

Research Article

Silent Struggles: Understanding Suicide Ideation and Attempts among Youth

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ABSTRACT

Suicide remains a significant public health concern across both industrialized and developing nations, particularly affecting young people. This literature review aims to illuminate the global issues surrounding suicide, with a specific focus on the alarming rates of suicide among youth in the Philippines. The review conducts a non-systematic evaluation of current evidence on suicidal ideation and attempts among individuals aged 10 to 24. Utilizing a straightforward corpus analysis method, this study examines a range of recent research to enhance understanding of suicide and its prevalence in this demographic, while also considering age and gender patterns. Given that the suicide rates for this age group are notably high, there is an urgent need to develop effective programs and address the pervasive stigma surrounding mental health. In response, the Department of Health (DOH) in the Philippines has initiated a multi-sectoral approach to mental health, implementing programs and interventions across various settings—including workplaces, schools, and communities—specifically targeting youth.

Keywords: Suicide; Suicidal ideation; Suicidal attempt; Young people

1. INTRODUCTION

Suicide claims over 720,000 lives globally each year, stressing its profound impact. Alarming, it stands as the third leading cause of death for young adults aged 15-29, a critical period of life. The burden is disproportionately felt in low and middle-income countries, accounting for staggering 73% of all suicides worldwide. The pathways to suicide are complex, stemming from a confluence of social, cultural, biological, psychological, and environmental factors that can accumulate throughout an individual's life. Furthermore, for every life lost to suicide, countless others endure the pain of a suicide attempt, highlighting the widespread suffering. Notably, a history of attempting suicide is a significant predictor of future risk within the general population (WHO, 2025). Globally, suicide is a significant cause of death among young people as this study will investigate the suicidal ideation, and attempts. Suicide ideation according to Sta. Maria, et al (2015) is a robust predictor of suicide completion. It is then important to note that identification of the problem is relevant to the development of institutional and prevention programs.

Suicide ideation is considered a highly relevant predictor of suicide attempt, but there is scant attention given to it in terms of research and prevention in Asia (Liu & Lee, 2013). To Liu and Lee, there is no large-scale survey conducted on suicide ideation among university students. They believe that university students are a distinct sector, which deals with complexities in life on top of dealing with pressures in higher education. Suicide is a somewhat unusual occurrence, and it is challenging to forecast which individuals with these perils will eventually compel suicide. According to the World Health Organization's article "Preventing Suicide: A Global Imperative" (2014), countries guided by the WHO Mental Health Action Plan 2013-2020 hope to see a 10% reduction in suicide rates. This can only happen if safeguards are put in place to assist build for the future. According to their primary statistics, about 800,000 individuals die from suicide each year, with many more attempts. Suicide is the third largest cause of death for people aged 15 to 19, with a global rate of 79 percent, and the methods employed include pesticide ingestion, hanging, and weapons. According to Elflein (2019), the countries with the highest suicide rates worldwide include Lithuania (31.9), Russia (31), Guyana (29.2), and Korea (26.9), which has the highest suicide rate for women. According to the Centers for Disease Control and Prevention (CDC) WISQARS Leading Cause of Death Reports (2018), the United States of America is not among the countries with the highest death rates. Similarly, Sta. Maria, et al (2015) investigated suicide ideation among university students in Manila where they surveyed 2,450 students enrolled at a private university. It was found that prevention programs in school are necessary because their findings revealed that suicide ideation was prevalent among the students who were surveyed. Furthermore, a clinical follow-up was deemed necessary to confirm the presence of mental health problems in addition to the importance of integrating

the roles of social groups in the prevention programs especially those that may help students who are at-risk.

The goal of this study is to conduct a non-systematic review of the existing evidence specifically concerning suicidal ideation and attempts among young individuals aged 10 to 24 who are engaged in educational settings. This will also explicitly outline its limitations and propose recommendations for future research to address the gaps in our understanding. It aims to answer the following questions: 1. What is the global prevalence of suicide ideation and attempts among youth, as identified in the existing literature?; 2. What are the gaps in the current literature regarding the understanding and prevention of suicide ideation and attempts among youth?; and What are the implications of the current research for future research, policy, and practice related to youth suicide?

To effectively address the global issues of suicide, particularly as it affects students, a foundational understanding of key definitions is essential. This review begins by examining the following definitions: Suicide is defined as death resulting directly from self-inflicted injury undertaken with the intention to die. Suicidal attempt, on the other hand, is a non-fatal, self-directed, possibly damaging conduct to die because of the behavior (a suicide attempt may or may not result in injury), whereas suicidal ideation is the act of pondering, planning, or thinking about suicide (NIMH, 2020). The term "young people" refers to those aged 10 to 24 (WHO-Southeast Asia, 2020). Adolescents commonly use the methods of overdose or ingesting, hanging/suffocation, and the use of a sharp item in suicidal attempts (Cloutier, Martin, Kennedy, Nixon, & Muelenkamp, 2010). According to Cha et al. (2008) and Van Orden et al. (2011), suicide attempts among adolescents frequently occur in the context of a plan, though a much smaller group of adolescents attempt suicide.

The most recent known data on suicide in the Philippines came from the World Health Organization Mortality Database in 2011. Males (all ages from 5 to 75+) reported 1,879 cases, while females (all ages from 5 to 75+) reported 570. The Department of Health (DOH) has teamed up with the World Health Organization (WHO) to encourage mindfulness about the importance of public mental health, particularly in the wake of the COVID-19 pandemic. Those between the ages of 15 and 29 are the most vulnerable to mental health-related mortality during this time. It may serve as an example of the need for further discussions and initiatives to reduce the stigma associated with mental illness. Filipinos are afraid of estrangement or prejudice if they talk about their mental health problems (World Health Organization-Western Pacific Philippines, 2020).

The 2019 suicide statistics for the low-middle income group in the Philippines, as reported by the WHO, show a total of 2325 cases, (624 female, 1702 male). The Department of Health (DOH), in partnership with the World Health Organization (WHO), is actively promoting public mental health awareness, a critical undertaking amplified by the challenges of the COVID-19 pandemic. This collaborative effort is essential considering a significant disconnect in the Philippines: despite the nation's consistent high ranking in global optimism indices, the National Center for Mental Health (NCMH) has reported a dramatic rise in monthly hotline calls for depression, from 80 pre-lockdown to nearly 400 (WHO, 2020). This situation is further compounded by global statistics indicating that individuals aged 15-29 are the most susceptible to mental health issues, with related deaths being the second leading cause of fatalities in this age group. The reluctance of many Filipinos to discuss their mental health struggles, driven by fear of alienation and prejudice, necessitates more open conversations and supportive programs aimed at destigmatization.

The concept of social integration was used by Durkheim (as cited in Zhang, 2019) to explain why people who lacked social connections had a higher suicide rate – those who were single, divorced, or never married had fewer connections to others in society and were less likely to feel part of the larger community. For example, because men have more freedom and independence than women, some men may believe they have fewer meaningful ties with others and that seeking counsel or consolation from others would be an admission of weakness, leading to emotions of being cut off from a group or society. As a result, men are at a higher risk of suicide than women over the world. In conclusion, those who lack personal bonds or connections with others, as well as a sense of frustrated belonging and burdensomeness, are more prone to commit suicide.

The most dangerous form of suicidal desire, according to the Interpersonal Theory of Suicide (Joiner, 2005), is caused by the simultaneous presence of two interpersonal constructs—thwarted belongingness and perceived burdensomeness—and that the capability to engage in suicidal behavior is separate from the desire to engage in suicidal behavior. In addition, he proposed a framework in which (a) suicide ideation and (b) the passage from thought to attempt were viewed as distinct processes with distinct explanations and risk factors. Suicidal behavior in adolescents is associated with female gender, psychoactive substance use, running away from home, being raised in a single-parent family, family members who are alcoholics, and experiences of abuse, according to Zygo et al. (2018). Mars et al. (2019) compared teenagers who reported suicidal ideation to those who attempted suicide, those who attempted suicide were more likely to report exposure to self-harm in others (adjusted or for family member self-harm: 1.95, for friend self-harm: 2.61 and for both family and friend self-harm: 5.26). They were also more likely to suffer from a mental illness (adjusted or for depression: 3.63; adjusted or for anxiety disorder: 2.20; adjusted or for behavioral disorder: 2.90). Female gender, lower IQ, higher impulsivity, higher intensity seeking, poorer conscientiousness, a greater number of life events, body

dissatisfaction, hopelessness, smoking, and illicit substance use were among the other risk variables. In the study of Pacres, et. al (2014), participants to their research aged 15 to 19 years old have manifested depression before they committed suicide. The attempt was caused by family and relationship problems. The researchers identified three specific variables. They believed these are explicitly related to suicide, namely: perceived burdensomeness, thwarted belongingness, and acquired capability to do the act.

Bailey, et al. (2017) found that participants had increased awareness about suicide, confidence in talking about suicide concerns, desire to talk about suicide, and likelihood of suicide after participating in a study on universal suicide prevention in young people. There was no evidence that the training produced suicide thoughts or distress, and both appeared to reduce after the instruction. Most participants did not find the training to be distressing; they found it to be beneficial, and the majority indicated they would suggest it to a friend. Cha et al. (2017) found important patterns and knowledge gaps that should be used to drive future research. The prevalence of suicidal thoughts and acts among youth varies across countries and sociodemographic groups, according to epidemiology. Cross-national studies are rare and do not consistently account for high-risk populations. In terms of etiology, the bulk of risk factors have been discovered in the realms of environmental and psychological factors (particularly negative affect-related processes), with self-report measures being used most frequently. Little study has included behavior, physiology, chemicals, cells, and genes as additional units of analysis. Finally, there is mounting evidence for certain psychotherapy treatment and preventative measures, as well as preliminary evidence for technology-based therapies. Matsubayashi et al. (2014) provide one explanation for this phenomenon, determining the relationship between suicide rates and a public awareness campaign designed to raise public awareness of depression and encourage people to seek help, and finding that public awareness campaigns are the most effective way of preventing suicide in Japan. "Association of the Youth-Nominated Support Team Intervention for Suicidal Adolescents With 11-to-14 Year Mortality Outcomes," King et al. (2019) discussed how teens aged 13 to 17 who had been hospitalized for a suicide attempt or suicidal ideation were asked to choose "caring adults" to support them after hospitalization. Suicide warning signals and therapeutic support measures were taught to the adults. For three months, the adults also received weekly phone calls from support professionals. As a result of the intervention, the study discovered youth-nominated support teams. Another study by Asarnow et al. (2017) found that Safe Alternatives for Teens and Youth (SAFETY), a cognitive-behavioral, dialectical behavior therapy-informed family treatment designed to promote safety, had a significantly higher probability of survival without a suicide attempt at the three-month follow-up compared to the control group.

Schilling et al. (2016) conducted another study on the signs of suicide (SOS) prevention program, which teaches students to recognize the warning signals of suicide risk and seek help from adults if they or their peers exhibit these indications. Completing an optional self-administered depression screening as part of the program aims to raise students' awareness of the symptoms of depression. It was suggested that the school-based preventative approach be used. According to Joshi & Billick (2017), one technique for suicide prevention is to evaluate people to see who most at risk is. Suicide screening techniques at the time of entry and at intervals throughout incarceration were indicated as prudent practices. The apparent growth in mental health problems that silently plague our communities and cause the frightening rise in suicide among our children and youth is a serious worry that parallels COVID-19. We felt obliged to work together to help prevent and lessen the effects of this approaching crisis because we were aware of how difficult it was for rural and underdeveloped communities to get relevant health information and services (David, n.d.).

2. MATERIALS AND METHODS

This study systematically identifies relevant research for this review, a comprehensive electronic search was conducted focusing on suicide ideation and attempts among young people. The search strategy encompassed scholarly articles published in peer-reviewed journals from January 2010 to the present data. The following databases were systematically searched: PsychINFO, Scopus, Web of Science, PubMed, ERIC. The search strategy employed a combination of the following keywords and Boolean operators (and, or): suicide or suicidal, suicide ideation or suicidal ideation or suicidal thoughts, suicide attempt or attempted suicide, adolescent or youth or young adult or teenager or student, university student, college student, higher education.

The search results were then subjected to a multi-stage screening process to determine eligibility. First, titles and abstracts were independently reviewed based on the following inclusion criteria: it investigated suicide ideation and/or attempts in young people aged 10 to 24 years. The publication was in the English Language. The study sample included individuals within the 10 to 24 year age range. The study focused on or included data from higher education institutions. Additionally, full-text articles or potentially eligible studies were retrieved and thoroughly assessed against the same inclusion criteria. The findings from this synthesized body of research was analyzed using corpus analysis method to provide insights into the understanding of suicide and its prevalence among young people.

3. RESULTS AND DISCUSSION

This section presents the findings of the systematic review, directly addressing the research questions outlined. Global prevalence of suicide ideation and attempts among youth as identified in the existing literature. The identified gaps in the current understanding and prevention of youth suicide. Last, the implications of the findings for future research, policy, and practice.

1. Global Prevalence

The significant global burden of suicide, claiming over 720,000 lives annually and ranking as the third leading cause of death for young adults (15-29), underscores the critical importance of understanding and addressing this issue. This burden is disproportionately concentrated in low and middle-income countries, accounting for 73% of global suicides. The multifaceted nature of suicide, arising from a complex interplay of social, cultural, biological, psychological, and environmental factors, necessitates a comprehensive approach. For every completed suicide, many more individuals experience attempts, with a history of attempts being a significant risk factor for future suicide. Given that suicide ideation is a strong predictor of suicide completion (Sta. Maria et al., 2015), investigating it, particularly among youth, is crucial for developing effective prevention programs. Despite the recognized importance of suicide ideation, especially among vulnerable groups like university students facing unique pressures (Liu & Lee, 2013), research and prevention efforts in Asia remain limited. The global aspiration for a 10% reduction in suicide rates by 2020 (WHO, 2014) highlights the urgent need for proactive interventions. While global suicide rates vary, with countries like Lithuania, Russia, and Guyana reporting high figures (Elflein, 2019), research within specific contexts, such as Sta. Maria et al.'s (2015) study on university students in Manila, reveals the prevalence of suicide ideation within this population and emphasizes the necessity of school-based prevention programs and the integration of social support systems for at-risk students.

2. Gaps in the Literature

Establishing a clear understanding of key definitions is crucial for addressing youth suicide globally. This includes defining suicide as a self-inflicted death with intent, a suicide attempt as a non-fatal self-directed potentially harmful behavior with possible intent to die, and suicidal ideation as thoughts or plans about suicide (NIMH, 2020). In this paper, "young people" encompass individuals aged 10 to 24 (WHO-Southeast Asia, 2020). Common methods of suicide attempt among adolescents include overdose/ingestion, hanging/suffocation, and sharp items (Cloutier et al., 2010), often occurring with a plan (Cha et al., 2008; Van Orden et al., 2011). In the Philippines, the most recent national suicide data from 2011 indicated higher rates among males (WHO Mortality Database). Recognizing the urgency, especially amidst the COVID-19 pandemic, the Department of Health (DOH) and WHO are promoting public mental health awareness, as those aged 15-29 are particularly vulnerable. A significant challenge is the cultural reluctance of Filipinos to discuss mental health issues due to fear of stigma (WHO-Western Pacific Philippines, 2020), despite the country's high ranking in optimism indices contrasting with a surge in mental health hotline calls (WHO, 2020). The 2019 WHO data for the Philippines (low-middle income group) reported 2325 suicide cases, predominantly male. Understanding the drivers of suicidal behavior in young people involves considering factors like lack of social integration (Durkheim, cited in Zhang, 2019) leading to feelings of isolation, and the Interpersonal Theory of Suicide (Joiner, 2005) which highlights thwarted belongingness and perceived burdensomeness alongside the acquired capability for suicide. Research indicates associations between adolescent suicidal behavior and female gender, substance use, running away, single-parent families, parental alcoholism, abuse (Zygo et al., 2018), exposure to self-harm in others, and mental illness (Mars et al., 2019). Key risk factors also include lower IQ, impulsivity, sensation-seeking, low conscientiousness, negative life events, body dissatisfaction, hopelessness, and substance use. Pacres et al. (2014) identified perceived burdensomeness, thwarted belongingness, and acquired capability as explicitly linked to suicide attempts in their study of Filipino youth. Universal suicide prevention programs can increase awareness, confidence in discussing suicide, and the likelihood of seeking help without causing distress (Bailey et al., 2017). Research trends highlight the need for more cross-national studies, a broader range of analytical units beyond self-report, and further investigation into effective psychotherapies and technology-based interventions (Cha et al., 2017). Public awareness campaigns, as seen in Japan, can be effective (Matsubayashi et al., 2014). Interventions like youth-nominated support teams (King et al., 2019) and family-focused treatments like SAFETY (Asarnow et al., 2017) have shown positive outcomes in reducing suicidal behavior and ideation among young people.

3. Implications

Schilling et al. (2016) investigated the Signs of Suicide (SOS) prevention program, which educates students on recognizing suicide warning signs and encourages them to seek help. The program includes an optional self-administered depression screening to enhance awareness of depression symptoms, advocating for a school-based preventive approach. Concurrently, Joshi & Billick

(2017) emphasized the importance of suicide screening upon entry and periodically during incarceration to identify individuals at heightened risk. The rise in mental health issues, particularly among children and youth during the COVID-19 pandemic, underscores the urgency of addressing this crisis, especially in rural and underserved communities that struggle to access necessary health information and services (David, n.d.). The discussion highlights contrasting approaches from the studies while referencing Durkheim's Social Integration Theory, which links social integration to suicide rates, as well as Joiner's Interpersonal Theory of Suicide, which posits that low belongingness and high burdensomeness, combined with the capability for suicide, contribute to suicidal desires. These theories provide a framework for understanding the complexities of suicide risk and prevention.

Table 1. Summary of included studies in suicide ideation and attempts

Focus	Authors	Location	Population / sample	Key findings
Suicide ideation	Liu & Lee (2013)	Various countries	1,181 to 16,000	Thought of killing themselves
Prevalence and associated factors of suicide ideation	Sta. Maria, et. al (2015)	Manila, Philippines	2,450 students at a private university	Students were dissatisfied with one's love relationship, low levels of closeness with parents and with peers were more likely to think of suicide
Incidence of non-suicidal self-injury	Cloutier, et. al (2010)		468 youths	Necessity of assessing suicidal ideation and NSSI in all youth presenting to mental health services
Suicidal thoughts and behaviors in youths	Cha, et. al (2017)			On epidemiology, prevalence of suicidal thoughts and behaviors among youth varies across countries and sociodemographic populations
Interpersonal theory of suicidal behavior	Van Orden, et. al (2010)			The theory's hypotheses are more precisely delineated with the aim of inviting scientific inquiry and potential falsification of the theory's hypotheses
Experiences and coping mechanism of adolescents who unsuccessfully committed suicide	Pacres, et. al (2014)	Philippines	6 participants	Love problem, family problems and financial problems
Identify factors which, according to young people, contributed to their suicide attempts	Zygo, et. al (2019)		5,685 individuals aged 13-19 years	Suicidal behavior in adolescents correlates with the female gender, intake of psychoactive substances, running away from home, being raised in a single-parent family, addiction of family members to alcohol, and experiences of violence
Suicidal methods and peripheral factors	Zalar, et. al (2018)	Slovenia	56712 persons attempting suicide and 21913 persons committing suicide	Hanging as the most used suicidal method, used by men with the purpose of causing suicidal death rather than a suicidal attempt
Evaluate the efficacy and acceptability of the safeTALK program for secondary school students	Bailey, et. al (2017)		129 students	Increase knowledge about suicide, confidence in talking about issues related to suicide, willingness to talk about suicide, likelihood of seeking help for suicidal thoughts
Determine if Youth-Nominated Support Team Intervention for Suicidal Adolescents-Version II is associated with reduced	King, et. al (2019)		13 to 17 years	No patients were withdrawn from YST owing to adverse effects

mortality 11 to 14 years
after psychiatric
hospitalization

4. CONCLUSION

The global suicide crisis claims over 720,000 lives annually, demands urgent and comprehensive intervention strategies, particularly among vulnerable populations such as youth. The disproportionate impact of suicide in low- and middle-income countries, coupled with the complex interplay of various risk factors, highlights the necessity for tailored prevention programs. Understanding key definitions related to suicidal behavior and acknowledging cultural attitudes towards mental health—especially in contexts like the Philippines—are critical for effective intervention. Research indicates that prevention efforts, including school-based programs and targeted awareness campaigns, can significantly enhance the identification of at-risk individuals and encourage help-seeking behaviors. Theoretical frameworks such as Durkheim's Social Integration Theory and Joiner's Interpersonal Theory of Suicide provide valuable insights into the underlying factors contributing to suicide, emphasizing the importance of social connections in mitigating risk. Despite the challenges posed by stigma and limited research in certain regions, the emergence of promising interventions—such as universal suicide prevention programs, youth-nominated support teams, and family-focused treatments—offers hope. It is vital to prioritize continued research and collaboration across disciplines and borders, fostering holistic approaches that ensure mental health resources are accessible to all, particularly in underserved communities. This concerted effort is essential not only to reduce the incidence of suicide but also to promote resilience and foster a supportive environment for those in need. Furthermore, relationships with family and social groups can help in the development of prevention programs especially to students who are diagnosed to be at-risk. To address the urgent issues in the academe, further research on the suicide case in the Philippines should be conducted in the future.

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