## LETTER TO THE EDITOR



## Mother and Son Suicide Pact Due to COVID-19-Related Online Learning Issues in Bangladesh: An Unusual Case Report

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On 11 June 2020, a private university student (aged 22-years) and his mother (aged 47 years) from Bogra, Bangladesh committed suicide together by ingesting poisonous gas tablets in a forest close to where they both lived (The Daily Campus, 2020). The day before the suicides, the student's father insisted that his son complete online tests because he had arranged for a broadband connection. However, the son was determined to do the tests on campus. Consequently, a huge argument between the father and son ensued and the son felt oppressed by his father. Later that evening, the son's parents had further arguments about the situation. As a result of the arguments, the mother and son engaged in a suicide pact and killed themselves the next day after the father had left for work (The Daily Campus, 2020).

The term 'suicide pact' usually refers to simultaneous suicides of two or more individuals of closerelationship with a similar motive (Griffiths & Mamun, 2020; Prat et al., 2013). This event is rare (i.e., accounts for less than 1% of the total suicides; Part et al., 2013). Most suicide pact victims are married couples, socially isolated, and often there is a serious physical illness in one or both partners (Griffiths & Mamun, 2020; Prat et al., 2013). However, suicide pacts among couples reported during the COVID-19 pandemic have not followed this typical pattern (Griffiths & Mamun, 2020), and the present case appears to be the first suicide pact involving son and his mother. The reasons underlying COVID-19-related suicide pacts previously reported include (i) fear of COVID-19 infection, (ii) financial problems, (iii) being social boycotted by others, and (iv) not being able to return home from abroad (Griffiths & Mamun, 2020), whereas the new case reported here relates to an unresolved argument related to online schooling issues caused by COVID-19 quarantine and spatial distancing policies.

The online schooling-related quarrel and the son and mother both feeling the father's/husband's oppression leading to the apparent suicide pact, is an unusual finding in the suicide pact literature (Part et al., 2013). Furthermore, the apparent reason for the suicides have not been reported in among COVID-19-related suicide-pacts or single suicide cases published to date (e.g., Bhuiyan et al., 2020; Dsouza et al., 2020; Griffiths & Mamun, 2020; Mamun & Griffiths, 2020a; Mamun & Ullah, 2020; Shoib et al., 2020). Previous Bangladeshi COVID-19 suicide cases have reported that financial problems caused by the national lockdown is the most prominent risk factor followed by fear of COVID-19 infection (Bhuiyan et al., 2020; Mamun & Griffiths, 2020a). Findings from Bangladesh's neighboring countries such as India and Pakistan also suggest causative reasons for suicide to be (i) testing positive with COVID-19, (ii) being quarantined because of being suspected as having COVID-19, (iii) loneliness due to lockdown, (iv) social boycotting of those suspected of being infected with COVID-19, (v) COVID-19 work-related stress, (vi) being unable to come back home because of lockdown, and (vii) the unavailability of alcohol for individuals with alcohol use disorder (Dsouza et al., 2020; Mamun & Ullah, 2020; Shoib et al., 2020).

Although suicide in Bangladesh due to academically-related issues has been reported (e.g., exam failure, academic distress, quarreling and disagreeing with parents about what subjects to study, etc. (Mamun & Griffiths, 2020b, 2020c; 2020d; 2020e; Mamun et al., 2020a; 2020b); no previous Bangladeshi student suicide cases have been reported in a COVID-19-related context. A previous Indian victim was reported as being due to a COVID-19-related educational issue (i.e., a student being depressed due to exam postponement) but no suicides or suicide pacts as a consequence of online education-related issues caused by the pandemic have been reported in Bangladesh (Dsouza et al., 2020). Besides, an Indian teenage girl committed suicide because of being unable to attend online classes because she did not have a smartphone or a functional television to access the online materials (Lathabhavan & Griffiths, 2020).

The world has changed dramatically since the start of the COVID-19 pandemic and this has included education at all levels. For instance, it has been estimated that since the beginning of April 2020, approximately 90% of total enrolled learners (i.e., 1.5 billion students) from 185

countries have been involved in little or no educational activities because of schools and higher education institutions' closure (Marinoni, & de Wit, 2020). Many universities implemented online classes and examinations to combat the lack of face-to-face contact. In Bangladesh (where the present suicide case was reported), the Minister of Education instructed all universities to introduce online education. Although this is perceived by some as an education-friendly policy (Islam, 2020), a recent survey among 2,038 students in 45 higher education institutes found that one-third of Bangladeshi students did not want to engage in online academic activities (Islam et al., 2020).

The same study also reported that 55% of the students were not supported with proper internet connections, and 44.7% did not have access to a large screen smart device (i.e., laptop, PC, tablet etc.) to engage effectively in online teaching (Islam et al., 2020). One of the most challenging aspects in attending online classes can be the residing location of the student. In rural areas, the accessibility of the high-speed internet and broadband connections are limited. The online assessments and online class teaching are only feasible and effective for a small proportion of students (i.e., 13% and 18% respectively; Islam et al., 2020). Consequently, restlessness and agitation among many students who have been forced to engage in online teaching and testing is not uncommon (Islam, 2020). Such academically-related psychological burdens may lead to unstable mental states and suicidality in the extreme cases (Mamun & Griffiths, 2020d; 2020e; Griffiths et al., 2020; Mamun et al., 2020a, b).

Based on the aforementioned discussion, it is evident that Bangladeshi as well as other low- and middle-income countries (LMICs) governments should think carefully about online schooling before making it compulsory. Students from LMICs are much less likely to have access to the technology and related materials to support online schooling (i.e., large screens, high speed internet access, etc.). Furthermore, there has been a great economic crisis throughout the world (which also accounts for most of the COVID-19-related suicides in LMICs; Bhuiyan et al., 2020; Dsouza et al., 2020; Griffiths & Mamun, 2020; Mamun & Ullah, 2020). Students who experience financial distress in their family and community have an increased likelihood of mental instability (Rafi et al., 2019). Therefore, policymakers in LMICs should keep in mind that student wellbeing should come before mandatory online education when making decisions about schooling during the pandemic.

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