

Incidence of Suicide in Females of Faisalabad Tehsil

Uzma Masud, Bashir Ahmad Siddiqi, Ahmad Saeed

ABSTRACT

Background: Suicide in females is an important and sensitive issue in our society. Suicide is one of the leading cause of death in both genders all over the world. The incidence and pattern of suicide in females vary from country to country. Religious and social values and legal issues play an important role in this regard. Since ours is a male dominating society and female rights are not observed properly as mentioned in Islam. Very few studies about the epidemiology of suicide in females have been conducted in Pakistan. We conducted this study on the patterns of suicide in females by the data of autopsies conducted at Faisalabad from 2002 to 2014. This study will give us an overview of the incidence of suicide in females, more vulnerable age group, most commonly used method and seasonal variation.

Materials and Methods: The study includes 69

of suicidal deaths in females belonging to different age groups autopsied at the Department of Forensic Medicine, Punjab Medical College, Faisalabad. Cases were selected on the basis of information from the scene of crime, police inquest, autopsy findings and interview with the persons pertaining to the victim. Findings were tabulated and analyzed.

Results: The study revealed that suicide rate in females was 0.401/100,000, the peak incidence was in age group 20–29 years followed by 10–19 years of age groups. Hanging was the most common method used. A seasonal surge in summer was noted.

Conclusion: Suicide in females of Faisalabad is much lower as compared to western countries. Female suicide occurs at a younger age in Faisalabad as compared to western countries.

Key Words: Suicide, Firearms, Seasonal variation.

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INTRODUCTION

The word suicide is derived from a Latin word “sue” which means “of oneself” and “cide or cidium” meaning “a killing”. Suicide is the process of purposely ending one’s own life¹.

It is lower in countries or subcultures whose religious or cultural traditions proscribe suicide². Since ours is a male dominating society and female rights are not observed properly as mentioned in Islam and constitution of Pakistan. Role of female is very submissive in our community.

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Statistics indicate that male die much more often by means of suicide than do female; however, reported suicide attempts and thoughts are much more common among females than males^{3,4}. Suicide is considered criminal offence, with punitive law imposed in place for attempted suicide.⁵ Suicide is a tragic and potentially preventable public health problem. Suicide behaviour is complex, linked with risk factors. People consider suicide when they are hopeless and unable to see alternative solutions to problems. It is most often related to mental disorder like depression.⁶ Female victims of domestic violence have eight times the risk for suicide as compared with general population. Physical and psychological abuse by partner may trigger suicidal thoughts.⁷

Suicide attempts are frequently repeated until successful. Such attempts may extend over many years. A variety of means may be employed by the same individual on one or successive occasions.⁸ On World Suicide Prevention Day 2008, WHO claimed that Japan, China and India account for about 40% of the world suicides. Experts claim that 60% of these suicides have not occurred if proper intervention was undertaken. Mental disorders, depression and impulsiveness play important role in suicidal behaviour. Suicide is complex with psychological, social, biological, cultural and environmental factors involved.⁹

In women the commonest cause of suicide was quarrel with husband.¹⁰ Gender is one of the most frequently replicated predictors for suicide.¹¹ There are no official data on suicide from Pakistan, a conservative South Asian Islamic country with traditionally low suicide rates. Both suicide and attempted suicide are illegal acts, as well as socially and religiously condemned, making research in this area difficult.¹²

More frequency of suicidal attempts in females is due to the effect of changing concentration of hormones.¹³ Changes in the brain chemistry and hormonal factors may contribute differently to suicidal behavior in men and women. It should also be noted that the postpartum period carries with it sleep deprivation, increased stress, strains and disruptions in interpersonal relationship, and other changes that accompany caring for new baby. The influence of pregnancy and child birth on women's mental health and impact of these events on women's suicidal behavior is the area of further study.¹⁴

MATERIALS & METHODS

A total of 69 cases of female deaths were labelled as suicide on the basis of police inquest, autopsy findings, visit of the scene of crime and interview with relatives, friends and acquaintances of the victims. These cases were selected from all the female autopsies conducted at the Department of Forensic Medicine Punjab Medical College Faisalabad between January 1, 2002 and December 31, 2014.

The cases were grouped on the basis of **age**, **method** of suicide used and the **season** during which the suicide occurred.

RESULTS

A total of 69 cases of female suicide occurred from 2002-2014(13 years). This formed 7.2% of the total of 958 female autopsies conducted during this period.

Table 1: Suicidal death in females of faisalabad from 2002-2014

Year	Suicidal	Total No. of Autopsies
2002	7	58
2003	8	60
2004	9	66
2005	2	43
2006	4	64
2007	4	59
2008	3	79
2009	1	87
2010	4	74
2011	6	88
2012	11	100
2013	6	88
2014	4	92
Total	69	958

The highest incidence was during 2012 which was 11 in numbers and the lowest was during 2009 where there was only a single suicide case. The female suicide rate for the city of Faisalabad is 0.401/100,000, calculated from the estimated population of Faisalabad city on 31-12-2014 (3303643).

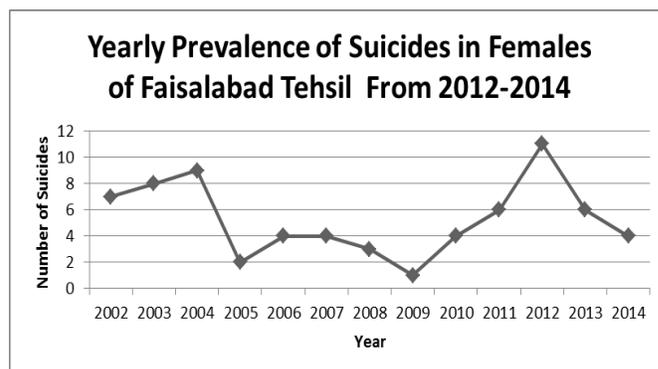


Figure 1: Prevalence of suicides in females

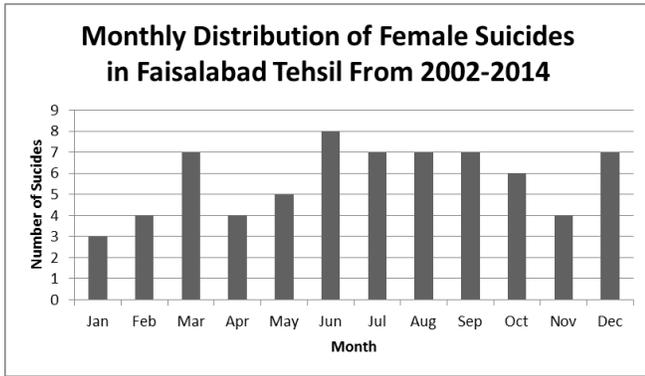


Figure 2: Distribution of female suicides

We noted seasonal variation with peak incidence in the month of June (8 cases), followed by (7 cases each) in March, July, August, September and December. There were 6 cases in May and 4 cases each in February, April and November. The 5 months of summer season collectively constituted 49.26% of the total suicides with January having the lowest number of 3 suicides.

Method Used For Suicide By Females in Faisalabad Tehsil From 2002-2014

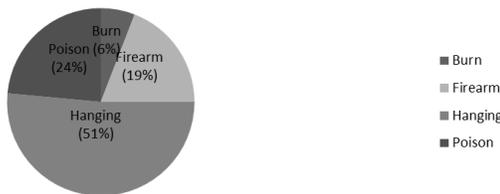


Figure 3: Methods used for suicides

The most common method used for suicide was hanging which was used by 35 (51%) of the victims. This was followed by poisoning in 16 (24%) and firearms in 13 (19%). 4 females used burning for suicide hence made 6%.

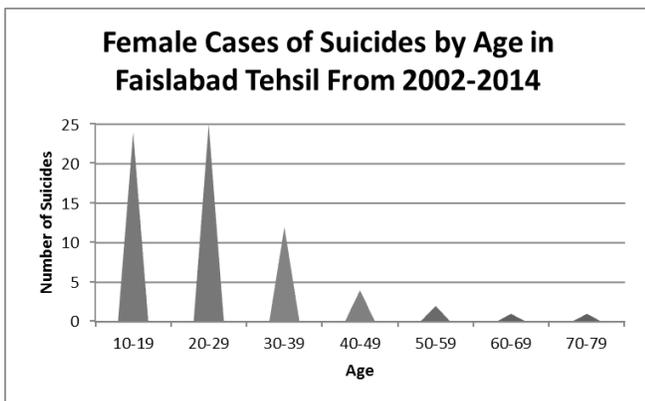


Figure 4: Cases of suicides by age

DISCUSSION

Suicide is the leading cause of death in the world. Suicide in females is an understudied subject in Pakistan. There are many social, legal and religious sanctions against it.¹⁵

The rate of female suicide in our study is very low because suicide is a legal, socio cultural and religious stigma in our society. The heirs especially the parents avoid any medico-legal activity in this regard and resist the autopsies of their daughter or son due to which we believe these figures to be an underestimate. Incidence of completed suicide is lower among females than males among all age groups in most of the world.¹⁶ The same is true in Pakistan.

One common explanation relies on the social construction of hegemonic masculinity and femininity. Male gender role tends to emphasize greater levels of strength, independence, and risk taking behaviour. Identity of female is constructed around the family, having young children may correlate with lower risks of suicide. Male vulnerability is heightened because of gendered expectations that they should provide for themselves and their families.^{17,18}

Though Islam preaches equality amongst husband and wife but their obligations are different. In Islam woman is permitted the same social and legal status which is due to a man except in certain specified spheres where the distinction has been created by Allah, not to lower the prestige of a women but for the smooth and proper running of the society.¹⁹

In our study 71% cases of female suicide were from less than 30years of age. Incidence of suicide showed a sharp decline with advancing age in females of our society. The trend of decreased suicidal rate with increasing age is also apparent in previous studies of Pakistan as well as other countries of sub-continent. However opposite trends were noted in many European & American countries.²⁰ Reason of increased rate of suicide at an early age can be marital, economic and domestic problems in early years of independent existence. Increased inclination towards religion with advancing age and strong belief in the world hereafter also play an important role in lowering incidence of suicide with advancing age. An additional reason could be the family system of

our society in which elders are taken care, get relax and enjoy their advancing years with their grand children.²¹

Hanging, poisoning, firearm & burning are the methods used for suicide by the female of Faisalabad. Hanging was the most common method used by females and same trend was seen in previous studies of Pakistan^{21,22} Tokelau island²³ and India²⁴. Poisoning was the second common method. Over-dosage and poisoning can be deadly, but more likely to be caught before death occurs and saved by emergency treatments. Hanging is an immediately lethal method so, percentage of completed suicide cases are more.¹⁶ Suicide rates are higher in areas where organophosphates are used, may be because of easy availability.²⁵ Not all suicides are impulse driven, many mental illnesses are more likely involved along with financial worries, health worries and social stress as well.²⁵

A new method of suicide by females is reported in a study of Multan. Jumping into river or canal of the mother along with the children, the reason might be that her children may not suffer socio-economical and socio-cultural problems after her death. This phenomenon is very alarming for the authorities engaged in the prevention of suicide in Pakistan.²⁶ One cause of low suicidal rates in females is that they tend towards less immediately lethal methods than males.²⁷

Peak incidence of suicides in females of Faisalabad was seen in summer followed by spring and winter. Almost same pattern was found in previous studies of Pakistan in this regard^{20, 21,26} as well as in India²⁸, Austria²⁹, and Turkey³⁰. Suicide is existing on an alarming scale in local context with a pattern comparable to the changing trend in the developing world. There is a need for urgent measures in this direction including compilation of culturally specific scientific data at a national level.³¹ Our study underscores the need for a standardized system of registering suicides in Pakistan. It directs us towards an urgent need to address high psychological distress in the females of Pakistan.³²

There is urgent need for a standard system of recording of suicides in Pakistan, so that true rates can be estimated. This will help in informing

policy and monitoring effectiveness of suicide prevention programs.

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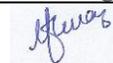
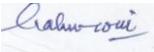
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