

“There’s a Weakness in Them”: Representations of Suicide among Tamil Singaporeans

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Suicide is one of the three leading causes of death among those aged 15-44. Despite a long tradition of suicide research, the incidence of suicide has been increasing. It is now widely recognised that social milieu plays an important role in suicidal behaviour. What is less well understood is in what way socio-cultural context influences suicidal behaviour. This requires an appreciation of the meaning of suicide within a particular culture. This paper proposes that social representations theory provides a suitable framework to investigate the cultural meaning of suicide. A small qualitative study, focused on the Tamil community in Singapore, is described. The dominant themes that emerged from the data explained suicidal behaviour in terms of ‘life problems’, ‘problem-solving’ and ‘morality’. Although the results are preliminary, they have certain implications for suicide prevention programmes.

“To run away from trouble is a form of cowardice and, while it is true that the suicide braves death, he does it not for some noble object but to escape some ill.” (Aristotle)

Suicide is now among the three leading causes of death among those aged 15-44 (WHO, 2008). It is not surprising then that suicide and suicide prevention is a continuing focus of social science research. This paper first discusses why social representations theory should be applied to the study of suicide. A small empirical study, which is still a work-in-progress, is introduced and preliminary results are discussed. The paper ends with some suggestions for future research in this area.

SUICIDE, CULTURE AND SOCIAL REPRESENTATIONS

This section first explores why suicide cannot be regarded as a purely individual act. Rather, suicide is culturally-situated and hence the cultural meaning of suicide is a valuable line of research to pursue. Social representations theory is introduced as a framework that can assist in this pursuit.

Suicide: Individual or Social

Ronald Maris (1997) stated that “at first blush suicide seems like the ultimate private action because the individual’s mind and intentions are a defining trait of the suicide” (p.48). Along this line, it has been further argued that contemporary theoretical explanations of suicide have largely been person-centered (Kral, 1998). Kral (ibid) notes that even sociological theories which emphasize the impact of social forces are premised on the notion that all individuals respond to such forces in a universal fashion. He concludes that “we have held strongly to the notion that

the ultimate origin of suicide, whatever the stressful precursors, lies with the person" (Kral, 1998, p.229).

However, as noted by both Kral (1998) and Maris (1997), there is evidence that suicide is also very much social. Perhaps the most obvious examples are what Maris (1997) terms "social suicides", which include suicide pacts and mass suicides. These involve two or more persons making a joint or group decision to engage in suicidal behaviour. Although such cases are rare and often involve the presence of one dominant individual, they nevertheless illustrate that suicide is not necessarily an individual act or decision (Maris, 1997; Rajagopal, 2004). Indeed, the digital age appears to have taken the notion of social suicides a step further. Researchers have documented the presence of pro-suicide websites and forums which facilitate, promote and encourage suicide (Biddle, Donovan, Hawton, Kapur & Gunnell, 2008). In effect, the internet has facilitated the creation of social groups whose identity is premised on the act of suicide; 'members' might motivate peers to commit suicide or make suicide pacts with one another.

Even suicides that appear distinctly individual, that is, without the influence of external parties, are socially embedded. As Boldt argues,

no one who commits suicide does so without reference to the prevailing normative standards and attitudes of the cultural community. Therefore, cause of suicide can be understood only with reference to the socio-cultural norms and attitudes that govern suicide in each cultural community. (Boldt, cited in Colucci, 2006)

The influence of social and cultural norms on suicide is apparent in the choice of method as methods commonly used in one culture may be rare in another (Canetto, 2007). For example, a comparative study of suicides in Japan and the United States found that while hanging was most common in Japan, firearms were the method of choice in the United States (Ojima, Nakamura & Detels, 2004). Perhaps more interesting is that Asians in the United States were more likely to use hanging as opposed to firearms which was more common among other racial groups (ibid).

In the face of such evidence, theories and research methods have to consider that suicide is located in the crossroads of the individual and the social.

Cultural Meaning of Suicide

As evidenced in the previous section, there is widespread recognition that suicide needs to be studied in the context of culture or social milieu (Colucci, 2006). However, Colucci (ibid) contends that this recognition has translated primarily into a focus on the association between culture and rates of suicide. Such studies certainly demonstrate that culture has a part to play in suicide. For instance, research on suicide in China has identified patterns which are contrary to those seen in Western societies (e.g. Yip, Callanan & Yuen, 2000). Such differences are often, at least partly, attributed to socio-cultural context. However, more research

is needed to study the way in which culture wields its influence. This requires a focus on the cultural meaning of suicide.

Douglas (1967) stated that the “moral meanings and the affective meanings of...the term ‘suicide’...almost certainly vary greatly” between different cultures and societies (p.181). It thus follows that an appreciation of the local meanings of suicide is critical if we are to unravel the decision-making processes that lead to suicide. In other words, understanding the cultural meanings of suicide is the starting point for the development and implementation of culture-specific prevention and intervention strategies.

Social Representations

If one accepts that suicide is intensely personal yet culturally situated, it becomes clear that social representations theory is a useful framework to guide the investigation of the cultural meanings of suicide. Social representations, by definition, are structures that enable members of a community to comprehend their world as well as communicate within it. They are ideas, values, beliefs and practices. Jovchelovitch (1996) states that “[s]ocial representations emerge in spaces of inter-subjective reality; they are not the products of purely individual minds, even though they find expression in individual minds” (p.122). This emphasis on the confluence of individual and social is the advantage of social representations theory.

Another reason that social representations theory is useful for suicide research is the importance it places on process, that is, the process of representing. Social interactions such as conversations are continually feeding the generation and transformation of social representations (Duveen & Lloyd, 1993). This is clearly illustrated in Moscovici’s (1976/2008) seminal study which showed how a particular scientific knowledge was re-presented within the public sphere during a particular time period. His research, among others, illustrated that scientific knowledge is not privileged over common-sense knowledge. Lay theories are not simply displaced by scientific knowledge but rather transformed by them. Indeed, different knowledge systems, even seemingly contradictory ones, often co-exist together and are drawn upon by members of a community differentially in different situations (Gervais & Jovchelovitch, 1998; Jovchelovitch & Gervais, 1999; Wagner, Duveen, Verma & Themel, 2000).

This *re*-presentation or integration of scientific knowledge into common-sense suggests that the lay public’s representation of suicide need not necessarily mirror that of the experts. This can prove problematic for suicide prevention programmes. For example, the World Health Organisation (WHO) states that:

Mental 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 particularly during periods of

socioeconomic, family and individual crisis situations (e.g. loss of a loved one, employment, honour). (WHO, 2008)

This statement, which highlights the multi-dimensionality of suicide, presumably informs the development of suicide prevention and intervention strategies by the WHO. However, for these strategies to be truly effective, the target audience should have similar views about the origin of suicide. Whether this is indeed the case should be an important area of research.

The empirical study described henceforth investigated what the public believe causes suicidal behaviour, within the context of a particular culture.

SINGAPORE AND TAMIL SINGAPOREANS

This section presents some background on Singapore and Tamil Singaporeans and explains the rationale for focusing on this particular community.

Previously a British colony, Singapore has been independent for less than 50 years. Located strategically within Southeast Asia, the city-state is frequently used by the West as a gateway into Asia and less developed Asian economies. Singapore is often described, and actively brands itself, as Westernised yet multi-culturally Asian (e.g. Mahbubani, 2007).

The majority of the 3.5 million Singaporeans (citizens and permanent residents) fall into one of three racial groups: Chinese, Malay or Indian. The Chinese, account for 75% and are primarily descendents of immigrants from China, Taiwan and Hong Kong. The next largest group, at 14% - the Malays - find their ancestors in Malaysia and Indonesia. The Indians, of South Asian origin, comprise about 8.5% of the Singapore population (MTI, 2008). It should be noted that these racial groups are official census categories and are not necessarily naturally-occurring. Yet, the label of 'race' is ubiquitous not only in official discourse but also within the public sphere. For instance, the Identity Card for every Singaporean (over 15), which is used for numerous official and day-to-day transactions, has their race printed on it. However, such labels do tend to neglect intra-category differences; the term Indian encompasses Tamils, Punjabis, Gujeratis and Malayalees among others.

I chose to focus on the Tamils for a number of reasons. In Singapore, Tamils form the largest sub-group of Indians (about 64%) and are descended from the Tamils of India, specifically the southern state of Tamil Nadu, and Tamils of Sri Lanka (Lepoer, 1989). As a Tamil-speaking member of the community, I have insider knowledge of the group's norms and customs as well as access to non-English speakers. It should be noted that Singapore is home to a large foreign population; about 1 million (MTI, 2008). However, for the scope of the study and this paper, the target population of Tamil Singaporeans refers only to Singapore citizens and permanent residents who are ethnic Tamil.

Previous research from Singapore has indicated that Indians, particularly young females, were more vulnerable to suicide attempts than their Chinese and Malay counterparts (Wai, Hong & Heok, 1999). Although there are no similar statistics published regarding the Tamils, it is not unreasonable to use them as a proxy for the Indian population in Singapore. Hence, research on suicide might be particularly relevant for this racial group.

METHOD

The study described in this paper is part of a larger research project on the representations of mental illness among the Tamil community in Singapore. In the course of that project, it was noted that the phenomenon of suicide was significant enough to feature frequently in the Tamil daily newspaper. In recognition of the experts' view that suicide is often associated with mental disorders, the topic of suicide was included within the interview schedule to explore what connections lay people made between the two.

This paper is based on an analysis of 15 interviews with Tamil Singaporeans conducted between January and February 2008. Participants were recruited through a process of 'snowballing'. The sample comprises six males and nine females, aged between 18 and 67. The majority of the sample (13 out of 15) was of Hindu religion. Educational levels ranged between GCE O' Levels to post-graduate degrees.

Interviews were semi-structured in nature and related to mental health and illness. Interviews were conducted in English or in Tamil, depending on the choice of the participant. Near the end of the interview, participants were asked '*Why do people commit suicide?*'. Follow-up questions were used to elicit further details as appropriate. It should be noted that responses to the other questions and tasks in the interview schedule may have touched on suicide but were not included in the analysis.

PRELIMINARY RESULTS

Transcripts and notes of the 15 interviews were analysed using an inductive thematic analysis framework. This involved reading through the data multiple times and coding for themes. Although the analysis is still preliminary, the major, dominant themes are certainly worthy of discussion.

Theme 1: Life's Problems

Participants (14/15) typically referred to one or more problems when explaining suicidal behaviour. Their responses ranged from the generic 'problem' to specific problems such as financial and relationship troubles, stress, academic difficulties, physical illness and emotional stresses such as loneliness, loss and shame.

Due to acceptance, you know. They're so attached to something, an object or a person, and that person is no more around, or the person has rejected them, or they cannot get that something. [Ajay, Male, 34]¹

I heard like, my parents will say, this person has suicide due to love. The boyfriend left, the girlfriend left, that kind of things. Or family. Financially, the family are not stable, so the whole family will jump down. [Rani, Female, 35]

Usually it's [a] problem. I don't think people suicide for the fun of it. [Senthil, Male, 18]

Name and fame has gone, has gone bad. What should not happen has happened. Someone took away my child; my daughter ran away with someone; my wife has disappeared. So many reasons. Don't wish to live anymore. [Ashok, Male, 67, Translated from Tamil]

Theme 2: Problem-Solving

Participants did not limit their response to life problems but went on, as if to qualify that suicidal behaviour was not merely the result of these. These are captured under the theme I have called 'Problem-Solving'. There are two related sub-themes:

Inability to cope/weakness

Participants (13/15) felt that people who commit/attempt suicide are unable or not strong enough to cope with the problems or stresses of life. This was directly stated or implied. For instance, participants stated that people commit/attempt suicide as a way out - an escape - usually because they could not find any other solution. Relatedly, several participants further implied that people should actively seek help or counsel when they have trouble coping as opposed to attempting suicide.

Um, why do they commit suicide? Coping. [They] can't cope. They feel that it's just piling up. Problems, they see problems with no solution or they can't identify solutions. [Vidhya, Female, 42]

Why, I also don't know why. I find that they're just, there's a weakness in them. They're just not very...weakness in their, in their mind, kind of thing, not able to face it. [Malini, Female, 43]

...it's just sometimes it's just too much of a stress. At that point of time, the person might not have anybody to talk to, or no avenue to go to, that they think that's the only solution, and they just jump down. There's some people who also...the spirits being possessed and all that, that also tells them to jump down or they just, just end

¹ For confidentiality purposes, pseudonyms are used in place of the participants' real names.

their lives. So it falls under different category why they actually commit suicide. Some yeah maybe, a love failure, or...sometimes a little minor, it could be simple problems if you look at it, but they just do it...so it's like, I just feel that, I mean yeah, I don't think any one of us like, don't have problems. I just feel that sometimes it's just how you cope with it. So, that could not be a mental illness, but it's just that if maybe they had went to the right avenue, they could have solved it. [Nithya, Female, 34]

Suicide is not really caused by anything, it's just people. Maybe a long period of depression and they think life's not worth living but they just have to find alternatives or seek help and then I guess they'll find life is worth living, no matter what's the situation like. [Mani, Male, 18]

Irrationality

Several participants (6/15) noted that people who commit/attempt suicide are not thinking straight or not thinking at all. Although not always explicitly stated, this irrationality was in response to various difficulties faced in life. Thus, rather than thinking through the problems in a rational manner, people who did not think or were not thinking straight turned to suicide as a solution.

Radhika: [T]hey're not thinking straight, they're not looking at many options. You know, there will be worries and sorrows but instead of keeping in your heart and worrying...Try to talk to one or two people, listen to them, see what they have to say. Maybe by talking to them, it lightens your burden, the heaviness on your head is lighter. These people maybe won't talk freely, they keep it in their mind, this is the solution, this is the solution. That I find they are mentally sick. I'm not saying they're mad or silly.

Me: They're not logical?

Radhika: Yes. Sometimes they take actions without thinking properly.

[Radhika, Female, 46]

Like I said most people who think of suicide are very, very irrational. I was too. [Mangai, Female, 31]

Why they are doing it? So, I feel that they don't, they don't think. Like, it's in the spur of the moment, they do it at the spur of the moment...So I feel suicide is totally a spur of the moment kind of thing, the hype that they have and the tension and everything. Ok, let's just end everything, everything will be gone for me and I'll be peaceful and blah blah blah. So they just do it. Yeah. [Anita, Female, 21]

In apparent opposition, three participants suggested that the decision to commit suicide is well-planned and thought out, including weighing up pros and cons.

Ok suicide is when people really have no other solutions to their life...they themselves, probably before they suicide right, you'd probably weigh the pros and cons, cause it's something like ending your life, that's IT. Your life is over, that kind of thing. So before

you decide to do this drastic step right, you probably have to think, can I really save my life before [the] final step. [Senthil, Male, 18]

Although these ideas of irrationality and rationality appear paradoxical and mutually exclusive, they can co-exist because the 'organised planning' is embedded within a broader context of irrationality. For instance, Senthil continued his statements above with some hypothetical examples but also said that they were "an extreme way of thinking".

Theme 3: Morality

Participants frequently (9/15) made negative judgements about the suicide act and people who commit/attempt suicide. Typically participants stated that suicide (i) is not good because the taking of one's life is inherently wrong, and/or (ii) is a selfish act whereby people are not thinking of their loved ones, and/or (iii) is a cowardly act because people are simply taking the easy way out.

I think they're stupid to commit suicide. Yeah, I seriously think they're stupid to commit suicide. I always believe that a end to a problem is never to end the life. And even the individual themselves don't have the right to end their life. That's what I feel, I strongly feel for. So, commit suiciding is a typical 'no, no' for me. Like Totally no. Totally no. I won't even talk about suiciding even if I'm like bankrupt and nothing to do. [Anita, Female, 21]

I don't respect people who commit suicide because it's a life and you do not create your own life and it just takes a second for you to just. And it's unfair to people who are living. I mean probably you wouldn't know because you're already dead and gone but to those who are living, it's...they can never forget it for the rest of their lives, so. You're actually, you're being very selfish. You're getting rid of your own problems but you're giving people around you more problems. [Deepika, Female, 29]

Personally I think it's a cowardly way out - suicide - so I have a very bad impression of people who resort to that so naturally I'll feel that they're just taking the easy way out instead of facing their problems face on, and yeah so I personally therefore would think that it's just chickening out. So suicide is not really an option, it's not even an option. You just have to live through. [Mani, Male, 18]

The following participant did not want to judge the act outright, possibly because she had attempted suicide herself in her youth. However, further in the conversation she noted that suicide was motivated by selfish thoughts.

I suppose for some people it's a choice and don't really know whether, can't really judge whether it's a right choice or wrong choice that they can make...[discussion about her suicide attempt and how she might respond to a suicidal person]...It's a very selfish state. Considering suicide is a very selfish state. [Mangai, Female, 31]

Again, there was some disconfirming evidence with three participants suggesting that suicide could be motivated by selflessness - to not be a burden or bring problems for the family. This paradox brings to the forefront the complexity of the representations of suicide. Representations are multi-faceted and participants draw upon them differentially to make sense of various instances of suicide as well as to locate themselves in relation to those instances. For example, a suicide motivated by selflessness might still be condemned on the basis of moral or religious reasons.

Separately, two participants mentioned that suicide, in its own way, requires courage. However, it seems the courage they were referring to is physical courage whereas the cowardice in the theme mentioned above is a lack of moral courage (to face difficult situations).

Other Themes

It is important to reiterate that the analysis is in some ways, still preliminary. Saturation point has not been reached and although several other themes were identified, these remain under-developed due to lack of data. They include:

- Suicidal thoughts as a temporary state/feeling
- Loss of sense of self/self-worth
- Lack of support system

These would certainly benefit from further interviews. Additional interviews might also yield as yet unidentified patterns.

DISCUSSION

Contemporary theoretical perspectives of suicidal behaviour do consider the interplay of several elements, namely psychiatric illness, social forces, psychological characteristics (inner cognitive processes and affective states) and crisis situations. Zdravec and colleagues (2006) categorise the theories of suicide as medical, sociological or psychological, depending on which element they emphasise.

On the other hand, social representations theory suggests that lay theories of suicide are not simply mirrors of such scientific models. In recognition of the transformation and hybridization of knowledge systems, the study described in this paper demonstrated how we might go about understanding the meaning of suicide within a particular culture.

As the study is still a work-in-progress, it would be premature to draw conclusions from this set of data. However, a discussion of the most dominant themes is still informative. The theme of 'problem-solving' taken together with 'morality' suggests a perceived presence of weakness or deficiency in people who commit or attempt suicide. Together with the relative lack of mention of social or psychiatric

factors, it points to a psychological model of explanation (Zadravec, Grad & Socan, 2006). Similar to psychological theories which focus on cognitive processes and affective states (e.g. psychological pain, hopelessness, low self-esteem), participants appeared to emphasize traits or qualities of the individual as contributing factors of suicide. This is noteworthy because several characteristics of Tamil culture appear to be tolerant of suicide. Hinduism, the religion of the majority of Tamils in Singapore (as reflected in the sample), is less prohibitive of suicide than Christianity and Islam (Adityanjee, 1986; Maniam, 2001). Suicide also makes frequent appearances in Tamil arts and literature, particularly in popular movies (Maniam, 2001).

In order to better understand the findings, I will draw upon Coyle and MacWhannell's (2002) content analysis of suicide stories in Scottish newspapers. The authors found that suicidal behaviour was explained in terms of moral weakness. They inferred that the explanation of moral weakness was consistent with political and social traditions of individualism and self-responsibility in Western society. I propose that these traditions or traits are not exclusively Western. They are often prevalent in Asian societies as well, particularly in Singapore.

Since its inception as an independent country, Singapore has placed great emphasis on meritocracy and self-help (as opposed to welfarism) as its defining characteristics. The principle of meritocracy, among other core values, forms part of so-called 'National Education Messages' which have been inculcated in Singapore's school-going children since 1997 (Ministry of Education, National Education website).

To my knowledge, there is no research on how these messages are received by Singaporeans or Singaporeans' beliefs and attitudes towards the principle of meritocracy. Yet, the government often implies that Singaporeans "of all classes and races subscribe to the principle that a person's advancement should be determined not by his race, class or parentage but by his performance" (Tan, 1996, extract from speech). It is unclear whether this internalisation, if present, is equal across the races. It has been claimed that the rhetoric of meritocracy allows the Singapore government to rationalise the persistent inequalities of class (Chua, 1996; see also Moore, 2000), which happen to be aligned with race as the Chinese are, and have been, generally more well-off than the Indians and Malays (Moore, 2000). If so, it could be argued that non-Chinese Singaporeans are less receptive to the rhetoric although Michael Barr (2006) claims that the minorities continue to 'buy into the system' because of the relative benefits.

Without any systematic research however, there is no way to identify if and to what extent Tamil Singaporeans subscribe to the notion of meritocracy and the meritocratic state. Assuming they do, it is perhaps not surprising that people who are unable to solve their problems (and hence resort to suicide) are perceived as deficient in some way or as failures.

The results suggest that suicide prevention programmes need to increase awareness about the various socio-cultural factors that can contribute to suicide. Educational strategies further have to consider that lay people might not be able to identify suicidal behaviour in people close to them if they conceptualise the suicidal person as one who is weak and immoral. Similar programmes can be aimed at reducing the stigma associated with suicide survivors.

LIMITATIONS AND FUTURE WORK

The main limitation of this study, as indicated earlier, is that the analysis is still preliminary and requires additional interview data. Consequently, the thematic analysis framework has not been formalized or tested for reliability. This would be a critical component for the next stage of work.

A second limitation concerns the location of the study within the context of mental health and illness. Participants were already primed with a discussion on mental illness before the topic of suicide was introduced. It is not altogether clear whether there was any effect - especially as many participants did not make a strong causal link between mental illness and suicide. It would be beneficial to explore how representations of suicide are related to those of mental illness. An analysis of the entire data corpus would be the next logical step.

The sample population did not specifically target suicide attempters (survivors of 'failed' suicides). The representations of this sub-group could be somewhat different from those of the general public, if not before the suicide attempt, perhaps after. For instance, Mehta's (1990) study of female Indian suicide attempters suggested that suicide attempts are regarded as functional and effective mechanisms of communication and coping. These differences need to be explored.

Finally, a sociogenetic perspective (Duveen & Lloyd, 1993) might provide a different view of the representations of suicide. Anecdotally, Tamil movies have often glorified suicide while suicide-stories are frequently featured in Tamil newspapers. Hence, an analysis of the mass media would be fruitful to obtaining a more comprehensive picture of the meaning of suicide.

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