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Social Anomie and Suicide Phenomenon in Nigeria: Lending Credence to the Voiceless Phenomenon

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Abstract- Suicide, is one of the socially undesirable phenomena across the globe. As such, the United Nations via the World Health Organization has recognized suicide as one of the health issues, requiring serious attention globally and domestically. Although there are statistical evidences about the understanding of the phenomenon and its prevalence world over, especially among the developed nations, much is left to be desired for among the developing nations in the understanding of the social antecedence of suicide and the sustainable mechanism to the phenomenon. Since the fundamental theoretical concept by Emile Durkheim, which has triggered unprecedented research on suicide, classification and identification of the social phenomenon responsible for suicide thought and action, is yet to be given a crystal distillation among the developing nations such as Nigeria. There are social indices facilitating suicide thought and actions, which are domicile with these nations according to Durkheim's classifications.

Keywords: suicide, egoistic suicide, altruistic suicide, anomic suicide, fatalistic suicide, social anomie.

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Abstract- Suicide, is one of the socially undesirable phenomena across the globe. As such, the United Nations via the World Health Organization has recognized suicide as one of the health issues, requiring serious attention globally and domestically. Although there are statistical evidences about the understanding of the phenomenon and its prevalence world over, especially among the developed nations, much is left to be desired for among the developing nations in the understanding of the social antecedence of suicide and the sustainable mechanism to the phenomenon. Since the fundamental theoretical concept by Emile Durkheim, which has triggered unprecedented research on suicide, classification and identification of the social phenomenon responsible for suicide thought and action, is yet to be given a crystal distillation among the developing nations such as Nigeria. There are social indices facilitating suicide thought and actions, which are domicile with these nations according to Durkheim's classifications. However, little attempt has been made in theoretically capturing these social indices and their current and future implications to the nations involved. As a matter of fact, Nigerian government over the years has included suicide in principle, as one of the socio-health policy issue, requiring some level of emergency but lacks theoretically sound policy approach. Having identified the existence of lacuna between policy intention and the understanding of the socioeconomic and political elements inducing suicide as they are present in the country's atmosphere, the present paper deals with the capturing of these elements in Durkheimian suicidological perspective for clear view and knowledge informed policy strategy.

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I. Introduction

Over the centuries, the phenomenon of suicide has lived with man on the planet earth but with some other phenomenon supporting or triggering it. The phenomenon has gone unnoticed of centuries without intellectual conceptualization and capturing, for observation and control. With the emergence of social scientific discipline and precisely sociological discipline, the phenomenon appeared to the limelight of the intellectual community and social policy drivers atleast, in Europe and America as at the time of its observation.

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Suicide as a concept and phenomenon, was first given an intellectual attention by Durkheim who distinguished among four types of suicide, which anchor on two major phenomena of integration and regulation. While egoistic and altruistic suicide, are connected to the phenomenon of integration, anomic and fatalistic suicides were said to be connected to the phenomenon of regulation (Durkheim, 1951:151).

Across generations according to Durkheim, the phenomenon of suicide hovers around the aforementioned phenomena, making them more or less, the channel through which the phenomenon of suicide can be understood. Of course, both in the study of suicide by Durkheim and other scholars across generations (Durkheim, 1951; 1984; Graeff & Mehlkop, 2007; dos Santos et al., 2016; Scourfield et al., 2012; Coope et al, 2014), the basic interpretation of the phenomenon of suicide has not deviated from the aforementioned basic social phenomena by Durkheim.

Similarly, the phenomenon of suicide, social integration and social regulation are all anchored on the general situation of the society, a situation, which Durkheim (1984) refer to as social anomie. While social anomie is on the negative direction on the social scale of society healthiness, its implication on the general wellbeing of the members of the society is simply projected, through suicide and other similar indices of social disorderliness and discomfort.

Whatsoever, the phenomenon of suicide, which was captured by Emile Durkheim (1951), one of the founders of modern sociology, has been observed to be one of the most enduring social and health issues across time and regions of the world (WHO, 2012). More than one million people lose their lives through suicide every year according to the World Health Organization estimate (2012). Although there are data across the globe for the analysis of suicide trends across the globe, African continent in general and Nigeria in particular, lack reliable data for the understanding of suicide trend in the continent and the country.

Although lack of data due to some circumstances ranging from social stigma (Okafor, 2017) to unavailable classification mechanism (Mars et al, 2014), there is a need for comprehensive explanation of suicide for balanced view of the phenomenon especially in African continent. Many scholars have

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approached the issue of suicide in terms of explanation with available suicide data but in a somewhat fragmentation (Mars et al, 2014) requiring, a theoretical approach in the African and by implication Nigerian context. As such, the present paper is a scholarly effort to put in theoretical and sociological perspectives, the phenomenon of suicide in Nigeria and perhaps African continent using the dominant socioeconomic situation in the region.

II. The Concept of Suicide and Social Anomie

According to World Health Organization (2009a), suicide is an act deliberately initiated and performed by a person in the full knowledge or expectation of its fatal outcome. In specific terms, it is the accumulation of processes and actions leading to the extermination of one's life by himself or herself. Suicide has existed as long as man has lived in this planet earth making it, one of the social phenomenon, which has existed alongside human behavioural tendencies in all generations, race, creed and cultures.

As a social and health issue, suicide has warranted unprecedented efforts by the scholars across generations and regions for explanations and interpretations of its appearance, manifestation and antecedents among different groups and generations (Spates & Slatton, 2017; Barnes& Carl, 2003; Durkheim, 1951). The phenomenon of suicide has been connected to a whole lot of issues anchoring on behavioural tendencies in different settings. However, the work and perspective of Durkheim on suicide has endured over the time and even in the current historical epoch.

According to Durkheim, suicide cannot be removed from the social system, the social facts, which appear to be sui generi to even the human beings who are recruited into the system by birth and socializations. While suicide at the superficial level appear to be individual action against one's self (WHO, 2009a&b), the fact that the individual exists in a social system with the presence of the nonmaterial social facts cannot be denied (Greenwood, 2003). Again, the existence of the social facts is sui generi to the individual in the society (Durkheim, 1952).

According to Durkheim, suicide can be divided into four types with two major social phenomenon characterizing them. Equally, the two major social phenomenon are the product of the nonmaterial social fact. In Durkheim's classifications, there are *egoistic suicide, altruistic suicide, anomic suicide and fatalistic suicide.* Similarly, the two major social phenomenon characterized as having implication to suicide and types of suicide included, *social integration and social regulation.*

In Durkheimian classification, egoistic suicide appears to be the by-product of weak social integration, which affects the individual self-perception in the entire gamut of the social system and processes (Ritzer, 2011). Although Durkheim classified this with a form of society in which the individuals are not well connected to, or integrated with the larger social unit, the overall understanding of the concept of egoistic suicide can be appreciated by looking at the class of individuals who fall into such trap. According to Durkheim (1951), the larger social system provides us with the value system, morality and sense of purpose. This, can be found in almost all the modern societies, where our value is more appreciated in connection with the popular value system and achievements. By implication, what had been established by popular approval as benign, such as the value of life, patience and endurance as a means to social ladder, automatically, is expected to guide the behaviour and expectations of the strongly integrated members of the society. However, in the suicidological perspective of Durkheim, when an individual is not properly integrated into the social system for whatsoever reason, there is a tendency for one terminating his life in the presence of challenges and difficult time.

The altruistic suicide, which in Durkheim's classification falls in the category of social integration-induced-action, can be found in the societies, where the individuals are strongly attached to the social system. Altruistic suicide much as it sounds, is the manifestation of the individuals' selfless offer of themselves for the interest of the collective body in question courtesy of high integration into the social system. According to Durkheim (1951), when the social integration is too high, the individuals are literarily forced to commit suicide in the interest of the social group in question.

In the modern societies across the globe, although there are atoms of high level of individualism, this individualism is subjected to group interest where the interest of the individuals in question is attached to a particular group maintaining a sense of strong social cohesion. More specifically, in most of the developing nations, strong attachment to group interest is not strange especially in the matter of religion and belief system. By implication, Durkheim's concept of altruistic suicide finds fulfilment in both in the society of his days and that of the modern society. In sum, altruistic suicide as it appeared in Durkheim's sociological piece, captures the willingness to sacrifice one's life as a result of self-commitment to the collective interest of a social group whether small or big.

On the regulation aspect of the society and the individual members of the society, Durkheim maintained that high regulation in the society has its toll on the members of the society as well as weak regulation. Specifically, low regulation in the society is responsible for anomic suicide while the high regulation is responsible for fatalistic suicide.

Anomic suicide in the Durkheimian classification, is the type of suicide, which occur when

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the regulative power of the society is disrupted. When the regulative mechanism in the social system is disrupted, the individuals are left at the mercy of their excessive passions and ambitions, which mostly lead to unknown destination of suicide (Ritzer, 2011). More specifically, the individual members of the society, no matter the extent of civilization, is affected by hedonistic behaviours, which are mostly on the path of self-destruction. When these behaviours fail to receive a collectively approved control measure, they are bound to lead most people to suicide.

Fatalistic suicide according to Durkheim, occur in the presence of strong and high regulation in the society. While weak regulation makes the members of the society vulnerable to anomic suicide, strong regulation mechanism is responsible for fatalistic suicide. According to Durkheim, when there is excessive regulation in the society, some people become frustrated as a result of their ambition and life pursuits being blocked. Excessive regulative measure in the social system do raise some level of distress, melancholy and oppression, triggering self-dejection and high rate of fatalistic suicide in the society.

More than any of the concept related to suicide and suicide concept itself, Durkheim gave weightier attention to social anomie, which he defined to be the state of lawlessness among the members of the society. For Durkheim (1975), when the morality among the members of the society is winding down, the social restraint preventing the members of the society from falling into self-destruction is automatically being withdrawn and thereby making the members of the society vulnerable to self-destruction. Although Durkheim established his theoretical concept of suicide with the evidence of macro suicide study from European nations as at his own time, there are still some indications that anomic suicide more than any other type of suicide, dominated his time.

Social anomie more pronounced than any other social condition connected to suicide, is one of the dominant social condition even in the present epoch, that affects the rate of suicide in the society. Social anomie by its appearance according to Durkheimian sociological analysis, is partly connected with other social conditions that may likely induce suicide.

Social anomie in extension induce the state of lawlessness, which open opportunities for other extreme groups who in the long run make individual members of the society vulnerable to altruistic suicide. For instance, among the Islamic extremists, the members are automatically made vulnerable due to their membership; going back to the social conditions positively affecting the emergence of extremist groups, there are evidence of weak social regulations making some individual members of the society vulnerable to the recruitment of the extremist groups.

Similarly, lawlessness in the society, which Durkheim tends to project via the concept of social anomie, can equally cause the weak integration by the members of the society due to selfish interest and envisaged freedom to live as one pleases without bordering one's self with the unnecessary social cohesion requiring responsibilities especially, among the sub social groups in the society.

Nonetheless, social anomie can equally open the restricted process of socialization and social ladder of power acquisition for socially undesirable elements into the corridor of power, and grant them the opportunity for rule making process ignoring the genuine aspirations of many members of the society. When such a situation occurs, many members of the society are likely to be blocked in their aspirations as unrealizable as well as hopeless and by implication, trigger fatalistic suicide. In respect to Durkheim's theoretical classifications of suicide, all the four types of suicide and the social preconditions, are still relevant even in the current historical epoch.

III. Suicide Across Africa and the Problem of Misrepresentation of Data

Suicide across African continent is at least, reported mostly on individual bases by the researchers who scratch the available data through populations that lacks understanding of the implication of scientific evaluation of suicide phenomenon (Mars et al., 2014). From the scanty information on suicide across African continents by few scholars interested in the phenomenon, we can envisage the nature and appearance of suicide in the continent.

According to the study by Adinkrah (2011) in Ghana between 2006-2008, suicide rate appeared to be 0.1 per 100,000 with 10 males committing suicide against every 1 female. The study by Johnson et al. (2008), which focused on Liberia reviewed the prevalence suicide classified death to be 6.0% with male/female ratio of 0.7:1.

In morocco, Agoub Moussaoui & Kadri (2006) carried out a study in Casablanca, with focus on suicide related deaths and suicide prevalence, their findings revealed the Lifetime prevalence of suicide to be 2.1% with male/female ratio of 0.5:1.From Nigeria, the study by Gureje et al. (2007), involving sample from about 6 geopolitical regions reveal the incidence of suicide among the sampled population. Although the study focused on suicide behaviour with psychological wellbeing, the findings revealed the lifetime prevalence of suicide to be 0.7% with male/female ration of 1.0:1.

The study of Bekry (1999) focusing on Addis Ababa Ethiopia on suicide phenomenon between 198-1996 showed suicide rate among the population to be 49.8 per 100,000 with male/female ratio of 2.9:1.

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According to Dzamalala et al. (2006), suicide prevalence according to the sample from Blantyre Malawi between 2000-2003 was at 10.7 per 100,000 while the male/female ratio was 0.8:1. Similarly, the study by Ikealumba & Couper (2006) in Rehoboth Namibia in 2001, revealed the prevalence of suicide to be 100.0 per 100,000 with male/female ratio of 0.9:1.

As at the time 2002-2004, the study by Joeet al. (2008) involving a sampled from the whole of South Africa showed that the lifetime prevalence of suicide in the country was 2.9% with the male/female ratio of 0.3:1. A study in Kampala Uganda between Jan. 2002-Oct 2002 by Kinyanda, Hjelmeland & Musisi (2004) indicated the suicide prevalence of 10.1 per 100,000 and male/female ratio of 1.7:1. Equally, the study by Ndosi & Waziri (1997) in Dar es Salaam Tanzania between Jan 1991-June 1993 showed that the suicide prevalence among the population was 5.2 per 100,000 with male/female ratio of 0.5:1. According to the findings by Chibanda, Sebit & Acuda (2002), in Harare Zimbabwe the suicide prevalence among the population was found to be 49.9 per 100,000 with male/female ratio of 0.2:1.

As one of the social phenomenon with social stigma, death by suicide is not easily divulged among different societies in Africa. From the In-Depth analysis of the above studies, there are evidences that they were simply a scratch of the incidence of suicide across African continent with government objective publications on suicide rate across the continent.

While death is perceived as sacred requiring more secrecy in terms of who to tell among African nations (Nnamani, 2002), sudden death involving younger individuals such as death by suicide, is more demonic than open human behavioural disposition (Okafor, 2017).

Africa, if not the only continent, is one of the continents where data on suicide is very difficult. Challenges ranging from socio-cultural stigma to, government inability to standardize the phenomenon among population issues as raised by the World Health Organization over the decades.

IV. Suicide in Nigeria: Sociological Interpretation and Implications

Although the report of death in Nigeria is not properly handled let alone the causes that involved suicide, the incident of suicide remains a reality that exist as a social phenomenon. Across Nigerian history at least, from 1957, when the incidence of suicide in Nigeria began to receive minute research interest from the scholars, suicide has been recorded in Nigeria both formally and otherwise (Asuni, 1962). Complicated as it appeared to researchers, suicide in Nigeria though magnificent, is under reported and in some cases go unnoticed before the death statistics. Only on individual research documentations that, suicide had been given statistical attention mostly, with a sketchy data.

Most of the studies focusing on suicide phenomenon in Nigeria (Eferakeya, 1984; Asuni, 1962; Nwosu & Odesanmi, 2001; Uwakwe & Gureje, 2011; Uchendu, et al., 2019) usually, are either insignificantly representative or a proximity study without a clear data on the extent and rate of suicide. However, from the above studies and more, there are evidences that suicide is prevalent across the population of Nigeria.

Whatever, the incidence of suicide in Nigeria apart from the other perspectives in explaining suicide using available sketchy, is captured in the framework of four-square social phenomenon within which the individuals in the society could be vulnerable to self-termination. This, is capture in the Durkheimian sociology of suicide.

Among other things, Durkheim divided the overwhelming social circumstances under which the individual members of the society could be vulnerable to suicide into two such as, social integration and social regulations with each, carrying a sub two units of suicide outcome (Ritzer, 2011). While the social integration on its part carries the egoistic and altruistic suicide, social regulation carries anomic and fatalistic suicide.

More than any other scholar interested in suicidology, Durkheim gave a blue print of ageless social circumstances, which can induce suicide as well as their inalienable presence in all societies. Specifically, Durkheim in his sociological analysis, captured the macro phenomenon of the social system, which trigger the incidence of suicide at the micro level of individual involvement.

In the case of suicide in Nigeria, going by the Durkheimian classification of suicide, each classification can be found in the Nigerian context. Much of these suicides though invisible in most cases, are indirectly or directly attached to the macro social phenomenon of Durkheimian suicidological analysis.

Egoistic suicide in Durkheim's framework, has been visible across the nation and the population. This, involves the youth as well as the elderly. While most youth are committing suicide especially, the recent saga among the students of higher institution of learning, on the platform of weak social integration, some elderly fellows, have taken their own lives, whether reported or not, on the account of the same issue. The weak social integration here includes religious groups, social activities and family life. At least, a number of suicide notes following some suicides that have taken place in a number of Nigerian universities such as University of Nigeria, Obafemi Awolowo University, Niger Delta University, Ahmadu Bello University and more, were carrying some indications of weak social ties ranging from family levels to the students' social activities on campus.

Similarly, a number of suicide incidents that have taken place this of recent, involving some secondary school teachers, artisans, civil servants and

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some unclassified occupations, through the circumstances surrounding the suicides, indicated the presence of weak social integration on the suicide of the diseased. The explanatory power of the Durkheimian concept of egoistic suicide and weak social integration can be appreciated, looking at the overwhelming power of emotional degeneration following ruptured relationship between the individuals and their families or the macrocosm of the society at large. This of course, builds a foundation of self-hatred and dejection of which the end result in most cases, is suicide thought, attempt and completed suicide (Uwakwe & Gureje, 2011).

Altruistic suicide in the Durkheimian framework of social integration induced suicide, equally takes place in Nigeria. The cases of boko haram, Shiite Muslim protests and IPOB protests, were all carrying the elements of altruistic suicide. While the bokoharam insurgency has groomed many youths to volunteer for suicide bombing and direct military confrontation with the knowledge of the possible fatalities, the protests by the Shiite Muslims and the IPOB were all having some indices of awareness of death before involvement by the members of the groups.

According to Durkheim, when there is a strong social integration as per individual attachment with the larger social group in the society or even the society at large, there is a tendency that the individuals will likely offer themselves in the interest of the group per adventure there is live threatening situation. This of course become in distinct classification of suicide, altruistic suicide.

In the case of boko haram in Nigeria, the indoctrination by the bokoharam elements, has reduced the lower members into object of field battle, which can be expended to sustain the existence of the group. More than two thousand members of boko haram have died in the cause of the war mostly in the trajectory of altruistic suicide. In the case of Shiite Muslim protests, there is every indication that the members of the group especially, the youths were prepared for death as a result of strong attachment with the group, courtesy of religious indoctrination and attachment. A good number of the group have died in confrontation with Nigerian army knowing fully well that such a fatal situation is imminent before it happened.

Similarly, the case of IPOB members equally displayed the indices of strong social integration leading to altruistic suicide. Before and after the proscription of the activities of the Indigenous People of Biafra, most of the protests and activities of the group have taken place in spite of grave warning from Nigerian police and army. As a matter of fact, most of these activities have ended with a significant loss of lives. Underneath of these protests, is the fact that the members of this group are aware that the loss of lives was imminent but because of strong attachment with the interest of the group and the group itself, the diseased ignore the signal of death before involvement with the group's activities.

In Durkheim's suicidological classification, anomic suicide shows the characteristics of weak regulation in the social system (Ritzer, 2011). When the regulatory system of the society becomes weak and ineffective, the individual members of the society are unconsciously made vulnerable to a form of suicide, which shows the incapability of man in controlling himself in the absence of social order. As a matter of fact, the individuals are left to the mercy of passions and inordinate ambitions capable of ruining their lives.

The current issues of drug addiction related deaths, money rituals involving soul trading and premature death, etc., among the Nigerian youth, displays the state of anomie in the social system. Due to poor regulatory measure, which at some point deter the members of the society from inordinate ambition capable of leading to death in installment, the members of the society especially the youth are cut off by the unnecessary excessiveness leading to their deaths. Equally, the issue of social anomie, appears in two dimensions according to Durkheim's further interpretation.

While on one aspect, social anomie allows the members of the society into the net of inordinate ambition capable of terminating their lives, it equally appear in the form of social system, lacking control measure over social economic activities. When the regulatory mechanism fails to ensure the continuity of the ongoing economic activities, the likelihood of business crumbling in different capacities appears and in the long rung make the members of the society vulnerable to self-destruction. At least since 2009 in the specific case of Nigeria, many businesses have crumbled in different parts of Nigeria leaving many without job. As a situation with ripple effect in Durkheimian analysis, the affected individuals in most cases have been caught up with suicidal thought, attempted suicide and even suicide in some cases.

At the fourth square of Durkheim's suicidological analysis is the fatalistic suicide. This form of suicide, contrary to the above mentioned anomic suicide, result from extreme social regulation. Human beings, in as much as they need social order for harmonious existence, are equally sensitive to a regulatory system capable of blocking people out of their genuine dreams and expectations from or within the social system. In essence, this situation causes some members of the society to take their own lives out of frustration and this what Durkheim called fatalistic suicide.

At least from 2015 to present, many businesses and other establishments have crumbled under the present government in Nigeria causing, the death of many individuals in the country. Most of these businesses and establishments crumbling, were as a

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result of extreme regulatory measures, which came into effect from 2015. In some cases, many genuine businesses have been permanently banned while many others are currently in bad shape, worse than permanent extermination. These were businesses and establishments, sustaining individuals and families in fact, the lives of the owners of these businesses were built around them that when they were frustrated, they were frustrated along the lives of the owners of these businesses.

In a sociological parlance, the current situation in Nigeria is a fertile ground for all kinds of suicide as long as things continue the way they are. Although in sociological distillation, social anomie is connected to a form of suicide, the concept of anomie, the way Durkheim presented it, equally capture a generic situation warranting the four suicide classifications.

Social anomie generally points to the weaken social system, which can lead to a whole lot of other things and situations warranting unnecessary deaths. To start with, egoistic suicide according to Durkheim's explanations, is found within the realm of weak social integration; this social integration is indirectly affected by the state of the general society. Specifically, when the social system is in a mess (social anomie), there is a tendency that the individual members of the society will likely resign to fate and as such, block every form of commitment and attachment with the larger social structure. In such a situation, emotional degeneration is bound to set in and in the long run, lead to egoistic suicide.

Altruistic suicide, which is equally found in the framework of social integration but in the direction of strong attachment, can result from the general state of the society (social anomie). Extremist groups such as the jihadists, always find the state of social anomie as the lucrative opportunity in recruiting members, who would latter die for the cause of the group. When there is degeneration of the social system, there is the tendency that some members of the society will see the superficial appearance of the extremist groups as an opportunity of having a fulfilled destiny in juxtaposition of the social system as a whole. When such happens, the possibility of altruistic suicide is present.

Finally, in the framework of social regulation and suicide, and in the perspective of social anomie, suicide can be found as the function of extreme regulation, which in itself is the function of weakened social system where few individuals' interests thrive at the expense of the majority members of the society. When the power acquisition system within the social system had been corrupted due to social anomie making a way, for uncivilized elements as power figures, there is the possibility of rulemaking against the genuine ambitions and expectations of some members of the society, which can lead to fatalistic suicide.

V. Conclusion

Suicide as a social phenomenon, is the product of the condition of the society, which makes some members of the society vulnerable to frustration and self-hatred. More than any other social condition affecting the majority of the members of the society, social anomie appear to have many chain reaction effects on the social system triggering individual and collective discontents, capable of leading to the major classified types of suicide. Durkheim as one of the eminent as well as founders of suicidology as a social ill demanding scholarship interest, classified suicide into four forms with four major social conditions inducing them. Egoistic suicide according to Durkheim, is induced by social integration issue specifically, weak social integration while, altruistic suicide on the other hand is induced by strong social integration. Similarly, fatalistic suicide is found on the extreme side of social regulation while anomic suicide is found on the weak side of social regulation. Although social anomie, appeared to be peculiar to anomic suicide, social anomie itself is found to be indirectly connected to other forms of suicide. In whichever direction, suicide is a social ill that has huge implication to the social system at large irrespective of the degree of involvement by the individual members of the society. In the case of Nigeria however, all forms of suicide according to Durkheim's classifications, are already ripe in the system as all social conditions encouraging them are equally domicile with Nigerian social system.

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