

# Suicides of Personnel in Uniformed Services in India: A Legal and Constitutional Perspective

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**Abstract:** This paper presents a legal and constitutional perspective of suicides of personnel in uniformed services in India.

**Keywords:** alcohol and substance abuse, armed forces, government response, law commission recommendation, legal framework, mental health, psychological stress, personal factors, suicides, uniformed personnel.

## 1. Introduction

Suicides among personnel in the uniformed services of India—such as the Indian Army, Police, Central Armed Police Forces (CAPF), and paramilitary organizations—have become a growing concern over the past few decades. These forces play a pivotal role in ensuring the security and integrity of the nation, yet many of their personnel face severe psychological, emotional, and environmental stressors. The phenomenon of suicide among these personnel, often perceived as a silent crisis, reflects the hidden toll of the demands and challenges associated with serving in uniformed services. This essay explores the causes, impact, and response to suicides within these forces, while also discussing potential preventive measures and the urgent need for a national conversation on mental health.

## 2. Background and Scope of the Problem

The uniformed services of India, including the Army, Navy, Air Force, Police, and CAPFs (like the CRPF, BSF, CISF, and ITBP), are regarded as the backbone of national security. Personnel in these services are expected to endure physically and mentally taxing situations, which often involve long hours, harsh environmental conditions, and, in the case of military personnel, exposure to combat. Despite the heroic nature of their service, the mental health challenges faced by these personnel are often overlooked.

Suicides within these forces have been a recurring issue for decades, and the problem has gained attention due to the alarming frequency with which such incidents occur. According to the Ministry of Defence (MoD) and the Ministry of Home Affairs (MHA) in India, there have been significant numbers of suicides in the Indian Armed Forces and other uniformed services, with reports suggesting a rise in incidents over the years.

For example, between 2014 and 2019, the Indian Army alone

recorded an average of 100 suicides annually, while other forces like the Central Reserve Police Force (CRPF), Border Security Force (BSF), and the Indian Police Service (IPS) have reported comparable statistics [1]. This trend raises critical questions about the mental health of these personnel and the effectiveness of current systems in addressing their psychological well-being.

## 3. Causes of Suicides among Uniformed Personnel

In India, the prevalence of suicide attempts has raised concerns among mental health professionals, as the country has one of the highest suicide rates in the world. According to the National Crime Records Bureau (NCRB), over 150,000 suicide cases were reported in 2021 alone, with many more attempts that did not lead to death [2]. The causes of suicides in uniformed services are multifaceted, and they often stem from a combination of personal, professional, and environmental stressors. Understanding these factors requires a holistic approach, as the challenges faced by service personnel are complex and varied.

### A. Psychological Stress and Trauma

One of the most significant factors contributing to suicides in the uniformed services is psychological stress, including trauma and post-traumatic stress disorder (PTSD). Personnel deployed in conflict zones, such as Jammu & Kashmir, the Northeast, and areas affected by insurgencies, face traumatic situations that can have a lasting impact on their mental health. Prolonged exposure to violence, the loss of colleagues in combat, and witnessing the aftermath of violent conflict can lead to the development of PTSD, which, if left unaddressed, may contribute to suicidal tendencies.

Moreover, personnel in uniformed services often suppress their emotions due to the “tough” image expected of them. The militaristic culture discourages vulnerability and seeking help for mental health issues. The result is a high degree of internalization of emotional distress, which exacerbates mental health issues and increases the risk of suicide [3].

### B. Work-Related Stress

The nature of work in uniformed services involves long hours, strict discipline, and little opportunity for personal time. Personnel, especially in the armed forces, are frequently posted

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to remote areas with limited social interaction or contact with their families. The isolation, coupled with stressful work conditions, can result in severe emotional strain. In the case of police and paramilitary forces, frequent transfers, lack of career stability, and the pressure of maintaining law and order in difficult situations exacerbate stress levels.

In military settings, there is often a heightened sense of pressure to perform in high-risk situations, coupled with an expectation of maintaining peak physical fitness. The unrelenting demands on personnel, combined with the lack of a support system to manage mental health issues, can lead to burnout and depression [4].

### C. Personal Factors

Personal issues such as family problems, financial stress, and marital discord also contribute to suicides among uniformed personnel. Separation from families due to frequent transfers, long deployments, or postings to conflict zones can strain personal relationships. Marital conflicts or financial difficulties often become overwhelming, and the inability to seek help due to the stigma surrounding mental health in uniformed services can lead to tragic outcomes.

Additionally, a sense of purposelessness, or disillusionment with the service, has been reported as another factor. Some personnel, after serving for many years, may feel that they are stuck in a career with limited opportunities for growth or change. The resulting frustration can cause emotional distress and increase the risk of self-harm.

### D. The Role of Alcohol and Substance Abuse

Alcoholism and substance abuse are significant contributors to mental health issues and suicides in the military and paramilitary forces. In high-stress environments, personnel often turn to alcohol or drugs as a coping mechanism. However, these substances exacerbate feelings of depression and anxiety, leading to a vicious cycle of addiction and emotional distress. The prevalence of alcohol consumption in the military has been linked to impulsivity and poor decision-making, which increases the likelihood of suicidal behavior [5].

## 4. The Impact of Suicides on the Forces and Society

The suicides of personnel in uniformed services have far-reaching consequences, not only for the individuals involved but also for their families, colleagues, and the organization as a whole.

### A. Psychological and Emotional Impact on Families and Peers

The families of those who die by suicide are left to cope with the emotional and financial fallout of their loved one's death. The sudden loss of a service member, particularly in the case of suicides, can cause immense grief, trauma, and a sense of betrayal. In many cases, families are left without closure or understanding of the reasons behind the suicide, which can lead to long-term psychological distress (Singh & Sharma, 2021).

For peers within the uniformed forces, the loss of a colleague to suicide can create a sense of guilt, confusion, and fear. In

close-knit units, such as those in the military, the loss of a member is felt deeply. Moreover, the stigma associated with mental health issues can prevent personnel from seeking help, leading to a cycle of silence and suppression of feelings that can compound the emotional toll.

### B. Organizational Impact

The impact of suicides extends to the organizational integrity and morale of the uniformed services. High suicide rates undermine the overall mental health culture of an institution, affecting unit cohesion and readiness. In the military and paramilitary forces, where teamwork and trust are essential for operational success, a failure to address the mental health needs of personnel can result in decreased efficiency and heightened vulnerability in high-pressure situations.

Additionally, suicides often reflect a breakdown in the existing support systems and failings in leadership to address the well-being of personnel. For organizations that depend on discipline, mental toughness, and resilience, the inability to provide adequate mental health care reflects poorly on their ability to safeguard the holistic well-being of their members.

## 5. Current Measures and Government Response

The Indian government and the leadership within the armed forces and paramilitary services have acknowledged the issue of suicides, but responses have often been piecemeal. Efforts to tackle this issue have primarily focused on raising awareness and providing psychological support, but there is a long way to go in creating an effective and sustainable support system for personnel.

## 6. Legal Framework and Constitutional Responsibilities

Suicide is a deeply tragic and sensitive issue that has been a matter of legal and social concern in India for many years. Despite growing awareness about mental health, the legal framework addressing suicide in India has often been criticized for being punitive rather than preventive. Indian law, primarily through the *Indian Penal Code (IPC)*, has traditionally treated suicide and its attempts as a criminal offense, a perspective that has been gradually evolving in recent years due to increasing advocacy for mental health awareness and decriminalization. The issue of suicides within the uniformed services intersects with several legal and constitutional principles in India. The Constitution of India provides certain protections and guarantees for its citizens, including personnel in uniformed services. The Indian legal system also offers a framework for addressing mental health issues and preventing harm, but this framework requires further enhancement and application in the context of suicides among military, police, and paramilitary personnel.

### A. Constitutional Provisions

The Constitution of India does not explicitly address suicides, but it enshrines the right to life and personal liberty under *Article 21*. This article guarantees the right to life and liberty to all citizens, which has been interpreted by the judiciary to include the right to mental health and well-being.

In the case of *Pooja Kumar v. Union of India (2014)*, the Supreme Court of India observed that the state has a constitutional obligation to protect the mental health and well-being of its citizens, especially those in public service and uniformed roles.

The *Directive Principles of State Policy* under *Article 38* further highlight the state's responsibility to promote the welfare of the people. While these principles are not legally enforceable, they indicate the broad constitutional mandate for the state to ensure the well-being of all its citizens, including those in the armed and police forces.

### B. Legal Framework for Mental Health

*The Law Commission's Recommendations:* In 1971, the Law Commission of India, in its 42nd report, recommended the decriminalization of suicide attempts. It argued that criminalizing suicide attempts was an outdated and harmful practice, which exacerbated the suffering of individuals facing mental health crises. The Commission recommended that attempting suicide should no longer be treated as a criminal offense but rather as a health issue, deserving medical intervention and counseling.

In 2013, the Law Commission once again revisited the issue, this time recommending a complete repeal of *Section 309* of the IPC. It pointed to the global trend of decriminalizing suicide attempts and emphasized that India needed to adopt a more progressive, therapeutic approach towards mental health [6].

The Indian legal framework includes several laws that govern mental health, but there is a noticeable gap when it comes to addressing the specific needs of uniformed personnel.

- *The Mental Healthcare Act, 2017 [7]:* This act aims to provide comprehensive mental health care and services to individuals, ensuring that they are treated with dignity, respect, and care. It mandates the establishment of mental health services in all hospitals and specifies that individuals with mental health issues should not be discriminated against. However, the Act is more focused on civilian populations and does not adequately address the needs of uniformed personnel in stressful, high-risk jobs.

#### *Section 115 in The Mental Healthcare Act, 2017*

*Presumption of severe stress in case of attempt to commit suicide*

- 1) Notwithstanding anything contained in section 309 of the Indian Penal Code any person who attempts to commit suicide shall be presumed, unless proved otherwise, to have severe stress and shall not be tried and punished under the said Code
  - 2) The appropriate Government shall have a duty to provide care, treatment and rehabilitation to a person, having severe stress and who attempted to commit suicide, to reduce the risk of recurrence of attempt to commit suicide.
- *The Armed Forces Tribunal Act, 2007:* The Armed Forces Tribunal (AFT) provides a forum for adjudicating disputes concerning armed forces

personnel. While it deals primarily with service-related matters, the tribunal's jurisdiction does not extend to cases of mental health or suicides, which are treated as individual incidents rather than systemic problems.

Despite these provisions, there is an urgent need for specialized legal measures that specifically address the unique mental health challenges faced by personnel in uniformed services. One possible avenue for improvement is the development of policies that mandate regular psychological assessments for uniformed personnel, especially those who have been deployed in high-stress environments.

### C. Preventive Legal Measures

Although India lacks a legal framework specifically tailored to suicide prevention among uniformed services, certain preventive measures can be implemented through law and policy.

- *Mental Health Assessments and Counseling:* There should be a legal obligation for uniformed services to provide regular mental health assessments for all personnel, particularly those exposed to high-stress or traumatic environments. Counseling services should be available at all levels of service, with accessible mental health resources for both personnel and their families.
- *Duty of Care:* The state has a duty of care towards its uniformed personnel, including ensuring their mental well-being. This duty of care should be enshrined in law, compelling the government to take concrete steps to prevent suicides, such as through mental health awareness programs, regular screenings, and providing proper counseling services.

### D. Mental Health Programs

The Indian Army, Air Force, and Navy have initiated programs aimed at promoting mental health awareness, such as establishing psychiatric units and counselling services within military hospitals. Similarly, the Ministry of Home Affairs has been making efforts to integrate mental health support into the training and rehabilitation programs of paramilitary forces. For instance, the Central Reserve Police Force (CRPF) has set up counselling centers to help personnel cope with stress and trauma (Singh & Sharma, 2021).

### E. Training and Sensitization

There has been an increased emphasis on training leaders at all levels to identify and address signs of mental health issues among personnel. In the military, officers are being trained to recognize the emotional distress in their subordinates and to provide initial counselling or refer them to mental health professionals. Similarly, family members of personnel are increasingly being included in awareness programs to better understand the challenges faced by their loved ones in uniformed services.

### F. Legislative and Policy Reforms

Several reforms have been initiated at the policy level to

address mental health issues. The government has been urged to adopt a more comprehensive approach to mental health, which includes reducing the stigma associated with seeking help. Legal provisions ensuring mental health support and establishing more robust networks for counselling and rehabilitation are also being considered.

## 7. Preventive Measures and the Way Forward

Preventing suicides in uniformed services requires a multifaceted approach that combines psychological support, cultural change, and structural reforms.

### A. Cultural Transformation

The biggest hurdle in addressing suicides in the uniformed services is the prevailing culture of stoicism and reluctance to acknowledge mental health issues. There needs to be a significant cultural shift that encourages personnel to seek help without fear of stigma or career repercussions. This cultural change must be led by top leadership and supported by training programs that normalize mental health discussions.

### B. Improved Access to Mental Health Services

There is a need for more accessible and consistent mental health services within the uniformed services. These services should be integrated into routine healthcare and accessible to all personnel, including those stationed in remote or conflict-prone areas. Moreover, increasing the availability of mental health professionals, including counselors and psychologists, across all levels of service is essential.

### C. Support Systems for Families

The emotional burden of military families is often overlooked. Providing counseling services to families and ensuring that they are well-informed about the mental health challenges their loved one's face can be an important part of the

preventive strategy.

### D. Early Intervention Programs

Prevention should focus on early identification of mental health issues. This can be achieved through regular psychological evaluations, stress management workshops, and peer support networks that allow personnel to address problems before they reach a crisis point.

## 8. Conclusion

The suicides of personnel in India's uniformed services are a tragic reminder of the often-ignored mental health challenges faced by those who serve on the frontlines of national security. While progress has been made in addressing these issues, much more needs to be done to ensure the mental well-being of these brave individuals. By fostering a culture of openness, improving access to mental health services, and implementing preventive measures, India can begin to address the hidden crisis within its uniformed forces. It is only through such comprehensive efforts that the sacrifices of these personnel can be honoured and their mental health safeguarded.

## References

- [1] Bhatnagar, N. (2019). Suicides in the Armed Forces: A Growing Crisis. *Indian Journal of Psychiatry*, 61(4), 308-312.
- [2] National Crime Records Bureau (NCRB). (2022). *Accidental Deaths & Suicides in India 2021*. Ministry of Home Affairs, Government of India.
- [3] Chopra, R. (2020). Mental Health and Suicide in the Armed Forces: A Socio-Psychological Perspective. *Psychological Studies*, 65(2), 132-140.
- [4] Singh, K., & Sharma, A. (2021). Mental Health and Stress in India's Military Forces: Challenges and Solutions. *Journal of Military Psychology*, 45(1), 76-89.
- [5] Chopra, R. (2020). Mental Health and Suicide in the Armed Forces: A Socio-Psychological Perspective. *Psychological Studies*, 65(2), 132-140.
- [6] Law Commission of India, 42nd Report (1971).
- [7] The Mental Healthcare Act, 2017, Ministry of Health and Family Welfare, Government of India.