Youth Suicide in the World and Views of Holy Quran about Suicide

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Abstract

Over 800,000 people die due to suicide every year and there are many more who attempt suicide. Hence, many millions of people are affected or experience suicide bereavement every year. Suicide occurs throughout the lifespan and was the second leading cause of death among 15-29 year olds globally in 2012. It is a global phenomenon in all regions of the world; Suicide accounted for 1.4% of all deaths worldwide, making it the 15th leading cause of death in 2012.

The Quran makes it clear that human life is sacred. Life cannot be taken without justification and the right to life is inherent in the tenants of Islam. Life itself is a gift from the Creator that we are obliged to care for. Suicide out of despair of God’s mercy or worldly problems is strictly forbidden.

Key words: Holy Quran, Suicide, Youth, World.

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Introduction

Every year more than 800,000 people take their own life and there are many more people who attempt suicide. Every suicide is a tragedy that affects families, communities and entire countries and has long-lasting effects on the people left behind. Suicide occurs throughout the lifespan and was the second leading cause of death among 15–29-year-olds globally in 2012. Suicide does not just occur in high-income countries, but is a global phenomenon in all regions of the world. In fact, 75% of global suicides occurred in low- and middle-income countries in 2012.

Key facts
- Over 800,000 people die due to suicide every year.
- For every suicide there are many more people who attempt suicide every year. A prior suicide attempt is the single most important risk factor for suicide in the general population.
- Suicide is the second leading cause of death among 15–29-year-olds.
- 75% of global suicides occur in low- and middle-income countries.
- Ingestion of pesticide, hanging and firearms are among the most common methods of suicide globally.

Who is at risk?

While the link between suicide and mental disorders (in particular, depression and alcohol use disorders) is well established in high-income countries, many suicides happen impulsively in moments of crisis with a breakdown in the ability to deal with life stresses, such as financial problems, relationship break-up or chronic pain and illness. In addition, experiencing conflict, disaster, violence, abuse, or loss and a sense of isolation are strongly associated with suicidal behaviour.

Methods of suicide

It is estimated that around 30% of global suicides are due to pesticide self-poisoning, most of which occur in rural agricultural areas in low- and middle-income countries. Other common methods of suicide are hanging and firearms. Knowledge of the most commonly used suicide methods is important to devise prevention strategies which have shown to be effective, such as restriction of access to means of suicide.

Youth suicide

Youth suicide is when a young person, generally categorized as someone below age 20, deliberately ends their own life. Rates of attempted and completed youth suicide in Western societies and other countries are high. For example, in Australia suicide is second only to motor vehicle accidents as the leading cause of death for people aged 15–25, and according to the National Institute for Mental Health, suicide is the third leading cause of death among teens in the United States. In India, one-third of suicides are young people 15–29. In 2002, 154,000 suicides were recorded in India.
Prevention and Control

Suicides are preventable. There are a number of measures that can be taken at population, sub-population and individual levels to prevent suicide and suicide attempts. These include:

- Reducing access to the means of suicide (e.g. pesticides, firearms, certain medications);
- Reporting by media in a responsible way;
- Introducing alcohol policies to reduce the harmful use of alcohol;
- Early identification, treatment and care of people with mental and substance use disorders, chronic pain and acute emotional distress;
- Training of non-specialized health workers in the assessment and management of suicidal behaviour;
- Follow-up care for people who attempted suicide and provision of community support.

Suicide is a complex issue and therefore suicide prevention efforts require coordination and collaboration among multiple sectors of society, including the health sector and other sectors such as education, labour, agriculture, business, justice, law, defense, politics, and the media. These efforts must be comprehensive and integrated as no single approach alone can make an impact on an issue as complex as suicide.

Challenges and Obstacles

Stigma and taboo

Stigma, particularly surrounding mental disorders and suicide, means many people thinking of taking their own life or who have attempted suicide are not seeking help and are therefore not getting the help they need. The prevention of suicide has not been adequately addressed due to a lack of awareness of suicide as a major public health problem and the taboo in many societies to openly discuss it. To date, only a few countries have included suicide prevention among their health priorities and only 28 countries report having a national suicide prevention strategy. Raising community awareness and breaking down the taboo is important for countries to make progress in preventing suicide.

Suicides are most commonly found misclassified according to the codes of the 10th edition of the International Classification of Diseases and Related Health Conditions (ICD-10) as “deaths of undetermined intent” (ICD-10 codes Y10-Y34), and also as “accidents” (codes V01-X59), “homicides” (codes X85-Y09) and “unknown cause” (codes R95-R99).

Methods and Materials

The current study is a review survey which was conducted to evaluate the suicide that is mentioned in Islam and Quran by studying Quran and religious science texts. To evaluate the texts, the singular or combination forms of the following keywords were used: “Quran”, “Suicide”, “Youth”, “Islam” and “Children”. To evaluate the electronic Persian databases the following websites were searched: Google, scientific information database (SID), ministry of healthcare, medical articles library of Iran (medlib.ir), Iranian research institute for information (Iran Doc), publication database (Magiran, Iran medex), and also search in other electronic databases such as Google Scholar, Scopus and PubMed. Also, library search was performed by referring to the journal archives of
libraries, and evaluating the available Persian references such as religious books and Quranic texts, and also articles of research-scientific and educational journals, and articles of the annual seminar of medicine and Quran.

**Results**

The WHO reports that:
- In the last 45 years suicide rates have increased by 60% worldwide. Suicide is now among the three leading causes of death among those aged 15-44 (male and female). Suicide attempts are up to 20 times more frequent than completed suicides.
- Although suicide rates have traditionally been highest amongst elderly males, rates among young people have been increasing to such an extent that they are now the group at highest risk in a third of all countries.
- Mental health disorders (particularly depression and substance abuse) are associated with more than 90% of all cases of suicide.
- However, suicide results from many complex sociocultural factors and is more likely to occur during periods of socioeconomic, family and individual crisis (e.g. loss of a loved one, unemployment, difficulties with developing one's identity, disassociation from one's community or other social/belief group, and honour) (Figure 1) (1-17).

![Male:Female ratio of age-standardized suicide rates, 2012](image)

Fig.1: Male: Female Ratio of Age –standardized Suicide Rates, 2012 (17)
In the US, the Centre of Disease Control and Prevention reports that:

- Overall, suicide is the eleventh leading cause of death for all US Americans, and is the third leading cause of death for young people 15-24 years.
- Although suicide is a serious problem among the young and adults, death rates continue to be highest among older adults ages 65 years and over.
- Males are four times more likely to die from suicide than are females. However, females are more likely to attempt suicide than are males (18).

The following is a list of suicide rates by country according to data from the World Health Organization, in which a country's rank is determined by its total rate deaths officially recorded as suicides in the most recent available year, last updated in 2011. The WHO statistics are based on the official reports from each respective country, and therefore, no more accurate than the record-keeping in the specific country.

Incidence of suicide tends to be under-reported due to both religious and social pressures, and possibly completely unreported in some areas. Since the data might be skewed, comparing suicide rates between nations is statistically unsound. For example attempted suicide is illegal in Nepal and people who attempt suicide when caught are subject to imprisonment, fines or both; therefore, any suicide figures for Nepal will underestimate the incidence.

Male and female suicide rates are out of total male population and total female population, respectively (i.e., total number of male suicides divided by total male population). The total rate of suicides is based on the total number of suicides divided by the total population, rather than merely the average of the male and female suicide rates, because the gender ratio in most countries is not 1:1. Year refers to the most recent year that data was available for a particular country (Figure.2) (19).

**Fig.2: List of Countries by Suicide Rate**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
<th>Male</th>
<th>Female</th>
<th>Average</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Greenland</td>
<td>116.9</td>
<td>45.0</td>
<td>83.0</td>
<td>2011</td>
</tr>
<tr>
<td>2</td>
<td>Lithuania</td>
<td>54.7</td>
<td>10.8</td>
<td>31.0</td>
<td>2012</td>
</tr>
<tr>
<td>3</td>
<td>South Korea</td>
<td>39.8</td>
<td>17.3</td>
<td>28.5</td>
<td>2013</td>
</tr>
<tr>
<td>4</td>
<td>Guyana</td>
<td>39.0</td>
<td>13.4</td>
<td>26.4</td>
<td>2006</td>
</tr>
<tr>
<td>5</td>
<td>Kazakhstan</td>
<td>43.0</td>
<td>9.4</td>
<td>25.6</td>
<td>2008</td>
</tr>
<tr>
<td>6</td>
<td>Slovenia</td>
<td>34.6</td>
<td>9.4</td>
<td>21.8</td>
<td>2011</td>
</tr>
<tr>
<td>7</td>
<td>Japan</td>
<td></td>
<td></td>
<td>21.4</td>
<td>2013</td>
</tr>
<tr>
<td>8</td>
<td>Sri Lanka</td>
<td>34.8</td>
<td>9.24</td>
<td>21.3</td>
<td>2011</td>
</tr>
<tr>
<td>9</td>
<td>Hungary</td>
<td></td>
<td></td>
<td>21.1</td>
<td>2013</td>
</tr>
<tr>
<td>10</td>
<td>Latvia</td>
<td></td>
<td></td>
<td>20.8</td>
<td>2010</td>
</tr>
<tr>
<td>11</td>
<td>Belarus</td>
<td></td>
<td></td>
<td>20.5</td>
<td>2012</td>
</tr>
<tr>
<td>12</td>
<td>Ukraine</td>
<td></td>
<td></td>
<td>19.8</td>
<td>2012</td>
</tr>
<tr>
<td>13</td>
<td>Croatia</td>
<td>30.2</td>
<td>10.0</td>
<td>19.7</td>
<td>2002</td>
</tr>
<tr>
<td>14</td>
<td>Russia</td>
<td></td>
<td></td>
<td>18.9</td>
<td>2014</td>
</tr>
<tr>
<td>15</td>
<td>Moldova</td>
<td></td>
<td></td>
<td>17.6</td>
<td>2008</td>
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<tr>
<td>16</td>
<td>Poland</td>
<td></td>
<td></td>
<td>17.5</td>
<td>2013</td>
</tr>
<tr>
<td>17</td>
<td>Serbia</td>
<td>24.9</td>
<td>9.0</td>
<td>17.3</td>
<td>2011</td>
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<tr>
<td>18</td>
<td>Belgium</td>
<td></td>
<td></td>
<td>17.0</td>
<td>2009</td>
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<tr>
<td>19</td>
<td>Uruguay</td>
<td></td>
<td></td>
<td>16.5</td>
<td>2012</td>
</tr>
<tr>
<td>20</td>
<td>Bhutan</td>
<td></td>
<td></td>
<td>16.2</td>
<td>2011</td>
</tr>
<tr>
<td>72</td>
<td>Iran</td>
<td>3.9</td>
<td>2.1</td>
<td>4.8</td>
<td>2013</td>
</tr>
</tbody>
</table>
Suicide in the Quran

The Quran makes it clear that human life is sacred. Life cannot be taken without justification and the right to life is inherent in the tenants of Islam.

Life itself is a gift from the Creator that we are obliged to care for. Suicide out of despair of God’s mercy or worldly problems is strictly forbidden.

"And do not kill yourselves. Surely, God is Most Merciful to you". "We are property of Allah and we will return to Allah one day" (20).

"And do not throw yourselves in destruction" (21).

"... When Abraham said, "My Lord is the one who gives life and causes death ..."(22).

"...If any one slew a person - unless it be for murder or for spreading mischief in the land - it would be as if he slew the whole people: and if any one saved a life, it would be as if he saved the life of the hole people".(23).

"you who have believed, do not consume one another's wealth unjustly but only [in lawful] business by mutual consent. And do not kill yourselves. Indeed, Allah is to you ever Merciful"(24).

"And whoever does that in aggression and injustice - then We will drive him into a Fire. And that, for Allah , is easy" (25).

Conclusion

The World Health Organization (WHO) estimates that each year approximately one million people die from suicide, which represents a global mortality rate of 16 people per 100,000 or one death every 40 seconds. It is predicted that by 2020 the rate of death will increase to one every 20 seconds.

Preventive strategies include reducing the risk factors that contribute to mental health problems, and enhancing the protective factors associated with good mental health. Long-term experience, supported by countries’ investments, has resulted in effective interventions and examples of good practice. These can inspire strategies and policies to benefit people with mental ill health, and their families and carers. Strategies involving restriction of access to common methods of suicide have proved to be effective in reducing suicide rates. However, there is a need to adopt multi-sectoral approaches involving other levels of intervention and activities, such as crisis centres. There is compelling evidence indicating that adequate prevention and treatment of depression, alcohol and substance abuse can reduce suicide rates. School-based interventions involving crisis management, self-esteem enhancement and the development of coping skills and healthy decision making have been demonstrated to reduce the risk of suicide among the youth (3, 4, 26-29).

On the other hand, suicide was forbidden in Islam and the Quran about 1400 years ago; Allah, praise to Him, wants us to be as peaceful, merciful, compassionate, and
beneficial as we can, in order for the human society to prosper and progress, and for people to live in peace and happiness. The way to achieve that is for them to respect each other, to have mercy and compassion towards each other, and to be beneficial to each other. A culture of peace, mercy, and compassion needs to be promoted in society, by all agents of socialization. It should start at the family, but extends to schools, work, media, and places of worship, to replace the prevalent culture of violence, selfishness, and arrogance.

Here are some Quranic verses about suicide:

Quranic Verse 1: "Don't kill yourself. No doubt Allah Subhânahu Wa Ta'Ala (SWT) is merciful and anyone who does so, will be pushed in fire. And it is easy for Allah (SWT)." (Nisa: 4:29, 4:30)

Quranic Verse 2: "We are property of Allah (SWT) and we will return to Allah (SWT) one day." (Baqra 2:156)

Quranic Verse 3: "Don't kill yourself with your own hands" (Baqra 2:195)

Quranic Verse 4"... When Abraham said, "My Lord is the one who gives life and causes death ..." (Baqra 2: 258)

Quranic Verse 5: "...If any one slew a person - unless it be for murder or for spreading mischief in the land - it would be as if he slew the whole people: and if any one saved a life, it would be as if he saved the life of the whole people... "(Al-Ma'idah 5 :32)

References

3. Unless otherwise stated all statistics are from WHO: "Suicide rates per 100,000 by country, year and sex (Table)". World Health Organization. 2011. Retrieved 2012-01-26.
12. World Health Organization. Mortality Database. Available at:


19. Unless otherwise stated all statistics are from WHO: "Suicide rates per 100,000 by country, year and sex (Table)". World Health Organization. 2011. Retrieved 2012-01-26.


