

## **Quadrant II – Transcript and Related Materials**

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### **NOTES:**

#### **Suicide**

Depression is linked to an increase in suicidal ideation and suicide attempts in adolescence (Clarke & others, 2014; Thompson & Light, 2011). Suicidal behavior is rare in childhood but escalates in adolescence and then increases further in emerging adulthood (Park & others, 2006). Suicide is the third leading cause of death in 10- to 19-year-olds today in the United States (National Center for Health Statistics, 2014).

Although a suicide threat should always be taken seriously, far more adolescents contemplate or attempt it unsuccessfully than actually commit it. After increasing to high levels in the 1990s, suicide rates in adolescents have declined in recent years. In 2013 in the United States, 17 percent of adolescents (22 percent of females, 12 percent of males) had considered attempting suicide in the previous 12 months (down from 29 percent in 1991) (Kann & others, 2014) . In this survey, 8 percent of U.S. adolescents had actually attempted suicide in the previous 12 months (11 percent of females, 5 percent of males).

Approximately 4,600 adolescents commit suicide each year (Centers for Disease Control and Prevention, 2015). The rate of suicide among emerging adults is triple that of adolescents (Park &

others, 2006). Although females are more likely to attempt suicide than males, males are more likely to succeed in committing suicide (Hamilton & Klimes-Dougan, 2015).

In emerging adulthood, males are six times as likely to commit suicide as females (National Center for Injury Prevention and Control, 2006). Males use more lethal means, such as guns, in their suicide attempts, whereas adolescent females are more likely to cut their wrists or take an overdose of sleeping pills—methods less likely to result in death.

Cultural contexts also are related to suicide attempts, and adolescent suicide attempts vary across ethnic groups in the United States (Kann & others, 2014; Sherman & others, 2014). As indicated in Figure 11, more than 20 percent of Native American/Alaska Native (NA/AN) female adolescents reported that they had attempted suicide in the previous year, and suicide accounts for almost 20 percent of NA/AN deaths in 15- to 19-year olds (Goldston & others, 2008). African American and non-Latino White males reported the lowest incidence of suicide attempts. A major risk factor in the high rate of suicide attempts by NA/AN adolescents is their elevated rate of alcohol abuse.

Both early and later experiences may be involved in suicide attempts (Brockie & others, 2015; Esposito-Smythers & others, 2014). The adolescent might have a long-standing history of family instability and unhappiness. Lack of affection and emotional support, high control, and pressure for achievement by parents during childhood are likely to show up as factors in suicide attempts. Adolescents who have experienced abuse also are at risk for suicidal ideation and attempts (Rhodes & others, 2012; Yen & others, 2013). And a recent study revealed that adolescents who engaged in suicidal ideation perceived their family functioning to be significantly worse than did their caregivers (Lipschitz & others, 2012). Another recent study found that family discord and negative relationships with parents were associated with increased suicide attempts by depressed adolescents (Consoli & others, 2013). And in recent study, authoritative parenting was linked to fewer adolescent suicide attempts; rejecting/ neglecting parenting was associated with a greater likelihood of adolescent suicide attempts (Donath & others, 2014). Further, a recent study found that having an insecure avoidant attachment style was linked to a higher incidence of suicide attempts in adolescence (Sheftall, Schoppe-Sullivan, & Bridge, 2014). Recent and current stressful circumstances, such as getting poor grades in school or experiencing the breakup of a romantic relationship, may trigger suicide attempts (Antai-Otong, 2003; Soller, 2014).

Adolescents' peer relations also are linked to suicide attempts (Matlin, Molock, & Tebes, 2011). A research review concluded that prior suicide attempts by a member of an adolescent's social group increased the probability that the adolescent also would attempt suicide (de Leo & Heller, 2008). Another factor may be a lack of supportive friendships. For example, a recent study revealed that

family support, peer support, and community connectedness were linked to a lower risk of suicidal tendencies in African American adolescents (Matlin & others, 2011). And adolescents who are involved in bullying, either as a victim or a perpetrator, are at higher risk for engaging in adolescent suicidal behavior (Hepburn & others, 2012). A longitudinal study revealed that emerging adults were more likely to engage in suicidal behavior when they had been the victims of bullying in early adolescence (Copeland & others, 2013). Further, a recent study found that peer victimization was linked to suicidal ideation and suicide attempts, with cyber bullying more strongly associated with suicidal ideation than traditional bullying (van Geel, Vedder, & Tanilon, 2014).

What is the psychological profile of the suicidal adolescent? Suicidal adolescents often have depressive symptoms (Fried & others, 2013; Mirkovic & others, 2015). Although not all depressed adolescents are suicidal, depression is the most frequently cited factor associated with adolescent suicide (Bethell & Rhoades, 2008; Thompson & Light, 2011). A sense of hopelessness, low self-esteem, and high self-blame also are associated with adolescent suicide (Asarnow & others, 2015; Kleiman, Law, & Anestis, 2014). A recent study found that college students with greater depression severity and a higher level of hopelessness were at risk for engaging in suicidal ideation (Farabaugh & others, 2012). In another recent study, both depression and hopelessness were predictors of adolescents who repeated a suicide attempt across a six-month period (Consoli & others, 2015). The following studies document a number of factors linked with adolescent suicide attempts:

- Overweight middle school students were more likely to think about, plan, and attempt suicide than their counterparts who were not overweight (Whetstone, Morrissey, & Cummings, 2007). Another study revealed that adolescent girls, but not boys, who perceived they were overweight were at risk for engaging in suicidal ideation (Seo & Lee, 2013).
- Playing sports predicted lower suicidal ideation in boys and venting by talking to others was associated with lower suicidal ideation in girls (Kim & others, 2014).
- More recent and frequent alcohol use among young adolescents increased the likelihood of suicidal ideation and attempts in African American youth (Tomek & others, 2015).
- Data from the National Longitudinal Study of Adolescent Health identified the following indicators of suicide risk: depressive symptoms, a sense of hopelessness, engaging in suicidal ideation, having a family background of suicidal behavior, and having friends with a history of suicidal behavior (Thompson, Kuruwita, & Foster, 2009).
- Frequent, escalating stress, especially at home, was linked with suicide attempts in young Latinas (Zayas & others, 2010). And in another study, Latina adolescents' suicidal ideation was associated with having a suicidal friend, as well as lower perceived parental and teacher support (De Luca, Wyman, & Warren, 2012).

- Sexual victimization was linked to a risk for suicide attempts in adolescence (Plener, Singer, & Goldbeck, 2011). Also, a recent study found that adolescent females who were the victims of dating violence were at a higher risk for planning and/or attempting suicide than were their counterparts who had not been victimized (Belshaw & others, 2012).
- No national studies have been conducted regarding suicide rates in gay, lesbian, and bisexual adolescents. However, a recent study in Boston found that sexual minority adolescents living in neighborhoods with higher rates of lesbian, gay, and bisexual crimes reported a higher rate of suicidal ideation and attempts (Duncan & Hatzenbuehler, 2014).

In some instances, suicides in adolescence occur in clusters (Haw & others, 2013). That is, when one adolescent commits suicide, other adolescents who find out about this also commit suicide. Such “copycat” suicides raise the issue of whether or not suicides should be reported in the media; a news report might plant the idea of committing suicide in other adolescents’ minds. Below is some valuable information about what to do and what not to do when you suspect someone is likely to attempt suicide.

#### What to do

1. Ask direct, straightforward questions in a calm manner: “Are you thinking about hurting yourself?”
2. Assess the seriousness of the suicidal intent by asking questions about feelings, important relationships, who else the person has talked with, and the amount of thought given to the means to be used. If a gun, pills, a rope, or other means have been obtained and a precise plan has been developed, clearly the situation is dangerous. Stay with the person until help arrives.
3. Be a good listener and be very supportive without being falsely reassuring.
4. Try to persuade the person to obtain professional help and assist him or her in getting this help.

#### What not to do

1. Do not ignore the warning signs.
2. Do not refuse to talk about suicide if a person approaches you about it.
3. Do not react with humor, disapproval, or repulsion.
4. Do not give false reassurances by saying such things as “Everything is going to be OK.” Also do not give out simple answers or platitudes, such as “You have everything to be thankful for.”

5. Do not abandon the individual after the crisis has passed or after professional help has commenced.

*REFERENCE-*

- Santrock, J.W. (2015). *Adolescence. (16th Ed.)*. New York: Tata McGraw Hill.