

ole Youth?

BY FRED BRUNING

HAVING scribbled their final thoughts on a paper bag some weeks ago, four young people — two boys, two girls — gassed themselves to death in a garage behind a Bergenfield, N. J., housing complex. Their choice of stationery was melancholy and more than a little appropriate: In a society where we deep-six everything from supermarket sacks to aging automobiles, suicide may seem to make a certain horrid kind of sense. Disposable diapers, disposable flashlights, disposable marriages, disposable ethics in the White House, disposable standards on the television screen. Why not disposable lives?

In such an atmosphere, the young — passionate, self-absorbed, so easily taken by despair — may be most at risk. Between 1950 and 1979, the suicide rate for those in the 15-24 age range tripled, and while the pace has leveled off, the number of deaths remains extraordinary. About 5,000 young people successfully plot their own destruction each year, and authorities estimate that another 400,000 attempt suicide but fail.

A day after the Jersey episode, two young women near Chicago achieved oblivion by way of the exhaust pipe, and within a week, a 17-year-old boy and his 20-year-old girlfriend were found in the very garage used by the Bergenfield teens. Although the stall was filled with carbon monoxide and the young woman was handcuffed to the steering wheel, an alert cop foiled the couple when he noticed a padlock had been forced from the door. Still, the incident rocked Bergenfield anew. "It's incredible," lamented a local storekeeper. "Absolutely amazing."

Some experts are less astounded. They say that troubled youngsters are highly susceptible to the power of suggestion and that news of one tragedy may prompt another. "When four kids commit suicide in a dramatic way, we're going to have disturbed kids who are going to copy," said Pamela Cantor, president of the National Committee of Youth Suicide Prevention.

It probably is fair to assume, too, that network coverage and solemn front-page stories can act as deterrents. There is little inspiration, after all, in close-ups of grieving parents, weeping friends, and corpses destined for the morgue.

Media attention is not the issue in any event. Headlines and photographs amount only to the last step in a very long progression, an epitaph but hardly an answer. Kids commit suicide for all kinds of reasons; we know that. Trouble with family, school, boyfriends, girlfriends, finances, peer pressure, drugs, alcohol, sex — there is no shortage of possibilities. But is it mistaken to suggest that something has lurched in our national life, as well, that our equilibrium, at least temporarily, is wobbling like a ruined wheel?

We may joke about the inferior quality of goods and services, about the absence of leadership, the decline of education, the loss of civility, the extraordinary spirit of know-nothingism that prevails. We may

shrug at the tenacity of organized crime, the duplicity of politicians, the bully-boy reputation we are gaining around the world.

Young people, though, may not be so resilient. Without the armor of age, they are bound to be affected by the cynicism of their elders and the shoddiness of their world and, in some cases, bound to embrace the emptiness that, to some, must seem all that awaits.

In a newspaper essay, Brian Noal Mittman, an 18-year-old freshman at Dartmouth College, wrote: "Today's teens don't like what they see, and feel helpless about changing their prospects. They feel lost in an intricate world . . . They feel it is best to live for the moment, to have fun while they can. And for those who are truly distraught and disgusted, suicide seems the only answer."

The boy writes from experience. One of Mittman's high school acquaintances killed himself with a shotgun, and last year, Mittman recalled in his article, a despondent young woman friend was saved at the last moment only by the timely ring of a telephone.

While Mittman, at Dartmouth, may speak for the children of privilege, the Bergenfield deaths drew attention to another category of kids — "burnouts," as they are called. The term applies to youngsters who are neither preppy nor jock, who dress tough and act accordingly, who do not see themselves as college material, or come from families that view higher education as unnecessary or beyond reach.

A walk past almost any high school suggests the ranks of alienated young Americans — burnouts, if you will — is increasing steadily. There, at curbside, the kids hold court, arrayed in denim and spangles, spike heels and hot colors, nonchalant yet formidable, their territory defined by an inversion of cigarette smoke. Dress and demeanor are imperfect indicators of personality and character, but one cannot help supposing that the burnouts are, in fair measure, what they appear — uncertain, disaffected and only marginally prepared for a future in an economy wed to megabytes and microchips.

Tom Rizzo, a contractor whose son, Thomas, 19, was among the four discovered in the Bergenfield garage, has a notion that much has changed since he was a boy. "When I was young, the only ones I can remember committing suicide was the sons of movie stars, the filthy rich or the lowest poor," Rizzo said. "I would never think of suicide. I can't believe he did."

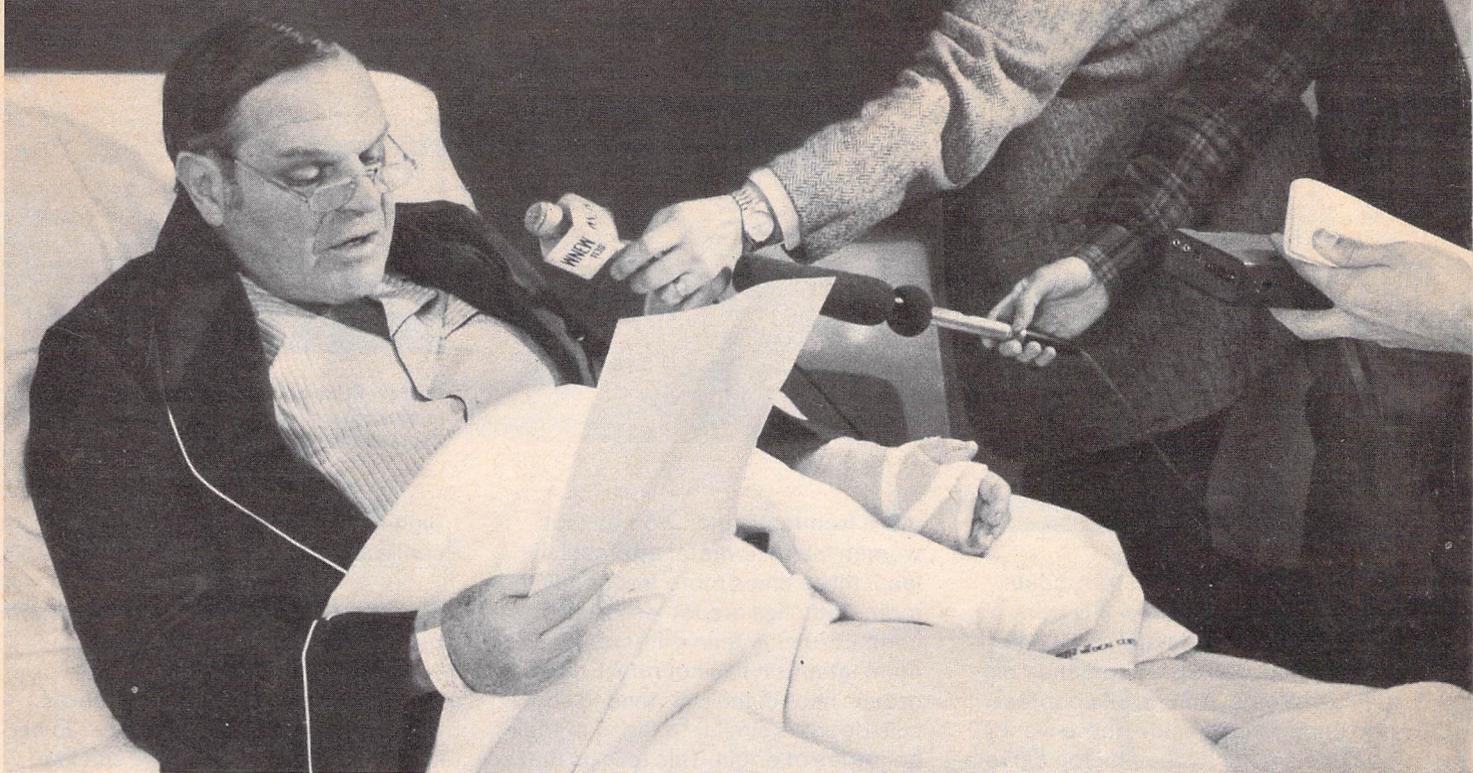
But young Rizzo had problems that are as familiar in America as candy wrappers at the side of the road. Like the friends who died with him, Thomas Rizzo did not complete high school. At the time of his death, he was legally intoxicated. Tests showed that all the victims — Rizzo, an 18-year-old buddy and two sisters, aged 16 and 17 — had used cocaine within two hours of their deaths.

No one is suggesting that we lament our fortune and call for a retreat to the good old days. What days would those be, in any case? Still, we had better take a long, honest look at our own time. We had better ask ourselves whether our children are being well served in school and in the home, whether we have a system that challenges the mind or snuffs the intellect, whether in our mad dash for comfort, convenience and the transcendent TV dinner, we have lost sight of the important and glorified the trivial.

"I guess it can happen to anyone," said Rizzo, referring to his son's death but going beyond personal grief, as well. The dreadful *it* of youthful self-destruction, indeed, seems capable of swooping down on any family. As Rizzo suggests, we all have a right to feel edgy. Look at the priorities of this world we have made.

Who wouldn't be worried?

**WHEN HOPELESSNESS SETS IN,
WARNS PSYCHIATRIST AARON BECK,
SUICIDE CAN BE CLOSE BEHIND**



DON HALASY/NEW YORK POST

Donald Manes tried to cover up a January suicide attempt, lying to the press, but died by his own hand in March. "Suicidal people believe life can only get worse," says Dr. Beck (right).

As investigations into allegations of bribery and extortion in New York City's government continued, Donald Manes, 52-year-old former borough president of Queens, last month took his own life. That his father also had died by his own hand renewed long-running speculation that suicidal tendencies might be shared by family members.

A leading expert in the field is Dr. Aaron T. Beck, 64, professor of psychiatry at the University of Pennsylvania School of Medicine. A graduate of Brown and the Yale medical school, Beck has conducted decades-long suicide studies and conceived of a "cognitive therapy" seeking to reverse depressive moods through reason and problem-solving. With correspondent Giovanna Breu, he discussed what we know now about suicide.

What kind of person commits suicide?

People who have a negative image of their lives. The critical factor is a sense of hopelessness that is characteristic of people who may have gone

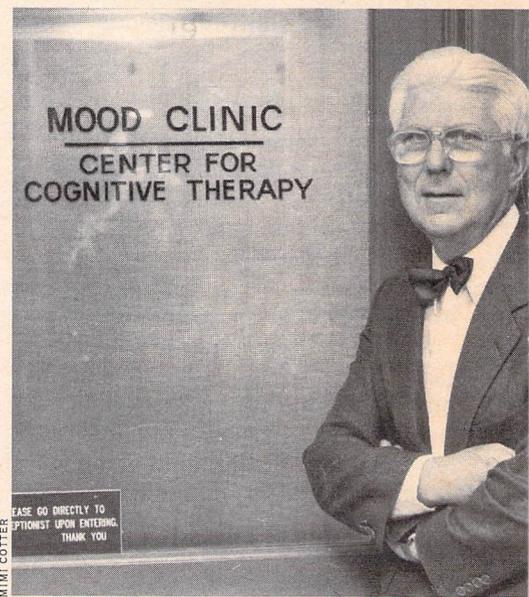
through severe stress such as disappointment in their careers or a breakup of a relationship. They exaggerate their problem or its consequences.

Was Donald Manes an example of that?

We don't know what was going on in Mr. Manes' mind, but if he assumed that he would always be miserable, that would be irrational. We've seen a whole raft of politicians in Pennsylvania indicted, and it wasn't the end of their worlds. Public figures sometimes believe they have let down their country or community, their associates or family, and they can't go on. Sometimes they romanticize the act of suicide.

Are there personality traits that identify people as suicide risks?

There is no single profile. In general they don't like to feel bad and they look for quick fixes to avoid feeling bad. They have less control over their angry feelings and violent impulses. They also have low serotonin, a neural biochemical substance in the brain



MIMI COTTER

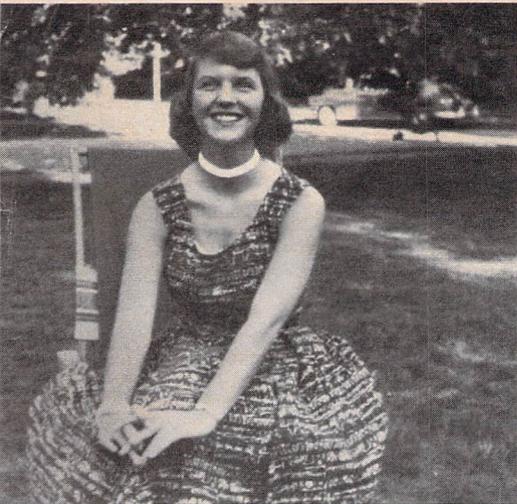
that has a dampening effect on impulses, like shock absorbers on a car. Other factors include a low capacity for solving problems—and alcoholism.

Is a suicidal tendency a family trait?

The idea may seem silly, but people do inherit the temperament that, when

CONTINUED

Like his older brother Ernest (at right, center photo), Leicester Hemingway (left) was an author who shot himself, as did their father.

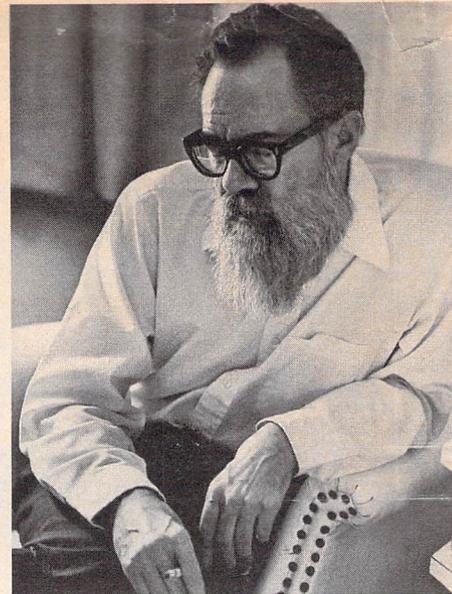


Poet-novelist Sylvia Plath wrote of a suicide attempt in *The Bell Jar*, published just before she took her own life at age 30.



OTIMELINE

Pulitzer Prize poet John Berryman (above) leapt from a Mississippi River bridge in 1972. His father killed himself with a shotgun.



SAMOS

Medics

combined with other factors, could lead to suicide. We know this from a study of adopted children in Denmark who were reared apart from their biological parents. Among 57 adoptees who committed suicide, there were 12 suicides among all their biological relatives. A control group of 57 nonsuicidal adoptees had only two suicides among relatives.

What about identical twins?

There is some evidence that when one twin commits suicide, the other twin, even when raised apart in a separate adoptive household, has a higher probability of suicide.

Are multisicide families common?

Not really. Inheritance is not a major factor. Yet if someone in a family has made a serious attempt or committed suicide, that may dignify the act. It can legitimize a particular form of behavior ordinarily considered to be antisocial.

How many suicides are recorded each year in the U.S.?

We know of about 25,000 to 30,000, but it could run as high as 60,000, since many are hushed up or recorded as accidents. Other countries such as Hungary, Austria, Denmark and Switzerland have substantially higher rates.

How do suicide rates vary between the sexes and among various groups?

Men commit suicide three times

more frequently than women, but women make nonfatal attempts at least three times more frequently than men. Catholics are far less likely to commit suicide than other religious denominations in this country. Ethnic groups here in the U.S. tend to show suicide rates similar to those of their countries of origin. This tells us that social factors have an important role in suicide rates.

Can suicide ever be a rational act?

I know of an AIDS victim deserted by family and friends who was dying with no one to take care of him. That seemed like a rational suicide, but I think such instances are rare.

Can one suicide trigger others?

Yes. You see this in cluster suicides, where there is a series of suicides among young people in a particular area. There's an element of imitation. Publicity given to one suicide tends to promote others. When a celebrity commits suicide, there is a measurable increase in the national suicide rate. After Marilyn Monroe's death was reported as a suicide, the U.S. suicide rate increased by 12 percent for a month.

What should we look for in people we suspect might be thinking of suicide?

Some kind of unexplained change in their personalities. They tend to be more serious. They don't respond to gratifications as they once did. They talk about morbid topics for no reason.

Significantly, they may have crying spells and appear unusually sad.

Should family or friends try to help them by "talking out" their problems?

It's important for them to know there's someone around who cares. But discussions of feelings have to be kept to a minimum because suicidal people tend to feel worse if they dwell on their sad feelings. Criticism by a family member is especially harmful. An English study of women hospitalized for depression showed that those who went home to a critical husband were far more likely to be rehospitalized. It is a myth that if you give the depressed patient enough love, things will get better. Love is not enough.

What is the system of treatment that you call "cognitive therapy"?

Depressed and suicidal people start off by not seeing *any* solution to their problems. At our Center for Cognitive Therapy, we try to define the problems for them and generate a variety of probable solutions or approaches. Most psychological problems center on incorrectly appraising life's stresses, reasoning on the basis of false assumptions and jumping to self-defeating conclusions. You help patients to apply reason and logic to their problems so they can confront them consciously, here and now. You don't have to extinguish totally the wish to die. You just have to lobby to swing the vote the other way. If you intervene properly, you can save lives. □