

## SUICIDE AND GENDER: CASE STUDIES OF SUICIDE AMONG FEMALES IN HUNZA VALLEY

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### ABSTRACT

*Suicide is an important social problem which is a common case of worries in all societies. Suicidal thoughts and attempts emerge, when the person is faced with a psychologically and physically destructive event and she/he cannot solve the problem. Suicide cases are increased in last five years in Hunza and day by day becoming the main issue of Gilgit Baltistan. There is a dire need of a standard system of record keeping of suicides in Gilgit-Baltistan and all over Pakistan so that, true figures can be recorded. This will assist in drafting policy and checking efficiency of suicide prevention programs. Under Pakistani law both suicide and conscious self-harm (DSH) are forbidden acts carrying a punishment of with a jail period and a weighty financial penalty. The current paper presents case studies of suicide among females in Hunza valley. Females' youth in the main objective of this study was to explore the case studies of suicide among educated female in Hunza. The study reported in this research is descriptive in nature. The sample selected by the researcher was of 10 families of suicidal cases. Judgmental sampling technique used by the researcher. The data was gathered through interview schedule and analyzed in descriptive form. The results showed that Suicide and suicidal behavior is not frequent in married woman but increasing the rate of suicide in Hunza among young girls. . There are many socio-psychological problems, causing the suicide i.e. Failure in love, low self-esteem, unable to control situations and growing materialism are the major predictors of suicide. The study concludes that mostly behavior of the family and strict cultural back grounds are the prominent causes of suicide among young girls in Hunza. There*

*are many resources which can be utilize to lower down tendencies of suicide i.e. parents, teachers, police, doctors and friends. Though, suicidal behavior remains an important clinical problem and major cause of death in youth. Advancing our understanding of underlying cultural and sociological issues in youth suicide will help clinicians too achieve more efficient prediction, prevention and treatment. This study might be helpful for the health institutions, educational institutions, religious institutions, teachers, policy makers, young leaders, social welfare organizations and other organizations as well. Studying the cases of female suicide might help to improve the understanding of individual suicide cases as well as providing an opportunity to search for possible preventive strategies.*

**Keywords:** *Suicide; Gender; Social factors of suicide; Hunza- Gilgit Baltistan*

## **INTRODUCTION**

Suicide is a feeling people may have, when they are no longer capable to face or handle any situation, when someone cannot have to manage over bad circumstances they be converted into depressive and get stress. The last decision and choice comes in his mind to kill his own self. There are quite a lot of causes of suicide. David (2008), argues that culture strongly influences how individuals vision and study suicide. Social arrangement and cultural principles mostly find out the kind and degree of both hold up and stressors ease of use of means and obtainable to conduct and social advice relating to with the suicidal actions. Across the cultures family carry acts and family structure as an obstacle against in the depths of despair actions, paternity defends and protests against suicide, more often than not for women. Never married position and separated people usually increases suicide risks. His answer shows that a variety of types of religious contribution and social hold are self-protective beside suicide.

## **ARGUMENT OF THE STUDY**

‘Suicide is a universal phenomenon in all countries of the world. There are 75 % of international suicides, occurred in middle and lower income countries in 2012. Proof based

and useful intervention can be functional at the population, sub population and individual levels to check suicide and suicidal attempts' (Mental Health Action Plan, 2013). Since 1995, more than 260 people have committed suicide at various villages of Ghizer District, keeping in view it's a small population district and worrisome for the region"(Brooshaal Times, 2014). According to Aziz Ahmed and Sultan Rahim Barchatheir collected data from 2000 to 2004, 49 women committed suicide in the Ghizer District. The following years saw speedy increase in suicide rates. According to mass media reports 340 women committed suicide in the period from 2005 to 2011.

Suicide is the act of intentionally taking one's life and is distinguished from natural death. There was a time when people used to avoid talking about suicide because it is very hard even to imagine intentionally killing oneself (World Health Organization, 2012). There has been a secure increase in the suicides committed by the youth of the world today. John Jordan, argued that the health of survivors is physically, emotionally and psychologically precious badly because some people pass through a normal pain process and heal rapidly but others go in depression feel guilt, refusal, shame, and adopt isolation. In addition the family members of the person are precious as stated in a study of Goode, (2003) wives who had lost their husbands are viewed more blame precious than wives whose husbands had died from heart attacks or in accidents. Due to this factor they are also helpless to depression this is the lower effect of suicide and a major risk factor for family members that they are horizontal to commit suicide' (Jordan, 2003). In Pakistan family hides suicidal actions of individual to keep away from legal actions, religious shame and social scandal due to which, it becomes difficult to classify suicidal cases. Regardless of highly under reported suicides in Pakistan, its cases are raising very fast which are based on experiential research studies that have explored only the reasons and danger factors of suicides in Pakistan' (Ayub, 2008).

Gilgit Baltistan is rich in its unique culture, values and owns many charming valleys and most discriminating peaks in Pakistan. Unluckily suicide is becoming a shocking issue in the

mountain-ringed territory. Shumaila Jaffery reporting to BBC narrates “The scenic valley is described as the Jewel of Pakistan but it has a problem. The rate of suicides among women is the highest there, in the country”. Youth in the region especially between ages of 14-28 are highly exaggerated in Gilgit-Baltistan. According to Ghizer Times from 1996 to 2010 more than 300 cases of suicide were registered at various Police Stations of Ghizer. But the figure might be much higher as some cases are out of sight and not reported to the Police Department due to some internal issues and family threats’ (GhizerTimes, 2014). The typical and usually youth suicide is characterized by unkind depression, isolation from society, hopelessness, irresponsibility, anger troubled and poor interpersonal relations, unemployment, family disputes, disjunction between experiential autonomy and theoretical freedom. These values and factors are relevant in all cultures and societies.

### **SCOPE OF THE STUDY**

The findings of this research are useful for overall society for taking preventive measures. It would be useful for students, researchers, policy makers, young leaders, social welfare organizations, women organizations, police department, health organization, and Governmental and Non-Governmental Organizations that focus their work on social development and implement new policies regarding young female matters specially the suicide. It would also be useful for the Local Government to implement special measures for suicide.

### **METHODS & PROCEDURAL PROCESS**

Studying the causes of female suicide might help improve the understanding of individual suicide cases as well as providing an opportunity to search for possible preventive strategy. The study gathered important insights into the causes of suicides (cultural factors, socioeconomic factors and physiological factors), effects of suicide (on family, cultures and community) and concept of suicide in Hunza Valley. The study also contributed to gather information on best possible approaches for overcoming the situation in the Valley. In this study, registered suicide cases of two years (2014-2016) were investigated including the

medical and psychiatric data where possible, and psychosocial circumstances in each case. The total number of male and female suicides was above 20 in the Hunza Valley. The suicide cases were categorized in terms of depression and hopelessness, dispassionate effect and hostility. The affect was related to age, sex, marital status and method of suicide. The results were presented with examples of each category and are discussed with respect to their contribution to (i) Considerate the cause of death, (ii) Considerate the intention of the suicide, (iii) Supporting the relatives in coping with the suicide, (iv) Representation awareness to those factors, where previous interference may have averted suicide. In this particular study, 10 cases of suicide of females in Hunza valley were selected. Researcher used interview schedule tool for data collection from the family members of suicide cases, in which respondents views and perceptions were taken about the study.

### **Results & Discussion/ Case Studies of Suicide Case Study # 01**

#### **Occurrences**

Saher belonged to a rich family. She had two brothers and three sisters and she was 24 years old. Her father was a government employee. She had all the luxuries of life. Her childhood spent with her parents very happily and protective. Saher went to Karachi for higher education. Her cousins were weak in education but she was intelligent in every type of work. Saher's cousins were envious with her but she ignored it all the time. She was doing assignments on laptop but her cousins blamed her of chatting with boys. She remained very upset during her studies and wanted to live in hostel but she could not manage it. She shared all circumstances with her sisters but she could not talk with her mother because she promised her mother that until she completes her education she will not return. At last she decided to commit suicide. One week earlier she was upset but she could not share with her sisters. At last night she arranged a party at home she was happy and laughing. In the next morning she hanged with fan and committed suicide.

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| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | In the morning about 10:00' O Clock she hanged with fan and committed suicide.   |
| <b>2.</b>    | <b>People Involved</b>      | Cousins are involved in the entire situation; they were envious and were quarreling with her.  |
| <b>3.</b>    | <b>Outcome</b>              | That issue is dangerous for her sisters. Her father feels fear and does not give permission to his daughters for higher education. The second outcome is stress and anxiety in family along with provoking from a society. |
| <b>4.</b>    | <b>Reasons</b>              | The main reason is stress. She took tension and another issue is cousin relationship conflict.   |
| <b>5.</b>    | <b>Community Influences</b> | Community did not take any initiative step to reduce the suicide causes.   |

## CASE STUDY # 02

### Occurrences

Fatima was an intelligent girl and 18 years old. She was position holder of her class and hardworking student. She belonged to a down trodden family. Her father was the only bread earner and the family was making both ends meet out of his meager income. She remained frustrated in her life .Her father become mentally up set due to poverty. There was no one to supplement their family income except her father. She was upset before one week. At last she committed suicide on 15 February 2015 hanging with fan.

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| <b>Sr.No</b> |                             |   |
| <b>1.</b>    | <b>Method</b>               | She committed suicide while hanging with fan.   |
| <b>2.</b>    | <b>People Involved</b>      | Community members and other helping organizations are involved in this situation. They must have considered her as a poor and deserving student in the community. |
| <b>3.</b>    | <b>Outcome</b>              | All the family members are suffering stress and become psychiatric patient.   |
| <b>4.</b>    | <b>Reasons</b>              | Poverty influenced this case because her father was mentally upset; there is no any other source of income.   |
| <b>5.</b>    | <b>Community Influences</b> | There is no any step taking for reducing this situation   |

**CASE STUDY # 03****Occurrences**

Sadia belonged to a rich family and her family was considered as an upper class. She was a beautiful and loving personality had three brothers and two sisters .She was spending luxurious life .All the members of her family loved her .She was a confident girl and she helped all the needy friends but her friends were jealous with her and unreal talking about her. She had many friends but one friend is most important. Her brother loved her deeply. Her best friend becomes her sister in law. Her brother always adored her which makes her sister-in-law jealous of her. Her sister-in-law threatened her to tell her brother that she will blame her of having love affairs with boys. One day her sister-in-law had a quarrel with her over a dress which her brother brought her. On the last day, Sadia felt very upset and thought of committing suicide. She was sleeping in her room and committed suicide hanging with fan .One beautiful and smart girl of Hunza put her life to end because of her jealous sister in law.

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| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Hanging with fan   |
| <b>2.</b>    | <b>People Involved</b>      | Her sister-in-law was jealous with her and mentally disturb her.   |
| <b>3.</b>    | <b>Outcome</b>              | Her family has a good image in a society but after her death community taunted family members which made her mother a psychiatric patient. |
| <b>4.</b>    | <b>Reasons</b>              | Jealousy and role conflict   |
| <b>5.</b>    | <b>Community Influences</b> | There is a no any initiative step to reduce this problem.  |

**CASE STUDY # 4****Occurrences**

Saima belonged to a middle class family. She was a student of intermediate second year and 18 years old .She was very simple. She had trust in everyone. One day early in the morning, she was busy with her books and reading. One week before the suicide she was upset due to some educational problems, she could not share with any friend. She was not prepared for papers she decided that she will take papers next year but she was unable to cope with the stress. One morning, she committed suicide in early morning when all family members were busy in domestic activities.

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| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Hanging with fan   |
| <b>2.</b>    | <b>People Involved</b>      | All the family members if they give her time for studies, she would not have done this suicide   |
| <b>3.</b>    | <b>Outcome</b>              | Family members, friends are in stress and label from society for the suicide.  |
| <b>4.</b>    | <b>Reasons</b>              | The main issue is educational problem she was unable to prepare for papers and decided to take papers next year. She took tension she needed counseling but no one gave her emotional support. In Hunza valley there is a domestic burden on the student. They work in farms and home they take care of animals and also studies, if they do not work, family members show hatred for them .Perhaps she was unable to find time for studies. The main issue was educational problem and she was keenly interested in studies, but unable to manage time she committed suicide. |
| <b>5.</b>    | <b>Community Influences</b> | There is a no any initiative step taken for reducing the stress situations of the family.  |

**CASE STUDY # 5****Occurrences**

Noreen belonged to a middle class family .She was a brilliant student of a coeducation college in intermediate second year class .Her class mate boy Ali was taking interest in her and he had a picture of Noreen in his pocket. One day the picture of Noreen was seen by the boys of her mohallah. Ali also belonged to her mohallah. All the boys of mohallah physically tortured Ali but Ali sustained injuries in this incident. During this situation, Noreen was scandalized and principal of her college expelled her from college. It was a difficult time for Noreen and she was tortured at her home and also in the society due to this incident. She was left with no option than to commit suicide. She committed suicide jumping off a mountain in her village.

| <b>Sr.No</b> |                             |  |
|--------------|-----------------------------|--|
| <b>1.</b>    | <b>Method</b>               | Jumping off the mountain   |
| <b>2.</b>    | <b>People Involved</b>      | People are involved in this case including the boys of mohallah, that boy who had her picture, the principal and her own family  |
| <b>3.</b>    | <b>Outcome</b>              | Stigmatizing in society no any effect on the family  |
| <b>4.</b>    | <b>Reasons</b>              | Noreen was a nice girl and the main reason was the blame and torture from her family, people and the principal of her college. Sometimes jobless boys do such kind of negative activities because they have free time, they utilize the energy and time in negatives tendencies but it should not influence the young girls. The second role conflict is principal. This was a minor problem and the Principal or teacher should give guidance and counseling to the boys instead of expelling the innocent girl from the college. The third role conflict is at one's own home, if parents should have trust in daughter's character and give her unconditional love. They should boost self confidence in her and in extreme case; they should change the college where she felt unsafe. |
| <b>5.</b>    | <b>Community Influences</b> | Community did not hold any session or seminar for the youth, teachers and parents for positive role in society.  |

**CASE STUDY # 6****Occurrence**

Zohra belonged to a lower class family .She had seven sisters and only one brother. Her brother was married and was living a happy life. All seven sisters loved their one and only brother. One day a political function was held in Hunza and her brother went to participate in the event. The main objective of function was to give rights to Internally Displaced Persons. Political leadership did not accept and people of Hunza assailed the police station. Some people made video of people and arrested all those involved in the offence including her brother. He was arrested by the police and was detained in jail and the court sentenced him with life imprisonment. She faced extreme anxiety and suffered tension and stress. Two years later, she committed suicide hanging with a fan. She died because of her brother imprisonment.

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| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Tying with rope with fan   |
| <b>2.</b>    | <b>People Involved</b>      | Political influence and prejudice  |
| <b>3.</b>    | <b>Outcome</b>              | Family was already in stress about her brother she increased the tension of her family             |
| <b>4.</b>    | <b>Reasons</b>              | She was a psychiatric patient she could not tackle the situation                                   |
| <b>5.</b>    | <b>Community Influences</b> | Community members try to release her brother out of jail but Pakistani laws did not let them do so |

**CASE STUDY # 7****Occurrences**

Azra belonged to a middle class family .She was a nice girl and was 22 year old .She was hardworking and had a caring personality .One day she had gone to her friend home to meet

her, after the meeting, her friend dropped her in her brother's car. When she arrived at her home, all the boys of her mohallah blamed her friend's brother of having an affair. All the boys of her mohallah bat him and injured him. Azra was outraged in her village and was scandalized. Boys of her village mentally tortured her father. Her father punished Azra physically and tortured her mentally. Her mother hated her and abused her. She was isolated and her friends also left her. After the wicked situation, she decided to commit suicide but her father killed her and hanged her with a tree. Her father loved her too much but people brainwashed her father. She was buried in her own village.

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| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Hanging with tree by her father  |
| <b>2.</b>    | <b>People Involved</b>      | People of community and her father                                     |
| <b>3.</b>    | <b>Outcome</b>              | Father became mentally up set and all the family members are in stress |
| <b>4.</b>    | <b>Reasons</b>              | Community people scandalized her                                       |
| <b>5.</b>    | <b>Community Influences</b> | Community did not take any steps to reduce this situation              |

### CASE STUDY # 8

#### Occurrences

Alina was a beautiful girl. She was the position holder in her class. She studied in intermediate second year. She had six sisters with no brother. She belonged to a middle class family. Her father was a businessman.

She had completed her intermediate in A+ grade but her mother wanted her to get married but Alina wanted to become a doctor. Her mother engaged her with an uneducated boy. After her engagement she felt very upset. One day she cleaned her home properly and drank poison. Her

parents took her to hospital in emergency but she died before reaching the hospital. After her death, all her uncles and relatives accused her of having a bad character girl.

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|--------------|-----------------------------|--|
| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Take a poison  |
| <b>2.</b>    | <b>People Involved</b>      | Mother is involved in this case  |
| <b>3.</b>    | <b>Outcome</b>              | Family members and friends are in stress and facing label from the society   |
| <b>4.</b>    | <b>Reasons</b>              | The main role conflict is her parents. She wanted to get higher education but they engaged her with uneducated boy. They should have given her permission for taking admission in medical, but they did not do so. |
| <b>5.</b>    | <b>Community Influences</b> | There is no any initiative step for the parental guidance that they should honor and appreciate the wishes of their children   |

### CASE STUDY # 9

#### Occurrences

Maryam was a married woman. She had five kids. After her marriage, she faced quarrel with her parents on daily basis. Her husband was an unemployed person but he had not enough means for his survival.

Maryam was a tailor and work hard to earn money to feed her kids. Her husband physically tortured her and took money from her. She tried to do good things for her children but her husband did not permit her to do any work happily. One day, she felt frustrated with life she decided to commit suicide and take poison. After taking poison she said her husband but he also physically tortured her in spite of taking the poison.

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|--------------|-----------------------------|--|
| <b>Sr.No</b> |                             |  |
| <b>1.</b>    | <b>Method</b>               | Take a poison  |
| <b>2.</b>    | <b>People Involved</b>      | In this case people are involved her husband and his family members. Husband physically and mentally tortured his wife. No any family member took any step against the bad behavior of her husband   |
| <b>3.</b>    | <b>Outcome</b>              | Behind this situation firstly all the kids suffer and face label from the society .Her younger daughter still hurt and recap this incident. After the suicide of her mother all kids suffer their education .Younger daughter has become a psychiatrist patient. |
| <b>4.</b>    | <b>Reasons</b>              | Poverty and unemployment of her husband influence on this situation if husband bear all the expenses of house and kids perhaps she would not have committed the suicide.   |
| <b>5.</b>    | <b>Community Influences</b> | The community members do not take any measures to overcome this problem. Children still suffer due to poverty  |

### CASE STUDY # 10

#### Occurrences

Shumaila was a beautiful girl and belonged to a middle class family, she had two sisters and three brothers .Her elder sister was more intelligent than Shumaila. Her mother gave her younger daughter more priority than Shumaila due to her educational competence. Mother had more love and affection to her elder daughter. She was ignored by her mother. Elder sister had gone abroad and got scholarship. Mother taunted her for leaving behind and not excelling in her studies. Shumaila was taking care of domestic activities and she could not find time for studies. She felt frustrated and committed suicide.

|              |                             |   |
|--------------|-----------------------------|---|
| <b>Sr.No</b> |                             |   |
| <b>1.</b>    | <b>Method</b>               | Hanging with ventilator.  |
| <b>2.</b>    | <b>People Involved</b>      | Mother  |
| <b>3.</b>    | <b>Outcome</b>              | Father had become upset and frustrated                                |
| <b>4.</b>    | <b>Reasons</b>              | Lack of mother care   |
| <b>5.</b>    | <b>Community Influences</b> | Community did not take any initiative step for reduce these situation |

## CONCLUSION

Suicide and suicidal behavior are not frequent in married woman but also increasing the rate of suicide in Hunza teenagers due to depression, lack of love, badly treated, losses, sudden overloads, fatal mistakes, immature parents, angry parents, failures, comparisons, and competitions etc. There are many resources can stop this issue like parents, teachers, police, doctors and friends. Communication with different cultures through media and other communication channels create tension and dissatisfaction among people. Recently financial revolution came in Hunza valley that increase suicide cases .There was a time people have ethical values about parents, neighbors, relatives and children but now generation gap come in the mind of people .Youth go outside of the region for education and jobs where they learn the different cultures and adopt them apply the different learning concepts in their real life .That's bring social changes in a society and effected them negatively.

According to respondent financial constraints, high expectations of parents, poor quality of parental relationship, academic pressure, authoritative parents, and social competition are the cause of suicide .Mostly cases occur due to low level of parental relationship. There are many psychological problems causing of suicide .Failure in love ,low self-esteem ,unable to control situations and growing materialism are the cause of suicide .Mostly suicide cases occur due to stress and psychological problems. According to family members views sometimes violation of cultural norms, labeling in a society, son preference in education and property, conflict between modernization and old tradition are the causes of suicide .Mostly behavior of the family and stick cultural back grounds are the cases of suicide.

## SUGGESTIONS FOR OVERCOMING SUICIDE IN HUNZA

1. The influential personalities should prepare a mechanism to bring the individual matters to the public where, it could be discussed and solution could be made.

2. There should be a meeting between appointed leaders and influential community members and elect people from every area and they will give information about anyone of their area.
3. Through the platform of training institution this problem can be overcome. They should arrange seminars in different schools, colleges, universities especially in those institutions where is majority of female.
4. Give equal rights to girls and not over bounded girls by family give permission to study in cities if a poor family does not bear the expenses, helping organizations should give help to them.
5. Police should secure the places where mostly people attempt suicide like jumping from the mountains and rivers.
6. Leaders and influential community members still not making efforts except blackmailing after the death of someone they only think about their near and dears ones not about the whole community. Community did not should interfere in other people's life.
7. It is a Govt; responsibility to control such problems by using different methods like organizations, different awareness programs etc.
8. There should be a student counselor in each and every education center.
9. A concept of check and balance of the activities of children by the parents should be practiced. Communication gap should be reduced and give an equal importance to all children. Authoritative parental style should be reduce, give and affection to the children, give a respect to the desires of children.
10. Leaders should consult with parents and give them a brief knowledge to control on suicide cases; parents should be friendly with their children and ask them about their problems.
11. There should be strict rules implemented by government which includes impose having fines on those families besides there should be awareness creating sessions on higher level.

## REFERENCES

- Abramson, A., T. M. & V. Goot. 1995. The changing geography of metropolitan opportunity: the segregation of the poor in U.S. metropolitan areas 1970–1990. *Housing Policy Debate*, 6(3): 45–72.
- Agatha, C. T. 2002. *Reducing Suicide a national imperative*. 3<sup>rd</sup> ed., The National Academies Press, Washington: 192-194.
- Ahmed, S.H. 1964. *Suicide in Asia and the Near East*, Berkley and Los Angeles: University of California Press., pp. 258-271.
- Ahmed, Z., A. Ahmed and S.M. Mubeen. 2003. An audit of suicide in Karachi: *Ann Abbasi Shaheen Hosp.*, 8(5): 424-428.
- Amery. 1991. The presence and accessibility of firearms in the homes of adolescent
- Brent, D. A., J. A. Perper, C. J. Allman, G. M. Moritz, M. E. Wartella, and J. P. Zelenak.
- Brent, D. A., J. A. Perper, G. Moritz, M. Baugher, J. Schweers, and C. Roth. 1993.
- Brent, D. A., M. Baugher., J. Bridge., T. Chen and L. Chiappetta. 1999. Age and sex related Risk factors for adolescent suicide. *J. American Acade. Chil.Psychi.* 38(3): 1497-1516.
- Centers for disease control and prevention. 1998. Suicide among black youths: United States. 1980-1995. *Morbidity mortality weekly report*, 47(10): 193-196.
- Centers for Disease Control and Prevention. 2006. Youth risk behavior surveillance system 2005. United States, 1997-2001. *Morbidity mortality weekly report* 53(22): 420- 428.
- Crosby, A., B. Cheltenham., and J. Sacks. 1999. Incidence of suicidal ideation and behaviour in the United States. *J. Suic. Threat.Behavi.*, 29(2)Page **76** of **139**
- Dad, A. A. 2014. Self Society and Suicide in Gilgit. International the News.*
- David, L. 2008. *Suicide and Culture*, vol. 2, Oxford University Press, London, York: 636-655
- Dopheide, J. 2006. Recognizing and treating depression in children and adolescents. *J. Heal. Pharm.*, 63(4): 233-243.
- Durkheim, E. 1897. *Suicide*. New York: Macmillan.
- Farhat Fazal1, Dr.AbidGhafoorChaudhry, Aftab Ahmed, M. Aurangzeb Chohan.2014
- Fikree, F. F., and L. I. Bhatti. 1999. *Domestic Violence and Health of Pakistani Women. J. Gynecol. Obst.*, 65(2):195-201

- Food and Drug Administration. 2004. FDA public health advisory: suicidality in children and adolescents being treated with antidepressant medications. *J. Edu. Suici.*, 21(2): 43-45.
- Glaeser, E., and S. Glendon. 1998. Who owns guns? Criminals, victims, and the culture of violence. *American Economic Review.*, 88 (2): 458–62.
- Glaeser, E., B. Sacerdote, and J. Scheinkman. 1996. Crime and social interactions. *J. Econom.*, 111(4): 507–48.
- Gould, M. S and Kramer, R. A. 2001. Youth suicide prevention: Suicide and life threatening behavior. 31(1): 6-21
- Gould, M. S., Greenberg, T., Velting, D. M., Shaffer. 2003. Youth suicide risk and
- Grisso, V. And T. Seagrave. 2009. U.S. Department of Health and Human Services.
- Hallfors, D., P. Brodish., S. Khatapoush., V. Sanchez., Cho., and A. Steckler. 2006. Feasibility of screening adolescents for suicide risk in real-world high school settings. *J. Publi. Healt.*,96(2): 282-287
- JULES BEMPORAD,MD (Severe and Mild Depression )Psychodynamics of depression and suicide in children and adolescents .(12-30)
- Samina Sher, Humera Dinar .2010. Ethnography Of Suicide: A Tale of Female Suicides in District Ghizer, Gilgit-Baltistan.suicides. *J. Medi. Associ.* 266(7): 21-43
- Vinokur, A. D., R.H. Prince and R. D. Caplan 1996. Hard times and hurtful partners, How financial strain affects depression and relationships satisfaction of unemployed persons and their spouses. *J. Personality socio.*, 71(1): 166-179.
- Werenko, D., L. Olson., G. Fullerton., L. Lynch., A. Zumwalt and D. Sklar.2000. Child and adolescent suicide deaths in New Mexico, 1990-1994. *Crisis.*,21(1):36-44.
- WHO World Health Statistics Annual. 1990. Geneva, World Health Organization, 1987,1988 and 1989.
- WHO. 2014. Methods and data sources for global causes of death 2000, 2011 and 2013.
- Zonda, T. 1999. Suicide in nograd country, Hungary.*Crisis.*, 20(2) : 64-70.
- Zuberi, H. 1981. Changing pattern of suicide and parasuicide in Karachi.*J. Pak. Mcd. Assoc.*, 113(3):76-78