CLEARINGHOUSE
FOR MILITARY FAMILY READINESS

Examining Suicide as Abuse:
Rapid Literature Review

Clearinghouse Technical Assistance Team

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Executive Summary

This report was developed in response to a request for information on the extent to which an individual's stated intention to die by suicide or their death by suicide may be considered abusive behavior. The Technical Assistance team conducted a rapid review of relevant research literature between 2012 and 2022 on the topics of interest.

When a person's talk of suicide or self-harmful behavior is used as a form of control or manipulation, this is referred to as a suicidal gesture. Suicidal gestures occur when a person talks of his or her death by suicide when the individual has no intention of dying by suicide (Robinson et al., 2022). The suicidal gesture may be used by those who wish to exert relationship control by eliciting feelings such as guilt in the people around them to make others concede to their wants (Katz et al., 2020). Suicidal gestures may also be connected to behaviors associated with individuals with personality disorders (PD). Some research suggests that these gestures may be a means of communicating distress in individuals with PD rather than a true intention of bringing harm to oneself (Wedig, 2013). The motivations that can drive suicidal intentions are emotionally, physically, and socially complex and, as such, may be influenced by a variety of factors (e.g., mental illness, a traumatic event, family history).

The research published specifically on suicidal gestures and loss of life by suicide as a means of aggression or abuse is limited. Furthermore, the limited research that does exist lacks rigorous, empirical examination. Nevertheless, the link between suicide and abuse was not found to be sufficiently supported in current research literature. Further study to understand abusive behavior and how it relates to suicide is needed to understand how abusive behavior is perpetrated through an individual's statement of suicidal intent or actual death by suicide.

This rapid review provides the following:

- Background on coercive control, abuse, and suicide;
- Discussion of suicidal gestures in individuals with borderline personality disorder; and
- Knowledge gaps in the research literature on the topics of interest.

Note, this rapid review provides a preliminary examination of the research and is not intended to serve as a comprehensive review of the literature. Rather, the review was completed rapidly, and it is intended to help stakeholders make data-driven decisions about next steps.

Introduction

To better understand the relationship between abuse and suicidal intent and/or death by suicide, the Technical Assistance (TA) team at the Clearinghouse for Military Family Readiness at Penn State (Clearinghouse) conducted a brief, rapid literature review on

suicide as a means of perpetrating abusive behavior. Research that examines this topic was identified by searching peer-reviewed journal articles and grey literature, and an emphasis was placed on research published between 2012 and 2022. Search queries included various combinations of the following terms: suicide, gesture, abuse, revenge, ideation, threat, manipulation, control, and coercion.

Background

Suicide is a complex issue within the military community and has been described as a "public health and national security crisis" by the White House (2021). The reasons a Service member may consider death by suicide vary (e.g., feeling a pervasive sense of hopelessness, experiencing military sexual trauma, losing a relationship). However, this report focuses on the question of whether the expressed willingness to die by suicide may be driven by the desire to manipulate, control, or cause emotional damage to another individual, and, as such, whether the expression of suicide intent can, then, be categorized as a form of abuse.

Coercive Control and Suicidal Gestures

Some individuals who share that they are thinking about suicide are experiencing what is referred to as *suicidal ideations* (i.e., thoughts or wishes about death and suicide). For example, individuals who demonstrate suicidal ideation may state, "*I am so depressed; I just want to shoot myself."* They are communicating their distress and their thoughts about death. However, in this type of situation, the individual is probably not attempting to control or manipulate another person through their statement of potential suicide.

Other individuals may talk of dying by suicide as a threat to influence another person. These threats of self-harm are referred to as *suicidal gestures* (García-Nieto et al., 2014). An example of a suicidal gesture would be an individual who states: "*If you leave me, I am going to kill myself."* In this case, the individual talking about suicide may be using suicide gesturing to gain power or control in the relationship (i.e., prevent dissolution of the relationship). **Note that in any case of suicidal gesturing, one cannot know with a sufficient level of certainty whether the individual will attempt to die by suicide.** Consequently, all statements regarding the intention of suicide need to be considered as legitimate concerns, and protocols that address suicidal behaviors should be adhered to by service providers. A discussion of suicide protocols (e.g., contacting 911 or police, screeners, risk assessments, mental health interventions) is beyond the scope and focus of this report.

Johnson and colleagues' 2019 study also discussed coercive control as a means of perpetrating abuse. Using data from the Australian Homicide Project, researchers compared two groups of men who had been convicted of murdering their intimate partner: (1) those who admitted to prior interpersonal violence and (2) those who did not. In their review of the literature, the researchers found that some individuals may engage in coercive control, such as suicide gestures, as a way of exerting interpersonal control in a

relationship. In this study, researchers observed male study participants, before killing their partners, voicing their intentions to die by suicide after being informed of an impending separation from a partner or after discovering a real or imagined case of infidelity in the relationship. Researchers noted that, in their review of the literature, these gestures were a way for the male partner to regain a dominant position in the relationship (e.g., prevent the dissolution of the relationship or the infidelity). However, the small sample size makes these findings non generalizable to the entire male population.

The concept of *coercive control* was first presented by Dr. Evan Stark in his 2007 book Coercive Control: The Entrapment of Women in Personal Life. "Coercive control can involve numerous behaviours from perpetrators, including violence, threats, stalking behaviours, continual monitoring, microregulation of daily life, emotional, economic, and sexual abuse, isolation, denial, and manipulation (including by perpetrators sometimes being 'nice' and 'indulgent' to their targets)" (Katz et al., 2020, p. 311). Most cases of coercive control are a culmination of ongoing behaviors against another's "autonomy and freedom" (Katz et al., 2020, p. 311). The covert nature of coercive abuse may be difficult for others to observe (e.g., unlike the external harm such as bruises or scrapes caused by physical abuse), and, therefore, the victim is less likely to report these behaviors.

Suicidal Gestures in Individuals with Borderline Personality Disorder

Coercive control is not the only time individuals may engage in making suicidal gestures. Personality disorders may also play a role in an individual's compulsion to use suicidal threats in an interpersonal relationship. In research conducted by Wedig and colleagues (2013), demanding and manipulative behaviors were a statistically significant predictor of suicide threats over time in patients with borderline personality disorder (BPD). The same study found that predictors involving anger (i.e., self-reports of feeling "very angry inside", "furious or enraged inside" [Wedig et al., 2013, p.255]) did not display statistical significance (Wedig et al., 2013). This research suggests that for those who suffer from BPD, suicide threats are more likely to be an attempt to regulate personal emotions that stem from an interpersonal relationship rather than to control another person (Wedig, et al., 2013).

García-Nieto and colleagues (2014) found that individuals who had been diagnosed with BPD and had engaged in suicidal gestures frequently reported doing so to "communicate with someone and/or get his/her attention" (p. 425). This research illustrates that those with BPD are likely not using suicide gestures to harm others but are using these gestures as a coping mechanism or, in a roundabout way, are seeking help.

Knowledge Gaps in the Research Literature

Current research does not differentiate between attempts at suicide and suicidal gestures (García-Nieto et al., 2014). Accurately evaluating the intentions of someone who is talking about suicide can be challenging. Furthermore, individuals who make suicidal gestures or express suicidal ideations often report not knowing, or have difficulty in remembering, the reason for their thoughts or behaviors after a suicidal event has passed (García-Nieto

et al., 2014). Bryan and colleagues (2013) also note that the possibility exists that respondents may perceive different motivations for suicidal behaviors before and after a suicide-related event. This finding indicates that caution should be taken in interpreting the results regarding the motivations of suicidal behaviors in study participants.

Of the identified research in this report, the Self-Injurious Thoughts and Behaviors Interview (SITBI) was most frequently used as the primary measure. The SITBI contains items related to suicidal gestures (e.g., "Have you ever done something to lead others to believe you wanted to kill yourself when you really had no intention of doing so?"; Fox et al., 2020). However, in most of the literature reviewed, suicidal gestures are grouped with suicidal ideation and suicide plans. Finding a way to differentiate between individual's motivations in using suicidal ideation, gestures, and plans would help to give more insight into understanding suicidal gestures.

The literature also cites low self-response rates to suicidal gestures or threat-related items on measures. These low self-response rates have made it difficult to fully study and understand suicidal behaviors. The response rates to these items may be caused by event frequency, unreliability of items, or poor-item construct (Fox et al., 2020).

Summary

There is a lack of research literature that examines the connection between death by suicide (or expressing the intention to die by suicide) and abusive behavior. While the topic of suicide as a means of control and manipulation is mentioned in some publications, no rigorous research has explicitly connected suicide as a form of abuse. Further study is recommended to better understand the constructs of abusive behavior and suicide. The brief discussions that do exist on the topics of interest categorize individuals with suicidal behaviors into two areas of study: those using threats to control an interpersonal relationship and those who suffer from specific personality disorders. One cannot know the motivation or true intent of those who state that they want to (or are willing to) die by suicide. Therefore, all suicidal behaviors must be regarded as genuine. Recognizing and understanding that there is a connection between suicide as a form of abuse in relationships is a first step; however, more research on this topic is needed.

Additional Assistance

The TA specialists at the Clearinghouse provide support to professionals as they examine and make informed decisions about which programs fit specific situations and are worth the investment. Whether connecting one with the resources and tools to conduct a needs assessment in a specific community, suggesting the best evidence-based program or practice for a certain situation, or developing an evaluation plan, the TA team of experts is a call or email away.

Please visit the Clearinghouse's website at www.militaryfamilies.psu.edu or call 1-877-382-9185 to speak with a TA specialist.

Suggested Citation

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