

Suicidal behaviour among ethnic minorities in Denmark – a pilot study

Author: MA Bo Andersen Ejdesgaard, Centre for Suicide Research, Denmark.

Objective

The main purpose of the project was to uncover suicidal behaviour among persons of other ethnic background, while laying the groundwork for further study into suicidal behaviour among pupils of ethnic minorities.

Method

Data was gathered from a questionnaire survey among 1,733 pupils in Danish primary and secondary schools. Of the total population of 1,733 pupils, ethnic minorities totalled 215 (12.4%). The data sample was analyzed for differences in suicidal behaviour among Westerners and ethnic minorities using regression modelling in SAS 9.1. Ethnic minority is defined as being either an immigrant or descendent of immigrants from a non-Western country. Westerners are defined as ethnic Danes and immigrant or descendent of immigrants from a Western country.

Results

When analyzing belief (religion) as a protective factor against self-harm, ethnic background is highly significant. 42.1% of the immigrants (OR 17.28; $p < 0.0001$) and 54.6% (OR 28.98; $p < 0.0001$) of the descendants from non-Western countries indicate that their belief (religion) prohibits or prevents them from committing self-harm, whereas only 5.1% of the Westerners give their belief (religion) as a protective factor (table 1).

Table 1: Belief (religion) as a protective factor against self-harm distributed among ethnicity

	Ethnicity: Westerners Immigrants Descendants		
	(n=186)	(n=9)	(n=13)
My belief (religion) forbids self-harm attempts	5.1%	42.1%	54.6%
	1	17.28***	28.98***

*** $p < 0.0001$ (multiple regression model)

An explanation could be that the majority of the ethnic minorities in this study originate from Islamic countries. Unlike in Protestantism, the state religion in Denmark, the Nordic Countries and most of Northern Europe, suicide and self-harm is strictly forbidden in many other religions, such as Islam, thus explaining the difference.

Other results show that vulnerable adolescent immigrants more frequently (77.8%) give loneliness as reason for their vulnerability than Westerners (31.2%) (OR 12.03; $p < 0.01$) (table 2). Also problems with friends/schoolmates/colleagues constitute a higher risk factor for immigrants (66.7%) than for Westerners (27.4%) (OR 5.07; $p < 0.05$). Personal problems however constitute a lesser risk factor for immigrants (44.4%) than for Westerners (69.9%) (OR 0.15; $p < 0.05$).

Adolescent descendants indicate problems with the close family less frequently (15.4%) than Westerners (61.3%) as a reason for being vulnerable (OR 0.13; $p < 0.01$). On the other hand addiction to drugs/games/alcohol is a greater risk factor for descendants (23.1%) than for Westerners (6.5%) (OR 10.63; $p < 0.05$), as with physical health (46.2%), compared to (18.8%) (OR 4.16; $p < 0.05$), and money (38.5%), compared to (19.9%) (OR 3.88; $p < 0.05$).

Conclusion

Belief (religion) is a significant protective factor against self-harm for immigrants and descendants from non-western countries. This is not the case for Westerners.

Table 2: Factors behind vulnerability distributed among ethnicity

Factors	Ethnicity		
	Westerners (n=186)	Immigrants (n=9)	Descendants (n=13)
Close family	61.3%	66.7%	15.4%
	1		0.13**
Friends/schoolmates/colleagues	27.4%	66.7%	15.4%
	1	5.07*	
Loneliness	31.2%	77.8%	15.4%
	1	12.03**	
Personal problems	69.9%	44.4%	53.9%
	1	0.15*	
Physical health	18.8%	0.0%	46.2%
	1		4.16*
Addiction to drugs/games/alcohol	6.5%	11.1%	23.1%
	1		10.63*
Money	19.9%	44.4%	38.5%
	1		3.88*

* $p < 0.05$ ** $p < 0.01$ (multiple regression model)

