

YOUTH SUICIDE AS A GROWING MULTIFACETED PUBLIC HEALTH CRISIS IN PAKISTAN AND THE ROLE OF ISLAMIC SPIRITUALITY IN PREVENTION

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Abstract

Youth suicide in Pakistan epitomizes a growing public health crisis, prejudiced by a complex web of cultural, social, economic, and psychological influences. Adolescents who practice suicidal ideation or attempt suicide frequently face unprocessed mental health conditions and lack access to adequate care due to social stigma and limited mental health access and approach. In a largely Muslim society with dominance of faith and spirituality in individual and communal life, an Islamic framework of spirituality offers a socially relevant and ethically beached approach to prevention and healing. This research article explores current situation, causes and solution based frame work to address increasing crises of suicide in Pakistan. As majority Muslim populated country, Integrating of Islamic teachings on hope, purpose, resilience, and the sanctity of life can help treatise suicide as a spiritual and mental health issue to promote help-seeking behavior. This paper advocates the spiritually cohesive, context and intrusions through alliance among religious scholars, clinicians, educators, and policymakers to support youth mental well-being and prevent suicide.

Keywords: Suicide, Health Crises, Islam, Spirituality, Youth.

INTRODUCTION

Suicide among youth has emerged as a pressing public health concern globally, with developing countries like Pakistan facing unique challenges (Khan MM.1998). Adolescents and young adults are particularly vulnerable to psychological distress due to various socio-economic and cultural pressures (Wasserman D, Cheng QI, Jiang GX .2005). In Pakistan, these challenges are intensified by limited mental health services, prevailing social stigma, and inadequate public awareness. Despite being a Muslim-majority country where religious values are central to daily life, the potential of Islamic spirituality as a tool for mental health resilience remains largely underutilized. This paper explores the rising incidence of suicide among Pakistani youth and proposes an Islamic spiritual framework as part of a holistic prevention strategy.

Youth suicide is a major global mental health problem according to the data from a 2014 World Health Organization (WHO) report on global suicide showed that in 2012, youth suicide accounted for 8.5% of all deaths in those aged 15–29 years, and was the second highest cause of death in this age group. The statistics are worse in higher income countries, with youth suicide accounting for 17.6% of deaths in this group, and in South East Asian countries where suicide accounts for 16.6% of deaths in this group. Youth suicide, on a global scale, is a complex issue with many risk factors.

Suicide is a global health concern, with profound social, emotional, and economic repercussions for individuals, families, and communities (Hunter E, Harvey D.2002). Suicidal behavior among adolescents, encompassing ideation, self-harm, and suicide attempts poses a significant global public health challenge (Schneider B.2009). Youth suicide attempters are high-risk for suicide. Many have untreated mental disorders and are not receiving services. It is crucial

to understand potential influences associated with service use. The cultural, social, and economic factors that contribute to suicide in Pakistan are complex and multifaceted, making it imperative to develop tailored interventions, necessitating collaborative efforts involving researchers, educators, clinicians, practitioners, and policymakers (Khan MM, Naqvi H. 2008).

The Magnitude of the Crisis in Pakistan

Although suicide is underreported in Pakistan due to religious, legal, and cultural taboos, available data indicates an alarming trend, especially among adolescents and young adults. Factors such as academic pressure, unemployment, family conflict, social isolation, and exposure to trauma contribute significantly to suicidal ideation and behavior (Shekhani SS, Perveen S.2018).

The World Health Organization (WHO) estimates that suicide is one of the leading causes of death among youth globally. The most recent data of WHO about Pakistan expresses Suicide mortality rate per 100 000 population according to Official estimate updated 8 January 2024 (WHO,2024).

In Pakistan, studies suggest increasing rates of self-harm and attempted suicide, with many cases going unrecorded due to fear of social backlash or legal repercussions. The mental health infrastructure in Pakistan remains severely underdeveloped, with less than one psychiatrist per 100,000 people, and even fewer services tailored for youth.

It was noted that the suicide mortality rate was on the rise. Citing the World Health Organization (WHO,2021), a speaker said there were 7.3 suicides per 100,000 in 2019, which rose to 8.9 in 2020, and 9.8 in 2022.

Pakistan Institute of Living and Learning (PILL) CEO and psychiatrist Dr Nasim Chaudhry, stated that according to global statistics, around 700,000 people die by suicide annually, and in Pakistan, suicide is now the fourth leading cause of death.

Chairperson Psychiatry Department Pakistan Institute of Medical Sciences (PIMS Pakistan Institute of Medical Sciences) Professor Rizwan Taj reported a concerning trend in Pakistan, with 40pc of cases involving burns as the method of suicide. Rural areas in Pakistan have reported 12pc of suicidal ideation, with individuals expressing thoughts of self-harm. (Dawn,18 July,2025

According to global matrix of statistic Pakistan suicide rate for 2021 was 5.64, a 3.87% increase from 2020. And this was even higher than 2020 which was 5.43, a 10.84% decline from 2019. Pakistan suicide rate for 2019 was 6.09, a 2.09% decline from 2018. Pakistan suicide rate for 2018 was 6.22, a 2.35% decline from 2017.

According to the 7th Population and Housing Census by Pakistan Bureau of Statistics (2023), the population of Pakistan ranges 241.49 million with a growth rate of 2.55%. Among a rapid increase of population, the incidents of suicide estimated daily average of 50-55 cases, males in particular. Surprisingly the 70% of these cases occur within the age between 15 to 29 years, documenting the suicide as fourth leading cause of death among young generation in Pakistan ("Alarming Rise in Suicide by Youth in Pakistan," 2024).

The above facts represent Suicide and self-harm are significant public health problems in Pakistan, an Islamic South Asian country, where faith as Muslim being taken very seriously in rituals and social lives of general public. Even the above facts are under-studied and under researched, though in recent years there have been a growing number of studies from different parts of the country. There are no national level statistics as suicidal acts are given by government's annual national health statistics. However, on available evidence it seems occurrences of both suicide and self-harm may have increased in recent years especially carried out by young people, with young single males and young married females at high risk. Most studies on suicidal behaviors from Pakistan are basic, retrospective case-series and by non-mental health professionals with an understandable lack of focus on the role of psychiatric illnesses in suicidal behaviors.

Key Reasons of suicidal risk and self-harm of youth in Pakistan:

Suicide and self-harm are among the complex phenomenon in Pakistani society that involves social, cultural, biological, psychological, and environmental factors (Shahid M, Hyder AA.2008). Suicide cases in Pakistan have increased in recent years. Among most of suicides and self-harm cases were linked to Social, Economic, Domestic, emotional and psychological reasons (Bibi. R, & KhanY.,2019).

As a low-income Muslim country whose 70% population lives in rural areas and one-third lives below the poverty line, So, low socioeconomic status, low qualifications, and unemployment have been among the leading factors. Every 5 or 6 causes of suicide attempts in Pakistan are reasoned of unemployment, financial crisis or social injustice (Tofique.S. Chudhry.N.2014).

Another major cause includes familial conflict, domestic violence,7,8 gender inequality, personal issues domestic problems which were done by females, married people, and youth, indicating the strong association of gender bias, family disputes, and desolation, with suicide (Tunio S, Shouakt G, Khan MA .2019). Seven studies were swotted to find out the major causes of suicidal ideation in Pakistan. Out of seven the four studies found domestic violence as a significantly increased reason of risk (1,13,14,16) of suicide death. Almost 59% cases of these four studies from the district of Chitral, Pakistan which includes 90% females suicide cases caused by domestic violence or physical abuse of spouses. Among 76.4% of participants agreed that domestic problems were associated with an increased risk of suicidal behavior or self-harm (Tunio S, Shouakt G, Khan MA.2019).

Mental health problems, redundancy and prolonged ailments, and low income also contributed a great deal to suicide. Other causes like social prejudice, catastrophe in love, failure in exams, bullying, and sexual abuse were also there (Cheema, T. N., Qasim, A. P., Munir, U.2018).

There has been seen an escalation in complete suicidal attempts among students which usually includes academic pressure, devastation to reach a goal and untreated psychiatric diseases are most likely the instrumental factors for suicide in students. The literature deficiencies enough data for timely measures to be undertaken to prevent these incidents (Durrant, V. 2000).

Social seclusion, aggravation of existing anxiety syndromes, mood turbulences, previous psychological history, and chronic illnesses have been reported as causative factors for suicides in Pakistan (Atika Rehman, & Jahanzaib Haque.2020). In addition to it, childhood trauma, sexual violence, cognitive distortions, personality traits, and previous unsuccessful attempts have also been indicated to play a part in why people commit suicide. Previous studies have revealed that Pakistan lacks certified data about suicide mortality as no statistical analysis about suicidal ideation and successful attempts is 5 done on the national level (R.A.L.I. Mahesar et al.2021).

How Islamic belief system can effectively work in Pakistan:

Pakistan as an Islamic state can prevent suicide percentage through Religious moral demurs to suicide, especially Islamic faith in particular, is a salient factor in suicide risk and resilience (Husain, N., Afsar, S., Ara, J., Fayyaz, H.2014). Globally, Muslim populations incline to have low rates of suicide mortality compared to other religious groups. For illustration, a recent study of 46 Muslim-majority countries found that most of these countries had age-standardized suicide rates below the global average (Simpson ME, Conklin GH. 1989). Moreover, in both Muslim and non-Muslim majority countries, rates of suicide mortality among Muslim populations are consistently lower than non-Muslim populations (). Islam's as a faith can be a key tool regarding prohibition of suicide and a foundational principle to be used to educate Muslim participants regarding the sanctity of life, the role and necessity of hardships, and one's responsibility to care for their body and to maintain their rights to their community.

Self-ownership/ vs. Islamic Approach to Life:

There have been two approaches adopted in Pakistan to discourage suicide. The first pledges the complete right of life a person is entitled over himself which is based on the theory of Scottish philosopher David Hume, who says: "I believe that no man ever threw away life, while it was worth keeping" (Goodreads). Based on this argument, no has right to stop anyone from suicide. The similar approach was espoused by Minoo Masane who is an Indian scholar that every human being is a sovereign person, and he alone has the right to indicate whether to live or die, society cannot choose for him" (Johnson, 2021).

Now measured the life as a blessing from Almighty Allah, and no one has the right to hurt or destroy it. It is stated in the verse 195 of Surah Al-Baqarah: "Do not put yourselves in the destruction" (Quran, 2:195). While interpreting verse 29 of Surah An-Nisa, Al-Baghawi quoted this verse, stating that it refers to suicide by a believer (Baghawi.T.A 2022) Similarly, other interpreters, including Al-Tha'labi and Ibn Kathīr, have quoted hadith related to the prohibition of suicide while interpreting this verse. The Prophet Muhammad (PBUH) clearly stated that everyone has a responsibility to take care of his life and body parts and declared the attempter as a sinner, subject to severe punishment (Sahih Muslim, 6816).

How Pakistan can judicially and legally prevent suicide as an Islamic state:

The scholars sanctioning the first approach often neglect the societal aspect, which cannot be ignored. As Phiroze R stated: "Human life is as valuable to the state as it is to the holder, and the state cannot crack a blind eye to a person's attempt to kill himself" (State v. Sanjiv Bansal, AIR 1985). The rights and obligations of human being are essential to fulfill, and one cannot escape from them due to circumstances, as it disturbs the rights of others (Pakistani.org. 2022). And suicide act contradicts the preamble of the Constitution of Pakistan, which starts with: "Sovereignty over the entire Universe belongs to Almighty Allah alone" (Pakistani.org). Similarly, Article 9 of the Constitution of Pakistan states: "No person shall be deprived of life or liberty save in accordance with law" (Pakistani.org.2022).

Islam has a very solid and strong position on the inviolability of life, compassion, community responsibility, and hope. Additionally, Islamic principles can serve as powerful protective factors against suicide. Alongside, an Islamic spiritual framework can also be helpful to address psychological distress while offering moral and emotional support rooted in religious teachings.

How Islamic Spirituality can address suicide prevention among Muslim youth of Pakistan:

Islamic ethical and legal positions toward suicide is reasonable and supports safety of life over harming it. Contextualizing suicide in Islamic beliefs and ethical contemplations may prove beneficial to both clinicians serving Muslim populations and researchers investigating the role of religion on suicide (Madadin et al., 2020). Moreover, applications of Islamic injunctions against suicide may be more illuminating in the context of ethically complex contemporary suicide-related topics, including medical assistance in dying (MAID) and suicide contagion.

Religiosity appears to promote resilience to suicide through both psychological and social mechanisms. Sociological investigations of the relationship between suicide and religion suggest that adherents of faith groups enjoy the benefits of feeling a sense of belonging and social integration (Stack & Kposowa, 2011). Moreover, living among a religious group appears to improve adherence to that religion's morals (e.g., the impermissibility of suicide), irrespective of an individual's personal religious beliefs (van Tubergen et al., 2005). Psychological investigations suggest numerous

mechanisms by which religion promotes resilience to suicide, including improved meaning in life, and the promotion of comfort and hope to adherents (Koenig et al., 2012).

1. Sanctity of Life (Hurmat al-Hayat):

Islam unequivocally forbids suicide, emphasizing that life is a divine trust (Amanah) from Allah. This powerful and meaningful verse of Qur'an "...and do not kill yourselves, for God is Merciful toward you." (4:29) can be understood as a prohibition against murder; earlier and contemporary commentary can be an effective tool for the prohibition against suicide (Ṭanṭāwī, 1992). Additionally, numerous prophetic teachings about prohibition of suicide reflect the importance of the preservation of life, one of the foundational objectives of positive aptitude in life (Bū Ḥanāsh, 2012).

Al-Ghazzālī describes humans as honorable beings born with an innate metaphysical propensity (Al-Ghazzali.2000). Muslim youth can be educated on the spiritual value of their existence can promote resilience and discourage self-harm. Just as fitrah remains fittingly regulated, allowing humans to rise above primal characters, acquire refined higher goals, and productively channel innate propensities toward constructive outputs (Grifel, 2011).

2. Hope and Divine Mercy (Rahmah):

Most of youth out of their emotional stress inclined towards sorrow and grief when there is any pressure or challenge being faced. Here, the reflection of this point that no sin or hardship is greater than Allah's mercy. Verses like "Despair not of the mercy of Allah..." (Surah Az-Zumar 39:53) provide a message of hope, essential for those in emotional crisis.

Indeed, sorrow exists as part of divinely decreed trials from God (ibn Qayyim al-Jawziyya & Hamid, 2014). According to Abu-Yusef al Kindī, some sorrows are to be expected in life because God tests all individuals with loss which can be loss of wealth, health, life, status, and the loss of things that are loved is the foundation of sorrow. But Al-Kindī's advice to protect oneself from long-lasting sorrow which might be diagnostically considered depression. By using rationality, cognitive restructuring, gratitude, and reflection on God's compassionate nature (Jayyusi-Lehn, 2002) counseling rooted in these concepts can serve as a powerful tool in suicide prevention especially youth who are emotionally stronger and more ready to accept emotional remedy in the state of grief or depression.

3. Purpose and Meaning:

Qur'an expresses purpose and meaning of life with test, "We will test you with some fear, and hunger, and loss of wealth and lives and crops—but give good tidings to those who patiently endure." (2:155).

scholars agree that one's physical body and their communities have rights over them and that individuals are responsible for maintaining these rights. Hardships and loss of anything in life can be taken as challenge to reflect its purpose and meaning. Such psychosocial, socioeconomic, biomedical hardships occur with a purpose and meaning to (re)connect with God (Ṭanṭāwī, 1992; ibn Qayyim alJawziyya & Hamid, 2014).

These premises highlight the value of human life Feelings of worthlessness and hopelessness often underlie suicidal ideation. Islam encourages reflection on one's purpose in life (maqasid al-hayat) and the belief that suffering has meaning and potential for spiritual growth. Trial or test is a person's true moral character and a trail to living strong and sound life through the practice of hard-hitting faith when faced with hardships (Ṭanṭāwī, 1992).

4. Aptitude of acceptance of hardship as challenges in Life:

If the emotional aptitude of youth is prepared to accept griefs, loss and stress and challenge not depression, this may be helpful for countering ideation for suicide and negative thoughts of self-harming. Griefs, losses and hard times are sent by God generally to assess an individual's ability of tolerance as well as opportunities for moral growth (Ibn Ashūr, 2001). The Muslim scholars (Tantawi,2010) cited this verse, "Perhaps you dislike something which is good for you and like something which is bad for you. God knows and you do not know" (2:216) to encourage Muslims to view difficulties as blessings that foster fruitful reflection and catalyze positive change (Ṭanṭāwī, 1992).

If an emotionally motivated young person is encouraged to understand that this his hard time can cultivate the inner fortitude and attain the external provision required to cope with all tests, and that responding to tests will result in divine rewards will help in making a positive aptitude of facing difficulty and trial.

5. Discourage Self harm and suicide through Islamic teachings:

Being a teen or young Muslim, one has to be encouraged to live life with hardships and to face difficulty. As the most negative trigger in the state of grief and stress is considering life as unworthy and useless which may lead to self-harm and attempt for suicide in extreme situation. Self-harm and suicide are regarded as unsanctioned actions that breach the divine trust placed upon each human over their particular body (Al-Shari, 2016). The prohibition is designated in both the Qur'an (4:29), and in various narrations of the Prophet Muhammad (PBUH) indicates the severity of this prevention against suicide through the Prophet's command to avoid even death ideation in the face of hardship:

"Let not one of you wish for death because of a misfortune which befalls them. If one cannot help doing so, they should say: 'Oh God, keep me alive as long as you know that life is better for me, and reclaim my soul when death is better for me'" (Nawawī & Sha'bān, 1986)

Proposed Intervention Strategies:

1. Faith-Based Counseling.

General public especially youth should be given proper religious and psychological counselling regarding the harms and risks of suicide. For this purpose, the concerned teacher, Imams, religious scholars, and community leaders must be given training in basic mental health counseling which can bridge the gap between spiritual and psychological care.

2. School and University Programs.

Educational institution's role should be made practical through workshops, seminars and symposiums regarding suicide preventions. Such activities should be designed and conducted from the perceptive of psychological and Islamic guidelines. Alongside, religious and secular both institutions should integrate mental health education into their curricula, using Islamic principles to reduce stigma and promote well-being.

3. Collaborative Models.

Healthcare providers, educators, and religious leaders should work collaboratively to design culturally competent, spiritually sensitive mental health services for youth.

4. Media and Awareness Campaigns.

As a matter of fact, review of newspaper reporting on suicide cases and attempts in Pakistan found many violations of international standards in reporting suicide, including the failure to provide options for those seeking help, and recommended observance to social responsibility in reporting (Kambok & Ittefaq, 2019). Rather media outlets and social platforms should be encouraged to disseminate messages of hope, healing, and mental health through psychological, emotional awareness along with Islamic teachings and aid from the text of Quran and narrations of Prophet (PBUH) which can engage youth effectively.

5. Collective Community and Ummah's responsibility.

Islam promotes collective responsibility. The concept of Ummah emphasizes the duty of society to support one another. Mosques, Islamic centers, and community leaders can be mobilized to provide emotional support, mental health awareness, and safe spaces for youth to seek help.

6. Challenges and Ethical Considerations

While integrating Islamic spirituality in suicide prevention offers great promise, it must be done carefully to avoid victim-blaming or reinforcing guilt. A non-judgmental, compassionate approach is essential. Further, care must be taken to ensure theological interpretations are inclusive, balanced, and aligned with evidence-based mental health practices.

CONCLUSION

Youth suicide in Pakistan is a complex crisis that demands imperative, practical, culturally sensitive solutions. The amalgamation of Islamic spirituality into mental health strategies offers a powerful, faith-aligned approach to deterrence and healing. By espousal of an Islamic framework rooted in compassion, hope, and community, and by nurturing collaboration between religious and mental health professionals, Pakistan can move toward a more inclusive and effective public health response to youth suicide.

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