



ISSN Print: 2664-8679  
ISSN Online: 2664-8687  
Impact Factor: RJIF 8  
IJSJH 2024; 6(2): 39-42  
[www.sociologyjournal.net](http://www.sociologyjournal.net)  
Received: 17-05-2024  
Accepted: 20-06-2024

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# International Journal of Sociology and Humanities

## Emile Durkheim's *suicide*: An applied sociological review

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**DOI:** <https://doi.org/10.33545/26648679.2024.v6.i2a.89>

### Abstract

A review of the classical work *Suicide* as originally written by legendary French sociologist Emile Durkheim in 1897, proves why Emile Durkheim is known as the founder of Sociology and a major pioneer of modern social science. In his 1897 *Suicide*, Durkheim explores what is today, a major challenge across both western and eastern developed and developing societies, especially as a phenomenon of very high occurrence in the United States: suicide. The sociology of suicide is firmly established in Durkheim's 1897 *Suicide*, and is as interesting as it is diverse in character, causes, and analysis, as he provides a virtual roadmap for understanding the etiology and pathology of suicide as a modern sociological problem. Suicide has plagued human society, communities, and groups for centuries, and there are many well-known narratives and records of suicide both as a dysfunction and as a functional response to other contextual and ritualistic practices and processes. In his work, *Suicide*, Durkheim discusses the rise in suicide in France and Europe during his times, and gives us a good definition of suicide as self-inflicted death or death of which the perpetrator is the victim. Moreover, he presents two types of mindsets characterizing suicide; a mind suffering from mental defects as in hallucinations, and a mind sound and conscious of its actions and consequences, yet chooses the way of suicide. In doing so, Durkheim presents the cognitive aspects or psychiatric aspects of suicide. He also examines the various causes of suicide and looks at four types: maniacal, melancholy, obsessive, and impulsive or automatic. Durkheim educates us on suicide being a non-gendered issue and explains the roles of age, religion, race and ethnicity, and hereditary, as well as natural physical factors in suicide. Another three types of suicide is explored in Durkheim's classic: egoistic, altruistic, and anomie suicide.

**Keywords:** Anomie, etiology, intrinsic, pathology, psychopathic, religion, sociology of suicide

### Introduction

In American society suicide is on the rise. Weir (2019)<sup>[7]</sup> and Hedegaard, Curtin and Warner (2018)<sup>[4]</sup> report that America's suicide rate has increased 33 percent from 1999 through 2017; from 10.5 to 14 suicides per 100, 000 people. This trend is the opposite globally, as suicide rate on a global level has decreased by a third since 1990 (Newman 2019)<sup>[5]</sup>. This is also the trend with the world's most populous nations, India and China; both have seen significant decline in their suicide rates. Suicide is listed among the top ten causes of death in the United States (Newman 2019)<sup>[5]</sup>. These are troubling statistics, and they perhaps will drag us into the setting where revered sociologist Emile Durkheim penned his most famous work, *Suicide* ("Le Suicide"). At the time of its writing and publication in 1897, Emile Durkheim was seeing similar trends in terms of increases in suicide across the globe from 1841 -1872 (*Table 23*, Durkheim 1897), and especially in his home-country of France where suicide rates remained consecutively higher than other main European countries such as Prussia, Saxony, Bavaria and Denmark (Durkheim 1897). During those years (1841-1872) France's suicide rate remained higher than those foregone mentioned main European countries for every year. The suicide rate for France rose from 2814 in 1842 to 5114 in 1869; an increase in suicide rate of 45% within 27 years (*Table 1* Durkheim 1897). Considering the modern statistics provided above, as well as the historical statistics that Emile Durkheim was dealing with, and specific to France, his country, we should probably understand why he was drawn to examine the nature and causes of suicide.

### **Suicide was Rife in Durkheim's Time**

Durkheim's book, *Suicide*, is a really impressive work in literature, and specifically on the subject of suicide as evident from the breadth and depth of approach and knowledge concerning this social phenomenon. His book is a pioneering work as it is the first comprehensive and sociological study of suicide. In the Introduction of his book, Durkheim (1897) clarifies the nature and challenge of suicide as an increasing phenomenon in and across societies namely, France; his home country and several other countries in Europe. What is striking, given the time and setting, is the large number of annual suicides in France. Durkheim seeks to dissect and tackle this social problem in a decisively scholar way as the learned social scientist he was, by first defining the problem.

### **Definition of Suicide**

According to Durkheim (1897), "Among the various kinds of death, there are some that have the peculiar feature of being the responsibility of the victim: the result of an act of which the sufferer is the author" (p. 16). This is by its nature the very definition of suicide in all its forms; a person taking his or her own life regardless of the reason or circumstance, whether depressed or terminally ill. As Durkheim notes, "the intrinsic nature of the acts that produce this outcome matters very little" (p. 16). In other words, it is suicide by nature and definition that the person has taken their own life. Durkheim (1897) summarizes, "*'Suicide' is the term applied to any case of death resulting directly or indirectly from a positive or negative act, carried out by the victim himself, which he was aware would produce this result*" (p. 19). Where does this leave "assisted suicide" in modern times? By virtue of Durkheim's forgone argument, it is still suicide even if aid is given.

### **Cognitive Categories of Suicide**

In arguing the definition and nature of suicide, Durkheim (1897) talks about what he calls, "two different kinds of death: (1) the death of a man suffering from hallucinations who jumps from the window because he perceives it to be level with the ground, and (2) the death of a man, who in sound mind, strikes a blow against himself knowing fully well what he is doing" (p. 17). Here, we see how brilliant and well-thought Durkheim was on the subject matter; not only does he define suicide, but he dissects its conceptualization. Furthermore, Durkheim points to something we have come to know today; that both those mentally unsound and those otherwise sound can commit the act of suicide.

### **Social Causes of Suicide**

Where the brilliance and completeness of Durkheim's work lie on the subject of suicide is where Durkheim writing on "Suicide and Psychopathic States" looks at what he terms "two sorts of extra-social causes" (p. 33) to which suicide may be attributed; (1) organic-psychic tendencies and (2) the nature of the physical environment. Reflective of the posturing of arguments and analysis in classical psychology, Durkheim has thus provided us with the "nurture" and "nature" causes and explanations of suicide. In this aspect of his work, Durkheim leads us to consider suicide as to whether it is a morbid condition or a kind of madness. From a modern psychosocial perspective, Durkheim's characterization is indeed the case.

### **Four Types of Suicide**

In his work, Durkheim (1897) identifies and defines four types of suicide: (i) maniacal suicide due to either hallucinations or delirious notions; (ii) melancholy suicide stemming from a state of extreme depression and sadness that affect an individual's sanity to assess interpersonal relationships and relationships to objects or things; (iii) obsessive suicide where no real or imaginary motive is involved, but rather stemming from what Durkheim describes as a "fixed idea of death that has gained an ascendancy over the mind" (p. 42); and (iv) impulsive or automatic suicide which is the result of sudden and immediate irresistible impulse. This is where the genius of Durkheim as a social scientist and theorist shines – these definitions covered all aspects of suicide then, as well as in today's society.

### **Suicide as a Non-gendered Issue**

In his work, *Suicide*, Durkheim already recognized one essential premise of suicide; it can strike both men and women. Durkheim presents the statistics to support this in *Table 4* of his book, "Share of each sex in the total figure for suicide" (p. 51). With the statistics ranging from year 1831 to 1877, we noticed that the suicide rates for men is much higher than women in all years, all regions (all countries) examined in Durkheim's study. This was indeed the historical trend. What about in modern times? According to the America Foundation for Prevention of Suicide (2019), the trend continues as in the United States in 2017, "men died by suicide 3.54x more often than women" (p. 1). This is interesting, and while Durkheim (1897) like many will beat around the bush on this matter, Durkheim (1897) states, "in actuality it emerges that suicide is essentially a masculine phenomenon" (p. 50). While Durkheim (1897) grapples to explain this seeing that it was established that women had higher propensity toward insanity, he observes that men's suicide rate on average is four times that of women (*Table 4* Durkheim 1897). Still quite similar to today's rate of suicide by men.

### **Some Notable Deviations and Occurrences**

In his work on suicide, Durkheim (1897) notes some interesting deviations from logical expectations, and concurrences with those expectations. For example, it would have been naturally expected that women would have a higher rate of suicide due to concurring statistics on higher rates of insanity as evidenced in Silesia, Saxony, Wurttemberg, Denmark, Norway, New York, Massachusetts, Maryland and France between 1847 and 1891 (Durkheim 1897 p. 49), but this was the opposite case. Another finding was that "*the rate of suicide varies inversely to the rate of psychopathic states*" (p. 52). Durkheim also notes that in every country, suicidal tendency increases from childhood into very old age, and that the countries with the least number of insane tend to have the highest rates of suicide; this is consistent with the deviation in female madness rate versus male madness rate and suicide among these genders. One would naturally believe that higher rates of insanity or madness would lead to higher rates of suicide, but this is indeed not the case per data (*Table 6 – "Relation of suicide and madness in different European countries"* – p. 54 Durkheim 1897). Durkheim (1897) also notes another deviation from logics concerning the phenomenon of suicide: "in inferior societies, where

madness is rare, suicide...is sometimes very frequent" (p. 56). This makes it difficult to fully understand the nature of suicide in a totally comprehensive manner. Just as how Durkheim noted and observed these anomalies of suicide in his age and time, we notice similar patterns today that create challenge in our understanding of the phenomenon.

### **Suicide and Religion**

Notable in Durkheim's highly acclaimed book, *Suicide*, is his tendency and penchant for what some might point to as religious bias, as Durkheim (1897) points out the differing suicide rates between Catholics and Protestants while crediting discipline or exercise of stronger social values and elements of social control among Catholics as contributing to them having a lower rate of suicide. Durkheim uses the German state as an example, pointing out that while there is a high level of alcohol consumption among Germans, those who are Catholics have lower rates of suicide. Here, Durkheim implies that Catholic values act as a panacea to the social ills of behaviors and vices that may lead to suicide, while on the other hand, Protestantism does not have such a power or virtue. While this would probably have been a widely acceptable view in Durkheim's days due to the dominance of Catholicism, today it is an almost irrelevant consideration in assessment and understanding of the nature of suicide since both modern Protestantism and Catholicism advocate against suicide. In fact, Durkheim's view would today be regarded as downright bigoted. Based on understanding and familiarity with Durkheim, he seems to have a religious entrenchment characterizing his conceptualization of social and sociological phenomena, and in this case, suicide is no exception.

### **Race and Heredity Affecting Suicide**

The breadth of Durkheim's analysis on suicide is further witnessed in his attempt to link suicide in normal psychological states to race and heredity. Here, Durkheim (1897) accredits variation in suicide between races as stemming from what he calls "organico-psychic characteristics" (p. 66). In this regard, Durkheim is wholly thorough as always as he defines a race and mentions the character of race and several races such as Latin race, Anglo-Saxon race, and points to Morselli's four race classifications: Germanic type (German, Scandinavian, Anglo-Saxon and Flemish varieties); Celto-Roman type (Belgians, French, Italians, Spanish); Slavic type; and the Uralo-Altai type (p. 70). According to Durkheim (1897), as far as suicide ranking is concerned, we have in order, the Germanic peoples, the Celto-Romans, and then the Slavs. Interestingly, this is shaky scientific ground for suicide, as while there may be patterns of variation in suicide among the different races, attributing certain suicidal tendency based on race is entering into politically incorrect environments. Interestingly, Durkheim (1897) is vehement on proving his point, and therefore, points to a higher rate of suicide among German and French Protestants for example, when compared to French and German Catholics. Now, we have the imposition of both religion and race and heredity being used to explain differences in suicide rates.

### **Suicide and Age**

Durkheim's work is multifaceted in its analysis as he also tackles age and suicide, noting that, "Suicide is extremely rare among children" (p. 88). If only Durkheim was alive

today, he might have a slightly different view when it comes to the rate of suicide among children or young people in modern society. For example, the American Foundation for the Prevention of Suicide states that, while "Younger groups have had consistently lower suicide rates than middle-aged and older adults...In 2017, adolescents and young adults aged 15 to 24 had a suicide rate of 14.46" (p. 1). This is by any means still a high rate of suicide not to use the term "rare" since children describes anyone under the age of 18 in our modern times. Durkheim is still however correct if he means to point out that suicide increases with age – "In 2017, the highest suicide rate (20.2) was among adults between 45 and 54 years of age. The second highest rate (20.1) occurred in those 85 years or older" (American Foundation for the Prevention of Suicide 2019 p. 1).

### **Suicide and Natural Physical Factors**

Durkheim seems to leave little to no page unturned in dissecting the problem of suicide as he examines not just the psychological, cognitive, and social factors that many think of when it comes to suicide. For example, Durkheim examines cosmic causes of suicide in his work. The notable cosmic causes are (1) climate, and (2) seasonal variations in temperature. Concerning the climate-suicide-relationship hypothesis, Durkheim (1897) seems to dismiss it altogether and completely, dispelling Morselli's assumptions, assertions, confirmations and deliberation on this as not worth spending more time on. However, Durkheim notes that the influence of seasonal temperature on the rate of suicide is more established or credible, pointing that a "desolate appearance of nature...have the effect of inclining a person to reverie, awakening sad passions and inspiring melancholy thoughts" (p. 95). Here, we must not forget that one of Durkheim's four types of suicides is "melancholy suicide." Furthermore, Durkheim (1897) notes, "From the start of January onwards, the rate of suicide rises regularly month by month until June and recedes steadily from then until the end of the year" (p. 101). There is contemporary support for this claim as Christodoulou, Douzenis, Papadopoulos, Papadopoulou, Bouras, Gournellis, and Lykouras (2012) note, "Studies from both the Northern and the Southern hemisphere report a seasonal pattern for suicides" (p. 146).

### **Imitation and Suicide**

Do people imitate suicidal behaviors and actions? Durkheim seems to think so. According to Durkheim (1897), imitation plays such an important role in human socialization and behaviors that we must look into its role in suicide. In today's society we perhaps better understand this argument than anyone in Durkheim's era would have due to the spread of Internet and digital communications technology and the pervasive presence and influence of social media such as YouTube, Facebook, Twitter and the like influencing people in their decisions and actions or behaviors as "influencers" and "influenced"; "leaders" and "followers"; "actors" and "fans." Social media has spawned both innovation and imitation on equal footing in our society, especially among the young. Durkheim (1897) regards imitation as "a purely psychological phenomenon" (p. 115) and states that, "A man can imitate another without their being linked to one another" (p. 115). The problem that makes imitation dangerous in the way of suicide is that there is "no explicit or implicit intellectual process with a bearing on the

*intrinsic characteristics of the action reproduced intervening between the representation and the execution of the action*" (p. 123). It seems here that Durkheim is implying that imitation acts as a conduit to suicide because it becomes an antithesis in its function to active thinking which would act as a logical restraint on such negative behavior as suicidal action. Some more modern research supports Durkheim's assertion. For example, "it is found that stories on prominent suicides are likely to trigger a subsequent rise in national suicides" (Wasserman 1984 p. 427) <sup>[6]</sup>. This becomes interesting and points to the powerful role that social learning or imitation still plays in an otherwise intelligent species of mammals. This is reflected in modern times in the increasing numbers of suicides committed in Japan's Aokigahara ("Sea of Trees") forest which is located on the northwestern side of Mount Fuji on the island of Honshu.

### Further Typology of Suicide

Durkheim's study on suicide is wholly extensive and this is yet demonstrated in further classification of suicide into other types: (1) Egotistical suicide which results from individuals experiencing too little social integration into groups, communities and society, and as a result experience alienation and isolation and feeling little connection may commit suicide; (2) Altruistic suicide, which is the opposite of the former and occurs when individuals experience too much integration into groups and communities so much that they become self-sacrificing in actions and behaviors to demonstrate this commitment as what happens in military where individuals sacrifice themselves for their squad or platoon; and (3) Anomic suicide which Durkheim further divides into four types: acute and chronic economic anomie, and acute and chronic domestic anomie (Durkheim 1897).

### Suicide as a Social Phenomenon and its Relation to other Social Phenomena

Durkheim is not just interested in looking at suicide in isolation, but has looked at suicide as a social phenomenon, and as related to other social phenomena. According to Durkheim (1897) suicide depends on both external and internal situations; that is, factors in one's external environment and individual peculiarities. Durkheim states that these factors, especially the internal ones are many, and that the circumstances that cause suicide are "almost infinite in number" (pp. 329-330). This is true when we consider the combination possibilities of environmental and individual variables that have been observed in cases of suicide over the past 150 years. Whatever the case, Durkheim (1897) believes that "the social rate of suicide can only be explained sociologically" (p. 331). Additionally, Durkheim notes that suicide is multifaceted and occurs along with and besides multiple other social phenomena. This is indeed the case as suicide has a nature of unpredictability as one who is seemingly happy and healthy may commit suicide just as one who is living in misery and pain.

### Conclusion

What an impressive study for its time period! Anyone who has read Durkheim's *Suicide* ("Le Suicide") and is not impressed by its scope and depth must be truly anti-Durkheim or simply not understood the value of this seminal work of literature to the fields of Sociology, Psychology, and other social and psychological sciences.

The work is so extensive and represents a complete study on suicide in so much that traversing its content and pages is not an easy exercise. Durkheim's work is powerfully influential even after 126 years have passed, and its content and implications are by no means exhaustive and still educate us about a phenomenon which still today is a major challenge; among the top 10 causes of death in the United States, high among adults in middle age, and increasing among certain younger age groups. Durkheim has explored the causes of suicide in such a way that his work remains the original manual and reference guide on understanding and studying the sociology of suicide. Moreover, it is still a source that scholars and practitioners can turn to examine suicide. Furthermore, Durkheim's legacy from this seminal work is reflected in its impact on the social sciences, especially Sociology and Psychology and their treatment of this act whose "sufferer is the author [of the act]."

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