

# Psychological, Family and Environmental Factors Influencing Suicide among Secondary School Students: A Case of Schools in Gusii Land, Kenya

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**Abstract:-** Suicidal thoughts have many causes. Most often, suicidal thoughts are the result of feeling like you can't cope when you're faced with what seems to be an overwhelming life situation. If you don't have hope for the future, you may mistakenly think suicide is a solution. Worryingly, suicide is the second leading cause of death in 15-29 year olds globally. Suicide has become a menace in Kenya with rates going high by the day. This study was carried out among the Gusii people of Kenya which targeted secondary school students. The purpose of this study is to establish if students of secondary school have social interactions, friends, peers, relationships and feel burdensome to parents by secondary school students as this are predictors of suicide. The study utilized a qualitative research design and data was collected by use of questionnaires and data was analyzed by use of simple percentages. The study revealed that majority of the students 70% of the respondents said that they spend time with friends at home and at school and 21% do not enjoy spending time with family or even with friends whereas 9% remained neutral. On how they feel with their peers 40 (26%) feel comfortable majority 99 (66%) do not like the idea of being with peers. . The study gave recommendations based on the findings of what needs to be done to reduce the predictors of suicide

**Key words:** Suicide, Student, Peer, thoughts, Family, isolation

## I. BACKGROUND

Suicide rates are highest in teens, young adults, and the elderly. People over the age of 65 have the highest rate of suicide. Although women are more likely to attempt suicide, men are more likely to be successful. Suicide is a complex phenomenon that emerges out of a dynamic interaction involving biological, psychological, social, cultural, and spiritual factors. Suicide is most often the result of profound pain, hopelessness and despair: it is the triumph of pain, fear and loss over hope (Bertolote, 2000)

Suicide is one of the top ten leading causes of death in the United States and was responsible for almost 45,000 deaths in 2016. Many more people are hospitalized as a result of nonfatal suicidal behavior (i.e., suicide attempts) than are fatally injured, and an even greater number are either treated in ambulatory settings (e.g., emergency departments) or not treated at all.<sup>[1,2]</sup> Among adults aged 18 years and older, for each suicide there are about 30 adults who reported making a suicide attempt. In the United States, suicide was responsible for 44,193 deaths in 2015, which is approximately one suicide every 12 minutes (CDC, 2015)

Suicide, like other human behaviors, has no single determining cause. Instead, suicide occurs in response to multiple biological, psychological, interpersonal, environmental and societal influences that interact with one another, often over time. According to CDC (2015) the social ecological model—encompassing multiple levels of focus from the individual, relationship, community, and societal—is a useful framework for viewing and understanding suicide risk and protective factors identified in the literature.

WHO (2018) Suicides happen in all countries and regions, whether rich or poor. However, most occur in low and middle-income countries, which accounted almost four-fifths of global suicides in 2016. Every year, close to 800 000 people die due to suicide every year, it is estimated that the method used for 20 per cent of global suicides is pesticide self-poisoning, most of which occur in rural agricultural areas in low- and middle-income countries. Other common methods of suicide are hanging and firearms. In high-income countries, there is a well-established link between suicide and mental health issues such as depression and alcohol use disorders, but many suicides take place on an impulse, during moments of crisis.

Standard digital (2019) Central Kenya region is losing at least five lives every day through suicide in what officials and residents say is a never seen-before catastrophe that should now trigger community reawakening to restore social ethics.

The worst hit, according to police records availed to Mt. Kenya Star is Nyeri County where on average, four people are killing themselves every day.

Kirinyaga follows with at least one death per day while in Murang'a at least four people commit suicide every week.

Despite the grave consequences of the matter, political leaders and especially the governors are yet to mainstream the issue on the region's debate, leaving the burden to the regional administration and the church.

WHO (2019) Suicide cases have been on the rise here in Kenya, according to WHO the number of suicides reported in Kenya rose by 58 per cent between 2008 and 2017 to reach 421. The report also shows that more men are likely to commit suicide than women. Out of the 421 suicide cases in

2017, 330 involved men. Within Universities here in Kenya, there have been a worrying statistic of students committing suicide. Universities have been reluctant in sharing statistics however there have been slight over twenty documented cases of students who have committed suicide.

TUKO (2019) Suicide cases have been on a steady increase raising concern across the country - Police records show that at least 80 people took their own lives in the past one month - This was attributed to stress, depression and mental illnesses - Some of those who took their own lives were mourning deaths of their spouses At least 80 people have committed suicide in the country in the last four weeks according to police records. Five of the victims were facing serious criminal cases including murder, attempted murder and stealing and all committed suicide while in police custody.

Kegochi the district commissioner, Kisii counties on suicide in Kisii noted "The cases of men taking their own lives in Kisii are worrying. My appeal to men is that they should guidance and counseling anytime they are faced with difficulties in life," Kegochi stated. Junior (2019) The commissioner challenged local chiefs to conduct weekly baraza in their respective places of jurisdiction to advise the public accordingly. He noted that losing men prematurely is increasing the number of orphans and widows in the region.

MHA (2018) A suicide attempt is a clear indication that something is gravely wrong in a person's life. No matter the race or age of the person; how rich or poor they are, it is true that most people who die by suicide have a mental or emotional disorder. The most common underlying disorder is depression, 30% to 70% of suicide victims suffer from major depression or bipolar (manic-depressive) disorder. It is estimated that around 20% of global suicides are due to pesticide self-poisoning, most of which occur in rural agricultural areas in low- and middle-income countries. Other common methods of suicide are hanging and firearms. Knowledge of the most commonly used suicide methods is important to devise prevention strategies which have shown to be effective, such as restriction of access to means of suicide

Gregory.C. (2019) notes that The most cited risk factors for suicide include psychiatric disorders, genetics, co-exist. Access to weapons and other methods of suicide also increase risk. For example, rates of suicide in homes with guns are greater than in homes without them. Mental disorders play an overwhelming role in the increased risk of suicide – with estimates suggesting up to 90% of individuals who take their own life suffer from some type of psychiatric disorder. Risk of suicide for individuals suffering from mental disorders drastically decreases once admitted to treatment The mental disorders with the greatest prevalence of suicide risk associated with them include major depressive disorder, bipolar disorder, schizophrenia, personality disorders, post traumatic stress disorder, and eating disorders. Individuals suffering from major depressive disorder and

bipolar disorder are at the highest risk of suicide – with risk of suicide increasing 20-fold. Gregory.C. (2019)

Behind major depressive disorder and bipolar disorder, substance abuse ranks as the second highest risk factor for suicide. Statistics indicate that alcoholism is present at the time of death in up to 61% of completed suicide cases. Heroin and cocaine use is also a common risk factor for suicide, with heroin users having a 14-fold greater risk of suicide and cocaine users having a higher risk of suicide during withdrawal drug use. Cannabis use has not been found to increase suicide risk among users. Gregory.C. (2019)

Genetics is thought to play a role in risk of suicide – such that a family history of suicide tends to indicate an increased risk of suicide among other family members – accounting for up to 55% of suicidal behaviors. Family history of mental disorders and substance abuse is also a risk factor for suicide. In a similar respect, exposure to suicide (e.g., watching a family member commit suicide or finding their body) is also indicative of an increased risk of suicidal behavior.

Family and socio-economic problems are also contributing factors to suicide risk. Unemployment, homelessness, poverty, childhood sexual abuse, social isolation, loss of a loved one, and other life stresses can all increase the likelihood of suicide. Sexual abuse alone is thought to contribute to 20% of the overall risk of suicide. Rates Suicide Rates by Age Gregory.C. (2019)

In 2017, the highest suicide rate (20.2) was among adults between 45 and 54 years of age. The second highest rate (20.1) occurred in those 85 years or older. Younger groups have had consistently lower suicide rates than middle-aged and older adults. In 2017, adolescents and young adults aged 15 to 24 had a suicide rate of 14.46. Gregory.C. (2019)

#### *Suicide Rates by Race/Ethnicity*

In 2017, the highest U.S. age-adjusted suicide rate was among Whites (15.85) and the second highest rate was among American Indians and Alaska Natives (13.42). Much lower and roughly similar rates were found among Black or African Americans (6.61) and Asians and Pacific Islanders (6.59).

Note that the Center for Disease Control and Prevention (CDC) records Hispanic origin separately from the primary racial or ethnic groups of White, Black, American Indian or Alaskan Native, and Asian or Pacific Islander, since individuals in all groups may also be Hispanic.

WHO (2012) A comprehensive approach to suicide prevention and intervention - characterized by multiple strategies implemented across an array of key contexts, over time - is likely to yield the greatest benefit in reducing the incidence of suicide and suicidal behaviour. The delivery of high quality assessment and treatment services, focused on both reducing the risk factors for suicidal behavior, while simultaneously bolstering protective factors, is a central component in overall suicide prevention efforts.

(CDC, 2015) Suicide and nonfatal self-directed violence result in an estimated \$69 billion in combined medical and work loss costs.<sup>[1]</sup> However, because that estimate does not include other societal impacts (like those on families), the true cost of suicide is likely much higher.

#### *Gender Differences*

NCH (2019) Suicide is the second leading cause of death among youth aged 10-19 years in the U.S., with rates historically higher in males than females. However, recent reports from the Centers for Disease Control and Prevention reveal female youth are experiencing a greater percent increase in suicide rates compared to males. Bridge said females have higher rates of non-fatal suicidal behavior, such as thinking about and attempting suicide, but more males die by suicide than females. "One of the potential contributors to this gender paradox is that males tend to use more violent means, such as guns or hanging," said Bridge. "That makes the narrowing of the gender gap in suicide by hanging or suffocation that we found especially concerning from a public health perspective."

#### *Prevention*

Suicide prevention methods and treatment are based on patient risk factors. Treatments are prescribed in light of underlying conditions in addition to prevention of suicidal thoughts and acts. If you are suffering from a mental disorder, a treatment plan to treat this condition is implemented first. One of the most common suicide prevention techniques is psychotherapy – also known as talk therapy – in the form of Cognitive Behavioral Therapy (CBT) or Dialectical Behavior Therapy (DBT) (Gregory, 2019)

MHA (2018) Cognitive Behavioral Therapy is a common treatment option for individuals suffering from a variety of mental disorders. In this method of psychotherapy, you are taught new ways of dealing with stress and stressful life experiences. In this manner, when thoughts of suicide arise, you can redirect those thoughts and cope with them in a different way than attempting to take your own life.

Dialectical Behavior Therapy is used to help an individual recognize disruptive or unhealthy feelings or actions. In relation, this therapy method then introduces techniques on how to deal with difficult or troubling situations. More research is needed on psychotherapy related to suicide prevention though, as DBT, in particular, has been shown to decrease the prevalence of attempted suicide but has shown no effect on completed suicides.

Medications can also be prescribed as a prevention method to suicide; however, controversy exists in this method, as many medications used in the treatment of mental disorders include increased risk of suicide as a side effect. Antidepressants especially carry a risk of potential increase in suicidal thoughts and behavior – but this risk might be dependent on age. Clinical research has shown that young adults increase their risk of suicide and suicidal thoughts when taking

antidepressants, but in older individuals, this side effect diminishes.

Sheikhmoonesi and Zarghami (2014) Increased awareness among doctors is also a prevention technique. Research indicates that many individuals who have completed suicide or attempted suicide did seek medical attention in the year prior; however, warning signs may have been missed. Increased education and awareness among medical professionals might decrease suicide rates in the future.

WHO(2018) Popular "crisis hotlines" have not received solid data indications in the research that suggest their use is effective or not. Though, one positive side effect of these hotlines is that they are generally well-known and common – increasing the general population's awareness of suicide. In an additional effort to bring awareness to suicide and risk factors associated with suicide, September 10 has been observed as World Suicide Prevention Day in partnership with the International Association for Suicide Prevention and the World Health Organization.

Stremming. E. (2017) saying I want to die *is* a cry for help-- not a cry for attention. Obviously, I'd rather not have my closest friends and sisters worry about if I'm okay today. I'd rather not have to be watched. I really would not appreciate being Baker Acted, but I understand the worry. I'm sorry that I say these terrible thoughts out loud, but it's better than keeping these thoughts to myself and then having someone one day say "wow I never thought she was *that* depressed."

It's hard to imagine that girl whose life seems pretty decent, who seems to always have a smile on in photos, who seems to always be positive, trying to make other people feel as if they matter, is suicidal.

The thoughts overwhelm me to the point I am unable to get out of my bed and do things that seem simple, such as eat dinner. It gets really hard and I wish for no one to experience this.

If someone you love has clinical depression, there is a strong risk that they will at some point think about suicide. Although estimates vary, some recent studies place the risk of completed suicide at around 3.5 percent. The risk of suicide should still be taken quite seriously because suicide is very preventable. The best way to prevent suicide, according to Suicide Prevention Resources, is to make sure you know the following risk factors and warning signs of suicide. Schimelpfening (2019) On speaking about suicide among students notes that risk factors can include both the situations someone experiences and how someone is feeling internally. Though it may be easier to recognize situations and times when suicide is more common, understanding how someone is feeling inside requires a little more detective work.

## II. METHODOLOGY

The Republic of Kenya is a country in Eastern Africa, with a population of approximately 41.61 million people. It lies on

the equator and is bordered by Ethiopia (North), Somalia (East), Tanzania (South), Uganda (West), and Sudan (Northwest), with the Indian Ocean running along the southeast border. It has an extension of 582,646 sq. km. The country is named after Mount Kenya - before 1920, the area now known as Kenya was known as the British East Africa Protectorate. Kenya is a diverse nation of 42 distinct ethnic groups. Official languages are Swahili and English and the currency is Kenyan Shilling. The exact place the study was carried out among the larger Gusii people that are surrounded by The Luo to the south and Kipsigi to the North Masaais to the Eastern. The paper used primary data sources to investigate the state of suicidal ideation among secondary school students both males and females. The sample size consisted of only 30 students of Form three from each of the five (5) schools selected. These respondents were sampled by use of simple random sampling. The study adopted qualitative approach design of analysis of data

### III. FINDINGS

*The respondents were asked if they remember about the episodes that led to the suicidal attempt.*

The respondents 132 ( 88.1) replied giving various responses thus; Some reported having been raped by a boyfriend, and some by gang, Isolation by abusive friends and them feel unwanted, one reported that after raping a 6 year old girl he feared being apprehended, failing in exams and being ridiculed about it, Status of being orphaned and lacking basic necessities and fees, Parents show partiality among children, Quarreled by parents because of having boyfriends , Love gone sour, Losing a beloved one, Wrongly accused of having intimate relationship with close relatives for example uncles, rejection by family members and friends and lack of trust from them and quarreled by fathers and use of harsh words to them . Only a small number 8(5.3%) reported never having thought of suicide and 10 (6.6%) never answered the question

This scenario indicates that a big number of students are highly suicidal due to the reasons they have given and will only be waiting for a trigger to execute the plan. The small number that have never thought of suicide and those who didn't respond need to be sensitized since they can easily be intoxicated by their colleague peers.

*The respondents were asked the state of the mind during the suicidal attempt or thoughts?*

Majority 141 ( 94%) of the respondents felt they had let down everyone who had high hopes in them, Very bitter with everyone, Confused and worried, The world was against them, dejected by family, if they had died they would made those who had rejected him happy and then the world would be better for everyone in the family and he would reduce the number of orphans , Guilty because they had raped, bitter because of suspicion of being HIV Positive, depressed, bitterness, full of anger and in a somber mood, felt had lost hope in life, Sober but bitter, lonely, Embarrassed for having

been punished in front of friends, find peace when dead, angry, felt like getting into their borehole because for feeling unwanted, Confused and lacking choice, emotional because of losing confidence and having hatred towards family. A small no 9(6%) did not respond to the question.

Based on the findings above the study agree that people having such thoughts as found in this study should be treated so as to change their mind set as MHA (2018) Cognitive Behavioral Therapy is a common treatment option for individuals suffering from a variety of mental disorders.

*The respondents were asked if the world would be a better place without them?*

When asked if the world would be a better place without them majority 90 ( 60% ) responded thus; Yes family members see them as being a burden, went against family expectations and engaged in immorality, parents are not able to provide basic needs , poor performance, see them as a liars, wastes family money because they fail in exams, not given enough pocket money, parents have never appreciated their grades, after failing in exams they are denied basic necessities, parents say that they are too demanding and can't stand discrimination among siblings by parents. The rest of the students 60 (40%) gave no as an answer to this question

The students who felt like they world would be a better place without them should be assisted as this is a huge percentage. A therapist would be the best option to help understand that "Suicide is just a permanent solution to a temporary feeling," a phrase that is echoed much more than it truly should be. The world won't be a better place without you. You'd be better without the world, but the world isn't going anywhere, so it's time to beat it into submission. It's time to let the heat of your anger burn away the hate that surrounds you. This result agrees with Stremming. E. (2017) saying I want to die is a cry for help-- not a cry for attention. Obviously, I'd rather not have my closest friends and sisters worry about if I'm okay today.

*The respondents were asked if they have ever wished to sleep and not wake up?*

The respondents 130 ( ) responded yes to the question and when asked why majority responded thus; because of poor performance, death of a close relative, because family members do not appreciate them, feeling that everybody is against them, disagreements with siblings and parents, feel sorry for parents who struggle to raise school fees yet they are jobless , parents that are not supportive, being harassed by parents and teachers, heavy punishment from teachers, because of quarrelsome fathers, to evade the problems/challenges of this world, because facing a new day "make me face the reality of being a failure" , failing to achieve the promises I made to myself and my parents , due to peer pressure, struggle with life will have come to an end, because father said hurting words to her, rejection by friends, felt lonely, s no one could assist raise money for schools fees,

friends let him down and friends forced him have sex. A small number 20 (14%) reported not having felt like sleeping and waking up.

If there are people who feel that they would rather sleep and not wake up do not assume such a case since it can easily be a suicide case. Ask them to seek help. The results of this study agree with works by Schimelpfening (2019) who notes that risk factors can include both the situations someone experiences and how someone is feeling internally. Though it may be easier to recognize situations and times when suicide is more common, understanding how someone is feeling inside requires a little more detective work.

#### IV. CONCLUSIONS

**Many** 132 ( 88.1) that reported remembering the episodes that led to suicidal thoughts or attempt is a huge number of students who require help by a skilled helper.

Out of 150 respondents 141 (94%) of the respondents felt they had let down everyone who had high hopes in them, Very bitter with everyone, Confused and worried, The world was against them, dejected by family, if they had died they would made those who had rejected him happy and then the world would be better for everyone in the family and he would reduce the number of orphans , Guilty because they had raped, bitter because of suspicion of being HIV Positive, depressed and bitterness. Majority of respondents 90 (60%) out of 150 wished they would sleep and never wake up so as to t forget everything.

#### V. RECOMMENDATIONS

The study recommends that parents need to be vigilant about the welfare of their children, school life, issues they are facing, the friends they keep, provide basic necessities, have them understand the financial status of the family, challenges they are facing as parents.

The teachers must be watching to notice some changes students are experiencing as they interact with their peers as suicidal thoughts and attempts eminent from the peers.

Students must be sensitized on risk signs of suicide so as to take quick action before they reach a level where suicide will be the best option.

Guidance and counseling teachers need to wake up and look at all students as potential victims. They must sensitize on how to seek help where and whom they can go to for the help before too late. Let them know suicidal feelings are temporary even when they feel hopeless or that life's not worth living anymore, treatment can help regain perspective and life will get better. Let them know that it is important to take one step at a time and not to act impulsively.

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