Introduction

The Problem

The tragedy of self-inflicted death has always attracted the attention of not only the medical fraternity but also of the jurists, thinkers and the judiciary as well. Suicide and parasuicide are the problems of major concern in today's society, which sometime or the other affect lives of a significant proportion of the population. Inspite of the magnitude of the problem, suicide continues to carry the stigma of shame, creating barriers to the promotion of knowledge and understanding that why people attempt suicide and how it can be prevented.

Suicide is by no means a simple issue, for it hinges on a spectrum of ethical, legal, sociological and psychological problems and it is yet to be offered an unequivocal and satisfactory answer to all the questions raised by this perplexing phenomenon.

This is definitely something that we have to discuss, as the percentages of suicide are too high to ignore the problem that exists in far too many Hindu communities. Well, we can advise, as many elders do - Don't kill yourself. (After all, they became elders by avoiding such extreme solutions.) Suicide does not solve problems. It only magnifies future problems in the antarloka (the subtle, nonphysical world we live in before we incarnate) and in the next life. But do those who are all wrought up with emotion and confusion listen to such advice? The answer would possibly be 'no'. Many die needlessly at their own hand. How selfish? How sad? But It is happening every day. When we read news papers everyday we read the news of suicide. That is increasing day by day.

Suicide is an important issue in the Indian context. More than one lakh (one hundred thousand) lives are lost every year due to suicide in our country. In the last two decades, the suicide rate has increased from 7.9 to 10.3 per
There is a wide variation in the suicide rates within the country. The southern states of Kerala, Karnataka, Andhra Pradesh and Tamil Nadu have a suicide rate of more than 1 out of one hundred while in the Northern States of Punjab, Uttar Pradesh, Bihar and Jammu and Kashmir, the suicide rate is less than 3. This variable pattern has been stable since last twenty years. Higher literacy, a better reporting system, lower external aggression, higher socio-economic status and higher expectations are the pos explanations for the higher suicide rates in the southern states.

The majority of suicides (37.8%) in India are committed by the persons below the age of 30 years. The fact that 71% of suicides in India are by persons below the age of 44 years imposes a huge social, emotional and economic burden on our society. The new equal suicide rates of young men and women and the consistently narrow male: female ratio of 1.4 : 1 denotes that more Indian women die by suicide in comparison to their Western counterparts. Poisoning (36.6%), hanging (32.1%) and self-immolation (7.9%) were the common methods used to commit suicide. Two large epidemiological verbal autopsy studies in rural Tamil Nadu reveal that the annual suicide rate is six to nine times the official rate. If these figures are extrapolated, it suggests that there are at least half a million suicides in India every year. It is estimated that one in 60 persons in our country are affected by suicide. It includes both, those who have attempted suicide and those who have been affected by the suicide of a close family or friend. Thus, suicide is a major public and mental health problem, which demands urgent action.

Suicide is a personal and an individual act. Suicidal behaviour is determined by various factors i.e. individual and social etc. Esquirol wrote that "All those who committed suicide are insane" and Durkheim proposed that suicide was an outcome of social / societal situations, the debate of individual
vulnerability vs social stressors in the causation of suicide has divide our thoughts on suicide. Suicide is best understood as a multidimensional, multifactorial malaise. Suicide is perceived as a social problem in our country and hence, mental disorder is given equal conceptual status with family conflict, social maladjustment etc.  

**Objective of the Study**

The object of present research work is to conduct a detailed socio-legal study of the growing problem of suicide in India. Divorce, dowry, love affairs, cancellation or the inability to get married (according to the system of arranged marriages in India), illegitimate pregnancy extra-marital affairs and conflicts relating to the issue of marriage play a crucial role in committing suicide particularly among women in India. A distressing feature the frequent occurrence of suicide pacts and family suicides, which are more to social reasons and can be viewed as a protest against archaic societal norms and expectations. In a population-based study on domestic violence, it was for that 64% had a significant correlation between domestic violence of women a suicidal ideation. Domestic violence was also found to be a major risk fact for suicide in a study in Bangalore. The population-based study has been done in various cities in India. Poverty, unemployment, debts and educational problems are also associated with suicide The recent spate of farmers' suicide in India has attracted the attention of society as well as governments. Now the societal and government concern is required to address this growing tragedy. At present the study aims at looking into the various laws relating to suicide. The present study objectively tries and finds the nature and the necessity of assisted suicide and euthanasia.
Review of Literature

Durkheim in his book *Le Suicide*, has described the concept of suicide in very articulate manner. Durkheim studies connection between individual and society. He believed that if he could show how what is seen as the most individual act is actually the result of the social world, he would show the usefulness of sociology and his rules of sociological methods.

Hawton K. in *Prevention and treatment of suicidal behaviour* has focused on suicide prevention programmes. According to the writer suicide prevention is more of a social and public health objective than a traditional exercise in the mental health sector.

In *Hand Book of Overdose and Detoxification Emergencies* M.C.Gannin has discussed that people who have expressed plans to kill themselves be encourage to seek help.

Morton M.Silverman in *Comprehensive Text Book of Suicidology* has discussed that hanging is the prevalent means of suicide in pre-industrial societies and is still more common in rural rather than urban areas.

Katherine S. Williams in *Text book on criminology* contains a collection of theoretical and factual material. The author has discussed about mental disorder and criminality. He has also discussed legal, medical and psychological ideas of mental disorder.

Dr. Hari Singh Gaur in his book *Indian Penal Code* The author, has found a rightful recognition from the nation. The clarity and in cisivewss with which he expounded the basic principles of criminal law distinguishes his work. In this book the author has pointed out that attempt to commit suicide must be intentional. The essence of suicide is an intentional self-destruction of life.
V.B. Raju in his book *Indian Penal Code* has explained principles which are not found in other commentaries. The author has suggested a new definition of ‘attempt’ as an ‘intentional preparatory act’ which sufficiently proximate to the offence, which unambiguously expresses the intention to commit the offence, and which all but culminates in the offence.

K.D. Gaur explores the untouched arena in criminal jurisprudence dealing with nature and concept of crime and the scope of punishment under the Indian Penal Code. Right to life vis-a-vis right to die with special reference to euthanasia (mercy killing) and critical illness. Worldwide trend to legalize physician assisted suicide (PAS) have been discussed extensively. The writer has focused alarming increase in suicide case with the help of NCRB Datas.

V.K. Dewan in *The Dowry Prohibition Act 1961* has made an honest endeavour to present the Act in its proper perspective with comments and elaborat case-law. The author has discussed about the tendency to commit suicide, legislative provisions as to the duty of police to enquire and report on suicide, Abetment of suicide, Nexus between ‘Cruelty’ and ‘suicide’, momentum to comit suicide.

B.M. Gandhi looks the problem of suicide as a social problem and social phenomenon and its solution by instrument of law and as a measure to suppress the evil by legal menas and methods. In this book the author has discussed about dowry death and causes of suicide.

M.P. Jain in his book *Indian Constitutional Law* has discussed right to die and right to life in the context of Article-21 of the Constitution of India. His book gives a very thoughtful insight on the subject.

V.N. Shukla has pointed out that the aim of the law to prevent suicide by
legal methods has proved to be counter-productive. The writer has also analysed suicide in the context of Article.21\textsuperscript{18}

**L.M. Singhui** in his book *Constitution of India*\textsuperscript{19} has discussed the Constitutional validity of Section 309 of Indian Penal Code.

**C.K. Parikh** in his book *The Text Book of Medical Jurisprudence* (Translated by Dr. Narendar Kumar) has discussed extensively the legal and medical aspects of suicidology. This book highlight the legal frame work of India relating to victims. The book also identifies the position of the victims through comparetive study of different countries.

**H.M. Seervai** in his book *Constitutional Law of India*\textsuperscript{21} has discussed the Constitutional dimension of the concept of right to life in refrence to Art.21.

**Antoon A Leenaars** in his paper *Suicide and Human Rights: A Suicidologists Perspective*\textsuperscript{22} has highlighted that, “Do people have a right to suicide and/or attempted suicide?” Suicide is a lethal Violence. Suicide constitutes a serious public and mental health problem worldwide.

**Sara Jackson Wade** in *Does Democracy Matter? Regime Type and Suicide Terrorism.*\textsuperscript{23} has discussed that suicide is an attack in which the attacker intends to kill others and intends to die in the process of doing so.

In an another paper **Steven E Messner, Thoroddur Bjarnason, L.E. Raffalovich B.K. Robinson** *Non Marital Fertility and Effects of Divorce Rates on Youth Suicide Rates*\textsuperscript{24} have discussed that the motives of suicide may be differ according to the place and the environment. Among the general causes of suicide are nonmarital fertility, financial ruin, disappointment love
affairs, jealousy, family discard, loss of near relative and physical sufferings etc.

J Maselko, V Patel in his paper Why women attempt suicide?. The role of mental illness and social disadvantage in mental illness and social disadvantage in a community cohort study in India. has tried to conclude that "Why women attempt suicide?"

Robin E Gearing, Dana Lizardi in Religion and suicide has discussed the relation between religion and suicide in depth by the author variety of religious views of suicide, has been studied.

Robert A Pape in his paper The strategic Logic of suicide terrorism the author has analysed the strategic Logic of suicide terrorism.

A varnik, K Kolves, CMVAN in his paper Suicide Method in Europe: a gender specific analysis of countries participating in the “European Alliance Against Depression" highlights the suicide method in Europe. After a brief discussion of the word ‘Suicide’ an international perspective is offered as a way to answer the question and to after views from a variety of countries. The history of suicide and contemporary perspectives on suicide are explicated.

Despite ample socio-political and legal literature available on the subject in view of aggravating incidents of suicide committed by the farmers of Maharastra and Bundelkhand area of U.P., businessman and highly placed officials, a fresh look in the area have become imperative. The present study aims to analyse the problem of suicide in India within socio-legal framework and to suggest the measures to deal with the problem.
Hypothesis

Suicide has all along puzzled the minds of social scientists, philosophers and jurists since the dawn of civilization. The life is so precious to one self that a person does not hesitate in killing another when his own life is threatened. Even small birds, animals and insects resist their best to being killed or trampled. It is really surprising why a man decides to end his precious life by himself? Life is very complex. It is full of goods and evils, pleasure and pains; and perhaps all these mixed together make the life livable, or it would become monotonous and unenthusiastic. Difficulties, hurdles and miseries are part of life and reality and for many they instill freshness and provide zeal and motivation for achieving the goal of life, but for some they become the cause of self destruction. The people who cannot face the realities and decide to end the precious gift of life have been a cause of concern for the society. Religion, morality and law have always tried to put a check, change mind or punish such tendencies but the results have been far from satisfactory.

What so ever the causes of Suicide its effects are tragic and felt long after the individual has taken their own life. It is usually the second or third leading cause of death amongst teenagers, and remains one of the top ten leading causes of death in middle-age. A person who dies by suicide leaves behind them a tangled confusion of family members and friends who try to make sense of a senseless and purposeless act. Most people who think about suicide, however, never make a "serious" attempt at it (every attempt, though, is viewed as "serious" by the person making it). For every attempted suicide, there is thought to be one or more people where the thought of suicide has never translated into an actual attempt. With over a half a million people making a
suicidal attempt each year, this translates into a huge problem that society largely ignores or tries to sweep under the rug. Prevention efforts largely target teenagers, but few professionals feel comfortable dealing with people who are actively suicidal. In most communities, the health care system is also not well-equipped to deal with the magnitude of the problem or the specific needs of a person who is suicidal.

Suicidal behavior is complex. Some risk factors vary with age, gender and ethnic group and may even change over time. The risk factors for suicide frequently occur in combination. Research has shown that 90 percent of people who kill themselves have depression or another diagnosable mental or substance abuse disorder.²⁹

Adverse life events in combination with other strong risk factors, such as depression, may lead to suicide. Suicidal and suicidal behavior, however, are not normal responses to the stresses experienced by most people. Most people who experience one or more risk factors do not become suicidal. Other risk factors include:

- Prior suicide attempt
- Family history of mental or substance abuse disorder
- Family history of suicide
- Domestic violence, including physical or sexual abuse
- Firearms in the home
- Incarceration
- Exposure to the suicidal behavior of others, including family members, peers and/or via the media in news or fiction stories.
The aim of the law to prevent suicide by legal methods has proved counter-productive. Emergency care to those who have attempted suicide is denied as many hospitals and practitioners hesitate to provide the needed treatment due to fear of legal hassles. The actual data on attempted suicides become difficult to ascertain as many attempts are described to be accidental to avoid entanglement with police and Courts. In view of aforesaid facts and judicial response thereto, it is to be examined whether time has come to decriminalise the suicidal attempt and any other method of rehabilitation should be adopted or developed for such person who are bound to stepping for suicide. Psychological and other clinical and motivational counsellings are required to such persons. Whether states policies and planning is sufficient in this regard. If no, what measures should further be adapted by the state.

Research Methodology

Research methodology is 'wrap and roof' of any research programme. It is there fore, an integral part of research work. Research methodology is primarilly of two types : i) empirical and ii) doctrinal. The present research work will be based on both empirical as well as doctrinal study. Primary and secondary source of data would be used in order to reach the conclusion of present research work. Primary source of data would be based on field work including questionnaire and interview. Secondary source of data would be based on various articles, books discussion, debates, journals, reports and decesions of the Supreme Court and High Courts. An analysis of existing trends would also be in corporated as and when it becomes imperative.
Chapter Scheme

In view the aforesaid objectives the present study has been divided into following rubrics:

After introducing the theme of research and objective of study, the available literature on the subject have been reviewed. The hypothesis have been framed and methodology to conduct the present study have also been discussed in this chapter.

The intitled Historical perspective deals with the origin and historical perspective of suicide. In this chapter classical theory, Religions Panorama in Christianity, Islam, Hinduism and other, philosophical aspect, argument against suicide, arguments for suicide and neutral and situational stands have been critically examined.

Theoretical framework of suicide has been discussed in Chapter-3 of the present study. This chapter discusses the theoretical framework of suicide which deals with concept, definition meaning and nature of suicide, various theories of suicide for example Durkheim's theory, inware theory etc. This chapter also deals with form and modes of suicide.

The word suicide means a person voluntarily putting an end to his life. It is obvious, on a plain reading of the definition of “suicide” that the cause and circumstances leading one to take such a decision are wholly irrelevant for deciding the question as to whether the death was a suicide or not. A person who is frustrated or defeated in his life, or considers himself to be frustrated or defeated in life, may on the spur of the moment or after proper deliberation,
come to the conclusion that he needs to put an end to his life. On the other hand, a person who is otherwise happy and claims to be successful in life, and had led a contended life may also take a conscious decision of putting an end to own life such a decision may be taken on a full consideration of the relevant facts nevertheless on a plain meaning of the word “suicide” it is difficult to say that decision taken to voluntarily put an end to one’s life, in the latter case where a person claims to be successful in life and happy, is not suicide.\textsuperscript{30}

“Suicide is the act of voluntary and intentional self destruction.”\textsuperscript{31}

Suicide is a reaction to the problems that apparently can not be solved in any other way. It is the final response which a human being makes to inner motional distress.

Ernest. R. Mowrer was concluded that suicide as a form of personal disorganization, is not a homogeneous phenomenon as many writers have assumed. Two forms of suicide can be distinguished -

(A) Suicide representing the desire of the person to end his life, and

(B) Suicide representing attempts upon the part of the reason to attract attention as a device for securing sympathy of obtaining control over those around him.

Durkheim in his book \textit{Le Suicide}\textsuperscript{32} described the concept of suicide in very articulate manner. Durkheim theory is considered to be a pioneer theory so far as sociological factors are concerned. Durkheim considered that the “egoism” and lack of moral restraint are the main causes of suicide. His theory
assumes that for all societies there is some optional equilibrium or integration of egoism-altruism on the one hand and anomie-fatalism on the other. Any change in the relative strength of these ideas (or forces) will produce an increase in social disintegration which lead in turn to an increase in the suicide rate and in particular type of social relations associated with the “force” that is on increase. He thereby establishes relation between suicide rates and the incidence of different types of social relations. But the great shortcoming of the theory is that there are no means of measuring these forces of egoism, anomie etc. Except with reference to a change in the suicide rate. Yet Durkheim believed that one or more of these forces was responsible for the variation of suicide rate.

In Chapter-4 Social frame work of suicide an analysis of social frame work and suicide. It is still unknown why does one commit suicide? But if a person is sane he has always a motive behind it which may be either perceptible or imperceptible. The motives may differ according to the place and the environment. Among the general causes of suicide are financial ruin, disappointment, love affairs, jealousy, family discord, loss of near relative and physical sufferings. The effects of modernization, specifically in India, have led to sweeping change, in the socioeconomic, sociophilosophical and cultural arenas of people's lives. All these have added to the stress in life, leading to substantially higher number of suicide. In India, the high rate of suicide among youth and adults can be associated with greater socioeconomic stressors that have followed the liberalization of the economy and privatization leading to loss of job secure huge disparities in incomes and the inability to meet role
obligations in the new socially changed environment. The breakdown of the joint family system that previously provided emotional support and stability is also seen as an important causal factor in suicides in India.

It is also not true that suicide is committed by a person who is less educated and is driven to commit suicide due to lack of intelligence. It has been seen that great men of letters, philosophers, poets and painters of the world fame have committed suicide. It is said that the Diogenese, the great philosopher of Greece strangulated himself; Shudark, the great writer of "the Little Cart of the Clay" burned himself in fire, the great poet Chatterton took poison to get rid of his poverty. There is mystery behind the death but some say that Maxim Gorki killed himself with his own pistol. Robert Clive twice attempted suicide but could not succeed. Thus, cause of suicide cannot be attributed to lack of education. This chapter also deals with causes of suicide and issues behind suicide.

**Chapter-5** is devoted to *Legal and Judicial Framework of suicide*. This Chapter deals with legal framework of suicide. For the purpose of establishing the cause of death, suicide is legally defined as the intentional act of self destruction committed by someone knowing what he is doing and knowing the probable consequences Of his action. The verdict of suicide should always be supported with the evidence. It can never be presumed.

Different views about the word 'Suicide': Medard Boss has said 'Flight from death is mere survival' and 'flight into death is suicide. Edward Phillip in the 1662 edition of his dictionary, 'A new world in words' claimed the invention of the word suicide. Interestingly enough, he does not derive it from the death
of oneself but says it should be derived from a 'sow' since it is a swinish part for a man to kill himself.

The British poetry critic Alfred Alvarez in 1971 claimed that he found that the word 'suicide' was used even earlier, in Sir Thomas Browne's 'Religion Medici' written in 1635 and published in 1642.³³

Before the invention of the word suicide other terms mostly circumlocutions and euphemisms relating to self- murder were used. They are, self-destruction, self-killing, self-slaughter, sibimortem consciencere (to procure one's own death, vim sibi infere (to caiise violence to oneself), sm mann cadere (to fall by one's own hands).³⁴

Legal Issues

In India, attempted suicide is a punishable offence. Section 309 of the Indian Penal Code states that "whoever attempts to commit suicide and does any act towards the commission of such an offense shall be punished with simple imprisonment for a term which may extend to one year or with a fine or with both"

However, the aim of the law to prevent suicide by legal methods has proved counter-productive. Emergency care to those who have attempted suicide is denied as many hospitals and practitioners hesitate to provide the needed treatment fearful of legal hassles. The actual data on attempted suicides become difficult to ascertain as many attempts are described to be accidental to avoid entanglement with police and Courts.
Section 309, IPC Right to die vis-a-vis Right not to die - A Constitutional dilemma.

The State's power under Section 309, IPC to punish a man for having failed in his attempt to commit suicide is questioned not only on grounds of morality but also on the Constitutionality of the said provision.

**Maruti Shripati Dubal vs State of Maharstra**\(^{35}\) : In 1987 the Bombay High Court in Maruti Shripati Dubal stuck down Section 309, IPC as ultra virus vide Article 21 of the Constitution which guarantees 'right to life and liberty'. The Court said that 'right to life' includes the 'right to live' as well as the 'right to end' one's life if one's desires. Justice P.B. Sawant said:

"If the purpose of the prescribed punishment is to prevent the prospective suicides by deterrence, it is difficult to understand how the same can be achieved by punishing those who have made the attempts. Those why make the suicide attempt on account of mental disorders require psychiatric treatment and not confinement in the prison cells where their condition is bound to worsen leading to further mental derangement. Those on the other hand, who make a suicide attempt on account of acute physical ailments, incurable disease, torture (broken down by illness), decrepit physical state induced by old age or disablement, need nursing homes and not prison to prevent them from making the attempts again. No deterrence is further going to hold back those who want to die for a special or political cause or to leave the world either because of the loss of interest in life or for selfdeliverance.

**State vs Sanjaya Kumar**\(^{36}\) : Similarly, in 1985 Delhi High Court in
Sanjaya Kumar while acquitting a young boy who attempted to commit suicide by consuming. 'Tik Twenty' strongly advocated for deletion of Section 309, IPC from the Statute Book and said that the continuance of Section 309 of the Indian Penal Code is an anachronism unworthy of a human society like ours. Instead of sending the young boy to a psychiatric clinic society, gleefully (happily) sends him to mingle with criminals. Medical clinics for such social misfits; but police and prison never.

**Chenna Jagdeshwar vs State of A.P.**\(^{37}\) : However, the Andhra High Court in Chenna Jagdeshwar. upheld the Constitutionality of Section 309, IPC and remarked that 'right to life' does not necessarily signify 'a right to die' which is an offence.

**P. Rathinam vs Union of India**\(^{38}\) : In 1994 a Division Bench of the Supreme Court comprising of Justices R.M. Sahai and B.L. Hansaria in P. Rathinam/Nagbhusan Patnaik,\(^{39}\) while allowing the petitions upheld the Bombay and Delhi High Court's verdict and overruled Andhra ruling. The two petitioners assailed the validity of Section 309 the Penal Code by contending that the same is violative of Articles 14 and 21 the Constitution.

While striking down Section 309, IPC, the Apex Court said 'it is a cruel and irrational provision violative of Artide 21 of the Constitution'. Expanding the scope of Article 21, the Court upheld that, 'right to life' include 'right not to live a forced life', i.e., to end one's life if one so desires. The Court went on to say that-

"...It may result in punishing a person again (doubly) who has suffered
agony and would be undergoing ignominy (humiliation) because of his failure to commit suicide... An act of suicide cannot be said to be against religion, morality or public policy and an act of attempted suicide has not baneful effect on society. Further, suicide or attempt to commit it causes no harm to others, because of which State's interference with the personal liberty of the concerned persons is not called for.”

The Court further said a person who attempts to commit suicide does not deserve prosecution because he has failed. There can be no justification to prosecute sacrifices of their lives. For instance, students who jump into the well after having failed in examination but survive; girls and boys who resent arranged marriage and prefer to die, but ultimately fail, do not deserve punishment; rather soft words, wise counseling of a psychiatrist and not stony dealing by a jailor following harsh treatment meted out by a heartless prosecutor.

**Gyan Kaur vs State of Punjab**: However, in 1996 a five member Constitution Bench of the Apex Court comprising of justices J.S. Verma, G.M. Ray, N.P. Singh, Faizauddin and G.T. Nanawati in Gyan Kaur, over-ruled its decision of 1994 in P.Rathinam Naghbhusnn Patnaik. In the impugned case the appellant and her husband were convicted by the Trial Court under Section 306, IPC for abetting the commission of suicide by Kuiwant Kaur. In special leave before the Apex Court the conviction of the appellants has been assailed (challenged) inter alia on the ground that Section 306, IPC is unConstitutional in view of the judgment in P. Rathinam, wherein Section 309, IPC has been held to be unConstitutional as violative of Article 21 of the Constitution.
It was urged that 'right to die' being included in Article 21 of the Constitution declaring Section 309, IPC to be unconstitutional, any person abetting the commission of suicide by another is merely assisting in the enforcement of fundamental 'right to die' under Article 21 and therefore Section 306, IPC penalising assisted suicide is equally volative of Article 21 of the Constitution.

Dismissing the petition, the Apex Court held Section 306, IPC as Constitutional and said that 'right to life' does not include 'right to die'. Extinction of life is not included in protection of life. The Court further held that Section 306 constitutes a distinct offence and can exist independently of Section 309, IPC. There is no correlation between the two Sections.

As regards Section 309, IPC is concerned, the Court said that the 'right to life' guaranteed under Article 21 of the Constitution did not include the 'right to die' or 'right to be killed' and therefore an attempt to commit suicide under Section 309, IPC or even abetment of suicide under Section 306, IPC are well within the Constitutional parameters, and are not void or ultra vires. The 'right to die with human dignity' cannot be construed to include within its ambit 'the right to terminate natural life', at least before the natural process of certain death. The 'right to die', if any, is inherently inconsistent with the 'right to life', as is death with life. The Court said:

"Article 21 is a provision guaranteeing protection of life and personal liberty and by no stretch of imagination can extinction of life' be read to be
included in 'protection of life'. Whatever may be the philosophy of permitting a person to extinguish his life by committing suicide, it is difficult to construe Article 21 to include within [its ambit] the 'right to die' as a part of the fundamental right guaranteed therein. 'Right to life' is a natural right embodied in Article 21, but suicide is an unnatural termination or extinction of life and therefore incompatible and inconsistent with the concept of 'right to life'.

As regards the contention that treating different circumstances leading to attempt to commit suicide by the same measure is violative of Article 14 of the Constitution, the Court said, it does not hold good in as much as the nature, gravity and extent of attempt may be taken care of by tailoring the sentence appropriately. Section 309, IPC has only provided the maximum sentence which upto one year. It also provided for imposition of fine only as a punishment. It is this aspect which is important and reported decisions show that even on conviction under Section 309, IPC in practice the persons have been dealt with compassion by invoking the provision of Section 360 of the Code of Criminal Procedure, 1973 (Section 562, Cr.P.C., 1898) and Probation of Offenders Act, 1958.

A careful perusal of the above conflicting rulings of the Apex Court - one holding Section 309, IPC (Constitutionally) valid, while the other striking it down being violative of Article 21 of the Constitution which guarantees 'right to life,' would reveal that there is ample force in both the contentions. Perhaps the entire matter of retention or abolition of Section 309, IPC from the statute book needs a careful study so as to strike a balance between the two propositions.
Suicide, its growth and preventive measures have been discussed in Chapter-6. After analysis of data and reports, it is felt that due to the impact of globalization and materialism, there is an alarming increase in suicide cases. Present research work indicates that suicide rates appear to be increasing day by day. It is a growing problem for India and the world. This chapter also deals with the prevention of suicide.

Chapter-7 concludes the problem and sums up the study with certain concrete suggestions.
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