Original Articles 21

Linking COVID-19 with Suicide: Suggestions for Future Research

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Abstract:

COVID-19 has impacted the world socio-economically. Unemployment, poverty, social stigma, social isolation, domestic violence and mental illnesses are the notable social issues related to COVID-19 pandemic. Framed under a review based approach, the current study searches for the link between COVID-19 pandemic and an increased vulnerability to suicide across the globe. Linking the current situation with researched determinants of suicide shows that COVID-19 pandemic is exacerbating various socio-economic and psychological causes of suicide. In near future or even during the pandemic, suicide will be a key challenge for the public health sector across the globe. Besides, future research suggestions are given in light of the discussion in order to provide an impetus to researching the impact of the COVID-19 pandemic on suicide.

Background of the Study

There is quite a history of virus outbreaks. The most notable are the Spanish flu in 1918-1919 which spread across the globe (Tsoucalas, Kousoulis and Sgantzos, 2016); Middle East Respiratory Syndrome (MERS) in 2012 in Saudi Arabia (WHO, 2019); Severe Acute Respiratory Syndrome (SARS) in 2002-2003 in China (WHO, 2013). Similarly, recently in December, 2019 another virus started affecting humans in Hubei Province of China and more specifically in Wuhan city. The current outbreak of the virus leads to COVID-19 disease among humans. By May 09, 2020, 20:33 GMT, there are 4,080,173 laboratory confirmed corona virus cases throughout the world. United States of America, Spain, Italy, China, Russian and United Kingdom are the mostly affected countries. 1,425,211 infected persons have recovered and 279,282 died (see Worldemeter for timely updates).

COVID-19 is one of the ongoing pandemics whereby researchers are in continuous efforts to know about the virus e.g. its origin, structure, spread, death and recovery rates, and most importantly cure. The whole world has been affected socio-economically due to the pandemic of COVID-19. Suicide is also a global social phenomenon. Suicide prevails throughout the globe with different rates and causes. The causes of suicide are always socio-economic and psychological. The current pandemic is also important in this regard. Thereby, this study is an effort to link the exacerbating determinants of suicide associated with COVID-19.

Methodology

This is a review article. To produce link between suicide and COVID-19 pandemic, an extensive search for literature has been done. For example, the current news about the pandemic and situation of COVID-19 has been studied and cited particularly the socio-economic impacts of COVID-19 which are already researched as determinants of suicide. The approach was systematic whereby databases such as EBSCO host, Sociological Abstract, WoS and PubMed were searched. The most relevant studies were hand searched and sampled for this study.

Results and Discussion

Linking Determinants of Suicide with COVID-19

Unemployment and COVID-19 and Suicide

The pandemic of COVID-19 brought abrupt lockdowns throughout the globe within few months. Lockdowns have significant economic impact. BBC reports that 1 among 5 households are in hunger in United States of America whereas 20.5 million got unemployed (BBC Urdu, 7th may, 2020). In Italy the unemployment rate increased to 11.2% in 2020 from 9.9% as noted in 2019 (Statista Research Department, 2020). Amaro (2020) mentions the economic situation in Spain that the unemployment rate had surged from 13.2% to 20.8% in April, 2020 due to the situation created by COVID-19. The situation is more worrisome for poor and developing countries. Inamdar (2020) reported that 122 million individuals became unemployed in April, 2020 in India due to situation created by COVID-19. Latif (2020) reported that Pakistani labor is in trouble due to COVID-19. About 75% of the work force in Pakistan is labor. Rana (2020) asserts that approximately 18.5 million individuals were going to be unemployed in Pakistan in May, 2020 due to lockdown. For developing and poor countries the situation further worsens as a matter of fact that a considerable number of people of such countries in developed countries. As COVID-19 being a pandemic is affecting the developed world as well so those overseas employed people are suffering as well leading to further economic problems at their place of origin. For instance, Abbas (2020) explains the situation of Pakistan by arguing that Pakistan is going to be affected by COVID-19 like a doubled edged sword. On one side, it will increase the unemployment in the country as well as the overseas labor is also losing their jobs; therefore, it is inevitable that the rate of poverty will increase significantly.

It is evident from the bulk of studies that economic difficulties play a significant role in suicide related behaviors ranging from suicidal ideation to suicide attempt. In this regard, for example, Blakely, Collings, Atkinson (2003) and Preti (2003) asserted that there is significant causal relationship between unemployment and suicide. Further, Boseley (2015) wrote an article in *The Guardian* and revealed that approximately

Original Articles 23

45,000 suicide related deaths occurs globally due to unemployment. Besides, notably Kawohl, Nordt (2020) more recently argued that mental health is under threat due to COVID-19 because of the economic crises it produced, and in the coming few months suicide rates are going to raise as a result of wide spread poverty and unemployment across the globe.

Isolation, Lack of Social Support and COVID-19 and Suicide

So far, there is no cure for COVID-19 (WHO, 2020); however, plenty of trails are undergoing to search for possible treatment. Preventive measures have only proven to be effective only to limit the number of new infections. Strategy for it are lockdown, isolation, limiting social contact as recommended by WHO and CDC (WHO, 2020; CDC, 2020).

Self-isolation, quarantine and the standard precautions from medical professionals may lead to a lack of social support and that too in an illness in which one is uncertain. This may lead to stressful situations triggering mental illness which are correlated with suicidal behaviors. Endo, Nishida (2017) found that social isolation is one of the key determinants of suicidal ideation and self-harm among adolescents. Further, a comprehensive review article by Calatiet al (2019) concludes that social isolation is significantly associated with suicidal behaviors. Social isolation exacerbates: stress; feeling of loneliness; anxiety; lack of sharing of stressors with near ones leading to an increased risk of developing suicidal behaviors. Kawohl, Nordt (2020) point out the importance of technology to maintain social bonds in order to relieve stressful situations but predicts that still the suicide rates with go up during and soon after the pandemic.

Social Stigma and COVID-19 and Suicide

BBC Urdu reported on May 09, 2020 that:

"....Prime Minister of Pakistan Imran Khan showed worry about the response of people even medical community towards individuals infected by the Corona Virus...."

Confrontation of social stigma is one of the leading problems arising as COVID-19 is intensifying throughout the globe. In this connection, UNICEF and WHO have published guidelines to deal with it. The guidelines explain that stigma

has been confronted by many people, communities and even religious groups reported across the globe including: discrimination; stereotypes; labelling; separate treatments; even loss of status. As the disease is new and unknown therefore social stigma prevails across certain communities regarding it. Social stigma is impacting the individuals (e.g. there emotional status, hate, increase in stress, fear of rejection, intensifying depression and other mental illness) as well as communities, even people are hiding the symptoms of the illness if they are having it (UNICEF and WHO, 2020).

Warrell (2018) asserts that social stigma play a significant role in suicide. Social stigma contributes to suicide in many ways, for example: fear of social rejection labelling (e.g. name calling); discrimination; and stereotyping lead to emotional traumas and stresses which are linked with suicide. Khan, Naz, Khan (2017) also pointed out that labelling is an important contributing factor to suicide.

Domestic Violence and COVID-19 and Suicide

There are confirmed reports that the incidents of domestic violence have increased during COVID-19 pandemic. The causes are multifaceted, for example, loss of employment, long stays at home and disagreements at home due to poverty and stress are leading to domestic violence. Bogart (2020) illustrates that cases of domestic violence have increased in Canada during COVID-19 pandemic. With regard to Pakistan, Agha (2020) reports that lockdown has certainly increased domestic violence in Pakistan; however, the majority of them go unreported due to lack of proper a legal system, lack of awareness about rights, etc.

Clay (2014) found that individuals confronting domestic violence (particularly intimate partner violence) have atwo fold increase risk of suicidal ideation compare to people not confronting such violence. Additionally, the study also shows that multiple suicide attempts are also common among victims of intimate partner violence. In addition, more recently Brown, Seals (2019) conducted a comprehensive study on domestic violence and suicide. The study found that many suicide cases are result of prolonged confrontation of domestic violence.

Mental Illness and COVID-19 and Suicide

The Center for Disease Control and Prevention and the World Health Organization are alarmed about mental health issues resulting from COVID-19 pandemic. Mental health issues resulting from the pandemic are multifaceted. 1st, fear and anxiety are common which are obvious in any pandemic (CDC, 2020). 2nd, self-isolation and social isolation (loneliness) lead to stress (Campagne, 2019). 3rd, people with chronic health issues (e.g. cardiovascular diseases, diabetes, chronic lung problems etc.) are at increased risk of developing serious illness from leading stress and anxiety (Turner, 2000). 4th lockdowns, closure of industry and markets has led to higher rates of unemployment and widespread poverty leading to stress and depression (Institute for Work and Mental Health, 2009). 5th and most importantly, people who have been infected are in isolation whereby they are: in a fight between life and death; they lack the physical support of close ones; they fear of dying without seeing close ones; thoughts about family and kids and so many other issues exacerbates pre-existing mental illnesses as well as leading to new mental health issues.

Mental health is an extremely important aspect of any suicidal inquiry. Bachmann (2018), and Bradvick (2018) point out that mental health is a significant aspect in any suicide related behavior. Discussing more specifically anxiety is a mental disorder (WebMD; Rector et al., 2008). Neponet al (2011) found that anxiety disorders increase the risk of developing suicidal behaviors. Endo, Nishida (2017) found that social isolation is one of the key determinants of suicidal ideation and self-harm among adolescents. Further, a comprehensive review article by Calatiet al (2019) concludes that social isolation is significantly associated with suicidal behaviors. Social isolation exacerbates: stress; feeling of loneliness; anxiety; lack of sharing of stressors with near ones leading to an increased risk of developing suicidal behaviors. Turner; Kelly (2000) found that chronic illnesses are significantly associated with mental health issues. For example, modern health care facilities have prolonged the life of people with chronic illnesses; however, the quality of mental health is often ignored. People with chronic illnesses often have mental illnesses which raise the question that had the medical advancement also provides people with better living in case of chronic illness. Gurhan*et al* (2019) argues that the risk of depression increases 4 times in people with chronic illnesses leading to 2 fold increased risk of suicidal ideation as well.

Conclusion

So far the available information on COVID-19 shows that the pandemic has impacted the globe socio-economically. The key socio-economic issue includes: lockdowns; closure of industry and markets (leading to widespread unemployment and poverty); social isolation; social stigma (for the affected individuals, families and communities); an increase in incidents of domestic violence; exacerbated pre-existing metal health problems and is developing mental health issues among individuals recently.

Previous research shows that unemployment and poverty, social isolation, social stigma, domestic violence and mental health problems are significantly associated with suicide. Therefore, keeping in view the current situation created by COVID-19 and previous research predicts that there will be an increase in suicide in near future and even during the pandemic if it prolongs for a few more months.

Future Research

This article is mere a link between the situation created by COVID-19 and previous research on suicide; however, its main purpose is to highlight the importance of the issue, and the focus required by the researchers in the near future. Some suggestions for future research are:

- Assessing the stress levels in people recovered from COVID-19 and assessing them for any suicidal ideation. This research can be done by researchers from their communities, and relatively samples are easily available throughout the globe.
- Assessing the stress levels among people with chronic illnesses and linking it with suicidal ideation.
- Researching for stress and difficulties in life of those who got unemployed particularly people of developing countries whereby the states cannot asses such people.
- Rejection, discrimination or labeling of those who have been infected, and assessing stress and suicidal ideation among such individuals.

Original Articles 25

• The effects of quarantine on the mental health of individuals infected and assessing suicidal ideation in near future among them.

 Researching about the role of technology in keeping isolated or quarantined persons in contact with closed ones. It should be researched whether it has relieved stress or not? And most importantly, its role in preventing suicidal ideation should be assessed.

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