The race between education and catastrophe – curbing teen suicide in South Africa

Today’s teens are impatient, overloaded with media and entertainment, techno savvy and street smart. Yet while they have the knowledge they still lack maturity, and are emotionally naïve. Today’s teenagers know a lot more than their parents in terms of technology but they have also accomplished something their parents’ generation did not - they are killing themselves probably far more than any other generation.

In South Africa 9% of all teen deaths are due to suicide – and this figure is on the increase. In the 15-24 age group, suicide is the second leading – and fastest growing – cause of death. Children as young as 7 have committed suicide in South Africa. Every day 22 people take their lives. Suicide is on the increase and the question is why?

One fifteen year old girl said, “I feel so alone, I just want to end it all. I want to take pills to make the emptiness go away”. One ten year old said, “I pray to God every night that I will die and not wake up”. Disturbing words, which adults often dismiss as a ‘phase’, something the child or teen will grow out of. Yet research indicates that 75% of people who commit, or attempt, suicide have given some warning. Psychiatrists and psychologists warn parents, educators and friends to take these threats seriously and get professional help. Johannesburg psychologist, Dr Colinde Linda, cautions, “The physical and social changes that occur during adolescence can be overwhelming and sometimes unresolved conflicts from childhood also surface during this time. A threat of killing oneself is a cry for help”.

According to the South African Depression and Anxiety Group (SADAG), South Africa’s largest mental health initiative, between 70 and 90% of adolescents who die by suicide have an underlying mental illness. “Our teens are depressed and often have no-one to turn to for support”, says SADAG founder Zane Wilson. “Combined with a lack of resources, family problems, poverty, AIDS and loss, suicide all too often seems to be the only answer for these children”.

Efforts to build understanding about why young people kill themselves is vital in preventing suicide. “Suicide is a permanent solution to a temporary problem”, says Roshi Parbhoo SADAG’s Development Manager, “kids need to understand there are people out there who can help”. Suicide occurs within all classes and cultures and, for prevention efforts to be most effective, both adults and the youth themselves need to learn about what leads to suicide – and how to prevent the preventable. Left undiagnosed and untreated, mental illness can be fatal, and thus needs to be addressed – urgently and with the utmost priority.

When asked to identify the barriers to treatment for their children who committed suicide, parents most frequently cited three factors: their children believed nothing could help them, they were reluctant to admit they had problems, and they perceived seeking help as a sign of weakness. Siblings and friends listed the same problems and added one more—the suicide completers did not know where to go for help.
Bullying is abusive behaviour by one or more learners against a victim. It can be a direct physical attack like teasing, taunting, hitting, punching and stealing or it can be more subtle and malicious through gossiping, spreading rumours and intentional exclusion. The result is the victim becomes socially rejected and isolated. Physical or psychological intimidation creates an ongoing pattern of harassment and abuse - the vicious cycle of bullying. Children and teens who are bullied feel anxious, tense and afraid. It affects their concentration at school and results in a drop in school performance. “Bullying affects the victim’s self-esteem and feelings of self-worth”, says Dr Linde, “Teens may start to withdraw socially and become depressed. Some may take weapons to school for protection or consider suicide as the only escape”. Research has shown that even years after being bullied, past victims have higher levels of depression and poorer self-esteem that other adults. Suicide caused by the effects of bullying has become such a problem in Europe and the United States that there is now a word for it – “bullycide”.

Recent research has indicated that people who have experienced abuse in childhood are more likely to attempt or commit suicide than those people who hadn’t. While mental health professionals have long suspected there to be a link between abuse and suicide, this research shows the trends strongly and could provide some hope for early warning and detection of children and teens at risk. Emotional abuse, accounts for approximately 8% of child abuse cases. “Children who are neglected or emotionally abused by parents are frequently incredibly withdrawn and often our counsellors notice them during the suicide prevention presentation”, says Parbhoo. Children who are emotionally abused and neglected show tell-tale signs – if you know what to look for. “There are no marks or bruises but the pain and damage is definitely there”, says high school educator and SADAG’s senior counsellor Janine Shamos. “Emotional abuse leaves deep scars that are no less destructive because they are hidden”.

Through SADAG’s teen suicide prevention programme “Suicide Shouldn’t be a Secret”. SADAG has found that 5% of learners admit to having suicidal ideation; 8% admit to attempting suicide at some point. SADAG believes the true figures are much higher. Research has shown that adolescents prefer to confide in friends rather than adults or relatives, Some studies indicate that only 25% of young people who know that a peer is suicidal will seek help from an adult. Concern over the way the adult will react and a desire to keep the friend’s confidence, often means peers keep suicide a secret. “75% of teens who kill themselves have given some warning”, says Parbhoo. “We know that the key to reducing suicide is targeting kids at risk, and empowering them, their friends, and their teachers.” The message they leave with the learners is “rather lose the friendship than the friend”. SADAG stresses to teens not to keep suicide secret – to talk about it and get help. “We know that children and teens are reluctant to approach adults for help so it’s up to teachers and parents to speak to them first”, says Shamos.

Much of what teens experience – bullying, social isolation, abuse - is a covert underground activity in a kids-only world. All too often adults are not aware of what is happening under their very noses. “Parents and teachers need to talk to their children”, says Shamos. Don’t expect kids to work it out for themselves. These are the aims of Teen Suicide Prevention Week from the 18th to the 25th February 2007.

“Once teens start thinking about suicide, the factors that trigger the action are often largely random. That means we have to identify and help any teen who may be thinking about suicide using whatever means of identification possible”, says Parbhoo. “Educators and parents need to look out for teens, particularly girls, who don’t seem to be socially connected to their peers, seem lonely, and out of place”. In addition to talking and connecting with someone, changing schools, joining clubs or extra-curricular activities could all help those teens at risk for suicide.

SADAG also has the only national toll-free suicide crisis line – 0800 567 567 – as well as an SMS service (31393) for teens who are in crisis. Their lines are open 7 days a week from 8am to 8pm and they receive an overwhelming number of calls from teens, peers, teachers and parents seeking help and advice. Dr Colinda Linde, a Johannesburg-based clinical psychologist, says that she has seen many more cases of suicidal ideation and self-injury in her practice over the last five years. “Our kids are in severe crisis. They are looking for emotional compensation and often have nowhere and no-one to turn to for help”, she says. “SADAG’s crisis line and SMS service is vital for them”.

Teens are prone to act – and react – rather than reflect. They often focus on the present and feel overwhelmed by emotions that are not rationalized and disturb them. These emotions manifest into action. SADAG stresses how vital it is for parents to communicate with their teens. “Teens act rather than communicate and it is up to parents to approach them and talk. It you are concerned, contact SADAG on 011 783 1474.” SADAG also has the only toll-free suicide crisis line in the country for teens in crisis as well as an SMS service these can be contacted on 0800 567 567 and 31393 respectively. You can also ring SADAG and ask for a talk to your child’s school, they will often be able to schedule help.

“Suicide is preventable”, says Parbhoo. “We all need to be vigilant and take the initiative and responsibility for saving the lives of our youth”.

SADAG also has the only national toll-free suicide crisis line – 0800 567 567 – as well as an SMS service (31393) for teens who are in crisis. Their lines are open 7 days a week from 8am to 8pm and they receive an overwhelming number of calls from teens, peers, teachers and parents seeking help and advice. Dr Colinda Linde, a Johannesburg-based clinical psychologist, says that she has seen many more cases of suicidal ideation and self-injury in her practice over the last five years. “Our kids are in severe crisis. They are looking for emotional compensation and often have nowhere and no-one to turn to for help”, she says. “SADAG’s crisis line and SMS service is vital for them”.

Teens are prone to act – and react – rather than reflect. They often focus on the present and feel overwhelmed by emotions that are not rationalized and disturb them. These emotions manifest into action. SADAG stresses how vital it is for parents to communicate with their teens. “Teens act rather than communicate and it is up to parents to approach them and talk. It you are concerned, contact SADAG on 011 783 1474.” SADAG also has the only toll-free suicide crisis line in the country for teens in crisis as well as an SMS service these can be contacted on 0800 567 567 and 31393 respectively. You can also ring SADAG and ask for a talk to your child’s school, they will often be able to schedule help.

“Suicide is preventable”, says Parbhoo. “We all need to be vigilant and take the initiative and responsibility for saving the lives of our youth”. 
PATIENTS AS PARTNERS
Brought to you by The South African Depression and Anxiety Group

Bullying - What parents can do:
• Be open to the possibility that your child may be being bullied
• If you suspect something may be wrong - ask
• Listen to your child
• Take him/her seriously
• Never blame the child – it is not their fault
• Reassure them they were right in telling you
• Don’t promise to keep it a secret
• Discuss practical ways to solve the problem
• Teach self-confidence, assertiveness and social skills
• Enrol kids in extra mural activities to help them widen their social circle
• Encourage family discussion rather than just watching TV
• Never expect kids to work it out on their own
• Talk to teachers and other parents – if there’s one bullied kid, there will be others.

Warning Signs of Depression:
• Loss of interest in fun activities
• Sadness that won’t go away
• Feeling irritable or angry a lot
• Eating too much or too little
• Sleeping too much or too little
• Missing school
• Having trouble making decisions
• School marks drop
• Thinking a lot of dying or killing yourself

Warning Signs of Suicide:
• Talking about suicide
• Depression
• Preparing for death – giving things away, saying goodbye
• Drastic changes in personality
• Risk-taking behaviour – drinking and driving
• Writing poems, essays about death or painting images of death

For further information contact
SADAG: Roshni Parbhoo 011 783 1474
Janine Shamos 082 33 89666

PHOTOCOPY FOR YOUR PATIENTS!!