## The impact of gender on suicide sociology essay



The majority of people instinctively know what the word means; it is the act of an individual taking their life. But, what is understood about the role gender plays in suicide. " Male suicides outnumber female suicides in all countries except select parts of China" (Hadad, pp. 133). It appears to be a contradiction when scrutinized. To most people it would seem like women would be more likely than men to commit suicide. Masculinity is built on the notion of strength, aggression, and independence while femininity is considered nurturing and expressive with the inhibition of anger. Because of the impact of gender roles in society, males have a greater difficulty reaching out for help. Traditionally, the socialization of females has encouraged passivity, dependency, and submissiveness. Of these traits, two may positively affect women's attitude towards suicide. The first is emotional expressiveness. Because females are free to express their needs more openly than males, females can and do seek help more often than males do. For example, women are more likely to seek help from and disclose mental health problems to their primary health care physician than men (WHO, 2010). The trait of emotional expressiveness may help to explain why women more often than men express sympathy toward suicidal figures. It may also have implications for the treatment of suicidal women in that they may seek help more often than men and at an earlier stage in the development of suicidal ideation. Also, women may give themselves permission to plan less fatal suicide attempts than men do, using such attempts as another more serious form of expressing their need. Females may simple be more willing than males to reach out and nurture those who are considering suicidal behavior. The desire to nurture may also enable females to be more open than men to inform others about suicide and more https://assignbuster.com/the-impact-of-gender-on-suicide-sociology-essay/

willing to talk with those considering suicide. Socialization toward passivity, conversely, may block troubled traditional females from exploring healthy coping skills in an active manner. Similarly, because of their socialization toward dependency, traditional females may not be able to find independent solutions, storing up their frustration and anger as they passively wait for change that does not come. The socialization of females to inhibit their anger makes positive coping with frustrating life circumstances difficult if not impossible. One alternative to expressing anger is to turn inward, courting depression and its outward manifestation, suicidal behavior. There is ample evidence that women admit being depressed more often than men do (Fujita, Diener, Sandvik, 1991). Perhaps women experiencing irresolvable anger become susceptible to depression, which in extreme cases may lead to suicidal behavior. Turning to male socialization, there are problems of a different type. Males, compared to females, show higher levels of activity and aggression very early in childhood and these differences persist until at least middle age. Moreover, traditional socialization of males builds upon these existing tendencies toward higher activity levels and aggression. The instruction given to a small boy diverts them from anything thought to be feminine, encourages them to inhibit their emotions; and demands that they become independent as soon as possible. As males develop structures of schemas for masculine behavior, they begin to structure their future interactions in the world in such a way as to maintain those perceptions. Males find their tendencies toward activity and higher aggression sharpened by their cognitive understanding and acceptance of the emphasis on competition and success inherent in traditional male socialization. Especially in North American culture, boys are socialized into competitive games at an https://assignbuster.com/the-impact-of-gender-on-suicide-sociology-essay/

early age and often learn to endure physical punishment and pain as part of " having fun" or learning to be a man. In short, male socialization encourages emotional inexpressiveness and denial of feelings of pain and suffering. It also gives permission to be more aggressive and violent and to reach for success or winning at any cost. Males as also socialized to look at life pragmatically, to be problem solvers. Research on attitudes towards suicide tends to support the proposition that males, more often than females, may see suicide as an acceptable solution to problems inherent in living (DeRose, Page, 1985). Males and females differ greatly in their suicidal behavior. They have dramatically different suicide attempt and completion rates, attitudes, and propensities to seek help in a crisis that are deeply embedded in gender related socialization practices. Females seem to know more factual information about suicide than males do. Females may thus be in a better position than males to recognize when friends or acquaintances are considering engaging in suicidal behavior. Females seem more willing to discuss the subject of suicide with suicidal people. This suggests that females are more likely than males to be effective both in crisis intervention and in peer counseling programs. Perhaps females more than males have a general perceptual set to value life. Such a set would have survival value since it is the female who must experience childbirth in order to give life to the next generation and who generally must play the major role in nurturing that life, at least in the early months and years. Therefore, females may have a keener appreciation for life and for the waste that death by suicide engenders. Females have a greater understanding of the enormity of potential lost because of suicidal deaths. Males, conversely, may view death by suicide, especially the death of those who are old or terminally ill, as a

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representing decisive action in the face of unchangeable fate. Therefore, rather than focusing on the waste involved in suicide, males may see it as a final problem-solving solution. Males seem to accept suicide as an alternative in otherwise insoluble situations but they view other males who attempt suicide with less sympathy and empathy than they view the same troubled males who do not attempt suicide. Attempted suicide, in general, appears to be viewed as weakness while completed suicide is viewed with strength. One of the most important pieces of information I learned from this essay were the differences in attitudes towards suicidal behavior in men and women and the way people view attempted and completely suicide. If attempted suicide is views as weaker and less masculine, males would be more likely to structure any suicide attempt in such a way as to reduce the likelihood of surviving, while females would feel fewer stigmas from surviving an attempt and might, therefore, be more likely to engage in less lethal suicidal actions. It is interesting that sex differences in suicidal behavior are consistent. Females do attempt suicide more frequently than males, while males succeed in killing themselves more frequently than females. With findings such as these it is unsettling to consider that the majority of suicide prevention and treatment is tailor towards emotional evaluation, reporting, and observation when the masculine gender role inhibits any of these tendencies. Males are less likely to exhibit any warning signs or talking about suicidal ideation. Men do not have the benefit of having a suicide attempt be observed as a need for treatment because they are more likely to succeed in their attempt.