

## Suicidal Ideation Among Adolescents

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#### Abstract

*Suicide is the third leading cause of death among people between ages of 10 to 24 years, with about 4400 lives lost each year. Prevalence of suicidal ideation is usually found to at an alarming rate among adolescents. Vijaykumar, 2007, suggested that failure in examination, anticipated punishment, physical illness, potentially self-injurious action with a non-fatal outcome and impending loss love are the major risk factors. Adolescent suicide is generally categorized as someone below age 21, deliberately ends their own life. The majority of suicides (37.8%) in India are by those below the age of 30 years. The fact that 71% of suicides in India are by persons below the age of 44 years imposes a huge social, emotional and economic burden on our society.*

**Key Words:** Suicidal Ideation, prevalence, failure in examination.

Suicide is prevalent across continents under different stressful situations. It may be considered as an extension of symptoms of severe depression. Suicide is characterized and defined by an irrational desire to die. This irrational thought is regarded as a permanent solution to the worries of the individual rather than facing the difficulties and discomfort raised while facing the real-life failures and inability to cope. It is regarded as a complex behavior as a result of uncertainties in dealing with stress factors and underlying causes. It is considered as second most common cause of death among

teenagers and among top ten causes at middle ages. Possible cause of suicide among adolescent are Family history of mental disorders or substance abuse disorder, physical or sexual abuse, over expectation by parents and self as well, unachievable goals, family violence and highly competitive environment.

Brabant, Habert et al (2013) explored the clinical profiles of 77 female teenagers survivors of sexual abuse and examined the association of abuse-related and personal

variables with suicidal ideations. Analyses revealed that 64% of the percipients experienced suicidal ideation. Finds from classification and regression analysis indicated that depression, PTSD, and hopelessness discriminated profile of suicidal and non-suicidal survivors. They suggested that suicidal ideation is not the sole variable to be discussed and explored but depression, hopelessness and post-traumatic stress symptoms are also related to suicidal ideation in survivors.

Brauch, Decker, et al (2011) examined adolescent participation in self-asphyxial risk taking behaviour and its relationship with other adolescent risk behaviours, including non-suicidal self-injury. Researchers proposed that participation in SAB and NSSI would be associated with suicidal behaviours, disordered eating and substance abuse. Using a large community-based sample, results revealed preliminary associations between self-asphyxial risk

taking behaviour and non-suicidal self-injury reported more concurrent risk behaviours. Results indicate that greater awareness is important.

## **Methods**

**Objectives:** 1. To assess suicidal ideation among adolescent. 2.To assess role of Psychological factors in suicidal ideation among adolescents.

**Hypothesis :** The study was an exploratory in nature, so it was hypothesis free.

**Sample:** A sample of 39 adolescent aged 13-18 were taken using purposive sampling. The sample of the study was collected from same geographical area i.e. Delhi and NCR.

**Inclusion Criterion:** Only adolescent aged 13-18 years were included.

**Exclusion Criterion:** Adolescent below 13 years and above 18 years were excluded and adolescent with premorbid psychiatric and medical ailment were excluded.

**Measures:** To understand the problem and objectives, a twofold approach, comprising of quantitative as well as qualitative analysis was adopted.

**The participants were assessed following tools:**

1. Consent form
2. Demographic data sheet
3. Suicidal ideation questionnaire ABOUT MY LIFE by William M. Reynolds was used.

**Scoring:** Scoring was done by placing the scoring key over the SIQ form HS questionnaire so that the black dots exactly overlies the black dots on the questionnaire. Items 2,3,4,7,8 and 9 were identified as critical items. The SIQ have high reliability (.97) and validity (.94).

**Statistical Analysis:** data was analysed using SPSS(Statistical Package for Social Sciences) 11.5. The most suitable method of analysis were descriptive statistics and correlational analysis.

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Table 1. Demography	
	Frequency (%)
Age:	
13-15 years	1(2.6)
16-18 years	38(97.4)
Gender:	
Male	26(66.67)
Female	13(33.3)
Grade:	
10	14(35.9)
11	25(64.1)
Educational Qualification:	
Secondary	9(23.1)
Senior secondary	30(76.9)
Substance use:	
Yes	0(0)
No	39(100)
Living with family	
Yes	39(100)
No	0(0)
previous self-harming attempts:	
yes	8(20.5)
no	31(79.5)

ents. Here we can see that 38 individuals ,97.4% of the total no. of respondents belong to age group 16-18 years ,and 1 of them belongs to the age group of 13-15 years ,which is 2.6% of the total sample.26 of them are males, comprising a percentage of 66.67%, 13 of them are females comprising a percentage of 33.3%.While 14 of the total sample,35.9% are studying in

grade 10, 25 of them belong to grade 11 which is 64.1% of the total. Also all of them are senior- secondary school qualified, show no substance use and are living with parents. 8 of them has attempted self-harming behaviours which 20.5% of the total sample and 31, which is 79.5% of the total sample, have shown no previous self-harming attempts.

From Table 2, it is evident that in item 2, i.e. "I thought about killing myself" the highest frequency i.e. 19, 48.7% of the total percentage is shown by the response "I

never had this thought" and the lowest frequency is of the response "couple of times a week" i.e. 2, 5.1% of the total. item 3 i.e. "I thought about how I would kill myself" again shows highest frequency of the response "I never had this thought" i.e. 20(51.3%) and the lowest frequency is of the response "couple of times a month" i.e. 1, 2.6% of the total percentage. in item 4 i.e. "I thought about when I would kill myself" the highest frequency i.e. 20, 51.3% of the total percentage is shown by the response "I never had this thought" and the lowest

Item/Response	I never had this thought (%)	I had this thought before but not in the past month (%)	About once a month (%)	Couple of times a month (%)	About once a week (%)	Couple of times a week (%)	Almost everyday (%)
ITEM 2	19(48.7)	13(33.3)	0(0)	0(0)	0(0)	2(5.1)	5(12.8)
ITEM 3	20(51.3)	11(28.2)	0(0)	1(2.6)	2(5.1)	0(0)	5(12.8)
ITEM 4	20(51.3)	14(35.9)	0(0)	0(0)	0(0)	0(0)	5(12.8)
ITEM 7	29(74.4)	2(5.1)	0(0)	1(2.6)	2(5.1)	0(0)	5(12.8)
ITEM 8	28(71.8)	4(10.3)	1(2.6)	0(0)	1(2.6)	1(2.6)	5(12.8)
ITEM 9	30(76.9)	2(5.1)	1(2.6)	0(0)	1(2.6)	0(0)	5(12.8)
ITEM 13	16(41)	3(7.7)	9(23.1)	5(12.8)	4(10.3)	2(5.1)	0(0)
ITEM 18	20(51.3)	10(25.6)	0(0)	1(2.6)	6(15.4)	0(0)	2(5.1)

frequency is of the response “almost everyday” i.e. 5, 12.8% of the total .

Table 2 also shows that, Item 7 i.e “I thought about what to write in a suicide note” reflects the highest frequency i.e. 29,74.4% of the total percentage is shown by the response ”I never had this thought” and the lowest frequency is of the response “couple of times a month” i.e. 1,2.6% of the total representative sample. Item 8 i.e. “I thought about writing a will“ shows the highest frequency of the response I never had this thought” i.e. 28,71.8% of the total and the lowest frequency is of the responses “about once in a week” and “couple of times a week” i.e. 1, 2.6% of the total percentage. Item 9 i.e.” I thought about telling people I planned to kill myself” shows the highest frequency of the response I never had this thought” i.e.30,76.9% of the total and the lowest frequency is of the responses “about once in a month” and “about once in a week” i.e. 1, 2.6% of the

total percentage Item 13 i.e. “I thought about how easy it would be to end it all” shows the highest frequency of the response I never had this thought” i.e. 16,41 % of the total and the lowest frequency is of the response “couple of times a week a week” i.e. 2, 5.1% of the total percentage Item 18 i.e. “I thought if I had a chance, I would kill myself“ also shows the shows highest frequency of the response I never had this thought” i.e. 20,51.3%and the lowest frequency is of the response “couple of times a month” i.e. 1, 2.6% of the total percentage

The analytic aspects covered in Table 2. Shows that maximum respondents have answered to all of the above critical items with the response “I never had this thought” and the least frequent response in the critical items is “almost everyday”. Hence , this indicates that greater no. of respondents do not reflect suicidal ideation and thoughts. But ,a few of the respondents have

responded with options “almost everyday” and “couple of times a week”. By interpretation with the suicidal ideation questionnaire manual, such individuals are classified critical and reflect suicidal ideation. The details and causes of such thoughts and suicidal ideation are probed by the methods of clinical case history taking.

Similar to present study, researchers were done by Reinherz, 2006, Halfon, Labelle, Cohen (2013), examined psychosocial risks for adolescent suicidal ideation and attempts, as well as the link between earlier suicidal behaviour and later functioning. Early gender-specific risks for suicidal ideation included preschool behaviours that are counter to typical gender norms, such as aggressive behaviour in females and dependence in males. Suicidal ideation at age 15 and suicide attempts were both associated with deficits in later adolescence (at age 18) in behavioural and social-emotional functioning. It was concluded that

suicidal ideation at age 15 was a marker of distress with long-term implications for later functioning.

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