

## **What leads to the Ultimate Decision? A Sociological Analysis of Escalating Rates of Suicides among Children in India**

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### **Abstract:**

*The notions of a good childhood are inextricably linked with the physical, mental and social well being of children. People all over the world consider their childhood to be the best phase of their life. But now, in present day India and more specifically West Bengal, lived experiences of children in both private and public domains undoubtedly threaten their well-being. Among many other issues, the escalating number of suicides, committed by children in the past few years has received serious attention of people from all sections of our society regarding what can be done to give the children a better place for living. In this backdrop, this article, based on secondary analysis aims to take up issues related to 'crisis of childhood' by analysing the vulnerable positions children are living in as well as identifying what factors are responsible for the commission of suicide in this tender age.*

**Key words:** *childhood, well-being, crisis, suicide*

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### **I. INTRODUCTION:**

Sociological discourses on children and childhood burgeoned in the 1990s, during the socio-cultural, economic and political transformations caused by globalization and neo-liberalism. Since then substantial amount of research on various issues related to children has been conducted to bring into light the problems faced by them as well as to focus on their lived experiences in everyday life.

It was told long ago that a whole village or community plays a significant role in rearing up and socializing a child. Children were mostly considered passive recipients of social-structural and functional aspects in general and familial possessions in particular. However, since the emergence of the sociological discourses on child and childhood, their role as active agents has been recognized worldwide, and though later but India has also accepted this strand in recent past. Addressing various problematic areas of children's lives was of primary concern for the scholars. Thus, abuse of children (physical, mental, sexual), their psychological problems, problems faced by them within the so-called protective areas of families and educational institutions etc. and many more gradually became noticed and documented for further understanding. However, in recent times children globally and of-course in our own country are going through phases that are not only 'risky' and full of challenges/crises but also pose serious threat to the overall well-being of them.

Childhood is regarded as perhaps the best phase of an individual's life, when they are free from the tensions and troubles of everyday life, when playing is the most desired activity and obviously dreaming about the future gives encouragement and strength to go ahead in life. But in recent past these beautiful essences of childhood have been lost in many cases, where failing to achieve more in life they fall prey to the pressures created by them, their families, peers and all others and thus ending life becomes the only option. Thus escalating number of suicides among the children in our society has become a major crisis today, which not only needs to be addressed as a serious concern but proper care has to be taken in order to channelize the efforts of children in several positive and productive arenas of life.

### **Sociological Discourses on Suicide:**

Suicide or killing of one's own self has been researched by very few sociologists till-date. However, it has always been an interesting area of research for the psychologists and often medical practitioners. Eminent French sociologist Emile Durkheim (1858-1917) was the first one to have authored a whole book on suicide 'Suicide: A Study in Sociology' (1897). Durkheim's aim was to offer sociological explanations for the increasing number of suicides in the French and other European countries. Durkheim chose to study suicide because it is a relatively concrete and specific phenomenon. There were relatively good data available on suicide, and above all it is generally considered to be one of the most private and personal of acts. Durkheim believed that if he could show that sociology had a role to play in explaining such a seemingly individualistic act

as suicide, it would be relatively easy to extend sociology's domain to phenomena that are much more readily seen as open to sociological analysis (Ritzer, 2011:84). As a sociologist Durkheim's concern was not to study suicide as an individualistic act, rather he was more interested to explain differences in suicide rates as well as identify what social factors are responsible for the commission of such act. Thus, his first and foremost concern was to define suicide. He wrote in the book (1897), "The term suicide is applied to all cases of death resulting directly or indirectly from a positive or negative act of the victim himself, which he knows will produce this result." (p. 44)

Comparative statistics for countries and categories of people within each country showed that suicide rates were relatively constant; therefore, it must be a social fact that a collective tendency towards suicide existed. These collective tendencies could be related to sets of causes to produce a classification of types of suicide. The sets of causes were theoretically postulated on the basis of Durkheim's conception of possible imbalances between centrifugal forces (too much individualism) and centripetal forces (too much social pressure) (Thompson, 2007:110). He identified that currents of egoism, altruism or anomie are each a measure of the social cohesion or integration in the society, and suicide therefore "varies inversely with the degree of integration of the social groups of which the individual forms a part" (1897b:209). Egoistic suicide as Durkheim says, occurs when the cohesion and solidarity of the group or community has declined to such an extent that the individual cannot rely upon it for any support. The individual is isolated and potentially suicidal because the 'ties uniting him with others are slackened or broken' because of the 'weakening of the social fabric' (1897b:281). On the other hand, altruistic suicide is the result of excessive integration of the individual into the group. Suicide occurs because the 'ego is not its own property' (1897b:221). The suicidal individual who is completely absorbed by the group feels it is his or her duty to commit suicide in order to benefit the group or collectivity. Another form, Durkheim considered most important was anomic suicide, which is a result of the breakdown of moral community and the resulting disturbance of social equilibrium. According to Durkheim, it is 'man's nature to be eternally dissatisfied' and to have unlimited desires (1897b:257). But unlimited desires are 'insatiable by definition and insatiability is rightly considered a sign of morbidity (1897b:247). Man accepts the restraint of society as a 'conscience superior to his own'. But when this conscience is disturbed, it cannot exercise restraint, and the result is 'sudden rises in the curve of suicides' (1897b:252). Durkheim also identified a fourth type of suicide namely fatalistic suicide, however his discussion of it was very brief and he accorded very little significance to the nature of this type of suicide. He stated that fatalistic suicide was the result of excessive social regulation. Historically the suicides of slaves and those subject to 'excessive physical and moral despotism' were examples of this form of suicide. Nonetheless, Durkheim argued that it has little contemporary importance and examples are hard to find (Sydie, 2012:99).

Durkheim's classification and clarification of the types of suicide have emphasized mostly on the egoistic and anomic forms, underlying which are individualism and boundless appetites of individuals in the backdrop of industrialized societies. Similarly, in present day fast-paced globalized/ globalizing world individuals suffer from the everlasting wrangling and endless friction especially when relations between individuals are not subject to any regulative influence.

### **Children and Suicide: What leads to the ultimate decision of ending life?**

As portrayed above, suicide has been studied and discussed in relation to various social forces or factors in the European societies of 19<sup>th</sup> and 20<sup>th</sup> century. Based primarily on Durkheimian theory of suicide, here the attempt is to identify the root causes behind the commission of suicide especially among the children and young generation of our present-day society.

The rates of suicide have greatly increased among youth, and youth are now the group at highest risk in one-third of the developed and developing countries (Radhakrishnan and Andrade, 2012:304). The World Health Organization (WHO) also estimates that of the nearly 900,000 people who die from suicide globally every year, 170,000 are from India. However, India's National Crime Records Bureau (NCRB) – which report official suicide rates based on police reports – estimated only 135,000 suicides in 2011. Suicide is a global phenomenon; in fact, 78% of suicides occurred in low- and middle-income countries in 2015. Suicide accounted for 1.4% of all deaths worldwide, making it the 17th leading cause of death in 2015 (Rane and Nadkarni, 2014:69).

India has one of the world's highest suicide rates for youth aged 15 to 29, according to a 2012 Lancet report, which illustrated the need for urgent interventions. At the same time, National Crime Records Bureau (NCRB) 2015 quoted that every hour one student commits suicide in India. According to NCRB, during 2015 total 790 cases of suicides were reported among male children below 14 years of age and 678 such cases were reported among female children below 14 years of age. However, as the definition of child refers to any boy or girl below 18 years of age, it was also noticed that 3672 boys between 14 and 18 years of age and 4268 girls of the same age group committed suicide in 2015 (NCRB Report 2015: Accidental Deaths and Suicides; p-200).

**Causes of suicide among children:**

Scholars have worked on this issue as a matter of serious concern, particularly over the last two decades. Both academic articles and newspaper investigations have claimed that a combination of several factors is actually responsible for the commission of suicides among the children all over India. Family problems, economic crisis in family, failure in educational achievement, peer-pressure as well as love affairs are among the many causes of suicides these days. As projected in NCRB data of 2015 (published on 29<sup>th</sup> July 2016), the primary causes of suicides among people below 18 years of age are- failure in examinations (1360 cases), family problems (2139), illness (904), love-affairs (814) etc. The report also presented that while in 2011 total 7696 cases of suicides were reported it gradually increased over the years and rose up to 8934 in 2015 and 9474 in 2016. Few cases in this context are worth mentioning, which not only have been reported as suicide cases but also have presented before us the 'dark-side of childhood experiences'.

Children all over the world are also often identified as 'students', because childhood is the phase of life when people initiate to go to schools. Gradually they also become active parts of many other social institutions. However, with time the little children not only experience various difficulties in life but also often succumb to them. 'Failure' becomes the major crisis of their life. Failure to do well in examinations or educational field as a whole leads them towards utter depression, which further compels them to take their own life. Failure in examinations led to 2,413 suicides by students in 2016—or seven every day—accounting for 25% of student suicides. Over 23,000 student suicide deaths in India (30%) have been attributed to failure in examinations between 2007 and 2016.

"The popular perception is that failing exams or inability to cope with academics is the primary reason for student suicides," Shaibya Saldanha, co-Founder of Enfold India, an NGO which works with children and adolescents, had told IndiaSpend. "This is rooted in a sense of helplessness or extreme frustration."

Newspaper reports showed that a 16-year-old from West Bengal, committed suicide allegedly after failing to clear the IIT-JEE- Mains in April 2017. Earlier in January, the same step was taken by a 19-year-old medical-school aspirant from Himachal Pradesh, who, like many others, had made their way to the town with dreams of a brighter future. In another case, 24-year-old management student Arjun Bhardwaj, streamed his suicide as a 'live tutorial' on Facebook before jumping to his death from a Mumbai hotel. The student's father reportedly told the police that his son was depressed "due to repeated failure in exams" (Times of India, January 8, 2018). Besides these, many reported cases of suicide of children have shown that poor academic performance followed by family pressure is the main reason for committing suicide. For instance, an eleventh standard student Samprit Banerjee (17 years) committed suicide on January 2018 at his residence at Paschim Putiary's Banerjee para, as his parents scolded him for poor results (India Blooms News Service, January 19, 2018). Parents' inability to achieve their desired success and reputation in life also often make the children stressed and burdened as they are expected to achieve those things that their parents could not get in their time. Heightened expectations and failure to fulfil them drive the children towards ending their life. Here, sociologically speaking Durkheim's concept of anomie is relevant because when there is lack of social regulation or control, individual's demands and expectations are heightened. Children aspire to be wealthy, famous and use every possible means to achieve success. Their unlimited aspirations and expectations are no more regulated by their family as well as other existing social institutions. Competition prevails everywhere in the lives of children of present times. Furthermore, huge population and diversity also do not allow everyone to get everything or things that they crave for. In such situations, the failure to get desired outcomes or things lead children to commit suicide. Thus, every year we find cases of self-killing of children in almost each corner of the country. Nonetheless, according to NCRB 2016 data, Maharashtra topped in students suicide (1350), followed by West Bengal (1147) and Tamil Nadu (981) respectively. An article in The Hindu (29.01.2020) claimed that every hour one student commits suicide in India, with about 28 such suicides reported every day, according to data compiled by the National Crime Records Bureau (NCRB). The NCRB data shows that 10,159 students died by suicide in 2018, an increase from 9,905 in 2017, and 9,478 in 2016. Every hour one student commits suicide in India, with about 28 such suicides reported every day, according to data compiled by the National Crime Records Bureau (NCRB) (The Hindu, January 29, 2020).

Sociologist Samata Deshmane says in this context, "Society is transforming, and people are finding it difficult to cope with it, whether it is apparent or otherwise. One of the oldest definitions of our species says that we are social animals, but today we are less social and more individualistic. Apart from things like caste and religion, which also unite people at a superficial level, people are forced to be competitive and worry only about oneself, often depriving several others of a cushion" (Times of India, January 8, 2018). As per data from the Department of Higher Education, under the Ministry of Human Resource Development (MHRD), 27 students across 10 Indian Institutes of Technology (IITs) committed suicide between 2014 and 2019. IIT Madras tops the list, with seven students losing their lives during this period. In April last year, 19 students in Telangana committed suicide in a week after the State's intermediate results were announced. Two years back, in another tragic incident in Madhya Pradesh, 12 students including six girls ended their lives in a single day after the

release of the board exam's results. Kota, primarily known as a coaching centre hub, has seen a series of student deaths every year. As per the data available from the district administration, 58 students ended their lives in Kota between 2013 and 2017 (The Hindu, 29.01.2020)

Besides, peer-pressure is another major cause for children's suicide. Unrestrained desires followed by constant competition not only create fission among children but also impart in them the feeling of relative deprivation. Children are never a homogeneous category. There can be variations on the basis of their race, class, ethnic background, religion, region etc. and many more and thus there emerge multiple realities, experiences and often inequalities among children. While children from affluent families get their desired objects very easily, children from middle and lower class backgrounds often fail to get them. This undoubtedly creates a feeling of deprivation as well as unequal situations for the children. Little minds are not mature enough to understand such inequalities and failing to get what they want they often opt for the ultimate resolution, i.e. committing suicide. In this context we can once again go back to Durkheim, who emphasized exclusively on social forces behind the commission of suicide. His definitions of both egoistic and anomic suicide are relevant today, because individuals in general and children in specific nowadays are also very self-centred. Their individual ego prevails over the social ego and often being unaware of the outcome, they isolate themselves from the rest of the society. The attachment with the society and its people have become so less that the children do not find any friends or close ones to share their emotions as well as to seek support from and ultimately commit suicide. Thus, failure in the sphere of education, excessive family pressure, peer-pressure and feeling of relative deprivation drive the children off to the paths of committing suicide. The crisis becomes so big and significant that they can't even escape it.

## II. CONCLUSION:

Today's children are tomorrow's future. But what kind of future are we planning for them? While on the one hand we are talking of sustainable development, we ourselves are making the society so brutal that our children are having difficulty to breathe in.

Till recently, suicide was a criminal offence in India. However, the overturning of Section 309 by the Indian Government, and thus decriminalization of suicide, is a welcome step in the direction of a pragmatic and compassionate approach to suicide. The stated reason for criminalization of this behaviour was the belief that law can act as a deterrent against other such attempts in the society (Aggarwal, 2015:132). The change in policy in India followed a recommendation from the Indian Law Commission in 2008. This report mandated that people attempting suicide would be presumed to be suffering from mental illness and thus not liable for punishment. However, according to WHO data only about 60% of people who die by suicide in India suffer from a mental illness, when compared with up to 90% of those in high-income countries (Aggarwal, 2015:132). The decriminalization of suicide is likely to positively influence mental health practice in India. The anticipated changes include accurate reporting and recording of suicide as a cause of death, reduction in stigma associated with suicidal behaviour and use of these figures to inform suicide prevention strategies.

Moreover, it is the duty of parents, teachers, neighbours, relatives and all others to provide a healthy and peaceful environment for the children. We have to nurture them with care and affection, punish them as and when required but above all we have to listen to them, their everyday experiences, problems etc. and it is also our duty to understand them. Adults in our society have to understand and realize that children are not only passive recipients of our wills and actions, their voices also need to be heard. Apart from familial support, educational institutions also should take active part in counselling children as well as helping them channelize their efforts for some good causes. The government and other non-govt. and welfare organizations should also come forward to help parents to guide their children in each and every step of their life. Parents should also be taught how to deal with their children, the proper ways to guide them as well as most importantly to have patience to understand them. Children have to be convinced that failure does not mean the end of life, rather failure paves the way for future progress and success. On a final note it can be said that identifying and addressing the issues and problems in their life will surely help us to create a better humanitarian place for the children to live in. And then only the NCRB reports can project a downward curve in the suicide rate among children and India will no longer be in the top with regard to suicides among children and youth.

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