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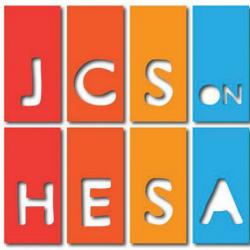
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Rethinking the Study of College Student Suicide

Critical Suicidology and Higher Education

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— Abstract —

This paper introduces Critical Suicidology to higher education, exploring how this perspective can help understand and prevent college student suicide. Critical Suicidology critiques the creation of truth and knowledge in the study of suicide and demonstrates that suicide has been socially constructed. Assumptions within extant literature limit our understanding of suicide and preclude critical examination into the role of higher education on suicidal thoughts among college students, particularly those from marginalized populations. This paper argues that higher education scholars' contextual knowledge of the student experience can engender critical studies that explore college student suicide within the context of higher education, examining the role of structural inequalities on the experience of suicide in college. Higher education scholarship on this topic can help create suicide prevention programs that affect social change and remain responsive to the needs of marginalized student populations, many of whom are disproportionately affected by suicide and suicidal thoughts.

Keywords: suicide, critical suicidology, college students

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In a typical 2020 college recitation section of 30 undergraduates, four of the students have seriously considered suicide within the previous year (American College Health Association [ACHA], 2019). In 2008, only 6.8% of these students—or approximately two of them—would have seriously considered suicide within the previous year (ACHA, 2008). The prevalence of suicidal thoughts among college students parallels an influx of serious mental health concerns within this population. Scholars, practitioners, and journalists call this a *college mental health crisis* (Turnage, 2017; Warner, 2019). Indeed, the surge of students who experience suicidal thoughts represents a public health crisis that should concern everyone in higher education.

Scholars across disciplines frequently engage in calls to action about college student suicide (Francis & Horn, 2017; Keeling, 2014; Westefeld et al., 2006). These calls to action, along with research on this topic, have existed throughout the previous two decades (Eisenberg, Gollust, Golberstein, & Hefner, 2007; Kadison & DiGeronimo, 2005; Kitzrow, 2003; Mowbray et al., 2006). Unfortunately, the problem persists. Thus, in this paper, I contend that higher education scholars (HES) must consider college student suicide as a critical issue that should be explored within the higher education context. I demonstrate that extant research on this topic represents a single, post-positivist ontology. My primary purpose is to introduce HES to critical suicidology.

Several important terms used throughout this paper require definition. *Suicidal ideation* or *suicidal thoughts* refers to thoughts of acting to end one's own life (Nock et al., 2008). *Suicidal* is used as a "catch-all" term that represents a spectrum of "suicide-related cognitions, emotions, and behaviors" (Silverman, 2016, p. 19). A *suicide attempt* refers to engaging in self-injurious behavior with some intent to end one's own life (Nock et al., 2008). *Contemporary suicidology* is the dominant study of suicide across disciplines (Marsh, 2010, 2016). *Critical suicidology* is a nascent body of literature and theoretical framework that

critiques contemporary suicidology and proposes critical, qualitative suicide studies (Marsh, 2010; Hjelmeland, 2016; White, 2017).

College Student Suicide: A Critical Issue for Higher Education

Higher education scholars seek to explain the "vast constellation of issues that broadly affect American higher education," (Martínez-Alemán, Pusser, & Bensimon, 2015, p. 2) including "multifaceted and complicated issues that determine access to, enrollment in, and graduation from our many institutions" (p. 2). With over one-tenth of college students experiencing suicidal ideation, this represents a growing cluster in this constellation (ACHA, 2019; Mortier et al., 2018). Through the implementation of campus-wide suicide prevention and intervention programs, higher education institutions affirm that suicide prevention is everyone's business. In this climate, HES must accept that suicidal ideation impacts many of the student learning and development outcomes they study. It is no longer acceptable to consider academic learning and mental health as "unrelated and separate spheres" (Washburn & Mandrusiak, 2010, p. 106). Persistence to graduation—a key outcome many HES study—is an area where the spheres of academic learning and mental health overlap (Martínez-Alemán et al., 2015). Higher education scholars can no longer overlook the experience of suicidal ideation in their scholarship.

Despite the abundant research on persistence, HES neglect the similarities between inequitable persistence rates among marginalized student populations and the inequitable rates of suicidal ideation among these same students. While the prevalence of suicidal ideation among the general population of college students remains concerning, the overrepresentation of suicidal ideation among marginalized populations is, frankly, alarming. LGBTQ-identified students, multiracial students, Students of Color, and women-identified students are more likely to experience suicidal ideation than their cisgender, heterosexual, White male peers (ACHA, 2019; Chesin & Jeglic,

2016; Lipson, Kern, Eisenberg, & Breland-Noble, 2018; Mortier et al., 2017; Woodford et al., 2018). These disparate levels of suicidal ideation mirror the disparate rates of persistence to graduation among students from marginalized populations. Students of Color, for example, have lower graduation rates than their White peers (Gershenfeld, Hood, & Zhan, 2016). Persistence outcomes for LGBTQ students remain largely unknown due to a void in the literature (Blumenfeld, Weber, & Rankin, 2016).

There is a dearth of research exploring connections between college students' suicidal ideation and persistence to graduation. Limited studies do, however, demonstrate connections between mental illness, suicidal ideation, and grade point average (GPA) (DeLuca, Franklin, Yueqi, Johnson, & Brownson, 2016; Eisenberg, Golberstein & Hunt, 2009). Unsurprisingly, students with suicidal ideation have lower GPAs than their peers (DeLuca et al., 2016). Scholars have not yet connected the dots between suicidal ideation and persistence, but the relationship between GPA and persistence to graduation is well established; students with high GPAs are more likely to graduate (Gershenfeld et al., 2016). There is a need to fill this void in the literature by exploring relationships between suicidal ideation and persistence to graduation.

Students hold various intersecting identities that increasingly do not conform to the traditional, historical understandings of who attends college (Shadick & Akhter, 2013; Thelin, 2011). As the student population continues to diversify, it becomes more urgent to address the inequitable outcomes experienced by students with marginalized identities (National Center for Education Statistics, 2015). Scholars must look at previously underexplored areas of research and, in particular, research pertaining to suicidal ideation to understand inequitable outcomes such as persistence. Higher education scholars are well-positioned to engage in this complex, interdisciplinary line of scholarship. In fact, some HES have studied suicide among college students, (see e.g., Wong,

Brownson, & Schwing, 2011; Woodford et al., 2018) but these studies adhere to the dominant paradigm, which focuses on risk.

Suicidal Ideation among College Students

Most studies of college student suicide are risk factor analyses, which identify populations at risk of suicidal ideation or suicide attempts. Pathology and social demographics constitute two of the most frequently studied variables among all suicide risk factor analyses (Franklin et al., 2017). While I refrain from an in-depth discussion of pathological risk factors here (see Li, Dorstyn, and Jarmon [2019] for a systematic review of college student suicide risk factors), correlations exist between mental illness—primarily anxiety and depression—and suicide, both among the general population and among college students (Franklin et al., 2017; Hayes et al., 2019). Instead, I focus on two main demographic groups identified as at risk for suicidal ideation.

Gender and Sexuality

Researchers have found that certain gender and sexuality identities correspond with an increased likelihood of experiencing suicidal ideation. Lesbian, gay, bisexual, trans*, and queer (LGBTQ) students are at higher risk for suicidal ideation than their cisgender, heterosexual peers (Mortier et al., 2017; Woodford et al., 2018). In a study exploring depression and suicide among LGBTQ college students, 10% of trans* (i.e., transgender, genderqueer, gender nonconforming, and two-spirit individuals [Tompkins, 2014]) students reported having attempted suicide (Woodford et al., 2018). Five percent of cisgender LGBTQ students reported a suicide attempt within the previous 12 months (Woodford et al., 2018). In contrast, the 12-month suicide attempt rate among the general college student population hovers at approximately 2% (ACHA, 2019). Furthermore, among students, women experience slightly higher rates of suicidal ideation than men, with 14.1% and 12.6% reporting seriously considering suicide within the last year,

respectively (ACHA, 2019).

Race and Ethnicity

The literature on suicide among college students often considers the role of race and ethnicity. Studies demonstrate that Students of Color experience suicidal ideation more frequently than their White peers. Native American students ideate suicide at a greater rate than any other ethnic group; one study found that 15% of Native American students contemplated suicide within the previous 12 months (Muehlenkamp, Marrone, Gray, & Brown, 2009). That study is now over a decade old, the figure is likely higher now; suicidal ideation and attempts have increased among the general student population over time (ACHA 2008, 2019). Multiracial students are also significantly more likely to experience suicidal ideation than their White peers; 10.8% of multiracial students considered suicide, compared to 7.7% of their White peers (Lipson et al., 2018). Black students experience suicidal thoughts at a higher rate than their White and non-Black peers (Eisenberg, Hunt, & Speer, 2013). Yet, among the general population, the prevalence of suicidal thoughts is lower among the Black population than other populations (Eisenberg, Hunt, & Speer, 2013).

While more studies demonstrate that Students of Color and LGBTQ students report significantly higher incidences of suicidal ideation than their White, cisgender, heterosexual peers—they rarely explain *why*. The concerning data about demographic groups at risk for suicidal ideation reveal an urgent need to better understand how social inequalities reproduced on college campuses impact marginalized student populations. Without critical exploration of the antecedents of suicidal ideation among these groups, people may erroneously assume that suicidal ideation among marginalized populations is an exclusively individual problem, rather than a symptom of a social one. This is because studies connect the prevalence of diagnosable mental illnesses, particularly anxiety and depression, among marginalized students, to the

prevalence of suicidal ideation among marginalized students (Lipson et al., 2018; Woodford et al., 2018). In other words, many studies imply an individual impetus—rather than a social one—for the development of mental illness and, subsequently for suicidal ideation among particular demographic groups. I question whether HES will accept this.

Some HES have begun dissecting these data to understand the role of discrimination, acculturation, ethnic identity, and microaggressions on college students' mental health outcomes—including suicide-related outcomes (Chang et al., 2017; Woodford et al., 2018). Higher education scholars should continue challenging the notion that students from marginalized populations experience more suicidal ideation simply because have higher rates of mental illness. These scholars can capitalize on their comprehensive knowledge of the higher education context to interrogate the prevalence of suicidal ideation among marginalized student groups. To begin this effort, I discuss and critique *contemporary suicidology*—the dominant paradigm in the study of suicide.

Contemporary Suicidology

Contemporary suicidology refers to the dominant ontological, epistemological, and methodological approach to the study of suicide. Thomas Joiner, the editor of the preeminent suicidology journal, summarized the approach to research in this field, writing that scholars should prioritize the “gold standard” (Joiner, 2011, p. 471) in research methods—randomized controlled trials. According to Joiner (2011), hypothesis testing with fair tests advances science, scholarship, and “human affairs more generally” better than “any known alternatives” (Joiner, 2011, p. 471). While Joiner fails to explicitly articulate a preferred ontology, these statements clearly align with post-positivism (Hjelmeland & Knizek, 2010; Kral & White, 2017).

With such preferences in this area of research, suicidologists utilize quantitative data to conduct inferential statistical analyses on risk factors associated

with suicide (Hjelmeland, 2016). Illustratively, in a two-year period, of the 110 articles published in *Suicide and Life-Threatening Behavior*, only two studies used qualitative data (Hjelmeland, 2016). Neither of these were qualitative studies; rather, both quantitatively analyzed qualitative data.

In addition, within the field of study, scholars rarely articulate the ontological premise guiding their research. Instead, assumptions about suicide remain unstated and tacitly accepted. Marsh (2010) identifies three implicit assumptions that form the foundation of contemporary suicidology: suicide is pathological; the study of suicide is science; and suicide is individual.

The assumption that suicide is pathological engendered the superiority of the “psy” fields—psychology, psychiatry, and psychoanalysis—in the study of suicide. Marsh (2016) asserts that contemporary suicidology was founded on the claim that people who ideate, attempt, or die by suicide have a mental illness. Marsh (2010) describes contemporary suicidology as a “regime of truth formed around a compulsory ontology of pathology” (p. 4), which has led to the social construction of suicide as a symptom of a mental illness. The second assumption frames the study of suicide as science (Marsh, 2010). In this context, science is objective study using the tools of Western science, as previously discussed (Hjelmeland, 2016; Joiner, 2011). The final assumption—that suicide is individual—informs the first two assumptions (Marsh, 2010). It implies that the “ultimate origin of suicide...lies within the person” (Kral, 1998, p. 229). Scholars’ and practitioners’ acceptance of this assumption, in particular, explains the tendency for suicidology to identify individual risk factors and for most suicide prevention programs to target individuals for change (White, 2017).

The contemporary study of suicide contributes invaluable information about risk factors for suicidal ideation and suicide. I do not argue that contemporary suicidology is fundamentally wrong. Nor do I claim that there are no qualitative studies of suicide.

Indeed, some scholars have utilized qualitative methods to study suicide (see e.g., Barnard et al., 2011; Chan, Kirkpatrick, & Brasch, 2017; Chandler, 2019; Sather & Newman, 2016; Webb, 2010). Yet, these methods appear infrequently in the literature because many suicidologists still regard qualitative methods as inferior to quantitative methods. Still, despite the problematic hegemony of contemporary suicidology, this paradigm remains necessary. Indeed, I draw on large scale quantitative data about college student suicide to demonstrate how important this issue is for higher education. Without the methodologies prioritized by contemporary suicidology, these data would not exist. But this hegemonic paradigm should not preclude other ways of learning about suicide among college students. At present, without acknowledging the ontology guiding suicide research in higher education, HES appear to tacitly accept the contemporary suicidological assumptions. Fortunately, an emerging critical paradigm holds the potential for reimagining the study of suicide, generally, and among college students, specifically.

Critical Suicidology

Critical suicidology problematizes contemporary suicidology’s three main assumptions and questions the hegemony of post-positivism in the study of suicide. Marsh (2010) scrutinizes the relationships among power, language, and discourse to deconstruct the concept of truth in the study of suicide and to examine how and why suicidology is ubiquitously positivistic and pathological in bent. Marsh views suicide as a social construct, mapping the relationships among “production, dissemination, and circulation of authoritative knowledge and...certain ‘truth effects’” (2010, p. 3) in the ways that scholars and practitioners conceptualize and treat suicide and suicidal persons.

Readers with a background in sociology may recognize echoes of Emile Durkheim’s *Le Suicide* (Durkheim, 1897/2006), in which the formative sociologist asserted that suicide was neither an individual nor a pathological concern, but rather a social one

(Marsh, 2010). Marsh (2010) maintains that—despite Durkheim’s contributions to the field of sociology—a sociological perspective into the causes of and solutions for suicide remains constrained. Truly investigating the sociological component of suicide would require scholars to accept the fluidity of social life and the unlikelihood of pinpointing specific mechanisms that cause suicide. To commence this complex scholarly undertaking, critical suicidologists critique the individual and pathological model of suicide.

Suicide is Pathological

Building on Marsh’s (2010) work tracing the origins of the construction of suicide, critical scholars problematize the notion that suicide is pathological. Marsh examines the historical foundation of this claim and considers how the supremacy of the biological model excludes social sciences from suicidology. Scholars first defined suicide as a disease in the 19th century (Marsh, 2010). Characterizing suicide as internal and pathological caused suicide to fall under the purview of physicians. Gradually, the construction of suicide evolved to give psychiatrists authority over suicidal persons (Marsh, 2010).

Scholars in contemporary suicidology reinforce this pathological claim about suicide with the 90% statistic—90% of persons who die by suicide allegedly have a mental illness (Cavanagh, Carson, Sharpe, & Lawrie, 2003). In other words, these studies assume a causal relationship between suicide and mental illness, and the propagation of this statistic promotes the idea that only people with mental illness consider suicide (Hjelmeland & Knizek, 2017). Mental illness and suicide can be comorbid, but critical suicidologists caution against assuming the former always causes the latter (Hjelmeland & Knizek, 2017). Although some scholars contest the use and estimation of the 90% statistic, the literature overwhelmingly claims that suicide results from mental illness (Marsh, 2010). As a result, suicide prevention efforts focus almost exclusively on diagnosing and treating mental illness (Hjelmeland & Knizek, 2017; White, 2017).

The Study of Suicide is Science

Critical suicidology critiques the hegemony of the Western scientific method in suicidology, noting several problems with the assumption that suicidology is science (Hjelmeland, 2016). First, despite decades of this kind of research, scholars have not identified clear risk factors predictive of suicide (Franklin et al., 2017). Pathology and demographics—the two most frequently studied variables—are not predictive of an individual developing suicidal thoughts. In other words, scholars have identified correlates of suicidal ideation but not causes. Hjelmeland (2016) argues that quantitative studies add value to the study of suicide, but they fall short of explaining why some individuals with the same risk factors die by suicide while others do not. Second, the prioritization of this type of scholarship does not accommodate different contextual or cultural understandings of suicide (Colucci, 2013; Marsh, 2010). Furthermore, this epistemology precludes persons with lived suicidal experiences from the study of suicide and bases the suicidal experience on White, western males (Hjelmeland & Knizek, 2011; Münster & Broz, 2015). Among college students, White women are overrepresented in survey data concerning suicide (American College Health Association, 2019). According to Lester, (1989) “the history of suicidology is a history of the contributions of white males” (p. 38). Thirty years later, the lack of diverse perspectives in suicidology is an ongoing concern.

Moreover, the prioritization of the Western scientific method stems from the belief that it is the “all-embracing method for gaining an understanding of the world,” rooted in the colonization of and by academia (Tuhiwai-Smith, 2012, p. 68). Tuhiwai-Smith’s (2012) work on centering Indigenous peoples’ experiences with research and deconstructing the colonialist legacy of Western, empirical research is well-suited to a discussion of suicide research. While the field of critical suicidology is relatively new, some of the only examples of suicide research and prevention using critical methodologies and frameworks exist in

partnerships with Indigenous populations (Bantjes & Swartz, 2017; Kral & Idlout, 2016; Wexler & Gone, 2012, 2016). These studies refute evidence-based suicide prevention programs because they do not apply to Indigenous communities (Kral & Idlout, 2016). In particular, the researchers and participants critique mental health treatment as the primary suicide prevention measure because the data supporting those prevention strategies come from White populations (Wexler & Gone, 2016).

Experimental scientific research conducts research on subjects. For a topic as complex and personal as suicide, the imbalanced power relationship between the researcher and the subject presents a problem. According to Tuhiwai-Smith (2012), objects of research in the scientific tradition have no voice, and therefore, they “do not contribute to research or science” (p. 64). Furthermore, she states, “the logic of the argument would suggest that it is impossible, ridiculous even, to suggest that the object of research can contribute to anything” (Tuhiwai-Smith, 2012, p. 64). Indeed, contemporary and critical suicidologists debate the extent to which they should include the voices of suicidal persons in their research (Bantjes & Swartz, 2019; Hjelmeland & Knizek, 2011). A suicide attempt survivor turned suicidologist, David Webb (2010) illustrates the limitations of traditional methods of studying suicide, writing:

The academic and professional discipline of suicidology strives hard to be an objective science, but in doing so renders itself virtually blind to what are in fact the most “substantial” and important issues being faced by the suicidal person...when I look at the academic discipline of suicidology, it feels as if the expert “suicidologists” are looking at us through the wrong end of their telescope. Their remote, long-distance (objective, empirical) view of suicide transforms the subjective reality and meaning of the suicidal crisis of the self – that is, the actual suicidal

person—into almost invisible pinpricks in the far distance. (p.40)

As suggested by Webb’s (2010) observation, post-positivist methods cannot fully account for the complexity of human suffering and suicidal despair (White, 2016). Thus, scholars must challenge the hegemony of contemporary suicidology—which permeates higher education—to better understand suicide and suicidal ideation among college students and, ultimately, transform higher education into a place that alleviates these experiences.

Suicide is Individual

The “myth” that suicide originates within the mind of an individual (Kral, 1998, p. 229) isolates suicidal persons and the act of suicide from their context. This myth overlooks the role of issues such as structural violence, exclusion, and oppression on suicidal experiences (Marsh, 2016). Without questioning this assumption, one believes that the “conscious decision to end one’s life is...an aggregate of personal factors for a given individual” (Kral, 1998, p. 229). Kral (1998) asserts that, no matter the discipline involved in the study of suicide, the factors examined ultimately point to the “locus of the origin of the idea of suicide” (p. 229) within the mind of the individual. This “origin myth” (Kral, 1998, p. 229) limits the ability to study and prevent suicide because it focuses on identifying individual factors and ignores the sociocultural contexts involved in suicide.

Compounding the problematic construction of suicide as individual, scholars based this conceptualization on White, middle-class, Western males (Münster & Broz, 2015). This normalizes the suicides of this archetype of Western research, subsequently comparing all suicides to this “gold standard” of suicide (Münster & Broz, 2015, p. 3). The meanings of suicide differ across cultures and time. One cannot, therefore, accept the implication that all suicidal persons conceptualize suicide in the same way (Münster & Broz, 2015). Doing so ignores the complexity of

suicide and the relationship that suicidality and suicide have with society and subjugates all non-White, non-Western, non-male persons to an inferior experience of suicidality (Münster & Broz, 2015).

Possibilities for Critical Suicidology

In addition to critiquing contemporary suicidology, critical suicidologists suggest an alternative approach. Critical suicidologists question why suicide is only understood as a self-destructive force originating from an individual when historical, social, and contextual factors may also contribute to suicidality (Hjelmeland & Knizek, 2010; Marsh, 2016). These scholars contend that the current suicide prevention strategies “target individuals for change but leave the specific social, political, and cultural contexts of people’s lives—including the corrosive effects of structural inequalities—unaccounted for” (White, 2017, p. 472). The aim of critical suicidology is to subvert the dominant discourse about suicide and promote social justice by disrupting the institutions producing and reproducing inequality, oppression, and violence (White, 2017).

Rather than rejecting medical, post-positivist studies of suicide, critical suicidologists call for more methodologies, theories, and frameworks in the study of suicide. Moreover, they envision suicidology as a multidisciplinary field inclusive of survivors of suicide attempts and those bereaving suicide. Research questions in suicidology would consider language, power, and institutions, rather than only focus on individuals (Marsh, 2015).

Additionally, critical suicidology invites scholars to embrace the complexity and tension of suicide. Suicide is not one thing to all people. White (2017) claims that suicide is always a social act. For some, suicide may be a political act, for others a weapon, an escape, or a release. Furthermore, suicide is a paradox (White, 2016, 2017). The paradoxical nature of suicide is particularly striking among college students—individuals committing to their future through the pursuit of higher education who simul-

taneously consider self-inflicted death. This tension invites critical explorations of these students’ experiences. How might the study of suicide among college students evolve if HES acknowledge that suicide is a social construct with different meanings for different students?

White (2017) also calls for centering collective ethics in suicidology. This involves interrogating social institutions that influence suicidal individuals, for example, the social constructs that are the sources of human suffering. Within the college context, critical suicidology offers the opportunity to explore how aspects of the social institution of higher education influence suicidal students. Furthermore, centering collective ethics and social justice in suicide research among college students can create an even greater sense of urgency to confront inequities on campuses.

Finally, White (2017) believes that current suicide research questions are “deadening” (p. 478). She imagines scholars contemplating “life activating questions” (White, 2017, p. 478). An example of such questions includes:

What if suicidal thoughts were no longer understood as a giving up on life or the opposite of life (and thus something to be forbidden) but instead were seen as particular forms of life or life-activating practices that provoked vital critique, freedom, rebellion, solidarity and transformation? (White, 2017, p. 478).

Critical suicidology offers an opportunity to reimagine the study of suicide by calling on scholars to rethink what they know about suicide. Probing the assumptions about suicide and rethinking the types of questions asked in suicidology can transform understandings of suicide. Subsequently, these questions can transform suicide prevention efforts by engaging with social institutions that contribute to suicidal experiences and reaching suicidal persons in ways that surpass the extant suicide prevention models (Shan-

nonhouse, Lin, Shaw, Wanna, & Porter, 2017).

For HES, these proposals invite inquiry that transcends statistical explanations of the significance of numerous variables on suicidal thoughts among college students. Currently, college students who experience suicidal thoughts are like Webb's (2010) pin-pricks in the distance—evaluated as an accumulation of variables that may allow researchers to explain traits correlated with their suicidality. Scholars should not prioritize quantitative methods at the expense of qualitative methods, especially in trying to understand an issue as complex as suicide. Instead, using multiple, complementary methodologies can advance suicidology. Critical scholarship can help researchers understand how injustices within the college environment influence students and engender or compound suicidal thoughts. This approach can also illuminate the discourse on suicide that exists on college campuses and how this discourse shapes policies and practices. Studying prevention and intervention policies can expose whether they “target individuals for change” (White, 2017, p. 472) without addressing how context contributes to suicidal thoughts. Higher education scholars should undertake this critical inquiry; their familiarity with the higher education context and students' lived experiences provides a rich foundation upon which to explore suicide.

Rethinking Campus Suicide Prevention and Intervention

The literature exploring college student suicide remains dominated by a medical model focusing on mental illness. Consequently, campus prevention and intervention programs prioritize professional mental health treatment to mitigate the risk of suicide (Shannonhouse et al., 2017). Contemporary suicidology constrains both the development and evaluation of prevention programs. Moreover, despite the proliferation of suicide prevention programs across the United States, scholars know very little about their effectiveness (Wolitzky-Taylor, LeBeau, Perez, Gong-Guy, & Fong, 2019). Scholars know even less about

prevention outcomes for students with marginalized identities. Because the hegemony of contemporary suicidology obscures the stories of students with suicidal ideation, suicide prevention strategies do not incorporate their knowledge.

Scholars have not critically analyzed the social institution of higher education to understand its role in the suicidal ideation of students. Thus, HES must turn a critical lens inward to understand higher education's, as well as their own, potential complicity in student suicidality. In brief, critical suicidology can illuminate ways that the dominant discourse about suicide pervades college campuses and how students navigate this environment.

Challenges and Limitations

Several challenges exist that may hinder HES's research of college student suicide and, in particular their implementation of critical suicidology in this work. First, HES may feel ill-equipped to study suicide. I encourage scholars who examine persistence and graduation issues—particularly those who explore these issues through the lens of race, gender, sexuality, ability, spirituality, or other identities—to consider that suicidal ideation impacts the students they study. Higher education scholars cannot continue overlooking suicidal ideation when it affects nearly 15% of today's college students (ACHA, 2019). Higher education scholars incorporate critical theory from various fields into their praxis. It is time to incorporate a critical approach to studying suicide.

The ethical and moral considerations inherent to suicide research pose a second challenge to this work. For example, how should one conduct suicide research with a person who has experienced suicidal ideation? Suicide researchers must especially engage in reflexivity throughout the research process (Polanco, Mancías, & LeFeber, 2017). That is, these scholars must critically examine their own assumptions about suicide and share with participants their positionality, as well as discussing their positionality in the reporting of data (Marsh, 2018; Polanco et al., 2017). Mc-

Cabe and Holmes (2009) describe critical qualitative inquiry as emancipatory in nature and assert that any research with “an agenda for change is clearly political” (p. 1520). Critical suicidology is political; it is not objective. Researchers must situate their historical and social positions; this undoubtedly impacts the research process (Denzin, 2017). If done well, the research experience can positively affect researchers and participants. Conducting critical research about suicide requires scholars to recognize that the aim is to create change and empower both researchers and participants (McCabe & Holmes, 2009).

A final challenge in HES’ research with students about their suicidal experiences is the potential for a false dichotomy to emerge—one that frames contemporary and critical suicidology as conflicting. This potential conflict reveals itself in suicide literature. Bantjes and Swartz (2019) explain that some critical suicidologists assert that “real” knowledge about suicide can only come from individuals with suicidal experience; therefore, contemporary suicidology provides false knowledge. This position overlooks how both approaches offer valuable knowledge about suicide. I argue that one should not come at the expense of the other; scholars can practice both.

Bantjes and Swartz (2019) argue that individuals who have severe suicidal ideation or attempted suicide may have altered perceptions during their time of crisis and that these perceptions may affect their narratives. Therefore, some researchers consider these individuals’ narratives unreliable. Bantjes and Swartz (2019) articulate several assumptions underlying qualitative research that attempts to make “truth claims about the causes of human behavior based on first-person narratives” (Troubling assumptions, para. 1) These assumptions include the idea that individuals are “knowledgeable agents” (Bantjes & Swartz, 2019, Troubling assumptions, para. 1) who are willing and able to provide reliable and valid accounts of their conduct and the conduct of others. Furthermore, such research assumes individuals fully understand their own motives (Bantjes & Swartz, 2019).

These concerns echo concerns inherent to any qualitative research in that individuals’ retellings of events may differ from what actually transpired (Pasupathi, Stallworth, & Murdoch, 1998). The important distinction here is that qualitative research involving individual narratives attempts to convey the *meaning* of events and not the *facts* about them (Ellis & Bochner, 2000).

Bantjes and Swartz (2019) subsequently propose that narratives of suicide from individuals with lived experience should not supplant extant research about suicide. They call for the triangulation of individual accounts with other available information to expand the knowledge of suicide. I agree. The issues of reliability in qualitative research are far from settled, particularly within critical suicidology. But scholars will never know what types of knowledge critical suicidology can reveal if they fail to untangle these issues and engage in this important work.

It is Time to Turn the Telescope

I argue that HES must pursue empirical research with college students to understand the suicidal experiences of college students. Most studies of college student suicide rely on the methodologies advanced by contemporary suicidology, without considering the history of the field or its assumptions about suicide. As a result, campuses across the United States continue to view suicide as an individual and pathological issue. The resultant prevention and intervention strategies adhere to a linear process that ultimately guides students to mental health treatment—seen as the primary, if not exclusive, means of addressing suicidal ideation.

Higher education scholars should challenge this hegemonic construction of suicide and suicide prevention. Suicide affects the college experience. Therefore, HES must consider this experience in their scholarship by, for example, critiquing the social institution of higher education and its role in perpetuating social inequalities that contribute to suicidal ideation. Others might compare how students experience sui-

cidal ideation and how higher education institutions conceive of and respond to suicidal ideation. Given the disparate levels of suicidal ideation and suicide risk among students from marginalized communities, HES must carefully investigate how these students view suicide and whether their views align with how higher education institutions construct suicide.

College students with suicidal thoughts remain pinpricks in the distance. Scholars view their suicidality through the wrong end of the telescope, studying it in isolation from the contexts in which students live (Webb, 2010). If HES endeavor to study the “vast constellation of issues” (Martínez-Alemán et al., 2015, p. 2), affecting higher education, they should turn the metaphorical telescope in the right direction. Suicide is one of the stars in the constellation; researchers cannot continue to view it from a distance.

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