

Causes of Suicide among School Students: A Qualitative Analysis of Suicide Survivors' Experiences

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Abstract

Suicide is an alarming point that brings a lot of negative changes, not only in individual behavior but also damages society. The purpose of this study was to investigate the perception of suicide survival regarding suicide attempts. The theoretical framework of the current study was based on the Anomic Theory of suicide stated by Emile Durkheim. The qualitative research methodology was adopted to investigate the research questions. The sample was selected through the purposive sampling technique. The sample consisted of 15 suicide survivors from Malakand Division KP⁴, their respective one teacher, one fellow from peer group, and one family member of suicide survivor. Data was collected through in-depth interviews. The obtained data were analyzed through the thematic analysis. The results of the study indicate that the majority of the suicide survivors belong to middle-class families. There are multiple indicators of suicide among these suicide victims. Major causes of suicide were low self-esteem, a lack of knowledge, a lack of self-confidence, a lack of patience, failure in an exam, and a mental health problem. The findings also indicate that one problem was common among all suicide survivors, and that was parental pressure due to low academic marks. They had no courage to face their families, so they attempted suicide. To address this shocking issue is to provide coordinated and multi-sector (primary, secondary, and tertiary) preventative activities aimed at reducing these risk factors. Population-based approaches (such as mental health promotion, education, awareness through campaigns on mental resilience, careful media coverage, and parental education and high-risk subgroup-specific approaches (such as specialized school-based programs).

Keywords: Suicide survivor, Causes of suicide, Prevention/ Remedies of suicide, Parents' Expectation.

1. Introduction

Youth between the age of 15 to 19 is the transitional period and the students of this age period experience freedom and independence specially in their college life. This independence and freedom may cause mood swings especially when stress of academic achievement and high

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expectation of parents to meet the merit competition which may increase the risk of suicide. This problem of suicide occurs in all over the world. The WHO (2021), estimates that more than 700,000 individuals die by suicide each year. It makes it about 1918 suicide deaths daily and about 80 deaths every hour in the world. Pakistan is a predominantly Muslim-majority country where the religion explicitly discourages suicide (Shah & Chandia, 2010). It is also criminalized under Pakistani law with imprisonment for one year and fine (Khan, 1998). Still, around 20,000/- people committed suicide during the year 2019. The male suicide ratio was significantly higher in Pakistan, with 23.6% female and 76.4% male suicides (WHO, 2021). Furthermore, the crude suicide rate was also higher for males in Pakistan (female 4.3, male 13.3). The situation is comparatively better in India, where the overall crude suicide rate is 12.7, while in Pakistan it is 8.9, i.e., a comparatively smaller number of people commit suicide in Pakistan. Since the mid of 2010, suicidal news, particularly from the country's north where Chitral, Dir, Malakand, Swat, Gilgit, etc. are located, has gained significant media coverage in Pakistan (Khan, 2021a).

Due to the sensitive nature of suicide and the associated taboos in Pakistan, the topic is rarely put for rigorous research until recently (Naveed et al., 2017). Recent studies have focused on reviewing the existing studies (Shekhani et al., 2018), review of legislation (Naveed, et al., 2017), Covid-19 related suicides (Mamun & Ullah, 2020), suicide prevention (Anjum et al., 2020), suicide prevalence amongst students (Shakeel, 2019), suicide ideation (Shagufta et al., 2015) and many other aspects of suicide are under rigorous research in Pakistan.

The term "suicide" was originally used in the seventeenth century. *Sui* (oneself) and *Caedere* (to kill) are two Latin words that are combined to form the term. On the other hand, the WHO, (1998) describes suicide that this is an intentional act through which a person is going to kill himself after a desire or unfulfilled act rather than knowing the consequences of the act. Despite this Silverman & Maris (1995), discussed that suicide is not a mental illness, but it occurs due to the deprivations of social relations, furthermore they explore that the main cause of suicide is social isolation.

In 2007 the WHO (2007) share their annual study regarding suicide which show a high suicide rate of 16.7/100000 persons. Moreover, Eastern Europe had the top suicide rate; in contrast Central and South America have the bottom position in the list, while the United State and Western Europe have more suicide cases than Central and South America. Further a huge difference in rates, the male suicide ratio is almost high than female suicide. The suicide ratio of males is 3: 1–7.5: 1. Suicide rates are not at the proper levels in China and India because a huge number of suicides occurs in these countries. These two countries are at the top of the ladder in suicide rates. However, the ratio of male suicide in India is 1.3:1 while in China (mainland) the ratio of suicide is 0.9:1. Moreover the ratio of suicide in Hong Kong is 2.0:1. The methods used for suicide in India are self-burning while IN China the way of suicide is pesticide injections. (Nock et al., 2008).

Each year, there are more than 800,000 accidental suicides worldwide. According to these statistics, low- and middle-income nations recorded 75% of the suicide instances (LMICs). Unfortunately, Pakistan is one of the (LMICs) that also has to deal with this issue. Suicide is a social issue that can have an impact on someone's personality as well but it may affect the family, peers and whole society of the victim. Among suicide cases, some survivors have low self-esteem rather the rest of the victims have been compelled to commit suicide (Sualeha et al., 2018).

In the light of Pakistan Penal Code (PPC) 325 states “*Whoever attempts to commit suicide and does any act towards the commission of such offence shall be punished with simple imprisonment for a term which may extend to one year, (or with fine, or with both)*”. The principles of Islam, which strongly forbid suicidal behavior, are the source of the law itself. According to this law, every incident of suicide or intentional self-harm (DSH) is immediately forwarded to a government hospital, which a special department for such cases has called the Medical Legal Center (MLC), which is in charge of handling such cases (Mahmood, 1989).

In order to determine the causes of student suicide, a study has been conducted by Muertigue & Naiker (2018) among university students in Fiji. There was a very high suicide rate. Having everyone's attention concentrated was a worrying issue and a number of issues that cause suicide were identified.

2. Literature Review

One of the persistent problems that have a significant detrimental impact on an individual's conduct as well as their social status is student suicidal behavior. At a national level this issue requires a serious attention to resolve the problem for the wellbeing of students (Abbas, 2022; Mazza & Reynolds, 1994). People believe that suicide is the final resort for a situation. If the individual faces the worst situation on daily basis, then the chances of committing suicide is increasing day by day, this will keep the individual in danger and affect the cognition, social relations, decision making capacity and his perception towards the social life (Minkoff 1973).

In South Asia, as compared to other South Asian countries China and India are on the top of the ladder in Suicide rates annually. Worldwide these two countries are more vulnerable to suicide rates, but sometime the ratio of suicide in these countries become decrease and sometime it increases. Yearly a high number of reported cases of suicide in India are 258,075 and in China the suicide rates are 120,730, which require a serious attention to find suitable remedies for the decline of suicide rates in both countries. (Jordans et al., 2014). On the other hand, a study conducted by Bertolote & Fleischmann (2002) stated that most of the suicide victims were mentally retarded or either were not in the normal mental state. They concluded that when such people face some difficulties, they lack in power to cope such problems and fail to overcome on that, thus an anarchy creates in their mind and consequently these people are prone to commit suicide. Contrarily, according to Nordentoft et al. (2011), 98% of people with mental retardation do not commit suicide, but some of them are at a significant risk of doing so because of their mental state.

In the continuation of this phenomenon, Furlong (2019) stated that wherever human exist, social problem will be there, committing suicide also a social problem and affect the society, so he further elaborates that suicide thoughts are present in every stage of life but in under five year of child these thoughts are difficult to find and these children are more vulnerable to commit suicide. In addition, the majority of suicide cases involved school-age children (7 to 12 years old) and adolescents (13-20 years). Additionally, the people of this age group experience greater stress due to an issue that arises during adolescence as compare to the older people do. Because this is the time when these new young boys want their own choices and bring some changes in their life in the form of school choice, peer groups, their living place, and living pattern and to increase their capacity, they attempt to establish their own identities. They are independently undergoing psychological, bodily, and social changes at the same time. On the other hand, several psychological based surveys were conducted in multiple countries regarding suicide.

The data was collected through interviews and also include the suicide survivors. The study was focused on the factors that lead young people to commit suicide. After data research, everyone is in agreement that a number of factors contribute to suicide. The factors may include genetic, psychological, biological, social and biological factors which make suicidal thoughts and lead to commit suicide (Bilsen, 2018).

Diekstra (1993) in a study, came to the conclusion that having suicidal thoughts or actually committing suicide is a severe social and psychological issue. Furthermore, he contends that the majority of suicides occurred between the ages of 24 and 35. 10% of the younger suicides attempted suicide at some point in their lives, while 13% of the younger suicides had suicidal thoughts and plans. According to Mazza & Reynolds (1994), suicide is the second highest cause of mortality among people aged 15 to 24 after traffic accidents. Moreover, He says that suicide risk is directly connected to the ages of adults, if the ages increase the suicide risk will be increased and he found most of the suicide cases in these adults.

According to Platt (1988), European countries faced a lot of suicide cases between 1960 to 1970s. But after this, in 1970 to 1980s the suicide cases were increasing rapidly. This made anarchy in Europe. This problem requires a serious attention. A study was conducted in Europe which includes 20 countries in western and 4 countries in central and middle Europe. According to the data, there was a significant increase of 42%, or from 23.4 to 33.2 per 100,000 citizens. In the light of the data most of the suicide cases were related between the ages of 15 to 25 who were consist of students. This problem also suffers the women and the rates were increased from 8.9 to 12 which make a 38% of the suicide cases. Due to this suicide, people of all ages suffer but a wider ratio committing suicide are mostly of student's ages between 15 to 25 years (Platt, 1988).

Among Asian countries, India also faces this social problem and India is the world 4th leading suicide rates. India's suicide rates are rising daily, and studies suggest that the country is unable to address the issue. Tamil Nadu, which has 108,000 residents, is the most developed state in south India where this study was carried out. According to data from earlier research (1994 to 1999), 95 people commit suicide for every 100,000 people. Over this time, the suicide rate rises from 84 to 106. The average suicide rate from 1998 to 2004 was 82 per 100000. However, the suicide rate fluctuates from year to year, sometimes rising and sometimes falling. Among these data in the decade of 1991 to 2001 the suicide rates between the ages of 10 to 19 years were 58 per 100000, which makes 25% of the total deaths. However, in this state "Tamil Nadu" the suicide rates of female were higher from men. There were 148 female suicides per 100,000 people, or 50 to 75% of all deaths in the state. In the same state, the suicide rate for people over 55 climbed and reached 189 per 100,000 people (Rane & Nadkarni, 2004).

3. Methods and Procedure

This research study was conducted at Malakand division KP. The purpose of this study was to find out the root causes of the suicide among the students/youth at Malakand Division. Nature of the study was qualitative, because qualitative research is a method by which a researcher can get accurate data regarding any topic. Total 15 students (who were suicide survivors) were selected who were appeared in secondary school examination and higher secondary school examination of Malakand Board of intermediate & Secondary Education in 2018-19. The social media was adopted to identify the suicide survivors as the target population of the study. Total 15 suicide survivors were agreed to participate in the study who were admitted in the DHQ Batkhela and THQ Chakdara Lower Dir from Malakand Division.

An in-depth interview method was adopted for the current study because it allowed to get most relevant information. Questionnaire cannot be used to gather reliable data in such sensitive cases, particularly, when the issue is extremely sensitive, and a closed-ended or pre-planned interview cannot cover it. Therefore, in depth interviews with open-ended questions may yield reliable data. The mentioned data tools have been used to gather information about the 15 selected suicide survivors. For each selected respondent, four interviews were conducted; which included one interview of the suicide survivor, one interview of his teacher, one interview of the survivor's classmate, and one interview from his family member.

4. Results and Discussion

Suicide or deliberate self-harm (DSH) is forbidden in every society and religion. All religion including Islam is also strictly against the act of suicide. As compare to other countries, Pakistan specifically Pashtoon society also suffer from this problem and increasing the ratio of suicide day by day. Due to the chronicle situation of our society, we were willing to dig out the root causes of suicide. The suicide ratio is increasing among students/youths. This issue was arising after the matriculation and intermediate annual results in Malakand division. Many students commit suicide and die, while some were survived. Suicide is Haram in Islam. Hazrat Abu Huraira (R.A) once said, the Prophet Hazrat Muhammad S.A.W.W said that *“whoever purposely throws himself from a mountain and kill himself, will be in the (hell) fire falling down into it and abiding therein perpetually forever, and whoever drinks poison and kill himself with it, He will be carrying his poison in his hand and drinking it in the (hell) fire wherein he will abide eternally forever, and whoever kills himself with an iron weapon ,will be carrying that weapon in his hand and stabbing his abdomen with it in the (hell) fire wherein He will abide eternally forever (Sahih al-Bukhari 5778, Vol. 7, Book 71, Hadith 670)”*. In the light of these *Hadiths* we can understand the sin of the Suicide in Islam. Another hadith narrated by Hazrat Anas bin Malik (R.A) the Prophet (PBUH) said; *“None of you should wish for death Because of a calamity befalling him; but if he has to wish for death, He should say “O Allah! Keep me alive as long as life is better for me, and let me die if death is better me” it means that Islam is totally against the suicide acts and suicide thoughts (Sahih al-Bukhari 5671, Vol. 7, Book 70, Hadith 575)”*.

In contrast, everyone knows the sin of suicide in Islam but each and every one making this sin. It means there is something wrong which keep a person on wrong path and alienate from the teaching of religion. Moreover, we should educate ourselves regarding religion and bring the Islamic teaching in our lives. Most of the suicide survivors were belongs to middle class family. Their parents were mostly uneducated and source of income were Agriculture, shopkeeper and daily wagers. Upon this information their children have not enough self-esteem and personality growth to survive in critical situation. A person's personality development depends greatly on their peer group. If a person has a well personalized peer group, then the individual will have a positive role in their educational and social environment. On the other hand, suicide is an alarming issue here in Malakand Division, due to the unwanted and poor result of the students they lead to commit suicide. They don't have enough knowledge and self-esteem to overcome this issue.

Every individual has different problems and different skills to cope those problems according to their knowledge. However, among these people some are emotionally strong while some were weak. And the ways they are facing the problem were also not same. Here is a case of suicide of a young student at Peshawar which was victim of suicide. Their parent shared a story of him that we were continuously advised him to keep away from your bad company and keep interest in your studies to bring a good result. During this, our son was quarrelling with us and become depressed.

He got bored from every day advised and a result he commits suicide and the case were registered in the concern police station (Khan, 2020). Multiple cases of suicide in northern parts of KP were studied. The totals of 168 cases were examined and interviewed their families. Among these cases 104 were female and 64 were male. Both male and female suicide victims were between the ages of 20 and 24. Major causes of suicide were low self-esteem, lack of knowledge, lack of self-confidence, patience, failure in exam and mental health problem. These are multiple indicators of suicide among these suicide victims. The method mostly used for suicide by these individuals were drowning and hanging. The study indicates the suicide rates of female were high as compared to male. Additionally, it demonstrates how, in Chitral, marriage and family problems are closely associated to female suicide (Ahmed et al., 2016). Despite of these, Baig (2018) explore another reason of suicide at Chitral. He argues that in the first three months of the year 2018 suicide cases were high, mostly the suicide cases were between the age of 15 to 25 years which is almost student life. He found the reason behind these suicide incidences was the competition in education as well as job selection. Further he argues that most of the suicide cases were related with high expectation of educational scores and job seeker. After the announcement of the metric and intermediate result the rates of suicide become high, because mostly students expect more score but it was totally against their expectation. Moreover, the literacy level in the district is too high which leads to a tough competition in job, it is also another reason behind suicide at Chitral (Baig, 2018).

Theme 01: Factors leading to suicide amongst students/youth.

In recent years, a number of population-based psychological studies have been carried out, using key informant interviews, record reviews, and checks of previous suicide records to determine the risk factors of youth suicide (Khan et al., 2022; Khan, 2021b). As everyone know that there are multiple reasons to commit suicide, and each suicide case is the combination of genetic, biological, social and psychological factors. Moreover, it is easy to identify the factors which increase the risk of suicide in the behavior of juvenile. This study is significant on the behalf of the prevention of juvenile suicide. From the studies we have find out that 75% of the suicide were related with failure in exam and more educational stress (Heeringen, 2002).

One of the respondent's reply;

‘The reason of his suicide was the failure in exam as well as low confidence to face his family and society with low educational grade/ failure in exam. Just because of these aspects He compels to commit suicide.’

However, certain forms of failure stresses are observed to be more commonly connected with juvenile suicide than others (Spirito & Esposito-Smythers, 2006).

‘I did commit suicide because of my attitude and Ego.’

Most of the suicide cases were caused due to high negative Parental, Domestic and societal pressure. In the concern area of study majority of the people were uneducated. They have not enough education to understand the psychological effects of their behavior on their children. In addition, all of them are busy to play with his/her emotion and self-respect. Furthermore, their siblings and cousins and other peer groups and relatives involved spoiling the life of students through their behavior.

The parents were involved in the suicide cases because they demand high score from their child and a result, he brought poor performance in the exam. Due to this their family starts torturing him psychologically, physically as well as verbally.

Respondent reply

"I attempted suicide once, and my exam failure was what motivated me to do so."

Family member (Father) perception towards his suicide;

'The reason behind suicide attempt of Abubakkar was failure in exam. His Father was illiterate and upskills just because of this, He (Father) realizes that success is only in education. For getting bright and secure future one must be educated and talented. For the betterment of his child, He imposes more stress regarding good grades in exam more than his capacity and he cannot bear such situation and lead to commit suicide.'

Teacher perception towards his suicide

Perception of teacher about his student was satisfied. Student has daily attendance in his classroom, obedient and intellectuality. But the most astonishing is that, he commits suicide and being survived. The teacher said that I cannot believe of what he did with his life.

Theme 02: Family' perception towards suicidal attempt

Parents are the unique relations which have no example in the whole world. Only the parents want his child to more successful than their parents. Parents sacrifice their wealth, time and their desires for the bright future of their children.

5. Results and Discussion

One of the persistent problems that have a significant detrimental impact on an individual's conduct as well as their social status is student suicide behavior. Multiple cases of suicide in northern parts of KP were studied. The totals of 168 cases were examined, and interviewed their families. Among these cases, 104 were female and 64 were male. Both male and female suicide victims were between the ages of 20 and 24. The method mostly used for suicide by these individuals were drowning and hanging. According to the study, women had higher suicide rates than men. The majority of the suicide survivors belong to middle class families. There are multiple indicators of suicide among these suicide victims. Major causes of suicide were low self-esteem, a lack of knowledge, a lack of self-confidence, lack of patience, failure in an exam, and a mental health problem. And one problem was common among all suicide survivors. The common problem was parental pressure due to low academic marks. They had no courage to face their families, so they attempted suicide. Results indicate that most of the suicide cases were caused due to high negative parental, domestic and societal pressure. The majority of the parents were illiterate, and as a result of their lack of education, they were unable to comprehend the psychological impact of their negative behavior on their children's mental health. Students' mental health is also disturbed by their siblings, cousins, and peers' negative behavior, but the parents were more involved in the suicide cases because they demand high score from their children without knowing about their problems. In this study, one father admits that due to his pressure on his son, the son committed suicide. Few students' face economic instability, but the major and common problem was parental pressure.

Majority of the suicide survivors belongs to middle class family. Most of the suicide survivors having different problems in his life which compel them to commit suicide. Among those problems the chronic one was educational stressor (fear of low grades in exam, competition with friends and family members) which is develop by the parents and family members of the survivors. Secondly the parental pressure (expectation of high grades in exam despite of depressing other qualities of the students) which was common in all suicide cases of the survivors; third indicator was low self-esteem and inferiority complex of the students due to which a student cannot cope the hardest circumstances of his life. Some of the student's faces economic instability, but the major and common problem was Parental pressure.

6. Conclusions and Recommendations

Suicide is an alarming point that brings a lot of negative changes, not only in individual behavior but also damage the society. In the light of the results and discussion given above, it is found that problems exist everywhere in the world, but suicide/ Deliberate Self- harm (DSH) attempts are related to psychological, social, as well as biological impacts on the victim. As researchers studied multiple indicators of suicide attempts, the main indicator that led to suicide was parental pressure due to low academic marks because students had no courage to face their families, so they attempted suicide. It is also concluded that the majority of the suicide survivors came from middle-class families. Their parents were mostly uneducated, and their sources of income were agriculture, shop keeping, and daily wagers. Upon this information their children have not enough self-esteem and personality growth to survive in critical situation. On the other hand, suicide is an alarming issue here in Malakand Division, due to the unwanted and poor result of the students they lead to commit suicide. They don't have enough knowledge and self-esteem to overcome this issue. Moreover, low self-esteem, lack of knowledge, lack of self-confidence, patience, failure in the exam, and a mental health problem were the main reasons behind the suicide.

Problems exist everywhere in the world, but suicide/ Deliberate Self- harm (DSH) attempt is related with psychological, social as well as biological impacts of the victim. As I studied multiple indicators of suicide attempt, among that, the main indicator that leads to suicide were: educational stressors are strongly connected with suicidal thought, a bad family structure and parental connection are positively correlated with suicidal ideation, and individual factors which lead to suicide were low self-esteem and inferiority complex of the students/youths which play an important role in the increasing of suicide rates in students (Abbas et al., 2020). To better understand how to prevent student suicide, further study is required to identify whether or not improving family structure and parental interactions might reduce the manifestation of suicidal thinking. Second, college student's suicidal thoughts are linked to their parent's precarious employment situation, which in turn causes them financial instability. Third, college students who are stressed out by their coursework and fear of future failure may be more likely to consider suicide.

7. References

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