

# *SUMMARY OF PROJECT REPORT*

## **SUICIDE & ATTEMPTED SUICIDE IN BURDWAN DISTRICT -WITH SPECIAL REFERENCE TO BURDWAN TOWN**

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### **I**

THE PRESENT STUDY originated as a Minor Research Project funded by The University of Burdwan. (Vide Development Officer's Sanction Letter No.RNI/472(2000-2001) dt.1.12.2000)I sought to answer the question "Is suicide a major social problem in Burdwan?"This question boiled down to a host of subsidiary questions. The basic objective of my study was to answer the research question in terms of the following subsidiary questions. These are as follows:

- 1) Are men more predisposed to commit suicide than women?
- 2) Do the young have a greater tendency to commit suicide than the elderly?
- 3) Are the married more predisposed to commit suicide than the unmarried people?
- 4) Is suicide related to education?
- 5) Do people of different religious denominations differ in their propensity to commit suicide?
- 6) Does suicide vary with the level of income?

Three major hypotheses were posited. They are as follows:

- 1) Suicide is the outcome of educational failure.
- 2) Suicide is the outcome of economic crisis.
- 3) Suicide is the outcome of marital disorganization.

### **II**

For testing the hypotheses, I used official statistics. For this purpose, I collected unpublished data from the District Crime Records Bureau ,Burdwan, for the years1997-2000.I also visited the State Crime Records Bureau , Kolkata, where I collected suicide statistics published by the National Crime Records Bureau. This enabled me to compare suicide data at the district level with the national level. In addition, I visited the Burdwan Police Station.

Since official statistics tell only a part of the story, I resolved to study attempted suicide. For this purpose, I visited the Burdwan Medical College & Hospital, where I did case studies of those patients who attempted suicide. This enabled me to get insights into the factors which lead one to attempt suicide.

### **III**

The following are the major findings of the study.

- i) The incidence of suicide has been increasing in Burdwan district. The suicide rate in Burdwan district .The median suicide rate in Burdwan for the years 1997-99 (per 100,000) is 26.4 compared to 10.8 at the national level. Suicide is thus a major social problem in Burdwan.
- ii) The median female suicide rate in Burdwan district is 27 (per 100,000), compared to 25.76 for males. This is a cause for concern.
- iii) Young people have a greater tendency to commit suicide than the elderly (middle aged and old).



- iv) More married people commit suicide than the unmarried, separated, widowed or divorced.
- v) Higher the level of education, lower the incidence of suicide.
- vi) The rising suicide graph among the self-employed and service holders is an indicator of the worsening economic scenario in Burdwan district.
- vii) Our first hypothesis, that *suicide is the outcome of educational failure*, has been partially proved.
- viii) Our second hypothesis, that *suicide is the outcome of marital economic crisis*, has also been partially proved.
- ix) Our third hypothesis, that *suicide is the outcome of marital disorganization (widowhood, separation, divorce)* is rejected.
- x) Our case study, of suicide in Burdwan town in 2000 A.D., shows that Burdwan town reflects in microcosm the macro level trends of suicide in the district.
- xi) The case studies of attempted suicides in Burdwan Medical College & Hospital show that the suicide attempters hail from rural Burdwan, are poor, with uncertain means of livelihood. Poverty is a contributory factor in suicide attempts. Relations between spouses also leave much to be desired, and marital quarrels also lead to suicide attempts. The easy availability of lethal poisons in rural Burdwan is a contributory factor in suicide attempts.

#### IV

Our findings show that suicide is a major social problem in Burdwan district. Preventing suicide should be one of the priority areas in the government's public health programme. To prevent suicide, I recommend the following measures:

- 1) Marital and family counseling, especially among the poor, should be given priority.
- 2) Dowry related suicides in Burdwan district average six in a month. To prevent this, the Anti-Dowry Act should be rigorously enforced. To make the masses aware of the provisions of the law, a legal literacy campaign should be launched. Efforts should be made to rope in NGOs and other sections of civil society.
- 3) Another important cause of suicide is failure in examinations or the fear of failure. Teenagers and youths are its likely victims. To prevent this, student counseling facilities should be opened in schools and colleges. They should employ trained counselors.
- 4) To prevent suicide among the poor, they should be guaranteed employment for at least 300 days per year. All development projects in rural or urban areas should involve the people who are below the poverty line.

I feel that these measures will go a long way to reduce the scourge of suicide not only in Burdwan district but in India as a whole.

But, as a social scientist, I am worried about the revival of some obnoxious forms of suicide like *sati* in India. An officially sponsored campaign has been started in the Indian state of Rajasthan in 2005 to glorify and revive the banned practice of *sati*, where the widow of a dead man commits suicide on the funeral pyre of her husband. In the early 19<sup>th</sup> century, the Bengali social reformer, Raja Rammohun Roy, devoted his entire life to put a stop to this obnoxious practice ignoring social ostracism and other forms of victimization. In the late 1980s, the practice was banned by a central law following the outcry over the Roop Kanwar's *sati* in Rajasthan. But Hindu chauvinists, having secured political power in the state of Rajasthan, are out to implement their communal agenda, which incidentally involves revival of such barbarous practices. Only a strong social movement can prevent the rejuvenation of this obnoxious practice.