

PAPER**PSYCHIATRY**

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Martyrs' Last Letters: Are They the Same as Suicide Notes?

ABSTRACT: Of the 800,000 suicides worldwide every year, a small number fall under Emile Durkheim's term of altruistic suicides. Study on martyrdom has been limited. There has to date, for example, been no systematic empirical study of martyr letters. We examined 33 letters of Korean self-immolators, compared with 33 suicide notes of a matched sample of more common suicides. An analysis of intrapsychic factors (suicide as unbearable pain, psychopathology) and interpersonal factors (suicide as murderous impulses and need to escape) revealed that, although one can use the same psychological characteristics or dynamics to understand the deaths, the state of mind of martyrs is more extreme, such that the pain is reported to be even more unbearable. Yet, there are differences, such as there was no ambivalence in the altruistic notes. It is concluded that intrapsychic and interpersonal characteristics are central in understanding martyrs, probably equal to community or societal factors. More forensic study is, however, warranted.

KEYWORDS: forensic science, suicide, altruistic suicide, martyrs', suicide notes, martyrs' letters, intrapsychic and interpersonal characteristics, suicide bombers

Over a century ago, Emile Durkheim published in his book, *Suicide: A study in sociology*, a typology of suicide that included "altruistic suicide" (1). He presented a scheme of four suicides: egoistic, altruistic, anomie, and fatalistic (he added the latter in a footnote, to be found on page 276 in the 1951 English translation). Egoistic refers to the unhappy person who is not integrated in society. Altruistic is the person who is too integrated—he/she sees the death as a duty or honor. Anomie refers to the estranged person—one's relationship to society is changed; i.e., no longer regulated by the social world. Fatalistic is when the person is too regulated, where the future is blocked—he/she is "choked by oppressive discipline" (the slave who kills him/herself, is an example). The altruistic suicides, sometimes called martyr suicides, were a unique inclusion: the classification includes saints, martyrs, and terrorists, a diverse group of suicides. Durkheim's claim was maybe not a first (2), but the most influential; in his typology, he said that the people who are classified under "altruistic" may be heroes or martyrs, but they are also suicides.

It is estimated that 1.6 million people die by violence each year. Almost half (800,000) of these are suicides; one-third are homicides (530,000) and one-fifth (320,000) are war-related (3). No single factor or event explains why so many people are violent. Violence is multi-determined. Suicide, homicide, and related phenomena are the result of an interplay of individual, relationship, social, cultural,

and environmental factors. Altruistic or martyr suicides are no different. This perspective is sometimes called the ecological model (4,5). First applied to child abuse (6), the model has been applied to a vast array of behaviors, most recently violence, including self-directed violence (3). The model simply suggests that there are different levels, i.e., individual, relationship, community, and societal that influence suicide and thus, by implication, one can understand behavior at various levels (7).

According to the World Health Organization (WHO) (3), "while some risk factors may be unique to particular types of violence, the various types of violence more commonly share a number of risk factors" (p. 13–14). There are multifaceted associations between suicide and several other types of violence, including acts by terrorists or martyrs (3). Yet, the question can be posed, are suicide and altruistic suicide alike? How can we understand violent acts of martyrs? Altruistic suicide, argues Durkheim, is different from the more common, egoistic suicide, as well as from anomie and fatalistic. In his book, *Suicide*, Durkheim argues that in this type of death, the person has the right to kill him/herself. It may, in fact, be his/her duty. Altruism, Durkheim writes, is:

...where the ego is not its own property, where it is blended with something not itself, where the goal of conduct is exterior to itself, that is, in one of the groups in which it participates. So we call the suicide caused by intense altruism *altruistic suicide* (p. 221).

From the ecological model, there are factors beyond the individual and relationship; the more important reasons for altruistic deaths, in fact, may be in the community and society. Yet, there are problems in examining such acts of martyrs from a societal view; Durkheim recognizes some of this, raising *the* question. He writes:

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All these cases have for their root the same state of altruism which is equally the cause of what might be called heroic suicide. Shall they alone be placed among the ranks of suicides and only those excluded whose motive is particularly pure? But first, according to what standard will the division be made? When does a motive cease to be sufficiently praiseworthy for the act it determines to be called suicide? (p. 240)

Is Durkheim's taxonomy useful? The well-known suicidologist, Edwin Shneidman (8) writes, "Durkheim did not just look at the data; he transmuted them into sociological magic by radically reclassifying their internal implication" (p. 54). The reclassifying, Shneidman argues, misses the most essential element. Suicide, according to Shneidman, is more complicated (9). Durkheim does not address intent. Whatever else suicide is, suicide is an intentional act. Durkheim, thus, gives us a sociological order; maybe not *the* only order.

Little, however, has been done since Durkheim's seminal work. To meet this neglect, altruistic suicides, including of suicide bombers, were explored in a special issue of *Archives of Suicide Research*, in 2004 (10–12). The question overall was, "Who are the altruistic suicides?" It was concluded that there was little known about, for example, suicide terrorists (often seen as martyrs by some). Altruistic suicides-to-be are not available to attend clinical interviews, to fill out questionnaires, to subject to laboratory tests; yet, research is needed. Diverse empirical perspectives on what is altruistic suicide and what is not, are needed. There are more altruistic suicides than the suicide bomber. Leenaars and Wenckstern (10) presented some preliminary concepts and issues on the complex topic and offered diverse perspectives on altruistic suicide in the classical Greco-Romans, the Christian Greek Orthodox Neomartyrs, the self-immolators in Vietnam and South Korea, the Muslim suicide terrorist, and India's Jauhar and Sati. The main conclusion was that there was little scientific data, only diverse speculation. There were no empirical studies, but one. This was a study by Ben Park (13). In his study, Park presented a trove of personal documents of martyrs, which can be called altruistic suicide notes or martyrs' last letters. Yet, it did not occur to him to analyze the notes scientifically. That is the purpose of this study; to the best of our knowledge, this is the first empirical study of the last letters of martyrs.

In Park's 2004 paper, he explored the common political and social-political factors involved in acts of self-immolation that took place in Vietnam and South Korea in the latter part of the 20th century. On the basis of suicide notes, diaries, and letters left behind by 22 self-immolators, Park shed some light on the intentions and beliefs of those actors and social significance of the meaning of their acts. In addition to the unique geo-political circumstances of the Cold War era, under which massive numbers of dramatic public acts of self-immolation took place, the symbolic message embedded in the acts of self-immolators was explored. Yet, Park's study had limitations; it was mainly descriptive in nature. Indeed, the main conclusion of the 2004 volume was that research is needed (10). For example, a comparative study is needed with Park's data. In such a study, one will need to compare the psychology, the motives for his sample, to a collection of the more common suicide notes. The differences between altruistic suicides and the common would be critical findings. This is the purpose of this study. Scientists need to do more to meet Durkheim's challenge of "who are the altruistic suicides? Who are all suicides?" Yet, given the lack of data to date, we cannot offer an *a priori* hypothesis; thus, our study will be

exploratory, a first. The answer, we hope will not only help our understanding, but also further the other aims of science—prediction and control.

The question asked is, whether these altruistic suicide notes are the same or different from other more common suicide notes. Mills' method of difference came to our assistance (14). To be more empirical, the senior author developed a logical empirical way of studying notes, having applied the schema to different groups, ages, sex, culture, and so on. The perspective is a multi-dimensional one—does it have applicability to the last letters of "martyrs"? We will explore an answer in this study (15–17).

Suicide Notes

Understanding the act of suicide and motives behind suicide behavior, whether altruistic or otherwise, seems extremely important worldwide (3), and in order to do so, many researchers from around the world have used different methods to study suicide. Shneidman and Farberow (18), Maris (19), and others have suggested the following avenues: national mortality statistics, retrospective psychological investigations (often called psychological autopsies), the study of nonfatal suicide attempts, and the analysis of documents (such as suicide notes). All of them have their limitations and there are problems in obtaining data from many suicides, including martyrs. Yet, each of these methods has been shown to enhance our understanding of suicide and suicidal behavior (20,21). Furthermore, from a cross-cultural perspective, one has to be careful in selecting the methods of study, because of the risk of validity and reliability problems between different cultures (22). For example, national mortality statistics and retrospective psychological interviews carry the risk of underreporting because of stigmatization of self-harm in many countries. Our method will be the study of suicide notes.

Early research (e.g., [23,24]) on suicide notes largely used an anecdotal approach that incorporated descriptive information (25). Subsequent methods, using Frederick's scheme for methods of analysis, have used content analysis, classification analysis, and theoretical-conceptual analysis. Each of these approaches has utility, although Frederick suggested that simple content analysis has limitations (see, e.g., [26]; Ogilvie and his team noted that the word "love" occurs frequently in suicide notes). Classification schemes use data such as age, sex, marital status, educational level, employment status, and mental disorder (see, e.g., [27–30]). However, as Girdhar, and her team, noted there are limitations; the data are not entirely consistent and differences in data collection occur between researchers in different countries. There are also limitations in the generalizability of the findings. The most important finding in the various samples is that comparison of note-writers with non-note-writers has failed to find any consistent differences; thus, one can generalize from people who wrote suicide notes to all people who died by suicide. Only a very few studies have utilized a theoretical-conceptual analysis (25), despite the assertion in the first formal study of suicide notes (18) and in ongoing discussion (31) that such an approach offers much promise. To address this lack, over 30 years ago, the senior author applied a logical, empirical analysis to suicide notes. The method permits a theoretical analysis of suicide notes, augments the effectiveness of controls, and allows us to develop some theoretical insight into the vexing problem of suicide and its diversity.

The method has been previously described in detail (15,32). It treats the notes as an archival source, following an *ex post facto* research design (33). This method would call for suicide notes to

be recast in different theoretical contexts (hypotheses, theories, and models) for which lines of evidence of each of these positions can then be pursued in the data. Carnap's logical and empirical procedures can be utilized for such investigations (34). To date, the theories of 10 suicidologists have been investigated: Alfred Adler, Ludwig Binswanger, Sigmund Freud, Carl G. Jung, Karl A. Menninger, George Kelly, Henry A. Murray, Edwin S. Shneidman, Harry Stack Sullivan, and Gregory Zilboorg. Carnap's positivistic procedures call for the translating of theoretical formulations into observable (specific) protocol sentences in order to test the formulations.

To summarize from a series of empirical studies of the theories of the 10 suicidologists, a number of theoretical formulations/hypotheses ($n = 35$) have been identified to be verifiable, both predictive and discriminative, in various samples of notes (e.g., age, sex, and method used). From these studies, an integrated multidimensional model was proposed (16), consisting psychologically of intrapsychic and interpersonal cluster themes (or stated differently, both an inner and other phenomenology). Research involving Cluster Analysis has shown that these factors can statistically be broken down into the following clusters: Intrapsychic includes unbearable psychological pain (UP), cognitive constriction (CC), indirect expressions (IE; e.g., ambivalence and unconscious processes), inability to adjust (IA; or psychopathology), and weakened ego (Ego); and interpersonal includes disturbed interpersonal relations (IR), rejection-aggression (RA), and identification-egression (IEG; or escape) (see [7,16] for details). To illustrate, a specific protocol sentence under cluster UP, unbearable psychological

pain, reads, "Suicide has adjustive value and is functional because it stops painful tension and provides relief from psychological pain." Table 1 presents a sample of protocol/theoretical-conceptual sentences in each cluster.

Independent research on suicide notes (35), investigations of suicidal Internet writings (36), and biographical studies of suicides (37) have supported, for example, the utility of the approach to note or any narrative analysis. Independent studies of inter-judge reliability (e.g., [35,36]) and decades of study by the first author show that the percentage of inter-judge agreement has been satisfactory (>85%; see [38]). Reliability has also been established in different countries.

Much of our understanding of suicide may be culture specific, not only about altruistic suicide. Thus, caution is needed in the field. Shneidman noted that when making "cross-cultural comparisons, do not make the error of assuming that a suicide is a suicide" ([9], p. 203). There are only a few studies on suicide notes from different countries. In the first cross-cultural study, Leenaars examined 56 suicide notes from Canada and the United States, whose writers were matched for age and sex (39). None of the intrapsychic or interpersonal aspects differed. Subsequently, studies from, for example, Germany (40), United Kingdom (41), Hungary (42), Russia (43), and Australia (44) supported this observation. Primarily, differences were mainly observed within the interpersonal realm. It may be that culture affects these aspects more than issues of pain, mental blindness, and so on. RA is, for example, more often observed in Russian notes (43). There is, thus, some cross-cultural reliability for

TABLE 1—A sample of protocol sentences organized in clusters on intrapsychic and interpersonal aspects.

Intrapsychic

I. Unbearable psychological pain

- 1) Suicide has adjustive value and is functional because it stops painful tension and provides relief from intolerable psychological pain.
- 6) S is in a state of heightened disturbance (perturbation) and feels boxed in, harassed, especially hopeless and helpless.

II. Cognitive constriction

- 9) There is poverty of thought, exhibited by focusing only on permutations and combinations of grief and grief-provoking topics.

III. Indirect expressions

- 10) S reports ambivalence; e.g., complications, concomitant contradictory feelings, attitudes, and/or thrusts.
- 12) Unconscious dynamics can be concluded. There are likely more reasons to the suicide than the person is consciously aware.

IV. Inability to adjust

- 15) S exhibits a serious disorder in adjustment.
 - a) S's reports are consistent with a manic-depressive disorder such as the down-phase; e.g., all-embracing negative statements, severe mood disturbances causing marked impairment.
 - b) S's reports are consistent with schizophrenia; e.g., delusional thought, paranoid ideation.
 - c) S's reports are consistent with anxiety disorder (such as obsessive-compulsive, and posttraumatic stress); e.g., feeling of losing control; recurrent and persistent thoughts, impulses, or images.
 - d) S's reports are consistent with antisocial personality (or conduct) disorder; e.g., deceitfulness and conning others.
 - e) S's reports are consistent with borderline personality; e.g., frantic efforts to avoid real or imagined abandonment, unstable relationships.
 - f) S's reports are consistent with depression; e.g., depressed mood, diminished interest, and insomnia.
 - g) S's reports are consistent with a disorder (or dysfunction) not otherwise specified. S is so paralyzed by pain that life, future, etc. is colorless and unattractive.

V. Ego

- 17) There are unresolved problems ("a complex" or weakened ego) in the individual; e.g., symptoms or ideas that are discordant, unassimilated, and/or antagonistic.

Interpersonal

VI. Interpersonal relations

- 20) S reports being weakened and/or defeated by unresolved problems in the interpersonal field (or some other ideal such as health, perfection).
- 23) A positive development in the disturbed relationship was seen as the only possible way to go on living, but such development was seen as not forthcoming.

VII. Rejection-aggression

- 25) S reports a traumatic event or hurt or injury (e.g., unmet love, a failing marriage, and disgust with one's work).
- 28) S feels quite ambivalent, i.e., both affectionate and hostile toward the same (lost or rejecting) person.
- 30) S turns upon the self, murderous impulses that had previously been directed against someone else.
- 31) Although maybe not reported directly, S may have calculated the self-destructiveness to have a negative effect on someone else (e.g., a lost or rejecting person).

VIII. Identification-egression

- 33) S reports in some direct or indirect fashion an identification (i.e., attachment) with a lost or rejecting person (or with any lost ideal [e.g., health, freedom, employment, all A's]).
- 35) S wants to egress (i.e., to escape, to depart, to flee, to be gone), to relieve the unbearable psychological pain.

the theory; this is rare in suicidology. Yet, there are questions about how different suicide in the United States, Canada, and so on, is compared with altruistic suicide in any of these countries. We simply do not know whether a suicide is the same or different than an altruistic one. This is the purpose here.

To the best of our knowledge, there have been no published comparisons between suicide and altruistic suicide in any country. Thus, the aim of this study is not only to describe the last letters of martyrs (or suicide notes of altruistic suicides), but also to determine whether any psychological differences (and similarities) are evident in the suicide notes from a more general population of the United States (the United States has been the basis for all comparisons to date in international studies of suicide notes.) However, given the exploratory nature of this study, we cannot make any predictions, only allow Mills' method of difference to guide us (14).

Method

The problem in the current area of study is obtaining the very data themselves. There are problems in sampling, generalizability, etc. The suicide notes and other personal documents used in this study of martyr letters come from a variety of sources, including leaflets, newspapers, magazines, and secondary publications. Thirty-three Korean self-immolators left behind the letters or notes. Many of the last letters left behind by Korean self-immolators came from an underground publication, *Everlasting Lives* (Sal 'Aseo Ma'nra Rina'a), compiled by the Ad Hoc Committee for the Preparation of a Memorial Service for the Nation's Martyrs and Victims of Democratization Movement (45).

These notes, of course, represent the testimonies of only a number of the self-immolators who gave their lives in what they perceived to be the cause of democracy and national unity in South Korea in the last half of the 20th century. No claim is being made that this sample is representative of this larger group. There are no other sociodemographic variables available.

The martyr notes were matched to an adult ($n = 33$) American sample of suicide notes; this U.S. sample was derived from over 2000 suicide notes (15). The 2000 notes consist of subsamples of notes; for example, 721 original Shneidman and Farberow (18) notes and the complete sample of notes for 1983–1984 from the Los Angeles County Coroners' Office. The archive extends beyond American; however, for the U.S.-based sample, the notes from the 1990s, 1980s, and 1970s were reviewed and 80 notes were consecutively selected on the basis of representing four age groups until each group had 20 notes, representing both sexes. The U.S. sample consisted of equal numbers ($n = 20$) in adolescents (12–18), young adults (YA; 18–25), middle adults (25–55), and mature adults (>55) groups. Although there are some cautions in such selection, it should be noted that a study over various decades showed no differences in the notes from different decades (16).

The notes from the Koreans were matched (age ± 3 years) to the U.S. notes. Leenaars (1988) has consistently controlled for age in the culture studies. This resulted in 33 matches; this not only allows for consistency in age and sex, but also the study within the same historical period. The mean age of the martyr notes was 26.48 (SD = 8.475); the age range was 20–58. The mean age of the American suicide notes was 26.45 (SD = 8.765); the age range was 18–58. There were 29 males and 4 females in both sets.

The note analysis was carried out in two steps. At the first step, the meanings of 35 protocol sentences in Leenaars' method were discussed between two examiners (first and fourth author) who would analyze the notes, based on the literature of Leenaars' work

(see [7,15–16] for details; see Table 1 for Leenaars' schema and sample of protocol sentences). Over the last three decades, these examiners have developed consistent inter-agreement. There was no attempt to disguise identifying characteristics, such as name, place, etc., because the martyr notes are obvious. The examiners agreed before scoring that the target of the note might be other than a person; it could be an ideal or organization/government. Analysis of a different set of notes, utilizing Leenaars' method of study, was undertaken until reaching an inter-judge reliability above 80% (0.86 coefficient of concordance) (see [15]). A second step was then undertaken; all of the notes in this study were analyzed independently by two examiners. The notes were analyzed for the presence of the 35 protocol sentences.

The percentage of agreement was 84.32% and the Coefficient of Concordance (46) of 0.86 for the notes indicated substantial inter-judge reliability. Subsequently a reconciled rating was obtained. For subsequent calculations, each note was given a score for the number of matches with protocol sentence of a given type. In order to determine whether suicide notes from the two samples differed significantly in the presence of eight subclusters and 35 protocol sentences, chi-squares were performed, using SPSS for Windows (47).

Results

Similar to previous studies on the more common suicide notes, there was substantial evidence for the presence of the protocol sentences and clusters in both samples of suicide notes. Indeed, the protocol sentences were more evident in the notes of the martyrs than any other observation to date. The verification was extremely large. Thus, one can conclude that the model is applicable to suicide notes of martyrs; yet, there were also extreme significant differences with the more common U.S. suicide notes. Table 2 shows a comparison of contents of suicide notes from both groups according to Leenaars' suicide model. It is interesting to note the most and least frequent protocol sentences for both samples. The least frequent in the altruistic notes were protocol sentences, which are related to ambivalence, reporting such (No. 10) or having ambivalent feelings toward the government (No. 28), only being observed on 2 and 0 occasions, respectively. These were evident in regular suicide notes, significantly so. The least observation in suicide notes was murderous impulses (No. 30); there were 0 observations, compared with every note in the martyr group. There were many frequently found sentences in the martyr group (see Table 1); indeed, this is most unique. The most frequent sentence in these common suicide notes was associated to unconscious dynamics (No. 12), 23 observations compared with 31 in altruistic notes.

As shown in Table 2, all the clusters were significantly different, all more evident in the notes of martyrs. The Chi-square results areas follow: UP (χ^2 , $df = 1$, $n = 66 = 43.283$, $p < 0.0001$); CC (χ^2 , $df = 1$, $n = 66 = 46.543$, $p < 0.0001$); IE (χ^2 , $df = 1$, $n = 66 = 26.360$, $p < 0.0001$); IA (χ^2 , $df = 1$, $n = 66 = 30.015$, $p < 0.0001$); Ego (χ^2 , $df = 1$, $n = 66 = 13.879$, $p < 0.0001$); IR (χ^2 , $df = 1$, $n = 66 = 42.718$, $p < 0.0001$); RA (χ^2 , $df = 1$, $n = 66 = 40.341$, $p < 0.0001$); and IEG (χ^2 , $df = 1$, $n = 66 = 36.022$, $p < 0.0001$).

When one examines specific protocol sentences in each cluster, there were many significant differences (see Table 2). Most of these were in the direction of being more evident in altruistic notes, but not all. In the, for lack of a better word, "common" suicide notes in the United States, the suicide notes more frequently cited ambivalence (No. 10: χ^2 , $df = 1$, $n = 66 = 6.600$, $p < 0.05$) and ambivalent feelings toward the government (No. 28: χ^2 , $df = 1$, $n = 66 = 18.2$, $p < 0.05$).

TABLE 2—Frequency of endorsement of protocol sentences, percentages, and significance in altruistic (n = 33) and U.S. (n = 33) notes.

Cluster/Protocol Sentence	Altruistic		United States		<i>p</i>
	<i>n</i>	%	<i>n</i>	%	
Intrapsychic					
I. <i>Unbearable psychological pain</i>	33	100	25	75.8	0.000***
1) Suicide as a relief	33	100	18	54.5	0.000***
2) Suicide as a flight from trauma	32	97	15	45.5	0.000***
3) Emotional states in suicidal trauma	31	93.9	14	42.4	0.000***
4) Loss of interest to endure	30	90.9	15	45.5	0.000***
5) Inability to meet life's challenges	30	90.9	10	30.3	0.000***
6) State of heightened disturbance	30	90.9	7	21.2	0.000***
II. <i>Cognitive constriction</i>	33	100	13	39.4	0.000***
7) A history of trauma	28	84.8	11	33.3	0.000***
8) Overpowering emotions	31	93.9	7	21.2	0.000***
9) Focus only on grief topics [†]	32	97	3	9.1	0.000***
III. <i>Indirect expressions</i>	31	93.9	23	69.7	0.000***
10) Ambivalence [†]	2	6.1	9	27.3	0.044*
11) Aggression has turned inwards	30	90.9	13	39.4	0.000***
12) Unconscious dynamics	31	93.9	23	69.7	0.011*
IV. <i>Inability to adjust</i>	32	97	15	45.4	0.000***
13) Feels weak to overcome difficulties	23	69.7	14	42.4	0.026*
14) Incompatible state of mind [†]	25	75.8	4	12.1	0.000***
15) Serious disorder in adjustment	30	90.9	8	24.2	0.000***
V. <i>Ego</i>	26	78.8	11	33.3	0.003**
16) Weakness in constructive tendencies	7	21.2	7	21.2	1
17) A "complex" or weakened ego	25	75.8	7	21.2	0.000***
18) Harsh conscience	12	36.4	5	15.2	0.049*
Interpersonal					
VI. <i>Interpersonal relations</i>	33	100	20	60.6	0.000***
19) Problems determined by situations	31	93.9	16	48.5	0.000***
20) Weakened by unresolved problems	31	93.9	11	33.3	0.000***
21) Frustrated needs	31	93.9	13	39.4	0.000***
22) Frustration to a traumatic degree	30	90.9	14	42.4	0.000***
23) Positive development not forthcoming	30	90.9	5	15.2	0.000***
24) Regressive, intimate, relationships	30	90.9	8	24.2	0.000***
VII. <i>Rejection-aggression</i>	33	100	16	48.5	0.000***
25) Report of a traumatic event	32	97	12	36.4	0.000***
26) Narcissistic injury	14	42.4	13	39.4	0.802
27) Preoccupation with person	9	27.3	9	27.3	1
28) Ambivalent feelings toward a person [†]	0	0	6	18.2	0.024*
29) Aggression as self-directed [†]	5	15.2	3	9.1	0.708
30) Murderous impulses [†]	33	100	0	0	0.000***
31) Calculation of negative effect	33	100	8	24.2	0.000***
32) Revenge toward someone else	33	100	8	24.2	0.000***
VIII. <i>Identification-egression</i>	32	97	22	66.7	0.000***
33) Identification with person/ideal	31	93.9	12	36.4	0.000***
34) Unwillingness to accept life	32	97	14	42.4	0.000***
35) Suicide as escape	32	97	18	54.5	0.000***

****p* < 0.001, ***p* < 0.01, and **p* < 0.05.

[†]Fisher's exact test statistic reported.

Due to the young age of most of the "martyrs," we also redid the analyses with only notes from YA (ages 18–25). The results were no different.

The results can be seen graphically in Fig. 1.

Discussion

The findings provide further support for the multidimensional model proposed (7,16). There is considerable evidence of both intrapsychic and interpersonal correlates of suicide, whether altruistic or otherwise. This is true with martyrs. Similar to previous studies, there seem to be commonalities among suicides. By virtue of our human quality, people who are about to kill themselves have a number of important psychological characteristics in common. Pain is pain. Mental constriction is mental constriction. Unhappiness is unhappiness. The suicidal mind is the suicidal mind; yet, significant

differences emerged, not whether present or absent, but the intensity of the state. The psyche of the martyr is different and these differences were seen in all clusters.

Altruistic suicide is different from the more common suicides (egoistic, followed by anomie). Although one can use common factors to describe the characteristics and dynamics in all suicides, there are striking qualitative differences. The state of mind of the altruistic suicidal person is extreme in such characteristics as pain, mental constriction, depression, and rage, to name a few. This difference is our most important finding. Thus, despite the value of looking at common factors, it is useful to group suicides under Durkheim's rubric. In any analysis of suicide, it is useful to think of the suicide beyond the individual, and to place it within the sociopolitical context. This is consistent not only with Durkheim's view, but also the WHO's ecological model (3). We have to understand the community's and society's very meaning of the act. Not

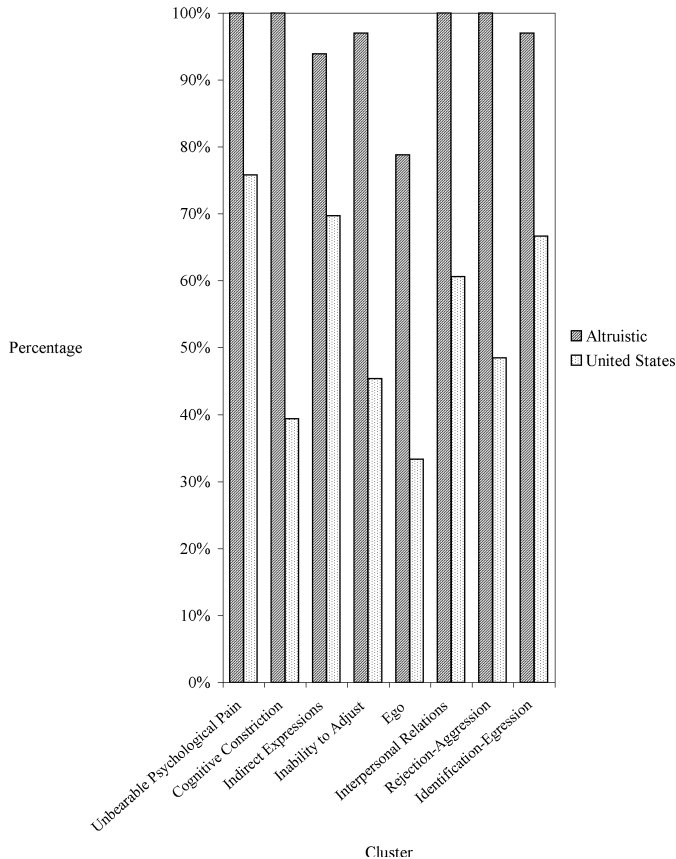


FIG. 1—Distribution of cluster themes evident in the suicide notes.

all suicides are the same. We should not assume a suicide is a suicide; altruistic deaths differ significantly.

A key question is why martyrdom emerged in South Korea (and elsewhere). On a community and societal level, the principal element common in altruistic suicide in Korea, with respect to the act of self-immolation, is that these acts grew out of intense political turbulence and widespread violence, at least as one reads the last letters of the Korean self-immolators. Altruistic suicide, in Durkheim's sense, became a *best* solution. A factor linking many of these suicides is the combination of the need to protest political conditions in one's country, and to communicate a strong message and example to others in political opposition groups. Self-immolation is only one, albeit especially powerful, form of dissent. The self-immolators' last letters are written as the penultimate public spectacle of their martyrdom. Martyrs, of course, always need an audience (12,48).

Emile Durkheim in his classic study, *Suicide*, does not deal specifically with the type of self-destruction (or self-sacrifice) committed in an effort to further the cause of a social or political movement (1). Still, these acts of self-immolation would seem to fit as instances of "altruistic suicide." Moreover, in these cases, "it is not because [a person] assumes the right to do so but, it is his duty. If he fails in this duty, he is dishonored and also punished" (p. 219). For Durkheim, altruistic suicides are selfless individuals who are mechanically compelled by society, or the community, to end their life, with little or no individual intentionality involved. This perception is very evident in the last letters. In other words, Durkheim largely, if not completely, ignores the will of the human agent in making a decision to kill oneself for, at least what is perceived to be, the potential benefit to others. Yet, our results support

the notion that the individual's mind is figural in the act, both intrapsychic and interpersonal. *There is intent*. The martyrs, in fact, state that they choose the death.

Are the acts seen as suicide? The martyrs do not think so, nor does their community (49). According to Durkheim's definition of suicide, sacrificial death is classified as suicide, most specifically, an altruistic type of suicide, in which a sacrificial death is chosen voluntarily for the value of the collectivity or in response to the circumstances of prevailing collective institutions to which he/she belongs (50). It is seen as the ultimate sacrifice. It is seen as an act of love (49). Is this true for all altruistic suicides? Are suicide bombers altruistic?

The social context in Korea in which the martyrs lived, in terms of social movements, organizations, and the cultural milieu in general, served to dictate what they thought that they had to do, what they came to see as their *individual* and *collective* duty. They state so in their last letters. In fact, in the notes, they state that martyrdom was their *only* and *best* solution under these unique circumstances; however, based on our findings, from, at least, a very constricted mind. There is a uniform tunnel vision in almost all the notes (we write "almost" because there were a few Korean notes that read more like a common suicide note, than altruistic in content). Concomitantly, there is constricted logic and perception. There is a poverty of thought, exhibited by the sole focus on permutations and combinations of only one shared trauma: the oppression of military dictatorship and the grasp of U.S. dominion and aggression, and the best solution, suicide as *duty* for national salvation.

The relevance of this study is both somewhat historical and immediately contemporary. Even though most of the altruistic suicides in Korea occurred in the 1960s through 1980s, they seem less a part of modern life than newer forms of altruistic suicide. We live in an era in which politically motivated suicides have taken on major importance as terrorist acts. At issue here, of course, are the Palestinian suicide bombers and the hijackers associated with Al Qaeda and related groups. A central question of our time: Are they the same? First, it is obvious that suicide is not homicide-suicide. Again, due to the lack of study, we do not know empirically (51). We know that there is no *the* common personality type (52). Like the self-immolators in Korea, these individuals do not turn to homicide-suicide because of poverty, trauma, madness, psychopathy, education, and ignorance (51,53,54). There is, however, a history of the individual and his/her community/society to the death(s). There are social integrations, such as networks, to the acts (1,53,54).

Social bonds are central, probably in all altruistic suicides (7,53), but also as our study suggests, deep intrapsychic and interpersonal factors are equally figural. There is a psychology to altruistic suicides, and thus, to martyrdom, not only social integration. Individual, relationship(s), community, and social factors are important in violence, whether altruistic or otherwise. Further, we should not assume that all acts that appear to be altruistic suicide are altruistic in intent. It is, in fact, not known whether the current study on Korean martyrs would apply to all altruistic suicides, such as suicide bombers (55).

The suicide notes in this study are, on a different point, from two distinctly different cultures and sociopolitical settings. Yet, on the question, "are the martyrs' last letters the same as suicide notes?," the tentative answer is yes and no. Indeed, we are struck by how many markers of common suicide notes are evident in the altruistic notes. One could use these notes to illustrate the suicidal mind (7,12); the missing elements are the ambivalence factors, toward self, the target, or the act, but that occurs in a small group

of the more common suicides. The martyrs' notes are suicide notes. The same conclusion may be made about the suicide bomber in the Middle East. They are suicidal, maybe not different psychologically on the common characteristics, but maybe in the intensity of the state of mind (12). Pain is pain, but in the martyr, the pain is even more unbearable. The same is true for unhappiness, aggression, need to escape, and so on. What is central, as in all suicides, is the attachment, not necessarily to people *per se*, but as Zilboorg (56) had shown and as evident in almost all of the martyrs' notes, the attachment (identification) (57) can be to any ideal—freedom being one, and community integration being another example. Yet, they are also different, different in the sense that they show *an extreme suicidal mind*. The single most important finding is that martyr suicides are more extreme in their pain or anguish; more mentally constricted on one and only one problem; more unconscious of their individual dynamics, but not ambivalent at all; more emotionally disturbed (especially depressed) about an external “object,” such as the government or a global enemy, the United States; more defeated; more troubled at a target in the community and/or society; more angry, if not murderous; and more identifying with an ideal, seeing only suicide, and as the events today show, homicide-suicide, as *the* solution.

Murder and suicide are interwoven (58). As Unnithan, Corzine, Huff-Corzine, and Whitt proposed, the choice between homicide and suicide depends on the attribution concerns (58). “Martyrs,” faced with frustration, may choose suicide, but some choose both homicide and suicide. The Korean martyrs, in their last letters, attributed the cause of their problems to the governments, the United States, the outside community/society. Our results suggest that they were both angry and very unhappy about the oppression. The principal source of frustration was unequivocal, marked by angst and rage, and absolutely no ambivalence. They could not live without freedom (or for the global enemy, the United States, to be destroyed). In the altruistic suicides, there is an extremely constricted mind (basically one problem and *only* one solution, *martyrdom*), aroused by anger and depression at the same time. The Korean martyrs' mind, based on this study, contained one solution, but in the current martyrs (or terrorists), like Al Qaeda in the Middle East, both attribution styles, discussed by Unnithan et al. (58), exist. The martyrs' violence is self-directed, *by duty*, and in some, *by a duty*, both other-directed and self-directed. Durkheim, we believe, would agree. A martyr's homicide-suicide is a conscious act of other and self-induced annihilation, best understood as a multidimensional event in a needful individual, who defined an issue, by duty, for which homicide, followed by suicide, is perceived as the best solution. The martyr's suicide *only*, as in the Korean self-immolators, has a very different attribution style, only self-death. Other-directed death is against Buddhism, whereas in Islam, it is not always. A Muslim is also, however, not free to end his life. Since the actual “owner” of life is God, any suicidal or homicidal act, other than acts in the name of religion (such as *martyrdom*), determines the individual to be banished to hell. Allah says: “And do not kill yourself (nor kill another). Surely, Allah is Most Merciful to you” (58). Of course, as Sageman (53) points out, there are very radical and lethal interpretations of these lines. Killing is not only unacceptable by Buddhism in Korea, but also by the vast community of Muslims. Only God owns life and death.

Freud (57,60,61) hypothesized that intense identification with a lost or rejecting person or, as Zilboorg (56) showed, with any lost ideal (e.g., employment, freedom) is crucial in understanding the suicidal person. The definition of identification is attachment (bond), attachment based upon an important emotional tie with

another person(s) (60) or any ideal, such as one's institutions. If this emotional need is not met, the (vulnerable) suicidal person experiences a deep pain (discomfort). There is an intense desperation and the person wants to escape and to be gone from a world with no ideal. The anguish must be stopped. The suicidal person wants to exit, escape, be elsewhere, and not be—anything but the abyss on earth. Suicide is then the only solution. The (altruistic) person plunges into the death, whether it is for freedom, martyrdom, whatever. This was always written in their last letters.

On a penultimate point, there are diverse perspectives on what is altruistic and what is not. This is Durkheim's point; yet, our empirical findings suggest that he may have erred somewhat. The difference may also be a psychological (intrapsychic and interpersonal) difference, and not just a difference at the community and societal levels of the ecological model. Many agree with the concept of altruistic suicide in their own subculture, culture, or country, but find it not applicable to others. They are martyrs; the others are terrorists (62). The so-called “suicide bomber” in the Middle East today illustrates this “reality”; one views him/herself as a martyr, the other, a terrorist. This was true in Korea. Although as Durkheim suggested the social level allows us to understand martyr suicide and related phenomena, the differences in the mind on “I am in pain,” “This is the only problem,” “This is the best solution,” and so on, allow us to know the martyrs differently. The difference may, as our study shows, for maybe the first time, not only be in intrapsychic factors or interpersonal context, but both, and thus “inside” and also on the “outside” (society) (both the inner and outer phenomenology). The study of rage, narcissistic injury, vulnerable ego, psychopathology, and especially unconscious processes may be as important after all. All levels of the ecological model allow us to understand martyrs better, not one or the other as some have claimed. Yet, the goal of the act may be, according to Durkheim (1), on the outside—God, or state. This is a big difference from the more common suicides. It is perceived duty and honor, but also this is a small subgroup of the 800,000 people each year that die by suicide. The community/society may even be suicidogenic for the would-be martyr; it compels some people to kill themselves. The Korean martyrs believed that they had no other escape route, but this is true for all suicides and today's suicide bomber. Yet, the latter are also homicidogenic; the Korean martyrs were not. A question remains: On the continuum of martyrdom, how can one predict a suicidal martyr (or any person) also committing homicide-suicide (being a terrorist)?

Table 3, for clinical/forensic interest, presents two notes to illustrate the suicidal mind; the first is an “altruistic” note from a South Korean, matched by age and sex to a U.S. note. We present the notes verbatim, followed by the 35 protocol sentence scores (see Table 1 for examples; see Table 2 for abbreviations of the items; see Leenaars [16] for the verbatim protocol sentences). The reported differences are obviously exemplified in these two notes. They illustrate two similar but also very different idiographic (specific) examples of the diverse suicidal mind.

Finally, it should be obvious that our sample of martyr letters is probably not representative of all altruistic self-immolators in Korea, let alone beyond Korea. Yet, it is the only sample available. (There is great reluctance in South Korea to share such information with scientists; to date, due to a great deal of stigma, we have been unable to obtain a matched sample of common suicide notes of Koreans.) There are further sampling limitations in the sample size; however, we attempted to do the best we could in matching. Suicide notes are only one source of information and our study should be augmented by other sources of data; yet, further study, such as

TABLE 3—An “altruistic” suicide note and a common suicide note.

A 25-year-old South Korean student wrote the following:

Dear Mother and Father,

Your last-born child, the most undutiful son under the sun writes you. Ready to leave you, I now feel heart-breaking sorrow. You have shared with me your blood and flesh, and raised me as your most precious treasure. I am certainly an undutiful son to both of you.

Yet, mom and dad,

I must leave you. Because if I don't leave now more mothers and fathers in this land will have to live with heartbreak. Many people have died. They died by burning themselves or jumping from high places. We don't know how many more will die. In order to prevent more deaths, your beloved son must be dedicated to the sacred altar of democracy.

The Roh Tae Woo military-dictatorial regime still hold the swords that slaughtered our brothers and sisters. Now the regime is plotting more bloodshed. Our beloved peninsula, the only fatherland, has been badly beaten and bruised by the brandishing sword of the U.S., the ringleader of a divided Korea.

In this land, the sons and daughters, like one of your own, fall away by the claw of a bloodthirsty, tyrannical rule. Those who have lost their lives—simply because they were born into the dark era and the crooked world—dedicated their bodies to restore peace and order to the world.

But mom and dad, it is a matter of regret that our friends' preceding deaths have been disregarded by many people. As a result, they gave their valuable lives for nothing. Those who died gave their lives for people like you and auntie, to make this world peaceful and truly livable for human beings. Nonetheless, they were disregarded.

Mom, you continue working for your children even though you are troubled by heart disease.

Dad, you still work, though you are over sixty and your legs are bad.

I had planned to return home. This year, I intended to quit school, go back to you, and attain my hometown goals. But the people in this terribly tarnished world have made me change my plans. Why? People pursue only their own self-interest. The older and younger generations are at the same game. They don't even dream that the tragedy of our generation might be passed down to the next generation.

Mom and dad,

We must destroy the military dictatorship of this era. Also, it is impossible to reunify our country unless we drive out the American Imperialists.

Mom, please bear life strongly. Although your son leaves you, do not close your eyes until you see the world I have desired.

Dad, you are being severe, but kind. Please stay healthy! You should cure your bad legs. Please never be pessimistic about my death. You are in grief now, but when the day comes, you both...

Please don't close your eyes even when life is hard to bear. Survive by any means and be in the struggle with your son. Never give up your life.

Mom and dad, this hard-hearted decision doesn't even let me cry. Bye, Mom and dad.

Your dutiful last son

The reconciled scores are as follows: 1, 2, 3, 4, 5, 6, 8, 9, 11, 12, 13, 15(g), 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 29, 30, 31, 32, 33, 34, 35.

The common note was written by a 21-year-old male, who died by overdose on pills. He wrote:

Sam

I'm sorry I had to do this, but I had no choice: After Mom died, I no longer had any reason to go on. I've just now realized it.

I have no future and life is entirely pointless. I've been deceiving myself all along and its time it stopped.

On the train on the way back from Detroit to Fort Bragg, I thought of this.

Returning to the stinking Army made me realize all I was doing was wasting another 3 years. And then what was I going to do? Well, there isn't any positive answer.

I love you all very much and was glad you and Sharon and Mike and the kids and I got together.

Love,

Bill

The reconciled scores are as follows: 1, 2, 3, 4, 5, 6, 7, 9, 13, 14, 15, 16, 19, 20, 21, 22, 24, 25, 33, 34, 35.

psychological autopsies, will likely not occur in Korea. Not unlike the whole area of martyrdom and terrorism (51–53), we are left with the limited sources of data available. We can speculate, we think, about other martyrs, but with great caution. At best our study is exploratory, but also, we believe, a fascinating look into the mind of the altruistic suicide. We are left with the questions: Who is the martyr? Who is the terrorist? And, who are the altruistic suicides?

References

1. Durkheim E. *Suicide: a study of sociology* (Spaulding J, Simpson G, translators). New York, NY: The Free Press, 1951/1897.
2. Goldney R, Schioldann J. A note concerning Durkheim's precedence in the use of the terms egoistic and altruistic suicide. *Suicide Life Threat Behav* 2001;31:113–4.
3. World Health Organization (WHO). *World report on violence and health*. Geneva: Author, 2002.
4. Bronfenbrenner U. *The ecology of human development: experts by nature and design*. Cambridge: Harvard University Press, 1979.
5. Dahlberg L, Krug E. Violence—a global public health problem. In: WHO, editor. *World report on violence and health*. Geneva: WHO, 2002;3–21.
6. Gabarino J, Crouter A. Defining the community context for parent-child relations: the correlates of child maltreatment. *Child Dev* 1978;49:604–16.
7. Leenaars A. *Psychotherapy with suicidal people*. Chichester, UK: John Wiley & Sons, 2004.
8. Shneidman E. *Comprehending suicide: landmarks in 20th century suicidology*. Washington, DC: American Psychological Association, 2001.
9. Shneidman E. *Definition of suicide*. New York, NY: John Wiley & Sons, 1985.
10. Leenaars A, Wenckstern S, editors. *Altruistic suicide: from sainthood to terrorism*. *Arch Suicide Research* 2004;8:1–136.
11. Leenaars A, Wenckstern S. *Altruistic suicide: are they same or different from other suicides?* *Arch Suicide Research* 2004;8:131–6.
12. Leenaars A. *Altruistic suicide: a few reflections*. *Arch Suicide Research* 2004;8:1–7.
13. Park B. *Sociopolitical contexts of self-immolations in Vietnam and Korea*. *Arch Suicide Research* 2004;8:81–97.
14. Mill J. *Systems of logic*. London: George Routledge, 1892.
15. Leenaars A. *Suicide notes*. New York, NY: Human Sciences Press, 1988.
16. Leenaars A. *Suicide: a multidimensional malaise*. *Suicide Life Threat Behav* 1996;26:221–36.
17. Leenaars A. *In defense of the idiographic approach: studies of suicide notes and personal documents*. *Arch Suicide Research* 2002;6:19–30.
18. Shneidman E, Farberow N, editors. *Clues to suicide*. New York, NY: Harper & Row, 1957.
19. Maris R. *Pathways to suicide*. Baltimore, MD: John Hopkins University Press, 1981.
20. Hawton K, van Heeringen C, editors. *Suicide and attempted suicide*. Chichester, UK: John Wiley & Sons, 2000.
21. Leenaars A, DeLeo D, Diekstra R, Goldney R, Kelleher M, Lester D, et al. *Consultations for research in suicidology*. *Arch Suicide Research* 1997;3:139–51.
22. Hjelmeland H, Kinyanda E, Knizek BL, Qwens V, Nordvik H, Svarva K. *A discussion of the value of cross-cultural studies in search of the*

- meaning(s) of suicidal behavior and the methodological challenges of such studies. *Arch Suicide Research* 2006;10:15–27.
23. Boismont de B. Du suicide et la folie suicide. Paris: Germer Bailliere, 1856.
 24. Wolff H. Suicide notes. *American Mercury* 1931;24:264–72.
 25. Frederick C. Suicide notes: a survey and evaluation. *Bulletin of Suicidology*, March 1969;27–32.
 26. Ogilvie D, Stone P, Shneidman E. Some characteristics of genuine versus simulated suicide notes. *Bulletin of Suicidology*, March 1969;17–26.
 27. Ho T, Yip P, Chiu C, Halliday P. Suicide notes: what do they tell us? *Acta Psychiatr Scand* 1998;98:467–73.
 28. Girdhar S, Leenaars A, Dogra TD, Leenaars L, Kumar G. Suicide notes in India: what do they tell us? *Arch Suicide Research* 2004;8:179–85.
 29. Chavez A, Paramo-Castillo D, Leenaars A, Leenaars L. Suicide notes in Mexico: what do they tell us? *Suicide Life Threat Behav* 2006;36:709–15.
 30. Demirel B, Akar T, Sayin A, Candansayar S, Leenaars A. Farewell to the world: suicide notes from Turkey. *Suicide Life Threat Behav* 2007;38:123–8.
 31. Diamond G, More D, Hawkins A, Soucar E. Comment on Black's (1993) article "Comparing genuine and simulated suicide notes: a new perspective." *J Consult Clin Psychol* 1995;63:46–8.
 32. Leenaars A, Balance W. A logical empirical approach to the study of suicide notes. *Can J Behav Sci* 1984;16:248–56.
 33. Kerlinger F. *Foundations in behavioral research*. New York, NY: Holt, Rinehart, & Winston, 1964.
 34. Carnap R. *Psychology in physical language*. In: Ayer A, editor. *Logical positivism*. New York, NY: Free Press, 1931/1959;165–97.
 35. O'Connor R, Sheeby N, O'Connor D. A thematic analysis of suicide notes. *Crisis* 1999;20:106–14.
 36. Barak A, Miran O. Writing characteristics of suicidal people on the internet: a psychological investigation of emerging social environments. *Suicide Life Threat Behav* 2005;35:507–24.
 37. Lester D. A comparison of fifteen theories of suicide. *Suicide Life Threat Behav* 1994;24:80–8.
 38. Shaughnessy J, Zechmeister E, Zechmeister J. *Research methods in psychology*. New York, NY: McGraw-Hill, 2000.
 39. Leenaars A. Suicide notes from Canada and the United States. *Percept Mot Skills* 1992;74:278.
 40. Leenaars A, Lester D, Wenckstern S, Heim N. Suicide notes from Germany and the United States. *Suizidprophylaxe* 1994;3:99–101.
 41. O'Connor R, Leenaars A. A thematic comparison of suicide notes drawn from Northern Ireland and the United States. *Curr Psychol* 2004;22:339–47.
 42. Leenaars A, Fekete S, Wenckstern S, Osvath P. Suicide notes from Hungary and the United States. *Psychiatr Hung* 1998;13:147–59.
 43. Leenaars A, Lester D, Lopatin A, Schustov D, Wenckstern S. Suicide notes from Russia and the United States. *Soc Gen Psychiatry* 2002;3:22–8.
 44. Leenaars A, Haines J, Wenckstern S, Williams C, Lester D. Suicide notes from Australia and the United States. *Percept Mot Skills* 2003;92:1281–2.
 45. Ad Hoc Committee for the Preparation of a Memorial Service for the Nation's Martyrs and Victims of Democratization Movement. *Everlasting lives*. Seoul, Korea: Published/compiled by Korean martyr, NY: McGraw-Hill, 1956.
 46. Siegel S. *Non parametric statistics*. New York: McGraw-Hill, 1956.
 47. SPSS [computer software]. SPSS for Windows (Version 16.0). New Jersey: Prentice Hall, 2008.
 48. Crosby K, Rhee J-O, Holland J. Suicide by fire: a contemporary method of political protest. *Int J Soc Psychiatry* 1977;23:60–9.
 49. Thich N. *Love in action: writings on nonviolent social change* (Berrigan FBD, translator). Berkley, CA: Parallax Press, 1993.
 50. Salomon A. Some aspects of the legacy of Durkheim. In: Wolff KH, editor. *Essays on sociology and philosophy*. New York, NY: Harper Torch Books, 1960;247–66.
 51. Silke A, editor. *Terrorists, victims and society*. Chichester, UK: John Wiley & Sons, 2003.
 52. Horgan J. The search for the terrorist personality. In: Silke A, editor. *Terrorists, victims and society*. Chichester, UK: John Wiley & Sons, 2003;3–27.
 53. Sageman M. *Understanding terrorist networks*. Philadelphia, PA: University of Pennsylvania, 2004.
 54. Berko A. *The path to paradise—the inner world of suicide bombers and their dispatchers*. Westport, CT: Praeger Security International, 2007.
 55. Silke A. The psychology of the suicidal terrorism. In: Silke A, editor. *Terrorists, victims and society*. Chichester, UK: John Wiley & Sons, 2003;93–108.
 56. Freud S. Mourning and melancholia. In: Strachey J, editor and translator. *The standard edition of the complete psychological works of Sigmund Freud*, Vol. XIV. London: Hogarth, 1917/1974;239–60.
 57. Zillboorg G. Suicide among civilized and primitive races. *Am J Psychiatry* 1936;92:1347–69.
 58. Unnithan N, Corzine J, Huff-Corzine L, Whitt H. *The currents of lethal violence*. Albany, NY: State University of New York Press, 1994.
 59. Surah An-Nisa:29, http://www.bayaans.org/surah_annisa.html.
 60. Freud S. A case of homosexuality in a woman. In: Strachey J, editor and translator. *The standard edition of the complete psychological works of Sigmund Freud*, Vol. XVIII. London: Hogarth, 1920/1974;147–72.
 61. Freud S. Group psychology and the analysis of the ego. In: Strachey J, editor and translator. *The standard edition of the complete psychological works of Sigmund Freud*, Vol. XVIII. London: Hogarth Press, 1921/1974;67–147.
 62. Jung C, editor. *Man and his symbols*. Gordon City, NY: Doubleday & Co. Inc, 1964.

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