

QUALITATIVE RESEARCH ON YOUNG ADULTS' SUICIDAL THOUGHTS AND COPING MECHANISMS

SWETA JOHNSON
Research Scholar

DECLARATION: I AS AN AUTHOR OF THIS PAPER /ARTICLE, HERE BY DECLARE THAT THE PAPERSUBMITTED BY ME FORPUBLICATION IN THE JOURNALIS COMPLETELY MY OWN GENUINE PAPER .IF ANY ISSUE REGARDING COPYRIGHT/PATENT/ OTHER REAL AUTHOR ARISES, THE PUBLISHER WILL NOT BE LEGALLY RESPONSIBLE. IF ANY OFSUCH MATTERS OCCUR PUBLISHER MAY REMOVE MYCONTENT FROM THE JOURNALWEBSITE. FORTHE REASON OF CONTENT AMENDMENT/OR ANY TECHNICAL ISSUE WITH NO VISIBILITY ON WEBSITE/UPDATES, I HAVE RESUBMITTED THIS PAPER FOR THE PUBLICATION.FOR ANY PUBLICATION MATTERS OR ANY INFORMATION INTENTIONALLY HIDDENBYME OR OTHERWISE, ISHALL BELEGALLYRESPONSIBLE. (COMPLETE DECLARATION OF THE AUTHORATTHE LASTPAGE OF THIS PAPER/ARTICLE

Abstract

The coping mechanisms that young people use to deal with stress may offer advice for reducing hopelessness and suicide thinking. In order to assess the relationship between coping and depression and suicidal ideation, this study examined coping classes and the explicit coping behaviors used by young people. Lower levels of melancholy or suicidal ideation were not proactively predicted by explicit issue-centered coping mechanisms. It could be beneficial for mediations to concentrate on eliminating unhealthy coping mechanisms as well as promoting or enhancing healthy coping mechanisms. One of the leading causes of death in young people is self destruction. Life and academic pressures can trigger suicidal thoughts and behaviors, so it's important to understand how coping mechanisms work. The current study examined the relationship between different coping strategies and suicidality among college students in India. Suicidality and coping strategies were examined using univariate and multivariate computed relapse investigations. Suicidal ideation and behaviour may be reduced by teaching and encouraging young people to understand and use a variety of coping mechanisms to manage life stress.

Keywords: *Qualitative Research, Young Adults' Suicidal, Coping Mechanisms*

1. Introduction

Young people who engage in suicidal behaviour are a global health and societal concern. Young people often die by self-inflicted wounds, and younger age groups tend to exhibit non-fatal suicide behaviour more frequently. In comparison to other countries, India has a high prevalence of suicide behaviour among young people, including students. College students are seen as the future world class as they transition from puberty to young adulthood; however, pressure from academic and professional expectations from themselves and their families, competitive circumstances, performing below expectations, and failing a class may result in relationship problems and a sense of seclusion, as well as pressure, low levels of personal control, mentally unstable traits, web habit, discouragement, nervousness, and suicidal thoughts.

Information on the defenses against suicidal thoughts and behaviour is currently restricted. Previous research has explored explicit orientation coping systems linked to suicide thoughts in college students as well as distinct coping mechanisms affecting suicidal ways of behaving. By the way, a somewhat small body of research has focused on the defensive and haphazard effects of explicit coping mechanisms.

Research on the relationship between avoidant coping and suicidality has produced mixed results. A few studies show that evasive coping strategies enhance the risk of suicidality because people tend to give up on their problems and stop trying to reduce stressors. Others contend that evasive coping when done for a good purpose (such as lessening the depressing effects of life's stressors and briefly shifting focus from the stressors to other important aspects of daily life) can prevent teenagers and young people from engaging in suicide behaviour. Finally, none of the aforementioned analyses used Brief Adapt to gauge avoidant coping. It is crucial to more easily understand how different coping mechanisms, particularly aversion systems, and suicidality in young people are related. As a result, this essay aims to dissect the connection between clear coping strategies and suicidality (suicidal ideation and behaviour) using the example of college students in India.

The increased prevalence of self harm and suicide attempts in networks is quite significant. This rise does not just occur in particular countries, and the characteristic of self-destruction, especially among teenagers, is a global health-related issue. According to a summary of prior studies, pre-adulthood can be a good time to begin adjusting to self-harming behaviours. Young people's self-destruction rates have also been shown to be rising in many Iranian provinces. However, numerous studies have looked into the risk factors for suicide behaviour; many people who are in danger of self-destruction do not complete it. So, these folks possess the skills that those who attempt self-destruction need. According to the instructional hypothesis, people who exhibit suicidal behaviour should be encouraged to decrease distressing episodes and increase pleasant ones. Coping techniques are one of these strategies. In order to make use of these techniques, we need to identify the coping mechanisms people employ when faced with traumatic, life-altering circumstances. Yet, factors, convictions, and mentalities regarding suicide behaviour vary among countries; qualitative study can also help us understand the experiences of people who exhibit suicidal behaviour and provide supportive care. The researchers in this study therefore decided to direct a qualitative study with the goal of studying life stress coping mechanisms among teens with suicidal thoughts in the context of Larestan prosperity focuses, Fars area.

2. Literature Review

Juko Ando (2022) - The term "character" is defined as any type of personal traits other than mental capacity from a wider mental perspective. Character is viewed from a limited perspective as premium components, such as the Huge Five. According to twin studies examining the hereditary and ecological impact on character, nonadditive hereditary (hereditary commitment made sense of not by the straightforward option of related qualities but rather by combinational and interactional impacts of various qualities) and shared natural impacts are relatively uncommon, if any, and are the primary sources of variety in most character attributes. The hereditary foundation of character attributes is also used to make sense of them, from the most fundamental level down to every particular brand. The influence of early inheritance on character will often wane over time. Exams have also been conducted on other related topics, such as social behaviour (political, monetary,

strict, and criminal). Two excellent twin technique applications are the discordant twin approach and the bearing of causation model.

Parvaiz, Khalida, and Rauf (2022) Self-destruction, according to some, is a manifestation of actively and purposefully taking one's own life. It is a major concern for everyone's wellness and one of the primary causes of death. The flow study used qualitative research techniques to evaluate many probable causes that can contribute to acts of self destruction. The thirty patients in the example had attempted suicide and were under the care of Jinnah Medical Center. Purposive examination was used to choose the participants, and qualitative semi-organized individual sessions were used to collect the data. The information was analysed using the conventional method, which comprised examining the data to identify codes, classifications, and all-encompassing topics. According to the current research's findings, there were four key aspects that emerged: individual characteristics, family factors, cultural factors, and natural variables. These findings have significant implications for efforts to stop suicide among people. Professionals working in mental hospitals and protection initiatives must keep in mind the aforementioned elements in order to carry out their demonstrated goal.

Jesse Walker and Venta (2022) - Researchers acknowledge that youth injury may be a contributing factor in the recent rise in suicidal thoughts among young people. Fundamental aggravation, which is caused by the body's pressure reaction framework being overactive, may be a sign of suicidal thoughts. Young people with a history of youth abuse are more likely to have suicide thoughts, which may be explained by the underlying irritability brought on by persistent abuse. The goal of the current study was to examine the immunological response (i.e., fundamental irritability) to childhood trauma as a potential risk factor for developing suicidal ideation in young adulthood. The discovery of a positive association between basic irritability and suicidal ideation lends credence to the clever role that basic irritability may play in the physiology of suicidal ideation, however ideas involving juvenile injury were not supported. The review's conclusion provides insight into a potential immunobiological viewpoint for the reduction of suicidal thoughts in young adult populations.

Darla, taking everything into account. (2020) - Because much humanistic research on suicidal ideation has concentrated on fundamental aspects like married status while evaluating the protective advantages of social mix, there is little knowledge of what the type of emotional connections entails for suicidality among young people. This study uses data from the Public Longitudinal Study of Juvenile to Grown-up Wellbeing to investigate the relationship between the type of emotional connections and self-destructive thoughts among young people. It seems that being around people of all kinds affects one's propensity to consider self harm. There isn't a significant difference in the likelihood of responding with suicidal ideas between respondents who are married or living with a partner and those who are single or dating. The findings suggest that those who perceive the quality of their emotional relationships as higher in all circumstances experienced a decrease in suicide thoughts. This study adds to the body of work in the social science of psychological wellbeing by deepening our understanding of the defensive capacity of relationship quality.

MH Nguyen et al., 2021 - There are several resources available to help people who are struggling with suicide thoughts or behaviours. It demonstrated that, at least when compared to other individual techniques like telephone calls, online support for those struggling with suicidal thoughts is effective. We hypothesised that treating suicidal thoughts has been hindered by the assumption that suicidal ideation is a type of disease. They look at processes where mental health issues have played a very small role and, using a Bayesian factual examination and the brain wipe hypothesis, they make the assumption that, most of the time, suicidal ideation deals with a type of money-saving advantage examination for a daily existence/passing thought, and that these people may not be labelled "patients." Only a few of the methods used to make an evaluation include clinical meetings, real evaluations, physiological estimations, psychometric tests, polls, symptomatic meetings, record surveys, and guarantee interviews. Clinicians, specialists, and other psychological well-being professionals use clinical meetings to learn about the history and current state of a client's or patient's difficulties. Clinical meetings are described as being "unstructured" because each physician leads them using their own method rather than according to a set of

predetermined guidelines. An organised (or semi-organized) interview is unquestionably predetermined in terms of the questions to be asked, the order in which they should be asked, the follow-up "tests" (questions) to ask if a patient's response isn't clear or accurate, and a framework for rating the recurrence and severity of side effects.

Abdulmalik Olaosebikan (2020) - Even though older people are more likely to pass away than younger people, it is still one of the major causes of mortality among late adolescents and early adults worldwide. Aside from the fact that this directly results in the loss of a significant number of young lives, it also has detrimental psychosocial and economical outcomes. The rate of youth self-harm is a crucial concern to address when examining the issue from the standpoint of public psychological well-being. Along similar lines, a thorough understanding of the risk factors that contribute to young people's self-destructive tendencies is necessary. This brief poll will provide a quick summary of the main risk factors that increase young people's risk of taking their own lives. The following were identified as crucial gambling factors: mental disorders, prior suicide attempts, particular character traits, hereditary stacking, and family dynamics, linked to psychosocial stressors that cause suicidal thoughts, receptivity to changing models, and the availability of lethal methods. It is essential to maintain relaxing and gain understanding of the complex interactions that these components have with one another in order to create efficient anticipatory technique plans for juvenile self destruction.

3. Methods

3.1. Participants and Recruitment

India's undergrad college students voluntarily participated in a cross-sectional study in November 2016. For each grade, a separated grouped irregular inspecting approach was used to select students from three or four classes of understudies. The study used a brief set of self-report psychosocial assessments, as shown below.

3.2. Statistical Analysis

Probability ratios (ORs) with 95% confidence intervals (CI) were chosen to evaluate differences between the suicidal and non-suicidal groups by the straightforward socio-demographic characteristics. Free sample t-tests were used to identify differences between the two groups according to coping strategies, and the impact size (Cohen's d) was calculated for each coping skill. The cut-off values for Cohen's d were categorized as small (0.2), medium (0.5), and enormous (0.8). Additionally, using suicidality (suicidal versus non-suicidal) as the dependent variable, each coping skill was used as an indicator of a strategic relapse. The calculations were modified to account for the perplexing effects of various components, including (1) a coping skill plus socio demographic characteristics, and (2) a coping skill plus socio demographic factors plus discouragement, nervousness, and stress.

4. Results

The socio-segmental backgrounds of participants in the suicidal and non-suicidal groups are shown in Table 1. In the suicidal and non-suicidal groups, there were few significant differences in terms of orientation, being a lone child, and strict association. Nonetheless, there were significant differences between the suicidal and non-suicidal groups in terms of residency, academic performance, and family socioeconomic situation. Undergraduates from urban areas, with poor academic performance, and from households with less favorable financial foundations were always suicidal (see Table 1).

Table: 1. Background information on the socio demographics of the study's suicidal and non-suicidal participants.

	Suicidal (n=428)		Non-suicidal (n=1.646)		OR	95% CI	
	N	%	N	%		Lower	Upper

Gender							
Female	380	76.7	1.087	56.6	2.33	0.85	2.66
Male	247	23.3	647	43.4	2		
Residency							
Urban	114	43.5	680	57.0	2.28	2.07	2.70
Rural	304	36.3	745	43.0	2		
Only child							
Yes	324	38.7	688	37.4	2.02	0.87	2.42
No	323	40.3	736	42.4	2		
Academic performance							
Poor	80	32.0	263	20.3	1.26	2.53	3.82
Natural	182	57.0	1174	63.0	2		
Good	36	22.0	198	26.5	0.63	0.43	2.04
Family economic status							
Very poor	8	3.2	36	1.8	0.57	0.23	2.33
Poor	67	16.7	324	23.8	2.30	2.04	2.80
Neutral	202	60.2	2227	76.8	2		
Good	27	9.8	328	25.4	0.52	0.52	0.98
Very good	5	0.8	38	2.9	0.53	0.32	2.72
Religious affiliation							
Yes	35	5.2	205	5.3	0.73	0.42	2.23
No	503	82.8	2430	82.5	2		

Table: 2. Socio-demographic variables and mental health were taken into account in multivariate logistic regression analysis of the relationship between copying abilities and suicidality (suicidal vs. non-suicidal).

Coping style	Adj' OR ^a	95% CI		Adj' OR ^b	95% CI	
		Lower	Upper		Lower	Upper
Self-distraction	2.08	2.02	2.27	2.22	2.03	2.30
Active coping	0.66	0.62	0.72	0.75	0.68	0.83
Denial	2.32	2.23	2.44	2.07	2.00	2.27
Substance use	2.44	2.32	2.52	2.26	2.07	2.36
Use of emotional support	2.03	0.84	2.08	0.88	0.83	2.06
Use of instrumental support	0.80	0.73	0.86	0.83	0.78	2.03
Behavioral disengagement	2.23	2.33	2.34	2.24	2.03	2.35
Venting	2.20	2.03	2.27	2.07	2.00	2.26
Positive reframing	0.73	0.67	0.78	0.80	0.72	0.89
Planning	0.73	0.66	0.82	0.83	0.73	2.00
Humor	2.26	2.08	2.35	2.05	0.89	2.24
Acceptance	0.80	0.72	0.86	0.86	0.98	2.05
Religion	2.24	2.06	2.13	2.03	0.83	2.22
Self-blame	2.37	2.27	2.47	2.25	2.06	2.35

Despondency, tension, and anxiousness, three DASS-21 components, and additional change for these factors revealed that self-interruption remained negatively related to suicidality (Table 2).

5. Discussion

The goal of the current study was to make it easier to understand how the Short Adapt scale and suicidality rates in a sample of Chinese college students relate to clear coping strategies. The affiliation was enormous. More specifically, the suicidal group was less likely to use the systems of dynamic coping and positive reexamining compared to the non-suicidal group after controlling for sociosector circumstances, stress, discouragement, and unease. It was inevitable that the

suicidal group would engage in self-fault, self-interruption, substance abuse, social disengagement, and self-recrimination.

Suicidality has been shown to be reduced by dynamic coping, and positive self-evaluation has been shown to have a similar effect. Both of these coping strategies are adaptable; dynamic coping refers to successfully reducing or eliminating stresses, whilst positive rethinking refers to intellectually developing a distressing exchange in a constructive way. The findings of this study suggest that students who use these two coping mechanisms may see a reduction in suicidality. However, the use of instrumental aid, planning, and acknowledgment were also negatively correlated with suicidality after adjusting for socio-demographic factors, indicating that these coping mechanisms may also be helpful in reducing suicidality in young people.

Suicidal students in the ebb and flow study were likely to use some coping mechanisms associated with evasion, such as conduct separation, self-interruption, venting, and humor; however, prior studies have not conclusively established the adaptable or maladaptive effects of these mechanisms in managing stress or suicidality. In our review, social isolation was unmistakably linked to suicidality, correlating with findings from several other studies of college freshmen and older youth. By briefly diverting attention from the stressors, delivering depressing feelings, and then returning to critical thinking, some studies believe that social isolation can help lower the risk of suicidality.

The findings demonstrated that suicidal understudies were essentially obligated to engage in self-harm and the use of alcohol and drugs to cope with problems and escape from stress (referred to as "substance use" by the Concise Adapt scale), which also demonstrated the highest changed OR after adjusting for the confounding effects of socio sector conditions, stress, gloom, and anxiety. A few studies have shown a connection between alcohol and drug usage and suicidality. Young people who gamble on suicide may use alcohol to adapt, which may contribute to poor critical thinking skills, aversion coping, and gloomy seriousness. In India, alcohol use has been growing

quickly, and in recent years, it has become more standardized, necessitating the need for extra general wellness activities.

6. Conclusion

The implications are substantial for intervention strategies and therapeutic practices that aim to support healthy coping mechanisms in order to combat child misery and suicide ideation. This study adds to our understanding of the relationship between coping mechanisms and suicidality in young people. Dynamic coping and positive reexamining were found to be negatively related to suicidality after accounting for the potential frustrating effects of socio-sector conditions, stress, sadness, and tension; however, self-fault, substance abuse, conduct separation, venting, and self-interruption were found to be strongly related to suicidality. To reduce self-destructive ideas and actions, young people must be assisted in developing flexible and effective coping mechanisms.

References

1. Alberdi-Paramoa, I., Saiz-Gonzaleza, M.D., Diaz-Marsa, M., Carrasco-Perera, J.L. (2020). *Bullying and Childhood Trauma Events as Predictive Factors of Suicidal Behavior in Borderline Personality Disorder: Preliminary Findings. Psychiatry Research, 285, 1-4. DOI: 10.1016/j.psychres.2019.112730.*
2. Chen R, An J, Ou J. *Suicidal behaviour among children and adolescents in India. Lancet Child Adolesc Health. (2018) 2:551–3. doi: 10.1016/S2352-4642(18)30170-6*
3. Dell'Osso L, Bertelloni CA, Di Paolo M, Avella MT, Carpita B, Gori F, et al. *Problematic internet use in university students attending three superior graduate schools in Italy: is autism spectrum related to suicide risk? Int J Environ Res Public Health. (2019) 16:1098. doi: 10.3390/ijerph16071098*

4. Eskin M, Sun JM, Abuidhail J, Yoshimasu K, Kujan O, Janghorbani M, et al. Suicidal behavior and psychological distress in university students: a 12-nation study. *Arch Suicide Res.* (2016) 20:369–88. doi: 10.1080/13811118.2015.1054055
5. Folkman S. Stress: appraisal and coping. In: Gellman MD, Turner JR, editors. *Encyclopedia of Behavioral Medicine.* New York, NY: Springer (2013). p. 1913–15.
6. Kim SM, Han DH, Trksak GH, Lee YS. Gender differences in adolescent coping behaviors and suicidal ideation: findings from a sample of 73,238 adolescents. *Anxiety Stress Coping.* (2014) 27:439–54. doi: 10.1080/10615806.2013.876010
7. Klonsky ED, May AM. The three-step theory (3ST): a new theory of suicide rooted in the “ideation-toaction” framework. *Int J Cogn Ther.* 2015; 8(2):114–29. <http://dx.doi.org/10.1521/ijct.2015.8.2.114>
8. Lamis DA, Ballard ED, May AM, Dvorak RD. Depressive symptoms and suicidal ideation in college students: the mediating and moderating roles of hopelessness, alcohol problems, and social support. *J Clin Psychol.* (2016) 72:919–32. doi: 10.1002/jclp.22295
9. Mortier P, Demyttenaere K, Auerbach RP, Cuijpers P, Green JG, Kiekens G, et al. First onset of suicidal thoughts and behaviours in college. *J Affect Disord.* (2017) 207:291–9. doi: 10.1016/j.jad.2016.09.033
10. O'Connor RC, Kirtley OJ. The integrated motivational-volitional model of suicidal behaviour. *Philos Trans R Soc Lond B Biol Sci.* 2018; 373(1754). <https://doi.org/10.1098/rstb.2017.0268> PMID: 30012735
11. Tang F, Qin P. Influence of personal social network and coping skills on risk for suicidal ideation in Chinese university students. *PLoS ONE.* (2015) 10:e0121023. doi: 10.1371/journal.pone.0121023
12. Woodhead EL, Cronkite RC, Moos RH, Timko C. Coping strategies predictive of adverse outcomes among community adults. *J Clin Psychol.* (2014) 70:1183–95. doi: 10.1002/jclp.21924
13. World Health Organization (WHO). *Preventing Suicide: A Global Imperative.* World Health Organization, Geneva (2014).

14. Yang LS, Zhang ZH, Sun L, Sun YH, Ye DQ. Prevalence of suicide attempts among college students in India: a meta-analysis. *PLoS ONE*. (2015) 10:e0116303. doi: 10.1371/journal.pone.0116303
15. Zhang X, Wang H, Xia Y, Liu X, Jung E. Stress, coping and suicide ideation in Chinese college students. *J Adolesc*. (2012) 35:683–90. doi: 10.1016/j.adolescence.2011.10.003

Author's Declaration

I as an author of the above research paper/article, hereby, declare that the content of this paper is prepared by me and if any person having copyright issue or patent or anything otherwise related to the content, I shall always be legally responsible for any issue. For the reason of invisibility of my research paper on the website/amendments/updates, I have resubmitted my paper for publication on the same date. If any data or information given by me is not correct, I shall always be legally responsible. With my whole responsibility legally and formally I have intimated the publisher (Publisher) that my paper has been checked by my guide (if any) or expert to make it sure that paper is technically right and there is no unaccepted plagiarism and hentriconantes genuinely mine. If any issue arises related to Plagiarism/GuideName/EducationalQualification/Designation/Addressofmyuniversity/college/institution/Structure or Formatting/ Resubmission / Submission /Copyright /Patent/Submission for any higher degree or Job/Primary Data/Secondary Data Issues. I will be solely/entirely responsible for any legal issues. I have been informed that the most of the data from the website is invisible or shuffled or vanished from the data base due to some technical fault or hacking and therefore the process of resubmissions there for the scholars/students who finds trouble in getting their paper on the website. At the time of resubmission of my paper I take all the legal and formal responsibilities, If I hide or do not submit the copy of my original documents (Aadhar/Driving License/Any Identity Proof and Photo) in spite of demand from the publisher then my paper may be rejected or removed from the website anytime and may not be consider for verification. I accept the fact that as the content of this paper and the resubmission legal responsibilities and reasons are only mine then the Publisher (Airo International Journal/Airo National Research Journal) is never responsible. I also declare that if publisher finds any complication or error or anything hidden or implemented otherwise, my paper maybe removed from the website or the watermark of remark/actuality maybe mentioned on my paper. Even if anything is found illegal publisher may also take legal

SWETA JOHNSON