

## Editorial Note

### **SUICIDES IN INDIA: ISSUES AND CHALLENGES**

*“When you get into a tight place and everything goes against you, till it seems as though you could not hang on a minute longer, never give up then, for that is just the place and time that the tide will turn.”*

**– Harriet Beecher Stowe (2002)**

The quote by Harriet Beecher Stowe, a nineteenth-century American writer, explains the situation of being in a tight mental corner where a person has lost all hope and wishes to lose all possessions, fame, relationships, and lastly, one's own life. The writer further pleads that one must hold onto faith in such situations, as this moment of hopelessness is also just the time and space from where hope and life start. One can relate to this, as in our personal lives, we too may have encountered situations where we felt helpless and hopeless, but we built inner strength and resilience to restore hope and faith.

The alarming rise in suicide rates in India is more than just numerical statistical information; it reflects a complex issue with many interconnected layers. These layers include mental health struggles, socio-economic pressures, cultural stigma, and inadequate support systems. Each life lost is not only a personal tragedy but also a collective failure to address the deeper causes of despair that drive individuals to the brink. This issue of Sambhashan aims to explore the multifaceted aspects of suicide in India, emphasizing the urgent need for systemic changes, increased awareness, and compassion in addressing this heartbreaking epidemic.

The National Crime Records Bureau (NCRB) defines suicide as the “act of killing oneself intentionally” (National Crime Records Bureau, 2023, p. 293). In India, suicide has emerged as a significant public health challenge, ranking among the top ten causes of death in the latest census in 2019. The state of Maharashtra, in particular, has consistently reported the highest number of suicides over the past decade, with suicide ranking within the top five causes of death in the state (Ministry of Health and Family Welfare, 2024).

The national suicide rate has risen over the years, with figures increasing from 9.9 per lakh population in 2017 to 12.4 per lakh population in 2022. Between 2021 and 2022, the number of suicides in India rose from 1,64,033 to 1,70,924 (National Crime Records Bureau, 2023). This alarming increase highlights the urgency of addressing suicide as a multifaceted societal crisis.

Urban areas report suicide rates significantly higher than the national average. Domestic issues, marital problems, and illness were the leading causes of suicide, together accounting for the majority of suicide cases in 2022. These numbers emphasize the need to move beyond the view of suicide as merely an individual issue. Often seen as a personal failure or tragedy, this narrow perspective overlooks the complex external factors such as

societal, familial, and institutional pressures that contribute to suicidal behavior.

It is important to highlight the role of cognitive distortions in suicidal ideation. Many individuals who consider suicide experience a form of "tunnel vision," where they perceive their problems as insurmountable and believe that there are no alternative solutions. Cognitive Behavioral Therapy (CBT) has been shown to be an effective intervention in helping individuals reframe their thoughts and recognize that their distress is temporary. Implementing structured psychological interventions alongside societal reforms can provide a more comprehensive approach to suicide prevention.

One of the most concerning trends today is the alarming rate of youth suicides, which is double the global average. Whether it's the tragic case of 34-year-old Atul Subhash or the increasing number of student suicides in cities like Kota—known for its intense coaching culture—these instances serve as stark reminders of the profound impact that institutional pressures can have on individuals. Such pressures often lead to feelings of hopelessness and despair, which can ultimately drive individuals to consider suicide. The growing media reports and public outrage over this issue occasionally prompt authorities to take action. However, many of the intervention or remedial measures have been superficial, such as the installation of spring-loaded anti-suicide ceiling fans in hostels, while failing to address the more significant root causes, such as the academic pressure that causes distress among students in the first place.

Additionally, the concept of "perceived burdensomeness" plays a crucial role in youth suicides. Many young individuals feel that they are a burden on their families or that their failure diminishes their self-worth. Psychological interventions that address self-perception, emotional regulation, and stress management should

be integrated into school and college mental health programs to create a more supportive environment.

Socio-cultural factors, such as dowry pressures and domestic abuse, claim an alarmingly high number of lives each year, despite existing legal provisions intended to prevent these practices (Rani & Verma, 2022). Conversely, there is also a rising number of suicides linked to the exploitation that stems from the misuse of these laws (Pandey, 2024). Additionally, economic factors such as unemployment also increase one's vulnerability to suicide. The long-thriving diamond markets of Surat saw an unprecedented slowdown, resulting in factory closures and job losses for several diamond workers. While some are surviving doing odd jobs, many others have been pushed into deep despair. In just 18 months, 71 diamond workers tragically took their own lives, underscoring the urgent need for effective suicide prevention measures. The 1,600 distress calls received by the suicide helpline established by the Diamond Workers Union Gujarat highlight the immense emotional toll this crisis has taken on the community. This alarming trend calls for an immediate, coordinated response to address the psychological needs of affected workers and to create stronger, more accessible support systems to prevent further loss of life (Chitnis, 2024).

Suicide, which was historically regarded as a criminal act in India, was decriminalized under the Mental Health Care Act of 2017 (MHCA, 2017). Nonetheless, the absence of a comprehensive strategy for suicide prevention has posed significant challenges in addressing this issue. In response to this gap, India initiated the National Suicide Prevention Strategy (NSPS) in 2022, marking a progressive step toward mitigating the increasing rates of suicide mortality in the country. This strategy aims to reduce suicide-related deaths by 10 percent relative to the figures recorded in 2020 by the year 2030. However, accurately assessing the effectiveness of this initiative is complicated by the underreporting

and occasional misreporting of suicide cases in official data. This challenge is further exacerbated by the stigma associated with suicide within the Indian social context, which prevents individuals from reporting suicides accurately. The accuracy of suicide data, in turn, is vital to improving the effectiveness of suicide prevention measures. Accurate data about the occurrence of suicide can not only help identify vulnerable populations but also aid in designing effective action plans to prevent suicides.

In India, discussions on suicide are deeply stigmatized, making it challenging for people to engage in open discussions about it. Cultural taboos and societal expectations frequently suppress conversations regarding mental health and suicide, resulting in feelings of shame and isolation among those impacted. This hesitance to address the issue not only hinders at-risk individuals from seeking assistance but also forces survivors and their families to endure their grief in silence. This and the following issue of Sambhashan aim to open up academic conversations about suicide in the Indian context, hoping to pave the way for effective interventions, policy changes, and a more supportive environment for those affected. By fostering open discussions, we strive to challenge the stigma surrounding suicide, raise awareness about mental health, and encourage a more compassionate and proactive approach to prevention and care.

**This issue of Sambhashan is divided into three sections.**

The first section comprises nine articles. Naik opens with a comprehensive examination of archival data from the National Crime Records Bureau, highlighting the alarming rise in student suicides, particularly those linked to examination failures, with a focus on Maharashtra. Sharma follows with an analysis of Amrita Patil's novel *Kari*, exploring the intersection of queer identity and suicide. Sri Kumaran and Nagalakshmi examine the impact of childhood trauma on mental health, specifically how loneliness

mediates the relationship between trauma and suicidal ideation in young adults. Shah and Das address systemic injustices faced by students from marginalized communities, identifying key factors contributing to student suicides and advocating for urgent interventions to improve their well-being. Menezes offers a sociological, psychological, and literary analysis of R.K. Narayan's short fiction, examining suicide and individuality in material and metaphysical contexts. Vishwanathan and Nayar assess the impact of Fun Club, an inclusive recreational space in Mumbai, on the mental health and well-being of children with disabilities, underscoring the importance of community-driven, child-centered leisure initiatives. Sibal investigates suicide-related mortality among individuals aged sixty and above, shedding light on underlying causes and risk factors. Khanna, Deshmukh, and Das explore emotional and cognitive contributors to suicide through the lens of temporal decision-making, examining both deliberative and impulsive pathways and proposing clinical interventions for effective prevention. Concluding this section, Arpita De further examines the role of temporal decision-making in suicide, advocating for a multidimensional approach to prevention and long-term well-being.

The second section features *When, I'm Gone*, a play by educationist and playwright Omkar Bhatkar, creatively exploring the complex dilemmas surrounding suicide.

The third section consists of review articles. Teixeira and Debnath provide a critical review of Shoojit Sircar's recent film *I Want to Talk*. This is followed by a series of book reviews by Aishe Debnath, Aazka K. P., and Nivedita Gogia. Lastly, Aloknanda Rudra offers a critical analysis of *India's National Suicide Prevention Strategy*.

Recognizing the sensitive nature of suicide discussions, this issue also includes a compilation of resources for individuals struggling with suicidal thoughts.

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## References

- Cerel, J., Jordan, J. R., & Duberstein, P. R. (2008). The impact of suicide on the family. *Crisis*, 29(1), 38–44. <https://doi.org/10.1027/0227-5910.29.1.38>
- Chitnis, P. (2024, November 4). Job losses, factory closures pushing Surat's diamond workers to the edge. 71 suicides in 18 months. *ThePrint*. <https://theprint.in/india/job-losses-factory-closures-pushing-surats-diamond-workers-to-the-edge-71-suicides-in-18-months/2339805/>
- National Crime Records Bureau. (2023). Accidental Deaths & Suicides in India 2022. In National Crime Records Bureau. Retrieved February 18, 2025, from <https://www.ncrb.gov.in/uploads/files/AccidentalDeathsSuicidesinIndia2022v2.pdf#page=16.06s>
- Ministry of Health and Family Welfare. (2024). State Action Plan on Climate Change and Human Health Maharashtra: 2022–27. In National Centre for Disease Control (NCDC). Ministry of Health and Family Welfare, Government of India. Retrieved February 18, 2025, from [https://ncdc.mohfw.gov.in/wp-content/uploads/2025/01/17\\_SAPCCHH\\_Maharashtra\\_21-10-24.pdf#page=75.15](https://ncdc.mohfw.gov.in/wp-content/uploads/2025/01/17_SAPCCHH_Maharashtra_21-10-24.pdf#page=75.15)
- Pandey, G. (2024, December 23). Atul Subhash: A man's suicide leads to clamour around India's dowry law. <https://www.bbc.com/news/articles/c33d6161z3yo>
- Rani, A., & Verma, P. (2022). Domestic violence – suicide, dowry death: stigma on Indian society. *JOURNAL GLOBAL VALUES*, 13(1), 17–24. <https://doi.org/10.31995/jgv.2022.v13i01.003>
- Stowe, H. B. (2002). *Uncle Tom's Cabin*. New York, Oxford University Press.