



Suicide Among Diverse Ethnic Groups in Indonesia

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Abstract

Suicide is said to be linked to poverty from a variety of angles. In contrast to suicides that occurred in various countries, such as America, China, and Japan, where the cause was more in the debate over ideology, beliefs, or as a form of resistance to oppressive regimes, the cause in this case was more in the debate over ideology, beliefs, or as a form of resistance to oppressive regimes. However, suicide among many ethnic groups in Indonesia is caused by existing and intense despair in facing life's challenges, and they also believe that suicide is caused by myth and mystic beliefs. Unique suicide phenomena among different ethnicities and groups have been seen in Indonesia, particularly in Gunung Kidul, Yogyakarta Province, and Bali Province. The two provinces are among others with high rates of cases in suicides. Suicides occurred in Gunung Kidul, Yogyakarta, as a result of the legend of Pulung Gantung. Pulung Gantung is a heavenly signal concerning suicide by hanging, according to the local ethnic community. The pulung gantung was reported as a blue-red light that flashed across the sky swiftly at night. If the item comes one day and falls someplace, there will be a suicide occurrence soon. Some individuals in Yogyakarta still believe in such legends. The origins of this story may be traced back to people's travels. Suicides among Balinese are linked to impact of modernization to religious norm and local tradition. From cultural perspective slowly but surely, the uprooting of Balinese people from their cultural and even religious roots has contributed to excessive pressure. The social ties of kinship have become looser and on the other hand, in terms of religious norms, there has been a breakdown of the rules that become the benchmark for the behavior of every citizen.

Keywords

Suicide · Ethnic group · Myth · Values · Culture

Introduction

Suicide is more than simply a narrative in modern society. Socrates' willingness to drink poison, for example, was a deliberate act of suicide, but it was in response to the death punishment placed on him. The figure of Kumbokarno, who committed suicide by desperate war, may be found in the puppet narrative that began in the Ramayana and Mahabharata. We also know about the harakiri or seppuku tradition in Japanese culture, which is suicide by thrusting a knife into the stomach and extracting all of its contents as a sort of chivalry in atonement (Darmaningtyas,

2002). In today's modern culture, the means and reasons for suicide are also varied. There are suicides by burning bodies in protest, are common, as Chen Guo, a Beijing-based member of the Falun Gong meditation group, demonstrates. He set his body on fire at Tiananmen Square with seven others in protest of the Falun Gong sect's prohibition. There are other ceremonial rites, such as the mass suicide perpetrated by the Heaven's Gate cult in the United States, because of the belief in eternal joy.

Suicide is a very individual, strange, and elusive phenomenon that offers a different perspective of death (Fahrudin, 2007). Albert Camus considered suicide to be the only truly serious philosophical issue. Judging whether this life is worth living or not, is the basic answer of philosophy. Suicide remains a concrete reality, regardless of the philosophical debate of its value. The chances of an increase in suicide cases are huge, along with the increasing stress in life. According to a study conducted by Reform Think Thank in August 2005, the younger generation's economic situation is now worse than that of their parents of the same age. Materialism has infiltrated the joints of our society, unbeknownst to us. Predictions of worse times ahead provide plenty of opportunity for Darwin's concept of "survival of the fittest," as well as the likelihood of an increase in suicide occurrences.

Since most people's lives are becoming increasingly materialistic, stress arises from the various pressures of life. Unfortunately, the general population has never been trained in emotional intelligence, thus it is not part of Indonesian society's educational process. In reality, life skills are anticipated from emotional-intelligence education, and their souls are delicate, so they are easily rattled. On the other hand, society must have a safety valve on social problems, namely the family. However, this concept does not work to the maximum because the family can no longer function as a safe place. The suffering of life seems to be borne by itself. The socialization function with the community and neighbors is also congested. Of course, if there are adults who have psychological problems, the neighbors are the ones who assist them. This trend, however, persisted. This sort of togetherness has vanished in both individualistic metropolitan regions and impoverished rural groups. The reason is, even though the neighbors know there is a family entangled in problems, the only thing that emerges is indifference. This feeling of indifference can happen due to several things. For example, fear of being perceived as interfering with other household problems, or that they are problematic. For example, there are families in debt and every day is stormy. Neighbors next door who also have economic problems, who can help, this is because they are also entangled in the same problem. While the richer neighbors, almost certainly more do not care. Because there is seldom a family that can concentrate their family life, the restricted public space that can be a cheap source of amusement exacerbates the situation.

Many people lose their grip on values. There are also anomalies in the social environment. Individualism, corruption, hedonism, materialism, and the decline of living standards. While some people suffer from poverty, deprivation, another group enjoys a life of luxury, albeit with corruption. The public is also faced with ambiguity. In such conditions, the television dish worsens the situation. Today, especially since the Covid-19 pandemic, many parents have lost their jobs, various

sections of society are experiencing economic and social pressures due to prolonged pandemic abuse, leaving many people isolated from social interaction.

Definition and History of Suicide

Suicide has the meaning in Latin “*sui*” which means *self*, and “*cide*” which means to *kill*, so suicide is killing oneself. Suicide is described as destroying oneself, murdering oneself, and slaughtering oneself, but some reveal that suicide is more synonymous with self homicide than murdering oneself because in a more specific sense self homicide has the meaning of intentional killing of oneself (a killing of self) while the term murdering oneself means the wrongful killing of oneself (Wennberg, 1990).

In his book *Suicide*, published in 1897, Emile Durkheim defined suicide as a death caused directly or indirectly by the victim’s own good or bad acts. Durkheim seeks to perform a suicide analysis that has hitherto relied solely on psychological and individualistic viewpoints. This indicates that suicide is a social symptom framed by the circumstances or social structure in which it occurs (Durkheim, 1966). Seen in the broader perspective of human life as a whole, perhaps no one understands why someone commits suicide. The “reason” a person commits suicide, is often just a trigger, not the actual cause. The same question, do not encourage others to commit suicide. Many other individual factors play a role. Many factors determine whether a person is at high risk for suicide, including genetic factors, personality background, ability to adapt and solve problems that are of course based on experience and educational supplies obtained from both cultural and religious aspects, life factors/social-environmental support, the severity and duration of the stressors experienced, the meaning of a particular “event” for the person concerned, the presence of other previous psychiatric disorders, factors that trigger suicidal events, and so on.

The results of a study by Yamamoto (1971) of 1,814 children in the USA, Australia, Canada, Egypt, Japan, and the Philippines try to help us understand this strangeness. Yamamoto’s study underscores how embarrassing situations can take a hard blow to a child’s feelings and self-esteem. The idea that when a child is found to be doing something bad, in the child’s mind, will mean that they will always look bad. Or, when humiliated, they think they will not be able to achieve the state *self-esteem* as before. The child’s self-image is formed constantly, and this process is very fragile. As a result, children tend to exaggerate things out of proportion, so sometimes feelings of guilt are stronger than adults. If we look at cases of child suicide, many of them are caused by the inability of parents to fulfill the wishes of the child, which ultimately creates feelings of inferiority and shame in the environment of his friends. Thus, the most common trigger in the child or adolescent suicide is the experience of humiliation. Examples are an embarrassment for not being able to pay school fees, embarrassment for not being able to attend school picnics, embarrassment for not having a good uniform, and so on. This explanation not only cautions that parents don’t comprehend what’s going on, which makes the child unhappy and

destroys his self-esteem, but also that parents are too fast to figure out what's going on and what the child is thinking, making hasty choices, and assuming the worst.

Suicide has been around since humans came to earth and the views of nations on suicide are different. Some suicides are considered acts of knights. Moreover, if done by someone worried that he will fall into enemy captivity. Some suicides grow out of customary impulses and traditions that regard it as an honor for the person who commits it. Some people view suicide as a form of devotion and loyalty. As for suicide, which a person commits not of his own volition, but is required and recommended by the customs and traditions of his nation in certain conditions, although this form of suicide is quite strange, but not a few civilized and primitive nations still do it.

In ancient Roman and Greek times, there was a stream of Stoicism philosophy that allowed suicide if life was viewed as a source of misery and suffering (Appleby, 2000). In connection with this, the philosopher Sanka said, "a miserable person should not blame except himself in this life. He could end his misery by ending his life. Just as a person chooses the boat he will use to sail and the house he will occupy and strives for both to realize his tranquility, so too should he choose the path of death that can guarantee his safety. In this world no one is miserable or suffering unless he is willing with such misery and suffering. Then live, O miserable people, if this misery pleases you. But if this affliction does not please you, then before you there is a way that stretches out to return to the earth from which you were created". In ancient Greece and Rome, some people sentenced to death especially in criminal acts against their religion and country were forced to commit suicide by ingesting poison or cutting their veins. Socrates, for example, was sentenced to death by ingesting poison, while Sanha was punished by Neuron by cutting the veins of his hand (Appleby, 2000).

In the Chinese tradition, suicide is recommended by custom and tradition and is considered an honor for the perpetrator, because of their memory in various cases and for the sake of realizing certain goals (Thomas, 2012). A soldier used to commit suicide after losing a war to defend his homeland, a young man could commit suicide when his family was insulted, and he was unable to retaliate. A woman commits suicide after being left dead by her husband or lover because she feels her life is no longer useful. Although the Chinese government has issued laws prohibiting such suicides, customs, and traditions still view women who do so with respect (Yu et al., 2020).

Meanwhile, in Japan, suicide in the famous harakiri method is done by stabbing the abdomen with a knife or sword. This suicide is required or recommended by their traditions in a variety of conditions (Russell et al., 2017). Sometimes the government allows people from the fighting class (samurai class) who have been sentenced to death to kill themselves in this harakiri way, instead of hanging or shooting. Such actions are done to honor the person who is punished, and to appreciate his good deeds in the past before committing a crime. This rule was applied until several years ago, before being abolished. Sometimes a person outwardly commits suicide out of personal desire, but in fact, he does so under the pressure of custom and tradition, this usually happens under many conditions and for different purposes. Among

them, suicide is committed by a person to express loyalty to a leader or ruler who has died. In all these conditions, suicide in the eyes of Japanese society is seen as a means of purifying oneself, realizing what is expected, and sincerely expressing what one wants to express, the perpetrator will gain honor and will be remembered after he dies (Fusé, 1980).

Factors Causing Suicide

Suicide is relatively easier to observe than a form of nonfatal suicidal behavior (Ivanoff & Fisher, 2001). Suicide can be defined as a person's attempt to kill himself intentionally. The word suicide comes from the Latin word *sui* which means self (self) and the word *cide* which means to kill (to kill). In the Encyclopaedia Britannica, suicide is defined as a person's attempt to end his or her life voluntarily or intentionally. Because this definition does not limit the outcome of such acts, it is reasonable to now distinguish between lethal suicide and attempted suicide or non-lethal suicide (Encyclopedia Britannia, Inc.). Durkheim does not involve an element of intentionality in the definition of suicide. For example, an advanced soldier faces death to save his division. He did not want to die or intentionally die. Meanwhile, Shneidman (1976: 53) defines suicide as "a human act of self-inflicted, self-intentional cessation." By definition, the focus is on the perpetrator and the actions he performs. If this definition is explained further then there are seven factors in general involved in the meaning of suicide, namely: initiation of an action that leads to the death of its initiator, the desire to perform an action that brings death to the person who desires it, the desire to destroy oneself, loss of desire, motivation to die, the perpetrator's knowledge that his action will result in death (Douglas, 1966). These dimensions are important in determining whether the death was caused by suicide or an act. It is the same whether death occurs by chance, merely as an unavoidable consequence for a specific purpose, or whether it is desired, which is certain in both of these conditions one denies its existence. The most important thing in this definition is the assertion of the element of knowledge of outcomes, which limits behavior at the human level and distinguishes it from mechanical death at the animal level. The ability to commit suicide demands that the activity is directed at others, but he is directed at himself. Therefore, suicide is called suicide. Psychoanalysis interprets suicide as an attack on someone with a dark mind, or as the result of an instinct to die (Furst & Ostow, 1979).

Several studies have been conducted to determine the factors that can be used to predict suicidal behavior (Goldney & Spence, 1987; Goldstein et al., 1991; Pokorny, 1983). However, all of these studies concluded that it is impossible to predict suicide. Even for people who suffer from diseases with a high level of danger. It's just that, although we are not able to accurately predict who will commit suicide, reality shows that there are some indications of behavior that can help to know who may be a victim of suicide. Some of the causes of suicide include mental disorders, depression, schizophrenia, substance abuse, personality disorders, physical illness, genetics, mass media, changes in the job market, and so on.

Depression and Mental Health Problem

Psychiatric disorders can lead to dangerous actions, whether in the form of lethal suicide, or non-lethal suicide (Gili et al., 2019; Mubasyiroh et al., 2018). It can be ascertained that psychological shock in any form is a dangerous factor for suicidal acts committed by a person (Brent et al., 1993; Shaffer et al., 1996). This mental illness is suffered by more than 71% of parents who commit suicide (Harwood et al., 2001). The danger of committing suicidal behavior has always been associated with depression (Joiner, 2009; Davison & Neale, 1998). More than half of depressed people think of committing suicide (Lönnqvist, 2000). Suicide is a major cause of increased mortality among people with depression. Suicide is increasing for every sufferer of mental disorders, but it is also accompanied by the presence of depressive disorder (Harris & Barraclough, 1997). It has been found that depression is a major factor in more than half of suicides (Gureje et al., 1998; Wulsin et al., 1999). And suicide due to depressive disorder is more common in adults than young children (King, 2003). Depression is also a major factor in suicide attempts. Research in Sweden in 1990, found that 60% of men and 44% of women who attempted suicide suffered from depression (Apter & Freudstein, 2000). I, feelings of uselessness, feelings of not being needed, and decreased cheerfulness were more common in those who attempted suicide than in others (Mann et al., 1999; Malone et al., 1995). Depression and suicide attempts are two dangerous factors for suicide. Suicide attempts in any form performed by people suffering from depression certainly indicate danger for suicide. Petterson (1983) proposed an instrument to measure the potential for suicide called the SAD PERSONS scale, namely Sex, Age, Depression, Previous Attempt, Ethanol Abuse, Rational Thinking Loss, Social Supports Lacking, Organized Plan, No Spouse, and Sickness.

Although the link between personality crisis and suicide is not generally believed, some recent research shows that personality crisis is an important factor in committing suicide (Linehan, 2000). Personality crises are found in 40–53% of people who commit suicide (Brent et al., 1993; Lesage et al., 1994; Roy & Draper, 1995). In addition, schizophrenia is also one of the mental illnesses that cause suicide. It is predicted that nearly 10% of schizophrenics commit suicide (Caldwell & Gottesman, 1990; Harris & Barraclough, 1997; Newman & Bland, 1991). Various studies have shown that the risk of suicide is quite high for men with schizophrenia whose lives are isolated from society, who do not have a job, and who have previously had suicidal ideation (Barraclough et al., 1974). Most people with schizophrenia have previously fallen into the dangers of alcohol and narcotics, which further increases the risk of suicide for them (Stone et al., 2014).

Substance Abuse

Murphy (2000) in his research found that alcohol and narcotics use are among the major factors that play an important role in suicide. In general, it was found that the use of narcotics and other drugs participated in suicide cases with a percentage of

25–55%. It is known that the use of alcohol can paralyze the human mind, and make a person feel and do things that the conscious state cannot do. Narcotics and alcohol use can also have negative impacts on social and individual relationships, lead to separation or divorce, affect work ethic, and result in a person's lack of attention to self and health. All of these conditions can pave the way for suicide. Murphy also found that about two-thirds of suicides received little or no social support at all. Half of them do not work, and the other half do not go to work regularly. Half of them suffer from health disorders. In addition, about a third of them live on their own. The dangerous factor in narcotics and other drug users is the development of depression, which is considered a major factor in suicide. This fact is also found in about two-thirds of addicts who commit suicide (Murphy, 2000).

Health Problem

Physical illnesses are among the most common causes of suicide, especially for the elderly (Harwood et al., 2001). Pain is an important factor in about 20% of suicides committed by the elderly. Much research has examined the link between chronic physical illness and suicide. These researches, among others, found that increased suicide risk is closely related to cancer, especially in the first year after diagnosis, and is closely related to neurological diseases, such as platelet sclerosis and stroke. The risk of suicide for people with AIDS also continued to increase from 1980 to 1990 (Stenager & Stenager, 2000). Recent research indicates that people who attempt suicide are thought to have a decrease in the hormone serotonin, which is naturally present in the human brain and plays a role in regulating character, sleep, and learning. Or in their brains, there is an unstable chemical process that results in careless behavior.

Unemployment

Various researches have uncovered the harmful effects of unemployment on the mind and body, both at the individual and group levels (Harwood et al., 2001). Some studies have concluded that suicide rates are higher in people who do not work than in people who work. In addition, there is a close relationship between times of unemployment and self-harm intent (Platt et al., 1988; Platt, 1992). Loss of employment results in many people suffering from depression, they have no role and feel useless. They see no other way to escape this difficulty except suicide.

Family Condition

The influence of social conditions on individuals is considered a major factor in increasing suicide rates. Among these social conditions is the increasing number of divorces in recent decades (Berman & Jobes, 1995; Dickstra, 1995). Most studies

mention a relatively high rate of divorce and separation in the families of adolescents who attempt suicide compared to adolescents who do not experience this (Spirito et al., 1989). Divorce also has an indirect effect on suicide attempts such as increased depression, mental disorders, and addiction. Most adolescents with suicidal behavior face a variety of family problems that lead them to concerns about self-esteem, as well as develop feelings that they are not needed, misunderstood, and unloved (King & Merchant, 2008). Loss of love sometimes plays a role in the development of suicide danger. This loss of love can occur due to the factors of death, divorce, or decreased affection of parents and people who have an important position in one's life.

Mass Media

Phillips (1974), in his study to determine the monthly suicide rate in the United States between 1948 and 1968, found that the average number of suicides increased drastically after the intensification of news about US suicides in the newspapers. Bollen and Phillips (1982) found an increase in the average number of suicides at intervals of 10 days after the news of suicide on television. In general, the influence of the mass media on a person to imitate suicidal behavior is undeniable. Although contemporary media such as the internet and social media can make it easier for a person to mimic suicidal behavior, to date there has been no research on this (Schmidtke & Schaller, 2000).

Other Factors

Some theories establish that suicide or suicide attempts indicate an attempt to express anger or attract attention (Michel et al., 1994). However, some people attribute suicide attempts, especially for adolescents, to engineering factors, to determine whether they are desirable or simply to attract attention (Hawton & Osborn, 1984). There is a link between suicide attempts and a person's emotional state. Several studies have found a relationship between suicide attempts with anger and feelings of isolation (Van Orden et al., 2010; Prinstein et al., 2000). And typically, elderly people who end their lives by suicide are those who live in isolation (Shah & De, 1998).

Theories about Suicide

Researchers have put together a group of theories that seek to explain the process of suicide. Each theory partially attempts to explain suicidal behavior. But achieving a comprehensive theory is currently seen as something beyond the capabilities of researchers, given the complexity of the human soul and the many factors that affect it (Maris et al., 2000). The following are theories about suicide:

Emile Durkheim's Theory

Emile Durkheim's study of suicide is one of the best social studies founded on clear theoretical foundations. The Durkheim study was judged to be the first complete sample for social studies at the time. Durkheim uses statistical analysis methods and strengthens his theory with accurate evidence and data. Durkheim began his study by trying to define suicide. According to him, suicide is all cases of death caused directly or indirectly by positive or negative actions committed by the victim himself, and he realizes that his actions will lead to death (Zastrow, 2000). Suicide according to Durkheim is a social phenomenon. Durkheim's main claim in interpreting the phenomenon of suicide is that social solidarity (the strength of social bonds possessed by members of society) influences the likelihood of suicide cases. In short, the theory of suicide formulated by Durkheim states that if religious, family, and political ties strengthen then the number of suicides becomes small but if they all weaken, then the number of suicides will be large. Meaning:

1. If religious teachings greatly affect the bond between individuals and their behavior, then the suicide rate becomes small. But if the effect is weak, then the suicide rate will increase.
2. If the bond is strong, then the suicide rate will be small. But if the bond is weak, then the suicide rate will increase.
3. If the political building of the country is strong, then the suicide rate will be small. Conversely, if anarchy is rampant.

Durkheim divides suicidal acts into three types according to the differences in social factors that affect them (Zastrow, 2000), namely:

Selfish Suicide

This happens when a person's bond with his group is so weak that he loses the influence of his group. As a result, he becomes indifferent to his group if at any time he wanted to commit suicide because of the serious problems that befell him. In this condition, he did not believe that his suicide would have any effect on his group. Durkheim calls this type of suicide selfish suicide, caused by a very weak or severed relationship with his group. It can be said that the suicide rate among single people is much higher than among those who are married. This is another example of selfish suicide. Single people are more likely to experience social and emotional isolation. Because their responsibilities and emotional ties are less than those of a married person.

Altruistic Suicide

This suicide is caused by a strong sense of interest and deep loyalty that a person has towards his group. Until he lost his individuality. All he had in mind was to obey the group's obligations and offer everything to the group. He is even willing to sacrifice his life for the sake of the group if this sacrifice is a necessity. According to Durkheim, this pattern of suicide usually exists in communities that have mechanical

solidarity. That is, the community encourages its members to commit suicide, for example, suicide committed by army commanders in some countries when they lost the war.

A Normative Suicide

A normative suicide is a suicide caused by a loss of value, which results in a breakdown of social balance. Because of that, suicide rates have increased during the economic crisis. All of that is not due to the economic crisis itself, or the spread of poverty but to the breakdown of social balance. At a time when community ties are strong, he will form a set of values and methods to regulate the behavior of his members strictly. While at the moment the influence of values and methods on the individual is weakened, then he does not know what is right and what is wrong, and he does not know the ideals with which he should realize.

Psychodynamic Theory

Sigmund Freud Theory

The concept of the subconscious discovered by Sigmund Freud is a major leap in the field of psychology and an important factor in interpreting human behavior (Hall & Lindzey, 1978). The foundation of the Freud sect is its hypothesis about the existence of two instincts in human beings, namely the instinct of death (Thanatos) and the instinct of life (eros), or the instinct to destroy which is faced with the instinct to enjoy and build. The aggressive drive is the most important derivative of the death instinct. The dead instinct encourages people to self-harm, and aggressive encouragement is a form of channeling so that people do not kill themselves (suicide). Freud's theory concludes that the person who commits suicide is a victim of hostile instincts and instincts (sadism) that fail to actualize themselves, so that he turns into himself (King, 2003; Hall & Lindzey, 1978).

Freigle's Theory

Life means respect for oneself, and the ego will feel at peace under the care of the "highest ego," or something that occupies an ideal position of conscience (Hall & Lindzey, 1978; Douglas, 1966). If the highest ego is offensive and sadistic, then the ego will feel hatred towards it, and in turn, want to destroy it. And because the highest ego is born from the fusion of the characters loved by the ego, then suicide means killing the beloved characters who are fused in the highest ego. It's just that the ego still hopes imaginatively that he can kill the cruel highest ego alone so that he can find another higher ego that is better and more loving. This is where the dualism side of suicide comes into play.

Karl Menninger's Theory

Karl Menninger was among the most ardent followers of Freud in assuming the existence of a destructive force in the soul. Menninger (1985) divided the process of suicide as follows:

(a) The wish to kill

A suicide bomber has the pleasure of destroying himself and others because he believes that he is being hurt by someone stronger than him. This gives rise to the belief that suicide is someone who wants revenge. Suicide is an attempt to escape from the evil spirit that is inside. The suicide bomber does not want to kill the people around him, but he wants to kill the people who have become a part of him. The killer creates a monster inside him that he wants to kill. Usually, this monster is the shadow of one of the parents, whose suicide attributed his misery to him.

(b) The wish to be killed

A child who feels abandoned by his family will feel anger towards them. This anger causes great uneasiness and guilt in him. Because he wants revenge and at the same time he wants to defend his family. He is united with his parents as he is united with the aggressor (identification with the aggressor) so that he directs hostility to his family who has become part of him. Thus, he seeks to destroy his family which he has made a part of, and at the same time, he punishes himself for his tendency to do evil. When a small child suffering from feelings of love and hatred for both parents has grown up and someone replaces both parents, be it, spouse or relative, then he or she will treat him or her the same way. And in the next phase, he will say: "*You are in me, then I will kill you before you kill me.*"

(c) The wish to die and the wish to a reunion

The suicidal child wants to be reunited with the parents he loves and at the same time, he hates.

(d) The wish to be rescued

Every suicidal victim wants to be saved and wants to feel that someone else wants him alive. He prepares to kill himself with the intention that someone would save him. Therefore, clearing the killer of the things that trigger suicide and admitting him to the hospital, is enough to calm the magnitude of the desire to commit suicide (Furst & Ostow, 1979).

Emotional Shock Theory

Usually, depression is the strongest reminder that precedes suicide (Pompili et al., 2008). The number of people who commit suicide among people with emotional disorders is found to be 30% of the total number of people who commit suicide. However, the large number of depressed people who commit suicide does not mean that automatic suicide is related to depression (Franklin et al., 2017; Pompili et al., 2008). Most people with depression commit suicide when they are on the verge of recovery. People with depression have vague feelings of guilt. Therefore, he sees that death is lighter than life (Pompili et al., 2008). This feeling keeps him away from others. He is convinced that he is no longer liked and loved. So he tried to free himself from the human world. Sometimes he believes that suicide is the cleansing of all sins. Sometimes he did that to punish his family. And sometimes he just tries to warn the people around him of his existence, in the hope that they will pay attention to him (Fahrudin, 2012).

Suicide can mean that the perpetrator is filled with hatred and a desire to attack and that he diverts both from others to himself (Franklin et al., 2017). This is similar people with paranoia, schizophrenia, depression, personality crises, and brain dysfunction (Costanza et al., 2019; Siddaway et al., 2015). Sometimes he has hallucinations. He felt that someone had told him to commit suicide. He heard voices accusing and blaspheming him and demanding that he commits suicide as punishment. Sometimes he felt that the voices were the voices of his loved ones who had died before. The voices asked him to die so that he could meet and live with them. Sometimes he killed his children and wife before he committed suicide, so that they could accompany him in the hereafter or to end their suffering after his departure. Sometimes the voices scared him. Sometimes he jumped out of the window or jumped from the attic. This type of suicide does not include suicide in the true sense, although the case is considered suicide (Fahrudin, 2006).

Victor Frankl's Theory of Existential

Some people suffer from a disease called neurosis (nerve disorder) on weekly holidays. This is the kind of depression that often befalls people realizing their life's lack of charge by the time the work-filled week is coming to an end. The emptiness in their souls became something obvious (Madeson, 2021). In this condition, we can observe cases of suicide and it is not a few, and return it to the emptiness of existence. Nor will we understand the various pervasive phenomena, such as adolescent addiction and delinquency, without recognizing the emptiness of existence that underlies them. This also applies to inmates in their cells and the elderly in their twilight years.

Epistemological Perspective

Epistemological theories focus on the perpetrator of suicide and view suicide as a weak decision in solving difficult problems and relieving unbearable psychic suffering. These theories differ in explaining why a person makes this strange decision, namely:

Escape from Self-Awareness

Some types of suicide or suicide attempts arise from a strong desire to run away from self-awareness, a painful awareness of knowing the cause of failure in life (Baumeister, 1990). This awareness will result in severe emotional suffering. Forgetting this painful awareness through death seems much lighter than continuing it with a gloomy and frustrating prospect. This plays an important role in explaining the causes of suicide (Platt, 1985). Several studies support this hypothesis, for example, severe poverty or the existence of a person as a bachelor is partially related to suicide. But sudden poverty or divorce is more of a major cause of suicide. So, poor life prospects are more likely to cause suicide than other causes.

Hopelessness

Many studies show a strong link between despair and suicide. Aaron Beck and his colleagues suggested that despair was a more likely factor in suicide than depression (Beck et al., 1990). The prediction of the future no better than the present was the feeling that drove him to end his life.

Ethnic Suicide and Local Communities in Indonesia

In recent years, the phenomenon of suicide in Indonesia has been increasing. The number of suicide cases is quite high. Even the WHO estimates that by 2020 the suicide rate in Indonesia could reach 2.4% of 100,000 people if it does not receive serious attention from various parties (Mardani, 2012). Cumulatively, the number of suicides in Indonesia each year can reach thousands of cases, both occurring in large cities, such as Jakarta, Surabaya, Medan, Bandung, and Makassar. In 2015, the Central Statistics Agency (BPS) recorded at least 812 suicide cases throughout Indonesia. Central Java became the province with the most suicide cases with 331 cases, followed by East Java with 119 cases. The number is the only one recorded by the police. The real number in the field could be much higher. Although Central Java and East Java recorded the highest number of suicide data, there are two local ethnicities and regions in Indonesia that are very interesting to be used as a case study on suicide, namely Gunung Kidul in Yogyakarta Province which has a fairly high suicide rate (Hawari, 2011). Suicide cases in the local community are

interesting as case studies because they have always been associated with the myths and beliefs of the local community.

Suicide in Gunung Kidul was initially caused by deep and acute despair in the face of the difficulties of life. The condition of the area was initially arid, barren, and poverty suffered by its people (Darmaningtyas, 2002). However, over time and development by the government, poverty factors cannot be the main cause of suicide in the Gunung Kidul community (Fahrudin, 2012). Gunung Kidul no longer as arid as it used to be, and the socio-economic life of the people of Gunung Kidul is much better than in previous years 1964 there was a mass famine and an outbreak of deadly HO disease, but the people of Gunung Kidul are now experiencing a period of significant economic recovery. Although there have been economic improvements since the 1980s, the suicide rate in Gunung Kidul is still likely to increase from year to year. This data certainly refutes many assumptions that poverty as a whole is the main cause of suicide in Gunung Kidul. Interestingly, in addition to poverty, there are myths and beliefs that suicide occurs due to the existence of Pulung Gantung. (Darmaningtyas, 2002). According to locals, the hanging pulung is a celestial signal about the impending suicide by hanging. They described the pendulum as a bluish red light at night that passed quickly in the sky. If one day the object appears and falls somewhere, soon there will be a suicide event. Such a myth is still believed by some people of Gunung Kidul. The emergence of this myth started from the journey of the Majapahit people against Demak in the fifteenth century, many Majapahit sons fled to and imitate from their environment. A person commits suicide because he has learned that suicide by hanging oneself is the solution to every difficulty they confront, a technique or process of problem-solving that is implicitly acquired by their social environment. Suicide has been proved to be an efficient technique for escaping the issues that surround the offender in the past. (Fahrudin, 2012). For example, a person who is entangled in debt takes a shortcut by hanging himself and because the perpetrator is dead, his debt is considered defaulting by the party who gave the debt. In social learning theory where humans behave because of learning from their social environment. Most human behavior is either positive or negative acquired by observing the behavior of others. Therefore, the mechanism of problem-solving through suicide by hanging oneself that occurs in Gunungkidul people at this time is more due to behaviors learned through observation and imitation, not because of the Hanging Trough myth or because of poverty (Fahrudin, 2007). On the other hand, the myth of the Hanging Trough that has developed in society until now or the poverty factor maybe just a blaming factor.

The other case of diverse ethnic is Bali. Bali is one of the provincial areas in Indonesia. Why suicide in Bali is interesting to study. Two main reasons need to be highlighted. First, Bali is one of the regions in Indonesia with a fairly high suicide rate. Suicide data in 2020 recorded 65 suicides, which were accompanied by various reasons, ranging from economic pressure, incurable diseases, love problems to corruption cases. Second, Bali is a unique region because it is dominated by one ethnic group and 90% Hindus. However, there has been no comprehensive study on the issue of suicide in Bali. Many parties and leaders of the Balinese community have voiced their concerns and called the Balinese community desperate and very

easy to make wrong decisions. The results of Lesmana's (2008) study showed that most suicides in Bali were committed by male individuals, especially at a young age. A study of high school students' suicidal behavior from October 2006 to July 2009 conducted by Suditha (2010) concluded that from 227 suicide cases reported by Bali Post, 17 cases (7.5%) of them occurred among elementary and junior high school students, high school, and vocational school. But comparing official suicide figures on police records and actual suicide figures must be very difficult. This is because there is a tendency for families whose members commit suicide not to report and hide the act of suicide as a disgrace to the family and society. Furthermore, Sudhita also analyzed the causes of student suicide are; *first*, not/not yet known for sure, *second*, economic factors or poverty, *third*, factors prohibited dating by his parents, and *fourth*, covering the anger of the suicide perpetrator because his mother did not give him, often scolded/scolded by his parents, often quarreled with his parents, afraid of being scolded by his parents because his motorcycle was broken, late paying tuition, and felt depressed because his parents were authoritarian. Interestingly, there are similarities in the method of suicide in the community of Gunung Kidul with suicide committed by students in Bali, most of them (94.12%) by hanging themselves, and as much as 5.88% by drinking aged water or hard water that is commonly used to melt metal.

Research by Ratih and Tobing (2016) on a group of young men in Bali also shows a psychological problem that is the self-concept. Of the five components of self-concept in suicide attempts, only self-evaluation, self-esteem, and self-acceptance were positive, but the social and personal self-components of the respondents were negative. Some factors that affect the self-concept of suicide attempt perpetrators of young adult men in Bali, namely educational, economic, genetic, social learning, and cultural factors. (Ratih & Tobing, 2016). If viewed from the regional distribution, Buleleng ranks first, followed by Jembrana, Bangli, Denpasar, Gianyar, Tabanan, Klungkung, and Badung. As a world-famous tourist destination, Bali is certainly inseparable from globalization and modernization so that the phenomenon of suicide in Bali is unique. This is not only statistically increasing from year to year but suicide is the impact of modernization on Balinese society itself (Widnya, 2008). Therefore, the phenomenon of suicide is very paradoxical, on the one hand, the Balinese people are very obedient to the teachings of religion (Hinduism) and strongly adhere to their culture. The results of Triguna's research (2009) look at Balinese suicide from a cultural perspective. Slowly but surely, the uprooting of Balinese people from their cultural and even religious roots has contributed to excessive pressure. The social ties of kinship have become looser and on the other hand, in terms of religious norms, there has been a breakdown of the rules that become the benchmark for the behavior of every citizen. In fact, according to Triguna (2009), it seems that the close relationships that can be obtained with social groups are getting looser. Even if a Balinese man still visits the house of other krama, to the Banjar, and other social groups, it is done very formally, simply because the person is afraid of sanctions if they do not come, or because it is merely an obligation.

Suicide Prevention Program

If we want to help prevent (primary and secondary) suicide, many things can be done according to the field of expertise. Social work as one of the disciplines and professions of human help has long included the issue of suicide as the target of its intervention. However, the understanding of social workers, including social work educators, on this issue is still very limited. Therefore, a literature review is needed that can describe quite comprehensively the phenomenon of suicide and psychosocial interventions that can be performed by social workers (Fahrudin, 2006, 2007). Efforts to prevent suicide are the responsibility of all elements of society. Individuals, governments, and educational and information institutions have similar roles and responsibilities in this endeavor. If we find someone who wants to commit suicide, then the essential thing we have to do is give help directly, not leave him alone, do not criticize his desires, and do not quarrel with him. Then after that, we should try to consult him with a specialist doctor or a social worker, in the hope of helping to get rid of his negative feelings, so that he can live life with all the problems that surround him, both positive and negative.

Among the preventive efforts that may be done by the government are as follows:

- (a) Factors such as poverty, unemployment, and social tendencies that play a role in adding to society's problems can be the main target of this preventive effort. This can be done by providing facilities and social assistance, education, and employment.
- (b) Community Education and Awareness is an important element in this effort. The shame attached to mental illness can prevent a person from asking for or receiving help, as well as limiting the therapy and help needed. The first thing that is needed is intensive treatment so that an act of suicide is seen as a problem that requires intervention and preventive efforts from all elements, and people with suicidal ideation feel entitled to ask for and obtain help. But the focus should be on the shame that encompasses mental illnesses and not on the feelings of humiliation that encompass suicide.
- (c) Prevent illness and provide adequate early treatment to everyone who is in danger, especially those with mental illnesses.
- (d) Prevent the use of narcotics and alcohol, the crackdown on perpetrators, and raise public awareness through the mass media, educational institutions, religious institutions, and others.
- (e) Overcome family problems and behavioral problems as early as possible. Namely by forming posts that provide such services and equipping officers who carry them out with appropriate capabilities.
- (f) Provide appropriate therapy to those who attempt to self-harm, provide comprehensive training to specialists working in the field, and provide good practice guidance to officers dealing with people with suicidal ideations.
- (g) Restricting access to objects commonly used to commit suicide, one of the preventive efforts that the government may take is to provide clear restrictions (restrictions) on the tools that are often used to commit suicide.

- (h) Good diagnosis and constant surveillance of people attempting suicide. Similarly, continuous surveillance and in-depth analysis of suicide cases.

Schools have a large and effective role in efforts to prevent suicide (Shafer & Gould, 2000; Gould & Kramer, 2001). Programs that schools may be able to implement to prevent suicide can be grouped into four types:

First, the teaching program. This is the most widely implemented and most easily accepted program in schools. The program is designed to optimize awareness of suicide problems, motivate to recognize students who are in danger, build their confidence to ask for help, and remove the stigma attached to asking for help for psychological disorders.

Second, the program to check the condition of students directly. The program uses several tools on all or some students to identify those who are in a state of anxiety and to reveal important factors related to suicide. Program development and effective tools are important to identify those who are in a state of anxiety and worry.

Third, prevention and treatment programs. The program includes teaching and training all elements of the school, especially counselors, on how to provide treatment for adolescents with suicidal ideations. In addition, several groups of students can be formed and trained to have the skills to interact with various problems, neutralize pressure, and resolve crises.

Fourth, the Advanced Intervention Program. That is, efforts made after a suicide by one or more students, these efforts are carried out by monitoring the danger, reducing the grief of teachers and friends of the victim, and providing therapy to students who experience beatings and psychological stress after witnessing the incident or seeing the victim's body.

Conclusion

Suicide has been a part of community life since the dawn of civilization. Some suicide patterns and techniques have evolved, while others have remained constant. They themselves are caused by a variety of reasons, and numerous ideas exist to explain why people commit suicide. Still, the phenomenon of suicide is a mystery to continue to be studied in various aspects and perspectives. Undoubtedly, in the current era of the industry revolution 4.0, the mass media has a big role in increasing or reducing suicide rates. The development of information technology that is so rapid that it penetrates all levels and groups of society, has made this world like a small village. The mass media has a big role in disseminating suicidal behavior to the public including children, adolescents, and the elderly. Nevertheless, an understanding of the socio-cultural background including the myths and beliefs that develop in society is important to be given attention so that the prevention programs created can be truly accepted and understood by them. Social work as one of the disciplines and professions of human help has long included the issue of suicide as the target of its

intervention. However, the understanding of social workers, including social work educators, on such social issues is sometimes very limited. This chapter is one step to provide a fairly comprehensive review of the phenomenon of suicide and intervention plans in the form of prevention programs by social workers.

Cross-References

- ▶ [Abnormal Psychology](#)
- ▶ [Comprehensive Textbook of Suicidology](#)
- ▶ [Suicide](#)
- ▶ [Suicide and Suicidal Behavior](#)
- ▶ [The Psychology of Suicide](#)
- ▶ [Theories of Personality](#)

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