

Research Article

DOI: <http://dx.doi.org/10.22192/ijamr.2022.09.04.009>

Suicidal behaviors in University students of the economic-administrative área.

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Abstract

Introduction: According to the WHO International Classification of Diseases, Diagnostic and Statistical Manual (DSM-5) and the American Psychiatric Association (APA), suicidal behavior is considered an emotional or mental disorder that ranges from the development of ideas of death, suicide attempts, until the completed suicidal act.

Objective: To identify the presence of suicidal behavior in university students.

Material and Methods: Transversal, descriptive study with a representative sample of 300 students using stratified random sampling. Applied instruments: Plutchick scale, Robert CES-D scale and Okasha scale.

Results: Of the sample, 61.66% (185) were women and 38.33% (115) men. It was observed that 31.67% (95) of the economic-administrative area presented suicidal behaviors, 19% (57) women and 10.33% (31) men, distributed as follows: suicidal risk 16.66% (50), suicidal ideation 3.33% (17) and suicide attempt 4% (2).

Conclusion: A high rate of suicidal behavior was found in students from the economic-administrative area, which was 3.1%, compared to the rate found in the state of Veracruz of 2.5%.

Keywords

suicidal behaviors,
suicidal risk,
suicidal ideation,
suicide attempt.

Introduction

The World Health Organization (WHO) defines suicide as the deliberate act of taking one's own life, causing injury, with a varying degree of intent to die; this fact is considered serious and harmful both for the person who commits it, as well as its context, due to the self-destructive intention it has. Suicidal behavior can be expressed as a continuum that goes from ideation, planning and attempt to completed suicide (1, 2). According to the International Classification of Diseases (ICD) of the World Health Organization (WHO), the Diagnostic and Statistical Manual (DSM-5) and the American Psychiatric Association (APA), suicidal behavior is considered a manifestation of discomfort or emotional or mental disorder and does not represent a diagnosis as such and, consequently, the presence of other emotional or behavioral symptoms that together form part of its diagnosis should be reviewed (3). Suicidal ideation is denominated as a group of thoughts that manifest a wish or intention to die or other suicidal psychological experiences such as the fantasy or prefiguration of one's own death. It is a step prior to acting and it may not be manifested or it may be done through verbal or written threats (4). Suicide attempt is self-directed, non-fatal, potentially injurious behavior with any intent to die as a consequence of the behavior. A suicide attempt may or may not end in injury (5). Recent WHO statistics indicate that 800,000 people die by suicide each year (equivalent to one death every 40 seconds) and many more attempt to take their own lives without success, consequently, suicide is considered a global public health problem. Studies with adolescents or university students in Spanish-speaking countries are where the majority of risk factors for suicidal ideation are identified and establish its prevalence from 3 to 47% (6).

Suicide can occur at any age and, in 2016, was the second leading cause of death in the 15-29 age group worldwide. It is estimated that about 20% of all suicides are committed by pesticide self-poisoning. Other common methods of suicide are hanging and firearms (7).

In Mexico, suicides have persisted as a major health problem. In 2016, there were 6,291 intentional self-injury deaths, representing a rate of 5.1 suicides per 100,000 population. According to age, young people between 20 and 29 years old have the highest suicide rates. Within the male sex, a rate of 8.6 suicides per 100,000 men was shown, while in the female sex it was 1.9 per 100,000 women. In this same year, in the state of Veracruz, the standardized rate of suicides per 100,000 inhabitants was 2.5 (8).

After identifying suicidal behavior, an assessment of suicidal risk is carried out, according to the characteristics, and thus classify the severity of the suicide attempt as follows: mild: there is suicidal ideation, without specific plans to harm himself, he modifies his behavior in such a way that there is self-criticism; moderate: there are plans with suicidal ideation, possible history of previous attempts and additional risk factors (more than one risk factor); severe: concrete idea of harming oneself, has a history of a previous suicide attempt, there are more than 2 risk factors but without a clear suicide plan, expresses hopelessness, rejects social support and does not modify his or her suicidal idea; extreme: presents several suicide attempts with various risk factors and may have self-harm as an aggravating factor (9, 10).

Objective

Identify the presence of suicidal behavior in university students in the economic-administrative area, determine the age and sex groups with the presence of suicidal behavior and recognize the semester with the highest suicidal behavior.

Materials and Methods

The study that was carried out was transversal, descriptive and observational, having a population of university students within the economic-administrative area who were studying one of the semesters in the March-June 2019 cycle. The number of students enrolled in the economic-administrative area was considered with a total of 1,326 students. The formula of finite populations

was applied, resulting in 364 and, through a stratified random sampling, the strata being the bachelor's degrees of the area that was studied according to the estimates applying exclusion criteria, the sample consisted of 300 students. Three scales were applied: Plutchick scale, Robert CES-D scale and Okasha scale. The Plutchick scale is a 15-question self-administered questionnaire where the subject has to answer by marking the options YES and NO. Each affirmative answer scores 1. The total score is the sum of the scores of all the items, where a cut-off point of 6 is proposed. The Roberts Suicidal Ideation Scale CES-D, which is made up of four items, has a reliability level of $\alpha = .71$, which reports the presence of these thoughts the week prior to recording: 0 = 0 days; 1 = 1-2 days; 2 = 3-4 days and 3 = 5-7 days, so the response range is from 0 to 12. The Suicidality Scale designed by Okasha is self-applied and consists of 4 items where the first three explore suicidal ideation and

the fourth asks about suicide attempts. The responses to the suicidal ideation items are collected on a category frequency scale that is scored from 0 to 3 points for each item: never, rarely, sometimes, often. The sum of these three items constitutes the suicidal ideation sub-score, which can range between 0 and 9 points. The suicide attempt item is also scored from 0 to 3 points according to the number of suicide attempts: no attempt, one attempt, two attempts, three or more attempts.

Results and Discussion

Of the sample, 61.66% (185) were women and 38.33% (115) men. According to the career, 25 (8.3%) students with suicidal ideation were identified, of which Accounting and Administration have the highest percentages 2.6%, Table 1.

Table 1. Suicidalideation in students according to the course they are studying

Presence of suicidalideation in students	Course that the students study					Total
	Accounting	Administration	Systems	Managemement	Software Engineering	
With suicidalideation	8	8	3	4	2	25
Without suicidalideation	89	71	38	63	14	275
Total	97	79	41	67	16	300

It was observed that the career with the highest percentage of suicidal ideation without suicide attempt data is Accounting 7 (2.33%); the highest percentage of suicide attempt without suicidal

ideation was also obtained by Accounting 2 (0.67%) and, finally, the course with a high percentage of suicidal ideation plus suicide attempt was Administration 3 (1%). Table 2.

Table 2. Suicidal ideation with or without suicide attempt according to the career that the students are studying.

Presence of suicidal ideation with or without suicide attempt	Course that the students study					Total
	Accounting	Administration	Systems	Management	Software Engineering	
Suicidal ideation plus suicide attempt	1	3	2	1	0	7
Suicidal ideation without suicide attempt	7	5	1	2	2	17
Without suicidal ideation with suicide attempt	2	0	0	0	0	2
Without suicidal ideation without suicide attempt	87	71	38	64	14	274
Total	97	79	41	67	16	300

Conclusion

A high rate of suicidal behavior was found in students from the economic-administrative area, which was 3.1%, compared to the rate found in the state of Veracruz of 2.5%. A higher percentage of suicidal behaviors was found in the accounting and management career, so it is important to know the reason for this trend by investigating the factors that are triggering it and, subsequently, relate them to student performance and strategies by universities to respond to this problem.

References

- Instituto Nacional de Estadística y Geografía. Estadísticas a propósito del día mundial para la prevención del suicidio [Internet]. Ciudad de México: INEGI septiembre 2018 [consultado mayo 2019]. Disponible en: http://www.beta.inegi.org.mx/contenidos/saladeprensa/aproposito/2018/suicidios2018_Nal.pdf
- Prevención y manejo de la conducta suicida, Argentina, División de salud mental SI.PRO.SA, 2017.
- Suicidio [Internet]. Who.int. 2018 [cited 4 March 2019]. Available from: <https://www.who.int/es/news-room/fact-sheets/detail/suicide>
- Ministerio de Salud y Protección Social. Boletín informativo ONSM: Julio de 2017.Colombia. (2017). Recuperado de:<https://www.minsalud.gov.co/sites/rid/Lists/BibliotecaDigital/RIDE/VS/PP/ENT/boletin-conducta-suicida.pdf>
- Bedoya Cardona, EY, Montaña Villalba, LE. Suicidio y Trastorno Mental. CES Psicología [Internet]. 2016;9(2):179-201. Recuperado de: <https://www.redalyc.org/articulo.oa?id=423548400012>
- Santos HGB, Marcon SR, Espinosa MM, Baptista MN, Paulo PMC. Factors associated with suicidal ideation among university students. Rev. Latino-Am. Enfermagem. 2017;25: 2878. [Access Mar. 05 2019]; Available in: http://www.scielo.br/pdf/rlae/v25/es_0104-1169-rlae-25-e2878.pdf DOI: <http://dx.doi.org/10.1590/1518-8345.1592.2878>

7. Blandón CO, Carmona PJ, Mendoza OM, Medina PO. Ideación suicida y factores asociados en jóvenes universitarios de la ciudad de Medellín. AMC [Internet]. 2015 Oct [citado 2019 Mar 5]; 19(5):469-478. Disponible en: http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S1025-02552015000500006&lng=es.
8. Borges G, Benjet C, Orozco R, Medina-Mora ME. The growth of suicide ideation, plan and attempt among young adults in the Mexico City metropolitan area. Epidemiology and Psychiatric Sciences. Cambridge University Press; 2017; 26(6): 635–43.
9. Rivera RL, Rivera HP, Pérez AB, Leyva LA, Castro F. Factores individuales y familiares asociados con sintomatología depresiva en adolescentes de escuelas públicas de México. Salud pública México [revista en la Internet]. 2015 Jun [citado 2019 Mar 5]; 57(3):219-226. Disponible en: http://www.scielo.org.mx/scielo.php?script=sci_arttext&pid=S0036-36342015000300010&lng=es.
10. Corona MB, Hernández SM, García PR. Mortalidad por suicidio, factores de riesgos y protectores. Revhancienméd [Internet]. 2016 Feb [citado 2019 Mar 05]; 15(1). Disponible en: http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S1729-519X2016000100011&lng=es.

Access this Article in Online	
	Website: www.ijarm.com
	Subject: Psychiatric Sciences
Quick Response Code	
DOI: 10.22192/ijamr.2022.09.04.009	

How to cite this article:

Huerta-Cortés María de Jesús, Duarte-Cruz Virginia, Zarco-Corona Adrian, Rosas-Brito Mariana. (2022). Suicidal behaviors in University students of the economic-administrative área. Int. J. Adv. Multidiscip. Res. 9(4): 72-76.
DOI: <http://dx.doi.org/10.22192/ijamr.2022.09.04.009>