

## **SASOP – for World Mental Health Day, 10 October**

### **WATCH OUT FOR WARNING SIGNS OF TEEN SUICIDE**

Almost one in ten teenage deaths in South Africa every year are the result of suicide. Up to 20% of high school learners have tried to take their own lives.

But many of these tragedies can be averted by paying attention to warning signals and risk factors, building emotional resilience, and taking suicide threats seriously.

With teenagers and young adults the focus of World Mental Health Day on 10 October this year, Dr Sebolelo Seape, Chairperson of the Psychiatry Management Group (PsychMG) says the prevention of teen suicides starts with better understanding of the symptoms of depression.

“Most people with depression are not suicidal, but most suicidal people *are* depressed,” she says, hence the importance of knowing the symptoms of depression.

According to the World Health Organisation (WHO), depression is globally the third highest disease burden amongst adolescents, and suicide the second leading cause of death in 15- to 29-year-olds, while the South African Depression and Anxiety Group (SADAG) states that 9% of teenage deaths in the country are due to suicide.

The 2011 Youth Risk Behaviour Survey (YRBS) found that a quarter of grade 8-11 learners across all South Africa’s provinces had felt so sad or hopeless that they couldn’t engage in their usual daily activities for two weeks or more. More than one in six had either thought about suicide, made plans to commit suicide, or attempted it at least once in the past six months.

“This suggests a large proportion of teenagers are suffering from mental and emotional health problems. The youth are the future of our country and we need to act to prevent the devastating consequences of them losing their hope for the future,” Dr Seape said.

Depression and other mental health disorders have a serious impact on the individual’s ability to function and perform their normal activities, she said, while the WHO notes growing evidence that promoting and protecting adolescent health brings long-term benefits to economies and society.

“Healthy young adults are able to make greater contributions to the workforce, their families and communities, and society as a whole,” the organisation says.

Dr Seape said the causes of depression and related mental illnesses in teenagers and young adults are multi-faceted: “There is the stressful nature of the teenage years – for some teenagers, the normal developmental changes of these years, such as bodily changes, new patterns of thoughts and feelings, can be unsettling and overwhelming.

“There are social changes too, like changing schools, the pressure of final exams, the prospect of leaving home to start tertiary studies or a job; as well as other stress factors such as family issues, changes in their friend networks, and the pressure to succeed.

“Problems appear too big, too difficult or embarrassing to overcome, and suicide may look like the only option,” she said.

She said warning signs and symptoms could include changes in eating and sleeping habits, loss of interest in usual activities, neglect of personal appearance or hygiene, withdrawal from friends and family, or running away from home.

Alcohol and substance abuse, unnecessary risk-taking behaviour, obsession with death and dying, and numerous physical complaints linked to emotional distress, are also signals, she said, along with feelings of boredom, agitation, nervousness, sadness, loneliness or hopelessness.

“Some teenagers may actually pass verbal hints by talking about death and dying directly or indirectly, they may talk about wanting to die and begin to dispose of much-loved possessions, and they may write a suicide note.

“All threats of suicide must be taken seriously,” she warned.

Dr Seape said existing mental illness or substance abuse, and a family history of mental illness, suicide, substance abuse or violence, heightened the risk of suicide, and “a previous attempt is the strongest predictor of another suicide attempt”.

She said suicides rarely happen without warning, and learning and recognising these signals is the most effective way to prevent suicide.

Parents, teachers and friends concerned about a teenager at risk of suicide should be willing to listen without judgement, provide reassurance that they care, and to ask questions about suicidal thoughts.

“Don’t try to argue them out of suicide and avoid guilt-inducing statements like ‘suicide will hurt your family’. Rather let them know that you care and want to understand, that they are not alone, and that problems and suicidal feelings are temporary – that depression can be treated and problems can be solved,” she said.

People wanting to help a depressed teenager could suggest that they talk to an external party like a teacher, doctor or counsellor, and offer to go with them for support. On any concerns of a suicide risk, she said, the person should be taken immediately to a clinic or emergency room.

“Once the condition has been identified, continue to offer support and take an active role, for example by ensuring that they take prescribed medication or attend scheduled counselling sessions,” she said.

Dr Seape also pointed to the role of parents and educators in building children’s mental and emotional resilience – the ability to cope with everyday challenges and to overcome disappointments and failures as a normal part of life.

This could include informal life lessons, talking about issues and problems and how to deal with them, role modelling healthy emotional behaviour, as well as formal life skills or psychosocial support if needed.