

PARENTING STYLE AND SELF ESTEEM AS PREDICTORS OF SUICIDAL IDEATION AMONG ADOLESCENTS IN ISI ALA NGWA, ABIA STATE

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Abstract

Adolescent suicide remains a major public health problem, while suicidal ideation is a thought process that may lead to suicide, the parenting style and self-esteem of individuals are necessary phenomena. Hence; this study investigated the influence of parenting style and self-esteem on suicidal ideation among adolescents. 137 students were randomly selected from four secondary schools (Christian intellectual academy, Rising Stars academy, Mbutu Ngwa secondary school, St. Ephraim high school) in Isi Ala Ngwa south local Government Area of Abia State. The participants comprised sixty-one (66) males and seventy-one (71) females. The ages of the participants ranged from 13 - 19 years, with a mean deviation (M) of 16.0 and standard deviation (SD) of 2.01. The selection of participants was carried out through simple random sampling technique whereby everyone was given equal chance of being selected. Three instruments were used for data collection; Positive and negative suicide ideation inventory (PANSI), Rosenberg self-esteem scale, and Perceived parenting styles

scales (PPSS). Two hypotheses were formulated and tested. Cross-sectional survey design was employed for collecting data. Hierarchical multiple regression was the statistics used to analyze the data. The results obtained showed that among the dimensions of parenting styles, only authoritarian parenting style ($\beta = -.17$, $t = -1.97$, $p < .05$) significantly influenced suicidal ideation among adolescents, while Authoritative ($\beta = .02$, $t = .22$, $p > .05$) and permissive ($\beta = -.09$, $t = -1.05$, $p > .05$) parenting styles did not significantly predict suicidal ideation among adolescents. Self-esteem ($\beta = .08$, $t = .96$, $p > .05$) did not significantly predict suicidal ideation. This implies that adolescents who are lacking in authoritarian parenting style are more likely to engage in suicidal ideation. Therefore, training young people with authoritarian parenting style (a combination of authoritative and permissive parenting) dissuades them not to engage in suicidal ideation.

Keywords: Suicidal ideation, Parenting style, Self esteem

Introduction

Suicidal tendencies among adolescents have been the subject of extensive research. Reports of increased rate of suicide attempts in the past few decades (WHO, 2002) suggest that this occurrence has not been fully resolved yet. According to WHO, some 250 adolescents commit suicide globally every day, while 10, 000 attempt it (WHO, 2002). In Serbia, suicide rate among youth and adolescents from 15–24 years is 6.9, or 66 deaths a year (WHO, 2006). The number of suicide attempts is much higher. It is important to keep in mind that many cases are probably not even reported.

The World Health Organization (WHO) defines suicide as 'the act of killing oneself, deliberately initiated and performed by the

person concerned in the full knowledge or expectation of its fatal outcome'. While several definitions exist, suicide simply means the intentional act of ending one's own life. Suicide is the third leading cause of death among young people, aged 15 to 44 years, and ranks second for adolescents between ages 15 and 19 years old (WHO, 1998).

For instance, the mental, neurological and substance use disorders make a substantial contribution to the global burden of disease (GBD), which is estimated with the disability-adjusted life years (DALY) metric, assigned to each disease/disorder. The DALY is the sum of two composite measures: the years lived with disability (YLD) and the years of life lost (YLL) due to a specified disease within the total population. Suicide accounted for 1.8% of the total disease burden as at 1998, but is projected to rise to 2.4% by the year 2020 (WHO, 2012). Mental and behavioural disorders are common, and will affect one in every four persons at some time during their lives (WHO, 2001). These reports have prompted the WHO to become vigorously involved in campaigning to bring the public health burden and impact of suicide to the attention of governments, policymakers and the public through the collation and dissemination of statistics, and the development of preventive programs. It is estimated that globally, about one million deaths occur from suicide every year; which roughly translates to one suicide death every forty seconds. The incidence of attempted suicide is twenty-five times more common than completed suicide. It is also the most important cause of violent death worldwide, accounting for 49% of all cases. Other major contributors to violent deaths worldwide include homicide (32%); with conflicts and wars making up the remaining 19%. It should be borne in mind that the act of committing suicide, is neither a disease nor a pathological condition; but mental disorders are frequently found to be associated with it, especially depression.

Beyond counting the numbers of suicide and suicidal attempts however, is the often-unexplored psychological burden from feelings of guilt, sorrow and anguish, which is often experienced by the family members and close associates of individuals who commit suicide. Every act of suicide, affects averagely six other people, at the very minimum (WHO, 2000). This impact becomes amplified, when a suicide occurs in a public situation, such as in a school or work environment. Non-fatal suicidal thoughts and behaviours usually precede successful suicide acts and should be seen as important cries for help and intervention, when they occur.

Furthermore, according to WHO (2000), suicide rates have increased by 60% worldwide, in the last 45 years, with an estimated global incidence rate of 16 per 100,000. This trend is occurring despite the improvements in the recognition and management of depression and other mental disorders, and the increased availability of newer medications with better and more tolerable side effects. The incidence of suicide is usually reported as a rate per 100,000 on a country basis. Countries such as Sri Lanka, Lithuania, Russia and Belarus which record 30 or more deaths per 100,000 are classified as high-rate countries. Countries with numbers ranging from 10 to 29 per 100,000 such as Japan, Hungary, and China have middle rates; while those countries with fewer than 10 suicide deaths per 100,000 (e.g., Syria, Jamaica, Egypt) are classified as low-rate countries. However, these rates may actually be misleading as they do not convey the true extent of the problem. For example, China has a suicide rate of about 25/100,000, which places it in the middle range but it accounts for the largest number of human deaths from suicide annually, with 287,000 reported suicide deaths; thus, accounting for nearly a third of the global mortality from suicide in a year (Phillips et.al. 1999; Anowor et al, 2022; Ochinawata et al, 2020.). Similarly, India's

rate of 10/100,000 places it marginally ahead of countries with low rates, but India is second to China in the number of suicide deaths recorded per year, with reported figures of about 110,000 suicide deaths (Girdhar et.al. 1999). Khan, illustrated the misleading nature of relying entirely on these rates, without putting them in the larger context of the country's population. He utilized comparative analysis using the available figures, and showed that four countries with high suicide rates: Lithuania, Russia, Estonia and Latvia have a combined total number of suicide deaths that is less than the total number of suicide deaths from India alone, which is barely above a low-rate country (Khan MM, 2005). Unfortunately, similar country-wide data is not uniformly available across the globe. Indeed, several countries, including Nigeria, do not routinely collect death records and have no reporting systems to document the causes of death. These non-reporting countries exceed 50, and include nations with populations numbering over 100 million people such as Indonesia, Pakistan and Bangladesh (Khan, 2003). There is a paucity of research on suicide from developing countries. Very little is known about suicides in many African countries, including Nigeria (Gureje, 2004; Nwonye et al, 2020). Mental illness is rarely mentioned or is implicated in only a small number of suicides. The majority of available reports in developing countries are based on hospital autopsy reports or police data, neither of which would ordinarily document psychological factors involved in suicides. Suicide is no longer a criminal offence in any developed country but continues to be criminalized in many developing countries, including Nigeria. Religious and social factors also continue to influence the diagnosis and registering of suicides. Families do not disclose the true nature of the act, for fear of harassment by police and the resultant social stigma that would accrue from such disclosures. Instead, they are more likely to declare the death an accident or in some cases, a homicide (Islam, 2003).

There is paucity of information about the epidemiology of suicide in Nigeria. Suicides are generally reported to be rare in less developed countries. This is partly attributable to the routinely poor records of death and its causes. In a study that evaluated coroners' reports over a four-year period (1957-60) in the Western Region (now broken down into several states) of Nigeria. Asuni (2018) concluded that the suicide rate in Western Nigeria was very low. He reported higher rates of suicide in the rural areas compared to urban regions (Asuni, 2018; Onodugo et al, 2019). Some important hospital-based studies have also provided useful insight into this problem. A review of reported cases of attempted suicide from the three largest hospitals in Benin City (Specialist, Uselu Psychiatric Hospital and the University Teaching Hospital) indicated that the incidence had not increased over the four-year period spanning 1978 to 1981, during which the average crude suicide attempt rate was 7 per 100,000. The commonest age group was among teenagers aged 15-19 years (39.4%), while nearly nine out of ten attempters (87%) were aged 30 years and below. The most important predisposing factors reported were mental illness (32%) and parental conflict (24%). There was no significant gender difference (Eferakeya, 1984). In a six-month prospective study of thirty -nine cases of deliberate self harm reported in the three major hospitals in Ibadan, Nigeria; Odejide et al(1986)., found that nearly eight in ten (76.9%) were under the age of 30 years; and just over half (51.3%) were students, while 25.6% were manual workers. The commonest methods used were ingestion of chemicals and psychotropic drugs (Odejide, Williams, Ohaeri et al., 1986). Nwosu and Odesanmi, in a study carried out in the Teaching Hospital, Ile-Ife, Nigeria, that was based on medico-legal autopsy reports, reported the suicide rate as 0.4 per 100,000 populations, with nearly four times as many males committing suicide when compared to females (ratio of 3.6:1).

According to Baumarind (1983) an authoritarian parenting style tends to produce children who are quiet and unhappy. They fear than love their parents due to little emotions of comfort and affection displayed by the parents and this is more likely to produce a child with deviant tendencies. The child portrays lower social competence and self-esteem. The uninvolved parents are both uncaring and inadequate to meet the needs of children. Authoritative parents, balances clear, high parental demands with emotional responsiveness and recognition of child autonomy producing happy, capable and successful children. Hence, authoritative parental style produces children who have better psychosocial skills and display better emotional wellbeing than do the offspring of parents who are not Authoritative (Darling & Steinberg, 1993; Agbarakwe et al, 2018; Parker & Gladstone, 1996). The negative parental behavior grossly inflicts emotional damage to their children. These effects will eventually interfere with the development of the child's self-esteem and their social competencies.

Self -esteem is considered the backbone of a person's wellbeing. The quality of an individual's life is highly influenced by their self-esteem. Self-esteem of an individual is highly associated with the behaviors of an individual. Low self-esteem is seen as the cause for a wide range of personal and social ills, from crime and drug addiction, educational underachievement and a feeling of general wellbeing (Baumeister *et al.*, 2003). The family places an integral part in the development of effective relationships and when the family relationships are ineffective these may affect the self-esteem of an individual as well as lead to suicidal ideation.

Theoretical Review

The interpersonal theory of suicide and adolescent suicidal behavior (IPTS). (Joiner 2005)

Joiner's interpersonal theory of suicide (IPTS) proposes that suicide results from the

combination of a perception of burdening others, social alienation, and the capability for self-harm. Joiner's interpersonal theory of suicide (IPTS) (Joiner, 2005) is one of a growing number of promising models developed in the last two decades in attempt to answer empirical questions about the etiology and course of suicidal behavior (Barzilay and Apter, 2014). The IPTS offers an explanation for suicidal behavior that is testable, consistent with the empirical evidence, and comprehensively addresses the interplay between intra-individual dynamic systems and inter-individual risk factors. Specifically, it suggests that a powerful suicide risk is generated by the interaction of three factors: (a) the individual's experience of loneliness/isolation ("thwarted belongingness"), (b) the individual's perception of being a burden on others ("perceived burdensomeness"), and (c) the individual's habituation to self-harm by prior non-suicidal self-injury, suicidal behavior, or other risk behaviors ("acquired capability") (van Orden et al., 2010).

However, the model has so far been examined only in young and older adults, but no other age groups. Furthermore, the research has been limited in terms of the range and the extent to which different painful and provocative experiences increase the likelihood of suicidal behavior. For example, Van Orden et al. (2008a) examined impulsive behavior along with painful and provocative events without distinguishing between direct and indirect exposure to self-harm (Agbarakwe and Anowor, 2018). Only few studies tested the simultaneous and interactive effects of all three IPTS factors in relation to each other and to established risk factors (eg., depression and non-suicidal self-injury). Moreover, although several studies testing the IPTS controlled the depression (Van Orden et al., 2008a; Joiner et al., 2009) In the prediction of suicidal ideation, other potentially complex relationships were not assessed such as mediating or moderating effects of depression on IPTS constructs.

The integrated motivational-volitional model of suicidal behavior (IMV). (O'Connor 2011) O'Connor (2011a; 2011b) incorporated the major components from the predominant models of suicidal behavior into an integrated three-phase model of suicidal behavior, the Integrated Motivational-Volitional (IMV) model of suicidal behavior, which discriminates between suicide ideators and suicide attempters. In brief, the IMV model proposes that suicidal behavior results from a complex interplay of factors, the proximal predictor of which is one's *intention* to engage in suicidal behavior (behavioral intention). Behavioral intention, in turn, is determined by feelings of entrapment where suicidality is seen as the salient solution to life circumstances and entrapment is triggered by defeat/humiliation appraisals. Crucially, the transitions from defeat/humiliation to entrapment, from entrapment to suicidal ideation/intent, and from ideation/intent to suicidal behavior are determined by state-specific moderators (i.e., factors that facilitate/ obstruct movement between states), entitled threat to self, motivational and volitional moderators, respectively. In addition, background factors (e.g., deprivation, vulnerabilities) and life events (e.g., relationship crisis), which collectively comprise the pre-motivational phase (i.e., before the commencement of ideation formation), provide the broader biosocial context for suicide. In brief, therefore, the pre-motivational phase outlines the broader context in which suicidal thinking or behavior may occur, the motivational phase describes the development of suicidal thoughts, and the volitional phase describes when suicide attempts are more likely to happen.

The strain theory of suicide (Jhang 2019)

The strain theory of suicide (STS) is an emerging approach to look into the etiology of suicide beyond psychiatry, as well as genetics and/or epigenetics, although these non-social features are also often discussed as risk factors. Suicidal thoughts (ideation) can

be triggered by life events, which may create conflicts, frustration, psychological pain, hopelessness and even desperation, and they can be called psychological strains. The STS proposes four sources of strain that may lead to suicide: (1) value strain from at least two different social values, (2) aspiration strain from the large gap between aspiration and reality in life, (3) deprivation strain from the relative deprivation including poverty, and (4) coping strain from deficient coping skills in front of a life crisis. The STS postulates that a person with psychological strains but unable to solve them is psychologically tortured and angered. The outward release of the anger is violence against others, and the inward release of the pressure may result in depression, anxiety or suicidal ideation.

A strain may be found preceding a suicide. Strain is frustration so unbearable that some solution must be taken to reduce the psychological pressure, possibly through a violent channel for some people experiencing a strain. Strain can lead to criminal behaviors towards others (Agnew, 1992; Merton, 1957), and when the aggression is internal, suicide takes place (Henry & Short, 1954).

Attachment theory (Bowlby 1969)

Attachment theory is a concept in developmental psychology that concerns the importance of "attachment" in regards to personal development. Specifically, it makes the claim that the ability for an individual to form an emotional and physical "attachment" to another person gives a sense of stability and security necessary to take risks, branch out, and grow and develop as a personality.

Psychologist John Bowlby was the first to coin the term. His work in the late 60s established the precedent that childhood development depended heavily upon a child's ability to form a strong relationship with "at least one primary caregiver". Generally speaking, this is one of the parents. Bowlby's studies in childhood development and "temperament" led him to the conclusion that a strong attachment to a caregiver provides a

necessary sense of security and foundation. Without such a relationship in place, Bowlby found that a great deal of developmental energy is expended in the search for stability and security. In general, those without such attachments are fearful and are less willing to seek out and learn from new experiences. By contrast, a child with a strong attachment to a parent knows that they have "back-up" so to speak, and thusly tend to be more adventurous and eager to have new experiences (which are of course vital to learning and development).

Social learning theory (Bandura, 1977)

Learning is a remarkably complex process that is influenced by a wide variety of factors. As most parents are probably very much aware, observation can play a critical role in determining how and what children learn (Fryling, Johnston, & Hayes. 2011)

As the saying goes, kids are very much like sponges, soaking up the experiences they have each and every day.

Because learning is so complex, there are many different psychological theories to explain how and why people learn. A psychologist named Albert Bandura proposed a social learning theory which suggests that observation and modeling play a primary role in this process (Hammer TR. 2011). Bandura's theory moves beyond behavioral theories, which suggest that all behaviors are learned through conditioning, and cognitive theories, which take into account psychological influences such as attention and memory. Social learning theory is a theoretical framework that guides several evidence-based practices and approaches to assessment for criminal justice populations. Social learning theory is based on several theoretical assumptions. Individuals learn behaviors, attitudes, and behavioral consequences from other individuals in their social environment (Bandura, 1977). It stands to reason that if individuals learn certain behaviors, attitudes, and behavioral consequences from others, these can be unlearned or changed through observing,

imitating, or modeling others. Bandura's research conducted in the 1960s and 1970s focused on the role of observational learning of behaviors and attitudes, as well as opportunities for intervention that emphasize observational learning, modeling, and self-efficacy (Grusec, 1992).

Self Determination theory (Nota 2011)

Self-determination, as a psychological construct, refers to volitional actions taken by people based on their own will, and self-determined behaviour comes from intentional, conscious choice, and decision (Nota, Soresi, Ferrari, & Wehmeyer 2011). SDT is based upon the assumption that human persons are active and growth-oriented agents, inclined to organize and initiate their actions with reference to their values and interests, with the tendency to integrate social norms and practices, intrinsically motivated to pursue personal goals, and striving to master the environments. The development of these tendencies and qualities is dependent upon the kind of support they receive from the socializing environments, which may promote or undermine their intrinsic motivation and internalization (E. L. Deci and R. M. Ryan 2000).

SDT postulates that the satisfaction of the three basic psychological needs, namely, competence, relatedness, and autonomy, is pertinent for the optimal development and functioning of human persons. Competence refers to having the feeling of being capable to meet the demands of environments and face daily challenges. Such need can be fulfilled by the experiences of enacting and achieving desired goals and having effective outcomes. Autonomy is about being volitional and self-endorsing in one's behaviour and having the control to make choices from one's own will. The need for autonomy differs from being independent, selfish, and having freedom of choices (Bao & Lam 2008). The essential elements which facilitate autonomy include self-awareness of

one's motives, emotions, and external demands, having active involvement, and having the chances for self-direction and choice making. Satisfaction of the need for autonomy at home and in a school environment is likely to facilitate the development of intrinsic motivation and internalization. In addition, both the needs for competence and autonomy are necessary and essential for the maintaining of intrinsic motivation (Niemiec & Ryan 2009). Relatedness is about the need to achieve a sense of closeness, connectedness, and belongingness with others. The satisfaction of the need for relatedness will provide emotional security for further exploration. Feelings of closeness to the significant others such as parents and teachers will facilitate the process of internalization of values, social norms, and practice. Hence, socioemotional relatedness is pertinent to internalization and the subsequent motivation and self-regulation to engage in tasks demanded by others.

Socio-meter Theory (Leary 1999)

Socio-meter theory is a theory put forward by Mark Leary in 1999, proposing that humans have evolved a form of psychological meter, or gauge, which monitors the degree to which other people value and accept them. Leary named this monitor a socio-meter, and proposed that this evaluation of the individual's level of acceptance by others is a determinant of self-esteem (Leary, M. R. 1999). Despite the amount of attention that researchers have devoted to the topic of self-esteem, many central questions remain unanswered. Socio-meter theory addresses many such questions by suggesting that self-esteem is part of a psychological system (the socio-meter) that monitors the social environment for cues indicating low or declining relational evaluation (e.g., lack of interest, disapproval, rejection) and warns the individual when such cues are detected. The theory suggests that people are not motivated to maintain their self-esteem per se as has been typically assumed, but rather seek to increase their relational value and social

acceptance, using self-esteem as a gauge of their effectiveness.

Empirical Review

Parenting style and suicidal ideation

A study conducted by Annapurna et al., (2017) showed a significant relationship between parental style and suicidal ideation. As mentioned earlier, Parenting or child rearing is the process of promoting and supporting the physical, emotional, social and intellectual development of a child. Studies have supported that parental history both in terms of attachments of varying quality as well as parental psychopathology have prolong impact on the psychosocial development of children. Due to instance Social changes and decreased family stability incidence of childhood depression has increase also, suicide rate among young teens has increased by more than 300 percent in the last three decades. The present study aimed to assess the relationship between parenting style and suicidal ideation among school going adolescents. Parenting Scale and Suicidal Ideation Questionnaire were administered on 120 School going adolescent (sixty residential and sixty non- residential). Results of the study show that good parenting is related with suicidal ideation of non-residential boys. It also indicated that non-residential boys who have good parental relationship have shown mild suicidal ideation as compared to non-residential boys who have poor parental relationship. Results also showed that good parenting related with the suicidal ideation of non-residential adolescent's girls. Similar results are found for residential adolescents and residential girls but not in case of residential boys. On the basis of these finding we can conclude that adolescents with good parenting have very mild or negligible suicidal ideation as compared to adolescents with poor parenting. Aurora et al., (2015) conducted a study and the objective of this research was to determine the extent to which parenting styles predict adolescent suicidal ideation in

public school students in Mexico. 172 men and 226 women ranging between 15 and 17 years participated in this study. A parental style scale proposed by Andrade and Betancourt (2008) was applied and a scale to measure suicidal ideation was developed. The results indicate that suicidal ideation and feelings of loneliness are present at a greater rate in women. Likewise, there are significant correlations between parenting styles of fathers and mothers and suicidal ideation in adolescent men and women. There are differences in predictors of suicidal ideation in men and women.

Self-esteem and suicidal ideation

Becky et al., (2016) in their study highlighted that Suicidal ideation is a thought process in which an individual thinks about suicide but does not intend or plan to commit suicide. The constant thought about suicide is considered a factor of concern because the thought can lead to suicidal behavior as well as attempted and completed suicide. This study sought to study self-esteem on suicidal ideation among the youth. The main objective of the study was to determine the influence of self-concept on suicidal ideation, the influence of self-efficacy on suicidal ideation. These factors play a significant role in the development of a quality life of a young adult and are therefore influential factors in the day-to-day activities of a university student. A descriptive questionnaire design was adopted for this study. The study established that there is a positive correlation between low self-esteem and suicidal ideation. This means that the lower the self-esteem the higher the chances of suicidal ideation. It was also established that individuals with high efficacy experience less suicidal ideation compared to those with low self-efficacy.

Hypotheses

The hypothesis tested in this study are as follows;

- 1) Parenting style will significantly predict suicidal ideation among adolescents
 - Self-esteem will significantly predict suicidal ideation among adolescents.

Method

Participants

One hundred and thirty-seven (137) students were selected from four secondary schools (Christian intellectual academy, Rising Stars Academy, Mbutu Ngwa secondary school, St. Ephraim high school) in Isi Ala Ngwa South local Government Area, Abia state. The schools and classes were selected through simple random sampling techniques. The ages of the participants ranged from 13-19 years with the mean age of 16.0 and standard deviation of 2.01. They were comprised of; sixty-six (66) males and seventy-one (71) females, of which three (3) were Muslims, fifty-five (55) were Anglicans, forty-eight (48) Catholics, and thirty-one (31) Pentecostals. There were one hundred and thirty-six (136) Igbos and one (1) Hausa. Out of which ninety-eight (98) responded "yes" to the fourth demographic question while thirty-nine (39) responded "no".

Instrument

Provision was made for the collection of demographical data and then three instruments were used for the collection of data, which are; Positive and negative suicide ideation inventory (PANSI), Rosenberg self-esteem scale, and Perceived parenting styles scales (PPSS).

Positive and negative suicide ideation inventory (PANSI)

This is a 14-item subjectively completed inventory that consisted of 2 subscales: the PANSI-NSI subscale composed of 8 items and the Positive Ideation (PANSI-PI) subscale consisting of 6 items. The original study leading to the inventory's development was conducted in 2 phases. In the first study, the authors performed EFA which extracted

the 2 factors that constituted the subscales, in a total number of 450 undergraduate students (150 men and 300 women) recruited from a large Midwestern university in the United States. The second study involved 286 undergraduate students recruited from the same institution as the first study; the authors conducted CFA to explore which of the 1-factor or 2-factor models of the inventory will exhibit the best indices of fitness. Following CFA, the most satisfactory fit was exhibited by the 2-factor model.¹⁷ The subscale which consists of the vulnerability or negative items, labeled the PANSI subscale, is composed of 8 items, whereas the subscale that examines the protective or positive items, labeled the PANSI-PI subscale, consisting of 6 items. The possible total scores on the PANSI-NSI and PANSI-PI subscales range from 8 to 40 and 6 to 30, respectively. Higher scores on the PANSI-NSI and lower scores on the PANSI-PI reflect greater risk for suicidal behavior. Each of the items on the 2 subscales are rated on a 5-point Likert scale (1=none of the time to 5=most of the time). The respondents completed the scale bearing in mind the preceding 2 weeks including the day the inventory has been completed.

Since the scale was based on western sample, Nkwuda, Ifeagwazi, and Nwonyi (2019) conducted a pilot study using 110 Nigerian undergraduate students drawn from faculty of law, 200 and 300 levels. The scale yielded a reliability of .90. The validity check using factor analysis, showed .71, indicating that the scale is reliable and valid to measure suicidal ideation among undergraduate students in Nigeria.

Perceived parenting styles scale (PPSS)

The Perceived Parenting Style Scale developed by Divya and Manikandan (2013) measure the perception of the children about their parent's behaviour. It measures perceived parenting style of the subject with regard to three dimensions such as authoritarian, authoritative and permissive. It consists of 30 items in which responses were

elicited in a five-point Likert scale. Clear instructions in simple language both in English and Malayalam are prepared and printed on the first page of the parenting style scale so that each participant might be able to follow them before he or she started responding to items. The items are written in Malayalam and English languages (bilingual). Responses on the items are elicited in terms of 5-point Likert scale such as Strongly Agree (5), Agree (4), Neutral (3), Disagree (2) and Strongly Disagree (1). The participants are provided with a separate answer sheet which has columns to mark their responses. The participants could mark his or her responses for each item putting a tick mark (X) in the corresponding space of each item. To find out the reliability of the scale Cronbach Alpha coefficient was computed for each style and it was found that the authoritative style is having an Alpha coefficient of 0.79, authoritarian 0.81 and permissive 0.86. All the styles of the perceived parenting style scale have an acceptable level of reliability. The authors claim that the scale has face validity.

For the present study the researcher obtained a Cronbach's alpha reliability coefficient of .68, with Nigerian participants, indicating that the instrument is reliable.

Procedure

This research was done through survey and a descriptive survey design was adopted. The adolescents that is students from secondary schools in isi ala ngwa south, Abia state were the targeted population. In the rural and urban areas of the local government mentioned above there are about 24 schools, the researcher conducted a multiple stage sampling technique, firstly conducted a cluster sampling technique and classified the schools in two sections which is the private and public sectors (there were 11 private schools and 13 public schools) then simple random sampling technique (balloting) was conducted thereby enabling the researcher to select two schools from each section, then

convenience sampling was used to select participants for the study. The researcher presented a letter of permission from the department of sociology/psychology to the heads/principals of each school who in turn informed the teachers and granted permission for the students to be a part of the research. After being granted permission, a population of 200 students were gathered in total and a sample size of 150 students were selected to participate in the study, thirty four (34) students were selected from three schools each while thirty five (35) were selected from one school. At the end of administering the questionnaire a total of 137 were returned properly filled and used for data analysis.

Design and statistics

This is a survey study, cross-sectional design was employed and the analysis of data was done using Hierarchical Multiple Regression. Statistical package for the social sciences (SPSS) version 20 was employed for data analysis.

Results

Data obtained from participants were analyzed by computing the means, standard deviations, and correlations among the study variables. Thereafter, to test the hypotheses. Result of correlation table show that suicidal ideation was only significantly related to authoritarian parenting ($r = -.15, p < .05$); but non-significantly related to gender ($r = .03, p > .05$), religion ($r = -.13, p > .05$), ethnic group ($r = .04, p > .05$), age ($r = -.08, p > .05$), authoritarian parenting ($r = -.16, p > .05$), permissive parenting ($r = -.05, p > .05$), and self-esteem ($r = .10, p > .05$). The significant relationship implies that adolescents who are lacking in authoritarian parenting style (a combination of authoritative and permissive), tend to develop more suicidal ideation. Age was significantly related to authoritative parenting style ($r = -.14, p < .05$), and self-esteem ($r = -.14, p < .05$). Authoritarian parenting was significantly related to permissive parenting ($r = -.20, p < .01$). Gender, religion, ethnic group, authoritarian

parenting, permissive parenting, and self-esteem were not significantly related to any of the variables.

Regression result in table 2 above indicated that none of the control variables (gender, religion, ethnic group, and age) significantly predicted suicidal ideation among adolescents. The control variables jointly accounted for less than 1% none significant variance as predictors of adolescents' suicidal ideation ($R^2\Delta = .03, p > .05$). Among the dimensions of parenting styles, only authoritarian parenting style ($\beta = -.17, t = -1.97, p < .05$) entered in model two of the equation significantly predicted suicidal ideation among adolescents. This implies that adolescents who are lacking in authoritarian parenting style, will more likely engage in suicidal ideation. Therefore, training young people with authoritarian parenting style (a combination of authoritative and permissive parenting) dissuades them not to engage in suicidal ideation. Authoritative ($\beta = .02, t = .22, p > .05$) and permissive ($\beta = -.09, t = -1.05, p > .05$) parenting styles did not significantly predict suicidal ideation among adolescents. The dimensions jointly made less than 1% non-significant variance as a predictors of suicidal ideation among adolescent ($R^2\Delta = .03, p > .05$). Self-esteem was entered in model three of the equation. Regression result showed that it did not significantly predict suicidal ideation among adolescents ($\beta = .08, t = .96, p > .05$). It accounted for less than 1% none significant variance as a predictor of adolescent adjustment ($R^2\Delta = .01, p > .05$).

Summary of Findings

In the correlation result

Result of correlation table show that suicidal ideation was only significantly related to authoritarian parenting; but non-significantly related to gender, religion, ethnic group, age, authoritarian parenting, permissive parenting, and self-esteem.

None of the control variables significantly predicted adolescents' suicidal ideation.

Authoritative parenting did not significantly predict adolescents' suicidal ideation.
Authoritarian parenting significantly predicted adolescents' suicidal ideation.
Permissive parenting did not significantly predict adolescents' suicidal ideation.
Self-esteem did not significantly predict adolescents' suicidal ideation.

Discussion

Parenting style and self-esteem as predictors of suicidal ideation among adolescents in Isiala Ngwa south local government area Abia state were reviewed in this study. The first hypothesis tested in this study stated that parental style will significantly predict suicidal ideation among adolescents. The results showed that authoritarian parenting significantly predicted suicidal ideation, this is supported by *Lai and McBride (2001)* who conducted a study on adolescents in Hong-Kong and found that suicidal ideation is associated with perceived Authoritarian parenting in which individual experience low parental warmth and high maternal control, Another study conducted in Australia revealed that adolescents who experience Authoritarian parenting (i.e. high in control and low in affection) have twice the risk of suicidal ideation and three times the risk of deliberate self-harm (*Martin and Waite, 1994*). Therefore, the result accepts the hypothesis that parenting style will significantly influence suicidal ideation among adolescents.

The second hypothesis tested in this study states that low self-esteem will significantly predict suicidal ideation among adolescents. The result from the data analysis rejected the hypothesis which stated that self-esteem will significantly predict suicidal ideation among adolescents. This is not consistent with the empirical research works reviewed earlier in this study. Some examples are studies conducted by Carol Chu. et, al. (2015) which indicated that greater fears of negative evaluation were significantly and positively associated with levels of suicidal ideation.

Victor Wilbum and Delores Smith also found that both stress and self-esteem were significantly related to suicidal ideation; low self-esteem and stressful life events significantly predicted suicidal ideation. Flouri and Buchanan (2002) documented that adolescents who attempted suicide tended to report lower self-concept and parental involvement compared with adolescents who had not attempted suicide. Becky Wanjiku Wanyoike, Nguti, et, al. (2016) The study established that there is a positive correlation between low self-esteem and suicidal ideation. This means that the lower the self-esteem the higher the chances of suicidal ideation. It was also established that individuals with high efficacy experience less suicidal ideation compared to those with low self-efficacy.

Implications of the study

The result of this research found that there is a negative relationship between authoritarian parenting and suicidal ideation; this means the more authoritarian parenting, the lesser the occurrence of suicidal ideation and this has a practical implication in the society. The implication of the study is that any student who is raised under an authoritarian parenting style is not likely to develop suicidal ideation. Further implications are with behavioral psychologist, Counselling psychologist, educational psychologist, clinical psychologist, the parents, and other organizations that have students involved in their practices. Students in this category should be encouraged to look beyond the circumstances and introduced to activities or programmes that will help build up their self-concept. The educational sector or Schools should be tasked with the responsibility of ensuring that students with such poor parenting background should be given proper care and attention, and engaging activities should be created to make such students feel loved, highly esteemed and appreciated by the school and the society at large.

Conclusion.

This study was carried out in order to check in-depthly parenting style and self-esteem as predictors of suicidal ideation among adolescents in Isi Ala Ngwa South Local Government Area in Abia State. A total number of one hundred and thirty-seven (137) participated in this study. The research hypothesized that parenting style and self-esteem would significantly predict suicidal ideation in this research. The results showed that authoritarian parenting significantly predicted suicidal ideation. Self-esteem predicted suicidal ideation according to previous researches but this study showed positive relationship only between one dimension of parenting style which is the authoritarian parenting and suicidal ideation.

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