. We then close the chapter with a review of some of the data resources that would help those interested in these and other points of departure for further work.

POINTS OF DEPARTURE

Non-Western Art

A limitation of previous research is a neglect of the description and analysis of suicide art from the East. The emphasis has been largely on Europe and, to a lesser extent, the ancient Middle-East and North America. Aside from a chapter in Cutter (1983) on Mexico (the ancient Mayans had a suicide Goddess, Ixtab), there is very little systematic research on suicide art outside of the Western traditions. The traditions of heroic suicide are apparently stronger in Eastern art than the West. For example, many stories of Japanese suicides for honor, including those of Kusunoki who committed suicide in 1336 and a mass suicide of 47 samurai in 1703, are commonly taught to Japanese school children. Images of Kusunoki abounded in the iconography of the World War II suicide kamikaze pilots (Hill, 2005). An inspection of several dozen pieces of Japanese suicide art by Steven Stack and Barbara Bowman in several museums suggests that heroic suicide is a major theme. In any event, the

study of suicide art from cultures other than Western cultures is an important area for future research.

Film: Heroic Suicide and other Motives in the Cinema

The seven chapters from the present volume containing analyses of motives for suicide in the cinema suggest that the cinema may not fully reflect 20th Century trends in paintings (Brown, 2001; Cutter, 1983). Heroic suicide and altruistic suicide, for example, are very common themes in film, while they have largely disappeared in painting. This suggests a need for a full analysis of motives and other aspects of suicide in the cinema. Caution needs to be exercised in interpreting suggested trends in art since 1900, given that art venues have apparently taken different paths in portraying the motives behind suicide as well as other features of the suicidal act.

Film: Celebrity Star Suicide

It is known that news stories concerning the suicides of celebrities are very likely to have a contagion effect (Stack, 2005; World Health Organization, 2008). For this reason it is likely that the suicides of the major film stars in cinematic suicides might be the most important to monitor for efforts at suicide prevention. Audiences tend to identify more with stars than more ordinary persons. There are many such examples. Billy Bob Thornton commits suicide in *A Simple Plan*, Clint Eastwood commits suicide at the hands of a gang member in *Gran Torino* and Tommy Lee Jones commits suicide in *Space Cowboys*.



Figure 1. *A Simple Plan* (1998, Paramount, Director: Sam Raimi). Moments before the suicide of Jacob (played by Billy Bob Thornton).

Music

The analysis of portrayals of suicide in the lyrics of popular songs is a neglected area of research deserving more attention. Investigations are needed in both the epidemiology and etiology of music and suicide. To the best of our knowledge, there is very little rigorous work available on rich descriptions of suicidal messages in large sample of songs with suicide themes. Content analyses are needed to determine which musical genres, if any, stand out as having the highest level of suicidal themes. Also, content analyses of popular songs might unravel trends in both the form and frequency of suicidal themes across generations. In addition, American music needs to be compared to the music of other cultures.

There are many web sites that make available the lyrics to popular songs (e.g., www.lyrics.com). Many of these have search engines to locate songs that possibly contain lyrics regarding suicide.

Relatively recent developments in data availability can assist research on the possible contagion effects of songs with suicide content. Gundlach (personal communication) reports on a study in progress that was able to measure the number of times a suicidal song, *Whisky Lullaby*, was played in more than 500 geographic areas. The availability of such detailed data for a large number of radio markets could foster substantial advances in the quantitative analysis of contagion effects. Data on number of song-plays can be combined with corresponding data on suicides for many geographic areas (but not those with less than 100,000 population) from the National Multiple Cause of Death Files available from the National Center of Health Statistics. Early results indicate that female gun suicides increased during the six-month period where the song *Whiskey Lullaby* was playing in radio markets (Gundlach, personal communication).

Photography and Photographers

From the national epidemiological data on suicide among artists, photographers are a group at risk. Stack (Chapter 13) linked this to their being in a client-centered occupation. While there has been some scholarly attention paid to photographers who suicide, such as Diane Arbus (Czach, 1995), portrayals of suicide in photography have been neglected.

Sarah Lucas is one of the world's leading photographers of suicidal themes. Her exhibits have included a photograph entitled "Is Suicide Genetic" printed on the invitations. Images include those of elements of what Karl Menninger (1938) called *chronic* suicide - cigarettes in toilets, a motorcycle helmet made of cigarettes, and photographs of smashed automobiles, a hint at the use of motor vehicles as a means of suicide (Lucas, 1996; Manchester, 2000). The location of key suicide-oriented photographs, their descriptions, and analyses of the motives and other features of suicide contained in the photos could be studied. This is a new, untapped source for exploration of the artistic understandings of suicide. Photography has only recently been recognized as an art form, a reason for its exclusion from many museums until the mid to late 20th Century.

Negative Versus Positive Suicide Images

While not typically a major point of the contributions in the volume, as Karolina Kryszinska points out in her chapter on suicide art history, the images in suicide art are overwhelmingly low in negative definitions. Mangled bodies, blood, disfigurement, rotting flesh, and so on, while present in a few isolated examples, are clearly not major themes in most suicide art. It is our impression that negative messages in the narratives in literature and film are also often sanitized and neglect the more morbid, but real, bodily disfigurement and negative images associated with suicide.

The significance of image analysis is related to copycat or contagion effects. We suggest that the apparent neglect of negative messages in most art forms analyzed to date may enhance the probability of contagion effects of such art. A meta-analysis determined, for example, that research that measured the negative presentation of suicide in the news was far less apt to find any copycat effect. For example, the pictures of the rotting bodies from the Jonestown mass suicide in 1978 were actually associated with a drop in the suicide rate in the United States (Stack, 2005). Further work is needed on the analysis of the negative aspects of suicidal images.

The analysis of the art of ordinary people, mainly photographs on the many commercial photography sites, might provide a window into popular cultural images of suicide. These may be apt to run somewhat counter to the definitions of suicide coming from artistic elites. Photography is perhaps the art form with the highest participation rate of ordinary people, higher than the number who write novels, paint or produce movies concerning suicide. In particular, a comic definition of suicide may be more apt to emerge from popular photography than traditional art forms.

RESOURCES FOR RESEARCH

Art Museums: Suicide Art on Line

Essentially all of the world's major art museums have web pages listing and/or displaying many of their holdings. However, there is considerable variation in the extent to which the user can locate suicide art objects in the collection. Table 1 provides information on 21 of the world's leading art museums.

Table 1. Leading art museums: name, web address, and number of hits under "Suicide"

Museum	Web Address	Number of Hits under "suicide" if search engine available
Art Gallery of Ontario	http://www.toronto.worldweb.com	1
Art Institute of Chicago	http://www.artic.edu	24
Boston Museum of Fine Arts	http://www.mfa.org	53
British Museum, London	http://www.britishmuseum.org	254
Detroit Institute of Arts	http://www.dia.org	0*

Getty Museum, Los Angeles	http://www.getty.edu	25
Kunsthistorisches Museum, Vienna.	http://bilddatenbank.khm.at	2
Los Angeles County Museum of Art, Los Angeles	http://www.collectionsonline.lacma.org	24
Louvre, Paris, France	http://www.louvre.fr	0*
Metropolitan Museum of Art, New York	http://www.metmuseum.org	13
National Gallery, London	http://www.nationalgallery.org	7
National Gallery, Washington, D.C.	http://www.nga.gov	7
National Portrait Gallery, London	http://www.npg.org	1
Philadelphia Museum of Art	http://www.philamuseum.org	4
Prado, Madrid, Spain	http://www.museodelprado.es	0
Rijks Museum, Amsterdam	http://www.rijksmuseum.nl	5
Seattle Art Museum	http://www.seattleartmuseum.org	1
The State Hermitage, St. Petersburg, Russia	http://www.hermitagemuseum.org	0*
Tate Museums, London	http://www.tate.org	294
Uffizi, Florence, Italy	http://www.uffizi.com	n.a.
Vatican Museums, Rome	http://mv.vatican.va	n.a.

*0, but Museum has suicide art under other keywords.

Search Engines

Most libraries provide English search engines, but some do not. Some (e.g., the Rijks Museum) provide an English-based search engine, but summaries of the history of art objects appear only in the native language. A few major art museums apparently either do not have a general search engine (the Vatican Museums) or the search engine is limited to title or author search. This makes the location of suicide art very difficult or impossible if the user does not have this information in advance.

Quantity of Suicide Art

The web pages were accessed on 2-9-09 and searched under the keyword “suicide.” The number of hits, noted in Table 1, varied from none to 254 in the British Museum and 294 in the Tate Museum. However, the actual suicide art holdings are, in many instances, underestimated by the figures in Table 1. For example, the National Gallery in Washington, DC, had only seven hits for “suicide.” However, a search under famous suicides yielded many additional hits: 15 for Cleopatra and 25 for Lucretia. However, it is likely that many of the suicide art objects in this and other museum collections will be missed until they are more fully catalogued in the search engines.

Narratives

Many museums give a summary of the story behind each object (e.g., the British Museum). However, many other museums provide little more than the title of the art object, the year of production, and the artist who produced the object.

Digital Images

Due to copyright restrictions, work priorities of staff, and other considerations, digital images of art objects are typically available for only half or fewer of the objects in a museum's collection. For example, while the National Gallery in Washington, DC, owns Edvard Munch's painting, "The Suicide," there is no digital image available. When digital images are available, they are typically in low to medium resolution format. These are downloadable for personal and/or educational use.

Photography Policies

For images not available in digital form online, the user may opt to travel to a museum to photograph them, but this is permitted by only some museums. Many of the world's museums now allow users to photograph many of the art objects in their collections for personal use (e.g., the British Museum, the Detroit Institute of Art, the Kunsthistorisches, the Getty Museum, and the Los Angeles County Museum of Art), but others do not (e.g., the National Gallery in London). In some museums, one can apply for a one-day photography pass to photograph a select part of the collection (e.g., the Tate Museum in London). Many do not allow flash photography, so the user needs appropriate camera technology for low light conditions.

Hard Copy Images

Museum stores, including those online, often offer hard-copy prints of a select few objects in their collections. However, given that suicide art is typically not in high demand, many of the suicide art images are not available for purchase.



Figure 2. Author Steven Stack researching suicide art at the Kunsthistorisches Museum, Vienna, Austria. Painting: Lukrezia, 1520, Joos van Cleve. Photo Credit: Barbara Bowman.

Data on Film Suicides

No single source on suicide films is adequate for a comprehensive study of suicide in film. The following WebPages have proven most useful to Stack and Bowman in their Hollywood Suicide Project.

By far the best single source for a list and detailed summaries of American suicide films is the American Film Institute Catalog (www.afi.com). This archive contains almost every film that was shown in American Theatres, including those dealing with suicide, attempted suicide, suicide pacts, and other categories of suicidal behavior. Lists can be obtained of films that concern the subject of suicide or which mention suicide in the summaries of the film in the AFI archive. Over 1,600 films are listed under the keyword "suicide" under both "subject" and "summary." Limitations of this source include a membership fee of \$50 to gain access, and the archive, while updated annually, ends largely with 1973. Some contemporary films from the last 6 years are also included, but there is currently a blind spot from 1974-2000.

The next best sources for suicide film research are two which provide detailed summaries of films dating from the mid 1990s: Kids in Mind (www.kidsinmind.com) , and Screenit (www.screenit.com). In both, one can obtain a list of suicide films using their search engine. These pages are continuously updated. Their main drawback is that no films from before circa 1993 are included.

A competitive webpage is the master of all film web pages, the Internet Movie Data Base (www.imdb.com). This provides summaries of all the films, but they vary considerably in quality and are generally not as richly detailed as the ones in the American Film Institute Archive. A list of suicide films can be generated using their search engine and the keyword "suicide." A unique feature to the IMDB is that there are links to "external reviews." These can be especially helpful in obtaining anywhere from a few to over 100 reviews by film critics including those at the *New York Times*, *Los Angeles Times*, *Chicago Sun Times* (reviews by Roger Ebert), and *San Francisco Chronicle*. A disadvantage is that the list of suicide films here does not include many that are available in other sources. Unless "suicide" is mentioned in the film summary, a suicide film will not make the suicide list in IMDB.

Two web-based lists of films on suicide are worth noting. 1000deaths.com (SOLOS: Survivors of Loved Ones Suicide) lists nearly 1,000 films that have some suicidal content. The main limitation of this source is that it has no summaries of the films. It is also not clear in most cases if the film contains a completed suicide, attempted suicide, or just suicide ideation. Some films have annotations next to them which indicate the graphic detail concerning the suicidal act. The list ends at circa 2000, and apparently it is not being updated.

A second list of suicide films is available at Eye on the Media (www.eyeonthemedias.net). This provides a list of approximately 1,200 films, which have some level of suicide content. Like the 1000deaths.com webpage, no summaries are given. This resource has one advantage - icons are provided which distinguish films from made-for-TV productions. Like 1000deaths.com, films are annotated with between 0 and five dots to assess the extent to which graphic images of suicide are provided. Eye on the Media has not, however, been updated since circa 2006. Other WebPages need to be accessed to obtain information on more current films.

PHOTOGRAPHIC PORTRAYALS OF SUICIDE

Collections of photographs with the theme of suicide can be obtained from a large number of web sites dealing with the distribution of literally millions of photographs on a commercial basis. Sites include www.acclaimimages.com, www.fotosearch.com, and www.shutterstock.com. All have search engines and yield hundreds of hits under the search term "suicide." Many of these images are apparently submitted by amateur photographers. Analyses are possible on demographics (e.g., gender, age and race), method of suicide portrayed, definitions of suicide that stress humor, and other variables. A second source is newspaper archives and websites that often include photographs by professional journalists who cover suicide stories. A third source of photographs is the suicide files of county coroners and medical examiners. These can typically be accessed on-demand by suicide professionals and, if necessary, under the freedom of information act. While most files examined by Steven Stack in one county did not have any photographs of the suicide scene, many had at least one and some had many such photos. These often graphic, real-life images could be compared to those in other art venues as a check on the extent to which art, in fact, reflects this dimension of suicidality in the real world.

In closing, of the various points of departure for research on art and suicide, modern film depictions perhaps warrant the greatest attention. While largely unstudied, they have been the dominant visual art form for a century. Of particular interest is the emphasis placed on altruistic suicide in many films. These often emphasize a heroic image.

Perhaps the most altruistic suicide of all would be saving the planet earth from impending destruction. The sacrifice of one life to save 4 billion lives seems rational. Bruce Willis does exactly that in *Armageddon*. A giant asteroid the size of Texas is headed for earth. Willis, an expert at drilling deep-sea oil wells is commissioned by NASA to travel to the asteroid, drill a hole and detonate an atomic bomb to destroy it. After their arrival on the asteroid, the mission goes wrong as the remote control device is broken. Someone must volunteer to detonate the bomb manually, meaning a certain death. For honor and mankind, Bruce Willis comes through.



Figure 3. *Armageddon* (1998, Vahalla Motion Pictures, Director: Michael Bay). Bruce Willis about to detonate an atomic bomb on a gigantic asteroid headed to earth: the ultimate altruistic suicide.

When celebrity stars portray suicide as altruistic, for the benefit of others, it may have special significance for the cultural definition of suicide. To the extent that American cinematic definitions of suicide have returned to ancient, heroic definitions, there are implications for the development of cultural misunderstandings of suicide.

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INDEX

#

9/11, 133

A

abnormalities, 297
 aboriginal, 34
 absorption, 259
 abusive, 197
 academics, 65
 accidental, 44, 120, 133, 263
 accidents, 37, 80, 125, 274
 accomplices, 103
 achievement, 149, 297
 acute, 194, 202, 204, 208, 271, 274, 275, 276, 277,
 281, 290, 293, 294, 295
 addiction, 114, 223
 adolescence, 79, 80, 81, 82, 90, 91, 164
 adolescents, 6, 79, 80, 81, 86, 90, 91, 259, 265, 268
 adult, 81, 174, 201, 213, 241
 adultery, 7, 28, 31, 41, 64, 97, 121, 140, 221
 adulthood, 79, 202
 advertising, 16
 aesthetics, 26
 affective disorder, 9, 173, 186, 189, 192, 193, 209,
 261, 267
 Africa, 210
 African American, 69, 70, 71, 72, 75, 76
 age, 11, 31, 32, 35, 36, 37, 38, 58, 83, 88, 128, 132,
 136, 141, 154, 155, 159, 161, 170, 171, 182, 183,
 190, 191, 192, 194, 195, 196, 202, 206, 210, 227,
 233, 235, 236, 237, 238, 242, 246, 248, 251, 259,
 281, 289, 308
 agent, 58, 152, 259
 aggression, 57, 151, 153, 282
 aging, 95, 102, 202, 289

agoraphobia, 39
 aid, 165, 261
 AIDS, 216, 219, 224, 225, 227
 air, 99, 281
 alcohol, 36, 80, 81, 88, 188, 189, 192, 193, 196, 197,
 198, 220, 260
 alcohol abuse, 188, 189, 192, 196, 197, 198, 220
 alcoholics, 173, 191, 261
 alcoholism, 9, 185, 189, 193, 197, 199, 221, 297
 alienation, 80
 alpha, 190
 alternative, 66, 73, 74, 130, 152, 251, 267, 276, 277,
 281, 282, 284, 285, 293, 295, 296
 alternatives, 44
 altruism, 2, 7, 94, 95, 97, 105, 106, 107, 108, 116,
 120
 altruistic acts, 116
 ambivalence, 5, 19, 33, 155, 205, 278, 279, 287
 ambivalent, 5, 18, 19, 33
 American culture, 61, 75, 96, 109, 138
 American History, 109, 156
 American Psychiatric Association, 1, 275, 296
 amnesia, 203
 Amsterdam, 201, 305
 Amy Tan, 121
 anger, 8, 65, 71, 80, 102, 155, 160, 161, 162, 164,
 165, 202, 264, 274, 275, 278, 295
 ankles, 159
 anti-Semitism, 254
 anxiety, 39, 122, 127, 128, 192, 194, 203, 210, 264,
 275, 281, 282
 anxiety disorder, 192
 apathy, 19, 278, 279, 294
 application, 15, 157, 272, 274, 278, 296
 archetype, 150
 argument, 2, 4, 9, 160, 173, 205, 238
 Arkansas, 95
 arrest, 132, 134, 140, 273

arsenic, 32
 artistic, 1, 2, 3, 4, 5, 8, 9, 11, 18, 20, 23, 24, 26, 28, 29, 34, 35, 42, 49, 52, 66, 74, 94, 141, 169, 172, 174, 175, 177, 178, 179, 181, 182, 184, 185, 186, 193, 194, 203, 207, 209, 218, 219, 220, 222, 226, 239, 249, 251, 262, 264, 271, 272, 276, 277, 284, 293, 297, 303, 304
 ascetic, 213
 Asian, 16, 70, 75
 aspirin, 84
 assault, 78, 88
 assaults, 75, 197
 assessment, 1, 216, 226, 239, 281, 297, 298
 assessment tools, 1
 asylum, 202, 205
 atmosphere, 284
 attachment, 194
 attacks, 164, 208, 210, 282
 attitudes, ix, 4, 6, 17, 18, 21, 26, 58, 141, 153, 156
 attractiveness, 58
 attribution, 106
 auditory hallucinations, 286
 Australia, ix, 34, 100, 188, 231, 240, 241, 248
 Austria, 137, 231, 241, 306
 authenticity, 20
 automobiles, 303
 autonomy, 30
 autopsy, 187
 availability, 67, 170, 174, 239, 303
 aversion, 26
 avoidance, 95, 107, 130
 awareness, 27, 141, 213, 274

B

barbiturates, 191, 196, 246
 barrier, 212
 barriers, 272, 276, 295
 beating, 133
 beer, 28, 247
 behavior, ix, 1, 6, 8, 9, 17, 18, 43, 49, 53, 67, 77, 78, 80, 88, 95, 141, 149, 153, 154, 159, 165, 189, 192, 197, 205, 210, 213, 220, 227, 235, 238, 240, 241, 242, 249, 252, 276, 282, 284, 285, 289, 292, 295, 307
 Belgium, 43
 beliefs, 58, 80, 96
 bell, 287, 289, 294
 benchmark, 236
 bending, 20, 161
 benefits, 96
 betrayal, 1, 7, 29, 101, 119, 128, 138, 153, 161, 225
 bias, 2, 189, 190, 198, 219

Bible, ix, 26, 118, 123
 binge drinking, 221
 biological parents, 160
 bipolar, 86, 173, 189, 192, 193, 203, 205, 209, 213, 217, 261, 267
 bipolar disorder, 86, 173, 189, 203, 205, 209, 213, 217
 birds, 38, 206, 274
 birth, 2, 120, 138, 140, 161, 173, 190, 191, 194, 195, 289
 blame, 74, 131, 164
 blind spot, 307
 blocks, 99
 blood, 26, 34, 140, 155, 304
 bloodshed, 71
 blot, 155
 bomb, 107, 308
 bonds, 96
 Boston, 43, 157, 240, 250, 260, 268, 304
 boys, 80, 82, 83, 84
 brain, 203, 224
 breakdown, 134, 193, 201, 203, 260, 261, 268, 290
 Britain, 28, 170
 brothers, 164, 202, 206, 207, 211
 brutality, 26, 138
 Brutus, 65, 119, 121
 bubbles, 45
 buildings, 57
 Bulgaria, 283
 bullies, 86, 118
 burdensomeness, 108, 226
 Bureau of the Census, 180, 188
 burning, 16, 137
 butterfly, 138

C

Canada, 231
 cancer, 7, 93, 95, 96, 102, 103, 104, 107, 109, 118, 171, 260
 candidates, 50
 capsule, 278
 carbon monoxide, 59
 case study, 11, 156
 cast, 129, 140, 165, 210, 212
 catastrophes, 274
 catharsis, 264, 282, 293, 295
 Catholic, 21, 135, 206
 Catholic Church, 21
 Caucasian, 69, 70, 71, 75, 76
 Caucasians, 170
 causal relationship, 58
 causality, 58

-
- causation, 187, 240
 - cave, 82, 163, 164, 263
 - cell, 75, 119
 - censorship, 140
 - Census, 180, 188, 216
 - Centaur, 21
 - ceramics, 16
 - certification, 175
 - chaos, 262
 - charcoal, 287, 289
 - cheating, 7, 115, 116
 - cheese, 211
 - chicken, 85
 - childhood, 39, 79, 164, 202, 213, 224, 254, 262, 294
 - child-rearing practices, 210
 - children, 23, 29, 38, 84, 91, 141, 153, 155, 191, 194, 195, 202, 210, 211, 283, 284, 301
 - China, 248
 - chloroform, 207
 - Christianity, 23, 254
 - Christmas, 208
 - chronic disease, 214
 - chronic illness, 80
 - cigarettes, 93, 303
 - Cincinnati, 186
 - civil war, 44, 70, 162
 - civilian, 97
 - classes, 31, 67, 113, 126, 150, 239
 - classical, 16, 24, 26, 27, 29, 40, 44, 53, 124, 141, 295
 - classification, 18, 33
 - clients, 9, 171, 172, 185, 259, 264, 265
 - clinical approach, 43
 - clinical judgment, 154
 - clinical psychology, x
 - clinical symptoms, 275, 277, 289
 - close relationships, 80, 88
 - clouds, 99, 205, 263
 - clustering, 173
 - clusters, 240
 - CNN, 34, 41
 - Coca-Cola, 263
 - codes, 2, 97, 176
 - cognitive dissonance, 150, 156
 - cognitive therapists, 264
 - cognitive therapy, 264
 - coherence, 127
 - college students, 113, 239, 251
 - Colorado, 175
 - colors, 34, 37, 201, 274, 277, 278, 279, 284, 294
 - Columbia University, 255
 - coma, 93, 102
 - commerce, 28
 - communication, 28, 35, 36, 80, 83, 84, 85, 87, 89, 91, 192, 207, 248, 259, 273, 276, 291, 292, 293, 295, 303, 309
 - communities, 42, 182
 - community, 34, 66, 70, 72, 74, 81, 101, 253
 - community conflict, 66, 67, 70, 72, 74
 - co-morbidities, 185
 - compassion, 211
 - competition, 216, 217, 219, 221, 226
 - competitor, 212, 222
 - compilation, 233
 - complex partial seizure, 214
 - complexity, 16, 149, 156, 294
 - complications, 131, 202, 204
 - components, 96, 126, 169, 175, 211, 226, 265, 289
 - composition, 26, 126, 170, 273
 - computer technology, 132
 - concealment, 39
 - concentration, 81, 155, 279
 - conception, 281, 296
 - conceptualizations, 28
 - concrete, 261, 265, 272, 290
 - condensation, 281
 - confession, 128, 261
 - confidence, 193, 194, 197, 266, 295
 - confidentiality, 80
 - confinement, 84, 208
 - conflict, 17, 27, 66, 67, 68, 70, 72, 74, 80, 82, 90, 128, 143, 152, 162, 216, 223, 226, 227, 253, 287, 293, 294
 - conflict resolution, 143
 - conformity, 80, 82, 150, 152
 - confounders, 170, 184
 - confrontation, 185
 - confusion, 19, 202, 263
 - consciousness, 265
 - constraints, 172, 263
 - construction, 72, 154, 174, 187, 215
 - consumption, 28, 209
 - contingency, 106
 - continuity, 23, 152, 281, 289
 - contractors, 172, 185
 - contracts, 9, 172, 185, 186, 216, 217, 219, 221, 226
 - control, 9, 51, 59, 60, 68, 73, 79, 88, 89, 106, 107, 108, 115, 140, 151, 160, 170, 171, 173, 176, 177, 184, 204, 212, 217, 264, 266, 267, 268, 273, 276, 279, 289, 293, 308
 - control group, 9, 68, 106, 107, 173
 - conviction, 133
 - convulsion, 210
 - Copenhagen, 137
 - coping, 44
 - corona, 208

correlation, 35
 cosmetics, 262
 costs, 108
 covering, 210
 craving, 210
 creative abilities, 209, 226
 creative process, 263, 265, 266, 268
 creativity, 35, 43, 172, 186, 187, 189, 190, 193, 201, 209, 217, 219, 226, 260, 265, 266, 271, 272, 293, 294, 297
 crime, 28, 71, 94, 114, 126, 127, 132, 151, 240
 crimes, 42, 116, 119, 126, 127
 criminals, 100
 critical period, 159
 critical value, 69
 criticism, 140, 194, 197, 261, 262
 cross-cultural, 138, 157
 crying, 66
 cues, 81, 89
 cultural beliefs, 96
 cultural factors, 52
 cultural values, 52
 culture, ix, 8, 12, 15, 16, 26, 28, 29, 33, 34, 43, 61, 75, 77, 96, 109, 138, 154, 209, 225, 249, 253
 curiosity, 127
 curriculum, 239
 customers, 171
 cyanide, 132
 cyberspace, 35
 Cyprus, 50

D

dairy, 103
 danger, 177, 204
 data availability, 303
 data collection, 67
 database, 114, 184, 236
 dating, 1, 83, 307
 deaths, 6, 8, 9, 21, 23, 24, 25, 26, 27, 30, 31, 34, 36, 43, 51, 52, 125, 131, 132, 133, 137, 154, 169, 171, 175, 176, 177, 178, 179, 180, 181, 183, 184, 187, 190, 191, 192
 decision makers, 225
 decisions, 274
 deep-sea, 52, 308
 defense, 99, 127, 151, 254, 293
 defenses, 85, 290
 deficits, 223
 definition, 67, 69, 113, 116, 124, 128, 232, 304, 309
 degenerate, 35
 delinquency, 242
 delusions, 197, 204, 208, 283, 289, 290

delusions of grandeur, 283, 290
 demographic characteristics, 215
 demographics, 58, 169, 170, 184, 308
 Denmark, 154
 dependent variable, 51, 59, 74, 106, 107, 115, 176, 181, 217, 233, 234, 236, 238
 depreciation, 212
 depressed, 10, 80, 86, 141, 192, 193, 194, 196, 197, 202, 207, 209, 211, 248, 250, 259, 260, 261, 294
 depression, 1, 2, 5, 7, 9, 11, 23, 32, 33, 35, 36, 37, 43, 51, 80, 81, 85, 97, 105, 141, 173, 174, 185, 193, 194, 197, 198, 202, 203, 204, 205, 209, 210, 212, 215, 217, 219, 223, 224, 226, 227, 242, 248, 252, 264, 267, 272, 274, 275, 276, 277, 279, 280, 285, 287, 289, 293, 294, 297
 depressive disorder, 43, 186, 187, 192, 196, 204, 240
 depressive symptoms, 297
 desert, 103
 designers, 176, 179, 180, 182, 184, 216, 219
 destroyers, 99
 destruction, 53, 153, 155, 184, 211, 308
 detachment, 151
 detection, 275
 Diagnostic and Statistical Manual of Mental Disorders, 275, 296
 diagnostic criteria, 187
 dichotomy, 115, 181
 differentiation, 273
 diffusion, 281
 digital images, 306
 digitalis, 209
 dignity, 18, 24, 263
 disability, 219
 disappointment, 90, 211, 295
 disaster, 138, 211
 discipline, 149, 197, 264
 discourse, 28
 diseases, 224
 disfigure, 57
 disorder, 1, 9, 86, 122, 173, 174, 185, 186, 189, 192, 193, 196, 198, 202, 203, 204, 205, 209, 213, 224, 240, 261, 267, 271
 displacement, 281
 disposition, 205, 251
 dissatisfaction, 171, 172
 distress, 67, 162, 211, 259, 262, 268, 294
 distribution, 116, 172, 174, 178, 185, 215, 216, 218, 219, 308
 distribution of income, 172
 diversity, 17
 division, 254
 divorce, 7, 80, 91, 98, 99, 191, 195, 223, 249
 doctors, 84

Don Quixote, 119
 doors, 161
 downward mobility, 114, 120
 draft, 139, 197
 dream, 152, 250, 273
 dreaming, 250
 drinking, 9, 20, 28, 84, 157, 205, 221, 284
 drowning, 17, 19, 25, 28, 29, 30, 31, 36, 39, 40, 59,
 60, 134, 137, 142, 191, 196, 220, 224, 273
 drug abuse, 192, 196
 drug addiction, 114
 drug use, 80, 81, 251
 drugs, 60, 76, 80, 87, 90, 133, 174, 223, 249, 265,
 297
 DSM, 174, 275
 dualism, 265
 duration, 216
 dysphoria, 203, 284

E

earth, 50, 107, 151, 162, 210, 214, 308
 eating, 213, 263
 ecological, 239
 economic status, 174
 economics, 184
 Eden, 126, 221, 222
 educated women, 255
 education, 251, 260
 egg, 30
 ego, 160, 273, 289
 ego strength, 289
 Egypt, 2, 65, 139
 elaboration, 66
 elderly, ix, 95, 97, 128, 236, 237
 elders, 22
 electroencephalogram, 204
 e-mail, 41
 emission, 205
 emotion, 162, 203, 222, 262, 264, 274, 286
 emotional, 8, 40, 84, 96, 108, 134, 138, 139, 140,
 141, 151, 187, 204, 210, 223, 262, 264, 265, 267,
 269, 271, 275, 276, 279, 281, 284, 289, 293, 294,
 295
 emotional conflict, 294
 emotional experience, 204
 emotional state, 96, 271
 emotionality, 96, 204
 emotions, 11, 79, 84, 85, 214, 264, 265, 268, 274,
 275, 276, 277, 279, 289, 293
 empathy, 23
 employers, 172
 employment, 172, 182, 184, 185, 219, 221

employment relationship, 172
 encoding, 261
 energy, 19, 161, 193, 203, 222, 261, 275, 276, 278,
 279, 285, 294, 295
 engagement, 204
 engines, 100, 239
 England, 17, 27, 28, 29, 31, 41, 43, 64, 134, 143,
 144, 176, 181, 183, 186, 240, 241, 246
 enterprise, 219
 entertainment, 41, 232
 enthusiasm, 19, 193, 203
 environment, 80, 82, 255, 277, 290, 294, 295
 epidemic, 247, 249, 253, 254, 255
 epidemics, 35
 epidemiology, x, 303
 epilepsy, 196, 203, 204, 209, 213, 214, 223
 equating, 254
 equilibrium, 31
 ester, 105, 159, 164, 173, 191, 217, 249, 251
 esthetics, 26
 etching, 30
 ethics, 18
 ethnicity, 141
 etiology, 19, 23, 94, 105, 226, 303
 euphoria, 203
 Europe, x, 10, 17, 33, 98, 186, 197, 301
 evening, 262, 281
 evil, 18, 22, 25, 28, 38, 66, 128, 138, 139, 140, 286
 evolution, 17
 excess supply, 172
 excitability, 202
 exclusion, 303
 execution, 2, 22, 100, 105, 118, 119, 121, 123, 127,
 294
 exercise, 36, 264, 281
 explosions, 99
 explosives, 95
 exposure, 120, 194, 239, 250
 external locus of control, 160
 extroversion, 227
 eyes, 35, 160, 161, 285

F

fabric, 278
 fabricate, 35
 fabrication, 261
 failure, 18, 152, 154, 174, 186, 187, 192, 194, 202,
 205, 210, 211, 220, 267, 269, 274, 284, 295, 296
 fainting, 203
 faith, 22, 138
 familial, 140, 142

family, 20, 21, 27, 66, 74, 75, 76, 79, 80, 82, 83, 84, 86, 87, 89, 90, 95, 98, 101, 102, 114, 121, 125, 151, 197, 201, 207, 210, 211, 212, 235, 251, 254, 261, 277, 278, 281, 283, 284, 289, 291, 296
 family environment, 80
 family history, 296
 family life, 207
 family members, 80, 91
 family relationships, 80, 251
 family support, 81
 famine, 97, 160
 Far East, 70
 fat, 263
 fatalistic, 117, 153
 fatalities, 240, 241
 fear, 74, 96, 138, 150, 152, 161, 187, 194, 202, 211, 212, 213, 221
 fears, 76, 99
 February, 31, 39, 40, 247, 309
 fee, 307
 feelings, 15, 18, 39, 68, 81, 85, 86, 89, 98, 138, 185, 194, 211, 212, 253, 259, 264, 267, 273, 274, 275, 276, 277, 282, 285, 287, 289, 290, 293, 294, 295, 296
 feet, 91, 100, 159, 160, 161, 246
 females, 6, 9, 23, 28, 57, 59, 80, 116, 171
 femininity, 28, 217, 254
 feminist, 30
 fertility, 38
 fighters, 102
 film, 2, 3, 4, 6, 7, 9, 10, 11, 33, 52, 58, 59, 60, 61, 63, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 93, 94, 95, 96, 97, 102, 104, 105, 106, 107, 108, 114, 115, 116, 131, 151, 215, 216, 217, 218, 219, 220, 222, 223, 224, 225, 226, 227, 238, 239, 253, 301, 302, 304, 307, 308
 films, 1, 2, 3, 4, 5, 6, 7, 9, 11, 12, 58, 59, 60, 66, 67, 68, 69, 71, 72, 73, 74, 75, 81, 93, 94, 95, 96, 97, 104, 105, 106, 107, 108, 113, 115, 116, 124, 216, 219, 220, 221, 222, 224, 226, 227, 231, 232, 236, 238, 239, 240, 241, 242, 307, 308
 financial support, 206
 Finland, 248
 Finns, 249
 fire, 35, 42, 95, 98, 100, 101, 118, 142, 210
 firearm, 51, 59
 firearms, 6, 57, 59, 80, 137, 170
 fires, 98
 first degree relative, 186
 fish, 281, 285
 flame, 37
 flexibility, 185
 floating, 16, 32

flow, 72, 194
 focusing, 149, 153, 232, 254
 folklore, 289
 food, 97, 210
 football, 90
 Ford, 104, 105
 forgiveness, 22, 126, 127
 foxglove, 209
 fragility, 291
 fragmentation, 263
 framing, 17, 66, 93, 94, 107
 France, 16, 22, 24, 45, 144, 201, 202, 246, 305
 free association, 273
 freedom, 79, 82, 121, 293, 308
 Freud, 1, 12, 41, 42, 113, 151, 156, 161, 276
 Friday, 29
 friendship, 82, 201, 205
 frustration, 80
 fuel, 99, 100
 fulfillment, 88
 fusion, 33, 42, 281

G

gambling, 1, 27, 121
 games, 81, 132
 gangrene, 100
 gangs, 80
 garbage, 262
 gas, 123, 191, 196, 260
 gases, 59
 gender, 26, 27, 30, 53, 57, 58, 59, 60, 61, 106, 107, 115, 116, 134, 170, 171, 187, 198, 217, 219, 234, 235, 236, 237, 238, 242, 285, 308
 gender differences, 134
 gender gap, 57
 gender role, 58
 gene, 2, 3, 249
 generalizations, 2, 3
 generalized seizures, 203
 generalized tonic-clonic seizure, 214
 generation, 94, 227, 261
 genetics, 209
 Geneva, 12, 309
 genocide, 34
 genre, x, 18, 19, 24, 29, 30, 33, 47, 61, 126, 127, 128, 134, 142, 152
 Georgia, 175, 190, 191, 192
 Germany, 30, 33, 60, 70, 95, 100, 142, 143, 144, 231, 234, 246, 271
 gestures, 24, 205
 gifted, 50, 223
 girls, 70, 80, 83, 84, 88, 89, 255

glass, 16, 68, 100, 208, 211, 247
 glasses, 84
 goals, 18, 50, 87, 274
 God, 22, 25, 126, 127, 135, 162, 207, 265, 268
 good behavior, 18
 government, 253
 graduate students, 197
 grain, 206
 grants, x
 gravity, 129
 Great Britain, 28
 Great Depression, 10, 95, 101, 231, 249
 Greece, 20, 26, 141, 150, 160
 greed, 27
 greenhouse, 223
 grief, 8, 38, 40, 65, 66, 95, 101, 102, 138
 grounding, 262
 group therapy, 277
 groups, 9, 51, 169, 170, 173, 176, 177, 180, 182,
 184, 185, 187, 190, 225, 235, 241
 growth, 139, 210, 289
 guardian, 42, 150
 guidelines, 4, 241
 guilt, 22, 67, 76, 89, 94, 96, 98, 100, 119, 120, 121,
 128, 138, 153, 154, 161, 162, 202, 264, 274
 guilty, 32, 83, 86, 87, 126, 127, 130, 136, 155, 161,
 212, 274, 291
 gun control, 60
 guns, 6, 59, 60, 61, 134, 284

H

H1, 234
 H₂, 235
 Haifa, 5, 34
 hallucinations, 203, 208, 286
 hallucinatory, 286
 handling, 262
 hands, 23, 57, 89, 129, 133, 211, 302
 hanging, 22, 23, 27, 28, 29, 31, 34, 38, 80, 134, 216
 harm, ix, 31, 274
 harmony, 31
 Harvard, 52, 53, 109, 132, 213, 227, 297, 298
 harvest, 160, 210
 hate, 162, 274, 275
 Hawaii, 255
 headmaster, 82
 healing, 36
 health, 28, 41, 90, 91, 102, 174, 185, 197, 198, 206,
 215, 225, 236, 240, 241, 254
 hearing, 114, 246, 286
 heart, 72, 76, 84, 140, 155, 225, 250, 284
 heavy drinking, 9

heavy metal, 249, 251, 252
 Hebrew, 21
 height, 30, 249, 289, 294
 helplessness, 23, 79, 89, 278, 282, 291
 heme, 18, 19
 herbs, 208
 Hermes, 42
 heroism, 26, 33, 93, 107
 herring, 129
 heterogeneous, 184
 heuristic, 169
 high risk, 87, 170, 174, 179, 183, 184, 186
 high school, 61, 67, 89, 91, 239, 249, 251, 277, 281
 high-risk, 176, 177, 179, 180, 181, 182, 184
 historical trends, 2
 Hmong, 107
 holistic, 3, 4, 241
 holistic approach, 3, 241
 Holland, 202, 210
 homeless, 29, 123
 homicide, 96, 121, 163, 164, 165, 252, 284, 297
 homosexuality, 90, 222
 honey, 83
 Hong Kong, 231, 243
 hopelessness, 23, 89, 90, 140, 142, 205, 214, 274,
 275, 296
 horse, 38, 77, 211
 horses, 104
 hospital, 84, 85, 86, 87, 88, 93, 203, 205, 207, 208,
 210, 240, 272, 277, 280, 281, 282, 283, 284, 285,
 289, 294, 295, 296
 hospitalization, 9, 205, 208, 276, 277, 283, 286, 291,
 293, 294
 hospitalizations, 260
 hospitalized, 36, 86, 87, 173, 192, 208, 260, 261,
 272, 277, 281, 283, 284, 286, 290, 295
 hospitals, 154, 217
 host, 169, 170, 184
 hostage, 133
 hostility, 79, 224, 254
 house, 34, 36, 42, 52, 114, 120, 135, 136, 137, 206,
 214, 239, 289, 297
 household, 207, 211
 hue, 209
 human, 5, 15, 38, 39, 125, 157, 172, 179, 210, 212,
 223, 262, 264, 273, 274, 285, 289, 290
 human capital, 172
 human experience, 262, 264
 human motivation, 157
 humanistic psychology, 150
 humiliation, 2, 119, 211, 213
 humility, 140
 humorous, 36, 37

-
- Hungarian, viii, 10, 45, 137, 245, 248
 Hungarians, 246, 248, 249
 Hungary, 246, 247, 248, 249
 hunting, 74, 131
 husband, 16, 25, 27, 29, 65, 71, 72, 84, 97, 98, 104, 122, 132, 151, 153, 155, 161, 162, 164, 223, 260, 283
 hypothesis, 4, 5, 49, 57, 58, 60, 75, 150, 154, 156, 169, 215, 234, 235, 239
 hypothesis test, 5
-
- Idaho, 175
 idealization, 27, 89
 identification, 5, 44, 152, 232, 235, 239, 242
 identity, 79, 80, 81, 89, 91, 285, 290
 idiosyncratic, 273
 Iliad, 50, 120
 illusion, 44
 image analysis, 304
 imagery, 18, 22, 28, 33, 40, 261
 images, 2, 4, 15, 16, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 38, 39, 40, 41, 43, 58, 63, 179, 249, 251, 261, 262, 263, 265, 266, 273, 276, 293, 294, 296, 301, 304, 306, 307, 308
 imagination, 4, 15, 29, 65, 261, 290
 imitation, 107, 231, 236, 237, 240, 241, 253
 immersion, 266
 immigrants, 248
 immigration, 122
 immortal, 32, 40
 immortality, 211
 impotence, 38
 imprisonment, 100
 impulsive, 160, 281, 284
 incarceration, 118
 incest, 8, 122, 165
 incestuous, 85, 90, 164, 165, 254
 incidence, 8, 9, 10, 134, 173, 177, 184, 186, 189, 193, 209, 234, 240, 248, 249, 251, 271
 incineration, 224
 inclusion, 68, 96, 97, 140, 184, 216
 income, 51, 102, 172, 174, 221, 240
 income inequality, 172, 240
 incomes, 235
 incurable, 8, 134
 independence, 293
 independent variable, 51, 59, 115, 169, 182, 215, 233
 Indian, 16, 70
 Indiana, 77, 175, 255
 indicators, 35, 115, 217
- indigenous, 34, 42
 industry, 1, 4, 28, 58, 94
 inequality, 66, 70, 72, 172, 240
 inert, 285
 infancy, 131, 160, 191
 inferences, 149
 infinite, 207
 ingestion, 80
 inhibition, 204
 inhibitory, 204
 initiation, 10, 238
 injuries, 96, 103, 133
 injury, 18, 34, 35, 39
 innocence, 126, 127
 insane, 297
 insecurity, 80
 insight, 10, 38, 41, 49, 50, 126, 155, 165, 186, 212, 222, 226, 296
 inspection, 301
 inspiration, 25, 33, 34, 37, 223
 instability, 191, 281
 institutions, 1, 74, 186
 instruments, 282
 insults, 160
 insurance, 114, 130, 134
 integration, 96, 109, 187, 235
 intellect, 32
 intelligence, 193
 interaction, 149, 152, 222, 249, 250, 252
 interaction effect, 250, 252
 interactions, 223, 250, 277
 interference, 282
 internet, 15, 16, 33, 35, 58, 85, 95, 114, 216, 238, 246, 307
 interpersonal communication, 276
 interpersonal contact, 277
 interpersonal relations, 80, 225, 293
 interpersonal relationships, 80, 225
 interval, 203
 intervention, 297
 interview, 133, 295
 interviews, 261
 intimacy, 9, 80, 82, 87, 89, 91, 210, 212
 introversion, 216, 219, 222, 223, 227
 intuition, 1, 32, 41
 investigations, 209, 236, 303
 involuntary manslaughter, 142
 iron, 159
 irrationality, 19
 irritability, 204
 Islamic, 5, 34
 island, 2, 100, 128
 isolation, 81, 141, 151, 171, 186, 212, 278, 294

Israel, 174, 231, 242, 272
 Italy, x, 22, 139, 142, 143, 144, 151, 246, 305
 ivory, 22

J

Japan, 11, 231, 240, 242, 250, 253, 255
 Japanese, 2, 3, 16, 42, 43, 47, 99, 100, 105, 138, 187, 301
 Jerusalem, 34
 Jews, 10, 254, 255
 job loss, 51, 75
 jobs, 172, 281
 journalists, 308
 Judaism, 123, 254
 judge, 127
 judges, 130
 judgment, 154
 Jungian, 150
 jury, 33
 justice, 72, 126, 127
 justification, 27

K

Kentucky, 175
 kerosene, 101
 kidnapping, 72
 killing, 17, 21, 44, 53, 71, 96, 103, 120, 127, 128, 138, 208, 211
 King, 16, 50, 61, 65, 114, 117, 118, 121, 122, 160, 162, 265

L

labor, 17, 53, 170, 172, 174, 175, 180, 184, 185, 186, 187, 216, 217, 219, 222, 226
 labor force, 170, 175, 180
 labor markets, 172, 184, 185, 186, 187, 216, 217, 219, 222, 226
 lack of control, 151
 land, 101
 landscapes, 274
 language, 44, 255, 261, 276, 277, 305
 latency, 159
 late-onset, 203
 later life, 159
 Latin America, 34
 laughing, 164
 laundry, 223
 law, 96, 126, 160, 202
 laws, 273

lawsuits, 250
 leadership abilities, 50
 learning, 4, 6, 17, 36, 41, 58
 leisure, 6, 58
 lending, 97, 115
 lesions, 203
 liberal, 21
 liberation, 262
 liberty, 18
 life course, 4
 life cycle, 289
 life span, 79, 91
 life style, 202, 251
 lifetime, x, 207
 light conditions, 306
 likelihood, 191
 limitation, 130, 184, 233, 238, 301, 307
 limitations, 11, 44, 170
 Lincoln, Abraham, , 37, 124
 linguistic, 124
 linkage, 189
 links, 35, 37, 268, 307
 listening, 141, 246, 247
 lithium, 209, 213
 locus, 70, 160, 165
 London, 12, 29, 30, 41, 42, 43, 44, 53, 61, 64, 75, 77, 108, 109, 123, 137, 214, 246, 296, 297, 298, 304, 305, 306, 309
 lone wolf, 129
 loneliness, 33, 79, 81, 86, 96, 194, 197, 206, 210, 212, 260, 294
 long period, 65, 192, 207
 long-term impact, 239
 Los Angeles, 42, 217, 247, 297, 305, 306, 307
 losses, 162, 191, 205
 love, 1, 8, 20, 24, 25, 29, 31, 37, 38, 81, 83, 84, 95, 96, 97, 98, 99, 101, 107, 114, 117, 119, 121, 123, 126, 131, 138, 139, 141, 142, 144, 150, 151, 162, 163, 202, 203, 207, 210, 211, 213, 221, 225, 227, 253, 260, 264, 285
 lover, 5, 8, 18, 25, 26, 27, 36, 40, 44, 72, 76, 114, 121, 122, 138, 139, 140, 142, 224, 245, 246, 264
 low risk, 177, 184
 loyalty, 20
 lung, 93, 107
 lying, 33, 34, 38, 82, 202

M

Madison, 296
 magazines, 15, 33, 58
 Maine, 175, 220

-
- major depression, 97, 173, 174, 185, 215, 217, 219, 223, 226, 227
- major depressive disorder, 186
- maladaptive, 202
- males, 6, 21, 28, 31, 57, 59, 60, 80, 106, 107, 116, 170
- malicious, 139
- management, 264, 297
- Manhattan, 247
- mania, 193, 203, 206
- manic, 86, 173, 185, 189, 192, 205, 209, 217, 223, 261, 267, 271, 274
- manic episode, 86, 261
- manic-depressive psychosis, 189
- manipulation, 140, 142
- manslaughter, 133
- manual workers, 174
- marital conflict, 27
- marital status, 58, 141, 170, 176, 182, 191, 195, 251
- market, 28, 53, 132, 172, 174, 184, 185, 186, 222, 226, 249
- market share, 249
- marketing, 171
- markets, 172, 185, 186, 187, 216, 217, 219, 222, 226, 303
- marriage, 27, 29, 31, 38, 76, 155, 165, 194, 197, 198, 210, 211, 235, 283
- marriages, 29, 195
- married women, 191
- masculinity, 217, 284, 285
- mask, 80, 279
- mass media, 33, 58, 61, 241, 242
- Massachusetts, 123, 186, 260
- mathematics, 83, 291
- maturation, 79
- Maya, 16
- meanings, 1, 17, 33, 58, 96, 261, 276, 294
- measurement, 50, 51, 175
- measures, 50, 51, 58, 157, 174, 182, 235, 236, 240
- media, 4, 10, 12, 16, 31, 33, 34, 58, 59, 60, 61, 91, 226, 231, 232, 233, 235, 236, 237, 238, 239, 240, 241, 242, 309
- medication, 196
- medications, 260, 286
- medicine, 125, 205, 281, 297
- meditation, 286
- Mediterranean, 37
- MEDLINE, 236
- megalomania, 202
- melancholic, 210, 211
- melody, 247
- melting, 273
- membership, 307
- memory, 34, 66, 151, 159, 208
- men, 6, 9, 28, 29, 34, 51, 57, 58, 59, 60, 61, 63, 72, 73, 78, 94, 99, 101, 103, 105, 106, 115, 126, 134, 137, 142, 150, 151, 152, 160, 182, 189, 190, 192, 194, 195, 196, 197, 198, 248, 253, 277, 297
- menstruation, 260
- mental capacity, 297
- mental disorder, 8, 173, 174, 271
- mental health, 41, 174
- mental health professionals, 41
- mental illness, 4, 12, 18, 32, 186, 198, 201, 209, 271, 296
- mental life, 44
- mental states, 203
- mentor, 220
- mercy killing, 96
- Mesoamerica, 44
- messages, 5, 103, 259, 284, 294, 295, 303, 304
- meta-analysis, 4, 9, 10, 209, 214, 233, 235, 238, 240, 242, 304
- metaphor, 23, 261, 263, 265
- metaphors, 261, 266
- Mexican, 46, 70, 71, 76
- Mexico, 16, 175, 301
- Middle Ages, 21, 22, 23, 25, 26, 43
- middle class, 31
- Middle East, x
- middle-aged, 235
- military, 2, 17, 18, 50, 70, 82, 94, 95, 96, 101, 107, 133, 139, 281, 283, 284, 286
- mines, 99
- mining, 201
- Minnesota, 139
- mirror, 17, 36
- miscommunication, 138
- misidentification, 281
- misleading, 282
- missions, 66, 309
- Mississippi, 52
- misunderstanding, 25
- mobility, 43, 114, 120
- modalities, 3, 67
- modality, 143
- models, 23, 26, 60, 61, 107, 184, 232, 233
- modern society, 116, 153
- modernity, 187
- money, 27, 31, 72, 84, 114, 208, 246
- Mongols, 70
- Monroe, vii, 15, 33, 34, 221
- monsters, 224
- mood, 10, 43, 173, 185, 187, 192, 196, 203, 204, 205, 209, 224, 250, 283, 285, 286, 290
- mood change, 203

mood disorder, 173, 185, 224
 moon, 225
 moral beliefs, 80
 morality, 18, 26
 morbidity, 7, 93, 99, 169, 173, 174, 175, 184, 185, 215, 216, 217, 219, 224, 225, 226, 227
 morning, 29, 34, 83, 85, 100, 131, 207
 morphine, 120
 mortality, 34, 41, 175, 186, 187, 198, 199, 214
 mothers, 254
 moths, 281
 motion, 1
 motivation, 18, 19, 30, 65, 155, 157, 185, 274, 295
 motives, 1, 2, 3, 6, 7, 8, 9, 22, 23, 27, 28, 33, 67, 93, 94, 95, 97, 98, 100, 106, 107, 113, 114, 115, 116, 123, 130, 150, 155, 215, 217, 219, 225, 302, 303
 mouth, 205, 262
 movement, 31, 42, 66, 71, 73, 75, 226, 264, 272, 287
 multiples, 132
 multiplicity, 294
 multivariate, 68, 75, 106, 107, 115, 181, 182, 184, 225, 237
 murder, ix, 27, 29, 30, 43, 114, 120, 121, 122, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 139, 140, 141, 151, 159, 160, 161, 163, 221, 223, 225, 254
 music, 11, 15, 16, 33, 137, 141, 220, 222, 223, 226, 246, 247, 249, 250, 251, 252, 301, 303
 musicians, 176, 179, 180, 182, 184, 217, 219, 221, 226, 227, 246

N

narcissistic, 254, 266, 267
 narratives, 2, 4, 5, 6, 8, 58, 66, 217, 226, 304
 NASA, 308
 nation, 174, 175, 176, 184, 189, 232
 National Gallery, 43, 305, 306
 National Institute for Occupational Safety and Health, 186
 National Institutes of Health, 274
 Native American, 70, 76, 88
 natural, 9, 35, 131, 155, 170, 182, 190, 191, 192, 195
 Navy, 70, 71, 76, 95, 99, 105, 106, 260
 neck, 16, 20, 22
 negative consequences, 264
 negative emotions, 11, 264
 neglect, 6, 20, 212, 301, 304
 Netherlands, 201, 202, 248
 neurotic, 113, 261, 262, 272
 neuroticism, 174
 Nevada, 175
 New England, 176, 181, 183, 240, 241

New Jersey, 133, 175
 new media, 34
 New Mexico, 175
 New Orleans, 124
 New York, 12, 34, 36, 37, 42, 43, 44, 53, 60, 61, 77, 102, 109, 123, 124, 136, 137, 145, 150, 156, 157, 165, 186, 187, 188, 198, 199, 214, 217, 224, 228, 232, 234, 240, 241, 242, 247, 248, 251, 252, 255, 268, 296, 297, 298, 305, 307, 309
 New York Times, 102, 217, 247, 248, 251, 307
 New Zealand, 213, 240, 241
 newspaper coverage, 231
 newspapers, 30, 31, 33, 238, 253
 Newton, 260
 nonverbal, 41
 non-violent, 59, 60
 normal, 85, 88, 89, 204, 273, 283
 normalization, 204
 norms, 2, 71, 80
 North America, 16, 301
 North Carolina, 175
 Norway, 154
 nurse, 70, 71, 76, 88, 95, 99, 106, 262
 nursing home, 51

O

obligation, 130, 131
 obligations, 140, 142, 253
 occupational, 1, 6, 8, 9, 49, 50, 52, 73, 169, 170, 173, 175, 176, 177, 179, 180, 182, 185, 186, 187, 215, 216, 218, 219, 220, 221, 222, 223, 226, 227
 occupational groups, 169, 177, 182, 185
 occupational therapy, 1
 odds ratio, 52, 59, 60, 73, 106, 107, 115, 116, 181, 182, 184, 218, 219, 237
 Odyssey, 50
 Oedipus, 122, 144, 159, 160, 161, 162, 164, 165
 Ohio, 156, 175, 186
 oil, 31, 32, 37, 40, 205, 308
 Oklahoma, 109, 175
 olive, 210
 omission, 2
 oncology, 109
 online, 11, 35, 43, 58, 85, 217, 306
 openness, 296
 operator, 171
 opium, 102, 265
 opposition, 22, 90, 266
 oppression, 10, 34, 140
 optimism, 205
 orchestration, 140
 organ, 5

organic, 35
 orientation, 58, 222
 outrage, 24, 65, 261
 ownership, 249
 Ozarks, 101

P

Pacific, 100
 pain, 7, 8, 20, 21, 23, 81, 87, 90, 93, 94, 96, 97, 98,
 102, 103, 104, 105, 106, 107, 109, 134, 159, 185,
 259, 260, 265, 294
 paints, 40
 paradox, 61
 paradoxical, 240
 paralysis, 202
 paranoia, 160, 196, 197
 parental smoking, 9
 parents, 6, 25, 29, 81, 82, 83, 84, 85, 86, 87, 90, 91,
 154, 160, 193, 195, 210, 212, 213, 224, 249, 250,
 259, 261, 277, 281, 291
 Paris, 32, 33, 72, 75, 91, 139, 145, 156, 197, 201,
 202, 203, 205, 211, 246, 254, 305
 partial seizure, 203, 204, 214
 passive, 27, 31
 pastoral, 284, 286
 paternal, 36
 pathogenesis, 213
 pathological gambling, 1
 pathways, 9, 173
 patients, 1, 11, 19, 85, 87, 88, 109, 193, 203, 204,
 205, 209, 214, 217, 240, 261, 271, 272, 273, 274,
 275, 276, 277, 281, 283, 289, 291, 292, 293, 294,
 295, 296, 297
 patriotism, 18, 94, 107
 patterning, 157
 pedagogy, 17
 peer, 9, 41, 79, 81, 84, 89
 peer group, 79, 81, 84, 89
 peers, 81, 83, 84, 85, 249
 Pennsylvania, 12, 44, 109
 perception, 50, 94, 108, 212
 perceptions, 75
 performers, 176, 216
 perinatal, 203
 permit, 206, 296
 personal communication, 36, 192, 248, 303, 309
 personal history, 261
 personal life, 107, 197
 personal relationship, 9, 151
 personality, ix, 36, 40, 174, 202, 214, 222, 226, 252,
 289, 290
 personality dimensions, 214

personality disorder, ix, 202
 Philadelphia, 12, 77, 157, 213, 242, 268, 305
 philosophers, 24
 philosophical, 17, 39, 296
 philosophy, 254, 272, 295
 phone, 87, 133, 139
 photographs, 1, 11, 37, 40, 42, 303, 304, 308
 physical abuse, 140, 213
 physical attractiveness, 57
 physical health, 197
 pilots, 301
 plagiarism, 222
 planning, 294
 plastic, 59, 60, 276, 294, 295, 296
 play, 9, 10, 35, 82, 83, 86, 113, 139, 140, 151, 152,
 153, 185, 191, 198, 222, 246, 251, 253
 pneumonia, 32, 123
 poison, 59, 134, 142, 191, 196, 207, 246, 254
 poisoning, 27, 57, 59, 137, 240
 poisonous, 2
 poisons, 70, 76, 224
 Poland, 40, 100, 254
 police, 7, 94, 125, 128, 132, 133, 138, 151, 170, 206,
 208, 247
 politicians, 24
 politics, 109
 poor, 29, 31, 66, 139, 154, 163, 185, 197, 201, 212,
 249, 266
 poor relationships, 249
 popular theatre, 29
 population, 51, 169, 170, 173, 174, 176, 177, 179,
 180, 183, 184, 185, 188, 204, 271, 303
 population size, 176
 pornography, 31, 33, 152
 positive relationship, 236
 post-traumatic stress, 67, 224
 potassium, 203
 poverty, 31, 51, 121, 212, 278
 power, 5, 20, 30, 66, 88, 104, 149, 160, 207, 212,
 235, 289, 295
 powers, 287
 PPD, 275
 precedents, 23
 predictability, 297
 prediction, 169, 228, 241
 predictor variables, 73, 74, 237
 predictors, 6, 7, 8, 52, 73, 74, 81, 108, 171, 182, 183,
 217, 219, 233, 238
 pre-existing, 169, 173, 215, 249
 preference, 27, 137, 141, 149, 251, 252, 266, 289
 pregnancy, 28, 99
 pregnant, 38, 89, 123, 131
 prejudice, 190, 198

premature death, 191
 pressure, 80, 87, 91, 139, 140, 142, 194, 223, 267
 prestige, 27
 prevention, ix, 1, 4, 11, 12, 30, 41, 61, 91, 123, 124, 213, 217, 226, 240, 241, 251, 268, 297, 298, 302
 prices, 71
 prisoners, ix
 private, 20, 26, 127, 129, 221, 222, 259, 273, 281
 probability, 51, 59, 71, 105, 267, 304
 probe, 132
 producers, 60, 75
 production, 185, 305
 productivity, 174, 202, 203
 professionalization, 175
 professions, 172, 184, 185, 215
 program, x
 projective test, 289
 prostitution, 11, 28, 208, 253
 protection, 278
 protective factors, ix, x, 4, 52
 prototype, 32
 pseudo, 86, 254
 psychache, 23, 43
 psyche, 273, 289, 292
 psychiatric disorder, 1, 173, 174, 185, 189, 192, 196, 198, 204, 209, 213, 226
 psychiatric disorders, 173, 174, 185, 192, 204, 209, 213, 226
 psychiatric hospitals, 154, 217
 psychiatric illness, 80, 81, 186, 264
 psychiatric morbidity, 7, 93, 99, 169, 173, 174, 175, 184, 185, 215, 217, 219, 225, 226, 227
 psychiatric patients, 19, 272
 psychiatrist, x, 71, 260, 272
 psychiatrists, 15, 113, 173, 272
 psychoanalysis, 43, 149, 151, 156, 157, 187, 188, 210
 psychoanalytic theories, 272
 psychological pain, 23, 259, 265
 psychological processes, 259
 psychologist, ix, x, 153, 281
 psychology, ix, x, 23, 149, 150, 152, 155, 249, 254, 296, 298
 psychopathology, x, 12, 35, 198, 204, 297
 psychopharmacological, 209
 psychosis, 36, 189, 203, 204, 210, 214
 psychotherapeutic, 35, 265, 284, 296
 psychotherapy, x, 259, 295, 296, 297, 298
 psychotic, 141, 197, 203, 204, 208, 261, 265, 266, 271, 272, 275, 277, 283, 286, 289, 294, 295, 297
 psychotic symptoms, 275
 public domain, 27
 public education, 41

public health, 236
 Public Health Service, 175, 176, 187, 188
 public interest, 30
 public opinion, 4, 96
 public safety, 102, 103
 public view, 254
 publishers, 172
 punishment, 7, 21, 22, 65, 96, 116, 126, 164, 208, 212, 274

Q

qualifications, 50, 51
 quality of life, 107, 108
 quantitative research, 233
 quantitative technique, 233
 Quebec, 242
 questionnaire, 240

R

race, 70, 120, 170, 171, 308
 radio, 238, 248, 249, 251, 303
 radio station, 248
 random, 135, 273
 range, 4, 44, 165, 179, 180, 275
 rape, 6, 23, 24, 44, 63, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 95, 99, 100, 118, 126, 140, 144, 154
 rapists, 72
 readership, 126
 reading, 8, 17, 82, 115, 132, 210, 212, 239, 261, 267, 284
 realist, 45
 reality, 33, 36, 44, 81, 132, 201, 207, 261, 262, 265, 266, 273, 275, 293
 rebelliousness, 81
 reception, 197
 recognition, 197, 206
 reconstruction, 70
 recovery, 203, 266
 recreation, 34
 reflection, 25, 39, 81, 212
 regression, 51, 59, 60, 68, 73, 74, 97, 106, 107, 115, 116, 181, 182, 187, 217, 219, 233, 236, 237, 241, 267, 272
 regression analysis, 51, 59, 68, 73, 74, 97, 106, 107, 181, 187, 219, 237, 241
 regular, 246, 296
 rehabilitation, 87, 223
 reincarnation, 280
 reinforcement, 165, 249

rejection, 8, 18, 80, 87, 91, 94, 95, 97, 114, 121, 122, 123, 138, 142, 154, 172, 185, 193, 197, 267, 286
 relapse, 203, 212, 266
 relationship, 18, 35, 37, 39, 40, 43, 51, 58, 75, 83, 85, 89, 90, 93, 115, 116, 138, 151, 152, 153, 154, 176, 186, 197, 210, 214, 221, 233, 236, 238, 241, 252, 264, 271, 272, 297
 relationships, 9, 40, 80, 81, 84, 88, 91, 98, 139, 171, 172, 175, 184, 197, 211, 221, 225, 249, 251, 264
 relatives, 72, 186, 189, 193, 195, 210, 296
 relevance, 266
 reliability, 187
 religion, 17, 31, 140, 254, 260
 religiosity, 205, 252
 remission, 295
 Renaissance, 18, 23, 24, 26, 45, 141
 repair, 174, 187, 269
 replication, 240
 repo, 40
 repression, 80
 reproduction, 15
 Republican, 18
 reputation, 64, 245
 research reviews, 233
 resentment, 153, 212
 reserves, 138
 resolution, 127, 143, 306
 resources, 154, 194, 212, 301
 restaurant, 10, 34, 85, 246
 restitution, 126
 retribution, 29, 31, 126, 127, 202
 returns, 98, 138, 151, 172
 revolutionaries, 18, 150
 rewards, 171, 190
 Reynolds, 24, 259, 268
 rhetoric, 262
 Rhode Island, 175
 rhythm, 261, 262, 263, 265
 rigidity, 273
 risk, ix, x, 2, 4, 6, 8, 9, 10, 17, 27, 35, 49, 51, 52, 53, 57, 61, 63, 77, 80, 81, 87, 100, 109, 141, 159, 169, 170, 171, 173, 174, 175, 176, 177, 179, 180, 181, 182, 183, 184, 185, 186, 187, 189, 192, 203, 204, 209, 213, 214, 215, 219, 222, 223, 227, 239, 242, 249, 250, 251, 303
 risk assessment, ix
 risk behaviors, 77
 risk factors, 4, 80, 81, 169, 174, 215, 223, 227, 249
 risks, 91, 193
 robbery, 103
 rocky, 104
 romantic relationship, 39
 Rome, 2, 20, 26, 63, 65, 66, 74, 141, 246, 305

royalty, 140
 rural, 52, 95, 101, 223
 Russia, 142, 144, 305
 Russian, 30, 46, 107, 125, 239, 254

S

sacred, 26
 sadness, 19, 81, 86, 203, 206, 212, 274, 275, 293
 safety, 70, 102, 103, 140, 267
 sales, 8, 172
 saliva, 35
 sample, 9, 11, 51, 67, 78, 113, 114, 116, 131, 132, 134, 135, 137, 138, 169, 174, 175, 184, 185, 192, 233, 275, 294, 295, 303
 satisfaction, 126, 289
 scandal, 120, 132, 134
 scandalous, 208
 Scandinavia, 156
 scarcity, 20
 schizophrenia, 88, 157, 196, 203, 210, 217, 223, 265, 271, 275, 281, 296, 297, 298
 schizophrenic patients, 271, 272, 273, 274, 275, 276, 277, 293, 294, 297
 school, 47, 61, 67, 81, 82, 83, 84, 85, 89, 90, 91, 118, 131, 132, 150, 154, 187, 239, 249, 251, 259, 277, 281, 283, 284, 301
 school performance, 81
 schooling, 272
 scientific knowledge, 226
 scores, 193
 scripts, 58, 60, 61, 94
 search, 38, 44, 58, 67, 95, 236, 239, 248, 303, 304, 305, 307, 308
 search engine, 239, 303, 304, 305, 307, 308
 searching, 82, 99, 202, 284
 Seattle, 77, 251, 305
 Second World War, 248, 249
 secret, 134, 201, 206, 222
 secular, 21, 23
 secularization, 22
 sedatives, 260
 sedentary, 133
 seizures, 203, 204, 205, 206, 214
 self, 21, 23, 30, 36, 37, 42, 44, 53, 122, 187, 203, 274
 self-confidence, 194, 197
 self-destruction, 155
 self-destructive behavior, 43, 159, 165
 self-doubt, 194, 212
 self-employed, 172
 self-esteem, 79, 80, 140, 142
 self-expression, 268, 276

-
- self-image, 80, 151, 154, 249
self-mutilation, 16, 205, 208, 213
self-observation, 41
self-repair, 269
seller, 246
semantic, 17
sensitivity, 66, 74, 193
sentences, 162, 263
sentencing, 164
separation, 80, 89, 191, 195
September 11, 30, 133
severity, 174, 267
sex, 70, 71, 72, 76, 77, 84, 90, 134, 141, 142, 251
sexism, 198
sexual identity, 79, 285
sexuality, 150
sexually abused, 85
shame, 8, 67, 90, 118, 119, 128, 138, 152, 162, 165, 212, 222
shape, 251, 263, 267
shaping, 251
shares, 79, 268
sheep, 50, 130, 213
shelter, 79
shock, 19
shoot, 33, 39, 107, 131
short-term, 9, 172, 221
shoulder, 22
sibling, 80, 198
siblings, 191, 193, 195
sign, 38, 90, 99, 152, 239
signals, 84
signs, 87, 197, 202, 275, 284, 293, 294
silk, 262
silver, 22, 94, 161
similarity, 272
sites, 11, 58, 303, 304, 308
skeleton, 28
skills, 11, 41, 156, 216
skin, 35, 262
Skinner, B. F., 157
slavery, 31
slaves, 27, 70
sleep, 37, 84
sleeping pills, 71, 261
smiles, 28, 89
smoke, 10, 210, 238
smoking, 9, 12, 28, 84, 93, 238, 265
snakes, 2
social activities, 82
social change, 79
social class, 27, 31
social construct, 187, 215
social context, 6, 70
social environment, 255
social factors, 1, 227
social integration, 96, 109, 187, 235
social isolation, 171
social learning, 6
social network, 58
social norms, 80
social order, 80
social relationships, 81
social sciences, 215
social status, 27, 64, 66
social support, ix, 79, 85, 90, 91, 223
socialist, 31
socialization, 6, 57, 58, 60, 96, 272
socioeconomic background, 277
socioeconomic status, 209
sociological, 52, 53, 109, 124, 169, 175, 185, 187, 233, 242, 249, 252
sociology, 172, 184, 249, 252
sociopath, 84
Socrates, 18, 20, 24, 38
soil, 160
solitude, 212, 227
sounds, 262, 263
South Africa, 210
South America, 16
South Carolina, 175
South Pacific, 100
space shuttle, 107
Spain, 151, 305
speculation, 33, 139, 208, 247
speech, 50, 206, 265
spirituality, 43, 187, 290
sponsor, 33
spontaneity, 272
spouse, 76, 96, 220, 226
St. Petersburg, 305
stability, 191, 260, 263, 268, 281
stages, x, 68, 107
standard error, 51, 59, 182, 237
standards, 29, 140, 207, 262
stars, 9, 93, 94, 103, 220, 221, 238, 302, 309
statistics, 80, 132, 133, 175
steel, 188
stereotype, 29, 30
stereotypical, 282, 284, 296
stigma, 19, 75
stigmatization, 22
stigmatized, 5, 18, 27, 141
stillbirth, 37
stock, 31, 164, 206
stock exchange, 31

- stomach, 7, 93, 95, 98, 102, 103, 126, 263
 strain, 1, 6, 7, 49, 50, 51, 52, 53, 67, 93, 95, 96, 97, 101, 108, 109, 116, 119, 120, 121, 122, 169, 170, 172, 173, 175, 215, 216, 217, 219, 221, 223, 226
 strains, 114, 184, 185, 186, 221, 225
 strategies, 155, 251
 strength, 24, 60, 152, 176, 207, 289
 stress, 67, 74, 79, 90, 122, 154, 155, 169, 172, 185, 197, 222, 223, 224, 227, 295, 308
 stressors, 267
 structuring, 264, 266
 students, 82, 89, 113, 150, 197, 239, 251
 stupor, 221
 subgroups, 9, 184, 215
 subjective, 233
 subsidization, 186
 substance abuse, 1, 7, 51, 97, 105, 121, 173, 174, 185, 192, 196, 215, 217, 219, 220, 221, 224, 226, 227
 Sudan, 179
 suffering, 8, 20, 21, 23, 25, 37, 103, 165, 179, 185, 197, 202, 204, 205, 207, 208, 209, 211, 214, 224, 263, 264, 281, 293
 suicidal, 1, 2, 4, 8, 9, 10, 11, 23, 25, 26, 28, 33, 35, 36, 41, 51, 53, 60, 76, 77, 78, 80, 81, 85, 86, 88, 94, 95, 99, 102, 108, 109, 124, 137, 139, 140, 141, 149, 153, 154, 155, 159, 160, 165, 173, 189, 190, 192, 195, 197, 201, 204, 209, 214, 235, 239, 240, 241, 242, 245, 249, 250, 251, 252, 259, 265, 266, 267, 268, 272, 274, 275, 276, 277, 302, 303, 304, 307
 suicidal behavior, ix, 4, 8, 10, 78, 80, 95, 141, 153, 154, 159, 165, 189, 192, 235, 239, 240, 241, 242, 249, 307
 suicidal ideation, ix, 51, 77, 80, 81, 109, 251, 272, 274, 276, 277
 suicide attempters, 61
 suicide attempts, 36, 39, 85, 95, 97, 173, 198, 204, 209, 216, 234, 236, 237, 238, 242, 260, 286, 295
 suicide bombers, 5, 34, 94
 suicide gene, 309
 suicide rate, 4, 9, 51, 57, 60, 61, 80, 81, 170, 172, 173, 176, 180, 187, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 243, 248, 249, 251, 252, 271, 304
 summaries, 67, 97, 115, 142, 217, 233, 305, 307
 summer, 40
 Sun, 217, 251, 307
 Sunday, viii, 10, 206, 245, 246, 247, 248, 250, 251, 252
 superego, 151, 160
 superimposition, 28
 superstitious, 101
 supervision, 296
 supervisor, 70
 supervisors, 171
 supplemental, 6, 9, 221
 supply, 100, 104, 172
 suppression, 204
 surgeries, 7
 surgery, 202
 surprise, 63
 surviving, 22, 24, 49, 50, 69, 70, 191, 195
 survivors, 17, 66, 67, 68, 70, 71, 72, 73, 74, 75, 132
 suspects, 126
 swallowing, 210
 Sweden, 5, 34, 154
 symbolic, 42, 276, 277, 279, 281, 282, 286, 290, 292
 symbols, 30, 210, 249, 272, 273, 274, 276, 281, 285, 289, 294, 295
 sympathetic, 213
 sympathy, 19, 126
 symptoms, 67, 196, 201, 203, 204, 261, 272, 275, 276, 277, 289, 293, 296, 297
 syndrome, 85, 224, 297
 synthesis, 296
 syphilis, 120, 202

T

- Taiwan, 231
 talent, 186, 221, 284
 tanks, 282
 tar, 71
 taxonomy, 113, 242
 teachers, 81, 82, 86, 91, 171, 283
 teaching, 4
 teenagers, 249
 teeth, 35
 telephone, 84, 139
 television, 10, 33, 59, 60, 67, 83, 97, 216, 223, 231, 232, 234, 236, 238, 240, 241, 242
 temperament, 35, 42, 153, 204, 213
 temporal, 203
 Tennessee, 123
 tension, 20, 127
 terminal illness, 127
 terminally ill, 234
 terrorists, 109
 test scores, 193
 test statistic, 177
 Texas, 71, 72, 76, 308
 textbooks, 150
 textile, 174
 therapeutic process, 276, 277
 therapists, 87, 260, 263, 264, 272

therapy, x, 1, 11, 86, 157, 209, 213, 259, 261, 264, 268, 277, 295, 297
 thinking, 38, 77, 152, 160, 202, 264, 265, 272, 274
 third party, 139
 threat, 33, 39, 64, 102, 163
 threatened, 39, 64, 141, 205, 210, 212
 threatening, 102
 threats, 79, 91, 150, 284
 throat, 29, 40
 time frame, 177
 time periods, 134
 time series, 241
 title, 29, 254, 305
 tobacco, 211
 tonic, 214
 totalitarian, 35
 tourist, 29, 72, 75
 tradition, 44, 87, 151, 159
 training, x, 172, 272, 277, 284
 traits, 150, 160, 203
 transgression, 6
 transition, 2, 79
 transportation, 174
 trauma, 8, 24, 26, 39, 68, 173, 289, 293, 294
 traumatic events, 5
 travel, 104, 306, 308
 treason, 139
 trees, 21, 210, 274, 281, 284, 289, 294
 trial, 156
 trust, 126
 trusts, 102
 tuberculosis, 39, 40
 Turkey, x
 typology, 141

V

vacuum, 209
 validation, 52
 validity, 252
 values, 7, 18, 27, 50, 52, 79, 93, 94, 152, 249
 variability, 184, 186
 variables, 51, 52, 59, 73, 74, 115, 169, 170, 175, 176, 177, 182, 183, 184, 233, 236, 237, 308
 variance, 59, 182, 183, 238
 variation, 57, 93, 94, 108, 145, 175, 184, 185, 304
 vegetative state, 224
 vehicles, 303
 vein, 23
 venue, 3, 8, 75, 220
 Venus, 77
 Vermont, 175
 veterans, 108
 victimization, 6, 28, 67, 77
 victims, ix, 8, 19, 31, 38, 60, 72, 73, 74, 126, 132, 133, 154, 250
 Victoria, 43
 Vietnamese, 95, 99
 village, 128, 144, 201
 violence, 19, 26, 31, 33, 34, 81, 128, 214
 violent, 31, 57, 59, 160, 197, 205, 240
 violent crime, 240
 virtual reality, 132
 virus, 224
 visible, 34, 43
 vision, 21, 26, 38, 80
 visual images, 20, 41, 276
 visualization, 261
 voice, x, 35, 263

U

underemployment, 51
 undergraduates, 197
 unemployment, 51, 114, 185, 235, 249
 unemployment rate, 235
 unhappiness, 19, 213
 United Kingdom, 245
 United States, x, 4, 6, 9, 34, 35, 49, 67, 134, 138, 175, 222, 248, 266, 274, 304
 urban areas, 239
 urban centres, 16
 urinary, 90
 Utah, 128, 175

W

wage rate, 172
 waking, 152
 Wales, 186
 walking, 210
 war, 44, 46, 63, 70, 94, 96, 97, 100, 108, 162, 242, 282, 286
 warfare, 142
 watches, 239
 water, 25, 29, 32, 34, 39, 95, 103, 104, 208
 weakness, 27, 28, 60, 152, 207, 289
 wealth, 15, 16, 262
 weapons, 134, 135
 wear, 263
 web, 11, 58, 67, 95, 97, 115, 216, 239, 303, 304, 305, 307, 308

-
- web pages, 11, 304, 305, 307
 - web sites, 11, 58, 303, 308
 - web-based, 67, 115, 239, 307
 - webpages, 114
 - websites, x, 58, 308
 - weeping, 44
 - well-being, 139
 - wells, 308
 - West Bank, 34
 - Western culture, 43, 77, 302
 - wheat, 206, 210
 - White House, 206
 - wilderness, 122
 - wind, 133
 - wine, 211
 - winning, 173
 - winter, 274
 - Wisconsin, 175
 - wisdom, 23, 38
 - withdrawal, 81, 90, 285
 - witnesses, 87
 - wives, 40, 63
 - women, 6, 8, 9, 17, 24, 27, 28, 29, 30, 31, 40, 43, 44, 51, 57, 58, 59, 60, 61, 63, 66, 73, 75, 77, 78, 86, 116, 134, 137, 138, 139, 142, 150, 151, 156, 170, 173, 187, 189, 190, 191, 192, 194, 195, 196, 197, 198, 199, 210, 211, 223, 253, 254, 255, 262, 277, 284, 289
 - wood, 1, 29, 31, 100, 284
 - woods, 70
 - wool, 64
 - workers, 31, 140, 171, 173, 174, 176, 187
 - working class, 31
 - World Health Organization, 4, 12, 302, 309
 - World War, 33, 94, 268, 301
 - worm, 26
 - worms, 266
 - worry, 274
 - wrists, 72, 89, 133, 196
 - writing, ix, x, 11, 65, 132, 138, 152, 189, 190, 193, 197, 207, 216, 259, 260, 262, 263, 264, 266, 267, 284
- Y**
- yield, 308
 - young men, 28
 - young women, 255