THE SUICIDE PARADIGM

Adapted from Survivors of Loved Ones' Suicides, Inc. (SOLOS)

Suicide is the outcome of neurobiological breakdown. The process begins in severe stress and pain generated by a serious life crisis. These increase as the crisis, or the individual's perception of it, worsens. Feelings of control and self-esteem deteriorate.

Suicidality occurs when the stress induces pain so unbearable that death is seen as the only relief. Suicidality entails changes in brain chemistry and physiology. Suicidal individual manifest various chemical imbalances.

As one becomes suicidal, he or she is no longer capable of choice. Suicidality is a state of total pain which, coupled with neurological impairment, limits the perceived options to either enduring (suffering through) or ending utter agony.

The study of suicide and the treatment of suicidal individuals involve a shared paradigm. New insights are laying the groundwork for a new paradigm which entails a change in how we see suicide.

OLD PARADIGM

a. Suicide: Killing of oneself

b. Goal: End life

- c. It is seen as an event or a behavior.
- d. Viewed as a decision and a personal choice.
- e. Viewed as a means of control or manipulation.
- f. Seen as a voluntary action and individual responsibility.
- g. The individual is seen as a decision-maker.
- h. Thought to be a phenomenon involving the mind.
- i. Etiology: Emotional disorder, personality disorder, poor coping skills

NEW PARADIGM

- a. Penacide: Killing the pain.
- b. Goal: End pain and suffering.
- c. It is seen as a process of debilitation.
- d. Viewed as a disease outcome; no choice involved beyond crisis point in the process of debilitation.
- e. Viewed as the result of severe stress and psychological pain.
- f. Seen as an involuntary response.
- g. The individual is seen as a victim.
- h. Thought to be a physiological or neurobiological phenomenon involving the brain.
- i. Etiology: A biochemical deficiency created or aggravated by pain.