



SOCIO-DEMOGRAPHIC VARIABLES OF PATIENTS WITH ATTEMPTED SUICIDE: A CROSS-SECTIONAL STUDY.

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ABSTRACT The aim of the current study was to assess the socio-demographic variables in patients of suicidal attempt. The study comprising of 152 patients with suicidal attempts for one calendar year were evaluated for various socio-demographic factors and is a retrospective study. Among the attempters females were more commonly indulged in attempting suicide as compared to males and majority of the subjects belonged to the age group 19 to 36 years. In males majority of the cases were unemployed/unskilled (42.85%), while in females mostly were housewives/household (56.36%). Marital status and level of education were found to be important factors. Patients from rural background outnumbered the urban population in attempting suicide. There is a pressing need to identify the socio-demographic factors affecting risk of suicide in a given case. Every case presenting with suicidal ideations or attempt should be evaluated in detail.

KEYWORDS : Socio-demographic Variables, Attempted Suicide,

INTRODUCTION

Suicide is a major public health problem worldwide and the episodes of attempting suicide are increasing world wide, reflecting the decreased threshold of attempters to adverse conditions. Since previous suicidal attempt was considered as the best predictor of future suicide, identifying factors behind suicidal attempt are helpful to design suicide prevention strategies. Suicidal attempts are commonly encountered in emergency in any hospital. Attempted suicide is about 20 times commoner than completed suicide [1].

In the entire State, at least one suicide is recorded every alternate day and there is hardly a hamlet or mohalla that has been untouched by more than one incident of suicide attempts. The incessant violence in the Valley has devastated the psychological issues of the Kashmiris and stress-related diseases have grown manifold across the social spectrum, driving people mostly youngsters to increasingly to suicide [2]. In 2015, the data of the crime branch reads, 247 cases of suicide were registered and the number jumped to 267 in 2016. At least 291 cases of suicide were reported in 2017 across the state, among them the highest numbers came from Handwara, Baramulla and Anantnag and 575 cases of attempt to suicide have been admitted to the SMHS Hospital alone.

There are several factors that are associated with attempted suicide, viz, gender, age, education, history of previous attempts. Moreover disturbed interpersonal relationship and economic difficulties are also reasons for attempting suicide. The aim of the study is to highlight the socio demographic variables of patients with history of attempting suicide and role of society and public health authorities are absolutely necessary in preventing episodes of suicidal attempts.

MATERIAL AND METHODS

This study was carried out in the Department of Psychiatry, SKIMS Medical College and Hospital, Bemina Srinagar, Jammu and Kashmir from 2019 to 2020. A total number of 152 patients were evaluated with detailed history, physical examination and data collected. The sample comprised of all patients with a history of attempted suicide and who were willing to participate in the study during the tenure.

RESULTS

In this current study, as table 1 shows that the patients between the age group of 19-36 years constituted the maximum of 61.82% followed 24.34% in the age group of up to 18 years. More patients with history of attempted suicide were from urban background (65.78%) as compared to the rural background (34.21%). On education level, most of the attempters were with low education level, up to 10th class (53.94%).

Among the attempted suicide patients the females from nuclear families dominated numerically in the sample as compared to joint families and males from nuclear families were more as compared to joint families. The married patients (57.23%) were found more as compared to the unmarried (42.76%) ones.

In Occupation, males were unemployed/unskilled and were females, housewives/household were found more in such groups. The history of previous attempt was found more in females (59.09%) as compared to males (33.33) and among the attempters of suicide the history of psychiatry illness was found more in females (49.09%) as compared to males (19.04%).

Table.1: Frequency And Percentage Of Different Socio Demographic Profile Of Patients With Attempted Suicide.

Characteristic		Male (n=42)		Female (n=110)		Total
		No.	%	No.	%	
Age	Up to 18 years	7	16.6	30	27.27	37
	19 to 36 years	20	47.6	74	67.27	94
	37 to 46 years	7	16.6	6	5.45	13
	47 years and above	8	19	0	0	8
Domicile	Rural	10	23.80	42	38.18	52
	Urban	32	76.19	68	61.81	100
Education	Up to 10 th	20	47.61	62	56.36	82
	10 th to 12 th	12	28.57	35	31.81	47
	12 th to Graduation	6	14.28	9	8.18	15
	Post Graduation	4	9.52	4	3.63	8
Marital Status	Married	23	54.76	64	58.18	87
	Unmarried	19	45.23	46	41.81	65

Occupation	Student	13	30.95	37	33.63	50
	Employed	6	14.28	5	4.54	11
	Businessmen	5	11.90	2	1.81	7
	Unemployed,Unskilled	18	42.85	4	3.63	22
	Households/Housewife	0	0	62	56.36	62
FamilyStatus	Nuclear	23	54.76	90	81.81	113
	Joint	19	45.23	20	18.18	39

Table.2: Showing The Profile Of Patients With History Of Previous Attempted Suicide.

Characteristic		Male		Female		Total
		No.	%	No.	%	
History of previous	Yes	14	33.33	65	59.09	79
	No	28	66.66	45	40.90	73

Table.3: Showing The Profile Of Patients With History Of Psychiatry Illness Among The Patients Of Attempted Suicide.

Characteristic		Male		Female		Total
		No.	%	No.	%	
Historyofpsychiatry illness	Yes	8	19.04	54	49.09	62
	No	27	64.28	29	26.36	56
	Donotknow	7	16.66	27	24.54	34

DISCUSSION

The current study comprised of 152 cases with history of attempted suicide and their socio demographic variables explored. Among them majority of the cases between the age group of 19-36 years constituted the 61.82% followed 24.34 % in the age group of up to 18 years. The similar findings were reported by Logaraj et al [3] and Ponnudurai [4]. In gender the female predominance as, among suicide attempters, 110 of the patients were females (72.36%) and males were 42 (27.63%). This kind of findings were confirm by Logaraj et al [3]. We found that more attempters subjects were from urban back ground (65.78%) than rural background (34.21%) because of a variety of stressors related to living and working in cities, including overcrowding and social isolation [5]. Current study shows that among suicide attempters majority of the cases were from the married group (57.23%) as compared to unmarried (42.76%) similar to the findings by Logaraj et al [3], Bhatia et al [6]. Our data shows that among attempters belonged to low education level up to 10th standard (53.94%) this was similar to other studies[5,6]. Most of the attempt cases in our study were from nuclear families, similar findings were reported WHO SEAR reports 2002 [7]. Occupation wise study showed that among females, largest group were housewives/Homemakers (56.36%) followed by students (33.63%) and among males, the largest group was unemployed/unskilled worker (42.85%) followed by students (30.95%). These findings were similar to the findings by Bhatia et al [5]. We found, that out of 152 patients, 79 (51.97%) patients had history of previous suicidal attempts with a male 14 (33.33%) and female as 65(59.09%). However, more percentage(24%) of cases with pervious history of attempts, were found in other studies [3,5]. Moreover out of 152 suicide attempts case, 62 (40.78%) cases had history of psychiatry illness with females were more 54 (35.52%) as compared to male 8 (5.26%) gender.

CONCLUSION

Attempted suicide is a complex affair, however, the current study implicates that the suicidal attempts are common in unemployed and students population with an absolute female predominance. Urbanization has also contributed because increase of a variety of stressors related to living and working in cities, including overcrowding and social isolation. Further, it is difficult to derive concrete conclusions from small retrospective study at a tertiary hospital. Elaborate clinical studies along with long span survey on a large sample size involving multiple study centers will be necessary to convincingly analyze the various socio demographic variables in cases of attempted suicide.

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