Suicidal risk and associated factors among schooled adolescents: A cross sectional Tunisian study

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Introduction

Suicide represent a worldwide health priority. In Tunisia, there is a growing increase of this phenomenon among adolescents, yet it remains under-studied. The current work was led to screen the suicidal risk among schooled adolescents and to identify suicidal risk associated factors.

Methods

The study was cross-sectional, descriptive and analytical, during the two last weeks of December 2016. It included a stratified random sample of 224 schooled adolescents, aged 15 to 21 years, from three state secondary schools in the governorate of Tunis-Tunisia. To assess the suicidal risk among those adolescents, we used the Suicide Probability Scale (SRS) translated and validated into French.

Results

Figure 1: Suicide probability according to SRS

Table I: Suicide probability according to personal factors

		No suicidal risk	Low suicidal risk	High suicidal risk	Significativity
Sex (%)	Male	96,5	2,63	0,87	P=0,03
	Female	89,1	10,9	0	
Alcohol and drugs consumption (%)	Yes	80,66	16,12	3,22	P=0,003
	No	94,82	5,18	0	
Inclination to be alone (%)	Yes	86,9	11,9	1,2	P=0,002
	No	96,42	3,58	0	

Table II: Suicide probability according to familial factors

		No suicidal risk	Low suicidal risk	High suicidal risk	Significativity
Family history of suicide(%)	Yes	78,57	21,43	0	P=0,004
	No	94,9	4,59	0,51	
Lack of family support (%)	Yes	96,03	3,97	0	P=0,02
	No	86,3	12,33	1,37	
Lone-parent families(%)	Yes	94,21	5,79	0	P=0,000
	No	83,33	16,67	0	

Discussion

The present study revealed that suicidal risk among adolescents was strongly correlated with female sex ($p=0.03$), and with alcohol and drugs consumption ($p=0.003$). Our finding is compatible with the fact that suicide ideation and attempts are more identified in girls and are mostly seen combined with cigarette and alcohol consumption, as in studies mentioned in the literature [1]. Moreover, adolescents' inclination to be alone has been proven to be highly linked to suicidal risk ($p=0.002$), as adolescents may harm themselves to cope with negative emotions such as feelings of loneliness and reduced self-esteem [2]. Furthermore, this study identified a correlation between suicidal risk and family history of suicide ($p=0.004$), the lack of family support ($p=0.02$) and lone-parent family ($p=0.000$). According to literature, adolescents who do not receive family support, live with a single parent or belong to a nuclear family, and have lower income than expenditures show a higher suicide risk compared to those who receive family support, have a big family and have an income equal to or higher than their expenditures [3]. Besides, some studies showed that fixed suicide risk factors include family history of suicide or suicide attempts and parental mental health problems [4].

Conclusion

These findings imply that suicide risk depends on accumulative exposure to a series of social, family and personality factors. Hence, suicide prevention programs for youth who fit these risk profiles should be given high priority.

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