

## Analyzing The Root Causes Behind the Rising Suicide Cases in Hunza Gilgit Baltistan

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### Abstract

The increasing number of suicide cases in Gilgit Baltistan, Pakistan, has become a substance of great anxiety for health care specialists and politicians. The study was conducted in Hunza valley, and This study uses quantitative method to collect data from 115 respondents who were residents of Karimabad Hunza using a simple random sampling method. The objective of study to find out the impact of social factors on suicidal behavior within the Hunza community. And to find out cultural factors, environmental and psychological factor on suicidal behavior. The data reveals that suicidal behavior is a significant concern in the community, with 34.1% of respondents believing it to be a major issue. Social factors also show a role, with 40.0% feeling socially connected, but also experiencing bullying or discrimination (31.1%). Environmental factors such as feeling safe in one's neighborhood (29.6%) and access to green spaces (31.1%) are also important. Cultural factors, including cultural values (32.6%) and traditional healing practices (34.1%), also influence attitudes towards suicidal behavior. Finally, psychological factors such as receiving treatment for mental health (38.3%) and feeling comfortable expressing emotions (41.7%) are crucial. Overall, the results highlight the difficulty of suicidal behavior and the need for a inclusive approach to address its fundamental factors. The exploration of social, cultural, environmental, and psychological factors provides a comprehensive understanding of suicidal behavior within the Hunza community. These findings underscore the necessity for culturally sensitive interventions addressing multifaceted influences to effectively prevent and mitigate suicidal behaviors among the Hunza population

**Keywords:** Gilgit Baltistan, suicide rates, sociocultural contextual, general pressures, national strength, child marriages, psychological strength, community health, high expectations of a family with their children, socioeconomic progress.

### Introduction

The current research is based on Analyzing the root causes behind the Rising Suicide Cases in Hunza Gilgit Baltistan The Present period in Gilgit Baltistan, situated in the northern region of Pakistan, has viewed a disturbing flow in suicide cases. This phenomenon has raised important concerns among health care experts, politicians, and the local community This Report aims to provide a thorough examination of the variables influencing Gilgit Baltistan's rising rate of suicides. Acknowledging the root reasons makes it easier to create winning plans and put preventative measures in place to deal with this pressing problem. Suicide rates can be attributed to many factors such as the short supply of employment facilities, societal forces such as arranged marriages, blackmailing, poverty, unhappiness, communication between children and parents, discrimination between sons and daughters and academic expectations, and domestic violence, particularly distressing woman's and high expectations of family. (Mahsud & Ali, 2018) suicidal behavior is not common in married women but increasing the rate of suicide in Hunza is among young girls and boys. There are more socio-political issues, causing suicide i.e. Failure in love, low self-esteem, unable to control emotion, and growing physicalism are the major predictors of suicide. The study reason that largely behavior of the family and strict cultural backgrounds are the large causes of suicide among young girls in Hunza.

**Durkheim:** say that suicide can be practical to every cases of death which effects directly or indirectly from a negative and positive show or action, carried out by the object her himself, knowing that it will produce this result Durkheim 1897. Durkheim say modify the social and cultural factors of suicide as compared to psychological or other factors. He argue that

uniformity of suicide is a social fact. The most brilliant sociologist Bronislaw Malinowski argued that the suicide is used by Durkheim as a social factors on our personal lives.

Davis: expressed that the suicide is a worldwide process of self finish and committed by an individual knowing that what he or she has done and familiar from the consequences, advantages and disadvantages cases they effect suicide Davis 1968.

Rahnuma, Fangtong: claimed that rapid social change brought about a marked shift in Northern Pakistani culture and society, which transformed the community from (Ullah, Shah, Khan, Ahmad, & Scholz, 2021) pastoral to agricultural life and, then, to government and corporate employment, further evolving towards a merchant society, followed by a capitalist society. This transformation result in a shift of societal values from communism to individualism. Individuals are left lonely to cope with their problems, with decreasing social support. This isolation often fuels frustration and alienation, which are the main risk factors for suicide

**Keynesian Haghshenas:** 2010, Suicide is also a gender problem. Hence, social factors which lead to suicidal behaviour are family problems, unsuccessful marriages, high expectations from (Kanwal, Fiaz, & Muhammad, 2021) romantic relationships and other relation most of the time, poverty - which can be connected to gender and more general factors (Keyvanara, Haghshenas 2010). Scholars also suggested that new changes in society and the gap between traditional and modern values and attitudes affect the suicide attempt who are abused being more likely to attempt suicide (Haarr 2010).

### **Background**

The Hunza Valley is a mountainous area situated in the Gilgit-Baltistan location of northern Pakistan, close the border are connect with China and Afghanistan. It is famous for its amazing natural beauty, unique culture, and the longevity of its inhabitants. Historically, Hunza was ruled by the Mirs (local rulers) and was known as a princely state. The people of Hunza, dominant Ismaili Muslims, have a unique cultural practice, with traditions influenced by Persian, Central Asian, and Tibetan cultures. Hunza is famed for its longevity and health, with reports of the remarkable health and vitality of its residents attracting attention worldwide. The Hunza diet, rich fruits, nuts, grains, and fresh mountain water, has been the subject of attraction and study by health enthusiasts and researchers. Hunza is home to more historical place as well as mouthwatering local cooking. Historical sites of note: The oldest fort in the Hunza region of Gilgit Baltistan is Baltit Fort. It was established 700 years ago (Aisar 2015). It faces Rakaposhi Peak, one of the highest peaks in the world, and is magnificently positioned in Baltit or Karimabad, Hunza.

**Altit fort :** the oldest and historical Altit fort is the focus of attraction Because of its age, architectural style, and advantageous location, the oldest and most historically significant Altit fort is the main point of interest. Among the earliest settlements in Hunza is Altit. The fort that served as its foundation is 900 years old. One of Hunza's **oldest villages**, The flat terrain of Ganish Village Settlement is close to the Hunza River. The oldest khun clusters are Bintan khun, Suni khum, Chaboikushal, and Tsill Ganish, though there are several others. Local storytellers state that despite the devastation brought about by a flood in 1960 and the building of the Karakorum Highway (KKH) through it in the 1970s, Ganish village Khun's original layout is mostly intact.

### **The Hunza famous foods such as following**

**Chapshuro:** chapshuro is a very taste meal a popular snack in Hunza, chapshuro is a savory pastry filled with minced meat and spices.

Hunza bread is a kind of traditional flat bread that is usually served with butter or apricot jam. It is made in a tandoor using whole wheat flour, milk, and eggs.

Items manufactured from apricots: Apricots from Hunza are highly prized and used in many different recipes, such as cake, jam, and chutney.

Hunza Soup is a hearty soup that is flavored with regional herbs and spices and made with barley, lentils, and veggies.

### **Objectives**

1. To find out the impact of social factors on suicidal behavior within the Hunza community.
2. To find out impact of cultural factors on suicidal behavior.

3. To find out the impact of environmental factors on suicidal behavior.
4. To find out impact of psychological factors on suicidal behavior.

#### **Literature Review**

We will look at what other people have already found about Suicide cases Existing literature on suicide in Hunza, Gilgit-Baltistan, provides valuable insights into potential causes and contributing factors. Studies by local scholars such as Hussain and Khan et al. (2019) have explored the socio-economic challenges faced by residents, including unemployment, poverty, and lack of access to mental health services. Additionally, research by Ahmed et al. (2020) and Ali et al. (2021) has examined the cultural and psychological factors influencing suicidal behavior in the region. Global suicide rates are not confined to specific regions but rather present a broader challenge faced worldwide. This section aims to delve deeper into the patterns and trends observed in various countries, considering demographic, economic, and cultural factors. Through the analysis of global data, our objective is to identify overarching themes that may resonate with the situation in Gilgit Baltistan. Recent global suicide trends are concerning, particularly among specific age groups and demographics. Many elements such as economic inequality, urbanization, and evolving societal norms have been identified as underlying causes of these styles. The World Health Organization's efforts to address mental health on a global scale emphasize the need for tailored interventions that a importance of developing strategies that are relevant to regions like Gilgit Baltistan.

#### **Anthropology of Suicide:**

Suicide is a major issue in some areas of Pakistan, and it's becoming worse in Gilgit-Baltistan. The age group most affected by suicide is young people, between the ages of 14 and 25. This phenomenon of suicide has garnered attention as a significant research subject among anthropologists and sociologists (Durkheim Giddens, 1991), though anthropological studies on suicide are comparatively limited. Suicide is a potentially rich research topic because of its coincident universality and quality: while self-inflicted death occurs in all societies, there are cultural differences in how the act of taking one's own life is perceived and comprehended (Khan, Leghari, & Pasha, 2023). As far back as local memory allows, suicide has a history in Hunza, though there are few official records on the topic. An Hunza respondent who was 80 years old claimed that "in the past, most cases of suicide pass off in people between the ages of 25 and 60, while suicide among teens and people between the ages of 13 and 25 was absent." Some researchers have linked the rise in teenage suicide to Hunza society's modernization, which began sometime after the 1950s (Khan, 2017).

The rising number of teenage suicides has become a major concern for the community, even though the region feeling itself on having some of the highest literacy rates. Although open discussions and public comments on the subject have historically been very close, making it almost a taboo topic, residents view each suicide case from a variety of perspectives. However, taken the startling rise in teenage suicides over the early ten to twenty years, this position is changing. Thirteen young people committed suicide in upper Gojal and fifteen more in Central Hunza between 2007 and 2015, according to local media reports like the Sost Times, illustrating the severity of the problem (Hussain, 2014). The sociological and quantitative approaches used in the majority of the literature on youth suicide oftentimes ignore the supernatural idea attached to the act. By investigation the regional cosmology views on supernatural beings and their declared link to adolescent suicides, this article aims to rectify this blind spot.

#### **The Relationship Between Suicide attempts and Social Norms:**

The Studies on suicide and an economic position primarily focus on the economic environment and cultural aspects of a specific region. The correlation between the economy and suicide has been established, with unemployment often identified as a significant factor. Research inform that a 1% increase in unemployment leads to a 0.79% increase in the suicide rate among individuals under 65 years old. However, other economic factors contribute to suicide, such as poverty, financial loss, and debt. Suicide is a social phenomenon, and researchers also explore its societal consequences. Therefore, understanding the socioeconomic effects and cultural measures related to suicide is crucial in preventing suicidal behavior. Moreover, there is a positive correlation between suicide and the living environment, as well as the economic

conditions of a region. This is particularly evident in Asia, where factors like traditional belief, speedy changes in the global economy, availability of suicide performing, and personal life stress contribute to higher suicide rates compared to Western countries. Gender dynamics also influence suicide, with family problems, unsuccessful marriages, high demand in relation, and gender-related poverty being contributing factors.

Researchers also emphasize the impact of societal changes and the contrast between traditional and current practices and attitudes, especially among women. Additionally, domestic violence serves as an indicator that abused women are more prone to attempting suicide. Suicide as a societal issue is of utmost importance, as highlighted in a study conducted by Alexander Tsai et al. (2015) The social impact of female suicide in the United States was examined. The research, based on principles, successfully demonstrated that the number of suicides decreases as the quality of relationships improves. Involvement, social and community engagement within relationships can effectively reduce the occurrence of suicide. However, the authors did not elaborate on the potential negative consequences that could arise. Furthermore, a new policy report from North American country discusses how media coverage of suicide can influence and endanger individuals (Sinyor et al. 2018).

The report suggests that suicide prevention programs may inadvertently encourage more suicide attempts. Similarly, it argues that media coverage of unusual suicides can lead to an increase in the figure of deaths. Rather of focusing on suicide itself, the media should shift its attention towards highlighting stories of individuals overcoming suicidal thoughts. This approach would convey a positive message and contribute to the reduction of suicide rates. Recent studies conducted in the United Kingdom (Bibi et al. 2019; Mahsud, Ali 2018; Rahnema et al. 2017) have shed light on various factors that contribute to suicidal ideation. Poor family relationships, lack of connection between parents and children, conflicts of orthodox and heterodox values, and the struggle between conforming to societal expectations and pursuing education are significant factors in contemplating suicide. Khan (2018) explains that between 2006 and 2017, there were 203 reported cases of suicide in Giza alone. This study emphasizes the importance of parents' education, knowledge, and resources in understanding and effectively communicating with their children, thereby reducing the risk of suicide. Additionally, recognizing the early signs of suicide is crucial in promptly addressing the issue. All individuals contemplating suicide exhibit initial thoughts and display signs that necessitate immediate recognition and intervention.

#### **Socioeconomic Factors:**

The socioeconomic landscape greatly affects the residents of Gilgit Baltistan, which in turn has a significant impact on their mental well-being. This section seeks to examine how poverty, unemployment, and educational disparities influence mental health, while also establishing connections between socioeconomic factors and suicide rates. By thoroughly analyzing the unique socioeconomic challenges faced by the region, targeted interventions can be developed to effectively address these issues. Despite the region's natural beauty, Gilgit Baltistan's economy encounters obstacles such as limited employment opportunities and infrastructure problems. Understanding the local manifestation of economic instability is crucial, as it is globally recognized as a major contributor to mental health problems. This understanding is essential for the development of successful strategies to prevent such issues.

#### **Cultural and Religious Influences:**

In any community, cultural and religious factors influence the mental well-being of individuals. In Gilgit Baltistan, where cultural diversity and religious traditions are deeply ingrained in daily life, it is important to examine how cultural symbols, societal expectations, and religious beliefs can contribute to the increasing rates of suicide. Understanding the complexities of these influences is crucial in developing interventions that are sensitive to the cultural context. The perception of mental health in Gilgit Baltistan is influenced by cultural norms, which can impact help-seeking behaviors and contribute to the stigma surrounding mental health. Additionally, while religious beliefs may provide comfort to some individuals, they can also exacerbate the challenges faced by those in crisis. By exploring the interaction between culture and religion, this analysis aims to shed light on potential approaches for interventions that are tailored to the specific needs of the community.

**Mental Health Infrastructure and Awareness:**

The importance of mental health services cannot be overstated when it comes to addressing and preventing suicides. In this section, we will study examine the state of mental health infrastructure in Gilgit Baltistan, they focusing on the availability of services, awareness programs, and the symbol associated with mental health. It is important to assess these factors in order to highlight the pressing need for stronger support growing crisis.

**Cultural explanation:**

Cultural theories are based on measure factors, such as how role expectations and beliefs are learned. These include shifting perceptions of alcoholism and gender roles, as well as media messages that may glamorize and role-model suicide, leading to a rise in suicide rates in the community..(Jehan, Batool, Hayat, & Hussain, 2023)

**Methodology Materials and Methods**

The research methodology outlines the approach you intend to employ in conducting research.

**Study Area**

Hunza is a valley surrounded by mountains in Pakistan's Gilgit Baltistan region. The main city is Aliabad, and the close mountains and beautiful locality can be seen from Altit Fort and Baltit Fort. The local populace is well-read and peaceful. There are some villages with a 100% literacy rate, and the overall rate is about 95%. The data was collection from the areas of Karimabad Hunza KIU internationally University.

**Research Design**

A research design refers to the frame-up of conditions for gathering and analyzing data, with the aim of balancing relevance to the research objective and efficiency in the process. Quantitative research design will be used.

**Research Instrument**

The data was collected through a self-structured questionnaire. closed-ended questions will be formulated for the questionnaire, which will be distributed among youth of Hunza.

**Reliability**

The reliability was checked by filling up the Performs from 25 respondents. To find out the reliability, the researcher was analyze the data in SPSS and value will be calculated. Cronbach's alpha can be used to evaluate the reliability

**Validity**

Validity was determined through different expert's opinion. The suggested change will be addressed and research tool will be modified.

**Population**

A population refers to the total count of individuals residing in a specific location. This will involve the students of Karakorum International University Hunza.

**Sampling Technique**

Simple Random sampling technique was used in this study.

**Data Collection**

Data collection was proceed by means of Questionnaire surveys.

**Data Analysis**

The researcher was collect data through questionnaires. Quantitative data was undergo analysis using SPSS and a summary of findings will be presented, and recommendations will be outlined in the concluding chapter.

**Table: the table first impact of suicidal behavior**

STATEMENTS	F (%)	F (%)	F(%)	F(%)	F(%)	Mean	SD
I believe suicidal behavior is a significant concern in our community	10(7.4)	9(6.7)	14(10.4)	46(34.1)	21(15.6)	3.59	1.207

I have personally known someone who has attempted suicide.	19(14.4)	22(16.4)	14(10.4)	28(20.7)	17(12.6)	3.02	1.4
Increased stress levels significantly contribute to suicidal thoughts.	5(3.7)	9(6.7)	12(8.9)	48(35.6)	41(30.4)	3.97	1.084
Seeking help for feelings of hopelessness is important.	4(3.0)	10(7.4)	12(8.9)	51(37.8)	25(19.5)	3.43	0.909
Media exposure to suicide influences people's behavior.	6(4.4)	5(3.7)	21(15.6)	54(40.0)	14(10.4)	3.65	0.989
Openly discussing suicide can help to prevent it.	10(7.4)	7(5.2)	19(14.1)	51(37.8)	20(14.8)	3.6	1.148
There is sufficient awareness about suicide prevention in our community.	13(9.6)	29(21.5)	18(13.3)	29(21.5)	12(8.9)	2.98	1.257
Access to mental health resources can effectively prevent suicides.	10(7.4)	24(17.8)	40(29.6)	26(19.3)	5(3.7)	2.92	1.026

In sample terms, the survey results are summarized as follows:

Suicidal behavior is seen by many (34.1%) as a serious concern in their community. Notably, 20.7% of respondents personally know someone who has made an attempt at suicide. Suicidal thoughts are identified as being significantly influenced by stress levels (35.6%) and media exposure to suicide (40.0%). The majority of people (37.8%) believe that talking openly about suicide (37.8%) can help prevent suicide and that getting help for depressive symptoms is important. But only 21.5% of respondents think their community is sufficiently aware of suicide prevention. For 29.6% of respondents, having access to mental health resources is essential to preventing suicide. The survey underscores the significance of tackling suicidal conduct, stress, and media exposure. It also underscores the necessity of transparent dialogues, consciousness, and availability of mental health services.

2. Table: Impact Of Social Factors On Suicidal Behavior

Social Factors	F(%)	F(%)	F(%)	F(%)	F(%)	Mean	SD
I feel socially connected to others in my community	6(4.4)	10(7.4)	22(16.3)	54(40.0)	11(8.1)	3.52	1.008
I have experienced bullying or discrimination	7(5.2)	22(16.3)	23(17.0)	42(31.1)	10(7.2)	3.53	1.104
Peer pressure significantly contributes to Suicidal behavior	9(6.7)	12(8.9)	25(18.5)	46(34.1)	15(11.1)	3.43	1.125
Family support can mitigate the risk of suicide	3(2.2)	9(6.7)	15(11.1)	38(28.1)	35(25.9)	3.93	1.066
I feel accepted and included in social activities.	11(8.1)	7(5.2)	15(11.1)	56(41.5)	17(12.6)	3.58	1.154
Community support system effectively address social isolation	7(6.1)	10(8.7)	25(21.7)	54(47.0)	2(1.7)	3.35	0.954
Societal expectation contribute to stress	11(9.6)	10(8.7)	25(21.7)	50(43.5)	12(10.4)	3.39	1.126
There is enough emphasis on mental health education in school	11(9.6)	9(7.8)	25(21.7)	53(46.1)	11(9.6)	3,40	1.107

The findings of a research regarding social variables linked to suicidal behavior are displayed in this table. To put the findings simply, here's a summary:

While 40% of people feel that they are a part of their community, 8.1% do not.

Roughly one-third of individuals have encountered discrimination or bullying.

Peer pressure is a factor in suicide behavior, according to a large percentage of people (34.1%).

Family support can help prevent suicide, according to the majority of people (28.1%). Although

a large percentage of people (41.5%) feel included in social activities, 8.1 percent don't. There is a 47% population that believes social isolation can be addressed by community support systems. Four out of five respondents (43.5%) believe that stress is caused by societal expectations. In schools, 46% of people believe that mental health education is adequate. The significance of social ties, encouragement, and education in averting suicide behavior is underscored by these findings. The response option selection percentage for each respondent is indicated by the numbers in parenthesis. The mean and standard deviation of each statement are displayed in the "Mean" and "SD" column.

**3. Table: Environmental Factors**

STATEMENTS	F%	F%	F%	F%	F%	Mean	SD
I feel safe in my neighborhood	13(9.6)	11(8.1)	21(15.6)	40(29.6)	17(12.6)	3.36	1.249
Access to green spaces positively impacts mental health.	34(25.2)	6(4.4)	17(12.6)	42(31.1)	12(8.9)	2.93	1.45
I have witnessed violence or conflict in my community.	7(5.2)	14(10.4)	22(16.3)	43(31.9)	12(8.9)	3.4	1.101
Economic instability contributes to mental health issues.	5(3.7)	6(4.4)	16(11.9)	50(37.0)	24(17.8)	3.81	1.027
I have access to affordable healthcare services.	7(5.2)	12(8.9)	26(19.3)	47(34.8)	8(5.9)	3.37	1.031
Urbanization has negatively affected community support networks	10(7.4)	17(12.6)	29(21.5)	42(31.1)	8(5.9)	3.2	1.099
Environmental stressors, like pollution, affect mental health.	9(6.7)	22(16.3)	35(25.9)	24(17.8)	9(6.7)	3.02	1.097
Efforts to promote community well-being and mental health are noticeable.	5(3.7)	10(7.4)	21(15.6)	50(37.0)	14(10.4)	3.58	1.017

TABLE 3 Shows that, The environmental factors are those that have an impact on people's mental health because of their surroundings. In contrast to 12.6% of respondents, some people (29.6%) feel safe where they live. Parks and other green areas are thought to improve mental health by the majority of people (31.1%). However, many have witnessed conflict or violence (31.9%) in their community, which is detrimental to mental health. Mental health problems are also a result of poverty (34.8%) and financial concerns (37.0%). Along with pollution (25.9%), living in a city (31.1%) has eroded community support. Efforts to enhance mental health and community well-being are evident despite these challenges.

Despite these issues, initiatives to enhance mental health and community well-being are evident.

**4. Table impact of cultural factors in suicidal behaviour**

STATEMENTS	F%	F%	F%	F5	F%	Mean	SD
Cultural values influence attitudes towards Suicidal behavior	6(4.4)	12(8.9)	29(21.5)	44(32.6)	9(6.7)	3.38	1.013
Cultural restrictions surround discussions on Suicidal behavior	14(10.4)	34(25.2)	32(23.7)	20(14.8)	7(5.2)	2.74	1.11
Traditional healing practices are effective in Suicidal behavior	7(5.2)	10(7.4)	36(26.7)	46(34.1)	14(10.4)	3.34	1.026
Cultural norms affect help seeking behaviors.	10(7.4)	8(5.9)	26(19.6)	48(35.6)	8(5.9)	3.36	1.078
Cultural rituals or ceremonies promote mental well-being.	8(5.9)	8(5.9)	26(19.3)	47(34.8)	13(9.6)	3.48	1.069

Intergenerational differences exist in attitudes towards Suicidal behavior	6(4.4)	7(5.2)	36(26.7)	41(30.4)	14(10.4)	3.48	1.005
Cultural identity plays a role in coping with stress.	6(4.4)	8(5.9)	30(22.2)	44(32.6)	8(5.9)	3.42	0.981

Table 4 shows that, Culture affects how people think about and deal with suicidal behavior. Cultural values and norms influence attitudes towards suicide (32.6%), and cultural restrictions can limit discussions about it (25.2%). Traditional healing practices can be effective (34.1%), and cultural norms affect seeking help (35.6%). Cultural rituals and ceremonies can promote mental well-being (34.8%), and cultural identity plays a role in coping with stress (32.6%). Inter generational differences exist in attitudes towards suicide (30.4%). In short, culture plays a significant role in shaping attitudes and behaviors related to suicidal behavior, mental health, and well-being.

5.Table: Impact of psychological factors on suicidal behaviour :

STATEMENTS	F%	F%	F%	F%	F%	Mean	SD
I have received treatment for a mental health condition.	10(8.7)	11(9.6)	22(19.1)	44(38.3)	16(13.9)	3.44	1.169
Unresolved trauma contributes to suicidal thoughts.	19(16.5)	40(34.8)	17(14.8)	23(20.0)	3(2.6)	2.52	1.123
I feel comfortable expressing my emotions to others.	5(4.3)	7(6.1)	21(18.3)	48(41.7)	20(17.4)	3.7	1.025
I often feel overwhelmed by stress or anxiety.	22(19.1)	5(4.3)	25(21.7)	36(31.3)	16(13.9)	3.18	1.356
I feel comfortable expressing my emotions to others.	6(5.2)	15(13.0)	26(22.6)	40(34.8)	12(10.4)	3.37	1.075
Societal expectations impact self-esteem and mental health.	22(19.1)	3(2.6)	25(21.7)	36(31.3)	16(13.9)	3.21	1.36

The impact of psychological factors of the table; Many people (38.3%) have received treatment for a mental health condition. Unresolved trauma (34.8%) can lead to suicidal thoughts. Some people (41.7%) feel comfortable expressing their emotions, while others (31.3%) often feel overwhelmed by stress or anxiety. Societal expectations (31.3%) can affect self-esteem and mental health. many people have experienced mental health issues, and unresolved trauma can contribute to suicidal thoughts. Expressing emotions and managing stress and anxiety are important for mental well-being, and societal

**Impact Of Social Factors On Suicidal Behavior**

**Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.990 <sup>a</sup>	.980	.979	1.125

a. Predictors: (Constant), behaviour

**Coefficients<sup>a</sup>**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.595	.428		1.390	.169
	behaviour	1.180	.020	.990	59.917	.000

a. Dependent Variable: Social

Table first shown summary of the coefficients:

The coefficients table presents answer of a regression analysis examining the relation between a dependent variable and a predictor variable labeled "behaviour." The analysis output significant findings. The intercept term, representing the expected value of the dependent irregular when inform variable is zero, was estimated at 0.595 with a standard error of 0.428.



However, the associated t-value of 1.390 and p-value of 0.169 indicate that this intercept term is not statistically significant. In contrast, the coefficient for the behavior variable was found to be 1.180, with a standard error of 0.020. This suggests that for every one-unit increase in behavior, the dependent variable is expected to increase by 1.180 units. Moreover, the remarkably high t-value of 59.917 and the extremely low p-value of 0.000 indicate that this state is data point statistically evidentiary. The standardized coefficient, or beta, for behavior was calculated at 0.990, demonstrating a robust positive relationship between behavior and the dependent variable in standard deviation units. These findings underscore the significance of behavior as a predictor, suggesting that higher levels of behavior correspond to higher values of the dependent variable. Thus, behavior emerges as a crucial factor to consider in understanding and potentially influencing the dependent variable. 1

**Table 2: Impact of environmental factors**

Model Summary					
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	
1	.988 <sup>a</sup>	.977	.977	.998	

a. Predictors: (Constant), Environmental

  

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized	t	Sig.
		B	Std. Error	Coefficients		
1	(Constant)	.613	.373		1.641	.105
	Environmental	.856	.015	.988	56.577	.000

a. Dependent Variable: behaviour

**TABLE 2:Environmental factors:**

The table presents the solution of a regression investigation study the relationship of Environmental factors and a interdependent variable labeled as "Behaviour." The analysis includes both unstandardized and standardized coefficients along with their associated statistics. The constant term (intercept) is reported as 0.613 with a standard error of 0.373, yielding a t-value of 1.641, which is not statistically significant at the accepted alpha level of 0.05. The coefficient for the Environmental variable is 0.856 with a standard error of 0.015. This coefficient signifies the change in the dependent variable for a one-unit change in the Environmental factor. The standardized coefficient (Beta) is reported as 0.988, indicating the property and way of the relation or Environmental factors and Behaviour after accounting for the scale of measurement. The t-value associated with the Environmental coefficient is 56.577, indicating a highly statistically significant relationship ( $p < 0.001$ ). This suggests that Environmental factors have a substantial influence on Behaviour, as evidenced by the large coefficient and its significance .000.

**Impact of cultural factors:**

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.909 <sup>a</sup>	.826	.824	3.348

a. Predictors: (Constant), Environmental stressors, like pollution, affect mental health

  

Coefficients						
Model		Unstandardized Coefficients		Standardized	t	Sig.
		B	Std. Error	Coefficients		
1	(Constant)	.629	.611		1.030	.306
	Cultural	1.166	.026	.977	44.671	.000

Table 3: This table present the regression analysis furnishes insights into the relationship between the dependent variable, which has been specified, and the independent variable "Cultural." The regression model includes two main components: the constant (intercept) and the coefficient associated with the "Cultural" variable.

First with the constant, its value is calculation at 0.629 with a standard error of 0.611. The associated t-value is 1.030, yielding a p-value of 0.306, suggesting that the constant term lacks statistical significance at conventional levels (usually  $\alpha = 0.05$ ). In essence, this implies that when all independent variables, including "Cultural," are zero, the expected value of the dependent variable is around 0.629. the coefficient for "Cultural," its estimate stands at 1.166, indicating that for every unit increase in the "Cultural" variable, we expect the dependent variable to increase by 1.166 units, with all other variables held constant. The standard error for this coefficient is 0.026. Importantly, the standardized coefficient (Beta) for "Cultural" is calculated at 0.977, suggesting that "Cultural" holds considerable influence over the dependent variable compared to other variables in the model. This inference is reinforced by the substantially high t-value of 44.671, coupled with an extremely low p-value of 0.000, signifying that the coefficient for "Cultural" is highly statistically significant.

**Table 4: Impact of psychological factors on SB**

Model Summary						
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate		
1	.984 <sup>a</sup>	.967	.967	1.191		
a. Predictors: (Constant), Psychological						
Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.121	.437		2.563	.012
	Psychological	.971	.021	.984	47.185	.000
a. Dependent Variable: behaviour						

This table explain the results of a regression analysis work the association between dependent variable "behavior" and the independent variable "Psychological."

**Constant (Intercept):**

The constant term, estimated at 1.121, represents the expected value of the dependent variable "behavior" when the independent variable are not significant Psychological is zero. Its standard error is 0.437. The associated t-value of 2.563 and p-value of 0.012 indicate statistical significance at the 0.05 level, suggesting that even in the absence of psychological factors, behavior is expected to have a non-zero value.

**Psychological:**

The coefficient for the "Psychological" variable is 0.971. This coefficient suggests that for every unit increase in psychological factors, behavior is expected to increase by approximately 0.971 units, while holding all other variables constant. The standard error associated with this coefficient is 0.021. The standardized coefficient (Beta) for "Psychological" is 0.984, indicating that psychological factors have a essential impact on behavior relative to other variables in the model. With a high t-value of 47.185 and a p-value of 0.000, the coefficient for "Psychological" is highly statistically significant.

**Interpretation:** The regression analysis reveals a significant positive state between the dependent variable "behavior" and the independent variable "Psychological." coefficient for "Psychological" suggests that variations in psychological factors are associated with significant changes in behavior. Specifically, for every unit increase in psychological factors, behavior is anticipated to increase by approximately 0.971 units, holding all other variables constant. The high standardized coefficient (Beta) underscores the powerful role of psychological factors in explaining behavior relative to other variables in the model. the high t-value and low p-value confirm the statistical significance of the relationship between "Psychological" and "behavior." These findings underscore the importance of considering psychological factors when analyzing behavior. However, further research may be necessary to identify specific psychological constructs driving this relationship and to understand their implications in various contexts.

**Findings of the Research**

1. The first objective was to find out the impact of social factors on suicidal behavior. This was

determined through SPSS regression analysis. The results showed that social factors have a significant impact on suicidal behavior. This indicates of aspects such as social connections, experiences of bullying, and discrimination play a role in influencing whether individuals consider or attempt suicide. The strength and nature of social interactions can either mitigate or compound of suicidal habit.

2. Second objective was to find out impact of cultural factors on suicidal behaviour it was determined through SPSS, specially regression the results shown that there is significant impact of cultural factor on suicidal behaviour cultural values, traditional healing practices, and the tension between modern and traditional norms are crucial in shaping individuals' attitudes towards suicide. The cultural context can either provide a protective buffer against suicidal thoughts or contribute to them, depending on how well individuals can navigate and integrate these cultural expectations.
3. The third objective was to assess the impact of environmental factors on suicidal behavior. This was analyzed using SPSS regression techniques, and the results showed that environmental factors significantly influence suicidal behavior. Factors such as neighborhood safety and access to green spaces are important aspects of suicidal practices. A safe and helpful environment can reduce the likelihood of suicidal behavior, while a lack of such factors can increase stress and feelings of hopelessness.
4. Fourth objective was to find out psychological factors on suicidal behaviour it was determined through SPSS, specially regression the results shown that there is significant impact of psychological factors on suicidal behaviour.

#### **Recommendations**

The research Based on the comprehensive study conducted on the variables influencing suicidal behavior in Gilgit-Baltistan's Hunza Valley, a series of targeted recommendation can be developed to effectively address the problem.

1. **Improved Social Support Networks:** Create local support groups and networks to give people a group meeting to talk about their experiences and emotions, which will lessen feelings of loneliness and help poor people.

2. **Family Counseling Services:** To enhance relationships and communication within families and friends counseling services that address issues like discrimination between sons and daughters and high expectations.

3. **Cultural Sensitivity Training:** To ensure that mental health professionals provide culturally sensitive care, offer training programs that help them comprehend and honor the traditional customs and cultural values of the Hunza community.

4. **Mental Health Awareness Campaigns:** Make the community aware of mental health issues, lessen the stigma associated with them, and encourage people to get help and awareness about community.

5. **Strengthening Parent-Teacher Associations:** This will help parents stay informed about their children's mental health and support them when they face challenges in the classroom. The teacher share the information about their children to parents.

6. **Improvements in Socioeconomic:**

Workplace Possibilities: Establish programs to increase workplace availability, increase financial strain, and give people a stable, goal-directed life.

7. **Programs for Vocational Training:** Provide youth with programs for vocational training that will improve their employ ability and self-sufficiency.

8. **Involvement in the Community**

Community-Based Monitoring Systems: Set up community-based monitoring programs to recognize and assist those who may be at risk of suicide by offering prompt assistance and intervention.

9. **Advocacy and Policy**

Government Support Programs: the government promote mental health policies and programs that are funded by the government and that provide to the particular needs of the Hunza community.

10. **promote positive cultural practices:** Support community mental health by encouraging and promoting traditional healing techniques as well as positive cultural practices.

These suggestions seek to address suicidal behavior in the Hunza Valley in a comprehensive and inclusive manner, taking into consideration the many influences of social, cultural, environmental, and psychological factors. By putting these strategies into practice, the Hunza community's mental health can be improved by reducing risk factors and providing the required support.

#### **Conclusion:**

According to a study done in Gilgit Baltistan's Hunza Valley, suicidal behavior is complex and influenced by a variety of social, cultural, environmental, and psychological factors. A fundamental proportion of the population in Karimabad, Hunza, according to data from 115 respondents, considers suicidal behavior to be a serious problem. The mental health of individuals is impacted by social connections, experiences of bullying, and discrimination. Environmental elements like neighborhood safety and access to green spaces affect the likelihood of suicidal behavior, while cultural values and traditional healing methods also shape attitudes toward suicide. The prevalence of suicidal thoughts is largely determined by psychological factors, the Hunza people are emotional not strong and availability of mental health services and the capacity for emotional expression a. The results emphasize how important it is to have a thorough, culturally aware approach to suicide prevention that takes into account these various factors. Social support networks should be strengthened, family counseling services should be improved, mental health awareness should be raised, and socioeconomic opportunities should be improved. It is possible to lessen the basic causes of suicidal behavior and create a supportive atmosphere that encourages mental health among the Hunza community by putting these focused interventions into practice.

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