At the outset, it has to be acknowledged that this was a difficult book to review. The book represents a practitioner/researcher perspective with the content supported by some empirical evidence as well as anecdotal or case study material. The difficulty lies essentially in the fact that the various chapters have been assembled employing varying levels of scientific academic writing and reporting. Given that the study of suicidal behaviour is burdened with methodological and design issues, the book details rates of suicide without apparently accounting for these methodological variations and which would tend to make some of them non-comparable. Sometimes, media reports are used to bolster the findings of a research study; at other times, it represents a case history of a particular type and form of suicidal behaviour. The research studies in themselves vary in their sophistication and the real difficulty is to know what to make of the evidence since there is little or no comment about critical research sample and design issues. A substantial part of the content is drawn from conference proceedings that the author has hosted. It is unclear if the conference proceedings represent an independent peer-review process.

The book is also difficult to read with its mass of details about rates and that could have been more easily represented in the form of graphs or figures. If a more rigorous standard was imposed in determining which studies constitute appropriate and relevant data, the research could possibly have been more succinctly presented. Nevertheless, an advantage may be that it is possible to read a chapter without reference to another, as they appear to be mostly self-contained, even though some cross-referencing occurs. In addition, a summary at the end of each chapter provides the most salient issues or findings related to a specific chapter. However, if the interested reader is able to navigate through these difficulties, it does contain useful information about suicidal behaviour such as the chapter on methods of choice, or the chapter on indirect self-destructive behaviour, arguably a very difficult condition to establish based on a person’s abuse of substances or engagement in reckless behaviour. Students may find the chapters related to risk factors and causes and the management and prevention of suicidal behaviour to be the most useful as they tend to rely on clinical practice.

The book may have worked better if its organisation accommodated perspectives of suicidal behaviour in South Africa with a section devoted to epidemiology; a section on what is known from a clinical perspective; and a section on what are some common lay
perceptions of suicidal behaviour in South Africa. Given these pitfalls, it is best to detail the contents of this book as follows:

**Introduction.**

*Chapter 1: The agony of a survivor* (this is a case study).

*Chapter 2: Suicide in history, the arts and religion* - suicidal behaviour considered from a historical point of view. The purpose of this chapter is to demonstrate that suicide is not a recent phenomenon, that it was closely associated with depression and that while history is replete with examples of “famous” individuals taking their own lives, suicide was not the exclusive domain of the rich and famous. Most forms of organised religion have historically frowned upon suicide, but have condoned suicide in particular circumstances.

*Chapter 3: Trends within an international and African context* – African and international statistics and trends in suicidal behaviour.

*Chapter 4: Trends within the South African context* – South African data and statistics.

*Chapter 5: Children and adolescents* – changing trends in suicidal behaviour among children and youth, essentially pointing to an increase in rates in this population.

*Chapter 6: Reports in the South African press* – as the title suggests.

*Chapter 7: Methods of choice* – as the title suggests.

*Chapter 8: Indirect self-destructive behaviour and analgesic abuse* – abuse of substances and suicidal behaviour.

*Chapter 9: Risk factors and causes* – complex array of risks and stressors contributing to suicidal behaviour.

*Chapter 10: Management and prevention* – provides a detailed perspective on the management and prevention of suicide.

*Chapter 11: The Durban parasuicide study (DPS)* – overview of the research activities of a group focused on studying suicidal behaviour.

Overall, while this volume sets out to represent suicidal behaviour in South Africa, it ends up as a catalogue of various aspects of suicidal behaviour. This is disappointing, as the book could have done more to bring together the best research evidence in support of understanding suicidal behaviour in South Africa.