

Suicidal Ideation in Adolescents: A Literature Review of Risk Factors and Prevention Efforts

Dhita Kurnia Sari*

Universitas STRADA Indonesia

*Corresponding author: deeniasari@strada.ac.id

ABSTRACT

Suicidal ideation in adolescents is a serious mental health problem that continues to increase in various countries. This article presents a literature review of the main risk factors that contribute to the emergence of suicidal ideation in adolescents, such as depression, academic pressure, domestic violence, social media use, and stigma towards mental health issues. In addition, this article discusses effective prevention strategies, including school-based interventions, family involvement, and mental health services. The research method used is a literature review by searching for scientific articles from databases such as PubMed, Scopus, and Google Scholar, with a publication range between 2013 and 2023. The reviewed articles were selected based on their relevance to the topic and methodological quality. This review shows the need for a multidisciplinary and collaborative approach to address this problem comprehensively.

Keywords: Adolescents, Mental Health, Prevention, Risk Factors, Suicidal Ideation

INTRODUCTION

Adolescents are a vulnerable age group to psychosocial pressures, especially due to biological, emotional, and social changes. One manifestation of psychological disturbances in adolescence is suicidal ideation, defined as thoughts of ending one's life without actual intent to carry it out (Joiner, 2005). According to the WHO (2023), suicide is the second leading cause of death among individuals aged 15–29 globally. This phenomenon underscores the importance of gaining a deeper understanding of the factors contributing to suicidal ideation in adolescents.

Adolescents experiencing suicidal ideation often struggle with expressing emotions or seeking help due to a lack of adaptive coping skills and the social stigma surrounding mental health issues. Moreover, external factors such as academic pressure, family conflicts, experiences of violence, and exposure to media content that includes suicide themes exacerbate their psychological conditions (Wasserman et al., 2012). In today's digital era, social media plays a dual role; on one hand, it can serve as a source of social support, but on the other hand, it can reinforce feelings of isolation or encourage unhealthy social comparisons (Twenge et al., 2018). Therefore, it is crucial to create a safe and supportive environment at home, school, and within the community so that adolescents feel they have a space to talk and seek help without fear of judgment.

In addition to these factors, neurological development during adolescence also influences vulnerability to suicidal ideation. The adolescent brain, particularly the prefrontal cortex responsible for decision-making, impulse control, and risk assessment, is still developing, making adolescents more impulsive in responding to emotional stress or social pressure (Casey, Jones, & Hare, 2008). This explains why adolescents often find it difficult to manage negative emotions rationally. Furthermore, feelings of alienation or being unaccepted by their social environment can amplify feelings of hopelessness and helplessness, which are strong indicators of suicidal ideation (Van Orden et al., 2010). Understanding the complexity

of biological, psychological, and social factors affecting adolescents highlights the importance of a holistic prevention approach.

Beyond biological and social factors, cultural norms and values within a society also play a significant role in shaping how adolescents view psychological problems and seek help. In cultures that emphasize family honor, academic achievement, or social conformity, adolescents experiencing mental pressure often fear disappointing their parents or being perceived as weak by those around them (Ng & Chan, 2021). This fear can cause them to hide their struggles and avoid seeking professional help. On the other hand, cultural norms that are not open to discussions about mental health further exacerbate stigma and hinder early detection of psychological symptoms. Therefore, it is essential for suicide prevention programs to be tailored to the local cultural context so that interventions are more effective and accepted by the broader community (Chu et al., 2010). As discussed above, it is important to conduct a literature review on suicidal ideation among adolescents.

Furthermore, gender identity and sexual orientation often serve as additional risk factors that are reinforced by cultural and social norms. Adolescents from sexual minority groups, such as LGBTQ+, frequently face discrimination, rejection from their families, bullying, and significant social alienation, all of which correlate strongly with an increased risk of suicidal ideation (Russell & Fish, 2016). In highly conservative societies or those with strong traditional values, LGBTQ+ adolescents may feel they have no safe space to express themselves or seek support. The absence of support systems increases their likelihood of experiencing mental health issues like depression and anxiety, which can ultimately trigger suicidal ideation. Therefore, it is crucial to adopt inclusive and sensitive intervention approaches that ensure no group of adolescents is overlooked in prevention efforts. Hence, it is important to conduct a literature review related to suicidal ideation among adolescents.

METHODS

This literature review was conducted by exploring scientific databases such as PubMed, Scopus, and Google Scholar. The articles used were in English and Indonesian, published between 2013 and 2023, with keywords: suicidal ideation, adolescents, mental health, and suicide prevention. A total of 25 articles were reviewed qualitatively.

RESULTS

1. Risk Factors of Suicidal Ideation in Adolescents

a. Psychological Disorders

Depression is the most frequently cited psychological factor associated with suicidal ideation (Siu, 2016). Adolescents suffering from depression exhibit symptoms such as hopelessness, low self-esteem, and feelings of despair. Beyond these core symptoms, depressed adolescents also tend to experience emotional regulation difficulties, sleep disturbances, and challenges in maintaining healthy social relationships. These issues are often not detected early, as adolescent symptoms may manifest as irritability, aggressive behavior, or social withdrawal—frequently misinterpreted as a normal “developmental phase” (Thapar et al., 2012). A lack of awareness among parents and educators regarding the early signs of depression presents a major obstacle in prevention efforts. Several studies also show that the duration and severity of depression are directly correlated with the intensity of suicidal ideation, and that early treatment using cognitive behavioral therapy (CBT) and pharmacological interventions can significantly reduce this risk (Lewinsohn et al., 2003). Therefore, early detection and treatment of depression are crucial in preventing suicidal thoughts and behaviors in adolescents.

b. Academic and Social Pressure

Pressure from school and family regarding academic achievement can trigger chronic stress, which contributes to the emergence of suicidal thoughts (Tang et al., 2019). Prolonged academic stress can lead to mental exhaustion (academic burnout), excessive

anxiety, and diminished self-confidence, especially in adolescents who feel unable to meet the high expectations set by parents or teachers (Pascoe et al., 2020). When academic failure is perceived as a threat to self-worth or future prospects, adolescents may internalize this pressure, potentially leading to feelings of worthlessness and hopelessness. Additionally, a highly competitive education system, lack of emotional support in schools, and insufficient time for rest and socialization further deteriorate students' mental health. In some cases, this pressure stems not only from external sources but also from adolescents' own perfectionistic standards (Flett & Hewitt, 2014). Hence, educational institutions should not only focus on academic achievement but also pay attention to students' psychological well-being.

c. Violence and Neglect in the Family

Adolescents who experience physical, emotional, or sexual abuse within their family are at significantly higher risk for suicidal ideation (Afifi et al., 2016). Family violence—whether physical, emotional, or sexual—not only directly impacts adolescents' psychological state but also undermines their sense of safety and trust in their immediate social environment. Exposure to violence at an early age has been shown to impair emotional development, hinder the formation of healthy self-esteem, and increase the likelihood of mental disorders such as depression, anxiety, and post-traumatic stress disorder (PTSD) (Norman et al., 2012). In the long term, trauma resulting from violence may foster negative thought patterns about oneself and the world, and increase feelings of isolation and hopelessness—two core elements linked to suicidal ideation according to the interpersonal theory of suicide (Joiner, 2005). Therefore, interventions targeting the family environment as a source of support—rather than stress—are essential in suicide prevention among adolescents who experience abuse.

d. Social Media and Cyberbullying

Excessive use of social media and exposure to cyberbullying have been shown to exacerbate adolescents' mental health issues (Twenge et al., 2018). Adolescents who spend excessive time on social media are at increased risk of sleep disturbances, social anxiety, and dissatisfaction with themselves due to unrealistic social comparisons (Huang, 2017). Exposure to content that promotes or normalizes suicide, such as posts explicitly depicting self-harm, can also have a contagion effect—especially among adolescents going through emotional crises (Niederkrötenhaler et al., 2012). Moreover, cyberbullying on social media is often anonymous and persistent, making its psychological impact potentially more severe than traditional bullying. Studies show that victims of cyberbullying are twice as likely to experience suicidal ideation compared to adolescents who are not bullied (Kowalski et al., 2014). Therefore, it is crucial for parents, educators, and policymakers to enhance digital literacy, establish effective reporting systems, and create safe online spaces for adolescents.

e. Stigma and Lack of Social Support

Stigma surrounding mental health issues prevents adolescents from seeking professional help, thereby increasing the risk of suicide (Rickwood et al., 2007). Stigma—whether public or internalized—causes many adolescents to feel ashamed, fear social exclusion, or perceive themselves as weak if they disclose their psychological problems (Corrigan & Watson, 2002). This becomes a major barrier to help-seeking, particularly in cultural contexts where mental health is considered taboo or a family disgrace. Studies show that adolescents with high levels of self-stigma are less likely to seek counseling or psychotherapy, even when experiencing severe symptoms (Gulliver et al., 2010). Moreover, the lack of community education and the shortage of youth-friendly mental health professionals exacerbate this issue. Thus, large-scale mental health literacy

campaigns—especially in schools and communities—are essential to reduce stigma and improve access to psychological services for adolescents.

2. Prevention Strategies

a. School-Based Interventions

Mental health education programs in schools have been shown to reduce levels of depression and improve students' mental health literacy (Wasserman et al., 2015). These programs play a critical role in creating an environment that supports adolescent psychological well-being. Through such initiatives, students gain awareness of mental disorder symptoms, stress management techniques, and information about accessible support resources (Jorm et al., 2010). Research indicates that structured education programs involving the entire school community—including teachers and staff—can enhance students' coping skills and reduce mental health stigma (Wasserman et al., 2015). Furthermore, engaging adolescents in activities that promote psychological well-being, such as mentoring programs or peer-support initiatives, can strengthen their social networks and reduce feelings of isolation. Therefore, implementing ongoing programs in schools can contribute to the early prevention of mental health disorders and suicidal ideation among adolescents.

b. The Role of Family and Community

Positive family support and emotional involvement from parents serve as protective factors against suicidal ideation (Borowsky et al., 2013). Such support is crucial for fostering a sense of security and emotional stability in adolescents. Parents who are open to listening to their children's problems and provide non-judgmental support can help adolescents cope with stress and negative emotions stemming from academic, social, or personal pressures (Liu et al., 2013). Studies show that adolescents who feel accepted and valued by their families tend to exhibit lower levels of anxiety and depression, and are at a reduced risk of suicide (Borowsky et al., 2013). Additionally, parental involvement in daily activities—such as discussing feelings or participating in social events—can strengthen family bonds and provide adolescents with a greater sense of control over their lives. Therefore, suicide prevention programs that include education and training for parents to recognize signs of mental health issues and offer effective emotional support are essential in reducing suicide risk in adolescents.

c. Access to Mental Health Services

Improving access to counseling and psychotherapy—especially in youth-focused service centers—is essential for early detection and intervention (World Health Organization, 2023). Accessible and adolescent-friendly counseling and psychotherapy services are crucial in identifying and addressing mental health issues, including suicidal ideation, at an early stage. These services can assist adolescents in recognizing and managing their emotions and provide the support they need to cope with emotional and social stressors. According to the World Health Organization (WHO, 2023), providing easily accessible mental health services in schools, community health centers, or online platforms can accelerate detection and enable faster intervention for adolescents in need. Moreover, counseling programs involving cognitive behavioral therapy (CBT) or family-based therapy have proven effective in reducing symptoms of depression and anxiety, which often precede suicidal ideation in adolescents (Weisz et al., 2017). Enhancing the affordability and quality of psychological services for adolescents is a key step in suicide prevention.

CONCLUSION

Suicidal ideation among adolescents is a complex issue influenced by a range of individual and environmental factors. Effective prevention requires a cross-sectoral approach

involving families, schools, and healthcare services. Early and comprehensive intervention is key to reducing the incidence of both suicidal thoughts and actual suicide among adolescents.

REFERENCE

- Afifi, T.O., et al. (2016). Childhood maltreatment and suicidal ideation. *Journal of Adolescent Health*, 58(2), 166–173.
- Borowsky, I.W., et al. (2013). Parental involvement and adolescent suicide risk. *Journal of Youth and Adolescence*, 42, 856–868.
- Casey, B. J., Jones, R. M., & Hare, T. A. (2008). The adolescent brain. *Annals of the New York Academy of Sciences*, 1124(1), 111–126. <https://doi.org/10.1196/annals.1440.010>
- Chu, J. P., Goldblum, P., Floyd, R., & Bongar, B. (2010). The cultural theory and model of suicide. *Applied and Preventive Psychology*, 14(1), 25–40. <https://doi.org/10.1016/j.appsy.2011.11.001>
- Corrigan, P. W., & Watson, A. C. (2002). Understanding the impact of stigma on people with mental illness. *World Psychiatry*, 1(1), 16–20. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1489832/>
- Flett, G. L., & Hewitt, P. L. (2014). Suicidal ideation and perfectionism: The role of self-worth contingencies. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, 32(4), 231–245. <https://doi.org/10.1007/s10942-014-0195-0>
- Gulliver, A., Griffiths, K. M., & Christensen, H. (2010). Perceived barriers and facilitators to mental health help-seeking in young people: A systematic review. *BMC Psychiatry*, 10(1), 113. <https://doi.org/10.1186/1471-244X-10-113>
- Huang, C. (2017). Time spent on social network sites and psychological well-being: A meta-analysis. *Cyberpsychology, Behavior, and Social Networking*, 20(6), 346–354. <https://doi.org/10.1089/cyber.2016.0758>
- Joiner, T. (2005). *Why People Die by Suicide*. Harvard University Press.
- Joiner, T. E. (2005). *Why People Die by Suicide*. Harvard University Press.
- Kowalski, R. M., Giumetti, G. W., Schroeder, A. N., & Lattanner, M. R. (2014). Bullying in the digital age: A critical review and meta-analysis of cyberbullying research among youth. *Psychological Bulletin*, 140(4), 1073–1137. <https://doi.org/10.1037/a0035618>
- Lewinsohn, P. M., Rohde, P., Seeley, J. R., & Baldwin, C. L. (2003). Gender differences in suicide attempts from adolescence to young adulthood. *Journal of the American Academy of Child & Adolescent Psychiatry*, 40(4), 427–434. <https://doi.org/10.1097/00004583-200304000-00011>
- Ng, C. H., & Chan, L. F. (2021). Cultural considerations in suicide prevention in Asia. *Asia-Pacific Psychiatry*, 13(4), e12445. <https://doi.org/10.1111/appy.12445>
- Niederkrotenthaler, T., Voracek, M., Herberth, A., Till, B., Strauss, M., Etzersdorfer, E., ... & Sonneck, G. (2012). Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *The British Journal of Psychiatry*, 197(3), 234–243. <https://doi.org/10.1192/bjp.bp.110.077819>
- Norman, R. E., Byambaa, M., De, R., Butchart, A., Scott, J., & Vos, T. (2012). The long-term health consequences of child physical abuse, emotional abuse, and neglect: A systematic review and meta-analysis. *PLoS Medicine*, 9(11), e1001349. <https://doi.org/10.1371/journal.pmed.1001349>
- Pascoe, M. C., Hetrick, S. E., & Parker, A. G. (2020). The impact of stress on students in secondary school and higher education. *International Journal of Adolescence and Youth*, 25(1), 104–112. <https://doi.org/10.1080/02673843.2019.1596823>
- Rickwood, D., et al. (2007). When and how do young people seek professional help for mental health problems? *Medical Journal of Australia*, 187(S7), S35–S39.

- Dhita Kurnia Sari et.al (Suicidal Ideation in Adolescents: A Literature Review of Risk Factors and Prevention Efforts)
- Russell, S. T., & Fish, J. N. (2016). Mental Health in Lesbian, Gay, Bisexual, and Transgender (LGBT) Youth. *Annual Review of Clinical Psychology*, 12, 465–487. <https://doi.org/10.1146/annurev-clinpsy-021815->
- Siu, A.L. (2016). Screening for depression in children and adolescents: US Preventive Services Task Force recommendation statement. *JAMA*, 315(4), 380–387.
- Tang, T.C., et al. (2019). Stress and suicidal ideation among adolescents: a structural equation modeling approach. *Suicide and Life-Threatening Behavior*, 49(3), 876–885.
- Thapar, A., Collishaw, S., Pine, D. S., & Thapar, A. K. (2012). Depression in adolescence. *The Lancet*, 379(9820), 1056–1067. [https://doi.org/10.1016/S0140-6736\(11\)60871-4](https://doi.org/10.1016/S0140-6736(11)60871-4)
- Twenge, J.M., et al. (2018). Increases in depressive symptoms, suicide-related outcomes, and suicide rates among U.S. adolescents after 2010. *Clinical Psychological Science*, 6(1), 3–17.
- Van Orden, K. A., Witte, T. K., Cukrowicz, K. C., Braithwaite, S. R., Selby, E. A., & Joiner, T. E. (2010). The interpersonal theory of suicide. *Psychological Review*, 117(2), 575–600. <https://doi.org/10.1037/a0018697>
- Wasserman, D., et al. (2015). School-based suicide prevention programmes. *European Child & Adolescent Psychiatry*, 24(5), 467–475.
- World Health Organization. (2023). *Suicide worldwide in 2023: Global health estimates*. Geneva: WHO Press. after 2010. *Clinical Psychological Science*, 6(1), 3–17.