



Original article

Psychological autopsy of seventy high school suicides: Combined qualitative/quantitative approach



G. Zalsman^{a,b,*}, Y. Siman Tov^{c,d,1}, D. Tzurriel^{c,e}, G. Shoval^a, R. Barzilay^a,
N. Tiech Fire^d, M. Sherf^f, J. John Mann^b

^a Geha Mental Health Center and Sackler Faculty of Medicine, Tel Aviv University, Tel Aviv, Israel

^b Division of Molecular Imaging and Neuropathology, Department of Psychiatry, Columbia University and New York State Psychiatric Institute, New York, NY, USA

^c Bar Ilan University, Ramat Gan, Israel

^d Ministry of education, Jerusalem, Israel

^e Feuerstein Institute, Institute Center for Enhancement of Learning Potential (ICELP), Jerusalem, Israel

^f Hospital Division, Clalit Health Services and Ben Gurion University, Beer Sheva, Israel

ARTICLE INFO

Article history:

Received 30 March 2016

Received in revised form 16 May 2016

Accepted 16 May 2016

Available online 6 September 2016

Keywords:

Suicide
Adolescence
Postmortem
Depression
School

ABSTRACT

Objective: Suicide is the leading cause of death among Israeli youths but data on causes are scarce. This study used psychological autopsies of 70 Israeli school students who committed suicide during 2004–2011, attempting to determine the causes.

Methods: Four narratives of the self were identified (qualitative analysis) and compared (quantitative analysis): (1) regressive: functioning and mood deteriorated continuously (45%); (2) tragic: doing well until rapid decline around suicidal crisis (20%); (3) unstable: peaks and crises throughout life (20%); and (4) stable: long lasting state of adverse living circumstances (15%). Functioning, mental disorders, stressful life events and substance abuse were examined.

Results: A representative profile of the suicide-completer emerged. Suicidality in the tragic narrative involved shorter crisis, fewer risk factors and less psychopathology than the other narratives, also better general functioning and better school performance. Though decrease in functioning was evident in all groups, in the tragic group it tended to be disregarded.

Conclusion: This study presents an in-depth analysis of a unique suicide population of high school students. A combined methodology of qualitative and quantitative analyses reveals a distinct subpopulation of suicidal adolescents with little or no overt psychopathology that poses a challenge to suicide prevention strategies.

© 2016 Elsevier Masson SAS. All rights reserved.

1. Introduction

Suicide is the leading cause of death in adolescents in most European countries [1]. Suicidal behavior represents a continuum ranging from thoughts about death, through suicidal ideation, to suicide attempt and suicide. Extensive research is therefore conducted in an effort to identify factors that may help delineate the trajectories leading to adolescent suicide [2–6].

Abbreviations: DSM-IV, Diagnostic and Statistical Manual of Mental Disorders IV; LEC, Life Event Checklist; C-GAS, Children's Global Assessment Scale; CRAFTT test, Car, Relax, Alone, Forget, Friends, Trouble test.

* Corresponding author at: Geha Mental Health Center & Psychiatry Department, Tel Aviv University, P.O. Box 102, Petach Tikva 49100, Israel. Tel.: +972 3 9258205; fax: +972 3 9241041.

E-mail address: zalsman@post.tau.ac.il (G. Zalsman).

¹ Both authors contributed equally to this article.

The majority of adolescents with suicidal behaviors have preexisting mental disorders. The disorders constituting the strongest predictors of ideation though, are different from those that are the strongest predictors of conditional transitions from ideation to plans and attempts [4].

Relatively few studies provide an in-depth evaluation of suicides that are in the school system at the time of their death. Such studies are mostly conducted using a quantitative approach with a focus on risk factors and psychiatric phenomenology but results have been limited as far as clinical value is concerned [7,8]. It has been suggested that applying qualitative research methodologies, which give a more open ended picture of the suicide victim's inner world, may increase our understanding of adolescent suicide [9,10].

School plays a central role in the adolescent environment [11]. Academic failure increases risk for developing psychopathology

and suicidal behavior in particular [12,13]. Besides its role in promoting academic development, school has a key role in adolescents' social development [14]. Social isolation is a key factor in suicidal behavior [15] and studies have shown that suicide victims are often characterized by less social activity [16,17]. School bullying or cyber bullying increases the risk for suicidal behavior [18]. In addition, negative school experiences and poor performance often precedes truancy, leading to the individual losing his or her social support, exposing them to increased susceptibility to psychopathology and to increased risk of suicide [19–21]. Therefore, school is a most appropriate setting for suicide prevention programs [22–25], though detection of suicide risk remains a challenge for school staff [26].

There is evident challenge in conducting suicide research based on psychological evaluation, as the subjects are not available for direct examination. The solution has been making use of psychological autopsies that reconstruct the life circumstances of the suicide victim through data obtained from various resources [27–30]. The data are mostly obtained from interviews with family members, friends and therapists as well as personal or medical documents from the subject's life [31]. This method provides deeper understanding of the person's psychological profile, through major life events, interpersonal relationships, emotional state prior to committing suicide and coping style under stress [32]. Psychological autopsies may therefore allow identification of proximal events relative to the suicides [28,33].

Most psychological autopsy studies adhere to a predominantly medicalized view, with a focus on risk factors and evaluation of intervention [34], and a premise that suicide results mainly from a mental disorder categorized as a psychiatric diagnosis [35]. According to this approach, some aspects that may be of use to the understanding of the phenomenon and potentially developing suicide prevention strategies might be missed. Therefore, combined quantitative and qualitative research approaches may shed crucial light on suicide research [35].

One type of qualitative research is the narrative research [36]. According to this approach, the narrative is an essential tool helping researchers understand the human experience [37,38]. This hypothesis is based on the assumption that the most complex phenomena in life are best represented through individuals' stories. Therefore, narratives are the best means to communicate human experiences so that they are meaningful [39]. Narrative identity represents the formation of identity through integration of life experiences into a dynamic story of oneself, providing a sense of purpose in life [40].

Incorporating analysis of narratives of the self [41] in psychological autopsies allows qualitative dissection of the suicide victim's inner world. This method allows clustering suicides into specific constructs based on the narrative viewed chronologically as either stable – with a stable self-evaluation of the self, progressive – in which the person's self-appreciation is increasing throughout life, or regressive – in which a person's self-appreciation is deteriorating throughout life [41].

To date, few studies have employed qualitative analysis of narratives in suicide research. Some of these describe a thorough analysis of narrative of a single suicide victim [42–44]. One study conducted analysis of narratives of the self in a sample of 69 suicide victims who died during military service [45].

1.1. Aims of the study

In the current study, the narratives of 70 Israeli high school adolescents who died by suicide were studied. The authors used a combined methodology to compare quantitative parameters

among the different narratives and attempted to elucidate psychological mechanisms of high school aged suicide victims that may be relevant to suicide prevention programs.

2. Methods

2.1. Subjects

This study was conducted based on the analysis of 70 report files pertaining to all consecutively completed suicides of high school students in Israel between the years 2004–2011. The sample comprised 50 males and 20 females with an average age of 16 years at the time of suicide. Demographic characteristics of the sample are presented in Table 1. Permission from the Israeli Ministry of Education and written informed consent were obtained from the suicide victims' families for this study. The study also received approval from the Institutional Review and Ethics Committee of the Israeli Ministry of Education.

2.2. Data source

The data were extracted from report files written by a formal review committee acting on the authority of the Israeli Educational System that reviews every suicide within the education system. The committee is headed by an education inspector and includes a senior psychologist, senior school counsellor, a representative of the municipality and a representative of the public. To minimize bias, the committee does not include members directly connected to the school involved. Members of the committee undergo professional training to teach them standardized means of interview and of data collection. The aim of the review committee is to collect data on each suicide case in order to facilitate suicide prevention. It has no judicial power.

The committee interviews 8–10 persons, including friends of the deceased, parents, teachers, other school staff and anyone else who may be able to contribute to the understanding of the suicide. The number of interviews conducted by the committee greatly exceeds the accepted 1–2 interviews usually conducted in psychological autopsies [33]. The committee also examines relevant documents such as school reports, medical files and psychological assessments, after obtaining the parents' approval.

Table 1
Demographic descriptive statistics of study samples.

	Number	%
Age		
Mean (SD) years	16.01	(1.51)
Sex		
Male	50	71.4
Female	20	28.6
Ethnicity		
Jewish	54	77.1
Arab	7	10
Druze	3	4.3
Bedouin	4	5.7
Mixed	2	2.9
Immigrant		
Israel born	44	62.9
Immigrant	26	37.1
Suicide method		
Hanging	51	72.8
Jumping	10	14.3
Gunshot	6	8.6
Poisoning/intoxication	2	2.9
Other	1	1.4

Download English Version:

<https://daneshyari.com/en/article/4183391>

Download Persian Version:

<https://daneshyari.com/article/4183391>

[Daneshyari.com](https://daneshyari.com)