

They Were Crying for Help:

Suicide, “Deaths of Despair,” and the Crisis Among White Men in America

Introduction

They were crying for help.

Did we hear them?

Over the past several decades, the United States has experienced a troubling rise in suicide rates among certain demographic groups, particularly **white men, especially those in middle age and without college degrees**. This trend has drawn significant scholarly attention and has been widely associated with what economists and public health researchers describe as “**deaths of despair**.”

The term captures a cluster of related mortality causes—suicide, drug overdoses, and alcohol-related diseases—that appear tied to deep structural changes in American society. These deaths reflect not merely individual psychological struggles, but broader social forces including **economic dislocation, cultural expectations surrounding masculinity, limited healthcare access, and growing social isolation**.

Understanding this crisis requires looking beyond statistics and examining the social conditions that produced it. When viewed in this broader context, rising suicide rates may be interpreted as signals—warnings from communities experiencing profound disruption.

The Concept of “Deaths of Despair”

The phrase “**deaths of despair**,” popularized by economists **Anne Case and Angus Deaton**, refers to the dramatic increase in mortality among middle-aged Americans beginning in the late 1990s. Their research identified a pattern: individuals facing long-term economic decline were increasingly dying not from traditional diseases, but from **self-destructive behaviors and substance abuse**.

The three primary components of deaths of despair are:

- **Suicide**
- **Drug overdoses**
- **Alcohol-related diseases**

These outcomes often share underlying causes. Chronic pain, both physical and psychological, frequently intersects with unemployment, declining wages, and the erosion of community structures. When economic stability disappears, many individuals lose not only financial security but also **identity, social role, and purpose**.

For many workers who once relied on manufacturing, resource extraction, and other blue-collar industries, the disappearance of stable employment has created a persistent sense of displacement.

Economic Insecurity and the Loss of Social Identity

Since the late twentieth century, structural changes in the American economy have reshaped labor markets. Deindustrialization, globalization, and technological automation have significantly reduced the number of well-paying jobs available to workers without advanced education.

For many men whose identities were historically tied to being providers through manual labor or skilled trades, this transformation has carried profound psychological consequences.

Economic instability can lead to:

- Chronic financial stress
- Loss of personal identity and social role
- Declining community cohesion
- Increased vulnerability to substance abuse

When meaningful employment disappears, the resulting loss of dignity and purpose can create a powerful sense of hopelessness. In communities where these economic changes are widespread, despair can become normalized.

Cultural Expectations and Masculinity

Cultural expectations surrounding masculinity also play a critical role in suicide risk among men.

Traditional norms often emphasize **self-reliance, emotional restraint, and stoicism**. While these traits can sometimes be framed as strengths, they can also discourage men from acknowledging emotional distress or seeking help.

Sociologists describe these expectations as “**cultural scripts**”—shared assumptions about how individuals are expected to behave. For many men, these scripts may include beliefs such as:

- Emotional vulnerability should be hidden.
- Asking for help signals weakness.
- Personal struggles should be solved privately.

As a result, men experiencing depression or anxiety may delay or avoid mental health treatment. In some tragic cases, suicide may be misinterpreted—culturally or internally—as a form of control, escape, or even courage, rather than recognized as a preventable outcome of untreated distress.

Structural Barriers and Environmental Risks

Beyond cultural pressures, structural conditions also contribute to suicide risk.

Several environmental factors increase both the likelihood and lethality of suicide attempts:

Access to Lethal Means

High rates of firearm ownership significantly increase suicide lethality. Firearms are involved in a majority of suicide deaths in the United States because attempts using firearms are far more likely to result in death compared to other methods.

Limited Healthcare Access

Mental health care remains unevenly distributed across the country. Rural communities often face severe shortages of:

- psychiatrists
- therapists
- addiction treatment programs
- crisis services

Even when services exist, stigma, cost, and insurance barriers can discourage individuals from seeking treatment.

Social Isolation

Social connection is a powerful protective factor against suicide. Yet many individuals experiencing economic decline also experience **shrinking social networks**. Divorce, migration, unemployment, and community decline can all contribute to isolation.

Living alone or lacking supportive relationships significantly increases suicide risk.

Listening to the Warning Signs

When examined collectively, these trends reveal that rising suicide rates are not random events. They are **signals of deeper social distress**.

Communities affected by deaths of despair are often communities that feel **forgotten, displaced, or unheard**. Economic systems changed, cultural expectations remained rigid, and social support structures weakened.

In many cases, individuals were signaling distress long before tragedy occurred—through substance abuse, deteriorating health, and withdrawal from community life.

The question therefore becomes not only **why these deaths occurred**, but also **whether society recognized the warning signs in time**.

Conclusion

They were crying for help.

The evidence suggests that many signals were present—economic decline, rising addiction, worsening mental health, and increasing isolation.

Understanding the crisis of deaths of despair requires acknowledging that suicide is rarely the product of a single cause. Instead, it emerges from a **convergence of economic, cultural, and structural pressures** that accumulate over time.

Addressing the problem requires more than individual intervention. It demands broader societal responses that include:

- improved access to mental health care
- stronger community networks
- economic opportunities that restore dignity and purpose
- cultural shifts that allow men to seek help without stigma

Recognizing these signals—and responding with compassion and structural reform—may be the most important step toward preventing future tragedies.

Union of Saints