

From Pressure to Crisis: Analysing Suicidal Risks among Adolescents

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ABSTRACT

Suicide is a major health problem, and it currently occupies the third most significant cause of death among adolescents aged 15 to 24. Depression, a widespread problem among adolescents, is the most significant physical and psychological risk factor for their suicide. Alcohol use is very common among young people today, and it has been linked to both suicidality and depression. This review examines the available research on suicidality, depression, and alcohol use among adolescents. Suicide prevention is crucial, especially in the early school years, when it is linked to despair and alcohol use. Suicidality, depression, and alcohol use are three phenomena that significantly rise during adolescence, making it an opportune moment to begin preventative initiatives

Keywords: Pressure to crisis, Suicidal risk, Adolescents, Health problem

INTRODUCTION

Suicide is one of the major causes of premature death among adolescents worldwide. Studies show that suicide rates among adolescents have increased significantly over the last twenty-one decades, particularly in low- and middle-income countries. Gender differences are evident, with adolescent girls having greater rates of suicide thoughts and attempts than boys. India reported the highest suicide rate in 2021 with 12 suicides for every 100,000 population. Furthermore, this trend, according to Indian National Crime Records Bureau (NCRB) has risen at the rate of 6.2% compared to the year 2020. Over the past few decades, the suicide rate in India has been increasing rapidly. Adolescent suicides constitute a major proportion of the total number of suicides happening in India every year. Here it is important to mention that the adolescent population in India constitutes one-fifth of its total population and is the largest for any country in the world. There have been several studies in different parts of the country on various aspects of suicide in India. Such studies have reported methods, means, reasons, risk factors, and other aspects of suicide. So, detailed

knowledge about these patterns is important for correct prevention strategies.

Review of Literature:

Twenge (2019) highlighted the rise in depressive symptoms among adolescent girls after 2010, and how it may be linked, among other things, to an increasing amount of time spent on new media, specifically social media. The authors discovered intriguing but minor associations between electronic device use and suicide-related outcomes. Even weaker associations between social media use and depression found. Interpersonal theories of depression explain a complicated interplay between individual features and social experiences in a social environment that has been drastically modified over the last decade by the widespread use of social technology. It is critical to investigate particular online behaviours that may reveal which individuals have a higher likelihood of experiencing depressed symptoms.

Factors of suicide among adolescents:

There are many factors which leads to suicidal thoughts among adolescents. Major factors include:

psychological factors, environmental and social factors, biological factors and so on.

Psychological Factors: these includes both mental health disorders and personality traits. **Mental Health Disorders: Depression:** Adolescents with clinical depression are more likely to have suicide thoughts. Chronic anxiety has been associated with an increased risk of suicide. Adolescents who abuse alcohol or drugs are more prone to injure themselves or attempt suicide. **Personality-traits:** Studies have found impulsivity and violence as traits that contribute to suicide risk. Low self-esteem and emotions of hopelessness serve as mediators of suicidal behaviour (Beck *et al.*, 1985). **Environment and Social factors: Family Environment:** Adolescent suicide conduct is closely associated with dysfunctional family dynamics, including parental conflict, divorce, or neglect. Parenting approaches that are too authoritarian or critical have been associated to increased stress and poor emotional control (King *et al.*, 2001). **Peer Influence:** According to Van Geel *et al.* (2015), victims of bullying—both online and offline—are more likely to have suicide ideation. Desperation and feelings of worthlessness can be made worse by peer rejection or solitude. **Academic Pressure:** Adolescents who experience high expectations from their parents and teachers may experience stress, anxiety, and sadness, which may result in contemplation of suicide (Amy and Cassidy, 2020). **Cultural and Societal Factors:** In conservative societies in particular, the stigma associated with mental health is an important barrier to getting treatment). The “Werther Effect” is the phrase used to describe exposure to harmful media content, such as suicide contagion through television news programs or social media. **Biological factors:** A significant part is played by genetic vulnerability; research indicates that suicidal behaviour is passed down through families. According to neurobiological research, one of the main contributing factors to suicide thoughts is serotonin dysregulation. **The Effects of Digital Media and Technology:** Adolescent depression symptoms have been connected to increased screen time and exposure to social media platforms’ idealised depictions of life. Suicidal ideas and attempts are more common among victims of cyberbullying, making it a substantial risk factor (Patchin and Hinduja, 2010).

Protective Factors Observed in Literature:

Family Support: According to Borowsky *et al.* (2001), close and positive family ties serve as a protective

barrier against suicidal ideation. Suicide attempts are less likely when parents are emotionally available and communicate openly. **School-Based Interventions:** Mental health education and anti-bullying initiatives have been shown to effectively reduce suicide rates (Wasserman *et al.*, 2015). **Peer Support:** Adolescents with strong peer networks have decreased rates of suicide ideation, highlighting the significance of social interaction (Bearman and Moody, 2004).

Research gaps:

There have been few longitudinal studies that examine suicidal behaviour from adolescents to adulthood. Inadequate representation of varied cultural settings in international studies and insufficient emphasis on the importance of developing digital platforms and their distinct issues were also identified.

Conclusion:

The research demonstrates that suicide among adolescents is a complex issue affected by psychological, social, cultural, and biological aspects. Individual treatment, family interventions, school programs, and community-based initiatives must all be used together to achieve effective prevention. More culturally sensitive, longitudinal, and technology-focused research is required to bridge existing gaps and provide specific solutions.

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