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Are Young Women More Potential to Commit Suicide?

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ABSTRACT

Introduction: Convenience in various aspects of life in fact does not guarantee people live happier. Every year around the world around one million people die from suicide. One of the most consistent findings in suicide research is that women make more suicide attempts (tentamen suicide) than men. This research is the first research conducted as an effort to increase the awareness of all medical potentials of young women to commit suicide. **Methods:** This research was qualitative research with an in-depth interview approach to respondents. The subjects of this study were patients with a diagnosis of tentamen suicide who consulted the Cattleya Consultation Center, Palembang, Indonesia. **Results:** All subjects with a tendency to commit suicide were female (100%) with a young age, ie the youngest age was 16 years and the oldest was 28 years. Women at this age are classified as young and productive age. It was found that most of the patients had avoidant personality traits (43%). In addition, the factors that triggered the emergence of tentamen suicide in some respondents were social and environmental factors (44%), namely in the form of friendship factors (peer groups), and the experience of bullying. **Conclusion:** Young women have the potential to do tentamen suicide.

1. Introduction

The millennial era is identical to the ease of various activities and information disclosure, where all can be accessed online starting from shopping, studying, transportation, and medical treatment can also be online. In addition, various social activities and friendships can be done online making the world feel closer and information is increasingly massive and without limits. However, this millennial age with all the ease and openness of information does not necessarily make people who live in this era become happier or feel happier. Every year nearly 800,000 people die from suicide in all parts of the world, or in other words every 40 seconds every person dies from suicide.¹ WHO has recorded a mortality rate from

suicide of 10.7 per 100,000 individuals.² These facts show that the case of suicide is quite high and certainly needs serious attention from all medical academics to care about the tentamen suicide. The fact shows that all the conveniences in millennial times are not in line with the happiness and welfare of humans in millennial times.

Young people are the generation that has felt the most impact of this millennial era. All the conveniences and openness of information have been enjoyed by this generation since they were born. The ease that they have felt since they were born, makes their mentality more vulnerable and less resistant to dealing with various life problems. In addition, young

people sometimes only rely on emotions and act without thinking. Women are people who are known as human beings who are full of feelings and are very influenced by emotions in every action and behavior. Biologically, women are greatly influenced by the hormone estrogen in their life processes which greatly affects women's psychological and emotions.³ This research was the first research conducted in an effort to increase the awareness of all medical potentials of young women to commit suicide. This research attempts to explore the potential of young women to commit suicide.

2. Methods

This research was qualitative research with an in-depth interview approach with respondents. The subjects of this study were patients with a diagnosis of tentamen suicide who consulted the Cattleya Consultation Center, Palembang, Indonesia. Patients with a diagnosis of tentamen suicide that agreed to participate in the study and did not have severe organic comorbidities were included in this study. A

total of 14 research respondents were included in this study. Respondents subsequently conducted in-depth interviews related to problems that underlie complaints and diagnoses as well as a review of various aspects of sociodemography, personality, and factors that triggered the occurrence of suicide. After conducting in-depth interviews, a further study of the problem, a study of sociodemographic aspects, aspects of parenting, and aspects of personality. This study was approved by the bioethics and humanities committee of the Faculty of Medicine, Universitas Sriwijaya (No.231/ kptfkunsri-rsmh / 2019). Next, the data were presented descriptively and in a qualitative manner in the form of narrative and problem studies.

3. Results

Table 1 shows the results of the study by considering the sociodemographic aspects, personality traits possessed by each individual, and stressors and risk factors that trigger suicidal behavior and suicidal ideation.

Table 1. Characteristics of research subjects with tentamen suicide

No.	Characteristics		Percentages
1	Age	Youngest 16 y.o. Oldest: 28 y.o.	14 persons (100%)
2	Sex	Female Male	14 persons (100 %) 0 (0%)
3	Personality	Borderline Avoidant Antisocial Histrionic Anancastic	5 persons (36%) 6 persons (43%) 1 person (7%) 1 person (7%) 1 person (7%)
4	Stressor/ risk factors	Childhood abuse Spouse/Marital Conflict Family Conflict Sexual Abuse Social Factors (friendship, bullying etc.)	3 persons (21%) 1 person (7%) 3 persons (21%) 1 person (7%) 6 persons (44%)

Table 1 shows that all patients with a tendency to commit suicide were female (100%) at a young age, ie the youngest age was 16 years and the oldest was 28 years. Women at this age are classified as young and productive age. Based on table 1, it was found that most of the patients had avoidant personality traits (43%), and others had borderline, histrionic, and anancastic personality traits. In addition, the factors that triggered the emergence of tentamen suicide in some respondents were social and environmental factors (44%), namely in the form of friendship factors (peer groups), and the experience of bullying.

4. Discussion

Suicide is a global public health burden. Every year around the world around one million people die from suicide, 10-20 million suicide attempts, and 50-120 million are greatly affected by suicide or attempted suicide by someone close to them. Asia contributes to 60 percent of the world's suicides, so at least 60 million people are affected by suicide or attempted suicide in Asia every year.¹⁻³ Global suicide rates are estimated at 14/100,000 with 18/100,000 for men and 11 / 100,000 for women. Suicides represent 1.8% of the 1998 global disease problem and are expected to increase to 2.4% by 2020.^{2,4}

One of the most consistent findings in suicide research is that women make more suicide attempts (tentament suicide) than men, but men are more likely to die in their efforts than women. However, very little research has focused on suicidal behavior in women or tried to explore the complex relationship between gender and suicidal behavior. One reason for the lack of investment in female suicidal behavior might be that there is a tendency to see suicide behavior in women as manipulative and not serious, seeking attention from those around them.^{5,6} Men and women differ in their roles, responsibilities, status, and power and these socially constructed differences interact with biological differences to contribute to differences in their suicidal behavior.

In this study, all patients with suicide attempts were female. It is expected that there is a link between

hormones in women and suicide attempts (tentamen suicide). Menstrual cycles are associated with nonfatal suicidal behavior, with suicide attempts occurring more frequently in the phases of the cycle when estrogen and serotonin levels are lowest.⁷ Studies reveal that 25% of women who die from suicide are currently menstruating compared to 4.5% of the control group.^{8,9}

In addition to biological factors such as hormones and neurotransmitters, personality factors also play a role in the background of suicide behavior. In this study, the majority of research subjects were avoidant personality traits. Individuals with avoidance personalities tend to have low self-esteem, are sensitive, and feel unable to deal with problems. This type of individual tends to run away from the problem and may consider suicide or self-injury to be the solution to their problem.¹⁰

In spite of avoidant personality, borderline personality was also obtained in this research. The borderline personality is associated with a variety of psychopathology, including unstable moods, impulsive behavior, as well as unstable interpersonal relationships.^{10,11} Individuals with threshold personalities have an average of three-lifetime suicide attempts, most with substance or drug overdoses.¹² self-injuring behavior is also common in borderline personality.

Non-Suicidal Self Injury (NSSI) usually appears as a wound on the wrist and arm, however, NSSI does not mean suicide. Patients with threshold personalities have problems with emotional regulation and addiction cutting themselves to reduce painful mental states. Cutting their own hands can reduce emotional tension, but does not reflect the desire to die.¹⁰ Other personalities such as histrionic and anecastic use suicidal behavior as a manipulative effort and tend not to aim to die. Tentamen suicide is an integral part of the clinical picture of individuals with personality disorders.

Stressors that induce a woman to commit suicide in this study were mainly social factors (peer groups), the trauma of childhood abuse, and family conflicts

(conflicts with parents). The relationship between social factors (especially bullying) and ideas of suicide is complex and is often mediated by a build-up of factors such as depression, abuse, low self-esteem, isolation, poor school performance, and anxiety.¹¹ Behavioral and emotional trauma experienced at a young age, including bullying, can last into adulthood because of chronic exposure to negativity. Therefore, exposure to bullying at a young age can have long-term consequences. Children and adolescents who are victims of bullying, and those who bully others, experience a higher risk for suicidal ideas and behavior.¹³

Cyberbullying may be a greater risk factor for the idea of suicide in adolescents than the more traditional type of bullying.¹⁴ Research shows that victims of cyberbullying are 1.9 times more likely to commit suicide or die by suicide than those who have never been intimidated, with 41 suicides in four countries (US, Canada, Australia, and the UK) in the eight years that have occurred as a direct result of cyberbullying.¹⁴⁻¹⁵ Students who are victims of bullying often or who are oppressing others have a higher risk of experiencing depression, suicide ideas, and suicide attempts compared to peers who are not involved in bullying. An increased risk of depression and suicidal ideas related to bullying is common among female students. Bullying behavior that occurs both inside and outside of school also correlates with a higher risk of mental stress.¹⁵

Traumatic experiences in childhood including physical, emotional, and sexual abuse cause a much higher risk of suicide.¹⁶ Abuse of a wife is one of the most significant triggers of female suicide. Wives who are abused, humiliated, and powerless commit suicide to divert the burden of humiliation from themselves to their torturers.¹⁷

5. Conclusion

Young women have the potential to do tentamen suicide.

6. References

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