3.1. METHODOLOGY OF THE STUDY

Suicide is an event that defies logic. The frequency of suicide brings up the question, again and again, of what causes it. The factors that impact on an individual that lead to choosing suicide as an alternative are multidimensional. Sociologists contend the strong influence of social factors and relationships, as well as a complex, impersonal society, leads to self-destruction. Most psychologists, on the other hand, believe suicide results from internalized aggression and hopelessness. Many of these psychologists also have psychodynamic views, which rely greatly on the Freudian school of psychology. A more contemporary scientific area, biochemistry, places much importance on genetics, hormones, and especially neurotransmitters and amino acids.

Throughout history, suicide has been both condemned and consoled by various societies. Islam, Judaism, and Christianity generally condemn it, and suicide attempts are punishable by law in many countries. The Brahmans of India, however, tolerate suicide; and sati, the voluntary suicide of an Indian widow, now outlawed, was highly praised at one time. In ancient Greece, convicted criminals were permitted to take their own lives, but the Roman attitude toward suicide hardened toward the end of the empire as a result of the high incidence among slaves, who thus, deprived their owners of valuable property. Jews committed suicide rather than submit to ancient Roman conquerors or crusading knights who intended to force their conversion.

3.2. RELEVANCE OF THE STUDY

The rationale behind suicide, which is defined as the intentional taking of one's own life, can be as simple or as complex as life itself. The person who commits suicide may see his or her actions as some sort of solution to a severe physical or psychological dilemma.
The frequency of suicide brings up the question, again and again, of what causes it. The factors that force on an individual that lead to choosing suicide as an alternative are multi-dimensional. Sociologists contend the strong influence of social factors and relationships, as well as a complex, impersonal society, leads to self-destruction. Most psychologists, on the other hand, believe suicide results from internalized aggression and hopelessness. Many of these psychologists also have psychodynamic view, which rely greatly on the Freudian school of psychology. A more contemporary, scientific area, biochemistry, places much importance on genetics, hormones, and especially amino acids and neurotransmitters.

Whatever the case may be, the increase in the number of suicide rates directly reflects the anomic condition of the societies. Durkheim argued that when societies go through periods of anomic, their suicide rate increases. Historical research supports this claim. Periods of economic depression and social integration bring about anomic in a country, and national rates tend to rise.

Suicide is no longer regarded as an irredeemable moral crime but a fact of society, like the birth rate or the unemployment. It has social causes which are subject to discernible sociological laws which can be identified and analyzed scientifically and rationally. In social theory it is viewed fundamentally as a product of the nature of relationship between the individual and the society. The relative degree of regulation, control, isolation and oppression of individuals in society are the primary causes of varying degrees of suicide rates in different societies. These factors are often influenced by social and economic factors such as economic cycles, occupation, age, gender, marital status, social cohesion, urbanization, modernization and public services.

The phenomenon of suicide in the Valley needs to be observed/analyzed in the above-mentioned sociological framework. The global-oriented
sociological propositions need to be utilized in order to explain causes, consequences, nature/pattern, solution/s and other important features of the going-on trend of suicides. This may prove a serious academic exercise. But, there are some serious limitations which make this work very difficult, even impossible. These limitations include non-availability of relevant data from any source [including the governmental sources] and any professional-academic study on suicides in Kashmir. In this context, this study stands highly relevant and badly-needed. This study is an attempt to identify and explain major sociological features of the acts of suicides in Kashmir during the period of last one decade.

The Valley of Kashmir has witnessed unprecedented levels of suicide. In fact, the reasons and causes for committing suicide have somewhat challenged the various surveys and theories of the suicide. The suicides in Kashmir may be observed in the broader context of total societal dynamics. Thus these may not be explained, analyzed in relation to the development of militancy alone, but will be seen and co-related in the totality of social, cultural, economic, psychological, political, educational, demographic and other relevant factors. It follows that while basic societal factors have determined the occurrence of suicides; the militancy-related developments have accelerated and intensified the rate of suicides in Kashmir. The decade-long tension, bloodshed and fear have made lakhs of people victims and pushed thousands of people to take the extreme step of suicide in Kashmir. It has left the deep impression upon the people of almost every community irrespective of class, caste, creed, religion, geography, etc.

Call it fallout of violence or a corollary of the events, the anomic society of Kashmir is fast becoming a land of suicides- Suicides and suicidal tendencies among Kashmiri male and female youth have accomplished a dangerous level.
Continuing violence has also resulted in the loss of self-control, people over-react to any kind of situation. Because of the degrading educational institution, the students could hardly do justice in the academic field, as a result, many could not go for higher education and most of them were unable to find a suitable job, resorting many of them to commit suicide. Besides the massive killings for past fifteen long years has resulted in the deteriorated social setup particularly affecting the family ties in one way or the other thereby forcing many of them to commit suicide or make an attempt to do so. Paul Holinger and his colleagues have suggested that the competition for jobs, college positions, and academic and athletic honours keeps intensifying for this age group, leading increasingly to shattered dreams and frustrated ambitions. In the state of Kashmir, the existing condition has framed the system in such an order that these problems have intensified and their scope is broadening day to day. There are as a result of this ongoing turmoil thousands of people living in pathetic condition of the society of Kashmir, suffering from many psychological ailments and having a high tendency to commit suicide.

Suicides have become a common phenomenon among females in Kashmir whose simplicity and customary approach used to be worth mentioning. They too have resorted to suicide attempts and most of them have been successful in doing so. The present study aims to study sociologically the causes/reasons behind the suicide. The main concern of the present investigation is to find out under which situations a person commits suicide - their social, economic, psychological and other problems would be taken into consideration. The analysis of the existing literature on this subject and the studies conducted indicate diverse reasons of suicide.

3.3. HYPOTHESES

- That the suicide rate in Kashmir is higher in low income and socially disadvantaged families.
- That suicide is more frequent in the age-group of 20-35 years.
- That the rate of suicide is higher among women in Kashmir.
- That the rate of suicide is less among married people.
- The present turmoil has enhanced the rate of suicide.
- That the dominant mode of suicide in Kashmir is poisoning.
- That suicide rate in Kashmir is high in urban areas.
- That the socio-psychological reasons are causative factor to some extent.

3.4. OBJECTIVES

The aforementioned hypothesis has provided the basis for arriving at diverse objectives detailed hereunder:

- To find out/analyze the relationship between suicide & socio-economic conditions of a person.
- To find out the occurrence of suicide in various age-groups.
- To find out whether the rate of suicide is higher in males or females.
- To find out the relationship between marital status & suicide.
- To explore whether the present turmoil has wrought an impact on the rate of suicide.
- To find out the dominant mode of suicide in Kashmir & to explore the reasons thereof.
Methodology of the Study

- To find out the incidence and difference in the rates of suicide in rural and urban areas.
- To find out to what extent socio-psychological reasons are the causes behind suicide.
- To find out the apparent causes of suicide.

3.5. UNIVERSE OF THE STUDY

Jammu and Kashmir, is situated between 32°-17’ and 37°-50’ North Latitudes and 73°-06’ and 80°-30’ East Longitude, territory in the Northwestern part of the Indian subcontinent. The state is spread out in a geographical area of 2,22,236 sq. kms. It is geographically bounded on the north by Afghanistan and China, on the east by China, on the south by Himachal Pradesh and Punjab Province of India on the west by the North-West-frontier-Province and the Punjab Province of Pakistan. It is a multi-ethnic, multi-religious and multi-lingual state having a population of around 10,069,917. The state is culturally divided into three divisions – Jammu, Kashmir and Ladakh. The three divisions altogether depict a different picture when looked on in a socio-cultural perspective. The Universe of the Present Study is the whole of the six districts of Kashmir of Jammu and Kashmir State as per the records of census 2001. The other motive behind the decision was to get sufficient number of cases because the suicide victims are not easily available and because in our society the suicide is not much talked about and all the efforts are taken to keep the matter out of the public gaze.

3.6. SAMPLE OF THE STUDY

The required sample size depends on two key factors: 1) the degree of accuracy we required for the sample; 2) the extent to which there is variation

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3 Census 2001.
in the population in regard to the key characteristics of the study. At the very beginning the Researcher visited various Police Stations, Hospitals and archives of News Papers to get yearly statements of the commission of suicide as maintained by hospitals and Police Stations and an inventory of those who had attempted or committed suicide during 2000 to 2007 was prepared by the Researcher. (Later on after the completion of the field work the researcher obtained the police and hospital reports for 2008 to 2009). The final list contained 922 suicide cases as reported by the Police and 833 suicide cases were reported in hospital reports and the total cases reported by both the institutions was 9256. These figures constituted the secondary data of the study. After the accomplishment of the Police Stations’ and hospital visits, (in the first instant) the Researcher traversed all the six Districts of the Kashmir Valley and a Pilot Survey of whole Valley was conducted. The information was gathered through informal sources like locals, particularly Chowkidars, Numbardars and other prominent personalities of the area and after the Pilot survey of the six districts of the Kashmir Valley the Researcher came across 1019 persons who had committed suicide. Out of those 1019 persons the Researcher picked up 300 victims randomly irrespective of sex, age, occupation, marital status etc. almost equally from each District. Moreover, the Researcher came across 35 persons who had attempted suicide, (but did not die), and the Researcher prepared their case studies.

3.7. DATA COLLECTION

Methodology is about method, and method is the vehicle for getting a true representation of social phenomena one is observing. No method is good or bad in it, its suitability depends upon the problem at hand and the nature

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5 At the inception of the present work the Valley of Kashmir was divided into six Districts (Anantnag, Pulwama, Budgam, Srinagar, Baramulla and Kupwara) Subsequently after the reorganization of the Districts four new Districts (Kulgam, Shopian, Gandrebal and Bandipora) were carved out, but information regarding various parameters were not available for long time as such the researcher had to contend with the old demarcation.
of data that has to be collected. The collection of data depends upon the
nature of the problem and the socio-economic environment in which the
researcher is placed and the method of data collection must be related to the
sort of problem on hand and to the social situation which represents itself to
the sociologist. As such for an efficient and reliable research various
interviewing techniques are essential for having insight into the problem. To
carry out this study, the data collection was carried out following an empirical
modus operandi so as to get objective and pragmatic findings.

As an important part of the research the methods or techniques to be
used by the Researcher for the collection of the empirical data was selected. In
this peculiar case the Researcher had to deal with two types of victims: Type
first was of those who had committed suicide i.e., and died. The other type of
victims was of those who had just attempted suicide but had been saved
somehow. Two different kinds of tools and techniques had to be used with
these two different kinds of suicide victims, which are discussed below under
separate headings.

3.7.1. Sources of data collection for suicide committers

In the matter were the information had to be collected regarding those
who had committed suicide the method of Interview Schedule seemed to be
the best possible method. In order to carry out a realistic research on the
concerned topic, it was decided to elicit the information from the respondents
through interview with observation. Initially the Researcher conducted the
interview of the respondents (relatives, friends or neighbours etc. of the
suicide victims), but much success was not achieved because everyone was
not willing to answer all the questions or that everyone did not know whole
of the situation/story regarding the victim. So the questions had to be split
and put to different persons who were in any way involved with the matter.
A detailed and comprehensive Interview Schedule was prepared by the

investigator to approach the respondents. In the Interview Schedule all the questions were structured, listing alternative answers. The respondents had to choose the appropriate ones according to their own judgment & understanding. Through interview one can get more information than other methods. Besides, while interviewing the respondents, the Researcher made a keen observation of the respondents’ actions and their conditions.

3.7.2. Sources of data collection for Suicide Attempters (Case Studies)

The victims who had only attempted suicide, the researcher had to take recourse to a different source. The primary source for case studies adopted by the researcher was interview and observation method. Most commonly, it was the unstructured interview which was used by the investigator. The questions were usually open-ended with a conversational tone. However, at times, the structured interview was also used as part of a study. The Researcher got most of the information from the victim himself. The Researcher in most cases got into friendly conversation with the victim and sometimes used some enticement to persuade the victim into answering or getting into talking mode. Besides the victim himself some information had also to be had from the friends or relatives of the victim. Sometimes the information was also got from hospital and police reports. Afterwards the story narrated by the victim himself and the information got from the other acquaintances of the victim, coupled with the police and hospital reports & was woven into case studies.

Moreover, the Researcher conducted interviews of experts like Sociologists, Psychologists, Psychiatrists; Police investigating Officers etc. their interviews and interaction with them and their opinion and experience has also been utilized.

In the collection of data help has been sought from different medical institutions of the Valley like those of General and District Hospitals, law enforcing agencies and the other relevant organizations. After identifying the
cases, an intensive study was carried out by employing the Interview Schedule and Observation as methodological tools. And to carry out this field study an attempt based on positivistic approach was utilized. The data collected was supplemented with the secondary data gathered from the records of the Gazetteers, Books, Research Papers, and other relevant unpublished archival material available on this subject.

In order to gather the preliminary idea about the study, the researcher went for the pilot study so as to be able to design and formulate the schedule for the data collection and subsequently refine, facilitate, and yield precise direction to the research.

After collecting information from the field, the interview schedule was condensed and rechecked in order to put all the information in methodological order. Statistical estimations such as aggregation, percentage, etc. were made in order to present the findings precisely. A number of tables were made question-wise and theme-wise, identical responses were counted and placed in a tabular form. The similar as well as dissimilar responses for a particular theme were aggregated. An attempt was made to establish relationship between different variables such as age, gender, education, income, etc. Data was analyzed, tabulated and then interpreted systematically with logic and in the light of the facts of the laid objectives and hypothesis that enabled to come up with this empirical study of the suicides in Kashmir.

3.8 PROBLEMS ENCOUNTERED IN THE FIELD

It would not be sensible to allege that the present work is entirely perfect. The challenge of conducting a study of this nature lies in identifying the cases who have committed suicide. Even, suicide is a concern which is looked down upon by the people. People do not like to talk about it. Even the families whose some member has committed suicide are looked down in our society. As the area of the research was Kashmir Valley and Kashmiri’s being predominantly Muslims, suicide is regarded as a heinous crime. Even the
death prayers are not said for the person who commits suicide as a result suicide brings shame and degradation to the family of the suicide commiters or attempters. So, nobody would like to talk about it.

In this background the Researcher found it an onerous job to collect information about the suicide and to elicit information regarding it. Like any research or field investigation, this was also accompanied by lot of challenges that ranged from identifying the resource persons to developing rapport with them. The Researcher visited SMHS Hospital, Mental Hospital, SKIMS and other District and Sub-District Hospitals in addition to the police stations. As the very outset, the people at the hospitals did not allow to carry any kind of research work directly with the patients because of the administrative reasons and that of confidentiality. Much information could not be gathered as the Hospital administration denied that they had exact records or simply they were not co-operative. However, interactions with and interview of Doctors provided some fruitful information regarding the problem and insight into the problem.

The Researcher first of all tried to meet the family members of a Suicide Victim but often the family members showed reluctance. It was not easy to persuade the respondents to answer the questions. Some simply denied that any person of their family had committed suicide. Moreover, stigma, trepidation and apprehension compelled them to remain silent which led to to wrong response at many occasions. As a result a lot had to be deduced through the tool of observation. The researcher always tried to abstain from the perceived impression that could have distorted the findings. But because of the fact that a well equipped orientation was given, so as to properly deal with the respondents, as a result, the challenges faced in the field by the Researcher over a period of time were conquered to a greater extent.