



# “I just couldn’t step out of the circle. I was trapped”: Patterns of endurance and distress in Chinese-Canadian women with a history of suicidal behaviour



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## ABSTRACT

**Rationale:** Recent studies have highlighted higher rates of suicidal ideation and behaviour and associated themes of gender role stress in Chinese women residing in North America. However, qualitative studies, which privilege their voices in the discourse of suicide prevention and provide insight into their experiences, are lacking.

**Objective:** To gain an understanding of the life histories, patterns of distress and constructions of suicide of Chinese-Canadian women with a history of suicidal behaviour.

**Methods:** Ten women were recruited from four mental health programs in Toronto, Canada and participated in qualitative interviewing and analysis informed by constructivist grounded theory.

**Results:** Chinese-Canadian women describe experiencing “stress” or “pressure” leading to the exacerbation of depressive symptoms. Stress and pressure are managed through a coping strategy of endurance, informed by the cultural conception of “ren”. Cultural influences contribute to the manifestation of stress and pressure as somatic symptoms and sleeplessness. Finally, the women describe feeling unable to endure through worsening distress, reaching a “breaking point”; suicidal behaviour is constructed as a strategy to disrupt this cycle.

**Conclusion:** This study challenges the binary notion that suicidal behaviour is either a consequence of mental illness or a reaction to interpersonal stress. Rather, the women describe an ingrained pattern of enduring through psychosocial problems without acknowledging worsening anxiety, depressive and physical symptoms. The pattern of endurance also prevents early treatment of these difficulties, resulting in the intensification of symptoms until a breaking point is reached. Knowledge of these patterns and coping strategies can allow for earlier identification and intervention for women at risk to prevent the worsening of distress leading to suicidal thoughts and behaviour.

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## 1. Introduction

Suicide and suicide-related behaviour are complex phenomena that can be studied from clinical, psychological, biological, social and cultural perspectives. Cultural constructions of gender can inform the ways in which patterns of suicidal behaviour can be understood. In Canada, women die by suicide at an age-standardized rate of approximately 5.3/100,000 while men die at a rate of 17.9/100,000. By comparison, the suicide rate for in China is 9.8/100,000 overall, with the male rate slightly higher than the female rate (Navaneelan, 2012; Wang, Chan & Yip, 2014). Cultural conceptions of gender and suicide may play a role in the patterns seen in Canada and China. In Western countries, including Canada, suicide is seen as a masculine act and “failing at suicide” is feminine; in China, suicide is considered to be a feminine “act of the powerless” and males exhibiting suicidal behaviour are seen as effeminate or weak (Canetto, 1997, 2008, p. 259; Cleary, 2012; Range and Leach, 1998).

Researchers have suggested that Chinese women have lower social status than men, leading to restricted economic options and gender role conflict with kin (Aubert et al., 2004; Meng, 2002; Nock et al., 2008; Zhang and Xu, 2007). He and Lester (1998) suggest that for some women in China, suicide is not considered a mental health issue but rather a strategy available to powerless people for influencing the behaviour of others, or for a powerless individual to exact revenge upon those who have made their lives intolerable. Pearson et al., (2002) characterized suicidal behaviour in young rural women by high levels of impulsivity, little effort to seclude themselves and low rates of mental illness, including depression. Traditional Chinese cultural values may put women at a disadvantage because in family disputes or crisis, women are typically blamed (Zhang and Xu, 2007). One recent study examined the role of psychological strain related to a conflict between traditional Confucian values and modern values of gender equality in rural Chinese youth who have died by suicide, reporting that those who experienced value conflicts between Confucian gender role and gender egalitarianism scored significantly higher on depression scores than those who did not experience this conflict. (Zhang and Zhao, 2013). The Chinese Confucian value of “ren”, consisting of harmony, self-discipline and endurance, has been explored as a potential risk factor for suicidal behaviour in Chinese women; in one case-control psychological study in rural China, a belief in Confucianism was found to be protective for men but not for women with respect to suicide (Zhang, 2013). Although Canadian data are unavailable, in the United States, Asian-American women aged 15–24 years have the second highest rate of suicide of any ethnic group, and Asian-American women over 65 have the highest rate of female suicide across all racial/ethnic groups (Jacobs et al., 1999). Asian-American women born in the United States have a higher lifetime rate of suicidal ideation than the general population (Duldulao et al., 2010).

Recent studies have highlighted themes of gender role stress of Asian born women and women of Asian descent residing in North America who have experienced suicidal ideation and behaviour, including conflict between traditional and Western female roles (Chung, 2004; Noh, 2002). Irene Chung posited that Asian American women resort to suicidal behaviour to express their emotional distress rather than engaging in externalizing behaviour such as substance use, and that their distress did not manifest in functional decline or seeking help from family, friends or mental health services (Chung, 2004).

Familial obligations and stresses related to gender have been described in the accounts of women of Chinese background living in North America. In a study of Asian-American female college students with a history of suicidal behaviour, the expectation that

women should take care of parents, succeed academically and sacrifice their own interests to show love was noted as a significant stressor (Chung, 2004). These pressures can be understood through the lens of filial piety. Filial piety, central to Confucian role ethics, is derived from the view that one's life is the continuation of one's parents' lives (Hwang, 1999). It describes an attitude of devotion, obedience and care towards ones' parents and ancestors (Chen and Wong, 2014; Liu, 2013). This value system prioritizes family harmony over personal goals and stresses the importance of self-sacrifice, and the conflict between a women's own desires and wishes and those of her parents has been identified as a stressor by Asian-American women who have a history of suicidal behaviour (Choi et al., 2008; Chung, 2004).

Several studies have linked the “Model Minority” myth to suicidal behaviour, particularly in Chinese-American women (Choi et al., 2008; Chung, 2004; Noh, 2002). This myth ascribes a female identity to Chinese and Asian-American women characterized by compliance, a strong work ethic, discipline, and leading a stable and promising life (Chung, 2004). A perceived failure of women to live up to the expectations of family and culture, as well as the ways in which they are perceived by the dominant culture, can lead to stress within the family, psychological distress, and impact help seeking behaviour (Chung, 2004).

A qualitative analysis of the impact of social and cultural conceptions of gender on the meanings and experiences of suicidal behaviour in Chinese-Canadian women is needed for several reasons. While the impact of gender role stress has been postulated as a risk factor for suicide, the need for further evidence, specifically an understanding and appreciation of their experiences, has been stressed in the literature. While studies of suicide in women of Asian descent in North America often recognize “psychosocial stressors” as a risk factor, empirical studies, specifically from the perspectives of the women themselves, are scarce (Noh, 2007). Researchers have suggested that further studies are needed to address the impact of social stress and inequality on Chinese women and the lack of social and economic support to manage this stress (Pearson and Liu, 2002; Pearson et al., 2002). Qualitative ethnographic studies have also been recommended in order to appreciate the complex experiences of ethnic minorities who have experienced suicidal ideation and behaviour (Joe et al., 2008). Integrating cross-cultural research with well-known risk and protective factors can increase the understanding of how ethnicity, culture and social factors mediate the risk of suicide (Range and Leach, 1998; van Bergen et al., 2012; Wong et al., 2011). Qualitative and mixed-methods studies relating to suicide and suicidal behaviour have been undertaken to explore the experiences and inform the care of several populations, but no study has explored the experiences of women with a history of suicidal behaviour who have immigrated from China to another country (Adinkrah, 2012; Cleary, 2012; Lakeman and FitzGerald, 2008; McAndrew and Warne, 2010; Van Bergen et al., 2012; Zayas et al., 2010). An accurate depiction of community perspectives is crucial in the development of appropriate and effective screening, service provision, and suicide prevention (Hicks and Bhugra, 2003).

This study explores the experiences, stressors and beliefs of Chinese-born women living in Canada with a history of suicidal behaviour, and the impact of gender as a social and cultural construction on their experiences, including self-image, relationships, ways of coping, and the communication of distress. Through qualitative interviewing and analysis, the study aids in the understanding of the ways in which these women construct their meanings and experiences of gender, culture and suicidal behaviour through their interactions with their families, communities and social structures.

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