

Suicide in the Tokelau Islands

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A collaborative effort between the Tokelau Health Department –Tokelau, Health Research Council of New Zealand (NZHRC) and the World Health Organization (WHO)

Abstract

The survey revealed extremely high suicide prevalence in Tokelau within the last 25 years. Attempted suicide rate of 40/1500 (and fatal suicide rate of 6/1500 (1980-2004) with increasing trend in recent years. With consideration of the small population of 1500, these rates are quite devastating.

Attempted suicide was higher among Male (65%) than Female, though there was a 1:1 ratio between genders in fatal suicides. Suicide was highest among the younger population (14-25) years old. Eighty three percent (83%) of fatalities were below the age of 25 and 67% were below the age of 20. Sixty seven percent (67%) of fatal cases were reported in Fakaofu and none was reported in Nukunonu.

- The most common method of suicide was hanging (40% of attempted cases, 83% of fatal cases hung themselves). This study revealed several factors that could have caused or contributed to suicidal behaviours in Tokelau. These included: failure within family relationships between parents and children; relationships problems such as marriage breakdown; boyfriend-girlfriend relationship problems; people gossiping and public humiliation; loss of loved ones, loss of status within the community; ashamed or afraid because they had done something wrong/unacceptable; depressed, bored; or anger; and failure in school examination.

The outcome of this study calls for a collaborative approach between the Government of Tokelau, non-government bodies, churches, regional and international organizations and the three local communities to develop and implement appropriate preventative strategies to avoid losing another loved one to this devastating action. PHD, 2009; (15) (2); pp. 67 - 83.

Introduction

Terms & Definitions

Suicidal attempts (attempted suicide): suicidal incidences through which the victim survived.

Fatal suicide (cases): suicidal incidences through which the victim died.

Fatupaepae: the local women organization

Taulelea: the local men organization; Tupulaga: youths

Background

Tokelau is a largely self-governing territory of New Zealand and consists of three small atolls with a land area of 12 square miles. It lies about 500 km northeast of Samoa, its closest neighbour. The "Ulu o Tokelau" is the head of government and a titular role that is rotated among the three Faipules (head of each atoll) after each year. The three elected Faipules and the three Pulemuku (mayors) of each atoll make up the Council



for the On-going government of Tokelau (COGT). In a three-year cycle, each village elect specific number of delegates and together with the members of the COGT, make up the Tokelau General Fono (TGF). The TGF is the paramount decision making body in Tokelau and meets 3-4 times a year and when not in session, the COGT functions on their behalf.

Each Council of elders "Taupulega" is the highest decision-making body at village level, supported by the respective "office of the Taupulega". The Taupulega is made up of chiefs (matai) of each family in the respective atoll.

Boats provide the only access to the outside world, and between the three atolls on a fortnightly schedule. There is no air access, even for emergencies. The closest country is Samoa and it takes about 24-36 hours by boat from the nearest atoll Fakaofu. Christianity forms the foundation of the Tokelau culture and is highly respected. People in Atafu are mainly Protentants, Catholics in Nukunonu and a mixture of both Protentants and Catholics in Fakaofu.



The approximate total population is 1,500, with 700 in Atafu, 500 in Fakaofu and 300 in Nukunonu (2001 census). Each atoll has a community hospital, which provides basic medical services. More than 70% of the time, these community hospitals are managed by nurses, and often there would be one resident doctor in one of the atoll that would be able to respond to request for medical assistance from the other two atolls. Tokelau relies heavily on locum doctors that are contracted by the department to work in Tokelau for short times for as long as six months.

The Tokelau Health department operates a Tokelau Health Referral Scheme (THRS) in which patients are referred overseas (Samoa, New Zealand) for medical assessment and treatment due to the limited available resources in Tokelau.



Suicide in the Neighboring Pacific Islands

Suicide is taking ones' own life or attempting to do so. Several biological, psychological and sociological factors can have an impact on an individual that may lead to choosing suicide as an alternative.

The World Health Organization (WHO) had estimated that approximately one million people in the world committed suicide in 2000. Suicide is ranked as the third leading cause of death among youth world- wide. As such, WHO has declared suicide a major global Public Health problem and called on member states to device and implement national suicide preventative strategies.¹

Global comparison shows Pacific suicide rates are among the highest reported. According to UNICEF, the Pacific Island nations have the highest suicide rates in the world.² The Pacific Island Mental Health Network (PIMHnet) was established in 2005 to assist member countries in these challenges with priority focus on advocacy for mental health; human resource training, policy, legislation, planning and service development, research and information, access to psychotropic medicines.³ Tokelau is a member of PIMHnet and while suicide prevention is receiving increased attention worldwide and in neighbouring countries, it remains low in priority in Tokelau.

Suicide in Tokelau

Suicide is a tragic and a very complex event that often happens so sudden that most often cannot be counteracted by the limited availability of appropriate medical services locally and this has great impact on isolated population and health settings, as in Tokelau.

In recent years, there had been quite a few reported suicide cases in Tokelau, and with consideration of the small population, had become quite a prominent problem and had raised concerns both within the medical and political arena. The scarcity and inconsistency in reporting of suicidal cases in Tokelau was a limitation in health related programs including this survey.

There had not been any study done on suicide in Tokelau and thus this survey was set out to assess the level within the local communities and to be able to identify risk factors and strategies that would provide baseline data and information for planners.

Methodology: Development of the Suicide Research in Tokelau

As part of the Health Research Training workshop organized by the NZHRC and WHO in 2003, Mr Alapati Tavite submitted the proposal for this research, which was approved and funded by the WHO. Mr. Tavite, as the principle investigator and Dr. Silvia Tavite as co-investigator, implemented the survey in 2004.

Aim: To assess suicide level in the Tokelau Islands

Objectives:

- To find out the prevalence of suicide in the Tokelau Islands from 1980- 2004.
- To find out and compare suicide cases in terms of gender, age, and among the three atolls.
- Identify the most common form of suicide in the Tokelau Islands in the past 25 years
- Identify causative and contributing factors to suicide in Tokelau
- Recommend possible strategies to address this emerging challenge in Tokelau



- Use the results as a developmental tool for the development and implementation of appropriate strategies to address suicide in Tokelau

The investigators (survey team) implemented the survey in 2004 in three separate phases, first in Atafu in July, Nukunonu in September and Fakaofu in October 2004. The team travelled to the three atolls to implement the study. Members of the local health workforce were briefed on the survey methodology and assisted in the distributions of questionnaires in their respective atolls.

The survey had two main target groups with different approaches:

1. Individuals within the age range 15-45 years old. Data were collected from this group through questionnaires. There was no sampling, and list of eligible participants was drawn from the Tokelau census (2001) and updated on arrival on each atoll.
2. The second target group included survival victims of suicide and their close relatives, close family members of those that died from suicide, and members of the three local communities, selected randomly. These individuals were interviewed, with their approval, by the investigators.

Formulation of questionnaire

- **Content:** Questionnaires were both in English and Tokelauan since some individuals within the target group use English as first language and the others in Tokelau. Questions were structured into three main subjects: low self-esteem, suicidal thoughts and suicidal attempts targeting information on causative and contributing factors to suicidal behaviours.
- **Letter of consent:** Due to the sensitivity of the issue, letters of consent were attached to an explanatory note for parents to sign if they agree for their under 18 year olds to be involved in the survey.
- **Explanatory note** detailing the objectives of the survey and addressing the confidentiality issue of the survey with contact details, signed by the investigators, and attached as covering letter to all questionnaires that were distributed.

Data collection

Questionnaires: Questionnaires were distributed to individuals within the target population to complete and return to the researchers within 2-3 days.

Assessing of available records on suicide in Tokelau

Upon arrival in the respective atolls, the team worked with local health staffs and several community members to assess all available records on suicidal cases in Tokelau (fatal and non-fatal) from 1980-2004.

Interviews

Due to the poor recording system, the investigators, with the help of local health personnel, worked on the list of suicidal incidences within the year 1998-2004 and produced a list of victims and relatives to be approached for the survey.

The snowball technique of interview was followed with pre-fabricated questions used to guide the interview process.



Data analysis and interpretation

Data were analysed using Epi Info Version 6, Excel Spreadsheet and Microsoft Word for report writing.

Results

Part 1: Questionnaires

Table 1.1: General Make Up of the Questionnaire Respondents

Atoll	Age group			Sex		Total
	15-25	26-35	36-45	F	M	
Atafu	19	24	14	38	19	57
Fakaofu	29	12	22	39	24	63
Nukunonu	8	9	5	14	8	22
Total	56	45	41	91	51	142
%	39%	32%	29%	64%	36%	

142 individuals responded to the questionnaires, which was 38% of the total target population (based on the Tokelau 2001 census).

78% of the respondents were employed and 41% of them were employed under the respective village labour force.

Low Self-Esteem

Table 1.2: Low Self-Esteem vs Age and Gender

Low self-esteem	AGE GROUP			ATOLL			GENDER		TOTAL	
	15-25	26-35	36-45	ATF	FF	N/N	M	F		
Yes	20	9	9	10	17	11	26	12	38	27%
%	52	24	24	26	45	29	64	32		

The above table shows that 27% of the respondents indicated that they once felt low self-esteem in their life and 52% of them were within the younger age group (15-25 years old), and more prevalent among respondents from Fakaofu (45%) and more among male (64%).

To uplift this low self-esteem, 18% indicated that they prayed; 16% talked to someone; 16% left the scene to relax themselves; 11% indicated attempting suicide. 3% turned to alcohol and smoking while others just let it go. There were also concerns about the lack of people to trust within the community for people to talk to, and thus their preference for the other alternatives.



Suicidal Thoughts
Table 1.3: Suicidal Thoughts vs Age, Gender and Atoll

Suicidal thoughts	Age groups			Gender		Atoll			Total	
	15-25	26-35	35-45	F	M	ATF	FF	NN		
	12	3	4	13	6	5	8	6	19	13%
%	63	16	21	68	32	26	42	32		

13% of respondents showed that they had suicidal thoughts before, ranging from once to five times and was more prevalent among the younger cohorts (15-25 years old) and more in Female than in Male.

53% of those with suicidal thoughts indicated that they had attempted suicide, and 53% of those with suicidal thoughts also had family relatives that attempted suicide before.

Independently, 14% of respondents revealed that they had attempted suicide before and 63% of these respondents revealed that they had family relatives that attempted suicide before.

Alcohol and Smoking

43% of respondents indicated that they turn to smoking and alcohol for relaxation and comfort. Existing data also revealed that more than 70% of attempted cases were under the influence of alcohol when the incidence happened. However, there was no report of alcohol present among the fatal cases. (Tokelau does not have the technology for alcohol testing and thus victims were not tested for alcohol at time of death)

Causative and contributing factors

Respondents indicated the following factors as the reasons why they felt low, or suicidal thought and eventually, when they cannot handle it, attempted suicide.

Factors that were indicated by majority of the respondents are listed first and down least reported.

- Failure within family relationships between parents and children
 - ◆ Children being beaten by parents,
 - ◆ Children were not given the chance to voice concerns within the family circle.
 - ◆ Parents favouring one child over the other
- Relationships problems such as marriage breakdown
 - ◆ Husband or wife having affairs-betrayal of trust and integrity
 - ◆ No supportive from husband or wife
- Boyfriend-girlfriend relationship problems
 - ◆ Parents not approving of girlfriend or boyfriend
 - ◆ Being betrayed by their partners
- People gossiping and public humiliation
- Lost of loved ones, lost of status within the community
- Ashamed or afraid because they had done something wrong/unacceptable
- Depressed; bored; anger
- And failure in school examination.



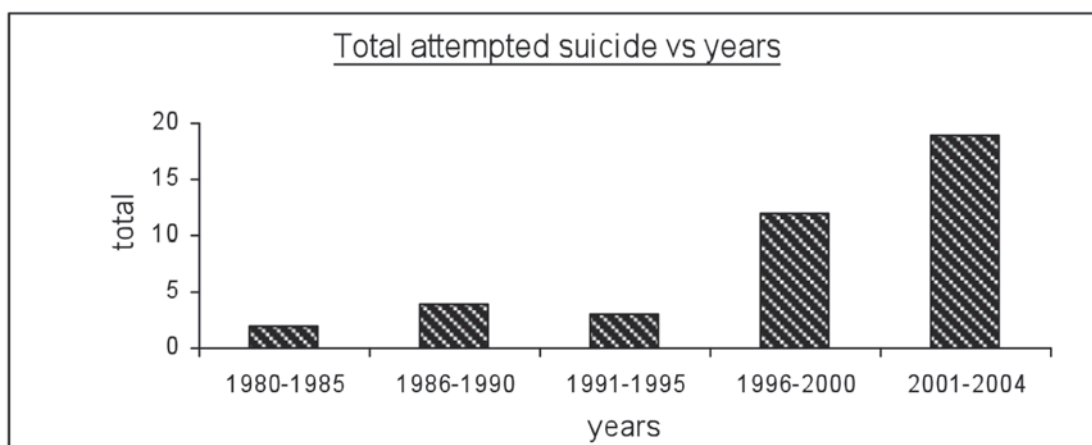
Part 2: Existing data

There were very little information available from hospital records, and only accounted for suicidal cases that needed medical attention. However, members of the public were aware of several other cases that happened but were not recorded.

The collective data shown below were from both hospital records and from consultations and discussions with local health staffs and several members of the communities.

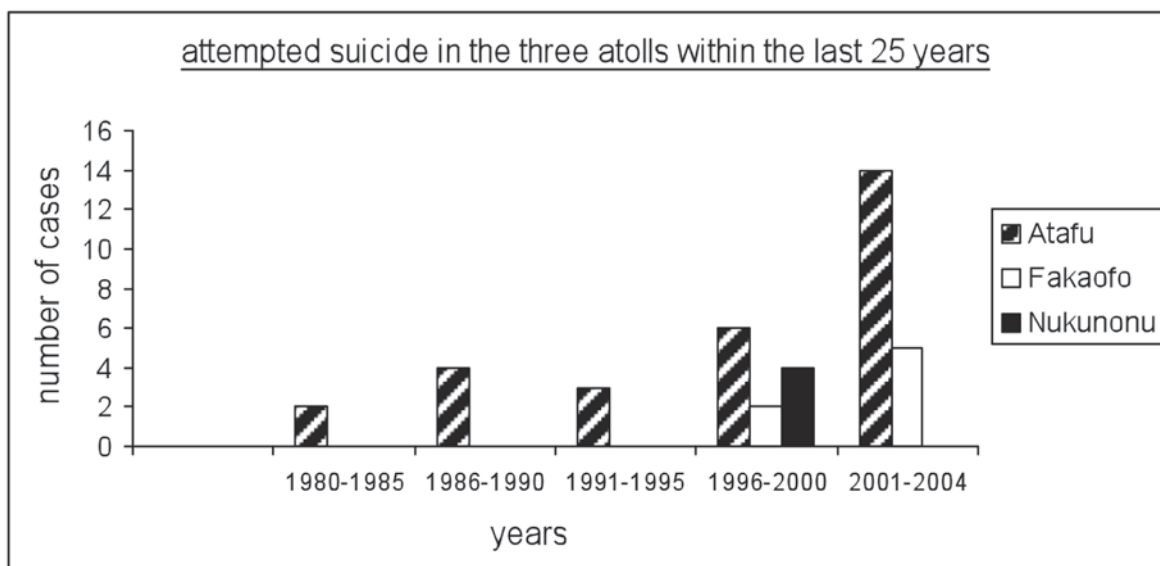
Attempted Suicide in Tokelau in the Last 25 Years

Figure 1:



There were 40 attempted cases from 1980-2004, which is 3% of the total population. The above figure shows an increasing trend from 1980 to 2004.

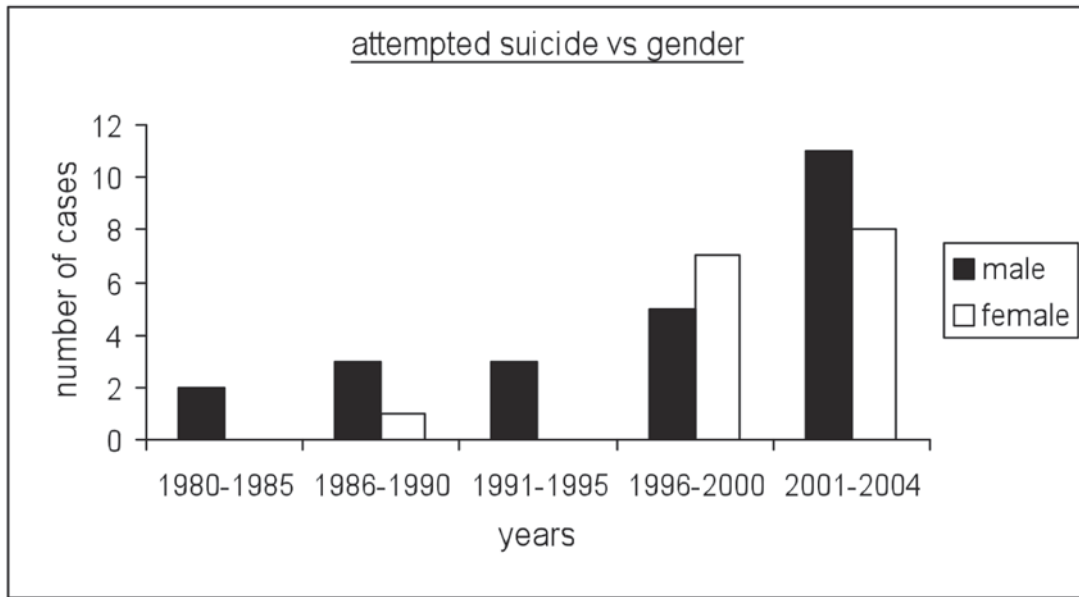
Figure 2:



The above figure shows that attempted suicide had happened in Atafu since 1980 and increasing with recent years, whereas it only reported in Fakaofu and Nukunonu between 1996-2000 and had increased in 2001-04.

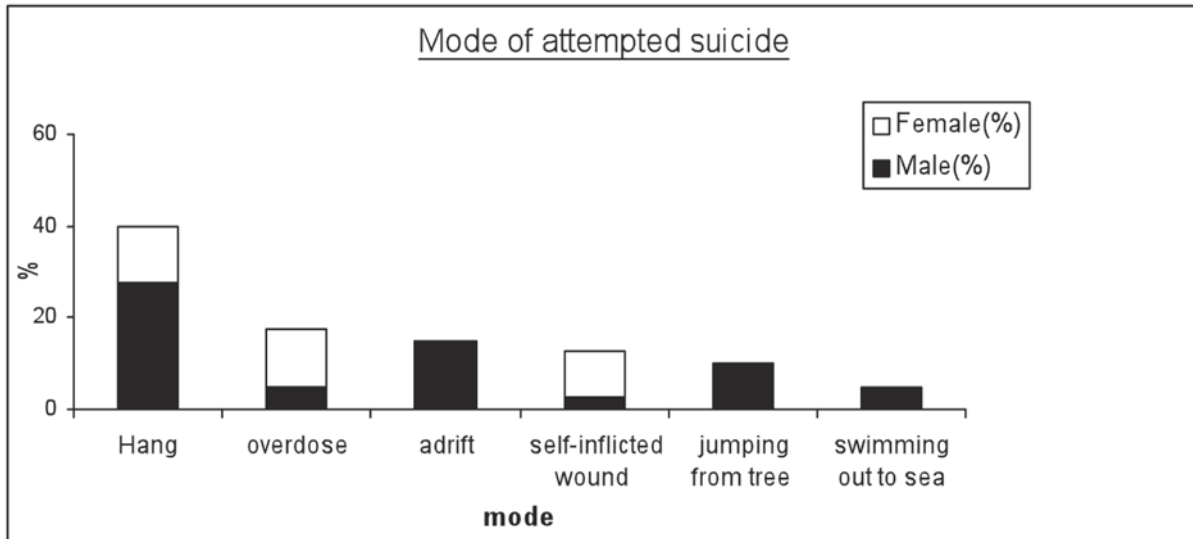


Figure 3:



The above figure shows an increasing trend in both genders with more Male than Female, except in 1996-2000. Overall, 65% of attempted suicides were Male.

Figure 4:

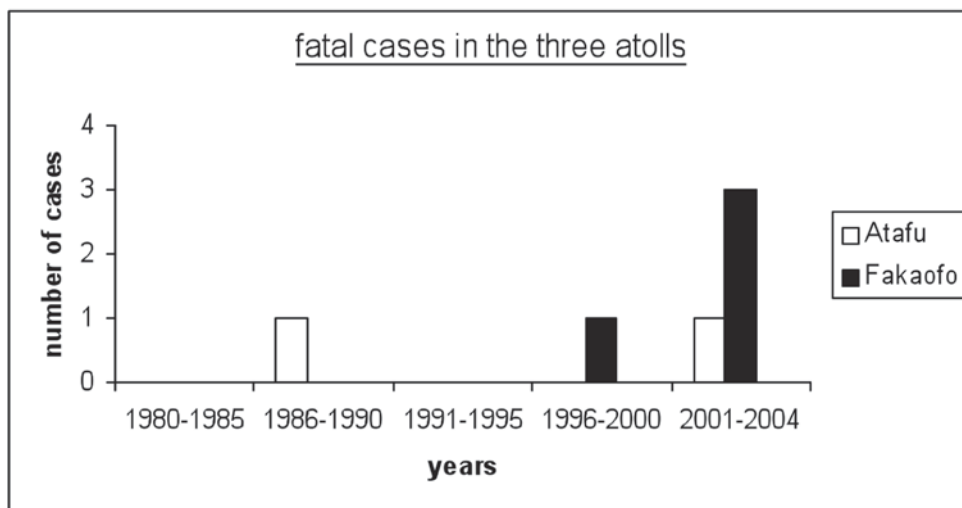


Overall, the most frequent mode of suicide was Hang (40%) and this mode was more frequent among Male, whereas Females turned to drug overdose and self-inflicted wound.



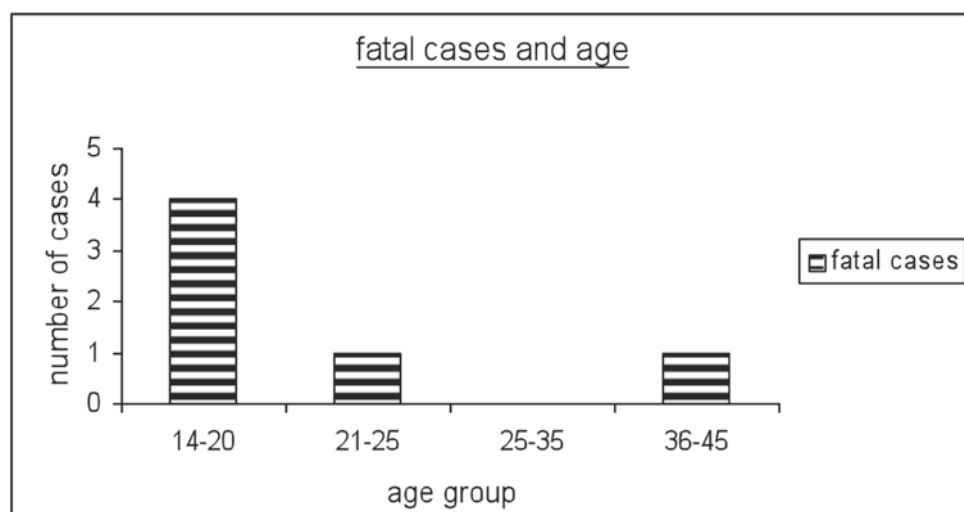
Fatal Suicidal Cases

Figure 5



Within the past 25 years, there were 6 fatal cases reported in Tokelau, 2 in Atafu and 4 in Fakaofu and there was no case reported in Nukunonu. The figure above shows an increasing trend and was recorded highest in 2001-04.

Figure 6



Four (4) of victims (67%) were below the age of 20. Five (5) of these cases (83%) were below the age of 25 and the youngest victim was 14 years old.



Figure 7

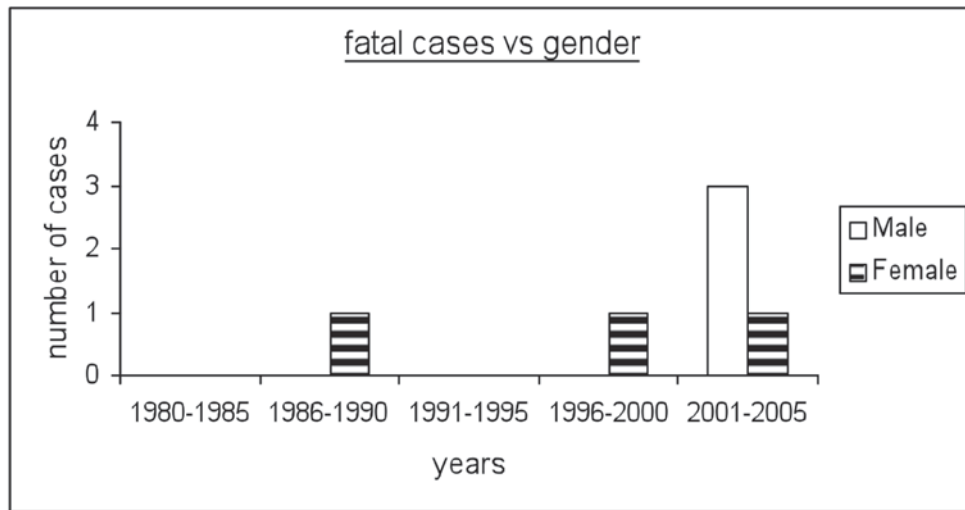
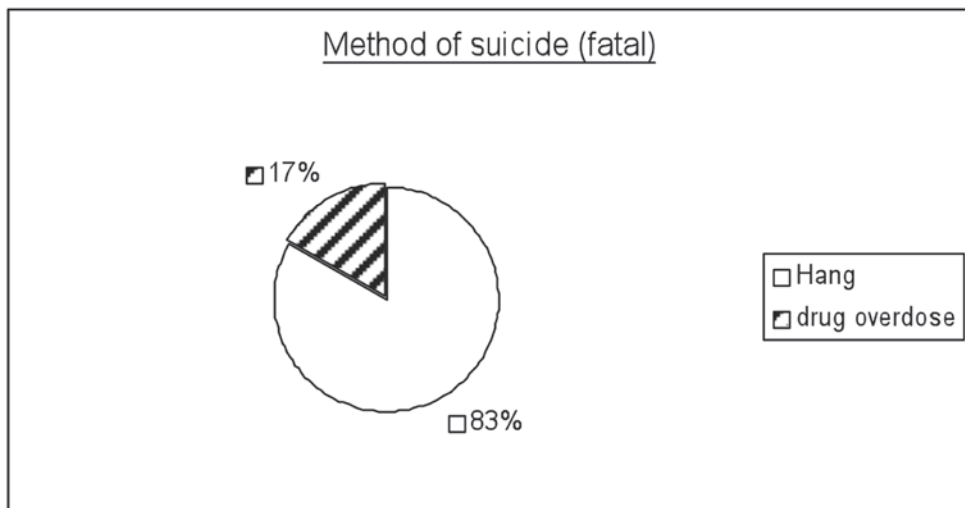


Figure 7 also indicates that Female suicide had been reported earlier (1986-1990) but had remained constant. There was a 1:1 ratio of Male: Female fatal suicide cases.

Figure 8



83% hung themselves and were found dead, while 17% died as a result of drug overdose.

The exact reasons for these fatal incidences could not be accurately pointed out but according to parents and close family members of the victims,

- One case was not purposely to end life, but was an imitating of a video act that went wrong and ended this young person’s life.
- 67% of these cases were believed to be as a result of the victims being beaten by their parents or guardians.



Part 3: Interview

Summarising below are some of the comments and views of survived victims and immediate family members of those that died from suicide, church leaders and members of the general public that were eager to share their experiences and views on suicide in the Tokelau Islands.

There was a general sense of sadness, regret and shame among parents and family members that mourn the loss of their sons or daughters. Parents acknowledged and realised that beating their son/daughter pushed him or her to committing suicide. One parent commented, "If I had known that she would be taking her own life, I would not have beaten her".

Close families of those that lost their lives to suicide were in deep grief, felt guilty, and blamed themselves for their loss. Often ask "WHY", and blaming their parenting for such a sudden devastating event. Such an incidence was never raised and discussed in the home, however, deep inside, parents and close families mourned their loss in their own ways. It was a privilege to share with these families and they were moments of tears. For some, this was the first time to openly discuss the incident since.

Individuals that survived suicidal attempts shared their opinions with a hope that others would learn and benefit from their experiences. One member said, "if I could rewind the time, I would not have done it", "When I recovered, I thought of my family, my parents and my children, and I thanked God that I did not die, I will never do it again.

Some victims indicated that they committed suicide so that their parents would hear them and their views. However, "after I committed suicide, my parents listened for a short time and then it went back to what it was like before". Others indicated that they committed suicide because they:

- They were involved or did something that their parents would not approved and were afraid that they would be beaten
- Had family problems between husband and wives
- Did something that was not culturally acceptable and were ashamed that the community would talk about it and would bring shame to their families
- Were depressed and angry

One victim advised, " When you feel sad and unworthy, or angry and suicidal, talk to someone and share your problem with them. Pray for God's help. Committing suicide would not solve your problem"

One church leader commented, "We should not be gossiping about others and their short-comings, we just do not know how much these attitudes could push our own people to their limit and death. Instead, we should be supporting them"

Discussion

This was the first survey into suicide among the local Tokelau communities in Tokelau and thou there were cases before 1980, the study was limited to the last 25 years to reduce unreliability of data collected from beyond 1980.



Suicidal prevalence in Tokelau

The overall result of the survey indicated that between 1980-2004 there were 40 attempted and 6 fatal suicidal cases in Tokelau, with an increasing trend in recent years. Which gave an attempted suicide rate of 40/1500, and fatal suicide rate of 6/1500 within the last 25 years (1980 –2004). Between 2001-2004, there were 4 fatal cases in Tokelau, thus giving a rate of 4/1500. By comparing these raw figures to those from neighbouring Pacific Island countries and world wide ^{1,4}, and with consideration of the small population, these suicide rates in becomes the highest in the world. The rate of attempted suicide was higher among Male thou there was a 1:1 ratio of fatal cases. This trend aligns with higher Male than Female trend among Pacific Island population and with world norm.^{4,5}

Suicide was more prevalent among the young cohorts (14-25 years old), with 83% of fatalities were below the age of 25. "Societal transition from traditional to modern with attendant intergenerational conflict and pressures on the younger generation is an underlying commonality causal theme of Pacific suicide "(Howard 1986 cited in ref 10). This is reflected in the increasing suicidal trend and the concentration amongst youth. The younger age pattern evident in this study is in accord with the tendency for contemporary youth to rebel at younger ages than in the past.⁴

Low self-esteem

Self-esteem is concerned with the way we judge our own worth, WHO had used low self worth in its discussion of depression and untreated prolonged depression had been widely published as a major risk for suicide. The result indicated a relationship between low self-esteem, suicidal thoughts, and suicidal attempts. 27% reported to have experienced low self-esteem, 13% reported suicidal thoughts and 53% of those that had thought of suicide, attempted suicide and 53% of these had family members that had attempted suicide before.

This clearly shows how depleting low self-esteem could be if not treated. Social network of family, friends and colleague relationships is an important component of and foundation for many people's sense of self-esteem. It creates a safety net and provides opportunity for emotional release and feeling connected to others. Isolation can lead to feelings of depression that may lead to suicidal thoughts and behaviour.⁶

Attempted and completed (fatal) suicide

There were 40 attempted suicides, which accounts for 3% of the total population.

Studies have shown that people who had attempted suicide before are at an increasing risk of re-committing suicide and death from suicide and this risk can remain up to 10 years.^{7,8} These individuals need psychological and social support both for the immediate and long term to avoid re-committing or death from suicide.

Family members that committed suicide

63% of respondent that revealed that they attempted suicide had family members who also attempted suicide previously. People with a family history of suicidal behaviour are more likely to attempt or commit suicide. Children learn through modelling, by watching their parents and relatives cope, and copy them. So, when family member attempt or commit suicide, children may learn that this is how to deal with the situation.⁷



Culture and suicide

There are political and social changes in Tokelau, with incoming new knowledge that clashes with the cultural approaches especially with the younger generation. Children want to be more independent, to be in control, they expect to contribute more to decision making about themselves. However, within the Tokelau culture, parents make the decision in the home and children are expected to do as they are told. Talking back at one's parents is very rude and shameful for parents in the eye of the community.

Tokelauans are proud people, and this pride forces most individuals to try to be perfect. A minor disruption that stands to ruin their reputation makes them feel shame, and unworthy and if they lack the self-confidence and coping skills, it can push them towards suicide. This is a critical point in their lives and they need support so that they can get through it.

Copial punishment is an acceptable way of disciplining children in Tokelau and as shown from the findings of this survey, it contributed to 67% of fatal suicides in Tokelau. Harsh disciplinary actions could cause pain, grief and anger among children and push them towards suicide. As one parent who lost a child to suicide commented, "For all of us parents, guardians, brothers and sisters, listen to our children, give them the chance to share their views and consider them. If I had, I would not have lost my child".

Depression and suicide

Depression had been widely studied and proven to have a strong link with suicide but often, unrecognised and under treated⁹. But there are also factors that can impact this correlation in both ways, either to push towards suicide or avoid suicide. These negative factors may include low self-esteem (personality); family member committing suicide (childhood experience) and peer relationship.¹⁰

The Tokelau communities have little understanding and awareness of depression thus limiting the ability of individuals to define and report symptoms of depression. This survey faced with this challenge and therefore recommending further comprehensive research into the level of depression among the local communities and any impact it may have on suicide.

The study revealed that one contributing factor to suicide was people talking/gossiping. Gossip has suicidal effects on the emotions. Most people think that suicide is harmless, but it is not so. Gossip is abuse and can destroy people's lives and may lead to suicide.

Alcohol, smoking and suicide

70% of attempted suicides were reported to be under the influence of alcohol when the incidence happened. 43% of respondents also indicated they turn to smoking and alcohol to relieve pressure and relaxation. Though there is no direct relationship between smoking and suicidal behaviours, it has a direct relationship with depression, which in turn has an indirect effect of suicidal behaviours.¹¹

Alcohol use at the time of suicidal attempt is an important factor¹² Alcohol causes depressed mood, lowers inhibitions and impairs judgement thus increasing vulnerability to suicide^{7,13}

Recommendations

The recommendations below are general and the Tokelau Government may need to consider each of them



carefully to assess their viability in the Tokelau context and may choose to adapt them or not. If they do adapt the recommendations, there should be clear monitoring and evaluation strategies to allow for better assessment of their success.

Multidisciplinary Taskforce for Suicide Prevention

- The Government of Tokelau, in collaboration with the three local communities, should put together a multidisciplinary taskforce for suicide prevention. However, all government, non-government organizations, churches, community groups (Fatupaepae, Taulelea, Tupulaga) and local communities should all work together and support this taskforce.
- Immediate and priority focus on youth and development (capacity building) to improve their ability to cope with life, improve their self-confidence and enhance their ability to effectively involve in decision-making on issues directly related to them.
- Develop a framework for the effective communication of suicide-related information while protecting the dignity and privacy of those involved.
- Develop a local and national reporting and recording system for suicide (one for attempted and one for fatal). This will greatly assist in further research and especially with the evaluation of suicide preventative strategies.

Review Government Regulations and Village Policies/Rules

The Government of Tokelau, the three atolls and the Tokelau Legal team should work together through the following recommendations to ensure social policies that are fair, just and equitable and addresses the underlying causes of suicidal thoughts and behaviours among the Tokelau population.

- Review village regulations on girlfriend and boyfriend relationships.
Some young couples were forced to get married to escape the law (of getting the girlfriend pregnant before marriage) but was not for love and this contributed to marriage breakdown, extramarital affairs, depression and had led to attempted suicide.
- More strict laws on censoring incoming DVDs and movies especially for children
As indicated in the result, one fatal case resulted from an imitating of a video that went wrong and ended this child's life. Tokelau should step up on censoring of incoming DVDs especially for children. Parents should also make sure that what their children are watching is acceptable.
- Review alcohol policies both at government and village levels
Alcohol influenced an individual's mental state to make good decision, and as indicated in this study, majority of attempted suicide were under the influence of alcohol when the incidence happened.
- Copal punishment should be reviewed under the law
As revealed in this study, copal punishment contributed to most lives lost to suicide, and thus Tokelau should review copal punishment as an acceptable form of disciplining children.

Health services

Tokelau Health department should review its Strategic Directions and put emphasis on Mental Health with consideration of the priority areas of the PIMHNet towards suicide prevention.

Improving facilities and health staffs' capabilities to address suicidal cases when it happens.

- Medical Officers, Nurses and health professionals in Tokelau should be well-equipped with the appropriate skills to recognize early signs and symptoms of depression early and other mental conditions,



such as alcohol abuse, that increases one's risk of suicide so that they can manage these cases soon thus helping in reducing suicidal incidences

- The department should consider training or recruiting psychiatrist, counsellors that would have the trust of the people to provide professional support for individuals in need.
- Because most often, nurses manage hospitals, they should be trained in both medical and psychiatric management of suicidal victims.
- Public Health and Mental Health officials should work together to improving public knowledge and literacy of mental health and suicidal behaviour, and this may contribute to suicidal prevention by changing public recognition and attitudes towards mental health. For example, programs which aim to increase public awareness and understanding of depression may lead to better recognition, treatment seeking and support for those with depression.
- The department should provide training programs, which focus on enhancing the skills of the community, other organizations such as those working in schools, Fatupaepae, Taulelea, youth and other community groups, so to improve identification and referral of individuals at risk of suicide.

Further research

- Further investigations to the impact of alcohol on suicidal behaviours
- Further research into the extend of depression and the relationship with suicide
- Research into the underlying factors that contributed to the differences in suicide rate between the three atolls

Findings from these researches will provide more detailed information that will assist the Health department and the government in developing more specific and focused strategies for suicide prevention.

Limiting factors

The limited understanding of what suicide is among the local communities, the poor recording systems, the public humiliation/community perception of suicide, concealment of suicide, uncertainty of intent, especially concerning reasons for swimming out to sea (as reported in the attempted suicide), may have affected the availability and reliability of the data collected. This might have caused an underestimate or overestimate of the extend of suicide in Tokelau.

However, we trust the accuracy of the data collected in this survey and the results will guide suicide prevention in Tokelau and also will provide the platform for further research development in the future.

Conclusions

The study revealed high suicide prevalence in Tokelau from 1980-2004: 40/1500 attempted suicide and 6/1500 fatal suicides within the last 25 years with an increasing trend in recent years.

Suicide was more prevalent among the young cohorts (14-25 years old). 83% of fatal cases were below 25 years old. Low self-esteem, suicidal thoughts were also higher among younger cohorts (15-25 years old). This indicates an immediate and priority focus on youth, with appropriate strategies to enhance their self-confidence and their ability to cope with life and prevent suicide.

There were more Male (65%) than Female who attempted suicide, but there was an equal ratio of genders among the fatal cases. Atafu reported a higher number of attempted suicides while Fakaofu reported more fatal cases.



Several factors contributed to someone committing suicide, which included:

- Failure within family relationships between parents and children
 - ◆ Children being beaten by parents,
 - ◆ Children were not given the chance to voice concerns within the family circle.
 - ◆ Parents favouring one child over the other
- Relationships problems such as marriage breakdown
 - ◆ Husband or wife having affairs-betrayal of trust and integrity
 - ◆ No supportive from husband or wife
- Boyfriend-girlfriend relationship problems
 - ◆ Parents not approving of girlfriend or boyfriend
 - ◆ Being betrayed by their partners
 - ◆ People gossiping and public humiliation
 - ◆ Lost of loved ones, lost of status within the community
 - ◆ Ashamed or afraid because they had done something wrong/unacceptable
 - ◆ Depressed; bored; anger
 - ◆ And failure in school examination.

83% of fatal suicidal victim hanged themselves and though it is hard to avoid accessing this method, the people of Tokelau should work together to avoid another victim from getting to the situation that will push one towards hanging and committing suicide.

The likely outcomes of suicide, most often, are by their nature, unpredictable. To avoid this event and to help suicide victims, one should break through the fear, depression, anger, and risk factors discussed above. As often, one, could not get through these risk factors themselves, and would therefore need the support of families, friends and the communities. Gossiping and talking behind people's back do not help.

Culture has both positive and negative effect on someone's life; some increase (family and community connectedness) or decrease (little input of children in decision making in the home) the risk of suicide and thus individuals should be cautious, considerate and mindful of the impact of their actions on others.

Religious belief and church is sacred in Tokelau and as reported in this study, have huge impact on how individuals deal with situations. Individuals pray to relieve pressure and low self-esteem.

The multifactorial causative and contributing factors to suicide in Tokelau indicate the need for an urgent collaborative approach between the government of Tokelau, local church leaders, health professionals, non-government organizations, and all three communities to address this emerging challenge and avoid losing another innocent life to suicide.

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This report honours those in Tokelau that had lost their lives to suicide. Our condolences conveyed to all their families and friends. This report would provide a stepping-stone for the government and health department in addressing suicide in Tokelau.

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