

CHAPTER XI

CONCLUSION

Suicide behavior is a personal act with a wide social influence and implication and at the same time a major public health problem which requires is still trying to produce a society matching up with its level of education and literacy. Day by day the rates of suicides are increasing. As per the latest reports available, nearly 28 persons commit suicide in Kerala every day with an ever increasing suicide rate - almost three times the national average. About 100 suicide attempts are made everyday of which 25% of them find realization. More males commit suicide than females the ratio is approximately 70:30. Eighty percentages of those who die by suicide belong to the productive age group of 15-59 years. The study "Causes and Consequences of Suicide: A Case study of Kerala". highlights the major causes of suicide by studying suicide attempters and its impacts on family members after one committing suicide.

In the first chapter the researcher introduced the problem nicely by explaining the major factors of suicide and its impact on family member.

The second chapter is the researcher reviewed of literature regarding the research area. The researcher reviewed the literature by giving importance to different variables like age, sex, education, place of residence occupation income and objectives. But it was difficult to get sufficient literature on impact of suicide in the field of religion, family, society and attitude of family members before and after one committing suicide.

The third chapter is the methodology of this study. The main thrust of this research is to study and to assess the major factors responsible for suicide among suicide attempters in the state of Kerala – which according to Amartya Sen is the model of development- and its effect on the survivors. Also the study tries to understand how the respondents manage to tide over the crisis and how they adjust to the situation. Taking into consideration the above situations the objectives of the study are framed as follows.

1. To study the influence of socio-economic background on people who commits and attempts suicide
2. To analyze the relationship between socialization process and suicide
3. To examine factors responsible for suicide
4. To analyze the long term and short term effect of suicide on the members of family vis- a-vis
 - i. Religion
 - ii. Family and
 - iii. Society
5. To make comparative study of attitudinal transformation of the family of those who have committed suicide
6. To study the typology of suicide using Durkheim's model and major hypothesis are
 1. Female members are prone to suicide than the male members.
 2. Socialization process has direct and indirect influence on suicide.
 3. Religion plays a vital role in suicide.

4. Economic factors are main cause of suicide.
5. Suicides have long term and short term effects on the family.
6. The attitude the members of the family changes once a member in the family commits suicide

The people who have attempted suicide but failed and the family of those who committed suicide in the Thiruvananthapuram district form the population of the study. The entire list of population could not be obtained from one single source. The list of the respondents who have attempted to commit suicide, but failed was obtained from Trivandrum Medical College. Hundred suicide attempters were thus selected from Thiruvananthapuram Medical college hospital using convenient sampling method. The families of people who have committed suicide were selected from State Crime Records Bureau using stratified random sampling method. The zones Nemom, Vattiyoorkavu, Petta, Kattakada, Neyyattinkara and Nedumangadu showed highest incidence of suicide in Thiruvananthapuram District from which hundred samples were selected using random sampling method. Fifty percentage of the committed families from each zones were selected on the basis of availability of the members. After a preliminary study of the respondents, certain cases were dealt in detail using case study and in depth interviews. For the last objective Durkheim's study of suicide model is used by using Weber's tool of ideal type. The cases which are studied are grouped in to various types of suicide as given by Durkheim. Construction of the suicide model is used for constructing the typology of suicide

Pilot studies were conducted in Thiruvananthapuram Medical college hospital among the and family members of committers. The data were collected using

interview schedule for suicide attempters from psychiatric O.P and State crime Records Bureau for studying committers' families. Very often short interviews with psychiatrists were also made to get insight into the details of the problem. For pilot study only the suicide attempters were interviewed but later it was felt that to get a correct picture it is essential to interview family members also, which helped the researcher to understand controversy of answers and to pick up correct answers. All the limitations, which were detected during pilot study were taken into account and rectified in the final study.

The study employs both qualitative and quantitative methods for data collection. Primary data were collected using an interview schedule. In the interview schedule most of the questions were closed and some questions were open ended to provide more freedom of answering to the respondent. Secondary data were also collected from State and National Crime Records Bureau' several publications, journals, articles, books, paper cuttings, and newspaper and research papers. Data were also collected from experts who had already worked in the field and from the crime report bureau. Case Studies were made to support some inferences arrived through quantitative analysis. Frequent visits were made to collect more information and to make an in depth analysis of the cases. The major factors responsible for suicide and long and short term impact on family after one commits suicide were clearly brought out through respective cases.

The study used descriptive and diagnostic design as it describes major factors responsible for suicide and problems faced by committers family and diagnosed the relation between the various variables and socio-economic and psychological factors

responsible for suicide

A pretest was conducted among 20 respondents, who included ten attempters and remaining were family of committers. Pre test helped to understand the questions carefully. After the pretest many questions were deleted and necessary changes were made to other questions. The duplications in questions were also identified. From this experience qualitative methods like case studies, and key informant interviews were used in the final study.

As the study is on suicide, it required three types of variables namely independent, dependent and intervening variable were used here. Dependent variable is suicide where as the intervening variable are the economic crisis, strained relationships between the family members, isolation ,death of a spouse, failures in love, lack of social support and depression .

Independent variable namely age,sex,religion,place of residence, income, education and type of family are intertwined with intervening variables to study the dependent variable namely suicide. To study the long term and short term impact of suicide and attitude of family before and after one committing suicide the same independent mentioned above are used. They are age, sex religion, place of residence, income, education and type of family

The data were analyzed using SPSS programme 11.5 version. Frequency tables and cross tables were prepared to arrive at inferences. Further, pie charts and bar diagrams were prepared to present the data and for making the finding clearer. Indices were prepared to measure relation with family members and role of religion and the data collected using scales were measured through quantitative techniques.

Qualitative data were analyzed by content analysis this include the data collected through interview schedules and case studies.

In the fourth chapter realized the first objective is the influence of socio-economic background on suicide. The study found socio-economic background has profound influence on suicide. For fulling the first objective the researcher had compared the backgrounds of both suicide attempters and committers.

It was observed that suicide attempts and ideation constitute a gendered process. Females are reported to have a substantially higher rate of suicide ideation furthermore; they attempt suicide three to four times more frequently than males. Yet these attempts are very often unsuccessful but males succeed at suicide five times more frequently than females. In our society, it is more acceptable for females to express emotions openly, while males are expected to hide feelings. Men delay the process of expressing suicidal feelings and are less likely to admit them. Durkheim (1951) found that Suicides are higher among men than among women. On the contrary it is noted that attempted suicides are higher among women than among men. Because of emotional differences between men and women. Women have stronger negative attitude towards the acceptability of completed suicide but more positive attitude towards suicide attempts.. Failure in primary adult male role (economic success) is more visible obvious than failure in primary female role (success in relationships). Men are more apt to feel like failure in their primary role and hence more likely to kill themselves. It also found that the hostile environment in families compounded by problem of a difficult husband and dowry-demanding in-laws are important issues in females' suicides. They may feel helpless as they fear losing their

husbands sympathies and often they do not have any one turn to. This results in the choice of suicide as a way out from psychological pain, anguish and suffering. Another thing is that women did not wish to die but they try to understand their life situation is getting vulnerable. But men's alcoholic behavior and attitudes towards ending life increase number of completed suicide among men. Women are much integrated towards her family especially towards the children at home which reduce the risk of completed suicide. It also noted that women are less inclined to commit suicide because their thinking is more inclusive. But before they ever get to the point of considering suicide, women are much more likely to seek help with their problems. Even though depressed or alcoholic men are less likely to look for help, it still may be possible to prevent many suicides." *Here the researcher proved the first hypothesis that more female attempt to suicide than male*".

While analyzing the religious background most of the attempters and committers were Hindus followed by Christians and Muslims. This may be due to the fact that there are more religious teachings among Christians and Muslims than Hindus. The organized structure of these religions and the resultant we feeling contribute to less number of suicide. In Christianity and Islam have compulsory religious practices and strong religious teaching. Church and mosque and their respective leaders have profound influence on their life .The practice of "confession" gives much relief from internal tensions and sorrows of life. Suicide among Muslim community seems to be less than any other communities which may be due to the well organized religious structures and feeling of the people that they were protected by the religious community. They are religious oriented and their belief, system and

practices guard them from anti social activities. Another thing is that alcohol is forbidden among Muslims. It is also noted that Muslims have developed an internal support system to help the weaker families in the form of “sakkath” which is not found in other communities. The traditional sense of social unity among them might be the reason for helping the needy.

While analyzing the marital status of the respondents lion share of the respondents were married. The dominant presence of the married women among those who kill themselves needs to be taken note of. Whether these tragedies occur due to the marriage or in spite of marriage is to be determined in each case. The feeling that marriage not being an institution of protection against the pressures of every day life is becoming increasingly felt in our state. The other major danger is that marriage itself becoming an instrument of distress. Being left to an alcoholic husband can trigger the worst reactions. Among married women problem with spouse and in-laws constitutes major reason but in the case of men alcoholism related issues and economic crisis, problem with wife and children constitute main cause of suicide. In the case of unmarried people failure in love, failure in exam and problem with parents constitute main causes of suicide.

This study cannot close eye towards increasing suicide among house wives. The sociological literature has pointed both positive and negative aspects of women's increased involvement in nontraditional roles. It suggests that the net effect of role expansion for women in contemporary society is positive, in that it confers a greater sense of material and psychological well-being for both women and their families. Applying the logic of status integration theory to the contemporary situation

concerning the changing role of women in society and suicide potential, we would posit that married women who presently participate in the labor force would experience less likelihood of suicide, because the status configuration of wife-mother-worker is now a relatively frequent one, occupied by an increasing number of women. Undesirable condition in the home such as alcoholic behaviour of husband and his illicit relations made marks in their life. Status degradation due to unpaid work and non income generative work at home increases her tensions at home which increase the risk of suicide. By engaging women in productive activities one can protect women in committing suicide a great extent among them.

In terms of family income, the study shows suicide rate is high among people in lower income group and less among the higher income group. It may be mainly due to financial instability and improper financial management among them. Domestic violence and related problems were high among lower income group than high income group. Here researcher would like to correlate Marx's theory of dialectic materialism. It states that "matter is not a product of mind contrary mind is simply the most advanced product of matter". People's economic well-being reduces constraints of life which reduces problem among them. This study showed economy is a not direct cause to suicide but economic instability indirectly leads to weakening of family relations.

It was observed that suicide is prone more in rural area than in urban area. It may be due to the fact that in rural areas there is no proper or scientific mechanism like counseling centers and suicide prevention clinic to prevent suicide. If they found

any problem they live with their problems. But in the case of urbanites while in a crisis they seek professional help than ruralites.

Fifth chapter is the analyzes of relation of socialization and suicide. While analyzing the respondents' childhood days most of them were in isolation, some were liked to be with mother, but a small percentage with their friends, siblings and grand parents being themselves mainly due to the illexperience faced in their childhood days. When the family that is father, mother and siblings fail to give love, protection and care, then individual automatically become introvert. This is one of the precipitating factors of suicide. Family, friends, teachers and peers have to play vital role and to chanalise individuals needs and motives. Most of the respondents opined that their father was strict, aggressive, authoritarian and irresponsible towards them. He was not understanding, promotive, considerate, friendly or sharing. All these experiences negatively affect their childhood days. They automatically became introvert and were filled with the feelings of unwanted ness and alienation. Which contributes to suicide? While analyzing familial needs, the respondents never received love, care, affection, security, freedom or acceptance. It was observed that one of the most important functions of the family was to take care of the children, to provide proper love and care to the youngsters, and give them opportunities for proper socialization to mould a healthy generation. Suicide is among the youngsters was due to isolation and dissatisfaction in childhood days which lead to an unhealthy society to him. In this chapter the researcher proved the hypothesis that “***Socialization process has direct and indirect influence on suicide***”. Durkheim's theory of anomie traces the socialization pattern. The improper socialization constitutes a form of norm

less situation. This anomic situation was a contributing factor to suicide. Another thing is that the poor socialization causes low integration with family which creates the feeling of egoism which is also a contributing factor of suicide.

Sixth chapter deals with the role of religion on suicide. Sociologists are interested in the social impact of religion on individuals and institutions. Emile Durkheim one of the first sociologist recognizes the critical importance of religion in human societies. In Durkheim's view religion is a collective act and includes many forms of behaviour in which people interact with others. He tries to understand religious behaviour within a social context. Emile Durkheim viewed religion as an integrative power in human society. It offers meaning and purpose for people's lives. Religion gives a certain ultimate values and ends to hold in common. Durkheim said that the integrative power of religion can be seen in roles of churches, synagogues and mosques. Although the integrative impact of religion has been emphasized, it should be noted that religion is not the dominant force maintaining social cohesion in contemporary society. People are bound together by patterns of consumption, law, naturalistic feeling and other forces. In addition religion offers social support to individual through counseling and caring. The values of religion as already noted, reinforce other social institutions and the social order as a whole. From Marx's perspective however religion promotes stability with in society and therefore helps to perpetuate patterns of social inequality. He is of the opinion that religion would reinforce social control within an oppressive society. In this chapter the researcher measured attachment of man to his religious groups with the help of certain indicators, which was prepared in with the help of spiritual leaders from three

religious communities and sociologists. On the basis of following statements such as religion can bring behaviour modification.[Very much/ Often/ Sometimes/ Rarely/ Never], religion can strengthen your personal relations, faith in God can solve the problems in your daily life, religion is leisure to the people, and religion holds the people together, religious involvement is an outlet for the unwanted thoughts, religion will give an opportunity for the people to communicate with God, division in the religious faith cause for suicide, problems with religious institution cause for suicide and debarring from religious institution is cause for suicide. These statements has been categorized as highly attached, moderately attached and not attached to religion. The people who are attached to religion showed low suicidal tendency. It was found that the male respondents showed low attachment towards their religion due to increasing alcoholic consumption. It affects the social networks of the respondents in the ground of family and religion. In the case of female respondents increasing influence of visual media especially television weakened their religious orientation. In olden days the evenings were enriched with religious prayers and women took initiative to participate in all family members. But now women spend the evening with T.V. serials and other television programmes and they were influenced by women characters and their miseries. While in a crisis imitating character of serial women make silent options of committing suicide as it is considered as an honorary act, how ever women are more attached religion than men. Due to increase in religiosity level completed suicide is less among female than male. While analyzing education and religious attachment it is found that the suicide attempters have high attachment to their religion were highly educated. Education helps for the proper path

of development of the people and help to make right choices at right time some time even the high educators failed to take proper decision in their life. Education strengthens spiritual and social well-being. Even though education and technological advancements hinder the religious beliefs and practices, for the majority religion is a tension relieving mechanism. The respondents were unable to properly utilize their communication with God as for solving their dilemmas or difficulties. The study showed that the respondents in the nuclear families were less attached to religion than the members of extended families. In the extended families grand parents take care in cultivating religious values. The absence of this mechanism in nuclear families caused to low attachment towards religion in nuclear families than extended families. While analyzing occupation and religious attachment of govt. employed, private employed quasi employed private employed, and coolie's shows less attachment towards religion or this religious institution. It may be due to the increase in work load and instability of their work makes bitter experience in life. They always try to increase their material benefits rather than to give emphasis on spiritual concern. Another notable thing is that in this study all the respondents in these occupational categories were male and all the respondents were alcoholic. Alcoholism is an important factor for decreasing the religious attachment. On the basis of discussion with religious leaders it was evident that Christian and Muslim religious leaders were very close their fellow beings. They are concerned about religious activities and try to propagate religious values in their locality. They were involved in family matters of their followers. The religious organizations under several heads and religious gathering helped for bringing solidarity among fellow feeling. The religious institutions are

concerned about socializing their fellow beings in their community. This type of strong binding forces couldn't see in the Hindu religion. The religious institutions of Hindus are not much bothered about the religious socialization of their followers but only give more importance to rituals and practices. On the basis the cross tables, case studies and the key informant interview the researcher proved the hypothesis that *“Religion plays vital role on suicide.”*

In the seventh chapter the researcher analyzed the major factors responsible for suicide. Here the researcher measured the relation with the family members, in a seven point scales by using following statements. They are “ The person with whom you like to share your dreams/ambitions, The person with whom you like to share secrets in your life, The person with whom you like to spend the precious moments in your life, The person whom you wish to travel with, The person with whom you wish to go for shopping, The person with whom you wish to go for ceremonies, The person with whom you wish to go to places of worship, When you are in a crisis the person you wish to approach first, When you are alone, Whom do you like to spend time with the person and Whom you think can wipe out your tears.” These questions were rated on a seven point scale by giving points. Family members ,friends, peers, teachers, neighbours, others and self are given scores as 14,12,10,8,6,4 and 2 respectively and it was rated that the respondents who have scored 140-120 enjoy good relation with family members, 120-80 enjoys moderate relation and 80 and below have poor relation with family members. The researcher found most of the respondents like to spend time by themselves. The respondents did not enjoy good relation with family members. While analyzing the relation with family members on

gender basis it was noticed that the female respondents enjoy better relation with family than male members. On the one hand women were harassed by husbands and in-laws due to increasing alcoholism of their husband, irresponsibility of family matters, lack of proper attention, less concern to children and improper financial management and more over her husband's bad words remind her that she is a burden to the family. But at the same time her children's love towards her and their silent response to the father's irritating behaviour and their dependency to her lessen the chance to commit suicide. In the case of male members, alcoholism, strict and authoritative behaviour weakens the family networks. For some men problems with the spouse is a cause to begin alcoholism which later leads to family instability. Men comparatively enjoyed weaker relation with women counter parts and children. They have better relation with their friends rather than family members. People from low income families do not enjoy a good relation with the family members. These economic constraints were one of reasons for weakening the relation. The younger age groups enjoyed weak relation with family members due to marital conflicts and problem with in-laws. The elder generation are more attached to religion than younger generation. In nuclear families the respondents do not entertain good relation with family members as in extended families. The urbanites enjoy comparatively better relation with the family members, as they have a busy schedule they were more dependent on family members. But in the case of rural areas the family relations were weakened due to quarrel over simple matters. While analyzing occupation and relation with family members, housewives maintained low relation with other family members than other occupational categories. People from low socio-economic

background comparatively enjoy lesser relation with the family members. People from Hindu religion enjoyed low relation with family members than Christians and Muslims.

The researcher analyzed relation between social support and suicide the social support is measured by the scale used by Kulhra Nehra. Most of the respondents perceive low social support. As they felt that nobody bothered about them. They faced difficulty to find real friends in their life. They wished the people who are dear to them should have understood them. They found difficulty to find good friends/relations who can be dependable. They felt that they were isolated by their family members. Ruralites perceived low social support than urbanites. In rural areas people are more conscious about their neighbours' affairs than their own. At the same time it destroys support mechanism among them. But in the case of urbanites support seeking mechanism such as clubs and residential association help them to induce internal support. While analyzing sex and social support it is clear that females receive more support than their male counter parts. It is also observed that women try to express her feelings and emotions, which increases her support mechanism. Men's alcoholism breaks his social networks and it leads to reduce support mechanism than their female counter parts. The people in extended families enjoyed comparatively high social support than people in nuclear families. In extended families the presence of grand parents is a great relief to children but on the other hand the presence of in-laws and harassment from their part makes the life of housewives miserable. Muslims and Christians receive more support than the Hindus. The main reason is that among the Muslims and Christians the religious institution and leaders try to inculcate

internal support mechanism among people. Among Muslims practices such as “Sakath” exist for helping economically weaker sections of the community. These support mechanisms act as tension relieving mechanisms for people in these religious communities.

The major factors responsible for suicide are sudden death of a family member, separation of beloved ones, quarrels within the family, failure in exam, failure in love and indebtedness. Among unmarried and younger age groups sudden death of family members especially those who are close to them affected them much. Quarrels within the family affected housewives, failure in love and failure in exam affected students. The female respondents below 30, showed that dowry and related issues as important cause but not direct cause to suicide. While analyzing economic factors most of the male respondents and coolie workers faced problem in meeting daily needs, educating children and medical expenses. They failed to repay the loans for building and maintenance of home. In this study there is no suicide in the category of farmer's suicide or the suicide due to business failure. Most of the male respondents have economic problem but economy does not constitute direct cause to suicide. Indirectly economic crisis boost up family problem. Alcoholism of head of the family, disrupt the economic stability which have shaken the family relations. In this study dowry and its related issues did not directly affected the suicide. But it indirectly caused to quarrel with in the family. In the case of married male respondents' alcoholism, economy related issues, and extra marital relations are the reasons for quarrels with in the family. But in the case of married women emotional instability, his husband's alcoholic behaviour, his irresponsibility towards family and

his illicit relations are causes of suicide. It also noted that a small percentage of women respondents have faced sexual harassment from their superiors which may have led to suicide. It's only an indirect cause for suicide. Economic reasons of suicide are mainly due to bank loans for building of houses, maintenance of home, buying of home appliances, marriages of daughters and expense for education. In Thiruvananthapuram marriage of daughter is an expensive affair. Dowry given to the girls and its related customs is a heavy financial burden on the parents. Parents borrow loans from banks, private institutions and from money lenders with high interest. When they are unable to repay the amount, there are problems between family members, which are turned to suicide. It is noted that economy in one of the major factor for determining status, life style, psychological satisfaction and personal well-being. Now days it determines not only the individual well-being but also of the whole family. While analyzing the causes of suicide, economy may become one of the direct or indirect factors to family problems which may result to suicide. According to Durkheim men are creatures whose desires are unlimited the more one has, the more one wants. The satisfaction received only stimulate instead of filling needs. But the society imposes limits on human desires and constitutes a regulative force. When social regulations breakdown the controlling influence of society on individual is no longer effective and individuals are left to their own device. Such a state affairs, Durkheim calls anomic which is a property of the social structure. The individual left without moral guidance in pursuit of their goals and commit suicide. They feel that they are no longer sustained by the group to which once they once belonged. Any rapid movement in the social structure like depression, business crises,

economic affluence up set previous network in which life styles are embedded carries with in a chance of anomic which in turn lead the individual to commit suicide.

While analyzing psychological factors researcher found depression is the pre-dominating factors. The study measured depression by using a three point scale. The scale- moderately depressed, highly depressed and not depressed. The study shows most of the respondents female respondents were depressive due to unfavorable family environment but alcoholism main cause for depression among male. Depression is more among those who have low education and who belong to low income category. Their lower achievement in life endour is the main cause of depression among them. But this study shows the depression is mainly due to psychological trait of the individual, the social circumstances and negative experiences badly affect the psyche of the individuals which leads to depression. The researcher found that quarrels with in the family are due to economic problems, failure in love, failure in exam, sudden death of a family member and sexual harassment. In this chapter the researcher partly rejected the hypothesis that “*Economic factors are the main cause of suicide*” because only 29% of the suicide are caused by economic factors and others indirectly related to economic factors

In the eighth chapter the researcher analyzed the long term and short term impact of suicide on family members. While analyzing the long and short term impact on religion, family and society, the researcher found that women and elders have increased their participation in religious activities and rituals which gave a great relief to them. In case of Christians and Muslims the religious institutions give courage and for some they got financial aid during crisis from their respective religion. But in the

case of Hindus, they didn't get support mechanism as Christians and Hindus. It is noted here that those who are more engaged in religious practices, religion is great relief as it helps to escape from stress and strains of the family. It was observed that those who find difficulty in upbringing were mainly dependent females. They found difficulty in giving proper education as well as nourishing food to their beloved children. The financial crisis had affected the family severely and it did upset the running of the household for some members. The moments were forced to take a career and the children begin working earlier than they could have and their education were curtailed for the same reason. Even if the financial problems are solved, the emotional situation faced by these people is very severe. The family faced disruption in family routines compared to other ways. Most of them find it difficult to carry out their daily routines. Daily life can involve extreme irritations, frustrations and anxieties after the incident. They have to fare the accumulating effects of inadequate performance. Sometimes they were subjected to overwhelming stress which is an indication of massive anxiety. Anxiety disrupts performance in families as in individuals, and their behaviour become random, disorganized and of little effect. The most important reason for the collapse of the family was the false interpretation of the incident, gossiping, and moral condemnation. The rumours which were of slanderous nature did in fact spoil the family relations and social relations. Sometimes even the other members of the family believed the stories of slanderous nature framed by other members of the family, which ends in the collapse of the family by talking with the members the researcher found that it was mainly the female who became the scapegoat. Daily life can involve extreme irritation, frustration and anxieties after the

incident. They have to fare the accumulating effects of inadequate performance in families. This was mainly experienced by female respondents. Many marriage proposals mainly for their daughter or sister were cancelled, when people come to know that the one of the members in family committed suicide. There is a notion that suicidal tendency is inherent in those people whose other members of the family had committed or attempted suicide. More over people find having marital bond with such families will bring shame and dishonor to their family also. This rings disruption in family life and this is the reason why efforts were often made by the members to keep a suicide a secret even if the diseased is close relatives.

Some find difficulty in selling their house as it was now labeled as a 'house' where suicide had taken place or haunted by ghosts, some people were tells that they had hallucination of ghosts producing sounds. This has caused sleepless nights and anxiety disturbing their minds. The widowed respondent and say that they had shock which was followed by insomnia and ill health and uneasiness. Medical attention was provided to every one as an immediate effect. They believed that the incident can be avoided if there were understanding before, which is an important ingredient in any married life. Most of them slept less because they engage in numerous thoughts like how to fare the future life and its problems. What will be the future of children? The widows felt isolated because they are no longer the object of a spouse's love and attention rather they have an isolated life style and loss of activities engaged as a couple. The most effected person is the wife. As their relationship is life long the suffering the wife experience were long life long the suffering were life long and uncountable. She lost her life partner with who she could share her sorrow and happy

moments of life. All the widows had experienced insomnia, isolation, insecurity, ill health, uneasiness and shock.

Those who had strong feeling of isolation and insecurity are more or less dependent on the deceased with the premature demise of the member of the family; the person feels that she is deprived of that person's love and care which an important factor of every family is. They felt isolation and insecurity in all walks of their life. Sometimes they may also report problems of sleeplessness, irritability and loss of appetite. Despite the fact that suicidal death and existence of societal patterns developed to adjust to the situation, it seems the bereavement is usually expected and is frequently accompanied by some degree of shock. An initial reaction to shock may be accompanied by insomnia. Most of the people slept less well after the bereavement than they did before. The initial shock at times requires medical attention for physical and mental recovery. Serious physical illness results in a major change in life circumstance usually in an unfavourable way. The researcher found the short term impacts are shock, feeling of fear, insomnia insecurity, feeling of emptiness and disruption in daily routine. The long term impacts are family disruption in gossiping disruption in personal relations, affect in taking decision over small matters, upbringing children, educating children, people looking down up on them, blame, rejection, humiliation, reluctance of others to mingle with them, and people looking down up on them. The researcher supported these findings with six case studies. On the basis of all these empirical findings the researcher proved the hypothesis that "*Suicides make a mark in the family which affects them both in the long way and immediately*".

In **ninth** chapter the researcher found the attitudinal transformation of family of those who have committed suicide before and after committing suicide. Before the family member committing suicide know it degrades the family status, but after this incident they feel suicide totally degraded the family status. Before one commits suicide the respondents of low income group, ruralites believed the chance for occurrence of suicide is more among high income groups and ruralites. But after the occurrence of this incident they realized suicide may occur any where at any time. Before one committing they believed healthy family can reduce suicide. But after this incident they understood alcoholism, lack of sharing between family members are risk factors of suicide. Before these incidents they weren't taken into consideration the mental health but after it they gave more importance to mental health than family and social environment. The problem solving skill and capacity to perceive changing life situation more important. Before this incident they believed introvert behaviour is the main cause for suicide but after this they recognized unidentified clues by the suicidee. They believed nuclear family is one of the main causes for suicide but after this they realized not size of the family but the relationship and solidarity among members are more important. They believed in depth faith in God can solve problems in life. Here the researcher proved the hypothesis that "*attitude of the family changed once family member commit suicide*".

In the tenth chapter the researcher constructed a theoretical model on the basis of this theoretical model researcher categorized the type of suicide according to Durkheim's typology of suicide as egoistic, anomic, altruistic and fatalistic. In this chapter researcher analyzed the application of theoretical framework in the present

study. The egoistic suicide that is due to lack of integration to family more male members commit suicide than their counter parts. But in the case of female members only they make attempts and do not wish to die, because women are more integrated to family especially they bothered about the prospectus of children and other family members. Increasing alcoholism and irresponsible nature indicates lack of integration. So increasing suicide among male termed as egoistic suicide. This study shows increasing individualization as one of the causes for suicide. The individualization has been measured on the basis of the questions such as the person like to share their dreams, like to share their secrets in their life, like to spend precious moments in their life, like to travel with wish to go for shopping, wish to go for ceremonious, wish to go to places of working, the person wish to approach first, when they were above, the person like to spend and the believe person who can wipe out their tears. For all these questions almost all respondents like to be with “self” which indicated increasing individualization among respondents. Thus the researcher proved increasing individualization contributes to suicide which comes under the egoistic suicide. That is increasing individualization is due to lack of integration which turned egoistic suicide

Here the researcher observed that due to powerful integration of religious groups Christians and Muslims show low suicide rate than Hindus. In this thesis researcher proved hypothesis that “religion plays vital role on suicide”. It has been dealt in detail in the chapter role of religion in suicide. Due to less religious teaching and non interference of religious leaders into the personal and family matters and low religious teaching also low integration to their religious groups. Hindus showed

higher suicide rate than other religious communities. Due low integration to religious groups suicide among Hindus termed as egoistic suicide

Durkheim found that those who suffer from low social support came under the category of egoistic suicide. In this study the researcher measured the social support by using social support scale developed by Kulhra Nehru the major indicators of low social support are difficulty to find real friends, while in crisis lack of attention from dear ones, lack of proper support from colleagues and family members, they face difficulty to find out the relations which are dependable to them. They were isolated among their friends and find difficult the relations which are dependable on them. The alcoholics, women, Hindus, people from low economic background and low educators suffered due to low social support. Education and economy give power and support and help to make right choices at right time which geared successes. The increase in individualization causes low social support is resulted in the phenomena of egoism, tend to egoistic suicide.

In the case of anomic suicide caused due to economic crisis. The problem was mainly due to taking loan from banks and private institutions for the purpose of marriage of daughter, building or maintenance of home and expense for education and health collapsed economic system of the family. The farmers' suicide is not reported in Thiruvananthapuram District. In certain cases the whole burden gone to single member, when he/she failed to hold all burden together which leads to suicide. Durkheim observed that the psychological distress, and hopeless situation which comes under the category of anomic suicide. In this study the researcher found the fact that most of the respondents were depressive, the researcher measured depression

by using scale of depression (which dealt in the chapter factors responsible for suicide). The depression and economic failures come under the category of anomic suicide.

In this study the researcher observed certain factors common to both anomic and egoistic the family break down caused due to anomic situation within the family or lack of integration with family members or unhealthy family ties caused suicide. The alcoholism causes the situation of anomic or lack of integration of man towards his family especially husband towards wife and children increase the risk of suicide. The improper socialization may be due to the situation of anomic which includes parental alcoholism, ill treatments from step parents, quarrelling nature of parents and irresponsible for behaviour of parents are product of lack of integration of people to family.

Altruistic suicide happened due to powerful integration of man towards his social group. This study shows due to powerful towards family members, elders who suffers with chronic illness like cancer, tuberculosis and kidney problems committed suicide. They think more about family than themselves. They hope that this unbearable medical expense collapse the economic system of the whole family. They think that ending themselves were better to escape family from financial burden.

Durkheim classified the fatalistic suicide caused due to over regulation towards individual. This type of suicide generally seen among people those filled with the feeling of unwanted ness. This study shows the feeling of unwanted ness more seen among housewives and adolescence. They felt their absence make others happy and they are burden to family which makes them more suicidal.

SUGGESTIONS

RECOMMENDATIONS

The recommended remedial measures are at three levels

a) At individual and family level

- Attitudinal change and positive thinking
- Maintain healthy relationship within the family
- Proper planning at family level leading to a family budget
- Better relationship with neighbors and relatives
- Give importance to religious practices
- Value based and Job oriented education
- Membership in health insurance schemes
- Avoiding bad habits like alcoholism and drug addiction
- Promoting gender balance at family level

b) At Civil Society/ NGO level

- Identification of the needy and provide timely support
- Conduct massive awareness programmes
- Befriending and counseling services
- Capacity building and skill training
- Promote job oriented education
- Promotion of family budgeting

c) At religious institution level

- Promotion of human values among the people

- Family counseling centers
- Promotion of meaningful religious practices
- Life oriented awareness programmes
- Education support to poor children
- Promotion and preservation of life
- Personal attention to the family in crisis

Other suggestions

- Encourage people to talk to others, particularly when they are in emotional distress and confusion. “When you are in distress talk to a friend; when your friend is in distress listen to them” could be a good policy to follow.
- Strengthening workplace informal gatherings and facilitate closer interpersonal communication between colleagues
- The other members of the family like the cousins, in-laws and relatives should show the willingness to intervene when close relatives or family member are found to be in difficulty.
- It needs to be ‘be concerned and interested in the personal matters of the family members and be willing to help if help is needed.
- It also found that marriage, which could be a cushion for the distressed, has often functioned as a stressor. What are needed are urgent measures to enhance the capacity of the distressed to ventilate feelings in confidence and to mobilize the community’s resources to intervene in crisis situations.