

The Oxford Handbook of Suicide and Self-Injury

edited by Matthew K. Nock. In book series: Oxford Library of Psychology. Oxford University Press, New York, NY, 2014, 516 pages, \$175.00 (hardcover).

Suicide and deliberate self-harm are behaviors of grave concern. *The Oxford Handbook of Suicide and Self-Injury* does an amazing job of capturing key features of suicide, suicidal behavior, and nonsuicidal self-injury (NSSI). NSSI has been given multiple labels over several decades, but this symptom, behavior, or syndrome has never before risen to the level it currently occupies as a proposed *DSM-5* diagnosis. Considerable scientific effort has been devoted to this blurry psychiatric area of self-harm, with significant overlap between suicidality and deliberate self-harm without suicide intent. The list of authors is redolent with most of the major experts in this field, and they present a comprehensive perspective of this broad, often confusing clinical area. To achieve the objective of providing a wide-ranging overview of the science of suicidal self-injury and NSSI, the editor has done a masterful job of selecting topic areas and authors who can speak about deliberate self-injury with great authority. Divided into 6 parts, the book begins with Classification of Self-Injurious Behaviors and continues through Phenomenology and Epidemiology, Approaches to Understanding Self-Injurious Behaviors, Assessment, Prevention and Intervention, and finally Special Issues.

The subdivision of each part and the manner in which each chapter is arranged contribute toward making this book highly useful to clinicians, researchers, and anyone interested in individuals engaging in self-destructive behavior. Following a succinct and useful introduction that orients the reader to the contents of each chapter, part 1 contains a chapter on classifying suicidal behavior, a chapter on differentiating suicidal self-injury and NSSI, and a conceptual chapter on expanding the concept of self-injurious behavior (SIB) to include direct and indirect SIB, such as eating and substance abuse disorders, reckless behaviors, and patterns of abusive relationships. These chapters are “must read.” A similar recommendation holds for part 2, which includes chapters on suicidal children, adults, and older adults, and NSSI across the life span, and for part 4’s focus on a framework for assessing suicide risk in clinical practice and on NSSI assessment.

The remaining chapters are of greater or lesser value depending on the reader’s interest and clinical practice. Although the overall focus is on suicide-related SIB and its underpinnings, including genetics, neurobiology, cognitive and information processing, theories of etiology, prevention, and psychological and pharmacologic treatments, similar consideration is devoted to NSSI. The manner in which chapters are divided in discussing suicidal self-injury and NSSI when the chapter is not clearly about

one or the other, for example, “Developmental Approaches to Understanding Suicidal and Self-Injurious Behaviors” and “Social and Ecological Approaches to Understanding Suicidal Behaviors and Nonsuicidal Self-Injury,” is of particular value.

The lack of attention to 2 areas is notable. Mindfulness, an evolving and highly touted therapeutic intervention for suicide and NSSI, is mentioned only twice and not sufficiently elaborated upon to allow the reader to appreciate how it might contribute to treatment. Deliberate ingestion of nonedible foreign objects is not discussed at all, although some experts in the field consider this infrequently occurring behavior to fall under the rubric of NSSI. This form of SIB is of particular interest to clinicians working in or consulting to institutional settings (eg, corrections facilities, intermediate- to long-term residential treatment centers) and those involved with consultation-liaison services and emergency units. Although the book is clearly following the lead of the proposed *DSM-5* NSSI diagnosis, in which the criteria predominantly focus on identifiable surface damage, a book devoted to the broader concept of SIB should be expected to acknowledge the full range of NSSI described in the literature.

That said, this volume can provide significant understanding of key factors in differentiating and treating deliberate self-harm and is well worth reading. The chapters are well written in a style generally free of jargon; they are easily read and understood. The authors acknowledge limitations in the science as they present the knowledge base and how it fits into our comprehension of the related SIB phenomena. The final Special Issues chapters will be of interest and value to some readers and include such special topics as the overlap with interpersonal violence, terrorism, euthanasia and physician-assisted suicide, and suicide survivors. The editor’s 1-page “Conclusion to the Handbook” succinctly notes that the scientific advances in SIB have been exciting and are comprehensively presented in the book but concludes that numerous critical questions for guiding clinical care remain unanswered.

With NSSI as a provisional *DSM-5* diagnosis and with changes in the *DSM-5* expected to occur more frequently than in the past, *The Oxford Handbook of Suicide and Self-Injury* can provide clinicians with greater understanding of the issues for assessment and treatment. It also provides the reader the opportunity to be well informed for the coming dialogues about suicide and NSSI.

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