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Research in Developmental Disabilities



Quarrelsome family environment as an enhanced factor on child suicidal ideation

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ARTICLE INFO

Article history:

Received 30 May 2014

Received in revised form 4 August 2014

Accepted 4 August 2014

Available online

Keywords:

Suicidal ideation

Depression

Quarrelsome family climate

Elementary school

ABSTRACT

Suicide is a leading cause of death in adolescents, and develops through a process leading from depression to suicidal ideation and self-injury. In this study, we analyzed and compared suicidal ideation among elementary school children from distinct families and school-related backgrounds. We conducted a cross-sectional study to investigate suicidal ideation in elementary school children in Miaoli County of Western Taiwan. Our study included 979 eligible participants and collected data, including suicidal ideation, depression scores, demographic characteristics, and family and school variables. The results revealed that 175 students (17.9%) exhibited depression, and 146 students (14.9%) had contemplated suicide. A quarrelsome family environment was found to be an important independent factor in child suicidal ideation after controlling for depression status. Children living in quarrelsome families showed a 3.7-fold risk of suicidal ideation compared with children in a harmonious family. Among boys living in quarrelsome family environments, suicidal ideation risk was 7.4-fold higher than for girls living in harmonious families. A 27-fold high increased suicidal ideation risk was also observed among the depressed children who living in the quarrelsome family environment, compared with the non-depressed in the harmonious family environment. This study provides novel evidence indicating the enhanced effects of a quarrelsome family environment combined with depression symptoms and among boys on suicidal ideation. These findings suggest of quarrels in a family environment playing an important role on elementary school children's psychological development, and may help parents in improving their mental health.

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1. Introduction

A 2007 World Health Organization (WHO) report on suicide prevention indicated that approximately one million people commit suicide every year and that the global suicide rate has increased by 60% over the past 45 years (WHO, 2007). Among young people 15–19 years of age, suicide is the fourth-leading cause of death worldwide (Wasserman, Cheng, & Jiang, 2005), and among people 10–24 years of age, 6% of all deaths worldwide in 2004 were attributed to suicide (Patton et al., 2009). Suicide is also a major problem in Taiwan: according to an official announcement made by the Department of Health, suicide is the second-leading cause of death among adolescents and young adults 15–24 years of age (Department of Health, 2012).

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Incidence of suicide among young adolescents and children is a critical global health concern. Suicidal behavior has been proposed to progress through a specific sequence involving suicidal ideation, self-injury, and, ultimately, death (Hamza, Stewart, & Willoughby, 2012; Peltzer & Pengpid, 2012). Studies have revealed that suicidal behavior are initiated during early adolescence (Hamza et al., 2012) and that approximately 6.8% of 7-year-old children have engaged in self-injuring behavior (Barrocas, Hankin, Young, & Abela, 2012). The problem of suicidality was reported to be more common in Asian young people than in those living in western countries, and a representative sampling of young people in Taipei City revealed that the prevalence of suicidal ideation was 17.0%, which was higher than that in Shanghai and Hanoi (Blum, Sudhinaraset, & Emerson, 2012).

Suicidal ideation might occur before teenage years and could substantially affect development later in life (Min et al., 2012; Muehlenkamp, Claes, Havertape, & Plener, 2012). Reports indicated that suicidal ideation was to be the major risk factors of suicide attempts in adolescents (Klonsky, May, & Glenn, 2012) and is highly correlated with subsequent suicidal behaviors and serious psychopathology (Nock, Joiner, Gordon, Lloyd-Richardson, & Prinstein, 2006).

Depression, in the presence or absence of other psychological disorders, has been widely reported to be associated with suicidal ideation in young people (Ruuska, Kaltiala-Heino, Rantanen, & Koivisto, 2005; Tuisku et al., 2006). Depressive symptoms were reported to be a critical factor in suicide attempts and suicidal behavior (Taliaferro, Muehlenkamp, Borowsky, McMorris, & Kugler, 2012), and depression was identified as one independent predictor of past-year and lifetime self-injury (Brausch & Gutierrez, 2010; Wilcox et al., 2012).

Studies considering gender issues have shown that depression and suicidal ideation are higher in girls than in boys (Barrocas et al., 2012; Blum et al., 2012). Family related factors have also been reported association with suicidal ideation in children, with living in single-parent families (Tran Thi Thanh, Tran, Jiang, Leenaars, & Wasserman, 2006), migration status (Blum et al., 2012), and a lack of parental attachment or support (Peltzer and Pengpid, 2012) being considered to increase the risk of suicidal ideation. Family environment of parental support, family conflict and family cohesion was significant predictors for children suicidal ideation (Brausch & Decker, 2013; Lin, Hsieh, & Lin, 2013; Springer, Parcel, Baumler, & Ross, 2006; Sun, Hui, & Watkins, 2006). Moreover, the likelihood of suicidal behaviors is high among children in families with a history of suicide (Blum et al., 2012) and among children living in low-income families and single-parent households (Wang, Lai, Hsu, & Hsu, 2011).

Suicidal ideation and behavior are concerned as serious growing issues in younger elementary-school children (Garrison, 1989; Min et al., 2012). And suicide problems in elementary-school children are not easily recognized which usually mistaken as accidents (Fish, 2000; Riesch, Jacobson, Sawdey, Anderson, & Henriques, 2008). According to Nock's study, prevalence of suicidal ideation and attempt in children before age 12 is much lower than adolescents between age 12 and 17, and the study also pointed out that 30% suicidal ideators will develop suicide plans or an attempts in their later lives (Nock et al., 2013). The results indicate that underlying risk factors of suicidal ideation in younger children might be different from those in older adolescents and suicidal ideation among elementary-school children is one global important issue which cannot be neglected for their mental health development.

We conducted this research to (a) examine the factors that influence the status of suicidal ideation in elementary-school children, and (b) to determine if the family environment playing the significant role on children suicidal ideation. This research was mainly focussed on elementary-school children and was concerned with their mental health. Our aims were to explore the potential risk factors of suicidal ideation among children and, based on the findings, to provide suggestions on improving children's mental health.

2. Materials and methods

2.1. Subjects

To investigate the mental health of elementary-school children, we contacted a total of 36 elementary schools in Mid-Taiwan Miaoli County whose students attended government-assisted after-school programs in 2009, and 29 of these schools agreed to join the study, as previously described (Lin et al., 2013). From these after-school programs, we enrolled 1643 students in Grades 3 through 6. The 29 schools were located evenly in the western side of the 10 most populous towns in the county. This study was approved by the Institutional Review Board of the Tri-Service General Hospital, National Defense Medical Center (Approval number: 98-05-239). Before conducting the study, parents were informed about the study contents and were given the opportunity to refuse to allow their children to participate in the study; the children were allowed to refuse to participate at any time. Trained assistants administered the surveys and measured children's height and weight during after-school class hours. Finally, there were 979 participants who had completed study questionnaires were analyzed. The response rate was about 60%. The enrolled 29 schools were located evenly at the west side of 10 more populous towns in the County. And respondents were equally distributed with boys and girls (50.6% vs. 49.4%), and representative from 3rd to 6th grade students of 31.4%, 30.6%, 21.0% and 17.1% respectively which provided meaningful information for the elementary school children in the county.

2.2. Measurement of depressive symptoms and suicidal ideation

The Depression Screen Scale for Children and Adolescents developed by Kao-Pin Chang to study domestic children and adolescents was used to measure the depression status of the children as described previously (Lin, Hsieh, & Tung, 2012; Lin,

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