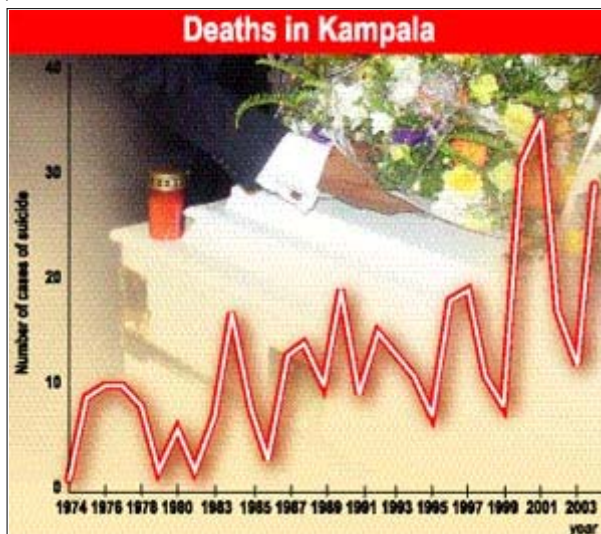


Suicide cases on the rise - Survey

Publication date: Friday, 31st August, 2007



By Charles Wendo

ABDULLAH Byekwaso, a young man in his twenties, last month did the unthinkable in Kibaale district. His body was found dangling on a cotton piece of cloth in his mud-and-wattle house in Kiraba village, Kagadi town council after killing his entire family.

Byekwaso's case reflects a growing national mental health problem, psychiatrists warn. Though statistics are scanty, available data indicates that suicide is on the rise in Uganda.

A 2004 survey by the Ministry of Health among 4,660 adults in 14 districts showed that 15% of respondents, or one in six, had tried to commit suicide, and 12%, or one in eight, had done so within one year prior to the survey.

In Kampala, the suicide rate nearly doubled in 25 years. According to a study by three psychiatrists at the Faculty of Medicine at Makerere University, the rate went up from 1.31 per 100,000 people in 1980 to 2.34 in 2004.

The research team studied suicide cases brought to Kampala's mortuaries. However, the actual number is bigger since many are buried without being taken to mortuaries.

The cultural attitudes towards suicide contribute to the difficulties of obtaining data. In most communities in Uganda, suicide is a taboo. A person, who hangs himself, cannot be touched or given a decent burial.

In some cultures, a hole is dug directly below the dangling body and the rope is cut to allow the body to drop in. If it misses the hole, a stick is used to push it in.

Hanging is the most effective method of committing suicide in Uganda, the Makerere study found. Among those who survived, the most common method used was drinking poison.

Other commonly used methods are jumping from tall buildings, gunshots, and taking an overdose of medicines.

Eugene Kinyanda, who led the Makerere research team, attributes the increase in suicide to the changing lifestyle. As the economy becomes more cash-based, he says, psycho-social distress is mounting on those who cannot raise enough cash to earn a decent living. Modern life puts pressures on men to earn income and where that is not forthcoming, they get depressed.

Other factors are rural-urban migration, loosening up of family bonds as a result of modern lifestyles, the widening gap between the poor and the rich, as well as the HIV/AIDS epidemic.

Whereas all categories of people commit suicide, the study found that it is more common among educated young men who live in *muzigos* (one-room houses).

"They are mostly young men who come to urban centres and are educated but jobs are not forthcoming and yet they see expensive cars moving around," said Kinyanda. "The expectation of them in the village is high, yet there is a lot of unemployment," he said.

Suicide is also high among young men living in IDP camps in northern Uganda, according to the 2004 study of the Ministry of Health.

"Many men are frustrated by the failure to protect their families and provide for them. You find a man who used to derive his authority by owning large tracts of land but is now depending on donations," Kinyanda noted.

Uganda is one of the few countries in the world where suicide is a criminal offence. Most developed countries have de-criminalised suicide in the 1960s and 70s.

According to the Penal Code Act, anybody in Uganda caught trying to commit suicide is guilty of a felony and can be imprisoned for up to two years.

One of the most recent cases is Sanyu Kalisti, who was convicted to a one-year-imprisonment in July for trying to hang himself in a Police cell.

Kalisti, a 19-year old boda boda rider, had been arrested for allegedly stealing two mobile phones.

On June 6, he pulled off his long-sleeved shirt in his cell in Kampala's Railway Police Station, made a noose and strapped it around his neck. Two policemen caught him in the act and responded fast to save his life.

In court, Kalisti said he was depressed because of being sent to jail for a crime he did not commit. Passing the judgment, Magistrate Gaster Mugoya said: "Anyone who does not value life is not fit to be left loitering among right thinking members of society. Being arrested over phone theft is not the end of the world."

According to Police records, a total of 175 cases of attempted suicide were reported countrywide last year. Out of these, 42 were arrested and taken to court. In the end, 16 were convicted and sent to prison.

Making suicide a criminal offence stops people from seeking help, Kinyanda notes.

"Attempting suicide is a sign of distress, not a crime," he says. "These people need help. But because they fear to be arrested, they hide and don't come for help."

Kinyanda is a strong supporter of de-criminalising suicide.

In addition, he believes, there is an urgent need to educate the population about suicide, including how to detect and avert suicide intentions, and psycho-social support should be integrated into the resettlement of IDPs.

Police spokesman Asan Kasingye does not agree that suicide should be taken out of the Penal Code. He refers to the Bill of Rights in the Constitution of Uganda, which says no one has the right to take the life of any person or of himself unless this has been done by the responsible state organ.

The state has the responsibility to preserve the lives of all people, he adds. "Whereas it is true that someone attempting to commit suicide is in a certain state of mind, the penalty is a deterrent, meant to serve as a lesson to others that attempting to commit suicide is an offence which is punishable," he said.

The chairperson of the parliamentary committee on social services, James Kubeketerya, supports this view. Whereas there is need to strengthen mental health care by setting up psycho-social support centres, decriminalising suicide would only encourage more people to kill themselves, he believes.

But Dr. Margaret Mungherera, the former president of the Uganda Medical Association, says the facts on the ground show that the law is not deterring people from attempting to take their lives.

"Every time I go to Mulago Hospital, I see two to three cases of attempted suicide. I don't think the law has done anything to deter them. People who want to commit suicide will do it whether that law exists or not," she says.

She argues that imprisonment aggravates the psychological distress of people who attempt suicide, more so as Ugandan prisons lack mental health care. Suicide, she says, is a psychiatric problem which should be handled medically.

Worldwide, the legal versus medical debate on whether or not to decriminalise suicide has been raging for decades.

Lawmakers believe suicide attempts should be punished to deter others. Medics think it is a problem that requires medical care.

Additional reporting by Prossy Nanziri and Florence Nakaayi

This article can be found on-line at: <http://www.newvision.co.ug/D/8/12/584299>