

FACTORS THAT RAISE SUICIDE RISKS FOR TEENAGERS

Mood and anxiety disorders are on the rise and are all too prevalent among adolescents in today's society. Sadly, with exposure to social media, the risk of cyber bullying only serves to exacerbate these already stressful times. Teen suicide in SA is increasing with the highest risk group being the 15- 24 age category. This is largely due to pressures and changes so many adolescents are facing - this in a fast-paced and often unpredictable environment. While there has been much research on the topic of teenage suicide, this article aims to discuss some of the main risk factors affecting the South African youth of today.

INFLUENCE OF PEER RELATIONS

This is a stage where the adolescent begins to move from their primary value system to their peer value system, Often it presents a conflict as the two sets of value systems differ greatly, which is why you'll

often find the adolescent has greater conflict with their parents. According to Erickson's theory of psych-social development (1968) this is a time where the adolescent is in the developmental stage, exploring their own identity - a period of self-exploration and self-definition. This process can be both positively and negatively influenced by the peer group with which the adolescent identifies. Where an adolescent experiences social alienation, rejection or bullying within their peer group, it has the potential to push an already vulnerable teen over the edge. There are countless stories of teenagers taking their own lives after exposure to this type of social rejection or alienation.

EXPOSURE TO DRUGS/ALCOHOL AND VIOLENCE

For many adolescents in our communities this is a daily reality. Teens exposed to violence in their community and homes, are left feeling

vulnerable and unsafe. Drugs and alcohol are often readily available and become a means of coping or escaping their reality, especially where social support and resources are lacking. Drugs or alcohol become a part of their very survival. Sadly this often leads to secondary problems including depression, anxiety, psychosis and conduct disorders. They are not able to then access the problem solving skills and developmental processes required to mature and adapt, to be able to share their experiences, to develop self-esteem, to manage conflict, to explore and to provide the basis for the next developmental stage of Intimacy. (Erickson, 1968).

UNDIAGNOSED PSYCHIATRIC CONDITIONS

Teenagers are largely reported to be moody, volatile, defiant and temperamental. This is a time of great confusion for them and their parents. It's not surprising that all too often

WORLD MENTAL HEALTH DAY 2019

SADAG SUICIDE CALL CENTRE STATISTICS.

JANUARY – SEPTEMBER 2019



179 090

calls received to
SADAG Call Center
since January

Over

46 545

Suicide Calls received
to Suicide Helpline
in 8 months



22

HELPLINES

***ONLY SUICIDE
CRISIS HELPLINE
IN THE COUNTRY**

**CALL CENTRE
OPEN**



**24 hours a day,
7 days a week**

“140+”

Volunteer Telephone
Counsellors

**We received
over 15 000
sms's, emails,
online forms and
whatsapp chats**

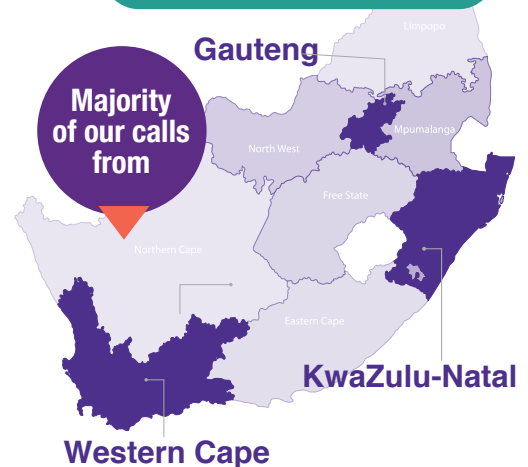
**SADAG receives
600+ calls
per day**

**Suicide Helpline
Telephone bill is over
R110 000
per month**

**Over R75.5 Million
worth
of press
& media**



**Youngest Suicide
in SA has been
6 years old**



0800 567 567 | SMS 31393 | www.sadag.org