The language of suicide

Academics, journalists and others are still using the word 'commit' in connection with suicide; yet suicide is not a sin and is no longer a crime. We even see it used by other suicidologists in specialist journals.

This use of language is important because of the three powerful, historical and potentially stigmatising uses to which the word 'commit' has been put:

▌ The word 'commit' is commonly used in connection with religious offences. Indeed suicide is considered wrong in many religions. Over time suicide has been regarded as a cardinal sin in some religions and is often considered a moral sin today.

▌ In the past, suicide was a criminal act in many countries. For example, there was a legal prohibition against 'committing' suicide in England and Wales until the Suicide Act 1961 was introduced.

▌ In many countries, care for those with mental illness can be sought involuntarily ('committed'). This is often the only occurrence outside of committing a crime and being held that an individual can be detained without their consent.

Using the word 'commit' within the context of suicide is not only unnecessary, it is also harmful. Suicide is a considerable public health issue with ripple effects throughout the community. Those affected by suicide (whether personally or due to the death of a person to whom they are connected) are vulnerable and often stigmatised. We need to talk more about suicide, and provide safe places for this to occur in a manner that is helpful and healthy. However, such talk is often stuck in concepts and language from the past that perpetuate stigma, constrain thinking and reduce help-seeking behaviour. Those bereaved by suicide and those who have been suicidal themselves have commented on the negative and unhelpful effects of stigmatising language (Alberta Mental Health Board, n.d.; Maple et al., 2010; Sommer-Rotenberg, 1998).

For example, this comment was posted in 2011 in response to a useful Canadian resource on 'Suicide and Language' (tinyurl.com/cb5t3hc):

I have always believed language is very powerful, no matter the subject. As a person who has had a number of suicide attempts, I believe the

continuing stigma surrounding suicide will make it very difficult to change the language. Consider successful suicide and failed suicide attempts, terms used regularly in ER's and Mental Health Units. The successful suicide means you're dead. Would anyone consider referring to any other way in which a person died as 'successful'? My 'failed attempts' have,
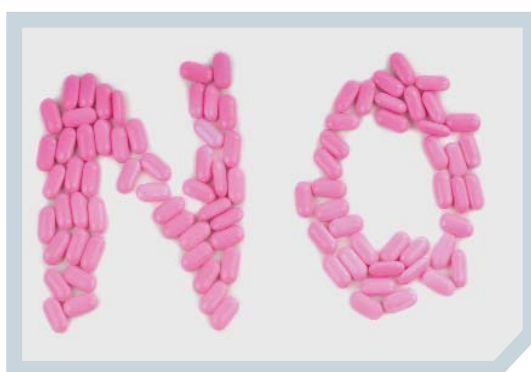
when receiving medical attention, made me feel like just that, a failure. I could not even do that right, and the distaste of ER staff is often completely obvious. Once when I drove my car off the road, in ER the nurse asked me if I had taken my seat belt off, when I replied no, she rolled her eyes and shook her head. My 'failed suicide' attempt made me a person not to be taken seriously. The unspoken message seemed to be come back when you get it right. Yes, language is very powerful, and I believe those who would try to address the stigma of suicide through language changes have a very difficult job ahead.

By limiting the use of negatively associated language, and instead using language that accurately and sensitively describes experience, such as, 'died by suicide', or 'ended his/her life', we promote a healthier way in which to open conversation about risk and resilience, as well as assisting those bereaved by suicide. 'Suicide' is both a noun and a verb so it is also acceptable to say, 'she suicided last year', for example.

Language takes time to change and we should be at the forefront of championing this change. This shows both respect in caring for people affected by suicide, as well as being accurate in relation to their experience.

As workers in the field of suicide prevention we feel that this is an area in which stigma has potentially tragic consequences. Therefore, the extra effort involved in becoming familiar with language that is both precise and non-stigmatising is essential. Whilst there are other terms used in the field of suicidology that warrant addressing to improve clarity and consistency of meaning (e.g. suicide attempt, non-suicidal self-harm, suicide survivor and others), 'commit' stands out because of its potential for inducing stigma and so deserves to be revisited until it is no longer used.

Suicide is a cause of death. Do we ever say that someone 'committed cancer' or 'committed heart failure', even when they may have lived lifestyles that contributed to such diseases (for example, smoking or high-fat diet)? Even suggesting this sounds ludicrous, and yet every day we see such examples in relation to suicide. Our goal must be to reduce the taboo surrounding suicide and to help with that we must update our language. We must stop using words or phrases such as, 'committed suicide', 'completed suicide', 'successful suicide' or 'failed attempt' and be thoughtful in the ways in which we engage with those who experience suicidal ideation, attempts or are bereaved through suicide.

So, let us commit to being vigilant and challenge the use of stigmatising language whenever we hear it used in connection with suicide.

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References

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