***Original Research Article***

**Socio-economic Condition and Forms of Suicide Attempts of University Students in Sylhet City, Bangladesh**

**ABSTRACT**

**Aim:** Death by suicide is a severe public health concern in Bangladesh. According to several studies conducted in this country, a significant portion of her youth are often attempting suicide, endangering their own health and future while causing problems for their families and the country as a whole. This research aims to investigate the socio-economic standing of university students who attempt suicide at least once in their lifetime as well as the forms of suicide attempt they initiated.

**Methodology:** Four institutions in the Sylhet district were chosen for the research; two of them were public, while the rest were private. The required data was collected from 200 respondents employing a purposive sampling technique using a semi-structured questionnaire. After that, each response was coded, and subjected to descriptive statistics.

**Results:** The study’s key findings indicate that 54.5% of the students were female and between the ages of 18 and 37; the majority of third-year students (24%) and fourth-year students (28.5%) were more depressed and suicidal; the study found that the largest percentage of suicide attempters (73.5%) were from rural backgrounds, while 26.5% were from urban areas; the highest percentage of them (86.5%) were members of small families, and 73% were Muslim. Additionally, the study found that the highest percentage of students (36.5%) were in a relationship, while only 4% were married. Most of them got their study and living expenses from family which was insufficient. For expense maintenance 71 out of 200 students worked as home tutor for extra earnings. About 62.5% respondents tried suicide in anomic form, 36% in egoistic form and no one embraced fatalistic form of suicide.

**Conclusion:** Suicide attempt of university students is triggered by various socio-economic dimensions. Again, these are linked to varying patterns of suicide attempt. Underscoring the reasons behind suicide attempts, as well as for future regulations and successful monitoring programs regarding their mental health assistance, data regarding the socio-economic background is crucial.

**Keywords:** Socio-economic, Suicide Attempt, Suicide Attempter, University students

**1. Introduction**

University students are the future leaders of any nation. In the long term they may contribute to the upliftment of the society and economy. Their skill and hard work may have significant impact on transforming over population into skilled manpower. Any destruction from their motive may harm the entire nation. But now-a-days suicide or attempted suicide among university students is the most talked topic. Suicide is a significant global health burden (Madigan & Daly, 2023; Kosaraju et al., 2015; Stack, 2021). About 726,000 suicides happen in a year in the world (World Health Organization 2024). Over the past 45 years, there has been a 65% increase in the global suicide rate (World Health Organization 2014). Suicide ranks as the leading cause of death across all ages however, among young people aged 15–29 years, it ranks as the third most common cause of death (Ziapour et al., 2023; Arafat & Saleem., 2025; Challagundla et al., 2024). Suicide is preventable but most disastrous global public health issue and students are being more suicide prone these days. Most often, individuals try to take their own lives to get rid of a situation that seems unworkable to deal with. Evidence show that maximum suicide attempts take place to seek relief from ashamed or guilty feelings, the experience of misfortune, gloominess, loneliness, loss or rejection, financial crisis, constant suffering or ailment, misuse, family stricture, violence, conflict, and many more (Bala et al., 2020). According to World Health Organization Report of 2021, one person commits suicide in every 40 seconds and is the fourth most common cause of death worldwide among 15-29 year aged people. There are many reasons associated with one’s being suicide attempter. Numerous research discovered a correlation between suicide and socioeconomic standing, both at personal and familial level (Raschke et al., 2022). It is true that Bangladesh is improving her education sector and every year many young people become graduated and post graduated from several public and private universities of Bangladesh. Though a serious silent killer that is suicide is ending huge valuable souls every year. Again, countless suicide attempt occurs in every university which remains beyond documentation. Mostly they suffer from severe pain in different spheres of life and become frustrated and decides not to live any more. The suicide attempters need more care to come back in normal life but often they are ignored by family, friends, university authority and even government. There is a severe lack of mental health care facilities in universities and insufficient parental care is very common. Researches showed that the fundamental reasons for suicide attempt among university students is academic stress and career uncertainty. A suicidal tendency may also emanate from feelings of helplessness resulting from how they think they were treated by their teachers and university officials (Rasheduzzaman, 2022). Although suicide is one of the most common forms of criminal offense in Bangladesh, no such initiative is being taken here. Depression and other mental health issues among university students are very high because most of them have to live away from home for studying, and they accordingly face several complications (Mamun et al., 2022).

There are about 9 universities in Sylhet city among them 3 are public and rest are private universities. All students who are currently studying in universities are youth. Their age ranges from 17 to 29. As family disorganization, examination failure, mental health issues etc. are being prominent in this vulnerable group hence for being free from this curse, it is vital to figure out whether the socio-economic characteristics of the suicide attempters have any correlation or not. Even though Sylhet City has a large population of suicidal university students, there is a dearth of study on this concern. Therefore, the current study will search for the way to bridge the knowledge gaps based on the socio-economic status of university students in Sylhet City who attempt suicide.

Two objectives were taken into consideration when conducting the study-

1. To identify the socio-economic status of university students in Sylhet city

2. To find out different forms of suicide attempts of university students

**2. Methodology**

***2.1 Study Area Selection***

Four particular universities Shahjalal University of Science and Technology (SUST), Sylhet Agricultural University (SAU), Leading University (LU), and Metropolitan University (MU) of Sylhet district were chosen as study area. These universities were perfect to pursue the inquiry because they attract students from all around Bangladesh, provide a variety of academic programs and campus sizes, and most importantly had not been previously examined in relation to student suicide.

***2.2 Sampling Technique and Sample Size***

Participants who previously attempted suicide were chosen using a purposive sample strategy. Given the delicate nature of the investigation and the challenge of detecting such situations using random sampling, this non-probability approach seemed suitable. 200 university students who attempted suicide made up the whole sample size. Participants were chosen based on their willingness to share personal experiences during campus visits and their availability.

***2.3 Preparation and Pre-testing of Interview Schedule***

A semi-structured interview schedule pertaining to the participants' socio-demographic profile, experiences with suicide, and its different manifestations was created in order to direct the data gathering procedure. A small sample of students participated in a pilot study to pre-test the interview schedule. The tool's alignment with the study objectives, cultural sensitivity of the questions, and clarity of language were all improved based on the pilot's input.

***2.4 Data Collection***

The researcher conducted personal interviews to build rapport and trust, both of which were necessary to persuade respondents to provide private and sensitive information. The goals of the study were briefly explained to each respondent, and interviews were held in a private and courteous setting. Despite these initiatives, shyness or emotional discomfort prevented several students from sharing their whole experiences. In these situations, the researcher used cross-checking methods and adhered to ethical standards to guarantee that data gathering remained accurate while also respecting the boundaries of participants.

***2.5 Data Processing and Analysis***

After gathering the data, the answers were meticulously compiled and moved to a master sheet. After tabulating and entering the data into Microsoft Excel 2016, SPSS Version 27 was used for further analysis. To evaluate the quantitative data, descriptive statistical methods such as percentages and frequencies were used. These qualitative revelations were applied to enhance the quantitative results and offer a more profound comprehension of the students' actual experiences.

**3. Result and Discussion**

***3.1. Socio-economic characteristics of suicide attempter university students***

To study regarding suicide or suicide attempt, it is essential to know the socio-economic characteristics of the suicide attempters and their family. Socio-economic characteristics such as age, gender, family type, year of study, relationship status, religion, household areas, residential category, overall household income, and many more are discussed in the following sections.

**3.1.1 Age distribution of suicide attempters**

According to the findings of several research on suicide, there are clear relationships between the age of those who attempt suicide and their level of maturity. The lower age requirement for participation in this study was 17 years because, according to the rules of admission in Bangladeshi universities, it is mandatory for a student to pass the minimum higher secondary level of education, and usually no one gets admission to the university before the age of 17 years which covers at least completion of higher secondary level. Although most Bangladeshi universities have no upper age limit, a maximum age of 29 years has been taken into consideration because some university students may not complete their graduation or post-graduation on time. In such cases, the age may be up to 29 years. Present study found that (Figure 1), majority of the suicide attempters 75.5% fall under the age group of 21-24. Just 12.5% and 12% are in 17-20 and above 24 years groups respectively.

Figure 1: Age distribution of suicide attempters

**3.1.2 Gender distribution of suicide attempters**

Here, the target population was all the students who had attempted suicide at the different universities in Sylhet City. So, the entire population was divided into male and female participants. Figure 2 portrays that among all respondent females were 54.5% and males were 45.5%. It indicates that females attempt suicide to greater proportion than males.

Figure 2: Gender distribution of suicide attempters

**3.1.3 Religion of the Respondents**

Religion is an organized and unified set of attitudes, actions, and standards founded on fundamental societal requirements and ideals. Religion influences the demographic processes that shape society and affect mortality patterns. Therefore, strict religious rituals may act as another important socio-demographic determinant in attempting suicide from the perspective of Bangladesh. The results of the present study show that (Figure 3), in terms of religion, Muslims make up the largest percentage of suicide attempters (73%), followed by Hindus (26.5%). Buddhism is the least significant, accounting for only 0.5%.

Figure 3: Religion of suicide attempters

**3.1.4 Year of study of the suicide attempter**

The steps of conveying or learning general and advanced knowledge, growing one's capacity for logic and judgment, and generally putting oneself or others in a position to advance intellectually are all included in the year of study. Making the right decision is made easier with its assistance, and it modifies people's perspectives to make them more logical. But the possibility also brings with it a huge increase in challenges. It appeared from figure 4 that fourth-year students attempted suicide significantly more which was 28.5% compared to first-year students 19.0%, second-year students 17.0%, and third-year students 24.0%.

Figure 4: Year of study of the suicide attempter

**3.1.5 Relationship status of the respondents**

The link between relationship status and suicide is well-documented. Therefore, another essential socio-demographic variable was considered the relationship status of the sample respondents. Figure 5 depicted that most of the suicide attempters were single or unmarried, which was 59.0%. So, there is a significant correlation between being single and attempting suicide.

Figure 5: Relationship status of the respondents

**3.1.6 Household Area of the Respondents**

In this study, the researcher divided the household locations into two categories: urban and rural. In contrast to metropolitan areas, rural or somewhat underdeveloped areas essentially lack development activity. In comparison to these kinds of rural settings, urban areas have far better educational and medical facilities. Therefore, it was essential to comprehend the precise type of environment they were residing in. It is evident that (from Figure 6) 73.5% of recipients, which was two-thirds of the population, lived in rural areas and lacked various facilities while only 26.5% of the surveyed population lived in urban areas.

Figure 6: Household Area of the Respondents

**3.1.7 Working status of the respondents beside their study**

In most cases, necessary expenses for university studies are borne by the student's family. But many of them choose different professions along with their studies in the hope of earning some extra money due to financial instability or being self-reliant. In this study, some students were found to be involved in five types of professions, such as tuition, project work, part-time jobs, freelancing, and online business.

Table 1: Percentage distribution of the respondents by working status

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Items** | **Recipients** | | **Items** | **Recipients** | |
| **Working Status Categories** | **Frequency** | **Percentage (%)** | **Type of Work** | **Frequency** | **Percentage (%)** |
| Yes | 89 | 44.5 | Tuition | 71 | 79.78 |
| Project Work | 4 | 4.49 |
| Part Time Job | 2 | 2.25 |
| Freelancing | 7 | 7.86 |
| Online Business | 5 | 5.62 |
| No | 111 | 55.5 | Total | 89 | 100.0 |
| Total | 200 | 100.0 |

Source: Field Survey, 2023

Table 1 displays that more than half which was 55.5% of the total respondents were not involved in any kind of work besides their regular study. About 44.5% of students were involved with five different types of work. Among the 89 students who were engaged in extra works besides their study, the majority 79.78% were earning additional money by working as home tutors. Some students 7.86% were interested in freelancing as well. A number of students were bearing their family expenses by doing this extra work. There was no availability of soft loan system in the study areas.

**3.1.8 Family size and composition**

In this study, the families of sampled respondents were divided into three sizes: small (with 2 to 6 members), medium (with 7 to 10 members), and large (with more than 10 members). Present study (Figure 7) shows that the majority of recipient’s families were in the small category which indicates 86.5%, while only 10.5% and 3.0% were in the medium and large categories, respectively. Because most of the families from the targeted areas have modern family values that may affects the behavior of university students.

Figure 7: Family size and composition of the respondents

**3.1.9 Number of Siblings**

Sibling means one’s brother or sister and they must be the children of the same parents. In this study, the number of siblings is categorized into three groups: one, 2 to 4, and above 4. This research exhibits that (Figure 8) the greater part which is 57% of suicidal students had more than four siblings, 39% had 2 to 4 siblings, and only 4% had one sibling. Having more siblings may be a significant indicator of attempting suicide.

Figure 8: Number of siblings

***3.2 Forms of Suicide Attempt of University Students***

In the present research we considered Emile Durkheim’s theory of suicide where four forms of suicide were identified. The forms were Egoistic, Altruistic, Anomic and Fatalistic (Durkheim, 1897). It is evident that the respondents fall on a single suicide category and there was no overlapping between the forms. The current study revealed that (in figure 9), highest 62.5% were attempted anomic form of suicide. Most of them attempted to kill themselves due to disorientation, aggressiveness, uncertainty, disillusionment, financial crisis and so on. Second highest portion of the attempted suicide 36% fall on egoistic form of suicide. Actually, they initiated because of loneliness, breakup of relationship etc. It is more damaging than the third form. Only 1.5% respondents adopted altruistic form of suicide. This least significant form was adopted by them because of any kind of chronic disorder like Thalassemia. There was no presence of fatalistic form of suicide from the selected study areas.

Figure 9: Forms of suicide

**4. Conclusion**

Suicide attempts have increased drastically in recent years around the world, particularly among young adults in South Asian countries like Bangladesh. It is a rising problem in public health related issues. It has a negative effect on the advancement of any country. It is clear that suicide attempt has a considerable correlation between the respondents' age, year of study, family size, and number of siblings, relationship status, religion, and financial dependence on their family. Etc. Thus, the goal of this study is to determine the socioeconomic traits of university students who attempt suicide. The results' consistency contributes much-needed clarity to our knowledge of the relationship between family and personal background and early suicide attempts. The age group of 17 to 29 years old has a greater tendency of suicide or suicide attempt. In terms of religion, the majority of responders identify as Muslims. Compared to other students, third- and final-year students are more suicidal. The vast majority of them originated from rural regions which come with a lot of challenges, such as inadequate child care and financial difficulties. These depress people and make them more likely to attempt suicide. Earnings from family members were the main source of funding for living expenditures. In addition, a few of them were earning money by working as home tutors, running online businesses, and doing several other things. Additionally, the study found that the majority of responders committed anomic suicide. They tried egoistic suicide in considerable numbers. There were fewer attempts at altruistic suicide and none of the fatalistic types. It has been demonstrated that tracking down a suicidal person is challenging but not impossible. This undesired occurrence may be stopped with the aid of family members who provide appropriate support and care, university authorities who ensure counselling and mentorship, physicians who provide the required professional assistance, and the improvement of the self-esteem of those who are suicidal. Last but not least, the socio-economic traits of suicide attempters and the types of suicide attempts they make may be useful in determining the reasons why university students and other similar age groups attempt suicide.

**5. References**

Raschke, N., Mohsenpour, A., Aschentrup, L., Fischer, F., & Wrona, K. J. (2022). Socioeconomic factors associated with suicidal behaviors in South Korea: systematic review on the current state of evidence. *BMC Public Health*, *22*(1), 129.

Bala, S., Hasan, A. T., Jewel, Z. A., & Sarker, P. (2020). Suicidal ideation percentage among university students in Bangladesh. *International Journal of Emergency Mental Health and Human Resilience*, *22*(3), 50-54.

Rasheduzzaman, M., Al-Mamun, F., Hosen, I., Akter, T., Hossain, M., Griffiths, M. D., & Mamun, M. A. (2022). Suicidal behaviors among Bangladeshi university students: Prevalence and risk factors. *PLoS one*, *17*(1), e0262006.

Mamun, M. A., Hossain, M. S., & Griffiths, M. D. (2022). Mental health problems and associated predictors among Bangladeshi students. *International Journal of Mental Health and Addiction*, *20*(2), 657-671.

Madigan, A., & Daly, M. (2023). Socioeconomic status and depressive symptoms and suicidality: The role of subjective social status. *Journal of Affective Disorders, 326*, 36–43. <https://doi.org/10.1016/j.jad.2023.02.024>

Kosaraju, S. K. M., Vadlamani, L. N., Bashir, M. S. M., Kalasapati, L. K., Rao, G. C., & Rao, G. P. (2015). Risk factors for suicidal attempts among lower socioeconomic rural population of Telangana region. *Indian journal of psychological medicine*, *37*(1), 30-35.

Stack, S. (2021). Contributing factors to suicide: Political, social, cultural and economic. *Preventive medicine*, *152*, 106498.

Ziapour, A., Chirico, F., Nucera, G., Soltanipour, S., Moradgholi, A., Lebni, J. Y., ... & Garosi, V. H. (2023). Suicide attempts, suicide and their association with socio-demographic variables in Iran: A retrospective, registry-based, cohort study (2016–2021). *Disaster and Emergency Medicine Journal*, *8*(1), 27-32.

Arafat, S. Y., & Saleem, T. (2025). Suicide in Bangladesh: An Ecological Systems Analysis. *Brain and Behavior*, *15*(1), e70233.

Challagundla, M. K., Vinnakota, D., Rahman, Q. M., Bai, A. C. M., & Kabir, R. (2024). Exploring Risk Factors of Suicidal Behaviour among Medical Professionals in the UK: A Retrospective Analysis of Online News Portals. *Advances in Research*, *25*(4), 78–86.

World Health Organization. 2014. “ Preventing Suicide: A Global Imperative.” [https://www.who.int/publications/i/item/9789](https://www.who.int/publications/i/item/9789241564779)

World Health Organization. 2024. “ Suicide.” <https://www.who.int/news-room/fact-sheets/detail/suicide>.