Impact of family relationships on Adolescents' loneliness and suicidal ideation

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Abstract

Close relationships within the family have long been investigated and found to be a protective factor for various psychological ailments, especially during adolescence. In the present study, 106 adolescents(77 girls and 29 boys) from nuclear and joint families, having the age range 16 to 18 years were in-depth interviewed through an open-ended schedule which explored their relationships with family members and their feelings of loneliness and suicidal ideation. The findings revealed that those adolescents irrespective of belonging to nuclear or joint families, who shared strong bonds with their family members were found to be low on both loneliness and suicidal ideation. Although, loneliness was prevalent among most adolescents with or without the prevalence of suicidal thoughts, however, not a single case where suicidal ideation was reported was without feelings of loneliness.

Keywords: Adolescence, family relationships, loneliness, suicidal ideation.

A well-established body of literature has confirmed the role and importance of adolescent-family relationships in predicting positive and negative outcomes. Cohesion and affinity with family members, peers, and facilitative community brace an adolescent's sense of well-being, fostering, in turn, positive developmental outcomes, including psychosocial engagement (Grotevant et al., 2001).On the contrary, ambivalence in family relationships, preconceived complications, distrust, led to the loathing of the adult world and its institutions contributing to a majority of adolescents falling into the vicious cycle of psychological ailments like loneliness, depression, and suicidal ideation (Narain, 2018).

Loneliness refers to emotive and psychological discomfort or uneasiness from being or perceiving oneself to be alone or otherwise solitary. Psychological theory and analysis provide multiple perspectives: Social psychology emphasizes the emotional distress that results when inherent wants for intimacy and togetherness don't seem to be met; Cognitive psychology emphasizes the unpleasant and unsettling occurrence that results from a perceived discrepancy between associate degree individual's desired and actual social relationships. Psychologists from the existential or humanistic viewpoint may even see loneliness as an associate degree inevitable, painful side of the human condition that yet might contribute to enhanced cognizance and renewal. Depression refers to despondency and loss of interest in activities affecting a person's thoughts, behavior, feelings, and sense of well-being.Suicidal ideation refers to thoughts about or an engrossment with killing oneself, often as a manifestation of a major depressive episode. Most instances of suicidal ideation do not progress to attempted suicide but

may lead to suicidality i.e., the risk of suicide, usually indicated by suicidal ideation or intent, especially as evident in the presence of a well-elaborated suicidal plan. The upheavals of adolescence and the long transition to adulthood have thus, created new conditions and contexts for adolescence probably more towards the pitfalls of the interplay of loneliness, depression, and suicidal ideation in this new technology-driven era.

For people between the ages of 15 and 24, the rate of successful suicides essentially tripled between the mid-1950s and mid-1980s. Suicide now ranks as the third most common cause of death in the United States for 15 to 19-year-olds (after accidents and homicide), accounting for approximately 11 percent of total deaths. Deaths by suicides are quite common among adolescents and adults in India too. The World Health Organization (WHO) estimates that approximately 1,70,000 suicides take place in India every year. In 2015, the National Crime Records Bureau (NCRB), an agency set up by the government of India, recorded an increase of 15.8 percent in suicides from 2004 to 2014 (that is, 1,31,666 in 2014 from 1,13,696 in 2004). However, Patel et al. (2012) have estimated that as against the 1,34,000 recorded by NCRB, about 1,87,000 suicide deaths took place in 2010 in individuals aged 15 years or older. The number of suicide cases in India upsurged to 2,30,314 in 2016 emerging as the most frequent reason for death among both the age groups of 15–29 years and 15–39 years. As for suicide attempts, one large survey of 15,000 high school students across 32 states has estimated the rates of self-reported suicide attempts within 12 months to be an alarming 8.5 percent, with about twice that many reporting that they have seriously considered it (Spirito & Esposito-Symthers, 2006). As the National Crime Records Bureau (NCRB) 2015 quoted that every hour one student commits suicide in India which is a very disturbing trend. Hence it is imperative to understand the preconditions that lead to suicide so that society can promote a positive environment. Thus, the following research questions have been addressed in the present study:

Research Questions

1. What are the reasons for adolescents' loneliness?
2. Why are some of them preoccupied with the thoughts to end their life?
3. Are the parents unable to prepare children mentally and psychologically for the many triggers in the world?

Method

Sample

The sample comprised 106 urban adolescents (77 girls and 29 boys) having an age range of 16 to 18 years (M=16.9; SD=1.04) from different schools of Patna belonging to middle and high socioeconomic status. Out of the 106 adolescents, 64 adolescents were from nuclear while 42 belonged to the joint families.

Measures and Procedures

The present study is a part of a larger project. An open-ended interview schedule covering items probing adolescents' loneliness, suicidal ideation, and family relationships was employed. Informed consent was taken from all participants. The schedule was administered to the respondents in small groups and a few cases individually. They were oriented to share their free and frank outlook on their family dynamics and their place in it, their feelings, regrets, and the like with other questions in the schedule. Qualitative profiling of the responses was done.

Data Analysis

With the evolving advancements and progress in our society over the past few decades, parenting has undoubtedly witnessed adaptations following the changing times (Sondhi, 2017).

One of the adolescent girls expressed:

"The relationship with my family is hard to tell or describe because I do love my family and I know they also love me but yes, I must

admit there is a huge communication gap. Sometimes they don't understand my feelings and the other times I don't want to listen to them and the cycle goes on and on. They don't try to put in efforts to talk so even I don't try to explain and vice versa.I feel lonely and have lost my interest in life. I very often cry to sleep." Ongoing family conflicts, abuse, violence, lack of family connectedness, and parents' mental health problems can also raise a child's suicide risk.An adolescent boy shared:

"My mother committed suicide when I was 13 years old. How I wished she could be saved. I feel lonely most of the time because my siblings are elder and my father keeps himself busy with work. I survive every day. There are times when I am ok with this life and at times, I am too frustrated to do anything. Every day I try to be a little stronger than the day before, living life the way it is, trying to accept it each day but again I fail and the next day starts with a fresh struggle. How I wish I would have been in the place of my mother."

Yet another adolescent girl reported:

"The relationship with my family members is quite complicated. I think as all teenagers feel, it is sometimes sour and sometimes sweet. My parents whenever try to discuss something always end up in a fight. I just want to be away from them and I feel when they are not able to understand each other, how are they going to understand me? As it is a daily routine I never interfere, I ignore it as this upsets me. I feel so lonely and depressed. Although I have never tried to end my life but when I get frustrated, I always think about how this life should end. Moreover, is it going to make a difference in others' life especially of my family members that will they ever be bothered? I am sure my parents will blame each other for my suicide and not mourn my death."

Those adolescents who shared strong bonds with their families realized and acknowledged the help and sacrifices of their parents. They saw life as meaningful and full of opportunities and never of something bringing it to end.

An adolescent boy remarked:

"I live in a joint family and share a great bond with everyone. The most important person in my life is my grandfather with whom I share everything. My relationship with my parents is also very good. I never feel lonely and can never think of ending my life because I owe this life to my parents for their sacrifices.They did a lot for me, and now it is my turn to make them happy. I shall surely work hard and fulfil the dreams of my family."

Many other adolescents expressed that they have very good bonds with their families.

As another adolescent girl quoted:

"I am blessed to have a very loving family. They are my lifeline. We have a great bonding and we share everything.I daily have good conversations with my parents especially my father. They are our (me and my younger brothers') best friends, we watch movies together, like to surprise each other, and many more to rejoice. They are so loving, caring, motivating, and inspiring us for achieving not only success but also to become good human beings.I never felt lonely as I am always surrounded by my positive and lovely family members. My life is theirs; how can I even think of ending it. It's so precious and I want to explore so many things. I look forward to life with great zeal."

Sadly, in some other cases, the family system is now as if it is fractured. An adolescent boy shared:

"I do feel very lonely because my father is very strict and my mother has no guts to place our wants before him. They do not share a good relationship as well. On top of it, they say that they are stuck in their relationship because of me and my sister. They would have separated if we were not there. I often felt that they deserve a chance and tried to hang myself at the age of 14 but my sister screamed and my

father dropped in. It is funny but true that I got a brutal beating after that. Nothing has improved much emotionally in these three years but the drama continues."

Another adolescent girl expressed:

"When I was a child, I did not have a very good relationship with my mother but with time it has got better. At the age of 11, my elder sister who was 17 years of age committed suicide. This event shattered me completely as I was very close to my sister. I often try to cut my wrist and kill myself. My parents are making me consult a psychiatrist but I know where the problem is. If my parents would have understood and given time and love to my sister then I would not have lost her maybe I don't know. I fight daily to be happy and I think I'll continue to fight but miseries seem unending."

The ways of socialization have seen tremendous change due to the advent of the Smartphone so that one can stay connected yet we live in a time, where it is a common observation that even when the family members are sitting together yet they are busy with their mobile phones, a phenomenon termed as 'phubbing'.

Some adolescents did admit it and to quote an adolescent boy:

"When I was given the new smartphone, it was always fun to WhatsApp my mother when we were in different rooms but gradually it irritates me now as social media has become a way of surveillance for my mother on me. She is my Facebook friend and keeps checking on me. When we are together, we do not have much to talk about as all are busy with their mobile phones, and if we start to talk it ends up an argument. I wish I could block her as this is frustrating. She has made me lonelier as now I cannot freely share even on social media."

Not only this but rural to urban migration, nuclear families, and the rising divorce rate, the proportion of single-member households, all have made the adolescent somewhat fragile and the interplay of loneliness, depression has led to the increased number of adolescent's suicide or suicidal ideation.

To quote an adolescent gril:

"Although I love my parents, somewhere I don't like them because of their deeds or characters. I love them because they are my family but I don't want to live with them. I find peace alone. I want to live in a hostel far away from them. I don't like them because they are too busy in their working field. They do not have enough time to look after their family. They buy everything that I need but are not an ideal parent as they fail to provide emotional support to me or my brother. I was sent to a hostel at an age when I needed them the most. Even when I am back, I do feel lonely all the time because in my family no one understands what I want. I want to be heard and understood. I feel a lack of love and need a friend, sibling, parent, guardian, anyone who will heal my wounds. I have cut my wrists twice but still; they fail to understand."

Discussion

Families in India has undergone phenomenal transformations in the last three to four decades involving both structural and attitudinal dimensions that have resulted in altered interrelationships among the members who constitute the family and the changes in family obligations and decision making as well as modifications in the child-rearing and socialization processes (Sinha, 1982). The rate of changes in the Indian family in recent years has radically altered the pattern of socialization with the advent of the new millennium. Still, strong attachments with mother or father, family cohesion, and connectedness in the form of mutual involvement, shared interests, and emotional support are protective factors that can act as buffers against suicidality (Sheftall et al., 2013). Suicidal behaviour, depression, and general life stress are mitigated by family cohesion and perceived support (Rubenstein et al. 1998; Puuskari et al. 2018). This has also been identified

in longitudinal studies of middle and high school students to be a protective factor (McKeown et al. 1998; Borowsky et al. 2001). In the present study as well, it is observed that those adolescents who shared strong family ties did not report any incidence of loneliness and suicidal ideation. Instead, they were full of gratitude for their family members and were looking forward to life with great zest. Most of the adolescents who reported love and cohesion in the family (nuclear or joint) outrightly said that they owe their life to their parents and can never think of doing any harm to themselves.

Yet another finding of the present study that there exists comorbidity of loneliness and suicidal ideation are also in line with previous studies that have also found a strong link between loneliness and suicidal ideation (Batingun, 2005) and suicidal attempts among adolescents (Cui et al., 2011). It was also found in a longitudinal study that as loneliness increased so increased the risk for suicidality indirectly through depression and externalizing behaviour (Jones et al.,2011). Furthermore, suicides were attempted by those Southeast Asian adolescents who were high on loneliness than non-attempters(Page et al., 2006). Gurtein et al. (2001) found that the odds of self-mutilation were six times greater among those adolescents who imbibed a sense of loneliness. Thus, among the interpersonal vulnerability factors for adolescents' suicidal behaviour, loneliness, and social alienation have been implicated. However, other studies (e.g. Lasgaard et al.,2011)found that suicidal ideation was not predicted by loneliness either longitudinally or at the cross-sectional level when depressive symptoms were in control. In the present study too, suicidal ideation was accompanied by feelings of loneliness however, not all cases of loneliness reported suicidal thoughts or self-mutilating behaviours.

Conclusion

Loneliness and suicidal ideation especially non-suicidal self-injury (NSSI) where the person deliberately destructs his/her body tissue without the intention of committing suicide has emerged as an epidemic especially among adolescents and young adults. Families need to revisit their relationships with their children and develop strong bonds with each other as low family connectedness is a clear predictor of loneliness and suicidal ideation among adolescents.

Implications and suggestions

The findings of the present research are an eye-opener for parents, teachers, and counselors in providing the adolescent's guidance. Close family members who are on the front line have to make more efforts and engage in shared activities making themselves emotionally available to their children rather than self-blaming or blaming others for any setback later.

Limitations

The main limitation of the present study is its geographical location i.e., the findings are only based on one place i.e., Patna, Bihar. A better representation and a larger sample would yield more concrete findings.

Funding

References

American Psychological Association (2015). *APA Dictionary of Psychology*. Washington, D.C.: American Psychological Association.

Batigun, A.D. (2005). Suicide Probability: an assessment terms of reasons for living, hopelessness and loneliness. *Turk Psikiyatri Dergisi,* 16, 29-39.

Borowsky, I.W., Ireland M, Resnick, M.D. (2001). Adolescent suicide attempts: risk and protectors. *Pediatrics,* 107, 485-93.

Cui, S., Cheng, Y., Xu, Z., Wang, Y. (2011). Peer relationships and suicide ideation and attempts among Chinese adolescents. *Child: Care, Health and Development*,37, 692-702.

Grotevant, H. D., Wrobel, G. M., Dulmen, M,H,V., & McRoy, R. G. (2001). The Emergence of Psychosocial Engagement in Adopted Adolescents: The Family as Context Over Time. *Journal of Adolescent Research,* Vol. 16 No. 5, September 2001 469-490 © 2001 Sage Publications.

Guertin, T., Lloyd-Richardson, E., Spirito, A. Donaldson, D., Boergers, J. (2001). Self-mutilate behaviour in adolescence who attempt suicide by overdose. *Journal of the American Academy of Child and Adolescent Psychiatry,* 40,1062-69.

Jones, A.C., Schinka, K.C., van Dulmen, M.H.M., Bossarte, R.M., Swahn, M.H. (2011). Changes in loneliness during middle childhood predict risk for adolescent suicidality indirectly through mental health problems. *Journal of Clinical Child and Adolescent Psychology*, 40, 818-24.

Kochanek, Kenneth D., Jiaquan Xu, Sherry L. Murphy, ArialdiMinino, and Kung, Hsiang-Ching. 2011. "Deaths: Preliminary Data for 2009." *National Vital Statistics Reports* 60(3):1–166.

Lasgaard, M., Goossens, L., Elkit, A. (2011). Loneliness, depressive symptomatology, and suicide ideation in adolescence: cross-sectional and longitudinal analyses. *Journal of Abnormal Child Psychology,* 39, 137-50.

McKeown, R.E., Garrison, C.Z., Cuffe, S.P., Waller, J.L., Jackson, K.L., Addy, C.L. (1998). Incidence and predictors of suicidal behaviours in a longitudinal sample of young adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry*, 37, 612-19.

Narain,S.(2018). T*he Inner World of Adolescents.* Agra: H. P. Bhargava Book House. Pp-2 and 57.

National Crime Records Bureau (NCRB), Ministry of Home Affairs (2015). Accidental deaths and suicides in India 2014. New Delhi: Government of India

Page, R.M., Yanagishita, J.,Suwanteerangkul, J., Zarco,E.P.,Ching,M.L.,Miao, N.F. (2006). Hopelessness and loneliness among suicide attempters in school-based samples of Taiwanese,Philippine and Thai adolescents. School Psychology International 27, 583-98.

Patel,V.;Ramasundarahettige,C.; Vijayakumar, L.; Thakur, J. S.; Gajalakshmi, V.; Gururaj, G.; Suraweera, W.; Jha, P. (2012). "Suicide mortality in India: A nationally representative survey". *The Lancet.* 379 (9834): 2343–51. doi:10.1016/S0140-6736(12)60606-0.

Pushkari, V., Aalto-Setala, 7T, Komulainen, E., Marttunen, M. (2018). Suicidal ideation, suicide attempts, and psychological distress among intoxicated adolescence in the paediatric emergency department. *Nordic Journal of Psychiatry,* 72, 137-44.

Rubenstein, J.L., Halyon, A., Kasten, L. Rubin, C. Stechler, G. (1998). Suicidal behaviour in adolescents: stress and protection in different family contexts. *American Journal of Orthopsychiatry,* 68, 274-84.

Sheftall,A.H., Mathias, C.W., Furr, R.M., Dougherty.D.M. (2013). Adolescent attachment security, family functioning, and suicide attempts. *Attachment and Human Development,* 15, 368-83.

Sinha, D. (1982). Socio-cultural factors and the development of perceptual and cognitive skills. In W. W. Hartup (ed.), *Review of Child Development Research* (pp. 441-472). Chicago: University of Chicago Press.

Spirito, A. & Esposito-Symthers, C. (2006). Attempted and completed suicides in adolescence. A*nnual Review Clinical Psychology.*, 2, 237-266.

World Health Organization (2001). T*he World Health Report. Suicide Rates – Data by country. World Health Organization* 2012. Retrieved 30 November 2015.