

Social Stigma and Suicide in Bangladesh: The Covid-19 has Worsened the Situation

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Bangladesh is a densely populated lower-middle-income country in South Asia with many challenges. Social stigma and taboo are still dominating here.¹ Moreover, the Covid-19 pandemic has triggered this discriminatory behavior against people with specific backgrounds. Suspected Covid-19 patients or individuals having contact with Covid patients face discriminated behavior by their family, friends, community, or caregivers.² Therefore, people here are unwilling to share their Covid-related symptoms or do not admit any previous contact with Covid-19 patients to avoid social discrimination. Some aged people could not even enter into their own houses or get any treatment anywhere after being identified as a corona patient.³ Dead bodies of Covid-19 patients were abandoned by their family members and found in forests or on the streets. Publics in a few areas even declined the burial of such bodies. The general public harassed several Covid-19 patients and their family members.² The social stigma due to Covid-19 related issues might influence suicidal thoughts or behaviors among the mentally distressed population. They might want to escape from their pain, not life. Moreover, studies observed the high prevalence of mental disorders among Bangladeshi population in recent years.¹ We see several factors including death of family members in Covid-19, financial distress, domestic violence, alcohol or narcotic consumption, social isolation, wrong information, stigma, and Covid-19 fear ignite the suicidality.³ Also, so much fake and false information about coronavirus throughout the world augmented social stigma and discrimination. Therefore, suicidal ideation and behaviors might develop among the mentally distressed population regardless of their social class due to the discriminated behavior during the pandemic.

Any discrimination against any person due to Covid-19 violates fundamental human rights. Therefore, every patient must have the right to get proper medical treatment and care. We should not spread Covid-19 fear and rumors in the community. Also, we should share accurate information about the Covid-19 pandemic, preventive measures, and its

management. We should not use the term “coronavirus victim” to refer to any infected persons. Stigma or discrimination toward individuals and their family members might increase the risk of suicide during any pandemic. The front-line healthcare professionals and law enforcement authorities are at greater risk of getting coronavirus infection. Therefore, support from families, friends, and neighbors can help them to boost their mental health. Proper management of pandemic and psychological interventions can reduce the increased suicidal ideation, thoughts, and attempts. Also, it is essential to break down the taboo and raise community awareness for any community to prevent suicide. Social media can express their solidarity with Covid-19 patients. Calling out hateful online rhetoric systems can stop the spread of social stigma by reporting to the hosting platforms. Youths, the heart of a nation, can create awareness about the pandemic and reduce social stigma using the digital platform. We anticipate further suicide incidents in Bangladesh due to social stigma during and after the ongoing pandemic. Therefore, we would also recommend the government authorities promote mental health through the combined efforts of psychiatrists, mass media professionals, and community people.

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