

Exploring The Psychosocial Factors Associated with Suicidal Behaviour Among Youth in Malawi; A Qualitative Study

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Abstract:

Suicide is one of the leading cause of death among young people worldwide and is steady on the rise in Malawi. Various psychosocial factors contribute to such behavior. Hence the study was done to explore the psychosocial factors associated with suicidal behavior among youth in Malawi. Qualitative study design and convenient as well as purposive sampling were used. Data was collected from 17 mental health professionals using an in-depth interview. All recordings were transcribed in English, codes were developed and thematic analysis was done. Themes and relationships were identified. All the participants pointed out depression as the main cause with underlying factors such as family problems, breakdown of intimate relationships, financial issues, drug and substance abuse, physical and emotional abuse. the stigma of having an illness by the family members was also noted.

Keywords —Youth, Suicidal Behavior, Psychosocial Factors.

I. INTRODUCTION

Suicide is one of the leading causes of death among young people and continues to be a serious global public health concern. According to World Health Organization records, almost 800,000 people die from suicide every year. This shows that in every 40 seconds a person commits suicide and many more attempt. On 6th of September 2021, it was reported by the Malawi police service a 72 percent increase in suicide deaths between January and march 2021. According to the Malawi police, the number of suicide cases registered between September 2018 and June 2019 was 133 by individuals of age range between 16 years and 40 years.

Even though committing suicide is an international and personal choice or decision, suicidal behaviour in its nature is a complex behaviour and built up or influenced by series of components which in this case are being referred to as factors. Maslow in his paper titled *a theory of human motivation* proposed that individuals are

motivated to achieve certain needs in life. He also argued that failure to have these needs met into issues of depression and suicide (figure 1)



Fig1. Maslow's Hierarchy of Needs Theoretical Framework

Hence a study was conducted to explore the psychosocial factors that are associated with suicidal behaviour among the youth so that the extent and complexity of the phenomenon should be known.

II. METHODOLOGY

A. Study Setting

The study was conducted in the psychological department of St. John of God Hospitaller Services in 2022 after getting clearance from the District Health Office

B. Study Design

Qualitative cross sectional study to explore the individual perceptions regarding the psychosocial factors associated with suicidal behaviour among youth.

C. Universe and Sampling

The sample universe consisted of psychiatrist, mental health clinicians, social workers and counsellors. Population was 20 and data was collected from 17 participants which was the total number of available practitioners. Convenient and purposive sampling was used.

D. Data Collection

Semi structured format was used, with open-minded questions focusing on the professional's overall perception of their clients. The interview scheduled was pilot tested in three staff members to confirm the coverage and relevance. Modifications were made accordingly, and final interview was formed. Probes and prompts were used when needed. An audio recording of the interview was done. Field notes were made during and after the interview. All audio recordings were transcribed in English.

E. Data Analysis

After data collection, thematic analysis was used. The transcribed data was coded and processed manually. The underlying meaning of the different categories of the codes were formulated into refined themes. At the end of data analysis four major themes emerged.

III. FINDINGS

A. Parental Issues

Parental factors included parental conflict, lack of attention and support from parents and poor parenting. Lack of attention and support as well as poor parenting were reported by many participants. A narrative from a social worker (p17), "most of them have poor relationship with care givers especially from childhood and those experiences I thought have an impact on them while growing up"

B. Economic Issues

Unemployment and lack of financial support were noted. Unemployment was reported by many participants. "These are people who have just finished school and are failing to secure jobs. At the same time there is a lot of pressure from parents at home", a narrative of a psychosocial counsellor (P15).

C. Marital Disharmony

Divorce or breakdown of an intimate relationship as well as abuse/maltreatment from partners were pointed out.

D. Socio-Cultural Issues.

Beliefs, stigma of having a chronic illness, social media, drugs and substance abuse as well as crime were included. Drug and substance abuse as well as social media were pointed out by a lot of participants. One of the participants (P14) said, "one of my clients told me that there are actually videos of the internet showing how to commit murder in a less painful way". While another participant (P5) commented on the issue of drug and substance abuse saying, "their point is that, I would rather get drunk and not feel at all than feel this pain. So the thought of suicide comes easily or is entertained while in the state of intoxication either by drugs or alcohol.

IV. DISCUSSION

The population in this study was drawn from professional staff. Out of the 17 participants; 7 were mental health clinicians, 4 were psychosocial counselors, 4 were social workers, 1 clinical psychologist and 1 psychiatrist.

The first theme that emerged showed that a lot of victims have parental issues. The findings revealed that the participants' clients experienced feelings of lack of support and attention from their parents or care givers and were also affected by parental conflicts or misunderstandings which they happened to be witnessing in their homes. These findings concurred with the Maslow's theory of hierarchy of needs (1943) in which he argues that a person has a need to feel loved and a sense of belonging, and can be met through the authenticity of the connection or relationship they share with friends, family and intimate partners. The finding of this research shows that this need was not met.

Another interesting finding that came out of this study is that youth are at a risk of committing suicide when they are facing economic hardships like unemployment and lack of financial support. In relation to this finding, Maslow in his theory stated that a person has a need to feel safe or secured, be it physical, health or financial security.

Looking into Maslow's theory, safety include a sense of physical security and a feeling of being loved and cared for are some of the needs that a person or an individual craves to be met. Which brings us to the third theme which is marital disharmony. Marital disharmony includes breakdown of an intimate relationship as well as abuse (physical and emotional) which come from their partners. An individual does not feel loved or sure when their partners leave or abuse them.

The last theme that emerged is sociocultural factors which includes beliefs, stigma of having an illness, socio media, drugs and substance abuse as well as crime. Failure to meet any of the needs, be it physiological, safety, love and belonging, esteem and self-actualization has caused people to find ways to numb the distress that comes with it like resulting into drugs and substance abuse which puts them at the risk of committing suicide the more.

IV. CONCLUSION

This study explored the psychosocial factors that contribute to suicidal behavior among the youth. It

has been evidently known through this study that parental issues have played a great role in influencing suicidal behavior among the youth. Hence it is important to explore these factors in clinical practice while treating a person with a recent suicidal behavior and while planning any suicide prevention strategies for them. Early detection of depression or distress, and family interventions involving multidisciplinary teams may help prevent suicide behavior.

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REFERENCES

- [1] Banda, G. T. (2021). Suicide epidemic in Malawi; what can we do? Pan africa medical journal, 38.
- [2] Bilsen, J. (2017). Suicide and Youth: Risk Factors. *Frontiers in Psychiatry*.
- [3] Curtin SC. (2016). Increase in suicide in the United States 1999-2014 , NCHS Data Brief.
- [4] department of psychiatry, limpopo university. (2008). suicide and suicide risk factors. *SA Fam Pract*.
- [5] G, t. (2016). Suicide and suicidal behaviour. *Lancet*.
- [6] Klonsky, E. D. (2016). *Suicide, Suicide Attempts and Suicide Ideation*. Vancouver: Annu. Rev. Clin. Psychol.
- [7] Levi Y. (2008). Mental pain and its communication in medically serious suicide attempts. *J A ect Disord*
- [8] McLoughlin, A. B. (2015). Global Trends in Teenage Suicide. *QJM; An International Journal of Medicine*, 765-780.
- [9] MK, N. (2014). Suicide and suicidal behavior. *Lanchet psychiatry*.
- [10] Mucedola, M. S. (2015). *Depression, suicide and Maslow's Hierarchy of Needs; A Preventive Approach*. Sagamore Publishing.
- [11] Mwafulirwa, D. (2021, September 6). Malawi registered 72 percent rise in suicide deaths between January and march 2021-police. (W. Mzungu, Interviewer) *Nyasa Times*.
- [12] Nock, M. K. (2008). Suicide and suicide behavior. *Epidemiologic reviews*, 133-154.