

# Suicidal Masculinities

by Jonathan Scourfield  
Cardiff University

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## Abstract

Across the West, suicide rates in young men have been rising for some time. This trend has attracted considerable media attention and is often cited within media discourse as evidence of a 'crisis of masculinity'. The field of suicide research (or suicidology) is dominated by quantitative methodology, and although there has been research attention to the gendered character of suicidal behaviour, studies tend to compare 'men' as a group with 'women' as a group. There is also relatively little consideration within this literature of power relations and the social-political dimension of masculinities. This paper argues the case for a qualitative sociological approach to the study of gendered suicide and begins to outline a framework for understanding the diversity of suicidal masculinities. Connell's theoretical work on masculinities is used to analyse evidence from the suicidology literature. The framework includes consideration of when hegemonic masculinity fails; the subordinated masculinities of gay sexuality and mental illness; and control in intimate relationships.

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**Keywords:** *Suicide, Masculinity, Men, Gender, Crisis, Hegemonic, Subordinated, Mental Health, Autopsy, Qualitative*

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## Introduction

**1.1** It is often argued that many men are not coping with the consequences of changes in the gender order, such as shifting patterns of work and relationships. The 'social facts' (to use Durkheim's phrase [1952]) that are arguably most crucial to these claims that we have a 'crisis of masculinity' in the West are the changing suicide rates. Between 1950 and 1998, suicide rates in England and Wales doubled in males under 45, whilst rates for older men and women of all ages declined (Gunnell et al., 2003). When the English Department of Health published its suicide prevention strategy in 2002, it declared that suicide had become the most common cause of death in men under 35 in England (Department of Health, 2002). In fact the most recent figures show suicide rates in young men to be decreasing since 1998, although the gender gap in suicide rates is still largest in the 20-29 age group (NIMHE, 2005). There is considerable ongoing media interest in this gendered pattern in suicide rates, most likely because they are generally interpreted within the mainstream media as supporting the dominant narrative of gender crisis (Coyle and Morgan-Sykes, 1998).

**1.2** A classic account of this idea of masculinity in crisis can be found in Susan Faludi's book *Stiffed: The Betrayal of the Modern Man* (1999). The idea here is that working class men in particular are unsure how to respond to a changing world. They are confused by a mismatch between expectations of masculine privilege on one hand and a changing economy and social gains for women on the other. Faludi emphasises the effects on working class men in the United States of the demise in manual work. As Robinson (2000) has observed, the crisis of masculinity discourse is in fact specific to white men, though this is rarely made explicit. She notes that white men have historically represented unmarked normativity, but have more recently become 'marked' as a class, in the wake of liberation movements and identity politics since the 1960s and subsequent scholarly and popular accounts which have proclaimed masculinity to be in crisis.

**1.3** It should be noted that the idea of masculinity being in crisis is a controversial one. Kimmel (1987) has observed, with reference to historical research, that anxiety over the roles of men is not necessarily a new phenomenon. Many commentators have argued that this talk of a crisis of masculinity masks the retrenchment of some traditional aspects of hegemonic masculinity and overstates the extent of social change. The very focus on suicide rates masks the fact that suicidal thoughts, deliberate self-harm and suicide attempts are all higher in women than men (Kerkhof, 2000; Schaffer et al., 2000). These contrasting

trends have been called the 'gender paradox in suicide' (Canetto and Sakinofsky, 1998). It is possible to argue that the gendered suicide rates reveal more about gendered methods for self-harm (e.g. familiarity with weapons is a major issue in some countries) than about actual levels of distress in men and women.

**1.4** This paper is concerned with understanding gendered suicide. It does not primarily rely on original empirical research (although brief references are made to an ongoing pilot study) but rather is based in a critical review of the existing literature. The aims of this review are to identify gaps in knowledge and suggest some possible ways forward for developing a more sophisticated sociological perspective on men's suicides that takes into account both the diversity of masculinities and social relations of power. The intention is to set out an agenda for future research. The paper is largely about suicide in the West. When the global picture is considered, there is significant spatial and cultural variation in suicide rates and understandings of suicide (see, for example, Cheng and Lee, 2000). Detailed consideration of these is beyond the scope of the paper.

**1.5** There is an impressive body of existing quantitative research on the social context of gendered suicide within the field of 'suicidology'. Some of this research is done within sociology departments, but more often it is carried out within schools of epidemiology, psychiatry or psychology. Typically, these papers are methodologically sophisticated, dealing with large data sets and analysing associations between suicide rates and social factors such as rates of divorce, social fragmentation and relative poverty (see, for example, Crawford and Prince, 1999; Whitley et al., 1999; Barber, 2001; Gunnell et al., 2003). These studies tend to compare 'men' with 'women' as sex groups, perhaps alongside a consideration of social class, rather than further breaking down these categories. Compared with qualitative research on suicide, these kinds of statistical studies are easier to conduct in terms of access to data and are also ethically more straightforward because they are less intrusive. Stack (2000) provides a useful summary of sociological research on differences between the sexes that have implications for the differential suicide rates (see table 1).

**Table 1** . Summary of sociological research on gendered behaviour with implications for suicide rates

- More men than women abuse alcohol
- The religiosity level of women is significantly higher than that of men
- Women have stronger negative attitudes towards the acceptability of completed suicide but more positive attitudes towards suicide attempts.
- Women have more flexible coping skills than men. This has been explained in terms of women having a greater number of role changes than men in the life course.
- Women are apt to recognise and less apt to deny the warning signs of suicide such as depression than are men.
- Women are more likely to seek professional help.
- Women have more extensive social support systems to draw on when in crises than men.
- Some aspects of the dominant model of masculinity increase risk of lethal suicidality, including competitiveness, impulsiveness-decisiveness, and being 'strong'.
- Historically, women have had less access to lethal technology such as firearms.
- Failure in the primary adult male role (economic success) is more visible and obvious than failure in the primary female role (success in relationships). Men are more apt to feel like failures in their primary role and, hence, more likely to kill themselves.

*This is a tabular summary of the overview in Stack (2000).*

**1.6** Stack's summary does not refer heavily to economic factors. The research by Hawton et al. (2001) goes beyond raw suicide rates to consider the ecological context of individuals who have killed themselves. They found a significant association between area-based deprivation and suicide in men (though not in women). Two studies (Barber, 2001; Fernquist, 2003) have also found associations between perceived inequality and suicide in men.

**1.7** Although there is an impressive body of research here, there are also gaps in terms of quantitative studies relating to men and suicide. For example, very little is known about the impact of health promotion initiatives on men specifically (Harden et al. 2002). A gap that is bigger still is the relative dearth of qualitative research on gender and suicide. It is not the case that no-one is using a qualitative approach to the study of gendered suicide. The psychologist Sylvia Sara Canetto (for example, Canetto, 1995; Canetto and Sakinofsky, 1998) uses both qualitative and quantitative evidence to focus on gendered cultural scripts in relation to suicide. Canetto tends to focus on commonality within sex groups, however, rather than on diversity, by again contrasting men as a group with women as a group. Recently, Cutcliffe (2003) has argued the case for hermeneutic, phenomenological investigations with people who have attempted suicide.

In the 1970s, one of the most powerful critiques of positivist Durkheimian approaches to suicide was the qualitative research by Atkinson (1978), which provided an insight into the common sense judgements made by coroners: judgements on which the official suicide rates used by Durkheim depend. My focus is different from Atkinson's classic study, however. Atkinson concludes (pp.173ff.) that any research other than ethnomethodological deconstruction of official disposals is pretty worthless. He may have an epistemological case, up to a point, but to my mind this is sociological self-indulgence. Despite the enormous methodological challenges of researching dead people, I would argue that we have to attempt to get as close as we can to the stories of those who have killed themselves, in order to understand them and to inform prevention strategies.

**1.8** The main arguments in this paper about the limitations of existing published research are twofold. The first is that the dominant approach is to compare men with women, as though these two population groups were homogenous, and there is little consideration of the diversity of masculinities and femininities. Up to a point, different social categories within the sex group of 'men' can be disaggregated within quantitative analysis. We already know, for example, that suicide is increasing at a greater rate in younger men (Gunnell et al, 2003) and that levels of suicidal thoughts are higher in gay and bisexual men (Fergusson et al. 1999). There is, however, in addition to research on suicide rates and suicidal ideation, a need for sociological research on individual suicides and in particular qualitative research that can explore data on individual biographies and the narratives of surviving relatives and friends. The second limitation of existing research on suicide in men is that there is little consideration in most of the quantitative research of the social-political dimension of masculinities and power. This paper aims to begin the process of understanding the diversity of suicidal masculinities within the context of some contemporary sociological theories of gender.

**1.9** There are further limitations of current debates. There is a tendency across policy debates about men and social problems for a political polarisation where men are either regarded purely as victims or purely as perpetrators (to use a criminal justice metaphor). Men's suicide tends to be discussed in the policy arena only in terms of men as social victims, although in fact a minority of men kill themselves to punish others - very often women partners. There are also assumptions in some of the medical and psychological research that the gender gap in suicide is all about natural differences between men and women. We need to understand these masculinities within the context of a social gender order that has historically been structured to maintain men's dominance, but that can also have negative consequences for men's mental health. What follows is a tentative and initial attempt to devise some kind of theoretical schema for understanding the diversity of suicidal masculinities. The discussion draws on some of the existing quantitative studies of suicide and Connell's (1995, 2000) theoretical framework for understanding masculinities. An in-depth discussion of the strengths and weaknesses of Connell's arguments would warrant a paper in its own right. Some specific ideas of Connell's are summarised in the sub-sections below, but at this point the aim is simply to introduce Connell's ideas and some recent criticisms of his work.

## **Connell on Masculinities**

**2.1** Few would dispute that Connell is currently the most influential sociologist researching and publishing on masculinity. His ideas, and particularly the concept of hegemonic masculinity, are very heavily cited. As Whitehead (2002: 89) notes, the influence of this concept 'on the sociology of masculinity, and critical gender research generally, cannot be overstated'. As with many prominent theorists, there is, however, a tendency for other authors to pick up from his work a somewhat selective and limited range of ideas.

**2.2** Connell does not shy away from careful use of the concept of patriarchy. He is clear that even men who oppose patriarchal beliefs and practices can gain certain social privileges simply by virtue of being men. This is the 'patriarchal dividend'. His is not a crude, monolithic version of patriarchy. He insists on the post-structuralist plurality of the term 'masculinities'. So there are multiple possible ways of being a man, and men's practices vary according to culture, class, ethnicity, sexuality and other mediating factors. Becoming a man is not a passive process of socialisation, but an active construction of an identity. Identities and practices are not freely acquired, however, but there are social structural constraints, and power relations are crucial. Gendered discursive practices configure into a hierarchy. So, for example, compulsory heterosexuality is an important aspect of 'hegemonic masculinity' and gay men therefore represent a form of 'subordinated masculinity'. What distinguishes Connell's from other sophisticated sociologies of gender is that he also appreciates the importance of a psychic dimension. He incorporates an understanding of subjectivity by including existential psychoanalysis in his framework for understanding gender relations.

**2.3** Although his work is undoubtedly influential, it has also not gone unchallenged. There have been several critiques of Connell in the last decade. Two recent examples are those of Jefferson (2002) and Whitehead (2002). These critiques are perhaps particularly relevant to the inevitably psycho-social topic of suicide, as both dispute Connell's theorising of men's subjectivities.

**2.4** Amongst other things, Jefferson argues that Connell underestimates the extent of crisis in contemporary masculinity and that a more psychologically complex theory of masculinity is needed; one which incorporates an appreciation of fantasy as well as the social. As he argues in a response to Jefferson, Connell (2002) has a different reading of the evidence on contemporary masculinities and puts more emphasis on men's continued social dominance on a global level than Jefferson does. In fact, as I go on to argue in this paper, Connell's work can be seen to be relevant to an understanding of individual and collective masculine crises. He does accept that 'crisis tendencies' can be seen in Western masculinities (Connell, 1995) but admittedly puts less emphasis on these than does Jefferson. One important reason for this difference in emphasis is the role of corporate masculinity in economic and cultural globalisation (Connell, 2000). Connell has in fact always asserted the need for a psychological dimension. In his 1995 text *Masculinities* he makes reference to existential psychoanalysis as an essential element of a rounded social scientific theory of men. It is admittedly the case that psychoanalytical ideas are not as well developed in his work as sociological ideas are. This emphasis appears to reflect his disciplinary background.

**2.5** Whitehead (2002) sees hegemony as a slippery concept that claims to bridge the structure-agency dichotomy but lacks an adequate analysis of the subject. He argues that although hegemonic masculinity offers a more nuanced interpretation of male dominance than patriarchy, the concept 'ultimately suffers from the same deficits' (p.92) and is 'as reductionist a term as patriarchy' (p.93). According to Whitehead, the 'primary underpinning' of the idea of hegemonic masculinity is 'the notion of a fixed (male) structure' (p.94). But Connell (2002) in fact sees hegemony not as fixed but as historically concrete and he insists that 'like class relations, gender relations change historically, and the pattern and depth of hegemony changes also' (p.89). 'Hegemony in gender relations can be contested and may break down' (Connell, 2002: 89).

**2.6** Whitehead also argues that just what hegemonic masculinity is, 'when only a minority of men express it or perform to its pattern..... is never illuminated' (93). Connell is clear that hegemonic masculinity refers to 'the circulation of models of admired masculine conduct' (Connell, 2002: 90). These 'exemplary masculinities' do not 'correspond closely to the lives of the majority of men' but they express 'ideals, fantasies and desires, provide models of relations with women and solutions to gender problems' (p.90). I mention some aspects of hegemonic masculinity that are relevant to suicide in the next sub-section of the paper.

**2.7** Recognising that Connell does not have the last word on masculinity, and that there is a need to build on his work psychologically, as Jefferson attempts to do, I maintain that Connell's theoretical framework is extremely useful. It acknowledges both structural relations of power and the multiplicity of gendered identities and gendered practices, and also recognises the importance of a psychic dimension. As Connell (2002: 90) has argued in defence of the concept of hegemonic masculinity, although it has at times been misunderstood or employed inappropriately, 'the fact that the concept has been widely used suggests that it meets a need'.

## **When Hegemonic Masculinity Fails**

**3.1** New has recently argued that 'the very practices which construct men's capacity to oppress women and interest in doing so, work by systematically harming men' (New, 2001: 730). Whether or not they systematically harm men (a more controversial claim), the discursive practices that Connell groups under the heading of 'hegemonic masculinity' are associated with some suicide in men. As Connell (2000, p.184) puts it, 'some masculinizing practices damage bodies'. Hegemonic masculinity is constituted by the configuration of discursive practices that are culturally authoritative in a given context and men's relationship to hegemonic masculinity is 'often fraught, the enactment partial, contested and capable of shifting into violence' (Connell, 2002: 94). I will mention some aspects of hegemonic masculinity in the West that have explanatory potential in relation to suicide.

### **Loss of honour**

**3.2** I refer here to the loss of the status and regard associated with hegemonic masculinity. One domain where loss of honour occurs is in relation to work. The breadwinner ethic is still strong, at least in the UK, despite shifting ideas about fatherhood: there is still a strong association between work and masculinity. Occupational problems seem to be a major factor in men's suicides in the West. As the systematic review by Platt and Hawton (2000) reveals, it is fairly clear that unemployment is linked to suicide risk in men. More generally, there are indications from several studies that social comparison is an issue for men. Barber's (2001) analysis of mental health in seven countries shows that young men's suicide does not support a connection between suicide and 'absolute misery'. Indeed, higher rates of male suicide were associated with higher levels of psychological adjustment amongst the general adolescent population. Barber's interpretation is that men tend to make social comparisons with the situations of others by

perceiving themselves to be not as happy as their peers. He proposes a 'relative misery' hypothesis where suicidality is related to upward social comparison which requires a level of psychological maladjustment and the perception that one is worse off than one's peers. This fits to some extent with Crawford and Prince's (1999) research showing that there is greater pressure placed on men who are still out of work when general employment levels are improving.

**3.3** These studies suggest perhaps the essentially competitive character of hegemonic masculinity. It is not only important to be successful in culturally approved ways, but also to see oneself as successful in relation to others. There are indications from a pilot study I have recently undertaken that not communicating to others the reality of 'failure' in terms of expected masculine achievements, and the pressures of the accompanying deceit, can lead to suicide. This pilot study is an analysis of 20 randomly-selected case files on suicides and open verdicts from the early 2000s in a Welsh coroners' office. Within this very small sample there have already been three cases where problems such as a failed business and failing at university have been kept from family members, sometimes for many years, prior to suicide.

**3.4** In using the phrase 'when hegemonic masculinity fails', I mean the failure of the 'patriarchal dividend' (Connell, 1995, 2000) to deliver as promised. There are connections here with Connell's concept of marginalised masculinities. He defines these as:

gender forms produced in exploited or oppressed groups, such as ethnic minorities, which may share many features with hegemonic masculinity but are socially de-authorised.  
(Connell, 2000, pp.30-31)

**3.5** But the gap between aspiration and reality in suicidal men becomes absolutely overt and recognised, rather than submerged or socially embedded. What happens here, to put it very crudely, is that life is not seen as worth living without masculine privileges. In considering masculine honour, it should be noted that there is also a potential connection between loss of honour and relationship breakdown. However, I deal with relationships primarily under the heading 'controlling others' below, so will not do so here.

### **Emotional illiteracy**

**3.6** Another aspect of hegemonic masculinity which can be related to suicidal behaviour is emotional illiteracy: the limited emotional repertoires that many men develop, which can lead to a failure to cope with a range of challenges, such as, for example, relationship breakdown. Objective rationality, unclouded by a complicating emotional dimension, has been associated with dominant ideas about masculinity since the Enlightenment (Seidler, 1994) and limited emotional repertoires are learned because they facilitate social dominance. Emotional distance enables men to stay focused on achievement in the public sphere. It allows competition to thrive. When we consider mental and emotional well-being, not only can having a limited emotional repertoire cause problems in relationships with others (and not just intimate others), but it also has the potential to cause profound tensions when situations arise that provoke emotional reactions that have not previously been encountered.

### **Subordinated Masculinities**

**4.1** Connell argues that it is crucial to consider power relations between men as well as between men and women. Hegemonic masculinity has its Other in subordinated masculinity. In the context of suicide, I refer here to two aspects of subordination in the gender order: gay masculinity and mental illness.

### **Gay and bisexual men**

**4.2** It is very difficult to know how many men who kill themselves are gay or bisexual, because we cannot expect same-sex relationships necessarily to be made public. However, some epidemiologists have found markedly higher levels of suicidal ideation in the gay and bisexual population than the heterosexual population (see, for example, Remafedi et al., 1998; Fergusson, 1999). Harwood and Rasmussen (2004) have cautioned against the alarmist tone of some associations of gay sexuality and suicide, arguing that this debate de-emphasises the pleasure experienced by gay youth. Whilst there is indeed potential for the insensitive handling of gay suicidality to become pathologising, I would argue that this issue should be taken seriously as a mental health problem, and that the elevated risk for gay and bisexual youth needs to be understood in the context of victimisation and psychological pressure in what is still arguably a context of compulsory heterosexuality for men.

### **Mentally ill men**

**4.3** If we take Foucault's (1967) conceptualisation of mental illness as all about the regulation of rationality,

and apply this more broadly to include 'newer' disorders, such as depression (as does Busfield [1996]), then diagnosed mental illness in men can be understood as subordinated masculinity, where rationality is hegemonic (Seidler, 1994). A large proportion of men's suicides in fact come from the psychiatric patient population. The English Department of Health's *National Confidential Inquiry into Suicide and Homicide by People with Mental Illness* (Department of Health, 2001) reported that approximately one quarter of people who killed themselves in the UK had been in contact with mental health services in the year before death. The inquiry found suicides to be clustered in the first year after the onset of illness, which serves to reinforce the association between suicidal behaviour and mental illness.

## **Controlling Others**

**4.4** A very small minority of men who kill themselves do so after they have killed others, and there is also the phenomenon of suicide being used to threaten and punish in the context of relationship breakdown. To consider first the issue of murder-suicide, Barraclough and Harris (2002) suggest that less than around 0.01% of male suicides in England and Wales are preceded by murders. Whilst this might be thought to be much too small a proportion to warrant serious consideration, these offences are culturally powerful, as they tend to attract considerable media coverage, especially when children are killed. They also constitute a much higher proportion of all homicides. As Carcach and Grabosky's (1998) review shows, the proportions of murder-suicides found in studies in various countries have ranged enormously, from just 1.6% of all homicides to just under a third. There is, however, a consensus that a large majority of offenders are men.

**4.5** Barnes (2000) studied 188 murder-suicides in four states of Australia spread over a period of 20 years, and argues that the motivations of men and women who commit murder and then kill themselves are qualitatively different. The most typical scenario is a man killing a woman partner and often also their children. The number of victims of these offences is higher than for homicides in general. Polk (1994), who found around 10% of homicides by men to be accompanied by suicide in his study in Victoria, characterises two main types. The first category is jealousy killings, which are primarily homicides, and the second category is depression plus control, where suicide is the primary aim but a woman partner is taken along as the man's possession.

**4.6** Milroy (1995) notes that the proportion of murder-suicides is higher in countries with a higher homicide rate, which are usually also countries where the rate of homicides with firearms is high. Australian statistics (Carcach and Grabosky, 1998) indicate a higher degree of conscious control in these incidents than in other homicides, as murder-suicide perpetrators are significantly less likely to be under the influence of alcohol than perpetrators of other homicides.

**4.7** Apart from murder-suicides, which are a very small proportion of suicides, the other issue where control of others is central is the cases of men who kill themselves primarily as a punishment for someone else, more often than not a woman partner. There is evidence to suggest that violent men commonly use suicide threats and attempts in the context of divorce and custody battles (Conner et al. 2002). This would tend to suggest that a proportion of all suicides might happen in a similar context. It seems, however, that this issue of suicide as punishment is under-researched. There is general agreement from the quantitative research on suicide that men are more brittle to relationship breakdown than are women. The message of feminist research on domestic violence is that this extreme coercion has to be understood in the context of a broader culture of men expecting to control women in relationships (Dobash et al., 2000). It may be that some suicides following relationship breakdown should be understood in this context. The suicidal act may not be directly intended to itself have a controlling impact on an ex-partner, but the loss of control (and loss of honour) that comes with the end of the relationship may be too hard to bear for some men.

## **Some other Aspects of Gendered Suicide**

**5.1** It should be noted that there are points of contact between the discursive practices I have mentioned and overlaps between my categories in relation to suicidal behaviour. These are not neat social categories. There are some other issues to note before concluding the paper: some distinctive kinds of suicidal context that warrant further exploration and also some more general aspects of the gendered socio-cultural context to suicides in men.

**5.2** It is important to mention political murder-suicide, which is again predominantly, but not exclusively, carried out by men (women have been involved in Palestine in particular). These are small numbers globally, but as with other kinds of murder-suicide they are culturally very powerful because of media attention. The suicide attack has become an important part of the global repertoire of Islamist terror, and in most cases these incidents need to be understood in terms of gender ideology as much as religious and political ideology. There is not scope in this paper to explore this phenomenon in full, but it is clearly an important issue for sociological exploration. Gerami (2003) has started to analyse the Islamist masculine 'prototype' of the martyr, at least in an Iranian context. To an extent, some political suicides could perhaps also be

understood in terms of loss of honour. I am loath to make any strong claims about political suicide, however, without giving serious consideration to their cultural, religious and historical context (and that consideration is beyond the scope of this paper).

**5.3** Another issue for future exploration is the post-abuse suicide. A small number of suicides seem to be related to either conscience or at least to self-protection in the aftermath of violent crime or abuse. There have been high profile cases of murderers killing themselves - Fred West, Harold Shipman - and on a more mundane level, cases of men showing either conscience or the desire to end negative attention or punishment following their involvement in child abuse or domestic violence (as offenders). Pritchard and King (2004) found, in their study of over 1000 coroners' files, that suicide rates in perpetrators of intra- and extra-familial sexual abuse, were 25 and 78 times the general population suicide rate, respectively. The perpetrator cases could perhaps be understood in terms of the failure of hegemonic masculinity, insofar as the context that allowed the abuse of power changes in some way and the man is left unprotected from punishment or from his own conscience. Again, this is an under-researched issue for further exploration.

**5.4** There is a range of masculinised practices not hitherto discussed in this paper that are generally relevant to suicide, so need to be briefly raised here as they are all issues contributing to a research agenda. There is the question of method mentioned at the start of the paper, where men are more likely to use more lethal methods. There is the issue highlighted by Canetto and Sakinofsky (1998) of 'cultural scripts' relating to suicidal behaviour. These authors make reference to data showing that in most Western contexts, suicide is considered a more acceptable end for men than for women, with 'unsuccessful' suicide attempts being seen as emasculating or feminine and decisive 'successful' suicide seen as masculine. The same authors note that differing expectations of men's and women's suicidal behaviour can effect both choice of suicide method and also the official processing of potential suicides by coroners and their staff. There are certainly cultural associations of suicide as a noble death for men. There is a glamour attached to popular cultural and/or celebrity suicides, such as that of Kurt Cobain, although there have also been moral panics with regard to some musicians that clearly over-state the risks to young people (Wright, 2000). It is generally clear that men take more risks with their bodies (Connell, 2000) and there appears to be an association between certain masculinities (perhaps especially marginalised masculinities) and bodily risks such as substance misuse. The gendered character of alcohol and drug use is an important issue, though both alcohol excess and recreational drug use are becoming much less straightforwardly masculinised in the West. Young women are drinking heavily and using drugs more than ever and overdose is also a popular choice for suicides in women.

**5.5** Another issue of general relevance is the lack of empathy and regard for the feelings of those left behind. Whilst people who kill themselves are undoubtedly in extreme distress, they inevitably have to decide that the need to kill themselves overrides concern about the effect of their actions on significant others. Hawton's (2000) review notes that having a child is a protective factor against suicide for women but not for men. If a man is to succeed in hegemonic gender terms, he not only needs to develop a limited emotional range (see above) but also a distance from the emotions of others. Empathy challenges aspects of hegemonic masculinity.

**5.6** And finally there is the phenomenon (so beloved of media narratives) of men's unwillingness to seek help. This is an important factor that can be seen right across research on men's health and as with many of the factors that feed the elevated suicide risk in men, it needs to be understood in the context of the social construction of the 'stronger sex' (Courtenay, 2000). It is another example of how 'masculinising practices damage bodies' (Connell, 2000). Men's reluctance to seek help is not universal, however, and it is important to recognise the impact of the diversity of masculinities on help-seeking behaviour (Greenland et al., 2004).

## **Conclusion**

**6.1** This paper has had two main aims, each intended to contribute to setting a research agenda. The first aim has been to review some of the existing research on suicide in men, highlighting where there has been valuable work done and where there are gaps. A second aim has been to sketch out some initial ideas towards a sociological account of suicide in men that encompasses both diversity of masculinities and also the structural relations of power. There has been valuable work done by social scientists on men's health that does consider both diversity and power relations (Sabo and Gordon, 1995; Connell, 2000; Courtenay, 2000). Unfortunately, the approach of this work has generally not found its way into the suicidology field, and there has not been dedicated research on suicide from within this tradition of the critical sociological study of men. The conclusion on the state of research on men's suicides would have to be that more qualitative sociological research on individual suicides is needed. This method of inquiry can equally be applied to suicides in women of course. Indeed, the gendered character of suicidal and self-harming behaviour can only be understood if both sexes are studied.

**6.2** Researching actual suicides is fraught with ethical, epistemological and practical challenges. Within medical research in particular, there is a tradition of what are called 'psychological autopsy studies' (Hawton et al., 1998). These are retrospective re-constructions of the life history of the person who has killed him or herself, involving the examination of psychological and environmental details of their life in order to cast some light on the possible reasons behind the suicide. These studies involve interviews with friends, family members and professionals who had contact with the deceased. There are of course major epistemological challenges in researching dead subjects. Coroner's files have to be understood as having a specific legal purpose of providing only evidence on category of death rather than finding out why someone has killed themselves. Interviews with surviving relatives and friends will provide as much, if not more, insight into the survivors themselves and how they construct the suicides as into the people who have killed themselves. Understanding individual suicides has to involve rising to these challenges, however, rather than being put off by them. All the examples of 'psychological autopsy' studies that I have encountered have sought to quantify some factor or other (usually something psychiatric), even with a very small sample of suicides. Our understanding of gendered suicides could potentially be greatly enhanced by a qualitative sociological study of the gendered social context of suicides in men and women that employed this kind of approach to following up significant others after death has occurred. In general, there is a marked need for a sociological approach to individual men's suicides that can make sense of both questions of diversity and of power in relation to masculinities.

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