Study of Suicidal Ideation among Adolescents in Relation To Anxiety

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Abstract

Aim: The aim of the study was to assess suicidal ideation among adolescents in relation to anxiety. Materials and Method: The present study was conducted on two hundred (N=200) subjects, out of which one hundred (N=100) were male and one hundred (N=100) were female adolescents. For data collection, Beck's Suicide Intent Scale by Aaron T. Beck and Beck Anxiety Inventory by Aaron T. Beck were used and the tools were taken online from websites. Results: The coefficient of correlation between suicidal ideation and anxiety of adolescents was found to be positive. A positive correlation was also found between suicidal ideation and anxiety of male adolescents and female adolescents. Conclusion: A significant positive relationship was found between suicidal ideation and anxiety of adolescents.

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Introduction

Suicidal ideation, also known as suicidal thoughts, is thinking about, considering, or planning suicide. The range of suicidal ideation varies from fleeting thoughts, to extensive thoughts, to detailed planning. Suicidal ideation is generally associated with depression and other mood disorders; however, it seems to have associations with many other mental disorders, life events, and family events, all of which may increase the risk of suicidal ideation. Suicidal thoughts and attempted suicide take an emotional toll. For instance, one may be so consumed by suicidal thoughts that he can't function in his/her daily life while many attempted suicides are impulsive acts during a moment of crisis, they can leave an individual with permanent serious or severe injuries, such as organ failure or brain damage. Anxiety is our body's natural response to stress. It's a feeling of fear or apprehension about what is to come. The first day of school, going to a job interview, or giving a speech may cause most people to feel fearful and nervous. But if our feelings of anxiety are extreme, last for longer than six months, and are interfering with one's life, the person may have an anxiety disorder. Increased heart rate, rapid breathing, restlessness, trouble concentrating, difficulty falling asleep are some signs of anxiety. A person's anxiety symptoms might be totally different from someone else's. That's why it's important to know all the ways anxiety can present itself. Norton et al., (2008) concluded that suicidal ideation and anxiety disorders as elevated risk or artifact of comorbid depression that research into the possible relationship between anxiety disorders and suicidal ideation has yielded mixed results, leading some to suggest that the positive findings between anxiety and suicidal ideation might simply be a by-product of comorbid

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depression. Norton et .al., (2008) examined the relationship between anxiety disorder symptoms and suicidality using continuous scales and controlling for depressiveness. Data regarding the severity of panic, social anxiety, generalized anxiety, and obsessive-compulsive symptoms were obtained by them from a sample of 166 college students. Results of their study generally supported that anxiety disorders convey risk for suicidal ideation above and beyond any co-occurring depressiveness, and anxiety and depression together conveyed an additional interactive risk, Min et al., (2015) investigated resilience moderates the risk of depression and anxiety symptoms on suicidal ideation in patients with depression and/or anxiety disorders that the role of protective factors for suicidal ideation, which include resilience and social support among psychiatric patients with depression and/or anxiety disorders who were at increased risk of suicide. Demographic data, history of childhood maltreatment, and levels of depression, anxiety, problematic alcohol use, resilience, perceived social support, and current suicidal ideation were collected by Min et.al. (2015) from a total of 436 patients diagnosed with depression and/or anxiety disorders. Moderate-severe suicidal ideation was reported in 24.5%. Their results indicate that resilience potentially moderates the risk of depression and anxiety symptoms on suicidal ideation in patients with depression and/or anxiety disorders. Gobbi et al., (2019) investigated association of cannabis use in adolescence and risk of depression, anxiety, and suicidality in young adulthood that to provide a summary estimate of the extent to which cannabis use during adolescence is associated with the risk of developing subsequent major depression, anxiety, and suicidal behavior. Longitudinal and prospective studies, assessing cannabis use in adolescents younger than 18 years (at least 1 assessment point) and then ascertaining development of depression in young adulthood (age 18 to 32 years) were selected, and odds ratios (OR) adjusted for the presence of baseline depression and/or anxiety and/or suicidality were extracted. Although individual-level risk remains moderate to low and results from thier study should be confirmed in future adequately powered prospective studies, the high prevalence of adolescents consuming cannabis generates a large number of young people who could develop depression and suicidality attributable to cannabis. Hengartner, et al., (2020) examined cannabis use during adolescence and the occurrence of depression, suicidality and anxiety disorder across adulthood: Findings from such a longitudinal cohort study over 30 years that the association between cannabis use in adolescence and the occurrence of depression, suicidality and anxiety disorders during adulthood. A stratified population-based cohort of young adults (n = 591) from Zurich, Switzerland, was retrospectively assessed at age 19/20 for cannabis use in adolescence. The occurrence of depression, suicidality and anxiety disorders was repeatedly assessed via semistructured clinical interviews at the ages of 20/21, 22/23, 27/28, 29/30, 34/35, 40/41, and 49/50. About a quarter (24%) reported cannabis use during adolescence; 11% started at age 15/16 or younger and 13% between the ages of 16/17 and 19/20. In the adjusted multivariable model, cannabis use during adolescence was associated with adult depression but not anxiety disorders. First use at age 15/16 and younger and frequent use in adolescence were associated with a higher risk of depression in adult life. In such a longitudinal cohort study over 30-years, cannabis use during adolescence was associated with depression and suicidality in adult life. Biswas et al., (2020) examined global variation in the prevalence of suicidal ideation, anxiety and their correlates among adolescents. A population based study of 82 countries that suicidal ideation and anxiety are common among adolescents although their prevalence has predominantly been studied in high income countries. Data were drawn by them from the Global School-based Student Health Survey (GSHS) of adolescents aged 12-17 years between 2003 and 2015 in 82 LM-HICs from the six World Health Organization (WHO) regions. Multiple binary logistic regressions to estimate the adjusted association between adolescent age, sex, socioeconomic status, peer support, parentadolescent relationship, peer victimization, conflict, isolation and loneliness with suicidal ideation and anxiety was used. Their sample comprised of 275,057 adolescents aged 12-17 years of whom

51.8% were females). The overall 12 months pooled prevalence of suicidal ideation and anxiety were 14.0% and 9.0% respectively. The highest pooled prevalence of suicidal ideation was observed in the Africa Region (21.0%; 20.0–21.0%) and the lowest was in the Asia region (8.0%, 8.0–9.0%). For anxiety, the highest pooled prevalence was observed in Eastern Mediterranean Region (17.0%, 16.0–17.0%) the lowest was in the European Region (4.0%, 4.0–5.0%). Being female, older age, having a lower socioeconomic status and having no close friends were associated with a greater risk of suicidal ideation and anxiety. A higher level of parental control was positively associated with a greater likelihood of experiencing suicidal ideation and anxiety. Parental understanding and monitoring were negatively associated with mental health problems. Similarly, the odds of experiencing suicidal ideation and anxiety were higher among adolescents who had been experiencing peer conflict, peer victimization, peer isolation and reported loneliness.

Materials and Method

The present study was conducted on two hundred (N=200) subjects, out of which one hundred (N=100) were male and one hundred (N=100) were female adolescents from Patiala city, Punjab. For data collection, Beck's Suicide Intent Scale by Beck et al. (1979) and Beck Anxiety Inventory by Beck et al. (1988) were used and the tools were taken online from the websites www.kznhealth.gov.za and www.gphealth.org .

Results and Discussion

The variable of suicidal ideation among adolescents was tested for normalcy. Table 1 show that the values of mean, median and mode of the scores of adolescents on the variable of suicidal ideation was 11.03, 12.00 and 13.94 respectively which are quite proximate to each other. The values of skewness and kurtosis in case of adolescents were 0.222 and -0.782 respectively that showing the distribution as positively skewed and platykurtic. But these distortions are quite small. Therefore the distributions can be taken as normal.

Table 1. Mean, Median, Standard Deviation, Skewness and Kurtosis of scores of Adolescents on the variable of Suicidal ideation

Group	Mean	Median	Mode	S.D.	Skewness	Kurtosis
Adolescents	11.03	12.00	13.94	6.39	0.022	-0.782



Figure 1. Frequency Polygon of scores of Adolescents on the variable of Suicidal ideation

The variable of anxiety among adolescents was tested for normalcy. Table 2 shows that the values of mean, median and mode of the scores of adolescents on the variable of anxiety was 26.23, 27.00 and 28.55 respectively which were quite proximate to each other. The values of skewness and kurtosis in case of adolescents are -0.092 and -0.620 respectively showing that the distribution as negatively skewed and platykurtic. But these distortions are quite small. Therefore the distributions can be taken as normal.

Table 2. Mean, Median, Standard Deviation, Skewness and Kurtosis of scores of Adolescents on the variable of Anxiety

Group	Mean	Median	Mode	S.D.	Skewness	Kurtosis
Adolescents	26.23	27.00	28.55	13.14	-0.092	-0.620

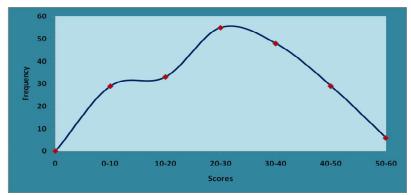


Figure 2. Frequency Polygon of scores of Adolescents on the variable of Anxiety

In the present study to observe the relationship between suicidal ideation and anxiety of adolescents, Pearson's Product Moment correlation technique was employed.

Table 3. Correlation between Suicidal Ideation and Anxiety of Adolescents

Variables	N	r	
Total Adolescents	200	0.64**	
Male Adolescents	100	0.61**	
Female Adolescents	100	0.67**	

^{**} Significant at .01 level

Table 3 show that the coefficient of correlation between suicidal ideation and anxiety of adolescents was 0.64 which was positive and statistical significant at .01 level. The results indicate that the adolescents with high anxiety level experience high suicidal ideation and the adolescents with low anxiety level experience low suicidal ideation.

The coefficient of correlation between suicidal ideation and anxiety of male adolescents as 0.61 which is positive and significant at .01 level. The results indicate that the male adolescents with high anxiety level experience high suicidal ideation and the male adolescents with low anxiety level experience low suicidal ideation.

The coefficient of correlation between suicidal ideation and anxiety of female adolescents as 0.67 which is positive and significant at .01 level. The results indicate that the female adolescents having higher level of anxiety experience higher suicidal ideation and the female adolescents having lower level of anxiety experience lower suicidal ideation.

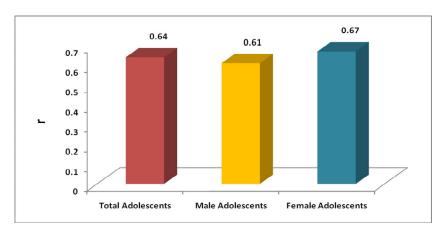


Figure 3. Correlation between Suicidal ideation and Anxiety of Adolescents

Conclusion

It was concluded that there was a significant positive relationship was found between suicidal ideation and anxiety of adolescents. The result indicates that the adolescents with high anxiety level experience high suicidal ideation and the adolescents with low anxiety level experience low suicidal ideation.

References

Beck, A. T., Epstein, N., Brown, G., & Steer, R. A. (1988). An inventory for measuring clinical anxiety: psychometric properties. Journal of Consulting and Clinical Psychology, 56, 893–897.

Beck, A. T., Kovacs, M., & Weissman, A. (1979). Assessment of suicidal intention: The Scale for Suicide Ideation. *Journal of Consulting and Clinical Psychology*, 47(2), 343-352.

Biswas, T., et.al.2020. Global variation in the prevalence of suicidal ideation, anxiety and their correlates among adolescents: A population based study of 82 countries. *Journal of EClinical Medicine*. Volume 24,100395, July 01,2020.

Gobbi, G., et.al.2019. Association of Cannabis Use in Adolescence and Risk of Depression, Anxiety, and Suicidality in Young Adulthood. *JAMA Psychiatry*. (Vol.76), 426-434.

Hengartner, M.P., et.al.2020.Cannabis use during adolescence and the occurrence of depression, suicidality and anxiety disorder across adulthood: Findings from a longitudinal cohort study over 30 years. *Journal of Affective Disorders*. (Vol.272), 98-103.

Min, J.A., et.al.2015. Resilience moderates the risk of depression and anxiety symptoms on suicidal ideation in patients with depression and/or anxiety disorders .*Journal of Comprehensive Psychiatry*. (Vol.56), 103-111.

Norton, P.J.,et.al.2008.Suicidal ideation and anxiety disorders: Elevated risk or artifact of comorbid depression? *Journal of Behaviour Therapy* Vol.39, 515-525.

Conflict of Interest: None declared