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Website: www.aarf.asia Email: editor@aarf.asia, editoraarf@gmail.com

CHANGING ATTITUDE TOWARDS SUICIDE IN NIGERIA USING APPROPRIATE COMMUNICATION METHODS

UGWUOKE, ANTHONY C. (Ph.D)

Health Department Nkanu West Local Government Area, Enugu State

ANI, NGOZI RITA (Ph.D)

Department of Health and Physical Education, Enugu State University of Science and Technology (ESUT)

Abstract

Suicide has become a serious public health and social problem in Nigeria. The impact of suicide on Nigeria's economy, health and social wellbeing is huge. Similarly, the harm suicide does to the family members, friends and other close associates of the decedent is colossal. Suicide situation is likely to worsen in the country if measures are not put in place to reverse the trend. Unfortunately, suicide is enshrouded in secrecy in the country thereby making its socioeconomic burden unclear to many persons. The secrecy surrounding suicide in Nigeria has to do with the attitude of the people. As a result, the study sought to address the misconception that talking about suicide will put the idea into people's head. In doing so, the current negative attitude both the policy makers and the general public have towards suicide prevention would be changed positively. In the same vein, the negative attitude people hold towards survivors of suicide would be altered positively through appropriate communication methods. That would enable persons affected by suicide to share their feelings of agony with other persons. Expressing their pains in a socially acceptable manner will promote their health immensely.

Keywords: suicide, attitude, suicide attitude, communication methods

Introduction

Suicide is the act of deliberately terminating one's own life. Many authors have defined suicide in their own ways. In these definitions typified by Alabi, Alabi and Abdulmalik (2014); Asogwa (2015) and Ugwuoke and Ani (2015), it was agreed that suicide is death that is intentional and self-inflicted. It is regrettable that suicide is increasing in Nigeria in the present time. Ogunseye (2011) revealed that suicide is already a daunting problem in the country. Recent studies on suicide have corroborated Ogunseye's report. For instance, according to Ugwuoke and Ani (2015) and Ugwuoke (2016), Nigerian print and electronic media were full of suicide reports. Moreover, Ezeugwu, Ugwuoke, Ani, Okere, Onyechi and Igbokwe (2016) indicated that suicide was astronomically on the rise in Enugu State, Nigeria. The media reports and official records on suicide might not reflect the reality on ground due to the concealment of cases. Asogwa (2015) warned that suicide situation in Nigeria was going to worsen due to a multiplicity of factors.

The attitude of Nigerians towards suicide is one significant variable that will, probably, account for this rise. This speculation is based on the concept of suicide across the country. Ogar and Ogaboh (2011); Offia and Obiorah (2014) disclosed that suicide is a taboo-bad death among Nigerians. Due to the forbidden nature of suicide in Nigeria, even many educated Nigerians are uncomfortable discussing it. The avoidance of suicide discussion, however, obtains almost in all societies (World Health Organization-WHO, 2012). Consequent upon the secrecy surrounding suicide in Nigeria, there are many misconceptions about it. One such misconception is that talking about suicide amounts to inviting it to one's life. This makes suicide studies and even suicide control measures difficult. Therefore, attitude of Nigerians towards suicide needs to be changed if effective suicide control measures are to be instituted. This is because, according to Knizek, Akotia and Hjelmeland (2011), attitude is vital when action is to be taken.

Attitude is the inclination to act towards a person, an object or an incident in one way or another under normal circumstances. It is a predisposition to act in a certain way towards some aspects of one's environment including people, object and events (Akwuba, Samuel, Onyekwere & Oko, 2013). Attitude is an individual's disposition towards an issue, a person or object. Attitude influences an individual's act in a certain way towards a particular issue, object or person (Umeh, 2015). Amadi and Ejike (2015) opined that attitude is a favourable or unfavourable disposition of an individual towards a thing. According to Obande-Ogbuinya (2016), attitude is the nursed idea reflected in action or behaviour. Da'am, James and Samuel (2016) defined attitude as a person's feeling of likes and dislikes. Attitude influences behaviour and can be

positive or negative. It is usually directed towards something. The focus in the present study is attitude towards suicide.

Suicide attitude refers to one's disposition towards suicide and all other variables that are connected with it. Attitude towards suicide has different dimensions (Arnantovska & Grad, 2010). However, the preventability and social acceptability of survivors of suicide were the main thrust of this study. As it has been shown, Nigerians generally have negative attitude towards suicide, suicide attempters and survivors of suicide (Ogar & Ogaboh, 2011; Alabi, Alabi & Abdulmalik, 2014; Ani & Ugwuoke, 2014).

Perhaps the negative attitude arose from the fact that Nigerians are predominantly Christians and Muslims. This postulation was informed by Safra's (2007) report that these religions do not condone suicide. Traditional worshippers in Nigeria also have negative attitude towards suicide. The views on suicide in Nigeria and other parts of the world could be responsible for varying concepts of suicide over time and across all cultures of the world. In the modern Western world, for instance, suicide carried out for a cause (martyrdom) and suicide committed in reaction to a lingering painful and incurable illness are tolerated (Martin, 1995). The suicide of an individual, who is not receiving pleasure from life, and love pact suicide are also to some extent endorsed as rational in Europe and America.

Suicide attitude in the Western world is influenced by the opinion of renowned philosophers, who argued that suicide is an adaptive strategy used by the victim to change the painful circumstances that he finds himself. Benske (2007) asserted that the philosophers were stoics, who believed in self-fulfillment and free will. Asogwa (2015) stated that those who supported suicide stressed that man is a free agent and can choose or control death if he wills as a means of preserving honour. Their argument was premised on the fact that suicide is often motivated by painful terminal illness and shame.

However, some suicides are condemned in the Western world. Impulsive suicide which is committed as a result of brief but intense emotion of grief, despair or fear, and apathetic suicide which is committed because of temporary depression in which life appeared worthless are viewed as less virtuous in the area. Self-abasing and hedonistic calculated suicides were condemned in the Western world too. Self-abasing suicide is committed as a form of self-punishment whereas hedonistic calculated suicide occurs when the victim calculated that the future would probably bring more pain.

Like every other human act, suicide is in part motivated by punishment and reward. Lester (1985) posited that the decision to commit suicide in Europe and America depended on the associated benefits and costs. The costs of committing suicide are incalculable to the affected countries, their families and individuals. These costs acted as restraint against self-killing in that environment. On the other hand, supernatural consequences of suicide were the major reasons against suicidal acts in African cultures (Ugwuoke, 2016).

The numerous proscriptions against suicide in Africa were mainly to protect man against the supernatural consequences of ending his life. However, suicide was seldom culturally demanded under certain circumstances in some parts of Nigeria. For instance, Ugwuoke (2016) was of the view that suicide might have been demanded of individuals who were forced into a certain situation which is intolerable in life. According to the author, practices like ostracism and stigmatization that were common among Nigerians might serve as a prompt to self-harm or outright suicide. Those who could not suicide using the conventional means might be forced to go for indirect suicide.

Indirect suicide occurs when an individual knowingly engages in an act which could lead to his or her own death. It could be starving to death, refusing to take life-saving drugs or neglect of self. The widespread cases of alcoholism, drug abuse, unsafe sex practices, automobile crashes and violence of all sorts among Nigerians could be an indirect way of realizing their suicidal goals (Ugwuoke, 2016). Soreff (2013) had earlier disclosed that one occupant road traffic crashes in America were probably, the victims' covert way of circumventing the society's negative views towards suicide.

In an effort to avoid the negative attitudes towards suicide in some cultures, they evolved the concept of good suicide. According to Andriolo (1998), the Crows-Native Americans, permitted any of their members who were suicide ready to indulge in masked suicide. In this kind of suicide the society provided the suicidal individual the noble option to realize his aim. Masked suicide differed from indirect suicide by being patterned and institutionalized. In masked suicide the intent was camouflaged by the performance of culturally valued rather than deviant behaviour. The author stated that instead of rushing into death at the moment of despair, the victim paused and sought for a cause, a scenario that offered solemnity and purpose for the act.

There are transcultural variations of masked suicide in some Muslim societies. Andriolo (1998) reported that owing to the fact that Islam condemns suicide in strong terms; the Moros of Philippines provided the suicidal individual an acceptable method of expressing his intent. Such

person visited a place frequented by Christians and killed as many of them as possible with the hope of being killed in turn. That kind of suicide, according to Andriolo, was seen as self-punishment to atone for a serious sin. In Malaya it was called 'Amok" and such individuals were regarded with awe for offering self-up for cathartic slaughter.

In Japan suicide attitude is positive. Accordingly, suicide is more or less the Japanese people's way of life. Ogar and Ogaboh (2011) stated that in the face of failure or humiliation the Japanese man easily kills himself and even the family members just to preserve honour. The Maoris of Sri Lanka had favourable attitude towards suicide too. As a result, suicide was very common among them (Marecek, 1998).

High prevalence rate of suicide has disastrous consequences onany society and Nigeria cannot be an exception. This is because Wahlbeck and Makinem (2008) disclosed that for every suicide, there were 10 to 40 other suicide attempts and many more others are likely to contemplate committing suicide. Obviously, suicide has grave negative consequences on the health, economy and social lives of the citizens of any country.

Impact of Suicide on Nigerians

The worst public health danger of suicide is the horrific premature death of the victims. Indeed these avoidable deaths are tragic. Nigeria's development would be seriously affected by increasing incidence of suicide. This is because findings by Nwafor, Akhnmu and Igbe (2013); Offia and Obiorah (2014); Ugwuoke and Ene (2014) have consistently revealed that those in their most economically productive lives committed suicide most frequently in the country. These included people with special talents. The suicide of a physician who plunged into the lagoon in Lagos State, Nigeria on March 19, 2007 that attracted public outcry was a typical example (Odinta, 2017). The morbidities associated with suicide are also significant health problems.

The victims of attempted suicide are either treated in health facilities or within the family circles at great costs. Since Wahlbeck and Malinem (2008) indicated that for every completed suicide there are many other attempters, a large number of Nigerians might have attempted or are likely to attempt suicide. This would amount to a large number of persons with different degrees of injuries. Undoubtedly, such physical and emotional injuries will compound the problems of Nigeria's health services which already fall short of international standard in terms of availability and accessibility (Egbulem, 2010). Regrettably, the costs of suicidal behaviour are not limited to

mortalities and morbidities. They also included their drain on public resources (Gvion & Apter, 2013).

The costs of suicidal behaviour in financial terms are monumental. The Center for Mental Health Services, United States of America-CMHS USA (2001) put the dollar cost of suicide in 1995 alone in USA at \$111.3 billion. Although there cannot be any trustworthy estimate of the financial burden of suicide in Nigeria due to the absence of reliable data, the cost of suicide in the country is likely to be very high. This is because Ugwuoke and Ani (2015) showed that suicide occurrence was on the increase in Nigeria. The cost of suicide covers medical expenses, work related losses and quality of life costs. The costs of committing suicide also included the resources put into the information on how to carry out the act and to procure the equipment for the chosen method. These kinds of economic wastages are very grave to a country like Nigeria which at the present is experiencing severe economic recession. According to WHO (2012), suicide is particularly a serious problem to the less developed nations because of the challenges of scarce resources, inadequate infrastructure and stigmatization against survivors and persons that attempted suicide.

The victim of attempted suicide might be permanently incapacitated to the extent that he becomes a burden on the society. Similarly, the orphaned children of suicide victims would be added burden to the society. The number of child-survivors of suicide is likely to be large. This is based on the finding by Ugwuoke and Ene (2014) which showed that the majority of decedents in a study they conducted in Nigeria were married. For the parents of suicide victims to be made childless, the loss must be very agonizing because children are important measure of social class in the country.

Another compelling consequence of suicide on survivors in Nigeria is the socio-cultural demand of ritual cleansing of the supposedly desecrated land. Together with the financial expenses involved, ritual cleansing is occurring at the same time when the traditional positive grief processes characterized by co-operative mourning, for which Nigerians are known, are totally denied the survivors (Ugwuoke, 2016). Andrews (2000) reported that in USA shared grief was also denied the survivors of suicide. According to McGovern and Barry (2000), shared grief provided a buffer to emotional health of the bereaved individual. Undeniably, people impacted by suicide are subjected to all sorts of ridicule to the extent that some engaged in suicide simply to escape the shame, guilt or humiliation associated with the acts. The negative

impact of suicide on Nigeria's development is unacceptable and hence requires urgent attention. Part of the necessary action required is attitude change.

Changing attitude towards suicide

For any suicide control measures to be effective and acceptable, unfavourable attitude people hold towards it has to be changed. This is not in any way approving of suicide as an acceptable social norm. The change of attitude advocated in this study, therefore, is primarily to initiate discussion on suicide in order to dispel misconceptions pertaining to it. It will also involve the control of the factors that promote suicidality among Nigerians. Stimulating discussion on suicide would place it on top of Nigeria's public health and social problem agenda.

It is necessary to point out here that contrary to common belief, discussing suicide does not put the idea into anybody's head. As a matter of fact, Berman (2009) showed that those who had suicidal wishes can benefit by talking about their feelings. Berlim, Per, Lejderman, Fleck and Joiner (2007) demonstrated that educational training in suicide prevention in general can change people's attitude towards suicide and subsequently reduce its occurrence. Talking about suicide in the context of this study focused on provision of factual information on the disorder and on how it could be controlled. Therefore, it is high time suicide education, which has been suggested by experts like Asogwa (2015) and Ugwuoke (2016), be developed and implemented in Nigerian.

By discussing suicide it will turn from a problem that should be avoided to a problem to be solved. Such discussion would ensure that deliberate concealment of suicide cases would be avoided. Doing so will enhance the provision of requisite data which is essential for planning suicide control measures. Apart from diligent compilation of official data on suicide, collection of data through community studies would be improved. This is because positive attitude towards suicide discussion would make such studies less cumbersome and the findings more valid than is currently the case (Ugwuoke, 2016).

Since suicide is at times precipitated by not only personal factors but also external variables like injustice, destitution and social isolation which the victim cannot control, there is need for attitude change towards its prevention. Attitude change could be effected through appropriate communication.

Communication of Suicide Messages

Communication involves the exchange of information. Method on the other hand means a particular way of doing something (Idoko, 2010). Therefore, communication methods are the

ways of transmitting information. Exchange of information could be in verbal and non-verbal forms (Trevithick, 2012). Not all communications achieve the desired intention. Each method has its unique advantages, hence the need to employ different methods in this context of changing the attitude of Nigerians towards suicide. UNICEF (no date) stated that effective health communication involves the transmission of health knowledge into messages which can be readily understood, accepted, and put into action by the intended audience. Suicide communication can only be effective if the underlying beliefs, conception and attitude of the target audience are established. It is also relevant to find out any other factors that may enhance or hinder the suicide communication process.

Therefore, suicide messages could be communicated through different methods. The interactional methods of communication which are characterized by feedback are more effective than the linear methods in achieving their goals. Based on this the interpersonal method would be relied upon more in this context of changing suicide attitude among Nigerians. It will be used to ascertain each individual's unique concerns about suicide. Consequently, suicide messages would be spread in village meetings, churches and schools. In these places story-telling, drama, demonstration, group discussions role play, and proverbs could be used to change people's attitude towards suicide. Additionally, the social media which has the features of interpersonal communication method could be effectively utilized in communicating suicide messages to people in remote areas in their homes, workplaces and schools. The social media will be reliable in disseminating suicide messages because many Nigerians are becoming linked to the Facebook, WhatsApp, Twitter and others. According to Dike and Chukwurah (2015), information from the net also motivates the receiver.

The mass media such as the radio, television, magazine and newspaper could also be used to disseminate information on changing attitude towards suicide to a wider audience. Whether the interpersonal or mass media methods are utilized, the messages should be easily understood, culturally acceptable and socially appropriate. Undoubtedly, appropriate communication methods are required in correcting the unfavourable attitude held by many Nigerians towards suicide discussion and towards the survivors. The change of attitude towards suicide is likely to lower the incidence of suicide in the country. Corollary, reduction of suicide and its concomitant health and social challenges will, definitely, promote the health of all persons affected.

Conclusion

There is no gain restating the fact that suicide has severe economic and health implications. Moreover, it threatens a country's social stability. Therefore, effort should be geared towards reducing its occurrence in Nigeria. An important step in that direction is changing the attitude of the people. Suicide attitudes can be changed through discussing suicide issues in objective and less threatening manner through appropriate communication methods.

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