

**The Dark Faces of Poverty, Patriarchal Oppression, and Social Change:  
Female Suicides in Batman, Turkey**

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**Abstract**

The paper first discusses the traditional theories of suicide and then reports the findings of an exploratory study of suicides and attempted suicides in Batman, Turkey. In the year 2000, many more women than men killed themselves in Batman. Of the thirty-one suicides, twenty-two (71%) were women, as were eighty-five (86%) of the ninety-nine attempted suicides. Effects of Batman's anomic urbanization, ensuing poverty, and patriarchal social conditions are discussed. It is concluded that the traditional theories of suicide are not capable of accounting for high rates of female suicides, and the feminist literature on patriarchy has a lot to offer for understanding and suggesting changes to remedy self-destruction proclivities of girls/women.

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## **THE DARK FACES OF POVERTY, PATRIARCHAL OPPRESSION, AND SOCIAL CHANGE: FEMALE SUICIDES IN BATMAN, TURKEY**

Suicide is known in all human societies. However, most societies have approached suicide as a personal pathology or a sinful act rather than as a social, structural, or genderized phenomenon. The first sociologist who systematically studied suicide as a social problem was Durkheim (1951[1887]). He claimed that suicide resulted from social turmoil and change. Moreover, Durkheim's interest was in understanding why men kill themselves, although he recognized that women attempt suicide more frequently than men. Since Durkheim's original efforts, the sociological interest in the study of suicide has declined, maybe with the exception of studies pertaining to aboriginal youth and the elderly (Chandler & Lalonde 1998; Denov & Campbell 2002; LaFromboise & Howard-Pitney 1995).

We believe that there are at least two noteworthy changes that again deem suicide an important area for sociological study. The first is that suicide rates, especially in highly developed and newly developing parts of the world, may be on the rise (Schmidtke et al. 1999). According to World Health Organization (WHO 2000) reports, approximately one million people in the world die as a result of suicide annually. In fact, suicide is reported within the top ten causes of death for the whole world, with a rate of sixteen suicides per 100,000 population. For younger groups (ages fifteen to twenty-four), suicide ranks as one of the top five causes of death (WHO 2000). Second, suicide rates among women are surpassing those of men in certain regions, including in China and in the Batman region in southeastern Turkey (Erkan 2001). The latter is the focus of our analysis.

In the current paper, we will first discuss suicide rates across the world. Then, we will focus on the unique circumstances surrounding southeastern Turkey and report findings from interviews with guardians of thirty-one suicide victims and ninety-nine men and women who attempted suicide in 2000. We will argue that although the economic hardships are similar for men and women, the patriarchal forces in women's lives make the latter more vulnerable to suicide in this region. Thus, we will review the existing theoretical models of suicide and attempt to expand these models through feminist insights. We will end by suggesting ways that traditional theories of suicide can be revised through the integration of class and gender into the analysis. Such an improved approach also will suggest new ways to reduce or reverse the undesirable trend of escalating female suicides.

### **Review of the Literature: Facts about Suicide Rates**

As mentioned, approximately one million people take their own lives each year. In addition, suicide rates have increased 60% over the last forty-five years (WHO 2000). Said another way, every forty seconds someone in the world will commit suicide, and every three seconds someone will attempt suicide.

Table 1: Suicide Rates for Men and Women in Selected Countries in 2002

Country	Male Rates/100,000	Female Rates/100,000
<b>Selected Countries:</b>		
Australia	21.2	5.1
Austria	29.3	10.4
Belgium	31.3	11.7
Canada	19.6	5.1
Finland	37.9	10.6
France	27.1	9.2
Germany	20.2	7.3
USA	18.6	4.4
Turkey	3.5	2.4
<b>Republics of Former USSR:</b>		
Belarus	61.1	10.0
Estonia	56.0	12.1
Latvia	56.6	11.9
Lithuania	75.6	16.1
Russia	62.6	11.6
Ukraine	52.1	10.0
Slovenia	47.3	13.4
<b>Non-Normative Gender Rates:</b>		
China	14.3	17.9
Batman, Turkey	4.0	9.9

As Table I shows, developed nations have high suicide rates (WHO 2002). Moreover, men complete suicides three or four times more often than women. This universal pattern has two notable exceptions. First, suicide rates in the newly formed republics of the former Soviet Union have surpassed the rates of even the most developed countries. In the former Soviet Block countries, men are about five times more likely to kill themselves than women. The second notable deviation is China, where female suicide rates are a few percentage points higher than those for men (14.3 vs. 17.9). However, a more striking pattern exists in the Batman region of Turkey, where female suicide rates are nearly two and a half times greater than those of males.

As a developing country, Turkey has much lower suicide rates than most developed countries (Icli 1993; Schmidtke et al. 1999). Although Turkey is a secular republic, the vast majority of its population is Muslim (99%). Contrary to western misconceptions and the ongoing suicidal violence in the Middle East, Islam strongly condemns taking one's own life (Eskin 1992, 1995; Ibrahim 1995; Kamal & Loewenthal 2002; Koçturk 1992). Thus, it is not surprising that Turkey's suicide rates are only a fraction of its western counterparts, although Turkish rates have risen slightly across time (Şahin, Batigün, & Şahin 1998). In 1998, male and female rates were 3.5 vs. 2.4 per 100,000 population, which places Turkey among countries with low suicide rates (WHO 2000). In the Batman region, however, a problematic anomaly exists. In 2000, male and female suicide rates for Batman were 4 and 9.9 per 100,000 population respectively, and young girls/women between fifteen and twenty-four years old committed the highest proportion of these suicides (Erkan 2001). Females were also much more likely to attempt suicide.

## **Facts about Batman**

Batman's history dates back to 546 BC (Batman 1998). Currently, Batman is a rural region surrounding Batman City. It is located in socioeconomically deprived southeastern Turkey, close to the Iraqi and Syrian borders. According to the 1935 unofficial census, Batman's total population was 319 (Batman 1998). In 1945, Batman had ninety households, with a total population of 443 (see Erkan 2001). Amazingly, in slightly over fifty years, Batman City's population has grown by more than 2325% to 427,000 (Akyildirim 2001). This growth is the by-product of two developments. First, the discovery of modest<sup>1</sup> oil reserves in the area has attracted surplus rural populations into the Batman center. Scattered farming and herding communities from dry and inhospitable lands have migrated to the city, hoping to tap into the oil wealth. Sadly, most have joined the army of the unemployed, since oil profits have been marginal and concentrated in the hands of a few. The region lacks peace and comfort due to this accelerated rate of urbanization and the ensuing crisis in municipal services, like education and healthcare. For example, according to 1995 Turkish census results, the official unemployment rate in Batman is 58% (Erkan 2001), and the literacy rate is only 69% (Batman 1998). Within its 282 schools, 61% of students are male (Batman 1998). After elementary education, enrollment numbers for the two sexes drastically diverge, with males far more likely to attend school than females. Higher education remains a dream for the vast majority in Batman, especially girls (Batman 1998; Erkan 2001).

Heightened illegal activities of outlawed groups, including the Kurdistan Workers Party (PKK) and the Hezbollah, also have spurred growth in Batman. The region's remoteness has served as a convenient cover for the divisive, illegal, and even terrorist activities of these groups. PKK is an internationally outlawed, violent terrorist group, terrorizing both the peaceful Kurds and the Turks in the region. The Hezbollah is an outlawed, ultra-religious network carrying out a long list of terrorist activities in the Middle East. Both groups have exploited the general economic and social insecurity of people, creating dangerous ethnic and religious fissures. One outcome of these developments has been an unprecedented internal migration. Another outcome has been bloodshed outside the city borders (Akyildirim 2001).

Currently, Batman region has one of Turkey's lowest life expectancies, at 62.2 years for women and 58.0 years for men. Corresponding expectancies for Turkey as a whole are 71.5 and 66.9 (Akyildirim 2001). At 68.9 per 1,000 live births, infant mortality rates in Batman region are among the worst in Turkey, which overall averages 35.3 per 1,000 live births (Akyildirim 2001). Female children's fate may be worse. For example, Batman's demographic data reveal that in the zero- to four-year-old category, there are 38,400 male but only 34,000 female children recorded (Akyildirim 2001), suggesting that female children may be being aborted more frequently, not as well nourished as boys, or not given access to healthcare or emergency services (Miller 2001). Given these conditions, Batman region can serve as a textbook example of anomie and the social turmoil it engenders, particularly for men. However, we need to probe further in order to gain insights into why nearly two and a half times more Batman women than men are killing themselves.

## **Traditional Theories of Suicide and Gendered Implications**

Due to suicide's emotionally laden nature, identifying the causal factors behind it has been difficult and controversial. Although many competing theoretical approaches exist, the most

common can be classified as intrapersonal, social/sociological, criminological, and biomedical in nature. Since our interest is on the structural and gendered differences rather than biomedical and criminogenic aspects, we are going to focus on the first two types.

One of the most influential theorists of the 20th century, Sigmund Freud (1963) approached suicide as an intrapersonal pathology. For Freud, suicide was one possible outcome of severe manic depression and the ambivalence of being caught between feelings of intense love and intense hate. Freud (1963) saw suicide as an outcome of the unresolved Oedipal conflict and the extremely fearful feelings about one's own sexuality that may ensue. Some men, Freud claimed, were not able to resolve the tug-of-war between the raw and animalistic part of their personality (ID) and their moral and ethical selves (SUPEREGO). Such men, he reasoned, were not capable of developing a functional, rational personality structure (EGO). It is in these cases, he argued, that the death-wish overwhelmed them, catapulting them toward self-destruction (Geçtan 1988; Greenwald 1959; Kağıtçıbaşı 1983; also see Taylor 1954, Ch. 1 for "thanatos"). According to Freud, then, suicide is uniquely personal and is a product of unresolved conflicts among the subconscious, semiconscious, and conscious components of personality.

More current intrapersonal theories of suicide employ "psychological autopsy" methods, which trace how certain life events and personality characteristics trigger suicidal tendencies (Vijayakumar & Rajkumar 1999). Mood disorders, adjustment disorders, early onset of alcoholism, depression, and schizophrenia are identified as the culprits behind self-destructive behavior (Vijayakumar & Rajkumar 1999). Almost none of these orientations are given gender-based explanations. Like Freud, psychological autopsy methods focus on intrapersonal trait analysis and pathology.

In contrast, macro theories focus on the link between social and structural determinants of suicide. In his seminal work entitled *Suicide*, Durkheim (1951[1887]) boldly asserts that anomie causes suicide by creating powerlessness, meaninglessness, normlessness, and isolation. Although Durkheim's theory was not centered on economic conditions of the society per se, his meticulously calculated statistical correlations between absolute poverty that arose in highly uncertain economic times in Vienna (in 1873), Frankfurt (between 1872-1874), and Paris (in 1882), and the corresponding rise in suicide rates attest to the power of economic forces in shaping suicidal behavior (Durkheim 1951[1887]).

Durkheim (1951[1887]) categorized suicides into: egoistic, altruistic, and anomic types.<sup>2</sup> The first, he reasoned, is a product of loose ties between individuals and the social groups to which they belong. In altruistic suicides, an extraordinary level of solidarity was seen to diminish individuality and freedom of choice and to replace them with the decision-making power of the group. Durkheim used suicides in cults and armies as examples of the altruistic type.<sup>3</sup>

The third category, anomic suicide, is the jewel of Durkheim's theory. This type was seen to rise during times of change and upheaval. Abrupt social change, Durkheim argued, reduces the efficacy that individuals feel and increases their perceived helplessness.<sup>4</sup> Such a change was seen to create extreme poverty for many and riches for a few. Yet, Durkheim (1951[1887]) took pains to show that the cause of suicides was not poverty itself, but the anomie (powerlessness, normlessness, isolation, hopelessness) that the social conditions unleashed.

In Marx, the “alienation” concept replaces Durkheim’s “anomie” (Marx 1978a[1845]). Marx saw the roots of social troubles in industrialized societies (including self-directed troubles) within the exploitation of workers by the capitalists. During transition to industrialization, workers—and even those who cannot find work (the reserve army)—realize that their misery benefits the capitalist classes (Marx 1978b [1867]). If the adverse conditions were to persist, Marx theorized that the workers of the world would develop a class consciousness and overthrow their oppressors. Yet, he saw at least two hurdles against the rise in class consciousness: one, that workers would lose their resolve during the process of exploitation, and two, that they might become alienated from the products of their own labor, leading to alienation from their sense of self (Marx 1978a,c,d[1845]; e[1857]; Tolan 1983). In either case, their inability to deal with their exploitation would be self-destructive.

Thus, the link between socioeconomic conditions of work life and the subjective and personal reactions to it are more clearly intertwined in Marx’s alienation than they are in Durkheim’s anomie concept. Nevertheless, what neither theoretical orientation asks is whether women and men are affected by and/or react to the conditions of their lives in identical or different ways. Durkheim (1951[1887]) did observe lower suicide rates for women and used this information to dispel the myth that suicides have genetic or biological causes.<sup>5</sup> He also observed that married women were equally or more likely to commit suicide than unattached women, while married men were much less likely to take their own lives than their unattached counterparts. Yet, Durkheim (1951[1887]) advocated marriage as a protection against suicides, dismissing his own findings that marriage may increase the propensity of female suicides. Ironically, none of his gender-based observations led Durkheim to inquire about the differential reasons why women commit suicide. Likewise, in Marxian theory’s Don Quixoteian protectionism of laborers against the bourgeoisie, women’s unique needs as paid/unpaid workers were neglected.

So, if anything, what may differentiate or reverse the suicide rates for women in comparison to men? Freud’s intrapersonal pathology, Durkheim’s anomie, and Marx’s alienation fail to answer this question. We need to seek answers within the feminist literature (Canetto & Lester 1995). One source appropriate for the topic at hand is women’s work for pay and without pay. A second source is to review the workings of patriarchy, especially (but not exclusively) in less developed pockets of the world experiencing social change (Kandiyoti 1988; Kelly & Radford 1998). According to Ibrahim (1995), dramatic social change is strongly linked to suicidal behavior in women.

### **Women’s Paid and Unpaid Work Roles and Feminist Analysis of Patriarchal Stressors for Women**

In North America, women undertake the vast majority of housework and childcare (Armstrong & Armstrong 1984; Hamilton 1996; Hochschild 1989, 1997; Lupri 1991; Luxton 1980). Unlike most paid workers, homemakers lack well-defined work schedules, coffee-breaks, vacation times, sick-leaves. They are deprived of the possibility of advancement and promotions and lack objective standards of performance. Moreover, childcare and housework tasks are on a twenty-four hour, stand-by basis. Thus, the feminist literature suggests, the amorphous and endless nature of these tasks is very stressful for women, and even the leisure moments they may have are tainted by the “on-call” demands of their duties (Hochschild 1989, 1997).

Paid work also presents adverse conditions for female workers. For example, in general, women get less pay than men, even when the formal education and length of experience are held constant for the two groups (Nelson & Robinson 2002). Women are much more vulnerable to sexual harassment in the workplace than men are (Sev'er 1999). Women's concentration in service and secretarial jobs assures that they will do a lot of work with very little decision-making power, authority, or prestige (Nelson & Robinson 2002). They are also the first to lose their jobs in economic slumps. However, the worst matrix for women is when they work for pay and still have to carry the major responsibility for the household and childcare (Armstrong & Armstrong 1984; Hochschild 1989, 1997; Luxton 1988).

However, generalization of the North American findings to the developing world with different social, political, cultural, and religious characteristics needs to be done with extreme caution. While North American women face numerous challenges, women in Turkey face even harsher conditions. In a secular country like Turkey, where about 99% of the population is Muslim, the participation of women in the labor force is much lower than the participation rates in the west (Arat 1996; Kiz Cocuklarinin 2000). Nevertheless, women—especially poor, rural women—do work outside of the home, as well as within it (Kirsal Alan 1999). They may work in family-owned fields, or they may work as farm laborers, usually under the most adverse and unsafe conditions. In Batman, these conditions often involve cotton-picking in scorching fields or working one of the grueling shifts in the cotton industry. Women may work as cleaners in people's homes or toil in marginal, outdated industries, where the conditions of work may not be regulated by government standards. In Turkey, the minimum wage in 2002 was 5,000,000 Lira per day (approximately US\$3). To complicate matters, women in the Batman region have very high birth rates (38.3 per 1,000 population), which means they have many children to raise (Akyildirim 2001; Batman 1998). They are also likely to be the sole care-givers in marriage, since the patriarchal tradition ostracizes husbands who engage in housework or childcare. Indeed, pressures in Batman women's lives are exponentially higher than the concerns their western sisters face.

Thus, in both developed and developing countries, the axis that the personal pathology, anomie, and alienation concepts fail to capture is patriarchy. Even the least powerful men and the most exploited male workers in the capitalist system have a private world within which they rule (Dworkin 1976). Moreover, patriarchal legal, moral, familial, and political systems allow even the most disadvantaged men to dominate and control the women and children in their lives. In small pockets of the world, including parts of Turkey, men's domination over women (and children) is absolute. Men decide whether women will go to school, if they will work, and when or to whom they will marry (Carroll 2000). Violence against women is also rampant (Aile Ici Siddet 1995; Kandiyoti 1988; Kelly & Radford 1998), and in extreme cases, women are killed in the name of family honor (Düzkan & Kocali 2000; Sev'er & Yurdakul 2001; Yirmibesoglu 2000).

The fear these patriarchal relations create in girls'/women's lives needs to be configured in understanding their suicidal behavior. Patriarchal societies are obsessed with controlling female sexuality (Accad 2000; Mernissi 2000; Narasimhan 1994; Saigol 2000). Although the control tactics vary, they all serve as a form of subjugation (i.e., clothing restrictions, withholding resources from female children in impoverished parts of the world, forced virginity tests for girls, bloody sheet or underwear tests after the first night of marriage, genital mutilation of girls and women, arranged childhood marriages, *sati* [wife burning], and honor killings).<sup>6</sup> There are

officially established links between virginity tests, with their implied threats of physical harm, and suicides of young girls (Cindoğlu 2000). In a study of attributions, Şahin, Şahin, & Tümer (1994) observed that both loss of virginity out of wedlock and being a victim of rape were considered to be sufficient reasons for Turkish girls to want to kill themselves.

Female sexuality in Turkey is still exclusively tied to marital obligation and legitimate reproduction, not to individual choice, preference, experience, or freedom (Carroll 2000). Girls are taught that any deviation from taboos against pre-marital sex will end in extreme forms of punishment, possibly including death. Yet, patriarchal societies also make these same girls/women particularly vulnerable to either random violence of unrelated men or the advances of men who are closely related to them (i.e., incestual rape, see Arin 1997; Sezgin 1997). Poverty and patriarchy form a dangerous matrix in women's lives. According to Düzkan & Kocali, "here [in southeastern Turkey] the girls give their lives for doing what in other cities girls would only be scolded or beaten for. There are so few options...insults, violence or death" (2000:387). For example, a government sponsored study into violence against Turkish wives found that out of a randomly selected sample of 4,287 women, only 738 (17.2%) reported no violence in their homes. The rest reported mild (25.6%), usual (19.6%), and more than usual (20.7%) violence. Moreover, the percentage of women who reported severe and very severe violence was 13.2% and 3.7% respectively (Aile İçi Sıddet 1995). Violence in the home was inversely correlated with socioeconomic status and directly correlated with household density.

Thus, this paper explores the economic circumstances and the living conditions of women within this mostly rural and extremely patriarchal region of Turkey in order to gain insights into why women's suicide rates are three times higher than the average for Turkey, and why they are four times higher than the Turkish average for women. We are particularly interested in shedding light on why the suicide rate for Batman women is almost two and a half times higher than men's rate in this region.

## **Methods**

The focus is on the year 2000, when suicides reached a peak in Batman's history, with thirty-one completed and ninety-nine attempted cases. The current study is based on face-to-face interviews with thirty surviving guardians of the thirty-one suicide victims and with the ninety-nine men and women who attempted suicide in Batman, in the year 2000.<sup>7</sup>

This is not an experimental study, since many aspects of the interviews (duration, place, language [Kurdish or Turkish], and mostly open-ended questions) were not stringently controlled. Neither are we in a position to test hypotheses. However, the uniqueness of the sample and the uniqueness of the region make our observations particularly valuable to observe complex links between extreme forms of patriarchy, poverty, and suicides.

The study was undertaken by numerous academics from the Sociology, Psychology, and Psychiatry Departments of Dicle University (Diyarbakir, Turkey), with the encouragement of Batman City's Mayoral Office. All interviews were carried out by carefully trained graduate students from the Departments of Psychology and Sociology. The mother-tongue of some of the victims and some interviewers was Kurdish, but all responses were recorded in Turkish.<sup>8</sup>



The observations we report are based on interviews with a surviving parent, an older sibling, or a mate<sup>9</sup> of thirty of the thirty-one Batman men and girls/women who committed suicide in 2000. These guardians were asked about the age, gender, education, rural/urban residence patterns, income, employment, marital status, and refugee/migratory status of the suicide victims, and whether the victims had alcohol dependencies. An expanded version of the same questionnaire was administered to ninety-nine men and girls/women who survived a suicide attempt in the same year. Our intent was to evaluate the harsh conditions of Batman for both men and women, but the even harsher conditions in the female victims' lives.

Victims' perceived social support systems, trouble with work (if applicable), verbalization of problems before the suicide or attempted suicide, existence of earlier suicide attempts, therapy/medication history, tolerance for contact with the opposite sex, trouble with family members, and complaints about parental control were also asked. We wanted to gain insights into the social conditions of the victims' lives, and more specifically, insights into the patriarchal forces that control the female victims.<sup>10</sup> For a few of the demographic variables (age, marital status, etc.) we report the completed and attempted suicide groups separately. For the rest of the analysis, we report our observations on the combined group.

### *Ethics*

The study was conducted according to the ethical requirements of Dicle University (Diyarbakir) for research with human participants. Because of the involvement of the Psychology, Psychiatry, and Sociology Departments of this prestigious local university in the project, as well as Batman City's Mayoral Office, the participation rate is almost 100% (only one guardian of the thirty-one suicide cases was not reached). The length of the interviews was determined by the willingness of the respondents, with interviews ranging from one to two hours. At the beginning of each interview, respondents were told that the data were to be used for only academic and clinical teaching and publication purposes. Respondents received no monetary compensation for their participation in the study, but most expressed gratitude for the opportunity to talk to a professional about their loss/problems. Six guardians who were experiencing continued issues with their loss were directed to counseling. Hospital personnel and/or local social agencies were already in contact with the attempted suicide victims.

Given the fact that most participants are illiterate or semi-literate, only verbal consent of participants was required. Verbally, they were assured that their refusal to answer questions would have no negative consequence for them. However, readers need to be reminded that the cultural milieu of Batman is very different than North America. When there is an opportunity to talk to a professional (any professional), people often line up and try to bring other family members and friends to tell their stories. In the present study, the challenge was to pick only one guardian among many who wanted to be interviewed. As mentioned, the choices were confined to a surviving parent, older sibling, or mate of a suicide victim.

## **Results**

### *Findings Relating to Socio-Demographic Conditions*

In Batman City and its surrounding villages, there were thirty-one completed suicides and ninety-nine suicide attempts in 2000. This is the highest number of suicides in Batman's history.

Twenty-two of the thirty-one suicide completers (71%) and eighty-five of the ninety-nine suicide attempters (86%) were girls/women.<sup>11</sup>

Sixteen (52%) of the thirty-one completed suicides were in Batman City, and eight (26%) in the adjoining villages. A higher proportion of the attempted suicides (65%) were in the city and a smaller proportion in the villages (19%).

Of the twenty-two female suicide victims, thirteen (59%) were single and nine (41%) were married. Of the nine men, seven (78%) were single, and two (22%) were married, closely replicating Durkheim's observations about the protective effects of marriage for men. We also have information on the marital status of eighty-nine (of the ninety-nine) attempted suicide cases. Of the seventy-six women, forty (53%) were single, thirty-six (47%) married, and one (less than 1%) divorced. Of the thirteen men, nine (69%) were single and four (31%) were married, again giving support to Durkheim's assertions about marriage and lower suicide propensity for men. According to the numbers, protective effects of marriage on women were marginal.

The largest group of victims of completed suicides (20/31 or 65%) was between fifteen and twenty-four years of age. The youngest victim was twelve years old (a girl). There were five additional suicides (16%) in the twenty-five to thirty-four age bracket. The mean age of suicide victims was 23, and the range was twelve to sixty-one years old. Among the suicide attempts, the pattern was similar. Sixty-two (63%) were between fifteen and twenty-four years of age, and an additional twenty-two (22%) were in the twenty-five to thirty-four age bracket. The mean age of the attempted suicide group was 22.66, and the range was thirteen to fifty-six.

Attempted and completed suicide groups were almost identical in formal education. In both groups, approximately 40% were illiterate or barely literate, without any formal training. Two-fifths had completed primary school (20%) or high school (20%). The proportion of those who had gone beyond high school was less than 20%.

The majority (87%) of the families had a monthly income of less than US\$100. Given the fact that 53% were classified as girls/women without paid work, and an additional 20% were men reporting unemployment, we conclude that close to three-quarters of those who attempted or completed suicides were outside of the workforce.

Sixty-seven percent of the families of the attempted and completed suicide victims lived in substandard housing, which is locally referred to as "*gece-kondu*." The literal translation of the term is "perched on a single night," which quite accurately reflects the haphazard, shanty, and illegal nature of these structures. Only 23% of the victims' families stated that they lived in apartments, some of which may also have posed less than desirable conditions. These findings take on even more serious implications when we consider the fact that 93% of the victims had more than three siblings, and 73% of the families had five or more people residing together. We have additional information on the number of siblings that the twenty-two female suicide victims had. Three victims had three, two victims had four, two had five, two had six, three had seven, three had eight, and another three had ten siblings each. One victim had nine and another eleven siblings. In sum, the lack of privacy in these girls'/women's lives was astounding, even according to modest Turkish standards of living, where the average family size is five while the average number of rooms is three.

Of the completed suicides of the nine men, four (44%) hung themselves, three (33%) used fire-arms, one jumped (11%), and one used drugs (11%). Of the twenty-two female victims, ten (45%) hung themselves, seven (32%) used fire-arms, three (14%) jumped, one took drugs (5%), and one burned herself to death (5%). Of the ninety-nine attempted suicides, fourteen were men and eighty-five were girls/women. Of the fourteen men,<sup>12</sup> ten (71%) used drugs, four (29%) hung themselves, two (14%) jumped, and one (7%) burned himself. One method was not identified. Of the eighty-five women who attempted suicide, the vast majority (69 or 81%) used drugs, four (5%) hung themselves, and one (slightly over 1%) jumped. We were not able to confirm the method used in the remaining eleven female suicide attempts.

Alcohol dependency was reported in only one of the 129 interviews (thirty completed and ninety-nine attempted suicide cases). This finding is completely contrary to other findings in the literature and might be explained by the anti-alcohol orientation of this predominantly Muslim region.

### *Findings Relating to Social and Patriarchal Pressures*

Sixty women (71%) who attempted suicide (data not available for the twenty-two who died), expressed a yearning for living at a different time and place than in Batman. Yet, 80% of the women who committed or attempted suicide had never been outside of the Batman City, and 90% had never been outside Batman region or the surrounding towns or villages. This geographic isolation is compounded by a social isolation, as the following observations depict. As far as the guardians knew, only two (10%) of the girls/women who died had ever talked about their desperation with someone else. Only three women (14%) left a suicide note. According to the recollections of the polled guardians, 52% of the female suicide victims had expressed no hope about improvement in the conditions of their lives while they were still alive.

Of the females who either attempted or completed suicides, only 70% were allowed to go out shopping on their own (68% for attempted, 72% for completed suicide group). Thirty percent were not allowed to go out without being accompanied by a chaperone (32% for attempted, 28% for completed suicide group). What is more striking than the above figures is that 80% of the girls/women who attempted or completed suicides were not allowed to go to a park, a movie theater, or to participate in a social gathering without the permission or accompaniment of their older kin (76% for attempted, 84% for completed suicide group).

Controls over women's opposite sex relations were intense. Two-thirds of the guardians polled (16/22 of the suicide group) were totally opposed to allowing their female children/sisters/wives participate in mixed-sex groups. A substantial proportion of the interviewees opposed (or reported opposition to) females having male friends or boyfriends (opposition was 84% for attempted, 90% for completed suicide groups). Only five (23%) said that such friendships were acceptable. Eleven (50%) of the guardians of the female suicide victims admitted that all major decisions about the family were made by fathers, and another sizeable proportion admitted that elders (20%) or mothers (20%) made the decisions.

Sixty-seven percent (20/30) of the polled guardians said that marital partners for daughters are better selected by family, kin, or matchmakers. Only 27% (8/30) said that sisters or daughters could have a say in the matter. Exactly 50% of the polled female and an additional 23% of the polled male guardians of the suicide victims said that they would completely oppose their

daughters' marriage with someone they personally disapproved, whereas only 21% claimed that they would completely oppose their sons' choice of a mate. More than half the females who had survived a suicide attempt (44/85) also talked about the restrictions on their mate choices. These traditional patterns in censuring mates for the younger generation, especially for girls/women, is not surprising given that 92% of the guardians themselves had gotten married through matchmakers.

It is also interesting to note that female guardians are more strict executioners of patriarchal rules than fathers/brothers seem to be, at least at the verbal response level. Both Brown (1997) and Kandiyoti (1988) write about older women's control of younger women in patriarchal societies. Kandiyoti summarizes this process under her "patriarchal bargain" concept. Basically, women of all ages in patriarchal societies are powerless. However, older women who have led their lives observing patriarchal rules carve out a space in the pecking order for themselves by becoming the eyes and ears of the same patriarchal rules that have subjugated them. Thus, what little power may be available to older women is at the expense of younger women's freedom.

### **Summary and Discussion**

The speed of urbanization in the Batman region has not been adequately matched by developments in infrastructure, health, education, or social safety networks. Recently discovered oil reserves in the region have not translated into the expected jobs. On the contrary, what little wealth is generated has been concentrated in the hands of companies/families/tribes.

Another undesirable outcome of the unchecked urbanization is the volatility of the whole region. The rural void created by farmers and herders who have emigrated out of their traditional lands has been filled with cells of outlawed organizations, such as the PKK and Hezbollah. Due to legitimate fears of terrorist mayhem, local and regional governments have been eager to encourage rural people's migration into the relative safety of the cities. As a result of these econo-political dynamics, the city of Batman has buckled under the surge of unemployment. Inadequate numbers of hospitals and healthcare staff, and the inadequacy of schools have compounded the problems. Police and military forces are overstretched between poverty-fueled property crimes on the one hand and terrorist activities on the other. Although Turkey is a quickly modernizing state by all accounts, Batman region is still showing almost Third World conditions in its socio-demographic indexes. Even diseases which were thought to be wiped out (such as tuberculosis and malaria) are making a comeback in the region (Batman 1998).

The listed factors of deprivation indeed form a ripe condition for anomie, Durkheim's explanatory factor for suicides. Indeed, Batman's overall suicide rates have climbed to more than twice the rate for the rest of Turkey (6.9 vs. 3). Yet, men's committed and attempted suicides are only marginally higher for Batman than the overall Turkish rate for men (4 for Batman vs. 3.5 for Turkey). In the present paper, the real discrepancy is in the women's rates of suicide (9.9 for Batman vs. 2.4 for Turkey). We argue that the anomie-producing conditions in the region cannot provide a satisfactory answer for why Batman women are killing themselves at such a high rate. After all, Durkheim never claimed that women are more likely to be affected by anomie than men. On the contrary, Durkheim always argued (and for most of the world, rightly so), that women are *less* likely to commit suicide. Thus, the anomaly in Batman brings us back to the socio-cultural and patriarchal controls on women's lives.

Our findings show that more than 75% of the victims are under twenty-five years of age. Obviously, gender-based conditions for young women are detrimental to their physical and mental health. Moreover, Batman's victims lived under intolerable congestion. At least 67% lived in shanty houses (*gece-kondu*), with 73% reporting to share these intolerable circumstances with more than five members of their household. More than 93% of the victims had three or more siblings. According to Çetin's (2001) findings, Turkish females living in crowded homes with many siblings have an increased propensity to kill themselves. Çetin does not report the same pattern for boys/men.

Victims had very little income, when compared to the rest of Turkish society (almost 90% of the families reported living on less than US\$100 per month). Moreover, in patriarchal societies, it is almost always the girls/women who end up getting less than their fair share of the already overstretched resources (Kağıtçıbaşı 1993). For example, in the responses we received, the percentage of guardians who would totally support formal education for their sons was 90%. In contrast, only 20% of the respondents stated similar aspirations for their female children. In terms of personal leisure and freedoms, girls'/women's circumstances were even more dire. As our overall findings indicate, 53% of the female victims did not have paid work and thus lacked a personal source of income.

The unequal treatment Batman girls receive may lead to additional tensions in their family relations. In Çetin's (2001), Şahin, Batigün, & Şahin's (1998), and Şahin, Şahin, & Tümer's (1994) studies with Turkish girls, problems in family relations were consistently identified as a correlate in suicide attempts or suicide ideation. Şahin, Batigün, & Şahin (1998) did not find family problems to be a factor in males' suicidal thoughts or behavior. This difference may be due to the fact that the confining conditions of the residences and low incomes are particularly disheartening for girls/women. In patriarchal societies, men spend the majority of their waking hours at work (if they have work) or in the company of other men. Male children spend all their awake hours on the streets in the company of other male children. Adult men find their all-male support groups in open-air coffee houses (*kahvehane*). Indeed, Batman City has many hundreds of coffee houses that cater exclusively to male clients, who drink Turkish tea and play cards or checkers from early in the morning until late at night. This cheap method of entertainment is favored by both unemployed and employed men.

Girls/women have almost no options to escape the disheartening circumstances of day-to-day life. As our data reflect, only 70% of the women were allowed to shop on their own, even when shopping was necessary for family needs (i.e., groceries). A whopping 80% of these women (84% of the completed suicide group) had to get special permission or arrange for a chaperone to go to a park or to attend a social event. Studying the suicidal behavior of Asian-American women, Ibrahim (1995) concludes that frustration and anger about not having power over one's life can lead young women to suicide. In such cases, "suicide may be viewed as a way to gain some power" (1995:145).

Indeed, young women in the Batman region lack power. Although Turkish laws prohibit it, the tribal traditions of the area sometimes force girls as young as thirteen to marry sexagenarians (Fraser 2000). For example, a seventeen-year-old locked herself in a room and threatened to shoot herself with a gun if her father continued to insist on marrying her to her cousin. She said she loved someone else, and she would rather die than become the wife of her cousin (Fraser 2000). In our study, 90% of the guardians of those who died and 84% of the attempted group

were opposed to having their daughters/sisters date. According to Eskin's (1995) work on suicidal behavior and attitudes of Turkish adolescents, opposite-sex problems were rated as one of the most crucial factors in female suicides. Given the extraordinary controls over Batman girls, forbidden cross-sex attractions may turn out to be fatal.

According to a national report, Turkish women and girls suffer from parental, spousal, and sibling violence (Aile Ici Siddet 1995). In the southeastern region, many women receive severe beatings and some even lose their lives in the name of "family honor" (Sev'er & Yurdakul 2001; Tezcan 1981). Although these extreme cases are small in number, the publicity they receive<sup>13</sup> is sufficient to make girls/women live in fear. Ilkcaracan & WWHR (1998, 1999) report that 66.6% of 599 women respondents from eastern Turkey feared that their husbands would kill them if they *suspected* an extra-marital affair. A larger majority expressed fears about being severely beaten. Younger women's experimentation with sex may induce enough fear to take one's own life (Ibrahim 1995).

Many of the victims were regional migrants. These girls/women may have experienced restrictions in their lives even before coming to Batman. However, their deprivation may have been less obvious in the context of their rural lives. In Batman, despite the surface level of openness to the rest of the world (access to television), parents and kin continue to enforce the unforgiving norms and taboos of a feudal/patriarchal era. In shanty towns, most families live with countless deprivations, such as lack of running water, no adequate heat, and insufficient clothing and nutrition. Lack of freedom of movement may add fuel to the fire. Yet, the irony of globalization is that 85% of the victims (completed and attempted combined) had television in their homes. Young women who either killed or tried to kill themselves may have seen for the first time the material luxuries and personal freedoms (including freedom of sexual relations) that other girls/women of their age enjoy. Batman girls/women can never hope to have such luxuries, freedoms, or choices. Indeed, the "pathologies" these women have exhibited through attempting or committing suicide may not be pathologies at all. Instead, their actions may reflect a rational choice to break the chains of their structural, cultural, and gendered oppressions. Canetto & Lester (1995) arrive at a similar conclusion when they urge us to look at the social and cultural conditions of suicide victims' lives.

### **Conclusions**

We need to acknowledge the many shortcomings of our study, such as the small size of the sample, lack of comparison groups, and the lower class skew in the observations. The unique and sensitive substance of our work does not allow many methodological luxuries. In that sense, our observations are not generalizable to all suicides, but they may be generalizable to suicides under similar conditions. For example, Vijayakumar & Rajkumar (1999) have used a methodology similar to ours (key informants) in their exploration of suicides in Madras, India. We are convinced that our ability to interview all the attempted suicide victims and all but one of the completed suicide guardians in the year 2000 in Batman makes our work pioneer some new theoretical insights.

Our analysis of victims' lives shows that the root causes of suicide go beyond "individual pathology" or "anomie" or "alienation." Instead, the specific limitations and cultural controls over women's (and young people's) lives must be understood in order to dismantle and reverse the conditions leading to their desperation. Our observations identify the suffocating conditions

as economic deprivation (both absolute and relative), social turmoil, and patriarchal controls on women's lives and freedoms. These girls/women seem to have been severely isolated in the midst of poverty-stricken, overcrowded homes, with very little hope of breaking the cycle. Deprivations they may have felt before moving to the city may have grown even more unbearable once they discovered how other people, in other parts of the world, live (media exposure). Our observations indicate that these girls/women lacked family support to buffer against self-destructive behavior. Although our data cannot directly speak to the issue of violence, other research in the region clearly indicates that violence against girls/women is severe and common (Ilkkaracan & WHHR 1998, 1999).

If our interpretation of these findings is correct, then the way to remedy the conditions that give rise to the desperate acts by young women are clear: reduced control of their personal lives; reduced control of their physical bodies; decreased punitiveness against sexualized experience; increased opportunities for education, paid work, and meaningful social activities; and more choices in selecting friends, companions, and mates. This may sound like a tall order, and probably it is in a very patriarchal region such as Batman. However, the very first step to such positive change lies in educational opportunities and paid work with decent wages and safe working standards, and the presence of national and international watch groups to monitor women's physical and psychological health. It is then and only then that girls/women may see a light (albeit a small light at first) at the end of the all black, confining, genderized tunnel, which otherwise traps them for life.

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## Notes

1. In 1997, a total of 471 oil wells produced eight million barrels of oil (Batman 1998).
2. In a famous footnote, Durkheim (1951[1887]:276, FN 25) also mentioned a fourth category: fatalistic suicide. Conceived as the opposite of anomic suicide, fatalistic suicide is characterized by excessive regulation, which chokes a person's goals and desires. Fatalistic suicide never received much attention in Durkheim's writings because he claimed that examples were rare and therefore hard to find. We thank the anonymous reviewer who reminded us about this additional category.
3. For the altruistic example, Durkheim also used women who kill themselves after the death of their husbands (like Indian sati) and slaves who kill themselves after the death of their masters. From a feminist perspective, there are at least two glaring counter-points to his example. One is the implied equivalence between "slaves" and "wives," an equivalence that Engels also underscores in *The Origin of the Family, Private Property and the State* (1972[1942]). The second is that his assumption about the free will or choice of women in "willingly" jumping into the funeral pyre of their husbands is naive. As the violence against women literature confirms, there may be immense social pressures on these women in the pockets of India that still practice sati (see Narasimhan 1994). Patriarchal societies also may exert pressures on widows by disallowing them any legitimate role outside of motherhood and wifery.
4. Slight variations of Durkheim's anomic suicide type are still used to understand the high suicide rates among First Nations people in Canada (see Chandler & Lalonde 1998; Jarvis & Boldt 1982).
5. If they did, boys and girls from the same family would be equally likely to kill themselves. Yet, universally, men's rates are much higher than women's.
6. There are numerous explorations of the continuum of control on women's bodies, behavior, and even life chances. For spousal violence, see Aile Ici Siddet 1995; for virginity tests, see Altınay 2000; Cindoğlu 2000; Seral 2000; for bloody sheet or underwear tests after the first night of marriage, see Cindoğlu 2000; Mernissi 2000; for bride price and bride exchange, see Düzkan & Kocali 2000; Yirmibesoglu 2000; for genital mutilation, see Al-Dawla 2000; Boddy 1998; Toubia 2000; for stoning to death of women for adultery, see BAOBAB & AI Canada 2002; for sex selection, sati, and sex-determination, see Anand 1989; Narasimhan 1994; for honor killings and bride-burnings, see Abu-Odeh 2000; Düzkan & Kocali 2000; Sev'er & Yurdakul 2001; Shah 1990; Yirmibesoglu 2000.



7. The focus is on the year 2000, when suicides reached a peak in Batman's history with thirty-one completed and ninety-nine attempted cases, which respectively translate into 7.3% and 23.2% per 100,000 population according to our calculations. However, Batman government documents report the rates as 6.9% and 20.81% for the year 2000, and the official rates are the ones we use throughout this paper.
8. Interviewers took notes in Turkish even when the interview was conducted in Kurdish.
9. From this point on, the surviving parent, older sibling, or mate of the suicide victims who served as respondents in this study will be referred to as "guardians."
10. Because of the fragility of the survivors of attempted suicides and the guardians who have lost a daughter, sister, or wife to suicide, we refrained from asking direct questions about whether the victims were subjected to family violence or threats of violence. In our study, the presence of violence against women is not directly tested, but assumed on the basis of regional statistics.
11. Percentages are rounded to nearest percentage point.
12. The discrepancy between the number of male suicide attempters (fourteen) and the number of attempters listed by suicide method (eighteen) results from some respondents reporting that they used more than one method in their suicide attempts.
13. Turkish media prints, publishes, and broadcasts bloody images of the victims. It is not uncommon to see the grossly mutilated bodies of victims or their blood-covered perpetrators as front-page news.

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