Foucault Studies

ISSN: 1832-5203
Foucault Studies, No. 16, pp. 208-211, September 2013

REVIEW

Ian Marsh, *Suicide: Foucault, History and Truth* (Cambridge: Cambridge University Press, 2010), ISBN: 978-0-521-13001-1

Over the course of many decades and through writings, lectures, and interviews, Michel Foucault's thought incited controversy. Toward the end of his life, Foucault spoke openly about the virtues of suicide, at one point suggesting that *"[o]ne should* work on *one's suicide* throughout *one's* life."[1] Given that these remarks have been unsettling and fascinating to many since Foucault uttered them, it is perhaps somewhat surprising that a book such as Ian Marsh's *Suicide: Foucault, History and Truth* did not appear decades ago. Although the reader should be warned that the book is not an explication of Foucault's own views of suicide but rather a Foucauldian history of discourses regarding suicide, Marsh's text should be required reading for scholars across the humanities, social sciences, and medical fields with any investment in the study of suicide and its prevention.

Providing a "history of the present" by examining a host of medical, philosophical, theological, and media discourses related to self-imposed death, the book traces the emergence of what the author repeatedly calls a "compulsory ontology of pathology" that is presently articulated with suicide. In true Foucauldian fashion, Marsh painstakingly details the

> conditions of possibility for such a regime, the site of its formation, the means by which relations of power and of power-knowledge acted to produce its truths and justify its practices, and its effects in terms of objects, concepts and subjects formed. (5)

What is perhaps most impressive about Marsh's book is that it manages to be comprehensive without being daunting—no easy task for a book that covers hundreds of years of history in relation to suicide in just over two hundred pages. Throughout the book, Marsh turns to the works of Foucault, highly regarded neo-Foucauldians such as Judith Butler and Nikolas Rose, as well as key primary documents in a remarkable bibliography that more than illustrates the author's competence in exploring the topic at hand. Indeed, the depth and breadth of the archive that Marsh amasses to advance his arguments in *Suicide* is nothing short of staggering.

Marsh's manuscript is divided into four parts. First, the author gives a succinct and accurate gloss of Foucault's oeuvre while outlining a methodological strategy for understanding the current regime of truth in relation to suicide. Here, the author combines the vocabularies adopted by Foucault during the periods in which the French theorist claimed archaeology and

[1] James Miller, *The Passion of Michel Foucault* (New York: Anchor Books, 1994), 351.

genealogy as preferred tools for analysis. For the most part, Marsh fixates on why suicide became a matter of medical pathologization, noting that

> what is sought is more an unsettling of terms upon which certainties are based, by recourse to historical analysis of the discursive elements and practices that come together to form these 'truths' and of the constituting effects of such discursive practices. (7)

Like Foucault, Marsh recognizes that the widely held belief that suicide is pathological is an arbitrary one, and that with other relations of power, its ontology could be otherwise.

The second part of the book does much to examine our present ontology of suicide, detailing the various medical texts that assume the status of truth. Here, Marsh also makes note of the rhetorical strategies, or "the use of certain 'tropes, grammatical forms and argumentative styles'… to achieve credibility and authority in relation to claims that are made" about suicide. (33) Here, Marsh suggests that the discourses related to suicide take on a medical or clinical tone in order to authorize particular practices aimed at suicide prevention. By continuing to cite other studies that are generally in agreement with psychiatry and other medical fields, researchers continue to confirm the taken for granted belief that the suicidal person is either mentally or neuro-chemically imbalanced. Such an empiricist stance to suicide, of course, implies that such statements are presented as "objective, impartial, and impersonal" when in fact they are only pervasive historical biases. (37) Marsh also details how media guidelines about the reporting of suicide continue to perpetuate the assumption that it is a medical or public health concern, noting the recommendations that the World Health Organization disseminates to media outlets.

In part III of *Suicide*, Marsh departs from discourses of the present to engage in a meticulous history of suicide beginning with Ancient Antiquity. Although Marsh avoids a discussion of Socrates' death (perhaps the most dramatized and controversial case of suicide in the Western philosophical tradition that might contest the compulsory ontology of pathology), these passages offer many examples that suggest that our ontology of suicide could be otherwise.[2] Through these examples, the author highlights how suicide was often a politically motivated, relational, and public demonstration usually performed after consulting a suicide counselor. Marsh then moves forward to the seventeenth century, noting how the primacy of the interiority of the subject found in the works of Descartes did much to frame the act of suicide as an individual act. After charting the waning of theological and criminal discourses on suicide, the author details how alienism and the use of the asylum became the preferred methods for dealing with the problem of suicide before turning to the seminal texts of Esquirol to document how self-imposed death was determined to be an internal pathology caused by aberrations of the passions. As one might guess from the book's title, these passages in the book are more historical than critical, offering a survey of the ways in which suicide and the suicidal person were handled in various historical epochs.

For those readers interested in the recently published "governmentality lectures" from Foucault, Marsh's chapter dealing the discursive shifts that occurred at the end of the nine-

[2] See Suzanne Stern-Gillet, "The Rhetoric of Suicide," *Philosophy and Rhetoric* 20 (1987), 160-170.

teenth century will be particularly useful. In this part of the book, Marsh shows how the emergence of psychoanalysis and other discourses that utilized pastoral forms of power challenged the practices of confinement and discipline used by asylum doctors. For a brief moment in history, Marsh argues, the purely medical approaches to suicide were challenged and new subject positions were created to deal with the problem of suicide. Although the author is careful to distinguish the forms of power offered by Foucault, Marsh follows Foucault closely when he writes that "[p]astoral power does not supplant the disciplinary with regard to suicide, but emerges in conjunction as a set of supplementary techniques, ones that enable different ways of thinking and acting in relation to suicide." (171) While the emergence of new discursive regimes might suggest that the asylum merely became an obsolete apparatus for dealing with the problem of suicide and the suicidal person, the author masterfully notes how the emergence of such psy-discourses inevitably became articulated with and extended an ontology of suicide linked to pathology, diffusing the institutions and discourses that took suicide and the suicidal person as their objects.

Although Marsh repeatedly insists throughout this part of the book that the political and resistive qualities to suicide can oppose pathological readings of the practice, very few of these passages are devoted to exploring what Foucault might call "subjugated knowledges" with regard to self-imposed death. In several sections of the book, Marsh does, of course, draw attention to Ancient Roman discourses related to suicide that would be unintelligible if read through the heuristic of the psy-discourses that have come to prevail in our contemporary understanding of suicide. Additionally, Marsh also notes how sociologist Emile Durkheim's *Le Suicide* challenged prevailing treatments of suicide, treating the problem as a "[s]ocial, rather than individual, pathology." (172) Marsh also turns his attention to the controversial critic of psychiatry, Thomas Szasz. Although Szasz has been championed as a proponent of libertarian ideology who has chastised the field of psychiatry for its over-use of psychotropic drugs and other practices that control those classified as mentally ill, Marsh perhaps misses a key opportunity to read Szasz's discourse in productive ways amendable to a Foucauldian framework. Indeed, Szasz's positions could be understood as a contradiction to psychiatry, but this should not be taken to mean that his positions are outside of the rationality of psy-discourses altogether. Indeed, Szasz's valorisation of the personal liberty of the patient over the authority of the medical professional designated to care for the patient is very much consistent with the neo-liberal rationality that Foucault was so keen to critique.

Nevertheless, the alternatives to a pathological reading of suicide are largely relegated to passing remarks without much explication. Even when Sarah Kane's play *4.48 Psychosis* is discussed as a resistive text, suicide is still situated *against* psy-discourses rather than outside of them altogether. In addition to perpetuating many of the assumptions of the psy-discourses, Marsh reads Kane's play as a "critique and subversion of dominant formulations of the self and suicide." (197) In this sense, Marsh leaves open the possibility for reading suicide as a practice that is in no ways articulated with psychiatry and other fields currently taking self-imposed death as its object.

While many might read these aforementioned oversights as grounds for criticizing Marsh's effort, I believe they merely provide others with the opportunity to explore historically and regionally specific case studies that examine the political and resistive dimensions to

self-imposed death. Indeed, practices of self-immolation practiced in defiance of war and pacts among prisoners to hunger strike would seem to be ripe for analysis in the wake of Marsh's text and would only serve to enrich its findings. Despite these omissions (and perhaps because of the productive potential that they might offer), Marsh's book is indispensible for scholars interested in a history of suicide and how a Foucauldian methodology might be put to use.

Finally, in part IV of the book, the author concludes by reiterating his "historicist, nominalist, broadly Foucauldian analytic strategy" and wisely refrains from making any concrete recommendations for experts in the medical field should handle the matter. (233) Very much in line with the spirit of Foucault's own works, Marsh suggests that "[t]he questioning of certainties and the problematizing of particular practices do not lead inevitably to answers as to what should be done." (229) Marsh's book, much like Foucault's own project, simply (and successfully) attempts to unsettle and call into question our taken for granted regime of truth about suicide. Answering criticisms that his views on suicide are socially irresponsible, it is thus critique rather than prescriptive measures that Marsh insists was the aim of his project all along.

If there is a deficiency of the book to note, it is that it endeavours to wrestle with too much of the Foucauldian lexicon all at once. Throughout the work, we are introduced to the subjects, objects, and practices associated with the "compulsory ontology of pathology" in our own historical moment, with little regard for how the different periods of Foucault's thought depart from one another. Moreover, while Marsh is attentive to the late period of Foucault's works on biopolitics and pastoral power, more could be done to elaborate on the ethical dimensions of suicide and suicide prevention. Nevertheless, although many might find the book limited in scope as a result of its title and object of study this text should be celebrated by Foucauldians and other scholars and practitioners with even the most fleeting investment in suicide and suicide prevention.

Daniel R. Mistich
Department of Communication Studies
Terrell Hall 222
University of Georgia
Athens, GA 30601
USA
mistich@uga.edu