

Why men complete suicide

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CULTURAL



HEALTH



POLITICAL



SOCIAL

SUMMARY

Suicide is a major, international, public health issue. At least 800,000 people die each year from suicide and the WHO estimates that suicide represents 1.8% of the total global burden of disease (WHO, 2014). The impact on men is considerably greater in that up to four times as many men, compared to women, complete suicide. My research is advancing insights about male suicidal behaviour at national and international level and increasing the sensitivity of clinicians and policy makers to the cultural complexity of this behaviour. The study programme is merging micro- and macro-level analysis, examining the individual within their socio-cultural context and comparing patterns across cultures to explicate the phenomenon of male suicide.

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DESCRIPTION

Suicide represents an important public health issue yet, in research terms, it is an area with relatively little clarity. Theoretically the area remains dominated by Durkheim's ideas but there have been considerable changes in the profile of suicide rates since the 19th century. As with Durkheim's theory there remain quite stable differences between cultural groups in terms of suicide rate. Today, the main division, in terms of high and low suicide rates, relates to a country's level of economic development. Up to four times as many men (compared to women) die by suicide but the gendered character of suicidality is complex, and paradoxical, in that females predominate in terms of attempted suicide which is a key risk factor for completion. Apart from male gender, the main risk factors for completion of suicide in Ireland and other Western countries are low income and having made a previous attempt.

Insights from the qualitative element of this research include a more nuanced mapping of suicidal pathways and causation made possible by the methodological approach - interviewing men who made a medically serious suicide attempt. Results imply that men's knowledge of, and access to, interventions is



impeded in some cultural environments and, contrary to what Durkheim and others have suggested, relationship and emotional issues - in particular the ending of a relationship - are significantly implicated in the suicide stories of men. Risk factors such as low educational attainment and substance misuse emerged as important in a later phase of this work - a follow-up study of these men. A high percentage of the men subsequently completed suicide and based on the data collected, plus analysis of the interviews undertaken at the time of the index suicide attempt, it is possible to identify additional factors - in particular the background and response to the index suicide attempt - which increase vulnerability for completing suicide.



DETAILS OF THE IMPACT

This programme of research has attracted both academic and media attention as well as a response from clinicians and policy makers.

Academic Impact: The research has been funded by the Irish Research Council, Teagasc, the National Disability Authority and the Fulbright Commission. Output from the latter award included a Special Issue of *Social Science and Medicine* (co-edited with a US colleague) devoted to international patterns of male suicidal behavior. My article (Cleary 2012) in this special issue, which places my study in international context, has been widely cited in both the social science and medical literature. The first paper related to the follow-up study has just been published (Cleary 2016) and a second paper is under consideration. The special issue of the *Irish Journal of Sociology* devoted to masculinities which I edited (Cleary, 2005) also sets this study in international context in terms of the study of gender and masculinities.

Public impact: My research findings have been covered in many sections of the media. The findings of the rural study were launched by the Minister for Mental Health, Disability and Older People June 11th 2012 and was covered extensively in the print media and on television - I was interviewed for RTE news at six on that day. I have participated in discussions on RTE for International Suicide Day (2012) and I have been interviewed for focus articles in *The Irish Times* (main section plus the Health Section), *The Sunday Business Post*, *The Independent* and *The Irish Examiner*. My research was covered by 'It says in the papers' on RTE radio (21st August 2012) following an address to a conference on rural health organised by Teagasc.

Impact on Clinicians and Professionals working in suicide prevention:

This involves addressing conferences on suicide prevention, membership of national intervention bodies and providing information to politicians on suicide prevention. My work is referred to in the Samaritan's (UK and Ireland) publication *Men and Suicide* (2013). I was a keynote speaker at the Contact International Conference on Suicide Prevention in Belfast November 2014 launched by the (NI) Minister for Health, Jim Wells (<http://www.contactni.com/Contact-Conference-2014-Suicide-Prevention-What-Works.php>) and also presented the findings at the International Stress Conference in Vancouver, Canada in June 2014. I have provided policy and research advice to numerous voluntary groups and am a member of the Research Committee of Pieta House and have been a board member of the Irish Association of Suicidology. I have presented papers to clinicians in the Trinity Teaching Centre and to other relevant clinical personnel within the Health Service Executive. In 2005, I gave evidence to the Dáil committee set up to examine high rates of suicide in Ireland.

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