

Time to reconsider suicide law



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by **CHONG SIOW ANN** ■
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With the spectre of an actual suicide looming, I respond by carrying out as detailed an assessment as possible. Then, I do what I can to prevent it from happening.

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As a psychiatrist, I have, every now and then, a patient who admits to making a recent suicide attempt. Such information invariably causes me a surge of anxiety.

With the spectre of an actual suicide looming, I respond by carrying out as detailed an assessment as possible. Then, I do what I can to prevent it from happening.

In my case, however, this almost never includes cautioning my patients that they have committed a crime. It doesn't seem appropriate or even right.

And just occasionally, I wonder - at the back of mind (poorly schooled in legal matters) - if I would be considered an accessory to a crime for not reporting it to the authorities.

Criminalisation of suicide

Enshrined Section 309, which makes an act of attempted suicide punishable with a year's jail sentence, a fine, or both.

This provision, which is a legacy of British colonial laws, has its roots in Christian theology. In the 4th century, St Augustine denounced suicide as a mortal sin.

He did this apparently to staunch the wave of Christians who were killing themselves because of religious persecution.

He justified his position by basing it on an interpretation of the 6th biblical commandment - Thou shalt not kill. Killing oneself, St Augustine argued, was also killing the "image of God" since the Bible said that men were created in God's image.

This led to draconian laws against suicidal acts, reaching their peak in the Middle Ages when the corpse of one who committed suicide would be mutilated, and his property confiscated by the state.

With time, however, there was a gradual shift in public perceptions. Religion lost its predominant and central role in Western societies which became more secularised.

A more philosophical and intellectual view of suicide softened the hardline religious stance, and suicide was seen less as a sin and more a social or medical problem.

Many countries also began to decriminalise suicide. But there are still a number of countries, including Malaysia and Singapore, where attempted suicide is still a crime.

Polemics of suicide laws

There are a number of arguments in favour of the law. An anti-suicide law might be seen as a demonstration of a society's emphasis on the sanctity and inviolability of human life.

A less lofty but utilitarian reason is that a human life also has economic value: Governments have invested in their citizens through the provision of education, security and other social goods. A suicide, therefore, represents a loss of an investment. Suicide might also be viewed as a selfish act that hurts loved ones.

An attendant fear is that we might be led to that "slippery slope" towards legalising euthanasia and assisted suicide.

There are, however, specific laws in Singapore that make the abetting of suicide a crime. Britain has decriminalised suicide and suicide attempts, but it is still an offence to assist another person to die by suicide.

This situation regarding abetting has prompted the parliamentary undersecretary for justice of the British government to comment on the "unusual nature of the offence". It is something that carries "accessory liability in respect of something that is not of itself criminal".

Early this year, Ms Corinna Lim, the executive director of the Association of Women for Action and Research (Aware), and Ms Porsche Poh, executive director of Silver Ribbon Singapore, argued for the decriminalisation of attempted suicide in Singapore.

In an article on the Aware website, they commented that while most arrests for attempted suicide do not lead to criminal charges, the whole police procedure is "traumatising" for the person concerned and might "aggravate distress by adding a sense of grievance towards the legal system".

And if someone were truly contemplating suicide, this law might possibly make such a person even more resolute, encouraging them to resort to an even more lethal method.

They also noted that even if this law were abolished, there is the extant Mental Health (Care and Treatment) Act, which would still empower the police to ensure that those who harm themselves would receive medical treatment. (The person concerned, however, must, in the wording of this law, be "reported to be of unsound mind" and "believed to be dangerous to himself or other persons by reason of unsoundness of mind".)

For some who try to harm themselves, such acts might be impulsive. For others, they might be an inchoate means of getting attention. Research in many countries has found that more than 90 per cent of those who committed suicide suffered from mental illness at the time of their deaths. In fact, major depression occurred in about 60 per cent to 70 per cent of cases.

Most, therefore, needed some form of help. The risk of legal sanction, it has been argued, may make it even more daunting for suicidal individuals to receive the necessary assistance.

Helping the suicidal person

Very few cases of attempted suicide actually reach the courts. If hospitalised, the people concerned would most probably be referred to a psychiatrist for an assessment.

The police ask the psychiatrist for a report, and most - as I have done on numerous occasions - invariably write a sympathetic assessment. The police then issue a warning and no further action is taken.

It is difficult to know for sure if this law has the desired deterrent effect - it remains very much a postulate.

Trend analyses of suicide rates in countries following decriminalisation have given mixed results. There were no increases in Canada and New Zealand (in the five years following abolition of the law as compared with the five years prior).

But, in a separate analysis where these two countries were grouped with England, Wales, Ireland, Hong Kong and Sweden, there was an increase in the average rate of all seven territories.

It was noted, however, that the rate was already increasing in Sweden even before the law was dismantled. This is not surprising.

If anything, it underscores the extreme complexity of suicide. There are a myriad of factors that push people to take their own lives, including those that are unique to that person.

There is also that array of external and societal stressors that differ in time and place. They all interact in very complex ways. Reducing suicide obviously requires more than the law.

It requires a concerted effort of multiple initiatives involving all segments of society, which is why some countries have a national suicide prevention plan.

"The moral test of government," said American statesman Hubert H. Humphrey, "is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life, the sick, the needy and the handicapped."

Many of those who kill themselves, or attempt to do so, are either in the dawn, twilight or shadows of life. And that may be the nub of the matter. It is about how we as a

society, with our intelligence, sensibilities and decency, respond to them and to a law that has, perhaps, become an anachronism.