

Influence of Parenting Styles on Suicidal Ideations among Secondary School Students in Westlands Sub County, Nairobi Kenya

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ABSTRACT

Suicidal ideations among secondary school students is proving to be a global problem. The rate at which such ideations have been noted in various countries is worrying. The intention of this study was to establish the influence of parenting styles on suicidal ideations among secondary school students in Westlands Sub County, Nairobi, Kenya. Mixed methods, explanatory sequential research design was applied. This combined Correlation and phenomenology designs. The target population was the secondary school students, in Westlands Sub County in Nairobi. Both probability and none probability sampling techniques were applied. Stratified sampling was used to select the schools while simple random and extreme case sampling were used to select students. A total of 241 sample size was used for the study. Data was collected using questionnaires and in-depth interviews. Data analysis was conducted using Pearson correlation analysis, regression analysis and thematic analysis backed with narratives from participants. Authoritarian and Neglectful parenting styles exhibited a weak positive correlation with suicidal ideations while Authoritative and permissive styles had moderate negative correlations with these ideations. However, the relationship was significant as $p < 0.005$. The study recommended training programs for parents on healthier ways of parenting and highlighted that parents ought to embrace their parenting role with commitment. Authoritative was preferred and where necessary permissive could be employed.

Keywords: Parenting Styles, Suicide, Suicidal Ideations, Secondary School Students

Suicidal ideations among secondary school students is proving to be a global problem. World Health Organization (WHO) report of 2016 showed that suicide is the second leading cause of death among youth aged between 15 to 29 years globally. It estimated close to 800,000 people who died of suicide and that 79% of such deaths occurred in low- and middle-income countries (World Health Organization, 2019) of which Kenya

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belongs. Considering the stated ages, these statistics confirm the high increase in the suicidal ideations and attempts among the secondary school students.

Several researches that have been conducted indicate the growing rate of this phenomenon in different countries. In the United States, Hollinger, Offer & Zola, (1988) revealed that the increase in the suicidal rates among the youth aged between 15 to 24 years was directly proportional to the increase in the number of the adolescents, that is, the more the number of adolescents increased the more the rates of suicide among them were found to rise. An investigation of the trends in emergency department visits by youth who had inflicted self-injuries and those who had attempted suicides between the years 1993-2008 in the United States of America revealed that there was an average of 420,000 emergency department visits. Within the time of study, the number of such visits had doubled from 244000 in 1993-1996 to 538000 visits in 2005-2008. This study noted that the visits were common among the youth of 15 years-19 years (Mercado, Holland, Leemis, Stone & Wang, 2017). Ivey-Stephenson et al., (2019) conducted a survey in the United States between 2009-2019. They established suicide as the second leading cause of death after injuries that were unintentional, among high school youths considering ages 14-18 years. This is a worrying revelation of the cases of young people turning to suicide as a solution to issues.

The problem of suicide and suicidal ideations is not unique to America. A comparison of suicide rates among youths of Turkey and America aged below 24 years carried out between the years 1992 to 2004 gave alarming revelations. In Turkey it was reported that 50% of the females who committed suicide were below 24 years of age while in the United States of America (USA) female suicide of the same age was 11% (Murat, Suleyman & Neera, 2012). These reveal high numbers of completed suicide without considering those who have the ideations and do not attempt to accomplish or those who attempt but fail to succeed.

In 2017, a study conducted in Sweden that assessed the rates and background factors of suicide among unaccompanied minors of ages 10-21 years who sought asylum in Sweden, revealed an increase in suicide rates among these minors, giving the average figure at 51.2 per 100,000 (Mittendorfer-Rutz, Hagstrom Ana & Hollander Anna-Clara, 2017). This was yet another study that gives a red-light pointer to the increase of this phenomenon. The more shocking aspect is that this numbers are giving the reported completed suicides not considering the ones that may not have been added to accessible data.

African countries have exhibited similar trends of suicidal tendencies, attempts and accomplished suicide. If nothing is done to prevent the rate from the high increase, this phenomenon may end up as the first killer of secondary school students globally. In Nigeria, a study conducted with a sample of 9441 adolescents gave a result of 6.1% for suicidal ideations, 4.1% for those who had planned suicide and 2.8% for suicidal attempts among these youths. This was for a given period of one month (Abiodun, Adewuya & Eniola, 2019). These suicidal attempts include thoughts of committing suicide, self-harm like use of sharp objects to inflict pain on self, consumption of dangerous/poisonous substance, overdosing oneself or in some cases deliberately jumping from dangerous heights among others. It leaves one wondering what makes the secondary school students more vulnerable to these tendencies in dealing with their issues as many studies attest that the rate of this phenomenon among this age group is higher than other age groups.

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Other than the suicide cases, an alarming rate of unhealthy behaviors related to suicide or those that may lead to suicide are reported. The common one of these is the self-harm aspects where the secondary school students inflict pain on themselves as a means of coping with emotional or psychological pain that they are undergoing. Some of these if not handled in good time may lead to suicide. Mr. Chomba a therapist reported that an alarming number of youth in Kenya engage in self-harm. He asserted that some of these harms are lethal and may lead to death by suicide or suicide attempts (Chomba, 2018).

A cross sectional study of 7,662 youths aged between 10-19 years was done in six Sub-Saharan African countries. These included Tanzania, Uganda, Ethiopia, Nigeria, Burkina Faso and Ghana. Eight cities were covered and this revealed that the prevalence of suicidal behavior within a span of 12 months ranged between 1.2% and 12.4% in these eight cities (Nyundo et al., 2019). This study is in agreement with the other studies that have noted the alarming increase of these suicidal attempts and tendencies most especially among this age group.

A different study in South Africa and Guyana assessing one hundred and ninety youths between 11-21 years separated from their parents supported the increase in the suicidal phenomenon. It gave an approximation of 22% of black South African youths and 60% of Guyanese youths having exhibited suicidal ideations or attempts or both, (Nyundo, Manu, Regan, Ismail, Chukwu, Dessie, Njau, Kaaya & Fawzi, 2019). This result indicates and confirms very high and disturbing rates of this situation.

There is urgency in seeking ways of reducing suicide and suicidal tendencies in general as it is clearly becoming a more threatening cause of death. WHO for the first time in 2013, during the World Health Assembly adopted a Mental Health action plan, Plan of suicide prevention is an integral part of this plan. Their goal was to reduce the suicide rate by 10% by the year 2020. (Saxena S. & Alexandra F, 2014). This step made by WHO validates the fact that the increase in suicide rate among the secondary school students is not only a matter of great concern but that it threatens even the survival of humanity at large if the rates were to continue on the rise.

Suicidal tendencies and actual suicide are on the increase even in Kenya. Reports from media houses and newspapers have severally disclosed cases of young people attempting or actually committing suicide for various reasons. For example, the Nation newspaper (2018) reported that a 16-year-old student had committed suicide because the father refused to transfer him to a school of his choice. In another recent case a 17-year-old student hanged himself having been sent home for school fees (Makokha, 2019). A further shocking revelation is that the actual cases of suicide, attempts or tendencies may be much higher than what is reported. As reported by Atallah (2019), an average of 317 commits suicide per year, this number is exclusive of those with ideations of suicide and those who attempt but do not succeed. According to the same author, WHO 2017 report indicated that Kenya lacks vital registration data and has no proper data to enable appropriate estimation of suicide cases as the country does not have proper records on the causes of death (Atallah, 2019).

Looking at the several cases of the suicides reported, it may appear that the secondary school students are almost adopting suicide and suicidal tendencies as fashionable, as the only way to solve any challenging issue, as a way of seeking any attention or as a way to punish the society. The number of cases reported are on the increase and the reasons given for the

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suicidal cases are issues that would be handled differently and even solvable by other means. A review of a few cases in the different counties of Kenya affirms this: Several cases have been highlighted, among them are; In Trans-Nzoia County, a 14 year old boy committed suicide to resist pressure from the mother to repeat class eight having scored 324 marks in the 2019 K.C.P.E exams Obare, (2019), similar incident in the same county was a 20 years old form four student who killed himself after a small disagreement with his parent, (Obare, 2019) and a very sad case was reported in Homabay County of a 15 year old pupil who hanged himself having achieved 372 marks and for the first time being a position two instead of his usual position one in the class, the position one boy had exceeded him by one mark. (Omoro, 2017).

For the society to curb this suicidal phenomenon, it would be helpful to find out how the parenting style contributes to this way of solving any existing issue, thus forge a way forward to resolve it. It is therefore against this backdrop that this study sought to find out the influence of the parenting styles on suicidal ideations among secondary school students in Westlands Sub County, Nairobi County in Kenya.

METHODOLOGY

The study was conducted in Westlands Sub County, Nairobi Kenya. This is one of the 17 Sub Counties of Nairobi County which covers an area of 696 km² (Kwach, 2018) of this area, Westlands Sub County covers 97.6 km² (Mutua, 2017). The region has a total of 32 secondary schools and 15634 students from which sample was taken for this study.

This research used mixed methods, explanatory sequential research design. In this, data was collected in two phases. The first phase involved the collection of quantitative data from the students. In the second phase, the researcher selected the extreme cases and conducted in-depth interviews with them. Extreme here implied the students who scored high on suicidal ideations questionnaire. The researcher also interviewed the parents of these extreme cases. The design used was a combination of correlation for quantitative data and phenomenology for qualitative data. Correlational Quantitative design was employed to assess the relationship that exist between the students' suicide and suicidal tendencies and the parenting styles they have been exposed to. As discussed by Orodho, (2002) and Seeram, (2019), correlational method is a design that enables the researcher to predict and explain relationship that exist among given variables and assess the degree of relationship that exists between the two or more variables. It involves collecting data used to determine if there is a relationship and the extent of the relationship between two or more variables (Mugenda & Mugenda, 2010). The correlational design allows a researcher to analyze how different variables are either singly or in combination affect a given pattern of behavior under study. Furthermore, the correlation designs offer evidence concerning the degree of affiliation between the variables of a study (Gall, Gall & Borg, 2003). For this research, this design was quite relevant to the set objectives.

For the qualitative aspect of this research, phenomenology design was used. Mvumbi & Ngumbi, (2015) note that the main characteristic of phenomenology is its highlight on the participants' experiences and interpretations. This design would be helpful for this study because of its ability, to enable the researcher take a fresh and unprejudiced perspective toward the phenomenon under study (Massimiliano & Luigina, 2010). In this case, it enabled the researcher to get the direct experience and perspective of the students through

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the focused group discussions, of their parenting styles and how the students them to the suicidal ideations.

The target population for the study was 15634 secondary schools students in Westlands Sub County. This population was targeted for this study particularly because the students at this developmental stage which covers adolescent period, have most likely formed a stable opinion of the parenting styles they undergo. That is, they have the ability to identify the different aspects of the parenting styles their parents use, thus their response to the questionnaire items that seek to establish the given parenting styles were considered to be reliable. Furthermore, during this period, the adolescent undergoes dramatic changes within a short period of time (Kiura, Gitau & Kiura, 1999) which then generates an identity crisis if the earlier stages according to Eric Erickson, were not well managed. At this point of development, the adolescents are occupied by finding out who they are, they are establishing a new self, developing a concept of self apart from everything and everyone else. Most physiological changes occur and inevitably accompanied by important psychological alterations including; sensitivity, emotions and their relationships with others (Melgosa, 2000). All these factors make the secondary school students more at risk of suicidal ideations than other stages of development. The study was specific to secondary school students rather than adolescents as some students in the high schools may be beyond the age considered by WHO which is 10-19 years (WHO, 2020) while some adolescents are in primary schools.

The sample size for the study was 241 participants and was determined using Yamane's formula. Data was collected using standardized questionnaires for parenting and suicidal ideation. The parenting Style Four Factor Questionnaire (PSFFQ) by Shyny, (2017) had internal consistency was estimated to 0.92 which is very high in relation to the Cronbach's alpha that considers 0.7 or above as a criterion demonstrating strong internal consistency (Shyny, 2017). To assess suicidal ideations the researcher also adapted Columbia-Suicide Severity Rating Scale (C-SSRS). In both cases, the researcher sought and received permissions from the developers of these instruments.

RESULTS

Table 1 Correlations between parenting styles and suicidal ideations

Parenting Styles	Mild Suicidal Ideation	Moderate Suicidal Ideation	Severe Suicidal Ideation
Authoritarian Parenting Style	.290 .000 203	.166 .018 203	.240 .001 203
Authoritative Parenting Style	-.372 .000 203	-.295 .000 203	-.367 .000 203
Permissive Parenting Style	-.311 .000 203	-.277 .000 203	-.393 .000 203
Neglectful parenting style	.271 .000	.264 .000	.278 .000
N	203	203	203

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The results revealed that there is a weak positive correlation with two parenting styles and all levels of suicidal ideations. These were the Authoritarian style ($r=0.290$ for mild suicidal ideations, $r=0.166$ for moderate suicidal ideations and $r= 0.240$ for severe suicidal ideations) and the Neglectful parenting style ($r=0.271$ for mild suicidal ideations, $r=0.264$ for moderate suicidal ideations and $r =0.278$ for severe suicidal ideations). However, for both, the relationship was significant at all levels since the $p< 0.005$.

The other two parenting styles registered moderate approaching strong negative correlation with the suicidal ideations and in each level the correlation was significant as $p< 0.005$. Permissive reflected ($r= -0.311$ for mild suicidal ideations, $r=-0.277$ for mild suicidal ideations and $r=-0.393$ for severe suicidal ideations) while Authoritative parenting style had ($r= -0.372$ for mild suicidal ideations, $r=-0.295$ for moderate suicidal ideations and $r=-0.367$ for severe suicidal ideations).

Regression analysis on parenting styles and suicidal ideations

Having performed the Pearson’s product moment correlation and establishing that there exists a relationship between parenting styles and suicidal ideations, the researcher also ran a regression analysis using SPSS. This was done in order to determine whether parenting styles influenced suicidal ideations and to establish the degree to which each parenting style influence these ideations. The results are shown in Table 2

Table 2 Model Summary parenting styles with the different levels of suicidal ideations

Parenting style with mild ideations	R	R Square	Adjusted R	Std. Error of the estimate
Authoritarian	.290 ^a	.084	.080	2.105
Authoritative	.372 ^a	.138	.134	2.042
Permissive	.311 ^a	.097	.092	2.091
Neglectful	.271 ^a	.073	.069	2.118
Parenting style with moderate ideations	R	R Square	Adjusted R	Std. Error of the estimate
Authoritarian	.166 ^a	.027	.023	1.813
Authoritative	.295 ^a	.087	.083	1.756
Permissive	.277 ^a	.077	.072	1.766
Neglectful	.264 ^a	.070	.065	1.773
Parenting style with severe ideations	R	R Square	Adjusted R	Std. Error of the estimate
Authoritarian	.240 ^a	.058	.053	1.334
Authoritative	.367 ^a	.134	.130	1.278
Permissive	.393 ^a	.154	.150	1.264
Neglectful	.278 ^a	.077	.073	1.320

In the mild suicidal ideations, the authoritarian registered $R^2=0.084(8.4\%)$. This was an indication that 8.4% of the variations in these levels of suicidal ideations are as a result of the authoritarian parenting. The regression coefficient was $B=0.988(98.8\%)$ hence the effect by which authoritarian unit change causes mild ideations is 98.8%. Given the fact that the R

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value was a positive one, use of authoritarian parenting style directly causes mild suicidal ideations. The neglectful parenting style indicated a weak positive correlation. However, the $R^2=0.073(7.3\%)$ thus 7.3% of the variations in the mild suicidal ideations are as a result of applying this parenting style. the $B=0.869(86.9\%)$ which shows a unit change in use of neglectful typology would lead to the same percentage increase in this level of ideations. at this level of suicidal ideations, authoritarian exhibited effect on suicidal ideations to a greater extent as compared to the neglectful parenting style.

Authoritative and permissive parenting styles had registered moderate negative correlation with authoritative emerging the preferred choice in preventing mild suicidal ideations. With the regression analysis $R^2=0.138(13.8\%)$ and $0.097(9.7\%)$ for authoritative and permissive styles of parenting respectively. therefore 13.8% of the variations are as a result of authoritative parenting while 9.7% of those variations are explained by the permissive typology. Looking at the regression coefficients of the two, authoritative had $B=-0.878(87.8\%)$ whereas the permissive had $B=-1.078(107.8\%)$. This revelation indicates a greater advantage in embracing the authoritative parenting style in comparison with the permissive in the reduction of the mild suicidal ideations. However, where the ideations already exists, then applying aspects of permissive would be a viable and quicker remedy.

In the moderate suicidal ideations, the neglectful parenting emerged as the highest contributor of these ideations. For this typology, $R=0.264$, $R^2=0.070(7\%)$ and $B=0.708(70.8\%)$. It was therefore a revelation that 7% of the variations in the moderate suicidal ideations can be explained by this parenting style. Moreover, a unit change in adopting this way of parenting would lead to 70.8% increase in moderate suicidal ideations among the secondary school students. Following on the same trend was the authoritarian parenting style. The latter had $R=0.166$, $R^2=0.027(2.7\%)$ and $B=0.473(47.3\%)$. Thus 2.7% of the variations in the moderate suicidal ideations are as a result of the application of authoritarian parenting. Similarly, 47.3% increase in moderate suicidal ideations occurs as an effect of a unit embrace of the authoritarian parenting.

The two parenting styles, that is, authoritative with ($R= -0.295$) and Permissive reflecting ($R= -0.277$) both had moderate negative correlation with the moderate suicidal ideations. Therefore, these were the preferred parenting typologies in order to reduce the moderate suicidal ideations. The $R^2=0.087(8.7\%)$ and $B= -0.582(58.2\%)$ was reflected in the authoritative with respect to moderate suicidal ideations. For the permissive parenting $R= -0.277$, $R^2=0.077(7.7\%)$ whereas $B= -0.797(79.7\%)$. Authoritative having the highest value of R emerged as the most preferred in preventing the moderate suicidal ideations. as in the same case of the moderate suicidal ideations, where a remedy is required then at that given time some aspects of the permissive parenting may be the best to be applied.

In the severe suicidal ideations, neglectful parenting had $R=0.278$, $R^2= 0.077(7.7\%)$ and $B=0.568(56.8\%)$. In the case of authoritarian style, the following were exhibited; $R=0.240$, $R^2= 0.058(5.8\%)$ and $B= 0.511(51.1\%)$. The former gives the highest positive correlation between the independent and the dependent variable. Furthermore 7.7% of the variations in the severe suicidal ideation can be accounted for by the neglectful parenting and one unit change in embracing this style affects the severe suicidal ideations by 56.8% as opposed to 51.1% effect caused by a unit change in taking up the authoritarian.

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The other two parenting styles, authoritative and Permissive reflected the following respectively $R = -0.367$, $R^2 = 0.134(13.4\%)$, $B = -0.541(54.1\%)$ and $R = -0.393$, $R^2 = 0.154(15.4\%)$ and $B = 0.846(84.6\%)$. At this level of suicidal ideations, the influence of permissive style reflected a preferred choice for reduction of suicidal ideations. Even though the difference in the two parenting approaches is not exaggerated in terms of the correlation value, it is reflected that one unit change in embracing the permissive style, has a very high percentage of 84.6% as compared to the authoritative that is 13.4%.

Nine students were selected having been identified as extreme cases that is, having serious suicidal ideations from their response to the questionnaires. They were 6 girls and 3 boys. Among these, 5 cases were 1st born, while 2nd born, 3rd born and last born were 1 each. For the age distribution, there were 5 students were between 14-16 years, 2 students were both 17 years and the other 2 were 18 years and 19 years respectively. The students were distributed across the classes with form 2 and form 4 leading with three students each followed by form 3 that had two students and finally form 1 had one student. All these students were Christians of different denominations, however the researcher noted that 4 out of the 9 were Catholics.

All the selected cases stayed with both parents and that brought in another aspect of mixed parenting style where the two parents had similar or different styles. 8 out of them had one parent being either Authoritarian or Neglectful and even in cases where the other parent adopted Authoritative style, these students were still suicidal. Authoritarian and neglectful parents still stood out as the main contributors to suicidal ideations among these students. A student whose father is Authoritarian and the mother neglectful described what leads her to the suicidal ideations as follows:

All the times my parents do not understand me. Since I had depression last year and this year, I am better, they assume it is now completely gone. In fact, they think that I was faking the depression but it is real. Several days I can't sleep completely. They don't understand, they don't trust me even when I try to express what I am going through. They are there but are never present to me. They just keep comparing me to my other siblings.

A male student expressed the frustrations that lead him to the suicidal ideations is the father's parenting approach. He shared similar struggles as many of his colleagues especially on the parent's failure to trust him;

There is a problem between my dad and I. he does not give me a chance to express myself. What he says is final. Even if it hurts me, as long as he gets what he wants, he is okay. Whatever he believes is what he sticks to. In case I am accused of something even in school, he never listens to my version of the story even if I try to explain, he will never trust what I say. And this hurt, this makes me feel useless. He does not listen to me at all and I cannot even discuss issues with him the way my friends do with their dads. Most of the times I feel like giving up because I can never have a fruitful conversation with him.

The aspect of parents not trusting them and not giving room for these students to make decision but rather imposing their own ideas and even wanting to accomplish in their children what they themselves failed to accomplish came up strongly. These students also compare themselves with their peers. A number commented that the parents of their friends trust them and even allow them to go out and socialize while in the case of these individuals

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interviewed, they expressed that their attempt to request such permissions would always be negated. Some could not even dare ask their parents. In these aspect, authoritarian parents contribute more than the neglectful parents in the suicidal ideations. This was in agreement with what came up in the FGDs and the teachers/counselors interviews.

One unique case had both parents as Authoritative and what had made her suicidal was purely school factors from her former school and by the time of the interview, she had gone through this stage and was no longer suicidal. She explained that the school had outrageous strict measures and did not care or even trust when a student was sick. Any sickness was always taken as pretense on the side of the student. The only thing that mattered was academic performance and one would even be totally isolated from other students whenever they had a slight drop in exam performance. The candidate classes had to study until 1 am. This student had attempted suicide by overdose when she felt her parents were not taking her request of transferring her to another school seriously. The rest of the data collected however were in support of the authoritative parenting as contributing positively to preventing suicidal ideations. Although it was not in the objectives of this research to look at school's contribution to these phenomena, with this case, it is important to mention that school factors may also contribute to the suicidal ideations. Teachers and administrators of learning institutions especially the secondary schools should be keen to help curbing the suicidal ideations among secondary schools students as a matter of fact, they play the role of parenting when the students are in school.

Traumatic experiences during childhood came up as an underlying reason for some of these selected group. Nevertheless, these were still connected back by the students to the parenting style, especially the neglectful typology. One who was a victim of rape on two occasions stated that her mother had been neglectful at the first experience when the girl was 8 years and so she did not even notice something had gone wrong and in the second occasion, the mother again is the one who had invited people to the house for a party and did not ensure that the children were protected. Unfortunately for this girl, even the real father neglected her.

This study also found out that whereas the Authoritarian parents directly contribute to the suicidal ideations by the way they handle or relate with their children, the neglectful parents contribute to the same ideations because of the negligence that the children experience. Those with this kind of parenting make the children bring up themselves and make several choices without guidance or role models and some of these choices are the ones that lead them to the suicide ideations. Additionally, the neglectful parents make them to feel unwanted and develop low self-esteem or low self-worth.

DISCUSSION

Studies have been conducted on parenting styles and suicidal behavior among adolescents with similar and conflicting findings reported globally. A survey involving 9th grade students of different schools in Germany with a population of 44610 students in 2007-2008. Among the variables involved, three parental variables which were; mother's and father's warmth in childhood and mother's control in adolescence exhibited association with suicide attempts. The study elevated the embrace of the authoritative parenting style as part of the measures that should be taken to prevent suicide among adolescents (Donath, Graessel, Baier, Bleich & Hillemacher, 2014). This research has a key information for the research at hand except that it was done in a different geographical context.

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Simon Njogu et al. conducted a study in Embu County, Kenya, that investigated parenting styles as predictors of suicidal behavior among selected public secondary school students. Survey method was used and random, systematic and stratified sampling methods were applied at different stages. Total participants were 399 of mixed gender. The study concluded that parenting styles are important in predetermining suicidal behavior of secondary school students and that different styles accounts for different levels of suicidal behavior (Njogu et al., 2017). This finding is very relevant to current study and leads the researcher to investigate whether the same case will apply in Westlands Sub County, Nairobi, Kenya.

A relational analysis of family history's contribution to suicide ideations was conducted in Kenya with a target population of 6258 and a sample size of 300. It comprised of guidance and counselling teachers, teachers. Sub-county officers and secondary school students. Findings revealed that family history had a significant contribution to the frequency of suicide attempts and ideations in the country. From the computed regression analysis, $R=0.848$ which revealed that the family history has a big impact on the variation in the number of suicide attempts and ideations. In the same study, parental upbringing was identified as a major influence on the suicidal attempts and ideations. It noted that 92% of the respondents agreed that parental expectations put a lot of pressure towards suicidal ideations and attempts in public secondary schools in Kenya (Muiru, Thinguri & Macharia, 2014). Even though the study has mentioned aspects of parenting styles, it has left out so much because of dealing with a wide range of family history. The current study will therefore benefit from the findings of the discussed researcher that are related to the research problem at hand.

An examination of the relationship between suicidal behavior and co-existing psychiatric or substance disorders among youths and depressive vis a vis alcohol use disorders in their respective parents was carried out in Kenya. The study involved a sample of 678 respondents including 250 youths, 226 mothers and 202 fathers. A significant statistical association was established between the suicidal behavior and coexisting psychiatric or substance disorder among these youths and depressive and alcohol use disorders in their respective parents.

Another significant contributor to the suicidal behavior that was identified by these researchers is the perceived maternal rejecting behavior. A poor emotional expression is seen as a disconnecting factor between the child and the parent. This disconnection leads to confusion, conflict and frustration in the child which then leads to the development of psychopathology and suicidal behavior in the youth. (Khasakhala, Ndeti & Mathai, 2013). These study findings are very important for the current research problem as it has tackled some core characteristics of some parenting styles and how they contribute to the suicidal ideation among the secondary school students. However, it is lacking in the in-depth study of the relationship between the parenting typologies and the suicidal tendencies. The characteristics discussed mainly fit in the neglectful and authoritative parents. Another identified risk factor is childhood maltreatment. Neglectful parents are more likely to create situations where their children may be maltreated by either house helps or relatives as often has been reported in medias of children being abused or maltreated. Childhood maltreatment is another strong contributor to suicidal tendencies and attempts among the secondary school students. These revolve around issues of sexual abuse, emotional and physical abuse. Brown, Cohen & Smailes, (1999) revealed in their study that a person who experienced

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childhood abuse or neglect was more likely to suffer personality disorders in their earlier adulthood as opposed to those who did not have such experiences. The neglect referred to here by Cohen and Smailes may be as a result of the neglectful parenthood. The same conclusion agrees with a different study that investigated different types of childhood maltreatment in relation to suicidal ideations. This identified only sexual abuse to have a direct predictor of suicide ideation. The emotional and physical abuses were found to have an indirect effect on suicidal thoughts by the nature of the anxiety they cause. Whereas as the child neglect was an indirect predictor because of the perceived social support (Bahk, Jang, Choi & Hwan Lee, 2017). This revelation may also explain the same disorder in the secondary school students that is, in fact, consistent with the description of the personality disorders given in the DSM-5 section ii (APA, 2013). The paranoid personality disorder, schizophrenic, antisocial personality disorder, and borderline personality disorder among others have a lot of connection to some factors that lead to suicidal tendencies and attempts.

A different study done by Khan, (2017) supported the fact that violence in homes was a major catalyst to suicide and suicidal tendencies among secondary school students. The study was done in Hunza using in-depth interviews of 30 respondents. It investigated the causes of suicide causes and consequences among the teenagers of Hunza. The major causes for suicide were identified as: study pressures, parent gap, and modernization, both physical and verbal violence in homes. Further, the notes traced from those who had committed suicide revealed that in various cases, the victims had perceived suicide as a form of sacrifice and revenge, Khan, (2017). This is a very informative data for the current study, however it was done in a different geographical area as well as it did not look at the contribution of parenting styles on the suicidal ideations among secondary school students.

Parenting styles influence secondary school students in wide range of perspectives and the sum of these can easily influence suicide and suicide ideations. A descriptive research was used to establish how parenting styles influence personality dimensions of adolescents in secondary schools in Mombasa County. A sample of 320 out of a population of 6440 participated. The findings revealed that parenting styles influence personality dimensions. Authoritative was rated at 41% of positive personality dimension while indulgent/permissive parenting style had a 28.2% positive personality traits results. This study brought up an interesting finding about the authoritarian parenting style, it advocated that it should be adopted by parents of the adolescents as it establishes rules and guidelines, demonstrates power and thus builds self-discipline that finally generates positive personality (Kilonzo, 2017) this latter finding is contrary to several studies that tend to discourage the authoritarian typology. The traits considered in the study were; self-efficacy, self-esteem and identity development and the personality dimensions considered included neuroticism which is identified by outrageous anger, anxiety, irritability, emotional instability, self-consciousness and depression. Moreover, the neurotics respond poorly to environmental stress and may interpret ordinary situations as threatening and minor frustrations can be hopelessly overwhelming for them (Widiger & Oltmanns, 2017). These traits and dimensions such as neuroticism have been associated with suicidal tendencies in the youth. A survey done with a sample size from five urban private secondary schools involved 130 respondents. The revelation of the study was that adolescents' conflicting relationships with parents, traumatic life experiences and broken relationships were major psychosocial risk factors for depression in Nairobi County. (Priscilla Mugambi & Ciriaka Gitonga, 2015). These are some of the issues generated from home and that finally affects the secondary school student in general life dealings. Moreover, these study findings indicate how the parenting style a youth undergoes can affect even how she/he relates with peers thus

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behaviors like self-isolation may be as a result of this upbringing. Furthermore, the isolation may be an indicator of depression thus lead to suicide or suicidal tendencies, a factor that this research did not look into. A study conducted by Muiru, Thinguri & Macharia, (2014) supports the fact that parental upbringing could contribute to suicidal attempts and ideations. Their findings also concluded that the family history had a significant contribution to the prevalence of suicide attempts and ideations in Kenyan secondary schools (Muiru et al., 2014). Though this study considered secondary schools in Kenya, it was not based in Westlands Sub County, neither did it dwell on the contribution of parenting styles to the suicidal ideations among these students.

CONCLUSION

Suicide is a threatening global problem and handling of suicidal ideations should be considered as a matter of urgency. It has been established in this study that there is a significant relationship between Parenting styles and suicidal ideations. Moreover, a positive correlation was reflected between suicidal ideations with Authoritarian and neglectful parenting. The study therefore recommends the adoption of Authoritative and a blend of both authoritative and aspects permissive parenting styles in situations that the latter is necessitated by circumstances as it was established in this study that permissive stood out in reducing the severe suicidal ideations. Programs that offer training on healthier parenting ways to parents and constantly encouraging parents on taking parenting role seriously and as a matter of commitment would go a long way in reverting the trend of suicidal ideations among secondary school students.

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Conflict of Interest

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