

A Study on the Parental Perception on Suicidal Ideation among Teenagers in Puttur City

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Abstract- Suicidal ideation involves thoughts of self-harm, ranging from fleeting ideas to detailed planning, often linked to mental distress. In India, 171,000 suicides occurred in 2022 (12.4 per 100,000). Parental perception shapes parenting styles, expectations, and responses based on beliefs, influencing children's behaviour and development.

This study explores parental perceptions of teenage suicidal ideation in Puttur City, with the objectives as understanding awareness, risk factors, and preventive strategies. A qualitative approach was used for primary data collection, utilising structured questionnaires distributed to 100 parents to gather insights on their perspectives and experiences. The questionnaires included open-ended questions to allow participants to provide detailed, personal responses, which were then analysed for common themes. Findings reveal that 71% of parents were unaware of youth suicide rates, with 48% identifying academic stress as a key risk factor. Additionally, 27% of parents highlighted open communication as an important prevention strategy for youth suicide. The study emphasises the importance of increased parental involvement in adolescent mental health. It recommends raising awareness among parents, fostering supportive family environments, and implementing targeted interventions to reduce teenage suicidal thoughts and promote overall well-being, ultimately strengthening the role of families in supporting adolescent mental health.

Key words: Parental perception, Suicidal ideation, Awareness.

INTRODUCTION

Suicidal Ideations (SI), often known as suicidal thoughts or ideas, are a broad term that includes a range of suicidal and death-related thoughts, wants, and obsessions. Because of this, there isn't a single,

accepted definition of SI, which causes on going challenges for academics, educators, and medical professionals. For instance, research projects frequently use different operational definitions of SI. This restricts the ability to compare findings from different studies and is frequently mentioned as a limitation in suicidal related meta-analyses. Suicide planning conversations are included in some definitions of Suicidal Ideation, but planning is seen as a distinct stage in others.

In India, the rate of suicide in 2021 was 12 per lakh, while in 2020 it was 11.3 per lakh. Additionally, this figure is the highest since suicides were first reported by the NCRB. In 2021, there is reason for serious concern. Suicide rates have increased in India throughout the past 50 years. Suicide rates increased by 7.2% in 2021 compared to 2020, with India having the highest rate globally. The proportion of suicide deaths globally ascribed to India increased from 18.7% to 24.3% for males and from 25.3% in 1990 to 36.6% in 2016 for women. Suicide was the leading cause of death in 2016 for both the 15–29 age group and the general population. The suicide rate in India increased from 7.9 to 10.3 per 100,000 people between 1987 and 2007, with higher rates in southern and eastern regions. Daily wage earners were the largest group, with Maharashtra having the highest number of fatalities in 2021.

Stress, self-doubt, pressure to perform, uncertainty about their financial status, sadness, and loss can all be contributing factors to teen suicide attempts. For some youngsters, suicide may seem like the solution to their problems. Suicidal thoughts and attempts are often associated with depression. In addition to depression, other risk factors include: Suicide attempts within the family history, Being around aggressive or obstructive

behaviour, impulsive behaviour, or violence, Having a firearm Abuse, feelings of helplessness or sadness, unexpected loss or rejection.

Suicide attempts are covered in Section 309 of the IPC. Even if the Mental Healthcare Act of 2017 defined suicide as a psychiatric disease, it is still illegal to commit suicide. Section 115 of the Mental Healthcare Act (MHCA) of 2017 decriminalised suicide attempts. Since Section 309 of the Indian Penal Code (IPC) presumes that a person attempting suicide is under a lot of stress, it should not be applied to them unless proven otherwise. A person who attempts suicide when under a lot of stress or mental suffering is not guilty until and until proven guilty, according to Section 115(1) of the MHCA. According to Section 115(2) of the MHCA, a person who has attempted suicide has a duty to receive care, treatment, and rehabilitation.

Preventing suicidal ideation among teenagers requires a compassionate, multi-layered approach that promotes open emotional expression, accessible mental health resources, and strong support systems. Teens should feel safe discussing their feelings with trusted individuals such as parents, teachers, and friends, who can offer reassurance and emphasise the importance of seeking professional help without shame. Community-based initiatives that destigmatise mental health issues, along with readily available counselling services and comprehensive mental health education in schools, are essential in building awareness and resilience. Parents play a vital role by maintaining open communication, creating a supportive home environment, modeling healthy coping strategies, staying alert to behavioural changes, and actively supporting their child's access to care. Through these collective efforts, society can nurture empathy, emotional strength, and a culture that values mental well-being in the next generation.

METHODOLOGY

Research methodology is the systematic process that scientists use to collect, analyse, and assess data in order to solve a problem or test a theory. The present study has been taken up with following objectives:

- To learn about parental attitudes towards suicidal thoughts among teenagers
- To analyse risk factors leading to suicidal ideation among teenagers

- To learn effective strategic techniques adopted by parents to prevent suicidal thoughts in teenagers

The questionnaire method was employed by the researcher to gather primary data in order to meet the study's purpose. A questionnaire with a series of questions was specifically created for this approach. Perceptions were collected from the parents of teenagers aged 10 to 19 years. Parents of children below 10 years and above 19 years were excluded. The questionnaire consisted of a list of questions or items used to gather data from parents about their attitudes, experiences, or opinions. It was used to collect qualitative information. Respondent consent was obtained by the researcher prior to collection of data. Both open-ended and closed-ended questions were included in the questionnaire. A total of 100 samples were collected from parents of teenagers across different areas of Puttur Taluk. Data coding was carried out to convert the collected data into a form suitable for analysis. This involved assigning numerical or categorical codes to responses, including survey answers and demographic information. The responses were analysed using Excel and SPSS software. The data was presented in the form of bar diagrams and graphs.

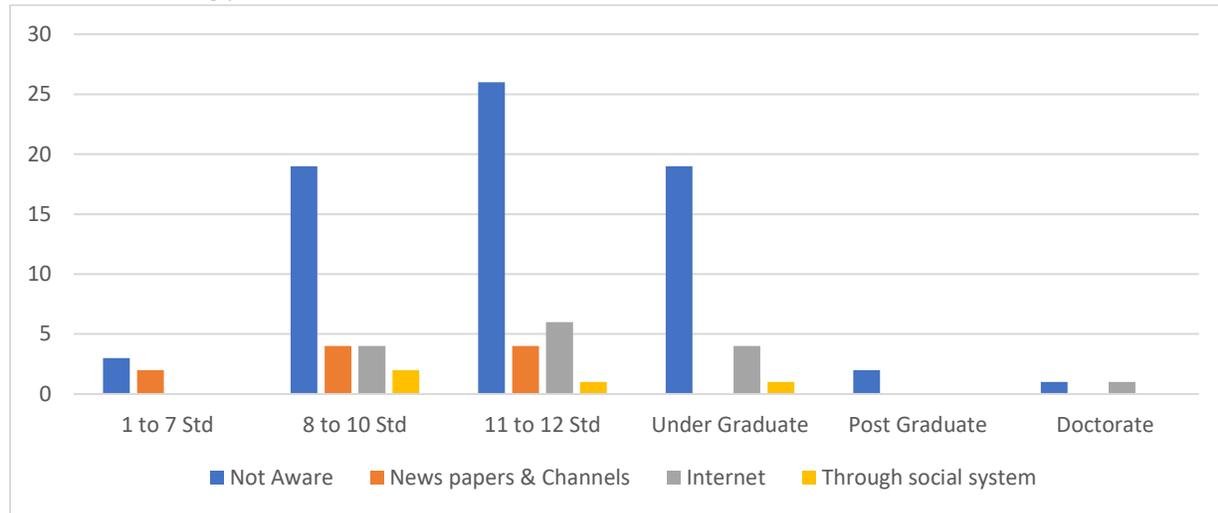
DATA INTERPRETATION

Data analysis involves systematically evaluating data using logical methods and presenting unbiased conclusions. The data from bivariate tables has been cross-referenced for interpretation, using techniques such as statistical analysis and inference.

1. Education level of the respondents in relation to their awareness about current youth suicide rate and sources:

Education level refers to the highest level of education a person has completed, or the current level of education they are in. It can also indicate the number of years of schooling a person has completed, including formal schooling, college, university, or professional schools. Statistics. Recorded annual youth suicide rates in India are 80 per 100,000 in females and 34 per 100,000 in males (compared to 10.4 per 100,000 in the general Indian population). This comparison helps to identify whether there are any misconceptions or gaps in understanding between education levels. For instance, someone with a higher education level might be

expected to have access to more information and thus a more accurate understanding of social issues like suicide rates among youths

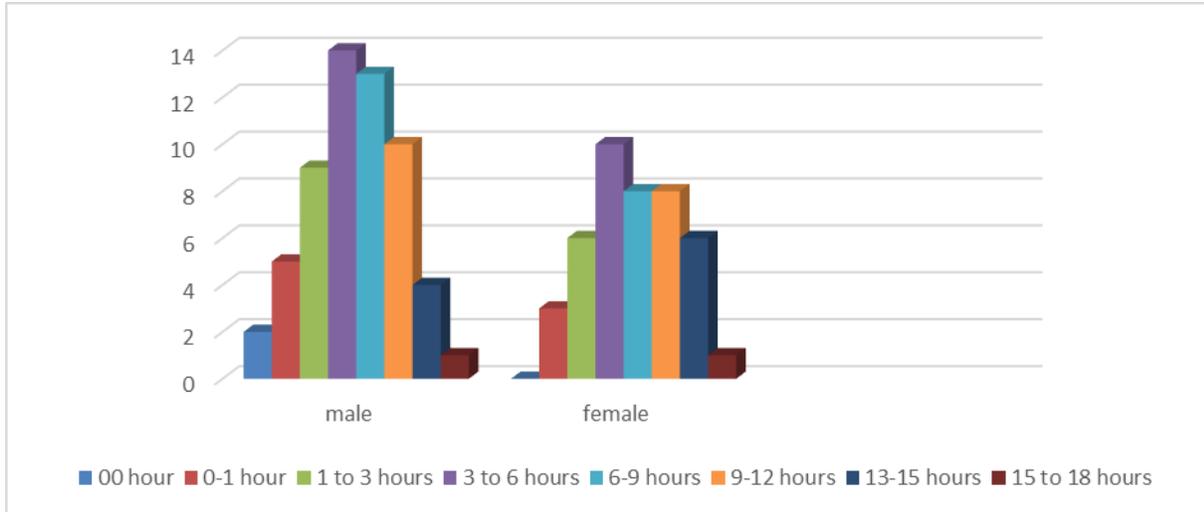


The data shown in the above chart pertaining to awareness about current youth suicide rate influencing for suicide shows 37 percent of respondents have completed pre university education level 29 percent respondents have completed high school education, 24 percent have completed under graduation, 5 percent have pursued primary school education and 2 percent are post graduates and only 02 percent have pursued doctorate. The data shown in above table depicts that 71 percent are unaware of current suicidal rate among teenagers followed by 15 percent says they are aware of suicide rate through internet and 10 percent says that through news and newspaper they know the teenage suicide rate next 4 percent per cent says that from social media they are aware of suicide rate. The cross related pertaining to awareness about current youth suicidal rate indicates among 37 pre university scholars 26 percent says that they are not aware of suicide rate among youths, 4 percent says that they are aware about suicide rate among youths by reading newspaper and by watching news channel. 6 percent says that they know through internet and 1 percent says through social media they are aware of current suicide rate, among 29 percent high school studied respondents 19 percent says they does not have any ideas regarding suicidal rate among youths in India, 4 percent each knows through internet and news channel respectively followed by 2 percent knows through

social media. Among 24 percent of Under graduates 19 percent have no knowledge regarding youth suicidal rate, 4 percent aware of it by reading newspaper 1 percent says through social media they are aware of, among 5 percent of respondents who got primary school education, 3 percent said they are not aware of, 2 percent expressed through newspaper they know the suicidal rate among youths. The 1 percent of doctorate respondent said that they are not aware of suicidal rates among youth in India

2. Gender and time duration spending with son or daughter in a day:

Gender includes the social, psychological, cultural and behavioural aspects of being a man, woman, or other gender identity. This includes norms, behaviours and roles associated with being a woman, man, girl or boy, as well as relationships with each other. To dedicate time to an activity. Spending quality time provides both children and parents with opportunities for open and meaningful conversations. Regular communications help children develop strong language skills, express their thoughts and feelings, and become effective listener and persuasive speaker. Understanding how gender of parents influences time spent with kids aids in shaping equitable parenting practices and fostering family bonds.



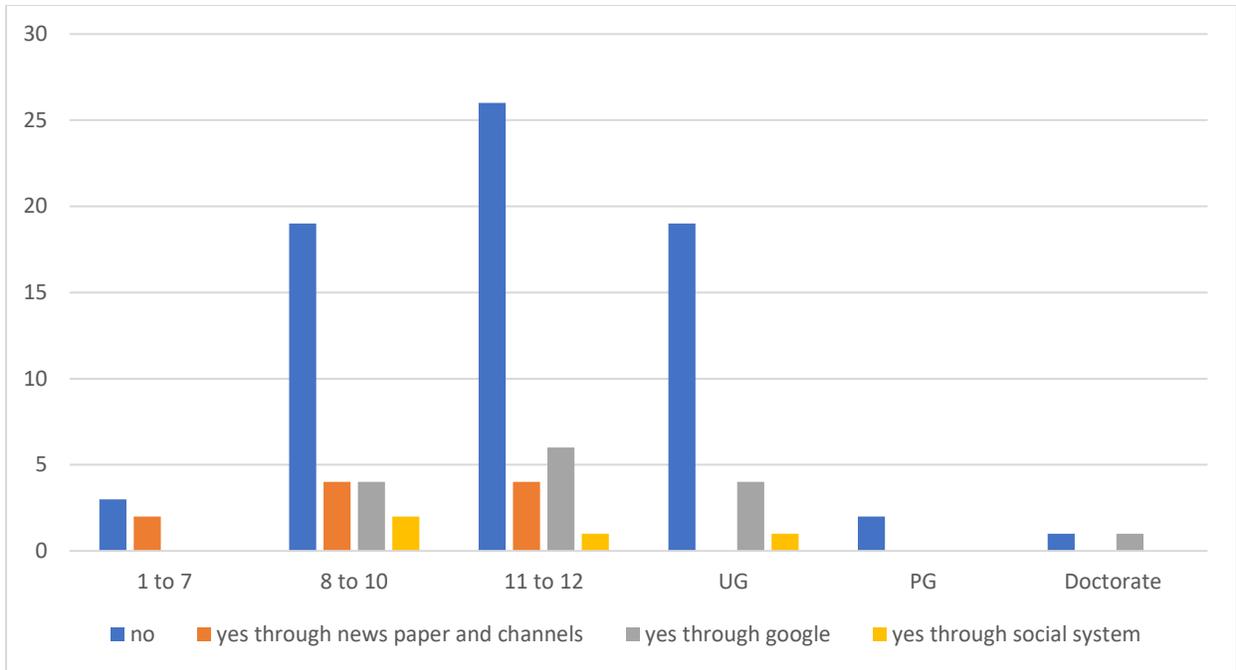
The data shown in the above chart pertaining to factors influencing for suicidal ideation among teenagers belongs to shows that 58percent of respondents belongs to male followed by 42percent belongs to female.

The data shown in above table depicts that 24percent says they spend 3-6 hours in a day with their teenage kids followed by 21percent says that they expend 6-9 hours in a day next 18percent suggests that they spend 9-12 hours of quality time with their teenagers. 15percent of respondents opines that they lavish 1-3 hours in a day with their kids followed by 10percent suggests that they allocate 13-15 hours in a day for their kids. 8percent of respondents suggests that they spend 0-1 hour in a day following that 2percent each says they don't spend any time with their kids and they spend 15-18 hours with their kids respectively. The cross related data pertaining to gender and time they spend with their teenagers indicates that among 58percent male respondents 14percent says that they spend 3-6 hours in a day with their kids, followed by 13percent says they lavish 6-9 hours in day with their teenagers, next 10percent says they spend 6-9 hours of quality time with adolescents followed by 9percent of respondents says that parents spend 1-3 hours in a day with their kids, 5percent of respondents says that they lavish 0-1 hour in a day, 4percent says that they spend 13-15 hours in a day, 2percent depicts that they does not spend any time with their kids 1percent of respondents suggests that they spend 15-18 hours in a day. Among 42percent female respondents 10percent says that they expend 3-6 hours in a day for their teenagers, 8percent each suggests they spend 6-9 hours

and 9-12 hours in a day with their kids respectively, next 6percent each opines that they expend 1-3 hours and 13-15 hours in a day respectively followed by 3percent of respondents suggests that they spend 0-1 hour in a day with their kids .lastly 1percent of respondents suggests that they spend 15-18 hours in a day with their kids . The present study reveals that 24percent of respondents' reveals that they spend 3-6 hours in a day with their teenagers.

3. Gender and factors influencing for suicidal ideation among teenagers:

Gender includes the social, psychological, cultural and behavioural aspects of being a man, woman, or other gender identity. This includes norms, behaviours and roles associated with being a woman, man, girl or boy, as well as relationships with each other. Factor is an element that contributes to a particular result or situation. suicidal behavior is associated with certain factors which could be genetic, psychiatric, environmental, psychological, social, and cultural factors. In addition, physical, sexual, and emotional abuses have also been related to suicidal ideation and attempt in adolescents. By exploring the correlation between the gender of parents of teenagers and factors influencing suicidal ideation, researchers and practitioners can develop more informed and targeted strategies to support families and promote adolescent mental health. it also helps to understand the difference between paternal and maternal opinion regarding suicidal ideation among their kids age group people.



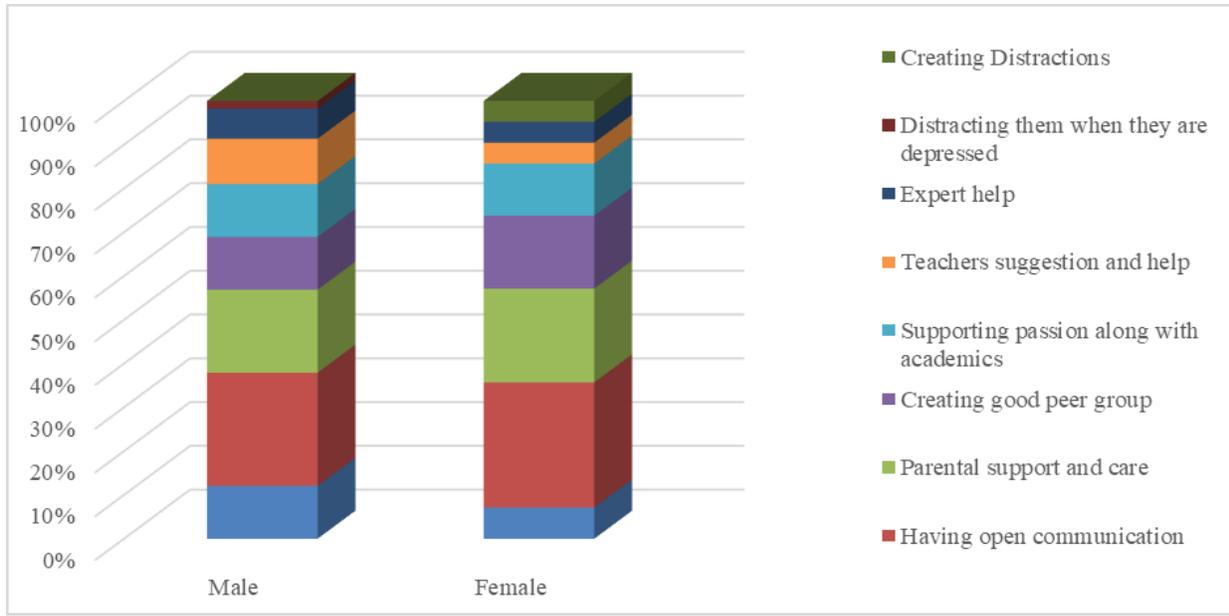
The data shown in the above chart pertaining to factors influencing for suicidal ideation among teenagers belongs to shows that 58percent of respondents belongs to male followed by 42percent belongs to female.

The data shown in above table depicts that 48percent academic stress is main cause for suicidal ideation among teenagers followed by 17percent says that due to smart phone and social media addiction next 14 percent says that due to relationship and love failure. 5 percent each opines that lack of parental care and peer pressure respectively, followed by 4percent each suggests that due to financial issues and bullying and ragging in the college and schools and 3 percent comments that due to loneliness and depression. The cross related data pertaining to gender and factors influencing for suicidal ideation among teenagers indicates that among 58 percent male respondents 30 percent suggests that academic stress is the main cause followed by 10 percent says that because of social media and smart phone addiction ,8percent says that due to love failure then 3 percent each depicts that loneliness or depression and peer pressure respectively following that 2 percent suggests bullying is a reason lastly 1 percent each respondents says that due to lack of parental care and economically poor are the factors influences teenagers to get suicidal ideation. Among 42 percent female respondents 18percent says that

academic stress is main factor followed by 7 percent says social media and smartphone addiction, next 6 percent opines that due to love failure followed by 4 percent of respondents says that lack of parental love and care, 3 percent says that due to financial instability lastly 2 percent each says peer pressure and bullying causes suicidal ideation among teenagers. The present study reveals that 48 percent of respondents reveals that academic stress is major cause for suicidal ideation among teenagers irrespective of gender.

4. Gender and Preventive strategies to reduce suicidal ideation

Gender refers to the characteristics of women, men, girls and boys that are socially constructed. This includes norms, behaviours and roles associated with being a woman, man, girl or boy, as well as relationships with each other. A prevention strategy is a plan or set of plans to achieve something, especially over a long period of time. Prevention strategies are activities that are targeted at a specific population or the larger community and are designed to be implemented before the onset of problems. Examining how gender intersects with preventive measures for teenage suicidal ideation informs targeted interventions, promoting mental health equity and well-being.



The data shown in the above chart pertaining to factors influencing for suicidal ideation among teenagers belongs to shows that 58 percent of respondents belongs to male followed by 42 percent belongs to female.

The data shown in above chart depicts that 27 percent says having open conversation is main preventive strategy for suicidal ideation among teenagers followed by 20 percent says that parental love and support can prevent teenage suicide next 14percent suggests that creating good peer group can stop youth suicide attempts. 12 percent of respondents opines that supporting passion along with academics, followed by 10 percent suggests that creating positive environment can reduce the youth suicide 8 percent of respondents suggests that teacher’s suggestion and help can help teenagers to lead happy life and 2 percent says creating distractions when they are depressed will reduce youth suicide rate lastly 1percent depicts that expert help will help the teenagers

The cross related data pertaining to gender and factors influencing for suicidal ideation among teenagers indicates that among 58 percent male respondents 15 percent suggests that having open conversation with teenagers is the main suicidal preventive strategy followed by 11 percent says that parental love and support will solve all the problems a ,7 percent each creating positive environment and supporting passion along with academics will reduce the suicidal ideation in teenagers respectively the 6 percent depicts that teachers help and suggestions following that 1percent

of respondents suggests help from experts. Among 42 percent female respondents 12 percent says that having open communication is main preventive measure followed by 9 percent suggests parental love and support, next 7 percent opines that creating good peer group will help teenagers for better life followed by 5 percent of respondents suggests supporting passion along with academics 2 percent each says that suggestion from teachers and creating distractions when they are depressed will reduce suicidal ideation among teenagers

The present study reveals that 27 percent of respondents reveals that having open conversation with teenagers is a major preventive measure to reduce suicidal ideation among teenagers irrespective of gender.

MAJOR FINDINGS

- The present study reveals that 71 percent of respondents reveals that they have no knowledge regarding the current suicide rate among youths irrespective of education level.
- The 24 percent of responders reveals that they spend 3-6 hours in a day with their teenagers.
- The present study indicates that 48 percent of respondents reveals that academic stress is major cause for suicidal ideation among teenagers irrespective of gender.
- The 27 percent of respondents reveals that having open conversation with teenagers is a major

preventive measure to reduce suicidal ideation among teenagers irrespective of gender.

SUGGESTIONS

Study underscores the critical role of parental perception in safeguarding the mental health and well-being of teenagers. By fostering empathy, resilience, and effective communication within families, we can work towards a future where every teenager feels valued, supported, and equipped to overcome life's challenges. It is imperative to translate our research findings into actionable strategies and policies that prioritize parental involvement in adolescent mental health care. Collaborative efforts between researchers, policymakers, mental health professionals, and community stakeholders are essential for implementing evidence-based interventions and fostering a culture of support and understanding around teenage suicidal ideation. By fostering open communication, reducing stigma, and enhancing parental coping skills, we can create a supportive environment that promotes mental well-being and resilience among adolescents. When addressing teenage suicidal ideation, parents should create a safe and supportive environment for open communication. Take any mention seriously and listen actively without judgment. Educate yourself about warning signs and seek professional help promptly if needed. Normalize discussions about mental health and encourage healthy coping strategies. Monitor your teenager's social media use and be involved in their daily life. Prioritize your own well-being to better support your teenager effectively.

CONCLUSION

Understanding parental perceptions on suicidal ideation among teenagers is important for effective intervention and support. Through this research, it becomes evident that creating a safe and open environment for communication is essential. Parents should be educated on the warning signs, take any mention seriously, and seek professional help promptly. Normalizing discussions about mental health and encouraging healthy coping mechanisms are essential aspects of parental involvement. Furthermore, the importance of monitoring social media and prioritizing parental well-being cannot be

overstated. By addressing parental perceptions, we can enhance our approach to supporting teenagers experiencing suicidal ideation and ultimately contribute to saving lives. The study sheds light on the crucial role of parental perception in addressing and mitigating teenage suicidal ideation. Through thorough analysis of parental perspectives, the study has uncovered significant insights that contribute to our understanding of adolescent mental health and suicide prevention. The findings underscore the complexity of parental recognition and interpretation of suicidal ideation among teenagers. By fostering open communication, reducing stigma, and enhancing parental coping skills, we can create a supportive environment that promotes mental well-being and resilience among adolescents.