

Situational Report: Suicide in Nepal



September 10, 2017

World Suicide Prevention Day

Take a minute, change a life.

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- According to Nepal Police, 4,667 incidents of suicide were recorded in the fiscal year 2015/16.
- On an average [12 persons killed themselves every day](#) in 2016.

Every year World Suicide Prevention Day (WSPD) is marked on September 10, globally. The day was first recognised in 2003, as an initiative of the International Association for Suicide Prevention and endorsed by the [World Health Organization](#) (WHO). The theme of this year WSPD is '[Take a minute, change a life.](#)'

Suicide is a global public health problem as it is one of the top 20 leading cause of death among people of all demographics. As many as [800,000 people die](#) of suicide every year. For one completed suicide there are 20 other people trying to attempt suicide which is associated with many untold stories. Studies have shown, of the 1 million worldwide suicidal deaths, 86% of them belong to the [low and middle income countries](#). Women among them are the most vulnerable.

Nepal's Scenario, what data's reveal

WHO estimates that there is [a suicide in every 40 seconds](#). A statistical data developed by WHO in 2012 revealed that [Nepal was ranked seventh](#) in the world with suicide rates at 25 suicide per 100,000 people. In 2008/09, 20 people out of 100,000 were reported to commit suicide. An estimated 6,840 people [commit suicide in Nepal annually](#). Suicide is the leading cause of death in Nepal among women of age group 15-49.

According to Nepal Police, 4,667 incidents of suicide were recorded in the fiscal year 2015/16. On an average [12 persons killed themselves every day](#) in 2016. Of the 4,667 deaths, 3,366 people killed themselves by hanging. Poisoning

accounted for 1,183 suicidal deaths while 1,183 died of injecting poison to self. Jumping off building and cliffs accounted 65 deaths, self-immolation 30, use

of weapons 13, electrocution 4, and drowning 6. Four hundred of those suicide were committed in Kathmandu valley. Total number of suicidal incidents on fiscal year 2011-2012 was recorded to be 3,993. Altogether 4,350 people committed suicide in the fiscal year 2014-15. As of April 2017, total number of suicide for past six months is published to be 2,262. After the traumatic incident of Nepal Earthquake more than 11 people were reported to have committed [suicide daily on an average](#).

According to the [Nepal Police](#), there were total 2,094 incidents of suicide in 9 districts of Tarai between 2010- 2014. Surge of suicide on Kanchanpur, Kailali, Banke, Bardia, Bara, Parsa, Saptari, Morang, Dhanusha was pointed out to be dowry and gender based violence. Kailali district depicts highest number of suicide attempts in span of 5 years.

As per WHO's, World Health Statistics Data 2017, currently there are [7.2 suicides per 100,000](#) in Nepal, 8.2 for male and 6.2 for female. Presently, Nepal is ranked 126th position on suicide rate per 100,000 people per year. In [1987](#) suicide per 100,000 people was reported to be 3.2.

District Police Office, Illam reported that there were 56 suicides in the span of 8 months in the year 2015, making the district notorious for [highest rate of suicide](#). Majority of them had problems related to mental health.

FIVE-YEAR DATA

Year	K'pur	Kailali	Banke	Bardiya	Bara	Parsa	Saptari	Morang	Dhanusha	Total
2010	65	81	61	52	14	-	12	40	40	365
2011	72	101	43	49	14	15	13	31	29	464
2012	79	106	62	59	24	28	20	53	33	464
2013	73	86	49	57	19	27	16	42	31	400
2014	67	120	47	69	32	36	17	58	52	498
Total	356	494	232	286	102	106	78	224	185	2,094

Source: Nepal Police

The data of [District Police Office Kavre](#) shows that number of attempted suicide rose from 36 to 120 from 2007 to 2016.

The [Far-western Regional Police Office](#), Dipayal reported that around 443 committed suicide in 2016. Among them 232 were male and 211 were female. Hanging from the ceiling was found to be most preferred way to commit suicide. People in Kailali were found to be more prone to suicide followed by Kanchanpur, Accham, Doti, Dadeldhura, Baitadi, Bajura and Darchula. The regional police office also informed that more than 90 per cent of people who committed suicide were below 40 years of age.

Year	No of suicides
2007	36
2008	20
2009	57
2010	61
2011	53
2012	85
2013	84
2014	93
2015	90
2016	120

Source: DPO, Kavre

What does Research Say?

The study entitled Suicidal ideation among students of a medical college in Western Nepal: a cross-sectional study was conducted among 206 [medical students](#) in Nepal on 2017 revealed that lifelong suicidal intention was present on 18.4% of the students. Analysing 287 post mortem cases on Kaski, suicidal rate was prevalent as 12.4 per 100,000 deaths.

The cross sectional study: Perceived Family Support, Depression, and Suicidal Ideation among People Living with HIV/AIDS revealed that [14% of the victims had suicidal ideation](#) who perceived relatively low family support. Similarly, 43% had ever thought about ending their lives and 17% had actually attempted suicide since being diagnosed with HIV. Thirty five individuals reported more than one attempt of suicide. Meanwhile, 26% of them had symptom of depression.

The [Maternal Mortality and Morbidity Study](#) was undertaken by the Family Health Division (FHD) of the Department of Health Services in 2008/9 revealed that suicide was responsible for 16% of death among 86,000 women belonging to eight different districts. They were of reproductive age group of 15 - 49. However, death

due to maternal health issues among those women was only found to be 12% compared to death by suicide.

Retrospective Study of '[Suicide Among Children and Young Adults](#)' stated that the reason for committing suicide was traced for only 25.5% of cases. Among all the reasons discovered for suicide 35% of them died of domestic violence, 24% had suffered from mental illness, 15.8% of them had perceived academic failure, 8.7% of them had end of romantic relationship. Out of 87 cases of suicide because of academic failure 46% of them were at grade ten level.

The report entitled 'A study of [suicidal deaths in central Nepal](#)' discovered that hanging was the most common means of committing suicide for both male and female. Other prevalent ways were poisoning, drowning and scald. 73.5% of the victims had no evidence of treatment history or going to hospital. The study pointed that, "suicidal tendency shows that males tend to commit suicide in a violent way by hanging and shooting where female tend to prefer softer means such as poisoning". Injection of position is common because it is easily available in Nepal. Meanwhile, dowry related violence is found to lead women to commit suicide (predominantly burning) in Tarai region of Nepal. Within the ethnicities Brahmin and Chhetris communities were the most to commit suicide after Dalit and Janajatis. In case of Nepali women, there is higher suicidal rate in age group 15 to 24 and those are of above 45 years.

A research '[Suicide surveillance and health systems in Nepal: a qualitative and social network analysis](#)' in 2016 found that awareness of legal codes among health workers, in particular dispelling myths of suicide's illegality, is crucial to improve mental health services and reporting practices.

Suicidal news that made headlines

Suicidal cases of people in a certain position or celebrities tend to catch more attention than other news.

On July 1, 2017, [Assistant Sub-Inspector \(ASI\)](#) of Nepal Police Gobardhan Khatri stationed at the District Police Office of Siraha committed suicide. On July 22, 2017 [four members of same family](#) in Banepa were found dead. Dispute over marriage issue forced the

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family take down their life by consuming poison. On July 2017, a couple died by [jumping from highest suspension bridge](#) located at Kushma. Boy who died was reported to be suffering from kidney malfunction and was most concerned about treatment debt.

There are instances of high profile suicide. Famous Rapper [Anil Adhikari](#) known as 'Yama Buddha' committed suicide on January 14, 2017. The reason behind it is still unknown. On July 09, 2017 cinema journalist [Sabin Shakya](#) committed suicide. A suicide note found on his room revealed that he was unable to fulfil expectation of family and well-wishers. Many high profile suicide cases as such are reported every year.

Current scenario

Suicide still remains a complicated issue in Nepal. Very few people with mental health problems seek counselling services in the country. Various stigmas are related to why the people with psychological problems are hiding. They tend to blame themselves for their situation. Their frustrations increases as they aren't able to express their emotions which results in suicide. Because of poor record documentation, suicidal cases [go largely under reported](#). The rate of documentation is very low as it accounts for 3.7 out of 100,000. Social stigma and logistical problem are the major reason.

Causes of suicide is attributed to be mental disorder, depression, neurological disorder, poverty, lack of employment opportunities, social discrimination, gender violence, alcohol and drug abuse, cancer and HIV infection. While youths, unmarried, adolescents, divorced and single people, drug persons suffering from terminal disease, professional groups, members of broken family, housewives, victims of sexual abuse and drug abusers are sections of demography [most vulnerable](#) to suicide. The main reasons for the suicides are terminal diseases, betrayal in love, financial problems, mental disorders, domestic disputes and pressure from or scolding by parents, among others'.

There are currently 18 outpatient mental health facilities in [Nepal](#), 3 day-treatment facilities, 17 community based psychiatric in patient units and one mental hospital. Only 40 psychiatrics are found to be registered in Nepal with a ratio of 0.16 psychiatrics per 100,000

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populations. Counselling psychology and psychiatric services are least heard and practiced even in resourceful place like [Kathmandu](#) while there is dearth of such practitioners outside the capital. Off late many of the educational institutions in Kathmandu are recruiting full time counselling psychologist to take the problems faced by adolescent and teenage students.

Some of the organizations that work to prevent suicide are Ministry of Health and Population and Nepal Police, World Health Organization (WHO) Nepal Country Office. Noted Non-Government Organization like [Transcultural Psychological Organization](#) Nepal and [Nepal Health Society](#) are found to be working prominently for suicide prevention in Nepal along with others.

Conclusion

Even after attempts from various national and international bodies' mental health still remains a challenge in Nepal. Many suicidal deaths are reported which can be prevented if the victim is provided with proper counselling. The people suffering from mental health problems should be encouraged to receive help. Even the educated people are not found receiving support due to the fear of social stigma. There is a need to eradicate such conception and raise awareness regarding mental health issues. Health facilities must be provided for the issue and easy access has to be ensured.

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