

Research report

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Police Records of Self-Destructive Behavior in Adolescents and Young People

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Abstract

This study presents an analysis of police records of attempted and/or completed suicides by adolescents and young people in the city of Santa Maria - RS, from 2012 to 2021. Characteristics of the victims and the events recorded were retrieved from police reports, and descriptive statistical analyses were carried out. There was a predominance of victims aged 20-24, male, white, and with completed primary education. Hanging and shooting with a firearm were the most common methods used in suicides, and precipitation was the most common method used in attempts. Most of the events took place in the victims' homes, where their family members found them. It was possible to identify the presence of depression and drug use in some cases, as well as elements that indicated prior planning and communication of the acts. It should be noted that police records are a mighty resource for receiving victims, learning about cases, and, especially, preventing new occurrences.

Keywords: Suicide; Suicide, Attempted; Adolescent; Youth.

Registros Policiais de Comportamentos Autodestrutivos em Adolescentes e Jovens

Resumo

Este estudo apresenta uma análise dos registros policiais de suicídios tentados e/ou consumados por adolescentes e jovens na cidade de Santa Maria - RS, no período de 2012 a 2021. Características das vítimas e dos fatos registrados foram recuperadas dos boletins de ocorrência policial e foram realizadas análises estatísticas descritivas. Predominaram as vítimas com idade entre 20-24 anos, homens, de pele branca e ensino fundamental completo. Enforcamento e disparo de arma de fogo foram os métodos mais frequentes nos suicídios, e precipitação nas tentativas. A maior parte dos fatos ocorreram nas residências das vítimas, que foram encontradas pelos próprios familiares. Foi possível identificar a presença de depressão e uso de drogas em alguns casos, e elementos que indicaram planejamento e comunicação prévia dos atos. Destaca-se que o registro policial é um recurso muito potente para acolhimento, conhecimento dos casos e, especialmente, para a prevenção de novas ocorrências.

Palavras-Chave: Suicídio; Tentativa de Suicídio; Adolescência; Juventude.

Registros Policiais de Comportamientos Autodestructivos en Adolescentes y Jóvenes

Resumen

Este estudio analiza los registros policiales de suicidios intentados y/o consumados por adolescentes y jóvenes en la ciudad de Santa María-RS, de 2012 a 2021. Las características de las víctimas y los hechos registrados se recuperaron de los informes policiales y se realizaron análisis estadísticos descriptivos. La mayoría fueron hombres, entre 20 y 24 años, de piel blanca y estudios primarios completos. Colgar y disparar arma de fuego fueron los métodos más recurrentes en los suicidios, mientras la precipitación en los intentos. La mayoría ocurrieron en las casas de las víctimas, encontradas por sus familiares. En algunos casos, se logró identificar la presencia de problemas de salud mental como depresión y consumo de drogas, así como elementos que indicaban plan de suicidio y comunicación previa de los actos. El estudio demostró que el registro policial es un recurso útil para acogida, conocimiento de los casos y, especialmente, prevenir nuevos sucesos.

Palabras clave: Suicidio; Intento de Suicidio; Adolescencia; Juventud.

Introduction

Suicide is a public health problem that is included in self-destructive behaviors, defined as those in which the individual perpetrates violence against themselves. Therefore, in addition to self-harm, it also includes so-called suicidal behaviors, such as suicidal ideation, suicide attempts, and suicide itself (You & Lin, 2015). Self-destructive behavior is a multifactorial phenomenon that constitutes a significant global public health problem, leading to around 700,000 deaths annually worldwide, which represents a global rate of 9.0 per 100,000 inhabitants (World Health Organization, 2021). Globally, it is the fourth leading cause of death among young people aged 15 to 29, and for every suicide, many other people attempt suicide (World Health Organization, 2023). In Brazil, between 2010 and 2019, there were 112,230 deaths by suicide, which represents a 43% increase in the annual number of deaths (from 9,454 in 2010 to 13,523 in 2019), especially in the South and Central-West regions, which have the highest suicide rates among Brazilian areas. Rio Grande do Sul is the state with the highest suicide rate among Brazilian states, at 11.8 per 100,000 inhabitants (Ministry of Health, 2021).

Despite this worrying scenario, suicide can be prevented (Ministry of Health, 2021) because knowledge about the incidence of the phenomenon, as well as the characteristics of the victims and the circumstances that act as risk factors for suicidal behavior, can enable the development of preventive actions that have the potential to reduce the stigmas that permeate the phenomenon, especially by contributing to the identification of populations at risk (Franck et al., 2020). In this sense, one preventive factor that deserves to be highlighted is the quality of care provided to people at risk of suicide, who have attempted suicide, or who are family members of the suicidal person. This requires the coordination of sectors such as health, education, and public safety in recognizing and welcoming people with a history of suicidal behavior, which can be done through regular training of professionals who deal directly with these cases (Moura et al., 2022).

However, it is worth noting the unease among health professionals who work with self-destructive behaviors, who generally report the presence of a feeling of helplessness arising from contact with death and a series of taboos surrounding the subject, which often make preventive actions impossible (Ferreira et al.,

2019). Regarding child and adolescent suicide, Silva Filho and Minayo (2021) highlight the incidence of a “Triple Taboo” since it includes the “Death Taboo”, which represents the fear present in various cultures of approaching the end of life or the mystery of death, the “Suicide Taboo,” based on the notion of suicide as an attempt against life itself but also against the survival of the human species, also against the survival of the human species as a whole, and the “Child and Adolescent Suicide Taboo”, with even greater incommensurability, since children and adolescents are culturally considered representing the permanence of the species in the future.

Considering this, if the problem of suicide is challenging for health professionals, one wonders how much this malaise can affect other professionals, such as public security professionals, involving civil and military police officers, for example. With this in mind, it's worth thinking about how these taboos surrounding the suicide of young people and adolescents can be amplified within police organizations. Self-destructive behavior is not a crime and can, therefore, be neglected in cases considered crimes requiring investigation. In addition, the presence of the “warrior ethos” in police culture can make it difficult to pay attention to instances in which vulnerabilities and psychological distress are present, such as suicide cases. This is because the warrior *ethos* imposes a demonstration of strength based on a hypermasculine and militaristic identity of the conquering “warrior”, who cannot show himself to be fragile and sensitive (Costa Neto, 2022).

It should be noted that contemporary epidemiological studies on the phenomenon of suicide generally only use data from the Notifiable Diseases Information System (SINAN) of the Information Technology Department of the Unified Health System (DATA-SUS), a platform on which epidemiological information is cataloged and made available by health services (Bahia et al., 2020; Roberto, 2019; Silva et al., 2020). Thus, there is a lack of studies using other sources of information, such as police records compiled from the Civil Police's police reports (PR), as this document contains a wealth of information, with data that is sometimes missing from health sector records, and which can help to understand the phenomenon (Conte et al., 2017; Gianvecchio & Mello Jorge, 2022).

In addition, police records are still little known academically, not least because not all suicides that generate police reports are included in SINAN, and vice versa, aspects that corroborate the relevance of

this investigation. In this sense, police reports record events, whether criminal or not, which requires them to be classified as attempted or completed and register the participants as communicators, witnesses, suspects, or victims. Therefore, since this study has these records as its source, we have chosen to use the document's characteristic terms: attempted or completed suicides to identify the events recorded and victims to identify the people who carried out the events recorded. It should be noted that these same terms have been used in similar studies (Gianvecchio & Mello Jorge, 2022).

This study sought to characterize the cases of attempted and/or completed suicides by adolescents and young people in the city of Santa Maria - Rio Grande do Sul between 2012 and 2021, based on police reports. For this study, adolescents and young people are defined as those aged between 10 and 24 (Ministry of Health, 2007). The study is socially and scientifically relevant, as it contributes to the advancement of knowledge about the phenomenon of suicide, which can help to break down taboos and provide important information for coping and developing preventive strategies to help reduce the mortality of these populations and the impact of the phenomenon on families and other survivors.

Method

A quantitative documentary analysis study was carried out, with retrospective data collection, comprising all the records of suicide, both attempted and completed, reported in police reports registered by the Emergency Police Station (DPPA, in Portuguese) in the city of Santa Maria - RS, a municipality located in the central part of the state of Rio Grande do Sul.

Participants

Data were collected from a total of 521 Police Occurrence Reports (PRs) registered over ten years (2012-2021), all involving attempted or completed suicides. Of this total, 102 PRs had adolescents and young people as victims, who were considered for the analysis.

Data collection instruments

The instrument used in this research corresponded to the PRs' structure, which contains two parts. The first refers to the mandatory data, which includes the qualifications of the participants (at least the reporting party, which usually includes date of birth, gender, skin

color, education, marital status, parentage, eye color, address, and profession), as well as the date, time and place of the incident, which are required by the system itself as a condition for proceeding with the registration process. The second, entitled "history," consists of a narrative account of the incident made by the police officer at their discretion.

Information was then collected on the profile of the victims (age, gender, skin color, schooling, who they lived with, profession, presence of health problems, and previous treatments) and on the events recorded (year, place, manner, who found the victim, presence of prior attempts and/or self-mutilation, presence of a note, farewell letter or other previous communication).

Data collection procedures

Initially, consent was obtained from the police to access the data. Subsequently, with approval from the Research Ethics Committee, data was collected from the police. The PRs were accessed through the Judicial Police System (SPJ), and only PRs from the last decade (2012-2021) were considered. To this end, the PRs were included if they included the typifications of "completed suicide" or "attempted suicide," cataloged as the primary or complementary fact, included in any occurrence, and included victims between the ages of 10 and 24 (adolescents and young people). There were no exclusion criteria due to the peculiarity of the police report, which always contains significant information about the victim that must be filled in.

Data Analysis Procedure

The researchers collected the information and entered it into a spreadsheet using SPSS software, version 22.0. Then, descriptive statistical analyses were carried out (distribution of frequencies and calculation of means and standard deviations).

Ethical procedures

The project followed all the guidelines for research with human beings and was approved by the Research Ethics Committee (CAAE 52472621.0.0000.5346).

Results

It should be noted that although the sample consisted of 102 PRs, it was identified that two different victims were registered in the same PR. In addition, three subjects were present in two RPs each. So, if you add 101 plus 1 (due to the PR that had two victims) and

subtract 3 (due to the three people who appeared in two PRs each), you end up with a total of 99 individuals who attempted or consummated suicide.

During the period under study, 60.8% ($n=62$) of the 102 PRs were suicide attempts, and 39.2% ($n=40$) were completed suicides. According to the raw data shown in Figure 1, 2014 ($n=16$) and 2020 ($n=15$) were the years in which the highest number of PRs were recorded. Attempts were more frequent in 2014 ($n=8$), 2018 ($n=9$) and 2020 ($n=8$), while completed suicides were more frequent in 2014 ($n=8$), 2019 ($n=7$) and 2020 ($n=7$).

The characteristics of the victims can be found in Table 1, which shows the raw data and the results of the descriptive analyses carried out. The age of the victims ranged from 11 to 24 years ($M=19.38$; $SD=3.22$), with a higher frequency in the 20-24 age group ($n=56$). Regarding gender, 67.6% ($n=69$) were male, especially regarding completed cases, in which 80% ($n=32$) of the victims were men.

As for skin color, both in attempted and completed suicides, young victims and adolescents with white skin predominated. In terms of schooling, most victims had completed elementary school (51%, $n=52$), an even higher percentage in cases of complete suicide

(60%, $n=24$). A significant age-grade gap was identified since most individuals who only had primary education were of an age compatible with secondary or higher education, an association verified using the Chi-Square Test ($\chi^2=25.199$, $p\leq 0.001$).

It was observed that information on the victims' age, gender, schooling, and skin color was present in most of the police reports, but other aspects, such as who they lived with, the presence of health problems, self-mutilation, or previous treatment, were often not mentioned. For example, in 55.9% ($n=57$) of the cases, there was no information on whom the victim lived with, which would be necessary for identifying the presence of a support network.

In the records where information on the support network was present, 73% ($n=27$) of the cases lived with their family of origin, 21.6% ($n=8$) lived with their established family, and only 5.4% ($n=2$) lived alone. Thus, we observed the presence of people living in proximity in numerous instances, who can be considered essential points of support for suicide prevention. However, this issue needs to be put into perspective due to the absence of this information in most records (63.7%, $n=65$), which may indicate the precariousness of the support network in these cases.

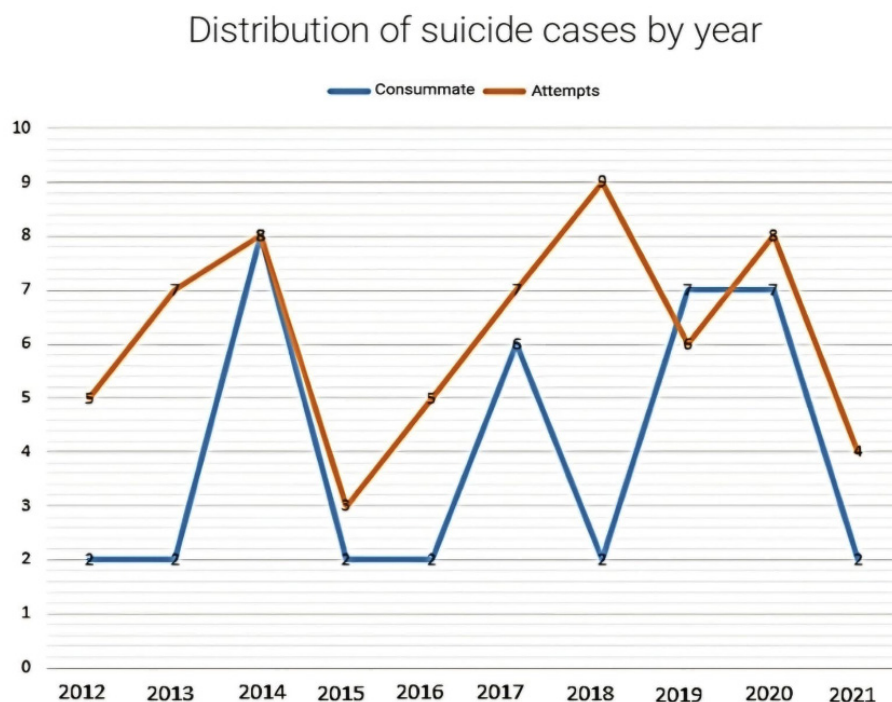


Figure 1. Distribution of suicide cases by year (2012-2021)

Table 1.
Characteristics of the victims

Variables	Attempted suicides		Completed suicides	
	N	%	N	%
Age				
11 - 14 years	5	8	3	7.5
15 - 19 years	23	37.2	15	37.5
20 - 24 years	34	54.8	22	55
No information	-	-	-	-
Gender				
Female	25	40.3	8	20
Male	37	59.7	32	80
No information	-	-	-	-
Skin color				
White	50	80.6	35	87.5
Black	1	1.6	2	5
Brown/mulatto	9	14.5	2	5
Yellow	-	-	1	2.5
Indigenous	1	1.6	-	-
No information	1	1.6	-	-
Education				
Primary education	28	45.2	24	60
High school	18	29	7	17.5
Higher education	3	4.8	2	5
Not literate or semi-illiterate	2	4.8	2	5
No information	10	16.1	5	12.5

Note. elaborated by the author.

The presence of self-mutilation was indicated in only 17.7% ($n=11$) of the attempted cases, with no mention of it in the completed cases. It was present, for example, in the PR of the case of a 22-year-old woman who, after cutting her neck, woke up her friend, who was sleeping in the same house, who immediately called the Mobile Emergency Care Service (SAMU) to help her, and survived the injuries.

As for the presence of health problems in both attempted and completed suicides, this information was present in only around 30% ($n=34$) of the records. In attempted cases, drug use (20.8%, $n=5$) and depression (20.8%, $n=5$) were the most frequent problems, and in completed cases, depression was more frequent in 15% of cases ($n=6$). The relationship between drug use and suicidal behavior was evident in one of

the cases that led to two police reports, in which the victim was male, 22 years old, white, single, and had attempted suicide by throwing himself in front of a car on a public road. A year and five months later, a second attempt was recorded by hanging himself with an electric wire in the bathroom of his home. In this second episode, the victim was resuscitated by military police and hospitalized. According to the record, the ex-girlfriend, who lived with the victim, together with another woman, reported that the victim was a user of psychoactive substances and had already left a farewell letter for both.

Regarding the characteristics of the events, it was observed that hanging and firing a firearm were the most frequent methods in fatal outcomes. At the same time, rushing was the method most adopted by

young people and adolescents in attempts, according to the data in Table 2.

In terms of geographical location, the east and west regions were the most frequent for completed suicides (40%, $n=16$), while the urban center was the most frequent location for attempted suicides (16%, $n=25.8$). Regarding the nature of the location of the events, more than half of the events took place in private places (66.7%, $n=68$), with the majority taking place in the victim's home, both for suicides (60%, $n=24$) and attempts (41.9%, $n=26$), which means that it is even more common for young people and adolescents to take their own lives in the place where they live. The cases in public places (28.4%, $n=29$) were in institutions of deprivation of liberty, universities, and public roads such as bridges, highways, streets, or woods. As most of the cases occurred in the victims' homes, it was more common for family members to have found the subject (42.2%, $n=43$), followed by public security professionals (13.7%, $n=14$).

The presence of family conflicts was evident in the recording of some cases, such as one that was present in two different records, as one attempt was followed by death, even after hospital treatment. The victim was a 19-year-old white male, single, with a high school education, who, according to the record, had been drinking alcohol and had argued with family members on the day of the incident. The victim's sister said that he was an orphan and was "upset" after having a fight with his uncle and with her, who witnessed the argument between her uncle and the victim, who then shot himself.

With relation to the characteristics of the events recorded, information on the place where they took place, the method used, and how the victims were found was present in most of the records. Still, other information, such as the presence of previous attempts or communications, as well as farewell letters or notes, was infrequent. In only 11 cases there was information about previous suicide attempts, and in 9 cases, the information was that there had been at least one last attempt.

The importance of this data can also be seen from a more detailed description of one of the cases that led to two suicide attempt records. The victim made the second attempt five months after the first, and it even took place on the last day of the month (31/03 - 31/08). The victim was female, 22 years old, white, single, with a high school education. In the first episode, she was in the street threatening to hurt herself with a razor blade and throwing her body at

cars, at which time she was taken to the Emergency Care Unit (UPA, in Portuguese). In the second case, the victim was at home with a friend, who woke her up with cuts on her neck. Rescued by SAMU, she resisted getting into the ambulance and had to be restrained by the team.

Concerning the presence of a farewell letter or note, most police reports in the sample did not contain this information (90.2%, $n=90$). However, when this information was presented, it indicated essential aspects for understanding the cases and identifying prior planning. An example of this was the case of a bulletin with two victims of completed suicide, who were a couple: a 16-year-old white single woman with primary schooling and a 22-year-old white single man with no education. The victims were discovered by the teenager's father (who had previously reported his daughter missing) and the man's mother, as the couple had committed suicide by hanging themselves from a tree in a remote area. There were also personal objects belonging to the couple, such as a wall of photos of the couple, cell phones, a teddy bear, a comforter, a book of Shakespeare's *Romeo and Juliet*, and several notebooks with handwriting like a farewell letter. In the couple's clothes were found a two-page farewell letter handwritten by the woman and a three-page letter handwritten by the man. They signed both letters, which were dated the day before the incident was identified.

In some cases, these signs may be quite explicit, such as those in which there was some prior communication. This information was present in around 15% ($n=9$) of the records of attempted suicide cases and in 7.5% ($n=3$) of completed cases and can be subtle or explicit. There is, for example, a report in one of the PRs about what happened in March 2019, in which a 22-year-old woman had to be restrained on the street by people after threatening to take her own life if she wasn't hospitalized, which point she even rushed towards cars, carrying a razor that would be used to cut herself; the same woman who, in August of the same year, cut her neck and had her life saved by the help provided by her friend, who the victim woke up while she was sleeping in the same house. In another case, also reported in the police report, a 23-year-old man was found in the bathroom stall, unconscious, not breathing, and with a light wire in his right hand; after being revived on the spot, he was taken to the hospital; before the act, however, the victim had left a farewell letter, located under the sofa that had been placed as an obstacle to opening the front door.

Table 2.
Characteristics of the Facts

Variables	Attempted suicides		Completed suicides	
	N	%	N	%
Region				
City center	16	25.8	3	7.5
East center	8	12.9	1	2.5
Center west	4	6.5	5	12.5
East	5	8.1	8	20
Northeast	11	17.7	5	12.5
North	4	6.5	5	12.5
West	5	8.1	8	20
South	4	6.5	2	5
Districts	3	4.8	2	5
Another municipality	1	1.6	1	2.5
No information	1	1.6	-	-
Mode				
Hanging	18	29	29	72.5
Precipitation	21	33.9	2	5
Substance ingestion or overdose	9	14.5	3	7.5
Firearm discharge	4	6.5	5	12.5
Cutting/mutilation	8	12.9	-	-
Explosion/fire/electric shock	1	1.6	-	-
No information	1	1.6	1	2.5
Place of the incident				
Public road	23	37.1	6	15
Private road	39	62.9	29	72.5
No information	-	-	5	12.5
Who found it				
Family members	17	27.4	26	65
Friends/colleagues	10	16.1	3	7.5
Security professionals	12	19.4	2	5
Health professionals	2	3.2	1	2.5
Neighbors	5	8.1	4	10
Strangers	10	16.1	1	2.5
Workers at the scene	1	1.6	1	2.5
No information	5	8.1	2	5

Note: elaborated by the author.

Discussion

The results of the study show that 2014 and 2020 are the years with the highest number of PRs recorded

for attempted and completed suicides involving young people and adolescents. They refer precisely to two significant periods: 2014 corresponds to the aftermath of the Kiss nightclub fire, a tragedy that occurred on

January 27, 2013, and caused the death of 242 people, mostly young university students, leaving another 636 injured, classified by the National Civil Protection and Defense System as a disaster, which placed the municipality in an emergency and whose effects are still felt today (Noal et al., 2016). 2020 saw the start of the COVID-19 pandemic, which the WHO characterized as such in March 2020. The health situation has put adolescents and young people in a vulnerable situation, as many have been deprived of attending school and socializing with friends. Others have had to take on a position of caring for their elders, putting themselves at risk while trying to pursue their educational and professional activities to ensure their future, with losses in the fields of education, work, income and, above all, mental health (Sobrinho et al., 2022). Both situations triggered acute psychic suffering in the population, as they were traumatic events that triggered deaths and mourning processes that may have contributed to the increase in attempted and completed suicides. Particularly with the Kiss nightclub fire, where most of the victims were young people, it is believed that the emotional impact of the event may have weakened many people, especially family members of victims and survivors.

Most of the victims of completed or attempted suicides were men, especially in the case of completed suicides. In this sense, research indicates that women are more likely to attempt suicide because they often use fewer effective methods (Brixner et al., 2016). In addition, women tend to have a more consolidated support network, which contributes to them seeking help in times of crisis, and they generally take greater care of their own health, with lower alcohol consumption than men (Oliveira et al., 2016).

As far as the skin color of young people and adolescents is concerned, both in suicide attempts and consummations, white-skinned victims predominated, with a minimal proportion belonging to other ethnic groups. This can be explained by the ethnic composition of Rio Grande do Sul, which was colonized by countries of European origin. In this sense, there are several other studies in which most adolescents from Rio Grande do Sul who attempted suicide were white (Marcondes Filho et al., 2002).

As for schooling, it was observed, both in attempts and consumptions, that the majority had completed elementary school, although many were of an age compatible with more advanced schooling, which is in line with studies that show school attendance as a protective factor against suicide attempts and self-harm involving

adolescents, suggesting the need for greater attention to individuals with suicidal ideation who have no or little schooling (Pinheiro et al., 2021). In this sense, Sobrinho et al. (2022) showed that the pandemic affected the mental health of young people and adolescents, especially by promoting absence from school during the period, as well as an increase in the use of alcohol and other drugs and reports of self-harm and suicidal thoughts were related to young people being away from classrooms, even virtual ones, which may also explain the large number of cases of attempted and completed suicide during the pandemic period.

With the presence of self-mutilation, this was indicated in a negligible proportion of attempted cases, with no mention of gender in completed suicides. In this regard, it is worth reflecting on whether there is an association between self-injury and suicidal behavior, as some studies already indicate that there is not necessarily an association between self-injury and suicidal behavior (Silva et al., 2022; Fonseca et al., 2018; Gabriel et al., 2020). This scenario falls under the heading of so-called non-suicidal self-injury (NSIA), which is an action without a conscious idea of suicide, but which can generate significant injuries. Although self-injurious behavior involving adolescents and young people may not constitute a suicide attempt, it is, in fact, a public health problem that deserves attention (Aguiar et al., 2022), as the effort can gradually become a method in the repertoire of response strategies to repeated self-injury (You & Lin, 2015). Self-injurious behavior stems from intrapersonal and social vulnerabilities and adversities in governing emotions (Fonseca et al., 2018). Therefore, ALNS is a harmful and destructive mechanism for dealing with emotions to momentarily relieve suffering. Epidemiological data is still imprecise, reinforcing the need to develop strategies and train health teams to deal with this problem (Gabriel et al., 2020).

The presence of illnesses was found in a few records, but it was possible to identify that drug use and depression were the most frequent, considering the cases in which this information was accessed. This data is in line with the studies carried out by Moura et al. (2022), who showed alcohol intake as a factor associated with suicide attempts, and by Gournellis et al. (2018), who pointed out that, among mood disorders, major depression is the one most related to suicidal behavior. In this regard, public safety professionals must be equipped to address these aspects and make referrals for treatment in cases of attempts, as well as for family members and people close to them in cases of suicide.

As for the characteristics of the events, it was observed that in complete suicides, the most recurrent methods were hanging and firing a firearm, while in cases of attempts, precipitation was the most common method adopted. These findings are supported by a recent study by Gianvecchio and Mello Jorge (2022), which considered data from the Health and Public Safety sectors and found that hanging was the most common method adopted by both sexes, indicating that it was more prevalent among men than women, while the study by Aguiar et al. (2022) found a high prevalence of suicide attempts involving women.

Regarding the geographical regions where they occurred, it was found that suicide attempts occurred mainly in the urban center, while completed suicides were concentrated in the east and west regions. The outlying areas, which are the most vulnerable, were more likely to trigger fatal events. For no other reason, Melara (2008) found in his study that peripheral neighborhoods in Santa Maria, such as Juscelino Kubitschek (west), for example, have various types of deficiencies, such as low-income/schooling, problems with basic sanitation, lack of paving in the streets, etc., with people at risk. On the other hand, in the more economically affluent urban center, there were more attempts, in line with the findings of Silva et al. (2020), who, when seeking to characterize the morbidity and mortality profile of adolescents in Brazil, identified that most suicide cases involved adolescent victims aged between 15 and 19 living in urban centers, which often constitute calls for help.

In addition, the results indicated that more than half of suicide attempts, and complete suicides took place in private places, with the majority occurring in the victims' homes - sometimes in the homes of people the victim lived with. This data is in line with the literature (Ministry of Health, 2021; Moura et al., 2022), which has shown that the home is the primary setting for this type of phenomenon, highlighting the need for family vigilance, especially for users with a history of previous attempts.

After attempting or completing suicide, in most cases, the victim was discovered by family members, which is in line with studies such as that by Moura et al. (2022). The authors reveal that the home is the primary setting in which the phenomenon occurs, stressing the importance of family vigilance, as well as that of third parties, who must together form a support network to coordinate care, detect suicidal behavior early on, and provide tools to deal with situations of

psychological distress. On the other hand, when comparing age groups, there are different reasons described in the literature to understand the phenomenon. In the younger population, relationship problems (dating or family) stand out as factors that contribute to triggering suicidal behavior (Moura et al., 2022), in other words, family conflicts are often directly associated with suicide (Gianvecchio & Mello Jorge, 2022).

It should be noted that information on previous attempts was negligible, highlighting that this is a topic that needs to be reported as a matter of priority since, as stated by Vidal and Gontijo (2013), the risk of suicide increases with the number of attempts and is also related to shorter time intervals between these attempts. Finally, a few of the PRs contained information on the presence of farewell notes. In this respect, the victim often plans to communicate something and leave this message as a note or a letter. Most of the time, the aim is to recount suffering, ask for forgiveness, declare love and express affection, point out posthumous care and instructions to be followed, blame the other person, or express resentment (Carvalho & Pacheco, 2016).

In this respect, it is worth highlighting the importance of the role of peers, whether in promoting life and preventing suicide or even, at times, in the manifestations of death: if, on the one hand, these bonds have the potential to break the silence, offering listening and acceptance for suffering, preventing suicide, on the other hand, they also have the potential to find support and instigation for the perpetration of the tragic outcome. In one of the cases described in the results, in which a young couple committed suicide by hanging themselves, the location of the event (through the letters and other elements that made up the scenario) shows the planning, demonstrating that the web of relationships (with each other and with others) linked the victims much more to death than to life. This is also a case in which suicide is a message: the scene and the way it happened seem to communicate the love between the couple, perhaps a forbidden love. From this, it is possible to understand that suicide can have the status of an act that requires interpretation and that is directed at others. It is essential to be attentive to listening for signs of suicide in numerous instances because young people will give clues through their excessive silences and their actions, which have a function and want to say something, and it is essential to listen to them (Ribeiro & Guerra, 2020).

According to the literature, most suicide cases are premeditated. The victim has shown their intention

beforehand, and it is essential to combat the misconception that suicide is always an act of impulse (Wagner, 2016). Therefore, to prevent such occurrences, it is necessary to be attentive to the signs, ranging from explicit communication to silence. When you encounter these clues, it's essential to give them a place to speak and listen to them, encouraging them to talk and thus make sense of their pain and suffering. Giving people a place to communicate allows them to emerge from invisibility and weave bonds with others and life (Ribeiro & Guerra, 2020). This is also true for institutions and, more specifically, for police institutions that record cases, which is a compelling resource for giving a voice to both suicide attempt survivors and family members and close people affected by suicides, as it is an opportune moment for constructing meanings and establishing bonds with life. In a way, this research sought to provide an opportunity to listen to the messages present in the records made, trying to read the messages left by the acts in the case reports. Some were quite explicit in detailed reports, others less evident in shorter reports, but in general, it was possible to identify that the facts contained messages and that the sooner they were heard, the more could be achieved in terms of suicide prevention.

Final considerations

The article presented an analysis of police records of attempted and/or completed suicides by adolescents and young people in the city of Santa Maria - RS, between 2012 and 2021. It was possible to identify a series of characteristics of the victims and of the facts, but it was also evident that there was a lack of information in the police records in relation to some fundamental aspects for understanding the phenomenon of suicide in adolescence and youth, such as the presence of health problems, previous treatment, self-mutilation, farewell letters/bills, previous attempts or previous communication.

However, despite this and considering the data present, there was a significant rate of victims with health problems, mainly related to depression and drug use, demonstrating the importance of psychiatric comorbidities in triggering suicide situations and attempts. Furthermore, victims with a previous attempt or previous communication deserve attention, and this information is extremely relevant since the risk of suicide increases with the number of attempts (as well as being related to shorter time intervals between these

attempts) and cases of premeditated suicide are not uncommon, in which the victim demonstrates their intention beforehand, favoring identification and intervention by third parties.

In the same vein, the inclusion of information related to farewell letters/letters is decisive for understanding the phenomenon, as seen in one of the reports, in which the couple, victims of suicide, left several signs pointing to the planning of the act, with their respective motivations. Understanding these circumstances would make it possible to identify risk situations and offer shelter, support, and care to potential victims and survivors. Therefore, this is yet another fundamental piece of information to be included in police records, which, although they are often incomplete, have been evaluated as more satisfactory than those made by health professionals.

That said, police records of suicide cases, whether attempted or completed, are a compelling resource for receiving people, learning about cases, and, especially, preventing new occurrences. This is because they provide an opportunity for preventive care to be carried out by public security professionals, initially giving way to the words of those involved in the phenomenon but also offering initial reception and referral to health services. We, therefore, need to think about ways of sensitizing public safety professionals to the importance of their role as caregivers in these cases, training them to interact with the people who report the incident to give them room to speak and encourage narratives that make it possible to construct meanings and connect with life, especially since silence prevails in cases of this nature, mainly because of the taboos associated with the subject of suicide, especially when it comes to children and adolescents (Silva Filho & Minayo, 2021). In addition, the place of police officers in the care network needs to be strengthened, as they are agents with a high potential for identifying risks and making referrals.

Thus, the study's limitations include the underreporting of attempted and completed suicides, especially among young people and adolescents, which indicates that the rates, which are already worrying, are underestimated and, therefore, analysis of them requires caution. On the other hand, the strengths include the relevance of studies such as this one, which analyze information that is difficult to access but which is fundamental to deepening discussions on the subject, both in terms of knowledge of the phenomenon and in terms of its prevention, reverberating in practices that are not only effective but also efficient.

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