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ASSESSING THE CAUSES AND MOTIVES OF SUICIDE IN IRAN AND STRATEGIES TO PREVENT IT

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ABSTRACT

Every year in different societies we see the death of thousands of people who die due to suicide and there are thousands of others who survive suicide and once again have the opportunity to live a few more mornings. Continue. Suicide can be considered as a kind of reaction that is formed as a result of social disorders. Social disorders are factors that can have a devastating effect on the health of the individual and, consequently, the health of society. The research method in this research is a survey method using a questionnaire and is considered as part of applied research. The statistical sample of this research is equal to 100 experts of welfare and medical organizations who have answered the questions of the questionnaire in this research. Findings of this study show that: According to the results of Friedman test, ranking the variables of factors affecting female suicide are: socio-cultural factors, individual factors, environmental factors, economic factors, respectively.

Keywords: *Suicide, social factors, individual factors, economic factors, environmental factors.*

INTRODUCTION

Suicide is one of the saddest deaths of one's choice. The method of choice for successful or unsuccessful suicide varies depending on the culture and means available. Suicide occurs for a variety of reasons, including imitation, mental illness, political protest, and religious suicide.

Suicide is a deadly, traumatic, painful and costly individual and social issue. People who burn themselves are difficult to treat and consequently suffer from severe physical and mental complications. Restriction of movement, skin lesions are other factors that add to the deterioration of the situation. Suicidal ideation is one of the most tragic cases of violence, many aspects of which remain unknown. (Tabatabai, 2005, 12)

Both cultural and psychological factors are seen in relation to suicide. This method of suicide was not common in Western countries until recently. But since 1963, the suicide rate in these countries has risen, often due to suicide attempts with the intention of political protests. Suicide is relatively common in African countries (including Egypt) and the Far East (including Vietnam). It is also found in the cultures of Middle Eastern countries (including Jordan and Israel). In India, 39.8% of all successful suicides are due to suicide. In Israel, most people who attempt suicide are African or Asian immigrants, especially Arabs.

In India, the sati (women commit suicide after the death of their husbands) and Johar (mass suicides of women after being attacked by enemy soldiers) religions have a long history. These customs are still prevalent today, although they have diminished over time and are also seen among Indians migrating to other countries.

Suicide and other types of suicide in general may have a religious background. Sati's religious tradition is directly related to Hindu religious beliefs. Buddhists use fire to protest.

In the religious sources of the Christians and Christians, fire is mentioned as a purifier and purifier. Atheists recognize fire as a condemnation and consider it harmful. However, in Islamic sources and the Holy Quran, fire is mentioned as the most severe type of punishment. Although suicide has been described in Iran and most developing countries, there is little information about people who die from suicide but do not really intend to commit suicide. The aim of this study was to identify the epidemiological face of successful suicides in Iran. The findings of this study will be used as a basis for intervention studies aimed at reducing suicide. (Islamic, 1992, 25)

THEORETICAL FOUNDATIONS OF RESEARCH

Suicide concept

Suicide: It is an action that a person does to deal with social pressures and disorders in society and with this action he wants to rid himself of those problems.

Suicide: A person who commits suicide and destroys himself. Person that consciously wants to take his own life. (Same source: 3)

Suicide method: means the method or means by which a person has attempted to destroy himself or herself, which in this study was mostly petroleum. (Same source: 3)

Suicide history

Suicide, or "voluntary death," has a long history, and religions, denominations, and jurists have taken different positions on it. By looking at the cycles of societies and reviewing the social and cultural status of nations and the living conditions of tribes, it is possible to identify and distinguish the factors that have led human beings to a certain society in a certain age. In ancient India, according to Hinduism, the thought of the Brahmins and the influence of the Brahma religion of the sages who were in search of perfection and attainment of eternal good or "nirvana" to get rid of all pain and enter the world of absolute annihilation, during religious celebrations. Many committed suicide. By the end of the 19th century, in many parts of India, the suicide of a widow after the death of her husband was quite common. Such behavior was influenced by the teachings and beliefs of the Brahma religion and was strongly promoted by Brahma religious circles, leaders, and clerics. They believed that this type of death forgives the husband's sins and allows the woman to go to heaven, in addition to the children of the woman who committed suicide will enjoy many privileges in society. In ancient Tibet and China, people who attempted suicide were mainly divided into two groups. One group sought spiritual advancement and the other group committed suicide to escape the enemy. In China, suicide was sometimes a group reaction, for example, after the death of Confucius, 500 of his disciples threw themselves into the sea and committed suicide in protest of the destruction of their master's works. In Japan, suicide has always been an ancient tradition. In this country, among the nobility and samurai, maintaining family honor and decency forced the nobility to commit some kind of suicide. The voluntary suicide of ancient aristocrats and samurai and Japanese military officers during World War II was known as Haragiri. In ancient Egypt, suicide was a kind of expectation of liberation from life, the seekers of this liberation gathered in associations and sought the most pleasant means to die. In ancient Athens, suicide was despised; The body of the suicide bomber



was punished, his right hand was cut off and buried in another place. The number of suicides increased in the 19th century. In England, until 1870, suicide was legally a crime, and suicide relatives were required to pay compensation to the government. The law was repealed in 1961. In Judaism, Christianity and Islam, suicide is considered as an unforgivable act in the sense of suicide and hated and contrary to the divine condition. In Islam, a kind of suicide, "red death", which is not the result of asceticism and mystical and devotional abstinence, is condemned and even forbidden. Islamic jurists in the interpretation of verse 192 of SURAH Al-Baqareh : "Do not kill yourself with your own hands" believe that "suicide" is killing oneself with one's own hands and violates God's command, so it is considered a sin and a worldly prohibition and It has a religion. (Stangel, 1995, 63)

A brief look at the suicide rate in the world and in Iran

Suicide rates have fluctuated between countries around the world. According to figures released by the World Health Organization in 1992, the suicide rate ranges from 3 per 100,000 to 45 per 100,000. The World Health Organization estimates that the number of people committing suicide in the world is just over 1,000 a day. European and North American countries are often ranked fifth to tenth of the cause of death. According to the World Health Organization, the rate of successful suicides in different countries of the world has fluctuated between zero and nearly one thousand per million people. In Muslim and Latin American countries this rate is much lower than in Europe, North America and Australia. In southern European countries, the suicide rate leading to death (successful suicide) is relatively low, while in northern and central Europe, it is generally higher. Annual suicide rates have risen sharply since the turn of the twentieth century. And its rate in Western European countries is currently estimated at 10 percent of the population. In general, suicide deaths are on the rise in all countries of the world. It is obvious that the rate of suicide has decreased or increased in certain periods of history, in addition to certain events and causes, in addition to evolving due to special circumstances and causes in the countries of the world. Considering that the suicide rate in Iran is far from other countries, especially in the industrialized countries of the West, it is much lower, but its trend has been increasing over the last two decades. (Staff, 2003: 31)



According to all the researches that have been done, the causes and motives of suicide in Iran are as follows:

- Marital disputes and inadequate family living conditions
- Mental disorders, failure in love and personality imbalance
- Poverty, unemployment, addiction and unfavorable economic conditions
- Special conditions of urban life, especially large industrial cities
- Disintegration and separation of social groups (Mohammad Khani, 2002, 91)

Suicidal ideation

Emile Durkheim's theory

The first study of scientific suicide was started by the famous French sociologist Emile Durkheim in the late 19th century with the book *Suicide*.

In the book, he introduces concepts such as social reality as social and external affairs to the individual as deterrents and social controls, and the concept of collective conscience and group brain, and the concept of anomie for a social situation in which the individual lacks criteria. It

is used in the direction of behavior and in general, suicide is used as an indicator to show the decline of morals and lack of social cohesion, reducing the connection between the individual and society and dysfunction following social controllers.

Durkheim concluded in his research in Europe that suicide is a social phenomenon and considers it a sustainable phenomenon that can not justify individual actions, so suicide is the result of a combination of different factors, family effects, social and religious realities, and also It is the result of the rupture of social relations and the loneliness of individuals.

Durkheim's general conclusion is that: The rate of social suicide of any population can be determined only by looking at the results and effects of changes in the degrees of social cohesion and group integration.

Types of suicide from Durkheim's point of view:

Selfish suicide

Suicide for another

Anomic or abnormal suicide

Appreciative suicide

Selfish suicide

Durkheim believes that "the lack of family unity causes that the number of suicides in single people is higher than married people and in divorced people with children is less than divorced people without children."

On the other hand, considering that individualism is more prevalent in urban communities and the supervisory dimension and collective spirit are less in rural areas. Selfish suicide is more common in urban areas. Suicides are also more common among Protestants than Catholics because of the individualism propagated in the religion. selfish or selfish suicide has two subtypes.

A: The type of melancholy

B: type of hedonism

In the dream melancholy type, which is accompanied by a kind of lethargy and feeling of weakness, severe depressive and passive states are seen in the person. It surrounds the reluctant, indifferent and cold-blooded.

Hedonism suicidal ideation is often accompanied by a sense of meaninglessness and pessimism about the realities of existence and the environment.

Suicide for another

In this suicide, the person destroys himself for the sake of society or another, and this is in a situation where the person has a strong sense of solidarity and cohesion with the society of one group or another and recognizes its values and norms and between his own interests and that or It does not matter who commits suicide. Among the characteristics of this suicide are the great enthusiasm and enthusiasm associated with the activity, the search for a place beyond the life of this world, and in primitive societies, it is more common among religious martyrdom-seeking soldiers.

It occurs in three ways, either with a kind of compulsion accompanied by a sense of duty, or with a kind of mystical and mystical authority and desire, or rationally and intelligently, in which death at the hands of the individual is praiseworthy.



Heterogeneous suicide is caused by the severity of the mechanism that regulates people's behavior, not its weakness. This type of suicide is presented in Durkheim's book, the main example.

"In a number of ancient societies, it is observed that the suicide of a woman is a dead spouse who, as is customary in India, agrees to be cremated with her husband's body. In this case, there is no question of suicide based on extreme individualism, but the discussion is about the complete disappearance of the individual in the group. One chooses death according to social orders. "Without even thinking about defending his right to life." And this kind of suicide is actually forced.

In voluntary suicide, the individual welcomes suicide and death. This type of suicide has been attributed to the volunteers of martyrdom in the form of Christianity. Another type of suicide is intelligent suicide, in which a person commits suicide by withdrawing and ignoring himself and his life and living in this world because society considers such an act praiseworthy.

Suicide due to disorder

Durkheim believes that suicide occurs when society is in crisis and abnormal. "On the one hand, when norms disappear and new norms do not replace them, and on the other hand, because man does not have a healthy nature and has an evil nature, and at this particular moment, the collective compulsion that creates Durkheim socialism. It brings and through it man becomes social, it is also destroyed, as a result man is left and remains like suspended particles that have no specific direction and may be drawn to evil or to good." Durkheim then sees "anomic suicide as the result of a temporary and at the same time sudden shift in the norm of a society."

Durkheim considers four characteristics in the incidence of anomic suicide:

- A) Rapid social change such as social crises such as recession.
- B) Any disturbance in the collective system and public order of society that disrupts the relationship between purpose and means.
- C) Professional and liberal occupations are considered as indicators for suicide disorder. In fact, the suicide rate in modern and urban industrial societies is higher than traditional and rural societies.
- D) Divorce is considered as a kind of anomie, that is, a disturbance in the relationship between the purpose and the means of the family.

Grateful suicide

This suicide is considered as opposed to the type caused by abnormality. In egalitarian suicide, a person's attempt to commit suicide stems from his excesses in order and rule. Most this people tend to commit suicide in such a way that their future is brutally blocked and their emotions are suppressed in the face of annoying systems and rules, and to get rid of the stubborn and flexible system that governs living conditions and incompatibility with tyranny. Moral and physical divorces commit suicide.

Some very young husbands and married women without children resort to this type of suicide, which is less important and more numerous than other types of suicide. Moral and coercive obligations and discipline in married life that lead to the blocking of a number of desires and restrictions on the freedoms of men or women are among the reasons for young couples to commit this type of suicide.



Marlis Halbwx Theory

Marlis Halbwx, a student and follower of Durkheim, reaffirmed many of Durkheim's hypotheses 33 years after the publication of his book *Suicide*, in his 1930 book, *Causes of Suicide*. He rejected Durkheim's method of examining suicide in relation to individual variables, arguing that variables such as religious status and family structure should be considered as components of a whole in order to identify and relate them to successful suicide rates. According to Halbwx, in France, Catholics, while being considered as a religious and traditional group, have a very organized and cohesive family structure. These religious spirits and family life are interdependent and interdependent with each other. They must be studied together.

Halbwx re-examined Durkheim's hypothesis that suicide rates increased during the economic crisis by examining the relationship between fluctuations in economic activity index and suicide rates in Germany between 1880 and 1914, and concluded that during periods of economic crisis. Suicide rate increases.

Thus, Durkheim's hypothesis was confirmed by Halbwx, who opposed Durkheim's typology of suicide, but, like Durkheim, criticized psychoanalytic theories of suicide and considered the real cause of suicide to be a social vacuum around the suicidal person. (Mohseni Tabrizi, 1994, 95)

Theories of Gibbs and Martin

With an experimental study, they tried to achieve some kind of operationalization of the concept of Durkheim social organization by formulating hypotheses and by constructing a valid unit of measurement based on job and age variables that showed an inverse relationship between suicide rate and correlation rate. Approve Durkheim on socially organized communication and suicide rate. According to their hypotheses, Gibbs and Martin present their general hypothesis that the suicide rate in a population is inversely related to the degree of homogeneity and stability of individuals in that population.

Robert Merton Theory

The American sociologist Robert Merton in *General Theory of Abuse* sought to show the ways in which abnormal behaviors such as suicide are produced by certain forms of social construction. He believed that as much as adaptive behavior is a product of social structure, maladaptive behavior arises from such a structure.

Merton attributes any form of deviant behavior, such as suicide, to separation and disunity and lack of active communication between what society's culture promotes as a goal and what society provides as a way to achieve those goals. , Knows.

Merton believes that there are people in society who have income and wealth

: There are two ways that society recommends

A) Institutionalized ways b) Non-institutionalized ways

Institutionalized paths are not easy, for example, the longer the paths, the harder it is to reach them, and if there is a gap between the paths and the goals and there are problems in the way of achieving the goals, man will deviate.

In a society where goals are important but how to achieve them is not important. The person pursues the goal with a special motivation, but the importance of the ways is not so important to him that this negligence causes the person to deviate.



Merton believes that the disadvantaged classes and sections of society are more likely than the affluent classes to use illegitimate means and means to achieve their goals. Then, in order to prevent social disintegration and to create harmony and compatibility with the social and cultural system, cultural goals and institutionalized means should be provided for the members of society. (Schneidman, 1999, 1078)

Freud's theory

Freud's theory of psychoanalysis is one of the most important theories for the psychological explanation of abuse and suicide. Freud considers human personality to be the result of the following three stages:

- 1-nature
- 2-self
- 3- The transcendent self

She believes that each of the mental illnesses caused by developmental disorders occurs in one of the stages or disorders between them. Freud believes that those who commit suicide are patients in whom the instinct of death has overcome the passion instinct of life and has created the idea of death in them. (Schneidman, 1999, 108)

Karl Manninger's theory

In explaining the causes of suicide, Menninger pays attention to the role of non-social and mainly psychological factors. Like Freud, he considers those who commit suicide to be mentally ill, in whom the instinct of death prevails over the instinct of love, and the favorable ground for suicide is provided.

Although death certificates and statistical reports often consider suicide to be due to factors such as physical illness, financial bankruptcy, love and education failures, etc., while studies have shown that the main causes of suicide are something, Menninger said of the causes of suicide. They are beyond these factors, so that it cannot be attributed to individual distress and social disorder. His main goal is that personality disorders and social turmoil can only be necessary conditions for suicide, but they cannot determine suicide.

Menninger shows three main forms of suicide:

- A) Conventional suicide: The same is successful suicide.
- B) Chronic suicide: which is in fact the same as unsuccessful suicide and the action of the suicidal person has been neutralized. But after committing the act, he considers himself psychologically dead.
- C) Specific suicide: in which a person mainly beats himself and wishes to die by injuring parts of his body. (Omidi, 2003, 47)

The theory of Louis Dublin and Banzel:

They believe that wherever customs and traditions consider suicide to be acceptable or negligible, sick people will commit suicide, and wherever suicide is strongly condemned by religious or governmental rules, suicide will occur very rarely. (Tyler, 1997, 59)

Douglas



"People who attempt suicide generally have several patterns of social concepts that they use to build relationships with others." (Omid, 2003, 19)

Jean-Jacques Rousseau (1778-1712)

"It is society that causes people to commit suicide," says the French naturalist sociologist. Therefore, he considers the individual as innocent and society as guilty. He says in one of his notes:

"Suicide is death. Beyond the shame of suicide, it is human theft." (Salimi, 2001, 105,)

Research background

Study of suicide rate between 2000 and 2005

The present study investigates the suicide rate in an area between 2000 and 2005. This research is descriptive. Its statistical population includes all those who committed suicide in one area between 2000 and 2005. In this study, due to the limited number of people in the community, we studied all its members. Including the falls, inevitably the number of 410 suicides led to death, of which 49 had committed suicide. The research tool was a questionnaire of personal and demographic characteristics that was presented to all families of victims.

This study shows that the suicide rate has been increasing sharply compared to the population between 2000 and 2005; That is, from 52 people per 100,000 people in 2000, it has reached 100 people per 100,000 people in 2005. While suicide as one of its examples has decreased in proportion to the population; That is, it has decreased from every 20 people per 100,000 people to 6.8 people per 100,000 people.

Study of burn percentage in people who attempted suicide between 1994-2004

About one million people commit suicide each year, and an average of one person commits suicide every forty seconds. According to official global statistics, on average, 27% to 37% of suicides are due to suicide. According to the reports of the death registration system in Iran, 11 people die every day due to suicide, 4 of whom end their lives through suicide. Therefore, the aim of this study was to investigate the percentage of burns in people who attempted suicide between 1994-2004. In this descriptive-analytical study, all cases of burn patients in the burn center of a hospital between 1994-2004 were collected, then the cases of suicide following suicide were isolated and 587 suicide attempts were found. Then information such as: Age, sex, level of education, marital status, percentage of burns recorded. Data were analyzed by chi-square test (X²), regression models and analysis of variance (ANOVA)

Findings: The mean age of the subjects was 26 years, more than 80% of whom were women. With increasing age each year, the percentage of burns increased by 0.13%. 73% of self-immolators died and the average percentage of burns was 82%. Most self-immolators were married and did not have low-literate jobs. Among them, the average percentage of burns in people with physical, educational and mental problems was 86.67, 75.9 and 74.73, respectively. The highest mean (82%) was the percentage of burns related to people with a post-diploma degree. The highest and lowest average percentage of burns is related to winter and summer.

Discussion and Conclusion: Self-immolation is one of the most common methods of suicide in the western provinces of Iran. Most of the findings of our study were consistent with other studies. Groups and risk factors obtained from the results of this study include: married women,



physical illnesses, educational problems, unemployment, mental health problems and other social factors. The findings of this study can be useful in providing strategies to reduce suicide.

Investigating the effective factors of suicide among women

Suicide is one of the social ills that is seen in most societies. Suicide methods are also an important issue, among which suicide is one of the most painful methods. Suicide occurs under the influence of various factors. This study studies the phenomenon of suicide among women and the demographic characteristics of unsuccessful suicide victims.

Methods: This is a descriptive-survey research that has been conducted qualitatively and on constructivism. Participants in the study were 16 women who had survived suicide in urban and rural areas of the study area. Sampling was performed in a purpose-based manner and continued until data saturation. Data were also collected through in-depth and semi-structured interviews.

Results: The overall results indicate that most of the respondents were married (56.3%), rural (62.5%), housewife (56.3%) and had primary education (50%). More suicides were observed in the age group of 16-30 years. According to the respondents (44%), the main reason for suicide was showing courage and deteriorating condition.

Conclusion: Based on the results, we believe that the main reason for suicide in the study population is the difference in values and norms between generations. Therefore, while seeing this process as a process, social and psychological, it is necessary to take appropriate measures, including: conducting more research and cooperation of relevant organizations in this regard, providing appropriate training to reduce traditional and fanatical beliefs, providing appropriate educational and employment opportunities for women. The region should fill the leisure time of this group in an appropriate way to prevent monotony of life, depression and despair to reduce this social harm.



RESEARCH METHOD

Although a set of methods can be used in any particular research, the method we use in this research is the survey method. While the documentary and library methods have been used, the main dominant method is survey, which is the most common method in quantitative research. Data collection method and their analysis method are prominent features of the survey.

This research is in the category of applied research in terms of purpose and is descriptive-survey in terms of data collection.

Statistical population of the research

The statistical population of this study includes experts and social workers of the Welfare Organization, suicide officials and professional nurses.

Sample size and measurement method

The sample size in this study is equal to 100 people who have been selected from the available sampling method. Sampling method In this study, sampling method was available. If the researcher is not able to do random sampling or needs the information quickly, he / she uses available sampling or incidental, which is also called contingent sampling, ie in this method, the researcher needs subjects who: Be available quickly. And be prepared to answer the question.

Although probabilistic sampling methods such as systematic sampling are statistically superior to quota method, but the above type of research has led to the use of this sampling method in research.

Methods and tools of data collection

The method of collecting information is field and using a questionnaire, along with taking notes and library resources. In other words, due to the field study, the questionnaire is the main research tool.

RESEARCH FINDINGS

Table 1: Frequency of respondents by gender

percent	Abundance	
35	35	man
65	65	woman
100	100	total

As can be seen in the descriptive statistics table No. 1, the gender distribution of the respondents in this study indicates that: 35% of the respondents were male and 65% were female.

Table 2: Frequency of respondents by job

percent	Abundance	
60	60	Welfare helpers and experts
20	20	Suicide officials
20	20	Professional nurses
100	100	total

As can be seen in the table of descriptive statistics No. 2, the job distribution of the respondents in this study indicates that: 60% of the respondents were helpers and experts of the Welfare Organization, 20% of the burn ward officials and 20% of the professional burn ward nurses.

Table 3: Kolmogorov-Smirnov test to check the normality of the distribution of variables

Significance level of Kolmogorov-Smirnov test	Variables
0.08	Individual factors
0.11	Socio-cultural factors
0.46	Economic factor
0.09	Environmental factor

This test compares the observed cumulative distribution function with the theoretical (expected) cumulative distribution function in a ranking variable. In other words, in this test, the distribution of an attribute in a sample is compared with the distribution assumed for it in society. If the significance level in this test is greater than 0.05, it can be inferred that the distribution is normal. Parametric tests can be used in this study. According to the above test and the level of significance of all variables, which is more than 0.05, it can be inferred that: that all variables follow the normal distribution.

**Table 4: Sample t-test to test hypothesis 1:
"Individual factors are effective in suicide attempt"**

Standard deviation error	Standard deviation	Average	Number	The variable under consideration
0.06	0.14	3.50	100	Individual factors
Single sample t test table				
difference in averages	Significance level	Degrees of freedom	T test	The variable under consideration
1.84	0.0001	99	10.26	Individual factors

According to the above test, because the value of the significant level in the T test table is equal to 0.0001 and this value is less than the significance level of 0.05, and in other words, because the value of the T statistic (10.26) is also greater than the value (1.96), the above hypothesis is confirmed and it can be concluded that: Individual factors are effective in suicide attempt. The table of descriptive statistics above shows that the acquired average of the sample is equal to 3.50, which is reported to be 0.50 points higher than the average of the community average (3) and this difference is statistically a significant difference.

**Table 5: Sample T-test to test Hypothesis 3
"Socio-cultural factors are effective in suicide attempt"**

Standard deviation error	Standard deviation	Average	Number	The variable under consideration
0.04	0.09	3.93	100	Socio-cultural factors
Single sample t test table				
difference in averages	Significance level	Degrees of freedom	t test	The variable under consideration
1.70	0.0001	99	12.03	Socio-cultural factors



According to the above test, because the value of the significant level in the T test table is equal to 0.0001 and this value is less than the significance level of 0.05, and in other words, because the value of the T statistic (12.03) is also greater than the value (1.96), the above hypothesis is confirmed and it can be concluded that: socio-cultural factors are effective in suicide attempt. The table of descriptive statistics above shows that the acquired mean of the sample is 3.93, which is reported to be 0.93 points higher than the average of the community average (3) and this difference is statistically a significant difference.

**Table 6: Sample t-test to test hypothesis 4:
"Environmental factor is effective in suicide attempt"**

Standard deviation error	Standard deviation	Average	Number	The variable under consideration
0.05	0.14	3.37	100	Environmental factor
Single sample t test table				
difference in averages	Significance level	Degrees of freedom	t test	The variable under consideration

1.43	0.0001	99	9.27	Environmental factor
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According to the above test, because the value of the significant level in the T test table is equal to 0.0001 and this value is less than the significance level of 0.05, and in other words, because the value of the T statistic (9.27) is also greater than the value (1.96), the above hypothesis is confirmed and it can be concluded that: the environmental factor is effective in suicide attempt. The table of descriptive statistics above shows that the acquired average of the sample is equal to 3.37 which is reported from the average of the community (3) with a difference of 0.37 points above the average and this difference is statistically a significant difference.

**Table 7: Sample t-test to test hypothesis 5:
"Economic factor is effective in suicide attempt"**

Standard deviation error	Standard deviation	Average	Number	The variable under consideration
0.05	0.10	4.06	100	Economic factor
Single sample t test table				
difference in averages	Significance level	Degrees of freedom	t test	The variable under consideration
0.06	0.0001	99	15.26	Economic factor

According to the above test, because the value of the significant level in the T test table is equal to 0.0001 and this value is less than the significance level of 0.05, and in other words, because the value of the T statistic (15.26) is also less than the value (1.96), the above hypothesis is confirmed and it can be concluded that: economic factor is effective in suicide attempt. The table of descriptive statistics above shows that the acquired mean of the sample is equal to 3.06, which is reported to be higher than the average of the community average (3) with a difference of 1.06. This difference is not a statistically significant difference.

Table 8: Friedman test to examine and rank the variables of factors affecting suicide

Average rating	Variable
3.75	Socio-cultural factors
3.29	Individual factors
3.10	Environmental factor
4.11	Economic factor
Friedman test	
100	Number
25	Degrees of freedom
0/0001	Significance level

According to the results of Friedman test, the ranking of variables affecting female suicide are:

- 1-Economic factors
- 2-The factor of cultural-social factors
- 3-Individual factors
- 4-Environmental factor

RESULTS AND SUGGESTIONS

If we believe in the principle that "no one is inherently deviant," if we accept that prevention is more important than cure, if we acknowledge all the scientific facts about social deviations, then in fairness and justice. And considering the principles and values that govern the spirit of society and with the aim of a fundamental and fruitful fight against deviations and social harms to make society healthier, we must look at the other side of this coin, namely the basic factors of the tendency to social deviations. Suicide is a cry for help. Although suicide attempt is a familiar symptom of depression at all ages, depression is not the only cause of suicide and a wide range of psychological differences contribute to suicide. Here are some effective ways to prevent this problem:

Mental health education to identify people at risk

Rehabilitate and rehabilitate all those who attempted suicide and survived

Reducing the social isolation of people at risk, especially women and girls

Realizing the field of activity of women and girls

Creating job opportunities

Establishment of specialized social and family counseling centers

Identify the extent and location of vulnerabilities of families by distributing targeted drug coverage forms in middle school, high school and university

Spread the culture of counseling among community members and families through mass media and brochures

Analytical reflection of events with proper and directional planning

Filling public leisure time to reduce the opportunity and time spent thinking about them

Informing families to become more familiar with the roles and functions of a balanced and healthy family in the community and referring acute cases to psychiatric and psychotherapy clinics that are serious about solving the problems of families on a large scale

Increasing the beliefs of the people of the region in order to provide more facilities for girls' education, especially at the university level and outside the province

Prevent forced and unwanted marriages and prevent couples from marrying with a large age difference

Considering the mental and physical needs of young people in the developmental stages and in proportion to it, considering hours of recreation and rest and collective and constructive activities

Creating deep-rooted religious beliefs among families and young people through those who are particularly popular with young people, such as artists

Creating a cultural platform for the employment of women and girls in entertaining activities (arts, sports, etc.) through the establishment of cultural centers and women's sports clubs



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