

THE BAPTIST ROOTS OF SUICIDE PREVENTION. A DIFFERENT UNDERSTANDING OF THE RIGHT TO LIFE ISSUE

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Abstract:

Even among some suicidologists, the name of the Baptist minister Harry Marsh Warren may not sound very familiar. However, he and The Save-a-Life League played an important role in establishing the roots for suicide prevention services not only in the United States, but also globally. The efforts of the 'forgotten father' of Suicidology Warren can also be considered a plea for understanding the right to life in a different way, more practical, doing everything it takes in order to bring hope to the hopeless, and the desire to continue to live to the suicidal persons.

Keywords: Baptist; Harry Marsh Warren; right to life; suicide prevention; suicidology.

For sure, Baptist believers are being present in numerous areas of public life, militating for civil liberties, religious freedom, and being involved in many pro-life campaigns. It is not that common, however, to associate Baptist believers with being involved in suicide prevention activities; on the contrary, as in many other Evangelical churches, this subject may be considered rather taboo. This makes our assumption even more interesting, because Baptists have been – and still are! – present in this particular area of prevention and crisis intervention, all over the world.

It is well known that suicide may come up in the lives of people from all conditions – „among rich and poor young and old, among people of all religions, all occupations and all social classes. In fact, there is no one group some members of which do not die from suicide”¹. Beyond all doubt, it may

1 Fitzpatrick, Joyce J., „Suicidology and suicide prevention: Historical perspectives from the nursing literature.” (1983): 20.

affect not only the individuals themselves, but also their families, friends, colleagues and communities.

The discussion about suicide, in the broader context of the human rights issue, must be started from debating between the right to life versus the right to die. While the suicidal person may argue in favor of the latter one, the suicide prevention specialist will keep in mind the universal human right to life. But is it, indeed and truthfully, a right to die? For sure it is not to be considered an universal right, like it is the right to life or the right to preserve health, as it may be referred to sometimes. And, if it is not, then the right to life may be considered or invoked even in the situation when someone really desires and even plans to put his/ her own life to an end? To be more specifically, may suicide prevention activities be considered as practical aspects of this issue? As an applied effort to preserve health and to guarantee the individual's right to life, despite his/ her (potentially) temporary refuse to continue his/ her existence? We believe so, and this may be considered one of the main reasons for getting involved in suicide prevention activities. But first we'll have to be aware that the modern Suicidology itself has (at least some) Baptist roots.

The name of Harry Marsh Warren (1861–1940), an American Baptist minister ordained in his 30s, is very rarely pronounced in the world of the young science called Suicidology. Most often, the 'founding father' is being considered Edwin S. Shneidman, as Leenars shows²; however, it is no surprise that some authors pledge for considering the Baptist minister Harry Marsh Warren as 'equally deserving of that title'³. After all, Warren presided the suicide prevention organization called 'Save a Life' since 1906 until he died, in 1940⁴, while Shneidman founded the American Association of Suicidology in 1968⁵, decades after the previously mentioned one. But, as Fitzpatrick notice, it should be no surprise when, 'unlike Shneidman, who published widely during his lifetime and of whom much is

2 Leenars, Antoon A. (edit.), *Suicidology. Essays in Honor of Edwin S. Shneidman*, Jason Aronson Inc., New Jersey, 1993: 3-4.

3 Fitzpatrick, Joyce J., "Suicidology and suicide prevention: Historical perspectives from the nursing literature." (1983): 20.

4 Fox, K., Xieying Huang, E. M. Guzmán, Kensie M Funsch, C. Cha, J. Ribeiro and J. Franklin. "Interventions for suicide and self-injury: A meta-analysis of randomized controlled trials across nearly 50 years of research." *Psychological bulletin* (2020): n. pag.

5 Sarbu, E. A. *Suicidul. O analiza teologica*, Ars Academica, Bucharest, 2011: 36.

known, little information about Warren and the Save-A-Life League survives⁶. However, more recent studies are giving credit to Harry Marsh Warren for founding 'the first suicide prevention organization in the United States and perhaps the world. He created, organized, and led what came to be known as the Save-A-Life League for 34 years - from 1906 until his death in 1940. During much of the first half of the twentieth century, the Save-A-Life League was the only suicide prevention organization in the U.S. It paved the way for later organized suicide prevention efforts, such as the Samaritans and other crisis-oriented services⁷.

Warren's merits in the suicidology area are not to be contested. As a matter of fact, he was so dedicated to this activity that as soon as his organization managed to support itself, he renounced from being a Minister in order 'to devote all his efforts to suicide prevention'⁸. And his efforts were significant, covering most of the aspects from today's suicide prevention activities, with many decades in advance: practicing the active listening with sympathy and empathy, counselling the suicidals and their families, counselling and providing support to the suicide survivors (like, for e.g., sending kids in summer camps, sending Christmas baskets), volunteering and working with volunteers, doing outreach activities, advertising this type of services in the local (New York) newspapers, case referalls and collaborating with hospitals, with the police, churches, courts and even getting involved in social welfare activities like providing shelter or free legal advise⁹. However, some of their activities would not be possible nowadays, due to more strict rules and regulations regarding the personal data protection. For instance, Miller and Gould reports that Warren and his volunteers

'scanned local newspapers for stories about suicide and suicide attempts and made arrangements with churches, courts, hospitals, medical examiners, and the police to interview people known to have attempted suicide (Colt, 2006; Melick, 1940). After these in-

6 Fitzpatrick, Joyce J., "Suicidology and suicide prevention: Historical perspectives from the nursing literature." (1983): 20.

7 Miller, David N. and K. Gould. "Forgotten founder: Harry Marsh Warren and the history and legacy of the Save-A-Life League." (2013). *Suicidology Online*, 4, 12–15. Retrieved from <http://www.suicidology-online.com/pdf/SOL-2013-4-12-15.pdf>

8 *Ibidem*.

9 *Ibidem*.

dividuals were identified, Warren or one of his volunteers would visit them and provide compassion, support, and material items if they were needed. Individuals who were identified as being potentially suicidal but who lived outside of the New York City metropolitan area were sent letters advising against suicide and referring them to a League volunteer in closer proximity (Colt, 2006)¹⁰.

This kind of outreach, however, and other suicide prevention activities as well, has been reported to save 1000 lives per year¹¹, and all of them were done with no governmental or local funding, in the most baptistic way possible. They were relying only on donations and voluntary contributions¹².

Another important aspect which, in our opinion, worth to be brought on the table from a Baptist perspective has to do with Warren's early involvement in the suicide prevention activities. He was deeply impressed by two suicidal episodes – one with a young man who was asking in vain for help from his church leaders, and another one with a young lady who also asked for a minister's help at a night hour, but could not find it:

'According to Colt (2006), one evening in 1906 a twenty-year-old woman staying at a Broadway hotel called the manager and asked to speak to a minister. The manager attempted to contact Warren that night, but was unable to do so. The next morning a maid found the woman unconscious near an empty bottle that contained poisonous elements. The woman was rushed to Bellevue Hospital, where Warren visited her at her bedside. The woman informed Warren that she was from the west coast, had been jilted by her boyfriend, and had come to New York (where no one knew her) to kill herself. This incident, along with an earlier one in which Warren became aware of a young man's death by suicide after some ministers apparently refused him aid, galvanized him into action. Shortly thereafter, Warren said in front of his congregation in the Parish of All Strangers that "I wish that all who believe death is the only solution for their problems would give me the chance to prove them wrong"¹³

10 *Ibidem.*

11 *Ibidem.*

12 *Ibidem.*

13 *Ibidem.*

So, to say it differently, on one hand Warren saw the need of church leaders and other mature Christians to get involve in suicide prevention activities, to be available and willing to respond whenever people needed them, and on the other hand it was a direct recognition that suicidal thoughts were not coming up in non-believers or non-practicing Christians, but also inside of the churches. Therefore, there was an important call for action addressed to both the ones in need (to ask for help, rather than keeping their thoughts and struggles private), and for the ones who can volunteer (to get involved).

But Warren was only important for the practitioners' side of the suicidology; some of his observations and remarks are and needs to be considered as very important for the theoreticians' side, especially because he made them probably in parallel with notorious scientists like Emile Durkheim (author of the famous 1897 *Le Suicide, étude de sociologie*, published in English by Routledge in 1952) and with decades before other researchers managed to document them. Here is a brief summary of what he noticed 'from the ground', as a practitioner, made by Miller and Gould:

'Warren also correctly surmised the connection between economic conditions and suicide rates (Stack, 2000; Yin & Chang, 2009), as well as the fact that cognitive distortions may lead to suicidal behavior (Beck, Kovacs, & Weissman, 1975; Joiner, 2005; Shneidman, 1996). For example, in 1934 he noted that "the underlying cause of self-destruction is an inability to cope with disappointing circumstances. The remedy lies in changing the turbulent thought to rational thinking and a true sense of values and then meet the immediate need responsible for this mental conflict" (Carroll, 1934). Moreover, Warren was aware that suicides peaked in the springtime and were least likely to occur in the month of December (Mellick, 1940)¹⁴.

Similar results on the connection between suicide rates and economic conditions, crisis, professions, economical statuses, wellbeing were reported by consecrated authors and scientists like Emile Durkheim in 1897¹⁵; also, they're found in contemporary studies like the ones conduct-

14 *Ibidem*.

15 Durkheim, Émile. „Sinuciderea” [The Suicide], Bucuresti: Antet (2005): 137-143.

ed by Hassan& Carr¹⁶, Yur'yev¹⁷ and others¹⁸, Pray, Wahlbeck & Mäkinen¹⁹, and in my own research (also a Baptist) on analyzing suicide in post-communist Romania. The theory of incapacity to cope, as we named it in 2017²⁰, without being aware of Warren's inputs, explains how social environment and sociological factors like education and social relations can contribute to solving or not an inner conflict which may degenerate in suicide, particularly if that individual has also a challenging mental health. Also, after analyzing a considerable amount of data produced in 25 years in Romania (starting with the first year after the fall of communism, 1990, until 2014), we came up to similar conclusions to what Warren probably noticed based not on solid, raw data, but on direct or mediate interaction with suicidal people, regarding the seasonality of suicides²¹: most people die by suicide in warmer months like July, May, June, August, April and October, and fewest in colder months like February, January, December and November (in this order).

Suicide prevention as a practical understanding of the right to life. Conclusions and recommendations for practitioners

So many things about suicide prevention work around the world can (and should) be emphasized; when it comes about Harry Marsh Warren and The Save-A-Life League, even more, although there are – for sure – other

16 Hassan, Riaz, și Joan Carr. „Changing Patterns of Suicide in Australia”. *Australian and New Zealand Journal of Psychiatry* 23, nr. 2 (1 ianuarie 1989): 226-229. doi:10.3109/00048678909062139.

17 Yur'yev, Andriy. „Dimension-specific impact of social exclusion on suicide mortality in Europe”. Tallinn University, 2012: 19-20.

18 Yur'yev, Andriy, Peeter Värnik, Merike Sisask, Lauri Leppik, Kaur Lumiste, și Airi Värnik. „Some Aspects of Social Exclusion: Do They Influence Suicide Mortality?”. *International Journal of Social Psychiatry*, 28 decembrie 2011: 236-237. doi:10.1177/0020764011431792.

19 Wahlbeck, Kristian, și Mia Mäkinen. „Prevention of depression and suicide: Consensus paper”. Luxembourg: European Communities, 2008: 11. <http://www.julkari.fi/handle/10024/104411>.

20 Sârbu, E. A. «Conduita deliberat-autoagresivă.» *Abordări teoretice [The Deliberate Self-Aggressive Behaviour. Theoretical Approaches]*. Bucharest: Tritonic (2017): 143-158.

21 Sârbu, Emanuel Adrian. *Pe urmele lui Durkheim: harta sinuciderii în România post-comunistă*. Bucharest: Tritonic (2017): 59-62.

names and organizations far more notorious. Considering the Baptist roots of this particular activity, started and carried out by 'the forgotten father' Warren, we would like to try to underline some of the things which may define not only a Baptist approach to the issue of the Right to Life, which is plenary manifested in suicide prevention activities, but also (taking into considerations or not some confessional/ denominational particularities) to any other organizational context.

1. Suicide prevention activities are, for the suicidal person, one of the most practical way a society may ensure or provide his/ her right to life. It might seem a bit odd to say this, in the context of the suicidal person, when he/ she denies or refuses to live and even declares with some serenity that the life doesn't worth to be lived, but there is an impressive amount of research showing that this perception may be influenced by a challenging mental or psychological condition like depression, not always properly diagnosed or identified²². Also, some authors point out the fact that suicide might be, for the persons contemplating the idea of putting their lives to an end, the only manifestation of such a psychological or mental condition²³. If that is so, then we can say for sure that a successful intervention of the suicide prevention specialist or organization is indeed the only chance a suicidal person might have to guarantee their access to their right to life, and also to their right to health (in the eventuality that, following the intervention, the beneficiary will access medical services, complex checkup and screening, proper counselling and/ or treatment).

2. Faith is not an impediment to get involved and/ or to perform in areas which are connected to the right to life, areas where many professionals may hesitate to step in. On the contrary, faith may motivate professionals to get involved more, to get support easier from the believers' network and to fight for the right to life with such determination that even the hopeless of the hopeless would consider giving it a try. To this conclusion came up numerous suicidologists, starting with founding fathers like Warren or Shneidman, and ending with our recently-proposed (2011)

22 Sârbu, E. A., „Conduita deliberat-autoagresivă.” Abordări teoretice [The Deliberate Self-Aggressive Behaviour. Theoretical Approaches]. Bucharest: Tritonic (2017): 42-50; see also SÂRBU, E. A. Suicidologie integrativă [Integrative Suicidology]. Bucharest: Ars Academica (2011): 75-82.

23 *Ibidem*.

Integrative Suicidology, which aims to approach suicide from a quadruple perspective – bio – psycho – social and spiritual²⁴.

3. An accent on volunteering gives the suicide prevention a more friendly, more humane 'face', facilitating the direct interaction with the beneficiaries. It is difficult to remain indifferent when knowing that the specialist standing in your front, offering support, has no other interest than his/her willingness and availability to help; they will, for sure, be less 'tempted' to have an eye on their watch the shift changing is approaching. Also, it is offering the organization the possibility to develop, to put in practice new (and sometimes out of the box) ideas, cutting the costs and with a higher enthusiasm. However, it is also known that it's not always easy to recruit and work with volunteers, to rely on their constant involvement on a long time. So, keeping a balance between working with volunteers and having good, well trained and motivated employees, is also (at least equally) important.

4. Relying on giving and donations, rather than on public funding is another Baptist principle present in H. M. Warren's activity. While, in numerous Baptist organizational contexts, this may be rooted in the principle of separation between the church and the state, it may be also useful because public funds are not always easy to access and work with, since it is required to increase the bureaucracy and maybe even to hire new specialized employees to do that. In the same time, finding a balance between public and private funding may offer the organizations the opportunity to develop new areas of intervention, new types of services, and also to get more professionalized, with procedures, operations, reports, accreditations and licenses which are not always necessary when relying only on donations and private funds.

5. The right to life perceived from a theological perspective. According to Christian theology, the human life is sacred (see I Corinthians 6: 19-20; also I Corinthians 3:16-17), so valuable than the Creator himself decided to pay the supreme cost so that every believer could live, enjoying its eternal dimension²⁵. Of course, not everyone believes the same, but if

24 Sârbu, E. A. Suicidologie integrativă [Integrative Suicidology]. Bucharest: Ars Academica (2011): 41-53

25 Sârbu, E. A. Suicidul. O analiza teologica, Ars Academica, Bucharest, 2011: 304-307.

there is a chance that this to be found true, then the individual is not granted only the right to (this) life, but also the right to (eternal) life, by faith. In the end, to the suicidal person is granted the opportunity to reflect about his/ her plans and decisions, motivations to live and find the seed of a hope which, in other conditions, he/ she might not be able to find elsewhere.

6. The need for clergy and for church communities to get involved in suicide prevention²⁶. Especially in countries with a high religiosity – like USA or, in Europe, like Poland and Romania, we believe that the involvement of priests and pastors is definitely beneficent. Also, Warren's model emphasizes that it is not enough to preach about it; this should be completed with the need to be constantly available, one way or another, for the ones with urgent needs.

Bible verses like James 5:20 ('Whoever turns a sinner from the error of their way will save them from death and cover over a multitude of sins' - NIV) could motivate a cleric or a community to get involved, knowing that believing suicide is a solution to one's problem is definitely a(n) (fatal) error, from our perspective. Of course, the biblical paragraph refers to the ones who are wandering from the faith; at the same time, believing that suicide could or may be considered a solution to life's problems is also to be considered a wandering from the truth. Suicide is never a solution, but rather the only (or one of the fewest) preventable death. So, turning suicidal persons from their way it is literally saving them from the death and offering them the possibility to live and to 'cover', to solve their own mistakes in an unharmed, better way (for themselves, for their families and for the larger communities they live into).

The churches involvement should also keep in mind that fighting with suicidal thoughts it is not to be blamed²⁷; most of the times, this comes from life experiences different than ours, and they can simply be overwhelmed trying to cope. So, church audience should be encouraged to speak about their suicidal thoughts, and Warren did in his previously mentioned sermon. Rather than keeping their thoughts and inner struggle private, they would better be encouraged to ask for help and speak about it with specialists which are meant to be there for them, to listen, to care and do their best to help. This, of course, would decently assume from the

26 *Ibidem.*

27 *Ibidem.*

very beginning that suicidal thought is not reserved for non-believers, or for non-churchgoers, despite of the fact that the suicide rate is lower in Baptist communities compared to the general population²⁸. Being lower definitely does not mean it does not exist.

Another important aspect at this point would be the call for organizations and churches to provide not only active-listening and counselling, but also practicalities the ones in crisis may need. As Warren's and The Save-A-Life League's living examples emphasized, the suicidal persons need assistance on multiple levels: social, legal, sometimes even financial or in other areas. It is obvious that one organization can't do everything, but networking, identifying local resources and case referral may always be a better option than limiting yourself to counsel or to do active listening. And this could bring a better success rate to the case you're working at and, therefore, grant their right to life and make them understand that the life is worth to be lived, despite their *temporary* challenges.

7. Follow your vision, even whether you may sometimes be considered as one who swim against the current. Remember Warren and the Save-A-Life League: at the moment they started to get involved, they were the only ones in the USA doing this kind of suicide prevention activities. As the time passed, many other people and organizations got involved and done great things, becoming famous for their efforts in suicide prevention. Subsequently, in time, many of the suicidologists became aware and can agree on the importance of Warren's and the Save-A-Life League's involvement, even if they are far less notorious than other persons, names or brands.

Finally, this leads to the need to document the good things done in a better way than 'forgotten father' Warren. Not for becoming famous (the biblical principle from Matthew 6: 3 – 'do not let your left hand know what your right hand is doing' - is still valid), but to be and remain accountant for the ones who support your work and to inspire other to get involved, to bring hope to the hopeless and inspiration to the jaded ones. Not in a triumphalist manner, like in some reports mentioning the thousand of lives saved (because one can actually present no reliable guarantee that the suicidal asking for help did not committed suicide afterwards), but to honestly document the efforts done, describing the actions performed, the process-

28 *Ibidem*, pp. 306-307.

es, the methodological aspects, the limits and the results obtained, so that others could learn, replicate or, if necessary, to avoid some of the potential mistakes.

In the end, one must be aware that it is a common battle we all are (or should be) involved – to make the right to life more than a desiderate – to make it happen. Because each particular and *all* lives matter.

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