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Commentary: Decriminalising attempted suicide in Singapore does not mean less help for vulnerable people

Attempted suicide was decriminalised as of Jan 1, 2020. The move is a welcome one that recognises it as a cry for help, rather than treat it as a crime.

SINGAPORE: If a loved one told you they wanted to take their own life, would your immediate reaction be to stop them from committing a crime?

That is unlikely to be the case for many of us but for the family of one 72-year-old woman who tried to kill herself in September last year, it must seem like an odd frame of reality they had to wrestle with.

Arrested by police officers for a case of attempted suicide, she was subsequently released with a formal warning.

Hers is not a story that you read about often - but it happened to hundreds here every year.

In 2015, 1,096 cases of attempted suicide were reported to the Singapore Police Force, out of which 837 people were arrested.

The stigma around suicide is etched in archaic societal thinking.

Even the phrase that someone had "committed" suicide is now frowned upon by charities working with survivors.

According to the Penal Code Reform Committee (PCRC), attempted suicide was made a crime in Singapore because it was thought that society should oppose people from taking their own lives.

A ONE-SIZE FITS ALL SOLUTION

For decades, the Penal Code was the medium to try to help people who attempted to kill themselves.

First responders to such incidents include police officers who carry out roles as enforcers of the law.

Survivors who spoke to charities AWARE and Silver Ribbon have shared tales of being handcuffed and put in holding cells.

Some were led away in front of their loved ones, or handcuffed to their hospital beds - in view of other patients or medical staff.

And after they were released, they had to go through investigations and other aspects of due process a crime would warrant.

Sometimes, that meant giving police statements, speaking to police officers, and experiencing everything that criminal suspects go through.

The penalties for attempted suicide were severe - a maximum of a year in jail and a fine of S\$10,000 or both. But only in a handful of cases (0.6 per cent on average every year) did arrests lead to prosecution. In most cases, they were given formal warnings.

For someone to reach a stage where they think about ending it all, experts have pointed out that being treated as a criminal might only make things worse.

In this context, brandishing incredibly low prosecution numbers to try to reassure them could do little for someone who has thought about taking their own life.

If a person is handcuffed, then put in a holding cell, would telling them that "prosecution is rare" have helped?

Decriminalising attempted suicide now allows survivors to focus on healing and recovery, with help from healthcare and social assistance systems, rather than worry about punitive actions.

As the World Health Organization (WHO) puts it: "Suicide is a complex issue and therefore suicide prevention efforts require coordination and collaboration among multiple sectors of society, including the health sector and other sectors such as education, labour, agriculture, business, justice, law, defense, politics, and the media.

"These efforts must be comprehensive and integrated as no single approach alone can make an impact on an issue as complex as suicide."

CAN POLICE OFFICERS STILL HELP PEOPLE?

The decriminalisation of suicide does not mean emergency services now have no recourse to stop suicide attempts.

The Penal Code Reform Committee, in its report that helped form the Criminal Law Reform Bill, recommended powers for police officers under the Police Force Act to stop suicide attempts.

In fact, NGOs AWARE and Silver Ribbon also want police officers to be trained to respond to a case of attempted suicide.

Survivors will not have to undergo the criminal investigation process but may still be referred to health and other support networks, rather than go through the criminal investigation process.

Treatment can also be made mandatory. The committee also recommended new legislation under the Mental Health (Care and Treatment) Act to allow courts to make that call, with advice from experts from various sectors – mental health, physical health, social support – before making its judgment.

This move takes that decision away from police officers, who can focus on law enforcement, rather than be bogged down with deciding what should be next for people who tried to take their own lives.

There are, rightly, concerns about mandatory treatment, but it should always be carefully considered. Senior Parliamentary Secretary for the Ministry of Home Affairs and Ministry of Health Amrin Amin told Parliament: "We will have to enforce the need to go for counselling and are likely to do so on the pain of punishment."

"Again, we are trying to move away in this area - from criminalisation to help. So we should tread carefully in this respect."

NUMBERS, NUMBERS?

Will discriminalisation lead to lower suicide rates? The jury is out on that.

According to a WHO study of 192 countries and states, suicide rates "tend to decline in countries after decriminalisation". The organisation adds that no data or case reports indicate that decriminalisation increases suicides.

However, there are studies that show the decriminalisation of suicide has led to an increase in the number of suicides.

Irrespective of whether discriminalisation impacts suicide rates, it is more productive to focus on the causes behind each case and aid each survivor.

Every suicide is a tragedy. Every suicide attempt is a cry for help.

In 2018, nearly 400 people in Singapore killed themselves. Nearly every age group saw an increase in the number of suicides.

Society needs to provide help, not the threat of punishment, to survivors.

Decriminalising attempted suicide also means we are forced to look for a more holistic approach - one that might involve mental health support, physical support, or social help – instead of thinking that deterrence can be effective prevention.

Source: CNA/el(sl)