

Volume-2, Issue-4, August 2018,

Page No: 1-7

ISSN: 2635-3040

MYSTERY BEHIND TEENAGE SUICIDE-SOME CASE STUDIES

Sabyasachi Nath^{*} and H.K. Pratihari

State Forensic Science Laboratory, Tripura-799015, India *Corresponding author: Dr. Sabyasachi Nath, State Forensic Science Laboratory, Tripura-799015, India, E-mail: <u>drsabyasachinath@gmail.com</u>

Abstract: Suicide in all age groups is an alarming public health problem and a serious menace to the society. As per available data, Indian teens have world's highest suicide record. The teen age victims are mostly school going boys/girls, dropouts, domestic help and others come under 13 to 19 age group. Presently in digital age, the knowledge/exposure to media, smart cell phone, tabs and other activities of the teens are more advanced than ever before. Moreover, the teens live in a state of perpetual anxiety faced with day to day life situation that adversely affecting their psychology. There are various contributing factors like neurobiological, school related, social, mental, religious and occult beliefs for teen age suicide. In this paper, six different cases related to teen age suicide (both boys and girls) have been selected for study out of a good number of suicide cases of different age group reported during three years (2013-16). In all these teen age hanging cases, undisturbed crime scene analysis, profile of victim, brief case reports, causes behind hanging along with autopsy findings have been discussed in details. **Keywords:** Teen age suicide, Contributing factors, Suicide crime scene management,

Victims' psychology, Autopsy findings.

Citation: Sabyasachi Nath and H.K. Pratihari, 2018. Mystery behind Teenage Suicide–Some Case Studies. Int. J. Rec. Innov. Acad. Res., 2(4): 1-7.

Copyright: Sabyasachi Nath and H.K. Pratihari, **Copyright** © 2018. This is an openaccess article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited

Introduction

In the present days, a good number of cases of teenager (13-19 year age group) committing suicide, is reported regularly in the newspapers. As per record, Indian teens and youth have world's highest suicide rate (The MINDS Foundation, 2017; https://www.newscientist.com). The average suicide rate of teen girls in one of the states in India was 148 per 100,000 compared to 2.1 suicides per 100,000 in U.K. of same age group (https://www.newscientist.com). Further, global suicide rate is also very high showing 14.5 deaths per 100,000 of teens. The study also indicates the proportion of boys in 2015 and girls (teens) were 53.8:46.2 as compared to 52.3:47.7 in 2014(https://www.newscientist.com).The proportion of female teen victims were more due to physical abuse, marriage related issue etc. (https://www.newscientist.com; Aaron, Rita et al., 2004). The suicide is multi-factorials in different age groups, but following are the leading/contributing factors for teen age suicide (Kairi and De Leo, 2015; Pal and Pratihari, 2018; Nath and Pratihari, 2018a; The Times of India, 2018; Sunday Times of India, 2018).

- i. Failure in examination and ill treatment of parents
- ii. Depriving addicted teens to use cell phone by parents



- iii. Hate behavior, lack of parental care to teens
- iv. Fear of conceive after being raped
- v. Opposition to love pact couple belonging to different communities
- vi. Harsh punishment to teenage servants
- vii. School related problems (dropout, suspended, indiscipline acts etc.)
- viii. Motivation for spiritual, religious and occult beliefs leading to selfdestructive/suicidal tendencies
- ix. Sensitivity to "Blue Whale game" leading to abnormal emotional problems
- x. Drug, alcohol abuse and social isolation
- xi. Video suicides when rejected by boy/girl friend
- xii. Life events
- xiii. Psychiatric disorder

There are various ways of committing suicide, but suicidal hanging is preferred for easy availability of hanging materials like rope, napkin, saree, dupatta, dhuti (long cloth) etc., easy to locate place (indoor/outdoor) and also for painless instantaneous death (Pal and Pratihari, 2017; Nath and Pratihari, 2018b).

Case reports

Case I: A 14 year boy failed in the examination. Subsequently the parents were upset for the result and started scolding instead of extending moral support resulting in depression and leading to suicide (Figure 1).

Case II: A 15 year girl was employed as maid and subjected to torture for every issue resulting mental agony. Finding no other ways, she committed suicidal hanging to end her problem (Figure 2).

Case III: A 13 year student was scolded by the hostel superintendent for indiscipline behavior. Subsequently, the student was missing from the hostel. During search he was found in hanging position inside a small room (bolted from inside) (Figure 3).

Case IV: Two teen aged girls (16 and 17 year) were raped by their boyfriends. The fear of getting pregnant after being raped disturbed their minds and they committed suicidal hanging together from the branch of a tree (Figure 4).

Case V: Two teen aged lovers (the boy 16 year and the girl 15 year) of different communities developed love. Being strongly opposed by their parents (belonging to two different communities), both committed suicide together in the belief to live in the heaven with united soul (Figure 5).

Case VI: A 14 year girl was deprived of getting love and affection from her step mother. She was upset for step motherly attitude and depressed resulting in suicidal hanging (Figure 6).

Observation

The six different cases of teen age suicidal hanging are shown in Figure (1-6).





Figure 1. Hanging from a bamboo beam due to failure in examination



Figure 2. Hanging from ceiling fan of maid servant due to harassment





Figure 3. Hanging from a wooden beam for school related problems



Figure 4. Hanging together facing each other from the branch of a tree due to fear of getting pregnant after being raped





Figure 5. Love couple hanging together from the branch of a tree due to opposition from both the families (different communities)



Figure 6. Hanging from a wooden beam for lack of maternal care (step mother)



Forensic evidence

In all the above six cases, the forensic team along with the investigating officer visited to evaluate the undisturbed crime scenes, hanging victims, circumstantial factors along with observations of the hanging symptoms on the spot study that could help for establishing the case to be suicide, homicide or accidental in nature. The hanging victims in all the above cases were examined in undisturbed position showing external ante-mortem hanging symptoms:

- inverted V-shaped ligature mark
- protruded tongue
- dribbling of saliva
- pale face
- involuntary discharge of semen in victim boys (except in case III)
- cyanosis on finger nail and other parts of the body
- complete hanging position of the body (feet not touching the ground)
- stretched and elongated neck
- open eye on the same side of ligature-knot with more dilated pupil (*le facie sympathique*), etc.

Further examination could reveal that there was no other injury on the body of the hanging victims. The different hanging materials used were jute rope, napkin, border of bed sheet, piece of long cloth and nylon rope. In all the cases, the victims used slipping knot commonly noticed in most of the hanging cases. The circumstantial evidence like absence of any sign of disturbance on the crime spot, possibility of reaching the hanging point and other physical evidence ruled out the possibility of homicidal/accidental hanging. The forensic vaginal swab analysis of the female victims against case reports II, V and VI could not establish sexual abuse except case report IV. In addition to above, the suicide note and cell phone recovered in some of the cases could help to establish the genuineness of the suicide note and call records to help the investigation.

Autopsy findings

The autopsy reports of above cases revealed the cause of death was due to asphyxia as a result of hanging. The toxicological analysis of viscera and body fluid ruled out the presence of poison/drug in all the six cases.

Discussion

The crime stories are exciting and more interesting than novel and fiction. Moreover, profiling the criminal behavior and motive are equally interesting and fascinating to the researchers, investigators, criminologists and forensic scientists. It is very alarming to know that crime amongst the teens is on the rise as per available data in India. In early teen age *i.e.*, the transition from childhood to adolescence, intense internal and external changes occur causing an impact on their psychological and physical behavior (Sousa *et al.*, 2017). Moreover, modern life is very stressful for teens in various academic, social and other activities (Handbook of Forensic psychology, 2009). In all the above cases the situation faced by the teens led them to depression manifesting itself in a number of ways ultimately resulting in committing suicide. The individual case to case study of the above six cases, it is found that the teens preferred for suicidal hanging for failure in examination, torture, school related problems, sex, love pact and lack of parental care. Initially the above real case studies have been discussed and efforts are being made to study more teen age suicide cases to build data base on the subject. In order to make the



children safe, all efforts be made to use the existing resources, policies, laws, counseling, preventive measures to build safer and resilient communities.

Acknowledgements

The authors are thankful to Dr. M.S. Rao, Ex-Chief Forensic Scientist, MHA, Government of India for valuable suggestion and scientific staff of the laboratory for providing necessary forensic results to complete the studies.

References

Aaron, Rita *et al.*, 2004. Suicides in young people in rural southern India; The Lancet, Volume 363, Issue 9415, 1117–1118.DOI:<u>https://doi.org/10.1016/S0140-6736(04)15896-0.</u>

Handbook of Forensic psychology. Edited by Veeraraghavan, V 2009. Foreword by Dr. M.S.Rao. Selective and Scientific Books, Publishers and Distributors, New Delhi-110092.

https://www.newscientist.com/article/dn4846-indian-teens-have-worlds-highest-suicide-rate.

Kairi, K. and De Leo, D. 2015. Child, Adolescent and Young Adult Suicides: A Comparison Based on the Queensland Suicide Registry. J. Child. Adolesc. Behav., 3: 209. doi:10.4172/2375-4494.1000209.

Nath, S. and Pratihari, H.K. 2018b. A Peculiar Case of Hanging–A Case Report, J. Forensic. Sci. Criminal. Inves., 8: 1-3. DOI: 10.19080/JFSCI.2018.08.555732.

Nath, S. and Pratihari, H.K. 2018a. Can One Hang on Kneeling with Tied-Leg and Mouth?. J Forensic. Crime. Stu., 2:105.

Pal, A. and Pratihari, H.K. 2018. Suicide Pact of a Love Couple - A Case report. J. Forensic. Sci. Criminal. Inves., 7(2): 1-3. DOI: 10.19080/JFSCI.2018.07.555706.

Pal, A. and Pratihari, H.K.2017. Unusual Hanging-A Case report. J. Forensic. Cri. Stu.,1: 102: 1-5.

Sousa, G.S., Santos, M.S.P.D., Silva, A.T.P.D., Perrelli, J.G.A. and Sougey, E.B. 2017. Suicide in childhood: a literatura review. Cien. Saude. Colet., 22(9): 3099-3110. http://dx.doi.org/10.1590/1413-81232017229.14582017.

Sunday Times of India, Kolkata, July 15, 2018.

The MINDS Foundation, 2017. India Has the Highest Suicide Rate Among Youth. Here's How You Can Help Someone Who's Struggling. The Better India, India.

The Times of India, Kolkata, Friday, July 6, 2018.