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Cross cultural perspectives of suicide in adolescents and young adults among the South Koreans, Indians and Filipinos

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Rationale: Despite high suicide occurrences in Asia, studies are limited.

Objectives: This study determined beliefs among South Koreans, Indians, and Filipinos about suicide among youth, their cultural practices, promotive and preventive measures and suicide response.

Methods: Focused ethnography was employed. South Koreans (SK), Indians (IN), Filipino Cordillerans (FC), Ilocanos (FI) and Muslims (FM) were selected using purposive referral sampling guided by saturation. Semi-structured interviews and documentary analysis was done.

Findings: Meaning of suicide across cultures is forbidden. In India, it's a crime and among FM, vices are considered a form of suicide. Relationship problems are common. FM identified Eeman, Ilocanos added embarrassments; FC had influence by dead relative. Indians identified financial difficulties, depression and unmet expectations. SK identified academic pressure, celebrity influence, unemployment, and bullying. Preventive and promotive practices, counselling is common across cultures. FM added stronger belief FC perform Pejed while IN and SK have information campaigns. Responses after attempted suicide varies; FM encourages repentance; FC perform Tawal, counselling, resentment and bullying; IN took legal actions while SK blames or employs manifest shock. FM are non-judgemental, prayers may or may not be done, burial within 24 hours; which is similar to FC, Kanyaw, and anger; FI perform dung-aw, atang, they put live chick over the coffin and cannot sleep facing it; IN observe anti-dowry law, cremation before sunrise and manifest family trauma; SK offer Chrysanthemum.

Conclusions: Beliefs and practices on suicide among youth are influenced by their reverence to gods, power of supernatural, social, financial, mental and emotional factors.

Recommendations: Health professionals may use findings as cultural understanding of suicide among studied cultures, thus improving sensitivity and competent care. Governments and other groups can consolidate information when evaluating mental health programs. Studies may be done but with different cultures to provide a more comprehensive understanding of suicide among youth.