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One in Ten Ontario Students Contemplates Suicide

Among adolescents in Canada and the U.S., suicide is the third leading cause of death, following motor vehicle fatalities and other accidents.^{1,2} Suicidal thinking is a key indicator of mental distress, and obviously, an important antecedent to suicide attempts. For this reason, it is imperative to monitor and understand suicide ideation among youth, and to further understand potential risk factors.

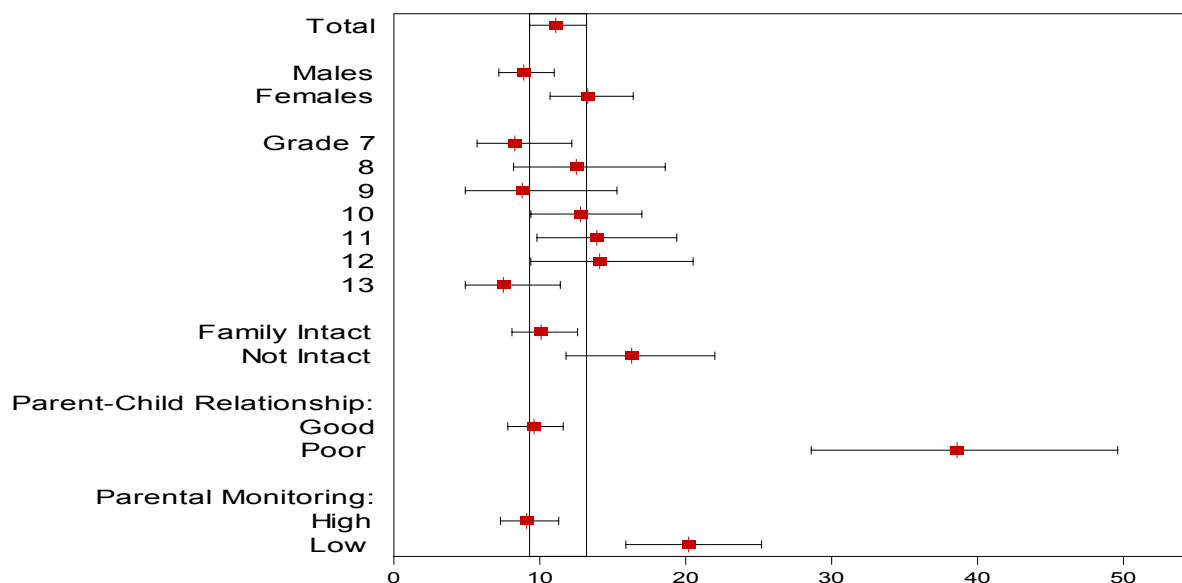
This eBulletin provides population estimates of suicide ideation among youth. The data used come from the 2001 *Ontario Student Drug Use Survey (OSDUS)*, which surveyed students in grades 7 to 13 (OAC) across the province. The associations presented here have been adjusted for all other variables discussed (see *Terminology*).

Demographic and Family-Related Factors

In 2001, 11.1% of students (confidence interval: 9.3%-13.2%) reported that they had seriously considered suicide during the past year. This percentage represents about 101,700 Ontario students. As seen in Figure 1, females are significantly more likely to contemplate suicide than males (13.3% vs. 8.9%, respectively). There is no significant association with grade, or with region of the province (not shown).

Students living in a family with two parents are less likely to report suicide ideation compared to students living with one parent (10.1% vs 16.3%, respectively.) Also, those reporting a good relationship with parents are much less likely to have thoughts of suicide,

Figure 1. Percentage Reporting Suicide Ideation During the Past 12 Months, by Demographic and Family-Related Factors, OSDUS 2001 (N=2179)



Note: Horizontal bars represent 95% confidence intervals; the vertical bar shows the confidence interval for the total sample estimate.

compared to students who have a poor relationship with parents (9.6% vs 38.6%). Similarly, parental monitoring is an important family factor, as students with parents who consistently monitor their whereabouts are less likely to have thoughts of suicide than students whose parents rarely do so (9.1% vs 20.2%, respectively).

School-Related Factors

A feeling of attachment or connectedness to one’s school is significantly associated with suicide ideation, as those with low attachment are much more likely to have such thoughts (see Figure 2). Students who do not report feeling safe at school are much more likely to report suicide ideation (21.9%) compared to students who feel safe (6.6%). Not surprisingly, the results for school safety and bullying experience are similar. Indeed, we found that students who report being a victim of bullying – whether or not they also bully others – are more likely to have serious suicidal thoughts (17.3% of victims only; 19.1% of victims who also bully others) compared to students who are bullies only (11.6%) or who are neither victims nor bullies (8.0%).

Ontario versus American Findings

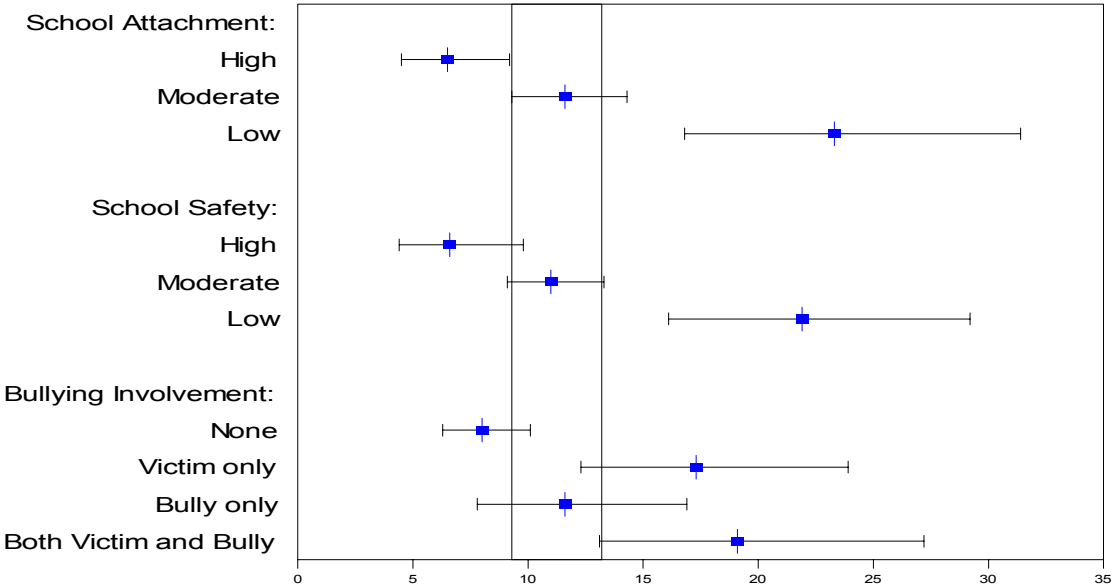
A comparison of suicide ideation between the 2001 *OSDUS* and an American student survey (*Youth Risk Behavior Survey*)³ suggests that reports are lower in Ontario, especially among the younger students. As seen in Table 1, fewer Ontario 9th-graders report suicide ideation compared to U.S. 9th-graders (8.8% vs 20.8%, respectively). However, the cross-national differences weaken with increasing age. For instance, 14.1% of 12th-graders in Ontario report suicide ideation – a finding not significantly different from the 16.4% of American 12th-graders.

Table 1. The Percentage (95% CI) of Students in Ontario and the United States Reporting Suicide Ideation by Grade, 2001.

	2001 Ontario	2001 U.S.
Grade 9	8.8 (4.9-15.3)	20.8 (18.3-23.3)
Grade 10	12.8 (9.4-17.0)	19.0 (16.8-21.2)
Grade 11	13.9 (9.8-19.4)	18.9 (16.8-21.0)
Grade 12	14.1 (9.4-20.5)	16.4 (14.2-18.6)

Note: Ontario data are from the 2001 *OSDUS*; U.S. data are from the 2001 *Youth Risk Behavior Survey*.

Figure 2. Percentage Reporting Suicide Ideation During the Past 12 Months, by School-Related Factors, *OSDUS* 2001 (N=2179)



Note: Horizontal bars represent 95% confidence intervals; the vertical bar shows the confidence interval for the total sample estimate.

The rate of suicide attempts peaks during adolescence. While there is no single cause of suicide among youth, there is ample evidence indicating that most victims had a mental health problem, such as depression or anxiety.⁴ Other “external” risk factors include childhood abuse, family discord, and stressful life events, to name a few. Research on risk and protective factors is useful for suicide prevention programmers and mental health professionals in general.

References:

1. Canadian Institute of Child Health. (2000). *The Health of Canada's Children: A CICH Profile, 3rd Edition*. Ottawa: Canadian Institute of Child Health.
2. Wagman Borowsky, I., Ireland, M., & Resnick, M. D. (2001). Adolescent suicide attempts: risks and protective factors. *Pediatrics*, 107(3), 485-493.
3. Centers for Disease Control and Prevention. (2002). Surveillance Summaries: Youth Risk Behavior Surveillance -- United States, 2001. *MMWR*, 51(No. SS-4), 1-66.
4. U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health.

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Methods:

The *Ontario Student Drug Use Survey (OSDUS)* is an ongoing Ontario-wide survey of elementary (grades 7 and 8) and high school (grades 9-OAC) students conducted every two years since 1977. The 2001 survey, which used a stratified (region) two-stage cluster design (school, class) included 4,211 students in grades 7 to OAC from 41 school boards, 106 schools, and 272 classes. Self-administered questionnaires, which promote anonymity, were administered by staff from the Institute for Social Research, York University on a classroom basis between February and June 2001. **Data presented here are based on a random half sample of 2179 students who were asked the suicide ideation question.** All survey estimates were weighted, and variance and statistical tests were corrected for the sampling design.

Terminology:

- **Suicide Ideation** was measured with the question “During the last 12 months, did you ever seriously consider attempting suicide?” Students responded either “yes” or “no.”
- **Family Structure** was measured with the question “With whom are you currently living?” and is characterized by “intactness.” An intact family consists of two parents, natural or step-parent. A non-intact family is headed by a single parent.
- **Parent-Child Relationship** was measured with “How well would you say you are getting along with your parents?” Students reporting getting along very well or “OK” with parents were classified as having a “good” relationship. Those who reported not getting along with parents were classified as having a “poor” relationship.
- **Parental Monitoring** was measured with “In your free time away from home, how often does your mother or father know where you are?” Those reporting that parents “always” or “usually” know where they are were compared with those reporting “sometimes,” “seldom,” or “never.”
- **School Attachment** was based on a summation of the level of agreement to the two statements: (1) “I feel close to people at this school” and (2) “I feel like I am part of this school.” Summed scores were classified as high, moderate, or low attachment.
- **Perceived School Safety** was measured with two questions: (1) “At school, how worried are you that someone will harm you, threaten you, or take something from you?” and (2) “I feel safe in my school” (reported agreement). Responses were summed and classified as high, moderate, or low perception of safety.
- **Bullying Involvement:** Students were asked about bullying others at school since September, as well as having been bullied by others. Based on responses to these 2 questions, students were classified as being: a victim only, a bully only, both a victim and a bully, or having no involvement in bullying.
- **95% Confidence Interval** can be crudely interpreted as being 95% likely to include the “true” percentage value if every student in Ontario was surveyed.
- **Significant Difference** refers to a difference between two percentages that is not likely due to chance. For example, a difference found at the $p < .05$ level of statistical significance is one that is less than 5% likely to occur by chance alone.
- **Statistical Analysis:** The associations presented here are adjusted according to a logistic regression predicting suicide ideation, with the following 8 variables used as predictors: sex, grade, family structure, parent-child relationship, parental monitoring, school attachment, perceived school safety, and bullying involvement.

Source:

Adlaf, E.M., Paglia, A., & Beitchman, J.H. (2002). *The Mental Health and Well-Being of Ontario Students: Findings from the OSDUS, 1991-2001*. CAMH Research Document Series No. 11. Toronto: Centre for Addiction and Mental Health.