



FACTORS INFLUENCING SUICIDAL IDEATION AND ITS COPING STRATEGIES AMONG ADOLESCENT IN SELECTED COLLEGES: A DESCRIPTIVE STUDY

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ABSTRACT

Title: Factors influencing suicidal ideation and its coping strategies among adolescent in selected colleges : A Descriptive study. **Aims:** The aim of the study was 1. To assess the factors influencing suicidal ideation among adolescent in selected colleges. 2. To assess coping strategies among adolescents in selected colleges. 3. To correlate between Suicidal Ideation score and coping strategy score. 4. To associate factors influencing suicidal ideation with selected demographic variables. 5. To associate coping strategies with selected demographic variables. **Materials and methods:** Quantitative research approach was used. Non-experimental descriptive design used and conducted over 100 adolescent by using Non Probability convenient sampling technique. **Result:** Assessment was done using self-structured rating scale on factors influencing suicidal ideation and its coping strategies. Analysis showed that mean suicidal ideation score was 16.38 ± 7.79 and mean percentage score was 39 ± 18.55 . Also, the study showed that mean coping strategy score was 17.53 ± 5.20 and mean percentage coping strategy score 54.78 ± 16.26 . Analysis also revealed that ($r = -0.583$, $p = 0.0001$) that means there is negative co- relation found between suicidal ideation score and its coping strategies of adolescent (16-19yrs) **Conclusion:** Study concluded that there was association of level of suicidal ideation score with age, gender, religion and educational status at $p < 0.05$ level of significance among adolescent and none of the other demographic variables were associated with level of suicidal ideation score. Also, there is association of level of coping strategies score with age, gender, educational status at $p < 0.05$ among adolescent and none of the other demographic variables were associated level of coping strategies for suicidal ideation. There is negative co- relation found between suicidal ideation score and its coping strategies, as suicidal ideation score increases, coping strategies scores decreases.

KEYWORDS : "Suicidal ideation", "Coping strategies", "Adolescent", "factors influencing".

I. INTRODUCTION

Adolescence is a pivotal period of biological and psychological changes. It is recognized as distinct phase of life with its own special needs. Adolescent faces numerous challenges related to their health and development and as a result they are prone to various health problems such as growth and development related problems, substance abuse, undernutrition, mental health related problems such as depression, suicide and behavioural disorder etc.¹

Suicide is the deliberate act of self- injury with the intent that the injury results in death. Suicidal ideation means a pre-occupation with thoughts about committing suicide and may be precursor to suicide. Suicidal ideation is common in adolescents. Family disruption, presence of psychiatric disorder, academic failure, substance abuse, isolation, acute loss of boyfriend or girlfriend, lack of future options have all been implicated in suicide.² Person with suicidal ideation may engage in self-destructive behavior and consciously choose to kill themselves. Person may use a variety of coping mechanism to deal with it such as denial, rationalization, and regression, increasing self- esteem, regulating emotional and behaviours, mobilizing social support, patient education.³

II. BACKGROUND OF THE STUDY

Throughout the world, Suicide is affecting individuals of all nations, cultures, religions, genders and classes suicide rates in the world are incredibly diverse as shown in statistics. ⁴As compared to Australia and the USA the rate of suicide in India is increasing during recent decades.⁵ Suicide is considered to be an global phenomenon and is found to be second leading cause of death among adolescent in the age group of 15-29 years, every year almost 800,000 people die due to suicide. Suicide includes suicidal ideation to planning of suicide and finally attempting it suicidal ideation among adolescent are 12 times likely to have attempted suicide by the age of 30 yrs.⁶

III. NEED OF THE STUDY

Suicide is considered as the third-most fatal in the 15-19 years age group, second only to road injury in men and among females was on the third position. Globally committed suicide rates were more than 50 per cent among youth of 45 years old. 90 percent of the adolescents are from low and middle-income

countries, who killed themselves. 79 per cent of the suicides found in low and middle-income countries. High-income countries had the highest age-standardized suicide rate (11.5 per 100,000) as given by this report in which male suicide rate is highest as compared to female. WHO when compared region wise found that, South-East Asia with the highest female suicide rate (11.5 per 100,000), as compared to the global female average of 7.5. Suicide being a avoidable cause of death, it becomes crucial to strengthen ongoing efforts to implement effective suicide prevention interventions, said the WHO. As suicide is considered as global phenomenon throughout the world, India is also one of the country with highest suicidal rate and the most vulnerable one affected group is adolescent. Many studies have conducted among adolescents on suicidal ideation but still there is paucity of data and also with increasing percentage of suicide rate there is need to conduct this study.⁷

OBJECTIVES

Primary Objectives

To assess the factors influencing suicidal ideation and its coping strategies among adolescent in selected colleges of the city.

Secondary Objectives

1. To assess the factors influencing suicidal ideation among adolescents in selected colleges.
2. To assess coping strategies among adolescents in selected colleges.
3. To correlate between Suicidal Ideation score and coping strategy score.
4. To associate factors influencing suicidal ideation with selected demographic variables
5. To associate coping strategies with selected demographic variables.

Assumptions

1. Adolescent may have suicidal ideation or tendencies.
2. Adolescent may use different coping strategies.
3. There may be correlation between suicidal ideation and its coping strategies

ETHICAL ASPECTS

The state is approved by the institutional ethical committee.

1. Prior permission was obtained from the management authorities of colleges.
2. Written informed consent was obtained from the samples as well as from their parents.
3. Confidentiality of information was maintained by utilizing code numbers instead of names of sample group.

Conceptual Framework

Sister Callista Roy's adaptation model was used for the study.

METHODOLOGY

Research Approach

Quantitative Approach

Research design

Non experimental descriptive research design.

Sampling technique

Nonprobability convenient sampling.

Setting

Selected colleges of the city.

Duration of study

Study was completed in 18 months.

Data collection was completed in 4 weeks.

Sampling criteria

Inclusion criteria

In this study, Inclusion criteria were

- Adolescent between 16 to 19 years of the age.
- Available at the time of study.

Exclusion criteria

In this study exclusion criteria was

- Adolescent who are not willing to participate.
- Adolescent who do not get permission from parents.

Variables

Research variable :

Scale for suicidal ideation and its coping strategies.

Demographic variables :

Age, gender , area of residence ,religion , educational status , type of family, siblings , order of child.

Population

All adolescent

Target population

All adolescent, age group 16 to 19 in selected colleges of the city.

Accessible population

All adolescent ,age group 16 to 19 in selected colleges and who are available at the time of study.

Development of tools

Based on the objectives of the study , demographic data, structured rating scale was prepared. After extensive and systemic review of literature the investigator developed the tool.

Description of tools

Section –A Demographic variables

Age, gender , area of residence ,religion , educational status , type of family, siblings , order of child.

Section –B Structured rating scale for Suicidal Ideation

Grading and scoring

It is twenty one point rating scale each item answered on a three point score as never, sometimes and always.

High suicidal ideation = 29 – 32

Moderate suicidal ideation = 15- 28

Low suicidal ideation =0-14

Section – C Structured rating scale for coping strategies

Grading and scoring

It is sixteen point rating scale each item answered on a three point score as never, sometimes and always.

High coping = 25-32

Moderate coping = 17-24

Low coping = 9-16

No coping =0-8

Result

Section I :Description of adolescent of selected colleges with regards to their demographic variables

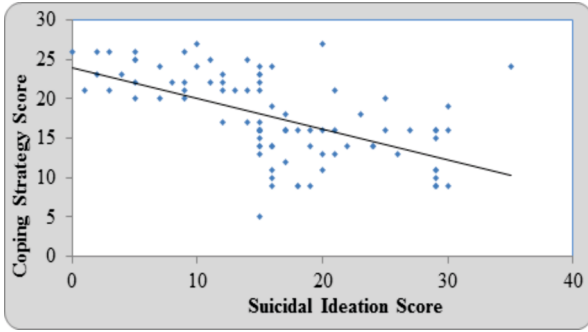
Table IV.1: Table showing percentage wise distribution of adolescent in selected colleges according to their demographic characteristics. n=100

Demographic Variables	No. of adolescents	Percentage(%)
Age (yrs)		
16 yrs.	49	49
17 yrs.	29	29
18 yrs.	20	20
19 yrs.	2	2
Gender		
Male	28	28
Female	72	72
Area of residence		
Rural	31	31
Urban Slum	13	13
Urban	56	56
Religion		
Hindu	77	77
Muslim	4	4
Christian	3	3
Buddhist	13	13
Others	3	3
Education		
11th standard	40	40
12th standard	60	60
Type of family		
Nuclear	61	61
Joint	8	8
Extended	31	31
Siblings		
Brother	41	41
Sister	39	39
Both	20	20
Order of the child		
First	42	42
Second	45	45
Third	10	10
More	3	3

Section II: Description on Correlation between Suicidal Ideation score and coping strategy score

Table II.2: Correlation between Suicidal Ideation score and coping strategy score. n=100

Score	Mean	SD	r-value	p-value
Suicidal Ideation Score	16.38	7.79	-0.583	0.0001 S,p<0.05
Coping Strategy Score	17.53	7.20		



Limitation

This study is limited to adolescent of the colleges. This is assessment study only : not an interventional study.

Recommendation

Researcher recommends to provide guide sheet in order to develop effective coping strategies for factors influencing suicidal ideation .

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