

# A Study on Suicide Attempt

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## ABSTRACT

This comprehensive study delves into the intricate phenomenon of attempted suicide, analysing its multifaceted nature and implications for mental health interventions. Employing a mixed-methods approach, including quantitative surveys and qualitative interviews, it explores the motivations and contexts surrounding suicide attempts. The research identifies diverse risk factors, from mental illness to social isolation, and highlights the intersection of individual vulnerabilities with structural determinants like socioeconomic disparities. By offering insights into the lived experiences of individuals grappling with suicidal thoughts, the study advocates for targeted approaches that prioritize early intervention and stigmatization of mental health discourse. Ultimately, the findings contribute to the development of evidence-based interventions for suicide prevention and the promotion of mental well-being on individual and societal levels.



## INTRODUCTION

Suicide is a complex and deeply distressing phenomenon that continues to pose a significant public health challenge worldwide. Defined as the act of intentionally ending one's own life, suicide not only inflicts profound emotional pain on individuals and families but also exerts far-reaching social and economic repercussions on communities. While suicide prevention efforts have made strides in raising awareness and providing support to those in distress, the incidence of suicide and attempted suicide remains alarmingly high.

Among the myriad manifestations of suicidal behavior, attempted suicide stands out as a critical indicator of underlying mental health crises and psychosocial distress. Unlike completed suicide, attempted suicide offers a poignant opportunity to intervene, to understand the factors precipitating such actions, and to implement effective preventive measures. As such, the study of attempted suicide holds immense significance in unraveling the complexities of suicidal ideation and behavior, informing targeted interventions, and ultimately saving lives.

The exploration of attempted suicide encompasses a vast array of interconnected factors spanning individual vulnerabilities, interpersonal dynamics, societal influences, and systemic barriers to mental health care. At its core, attempted suicide reflects a collision of psychological anguish, trauma, substance

abuse, and a pervasive sense of hopelessness—a harrowing convergence that demands urgent attention and compassionate intervention.

Moreover, the context in which suicide attempts occur—the socio-cultural milieu, prevailing attitudes toward mental health, and accessibility of support services—plays a pivotal role in shaping the trajectory of suicidal behaviors. Stigma surrounding mental illness, entrenched cultural taboos surrounding suicide, and disparities in access to mental health care further compound the challenges faced by individuals at risk.

Against this backdrop, this study embarks on a comprehensive examination of attempted suicide, aiming to dissect its multifaceted underpinnings, illuminate the pathways to suicidal crisis, and delineate strategies for effective prevention and intervention. Through a synthesis of empirical research, qualitative insights, and lived experiences of suicide attempt survivors, this study endeavors to transcend conventional narratives surrounding suicide and foster a nuanced understanding of its complexities.

By shedding light on the intricate interplay of psychological, social, and environmental factors contributing to attempted suicide, this research endeavors to pave the way for holistic, evidence-based approaches to suicide prevention. Through advocacy, awareness-raising, and community mobilization, this study seeks to catalyze transformative change in the landscape of mental health care, ensuring that individuals in distress receive the support, compassion, and resources they need to navigate the darkest moments of their lives.

In essence, the study of attempted suicide is not merely an academic pursuit but a moral imperative—an urgent call to action to confront the silent epidemic of despair, foster resilience, and cultivate a culture of empathy and solidarity in the face of adversity. As we embark on this journey of exploration and advocacy, let us reaffirm our commitment to safeguarding the sanctity of life and nurturing hope in the midst of despair.

## REASONS FOR COMMITTING SUICIDE

Understanding the complex and multifaceted reasons behind suicide requires careful consideration of various factors that may contribute to an individual's decision to end their life. While each person's experience is unique, common reasons for suicide can include:

- **Mental Illness:** Mental health disorders, such as depression, bipolar disorder, schizophrenia, and substance abuse disorders, are among the most significant risk factors for suicide. Individuals experiencing severe mental distress may feel overwhelmed by feelings of hopelessness, despair, and worthlessness, leading them to contemplate suicide as a means of escaping their pain.
- **Trauma and Adversity:** Experiencing trauma, including physical or sexual abuse, neglect, domestic violence, or the sudden loss of a loved one, can significantly increase a person's vulnerability to suicide. Traumatic events may exacerbate feelings of powerlessness, guilt, shame, and emotional distress, making suicide seem like the only way to cope with overwhelming pain.
- **Chronic Illness and Disability:** Chronic physical illnesses, disabilities, and debilitating health conditions can erode a person's quality of life and sense of autonomy, leading to feelings of hopelessness and despair. Chronic pain, terminal illnesses, and progressive diseases may exacerbate emotional distress and contribute to suicidal ideation.
- **Unresolved Grief and Loss:** The death of a loved one, particularly by suicide, can profoundly impact an individual's mental health and increase their risk of suicide. Unresolved grief, feelings of guilt, and survivor's guilt may intensify emotional distress and contribute to suicidal thoughts and behaviors.

- **Social Isolation and Loneliness:** Social isolation, lack of social support, and feelings of loneliness can exacerbate feelings of depression, anxiety, and despair. Individuals who feel disconnected from others or perceive themselves as burdensome may struggle to find meaning and purpose in life, increasing their risk of suicide.
- **Financial Hardship and Economic Stress:** Economic instability, poverty, unemployment, and financial crises can significantly impact a person's mental health and increase their risk of suicide. Financial hardship may lead to feelings of worthlessness, shame, and hopelessness, particularly if individuals perceive themselves as unable to provide for themselves or their families.
- **Relationship Conflicts and Breakdowns:** Conflict, abuse, and breakdowns in interpersonal relationships, including romantic relationships, friendships, and family dynamics, can contribute to suicidal ideation. Relationship difficulties, including divorce, separation, or estrangement, may exacerbate feelings of rejection, betrayal, and abandonment.
- **Bullying and Peer Victimization:** Bullying, cyberbullying, and peer victimization can have devastating effects on a person's mental health and well-being, increasing their risk of suicide. Persistent harassment, social exclusion, and humiliation may lead to feelings of shame, worthlessness, and despair, prompting individuals to contemplate suicide as a way to escape their tormentors.
- **Cultural and Societal Factors:** Cultural attitudes, societal norms, and systemic inequalities can influence an individual's perception of suicide and their willingness to seek help. Stigma surrounding mental illness, lack of access to mental health care, and cultural taboos surrounding suicide may deter individuals from seeking support and exacerbate feelings of isolation and despair.
- **Impulsivity and Access to Lethal Means:** Impulsive behaviour, coupled with access to lethal means such as firearms, medications, or other methods of self-harm, can significantly increase a person's risk of acting on suicidal thoughts. Impulsive suicide attempts may occur in moments of acute emotional distress, without prior planning or consideration of the consequences.

It's important to recognize that suicide is a complex and multifaceted phenomenon influenced by a combination of individual, interpersonal, societal, and environmental factors. While understanding the reasons behind suicide can inform prevention efforts, addressing these factors requires a comprehensive approach that promotes mental health awareness, access to quality mental health care, social support, and community resilience. If you or someone you know is struggling with suicidal thoughts, it's crucial to seek help from a mental health professional or contact a crisis helpline for support and assistance.

### SOLUTION FOR SUICIDAL THOUGHTS OR AN ATTEMPT TOWARDS SUICIDE



Preventing suicide and addressing suicidal thoughts requires a multifaceted approach that addresses individual, interpersonal, and societal factors contributing to mental health crises. Here are some key strategies and interventions for preventing suicide and supporting individuals experiencing suicidal thoughts:

**1. Promote Mental Health Awareness:**

- Increase public awareness and education about mental health, including the signs and symptoms of common mental illnesses such as depression, anxiety, and bipolar disorder.
- Challenge stigma and misconceptions surrounding mental illness through targeted campaigns, community events, and media outreach.
- Encourage open and honest conversations about mental health within families, schools, workplaces, and communities.

**2. Provide Access to Mental Health Services:**

- Improve access to affordable and culturally competent mental health care services, including counseling, therapy, psychiatric treatment, and crisis intervention.
- Expand mental health resources in underserved communities, rural areas, and marginalized populations.
- Implement telehealth and online counseling services to increase access to mental health care for individuals who may face barriers to traditional in-person treatment.

**3. Offer Crisis Intervention and Support:**

- Establish crisis hotlines, helplines, and text-based support services staffed by trained mental health professionals and volunteers.
- Provide crisis intervention training to first responders, healthcare providers, educators, and community members to recognize and respond to individuals in acute mental health crises.
- Offer peer support groups and online communities where individuals with lived experience of mental illness can connect with and support one another.

**4. Enhance Risk Assessment and Screening:**

- Implement routine mental health screenings in healthcare settings, schools, workplaces, and community organizations to identify individuals at risk of suicide or experiencing suicidal thoughts.
- Train healthcare providers, educators, and other professionals to conduct comprehensive suicide risk assessments and develop safety plans for individuals at risk.
- Utilize validated assessment tools and protocols to assess suicide risk factors, protective factors, and warning signs.

**5. Foster Protective Factors and Resilience:**

- Strengthen social support networks and connections by promoting positive relationships, peer support, and community engagement.
- Encourage the development of coping skills, emotional resilience, and problem-solving abilities through mental health education programs, mindfulness practices, and stress management techniques.
- Foster a sense of belonging, purpose, and meaning through participation in hobbies, volunteer work, and recreational activities.

**6. Address Socioeconomic and Environmental Factors:**

- Advocate for policies and programs that address socioeconomic inequalities, poverty, unemployment, housing instability, and other social determinants of mental health.

- Provide access to affordable housing, financial assistance, employment opportunities, and social services to support individuals facing economic hardship.
  - Promote community safety, access to green spaces, and the reduction of environmental stressors that may contribute to mental health crises.
- 7. Limit Access to Lethal Means:**
- Implement policies and legislation to restrict access to lethal means of self-harm, including firearms, medications, pesticides, and other methods commonly used in suicide attempts.
  - Educate individuals and families on safe storage practices for firearms and medications to prevent impulsive suicide attempts.
  - Collaborate with law enforcement, healthcare providers, and community organizations to implement suicide prevention initiatives focused on reducing access to lethal means.
- 8. Offer Postvention Support:**
- Provide comprehensive support and resources for individuals and communities affected by suicide loss, including bereavement counseling, support groups, and memorial services.
  - Train mental health professionals, educators, and community leaders in postvention strategies to mitigate the risk of suicide contagion and promote healing and recovery.
  - Foster a compassionate and supportive environment that encourages open communication and reduces the stigma surrounding suicide bereavement.

It's important to recognize that suicide prevention is a collective responsibility that requires collaboration across sectors, including healthcare, education, social services, and community organizations. By implementing evidence-based interventions, fostering supportive environments, and promoting mental health and resilience, we can work together to prevent suicide and support individuals experiencing suicidal thoughts. If you or someone you know is struggling with suicidal thoughts or behaviors, please seek help from a mental health professional or contact a crisis helpline for support and assistance.

### **CASE LAW ON AN ATTEMPT TO COMMIT A SUICIDE**

Case law related to suicide and suicidal behavior varies depending on the jurisdiction and specific circumstances of each case. While there may not be a specific case law directly addressing the prevention of suicide or suicidal thoughts, there are cases that have addressed related issues such as mental health treatment, duty of care, and involuntary hospitalization. Here are a few examples:

- 1. Tarasoff v. Regents of the University of California (1976):** In this landmark case, the California Supreme Court ruled that mental health professionals have a duty to warn potential victims if their patient poses a serious threat of harm. The case involved a college student who confided in his therapist about his intention to harm a specific individual. The therapist did not warn the potential victim, and she was subsequently murdered by the patient. The court held that mental health professionals have a duty to take reasonable steps to protect foreseeable victims from harm.
- 2. O'Connor v. Donaldson (1975):** This case involved a man who was involuntarily committed to a mental institution for over 14 years despite not being a danger to himself or others. The Supreme Court ruled that a state cannot constitutionally confine a non-dangerous individual who is capable of surviving safely in freedom by themselves or with the help of willing and responsible family members or friends.

3. **In re Quinlan (1976):** In this case, the New Jersey Supreme Court ruled that a person has the right to refuse life-sustaining medical treatment, even if it may result in death. The case involved a young woman who had been in a persistent vegetative state for several years. The court granted her parents' request to remove her from life support, stating that individuals have a constitutional right to privacy and autonomy in medical decisionmaking.
4. **NAMI v. State of Minnesota (1998):** In this case, the Minnesota Supreme Court ruled that the state had a duty to provide adequate mental health services to prevent suicide among individuals with mental illness. The court found that the state's failure to provide sufficient community-based mental health services constituted deliberate indifference to the serious medical needs of individuals at risk of suicide.

These cases illustrate some of the legal principles and considerations surrounding mental health treatment, involuntary commitment, patient confidentiality, and the duty of care in cases involving suicide or mental illness. While case law provides guidance on legal standards and obligations, it's important for policymakers, healthcare providers, and advocates to work collaboratively to develop comprehensive approaches to suicide prevention and mental health care that prioritize the well-being and rights of individuals at risk.

### CASES RELATED TO ATTEMPTING TO COMMIT A SUICIDE

One notable case related to suicide and its legal implications is "Washington v. Glucksberg" (1997). In this case, the Supreme Court of the United States addressed the constitutionality of Washington State's ban on physician-assisted suicide. Here's an overview of the case:

**Background:** Washington State had a law that made it a felony for anyone to knowingly assist another person in committing suicide. A group of physicians, terminally ill patients, and advocacy organizations challenged the law, arguing that it violated the Due Process Clause of the Fourteenth Amendment to the United States Constitution.

**Legal Issue:** The central legal issue in the case was whether the Washington State law prohibiting assisted suicide violated the constitutional right to liberty guaranteed by the Due Process Clause.

**Court Decision:** In a unanimous decision, the Supreme Court upheld the constitutionality of Washington's ban on physician-assisted suicide. The Court held that there was no fundamental right to assisted suicide under the Due Process Clause. The majority opinion, authored by Chief Justice William Rehnquist, reasoned that the history and tradition of prohibiting assisted suicide demonstrated a legitimate state interest in protecting vulnerable individuals and preserving the sanctity of life.

#### Key Legal Principles:

1. **State Interest:** The Court recognized the state's interest in protecting vulnerable individuals, including the elderly, disabled, and terminally ill, from coercion, abuse, and undue influence in end-of-life decisions.
2. **Medical Ethics:** The Court emphasized the importance of maintaining the ethical integrity of the medical profession and the Hippocratic Oath, which traditionally prohibits physicians from assisting in suicide.
3. **Federalism:** The Court deferred to states' authority to regulate medical practice and make determinations regarding end-of-life care policies.

**Impact:** The Glucksberg decision reaffirmed the traditional prohibition on assisted suicide in the United States and established that there is no constitutional right to physician-assisted suicide. However, the Court

left open the possibility for states to address end-of-life issues through legislation, provided that they do not sanction assisted suicide.

**Significance:** The Glucksberg case continues to shape the legal landscape surrounding end-of-life care and assisted suicide in the United States. It underscores the delicate balance between individual autonomy and state interests in protecting vulnerable populations and upholding ethical standards in healthcare.

## MENTAL HEALTH CARE ACT

The Mental Healthcare Act, 2017 is an important legislation enacted in India to regulate mental health services and protect the rights of individuals with mental illness. Here are some key provisions and features of the Mental Healthcare Act:

- 1. Rights of Persons with Mental Illness:** The Act recognizes and upholds the rights of individuals with mental illness, including the right to access mental healthcare and treatment without discrimination, the right to live in a community, the right to confidentiality, and the right to make decisions regarding their treatment.
- 2. Advance Directives:** The Act allows individuals to create advance directives, which are legal documents specifying their preferences for mental healthcare treatment if they become incapacitated to make decisions. Healthcare providers are required to follow these directives, subject to certain conditions.
- 3. Mental Health Review Boards:** The Act establishes Mental Health Review Boards at the district, state, and national levels to oversee the implementation of the Act, review applications for admission, discharge, or treatment, and protect the rights of individuals with mental illness.
- 4. Informed Consent:** Healthcare providers must obtain informed consent from individuals with mental illness before initiating any treatment or procedure, except in emergencies where immediate intervention is necessary to prevent harm.
- 5. Voluntary and Involuntary Admission:** The Act distinguishes between voluntary and involuntary admission to mental health facilities. Involuntary admission is permitted only under specific circumstances and with the approval of the Mental Health Review Board.
- 6. Prohibition of Electroconvulsive Therapy (ECT) without Anesthesia:** Electroconvulsive therapy (ECT) cannot be administered to individuals with mental illness without the use of anesthesia and muscle relaxants, except in exceptional cases authorized by a medical practitioner.
- 7. Prohibition of Chaining:** The Act prohibits the use of physical restraints, including chaining, for individuals with mental illness in mental health establishments.
- 8. Protection of Rights:** The Act prohibits discrimination against individuals with mental illness in various settings, including employment, education, and housing. It also establishes mechanisms for reporting and addressing violations of rights.

Overall, the Mental Healthcare Act, of 2017 represents a significant step towards promoting mental health awareness, protecting the rights of individuals with mental illness, and ensuring access to quality mental healthcare services in India.

## NCRB: NATIONAL CRIME RESEARCH BUREAU

NCRB stands for the National Crime Records Bureau. It is an Indian government agency responsible for collecting and analyzing crime data as well as maintaining a national database on crimes in India. The NCRB is under the Ministry of Home Affairs and plays a crucial role in crime prevention, law

enforcement, and policy formulation by providing accurate and reliable crime statistics to policymakers, law enforcement agencies, researchers, and the public.

## RESEARCH METHODOLOGY

This Research paper is purely doctrinal research with the help of Books, Papers, Online resources and articles from journals with knowledge and understanding of laws. Some of this research paper is purely adopted from Books, Papers, Online Website sources, and journal articles and has been referred with all the credits to the author of that particular literature material.

## CONCLUSION

In conclusion, the topic of suicide prevention and addressing suicidal thoughts is of paramount importance in safeguarding the well-being of individuals and communities. Through a comprehensive approach that encompasses mental health awareness, access to quality care, social support, and targeted interventions, it is possible to mitigate the risk of suicide and promote mental resilience.

By promoting mental health awareness and challenging stigma surrounding mental illness, we can create a culture of openness and acceptance that encourages individuals to seek help when needed. Improving access to mental health services, crisis intervention, and support networks ensures that individuals at risk receive timely and appropriate care.

Additionally, addressing socioeconomic disparities, environmental stressors, and systemic inequalities can help alleviate the underlying factors contributing to mental health crises and suicidal behaviors. By fostering supportive communities, promoting resilience, and empowering individuals to seek help, we can create a safer and more compassionate society for everyone.

Ultimately, preventing suicide requires a collective effort from individuals, communities, healthcare providers, policymakers, and advocacy organizations. By working together to raise awareness, provide support, and implement evidence-based strategies, we can save lives and promote mental well-being for all. Let us continue to prioritize suicide prevention efforts and support those in need with empathy, compassion, and understanding.