

Suicidal Behaviour in Youth: Risk and Protective Factors

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Suicide is the second leading cause of mortality among Canadian youth, surpassed only by accidental death. All who work with youth must know the risk factors, warning signals, and possible precipitating events or stressors that can contribute to suicidal thoughts and/or gestures. Paediatricians, family doctors and adolescent health specialists are in a position to screen for risk of suicide in the same way that they might assess other types of health concerns or risk behaviours. The Table below outlines some key issues that anyone working with youth should notice to increase the likelihood of identifying a youth at risk and to decrease the risk of suicidal behaviour. These guidelines have been developed from a review of the clinical literature on youth suicide and the authors' clinical experience working with youth, and have been adapted by the Youth Net/Re'seau Ado Program, a mental health promotion program run for and by youth, which regularly screens for suicidal risk as part of its communitybased activities with youth.

A vital element in looking for risk factors and warning signals is identifying a significant change in a youth's behaviour from a baseline state. It is important to note that a minority of youth who attempt and commit suicide show no apparent signs of risk. It is equally important for professionals to increase their familiarity with protective factors and ways to decrease the risk of suicidal behaviour. Such factors have also been included in the table. A person working with youth needs to be aware that his or her willingness to discuss this issue with youth in an open and supportive manner actually increases the individual's sense of connectedness and starts to decrease the risk of suicidal behaviour.

1. Risk Factors for Youth Suicide

A. Youth factors

- Poor physical health and disabilities (eg, chronic illness)
- Poor mental health (depressive disorders, substance abuse, conduct disorders)
- Deterioration in school performance
- Prior suicidal behaviour
- Physical/emotional/sexual abuse
- Life stress (eg, relationship break-up)
- Risk-taking behaviours (eg, running away, substance use)

B. Psychological factors

- Cognitive distortions and hopelessness
- Impulsivity
- Lack of assertiveness
- Poor affect modulation
- Poor interpersonal problem-solving skills

C. Family factors

- Transient lifestyle
- Family disintegration (hostile separation or divorce, family violence)
- Family history of psychiatric illness (including suicidal behaviour)
- Parental unemployment (low socioeconomic status)
- Perceived or real lack of family support

D. Environmental factors

Contagion/imitation (direct exposure; indirect exposure -fiction [Werther effect], nonfiction)
Alienation (any minority groups, gays and lesbians)
Rural (isolated) residence
Access to firearms

2.Warning Signals

A. Behavioural indicators

Loss of interest in former activities (withdrawal from social contact)
Difficulty in concentrating, problems with judgement and memory
Dramatic shift in quality of school work and academic performance
Feelings of sadness, emptiness and hopelessness, often expressed in written assignments
Sleep disturbances
Strong and overt expressions of anger and rage
Excessive use of drugs and/or alcohol
Promiscuous behaviour
Uncharacteristic delinquent, thrill-seeking behaviour

B. Verbal or nonverbal symbolic communication

Occurrence of previous suicidal gestures or attempts
Statements revealing a desire to die or a preoccupation with death
Nihilistic comments. life is meaningless, filled with misery, what's the use of it all?
Verbal or written threats
Self-mutilation
Planning for death, making final arrangements, giving away favourite possessions
Sudden cheerfulness after prolonged depression may be a manifestation of relief because a decision has been made

3.Precipitating Events

Break-up with boy- or girlfriend
Conflicts and increased arguments with parents and/or siblings
Loss of a close friend
School-related difficulties - conflicts with teachers, classmates
Difficulties with the law
Change in parents' financial status
Serious illness or injury in family member
Any perceived or actual loss (friendships, Status, reputation)

4.Protective Factors for Suicide

Ethical and religious motivations
Aspirations, hopes, plans for the future
Access to and connection with support networks
Good mental health

5.Suicidal Impulses Decreases by

Increasing hope
Increasing problem-solving skills
Increasing communication
Increasing ability to tolerate psychic pain (adolescent and family)
Increasing connectedness
Increasing sense of belonging

Increasing sense of support