

Young People and Suicide Issue

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Abstract. Suicide among the young is an acute worldwide issue, and it has become an epidemic in Asia where high suicide rates in several highly populated countries have accounted for the greater part of the world's suicides. This study aims to investigate young people's perspectives about death and to discover from them the possible factors giving rise to high incidences of suicide among teenagers and young adults. A total of 270 youth aged 15–24 from various schools and universities in West Malaysia were recruited for this study. SPSS was used to analyze the statistic figures for frequency count; Chi-square test for independence was conducted. The findings show that youngster mostly sought help from their friends. The possible main factors for suicide revealed by the participants were: Coping with boy-girl relationships, family issues and stress from school work. More male than female participants indicated relationships with the opposite sex as a contributing factor to the suicide problem. More than any other ethnic group, Chinese students mentioned school work as a main factor in suicide. A high percentage of participants indicated life was self-determined, and this revealed the changing values among the teenagers that might have contributed to the high suicide rate.

Keywords: Counselling youth, Youth development, Death, suicide and life threatening issue

1. Introduction

It was first identified by Hendin [1] that Youth Suicide is an acute worldwide problem, and according to the report from World Health Organization, this issue has become an epidemic in Asia where high suicide rates in several countries with larger populations have accounted for a greater part of the world's suicides. Suicide has become the third leading cause of death among youth aged 10 to 24 in the United States, approximately 4559 cases in year 2004 [2]. Suicide is, therefore, a worrying social issue worldwide. The loss of life among the young, yet to fully emerge into adulthood is a global tragedy. Parents, educators, researchers, and of course the adults in our society, might feel a responsibility prevent this loss of life. We need to understand reasons and circumstance giving rise to the impulse in young people to put a sudden halt to all the possibilities life might offer them.

In Malaysia, it has become an urgent concern as the suicide rates among our teenagers keep increasing. It was found that almost 7% of the adolescents experienced suicide ideation and more than half of them turned their thoughts into action. The suicide rate in Malaysia, according to the National Statistics Department was as low as 1 per 100,000 suicides per year in 2003, however, National Suicide Registry Malaysia (NSRM) reported that there were 1.28 suicide per 100000, in a population estimated at 27.73 million for 2008 [3]. The most recent report from NSRM (Average of 60 suicides, February 10, 2011) computed that there were an estimated total of 425 suicide cases between January and August last year as reported on the web-based registration system. It was averaging 60 cases per month and 2 cases each day [4]. The rate of suicide among youths in Malaysia is shocking. Nevertheless, this reported figure was not exact as there are difficulties in identifying a death as suicide due to many factors such as under reporting, insurance claims and family shame etc, and thus, the rate should be in greater number [5].

Two major risk factors were highlighted by Adnam [6]: Poor coping mechanism for the stresses of school life and the lack of a program to promote good mental health in the country. Adnan [6] emphasized the rising stress levels in a transitional society as the main factor. As a professional in the area of social science,

he attributed the risk factors faced by our young people to the sociological factors. Due to the changes of values in the society, the young people are not feeling secure. The instability felt by teenagers arises from growing up in the context of a society which is increasingly urbanized and globalized, many of the traditional protective factors such as family ethos and religion are no longer in place. Adnan's perspective and his description of Malaysia's suicide trend can be traced back to the French sociologist Emile Durkheim's Theory of Suicide in which he postulated an explanation of suicide cases as 'anomic suicide'. His attribution framework is as follows: as the integration of society deteriorates, people will feel less anchored to the social world. Thus, Durkheim [7] attributes suicide to an external and constraining social fact which is independent of individual psychopathology.

The term of "anomic and fatalistic suicides" used by Adnan to describe Malaysia's suicide cases, operates from variance in the normative. However, the risk factors highlighted by Adnan, the effects of instability in society, and the absence of family/religious protecting factors have not yet been confirmed by empirical research. Anomic, literally "without norm", behaviour results from the temporary, but abrupt disruption of normative restraint. This anomic or fatalistic suicide, which Durkheim considered only as a footnote, is generated by excessive regulation. Therefore by principle, the sudden removal of excessive regulation or control as a result of social change will trigger anomic behaviour. What are the actual normative restraints or disruptions of normative restraint as experienced by our young people? What exactly are the struggles, the stresses, and the unbearable pains our young people face from their environment? The immediate context of young people normally means their eco-systemic context: family, school, the community and society in which they are living and growing up. What has actually happened to our community and society that has made young people feel so helpless and they want to put a full-stop to their existence? As individuals are part of the society, suicide should not be treated solely as the product of intolerable acute stressors.

2. Methodology

A total of 270 students comprised of 127 males and 143 females aged from 15 to 24 from different parts of urban west Malaysia were recruited. The participants were from different government secondary schools and university campus across different regions in Peninsular Malaysia. A questionnaire was designed to find out their perceptions of death, and if they were prepared to discuss their views on the reasons for suicide among youth.

Permission for the study was obtained from the gate keepers of relevant authorities in the various organizations taking part, who were the principals of secondary schools and administrative authorities from local universities. The participants were assured of confidentiality and their right to withdraw from the study if they felt the questions were intrusive or difficult to answer. Sensitivity was noted and participants were informed that only group data would be used for publication and no personal information, nor the name of their schools or organization would be revealed. Tokens of appreciation were given to participants who had completed the whole questionnaire.

3. Findings

There are 181 students below the age of 18, and 89 students were aged 18 and above. Majority respondents were Chinese (70%), followed by Malay (22.6%), Indian (5.9%) and other ethnicity group (1.5%). Number of females (53%) respondent was slightly greater than males (47%).

The findings suggest that most students are open to discussion about the topic of death. They mostly discuss it with their friends. Males are likely to attribute the reason for suicide to boy-girl relationships; this is similar across all ethnic groups. As for other possible reasons for suicide, more Chinese students thought the stress of school work was the most likely cause. Malay students put more emphasis on family issues.

3.1. Open to Discussion on the Topic of Death

There are approximately 55.7% (n=34) of Malay students, 73.9% (n=139) of Chinese students, and 62.5% (n=10) Indian students will not avoid the discussion of death in a conversation. Friends are the resource people with whom they discussed this sensitive issue. For the question "who would you talk to" on the topic

of death, friends (45.9%) and family (32.6%) are the two main source of communication on this topic. More participants chose to talk with their friends rather than with family members.

3.2. Possible Factors for Teenage Suicide

Three sources of stress that might have been caused for suicide for the young people were identified, namely boy-girl relationships, family issues and school work. Figure 1 and 2 showed that Boy-girl relationships ranked the highest for the possible reasons for suicide for both the male and female students. Eighty out of 127 (63%) of male participants and 74 out for 143 (52%) female participant stated BGR as the possible reason for suicide. More male participants than female participants think BGR issues contribute to suicide.

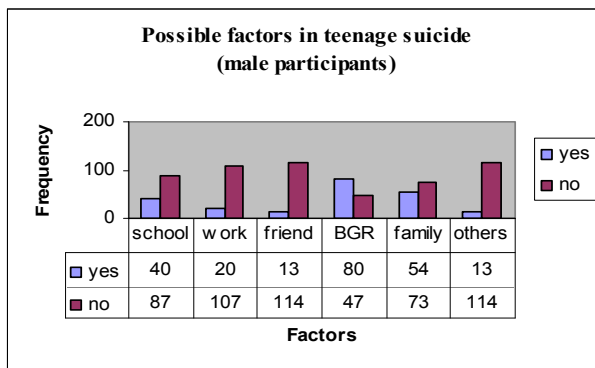


Figure 1: Male participants' views on the possible factors in teenage suicide

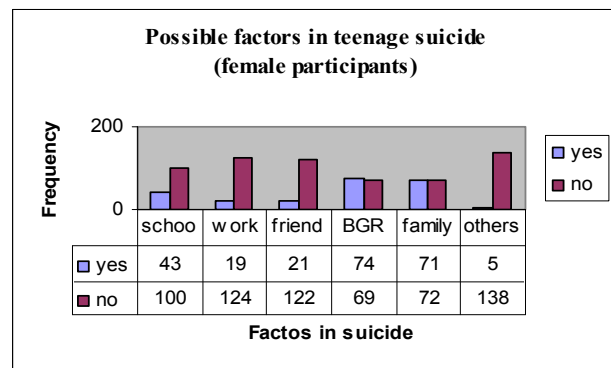


Figure 2: Female participants' views on the possible factors in teenage suicide

Seventy one (around 50%) of females stated family issues as a possible reason for suicide. Male students' answers were comparatively lower on family issues, only 54 (42.5%) of male students stated family issues as a possible suicide reason. Across ethnicity, thirty four out of 61 of Malay participants (55.7%) stated family issues as a reason for suicide, whereas the percentage of Chinese and Indian participants are lower, that 83 out of 188 of Chinese (44.1%) and 5 out of 11 Indian participants (31.2%) stated family issues (refer to Figure 3).

Youth from the Chinese community mentioned school work as the source of most stress, they also gave it as the main cause in suicide among the three major ethnic groups (refer to Figure 4). The frequency and percentages were as follows: 67 out of 188 (35.6%) for Chinese, 4 out of 12 (25%) for Indians and 10 out of 61 for Malays (16.4%). *Chi-square test for independence* was run and the result showed that there was a significant association between the ethnicity (Chinese vs non-Chinese) and school work as a reason for suicide cases (Yes vs No), $\chi^2(1, n = 269) = 6.696, p = .01$. More Chinese thought that school work is a main cause in suicide than non-Chinese (35.6% vs. 19.8%), whereas more non-Chinese thought that school work is not main cause in suicide compared to Chinese (80.2% vs. 64.4%).

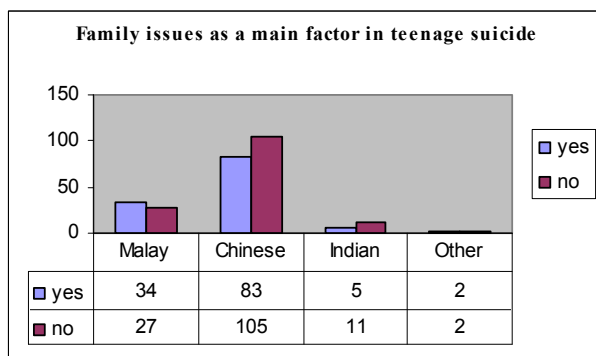


Figure 3: Family issues as a main factor in teenage suicide

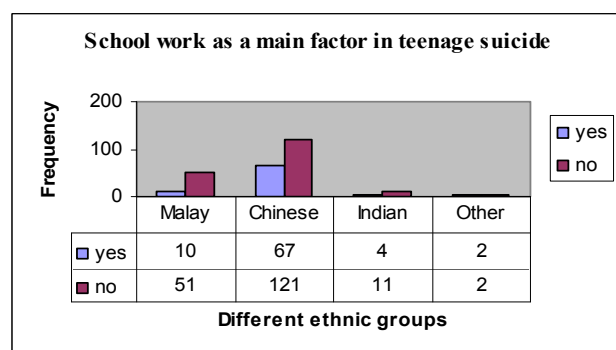


Figure 4: School work as a main factor in teenage suicide

3.3. Who Determine Life?

All the participants regardless of ethnicity background stated that life was determined by the individual ($n = 205$), rather than by others ($n = 34$) or the creator of the universe ($n = 49$, refer to Table 1).

Table 1: Ethnicity differences on youth options to the question: Who determine life?

	Malay	Chinese	Indian
Life is determined by myself			
Yes	43	152	10
No	18	36	6
Life is determined by other people			
Yes	9	20	5
No	52	168	11
Life is determined by creator of universe			
Yes	14	30	5
No	47	158	11

4. Discussion

This finding found that young people will not avoid the topic of death and the advice of friends was most sought for and teachers were people of last resource. For the sources of stress that the participants identified as possible factors in teenage suicide: boy-girl relationships were among the highest ranked, especially for male participants. This is in-line with Durkheim’s suicide theory [6] which depicted males as always more vulnerable; their risk of suicide is considerably higher. The findings seem to confirm Durkheim’s postulation as the male students are more emotionally vulnerable, as most of them cited a broken relationship as a reason for suicide. Gender differences in suicidal intentions are also identified by other researchers; “women who are more socialized tend to use suicide as ‘cry for help’ than men” [8]. It could be explained by the male reluctance to share their personal problems with others when they experience emotional disturbances. Instead, they opt for serious suicide action.

The school environment is always a place of stress for most students. The findings from this study reveal that more students cited stress from school work as the main factor in teenage suicide. This is supported in the literature that education is most valued in traditional Chinese families and can be traced back from Chinese Confucian beliefs [9], Malaysian Chinese families are no exception. Most Chinese parents would expect high academic performance from their children. Children from such families do not want to disappoint their parent due to the popular concept of filial piety. This explains why most Chinese participants cited school work as a contributing factor to suicide.

The third factor identified in suicide was family issues. Families are bound to face a lot of changes as a result of social change. The society nowadays is getting increasingly competitive, fast-paced, full of uncertainty, rapid change, insecurity and risk taking. Most families are dual income family and parents are busy with work. Hence children are pretty much left on their own. Adnan [6] attributes suicide to an unstable context, in which our youths are growing up, and which includes a lot of risk factors. Some of those factors identified in this study were the stress of coping with boy-girl relationships and school work. Moreover, the family itself becomes a source of stress for the young people. The findings of this study seem to confirm the Adnan’s postulation of external environment factors, especially changing values. The values of collectivism are increasingly changing to individualistic ones. Most of the participants state that life is self-determined, rather than determined by other people or by a creator of the universe, regardless of ethnic or religious background.

It shows that the collectivism values are weakening. This fading away of traditional protective factors such as family, collectivism and religious norms are the immediate eco-systemic environments in which our young people are living nowadays. The environmental context and the value of the society are fast changing. Young people feel that they are not able to have control, but they want to be in control. This was reflected by the way they expressed “Life is determined by self” instead of “by others”. This is the situation which gave rise to what Durkheim described as anomic suicide, which arises from a state of dissatisfaction due to external stress. The findings of this research indicate that young people are increasingly reacting with dissatisfaction to the way they are regulated by society. Young people experience lack of control in their own lives and they might feel unable to cope when faced with uncertainty, even though these uncertainties are presented to them

as “opportunities” [10].

Friends are the people most relied upon by the young people in times of need. Hence, developing peer support leaders in the school counselling programme could be effective in reducing suicide rates among the young. Mentoring and coaching by peer support leaders could be effective [11] as peer support programmes are found to be helpful in providing positive influences in the areas of academic and non-academic situations. Peers have a greater impact on their fellow pupils in that they serve as guides and role models. Also, working towards strengthening family ties with our young people in order to be able to offer help when needs arise is important.

5. Conclusion

Suicide as a social pathology requires preventive measures in the social context in which suicidal individuals are located. This paper reveals the perspective of young people on the issues of suicide and death. Various possible causes for suicide were identified by the participants. It is hoped that the numbers of tragedies among suicidally unhappy young people might be reduced.

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7. References

- [1] J. Li, Y. Jiang, R. Fan. Recognition of Biological Signal Mixed Based on Wavelet Analysis. In: Y. Jiang, et al (eds.). Proc. of UK-China Sports Engineering Workshop. Liverpool: World Academic Union. 2007, pp. 1-8. (Use “References” Style)
- [2] H. Hendin. (2008). Introduction: Suicide and suicide prevention in Asia. World Health Organization, Department of Mental Health and Substance Abuse, 1 – 5.
- [3] K. M. Lubell, S. R. Kegler, A. E. Crosby, & D. Karch, (2007). Suicide Trends Among Youths and Young Adults Aged 10--24 Years – United States, 1990—2004. Division of Violence Prevention, National Center for Injury Prevention and Control, (CDC), 56(35), 905-908.
- [4] Ministry of Health Malaysia, Clinical Research Centre, National Suicide Registry Malaysia (NSRM). (2009). The Annual Report of the National Suicide Registry Malaysia (NSRM) 2008. Retrieved from http://www.nsr.gov.my/pdf/NSRM_report2008.pdf
- [5] Suicide figures may be higher. (2011, February 10). The Stars. Retrieved from <http://www.thestars.com.my>
- [6] T. Maniam (2009) Life or Death: Suicide in Malaysia from a Psychiatric
- [7] Wong. (2011, February 10). Interview with Adnan. The Stars. Retrieved from <http://www.thestars.com.my>
- [8] E. Durkheim. (1951). Suicide: A study in sociology (J. A. Spalding & G. Simpson, Trans.). New York: Free Press. (Original work published 1897).
- [9] J. Langhinrichsen-Rohling, J. Friend & A. Powell. (2009). Adolescent suicide, gender, and culture: A rate and risk factor analysis. *Aggression and Violent Behavior*, 14(5), 402-414.
- [10] S. Jimerson. (n. d.). Adolescent Development: Current Issues Retrieved from <http://education.indiana.edu/cas/adol/adol.html>, on 30 May 2011.
- [11] A. Furlong, & F. Cartmel. (2006). Young people & Social change: New perspective. (2nd ed.). Berkshire: Open University Press.
- [12] N. N. Singh, J. P. Leung, & A. N. Singh. (2000). International perspectives on child and adolescent mental health. London, UK: Elsevier.