Why People Die by Suicide

Most therapists will encounter suicidal clients at some point in their careers. It is often difficult to understand how someone could come to the point where ending their lives seems like a viable option. It is especially difficult for the surviving family and friends of someone who has committed suicide to make sense of the behavior. In his book *Why People Die by Suicide*, Thomas Joiner, a world renowned expert in suicide, puts forth his theory explaining what makes people think, attempt and commit suicide.

According to Dr. Joiner, in order for someone to engage in serious suicidal behavior they have to (1) acquire the ability to enact lethal self-harm; (2) have feelings of perceived burdensomeness on others; and (3) to have a failed sense of belonging. Dr. Joiner integrates his clinical and research experiences along with anecdotes from the news, history, literature and popular culture to provide support for his theory.

Many researchers and clinicians have tried to explain why people commit suicide. The majority of studies that have been conducted to date have examined correlates and risk factors for suicidal behavior. However, many of these risk factors are found throughout the general population, and the vast majority of people do not engage in suicidal behavior. Dr. Joiner’s theory is one of the first that integrates many of these risk factors into an explanatory model. His model makes sense both intuitively and empirically. What makes Dr. Joiner’s theory particularly credible is the research that he and his students have done to support his model. Additionally, he is able to use his theory to explain such diverse behaviors as the suicide attacks on 9/11 and Kurt Cobain’s suicide.

What makes this book particularly interesting is that it begins with a prologue detailing Dr. Joiner’s personal account of loss by suicide. Dr. Joiner’s father committed suicide while he was in graduate school and this loss has shaped his professional career. He expertly intertwines anecdotes about his father’s suicide into the theory and research he presents. This adds a distinctly personal touch to the book and makes it very readable.

The book is well organized into seven chapters as well as a prologue and epilogue. The first chapter examines current theories of suicidal behavior. The second and third chapters delineate Dr. Joiner’s theory as well as provide evidence supporting his model. The fourth and fifth chapters deal with the prevalence and distribution of suicidal behavior as well as the genetic and biological underpinnings of suicide. The final chapters review the assessment, treatment and prevention of suicide and provide guidelines for future research that is still needed.

This book is a must-read for clinicians and researchers who are involved with suicidal patients. Dr. Joiner’s model highlights the acute risk factors for serious suicidal behavior thus providing tangible targets for assessment and treatment. Additionally this volume is an excellent resource for family members who have lost a loved one to suicide. Dr. Joiner eloquently expresses how difficult it was for his own family to understand why their husband and father took his own life. One of his goals in writing this book was to help other families understand why their loved one committed suicide. Based upon the book’s combination of sound scientific research with thoughtful personal reflections and examples it is given a strong recommendation.

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