

Factors Affecting the Suicide Phenomenon in Cebu City, Philippines, Based on the Responses of the Victims' Significant Others

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Abstract: This work is a descriptive study of the factors affecting the 2016-2017 suicide phenomenon in Cebu City, Philippines, based on the responses of the victims' significant others. Despite the surge of suicide cases in the country (there is an increasing rate since 1992), however, to date, there are not so many scholarly researches and comprehensive studies done on the subject. Given that suicide remains a serious public concern across the globe, and even more so in the Philippines, we strongly believe that discovering the factors why suicide cases happen is not only relevant and important but also very much necessary and called for, especially that there is almost a never-ending new addition to suicide statistics in many places. It is in the light of this present necessity that this study examined what triggered the suicide phenomenon in Cebu City based on: a) the occasion of the suicide; b) the social location of the suicide; and c) the reasons for the commission of the suicide according to: c1) sociocultural factors and c2) psychological factors. This study employed guided interview with the suicide victims' significant others – persons related to the victims themselves either by affinity or consanguinity. The results revealed that the 2016-2017 suicide trend in Cebu City was more a phenomenon among males who were between 25-40 years old, married or cohabiting, graduates of secondary education, unemployed, and Catholics. The results further indicated that social factors and psychological factors played a significant role in the victims' commission of suicide based on the responses of their significant others.

Keywords: suicide phenomenon, Cebu City, significant others, suicide factors

INTRODUCTION

In 2016, local newspapers and tabloids almost never failed to report one suicide case per week in Cebu City throughout the year. According to the records of the Cebu City Police Office (CCPO), the number of

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suicide incidents from January to December 2016 totalled to 46 (CCPO 2017). The following year yielded almost the same number, in that from January to August 2017, there were already 25 suicide cases on record (Ibid.). Obviously, such phenomenon could never have happened without some triggering factors. The continuing and rather worrisome emergence of suicide cases in Cebu City must have some specific causes, or better yet, common denominators. This is what this study is about.

Cebu City is a first class and a highly urbanized city in the island province of Cebu in Central Visayas, Philippines. It is the 5th most populated city in the country and the most populous in the Visayas, and as such, is considered as well a significant centre of commerce, trade, and education in the Visayas (World Population Review 2018). In this paper, we aimed to identify the specific factors affecting the 2016-2017 suicide phenomenon in Cebu City based on the responses of the victims' significant others. We were wondering: What could be the underlying reasons why those victims decided to end their life? That's what we wanted to find out from the persons who were closely related to the victims themselves.

To put things in proper perspective, the Philippines has seen an increasing suicide rate since 1992 (Butuyan 2016). Despite the surge of suicide cases in the country, however, to date, there are not so many scholarly researches and comprehensive studies done on the subject. As a matter of fact, it was only in 2007 that, for the very first time, a detailed study on suicide in the Philippines was made (Macdonald 2007). Even so, this particular study was exclusively focused on an indigenous tribe living in the remote southern part of the island of Palawan; and what is more, this study was made by a foreigner. In other words, the findings in this study are not much useful to those who are seriously looking for helpful and relevant information on the state of suicide cases in the country.

Thankfully, in 2011, "the first comprehensive summary of the epidemiology of suicidal behaviour in the Philippines" – and so far the only one – was published (Redaniel et al. 2011). This study provided a time trend analysis of suicide incidents that occurred in the Philippines from 1974-2005. And yet, this very study also readily acknowledged that its findings are far from sufficient; there is still "the need for more reliable data in order to understand suicide behaviour and establish prevention strategies in the Philippines" (Ibid.). After this pioneering 2011 study, no other studies that resemble it in nature and scope have

yet been made. Although in 2013, 2017, and 2019 three new studies on suicide were published, their focus is more on suicide ideation and not on actual suicide incidents. Their subjects are also very specific and exclusive: young Filipino men between 15 to 24 years old (Manalastas 2013); Filipino youth aged 15 to 27 (Quintos 2017); and adolescents enrolled in the Alternative Learning System (ALS) in Manila (Estrada et al. 2019). In short, these studies do not offer much information outside their scope, and neither do they say anything about who, what, why, when, and by what means this number of suicide cases is happening in a certain locality or in the country as a whole. Hence, they do not provide objective sociodemographic and statistical facts of actual suicide cases.

Needless to say, there is a dearth of available scientific data and materials on suicide in the Philippines and among Filipinos. Therefore, up-to-date literature focusing on suicide incidence in specific places in the country is scarce. As a result, for the most part, Filipino scholars who intend to acquire a better understanding of suicide phenomena, especially the ones occurring in their very own localities, have to unfortunately peruse studies carried out by foreigners, whose findings do not always reflect or correspond to the real Filipino situation.

Given that suicide remains “a major public health concern worldwide” (Ruiz-Robledillo et al. 2019), and even more so in the Philippines, we strongly believe that discovering the factors why suicide cases happen is not only relevant and important but also very much necessary and called for, especially that there is almost a never-ending new addition to suicide statistics in many places, particularly in Southeast Asia. It is in the light of this present necessity that we hope that this study would be of great use and value to many.

This study is thus meant to describe the different factors affecting the 2016-2017 suicide phenomenon in Cebu City, Philippines based on the responses of the victims’ significant others, in order to ultimately help experts recognize new dynamics and consequently adopt appropriate strategies and techniques that could contribute in better addressing the occurrence of suicide and its related problems. To help us attain this objective, the study first described the sociodemographic profiles of the suicide victims. This study then examined the contexts of suicide commission based on: a) the occasion of the suicide; b) the social location of the suicide; and c) the reasons for the commission of the suicide according to: c1) sociocultural factors and c2) psychological factors.

MATERIALS AND METHODS

The study was conducted in Cebu City, Philippines. While this study looks into the 2016-2017 suicide phenomenon in Cebu City, we only utilized the suicide cases that were reported to the Cebu City Police Office. Our different respondents were the suicide victims' significant others. The identity of the reported victims, per CCPO records from January 2016 to August 2017, was our main source in identifying our respondents. We would have wanted to do a full-year study of the suicide cases in Cebu City in 2017, but by September that year, the CCPO no longer shared their records with us, citing their stricter implementation of the Data Privacy Act of 2012. In any case, clearly established relationship with the victims by consanguinity or affinity was the pre-qualifying criterion that we set for someone to become our respondent. Only 1 representative, from the many significant others of the reported suicide victim, was interviewed in the study.

The main tool used in gathering the data was our developed survey questionnaire. Face-to-face interviews with the respondents using the survey questionnaire were conducted. For our initial steps, we first secured a permit to conduct a study from every Barangay Chairman of the barangays where the 39 suicide victims resided. The locations of the victims were supplied by the Cebu City Police Office. With the help of the Office of the Barangay and some community volunteers, we were able to locate the family of the victims and their significant others. With the approved barangay permit, we then asked the victims' significant others if they were willing to be the respondents of the study through informed consent. Willing respondent-significant others were asked to affix their signature on the informed consent form.

The study used information on the suicide victims derived from the CCPO and the direct responses of their significant others. Full confidentiality was strongly observed as per CCPO's advice and the request of the victims' families. Anonymity was strictly established to preserve the trust and confidence of the respondents and the victims' families.

RESULTS AND DISCUSSION

Based on the responses of the suicide victims' significant others, the salient points of our findings in this study are as follows:

1. Majority of the suicide victims in Cebu City from January 2016 to August 2017 were males who were 25-40 years old,

married/cohabiting, with at least secondary education, unemployed, and Catholics.

As to sex, the male victims in Cebu City during the covered period are higher than female victims, a trend that corresponds to the findings of Redaniel et al. (2011), Ibrahim et al. (2017) and even that of WHO (2014), which all concluded that suicide cases are more likely to happen to men than to women. This trend was actually already observed by Durkheim (1951) more than a century earlier, meaning, there has never been a trend change yet in over a hundred years.

As to age, those who are 25-40 years old have the most reported suicide cases over any other age groups in Cebu City, and it is something that does not reflect the findings of Redaniel et al. (2011), Haas et al. (2014) and Fontanella (2015), which all attributed high cases of suicide to young individuals aged 24 and below. Moreover, the unique result that came out of our study does not also correspond to the findings of Durkheim (1951), Da Silva et al. (2015) and the WHO (2014), which stressed out higher cases of suicide in old-aged individuals. However, this study's result is consistent with the findings in the studies of Ibrahim et al. (2017) and Wyllie et al. (2012), which claimed that suicide cases are more likely to occur to young working individuals who are between 25 to 40 years old. The demands at work, which could easily translate into stress and pressure within the working environment, as well as the disappointment in failing to attain financial stability associated with this age group, prove to be among the strongest influences that push young working individuals within this age range to contemplate suicide.

As to social status, majority of the suicide victims in Cebu City were married/cohabiting, a finding that contradicts that of Redaniel et al. (2011) but corresponds to that of Akbarizadeh et al. (2019), where married individuals were discovered to have a higher risk of suicide. This particular finding in our study suggests that problems that beset married people could trigger one of the (or both) spouses to deal with the said problems via suicide. Our gathered data clearly show that conflict with spouse and financial problems, two of the most common setbacks that married people face, have resulted to more than half of the suicide cases in our study.

As to educational background, almost close to half of the suicide victims in Cebu City merely attained secondary education, while those who attained college education come next, closely followed by those who solely attained elementary education. These figures somehow

correspond to the study of Ibrahim et al. (2017), which discloses that those with low level of educational attainment, particularly the ones who only had secondary education, have higher cases of suicide. Our figures also tell that those who only attained elementary education seemed to have a lower suicide risk compared to those who went to college. However, our figures correspond to the study in Japan (Yoshioka 2016) where lower risk of suicide was observed in those with high educational background. In our study, not one of the victims attained graduate and postgraduate education.

As to employment status, the unemployed victims in Cebu City manifested more suicide risk than those who were employed or self-employed. Such finding conforms to the study of Schneider et al. (2011), which designates those without work to have higher suicide risk than those with work. This same finding, therefore, goes against the results of several studies such as those of Redaniel et al. (2011), Durkheim (1951) and Ibrahim et al. (2017), which all identify employed individuals to have higher risk of suicide. This is because the kind of work and working conditions could be strong influences that push stressed and pressured employees to resolve their problems by means of suicide.

As to religious affiliation, save for one, all the suicide victims were Catholics. There is nothing surprising about this – and in fact this result is rather expected – given that more than 85% of Filipinos are Catholics. In comparison, in those places where Protestants are the majority, Durkheim's (1951), Becker's and Woessmann's (2011), and Villarica's (2012) studies naturally showed that Protestants have higher suicide cases than Catholics. This clearly implies that mere membership in a religion cannot totally prevent suicidal people from taking their lives or motivate them to go on living. The comparatively lower rates of suicide in the Philippines, though, led Redaniel et al. (2011) to acknowledge that the country's "strong Roman Catholic culture could also contribute to preventing some suicides, due to the beliefs and social norms associated with Catholicism"; to support their claim, the authors further cited a notably lower rate of suicide cases in predominantly Catholic countries in Europe like Portugal, Spain, and Italy.

2. The suicide contexts also showed that based on occasion, all victims committed suicide on ordinary days. Not a single victim ended his or her life on a holiday, special occasion (e.g., birthday, wedding, fiesta, or anniversary), or when they were with their

friends. Majority of them did the act when they were alone, with no one else in the house at the time of the suicide, although almost all of them were then living together with their nuclear family. No one committed suicide while living in a house with friends, while at work/office, or school.

This particular finding squares with the study of Durkheim (1951), which underlined that peacetime – that is to say, any ordinary day that is free from social activities and connections – is a likely moment for more suicide cases to occur. This finding is also in accord with Almendrala's (2015) report, which emphasized that lack of social networks and face-to-face contact with others showed a higher risk of suicide. In other words, being alone could equate to more suicide commissions than when there are other people who are constantly around. However, while majority of the victims committed suicide when they were alone – with no one else in the house at the time of the incident – almost all of them were actually then living together with their nuclear family. This could be interpreted to mean that even if the victims were living with their family, the inner turmoil that they felt could no longer be calmed by their family's presence, or that the victims' very own internal struggle could be mainly due to their family itself. In a way, one's family could make or break one's life.

3. Under the category of sociocultural factors, the reasons why the victims in Cebu City committed suicide had more to do with family issues (e.g., financial matters, conflict with spouse, parents, or children) than with peer issues, although loss of relationship had led to a significant number of suicide incidence. Religion, sexual abuse, bullying, and group pressure were non-factors in the suicide commissions.

This finding resonates with Durkheim's (1951) which found that wealth and money could trigger the commission of suicide (cf. Burry 2019). Financial problem in the family ranks first among the reasons that pushed our victims to commit suicide. However, the tallies for parent-child conflict and spouse conflict both yielded non-negligible results. This is why Arria et al. (2009) underscored that whenever relational conflicts in the family arise, it is imperative to deal with them at once as these could greatly help reduce undesirable consequences, including mere suicide ideation. This especially applies to Filipinos because family and relationship problems constitute the chief reasons behind many suicide incidents across the country (Redaniel et al. 2011).

Meanwhile, the fact that a significant number committed suicide following a relationship loss indicates that “loss or fear of a loss” could seriously condition a person’s mental framework and influence him or her to end his or her life (Schimelpfening 2020). In the Philippines, though, while many suicide incidents reported in the news media point to loss of relationship as among the foremost reasons for suicide commission, there is no study yet that closely looks into the deep impact of such loss on Filipino suicide victims.

4. Under the category of psychological factors, the reasons why the victims in Cebu City committed suicide were equally triggered more by stress and depression (both tied as the top rationale for committing suicide), followed closely by hopelessness. Other negative emotional states like loneliness and anger on one hand, and drug abuse on the other, were the next triggering factors. Self-pity, boredom, and self-hate come after, with almost the same number of victims committing suicide because of them.

These findings are in full consonance with the articles of Schimelpfening (2020), Burry (2019), Ibrahim et al (2017), and Arria et al. (2009), which all identified stress, depression, hopelessness and anxiety as risk factors of suicide. Our findings also echo Almendrala’s (2015) study which connected loneliness and depression to suicide incidence. Qin’s (2005) psychological autopsy, which singled out stressful events as the main causes of suicide, likewise aligns with our findings. Qin’s (2015) other findings, which consider alcohol and drug abuse as risk behaviors that may lead to suicide commission, concur with our own findings as well.

CONCLUSION AND RECOMMENDATIONS

Our findings have led us to conclude that, in many ways, our findings are consonant with a number of studies from abroad, which all link suicide to serious financial, relationship, emotional, and mental problems. It could be because, despite our differences in race, geographical origin, culture, and religion, at the bottom, we are human beings; we are all essentially the same. However, as Filipinos, we possess traits and characteristics that are unique and peculiar to us as a people. It is for this reason that the lack of studies on Filipino suicide incidents is regrettable. More and more Filipinos die of suicide every year, and yet there is still very few quantities of research articles on the subject.

We tried to offer some helpful insights and useful information. Our study is bound by some limitations: it is focused on a suicide phenomenon in Cebu City and it heavily relies on the responses of the victims' significant others. The factors that led them to commit suicide may not be exactly the same factors that had triggered other Filipinos elsewhere in the country. At any rate, our findings made it clear that suicide is always a possibility that may occur at home, particularly where signs of depression, overstress, hopelessness, and drug abuse start to become manifest. It is only wise, therefore, to be watchful and alert about these signs, beginning within one's very own family. Otherwise, if these are not given any attention, these could easily turn into another suicide commission.

Hence, in the light of the findings and conclusion of this study, we are hereby presenting the following recommendations:

1. Educational institutions should encourage and incentivize research on suicide incidence and prevention among Filipinos. To date, studies on suicide in the country are scant, and the latest few are not even focused on actual suicide incidents but on suicide ideation.
2. While research outputs on suicide are not many, suicide prevention should still be taught to the wider public. At present, the country's Department of Health and most, if not all, Local Government Units have either insufficient or no established programs at all that could aid in educating the people on suicide prevention.
3. With very few available experts and specialists in psychology, psychiatry, and mental health, Suicide Prevention Programs should tap volunteers and other professionals who could serve and function as trainers, coaches, or educators. Many could be helped if this direction would be pursued.

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