

Risk factor-based suicide prevention: does Bangladesh need emotion focused strategies?

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Summary

Suicide is a preventable public health problem which is under researched in Bangladesh. This review aimed to discuss the risk factors of suicide in Bangladesh based on readily available literatures. Current study was conducted with available literatures after adequate search in PubMed, PubMed Central, Google, Google Scholar, BanglaJOL with the searching keywords. Different studies revealed somewhat similar risk factors in Bangladesh. Majority of suicides were found to be linked with emotional events such as marital discord and family quarrel. Other reported risk factors were also related with strong emotions such as sexual harassment, failed in exam, not fulfilling immediate demand such as motor bike, bicycle, special dress in ceremonial occasions, special television channel watching etc., extra-marital relationship issue, early marriage, death of partner, death of children, and verbal abuse by teacher, love affair related complicacy, domestic violence, and divorce. Psychiatric illness as a risk factor of suicide is under focused and has not been considering as important risk factor in the country. Risk factors of suicide in Bangladesh have been found different in regards to the other parts of the world and mostly related with emotionally charged events. Culturally appropriate prevention strategies should be considered to address the issue.

Materials and methods

This narrative review was conducted with available literatures after adequate search in PubMed, PubMed Central, Google, Google Scholar, BanglaJOL with the searching keywords namely suicide in Bangladesh, risk factors of suicide in Bangladesh, suicide prevention in Bangladesh without any time limit. Special attention was considered to the risk factors of suicide in Bangladesh context with a focus on prevention activities of suicide in the country.

Results and discussion Risk factors of suicide in Bangladesh

Different studies revealed somewhat similar risk factors in Bangladesh. In 2012, a community-based study conducted by Feroz et al., found about 63% of suicides were proximally related with emotional events those were noticed within the family. Another study conducted in rural area revealed about 65.5% suicides were related with emotional factors and again the factors were found within the family. A recent review mentioned other risk factors obtained from studies where more than half of the suicides (51% and 57%) were related to emotional factors those were prevailed within the family. Another review unveiled that the most common risk factor of suicide was marital discord followed by quarrel among the family members. A study analyzing the newspaper contents found about two-third of the risk factors within the family, mostly as

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marital discord followed by discord with family members.³ Another study which assessed the online media portals found the emotional risk factors as major issues i.e. affair related issues were mentioned in about 14%, marital and familial discord in about 22% of suicides. 1 A study assessing the decisive moment revealed about 81% of the attempts were happened impulsively.²

Besides the marital and family quarrel issue, few noticeable risk factors were reported those were also driven by emotionally charged events. Suicide among supporters of favorite sports teams is also not so uncommon in the country.¹³ Other reported risk factors were also related with strong emotions such as sexual harassment, failed in exam, not fulfilling immediate demand such as motor bike, bicycle, special dress in ceremonial occasions, special television channel watching etc., extra-marital relationship issue, early marriage, death of partner, death of children, and verbal abuse by teacher, love affair related complicacy, domestic violence, and divorce.^{1,3,10,13}

Psychiatric illness as a risk factor of suicide is under focused and has not been considering as important risk factor in the country.^{7,10,14} Very few researches studied mental illness as a risk factor and very few proportions of the risk factors were found in that domain.^{1-3,7,10,12,14} Among intensive care unit admitted patients after suicidal attempt, mental illness was reported in about 59% of the respondents;¹⁴ another study found it as about 6%.¹ However, depression was found in about 26% of the respondents that was reported by another study.²

Extrapolation of risk factors from available sources revealed majority proportion of risk factors derived from emotionally charge driven events in Bangladesh. However, previous reviews revealed psychiatric morbidities are the vital issues in suicide as a risk factor. Repeated evidences stated that, approximately 90% of persons who died by suicide had been suffering from no less than one mental illness and depression has been considered as the main culprit disorder accounting about 60% of the deaths.^{7,15,16} These variations can be accounted by considering multiple factors such as lack of adequate researches exploring the relationship with mental disorder and suicide, cultural and geographical variation of risk factors, religious beliefs, strong social closeness, overall educational status and might be new other issues those demand further research.

Available suicide prevention initiatives in Bangladesh

In spite of huge necessity, very few activities have been started in the country to prevent suicides. Among them, suicide prevention clinic has been dealing with the clinical populations whereas the crisis releasing hotline (Kan Pete Roi) has been listening the distressed people though those are inadequate.⁴ The newly formulated society is yet to start any preventive activities. Available global evidences revealed numerous prevention strategies, which have tested and trusted as effective in preventing suicide.^{8,16} However, no single strategy has been found as universally effective and superior than others.⁵ As a significant portion of risk factors are related with immediate emotionally charged events, Bangladesh should really look for strategies which can support the distressed person immediately. The available hotline can be an effective option to ventilate the emergencies though it is yet to be popularized in the country.⁵ Health promotional activities focusing to make people conscious regarding moments of life can be fruitful. Further multilateral research is necessary to identify the risk factors, relationship of risk factors with existing biopsychosocial aspect of health and to sort the perfect culturally customized prevention strategy ensuring the maximum utilization of available resources.

Conclusion

Risk factors of suicide in Bangladesh have been found different in regards to the other parts of the world and mostly related with emotionally charged events. Culturally appropriate prevention strategies should be considered to address the issue. Further researches are warranted to excavate the risk factors appropriately, reason for the difference in risk factors and choose most suitable prevention strategy.

Conflict of interest: None declared.

Funding: Self-funded.

Acknowledgement: Author thanks Hasina Akter for her support during article preparation.

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