



REVIEW ARTICLE

Suicide Prevention and Management in Children and Adolescents: In Contemplation of a Philosophical Approach

Rabi Ilemona Ekore* 

Dhaman Primary Healthcare Centres (Farwaniya PHC), Farwaniya, Kuwait



*Corresponding author: Dr. Rabi Ilemona Ekore, Dhaman Primary Healthcare Centres (Farwaniya PHC), Farwaniya, Kuwait

Abstract

The periods of childhood and adolescence are those during which children and adolescents experience rapid transitions that may be difficult to cope with. The changes can be stressful for some older children or adolescents who may subsequently seek ways to cope, some of which may be maladaptive. The ensuing cascade of events triggers latent mental health issues in those already predisposed to them. Commensurate increase in efforts to provide help to vulnerable groups focuses on the psychological, social, and spiritual domains. Activities deployed to provide help within any of these domains are usually designed to establish appropriate coping mechanisms in affected individuals, that is such activities are treatment focused. However, would vulnerable children and adolescents cope better with adversity if they already possess appropriate preventive and coping skills? This narrative review was conducted in contemplation of the potential role of philosophy in the prevention and management of suicide among older children and adolescents via the central teachings of specific philosophical theories. Philosophical theories like Stoicism, Epicureanism and Existentialism, among others, consist of important worldviews and ethical values that can help older children and adolescents cope with adversities. These philosophical theories better equip children and adolescents to manage adverse life events. Incorporation of components of these theories into suicide prevention and management programmes is recommended.

Keywords

Child, Adolescent, Prevention, Management, Suicide, Philosophy

Introduction

The periods of childhood and adolescence are characterized by rapid growth and development. Older

children and adolescents experience transitions that are so rapid that coping may be difficult. It is worse among adolescents as they begin the transition to adulthood and strive to establish self-identity. The changes can be stressful for some who may subsequently seek ways to cope and some of the coping styles may be maladaptive. In the process, both positive and negative strategies are discovered, and the specific ones adopted are usually determined by existing personal traits. A cascade of events eventually ensues and for those who are predisposed, background mental health issues are triggered which might sometimes culminate in contemplated, attempted or completed suicide.

According to its latest report, the WHO put suicide as the fourth leading cause of death among 15-29 year-olds [1]. Quite alarming are reports that the prevalence is highest among adolescents, especially those experiencing stressful life events such as immigration [2]. This is supported by the WHO "Suicide Worldwide in 2019" report which states that most adolescents who died by suicide (88%) were from low- and middle-income countries [1].

The increasing spate of attempted and completed suicide among the general population in recent times is alarming, to say the least. Even more alarming are reports that the prevalence is highest among adolescents, especially those experiencing stressful life events such as immigration [2]. Findings from the study by Rughani, et al. [3] on some rural high school adolescent's help-seeking behaviour for emotional problems revealed the reluctance of adolescents to seek professional help for

emotional problems because they doubt the benefit of doing so. However, there is an observed increase in attempts to provide help to vulnerable groups and offers of assistance are being made by concerned bodies to those in need. Much of the assistance focuses on psychological, social and spiritual domains. Activities deployed to provide help within any of these domains are usually designed to improve the coping mechanisms of the potential or affected individuals.

In a systematic review of research conducted on adults and adolescents (only one study) on the effectiveness of brief psychological interventions for suicidal presentations at an Emergency Department [4], it was concluded that the administered interventions effectively reduced suicide and suicide attempts. A pressing question however is, why wait for a situation whereby suicide would be contemplated, then attempted before intervening? Would there be a difference if older children and adolescents already possess personality traits and life skills that would help them cope with chronic stress and adversities long before they occur?

Relevant Philosophical Theories [5-8]

Philosophy is the study of the fundamental nature of human existence. It examines the relationship between man and nature, and between man and the Society. The field of Philosophy operates via several theories, all of which have ardent ancient and modern-day proponents. These theories are reflections of the world-views of their respective proponents; that is, the proponents of these theories live by them. Theories like Stoicism, Epicureanism, Existentialism and Positivism among others consist of interesting views and beliefs that can help individuals build resilience and weather various storms of life.

Stoicism was founded by Zeno. Epictetus and Marcus Aurelius are notable stoics. Stoics believe that everyone is capable of enjoying the good life (*eudaimonia*). Emphasis is placed on the primacy of internal over external goods; with the aim of “achieving happiness, tranquility, freedom from destructive emotions, and mastery over desire”. Stoicism advocates sternness of mind, and enables man to better order his own life and avoid the excesses of human nature that promote anxiety. According to Epictetus, “it is not what happens to individuals, but rather how individuals perceive what happens to them, that determines their affect”. Another notable maxim attributed to Epictetus is “Of things, some are in our power, others are not”.

Epicureanism is a theory based on hedonism or pleasure. It advocates that the experience of pleasure, comfort, and happiness, and the avoidance of pain is the ultimate good. Epicureanism recommends reciprocal help in the name of friendship. Epicurius’ hedonistic ethic is said to be the exact opposite of duty ethics as advocated by the stoics.

Proponents of existentialism believe that existence is always particular and individual. It advocates establishing our identity by the lifestyles we create and the choices we make. Existentialism makes reference to man being faced with diverse possibilities of the meaning of “being”, from which he must make a selection and to which he must remain committed. Furthermore, existentialism asserts that since these possibilities are in a way determined by man’s relationship with other beings and things, existence demands being present in the world.

Founded by Auguste Comte, the theory of positivism asserts that all knowledge about matters of fact is based on the positive data of experience. It advocates that reality is the same for each person, and that observation and measurement provide for us information on what reality is.

This review is a contemplation of the possible role of philosophy in the prevention and management of suicide among older children and adolescents. Specifically, it briefly explored philosophical theories that might better equip older children and adolescents to manage adverse life events, and possibly make recommendation for the incorporation of components of these theories into suicide prevention and management programmes.

Philosophy & Mental Health

There is paucity of data on philosophy and mental health among children and adolescents. As observed from the preceding discussion, philosophy as a discipline has important roles to play in mental health and mental well-being, through the application of various philosophical theories. A good instance is the case of Albert Ellis, the originator of cognitive behavioural therapy (CBT) who attributed the foundation of this globally adopted mental health treatment method to the philosophical theories of Stoicism, Epicureanism, and Existentialism, among others [6]. If that is the case, it leads one to wonder if there would be a difference if older children and adolescents already possessed personality traits and life skills founded on these philosophical theories; that is, if possession of these would help them cope with chronic stress, life challenges, and adversities when they occur. Specifically, can suicidal ideation and attempt be prevented by equipping older children and adolescents with skills to optimally handle life’s challenges?

A systematic review of researches conducted on adults and adolescents (only one of the reviewed studies involved adolescents) on the effectiveness of brief psychological interventions for suicidal presentations at an Emergency Department [4], concluded that the administered interventions effectively reduced suicide and suicide attempts. However, findings from the study by Rughani, et al. [3] on some rural high school adolescent’s help-seeking behaviour for emotional problems revealed the reluctance of adolescents to

seek professional help for emotional problems because they doubt the benefit of doing so. As mentioned previously, much of the assistance rendered focuses on psychological, social and spiritual domains, and activities deployed to provide help within any of these domains are usually designed to improve the coping mechanisms of victims after they have been affected. This is supported by Kaukiainen and Kolves [9] who in their study observed that the majority of initiatives currently aimed at closing the gap between rural and metropolitan mental health and suicide rates focus on increased access to mental health specialists such as psychologists and psychiatrists. A pressing question, however, is why wait for a situation whereby suicide would have been contemplated, then attempted, before providing help via psychological, social, or psychiatric intervention? Why not equip a child or adolescent with such skills long before they experience adverse or challenging encounters in life?

In their review article on the value of doing philosophy in mental health contexts, based on observations made from a series of mental health workshops, Stammers and Pulvermache [10] listed “the potential to reduce self-stigma and to increase self-understanding and advocacy” as one of the impacts of workshops as reported by the participants which consisted of persons with adverse mental health experience as well as mental health advocates and mental health care providers. They subsequently encouraged further studies by mental health practitioners to investigate the potential benefits of incorporating philosophy groups in mental health settings in order to establish the potential of generalizing findings. Still on the role of philosophy in mental health, Kaukiainen and Kolves [9] suggest that other factors such as stoicism and attitudes need to be addressed in order to encourage help-seeking and understand suicidal behaviours.

Akrim, et al. [11] in their study among health workers revealed that “interactive effects of positive religious coping with stoicism helped decrease psychological stress and physical fatigue” among others, during the COVID-19 pandemic, concluding with an assertion of the role of stoicism in building coping mechanisms in a challenging environment.

Conclusion/Recommendations

As is well known, older children and adolescents are formally taught subjects like Mathematics, English Language, and Science to equip them for a supposedly bright and financially stable adulthood. However, as children and adolescents, and as adults they often have to weather through stormy and adverse paths to attain that bright and stable life. The specific skills needed to successfully navigate such storms and adversities are not formally taught to children and adolescents in schools.

In my opinion, it is better to equip a child/adolescent with skills that will enhance his/her ability to adequately face challenging life situations that might be encountered in the course of life, rather than offer intervention to a broken or battered child or adolescent that has been overwhelmed by life's challenges. With the aim of optimizing the world-view of children and adolescents, I advocate the making of a “cocktail” of the pros of relevant philosophical theories and teachings from their notable proponent, and with this “cocktail”, creation of personal development and survival skills curriculum for older or school-age children and adolescents, and the incorporation of the curriculum into the regular school programmes as well as suicide prevention and management programmes. Further research into the role of philosophy in suicide prevention among children and adolescents in particular, and child and adolescent mental health in general is recommended.

References

1. Akrim A, Rudianto, Adhani A (2021) Interactive effects of stoicism and religious coping on psychological distress, fatigue and intercultural communication: Muslim health workers in Bali. *J Ethnic Cultural Stud* 8: 214-237.
2. Hillemacher T, Baier D (2019) Epidemiology of suicidal ideation, suicide attempts, and direct self-injurious behavior in adolescents with a migration background: A representative study. *BMC Pediatr* 19: 45.
3. Kaukiainen A, Kolves K (2020) Too tough to ask for help? Stoicism and attitudes to mental health professionals in rural Australia. *Rural and Remote Health* 20: 5399.
4. Kelly J (2021) The philosophy of stoicism: Relevance in today's healthcare system. *QJM: Int J Med* 114: 839-840.
5. McCabe R, Garside R, Backhouse A, Xanthopoulou P (2018) Effectiveness of brief psychological interventions for suicidal presentations: A systematic review. *BMC Psychiatry* 18: 120.
6. Murguia E, Diaz K (2015) The philosophical foundations of cognitive behavioral therapy: Stoicism, Buddhism, Taoism, and Existentialism. *J Evidence-Based Psychotherap* 15: 37-50.
7. Ryan G (2018) Introduction to positivism, interpretivism and critical theory. *Nurse Res* 25: 14-20.
8. Ridling Z (2001) Philosophy then and now: A look back at 26 centuries of thought. Access Foundation.
9. Rughani J, Deane FP, Wilson CJ (2011) Rural adolescents' help-seeking intentions for emotional problems: The influence of perceived benefits and stoicism. *Aust J Rural Health* 19: 64-69.
10. Stammers S, Pulvermacher R (2020) The value of doing philosophy in mental health contexts. *Med Health Care Philosophy* 23: 743-752.
11. World Health Organization (2019) Suicide worldwide in 2019: Global health estimates. Geneva.