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UNVEILING THE LIVED EXPERIENCES OF ADOLESCENT'S SUICIDE ATTEMPT

Rowena A. Baloyo
Associate Professor, North Eastern Mindanao State University

ABSTRACT

Suicide attempt behaviors during adolescence have become global phenomena in all regions across the world. This paper aims to explore the lived experiences of the seven adolescents who made suicide attempt. It also aims to determine the factors associated with their decision to suicide attempt and as well as to their coping mechanism. This study used qualitative research design through the use of phenomenological method. The necessary data of this study were gathered through the use of semi-structured interview guide with the use of open- ended questions. Through Thematic analysis themes derive from the data were: family issues, stressful life events, low self-image, helplessness, hopelessness, lack of coping skills. As to their coping mechanisms they were: acceptance, realization, focus on studies, presence of supportive people, positive thinking and prayers. The contributory factors made them vulnerable to such attempt, thus intervention should be proposed .

KEYWORDS: *Phenomenology: Suicide: Suicide Attempt: Contributory Factors: Coping Mechanism*

INTRODUCTION

Suicide attempt is defined as an attempt on one's life, where a person tries to commit suicide but survives (Wasserman, 2004). It may be referred to as a failed suicide attempt or non- fatal suicide attempt. According to the World Health Organization (WHO, 2018), suicide attempt behaviors during adolescence have become global phenomena in all regions across the world. Based on 2016 statistics, 79% of the global suicidal cases fall among low and middle-income countries. Roughly 800,000 people died due to suicide every year, making it the second leading cause of death among individuals 15-29 years of age. One person dies by suicide every 40 seconds, according to WHO (2017); it is the leading cause of death across all age groups. Suicidal thoughts among youth has the sharpest increase in number throughout the life span (Nock, Borges, Bromet, Alonso et al. 2008).

There are varied factors why adolescents make suicide attempts. They differ in how they deal with the different stressors that may come into their lives. Considering the many changes and complexities in adolescence, individuals face a lot of challenges, including the crisis between identity and role confusion. Adolescents who experience or are exposed to more than one risk factor are at an increased risk of suicidal behaviors (Mazza, 2006). Thus, the aim of this study was to understand the lived experiences of adolescents who attempted suicide, including the risk factors and how adolescents coped with their situation. With the increasing rate of adolescent suicide, it was deemed necessary to develop some form of intervention. There have been numerous studies regarding adolescent suicide but not much on understanding the phenomenon from the perspective of those who survived an attempt.

According to the study of Yterdal (2016), suicide ideation is most common in adolescents. Females have one or more thoughts of suicidal tendencies than males (Zemaithene & Zaborskis, 2004). For every completed suicide case it falls among youth ages 15 to 24 years old. Between 100 and 200 suicide attempts, the most common methods of suicide globally are done by ingestion of pesticide, hanging, and through the use or firearms (WHO, 2014).

In the study of Levinson and colleagues (2007), suicidal behavior might be regarded as a long process usually stretching over many years, from suicidal ideation to planning and culmination. Suicidal ideations are basically the thoughts of ending one's life due to some problems and hopelessness in life. Individuals see death as a better option to end their sufferings. About one million people die by suicide each year globally and majority of them belong to developed countries.

In Asia, a higher suicidal rate is reported among countries having larger populations such as China and India, accounting for a greater part of the world's suicides (Hendin, 2008). In the Philippines, Redaniel, Lebanan-Dalida and Gunelli (2011), found that suicidal deaths occurring between 1974 and 2005 in males increased from 0.23 to 3.59 per 100,000 between 1984 and 2005 and 0.12 to 1.09 per 100,000 in females. Family and relationship problems were the most common precipitants. Suicidal rates were highest among females aged 15

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to 24 years old, while in males, rates were similar in all age groups throughout the study period. While suicidal rates are relatively low in the Philippines, the cases continually increase among adolescents and young adults.

In a study made by Quintos(2017) results showed that CARAGA ranked fifth in the regional ranking throughout the country based on the number of suicide cases among the youth.

METHODS

This study used a qualitative research design involving in-depth interview with different cases to explore specific bounded systems. This study made use of phenomenological approach, an inductive and descriptive method used to investigate and describe phenomena as they appear in their full depth and breadth (Pretorius, Chauke, & Morgan, 2011).

This study delved into the experiences and real-life stories of adolescents who attempted to end their lives. The researcher made the interpretation of the meaning of the data through Thematic Analysis. According to (Creswell, 2009), it is a method of analyzing qualitative data to identify patterns of themes within the data. It involves a systematic process of coding the data categorizing specific statements into themes that represent the underlying meaning or content of the data. The data were collected through in-depth interview through the use of semi-structured questionnaire.

PURPOSE OF THE STUDY

This phenomenological study attempted to investigate adolescent suicide attempts as basis for an intervention program designed to address the prevention of adolescent suicide.

Specifically, it sought to answer the following:

1. What are the factors associated with adolescent suicide attempts?
2. What coping mechanisms did adolescents adopt after the suicide attempt?
3. What intervention program may be proposed based on the findings of this study?

REVIEW OF RELATED LITERATURE

This section examines the existing literature on suicidology, suicidal behavior, and the risk factors of suicide.Suicidology

Durkheim, in his preeminent treatise *Le Suicide*, first hypothesized that suicide was not random, and facts existed that correlated the act of suicide with specific sociological variables. Emile Durkheim, the renowned French sociologist, published the prototype of systematic quantitative research on suicide in his classic *Le Suicide* (1897/1951). As the founder of modern sociology, he first applied the scientific method in discovering social facts.

Risk factors for the completed suicide encompass many facets of adolescent experience such as psychosocial dynamics, substance abuse issues, family history and challenges, psychiatric quantitative research on suicide in his classic *Le Suicide* (1897/1951). As the founder of modern sociology, he first applied the scientific method in discovering social facts. Durkheim conceptualized suicide as the manifestation of the breakdown of social bonds and moral community (Emirbayer, 2003) and as a failure of society, not the psychology of the individual. Durkheim regarded suicide as symptom of mental alienation (Berrios & Mohanna, 2001), not insanity, which was an accepted position through the preceding centuries.

The configurations of self-destructive behaviors are diverse. They have been divided into categories of completed suicides, non-fatal suicide attempts, and suicidal ideations (Maris, Berman, & Silverman, 2000). The suicide attempt is a non-fatal, self-inflicted destructive action coupled with the intent to die. It is the person's perception of its likelihood to result in death. The near-fatal suicide attempt combines a significant degree of risk with little probability of rescue.

Suicidal Ideation

Suicidal ideation refers to thoughts about taking one's own life, with some degree of intent. However, while an individual may experience suicidal thoughts, it does not mean he or she is in impending danger of committing suicide. According to Runeson and Asberg (2003), suicide ideation may vary in seriousness depending on the specificity of suicide plans and the degree of suicide intent. Adolescents seem to think that ending their own life can rescue them from circumstances that they feel are intolerable. Suicide ideation is defined as the manifestation of ideas and/or desires to end their life, and in such individuals, the innate severity of the suicide is high. The literature suggest that suicidal cognitions may be discerned as a constant substitute in a situation of tremendous stress and emotional

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imbalance at any point of life (Borges &Werlang, 2006; Donath, 2014). In addition, suicidal ideation refers to suicidality without action, which includes all kinds of suicidal thoughts and schemes. A “suicide attempt" can be referred to as an unsuccessful suicide and it also constitutes intentional acts of lower fatality and intention.

Durkheim defined anomic suicide as a self-annihilation triggered by a person's inability to cope with sudden and unfavorable change in a social situation (Davison & Neale, 2001). Anomic suicide includes a situation where an individual is socially isolated from significant others. This may occur for reasons including changes in family structure and reduced employment opportunity. An individual does not benefit from societal normative restraints because he or she no longer participates in society. This shows how the boundaries between the family system and the wider social environment pose challenges to the adolescent living within the family, in terms of building a healthy autonomous identity and disengaging from the family, in order to become an independent individual. The challenges these adolescents face, often result in feelings of hopelessness and helplessness, associated with depression, which in turn is associated with suicidal behavior including suicide ideation.

A study by Huff (2000) identified factors that related to adolescent stress and predicted suicide ideation in these individuals. These factors included depression, family disruption, poor grades, drug and alcohol abuse. These findings are consistent with theory that speaks about the individual being interconnected with their environment and it is a combination of many internal and external factors that bring about stress for the developing adolescent.

A review also made by Mc Quillan (2000) indicated that there is an interplay of multi factors including depression and homosexuality—due to the hostility that is often experienced by the person. Sexual abuse, lack of coping, social problem-solving skills stemming from family dysfunction, feelings of isolation and helplessness, contagion, gender differences, alcohol and drug abuse, psychiatric disorders, biological factors, as well as natural disasters are also risk factors.

Although the link between hopelessness, depression and suicide has been stressed above, it is important to be aware that the common psychological assumption that depression causes suicide is more complex than this one-to-one association. Zhang and Jin (2000) speak about a model that integrates individual characteristics (depression and attitudes toward suicide) and social structural characteristics (including gender and family cohesion). This model assumes that suicide ideation is an individual behavior that is influenced by social structure, both directly and indirectly through individual attitudes and behaviors. Suicide ideation is predicted simultaneously by the two characteristics mentioned above.

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According to (Pillay and Schlebusch, 1987). Attempted suicide refers to the failed attempt to take one's life. It is the intention of the individual to take their own life, but for whatever reason, the attempt fails. This differs from parasuicide, which is distress behavior. It is a cry for help. The individual intends to inflict self-harm upon themselves without fatal injuries. It has been found by, MacLeod, Pankhania, Lee and Mitchell (1997, as cited in O'Connor, Connery and Cheyne, 2000) that individuals who engage in deliberate self-harm irrespective of intention are impaired in their ability to generate positive future thoughts, when compared to controls drawn from either hospital or non-hospital settings. MacLeod (1992, as cited in Williams and Pollock, 1993) found that while both parasuicide and completed suicide are related to depressive experiences, they differ to the degree of anger expressed. Parasuicide is related to the experience of anger, whereas suicide is more related to giving up. Suicidal people are often poor at solving interpersonal problems.

RESULTS AND DISCUSSION

THEMES	CODES
Family Issues	• Mother and father always fighting • Father 's infidelity • Brother addicted to drugs • Fear and phobia of her brother • Mother threated with a gun • Violent behavior of a brother • Falsely accused by brother of using drugs • Dominant father • Brother always provoking • Brother irrationally behaving • Always in conflict with father • Conflict with aunt • Conflict with grandmother's live in partner Being blamed of the conflict

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Rejection	• Being unwanted • Unsympathetic father • Wanting for love • Deserted by a boyfriend
Family Disruption	• Younger brother and sisters were given for adoption • Abandoned by her mother • Separation of parents due to mother's infidelity Abandoned by his mother • Separation of parents • Father stabbed to death • Left by grandmother • Loss of a father • Break up with a married boyfriend Betrayal of a boyfriend
Maltreatment	• Treated unfairly Miserable life • Unbearable pain
History of family suicide	History of family suicide
Helplessness	• No one to talk to • Nobody understands • No one to confide with • Overburdened with responsibilities Not being listened to • Unable to control oneself
Lack of coping skills	• Absence of a supportive mother • Lack of empathy
COPING	
Acceptance	Accepting things little by little
Focus on Studies	• Study hard in order to have better future • Desire to finish
Presence of supportive people	• Supportive friends • Supportive classmates • Supportive mother
Positive thinking	• Having positive thoughts
Prayers and trust in God	Go to church and pray Leaving everything to God Trusting God Prayers

From the narratives of seven adolescents who had attempted suicide, six themes emerged, namely family issues, stressful life events, helplessness, hopelessness, lack of coping skills, and coping. The following were the sub-themes: family conflict, rejection, family disruption, maltreatment, low self-image, and history of suicide. According to the World Health Organization (2014), depression, poor

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self-esteem, hopelessness, helplessness, the suicide of family members, bullying, poor school performance and family problems are the risk factors of adolescent suicide. The results of this study are consistent with these findings.

The adolescents had varied family issues, such as having parents always in conflict, being an unwanted child, thus always in conflict with a parent, and conflict with extended family. These adolescents were living with a very stressful environment that caused them pain. They expressed how difficult their situation was having such kinds of parents and other family members. They were feeling psychologically distressed by the events that had happened around them. According to Kohlberg, Peña, and Zayas (2010), adolescents who attempted suicide described their family as stressful, unsupportive, highly conflicted, and emotionally distant.

Some of the adolescents had experienced rejection. One from both an unsympathetic father and from a love relationship. According to Beautrais (2000), life stressors such as interpersonal losses (e.g. break up with a girlfriend or boyfriend) and legal or disciplinary problems are associated with completed suicide. Those participants who experienced such problems were triggered to attempt suicide.

Similarly, there were experiences of abandonment among the adolescents and this is usuallyly by one or the other of the parents and usually at a very young age. From their narratives, they revealed how hard it was having no parents while growing up. They were disconnected from their parents and felt that they had no emotional support that could have been given by their mother. They also became lonely, helpless and desperate. According to Durkheim (1827/1951), despair is a consequence of isolation from a family and can be a driving force behind suicide. This results from a failure to build on the tasks in life and this left out an adolescent from his inner self. This was evident in the reasons why adolescents attempted suicide. According also to Zhang (2016), social withdrawal and disconnectedness from a family have been identified as factors in suicide. The adolescents were left to navigate all by themselves through their crisis. Conversely, De Luca (2016), the family is a key source of connectedness or youth and serves as a protective factor against suicide.

Moreover, Kidd, Henrich, Brookmeyer, Davidson, King, and Shahar (2006) stated that adolescents who are more connected and supported by their family have lower risk of engaging suicidal behaviors. According to Huff (2000), depression, family disruption, drug and alcohol abuse are factors in suicide. Brown et al. (n.d.), also stated that there is a strong evidence indicating that various forms of childhood maltreatment, and sexual, physical and emotional abuse predict suicide ideation and attempts among youths.

The World Health Organization (2014) also reported that having poor self esteem is a factor in suicide attempt. It is also consistent with the study that poor social skills, low self concept and social self-concept, and feeling rejected or isolated by peers can serve as a risk factor for adolescents (Reed, Bell, & Edwards, 2011). The adolescents had shared their feelings of being hopeless. According to the study of Howard-Pitney et al. (1992), hopelessness has also been linked to suicidality. The participants lost a sense of meaning in their lives, so it caused them to make suicide attempt.

On the lack of coping skills, participants who have no emotional support from their parents triggered them to make suicide attempt. Family is the basic unit of society and parents especially are a source of emotional support. The absence of this results in an unhealthy ego. According to Erikson, adolescents in this stage face identity crisis. He further stated that when adolescents fail to successfully navigate their crisis, they can become distant and self-contained or conversely, they become needy, dependent and vulnerable. If they do not resolve their crisis, their emotional development becomes stalled and as a result, they will become isolated and lonely without social supports. Erikson further said that when youth become stuck in this stage, they will be unable to become mature adults.

Adolescents in this study also expressed how they coped after their suicide attempt. Their ways of coping included acceptance, realization, positive thinking, presence of supportive friends, classmates and other members of the family, prayers and faith in God, joining in religious activities, and by focusing on their studies and future. Two of the participants expressed that they have learned to accept the things that happened with them. They have accepted it little by little and begin ignoring what has happened. In that way they will be able to go on with their studies. They also realized that ending their life is such a great sin and they are afraid of God. Two of the participants also tried to develop positive thinking for they want to move on with their lives. Three of them expressed also that with the help and the presence of their classmates and friends they have learned to cope and give themselves another chance.

Two of the participants also expressed that due to the unconditional love of their mother they were able to transcend of what had happened to them. It has been said that the family is a basic unit of the society. Parents are the source of emotional support and the absence of this will result in inferiority. This results from a failure to build on the previous tasks in life and this left these adolescents

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isolated from their inner "self" (Erikson, 1968, p.124). The absence of parents as they were growing up tendered them emotionally unstable due to to the lack of adult support. According to Erikson, adolescence is called the period of "identity versus identity confusion." This crisis represents the struggle to find a balance between developing a unique, individual identity while being accepted and "fitting in." Thus, the youth must determine who they want to be, and how they want to be perceived by others. Erikson believed that when youth successfully navigate this crisis, they emerge with a clear understanding of their individual identity and can easily share this "self" with others.

Adolescents who attempted ending their lives felt blessed to survive and be given a second chance at life. They lived to tell their tale. And most of them were thankful they did not die and that they were given the opportunity to correct the mistakes they committed in the past. They may not be able to change the past completely but there is hope to better themselves and their future. They also regained their self-worth and their value in their group of friends and by joining religious activities. They now had a sense of direction and felt that they belonged. And in this new-found family, they were able to receive spiritual and psychological intervention as well as counseling that played a big role in their recovery.

Some of the young people in this study turned their focus on their studies in order to have a better future. They found that by aiming to have good future they wallowed less and less in their anxiety and depression and developed resilience in facing life's challenges. They eventually turned to positive coping styles to weather the storms that they faced every day.

CONCLUSIONS

A suicide attempt is defined as an attempt to end one's life but the individual survives. There are various factors why adolescents attempt suicide. Risk factors include depression, family issues, academic problems, alcohol and drug substance abuse, stressful life events, bullying, maltreatment, sexual abuse, hopelessness, psychiatric disorders, history of suicide, biological factors, and natural disasters. Adolescents who face multiple factors are more at risk. Adolescent suicide is common to female than male, but males usually die compared to females.

This study used a qualitative design. Seven adolescents were selected through purposive sampling from a selected high school and college in Surigao del Sur. In-depth interview with semi- structured questionnaire was used to understand the lived experiences of adolescents who had attempted suicide.

The result of this study revealed that the factors that triggered these adolescents to attempt suicide included family issues, stressful life events, hopelessness, helplessness, and lack of coping skills. The coping mechanisms that the participants adapted were acceptance According to Bhugra (2010), religious beliefs act as buffers against emotional distress and provide a factor of comfort to distressed individuals. Thus, it can be said that religion serves as a protective factor against suicide attempts. Furthermore, in this study the protective effect of religion was found. Social support is also one of the protective factors of suicide, according to Meadows, Kaslow, Thompson, and Jurkovic (2005)., focus on studies, realization, presence of supportive friends or loved ones, and prayers.

It was revealed that these coping mechanisms enabled them to go on with their lives after they had attempted to end their lives. In spite of their situation, they were still able to surmount the odds by making use of adaptive coping mechanisms.

The discussion of this study was grounded on Eric Erikson's Theory. Emergent themes were considered to investigate the responses of the participants. The adolescents felt helpless and incompetent at facing their family and personal crisis because they were too emotionally immature. This also caused them to have psycho-emotional problems and in turn causing them to be in deep loneliness and despair thus made them respond maladaptively.

The adolescents in this study were devastated by the family problems and conflict, abandonment by their own parents, and unsympathetic or unsupportive relatives who were supposed to be caring for them. As a matter of fact, in the case of one participant whose parents were always fighting and with a brother who was a drug dependent who was violent at home, the stressful life events caused her much confusion, distress, and impairment in academic functioning. Family issues such as abandonment also caused the participants to be left lonely, helpless and hopeless. They experienced pain and struggle when they were left uncared for. They were triggered to attempt suicide because there were so many other stressors that surrounded them. They were left on their own to make decisions. They attempted to end their lives because the pain they were experiencing was intolerable. They were suffering from sense of isolation. They were disconnected to their loved ones due to family problems and conflict. Their sense of isolation caused them to feel lonely and desperate.

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Based on the findings of this study, it is concluded first of all that much of what is associated with adolescent suicide has to do with family issues, as evidenced in such factors as family disruption, abandonment (by a significant family member), and rejection as "an unwanted child" (by a parent). This primarily led to feelings of hopelessness, helplessness, low self- esteem, and the non-development of appropriate coping skills. However, adolescents do try and adapt through the development of a spiritual life, by a renewed focus on studies, and by the presence of supportive people.

The adolescents in this study felt that their sufferings were unique only to them. They were left to their own in navigating their crisis because of the absence of family support. According to Erikson (1968), these adolescents are adults in the making. They may appear an adult but no doubt, they are young, immature, and impulsive. Heightened emotionality and negativity may be triggered by untoward circumstances and stressful life events.
When adolescents cannot solve the crisis in this stage, they will become emotionally immature adults. However, as shown in this study, adolescents are able to transcend or surmount their painful situation. They are able to rise above negative circumstances through various ways of coping. They have the capability to transform themselves into a more mature stance and this more positive outcome is worthy of our attention as well.

An intervention program is vital for these young people so that they may continue to develop in a positive direction. A school-based intervention program can also include early detection and emphasize suicide prevention.

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