

## Suicide A Shifting Paradigm

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**Abstract:** This paper attempts to create awareness about the growing teen suicide rates and problems resulting from it. It is not among the most discussed topics even though the devastation caused by it calls for immediate attention. The rate of suicide attempts is alarmingly increasing, even worse that the attempts that culminate in deaths causing grievous loss to the relatives and dependents are just compensated by the political parties in no effort to prevent further attempts. The paper tries to bring to light the issues that are road blocks to solving this growing concern. Lack of mental health professional, awareness and a social setup that fails to promote mental health as a career option are a few among the lot. Although on the solution-side to this problem nothing much has been done, the paper tries to collate suggestions from various professionals that can be implemented to curb the issue of suicide.

**(Key words:** teen suicide, mental health)

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### SUICIDE A SHIFTING PARADIGM

Suicide is defined as the act of taking one's own life voluntarily by a person of years of discretion. It is the third leading cause of death today and is a terrible killer of the young. The rate of suicide increases every year and has increased to 200% since 1970.

Depression is one of the leading causes of suicide or attempts to suicide. Moreover, research indicates that more than 90% of people who either kill themselves or attempt to kill themselves suffered a major psychiatric or addictive mental illness like depression. We can hardly imagine the suffering and agony that precedes the decision of committing suicide besides the pain it causes to the family of the victim.

Seriousness of this act can be understood by the way it is looked upon by the national and international policy makers and governments who consider it to be as serious crime as murder. Although it can be prevented with timely help, the devastation caused by someone killing themselves is so profound that all help seems of no use if one is successful in the attempt. Therefore, prevention in some sense is the only cure in case of this 'epidemic' and so is the endeavor of this paper - spread awareness.

In this paper we intend to discuss the act of suicide, it's causes, tendencies and early signs, effects, differences in suicidal tendencies among men and women, and its prevention.

### I. Literature Review

#### MENTAL HEALTH

Dalal, Ajit K., & Misra, Girishwar (2006), the most acceptable definition of health is given by the WHO (1978): "Health is the state of complete physical, mental, social and spiritual well-being, and not merely an absence of disease or infirmity. "It is a definition of positive health and goes beyond the mere absence of a disease: the focus being on maintaining good health, rather than on the treatment of different diseases. This also makes health a multidimensional concept having four dimensions i.e. physical, mental, social, and spiritual. In today's world where stress has become a very common experience, it is one of the most used and abused terms in the public discourse. A large number of symptoms in medical diagnoses are attributed to stress. When people fail to handle their stress, they experience mental and physical health problems.

People facing various types of stress leading to mental health issues have different coping mechanisms. The two broad categories of coping are: *Problem focused* and *emotion focused*. While the former attends to the nature of the problem and its solution, the latter deals with engaging the self. Researchers distinguish between primary and secondary control. While primary control refers to person's control over the environmental factors, secondary control aims to bring changes in one's own self and involves the degree to which the person adapts to the environmental stresses. When the environmental stresses persist, people experience burn out. Coping often depends on the availability of resources and perception of control. There is increasing evidence that grief, depression, and other negative feelings are linked with the increased risk of infectious diseases. Stress related negative emotions tend to suppress body's immune system over an extended time, rendering the person vulnerable to a host of diseases. People fall ill because of some kind of pressure their lives go through. Since

stress works through the central nervous system the relationship of a stressor to the internal state depends on the meaning of that event for the person. Also, stress engenders changes to which a person must adapt. As change happens to be an essential aspect of life, it is hard to conceive of a state of stress which is qualitatively different from any other state of being alive. The experienced stress thus affects general health status by lowering immunity, rather than causing a specific disease.

Stress is still one of the most popular research topics in India. The Indian techniques of meditation and relaxation have much to contribute to stress alleviation programs, although Indian psychologists are yet to outgrow the narrow disciplinary boundaries and the limitations of their professional training to focus on the real issues. Health psychologists need to work in unison with health practitioners of both traditional and medical variety. Such intervention studies are the need of the hour. A health practitioner or a healer has to be something more than an expert in the field but has to be sensitive to the way people construe health and illness. Awareness in this area is sadly lacking. The processes of globalization, migration and communication revolution are restructuring the world of experience. This scenario is posing new challenges and giving opportunities for health psychologists. It is through innovative research, teaching and training that the emerging issues in the area of health psychology can be scientifically dealt with.

## **II. Suicide Related Statistics**

According to Mukunth 2017, India rates third among the highest teen suicides in the world of people aged between 15 to 29 years. Experts say that the major teen suicides in India are of middle income residents and the noticeable fact is that it is highest in southern states and lowest in the northern states. The leading causes for Indian teen suicides are family problems, mental illness, and drug abuse among the known causes. Moreover, the leading deaths were of women which further widens the gender disparity.

According to WHO statistics, India is facing a major issue in mental health problems due to scarce population of psychologist, social workers and psychiatrists. In India mental health problems are tuning to around 2443 DALYS (disability-adjusted life year) per 100000 population. It is estimated that, in India, the economic loss, due to mental health conditions, between 2012-2030, is 1.03 trillion of 2010 dollars. Mental health workforce in India (per 100,000 population) include psychiatrists (0.3), nurses (0.12), psychologists (0.07) and social workers (0.07). This inadequate number of workforce is leading to more suicidal attempts and leading to economic loss in India.

Khare, S. and Gupta, R. (2017, October 10), mental health crisis is magnified further due to the lack of sufficient mental healthcare infrastructure. According to statistics 60 million people in India suffer from mental disorders out of which 10% of the patients get treated and over 6.5 million people commit suicide. Of India's total health budget, a mere 0.06% is used for mental health care which is much lesser when compared to Bangladesh's mental health budget allocation. India spends almost 70% of its mental healthcare budget on secondary mental healthcare. However, if it spends more at primary care level it will be able to reach more people consequently address the problem early enough to reduce the need for expensive hospital care.

According to the survey from Hindustan times, India has a shortage of mental health professionals, psychiatrist and counselors' survey indicates that India is facing a shortage of 87% mental health professionals. There are 3800 psychiatrists, 898 clinical psychologists. Recent studies from 2015 indicated that India had a shortage of 66200 psychiatrists. This scarcity is in some sense a direct result of the traditional mindset of the society that holds only certain professions as the only acceptable choice. In order to prevent this scarcity, the government should create awareness among the community which will encourage teens to think of mental health as a career choice.

Teen suicide rates in southern part of India are escalating at a very gradual pace which has been the major cause for mortality in the country. According to the study done in Tamil Nadu 148 per 100000 women, whereas 58 per 100000 men are committing suicide. This accounts to 57% of deaths of young women. The promoting factors for these suicides are due to mental illness, domestic violence, study pressure etc. To avoid these disasters for young women, steps such as suicide prevention programs must be undertaken. Treatment of mental disorders along with better and equitable treatment of women in the society will allow reduction in suicide rates in India.

Suicidal Teens. (n.d.), Suicide is the second leading cause of death among teenagers aged 15-19 years as of 2014. The percentage of high school students who reported about having thought seriously about committing suicide declined from 29% in 1991 to 14% in 2009. However, this percentage started showing an increasing rate in 2015 as it reached 18%. Females are much more likely to admit to seriously consider suicides or attempt suicides; however, males are far more likely to succeed in committing suicide. Considering or attempting suicide is often indicative of serious mental health problems and signal other traumatic life events such as physical or sexual abuse. Youth who have experienced stressful life events, who have poor levels of communication with their parents are more likely to commit suicide. There are many rigorously evaluated programs such as coping and support training; good behavior game; care, assess, respond, empower (CARE);

signs of suicide prevention program, that have shown to be effective at reducing suicide risk behavior. Teens with suicidal behavior must be encouraged to indulge in such programs to help improve their mental health.

### **III. Gender and Mental Health**

Malhotra, S., & Shah, R. (2015, July), gender is a critical determinant of mental health and mental illness. The patterns of psychological distress and psychiatric disorder among women are different from those seen among men. Women have a higher mean level of internalizing disorders while men show a higher mean level of externalizing disorders. Women and men are different not only in their obvious physical attributes, but also in their psychological makeup. Thus, the gender differences are based in physical, physiological, and psychological attributes.

The morbidity associated with mental illness has received substantially more attention than the gender specific determinants and mechanisms that promote and protect mental health and foster resilience to stress and adversity. Studies of suicide and deliberate self-harm have revealed a universally common trend of more female attempters and more male completers of suicide. Symptoms of depression, anxiety, and unspecified psychological distress are 2–3 times more common among women than among men; whereas addictions, substance use disorders and psychopathic personality disorders are more common among men.

Gender determines the differential power and control that men and women have over the socioeconomic determinants of their mental health and lives, their social position, status and treatment in society and their susceptibility, and exposure to specific mental health risks. In addition, gender specific risk factors such as gender discrimination and associated factors of poverty, hunger, malnutrition, overwork, domestic violence, and sexual abuse combine to account for women's poor mental health. It is essential to recognize how the socio-cultural, economic, legal, infrastructural, and environmental factors that affect women's mental health are configured in the given community setting. Education, training, and interventions targeting the social and physical environment are crucial for addressing women's mental health. Concerted efforts at social, political, economic, and legal levels can bring change in the lives of Indian women and contribute to the improvement of the mental health of these women.

Teen Suicide Statistics. (n.d.), thousands of teens are committing suicide every year making it an important issue to be looked into. Suicide does not just happen as a result of impulsive behavior but is a result of mental health issues like depression, anxiety. Most teens who kill themselves are said to have a mood disorder. A mood disorder being an illness of the brain can come suddenly or can be present on and off for most of a teen's life. This disorder leads to one having a particular mood for weeks or months or flip rapidly to another mood. Another disorder present in suicidal teens is Bipolar disorder also called 'Maniac depression'. This disorder leads to change between mania (angry or very happy), depression and euthymia (normalcy). Some teens have more mania, some have more depression, some seem normal most of the time. Sometimes mania can occur with depression and cause a mixed state. Mood disorders can be treated with medical help. Early detection, evaluation and effective treatment of mood disorders can help to prevent suicides.

### **Reasons**

The Burden of mental disorders has risen over the last few decades. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with normal stress of life, can work productively and is able to make a contribution to the society. The World Health Organization estimated that globally over 450 million people suffer from mental disorders and that these disorders account for about 12 percent of the global burden of diseases.

The Burden of mental disorders that are seen by the world is just the tip of the ice berg. Major proportions of mental disorders come from low and middle-income countries. The most strongly associated factors with mental disorders are deprivation and poverty. Individuals with low income levels, lower education levels and face lack of access to basic amenities are at a high risk of mental disorder. Females are more predisposed to mental disorders due to rapid social change, gender discrimination, social exclusion, gender disadvantage, domestic violence and husband's substance misuse habits. In India domestic violence is a big problem. A survey done in Maharashtra reported that 23 percent of women had been beaten in the last six months and 12 percent of them were threatened to be burned. Although the male population were reported to be at a higher risk, the causes being substance abuse and panic disorders. Besides substance abuse, suicide among young people has emerged as a major public health issue. The lack of awareness about mental health, mental disorders among common people, also the lack of awareness about treatment available for mental disorders is the main hurdle in combating the problem of mental health in India. India has focused its medical attention mainly to its maternal, child health and communicable diseases hence leading to lack of commitment towards non-communicable diseases, aggravating the load of mental disorders.

Mental disorders are seen to vary with time, with the same population. The dynamic and complex nature of these psychiatric illnesses impacts the mental and physical well-being of an individual and thereby

affects the society. To promote mental health, India has to create such living conditions and environment that support mental health and allow people to adopt a healthy lifestyle. They need to create a society that respects and protects basic, civil, political and cultural rights of men, women and children. The mental health policies should not only be concerned about mental disorders, but also should recognize and address the broader issues that promote and create awareness about mental health, its treatment and its importance.

Suicide is something that can be overlooked. It is the third leading cause of death in today's youth. Warning signs in teens will assist us curb the teen suicides. 90% of the teens show extreme reluctance to go to college, over 70% of them depressed and other behavioral changes, around 40-50% appear to have mental health issues like headaches, weight loss, etc., 30% have difficulty in falling asleep, fatigue, etc. These warning signs will help in identification of suspects in teen suicides. India being one of leading countries with increased teen death rates, prevention programs should be availed to curtail the death percentages in India.

Bullying has worse long-term adverse effects on young adults' mental health. Nearly 1 in 3 students report being bullied during every school year (NCES 2013). Approximately 34% students report experiencing cyberbullying and 15% students admitted to cyberbullying others in their lifetime (Patchin 2015). More than 1/3 of adolescents reported experiencing bias based school bullying and 85% LGBT youth reported experiencing harassment and bullying at school. When noticed, bullying stopped within 10 seconds, 57% of the time when one intervened. Intervention could help bring down the rate of bullying.

According to the WHO nearly a million people commit suicide each year. Suicide has been found to be the third leading cause of death for people in the age range of 15-24. Young people reportedly attempt or commit suicide due to their inability to face various factors. Bullying or harassing is one such major contributing factor to this. Teenagers feel helpless, defenseless and find themselves unable to control the situation while being bullied. This is because teenagers that experience being bullied perceive this emotional abuse as something permanent and are unable to see past their current circumstance. Teenagers contemplating suicide often show certain warning signs like withdrawal from friends and family, sleep disturbances, difficulty getting along with others and expressing negativity and a sense of hopelessness. Suicides cannot be prevented completely no matter how protective parents are or what anti-school bullying policies are implemented, however the suicide attempts can be prevented by being more willing to listen, being non-judgmental, seeking professional help for the victim of abuse. Reminding teens that bullying is a phase that will end is vital to make them realize that a permanent action like suicide is not the answer to a temporary phase like bullying.

Teen suicide is a growing concern and is the second leading cause of death among the age group of 15-24 years surpassed by accidents. Suicidal distresses include psychological, environmental, social and risk factors. Mental illness is the leading risk factor for suicide, risk factors include depression, mental disorders, and substance abuse disorders. More than 90% who commit suicide exhibit these risk factors in them. Adolescents are much vulnerable to the associated risks. Some of the stressors of mental illness or depression are personal loss, family violence, sexual orientation confusion, victim of bullying, sexual and physical abuse. Suicide is a relatively rare event as far as predictability is concerned. Signs like talking about death, change in food habits, insomnia and low self-esteem are some of the indicators of suicidal behavior. Effective suicide prevention programs that equip mental health professionals, community educators, leaders, crisis hotlines can help save lives by providing assistance to suicidal individuals.

#### **IV. Toward Preventing Suicidal Tendencies**

Youth being the future of the world are not emotionally well equipped and stable. According the study done by Yale University business leaders are worried about the future of youth doing suicides which will in turn affect the corporate world as well as the economy of the country. Teens build up stronger emotional intelligence. According to noble literature James Heckman investing in non-cognitive skills like motivation, perseverance, and self-control is a cost-effective approach to increasing the quality and productivity. Building up foundation in social and emotional learning from childhood will create a stronger person with more emotionally controlled person in future which will diminish the rate of teen suicide in country.

#### **V. Discussion**

In the above research papers, Stress is one of the factors that is attributed as one of the leading causes of suicide directly or indirectly. Stress being subjective in nature has been spoken about in general sense. In depth analysis of the nature of stress and its variability with gender and age has not been discussed upon. A lot of stress is laid on the lack of mental health professional as one of the factors contributing to the issue of suicide. Which in terms of statistics is a real concern the government and concerned bodies should address without delay. But most papers are only indicative or expository in nature and not remedial or do not suggest remedies to solve this problem.

Although suicide statistics covering entire India has been presented by most of the papers mentioned above, there is more stress on the statistics of Southern Indian states as far as suicide rates are concerned. Presenting statistics of the northern states as well would allow better and accurate understanding.

One of the key findings is that more women think of suicide or attempt suicide compared to men at the same time the statistics indicate that more attempts by men culminate in death. This can help target the problem more specifically with specifically designed programs for both men and women.

The list of key factors responsible for suicides and suicide attempts is overshadowed by mental illness. The paper indicates that even though the leading cause is known, it is difficult to help because of the orthodox attitude of the society toward mental illness in India. More programs focused on creating awareness have been on the rise although much far from the intended impact.

## VI. Conclusion

Suicide is a bigger problem than the society is currently willing to admit. From the paper it is clear that the problem could reach a status of an epidemic. The leading cause of the problem of suicide in general seem to be something that can be dealt without much difficulty but the attitude of the suicide is making it hard to even make an attempt to do so.

Although the difference in the statistics showing suicidal tendencies in men and women is significant, both need customized programs to deal with gender specific thought patterns and mental illness that lead to becoming suicidal. This is necessary to be effective besides getting the adequate number of professionals for the execution of remedies and treatment.

Shifting of attention from just indicating the presence of the problem to solution centric approach is necessary as the data shows that studies have been indicating to an alarming trend of increasing suicide rates and nothing much seems to be done in this regard. Therefore, awareness leading to a changed attitude of the society and promoting mental health as a career choice to counter the lack of professionals are the need of the hour.

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