A Study of Sociological Risk Factors of Youth Suicidal Behaviour and Problem Solving Counselling as a Therapeutic Tool on Prevention – A Study in a Sub-urban Hospital in Sri Lanka

by

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Thesis Submitted to the University of Sri Jayewardenepura for the award of the Degree of Doctor of Philosophy in Sociology on 31st August 2005
Dedicated to the memory of my father
The work described in this thesis was carried out by me under the supervision of Professor S.T. Kathriarachchi of the Department of Psychiatry and Professor D. S. D. J. Abeysekera of the Department of Sociology & Anthropology of the University of Sri Jayewardenepura and a report on this has not been submitted in whole or in part to any University or any other institution for any other Degree/Diploma.

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We certify that the above statement made by the candidate is true and that this thesis is suitable for submission to the University for the purpose of evaluation.

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31 AUG 2005
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Acknowledgements

I completed my field research and the thesis directly under the supervision of Professor Samudra Kathriarachchi, Department of Psychiatry and Professor Dayalal Abeysekera, Department of Sociology and Anthropology of the University of Sri Jayawardenepura. I am deeply indebted to my supervisors for providing timely and instructive comments and evaluation at every stage of the study. They provided insights that guided and challenged my thinking, substantially improving my thesis.

My special thanks go to Dr. D.R. Gabadage, the Director of the Homagama Base Hospital and Consultant Physician Dr. Mrs. B. Lamabadusuriya for granting me permission to carry out the field survey and para-medical staff of the Homagama Base Hospital for their support.

I am deeply grateful to the patients who participated in the Study and their family members for their assistance.

I extend my warm appreciation to Dr. Swarnalatha Perera, Head of the Department of Sociology and Anthropology, and Professor Tennyson Perera of the Department of Sociology and Anthropology, for their encouragement and guidance to enhance my knowledge base to complete the thesis in a challenging manner.

I thank consultants and medical officers in the field of psychiatry as well as academics in the fields of sociology and psychology; especially, Professor Nalaka Mendis,
Dr. Iyanthika Medagama, Dr. Yasanjalee Perera, Dr. Praneeth Abeysundara, Dr. Jayantha Jayasiri, Mr. Sunil Ratnayake and Psychologist T. Suveendran for their warm and gracious contribution in providing the opportunity to discuss and share knowledge.

I appreciate the support and generous assistance given by the librarians in the University of Sri Jayawardenepura, National Institute of Social Development, World Health Organization Colombo office, National Museum, Family Health Bureau and University of Colombo. In addition, I thank Officials of the Department of Police, the Department of Census and Statistics, and the Urban Development Authority for providing data.

I specially thank Dr. Bilesha Perera for the warm, open and gracious contribution in responding to my request and assisting me to obtain literature from the libraries in the Indiana University of the United States of America. Also my special thanks go to Mr. Sisira Chandrasekera of Hammersmith & West London College in the United Kingdom for sending some textbooks. I greatly appreciate the assistance given by my niece Dilanki in data tabulation work.

I wish to express my warm gratitude also to several longtime friends and colleagues whose encouragement and continued support became a strong motivational factor.

I specially thank my husband and my son, for their patience, encouragement and assistance, which gave me tremendous courage and the ability to devote maximum time for the study.
A Study of Sociological Risk Factors of Youth Suicidal Behaviour and Problem Solving Counselling as a Therapeutic Tool on Prevention – A Study in a Sub-urban Hospital in Sri Lanka

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ABSTRACT

Suicidal behaviour has been a major concern in all societies and literature on suicide has been found as far back as the 5th century and was later popularized by sociological work of Emile Durkheim. Suicidal behaviour has become a public health issue and approximately one million people would have committed suicide in the year 2000 globally. Suicide and attempted suicide rates in Sri Lanka fall within the highest group of countries in the world. There were only a few descriptive studies that investigated the sociological risk factors as well as counselling as preventive tool for youth suicidal behaviour in the country. This Study included two components. The first was designed to identify the demographic profile and sociological risk factors of the Study sample, which is a descriptive study. The second part was designed to test effectiveness of problem solving counselling as a therapeutic tool in prevention of youth suicidal behaviour, which is a comparative study. In this second part, the sample is divided into two groups, experimental and control and offered four sessions of problem solving counselling to the experimental group. The Homagama Base Hospital was selected and a sample of 124 cases admitted was interviewed. Buddhists (88.7 percent) and Sinhala
(96.0 percent) predominate the sample comparable to catchment area and the national data. Of the total, 66.9 percent were women and 71.8 percent were single. Results indicated that the age group of 15 to 24 years is a vulnerable group for suicidal behaviour in sub-urban areas of Sri Lanka and that females are more susceptible in this age group. Risk factors such as poor interaction with father (79.8 percent), poor educational attainment (66.1 percent), poor interaction with mother (53.9 percent), family conflicts (52.4 percent), exposure to suicidal behaviour of close associates (48.3 percent), poor interaction with neighbors (43.5 percent), unemployment (41.9 percent), poor interaction with friends (39.5 percent), essay access to pesticide (36.3 percent), easy access to medicinal drugs (35.6 percent), mother being abroad (26.6 percent), break-up of love affairs (26.6 percent) and alcohol behaviour of parents (24.2 percent) were the risk factors identified in this Study. The Study found that four sessions of problem solving counselling conducted by the same therapist for each subject have significantly improved the problem solving skills and coping strategies of youth with suicidal behaviour. Subjects in the experimental group had shown progressive behaviour in terms of coping stressful life events. The Study confirms that problem solving counselling found to be an effective therapeutic tool in reducing youth suicidal thoughts and behaviour in sub urban communities in Sri Lanka, indicating the introduction of community-wide counselling facilities at the community level would be an important aspect in reducing youth suicidal behaviour. Counselling needs to be made easily available and accessible to the youth to establish therapeutic relationships in medical institutions and in the community.