We are IntechOpen, the world's leading publisher of Open Access books Built by scientists, for scientists

6,900

185,000

200M

Downloads

154
Countries delivered to

Our authors are among the

 $\mathsf{TOP}\:1\%$

most cited scientists

12.2%

Contributors from top 500 universities



WEB OF SCIENCE

Selection of our books indexed in the Book Citation Index in Web of Science™ Core Collection (BKCI)

Interested in publishing with us? Contact book.department@intechopen.com

Numbers displayed above are based on latest data collected.

For more information visit www.intechopen.com



Chapter

The Fallacy of Happiness: A Psychological Investigation of Suicide among Successful People

Nishi Misra and Shobhna Srivastava

Abstract

There are three feelings that prompt a person to take their life: hopelessness, helplessness and worthlessness. Studies have found that the risk of suicide increases with decreasing happiness. In the recent past, people have been left clueless when celebrities and successful people ended their lives despite appearing overtly happy. What prompted them to do so? Modern society today highlights the importance of success over failure. Although we are motivated to be successful in life, it should not become our main gauge of happiness. In the same way we should not let success be our main goal in life and get discouraged by failure. Happiness has been viewed in two ways: as concerning the well-being of a person, and as the opposite of depression. Each one of us has different ways of measuring happiness. The quality of one's happiness depends on one's priorities in life. Happiness is not merely something that can be quantified with how much success and failure one has because such metric is very much subjective. How do we prevent a young life from extinguishing? How do we identify suicidal behavior among successful people and help those around? The present chapter covers the possible reasons why successful people commit suicide. Role of media in preventing suicide and measures for preventing suicide by successful people has been discussed.

Keywords: Happiness, Successful, Suicidal Behavior, Depression, Suicide Prevention

1. Introduction

Is success synonymous with happiness? If that was so, why would the rich, talented, admired, and successful people, whom we regard as heroes, die by suicide? It is difficult for us to believe that such popular and successful people cannot have a happy life. The tragic death of Cafe Coffee Day founder VG Siddhartha who made us believe that "A lot can happen over coffee" and the deaths of Robin Williams, Chester Bennington, Anthony Bourdain and Kate Spade in the West are high-profile examples of the fact that success and happiness are not synonymous. There is a widely prevalent myth that "Successful people don't commit suicide". The truth is not so. On the contrary, history is replete with examples of some of the most successful people committing suicide, both in Eastern and Western societies. Due to the stigma attached to depression, or seeking help during troubled times; such people often keep thoughts of suicide to themselves.

The year 2020 has seen a spike in suicide cases by celebrities/successful people in India in addition to COVID that has hit the headlines. High profile stars such as

Sushant Singh Rajput, character actor Asif Basra, actor Kushal Punjabi, Sushant's manager Disha Salian, television actor Samir Sharma, Indian TV actress Preksha Mehta and Sejal Sharma, TV actor Susheel Gowda and Tamil actress Chitra succumbed to suicide, leaving us wondering "what could have gone wrong in their lives that prompted them to take this extreme step"? These stars who seem to lead insular and isolated lives were not coping too well in a year marked by pandemic-induced lockdown and substantial loss of work due to the halt in film shootings.

Deaths of celebrities have also been there in the past like that of legendry actor Guru Dutt in the year 1964, film maker Manmohan Desai in 1994, model-turned actress Kuljeet Randhawa in 2006, film actress Jiah Khan in 2013, popular TV actress Partyusha Banerjee in 2016, and many more. A person may be extremely successful, rich and popular, and yet harbor demons like extreme anxiety and depression inside them. On the other hand, an ordinary man who is poor, may be a very happy person.

Showbiz is the field of glamor and people who are associated with this field are celebrities. While some succeed, others fail and those who are unable to cope up with the failure end their lives. Ten common factors that lead a person to undertake this act as pointed out by Shneidman are: I. The common purpose of suicide is to seek a solution. II. The common goal is cessation of consciousness. III. The common stimulus is intolerable psychological pain. IV. The common stressor is frustrated psychological needs. V. The common emotion is hopelessness-helplessness. VI. The common cognitive state is ambivalence. VII. The common perceptual state is constriction. VIII. The common action is egression. IX. The common interpersonal act in suicide is communication of intention. X. The common consistency in suicide is with lifelong coping patterns [1].

The NCRB report titled 'Accidental Deaths and Suicides in India 2019' [2], shows that of the total 1.39 lakh 2019 suicides, 93,061 were young adults (18–45 years). World statistics show that more men than women commit suicide while more women than men attempt suicide. However, the suicides in Indian film and television break this belief where more number of women, rather than men, commit suicide. This may be because women in the industry are expected to break the moral codes of how a woman should behave at work, in private life and in relationships. This leads to onset of gossip and social stigma that tends to attach to the families they come from.

1.1 The science of happiness

Happiness can be understood as a subjective, positive emotional state that people desire to sustain. Philosophic literature across cultures is replete with propositions, that happiness is the very purpose of human life. This dogma seems to have a universal acceptance; however, there have been diverse ideologies on how to attain it.

Is there a science behind this subjective and abstract feeling? Evolution biologists believe that mankind progressed beyond primitive survival needs as human brain evolved structurally. The growth of the orbitofrontal cortex, vastly helped the humans to experience and identify complex emotions. Sophisticated brain structures allowed humans to advance from nomadic existence to civilization, from hunting to agriculture and from concrete plans to abstract ideas. At the pinnacle of evolution, our brain has the capacity to create mirthful experiences that actually do not have concrete existence (not psychosis).

Early philosophers like Plato introduced the concept of hedonia (pleasure) and eudaimonia (happiness, welfare). Pleasure has been understood as a fleeting experience while happiness is an enduring feeling that can be cultivated and sustained. Happiness goes beyond the 'pleasure principle' of Sigmund Freud and the 'private events' of B.F Skinner. Contemporary Psychologist, Martin Seligman [3], in his

book "Authentic Happiness", gave a formula for happiness. H = S + C + V, where (H) stands for happiness. It is the sum of three factors: one's genetic set-range for happiness (S), their life circumstances (C), and factors under their voluntary control (V). The genetic set range refers to the fixed 'average' level of happiness around which our day-to-day happiness varies. The life circumstances are the external conditions (physiological, psychological needs). The third determinant (V) has received equal deliberation from scientists and religious buffs, because, voluntary control can be subjected to augmentation and strengthening. People can rewire their thinking mechanism and can create happiness for themselves, even during unfavorable circumstances.

Stephen Hawkins [4], when asked about his motor neuron disease said "I'm happier now than before I developed the condition. I am lucky to be working in theoretical physics, one of the few areas in which disability is not a serious handicap." However bad life may seem," he explained, "there is always something you can do, and succeed at." There are numerous examples of people, who overcome hardships and created a fulfilling life for themselves, their definition of happiness rose from the limitations of their genetic makeup and their life circumstances. Mihaly Csikszentmihalyi [5], a proponent of Positive Psychology, called this the 'flow'. It is a state where people souse themselves in the process of doing a task, which is challenging but closely matched to their ability. It is effortless and joyful. Happiness is created when sensory pleasures lead to something more meaningful and lasting. Altruism and Gratitude have been closely linked to this feeling of sustained happiness. Seligman in a research found that people experienced improved affective states from activities of kindness and gratitude. So Seligman's (V) is real, it does not stem out of detachment or aloofness, rather from honing on one's strength and engaging in mindful and meaningful activities like helping others, living a life of gratitude and engaging in kindness.

Now the question arises that is it possible for us mere mortals to relish this constant state of happiness. No cultural ideology claims to be an expert on all realms of human existence, but they have all mentioned something about how to attain bliss. They all believe that as humans all of us have selfish carnal instincts, that need to be acknowledged and worked upon, like Maslow's hierarchy of needs they need to be addressed before moving on to higher goals of self actualization. Once the fundamental needs have been realized, the focus should shift from deficit to sufficiency, where we can find and work on our strengths and utilize them for a larger good. Happiness is created when one learns to appreciate the gift of health, if he has been given one. Engaging in physical exercises is a way of expressing gratitude towards the brilliant machine, that all of us have; our body. Humans were not created to exist in a social vacuum, we find happiness when we create meaningful and lasting relationship, when we mindfully engage in transitions that are devoid of selfishness and we draw on each other's strengths. Experiencing Gratitude has unanimously emerged as one of the powerful tools to attain bliss. Researches [6] have shown that one can attain happiness not only by being thankful for they currently have but also for what they envision for themselves. In order to create a happy world, the change has to happen at an individual level, where we strive to become a better version of ourselves. Happiness is not a destination that one has to reach; it is a journey that has to be embarked upon, with a vision that new learning and discoveries will be made every day. There would be frustrations and failures, but the journey would continue.

1.2 Happiness suicide paradox

There is a connection between suicide and happiness which is still not resolved. Suicide has been regarded as an act of extreme unhappiness. It has been seen that

generally people who commit suicide are very unhappy. A look at the world happiness report shows the presence of a happiness paradox with happier countries being more suicidal. It has been found that some countries that have high rankings in terms of happiness have the highest suicide rates. The World Happiness Report [7] has shown Finland and Denmark as the happiest countries. There seems to be quite a strong correlation between the score given in the World Happiness Report and suicide rates, with the "happiest" countries, on average, having a suicide rate of over twice as much as the least happy countries. Many "unhappy" countries have a low number of suicides and many "happy" countries have a high number [8]. Finland, a country that has been ranked as the "Happiest Country" for two years in a row, has a suicide rate of 15.9. In the 2016 Report Peru was ranked 63rd happiest nation but had a suicide rate of 4.9, Austria had a suicide rate of 15.6 and the United States a rate of 15.3. On the contrary, Syria, a country that had been in civil war for five years, had a low suicide rate of 1.9.

Thus, the presence of a high happiness score and a high suicide rate is not necessarily contradictory. One may reason as to how can these countries be so much "happier" (and richer) and yet have significantly higher rates of suicide? Some economists [9, 10] believe that self-reported life satisfaction, which is regarded as 'happiness' refers to the success of a society. They refute the existence of a paradox and say that the same factors that promote happiness, like high income, marriage, good health – also inhibit suicide.

Daly, Oswald, Wilson, Wu, 2011 [11] believe that the decision to commit suicide is influenced by relative comparisons. It may be said in different words that "people may find it particularly painful to be unhappy in a happy place". Experiencing depression when one is healthy and experiencing depression when one is poor can be two different experiences.

People of poorer, less happy countries might not be committing suicide because they have hope for a better, richer future. On the contrary, people residing in wealthy countries feel depressed. People who are born in a poor country say that any problem that one has would be solved if one had more money or better opportunities. If one is from a wealthy country and feels that he is a failure, if he feels that there is no place in this world that is right for him, what options does he have? The solutions are not nearly as simple.

What about the other factors that affect suicide and life satisfaction? Some match up, but more do not. Women have slightly higher life satisfaction than men, but much lower suicide rates. Blacks have slightly lower life evaluation than whites, but much lower suicide rates. Married people are more satisfied and are less likely to kill themselves, but while divorce strongly predicts suicide, it has a relatively modest effect on life satisfaction. Widowhood raises suicide among men but reduces it among women. Taking these and other factors (such as education) together, there are indeed matches but also many contradictions. Except for these long-term trends, in reality, life satisfaction and suicide do not have much to do with one another. Empirical connections [12] between suicide and happiness have been examined by looking at the connection of each with seven standard demographic characteristics. They are sex, age, race, parental status, marital status, religiosity and employment status. Findings indicate that marital status, religiosity and employment status have a (predicted) similar effect on suicide and happiness. Parenthood has an unclear relationship with suicide and happiness. Finally, sex, age and race have dissimilar effects on suicide and happiness. On the basis of this preliminary analysis, it would be impossible to conclude that happiness and suicide are closely (if inversely) related. First, there is the chance that suicides or happiness levels have been systematically misreported. Second, there may be a problem with mixing together happiness and satisfaction. Third, there may be a problem with the

independent variables chosen. In case different independent variables were chosen, the results would have been different.

More than 40 years ago, three psychologists published a study titled, "Lottery Winners and Accident Victims: Is Happiness Relative?" [13]. The authors surveyed lottery winners and accident victims, plus a control group, in order to compare their levels of happiness. It was found that the victims, while less happy than the controls, still rated themselves above average in happiness, even though their accidents had recently rendered them all either paraplegic or quadriplegic. And the lottery winners were no happier than the controls. Talking to friends, hearing jokes, having breakfast — all of these simple pleasures now left them less satisfied than before. The takeaway being, "Money doesn't buy you happiness". Generally, suicide is not significantly related to life satisfaction; or negative affect, or positive social emotion, but significantly negatively related to positive self-emotion, or positive interpersonal emotion.

"There are three feelings that prompt a person to gradually want to take their life - hopelessness, helplessness and worthlessness." Worthlessness makes a person feel like they are good for nothing, helplessness makes them believe that there is nothing or no one out there who can help them, and hopelessness makes them feel like they have nothing to look forward to.

Most successful people overtly appear to be very happy as they have everything: a great job, happy family, good social life, a beautiful home. From the outside veneer we say that they are doing a great job and their life is wonderful. But we really are unaware about their covert world. The concept, "Pennface" is applicable on them which means "Look cool, calm, fit and smart on the outside while struggling like hell on the inside." The term "smiling depression" – appearing happy to others while internally suffering depressive symptoms –also applies on them.

2. Why do successful people commit suicide?

Suicide reflects our limitations as a society towards maintaining mental health and well-being. The psychological process underlying any suicide is complex and there is no single event that can be labeled as its cause. A person with no clinical mental health issues could be suicidal and a depressed or mentally stressed person may not be so. The emotional pain that is experienced is common to all cases. Many of these individuals suppress emotional pain or stress, instead of facing it or accepting it. They use the avoidance strategy or may use such coping methods as drug abuse, alcohol abuse, self-harm, binge eating/starving and the like. They consider the step of ending their lives as the last resort.

No single factor can be attributed to suicidal behavior. A combination of physical and mental health issues, relationship problems, job stress, financial stress, legal hassles and domestic problems — especially if combined with substance use — can increase a person's risk for suicide. It has been found that more than half of successful people who died by suicide did not have a known, diagnosed mental health condition at the time of death. However, some common factors that may be considered responsible for a successful person taking this extreme step are:

2.1 Pressure to be perfect/perfectionism

Perfectionism, or the tendency to hold oneself to consistently impossible standards and/or feeling the need to meet or surpass the lofty expectations of others, may be attributed as one of the significant factor responsible for suicides among successful people.

According to Smith, 2017 [14] perfectionism is associated with "intense psychological pain". Perfectionists have a "harsh way of relating to a self they find deficient". Their lives are typically stressful and they often have a "prickly, conflictual style of relating to others," leaving them isolated and lacking support. Such people feel that whatever they do, it can be done better. They are unable to tolerate poor results as they are used to success. Since successful people are always in the public eye; they are constantly under pressure to perform and stay relevant. Sidney Blatt (1995) [15] highlighted the apparent link between perfectionism and suicide in an influential article for *American Psychologist* titled "The Destructiveness of Perfectionism" in which he profiled three highly talented, ambitious but harshly self-critical individuals all of whom took their own lives: Vincent Foster, a deputy counsel to President Bill Clinton; writer, singer and broadcaster Alasdair Clayre; and athlete and scholar Roger D Hansen.

In order to maintain a personal and public image of strength and perfection, such people are constantly trying to prove themselves. They feel vulnerable to any possible implication of failure, and are unable to share their anguish with others. The most pernicious form of perfectionism leading to suicidal thoughts is feeling the weight of meeting other people's expectations. More research studies with diverse groups are however needed to establish the link between perfectionism and suicide.

2.2 Isolation, superficial relationships

Existential isolation and loneliness both independently predict depression and suicide ideation, as well as interact to predict greater depression, such that those who are both existentially isolated and lonely report the greatest depression [16]. "Suicide is a crime of loneliness, and adulated people can be frighteningly alone. Intelligence does not help in these circumstances; brilliance is almost always profoundly isolating" [17].

The busy work schedule and commitments at workplace of successful people make it difficult for them to maintain friendships, marriages, relationships. It is all superficial because of which they have no close friend whom they can trust. They find themselves alone and isolated on an island of recognition. Rockwell & Giles [18] investigated the experience of being famous through a series of in-depth interviews of famous celebrities in various societal categories: government, law, business, publishing, sports, music, film, television news and entertainment. The study found that in relation to self, being famous leads to loss of privacy, entitization, demanding expectations, gratification of ego needs, and symbolic immortality. According to Reichmann [19], the emotional isolation is a screaming, desperate need to connect, to be understood, even when surrounded by people. Every human being has a need for social connection. The reluctance to seek help of a mental health professional when needed is rampant in the highly educated and successful people.

2.3 Inability to handle failure

Successful people set high standards or benchmarks that push them further and further into a sense of inadequacy at some level. Not only have failures happened at work but in personal life too. They are unable to accept rejection and do not have the practice to wait for some time to recover. The suicide of 17-year-old wrestler Ritika Phogat from India shook the nation. She took the drastic decision after her inability to take her loss in the finals of a tournament. Achieving success makes them put themselves through needless pressure or contemplate suicidewhen they are unable

to do so. Rihmer & Benazzi [20] reported that personality traits like emotional instability, impulsivity, fragility and identity disturbance plus a fragile state of mind make one crumble under pressure. While growing up, such individuals are constantly pushed to excel. They are initially compared with their siblings, fellow mates and sometimes even their relatives from other generations' on a regular basis. This makes them want to try to always win. Given their best, on encountering failure they feel that they have nothing more left to give, they may feel hopeless about their future life, doubt their capacity to overcome adversities and feel that taking their own life is the only way out.

2.4 Feelings of insecurity

Insecurities are related to the standards set by the people we interact with, such as our family, friends, peers and society. They occur when we feel that we do not measure up to where we "should" be. This may lead to low self-esteem, experience of body image issues, feeling of lack of direction in life, or feeling overlooked by others. Some of these celebrities may have a childhood where parents have been too pushing in order to fulfill their desire for success. In adulthood, significant others drive them to excel, which may not match the desires/goals of the individual. Such individuals do not appear insecure overtly but may fear abandonment and doubt their own ability to form lasting relationships with others [21]. According to Judi Cinéas, these people lose their right to everyday human emotions. The high performers are under great pressure to continue to excel. The higher they are, the greater the pressure to keep excelling. They are under continuous threat to be above others who are lined up with them. Facing this tough competition is a source of stress for them which affects their mental health to a great extent.

2.5 Domestic issues/compatibility issues/lack of trust

Poor marital relationships and other forms of failed companionship, broken homes, financial losses and domestic abuse are likely to increase the emotional pain leading to suicides. "Recent data from NCRB reflects the anomie our society is facing in dealing with this most sensitive part of human lives. Difficulty coping with failed relationships like break up, divorce and the like is forcing people to take this as the last step [22]. Among the several reasons pointed out by experts, lack of communication, lack of empathy, impulsivity and even technology are to be blamed. "Certain personality traits along with the upbringing styles that make people prone to develop low frustration tolerance, impulsivity, conformity/comparison—are the major reasons that relationship issues are getting difficult to handle for people today" [23]. Lack or loss of trust is one of the most harmful contagions to a couple's long-term success [24]. Trust issues may include factors such as jealousy, possessiveness, unreasonable rigidity, emotional infidelity, physical/sexual infidelity, relational game playing, lack of reliability and dependability and lack of emotional support [25].

2.6 Slump during COVID pandemic

During the pandemic job losses have sky rocketed and people have been confined to their homes leading to isolation and heightened feeling of isolation. The sustained economic stress caused by the slump has resulted in job losses for many people resulting in suicidal thoughts. The prolonged financial and personal stress caused by the pandemic has increased the risk of suicide by creating a "perfect storm", especially for those who are suffering from depression and anxiety [26].

Celebrities (film actor and actress) have gone through enormous challenges during this pandemic due to loss of employment, cancelation of contracts, loss of public identity, life-style limitations, boredom, etc., which may attribute to stress and suicidal behavior. As per the media reports, several Indian celebrities committed suicide during this COVID-19 pandemic.

2.7 Psychopathology/mental illness

Jamison [27] says that the most common element in suicide is psychopathology or mental illness like mood disorders, schizophrenia, borderline and antisocial personality disorders, alcoholism and drug abuse. Coryell & Young [28] found that almost two thirds of suicide attempters and completers have (mostly untreated) major depressive episodes at the time of the suicidal act. People with, unipolar major depressive disorder (MDD) and bipolar disorder type I and type II (BPD-I, BPD-II) are highly vulnerable to suicidal behavior. Individuals with BPD are 30 times more likely to attempt suicide than those with no psychiatric disorder [29, 30]. Many individuals who are suffering from depression and manic depressive illness are able to manage their lives between episodes of their illness. The combination of symptoms like depressed mood, coupled with morbid thinking, disturbed sleep, heavy drinking are found leading to suicide. Mental health needs of celebrities are complex, often unaddressed due to different psychological concerns such as unwillingness to give up fame, mistrust, isolation, and character-splitting. These concerns could be the reason for the delay or lack of treatment-seeking behavior or supportive care despite being aware of the mental health problems. In addition, the published literature on the phenomenological analysis of fame among celebrities has reported that being famous leads to loss of privacy, expectations, symbolic immortality, and gratification of ego [18]. Depression is understood as a conglomeration of three negative schemas: negative view of self, negative view of world and negative view of others. Depression shatters the capacity. It reduces the flexibility of the mind to adapt making it more constricted and rigid because of which the individual resorts to alcohol and drug abuse. Stressful life events, early losses or trauma, medical problems, and even certain medications can trigger the onset of depression. Often it's a combination of these factors. No matter how successful one becomes, there are people who are doing better than you. This constant comparison to others can cause extreme feelings of failure even when one is super-successful. Always looking up the ladder is surely a self-destructive behavior. Such people become disconnected with the general population as their problems are not similar to the general population. Since work consumes their entire day, they begin defining themselves by their achievement at work and lose their self-identity. In case they encounter failure, they hold themselves responsible for it, discounting all their successes.

2.8 Inability to maintain work/life balance

The quest for success makes such people so busy that they ignore their life beyond work. There is a blurring between work and life which they are unable to balance adequately. This results in a heightened level of stress that spills over from work to personal life which they are unable to handle. A 24-year-old's death after working 105 overtime hours in one month caused Japan to rethink work-life balance. Accommodative coping strategies are generally helpful in dealing with personal failures, to achieve higher satisfaction at the end of the day [31]. Successful people, who are not able to use humor to insulate their private lives from their work lives and strike a good work-life balance, fall prey to suicidal ideations.

2.9 Social media tension

Use of social media platforms has increased drastically since the last few years. It has created virtual communities without physical borders [32]. Being at the forefront because of their achievements, successful people have their presence in social media which reflects their public image which they do not want to put under risk. They are trolled for any small thing they do. Any dent in that image creates a dent in their brand. In case the public image gets tarnished, it serves as a turning point in their lives for which they need to be strong enough.

3. Role of media in preventing suicide

In this age of infobesity or information explosion, we are presented with more information than our brains can process at a given time. It is overwhelming and can affect our judgment and decision making ability. This problem becomes more precarious, when incidents of suicide are reported in the media, with graphic details, that include pictures and videos of the crime scene, description of the method of suicide and content of the suicide note (Hawton & Williams) [33] (if any). All this adds to the grimness of the situation. In study by Pirkis and Blood [34], reporting and portrayal of suicidal behavior in the media may have potentially negative influences and facilitate suicidal acts by people exposed to such stimuli. Werther effect or copy cat suicide [35] has been used to describe the media induced emulation effects of suicidal behavior. On the contrary, *Papageno effect* or the influence that mass media can have by responsibly reporting on suicide and presenting non-suicide alternatives to any life crises is the need of the hour. The Papageno effect has been used by the media on various platforms for example; Live through this and Stories of hope and recovery, where suicide survivors share their experiences of finding a meaning in their life. In a study by Niederkrotenthaler et al. [36], it was concluded that the impact of suicide reporting may not be restricted to harmful effects; rather, coverage of positive coping in adverse circumstances, as covered in media items about suicidal ideation, may have protective effects. This leaves all the media platforms with a huge responsibility which can be fulfilled as under:

- a. Ethical and responsible reporting, which celebrates life rather than embellishing suicide. If the power of media is harnessed effectively, it can be used as a vital platform to promote and destigmatise mental health. Presenting simplistic explanations of suicide should be avoided. Suicide is never the result of a single factor or event. Thus the final precipitating event is not the only cause of suicide. Acknowledging the problems that could have played a causative role to be encouraged [27]. Alternative approaches for coverage of newsworthy suicide stories need to be discussed by media representatives. Glorifying of suicide is to be avoided to prevent the spread of suicide contagion.
- b. Utilization of Social media to identify people at risk of suicide, and provide them with help resources.
- c. Discussion on mental health issues that help the audience identify the symptoms of depression and anxiety can help in early recognition and prevention of any escalation [37].
- d.A warning to be accompanied along with the graphic and sensitive content on any media source. Unnecessary autopsy of any celebrity suicide should be completely avoided.

e. Programs that promote hope and rejuvenation should occupy prime time and news feed. The kind of engagement that the world currently has with media platforms, it can be potent tool towards better mental health, if used judiciously.

4. Prevention of suicide by successful people

The deaths of successful people by suicide reveals that they have something in common, they were bright and ambitious people, who were aiming big in life. It has been concluded however that success does not equal happiness. It left many wondering that if rich and successful are not immune to suicide then, who is? There are some ways which, if followed, is likely to contain this phenomenon to a great extent. They are to be followed at different levels, individual, group as well as societal. They are as under:

- a. Like Physical health, mental health has to be de-stigmatized [38] (reciprocal relationship). The talk about mental health should be incorporated into parenting and child rearing. It should be a part of the academic curriculum, on boarding process etc. so that it becomes a norm and not regarded as something skewed.
- b. Responsible media coverage of suicide wherein filtered dissemination of content via social media is done. Individuals to be mobilized to discuss mental health and reduce stigma.
- c. Life skills such as conflict resolution, decision making and problem solving should be taught early on in life. They help in building resilience, which is a protective trait against suicide.
- d.Google can act as a "gatekeeper" for individuals who seek suicide-related information online (e.g., "how to kill oneself"). The search engine displays a "suicide-prevention result" (SPR) at the very top of some suicide-related search results. This SPR comes as an info box and contains supposedly helpful crisis help information such as references to a telephone counseling service.
- e. Other Medical fraternities, should be sensitized about Mental Health, people are comfortable visiting a dermatologist or a sports medicine expert, rather than a psychiatrist or a psychologist. These professionals can act as a gateway for garnering mental health support.
- f. People can be taught to identify when they need help and support. Self help tools can be used before professional help is incorporated. (cognitive therapy)
- g. Crisis helplines become handy in times of need as they also help in protecting identity.
- h.Garnering peer support, where people genuinely take interest in your well being adds a layer of protection in difficult times.
- i. The understating that success does not make one infallible and seeking help in times of crisis can go a long way in the prevention of suicide.

5. Conclusions

The very act of suicide by successful people suggests that success and happiness are not synonymous terms but point to the presence of a paradox. History is replete with examples of successful people committing suicide. Success, fame and recognition does not create an impermeable wall around people, which cannot be permeated by distress and disease. The stigma around mental health affects them as well. The reluctance to seek help of a mental health professional when needed, is rampant in the highly educated and successful coterie.

There is no single reason which prompts a person to commit suicide. There are a host of factors in addition to mental illnesses like depression, bipolar disorder, borderline personality disorder, drug abuse and the like, making one more susceptible to take this extreme step. For preventing suicides by successful people, ethical and responsible reporting of suicide by media is needed. Promoting programs that encourage hope and rejuvenation and mobilize individuals to discuss mental health, use of crisis helplines and the like can help in preventing such suicides to a remarkable extent.

Conflict of interest

No conflict of interest.



1 Directorate of Public Interface, DRDO HQ, New Delhi, India

2 BCBA, University of Washington, USA

*Address all correspondence to: nishi.nishi067@gmail.com

IntechOpen

© 2021 The Author(s). Licensee IntechOpen. This chapter is distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/3.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. Co BY

References

- [1] Leenaars, A. (Ed.) Lives and deaths: Selections from the works of Edwin S. Shneidman. Philadelphia: Brunner/Mazel; 1999.
- [2] The NCRB. 'Accidental Deaths and Suicides in India, 53RD EDITION, 2019. (ncrb.gov.in/en/accidental-deaths-suicides-india-2019).
- [3] Seligman, M.E.P. Authentic Happiness: Using the New Positive Psychology to Realize Your Potential for Lasting Fulfillment. Simon and Schuster, 2004.
- [4] Hawkings, S. On Happiness and Expectation. April 30th, 2019.
- [5] Mihaly Csikszentmihalyi. Flow: The Psychology of Optimal Experience. Harper Perennial Modern Classics; 2008.
- [6] Stoerkel, E. The Science and Research on gratitude and Happiness, Positive psychology.com https://The Science and research on Gratitude and Happiness. (https://positivepsychology. com/gratitude-happiness research/)
- [7] World Happiness Report. Helliwell, J.F, Layard, R and Jeffrey, D. Sachs, 2019.
- [8] Graves, D. Happier Countries Are More Suicidal: A Look at the World Happiness Report and Suicide; 2019.
- [9] Layard, R. Happiness: Lessons from a new science. New York: Penguin; 2005.
- [10] Helliwell, J.F. Well-being and social capital. Does suicide pose a puzzle? Social Indicators Research. 2007; 81: 455-496.
- [11] Daly, M.C., Oswald, A.J., Wilson, D.J. Dark Contrasts: The Paradox of High Rates of Suicide in Happy Places. Journal of Economic Behaviour & Organisation. 2011; 80 (3): 1-22.

- [12] Weerasinghe, J., Tepperman, L. Suicide and happiness: Seven tests of the connection. *Soc Indic Res.* 1994; 32: 199-233.
- [13] Brickman, P, Coates, D., Janoff Bulman, R. Lottery winners and accident victims: is happiness relative? 1978; 36 (8): 917-927
- [14] Smith, M.M., Chen, S.S., Saklofske, D.H., Mushquash, C, Flett, G.L., Hewitt, P.L. The perniciousness of perfectionism: A meta-analytic review of the perfectionism–suicide relationship. Journal of Personality. 2017; 86(3):522-542.
- [15] Blatt, S.J. The destructiveness of perfectionism. Implications for the treatment of depression. American Psychologist. 1995; 50(12):1003-20.
- [16] Helm, P.J., Medrano, M.R., Allen, J.J.B. and Greenberg, J. Existential isolation, loneliness, depression, and suicide ideation in young adults. Journal of Social and Clinical Psychology; 39 (8):641-674.
- [17] Solomon, A. Suicide, a Crime of Loneliness. New Yorker, Aug 14, 2014
- [18] Rockwell, D & Giles, D.C. Being a Celebrity: A Phenomenology of Fame. Journal of Phenomenological Psychology. 2009; 40: 178-210.
- [19] Reichman, J.L. On the Psychopathology of Loneliness. The American Journal of Psychoanalysis. 1964; 24:153-166.
- [20] Rihmer, Z., Benazzi, F. Impact on suicidality of the borderline personality traits impulsivity and affective instability. Annals of Clinical Psychiatry, 2010; 22(2): 121-8.
- [21] Gigen Mammoser . Are We Heading Toward a Suicide Crisis in America?, June 13, 2018, Healthline.

- [22] Narayanan, J. Family problems leading reason for suicides, says NCRB data; experts call for 'accessible' mental health help. Indian Express, Feb 07, 2020.
- [23] Dr Rahul Bagle, consultant physiatrist, Columbia Asia Hospital, Pune *indianexpress.com*
- [24] Eberhart, A. Jealousy as a manifestation of insecurity, Munich, GRIN Verlag,2020. https://www.grin.com/document/962816
- [25] https://www.delraybeachpsychiatrist.com/couples-therapy-top-reasons relationships-fail/
- [26] Reger, M.A., Stanley, I.H., Joiner, T.E. Suicide Mortality and Coronavirus Disease 2019—A Perfect Storm? JAMA Psychiatry. 2020;77 (11):1093-1094.
- [27] Jamison, K.R. Night Falls Fast-Understanding Suicide. Vintage Books, New York, 1999.
- [28] Coryell, W., Young E.A. Clinical predictors of suicide in primary major depressive disorder. J Clin Psychiatry. 2005; 66:412-17.
- [29] Chen Y.W., Dilsaver, S.C. Lifetime rates of suicide attempts among subjects with bipolar and unipolar disorders relative to subjects with other Axis I disorders. Biol Psychiatry. 1996; 39:896-9.
- [30] Kessler, R.C., Borges, G., Walters, E.E. Prevalence of and risk factors for lifetime suicide attempts in the National Comorbidity Survey. Arch Gen Psychiatry. 1999;56:617-26.
- [31] Stoeber, J. & Janssen, D.P. Perfectionism and coping with daily failures: positive reframing helps achieve satisfaction at the end of the day, Anxiety, Stress & Coping, 2011, 24(5): 477-497

- [32] Luxton, D.D., June, J.D., Fairall, J.M. Social Media and Suicide: A Public Health Perspective. American Journal of Public Health. 2012; 102(Suppl 2): 195-200.
- [33] Hawton, K., & Williams, K. Influences of the media on suicide. *BMJ* (*Clinical research ed.*). 2002; 325(7377): 1374-1375.
- [34] Pirkis J, Blood RW. Suicide and the media: a critical review. Canberra: Commonwealth Department of Health and Aged Care; 2001.
- [35] Domaradzki J. The Werther Effect, the Papageno Effect or No Effect? A Literature Review. *International journal of environmental research and public health*. 2021; 18(5):2396.
- [36] Niederkrotenthaler, T., Voracek, M., Herberth, A., Till, B., Strauss, M., Etzersdorfer, E., Sonneck, G. Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *British Journal of Psychiatry*, 2010; 197(3): 234-243.
- [37] Brown GK, Ten Have T, Henriques GR, Xie SX, Hollander JE, Beck AT. Cognitive therapy for the prevention of suicide attempts: a randomized controlled trial. JAMA. 2005; 294:563-70.
- [38] Carpiniello B, Pinna F. The reciprocal relationship between suicidality and stigma. Front Psychiatry. 2017; 8:35.