

Suicidal Deaths in Punjab with Respect to Age, Sex and Educational Status

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Abstract

Suicide implies an act of intentionally causing one's own death. The total number of suicidal deaths in Punjab state is quite high to the extent of 8456, during the period of ten years (2004-2013). Keeping in view the gravity of the situation an attempt has been made to examine the intensity, causes, nature (with respect to age, sex and educational status), growth and. Suicidal Mortality Rate (S.M.R) of suicidal deaths in the state of Punjab from 2004 to 2013.

Mean value, proportion, Average Annual Compound Growth Rates of suicidal deaths and S.M.R. are reckoned and results are presented using Histograms and Pie charts. Suicidal deaths in Punjab have ascended from 645 in 2004 to 972 in 2013 at an A.A.C.G.R. of 5.58%, indicating a rising trend. Among the variety of causes, illness and family disputes and drug addiction figures about 61 percent of total suicidal deaths in Punjab. About 41% suicides in Punjab state, are by youth (less than 29 years of age) and majority of them are males. It implies that under prevailing conditions Punjab's youth are most susceptible to stress. It is a grim situation, where unskilled youth in rural areas find themselves disoriented and left out of the growth process. Most of the suicides are by uneducated lot (about 32%). Large sized working population can turn into demographic dividend only if it is sufficiently educated and skilled.

KEYWORDS: Suicides, Deaths, Illness, Youth, Drugs, Healthcare, Women, Police.

Punjab traditionally an agricultural state figures in the north-west part of India, which has an area covering 50362 sq. km. and where, majority of population resides in rural areas i.e. 17.32 million constituting 62.52% of total state population (Economic survey of Punjab, 2012). Though average size of land holding is small, but still the state is known as granary of India, for its high contribution in terms of food grains (mainly wheat and rice) to nation's pool. The per capita income got inflated after Green Revolution in mid 1960's with the sincere efforts of Noble Laureate Norman Borlaug. The state has a literacy rate of 76.70% (ESP, 2012) with one-fourth population deprived even of this essential.

In order to boost state's income and employment opportunities, a need was felt to introduce second wave of reforms (including computerization of land records, internet connectivity for latest market information, corporatization of agriculture, crop diversification, flip to allied activities, setting up food processing industry and mega food parks, appropriate & timely credit, transport & trade facilities, soil testing laborites and provision for crop insurance). Agriculture is characterized by inelastic labour absorption, causing migration of rural unskilled population from primary to secondary and tertiary sectors of state economy. Farmer reeling under debts, frequent droughts, crop failure, and non-realization of prices for agricultural products are some of the reasons which drive farmers to take the extreme step. Public institutions must step in to provide appropriate cushion to affected farmers, thereby helping them to step out of the vicious circle of poverty.

Punjab state's industrial economy comprises of mainly small and medium sized enterprises, which sadly due to faulty state government policies, in last three decades, started heading to other states. Structural disadvantage of location (high cost of freight due to far off places of raw materials and sea ports), liberalization and consequent influx of cheap Chinese products, comparatively high tax structure, lack of various incentives like cheap land; cheap labour; capital subsidy and power benefits, political clout controlled by agriculturist; who are unmindful of industry and lack of R & D set up are main reasons for the sad state of affairs for industry in Punjab.

Though a peaceful state it shares international boundary with hostile Pakistan and experienced militancy in the beginning of eighties. The international sponsored extremist organizations raised their head and tried to overthrow the economic, political and social system through the barrel of the gun. It led to inhuman violence, mass murders, kidnapping, extortion, bombing etc. This period also met with two religious/sectarian anti-militant operations in Golden Temple, Amritsar (the holiest place for Sikhs). These operations were conducted jointly by Indian Army and **Central Paramilitary Forces**. Punjab Government took a strong, systematic and effective action by modernizing their state police forces to counter the new scourge of terrorism and it accompanied by amicable socio, economic and psychological arrangements lead to the restoration of normalcy.

Over the last decade some serious disorder has emerged in the state causing a large number of suicidal deaths with Suicide Mortality Rate (number of suicides reported per lakh population of a specific year) ranging between 2.28 to 3.67. Suicide implies an act of intentionally causing one's own death (Williams & Wilkins, 2006). In India suicide used to be illegal but the government decided to repeal the law in 2014 (Section 309 I.P.C.).

The Government of India classifies a death as suicide, if it meets the following criteria:-

- It is an unnatural death.
- The intent to die originated within the person.
- There is a reason for the person to end his or her life. The reason may have been specified in a suicide note or specified.

About eight lakh people commit suicide worldwide every year, of these 1.35 lakh (17%) are residents of India (G.O.I. Report, 2012). The various vital factors responsible for suicide are psychiatric disorders, drug misuse, psychological states, culture, genetic, family and social situations (Howlon, 2012). Ascending agrarian crisis and non accommodating industrial policy in the state are major economic causes behind escalating suicidal deaths. Keeping in view the gravity of the situation it becomes imperative

1. To examine the intensity, nature, growth and S.M.R. (Suicidal Mortality Rate) of suicides in Punjab state from 2004 to 2013.
2. To analyse the growth and nature of suicides in Punjab state with respect to different age groups and sex (Male or female) from 2004 to 2013
3. To ascertain the growth and nature of suicides in Punjab with respect to educational status from 2004 to 2013

METHODOLOGY

The data on suicides, with respect to causes in Punjab from 2004 to 2013 is subjected to primary and graphical analysis. To examine nature and intensity of suicides during the period of analysis, the different causes of suicide are scrutinized. The cause of illness is further divided into five parts i.e. AIDS, Cancer, and Paralysis, Insanity / Mental illness and other prolonged illness. While examining suicidal deaths with respect to age, it is divided into five parts (Heads) i.e. Under 14 years, 15 – 29 years, 30 – 44 years, 45 – 59 years and above 60 years. The heads are further divided into male and female. While ascertaining suicidal deaths with respect to educational status, eight categories (Standard Heads) were taken namely, Uneducated, Primary, Middle, Matriculate /Secondary, Intermediate/Higher Secondary, Diploma, Graduate and Post-graduate & above.

Suicide Mortality Rate (SMR) is also computed, which is defined as the number of suicides reported per lakh population of a specific year. This rate is universally taken as a realistic indicator since it balances the effect of growth in population. To ascertain the growth of suicides under various causes during the period of analysis, average annual compound growth rates were computed using the following formula.

$$Y = a b^t e^u$$

Y = Yearly expenditure on Police
 t = Time period
 u = Stochastic term

a and b are constants which were estimated by principle of least square using following formula

$$\log b = \frac{n \sum t \log y - (\sum t) (\log y)}{n \sum t^2 - (\sum t)^2}$$

$$\log a = \frac{\sum \log y}{n} - (\log b) \frac{\sum t}{n}$$

$$\text{Average C.G.R.} = (b - 1) 100$$

Limitations of the study

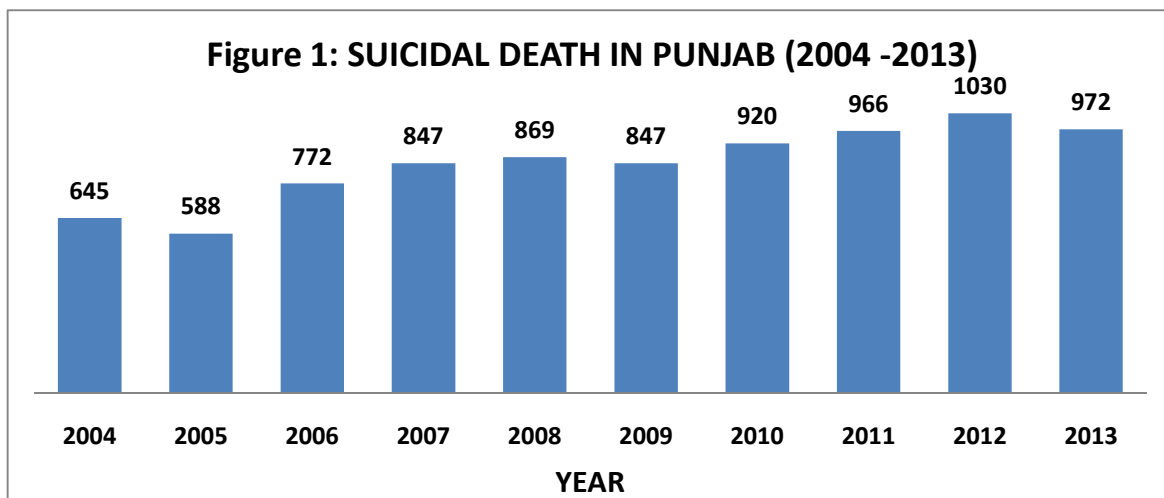
- Classification of suicides in Punjab with respect to causes and age groups are made strictly according to the availability and pattern adopted by National Crime Record Bureau, Ministry of Home Affairs, Government of India.
- Due to unavailability of data, gaps in data are filled by the average of previous year and next year.

DISCUSSION

Suicides in Punjab with respect to different causes (2004-2013)

Clearly shown in figure 1 and indicated in table 1, given in appendix that suicidal deaths in Punjab have ascended from 645 in 2004 to 972 in 2013 at an A.A.C.G.R. of 5.58 % as against 2.29% of India as a whole, indicating a sharp rising trend, highest in the year 2012 to the extent of 1030. It has been suspected by some research studies that cause of death being suicide is falsified by relatives as it is considered as taboo in

Punjabi society. It implies that the real number may be much more than depicted by government sources.



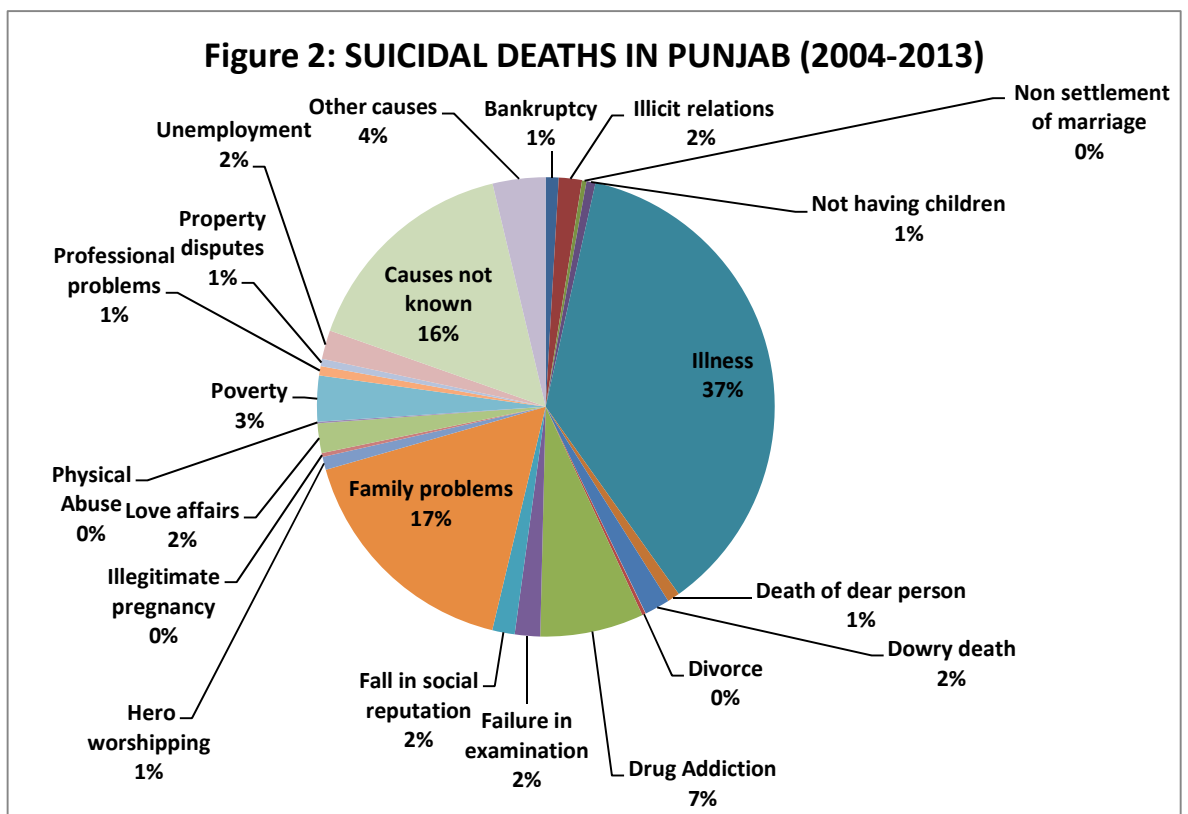
Source: Accidental Deaths and Suicides in India, National Crime Record Bureau, Ministry of Home, Government of India.

As shown in figure 2, among the various causes of suicidal deaths in Punjab during the period of analysis (2004 - 2013), Illness accounts for the highest number i.e. 3020 (about 37% of total suicidal deaths) with an A.A.C.G.R. of 3.56%. Among the causes of illness, insanity (2232) and other prolonged illness (646) contributes maximum. The state of Punjab has been hit by the menace of drug abuse in the last decade which can be judged from the extent of suicidal deaths due to drug addiction (602) and growing at a very high A.A.C.G.R. of 9.45%. Easy availability of narcotic substances due to drug trafficking across the international border, frustration due to unfulfilled high aspirations, peer pressure and negative influence of a family member are primary reasons for rising trend in consumption of drugs in Punjab. The drug problem in Punjab was recently in national news as a Bollywood film “Uda Punjab” based on the flourishing drug menace in Punjab was objected by censored board of India.

The alarming situation is going out of control as ready availability of different types of drugs pose a huge threat for the vulnerable youth. Rural youth are particularly susceptible to the influence of this evil. The **police department** can play an important role in curbing the worsening scenario. It can launch an awareness drive with N.G.Os. and civil society members and distribute literature highlighting the evils of drug abuse among the rural youth. The drug mafia which is flourishing in the state, can be tethered in by effective and ethical policing only. The drug mafia operating since long in North and South Americas is being tackled primarily by police in the forefront. It’s a war between the mafia on one hand and police at the other. Discussions on the drug problem in India always lean towards political bickering and blame games begin. Sprucing up the police force to tackle it is the answer.

Family problems accounts for second largest cause for suicidal deaths in Punjab from 2004 to 2013 to the extent of 1386 which figures around 17% of total suicidal deaths and rising at A.A.C.G.R. of 8.46%. Though in Punjab the social institutions of arranged marriage and joint family setup are highly placed but still they are being

challenged in the emerging social setup on western lines. Here N.G.Os. can play a crucial role by counselling the effected families. The role of women police is advocated by various studies as they can empathize with the women victim and the latter may feel more comfortable in reporting the violence in comparison to their male counterparts. The studies have suggested that greater use of dispute resolution by **women police** in dealing with domestic disputes could reduce domestic violence. Police officers need to be recognized for their meritorious work in handling domestic dispute cases and greater allowance needs to be made for the large number of hours taken by such police officers in dealing with domestic matters. Women police officers who have good interviewing and interpersonal skills need to be permanently allocated to handling petitions relating to domestic violence. (Mangai Natarajan, 2006).



Source: Accidental Deaths and Suicides in India, National Crime Record Bureau, Ministry of Home, Government of India.

It is surprising that 1308 suicidal deaths figure under the head Causes not known, which puts light on the inefficiency on the part of police department to investigate the reasons for such deaths. The need of the hour is to modify police training, sensitize the large police force recruited during militancy period regarding the emerging social issues and overhaul of police system. The selection of **police officers** for such training needs attention. Officers with positive attitudes and an aptitude for learning need to be identified and selected. (Mangai Natarajan, 2006).

The state faces a growing need to fix its basic health concerns in the areas of HIV, cancer, tuberculosis, and diarrhoea and other prolonged illness. Besides the rural-urban divide, another key driver of India's healthcare landscape is the high out-of-pocket expenditure (roughly 70%). This means that most Indian patients pay for their hospital visits and doctors' appointments with straight up cash after care with no payment arrangements (Jayaraman, 2016). Special facilities should be crafted for

patients with psychiatric disorders in the existing infrastructure so as to early diagnose and appropriate cure is done.

Bankruptcy/ sudden change in economic status (74), poverty (266) and unemployment (168) is usually projected by media and among political circles as a major cause of suicidal deaths accounts for only 0.87%, 3.15% and 1.98% respectively of total suicidal deaths during the period of analysis.

Indian society in general and Punjab in particular is plagued by the social evil of Dowry since a long time. The advent of 21st century has opened many new vistas for women in the country but irrespective of educational and financial independence of women, dowry system continues to be the norm across sections of the society. The gruesome repercussion of the dowry practice is the occurrence of dowry related suicidal deaths to the extent of 147 during a period of ten years (2004-2013). Physical abuse (Rape, Incest etc) is one of the most heinous crimes against women is a malaise to the society. The increase in incidence of such cases in a society signifies subjugation of women through violent and crucial means in India.

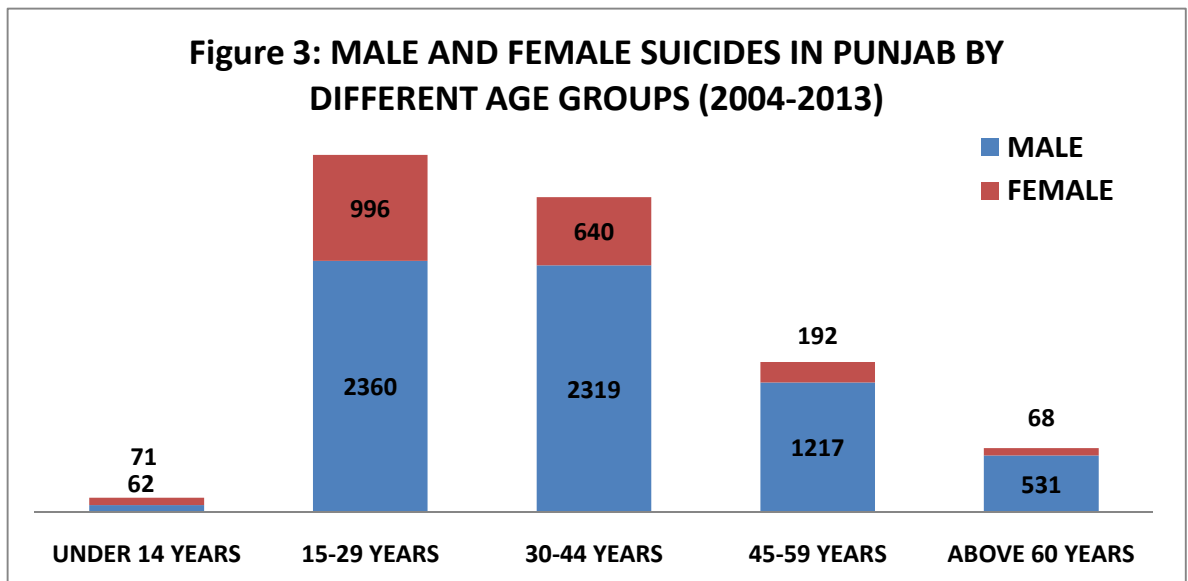
The society in rural areas of Punjab is conservative in nature, where break-ups of relationships too cause intense despair, anxiety, guilt and panic leading to psychiatric disorders. Cancellation of marriage (27), divorce (22), illegitimate pregnancy (24), not having children (Barrenness / Impotency) (51), failure in examination (147), fall in social reputation (131) and love affairs (172) lead to intense stress and Borderline Personality Disorder, which contributed heavily to suicidal deaths.

Value of landed property in Punjab state has enhanced many folds in the last decade and became a cause of property disputes. Moreover love for land by farming community ends up in violent disputes in case of unsettled inherited properties. This causes severe depression among some and becomes a cause of suicide. Over the last two decades *Deras* (places where generally rural people gather for religious purposes) have inflated in size and number. Over belief in such places, some of which are controlled by hypocrites (Ideological/ Hero worshipping) sometimes leaves poor followers cheated and they decide to end up their lives.

Suicides in Punjab with respect to age and sex (2004-2013)

Clearly shown in Figure 3 and indicated in Table 2, that during the period of analysis (2004-2013), highest number of suicidal deaths are in the age group of 15-29 years (3356) followed by 30-44 years (2959), constituting 39.69%, 34.99%, of total suicidal deaths respectively.

About 76.25% suicidal deaths of people in Punjab state, are in the age group of less than 44 years of age and 41.26% people are even less than 29 years of age. It implies that comparatively youth are most susceptible to stress. In such a grim situation, unskilled youth in rural areas finds themselves disoriented and left out of the growth process. They have high aspirations due to awareness of lofty life style depicted by foreign channels in cable television and smart phones. The political leadership too promised high stakes and better future in election campaigns but fail to fulfil the heightened desires of youth. It is an alarming situation and can be exploited by disruptive forces. It is high time to strategically design public policy and create avenues to productively employ the disillusioned youth of Punjab.



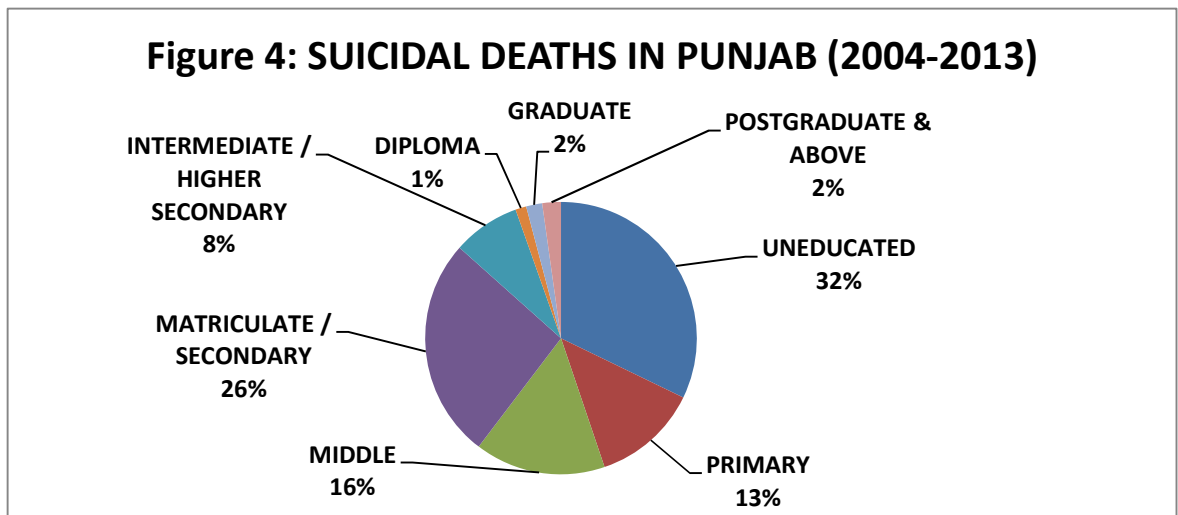
Source: Accidental Deaths and Suicides in India, National Crime Record Bureau, Ministry of Home, Government of India.

The highest A.A.C.G.R. is experienced by age group of above 15 - 29 years to the extent of 7.51% followed by above 60 years (5.61%). Health care system in Punjab has to be improved, which is presently having dismal presence in rural areas. The need for health care is more for aged people.

Majority of the suicides are done by male population to the extent of 76.74%. It highlights that Punjab being a patriarchal society, the expectations are high from male population (sons in particular), who are facing intense pressure to achieve and support their families.

Suicides in Punjab with respect to educational status (2004-2013)

Clearly shown in Figure 4 given and table 3 given in the appendix, that suicidal deaths in Punjab state with respect to educational status for the period of analysis (2004-2013) is highest by uneducated people to the extent of 2710. Most of the people committing suicide have education less than matriculation standard i.e. 7294 of 8456 casualties and collectively these four heads (uneducated, primary, middle and matriculate) constitute about 86% of total suicides in Punjab. Majority of the population in Punjab is engaged in agriculture and allied activities, which out of their long years of practical experience are well aware of the intricacies of their profession. Moreover farming community in Punjab state to a larger extent is engaged in monoculture i.e. production of wheat and rice only, as these crops are supported by centre and state governments against market price volatility. They (farmers) never felt the urge for diversification and thereby acquiring technical or higher education. Over the years the size of land holdings has contracted, forcing farmers to alternative jobs but lack of education restraints their prospects for finding jobs in private, as well as public sector. Whatever menial jobs even if they manage to get will not be much rewarding. Disguised unemployment leads to lower living standards, high degree of income inequality and poverty.



Source: Accidental Deaths and Suicides in India, National Crime Record Bureau, Ministry of Home, Government of India.

Highest A.A.C.G.R. during these ten years is experienced in case of people with higher secondary/ intermediate education (14.98%) followed by graduate degree holders (11.77%). Though collectively people with higher secondary education and above constitute only about 14 percent of total suicidal deaths but surprisingly there is rising trend since 2004, possible out of frustration and depression for not getting jobs which match to their education and aspirations.

CONCLUSION

It is concluded from the study that the state of Punjab has experienced huge toll of suicidal deaths in the period under analysis. Among the various causes illness, family disputes and drug addiction figures about 61 percent of total suicidal deaths in Punjab. Effective healthcare setup, medical insurance, drug de-addiction centers modified police training, role of N.G.Os. and civil society can contribute profoundly in reducing magnitude of suicidal deaths. Special facilities should be crafted for patients with psychiatric disorders in the existing infrastructure so as to early diagnose and appropriate cure is done. The drug mafia which is flourishing in the state can be tethered in by effective and ethical policing.

As per age is concerned the highest number of suicidal deaths is between the age group of 15 years to 44 years. They collectively form about 75 percent of total suicides in Punjab. Youth is under immense stress to make their place in society but due to intense competition it becomes very hard and hence faces stress and depression. It is high time to strategically design public policy and create avenues to productively employ the disillusioned youth of Punjab. The four educational heads of matriculate, middle, primary and uneducated constitute 86% of total suicides in India. Illiteracy is the foremost hurdle in the path of economic development. Large sized working population can turn into demographic dividend only if it is sufficiently educated and skilled. Vocational training and education is of paramount importance in the present scenario in Punjab state in particular and in India in general. Moreover it is a pre-requisite for peaceful existence and public order.

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