



International Journal of Research in Pharmacology & Pharmacotherapeutics



ISSN Print: 2278-2648

IJRPP |Vol.8 | Issue 3 | Jul - Sep - 2019

ISSN Online: 2278-2656

Journal Home page: www.ijrpp.com

Research article

Open Access

Assess the factors influencing suicidal behavior among school students

R.Thephilah Cathrine^{1*}, J.Jansi Rani²

¹Clinical instructor, Department of mental health nursing, saveetha college of nursing, SIMATS, Chennai, India

²Bsc(N) IVth year, Saveetha College of Nursing, SIMATS, Chennai, India

*Corresponding author: R.Thephilah Cathrine

Email: cathrine_samuel@yahoo.in

ABSTRACT

The word "suicide" has its origin in Latin; sui', of one self and "caedere", to kill: the act of intentionally destroying one's life. The phenomenon of suicide has at all times attracted the attention of moralists, social investigators, philosophers and scientists. The world wide, suicide is among the top five causes of mortality in the 10 to 29 year age group¹. In many countries it ranks first to second as a cause of death among children and adolescents is therefore a high priority. Given the fact that in many countries and regions most people in this age group attend school, this appears to be an excellent place to develop appropriate preventive action. So the present study is done to assess the factors influencing suicidal behavior among school students, residing at Ramanathapuram. 100 students involved in our study. In the present study the purposive sampling technique was adopted to select respondents. The sample of the study will be 8thstd -12thstd students at selected school. Tool consists of two parts demographic variable and self-administration questionnaires. Percentage of factors influencing suicidal behavior socio economic factors 42.1%, psychological factors 37.8%, family factors 48.3%, physical factors 26.7%, academic factors 47.5%, major life events 30.3%. In the conclusion overall study finding showed that 56% of the sample had inadequate factors influencing suicidal behavior among school students at selected school.

Keywords: Factors influencing, Suicidal behavior, School students.

INTRODUCTION

Adolescents and youth are particularly vulnerable to suicide on account of their emotional immaturity and temperamental instability. Rapid additions to [3,4] knowledge, intense competition, examinations and results expose students to tremendous stress, and trigger off depression. High expectations of parents

can frustrate them and add to their depression if they are unable to live up to these expectations.

Suicide now ranks as the second most common cause of death for school students in the age group 12-18. At high risk is a person who is isolated with no family or friends; whose family and friends are unwilling to help; who may have broken off

communication with his relatives; whose close ones reject his or her effort to re-establish communication.

Students attempt suicide worthlessness, helplessness and to escape the stigma of social disapproval. Failure in examinations is also a common cause of suicide among school. It is an impulsive act arising from a sense of shame and worthlessness, sometime aggravated by scolding, beating and rejection by parent or teachers. Generally, females are three times more likely than male students to attempt suicide, but the incidence of fatal attempts is considerably higher among males.

When a school students attempts suicide, one of the first explanation that occur to those around him is that he may have been doing poorly in studies, However, students who manifest suicidal behavior are, as a group, Superior students. Also, While many lose interest in their studies prior to the onset of suicidal behavior and their grads get lower, the loss of interest appears to be associated with depression and withdrawal caused by problems of ten other Then academic.

When there is nobody to share the pain and anxiety and even moments of joy, A person undergoes stress, because what children need love and caring from parents in their day -to-day activities; a sense of feeling wanted and appreciated [5] for what they do. Negligence on the part of the parents is very harmful, through which children undergo frustration and loneliness, and to move away from which they get hooked on to drugs, alcoholism and wrong company, which ruins their life.

In India, rate of 11 per 100000 suicide per year, an increase from 6 per 100000 during the 1980s , India occupies the second highest rate of suicide in the region. When correcting underreporting, these rates are likely to be much higher. While 89000 persons committed suicide in 1995, the number increase in 96000 in 1997 and 104000in 1998, an increase of 25% compared to the previously year. During 1988-1998, [6] suicide increased by a staggering 33.7%. major variations are noticed across the country, probably related to reporting practices. Kerala (29 per 1,00,000), Karnataka (21 per 1,00,00), and Tripura as well as west Bengal [7] (19 per 1,00,000) had the highest rates of suicide. Among the cities, Bangalore (17%), Mumbai (14%), Chennai (11%), and Delhi (7.5%), accounted for nearly 50% of the total suicide in the country.

Adolescents often will try to support a suicide friend by themselves. They feel bound to secrecy, or feel that adult are not to be trusted. This may be delay needed treatment. If the student does commit suicide, the friends will feel a tremendous burden of guilt and failure.it is important to make students understand that one must report suicidal statements to responsible adult. Ideally, a teenage friend should listen to the suicidal youth in an empathic way, but then insist on getting the youth immediate adult help.

METHODOLOGY

A sample of 100 school students studying 8thstd - 12th std. Samples are selected purposive sampling techniques. The descriptive study was conductive during one month period, Data collecting was conducting in selected school, after getting permission from the head of the school.

TOOL FOR THE DATA COLLECTION

Demographic variable (age, sex, religion, education, type of family, family history of mental disorder, family history of substance abuse, area of living).Self -administered questionnaire (socio economic factor, psychological factor, family factor, physical factor, academic factor, major life events) on factors influencing suicidal behavior. The items placed on check list. The check list consists of 43 items, to be judged as 'yes' and 'No'. The 'yes' response was given '1' score, and 'No' response was given '0' score with a total aggregate of 43 score. 1-23 inadequate factors influencing suicidal behavior.24-33 moderate factors influencing suicidal behavior.34-43 adequate factors influencing suicidal behavior.the age, gender, education, type of family, religion ,area of living, has no statistical significant $p < 0.05$.

RESULT

Table1: that the majority respondents 54(54%) belongs to the sex were male 54(54%) and educational level 8thstd -9thstd 54(54%).the majority of respondents age group 50(50%) 12-15and 50(50%) 15-18. Reveals that majority of the respondents 89(89%) were nuclear family, 8(8%) of them were joint family,2(2%) of them were extended family,1(1%)of them single parent family. Regarding the religion majority of 58(58%) were

muslim,28(28%)of them were hindu,16(16%)of them were Christian. Regarding income of the family majority of the respondents 71(71%) family income were Rs.5000-10000, 2 Reveals the majority of the respondents agriculture 81(81%),were 8(8%)business. 7(7%) were private service.4(4%) were government service.0 (0%) were unemployed.1(21%) respondents family income were

in between Rs.2000-5000, 7(7%) respondents family income were in below Rs.2000. Regarding area of living, majority 51(51%) were residing in urban area and 49(49%)were residing in rural area. Reveals the majority of the respondents agriculture 81(81%),were 8(8%)business. 7(7%) were private service.4(4%) were government service.0 (0%) were unemployed.

Table1:Frequency and percentage distribution of demographic variable of factors influencing suicidal behavior among school students

S. No	Demographic variable	Frequent	Percentage
1.	Age		
	12-14 years	50	50%
	15-18years	50	50%
2.	Gender		
	Male	54	54%
	Female	46	46%
3.	Religion		
	Hindu	26	26%
	Christian	16	16%
	Muslim	58	58%
4.	Education		
	8thstd-10thstd	54	54%
	11thstd-12thstd	46	46%
5.	Occupation of parents		
	Agriculture	81	81%
	Business	8	8%
	Private service	7	7%
	Government service	4	4%
	Unemployment	0	0%
6.	Monthly income of the family		
	Below Rs.2000	21	21%
	2000-5000	8	8%
	5000-10000	71	71%
7.	Type of the family		
	Nuclear family	89	89%
	Joint family	8	8%
	Extended family	2	2%
	Single parent family	1	1%
8.	Source of information about suicidal behavior		
	Television		
	Radio	33	33%
	Newspaper	12	12%
	Movie	4	4%
	Magazine	10	10%
	Book	6	6%
	Other	8	8%
		27	27%
9.	Family history of substance abuse		
	Drug abuse		
	Smoking	9	9%
	Alcohol dependence	30	30%
	No history	24	24%

		37	37%
10.	Family history of mental illness		
	Depression		
	Schizophrenia	12	12%
	Mania	9	9%
	No history	4	4%
		75	75%
11.	Area of living		
	Urban	51	51%
	Rural	49	49%

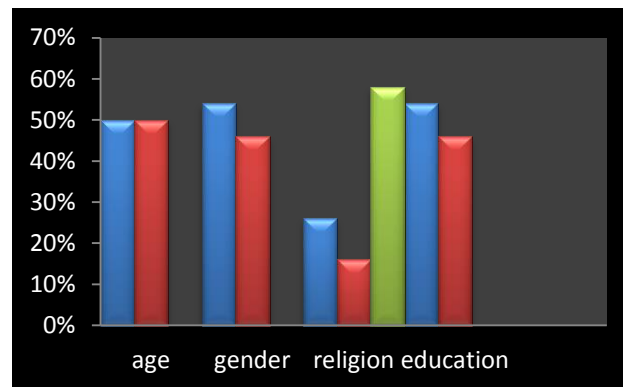


Figure1: Show the demographic variable among factors influencing suicidal behavior among school students

Reveals that majority 64(64%)of respondents having inadequate which influencing suicidal behavior.36 (36%) of respondents having moderate risk factors which influencing suicidal behavior.

Table2: Frequency and percentage distribution level of the factors influencing suicidal behavior among school student.

Factor level	Category	Respondents	
		Frequency	Percentage
Inadequate	<50%score	64	64%
Moderate	51-75%score	36	36%
Adequate	>75%score	0	0%
Total		100	100

Shows that to assess the factors influencing suicidal behavior among school students that mean 18.17 and the standard deviation is 17.4

Table3:The mean and standard deviation factors influencing suicidal behavior among school students(n=100)

NO.	Factors	Statement	Max. score	Respondents risk factors		
				Mean	Mean (%)	SD
I	Socioeconomic	11	11	4.63	42.1	21.9
II	Psychological	7	7	3.02	37.8	22.8
III	Family	7	7	3.91	48.3	24.0
IV	Physical	6	6	1.60	26.7	18.0
V	Academic	8	8	3.80	47.5	27.1
VI	Major life event	4	4	1.21	30.3	26.2
	Combined	43	43	18.17	40.4	17.4

DISCUSSION

The present study Percentage of factors influencing suicidal behavior socio economic factors 42.1%, psychological factors 37.8%, family factors 48.3%, physical factors 26.7%, academic factors 47.5%, major life events 30.3%. In the conclusion overall study finding showed that 56% of the sample had inadequate factors influencing suicidal behavior among school students at selected⁸ school.

MICHEAL P. DUNNE(2015): A study conducted on prevalence and correlates of suicidal behavior among school students. Despite being organized by the world health organization. As a significant social and health concern, information on suicidal behavior in adolescents is unknown. Aim of the study is establish the prevalence and associated psychosocial correlates of suicidal ideation and attempts in Nigerian youth. Stratified sampling was used to identify youth aged 10-17 years who completed the diagnostic predictive scale for youths (suicide behavior questions) in a classroom setting. Results of the study shows a total of 1429 youth completed the instrument. Over 20% reported suicide ideation and approximately 12% reported that they had attempted suicide in the last year.

ROBERT H, ASETINE J, (2018): The study conducted on the evaluation of the signs of the suicide prevention program. Data collected from

4133 students in 9 schools. Method used self-administered questionnaire completed by students in both group approximately 3 month after the program implementation,⁹ results shows significantly lower rates of the suicide attempts. And greater knowledge and more adaptive attitude about depression and suicide were observed in the intervention group.

VALENTINE SM (2018), A study to conducted by on adolescents suicide assessment and intervention, how to prevent suicide, the leading cause of adolescent death, is the focus on article to prevent suicide teachers assess the risk factors¹⁰. Covert message, covert suicide clues and intervenes with adolescent and family. Suicide risk and hopelessness decreased as suicide youth learn to clarify the problem. Expand resources and use safe coping strategies, intervention including there is no suicide contact, family therapy and school suicide prevention program.

Acknowledgement

The authors are thankful to Prof. Dr.S.Kalabarathi, principal of Saveetha College of Nursing, SIMATS. The authors also wish cordial thanks to R.Thephilah cathrine clinical instructor of saveetha College of nursing, SIMATS, for their encouragement, valuable suggestions, support and advice given throughout the study.

REFERANCE

- [1]. World wide organization. Action for adolescents health-towards a common agenda, recommendation from a joint study group, Geneva Available form: URL : <http://www.google.com>.<http://www.ncbi.nlm.nih.gov/sites/entrez>, 2007.
- [2]. Brent DA, Perper JA. Prevalence of specific suicide behavior, American journal of the psychiatry <http://www.researchgate.net>>publication 2004.
- [3]. Joffe RT, Offord DR, Suicide behavior in youth, American journal of psychiatry 2005.<https://journals.sagepub.com>>doi
- [4]. Kadam DB, Pantit RD, Bhatt Ambrish. Suicide in adolescents and youth, Indian express newspaper Available URL: <http://www.indian express.com/2007/811/stories>.<https://psycyct.psychopen.eu>>view>html 2007.
- [5]. World health organization, Mental health substance abuse, facts and figures, suicide prevention, emerging from darkness, 1997. Available form : URL; <http://www.pubmed>.<http://www.researchgate.net>>publication <https://www.ukessays.com>>essays>literature
- [6]. kuckin uday ,lype gerorge, national crime re cords bureau(2004): available from URL .<https://psycyct.psychopen.eu>>view>html
- [7]. Black c, bucky SI, wilder P the interpersonal and emotional consequence of being an adult child of the psychological problem, international journal of addition .2002 12(2):p 67-78
- [8]. Stanley A. personality and adjustment of adolescents children of alcoholics. Published M phil dissertation, NIMHANS, Bangalore

- [9]. Bhatt Ambrish. Suicide in adolescents and youth, Indian express newspaper 2007, Available URL: [http://www.indian express.com/2007/811/stories.https://psycyct.psychopen.eu>view>html](http://www.indianexpress.com/2007/811/stories.https://psycyct.psychopen.eu>view>html)
- [10]. Perper JA. Prevalence of specific suicide behavior, American journal of the psychiatry 2004: <http://www.researchgate.net>publication>