Short Report

Social Integration and Suicide in South Korea

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Abstract. The increasing suicide rate in South Korea in recent decades was found to be associated with measures of social integration/regulation (birth and divorce rates).

Keywords: South Korea, suicide, social integration, social regulation, Durkheim

South Korea's suicide rate has increased rapidly in the past 2 decades. The rate of completed suicide in 1982 was 6.8 per 100,000 people per year, but it rose to 19.1 by 2002. In particular, over the past 10 years the rate has risen an average of one percent annually. During this decade Korean society has become an increasingly integrated member of the globalized economy. What appears to have taken place in this process of globalization is an evolution from traditional and collective moral values to a Western, individualistic, and materialistic culture. With this cultural change, Korean society has faced an increasing incidence of social problems, such as drug abuse, crime, divorce, and unemployment. Thus, South Korean society can be characterized as moving toward a state that Durkheim (1897) called anomic, a pathological social condition that weakens the bonds between the individual and society. Individuals who are confronted with anomie may commit a wide range of destructive acts, including suicide.

Durkheim (1897) proposed a theory of suicide based on two dimensions. Social integration is the extent to which the people in a society are bound together in social networks. High levels of social integration result in altruistic suicide, while low levels of social integration result in egoistic suicide. Social regulation is the extent to which the desires and behaviors of the members in a society are controlled by social values and norms. High levels of social integration result in fatalistic suicide while low levels of social integration result in *anomic* suicide. Johnson (1965) argued that it was difficult to distinguish empirically between social integration and social regulation and also that altruistic and fatalistic suicide are rare in modern societies. Therefore, Johnson simplified Durkheim's theory to the proposition that suicide is more common when social integration/regulation is low.

Lester and Yang (1998) operationalized social integration/regulation by using the marriage and birth rates of societies (marriages and births increase social integration/regulation) and divorce rates (divorces decrease social integration/regulation). In regression analyses to predict suicide rates in 21 nations, they found that 22 of the regression coefficients for divorce rates were positive vs. 7 negative, 9 of the regression coefficients for marriage rates were positive vs. 20 negative, and 12 of the regression coefficients for births rates were positive vs. 17 negative. Thus, divorce and marriage rates were consistently associated with suicide rates in the manner predicted by Johnson.

The present study was designed to explore these associations for the suicide rate of South Korea.

Method

Suicide, birth, divorce, and marriage rates were obtained from the National Statistical Office of South Korea. Data were available for the period 1983–2002.

The data were analyzed using RATS (Regression Analysis of Time Series; Doan, 1990). The Cochrane-Orcutt method was used to correct for the serial autocorrelation in the data set.

Results and Discussion

The results of the linear and corrected regressions are shown in Table 1, and the Pearson correlations in Table 2. For the simple correlations, it can be seen that a higher rate

Table 1. Results of the regression analyses to predict the suicide rate

	Constant	Birth rate	Marriage rate	Divorce rate	\mathbb{R}^2	Durbin-Watson statistic
Linear regressions:						
Total	-3.19	0.04	0.77	5.26***	0.85	1.35
Male	-2.42	0.15	0.71	7.15**	0.80	1.24
Female	-4.30	-0.03	0.76*	3.51**	0.93	1.83
Corrected regressions:						
Total	-9.33	-0.53	2.22*	6.52***	0.89	2.34
Male	-19.19	-0.68	3.43*	10.37***	0.87	2.44
Female	-4.28	-0.16	0.98*	3.55***	0.93	1.89

p < .05, p < .01, p < .01, p < .001

Table 2. Correlations between suicide rates and measure of social integration/regulation

		Suicide rate	
	Total	Male	Female
Suicide rate:			
Total	_	1.00	0.97
Male		_	0.95
Birth rate	-0.78*	-0.75*	-0.82*
Marriage rate	-0.80*	-0.79*	-0.81*
Divorce rate	0.92*	0.89*	0.95

^{*} two-tailed p < .001

of births and marriages in a year was associated with a lower suicide rate (overall and for the male and female suicide rates separately), whereas a higher rate of divorces in a year was associated with a higher suicide rate. These associations are in line with predictions from Johnson's theory of suicide.

The results were confirmed to some extent by the regression analyses. In the simple linear (uncorrected) regression, divorce rates proved to be the strongest predictor of the suicide rate, while in the corrected regressions, both divorce and marriage rates contributed significantly to the prediction of suicide rates. However, in the regression analyses, the sign for marriage rates was positive, opposite to that found for the simple correlations. Thus, the role of marriage in predicting Korean suicide rates remains ambiguous.

Suicide rates were available by age for the period 1983–2002 (from ages 10–14 to 75–79), and the simple Pearson correlations between suicide rates and measures of social integration are shown in Table 3. The predicted associations appeared consistently for males only for those 30 years old and older. For females, the associations were always in the predicted direction, but again reached statistical significance consistently only for those over the age of 30.

The cultural changes that have been described above in South Korea in recent decades have been accompanied by an increasing completed suicide rate. The present analyses have indicated that some measures traditionally used to measure Durkheim's concepts of social integration/regula-

Table 3. Correlations between suicide rates and measure of social integration/regulation

	Birth rates	Marriage rates	Divorce rates
Females			
10-14	-0.17	-0.13	0.43
15-19	-0.30	-0.21	0.48*
20-24	-0.23	-0.31	0.40
25-29	-0.35	-0.30	0.51*
30-34	-0.47*	-0.61**	0.76**
35–39	-0.81**	-0.81**	0.95**
40–44	-0.63**	-0.70**	0.80**
45–49	-0.72**	-0.80**	0.89**
50-54	-0.74**	-0.76**	0.90**
55–59	-0.76**	-0.82**	0.88**
60-64	-0.85**	-0.89**	0.94**
65–69	-0.91**	-0.86**	0.92**
70–74	-0.85**	-0.87**	0.92**
75–79	-0.86**	-0.89**	0.94**
Males			
10-14	0.12	0.27	0.05
15-19	0.52*	0.67**	-0.50*
20-24	0.48*	0.31	-0.42
25-29	-0.25	-0.20	0.26
30-34	-0.64**	-0.61**	0.77**
35–39	-0.75**	-0.76**	0.90**
40-44	-0.60**	-0.69**	0.78**
45–49	-0.67**	-0.72**	0.81**
50-54	-0.65**	-0.79**	0.86**
55–59	-0.76**	-0.82**	0.87**
60-64	-0.74**	-0.83**	0.85**
65–69	-0.80**	-0.80**	0.90**
70–74	-0.87**	-0.88**	0.95**
75–79	-0.90**	-0.87**	0.94**

^{*} two-tailed p < .05, ** two-tailed p < .01

tion are associated with the South Korean suicide rate in the manner predicted by Durkheim and Johnson. It is noteworthy that these associations were found only for older adults and the elderly and not for youth, suggesting that the youth and younger adults in South Korea may be facing social pressures and stressors different from their seniors.

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