

Combating Adolescent Suicide through Sports: Emotional Resilience, Social Belonging, and Mentorship

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Abstract—Suicide can be defined as the act of deliberately ending one's own life. It is a complex and deeply sensitive issue influenced by psychological, social, emotional, and cultural factors. Suicidal ideation, or the experience of thinking about or planning suicide, may emerge suddenly or may develop gradually in response to prolonged emotional distress, trauma, mental illness, academic pressure, family conflicts, or social isolation. For many, these thoughts can become overwhelming, clouding judgment and diminishing hope. Notably, such thoughts are not uncommon. Research suggests that approximately half of all adolescents have experienced suicidal thoughts at some point during their developmental years. Understanding how adolescents perceive and interpret suicidal thoughts is essential for developing effective prevention strategies. This study aims to explore the awareness, attitudes, and experiences of adolescents regarding suicidal ideation. By analysing their insights, the study seeks to identify key factors contributing to such thoughts and examine the role of support systems, mental health awareness, and coping mechanisms in preventing suicide among young individuals. This paper looks at the various ways sports can prevent adolescent suicide, focusing on three main areas: building emotional strength, fostering social connections, and the impact of mentorship and role models. By exploring the relationship between physical activity and mental health, this study aims to show how including sports in mental health promotion can effectively and sustainably lower suicide risk among youth.

Index Terms—Suicide, Suicidal ideation, Adolescents, Mental health, Emotional distress, psychological well-being

I. INTRODUCTION

Adolescent suicide has become a serious global public health issue, taking the lives of thousands of young people each year. According to the World

Health Organisation (2020), suicide is one of the main causes of death among individuals aged 15 to 29, especially in low- and middle- income countries. During adolescence, a time of emotional upheaval, identity formation, and increased sensitivity to peer and societal pressures, the risk of psychological distress and suicidal thoughts rises significantly. The way societies perceive and respond to suicide varies greatly, ranging from compassionate concern and prevention efforts to stigma and silence. These varying perceptions often shape how individuals cope with suicidal thoughts and whether they seek help. While traditional methods for preventing suicide have focused mainly on clinical approaches like counselling, therapy, and medication, there is a growing understanding of the need for community-based strategies that promote mental well-being and emotional strength. Participation in sports has emerged as an effective and accessible way to support adolescent mental health. Sports not only improve physical fitness but also offer a structured setting for emotional expression, stress relief, and self-discipline. Team activities help create a sense of belonging, aiding young people in fighting feelings of isolation and loneliness, which can lead to suicidal thoughts. Having positive role models like coaches, mentors, and senior players can further strengthen emotional well-being, providing guidance, support, and early intervention when signs of distress appear. Suicidal tendencies often arise from deeply conflicted and confused thought processes. In many cases, the intent behind suicidal behaviour is not necessarily death itself. As an individual process, suicidal behaviour can be hypothesised as progressing from suicidal thoughts and ideation to suicidal attempts (Brent et al., 1988; Paykel, 1974). The definition of suicide has long been a subject of debate among

experts and researchers. However, a common point of agreement in most definitions is that the outcome of the act is death. According to Farmer (1988), understanding suicide involves three key components: the death must be recognised as unnatural, the initiator must be the deceased individual, and the motive must be confirmed as self-destructive. Stengel (1973) defines suicide as a fatal act of self-injury undertaken with self-destructive intent, even if that intent is vague or ambiguous.

Suicide can be broadly defined as the act of purposefully ending one's own life. Societal views on suicide vary greatly depending on cultural, religious, and moral contexts. For example, many Western cultures, along with traditional Judaism, Islam, and Christianity, tend to regard suicide as morally and religiously unacceptable. This stigma has given rise to certain myths, such as the assumption that all suicides are the result of mental illness. In some societies, suicide attempts are still treated as criminal offences. According to the World Health Organisation (2020), nearly 8,00,000 people die by suicide each year, and many more attempt it. Suicide is a global tragedy that deeply impacts families, communities, and entire nations, often leaving lasting emotional and psychological scars on those left behind. Suicide can occur at any stage of life and was reported as the second leading cause of death among individuals aged 15–29 globally in 2016. Alarming, over 79% of global suicides in that year occurred in low- and middle-income countries.

The phenomenon of suicide and suicidal tendencies has become a critical public health concern across both developed and developing nations. There is a pressing need for comprehensive, in-depth, and systematic reviews of suicide prevention programs specifically designed for school environments. It is also essential to identify specific subgroups for which targeted and effective prevention programs exist, such as those in alternative education settings. It is important to distinguish between suicidal behaviour and self-harm. While suicidal behaviour involves intent to end one's life, self-harm refers to deliberately injuring oneself without the intent to die. This behaviour is often referred to as self-injurious behaviour by researchers (Alpher & Peterson, 2001; Bockian, 2002), and although it may not involve suicidal intent, it still indicates underlying psychological distress and requires appropriate

intervention and care.

Deliberate self-harm (DSH), also referred to as self-mutilation, has been defined as the intentional destruction or alteration of body tissue without apparent or conscious suicidal intent, yet capable of causing severe tissue damage (Gratz, 2003). Suicidal thoughts and behaviours are alarmingly common, even among pre-pubertal children. The most significant risk factors associated with teenage suicidality and self-harm include psychiatric disorders, particularly depression, poor child-parent relationships, experiences of sexual abuse, exposure to violence (such as domestic violence or bullying), and a family history of suicide, especially involving a first-degree relative. These risk factors tend to have a cumulative effect, increasing the overall vulnerability of the individual.

Effective prevention of suicide among teenagers requires early identification of children experiencing adversity in their daily lives and providing them with appropriate emotional and psychological support. In primary health care settings, nurses and other clinicians must recognise signs of suicidal ideation in children and promptly refer them for psychiatric evaluation and care. In acute psychiatric treatment, the primary goals when working with suicidal children include ensuring the child's safety, addressing the underlying causes of their distress, and helping to restore a sense of hope. Early intervention and comprehensive support systems are essential in mitigating the risks of suicide and promoting long-term mental well-being in young individuals.

II. REVIEW OF LITERATURE

Choquet, M., & Menke, H. (1997) conducted a study titled *"Suicidal Thoughts During Early Adolescence: Prevalence, Associated Troubles, and Help-Seeking Behaviour."* A total of 1,600 adolescents between the ages of 13 and 16, residing in a county bordering Paris, were interviewed regarding their health, use of both legal and illegal substances, behaviour patterns, and help-seeking behaviour. The results revealed that 14% of boys and 23% of girls had experienced suicidal thoughts, and 5% and 10%, respectively, reported having such thoughts frequently. The study suggests that the discrepancy between adolescents' difficulty in communication and their willingness to seek physical health care indicates a critical need for

targeted psychological support.

Westefeld, J. S., Whitchard, K. A., & Range, L. M. (1990) conducted a study titled *“College and University Suicide Trends and Implications.”* Suicide among college and university students remains a significant concern on campuses across the nation. This is due not only to the frequency of suicide attempts and completions but also to the emotional and psychological trauma often caused by these events. While extensive literature exists on suicide in general and on child and adolescent suicide, comparatively little has been written about suicidal trends specifically among college students. The purpose of this study was to summarize the key literature in the area of college student suicides, provide a critical review, identify recurring themes, and discuss future research directions.

Valente, S. M., Saunders, J., & Street, R. (1988) conducted a study titled *“Adolescent Bereavement Following Suicide: An Examination of Relevant Literature.”* The study explores how the suicide of a loved one can profoundly affect adolescents, leading to increased morbidity, heightened fears of death, and psychological disorders. Bereavement due to suicide is linked with elevated suicide risk among adolescents. However, the study highlights methodological limitations, such as inconsistent definitions of adolescence, reliance on clinical samples drawn from psychotherapy populations, and other research design issues that require attention in future investigations.

Counselling, support, and proper care are important. Many people believe that teens attempt suicide to make a statement, but there can be real reasons behind it. They expressed that

suicide is not an easy topic to discuss, and some feel scared when they hear about it. Most teens said that during a crisis, they share their feelings with their loved ones. Some mentioned that this sharing might lead to solutions. A few said that suicidal thoughts often start in their teenage years, while others said they arise when they feel lonely or helpless. They all agreed that more women than men commit suicide, believing that women are more sensitive. Some remarked that suicide without warning signs can be recognised through observation, while others believed it can be prevented by offering care and support. Two participants argued that without warning signs, it's impossible to understand a teen's

thoughts, leading them to say it's best to let them go.

Most of the teens agreed that if a friend has suicidal thoughts, they should provide full support, and some said they would inform parents if necessary. Everyone agreed that parents can help reduce teen suicidal thoughts by offering proper care and support during crises. Some believed teachers do not play a role in teen suicide, while others felt that teachers do have an impact; they can influence a student's success and failure. A teacher can guide a teen positively through motivation and advice. All participants said that connecting with others, practising yoga, and meditating might help relieve stress and prevent negative thoughts. Most indicated that sharing feelings with loved ones can lower stress and that relaxation techniques can also be beneficial.

Many expressed that when feeling hopeless or helpless, they might react with irritation, pray, or try to cope with their situation. Some said that when they feel down or depressed, they keep busy with activities, and others noted that outings and open conversations can help prevent suicidal thoughts. Almost all participants noted that parents often place too much pressure on their children to succeed, which can lead to increased suicidal thoughts, though some disagreed with this view. Most said that suicidal thoughts are not inherited but arise from crises, with two participants believing that they can be inherited. Nearly everyone agreed that teens who lose parents can be helped through full support and instilling hope. Others suggested that providing healthy food and encouraging friendships can also help.

Many stated that the entire family should seek counselling if a teen has suicidal thoughts. This can help ensure the teen feels cared for and reduce negative thoughts, although some felt that only the teen needed counselling. Thus, the hypothesis has been dismissed, showing the influence of suicidal thoughts among teenagers. With motivation and effective awareness classes, teens might better navigate their crises.

III. PHYSICAL BENEFITS THAT INFLUENCE MENTAL HEALTH

Regular physical activity is important for maintaining health and improving mental and emotional well-being. Many studies show a clear link between exercise and better mental health, especially in

lowering symptoms of depression, anxiety, and stress. One key factor in this is the release of endorphins, which are often called the brain's "feel-good" chemicals. Endorphins are neurotransmitters that help ease pain, cut stress, and create positive feelings similar to those caused by morphine. When people participate in activities like running, swimming, dancing, or even brisk walking, their brains produce more endorphins. This boost leads to a better mood and an overall sense of well-being. This natural mood lift can be especially helpful for those dealing with depression or emotional struggles.

IV. PROMOTES SOCIAL INTERACTION AND BELONGING

Regular physical activity not only triggers the release of endorphins but also significantly improves sleep quality, which is vital for mental health. Poor sleep often leads to irritability, fatigue, cognitive issues, and emotional instability. Exercise helps regulate circadian rhythms and encourages deeper, more restorative sleep by shortening the time it takes to fall asleep and increasing total sleep time. Better sleep improves emotional regulation, increases focus, and supports cognitive function, all of which are important for maintaining a balanced mental state. Additionally, physical activity lowers the body's stress hormones, such as adrenaline and cortisol, which helps people manage daily stress more effectively. The overall impact of these changes boosts emotional resilience, self-esteem, and a greater sense of control over life, all of which act as safeguards against mental health disorders. The physical benefits of exercise go beyond fitness; they also affect brain chemistry, emotional stability, and psychological well-being. Adding regular physical activity to daily routines is a powerful and accessible way to support mental health and improve overall quality of life.

Participation in sports, especially team-based activities, greatly promotes social interaction and builds a strong sense of belonging, both of which are essential for emotional and psychological well-being. This is particularly true for adolescents and young adults, who have a deep need to feel connected, accepted, and valued within a group. A lack of social support or ongoing feelings of isolation can significantly heighten the risk of mental health

issues, such as depression and thoughts of suicide. Team sports create a natural setting for forming relationships and connecting with peers. When individuals join team activities, they gain a sense of unity and shared identity, which helps them feel more connected. This group bond helps lessen loneliness and social isolation, major factors that can lead to suicidal thoughts and behaviours. Interacting regularly with teammates fosters accountability, mutual respect, and emotional support, acting as a psychological shield against life's challenges.

Being part of a sports team also provides a structured environment for friendship, peer support, and collaboration. These aspects contribute to a shared sense of purpose and belonging, giving individuals something to look forward to and keeping them engaged in positive routines. For many young people, their sports team becomes a key part of their social and emotional support network. Teammates often serve as informal counsellors or motivators, helping each other through tough times and encouraging open communication. Coaches, mentors, and senior players often act as role models and trusted figures, offering guidance and emotional stability. These relationships can be especially helpful for those who may not have strong support systems at home or elsewhere. The social connections formed through sports not only enhance relationships but also strengthen mental resilience and emotional security. Together, these protective factors reduce the chances of suicidal tendencies and improve overall mental health by fostering a sense of community, empathy, and shared identity.

V. PROVIDES A HEALTHY OUTLET FOR EMOTIONS

One of the key psychological benefits of sports and physical activity is that they provide a healthy way to express emotions. Many people, especially teenagers, have trouble expressing or dealing with strong feelings like anger, frustration, sadness, anxiety, or confusion. Without a safe and effective way to handle these emotions, they may turn to harmful coping methods, such as substance abuse, aggression, self-harm, or social withdrawal. These behaviours can raise the risk of suicidal thoughts. Engaging in activities like running, swimming, martial arts, or team sports allows individuals to direct their

emotional energy into movement. This offers a sense of release

and relief. Physical expression of emotion helps reduce emotional buildup and lessen psychological tension. For instance, a teenager overwhelmed by school stress or family problems might find temporary relief through intense physical activity. This kind of exercise serves as a natural stress reliever, promoting mental clarity and a more balanced view.

Furthermore, sports encourage individuals to focus on the present and shift their attention away from negative thoughts, which often come with depression and anxiety. By concentrating on game rules, teamwork, or physical skills, participants experience a form of mindfulness. This has been shown to lower emotional distress and improve emotional management. Taking part in sports also provides chances for non-verbal self-expression in a socially acceptable manner. For those who struggle to put their feelings into words, physical activity becomes a way to process and understand emotions. Additionally, the emotional ups and downs in sports, like winning, losing, or facing challenges, teach important lessons about resilience, coping, and emotional strength. Sports act as a safety valve for emotions, allowing them to be expressed, managed, and understood healthily. By encouraging emotional self-regulation and offering a structured outlet for emotional release, physical activity plays a vital role in emotional well-being and suicide prevention.

VI. CONNECTS WITH POSITIVE ROLE MODELS

Participation in sports gives young people valuable chances to connect with positive role models like coaches, mentors, trainers, and senior teammates. These figures often play an important role in both athletic growth and the emotional and psychological development of young athletes. Their constant presence, guidance, and support can have a lasting effect, especially for teenagers who might not have strong support at home or in school. Coaches and mentors are seen as authority figures who lead by example. They model discipline, perseverance, empathy, and leadership. Through encouragement and helpful feedback, they assist athletes in building self-confidence, resilience, and purpose. For many

young people, a coach or senior player becomes someone they can trust, share with, and admire, especially during tough emotional times.

These role models also have the chance to notice changes in behaviour, mood, or performance that might indicate emotional issues or mental health struggles. Because of their regular and close interaction with athletes, they can often spot signs of depression, withdrawal,

anxiety, or thoughts of suicide early on. Their awareness and prompt intervention, whether by providing emotional support, starting conversations, or prompting professional help, can be crucial in preventing a mental health crisis.

Additionally, positive role models in sports can help make conversations about mental health more acceptable, allowing young people to seek help without fear of judgment. By encouraging open discussions about mental wellness and emotional self-awareness, they help create a caring and supportive culture in sports. The presence of strong, compassionate, and attentive role models in sports reaches beyond performance and training. These individuals serve as pillars of support, shaping not just better athletes but also more emotionally balanced and mentally healthy individuals.

VII. CONCLUSION

In conclusion, sports and physical activity offer more than just physical fitness; they are effective tools for improving mental and emotional well-being. The release of endorphins, better sleep, and the creation of healthy routines help to reduce symptoms of depression and anxiety. Besides these physical benefits, sports encourage social interaction, a sense of belonging, and meaningful peer relationships that are essential for emotional strength. They also provide a healthy way to deal with tough emotions, helping people, especially adolescents, manage stress and emotional pain positively. With concerns growing over rising rates of adolescent suicide, incorporating structured sports programs into school curriculum, mental health strategies, and community initiatives can be crucial for prevention. By promoting participation in sports, we nurture healthier bodies and build stronger minds, resulting in more connected, emotionally resilient individuals.

Sports are a natural, easy-to-access, and holistic way

to improve mental health and overall well-being. Unlike many treatments that need clinical settings or specialised resources, sports can fit into daily routines, school environments, and community programs with relative ease. Regular participation in physical activity leads to better physical health as well as increased emotional strength, reduced stress, and higher self-esteem. When sports are combined with counselling services, mental health awareness campaigns, and strong family support, their effect becomes even more powerful. Together, these elements create a solid support system that meets the varied emotional and psychological needs of young people. By offering opportunities for expression, connection, and achievement, sports can greatly lower the risk of suicide, especially during the vulnerable times of adolescence and early adulthood. Schools, colleges, and community organisations must recognise the critical role of physical activity in suicide prevention. Promoting sports should go beyond the traditional focus on physical fitness or competition. Instead, it should be framed as a protective factor for mental and emotional health, capable of fostering a sense of belonging, purpose, and emotional balance. Ensuring that all youth, regardless of background, have access to inclusive, supportive, and engaging sports environments can make a profound difference in their mental health outcomes and overall quality of life.

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