



Social Perception of Suicide among University students in Basrah

By Students

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

(وَلَقَدْ آتَيْنَا دَاوُودَ وَسُلَيْمَانَ عِلْمًا وَقَالَا الْحَمْدُ لِلَّهِ الَّذِي فَضَّلَنَا عَلَى كَثِيرٍ مِّنْ عِبَادِهِ الْمُؤْمِنِينَ)
صَدَقَ اللَّهُ الْعَظِيمُ

[النمل: 15]

الاهداء

إلى من جرع الكأس فارغاً ليسقيني قطرة حب

إلى من كلت أنامله ليقدّم لنا لحظة سعادة

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وفي هذه الظلمة لا يضيء إلا قنديل الذكريات ذكريات الأخوة البعيدة إلى الذين أحببتهم

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في اتمام مسيرتنا الدراسية

فجزاهم الله عنا خير الجزاء

supervisor's support

I certify that this project of research

" The social perception of the phenomenon of suicide among a university student at the" University of Basra

Was prepared under my supervision at the College of Nursing, University of Basra as partial fulfillment of the requirements for the degree of baccalaureate in nursing sciences

Lecture; Afkar Fadil

Supervisor

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Abstract

Suicide is the act of intentionally causing a person to kill themselves. Suicide is often committed out of desperation, which is often attributed to a mental disorder such as depression, bipolar disorder, schizophrenia, alcoholism, or drug abuse. Stress factors such as financial difficulties, the death of a loved one, or problems in personal relationships often play a role.

The present study conducted in Basra University included 100 students from different collage to participated assessment questionnaire regarding suicide phenomena the results showed that participants believed that ,95% of causes of suicide related to Psychological problems,54% Emotion problems,59% Financial problems,67% Family problems and 63% Sexual and psychological abuse.

The study efforts to prevent suicide include restricting access to firearms, treating mental illness and banning drug use, as well as improving economic development.

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Chapter one

Introduction

1-1 Introduction

Suicide is a global public health problem worldwide. Preventing suicide can depend on several factors such as health professionals' ability to make accurate suicide risk assessment and comprehensive treatment plan, including their knowledge empathy, and communication skills. Health professionals' attitudes toward suicide prevention initiatives may also influence their suicide risk assessment, management, and impact of care. Attitude is the key element for explaining and predicting their behavior.(1)

Nursing staff and students play a crucial role in suicide prevention as they have the first level of contact and greater opportunities to build closer relationships with patients presenting with suicide risk and attempts. They may not have appropriate knowledge about suicide, and attitude toward suicide prevention, which may further influence their competence and willingness to serve this population.(2)

A combination of individual, relationship, community, and societal factors contribute to the risk of suicide. Risk factors are those characteristics associated with suicide—they might not be direct cause..(3)

According to WHO, over 800 000 people die due to suicide each year, and it is the second leading cause of death in 15 - 29 year olds. Indications suggest that for every adult who died of suicide, there may be more than 20 others attempting suicide.

The impact of suicide on the families and friends and wider communities can be devastating. Often, the stigma that is attached to suicide means that people feel unable to seek help. Psychological, social, cultural and other factors can interact and lead a person to suicidal behavior. The majority of suicides occur in low and middle-income countries where, if services do exist, are often limited and unable to provide comprehensive early intervention treatment and support of people in crisis.(4)

The risk factors leading to suicide are also different from one place to another, according to a long list including ethnic group, country, latitude, season and the social frame of the society. Recent research confirms that what is common to many if not most patients described in the foregoing scenarios is a depressive state, which is in principle treatable. (5)

1_2 - Important of the study:

the problem of suicide, which is increasing remarkably in our Iraqi society, which gives this study of great importance in calling for increasing society's awareness about the problem of suicide and coming up with recommendations to prevent suicide. This study will be a source of information and knowledge for all interested, stakeholders and researchers.

1-3 Aim of study

The present study aimed to:

- 1- To evaluate the knowledge of university students about the phenomenon of suicide
- 2- To Integrate suicide prevention .

1-4 Definition of Terms

1_Perception social : is the study of how people form impressions and conclusions of others as sovereign personalities. Social cognition refers to identifying and using social cues to make judgments about social roles, rules, relationships, context, or characteristics of others. This field also includes social knowledge, which refers to an individual's knowledge of social roles and the norms and schemas surrounding social situations and interactions. People learn about other people's feelings and emotions by capturing information they gather from physical appearance and verbal and nonverbal communication. Facial expressions, tone of voice, hand gestures, and body posture or movement are a few examples of the ways people communicate without words. A real-life example of social cognition is the understanding that others disagree with what one has said when seeing them roll their eyes. There are four main components of social cognition: observation, attribution, integration, and affirmation

2_Suicide: The act of intentionally causing a person to kill himself. Suicide is often committed out of desperation, which is often attributed to a mental disorder such as depression, bipolar disorder, schizophrenia, alcoholism, or drug abuse. Stress factors such as financial difficulties, the death of a loved one, or problems in personal relationships often play a role. According to World Health Organization data, 75% of suicides are among middle-income and poor countries. Efforts to prevent suicide include restricting access to firearms, treating mental illness and banning drug use, as well as improving development

Chapter Two

Literature Review

2-1 Background

The contemporary world creates various challenges we face on a daily basis. Not everyone is able to cope with chronic mental strain caused by career strive,

ambitions, etc. Despite using diverse methods of dealing with such condition, many individuals fail in this challenge and seek radical solutions which may result in suicide attempt. Many researchers and psychologists have dealt with the problem of suicide. According to Emil Durkheim "every case of the death being direct or indirect result of a calculation or omission, presented by the victim realizing effects of his behaviour may be called a suicidal attempt(6).

Suicides are result of the disintegration of the social life and more often appear in communities in which weaker social bonds exist. In Poland there are 6 male suicide killers in and female suicide killer. Most frequently committed acts of suicide are those committed by people being 25-34 and 50-59 years old Amongst elderly people who committed suicide the majority suffered from somatic chronic diseases, what definitely increases the risk of suicide. Also individuals who are divorced, separated, widows/widowers are more prone to suicidal attempt (7).

It was also proven that such factor as the lack of sleep may be associated with suicidal risk (8). Suicide statistics in Poland in the years of 2009-2014

2-2 Definition of suicide

Suicide is the intentional use of death. It is an individual act, although it takes a social character. It is a social phenomenon linked to social conditions that affect all societies. (Emile Durkheim defines suicide, saying : “It is considered suicide every case of death resulting, directly or indirectly, from a positive or negative action, which the victim has done while she is certain of what will result.” (9) defines suicide as: « An act that is anti-social because it destroys life, and it may be the result of psychological diseases, or a difficulty in becoming familiar with a pre-satisfactory character.” (10) Esquirol distinguishes between suicidal behavior and acts of sacrifice, because the latter is not a pathological behavior but is an object of admiration, and some see that the behavior is Suicide when an individual intends to kill himself without inciting any social value

2-3 Causes of suicide

***Biological, psychological** and social causes of suicide The biological, psychological, and social causes of suicidal ideation are the cause of most suicides and suicide attempts. These causes include mental health disorders such as:

Depression.

Bipolar disorder.

Schizophrenia.

anxiety disorders;

personality fluctuations.

Take drugs.

Childhood abuse. Having a family history of suicide.

Previous suicide attempts(11).

Environmental causes of suicide*

Environmental factors that increase the risk of suicide occur due to stressful life events such as the loss of a person, job, or pet. Other causes include : Social loss, such as losing a strong relationship.

Access to lethal means, including firearms and drugs.

Being a victim of harassment, bullying or physical abuse.(12).

Social and cultural causes of suicide*

One of the main social and cultural causes of suicide is feelings of isolation, or lack of acceptance from others. Feelings of isolation can result from sexual orientation, religious beliefs, and gender identity

Difficulty seeking help or support.

Lack of access to mental health or inability to treat substance abuse.

Follow belief systems that accept suicide as a solution to personal problems.(13).

2-3 Symptoms of Suicide

The most important symptoms of suicide or suicidal tendencies are

.Talking about suicide is making statements like I'm going to kill myself, I wish I were dead, or I wish I hadn't been born.

Obtaining means of suicide, such as buying a weapon or killing drugs.

Withdrawal from social contact, the desire for solitude.

Having mood swings.

feeling hopeless.

Increased use of alcohol or drugs.

Changing normal routines, including eating or sleeping patterns.

Doing dangerous or self-destructive things, such as using drugs or driving recklessly.

Say goodbye to people in such a way that they will never be seen again.

Chapter (2)

Review

Develop personality changes.

Feeling very anxious.(14)

Chapter Three

Methodology

Methodology

This chapter presents the research design used in this study, study design, study instrument, study location, study sample, and statistical analysis .

3-1 Study Design

A descriptive study was conducted at the University of Basra in the city of Basra on the social perception of the phenomenon of suicide in the universities of Basra (Bab Al-Zubair University) starting from February 14 to March 20,2022. The sample was collected randomly by direct interview method using a questionnaire form .

3-2 The instrument of the study

A questionnaire was made to study the opinion of the university student about the phenomenon of suicide at the University of Basra. After the questionnaire was distributed and presented to a team of .experts

Data were collected by direct interview method

Research study tool (questionnaire): The questionnaire consists of

Part One: The first section is a social and demographic characteristics sheet consisting of (6) elements including gender, age, marital status, college, stage and address .

Part Two: In Part Two, there were some questions about the phenomenon of suicide, such as the causes of suicide? Who are more likely to commit suicide? Who is the age group most likely to commit suicide? When did the phenomenon of suicide begin ?

3-3 Setting of the study:

questionnaire form .

3-4 Study Sample

The study population consisted of (100) students. They were identified from Basra University, Bab Al-Zubier Colleges in Basra Governorate. where we took samples from the following colleges: college of nursing includes 67 ,college of law includes 13 samples and college of education includes 20 samples

3-5 Statistical Analysis

The data were analyzed using SPSS version 26 (Statistical Package for the Social Sciences), and the data were expressed (frequency and percentage, ANOVA test standard deviation, mean) , The mean score and significance were used to assess the association

Chapter Four

Results & Discussion

4-1 Distribution of the variables related demographic characteristics (students , N=100)

Table 4.1.1 : descriptive statistics of Demographic Variables			
Demographic Variables	Variables Classes	F	Percent
Sex	Male	17	17%
	Female	83	83%
	Total	100	100%
Age	20 – 25	91	91%
	26 – 30	9	9%
	Total	100	100%
Address	City center	67	67%
	Out center	33	33%
	Total	100	100%
Social status	Single	80	80%
	Married	20	20%
	Total	100	100%
College	Nursing	67	67%
	Education	20	20%
	Law	13	13%
	Total	100	100%

The table showed that most of the participants were female 83% while male 17% 91% of them aged from 20-25 years old , 67 % lived in city center , 80 of the were single and 67% were from nursing college.

4-2 The results of the causes of suicide (students , N= 100)

Causes of suicide	Answers	F	Percent
Psychological problems	No	5	5%
	Yes	95	95%
	Total	100	100%
Emotion problems	No	46	46%
	Yes	54	54%
	Total	100	100%
Financial problems	No	41	41%
	Yes	59	59%
	Total	100	100%
Family problems	No	67	67%
	Yes	33	33%
	Total	100	100%
Sexual and psychological abuse	No	63	63%
	Yes	37	37%
	Total	100	100%

The table showed that the highest percentage for most causes of suicide were 95% Psychological problems is cause of suicide. 54 % emotional, 59% financial , 67% family problem 63% Sexual and psychological abuse.

Approximately 1.5% of all deaths worldwide are by suicide. In a given year, this is roughly 12 per 100,000 people.[15] , ranging from 1.5 times as much in the developing world to 3.5 times in the developed world.[16]

4-3 The results of university students perceptions about suicide (students ,N=100)

4-3-1 Descriptive Statistics and Mean Score for assessment each question						
Questions	N	Min	Max	Mean Score	Std. Deviation	Assessment
Question 1	100	1	3	1.73	0.802	Medium
Question 2	100	1	3	2.13	0.393	Medium
Question 3	100	1	3	1.22	0.596	Good
Question 4	100	1	3	1.94	0.708	Medium
Question 5	100	1	3	1.79	0.868	Medium
Question 6	100	1	3	1.52	0.810	Good
Question 7	100	1	3	1.05	0.261	Good
Question 8	100	1	3	1.34	0.639	Good
Question 9	100	1	3	1.25	0.609	Good
Question 10	100	1	3	1.70	0.704	Medium
Question 11	100	1	3	1.80	0.711	Medium
Question 12	100	1	3	1.92	0.748	Medium
Question 13	100	1	3	1.69	0.849	Medium
Question 14	100	1	3	1.48	0.745	Good
Question 15	100	1	3	1.61	0.803	Good
Question 16	100	1	3	2.30	0.689	Medium
Question 17	100	1	3	1.12	0.433	Good

Good =(1-1.66),Medium =(1.67-2.33) ,Weak =(2.34 -3)Mean Score

The Descriptive Statistics and Mean Score for assessment each question in table (3) showed that mean score of 52.9 of question were medium and 47.05% were good

The results of the current study showed that 30% of the participants were female, and the ages of the students participating in the questionnaire ranged from 20-25 years: 91%, 67% of them live in the city center, 80% are single, and 67% are Nursing students.

On other hand according to the answers of participants believed that ,95% of causes of suicide related to Psychological problems,54%

Emotion problems,59% Financial problems,67% Family problems and 63% Sexual and psychological abuse .

Suicide is generally most common among those over 15 and 30 are at the highest risk.[17] Europe had the highest rates of suicide by region in 2015. There are an estimated 10 to 20 million non-fatal attempted suicides every year.[18] Non-fatal suicide attempts may lead to injury and long-term disabilities.[19] In the Western world, attempts are more common among young people and among females.[19]

Chapter Five

Conclusions and
Recommendation

5-1 Conclusions

The study conclude the followings

* Thirty percentage of the participants were female

*The ages of the students participating in the questionnaire ranged from 20-25 years 91%

*Sixty percentage of them live in the city center, 80% are single, and67% are Nursing students

*of participants believed that ,95% of causes of suicide related to Psychological problems,54% Emotion problems,59% Financial problems,67% Family problems and 63% Sexual and psychological abuse

.

5-2 Recommendations

1 -Do more research and studies on suicide

2 -Awareness and launching health education campaigns to reduce the phenomenon of suicide.

3 -Instructing the media and mosque preachers to talk about suicide and confront it.

4 -Develop a national strategy for suicide prevention.

5 -Reducing access to means of suicide such as insecticides, firearms and medicines .

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Appendix (A)

قائمة الخبراء

الاختصاص	مكان العمل	الاسم
فيسيولوجيا	كلية التمريض/جامعة البصرة	1 ا. د . محفوظ فالح
طب الاسرة	كلية التمريض/جامعة البصرة	2 ا. د . سجاد سالم عيسى
تمريض نسائية	كلية التمريض/جامعة البصرة	3 م . د . سندس باقر داوود
تمريض صحة مجتمع	كلية التمريض/جامعة البصرة	4 م . د . سميرة
امنية الشبكات وعمق التعلم	كلية التمريض/جامعة البصرة	5 ا . م . لؤي عبد الواحد
فسلجة	كلية التمريض/جامعة البصرة	6 ا . م . د و صفي ظاهر
تمريض صحة مجتمع	كلية التمريض/جامعة البصرة	7 ا . م . د فراس عبد القادر

Appendix (B)

Social perception of suicide among university students at university of Basra

(التصور الاجتماعي لظاهرة الانتحار لدى الطالب الجامعي في جامعة البصرة)

*المعلومات الشخصية :

*العمر : *الجنس:

*الحالة الاجتماعية : *السكن :

*الكلية : *القسم :

*حسب رأيك ماهي اكثر الاسباب شيوعا للانتحار ؟

مشاكل عاطفية-2 مشاكل مادية-1

مشاكل نفسية-4 مشاكل عائلية-3

العنف /الاعتداء الجنسي-5

*حسب رأيك من هم اكثر عرضة للانتحار ؟

1- الاناث 2- الذكور 3- لا اعلم

*حسب رأيك من هي الفئة العمرية الاكثر عرضة للانتحار؟

1-الأطفال 2-سن المراهقة 3-الشباب

*هل ينظر الناس نظرة تشاؤمية الى المجتمع الذي يشيع فيه ظاهرة الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل تتجنب وسائل الاعلام او وسائل التواصل التحدث عن ظاهرة الانتحار ؟

1- نعم 2- لا 3- لا اعلم

*متى بدأت تزايد ظاهرة الانتحار؟

1- قبل 5 سنوات 2- قبل 11 سنوات 3- اكثر من 11 سنوات

*هل موضوع الانتحار في العراق من المواضيع التي تحمل طابع العار للعائلات المعنيين بها؟

1- نعم 2- لا 3- لا اعلم

*هل تحرم الديانات الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل يمكن للفرد محاربة فكرة الانتحار بالتمسك باصول الدين او المعتقد؟

1- نعم 2- لا 3- لا اعلم

*هل تعمل الاسرة على حماية الابناء من الانتحار من خلال الاتصال المتواصل داخل الاسرة؟

1- نعم 2- لا 3- لا اعلم

*هل تعمل المدرسة على حماية الابناء من الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل تعمل وسائل الاعلام او وسائل التواصل الاجتماعي على حماية الابناء من الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل تدلي عائلات الافراد المنتحرين بحالات الانتحار التي عاشتها؟

1- نعم 2- لا 3- لا اعلم

*هل الشباب هم اكثر عرضة للانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل يدفع فشل العلاقة العاطفية الشباب الى الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل يؤدي القلق الحاد بالفرد غالبا الى الانتحار؟

1- نعم 2- لا 3- لا اعلم

*هل ينتشر الانتحار في المناطق

1-الريف 2-الحضر 3-لا اعلم

*هل الانتحار اختيار الموت بطريقة قصدية؟

1- نعم 2- لا 3- لا اعلم

الخلاصة

الانتحار هو فعل تعمد قتل شخص ما لنفسه. غالبًا ما يُرتكب الانتحار بسبب اليأس ، والذي غالبًا ما يُعزى إلى اضطراب عقلي مثل الاكتئاب أو الاضطراب ثنائي القطب أو الفصام أو إدمان الكحول أو تعاطي المخدرات. غالبًا ما تلعب عوامل الإجهاد دورًا ، مثل الصعوبات المالية ، أو وفاة شخص عزيز ، أو مشاكل في العلاقات الشخصية.

اشتملت الدراسة الحالية التي أجريت في جامعة البصرة على 100 طالب من مختلف مجمع كليات باب الزبير للمشاركة في استبيان التقييم الخاص بظاهرة الانتحار ، التي أجريت كليات من 14 فبراير إلى 20 مارس 2022 أظهرت النتائج أن المشاركين يعتقدون أن 95% من أسباب الانتحار تتعلق بالمشاكل النفسية ، 54% مشاكل عاطفية ، 59% مشاكل مالية ، 67% مشاكل عائلية و 63% اعتداء جنسي ونفسي

تشمل جهود الدراسة لمنع الانتحار تقييد الوصول إلى الأسلحة النارية وعلاج الأمراض العقلية وحظر تعاطي المخدرات ، فضلاً عن تحسين التنمية الاقتصادية.

جامعة البصرة

كلية التمريض



التصور الاجتماعي لظاهرة الانتحار بين طلاب جامعة البصرة

مشروع تخرج مقدم

الى مجلس كلية التمريض في جامعة البصرة

كجز من متطلبات الحصول على درجة البكالوريوس

في علوم التمريض

من قبل

زهراء طالب كاظم

سارة علي حلو

المرحلة الرابعة

2022-2021

اشراف : م . أفكار فاضل كريم