

The Stigma of Copycat Suicide Phenomenon: Incorporate Mental Health into Freshman Orientation

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Abstract: The word 'Suicide' derived from the Latin word *Sui* (of oneself) and *cide* or *cidium* (a Killing). There are many fields and disciplines involved with suicidology, the two primary ones being psychology and sociology. Every year about one million people commit suicide, which is a mortality rate of sixteen per one lakh or one death every forty seconds. NDTV report says by the survey on the suicide rates in India are highest in the 15- 29 age groups by the month of survey on June 2012. Suicide is largely preventable with the right actions, suicide awareness and a change in society's view of suicide to make it more acceptable to talk about suicide. Suicidology studies not only successful suicide and attempted suicide but also partial self – destruction, suicidal ideation, Para suicide and self – destructive behaviours and attitudes. Suicidal ideation is when someone is having thoughts and showing gestures of suicide. For example, it could be as simple as someone saying that “life is not worth living any more” or it can be extreme as “I am going to kill myself by jumping off a bridge”. Para suicide is when someone causes deliberate harm to themselves. For example, if someone were to take an overdose of medicine and live. Self – destructive behaviours are anything that cause harm to oneself. This can be intentional or unintentional. Some examples are alcoholism, risky sports, some sexual disorders and eating disorders.

Keywords: Self-harm, mental illness, loss of a loved one, mental illness, grief, troubled teens, substance abuse, trauma, fear, family conflict, rape abuse guilt, heartache, addiction relapse, bipolar disorder, personality disorder, broken, confusion, fail, failing, failure, faith, fear, feeling, hurt, incomplete, verbal abuse, teen dating violence, seclusion, separation anxiety, sexual abuse, verbal abuse, alcoholism, etc.,

I. INTRODUCTION

Family is a space for familiarity and comfort as it is for social conditioning and stress and it is a double – edged sword of the Indians: It is the secret to discipline, obedience and hard work while at the same time it represents the manifestation of ancestral pride, strict expectations and intolerance for deviation from traditional values. This is the Indian Demographics. The word *Suicide* is a taboo in the family. Through the vehicle of strict, harsh nagging parents, the guilty conscience of not living up to parental expectations is only the tip of the iceberg that is a much greater psychological behemoth. In many traditional Indian cultures, socio - cultural dogmas embody a tacit of understanding on individual respect and failure as a reflection of the family unit. These unforgiving mentalities are prone to overwhelming the life of an overstressed, depressed individual who may be considering suicide. Each year, approximately four million students enrol in College for the first time.

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Most students are on their own for the first time. With this freedom come added pressures and anxieties? Sometimes these pressures could be overwhelming. The negative beliefs, attitudes and discriminatory behaviours associated with mental health problems are major reasons that people do not seek help and support.

II. Why do People Commit Suicide?

Doman Lum reports in his book, “*Responding To Suicidal Crisis*” Suicidologists have characterised the suicidal person as a “dependant – dissatisfied” individual who continually demands, complains, insists and controls who is flexible and lacks adaptability. The person who needs reassurance of self – worth in order to maintain his feelings of self – esteem who eventually sets himself up for rejection and who is an infantile personality who expects others to make decisions and perform for him. 25% are classified as mentally unstable. 45% commit suicide on an impulse.

III. REASONS FOR PEOPLE COMMIT SUICIDE

a. Depression:

1. Over emphasis on materialism – which does not satisfy?
2. Inability to cope with life's challenges or personal problems.
3. Guilt because of sins.
4. Long term illness

b. Bitterness:

1. Unforgiving Spirit
2. Unresolved hurts

c. Insecurity:

1. Identity Crisis
2. Family breakdown

d. Rejection:

1. Results of failure/ defeat/ disobedience
2. Hopelessness
3. Never able to satisfy

e. Rebellion:

1. Problem dealing with authority
2. Pride – self is own authority
3. Assertion of self – desire to be No. 1

f. Impulse

1. Copycat/ cluster suicides
2. Misplaced loyalty
3. Confusion



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g. *Revenge:*

1. Dying for a cause
2. To “get back at someone”
3. Their desire to hurt is stronger than the desire to live.

IV. ROLE OF MOVIES & TV SHOWS ON TEEN SUICIDE

Movies and television shows about teen – age suicide which purport to caution children against it may actually have the opposite effect according to the first systematic analysis of the subject.

Daniel Castellanos et al (2011), at the University of Miami, announced preliminary findings of his study at Columbia University. With a grant from the American Suicide Foundation, his researchers studied four made – for – television movies about teen suicide: surviving, silence of the heart, hear me cry and desperate exit.

“Teen - agers (in the movie) who succeeded at killing

themselves were portrayed as stronger, more likeable

People than those who attempted suicide but lives”

The researchers found eight specific dangers inherent in the movies:

1. They showed detailed descriptions of how to commit suicide.
2. Those who commit suicide are often role models.
3. The programs ignore harmful consequences of suicide attempts: disfigurement, paralysis, brain damage, etc.
4. Oversimplified or trivial events are often shown to trigger suicide attempts.
5. The shows don’t indicate that many or most teens are troubled and unhappy.
6. Suicide is portrayed as a way of becoming famous or of “getting even”.

Generating awareness on school or college campus

By teaming up with a school campus counselling services, psychology club, office of disability, students can raise awareness of mental health - especially during May (Mental Health Month) and the first week in October (Mental illness Awareness Week).

In addition, these ideas have been used on school or college campuses:

Sign boards in the student – traffic areas:

Write the stories about dealing with (Mental illness Awareness Week).

Write the stories about dealing with mental health problems (using just a black marker on a white board) and displayed in the Science Center, where there was a lot of student traffic.

Make a Presentation

It has to be in Psychology class and / or to other students in the departments related to mental health – e.g., nursing or biology. Ensure that the future leaders are familiar with mental health issues.

Incorporate mental health into freshman orientation:

Many new students experience a lot of stress and anxiety. Make speakers’ schedule, distribute brochures or show a video on mental health issues.

Write a letter to the editor:

Tie the letter into final time when stress is highest; or write at the beginning of the year when new students arrive or at the end of the year.

Get your message on the airwaves:

By campus radio station to highlight the mental health issues by airing a public service announcement.

Train Campus Leaders

Conduct mental health education and training for resident assistants and fraternity/ sorority leadership.

Show a Movie

Show a movie that spurs conversation around mental health issues. Most importantly show a movie that depicts reality, not one that buys into the stereotypes.

V. PERORATION

Of mental health problems and the importance of the good mental health shame and stigma are the underline factors that deter open dialogues and socially acceptable confrontation of depression and mental illness in many Indian families (Slex Wong, 2012). As a result, society to often terms a cold shoulder to those in need to support in India, when this is compounded with the institutional failings that specifically handicapped Indians, it is no surprise that the suicide rates among Indian students are increasing. Sometimes these pressures can be overwhelming. Unfortunately, a fear of seeking help is common on college campuses where the need to? Fit in? Is it so strong? The negative believes, attitudes and discriminatory behaviours associated with mental health problems are major reasons that people do not seek help and support. To save these students from the suicide mentality, we have to do by teaming up with a School campus counselling services, Psychology club, Office of disability, Office of student affairs, Office of diversity, or other groups students can raise awareness.

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