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## Risk factors for suicide ideation among youth

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### Abstract

**Background:** Suicide is a public health concern of great importance given the enduring devastating effects it has on families, friends and communities. The present study assessed risk factors for suicide ideation among youth.

**Materials and Methods:** 525 college students of both genders were informed include and Suicide ideation (BDI item #9) was assessed in the study.

**Results:** out of 525 subjects, males were 240 and females were 285. 42% male gender, mothers education upto high school in 24%, secondary school in 40% and graduation upto 36% were risk factors, Suicide ideation (BDI item #9) revealed that I do not have thoughts of killing myself was observed in 92%, I have thoughts of killing myself, but I would not carry them out in 5%, I would like to kill myself in 2% and I would kill myself if I had the chance in 3%. High depressive symptoms (BDI  $\geq 16$ ) was observed in 4.5%.

**Conclusion:** Suicide tendency and thoughts were low among youth. Male gender, low mother education was among risk factors.

**Keywords:** Suicide, youth, education

### Introduction

Suicide is a public health concern of great importance given the enduring devastating effects it has on families, friends and communities. Annually, it claims over 800,000 lives and many of these are young people within the 15–29 age bracket; a situation with grave economic implications for our world today <sup>[1]</sup>. Suicide ideation is considered to be an important precursor to later attempted and completed suicide and is of major public health significance. National surveys estimate that 11.4% of college students seriously considered attempting suicide in the past year, 7.9% made a suicide plan, and 1.7% attempted suicide <sup>[2]</sup>.

Accurate assessment of suicidal ideation and behavior is a critical and necessary component of a comprehensive clinical evaluation of children and adolescents. Knowledge of the risk factors for suicide is a key prerequisite for assessment of risk. Risk factors have been identified by studies of clinical and normal populations as well as case control and psychological autopsy studies, and have been shown to vary with gender and age <sup>[3]</sup>.

Up to 90% of young people who complete suicide have at least one psychiatric diagnosis as determined by psychological autopsy, and up to 70% experience two or more diagnoses. Depression is the most common diagnosis in adolescents who complete suicide and is highly prevalent in those with suicidal ideation and attempts <sup>[4]</sup>. Other major suicide risk factors that should be assessed and potentially targeted for treatment include anxiety disorders, substance abuse, and conduct and antisocial disorders, the latter two diagnoses being significantly more prevalent in male suicide completers <sup>[5]</sup>. The present study assessed risk factors for suicide ideation among youth.

### Materials and Methods

The present study comprised of 525 college students of both genders. All were informed regarding the study and their written consent was obtained.

Data such as name, age, gender etc. was recorded. Suicide ideation (BDI item #9) such as I do not have thoughts of killing myself. I have thoughts of killing myself, but I would not carry them out. I would like to kill myself. I would kill myself if I had the chance were used. Results were assessed statistically. P value  $<0.05$  was regarded as significant.

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**Results**

**Table 1:** Distribution of subjects

Total- 525		
Gender	Males	Females
Number	240	285

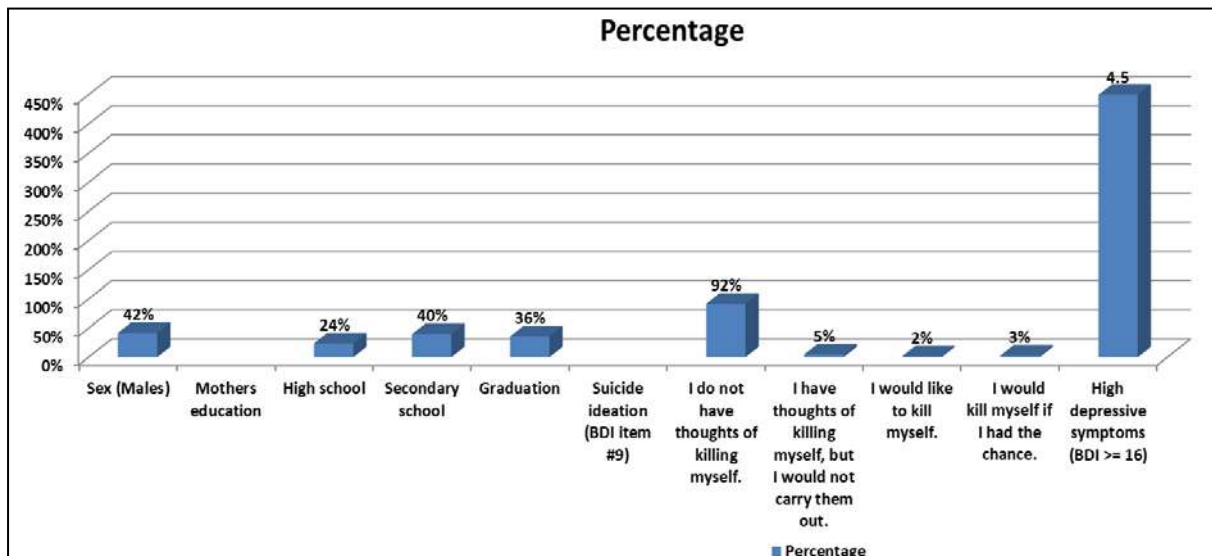
Table I shows that out of 525 subjects, males were 240 and females were 285.

**Table 2:** Sample characteristics

Characteristics	Percentage
Sex (Males)	42%
Mothers education	
High school	24%
Secondary school	40%
Graduation	36%
Suicide ideation (BDI item #9)	
I do not have thoughts of killing myself.	92%
I have thoughts of killing myself, but I would not carry them out.	5%
I would like to kill myself.	2%
I would kill myself if I had the chance.	3%
High depressive symptoms (BDI >= 16)	4.5

Table II, graph I shows that 42% male gender, mothers education upto high school in 24%, secondary school in 40% and graduation upto 36% were risk factors, Suicide ideation (BDI item #9) revealed that I do not have thoughts of killing myself was observed in 92%, I have thoughts of

killing myself, but I would not carry them out in 5%, I would like to kill myself in 2% and I would kill myself if I had the chance in 3%. High depressive symptoms (BDI >= 16) was observed in 4.5%.



**Graph 1:** Sample characteristics

**Discussion**

Any suicide attempt, above and beyond being depressed, is a major risk factor for completed suicide and a further attempt. Past suicidal ideation has also been found to increase risk of future suicidal ideation, suicide attempt, and depression [6]. Adolescents who are both depressed and have attempted suicide are at extremely high risk for both recurrent suicidal behavior and for completed suicide. Family Factors Adolescents who complete suicide are more likely to come from a family with a history of suicide [7]. They are also more likely to live in non-intact families and home environments characterized by high levels of conflict, poor attachment, and problematic communication. Assessment of parental depression and substance abuse is

also indicated, as they are associated with adolescent suicide. Familial transmission of suicide almost invariably occurs with familial transmission of mood disorder, suggesting that clinicians also be aware of family history of mental illness, mood disorder in particular [8]. Suicidal ideation among university students is undoubtedly a multifaceted phenomenon with globally acknowledged negative and deleterious effects on families, friends and even the socio-economic development of countries within which it occurs. Among young people, especially university students, suicide is the second leading cause of death besides self-inflicted injuries, making this population an at-risk group. Therefore, importance of research for greater understanding of this menace cannot be overemphasized [9].

The present study assessed risk factors for suicide ideation among youth.

In present study, out of 525 subjects, males were 240 and females were 285. Owusu-Ansah et al. <sup>[10]</sup> determined lifetime and current prevalence of suicidal ideation or attempts and identify the associated risks and protective factors among university students in Ghana. Using a cross-sectional design, 1003 university students (507 males and 496 females) with a mean age of 20.5 years (SD = 5.95) were administered questionnaires that measured suicide, psychological distress, self-esteem and subjective wellbeing. Results found the following prevalence rates of suicidal behaviours: ideations 15.2%, attempted 6.3%, death wishes 24.3% and suicidal plan 6.8%. Psychological distress was a risk factor for both suicidal ideation and suicidal attempt. Subjective wellbeing was protective of suicide attempt while self-esteem was protective of suicidal ideation.

We observed that 42% male gender, mothers education upto high school in 24%, secondary school in 40% and graduation upto 36% were risk factors, Suicide ideation (BDI item #9) revealed that I do not have thoughts of killing myself was observed in 92%, I have thoughts of killing myself, but I would not carry them out in 5%, I would like to kill myself in 2% and I would kill myself if I had the chance in 3%. High depressive symptoms (BDI  $\geq$  16) was observed in 4.5%. Arria et al. <sup>[11]</sup> in their study face-to-face interviews were conducted with 1,249 first-year college students. An estimated 6% wt of first-year students at this university had current suicide ideation. Depressive symptoms, low social support, affective dysregulation, and father-child conflict were each independently associated with suicide ideation. Only 40%wt of individuals with suicide ideation were classified as depressed according to standard criteria. In the group who reported low levels of depressive symptoms, low social support and affective dysregulation were important predictors of suicide ideation. Alcohol use disorder was also independently associated with suicide ideation, while parental conflict was not.

Family cohesion, spending time together with family, and parental supervision have been identified as protective factors for youth suicidal behavior whereas poor communication between parents and children, low perceived support, low parental approval and family dysfunction have been identified as risk factors for suicide ideation <sup>[12]</sup>.

### Conclusion

Authors found that suicide tendency and thoughts were low among youth. Male gender, low mother education was among risk factors.

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