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# THE CONNECTION BETWEEN PARENTING RELATIONSHIPS AND SUICIDE ACTIVITY OF ADOLESCENTS

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# Abstract

The relevance of the researched issue is determined by the fact that adolescents are one of the most vulnerable groups of society. This is confirmed by suicide statistics (suicide numbers are the highest among teenagers). The article's objective is to study the connection between parenting relationships and suicidal tendencies among adolescents. Leading methods of the study are the theoretical analysis of scientific psychological literature and empirical research (testing), with the use of techniques that allow to detect suicide behavior and ways to overcome difficult situations in various areas (coping mechanisms, coping strategies), as well as mind-sets and parents' education. The article reveals that adolescents with high suicidal risk are more likely to actualize all types of suicidal intent in their behavior than adolescents with low suicidal risks. A group of adolescents with high suicidal risk uses non-adaptive coping strategies, while those with a low suicidal risk have a wider repertoire of coping strategies. The risk of teenagers' suicide behavior is more often caused by inharmonious relationship with their mother rather than their father. The materials of the article are of practical value for the psychological and pedagogical support in students' education, as well as to the advisory work on parenting relationships issues.

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Keywords: Adolescents, suicide, suicide activity, coping strategies, family relationships, parenting relationship.



# 1. Introduction

The relevance of the research becomes evident when one reviews the large number of studies on identifying the influence of parents on suicide tendencies, the influence of parental relationship on the child coping strategies, the relations of suicide tendencies and coping strategies. However, scientific works, considering the issue in multiple aspects are not enough. This study aims to fill in this gap.

In the context of this problem teenagers are evident to be the most vulnerable, which is confirmed by statistics (the greatest number of suicides is among teenagers). The dangerous statistics is particularly high in our country: the frequency of suicides is 19-20 cases per 100 000 adolescents, whereas the world average figure is 7 cases per 100 000 adolescents. Therefore, the research of problems and factors of adolescents suicide behavior is highly relevant nowadays and has a great social and practical significance.

Many authors have noted a significant increase in the suicide risk, suicide readiness in the transition of adolescence to youth. For example, suicide behaviour at the age of 13 is quite rare, at 14-15 it sharply increases and at the age of 16-19 it reaches its maximum.

A number of Russian researchers note the fundamental difference between teenager suicides and adult suicides. Suicide is seen as a consequence of social and psychological maladjustment of a personality experiencing microsocial conflict (Abitov et al., 2016; Granovskaya, 2003). Along with this there are suicides (completed suicides) and suicide attempts; also the concept of "parasuicide" is introduced as an act of deliberate self-harming that does not lead to death" (Sirota & Yaltonsky, 1993). A number of studies have identified the connection between family relationships and adolescents suicide tendencies. So, in families where precedence is given to such styles of family education as rejection, authoritarian hypersocialization, infantilization and symbiosis, the risk of adolescent suicide behavior increases significantly (Ribakova & Biktagirova, 2015).

# 2. Problem Statement

Thus, as a result of theoretical analysis of scientific and practical research, it was found that the nature of family relationships has the strongest influence on the coping strategies features and adolescent suicide risk.

# 3. Research Questions

#### 3.1. Research hypotheses

As a hypothesis, it was suggested that the determinative factor of suicidal activity among adolescents is their non-constructive coping strategies of behavior, formed in conditions of unfavorable child-parent relations.

#### 3.2. Participants

The study was conducted on the basis of Kazan secondary school № 119 from February to May 2016. The study involved 52 teenagers at the age of 12-14 (average age was 13 years old), students of grades 7-8.

#### 3.3. Stages of research

The study proceeded in several stages. Stage 1 – identification of suicidal risk indicators among adolescents. Stage 2 – studying adolescents coping strategies. Stage 3 – researching peculiarities of parenting relations. Stage 4 – researching and analyzing the connection of parenting relations and adolescents suicidal activity.

# 4. Purpose of the Study

To investigate the specifics of the relationship between child-parent relations and suicidal activity of adolescents.

#### 5. Research Methods

The process of research involved the following methods and techniques: methods of theoretical analysis of scientific psychological literature as well as empirical studies – testing with the use of the following methods: 1) Questionnaire of Suicide Risk (Frolova & Minullina, 2012). 2) Coping Test (Lazarus & Folkman, 1984). 3) The ADOR Questionnaire ("Teenagers about parents") adapted by Vasserman, Gorkovaya & Romitsyna, 2004. Statistical processing was carried out with the help of Pearson Correlation Analysis and Student's T-test.

#### 6. Findings

According to the results of "Questionnaire of Suicide Risk" survey all teenagers were divided into two groups depending on the suicide risk indicators. The first group included adolescents whose indicators of suicide tendencies were average and normal. The adolescents of the second group had the maximum value on one or more indicators. Thus, 2 groups were formed: 22 people with a high suicide risk and 30 people with a low suicide risk. The results are presented in figure 01.

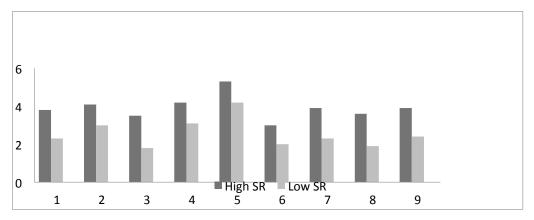
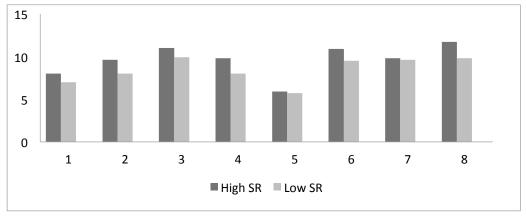


Figure 01. Histogram of suicide risk indicators in two groups

Notes: SR - Suicide Risk.1 - " Demostrativeness", 2 - " Affectivity", 3 - " Unicity", 4 - "Inability", 5 - "Social Pessimism", 6 - "Cultural Barriers Breaking", 7 - " Maximalism", 8 - " Time Perspective", 9 - "Antisuicidal factor".

Thus, the group of participants with a high suicide risk actualizes all types of suicide intent in their behavior more than the group with a low suicide risk. So, teenagers from the first group are often eager to attract attention to themselves and their problems and get sympathy and understanding (17,3), with a predominance of emotions over intellectual control while assessing the situation. (14). Young people from the first group were more likely to perceive themselves and the world negatively, believing themselves to be unnecessary and incompetent in the hostile world (11, 12). Unlike the second group, they are more likely to maximize infantile values and the "cult of the suicide", i.e., to find the values and norms justifying suicide or making it attractive (12). The second group have much lower indicators of suicidal intentions, and they can plan their future constructively.

The study of coping strategies of adolescents was conducted with the use of Coping Test (Burlachuk & Morozov, 1999). The results can be seen in figure 02.



**Figure 02.** Histogram of coping strategies indicators in two adolescent groups Notes: SR - Suicide Risk. 1 - "Confrontational Coping", 2 - " Distancing", 3 - "Self-control", 4 - "Seeking social support", 5 - "Responsibility acceptance", 6 - "Escape-avoidance", 7 - "Problem solving planning", 8 - "Positive revaluation".

Thus, adolescents with high suicide risk have a greater reliance on non-adaptive coping strategies. So, the adolescents of the first group were likely to solve the problem with non-specific behavioral activity, without the implementation of specific actions (6,1), as well as to overcome negative emotions by reducing their significance and degree of emotional involvement in the issue, which happens through depreciation, shift of attention and suspension (7.3).

Adolescents with a high suicide risk often overcome negative emotions through self-monitoring (5) or deliberate suppression and containment of their emotional reactions, by minimizing their impact on the perception of the situation and behavior control. They often react in way of "escape - avoidance" (8,8) or avoidance (denial of problems, fantasizing, unrealistic expectations, distractions, etc.) Also, they are characterized by problem-solving (8,7) by means of outsourcing, additional information, as well as emotional and effective support.

Herewith, the teenagers from the first group have a great ability to overcome negative experiences through positive and philosophic rethinking of the problem situation, its inclusion in the wider context of personal self-development (7,2). The obtained results are confirmed in other works devoted to the problem of coping behavior, the predictive abilities of the youth (Akhmetzyanova, 2015; Abitov, 2015).

The research on parenting relations was carried out by means of "The ADOR Questionnaire" ("Teenagers about parents") (Vasserman, Gorkovaya & Romitsyna, 2004).

The parental attitude towards an adolescent is a critical factor determining a suicide risk. This is particularly evident in mother's relationship to the teenager, since a higher value of the indicator "Positive interest of the mother" is observed in the group of adolescents with low suicide risk. Other indicators ("Directiveness", "Hostility", "Autonomy", "Inconsistency"), which can mostly be assessed as a negative, are higher in the group with high suicide risk. Thus, adolescents with low suicide risk appreciate the "Positive interest" (7,6) of their mothers to themselves, which becomes evident in mothers' approval, support, companionship, emotional contact. The obtained results find their confirmation in our earlier researches (Minullina & Sarbayeva, 2015).

Adolescents with a high suicide risk give higher estimates of negative parental relationship, mostly on the mother's side, but also some negative indicators relating to the father. The mother attitude is assessed by these teenagers as "Directive" (8,5), i.e. imposing a sense of guilt through her instructions and frequent reproaches. Such a mother sacrifices everything for the sake of the child and strives in all possible ways to eliminate inappropriate behavior. The attitude of the mothers of these adolescents is also assessed as "Hostile" (7,6), "Authoritative" (6,3) and "Inconsistent" (12), i.e. characterized by aggressiveness, great strictness in interpersonal relationships, emotional coldness, authoritativeness.

Fathers' attitude to adolescents with high suicidal risk is assessed as "Directive" (3,1), which is manifested in the tendency to lead by winning the authoritativeness and through the actual achievements, as well as the use of dominant communication style. It is also assessed as "Hostile" (6), when violent fathers generally agree with public opinion, strongly adhere to the agreements and satisfy the requirements of others to be a good father, trying to train the son in accordance with the social idea of a perfect child. "Inconsistent" (3,38) attitude is seen by teenagers as the unpredictability, the inability to anticipate the reaction of the father to the situation or event (Murtazina & Minullina, 2014).

A study of the relationship between suicide tendencies, coping strategies of adolescents and relationships between parents and adolescents was carried out by means of a correlation analysis in Microsoft Excel, the data is presented in tables 01, 02.

Questionnaire indicators	Demonstrativene ss	Inability	Social pessimism	Time perspective
Confrontational coping	-0,604		-0,579	
Mother/Positive interest			0,621	
Mother/Autonomy				0,565
Mother/Inconsistenc y		0,576		0,636

Table 01. The relationship of suicide risk and coping strategies among adolescents and parents (Group1)

Significance of the mother's relationship, especially positive interest, authoritativeness and inconsistency, is typical for the adolescents with a high suicide risk (while significant correlation of suicide risks with indicators of father's relationship was not revealed). Also, a suicide risk in this group is associated with confrontational coping strategies that are generally believed to be non-adaptive. However, with moderate use of this behavior strategy, manifested in the flexible resolution of problem situations, as well as in the ability to defend their own interests, suicide risk was reduced.

Significance of the mother's relationship, especially "Positive interest", and "Hostility", is typical for the adolescents with low suicide risk (while significant correlation of suicide risk with indicators of father's relationship was not revealed, though the relationship of father's authority and coping strategy of "Self-control" is present). Suicide risks in this group are associated with coping strategies "Search of social support" and "Planning problem-solving".

Ouestion	<u> </u>	Demonstrativ	Unicity		Social	Culture	Time	Self-
<b>Table 02.</b> The relationship of suicide risk and indicators of parents' attitudes and coping strategies in the group of adolescents with low suicidal risk								

Questionnaire indicators	Demonstrativ eness	onicity	Inability	Social pessimism	barriers breaking	perspective	control (coping)
Seeking social support (coping)					0,461		
Problem solving planning (coping)	-0,497		-0,568	-0,534			
Mother/Positive interest						-0,528	
Mother/Hostility		0,5296				0,4823	
Father/Autonomy							0,468

Comparing the two groups shows that a suicide risk is associated with mother's attitude and teenager's assessment of this relationship. Significant ties with father's attitude have not been identified. Also a group of teenagers with low suicide risk uses several times more coping strategies that influence the degree of risk. Thus, the non-adaptive coping strategy "Confrontation" has more significant relationships in the group of high suicide risk. It is worth noting that the coping strategy "Planning problem solving" is typical for the group with low suicide risks. The active use of the mentioned strategy reduces the degree of suicidal indicators such as "Demonstrativeness", "Failure", "Social pessimism."

That is, in the case when a teenager seeks to overcome problems through purposeful analysis of the situation and all possible ways of behavior, they are less likely to assess the world as negative and hostile. The teenager is more likely to assess themselves as able and competent, open to the world, he is not likely to have a desire to blackmail others and to attract their attention while expecting sympathy and understanding.

Thus, we confirmed the hypothesis that the determining factor of adolescents suicide rates are their unconstructive behavior coping strategies, formed in unfavourable parenting relationships.

The issue of suicidal behavior in the context of family education is studied in the research works of Ambrumova & Zhezlova, 1988; Gilinskiy,1999; Mikhaylova, 1998; Lichko, 1993. In foreign psychology issues of suicidal behavior were considered by Durkheim, 1994; Frankl, 1990; Freud, 1984; Shneidman, 1996.

Coping with stressful situations, factors influencing the choice of coping strategies were analysed by overseas researchers such as Lazarus, 1994; Plutchik, Kellermann & Conte, 1979; Selye, 1979; Sirota & Yaltonsky, 1993; Granovskaya, 2003; Mikhailova, 1998; Tumanova, 2002.

However, there are not enough research works in regards to several aspects, namely the connection of parenting relationships and risk of adolescents suicidal behavior. This study aims to fill in this gap.

# 7. Conclusion

The study results are the following:

1. The group of examinees with high suicide risk compared to the group with low suicide risk is more likely to actualize all types of suicidal intent in their behavior: demonstrativeness, affectivity, ability, social pessimism, breaking cultural barriers and to maximize infantile values, problematic rebuilding time perspective.

2. A group of teenagers with a high suicide risk use non-adaptive coping strategies: confrontation, distancing, escape-avoidance, self-control, seeking social support.

3. The adolescents with low suicide risk have a wider repertoire of coping strategies.

4. The adolescents with low suicide risk appreciate the positive interest of their mothers, exposed in her acceptance, support and emotional contact.

5. The risk of teenagers suicide behavior is caused by inharmonious relationship with the mother more than the father.

Thus, we confirmed the hypothesis that the determining factor of adolescents suicide rates are their unconstructive behavior coping strategies, formed in unfavourable parenting relationships. The materials of the article are of practical value to the psychological and pedagogical support in students' education, as well as to the advisory work on parenting relationships issues.

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