

## PREVALENCE OF SUICIDAL IDEATION AMONG COFFEE SHOPS' GOERS

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### ABSTRACT

**Background:** Suicidal ideations, often called suicidal thoughts or ideas, is a broad term used to describe a range of contemplations, wishes, and preoccupations with death and suicide. Suicide and suicidality in Iraq are on the increase even though it is believed to be underreported. Many socio-demographic, psychological and environmental factors predispose to ideation, attempts, and completed suicides despite the religious and social taboos. **Study objective:** to highlight the prevalence of suicidal ideation among coffee shops' goers. **Methods:** A cross-sectional study was carried out for four months, from June to September in 2023. It was conducted at 10 coffee shops which were selected randomly and were distributed in different areas of Baghdad-Iraq. All individuals who were present at the study area during the period of data collection were included in the study. An interview was done with participants in the coffee shops. Collecting data was done by using a structured questionnaire. A questionnaire of 2 parts; Sociodemographic features and suicidal ideation features. Suicidal ideation was determined by using a subscale of Colombia Suicide Severity Rating Scale-screening version (C-SSRS). Chi square and fisher's exact tests were used alternatively. **Results:** The total study sample was 157 participants. Their age ranged from 16 to 59 years old. The largest proportion of them were males (68.8%). Suicidal ideation was prevalent among 40.1% of the study sample and it was significantly affected by some of the sociodemographic characteristics (sex, marital status and employment), health status and social connectedness of the participants. **Conclusions:** prevalence of suicidal ideation was high among coffee shops' goers.

### INTRODUCTION

Over several years, many Iraqi families have suffered with mental health scars caused by past conflicts and economic hostilities, as if this is not enough; many communities have also faced new stay-at-home restrictions or limited movements to curb the spread of COVID-19. This raises concerns as it may increase suicide rates or associated risk factors, including social isolation, anxiety, fear of contagion, uncertainty, unemployment, chronic stress, and economic difficulties, which could worsen depression, anxiety, and substance abuse. Other factors include barriers to access mental health services, depression, and insomnia among populations and some health care professionals.<sup>[1]</sup>

According to The American Psychological Association, Suicidality is "the risk of suicide, usually indicated by suicidal ideation or intent, especially as evident in the presence of a well-elaborated suicidal plan". It includes suicidal thoughts, plans, gestures, or attempts.<sup>[2]</sup>

Suicidal ideations (SI), often called suicidal thoughts or ideas, is a broad term used to describe a range of contemplations, wishes, and preoccupations with death and suicide. There is no universally accepted consistent definition of SI,<sup>[3]</sup> It involves pyramid of feelings from the thinking that "Life is not worth living" to more extreme thoughts and anticipated suicide planning, which is a critical issue because most victims of attempted suicides (Para suicides) and completed suicides have acted upon pre-existing ideation.<sup>[4]</sup>

Suicide risk factors can be classified into short-term (such as panic attack, agitated depression and insomnia) and long-term risk factors (such as suicidal ideation, severe hopelessness and prior attempts). Long-term risk factors create lifetime susceptibility to suicide risk. On the other hand, protective factors are those decreasing the risk of suicide, such as close, supportive family relationship.<sup>[5]</sup>

Suicidal ideation and planning are significant risk factors for suicide.<sup>[5]</sup> A study showed that about one third of suicide ideators would make a suicide plan, and about two thirds of those planner would attempt a suicide while one fourth of the non-planner would do so, and that most of the attempts occur within the first year of ideation.<sup>[6]</sup> In 2021, an estimated 12.3 million American adults seriously thought about suicide, 3.5 million planned a suicide attempt, and 1.7 million attempted suicide.<sup>[5]</sup>

Suicide rates increased approximately 36% between 2000–2021.<sup>[7]</sup> It ranks as the 2<sup>nd</sup> leading cause of death among 15-34-year-olds.<sup>[2]</sup> In USA, about 48,183 deaths in 2021 were due to suicide, giving an average of about one death every 11 minutes, and suicide ideators number is even higher.<sup>[7]</sup> Globally, 800 000 people die yearly due to suicide, giving an average of about one death every 40 seconds, and for every case, more than 20 others most likely attempt suicide.<sup>[1]</sup>

The estimated suicide rate in Iraq is 1.7/100000 population (mostly among youth), which is still lower than in western countries<sup>[8]</sup>, but it is a growing rate according to WHO reports, as over 590 people died in 2019 in Iraq due to suicide, and 1112 attempted suicide which is higher than those reported in 2018 (519) and 2017 (422).<sup>[1]</sup>

**Study objective** to highlight the prevalence of suicidal ideation among coffee shops' goers.

## MATERIALS AND METHODS

A cross-sectional study was carried out for four months, from June to September in 2023. It was conducted at 10

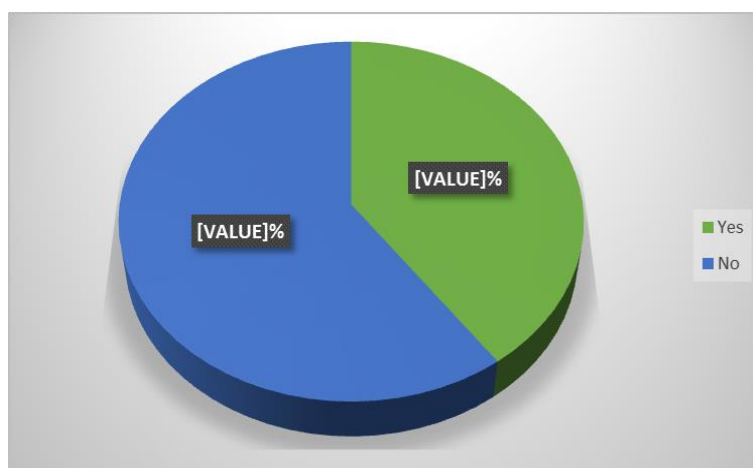
coffee shops which were selected randomly and were distributed in different areas of Baghdad-Iraq. All individuals who were present at the study area during the period of data collection were included in the study after taking their verbal consent. An interview was done with the participants in the coffee shops (privacy was considered). Collecting data was done, using a structured questionnaire consisted of 2 parts; Sociodemographic features (age, sex, marital status, educational level and occupation) and other characteristics such as smoking habits. The second part contained Columbia Suicide Severity Rating Scale-screening version(C-SSRS) to elucidate the presence of suicidal ideation among the participants. Chi square and fisher's exact tests were used alternatively to examine the impact of independent variables (such as age, sex and marital status) on the dependent variable (suicidal ideation).  $P < 0.05$  was considered significant.

The Columbia–Suicide Severity Rating Scale (C-SSRS) is an assessment tool that evaluates suicidal ideation and behavior. The FDA has adopted the 11 categories defined in the C-SSRS (five subtypes of suicidal ideation, five subtypes of suicidal behavior, and self-injurious behavior without suicidal intent) as their standard. Suicidal ideation: A “yes” answer at to any one of the five suicidal ideation questions (Categories 1-5) on the C-SSRS.<sup>[9]</sup>

## RESULTS

The total study sample was 157 participants. The largest proportion of them were males (68.8% of the entire sample). Although participants' age ranged from 16 to 59 years old with a mean ( $\pm$ SD) of 25.78 ( $\pm$ 6.9) years, those whom their age ranged from 18 to 24 years constituted the major age group with a frequency of 94 participants (59.9%) as it is shown in table (1) which also illustrates frequency distribution of other participants' characteristics.

Suicidal ideation was prevalent among 40.1% of the study sample, as it is shown in figure (1) below.



**Figure 1: Prevalence of suicidal ideation among coffee shops' goers(n=157).**

Suicidal ideation was significantly affected by sex ( $p=0.001$ ), occupation ( $p=0.04$ ), marital status ( $p=0.02$ ), history of medical health problem ( $p=0.005$ ), companionship in the coffee shop, i.e. being in coffee shop alone or with friends ( $p=0.007$ ) and difficulty in initiation of a new relation with other people ( $p=0.001$ ), as it is illustrated in table (1). Thus suicidal ideation was more prevalent among females than males. It was more

among students and unemployed than the employed participants. It was higher among divorced and those who were unmarried than married people. Also it was more prevalent among participants who complain of other health problems, those who face difficulty in initiation of a new relation with other individuals and those who used to be alone in the coffee shop.

**Table 1: Effect of participants' characteristics on suicidal ideation(n=157).**

Characteristics		Total		Suicide ideations		No suicide ideations		P value
		N	%	N	%	N	%	
Sex	Male	108	68.8	34	31.5	74	68.5	0.001
	Female	49	31.2	29	59.2	20	40.8	
Age groups in years	< 18	2	1.3	1	50	1	50	0.4
	18 to 24	94	59.9	44	46.8	50	53.2	
	25 to 29	30	19.1	9	30	21	70	
	30 to 34	17	10.8	6	35.3	11	64.7	
	35 to 39	8	5.1	2	25	6	75	
	≥40	6	3.8	1	16.7	5	83.3	
Educational level	≤ secondary school	77	49.0	31	40.3	46	59.7	0.9
	≥ bachelor degree	80	51.0	32	40	48	60	
Occupation	Student	56	35.7	29	51.8	27	48.2	0.04
	Employed	50	31.8	14	28	36	72	
	Unemployed	51	32.5	20	39.2	31	60.8	
Marital status	Single	117	74.5	53	45.3	64	54.7	0.01
	Married	37	23.6	8	21.6	29	78.4	
	Divorced	3	1.9	2	66.7	1	33.3	
Smoking	Smoker	76	48.4	28	36.8	48	63.2	0.4
	Non smoker	81	51.6	35	43.2	46	56.8	
Age at first coffee shop entrance	< 18 year	47	29.9	12	25.5	35	74.5	0.08
	18 to 24 year	99	63.1	46	46.5	53	53.5	
	25 to 29 year	7	4.5	3	42.9	4	57.1	
	30 to 34 year	4	2.5	2	50	2	50	
History of health problem	Yes	43	27.4	25	58.1	18	41.9	0.005
	No	114	72.6	38	33.3	76	66.7	
Being in coffee shop	With friends	138	87.9	50	36.2	88	63.8	0.007
	Alone	19	12.1	13	68.4	6	31.6	
Difficulty in new relations	Yes	43	27.4	26	60.5	17	39.5	0.001
	No	114	72.6	37	32.5	77	67.5	

## DISCUSSION

Suicidality is often difficult to discuss, in fact, talking about suicidality and bringing it out of the shadow helps to destigmatize it and makes it more approachable. Furthermore, there is no evidence that talking to someone about it will make them more suicidal, and the person dealing with such thoughts will likely feel less lonely.<sup>[2]</sup> The current study revealed that 40.1% of coffee shops' goers are suicidal ideators. It is lower than that of two other studies conducted in Baghdad (64.9%)<sup>[10]</sup> and Babylon(49.5%)<sup>[4]</sup>, this difference could be attributed to the different study populations. Also it is lower than that of Ethiopia which ranged from 1% to 55%.<sup>[11]</sup> However, suicidal ideation prevalence is vague in Iraq, especially among the youth<sup>[10]</sup>, and in spite of the lower rate of suicide in comparison to western countries,

underreporting could be the reason why the actual numbers are not known as many who attempt suicide do not report it. Suicide and suicidality in Iraq are on the increase even though it is believed to be underreported. Many socio-demographic, psychological and environmental factors predispose to ideation, attempts, and completed suicides despite the religious and social taboos.<sup>[8]</sup> Current theories suggest that suicidal thoughts and behaviors occur in response to complex interactions between psychological, biological,<sup>[10]</sup> environmental, and cultural factors.<sup>[3]</sup>

This study revealed that suicidal ideation was more among females than males, and this figure is in conformity with other studies.<sup>[12][13]</sup> Literature documented that young females are more represented in

suicide attempts and ideation as a consequence of higher rates of depression, community and domestic violence.<sup>[8]</sup>

Among the sociodemographic characteristics, marital status and occupation were significantly affecting factors on suicide ideation. Divorced and unmarried people showed higher percent of suicidal ideation than married people. Students and unemployed people were more suicidal ideators than employed ones. This study finding is in accordance with several studies.<sup>[14][15]</sup>

More than 3000 hypotheses/factors have been proposed and tested as possible risk factors for suicidal ideations and behaviors over the past 50 years and out of hundreds of studies, 80% of them focused on five broad categories of risk factors for SI and suicidal behaviors, one of these categories was demographic factors (e.g., age; education; employment; ethnicity; gender; marital status; religion; socioeconomic status). In developing countries, most suicides are completed by people living in poverty, most often young single women who lack education and struggle to support themselves.<sup>[3]</sup>

Suicidal ideation was higher among participants who attend the coffee shops alone than those attending with their friends and among participants who were facing difficulty in making new friendships. This figure may reflect impaired social connectedness, loneliness or depression or even social isolation. Other studies also found that loneliness was a significant predictor of both suicidal ideation and behavior and there was evidence that depression acted as a mediator.<sup>[16][17]</sup> Centers for Disease Control and Prevention(CDC) stated that social isolation and loneliness have been linked to increased risk for Suicidality and self-harm.<sup>[18]</sup>

This study showed that suicidal ideation was higher among individuals who suffer health problems than individuals who did not. Literature showed that numerous medical illnesses are associated with increased odds of suicide, and that suicidal death extends through all demographic groups and includes virtually all psychiatric and medical diagnoses. The CDC's mortality records for 2017 reveal over 50% of deaths by suicide were by people with no known psychiatric illness.<sup>[3]</sup>

In conclusion, prevalence of suicidal ideation was high among coffee shops' goers. Sociodemographic characteristics (sex, marital status and employment), social connectedness and health status of participants were significant affecting factors.

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