

Characterization in Adolescent as Prevention to the Suicide Intent from a Health Area

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ABSTRACT

Background: The suicide intent in adolescents is an essential element in the current assistance work from the own professionals of the health. **Objective:** The objective of the study was to characterize in the adolescent as prevention to the suicide intent from a health area. **Methods:** It is used or empiric methods: interviews open and revision of the individual clinical histories. It is used or empiric methods: Interviews open and revision of the individual clinical histories. **Results:** The masculine sex, 82.8% of the adolescents with ages understood between the 12 and 15 years of age prevailed, 78% of these they began to carry out suicide intent. Of why the most frequent causes began they were the family conflicts and the presence of imitation grope for suicidal behaviors with emotional excitement. It was demonstrated that the adolescents use diverse methods, among them, they are the ingestion of medications in 39.0% followed by the hang with 24.4%. **Conclusions:** The difficulties are related with the inadequate attitudes of the parents and the pressure psychosocial in groups for adolescents that obey an emotional imbalance.

Key words: Adolescent, community mental health center, resilience, suicide attempt

INTRODUCTION

Adolescence is framed by exploration and precisely motivating behaviors of suicidal ideas due to the existence of psychosocial risks, which can compromise at a given moment the health, survival and life projects of the individual.

As a period of human development has been the subject of attention of social scientists and international bodies, who have tried to define its limits, as well as the characteristics that define this stage.^[1]

It is a reality: Teenagers, parties, and drinks are related, it is not about absolutizing, but neither can you deny the vulnerability, the risk to which they are exposed, and therefore, the most significant efforts in the fight against toxic substances.^[2]

However, although it is necessary to consider periodizations about adolescence, it is worth noting that this age and youth are primarily psychological ages since it is assumed that development is a process that does not occur automatically or fatally determined by the maturation of the organism, but above all has a historical, social determination.^[3]

According to the 2016 Statistical Yearbook of Health, a total of 1 432 deaths due to self-harm were recorded for a rate of 12.8.100,000 inhabitants, which was translated as the 11th cause of death in the general population; while for males it was the 10th cause of death with 1137 cases and the 14th in women for a total of 293 cases.^[4]

The highest suicide rates occur in Eastern European countries such as Lithuania or Russia, while the lowest are in Central and South America in countries such as Peru, Mexico, Brazil,

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or Colombia. There are no statistics on the subject in many African and Southeast Asian countries.^[5]

Some adolescents feel that life has no meaning for different reasons, making suicide the best option for them and being a potential threat against resilience.

Resilience is the combination of factors that allow a human being to face and overcome life's problems, face adversities, overcome them and be positively transformed by them.

At present, the phenomenon of suicidal attempt generates a social and individual problem from the inappropriate behavior of adolescents which motivated to carry out the present investigation in a community mental health center belonging to the teaching polyclinic "José Ramón León Acosta of Santa Clara, Villa Clara, Cuba, with its general objective of characterizing adolescents to prevent suicide attempts in a health area.

METHODS

A descriptive, cross-sectional study was carried out in a health area, belonging to the "José Ramón León Acosta" polyclinic of Santa Clara municipality, in the period from January 2017 to May 2018.

Methods of the theoretical level

- Synthetic analytical: It made possible the interpretation of each one of the studied texts, to conform the criterion assumed in the epigraphs and paragraphs, as well as to particularize in the data obtained in the surveys to integrate them and to establish the corresponding generalizations.
- Inductive-deductive: It facilitated going from the particular to the general in each of the analyzes carried out in the theoretical study and the processing of the obtained information.
- Generalization: It allowed the establishment of the regularities that were revealed in the study carried out.

Methods of the empiric level

- Interviews structured: Contribute to identify the risks of suicide attempt in adolescents.
- Individual clinical histories: It made it possible to provide information on various personals.

Selection criteria

The selection criteria of this study were as follows:

Inclusion approaches

- All adolescents with previous suicide intent
- That they reside in the health area belonging to a health area and are dispensed.

Exclusion approaches

- Adolescents whose legal guardians do not give consent to participate in the investigation.

Collection of information

To carry out the research, the documentary review and individual clinical histories were used as techniques to obtain extended information.

Statistic analysis

The information was stored in a data file in SPSS version 21.0 and is presented in tables and statistical graphs, for the description of the arithmetic mean, standard deviation, absolute frequencies, and percents were calculated. In the analysis, we used a comparison test of two proportions and comparison of means for independent samples through Epidat 4.2. We worked with levels of significance of 1%.

Process

To begin the development of the research, a bibliographic review was made with the use of the database by PubMed of the subject with a thorough analysis of the most relevant aspects in the Cuban environment as well as at an international level.

RESULTS

As can be seen in Table 1 referring to age at onset of suicide attempt and sex, adolescents predominate at age 12–15 years represented by 32 of them for 78%, behaving very differently in regarding sex, where it is found that in the female sex 8 adolescents are equivalent to 66.7% and in the male sex 24 to a high 82.8%.

There is a difference in the average age at the beginning of the suicide attempt with respect to sex, wherein the female sex it is 15.2 years and in the male sex of 13.8 years, so it is concluded that. The male sex begins to manifest suicidal ideas at younger ages than the female sex.

Table 2 refers to the causes of the suicidal attempt according to sex, where it can be seen that the most common cause for the

Table 1: Adolescents according to age in which they made the suicide attempt

Age in the addiction suicide intent	Sex, n (%)		
	Female	Male	Total
12–15	8 (66.7)	24 (82.8)	32 (78.0)
16–18	4 (33.3)	5 (17.2)	9 (22.0)
Total	12 (100)	29 (100)	41 (100.0)
Media±DE	15.2±1.8	13.8±1.6	14.2±1.7

Source: Clinical histories

adolescents who make the suicide attempt are family conflicts, thus 11 adolescents answered for 22.5%, followed by the presence of group imitation with 18 adolescents for 22.6% and in third place feelings of frustration with 4 for 18.3%.

It is necessary to point out that adolescents who feel depressed have a high probability of carrying out the suicide attempt, being reflected in the study, where 4 of the subjects admitted that they had done it because of depression and anguish, for 18.3%.

When analyzing the proportion of adolescents for each of the causes, statistically significant differences are evidenced according to results of the Chi-square test with values of $P > 0.05$ in each of the analyzes.

In Table 3, we can see that adolescents with suicidal intent predominate by the method of ingestion of drugs representing 16 for 39% of the universe followed by those who use hanging with a total of 10 for 24.4%, although those who use the method for injuries was constituted by 9 equivalent to 22% where it is clarified that in adolescents the ages range from 12 to 18 years, which obey an emotional instability typical of age.

In relation to sex, it can be seen that more often, females have applied the wound method, represented by 24.1%;

hence, the female sex has a tendency to commit suicide more by ingesting drugs than sex male, represented with a total of 14 for 39.0%, where the method of hanging equals a higher percentage for the male sex, which represents 24.4%.

DISCUSSION

Estimates made by the World Health Organization indicate that in the year 2020 the victims could amount to 1.5 million. It was evidenced in the series studied an increase in suicide attempts in Villa Clara of 117 attempts in ages between 10 and 14 years and 261 between 15 and 19 years for a total of 378 cases, coincides with the report made according to the 2016 Statistical Yearbook in Cuba.^[6]

Researchers such as Hernández *et al.*, 7 points out that in cities such as Bogotá, an increase in suicide rates in 2016 was 18% higher than in previous years.

The disciplinary problems in the school or legal situations for which the adolescent must respond; the acceptance of suicide as a way of solving problems among the group of belonging; group pressure to commit suicide under certain circumstances and in certain situations are other risk factors that affect.

The failure in school performance; unwanted pregnancy; like suffering from a serious physical illness; be a victim of natural disasters; rape or sexual abuse; and be subject to threats; be cause of the ridicule at school; and the lack of communication by parents, teachers are risk factors to the suicide intent in adolescents.^[7]

In the reviewed bibliography,^[8] it was found that those who are more likely to risk suicidal attempts are those adolescents exposed to the sociocultural pathway, among which is male alcohol consumption.

This approach corresponds to the results obtained in interviews with the group where they said they drink toxic substances when they go out for a walk, at parties, and sharing tastes and preferences with friends. As a motivation, they refer that they do it " by group contagion," "to be approved by the group," ". to comply with rules of friends," "to seek group pleasure," "to avoid family conflicts."

Undoubtedly, a psychosocial risk factor in adolescence that in most cases leads to a suicidal attempt and properly suicide is the group consumption of alcoholic substances becoming an early morbidity.

Usually, it is reported that the age of onset of consumption, begins in early adolescence; however, there are other authors who place it after 14 years.^[9]

Table 2: Adolescents according to causes of suicide attempt and sex

Reasons the suicide intent	Sex, n (%)		
	Female	Male	Total
Feeling of frustration	2 (16.7)	3 (6.9)	4 (18.3)
Anguish	2 (16.7)	3 (6.9)	4 (18.3)
Group imitation	4 (33.3)	14 (48.3)	18 (22.6)
Situational depression	2 (16.7)	2 (6.9)	4 (18.3)
Family problems	2 (33.3)	7 (24.1)	11 (22.5)
Total	12 (100)	29 (100)	41 (100)

Source: Interviews structured

Table 3: Adolescents according to the method used for the suicide attempt by sex

Method used	Sex, n (%)		
	Male	Female	Total
Burns	4 (33.3)	2 (6.9)	6 (14.6)
Hanging	4 (33.3)	6 (20.7)	10 (24.4)
Ingestion of drugs	2 (16.7)	14 (48.3)	16 (39.0)
Wounds	2 (16.7)	7 (24.1)	9 (22.0)
Total	12 (100)	29 (100)	41 (100)

Source: Clinical histories

Alcoholism is a disease caused by the abusive consumption of alcoholic beverages and by the addiction that this habit creates. The figures of adolescents and young consumers increase every year.^[10]

To eradicate such risks as a scourge that threatens the lives of adolescents, it is necessary to adopt preventive measures to reduce their impact. Prevention is an important resource within society to prevent different evils from reaching or expanding.

This term includes actions aimed at the eradication, elimination, and minimization of the impact of the disease and disability; includes social, political, economic, and therapeutic measures.^[11]

Adolescence is essentially a time of changes in which the process of transformation of the child in adult happens, it has peculiar characteristics, and it is also a stage of discovery of one's identity (psychological identity and sexual identity) as well as individual autonomy.^[12]

In the studied adolescents, the use of hard methods to provoke death was predominant for both sexes; the main ones being hanging and the ingestion of drugs, coinciding with the report of different researchers, and statistically significant differences were found in the attempt between men and women.^[13,14]

The methods used by the human being with the aim of ending their lives are diverse and depend on several aspects; they can be from totally harmless to lethal methods. For different authors, the method most used by adolescents to try to commit suicide is the ingestion of drugs, in this way, the study coincides with the research carried out by Osornio-Castillo who found this type of method in 80% of his sample.^[15]

These figures can be explained because it is precisely the drugs that are the most accessible to adolescents, and the most widely used over the years, both nationally and internationally, as well as being the least painful method used.

That is why dysfunctional relationships that are generated in a family environment could be considered as a predictor of suicide attempt, and this could increase the risk that adolescents generate clinical symptoms.^[16,17]

Usually, it is reported that the age of onset of drug use, begins in early adolescence,^[9,18] however, there are other authors such as Paterno^[19] and Righetti^[20] that place it after 14 years constituting an open door to the suicidal attempt.

CONCLUSION

The difficulties are related to inappropriate attitudes of parents and psychosocial pressure in groups by adolescents who

obey emotional imbalances that lead to assume inappropriate behaviors such as suicide attempt related to risk factors.

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