

Is Life Worth Living? Fixtures And Prevalence of Emile Durkheim's Typology in Online Reported Suicides in Nigeria – Implications for Policy

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Abstract:- This study examined online reported suicides in Nigeria in order to find out the prevalence rate of each of the Emile Durkheim's types of suicide in the country. Historical research design was used to examine online reported suicides in the country from 2009 to 2018. It was found among other things that Durkheim's egoistic suicide (n = 9), altruistic suicide (n = 376), anomic suicide (n = 3) and fatalistic suicide (n = 3) fitted into the recurring incidences of suicides in the country (N = 391). Policy should target the control of incidences of altruistic suicide in the country. It was concluded that the most prevalent form of suicide was altruistic suicide.

Key Words: Altruistic Suicide, Online Reported Suicides, Prevalence Rate of Emile Durkheim's Types of Suicide, Prevalent Form of Suicide, Suicide

I. INTRODUCTION

Life is a valuable resource provided to all living beings on Earth. Once a person ceases from breathing automatically the person is in coma and/or dead. The later could be caused by suicide. This is so because some individuals try to take their own lives for reasons best known to them. Rates of suicide vary from one locality to another. It also varies from one community to another. This is also evident across regions and different countries of the world. The variations exist due to different reasons that make people to take their own lives.

The way people take their own lives were cause of concern to many especially to the residents of Nigeria. This was also a cause of concern to many agencies and non-governmental organisations, health workers and concerned individuals. It was also a cause of concern to many affected families, relatives and community members of suicidal victims as well. Efforts made by government, health workers, psychologists, counsellors, parents and concerned agencies to curb incidences of suicide seem to be yielding less result. Emile Durkheim tried to find a solution to the problem by working on suicide. However, his classifications did not fix the different suicides occurring in Nigeria into these types. Other researches carried out in the country did not go towards this direction either. This study therefore filled this gap in knowledge. This is because the knowledge of these figures would help concerned individuals, agencies and organisations to know where to apportion their help in times of need. It

would also help readers to know the spatial distribution of suicides in Nigeria.

The questions following were asked as a guide to the study. What is the number of suicides occurring in Nigeria to each of the Emile Durkheim's types of suicide? Which of the Emile Durkheim's types of suicide is more prevalent in Nigeria? The study therefore examined the number of each online reported suicide to egoistic, altruistic, anomic and fatalistic suicides. The study also examined the type of suicide that was more prevalent in the country. Recommendations were given based on the findings of the study.

Recurring incidences of suicide had prompted many authors to have an interest in the study of suicide. Early work on suicide was conducted by Emile Durkheim. In his work he was able to classify suicide into four different types. These include egoistic, anomic and altruistic suicides (Durkheim, 1897. See also the 1951 edition). This entails that suicide could come from diverse factors and/or sources. One of such factors is the extent to which an individual is integrated in a place where he lives. At one time the level of the integration could be perceived to be low. At other times it could be perceived to be high. One of the determinants to each is what sociologists call "group ties." A good example is when a person's tie to his own group becomes weak or even very weak. Sometimes it could be seen as being broken, which occasions a type of suicide known as egoistic suicide. At other times when a particular society lacks the ingredients which enable it to be well regulated, it could also necessitate another type of suicide known as anomic suicide. A lack of social regulation could give rise to suicide. This could make some individuals in that society to take their own lives, simply because the gumming norms of the land seem to have been eroded. When societal regulation is seen as being very tight some individuals could become angry with the system. This special societal ingredient makes a person to value the society more than himself. It is good to be patriotic but life is precious as well. In societies where this happens people could be seen dying in defence of a particular course. When suicide occurs in this way it is known as altruistic suicide. Society is good when well regulated but could be bad when over-regulated. This is because some people could hinge on it to take their own lives, which is known as fatalistic suicide. This could be

reminiscent in countries experiencing severe economic hardships as contained in Giddens (2006). This creates differences in suicides across clans, communities, wards, local government areas, states, countries and different regions of the world. These differences could be clearly observed between men and women and marital status of individuals especially those involving the married and the widowed among others. Dissatisfactions to happenings in the environment are a major contributing factor to suicide as is evident in Trobriand Island (Igbo 2003, Joseph 2010, Giddens 2006 & Kottack 2008).

The phenomenon called suicide is one of the major factors that cause death in many societies of the world. People who were young constituted the higher number of suicide victims in most of the world societies ravaged by it. Their ages often ranged from fifteen to twenty nine years old. This is most worrisome because over seventy per cent of individuals had committed suicide in their countries of abode. It is very hard to see any country where suicide is non-existent. For example in the highly developed countries like USA people commit suicide as well as in the developing countries of Africa like Nigeria (WHO 2017). Being highly developed or being less developed are not yardsticks for preventing suicide. This may have prompted Lee, Roser and Ortiz-Ospina (2016), to have “identified those affected by suicide to be from fifteen to forty nine years of age with a staggering over sixty per cent rating.” This is a confirmation of higher suicidal rates in many areas.

Many kinds of factors give rise to incidences of suicide. These include one’s gender, one’s age and evidence of economic recessions. The latter is most applicable to those who take their lives in times of severe economic crisis. Many countries of the world have witnessed recessions in their economies. This has necessitated economic hardships in same. Those who could not bear it then had an option of taking their own lives in order to run away from the problem. This is usually exacerbated by high unemployment rates. However, the actual number of people who had taken their own lives owing to this factor seemed to be lacking in academic literature especially in the works done in Nigeria. “The Asian continent has a higher percentage of suicide. More than fifty per cent of those who committed suicide were young persons with the remaining figure being for older persons” (Befrienders Worldwide 2018). “More males committed suicide in different regions of the world with varying ages. Suicidal figures therefore vary from one country to another” (Varnic 2009, World Bank 2018, Wasserman, Cheng & Jiang 2005, Suicide Survivors Forum 2018 & OECD 2018). Alabi, Ayinde and Abdulmalik (2014)’s postulation that “causes of suicide were not well known is an indication that different factors could give rise to it.” This includes “when one is divorced, when one is not gainfully employed and when one is considered to be poor” (Recker & Moore 2014). These factors could lead to high incidences of suicide in a given area or otherwise depending on their rates of existence.

Many Nigerians had committed suicide in recent time. One of such deaths is that of a lecturer and a 300 level student who were in different institutions of higher learning (This Day 2018). Consequently the failure of two graduates to get employed caused the mother to commit suicide. Another female banker whose husband cheated on also committed suicide. In addition a twenty three year old individual was also reported to have committed suicide in the country. Whereas a female who was seeking admission killed herself for having a low score in university entrance examination, a police officer also killed himself for failing promotion examination. Notably, WAEC failure prompted two students to take away their own lives and another pupil for failing spelling test (Onyekakeyah 2018).

More worrisome was the death of a Medical Doctor in his early thirties by suicide. This clearly indicates that suicide could come from any source and could happen to any person no matter his profession. No reason was given for a student who hanged himself in his hostel room. Pressure to repay a loan made a bank manager to shoot himself to death with gun shots (Muanya & Ezea 2017). Many Nigerians have also lost their lives through suicide bombing. This includes 13 children (UNICEF Nigeria 2017), 145 girls (Young Metro News (2017) and Bada (2017), 83 children (Aljazeera 2017) and young boys (PM News Nigeria 2018). Also inclusive were an old man (Haruna 2018), three suicide bombers (NAN 2018), two female suicide bombers (AFP 2017), and two persons (Sahara Reporters 2018). Others were two male suicide bombers (Sahara Reporters 2014), suicide bombers and 17 female suicide bombers. “Four suicide bombers died in car explosion and a suicide bomber” (The Cable News 2015), a suicide bomber (Duku 2018), suicide bomber who was a teenager (ABC News 2017), a suicide bomber (Hindustan Times 2018), suicide attacks (PMUTC 2017) and two suicide bombers of the opposite sex (Odeyemi 2018). Others include suicide bombing (Ogunmade, Emejo & Sani 2018), female suicide bomber (Buhari 2017), 19 girls and young women (Ania 2015) and a suicide attack (Vanguard October 30 2017). This was a cause of concern to many Nigerians. This is because they killed themselves and also killed others in the process. Many people have lost their family members owing to this. Many families have also been displaced in the process.

Evidence abounds on suicide in Nigeria and elsewhere but no study in the former has actually focused on fixing the different incidences of suicide in the country into Durkheim’s types of suicide. For instance, the work of Levi-Belz and Gamaliel (2018) dwelt on the “effectiveness of relative messages in suicide issues.” Lin, Zhao and Zhang (2018) on their own observed “how impulsivity creates difference in suicides in communities in rural China.” Lund, Schultz, Thomas, Nardoff, Chowdhury and Galbraith (2018) worked on “emotional impacts following suicidal clients.” These works did not give the accurate figures involved and the actual number that fit into any of the types of suicide. Arendt (2018)’s work was apt but no accurate figures followed the

study. The mere increase of suicide rates in many countries was not aligned to Durkheim's types of suicide. This is because the knowledge of these issues could help to see how the problem of suicide could be tackled.

"Competence in conducting suicide funerals" (Mason, Kim & Martin 2018) could have been more apt if factors that led to those deaths were known and then categorised. Akram and Batool (2018)'s link of different kinds of "impairment with prevalence of suicidal behaviour" is worthy of note. However, it failed to align same to Durkheim's types of suicide. This finding was supported by the finding of Lund, Nardoff, Thomas and Galbraith (2018), stressing that "disability could be linked to higher incidences of suicide."

Adinkrah (2018)'s finding in Ghana has also benefited the study of suicide in Africa. This is because it confirmed other scientific studies in other countries of the world of the prevalence of suicide among the elderly especially among the males. This goes to confirm that suicide is more among the males even though its focus was not hinged on linking the findings to Durkheim's types of suicide. "Treatment options could be beneficial to the suicidal survivors," (Monahan, Crowley, Arnkoff, Glass & Jobes 2018). Family members whose member(s) commit suicide could be helped to handle their grief by using "digital resources" available to them (Westerlund 2018). This could also be used by "survivors in overcoming their stressful conditions" (Andriessen, Krysiniska & Grad 2017). Help could also be sought from physicians (Feigelman, Sanford & Cerel 2017).

Altruistic suicide could be encouraged by cultural approval which could also be beneficial to the social system. This could be relative in that as it could be used to affirm a strong conviction in something. It could as well be detrimental to family members, friends and other individuals who may not believe in that course. This could be evident in societies where less value is placed on human life. In societies where life is more precious and valuable as well the individual would be valued and less number of individuals could be willing to die altruistically since the individual himself would also value his own life (Stack 2004). The strength of "social ties" (Condorelli 2016) in a given social setting could precipitate or hinder incidences of altruistic suicide. The level of "social integration and social capital" available to individuals could necessitate incidences of altruistic suicide or egoistic suicide as well (Moore 2017). Its higher availability i.e. capital could lead to suicide rates being lower in a particular area. Remarkably, Johnson (1965) concluded that Durkheim's four types of suicide could "be reduced to one due to non-belongingness and for not being identical." "Socialisation programmes" could be harnessed into reducing incidences of suicide in different societies of the world (Kang & Thosuwanchot 2016). There have been incidences of suicide in different parts of Nigeria. This has threatened the levels of inter-personal relationships. More worrisome is the stigma that would arise with the incidence of suicide. Family members of suicide victims could be

stigmatised as well. More worrisome is the loss of lives emanating from suicide cases. Weakening power of social integration and regulation in the Nigerian society could be causes of concern to many. People were concerned with number of suicides that result from these causes in the society. There has been no work addressing suicide using Durkheim's typology in Nigeria. The works reviewed failed to fix suicide figures to Durkheim's types of suicide. The knowledge of these fixtures could help families, governments, agencies and other concerned organisations to address issues of suicide in society. Knowledge of the most prevalent type of suicide in Nigeria could help policy makers and social workers to address the issue of suicide squarely. These issues necessitated the need for this study.

The aim of this study was to examine the number of suicides reported online in Nigeria that fit into egoistic, anomic, altruistic and fatalistic suicides. This would help to examine the type of suicide that is more prevalent in the country. Firstly, the study sought to examine the prevalence of egoistic suicide in the country. Secondly, the study sought to examine the prevalence of anomic suicide in the country. Thirdly, the study sought to examine the prevalence of altruistic suicide in the country. Fourthly, the study sought to examine the prevalence of each type of suicide in various settings that make up Nigeria. Fifthly, the study sought to examine the associated factor(s) necessitating each type of suicide in Nigeria. This would help to showcase the policy implication of the study by providing salient recommendations. This study used a sociological approach to the study and therefore did not rely on psychological dispositions to suicide.

II. METHODS

Historical research design was used to get information used for the study. This centred on suicides that took place in Nigeria which were reported on Internet from January 2009 to July 2018. The research was conducted on monthly basis by typing suicides that occurred in a particular month in the computer and then sent online through the search engine. The first and second days of each month were used to research for the previous month. A note book was kept for recording the findings for each month. Each of the findings was analysed immediately in order to find out the type of suicide it fitted into. The categorisations for each month were reviewed three times each for clarity. Where the data was found to be misplaced it was subsequently transferred to the appropriate place.

In each preceding year the total figures were calculated. This process continued till July 2018. * was used to indicate none in each of the columns where no figure could be fixed. There are certain areas where no exact figures were given and it was represented with 2***. This means that since it was obvious that they were more than one, two was used to represent them. This was done to ensure that more and/or non-existing numbers was not assigned to any type.

III. RESULTS

Suicide is a recurring incidence in Nigeria. People committed suicide owing to different factors ranging from self –related unresolved issues (n = 9), economic factors (n = 3), religious based factors (n = 376) and normlessness (n = 3).

The types of suicide given by Emile Durkheim were evident in Nigeria. This is because people took their own lives for different reasons. This therefore gave rise to different number of persons who committed suicide fitting into egoistic (9), altruistic (376) and anomic (6) suicides; (N = 391; ES (n) = 9; ALS (n = 376); ANS (n = 6); ALS (376) > ES (9) > ANS (6)).

TABLE 1: CATEGORISATION OF SUICIDES INTO DURKHEIM’S TYPOLOGY

S/NO	CAUSE OF SUICIDE	EGOISTIC	ALTRUISTIC	ANOMIC	TOTAL
01	Religious Propagation	*	2 ***	*	2
02	Religious Propagation	*	2 ***	*	2
03	Religious Propagation	*	1	*	1
04	Religious Propagation	*	1	*	1
05	Religious Propagation	*	1	*	1
06	Religious Propagation	*	2	*	2
07	Religious Propagation	*	2	*	2
08	Religious Propagation	*	1	*	1
09	Religious Propagation	*	2	*	2
10	Religious Propagation	*	1	*	1
11	Religious Propagation	*	2	*	2
12	Religious Propagation	*	1	*	1
13	Religious Propagation	*	1	*	1
14	Religious Propagation	*	2	*	2
15	Religious Propagation	*	1	*	1
16	Religious Propagation	*	1	*	1
17	Religious Propagation	*	1	*	1
18	Religious Propagation	*	1	*	1
19	Religious Propagation	*	2	*	2
20	Religious Propagation	*	1	*	1
21	Religious Propagation	*	1	*	1
22	Religious Propagation	*	3	*	3
23	Religious Propagation	*	1	*	1
24	Religious Propagation	*	1	*	1

25	Religious Propagation	*	3	*	3
26	Religious Propagation	*	1	*	1
27	Religious Propagation	*	1	*	1
28	Religious Propagation	*	1	*	1
29	Religious Propagation	*	2	*	2
30	Religious Propagation	*	1	*	1
31	Religious Propagation	*	1	*	1
32	Religious Propagation	*	1	*	1
33	Religious Propagation	*	1	*	1
34	Religious Propagation	*	1	*	1
35	Religious Propagation	*	1	*	1
36	Religious Propagation	*	2	*	2
37	Religious Propagation	*	2	*	2
38	Religious Propagation	*	1	*	1
39	Religious Propagation	*	1	*	1
40	Religious Propagation	*	2	*	2
41	Religious Propagation	*	4	*	4
42	Religious Propagation	*	1	*	1
43	Religious Propagation	*	4	*	4
44	Religious Propagation	*	4	*	4
45	Religious Propagation	*	*	2	2
46	Economic Difficulty	*	*	1	1
47	Self	2	*	*	2
48	Self	1	*	*	1
49	Self	1	*	*	1
50	Self	2	*	*	2
51	Self	1	*	*	1
52	Self	1	*	*	1
53	Self	1	*	*	1
54	Religious Propagation	*	13	*	13
55	Religious Propagation	*	145	*	145
56	Religious Propagation	*	83	*	83
57	Religious Propagation	*	2	*	2
58	Religious Propagation	*	1	*	1
59	Religious Propagation	*	3	*	3
60	Religious Propagation	*	2	*	2

61	Religious Propagation	*	2	*	2
62	Religious Propagation	*	2	*	2
63	Religious Propagation	*	2	*	2
64	Religious Propagation	*	17	*	17
65	Religious Propagation	*	4	*	4
66	Religious Propagation	*	1	*	1
67	Religious Propagation	*	1	*	1
68	Religious Propagation	*	1	*	1
69	Religious Propagation	*	2	*	2
70	Religious Propagation	*	2	*	2
71	Religious Propagation	*	2	*	2
72	Religious Propagation	*	1	*	1
73	Religious Propagation	*	1	*	1
74	Religious Propagation	*	19	*	19
75	Religious Propagation	*	1	*	1
76	Anomie	*	*	1	1
77	Economic Difficulty	*	*	1	1
78	Economic Difficulty	*	*	1	1
Total		9	376	6	391

Source: Online Materials

KEY

* NOT APPLICABLE

***SUICIDE BOMBERS WITH NO ACCURATE FIGURES = 2

Altruistic suicide was committed more in North Eastern Nigeria. Egoistic suicide was committed in all parts of the country devoid of region. Anomic suicide was not peculiar to any region in the country. Altruistic suicide was therefore more prevalent in Nigeria than egoistic, fatalistic and anomic suicides.

IV. DISCUSSION

Authors had not actually classified suicides in Nigeria into Emile Durkheim's typology. Even though suicide seems to be on the increase in the country scholars had not delved into this area of study. Even though This Day (2018), Onyekakeyah (2018), Muanya et al (2017), UNICEF Nigeria (2017), Haruna (2018) and Odeyemi (2018) were concerned about occurrences of suicide in Nigeria they failed to fix these suicide cases into egoistic, altruistic or anomic suicides. Lin et al (2018) and Lund et al (2018)'s dwellings on impulsivity in creating differences in suicide and emotional impacts respectively is not consistent with the finding of this study.

Mason et al (2018)'s work on competence in the conduct of suicide funerals failed to align these suicides to Emile Durkheim's typology. Akram et al (2018)'s link of different kinds of impairment with prevalence of suicidal behaviour is not consistent with the finding of this study. Adinkrah (2018)'s dwelling on suicide among the elderly in Ghana is not consistent with the finding of this study. Monahan et al (2018)'s finding on suicide survivors is not similar with the finding of this study. Westerlund (2018)'s concentration on grieving related to suicide makes it different from the finding of this study. Stack (2004) and Condorelli (2016)'s findings on suicide is not similar with the finding of this study. This is because they did not align their findings to Emile Durkheim's types of suicide.

This study has current relevance to scholarship because it has made efforts to classify the different suicides in Nigeria into Durkheim's typology. This feat has not been achieved by many scholars interested in suicide studies in Nigeria and elsewhere. This study therefore has contributed to the advancement of Durkheim's types of suicide in order to give it more current orientation especially in Nigeria which was not in the original focus of his studies on suicide. In this way this study adds to knowledge that incidences of egoistic, anomic and altruistic suicide varied from each other in the country with statistical underpinnings.

V. CONCLUSION

Altruistic suicide was more prevalent in Nigeria than egoistic and anomic suicides. Online awareness programmes would help to reduce incidences of suicide in the country.

VI. RECOMMENDATIONS

Egoistic suicide could be reduced by making online courses on suicide available to Internet users. There is an increasing number of Internet users in the country. This could be an avenue for awareness creation on preventive measures to be adopted in tackling involvement in suicide. The online courses should be in two phases. One should be for individuals and the other for government officials and community leaders. The first phase of the programme would target solely individuals from all facets of life in the country. This would include both Nigerians and non-Nigerians who reside in the country. Various strains of life and the different means to ameliorate them would be incorporated in this phase. This would go a long way to enlightening the people on suicide preventive mechanisms. This phase would help to reduce incidences of egoistic suicide to the barest minimum.

The second phase of the programme would educate government officials and community leaders on different measures of suicide prevention. Online courses would help to educate them on how to curb inter-communal clashes, suicide bombing and near presence of anomie in some localities. It would also involve segments meant to discourage politicians and some high ranking civil servants to shy away from corruption. Adherents of Boko Haram sect had accused

government of being corrupt hence the incessant killings and the attendant suicide bombings.

In part it would create different measures that would help government to site industries in all the 774 local government areas. This would create jobs for the unemployed youths and the unemployed graduates as well. This would help parents who may wish to commit suicide to desist from that. It would also make the youths who get employed to remain busy at work and shy away from suicidal thoughts. Money would also be in circulation through this measure. Debtors can make some money in order to settle their debts. Efficient agricultural production and the siting of industries with constant power supply would keep the nation being economically viable. Policy makers should aim at the control of incidences of altruistic suicide in the country.

VII. LIMITATIONS

Many suicides in Nigeria were left unreported. This affected the number of suicides that would have been used for the study. Data from online social media platforms were not included in the study due to inaccurate records. In some cases suicide attacks were represented with suicide bombers with no specific number of persons involved in the attack. In few occasions there might have been some double or more reporting of suicides online. The reports were clearly checked to avoid double reports. It was only the accessible online materials that were used for the study. Hence, the study may not have included all the online reported suicides in Nigeria. Language barrier hindered the use of data from sites not written in English Language. Suicides that occurred before 1999 were not covered by the study. Besides, many suicides in Nigeria were not reported prior to the conduct of this study. As well in some months there were no figures to show due to its non-reportage via the Internet. Hence, only the available suicides reported online were used for this study. The findings of this study should not be used to represent other non-reported suicides, police reported suicides and eye or ear witnessed suicides in the country. There could be some suicides that could fit into more than one type of suicide at the same time. This was not covered by the study.

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