

Undoing Suicidism: A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide by Alexandre Baril

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Résumé de l'article

Les initiatives et les stratégies de prévention du suicide se concentrent sur une approche curative et réhabilitative qui cause souvent du tort au sujet suicidaire et nie son expérience et ses sentiments. Dans *Undoing Suicidism : A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide*, Alexandre Baril remet en question les attitudes dominantes à l'égard du suicide, aborde le suicidisme comme étant une forme d'oppression qui réduit le sujet suicidaire au silence et délégitime sa souffrance. Il propose ensuite une approche interdisciplinaire qui affirme le droit au suicide et la validité des sentiments du sujet suicidaire.

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COMPTE RENDU / REVIEW

***Undoing Suicidism: A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide* by Alexandre Baril**

Katharine Morrill^a

Résumé

Les initiatives et les stratégies de prévention du suicide se concentrent sur une approche curative et réhabilitative qui cause souvent du tort au sujet suicidaire et nie son expérience et ses sentiments. Dans *Undoing Suicidism: A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide*, Alexandre Baril remet en question les attitudes dominantes à l'égard du suicide, aborde le suicidisme comme étant une forme d'oppression qui réduit le sujet suicidaire au silence et délégitime sa souffrance. Il propose ensuite une approche interdisciplinaire qui affirme le droit au suicide et la validité des sentiments du sujet suicidaire.

Mots-clés

suicide, suicide assisté, suicidisme, études trans/queer, études interdisciplinaires, réforme juridique

Abstract

Suicide prevention initiatives and strategies commonly focus on a curative and rehabilitative approach, which often causes harm to the suicidal subject and negates their lived experience and feelings. In *Undoing Suicidism: A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide*, Alexandre Baril challenges dominant attitudes towards suicide, discusses suicidism as a form of oppression that silences the suicidal subject and delegitimizes their suffering, and proposes an affirmative interpersonal and legal approach through the lens of trans, queer, and disability studies.

Keywords

suicide, assisted suicide, suicidism, trans/queer studies, interdisciplinary studies, legal reform

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The phenomenon of suicide has been present for many millennia, and we have entertained numerous ethical and philosophical debates on this topic over the same period (1). However, Alexandre Baril was the first to put forward a concrete theory — suicidism — to identify the ways in which suicidal people have long been subject to various forms of marginalization, otherwise referred to by Baril as suicidist violence (2,3). The concept of suicidism, which in broad terms refers to the oppression experienced by suicidal people as a result of societal, interpersonal, medical, and structural pressures to get well and to overcome their suicidality, forms the basis of the very system Baril attempts to unravel in *Undoing Suicidism: A Trans, Queer, Crip Approach to Rethinking (Assisted) Suicide*.

An essential part of Baril's arguments against suicidism is his hypothesis that suicide prevention initiatives, frequently aimed at rehabilitating the suicidal patient, do more harm than good and encourage rather than discourage suicide attempts — particularly where marginalized groups, such as queer, trans, disabled, and Mad (i.e., mentally ill people, psychiatric patients) people are concerned. This is because such initiatives are, as Baril explains, often intrinsically linked to the idea that everyone should desire to live and remain alive, and to capitalist ideology surrounding productivity and contribution to the economy. Furthermore, suicidal people are expected to assume the burden of reassuring others about their own distress, all while suffering (and dying) alone and in silence, fearful of the many consequences of speaking up, such as shame and ostracization, forced institutionalization, and incarceration (2).

In deconstructing the above, and as Baril points out, *Undoing Suicidism* proposes ways of thinking about suicide and suicidal people that differ markedly from the sociological, medical, and legal norms of discourse on suicide, concepts which refer to the way suicide is typically thought about and approached. *Undoing Suicidism* aims not only to challenge and refute suicidism and the resulting dynamics of oppression but also advocates openly for supporting assisted suicide for suicidal individuals. It is, however, important to note that within the Canadian context from which Baril writes, current laws on assisted suicide and MAID are problematic because they are ableist and suicidist (2). What Baril is advocating for in this book would constitute a complete overhaul of assisted suicide laws, thereby eradicating many issues intrinsic to the current system.

Undoing Suicidism is divided into two parts, which can be read independently of each other. The first part, "Rethinking Suicide", discusses various existing models through which suicidism is reproduced and points out how these models are problematic and serve to perpetuate suicidist ideology (2). Namely, these models force what he calls "compulsory aliveness" upon the suicidal subject (2). Compulsory aliveness refers to an imposed will to live and to participate in society that delegitimizes the suicidal person's desire to die and denies them their agency and freedom of expression. In the second and third chapters of Part 1, Baril proceeds to apply an intersectional lens to his work. This accomplishes two tasks: 1) demonstrating how suicidism and current suicide prevention strategies disproportionately affect marginalized communities, thereby reproducing structures of oppression, and 2) showing how queering, transing, and maddening our attitudes towards suicide have the potential to be conducive to the eradication of suicidism (2).

The second part of the book, “Rethinking Assisted Suicide”, moves beyond the culturally and medically dominant classification of suicide and assisted suicide as distinct phenomena, and proposes a subversive “suicide-affirmative” approach centred on the agency of the suicidal subject (p.220). Baril wraps up his discussion by reiterating a familiar question (4-6) in the title of his conclusion, “Can the Suicidal Subject Speak?” (2). He calls for solidarity: for the suicidal person to be met with compassion when expressing their desire to die, and to be listened to and respected. He also expresses hope that the legal and medical landscapes will one day reflect a shift towards compassionate and understanding treatment of suicidal people.

Although *Undoing Suicidism* offers limited insight into ways in which suicidist violence is reproduced in the context of everyday interactions, Baril nevertheless accomplishes an eloquent, well-rounded discussion of a difficult subject and expands on the framework of his earlier work on suicidism, providing additional context and a more in-depth discussion of the topic at hand. The intersectional nature of *Undoing Suicidism* is equal parts poignant and thought-provoking; this volume certainly constitutes a significant contribution to the field of suicide studies and makes a compelling argument in favour of reframing the way we think about and interact with suicide and suicidal people. Perhaps Baril’s most striking achievement, however, is the space he has carved out and the avenues for discourse he has created for a community whose voice has long been silenced and overlooked.

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