Importance of Emotion Regulation and Coping in Adolescents with Suicidal Ideation

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ABSTRACT

Adolescence is a period of transition from childhood that implies many developmental changes and associated problems. The statistics show that adolescents aged between 16 and 19 years old are at high risk of committing suicide. There is insignificant available research scrutinizing the relationship of proactive coping and emotion regulation in adolescents with suicidal ideation.

Aims: (1) to screen out adolescents with suicidal ideation, (2) to compare proactive coping in terms of proactive and avoidance coping between suicidal ideation and control group of adolescents and (3) to examine the level of emotion regulation among adolescents with suicidal ideation and control group.

Setting and Design: The sample of the study is comprised of 150 students between the age group of 17-19 years from Varanasi city, India. Method of purposive sampling was used.

Method and Material: Three scales viz. Suicide Behaviors Questionnaire — Revised (SBQ), Emotion Regulation Questionnaire (ERQ) and Proactive Coping Inventory (PCI) were administered. The cut off scores were decided statistically i.e. M+1SD for screening the adolescents with suicidal ideation. Likewise subjects who scored between M-1SD to M+1SD were designated as controls. Final screening stands with 12 subjects each in both the groups. Statistical analysis: Mean, standard deviation, and t-tests were applied to analyze the data.

Result and conclusion: The results obtained revealed significant difference between the two groups in the level of cognitive reappraisal and proactive coping, thus signifying the necessity of intervention for adolescents having suicidal ideation.

Key Words: Adolescents, cognitive reappraisal, expressive suppression, proactive coping and preventive coping.

INTRODUCTION

The problem that attracted attention worldwide is suicidal ideation and suicidal behavior. Psychological risk factors and predictors of suicidal thoughts and behavior attained attention to a greater extent and comparatively less researches in examining protective factors by focusing on positive aspects of mental health such as strength and resiliency. [1]

Studies have evidenced that there is a scientific consensus that the emotion regulation proficiency for managing emotions permits adolescents and children to restrain unsuitable impulses and to express their behavior beneficially. Such adolescents can also become accustomed to new environments and people as well as gain acceptance by their friend circles. [2, 3]

growth The of psychopathology in youngsters such as anxiety disorders, depression, suicidal ideation, suicide and violent behavior have been found to be associated with the trouble children and adolescents face in managing their negative emotions and controlling impulses. [4, 5] Regulation of emotion may be comprehended as a succession of internal and external, intentional and unintentional processes, accountable for appraising and adjusting responses in their physiological, cognitive and behavioral component processes, constantly with the aim of attaining special goals and to be socially accepted. ^[2, 6, 7] Many psychological troubles and ailments may be prevented and treated by acquiring coping skills and by managing emotions appropriately. ^[8, 9] Proactive coping partially mediates social support on positive emotion, which in sequence, is connected with better psychological performance. ^[10]

According to Schwarzer, R [11] proactive coping is a practice where an individual fix some goals for himself, struggle persistently to achieve them and by bringing in personal modification or enhancement to attain the set goals. Contrasting to other various types of coping, proactive coping deals with goal setting and future risk management and provides efforts to struggle actively to search for challenges so that they will be less negative.

There is insufficient available research scrutinizing the relationship of proactive coping and emotion regulation in adolescents with suicidal ideation. Former established the researches fact improved way of coping is associated with enhanced mental health and hence healthy life. Hence, it was hypothesized by the authors that proactive coping may reduce suicidal ideations when an individual is faced with a challenging situation. The major objectives of the current study are as follows:

Objectives: The first objective of the present study is to screen out adolescents with suicidal ideation. Further the study aims at comparing proactive coping in terms of proactive and avoidance coping between suicidal ideation and control group of adolescents and finally to examine the level of emotion regulation (EmR) among adolescents with suicidal ideation and control.

Hypotheses: It is hypothesized that adolescents with suicidal ideation would score low on proactive coping than the control group. Second assumption is that adolescents with suicidal ideation would score higher on avoidance coping than controls and adolescents with suicidal ideation would score higher on expressive

suppression as compared to cognitive reappraisal on the measure of emotional regulation as compared to their normal counterparts.

METHOD AND MATERIAL Sample

The sample of the study is comprised of one hundred and fifty students between the age group of 17-19 years from Varanasi city, India. One hundred and fifty students studying in class 12th of urban locale were selected through the method of purposive sampling. One hundred and seventy questionnaires were circulated, however one hundred and forty one were included as remaining questionnaires were not completed.

Psychometric Devices

The following psychometric devices were used:

- 1. Suicide Behaviors Ouestionnaire Revised (SBQ - R) developed by Osman et al. [12] has been used to measure suicidal behavior adolescents. This shortened version of the SBQ consists of four questions and uses a five point rating pattern to measure the frequency of suicide ideation, the communication of suicidal thoughts to others, and the attitudes to, and expectations of, actually attempting suicide. The SBQ has high test-retest reliability (r = .95) over a two-week period. The SBQ was negatively correlated with the Linehan Reasons for Living Inventory in female psychiatric outpatients (r = -.34; Cotton et al., 1995).
- 2. Emotion Regulation Questionnaire (ERQ) prepared by Gross and John, has been employed for assessing emotion regulation. The questionnaire consists of 10 items for evaluating persons' habitual use of reappraisal and suppression as two basic emotion regulation strategies on a 7-point scale. There are six items for assessing persons' use of reappraisal and four

items for the assessment of individuals' use of suppression. Alpha coefficients of the scales are .79 for Reappraisal and .73 for Suppression

3. Proactive Coping Inventory (PCI)
PCI was developed by Greenglass,
Schwarzer, and Taubert, [14] and has
been used to measure proactive coping.
It consists of 7 subscales (with 55
items). Each item is rated on a 4-point
Likert scale. Only 4 subscales namely,
proactive, preventive, and emotional and
avoidance coping were used for this
present study.

4. Sociodemographic proforma

A self-prepared semi-structured proforma by the researcher was especially designed for this study. Information about sociodemographic characteristics such as age, sex, course

group locale, and socioeconomic status was included.

Procedure

The participants were informed about the purpose of the research prior to the administration of the scales. They were made clear about the confidentiality of their responses. Instructions regarding demographic proforma, proactive coping inventory emotion regulation and questionnaire delivered were to the participants. Thereafter checking all the answer sheets, scoring was completed. Students scored 7 or more on SBQ-R were considered as suicidal ideation group and having scored less than 7 were designated as control group. The obtained data were tabulated and analyzed for both the groups.

RESULT

Table 1: Means, SDs and t-value for the scores of Emotion Regulation Questionnaire of adolescents with suicidal ideation and control group.

Dimensions of Emotion Regulation		Adolescents with suicidal ideation(N=12)	Control (N=12)	t-value
Cognitive Reappraisal	M	29.25	31.25	1.15
	SD	4.72	4.07	
Expressive Suppression	M	18.42	13.25	3.38
	SD	3.55	3.91	

*P< 0.01, NS= Not significant

Table 1 reflects means, SDs and t-values of the two strategies of emotion regulation namely cognitive reappraisal and expressive suppression of adolescents with suicidal ideation and controls. A significant difference has been obtained in the measure of expressive suppression between the two groups. No significant difference has been observed in the measure of cognitive reappraisal between adolescents with suicidal ideation group and control group.

Table 2: Means, SDs and t-values for the scores of Proactive Coping Inventory of adolescents with suicidal ideation and control groups.

Dimensions of Proactive coping		Adolescents with suicidal ideation(N=12)	Control	t-value
			(N=12)	
Proactive coping	M	37.50	42.08	
	SD	2.64	4.12	3.24*
Avoidance	M	9.50	7.08	
coping	SD	1.31	1.50	4.19*

*P< 0.01

Table 2 presents means, SDs and t-values of proactive coping and avoidance coping of adolescents with suicidal ideation and control groups. Table reveals that when adolescents with suicidal ideation and control groups were compared, significant

difference (p<0.01) has been reported for proactive coping and avoidance coping.

DISCUSSION

Present study drew on a sample of urbanized adolescents to scrutinize the difference of emotion regulation and

proactive coping between adolescents with suicidal ideation and controls. Table 1 illustrates the mean values of adolescents with suicidal ideation and the control group on suicidal behavior questionnaire. The mean values clearly show that the group of adolescents with suicidal ideation much higher scores on the screening tool as compared to the control group. Table 2 specifies that the two groups difference significantly in expressive suppression. No significant difference has been observed in cognitive reappraisal of the adolescents with suicidal ideation and controls. Adolescence is the developmental period during which an alteration in the emotional and coping resources is essential for supporting them in managing their situational stressors. Nevertheless majority of adolescents are able to cope with the emotional and circumstantial demands placed on them, a few show vulnerability towards increasing impulsive behaviors, such as suicide and self-harm. [16, 17] The two emotion regulation strategies namely cognitive reappraisal and expressive suppression were being analyzed result indicates and the significant difference in expressive suppression between the suicidal ideation and control group of adolescents. The hypothesis gets partial support from the conclusion that a higher level of expressive suppression is related with increased risk of suicidal behavior. [18-21] Supplementary reviews, [22] confirm the statement that control of the emotional reaction hinders the emotional regulatory experience and as a result social and psychological well being may be affected. Although the difference is not very prominent when cognitive reappraisal is compared between suicidal ideation group and control group, hence this positive resource can be capitalized through intervention.

Usually coping takes place as a response to stressful situation. But contemporary psychologists address proactive coping as an alternative for coping. [14] Proactive coping is related with the assessment of upcoming objectives and

path to accomplish finding a them Proactive coping effectively. significant predictor of life satisfaction, purposeful commitment and autonomy. [24] An individual's well-being would be affected by the type of proactive coping employed by him. [2] Proactive coping psychological influences a person's thoughts. [25] Proactive coping measures in the present study is showing highly significant mean difference between adolescents with suicidal ideation and controls on the dimensions of proactive coping and avoidance coping. Result clearly exhibited that the clinical group is deficient at general resource building for selfprogress to support future goal attainment and personal expansion.

In a study on college students, Cato, established an association between proactive coping, optimism, and suicide ideation. A significant negative correlation has been obtained between depression and proactive coping. Whereas optimism was found to be positively associated with proactive coping. The results concluded that with increase in proactive coping optimism will also increase which finally led to a decrease in suicidal ideation.

In another study Kirchner, T et al in 2011 [27] reported that suicidal ideation is found to be associated with avoidant coping style. In addition, adolescents with suicide attempts were more likely to generate maladaptive coping strategies as compared normal controls. Moreover such adolescents are emotional, have poor cognitive point of reference, and behavioral avoidance. [28] The findings of the present study also confirm similar pattern of result by indicating that suicidal ideation group use more avoidance coping by delaying action to deal with stressful situations as compared to control group of adolescents. Accordingly, individuals who employ avoidance coping are liable to quit or withdraw effort from striving for goal achievement. John & Gross, [29] considered avoidance coping to be a maladaptive form of coping, thus supporting the present

findings. The approach of seeking emotional support is believed to be associated with psychological happiness. Earlier Buyse, Verschueren, Verachtert and Van Damme, [30] show that students coping resources can be enhanced through providing emotional support. Findings of the study indicate the importance of associates and social set of connections who could support them dealing with negative life situations and stressors efficiently and in an affirmative manner.

Conclusion may be drawn from the results that coping skills and skills for regulating emotions can be modulated by incorporating life skill education, mindfulness training emotion regulation training.

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