

## The Prevalence of Extreme Severity of Autoaggression Among Residents of Russia

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### ABSTRACT

Suicide in Russia is not uncommon. This requires careful consideration of its prevalence and factors contributing to it among Russians. This can effectively adjust the measures taken in Russia to prevent suicide, and will also help in the discussion by representatives of various sciences of the maximum number of aspects of the problem that should be taken into account when developing new measures to reduce the suicide rate in Russia. The material for this research was the information sources contained in the open press. The research methods in the work were the methods of analysis and synthesis, induction and deduction and the method of mathematical processing. The highest levels of suicide per 100 thousand population were noted in five Russian federal districts: North-West, Volga, Ural, Siberian and Far East. At the same time, the mortality rate of the population from deliberate autoaggression with lethal self-harm was lower than the national average in three federal districts: Central, South, North Caucasian. Most often, suicides in Russia are committed by single people and divorced people. People with a high level of education are less susceptible to suicide than people with low education. Suicides in Russia are dominated by persons of low social status. It was found that the most common reason for suicide in Russia is the loss of social status. In addition, the causes of suicide can be progressive illness and economic problems. A suicide attempt in Russia is often promoted by a state of drug or alcohol intoxication. Suicide for Russia remains a serious problem, which can be solved largely by optimizing social and economic conditions, as well as carrying out systematic preventive work with the most threatened by suicide contingents of the population.

**KEY WORDS:** SUICIDE, BEHAVIOR, LIFE, LAW, AUTOAGGRESSION.

### INTRODUCTION

The steadily developing medical and biological science continues to form a reliable foundation for the well-being of modern mankind (Vorobyeva et al., 2018).

Much attention continues to be paid to the disclosure of the mechanisms of the human brain functioning and the connection between its work and social behavior (Bespalov et al., 2018). At the same time, modern man continues to face a host of various medical and social problems. In many ways, they are associated with the lack of various means, the continuing impossibility of a complete cure for many diseases, limited resources available, frequent shortages of food and the presence of various forms of deviant behavior in a part of the population (Polskaya, 2015).

One of its variants is autoaggression, an extreme form of which is considered suicidal behavior, which has recently become a global public health problem in many

### ARTICLE INFORMATION

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countries. Modern researchers consider suicide to be a conscious refusal of a person from life associated with actions aimed at stopping it and classify it as the most extreme form of deviant behavior. It is now customary to call suicide deliberate actions that led to death, and actions as a result of which an attempt was made to deprive oneself of life, but due to various circumstances, it did not result in a fatal outcome. In this regard, recently, researchers began to distinguish between fatal (completed) suicide and non-fatal suicide (or suicidal attempt) (Ananyin, 2020).

According to available information, suicide rates in many countries, including Russia, remain high. This situation attracts a large number of researchers in order to clarify its various aspects. Due to the high mortality rate from suicide, Russia continues to suffer significant social and economic losses. This can be reflected at the level of the gross national product, inhibiting economic growth (Sergienko et al., 2007). In view of the negative statistics on the level of suicide, Russia continues to actively work to prevent suicide among the population. In this regard, the continuation of the analysis and assessment of the level of prevalence of this phenomenon among the population of different regions of Russia is of particular relevance. This can effectively adjust the measures taken in Russia to prevent suicide, and will also help in the discussion by representatives of various sciences of the maximum number of aspects of the problem that should be taken into account when developing new measures to reduce the suicide rate in Russia, (Zharkov and Protsik, 2016). The purpose of the present work is to examine the level of prevalence of extreme severity of autoaggression among Russians.

## MATERIAL AND METHODS

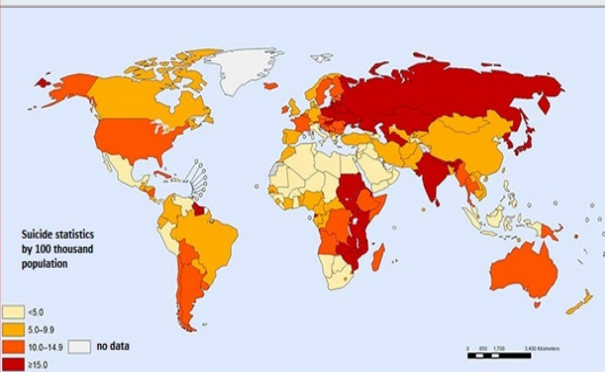
The material for this research was the information sources contained in the open press. The search was carried out in the database of the scientific electronic library eLIBRARY.RU and in the Scopus database. The research methods in this work were the methods of analysis and synthesis, induction and deduction and the method of mathematical processing using standard statistical programs (Novikov and Novikov, 2010).

## RESULTS AND DISCUSSION

Suicide occurs in all countries of the world, affecting people of all nations, cultures, religions, genders and classes. Available statistics show that the countries with the highest suicide rates in the world are very diverse. Unfortunately, Russia occupies one of the leading positions in these statistics (according to preliminary data for 2020, there are 31 suicides per 100 thousand), experiencing a gradual increase. According to preliminary data, in 2020, she entered the top five leaders in this indicator, along with Lithuania (31.9 suicides per 100 thousand), Guyana (29.2 suicides per 100 thousand), South Korea (26.9 suicides per 100 thousand), Belarus (26.2 suicides per 100 thousand) (<https://www.yaplakal.com/forum3/>

[topic2124734.html](https://avatars.mds.yandex.net/get-en_doc/192582/pub_5cc0519c569af600b33b5f49_5cc052716c165100b0a54183/scale_1200)). The prevalence of suicides among the world's population is shown in Figure 1.

Figure 1: The prevalence of suicides on the planet ([https://avatars.mds.yandex.net/get-en\\_doc/192582/pub\\_5cc0519c569af600b33b5f49\\_5cc052716c165100b0a54183/scale\\_1200](https://avatars.mds.yandex.net/get-en_doc/192582/pub_5cc0519c569af600b33b5f49_5cc052716c165100b0a54183/scale_1200))



When analyzing open official sources of the Ministry of Health of the Russian Federation, the mortality rate from intentional self-harm was 13.8 cases per 100 thousand population in 2017 and reached 13.3% of all external causes of death. The study of the territorial characteristics of mortality of the population from intentional self-harm (suicide) in 2017 made it possible to identify Russian federal districts with levels above or below the national average (Table 1):

Table 1. Suicide rates by districts of Russia in 2017

Federal districts of Russia	The number of suicides per 100 thousand population
Northwest	14,2
Privolzhsky	16,7
Ural	15,6
Siberian	23,7
Far Eastern	18,2
Central	10,0
Southern	8,4
North Caucasian	4,3

It turned out that the highest suicide rates per 100 thousand of the population were noted in 2017 in five Russian federal districts: North-West, Volga, Ural, Siberian and Far East. At the same time, in 2017, the mortality rate of the population from deliberate autoaggression with fatal self-harm (suicide) was lower than the national average in three federal districts: Central, South, North Caucasian. Analyzing these indicators for the constituent entities of Russia included in all federal districts, significant differences were also established. In the Siberian Federal District, the highest suicide rate per 100 thousand population was found in

the Republic of Buryatia (39.6), and the lowest in the Republic of Tyva (5.6). In the Far Eastern Federal District, the maximum mortality rate from deliberate self-harm was recorded in the Jewish Autonomous Region (41.7), and the minimum - in the Khabarovsk Territory (0.5). In the Volga Federal District, the highest and lowest level of the studied indicator per 100 thousand of the population was, respectively, in the Udmurt Republic (33.9) and in the Samara region (4.0). In the Urals Federal District, the highest suicide rate per 100 thousand population was found in the Kurgan Region (35.8) and the lowest in the Khanty-Mansi Autonomous Okrug (8.4).

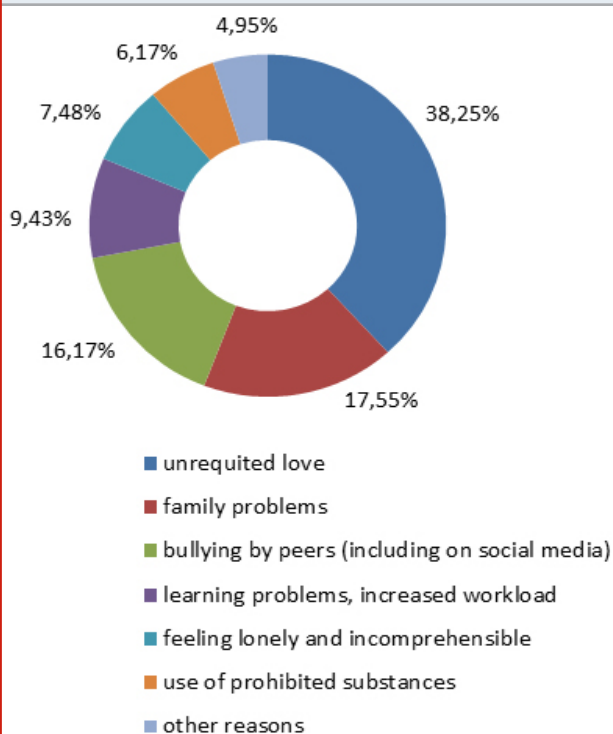
In the Northwestern Federal District, the maximum mortality rate of the population from intentional self-harm was registered in the Nenets Autonomous District (43.2), and the minimum - in the Murmansk Region (5.7). In the Central Federal District, the highest and lowest level of the studied indicator per 100 thousand of the population was noted, respectively, in the Ivanovo region (21.5) and in the city of Moscow (2.7). In the Southern Federal District, the highest suicide rate per 100 thousand population was found in the Republic of Kalmykia (17.7), and the lowest in the Astrakhan region (0.4). The lowest mortality rates of the population from intentional self-harm in Russia in 2017 were established in the North Caucasus Federal District. At the same time, the highest and the lowest level of the studied indicator per 100 thousand of the population was in this region, respectively, in the Karachay-Cherkess Republic (9.4) and in the Chechen Republic (0.6) (Russia in numbers, 2018).

The age-specific mortality rates of the population from intentional self-harm in the Russian Federation in 2017 per 100 thousand of the population were: 1.5 at 10-14 years old, 8.4 at 15-19 years old, 14.0 at 20-24 years old, 16.4 25-29 years old, 18.9 at 30-34 years old, 19.8 at 35-39 years old, 18.7 at 40-44 years old, 17.6 at 45-49 years old, 16.3 at 50-54 years old, 15.5 at 55-59 years old, 13.4 at 60-64 years old, 13.9 at 65-69 years old, 15.3 at 70-74 years old, 20.9 at 75-79 years old, 20.3 at 80 -84 years old, 27.6 years old and older. In general, in the Russian Federation, the death rate from suicide per 100 thousand of the population in 2017 in the age group 0-17 years was 1.3, in the working age - 17.8, in the group over working age - 14.5. It is noteworthy that the highest suicide rate in the Russian Federation in 2017 per 100 thousand of the population of working age is noted in the age groups of 30-34 and 35-39 years old (Korolenko and Dmitrieva, 2015).

It was found that in Russia, conscripts (up to 70% of all suicides in the army occur in the first year of service), convicts (60% of all suicides occur during the first three months and in the last months before release) are at high risk groups (Crime, 2017). Also, a very negative situation is observed among adolescents. A number of cities in Russia are covered by "epidemics" of teenage suicides. According to available data in Russia, the suicide rate among young people is 53 cases per 100 thousand population (Ignatenko, 2017). So, in 2016,

the number of suicides increased by 57% compared to 2015 and amounted to 720 cases (Zotina et al., 2013). The reasons for teenage suicides in Russia are not very diverse (Nesvat, 2016). Their spectrum is shown in Figure 2 below.

Figure 2: Reasons for attempted suicide among adolescents in Russia.



Comprehending the results obtained in the study, it must be said that suicidal behavior is an activity in which obvious elements of self-destruction are necessarily present: from expressed aloud thoughts of suicide to explicit actions to physically destroy oneself. Suicidal behavior among the population of Russia is found in the form of completed suicide, suicidal attempts (attempts) and intentions (ideas). These forms are usually viewed as stages or manifestations of the suicide phenomenon. Suicidal tendencies in Russia encompass suicidal intentions, thoughts and frequent statements about unwillingness to live. A very important characteristic is considered in Russia the suicidal indicator - a value reflecting the prevalence of suicide cases among the population or a separate social group (Bardenstein et al., 2011; Korolenko and Shpiks, 2012).

The suicidal actions of Russians, as a rule, are not their impulsive reaction to a separate violation of their mental state. Observations show that suicide among Russians is a decision that has arisen over a long period of time against the background of serious personal or family difficulties. Moreover, such an attempt itself is often impulsive. The total mass of Russian suicides includes three main categories: people with severe mental disorders, patients with borderline mental disorders, and completely healthy people (Borisonik and Kholmogorova, 2018). At the

same time, all Russian suicides have obvious objective and subjective manifestations of socio-psychological disorders. The presence of this maladjustment can be manifested by a violation of the behavior of a Russian in his social environment, a weak ability to optimally cope with existing social phenomena or with pathological changes in his behavior (Aminov, 2014).

Researchers believe that subjective impairment is manifested by a number of negative changes - from negative psychological experiences to the obvious manifestation of psychopathological actions. In the course of the progression of psychological maladjustment in Russians, pre-suicidal and suicidal stages are formed. For the transition from the pre-suicidal stage to the suicidal one, Russians always have a suicidal conflict. In the regions of Russia where suicides are most common, such conflicts are very often formed with a low resistance of part of the population to stress. This is seen as an important prerequisite for suicidal behavior among Russians and can be caused by many reasons. Despite a number of reasons, in any case, this conflict is very real for a person, accompanied by painful experiences and a desire to get rid of them. The second phase of the conflict - suicidal, is an illogical attempt to eliminate this conflict through self-destruction of a person (Igntenko, 2017).

In the light of the above, suicidal behavior among Russians should be associated with an unsuccessful combination of environmental, personal and psychopathological moments (in the case of a person's mental disorder progression). As a result of the emerging situation, a person experiences suicidal actions and a complete suicide may occur, which is an external form of suicidal behavior. Fortunately, among Russians, the ratio of suicide attempts and completed suicides is 10: 1 (Korolenko and Shpiks, 2012; Zotina et al., 2013).

It is noted that the number of suicides committed among Russian men is higher than among women. This can be explained that men consider the motives and reasons for suicidal actions more seriously. They perceive personal and family problems (unfair treatment on the part of relatives and others, divorce and family conflicts, an obstacle to meeting an urgent need, prolonged loneliness, unsuccessful love, little attention from everyone around them) are perceived as more hopeless circumstances and are considered as strong motives for suicide. In the presence of mental health, men may have more pronounced internal conflicts, often disrupting the state of physical health (somatic diseases, physical suffering); the consequences of any antisocial acts of a suicide (fear of legal liability, fear of punishment or shame); conflicts in the educational or professional sphere (insolvency, failure in school or at work, decline in prestige, unfair demands), as well as the presence of acute domestic difficulties (Sukhareva, 2017).

Due to the widespread prevalence of suicides in Russia, preventive measures are being taken at the local, regional and federal levels. To prevent suicides in Russia, anti-

crisis services are being created that work around the clock. A serious component of the preventive actions of these services is the active identification of suicidal persons among Russians and targeted psycho-corrective work with them in order to prevent suicide. The generally recognized risk factors for suicide among Russians are social isolation, especially the loss of connection with family and friends, mental disorders, a previous suicide attempt, drug and alcohol use (Sergienko et al., 2007; Aminov, 2014).

## CONCLUSION

Suicidal behavior in Russia is conditioned by three important components: - individual personality traits, the situation of socio-psychological conflict and the degree of adaptation of the personality to it. It has been established that most often suicides in Russia are committed by single people and divorced people. Russians with higher education are less susceptible to suicide than those in Russia with low and incomplete secondary education. Suicides in Russia are dominated by persons with a relatively low social status (workers, unemployed, and non-students). A common reason for making a decision to commit suicide in Russia is the loss of social status (first of all, dismissal). Also, frequent causes of suicide among Russians can be a progressive illness, as well as economic problems leading to the difficulty of acquiring housing, clothing, and food. At the same time, in Russia, the proportion of deaths in 2017 from suicide were at the time of death in a state of drug intoxication (33.4%) and 92.6% in a state of alcoholic intoxication.

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