

Awareness of Adolescents Regarding Poisoning Suicidal Attempts

¹Asmaa Nagah Abd- Elrazek, ²Howyida Sadek Abed El Hameed, ³Hedya Fathy Mohy El-Deen and ⁴Shimaa Gamal El-Dein Ibraheim

(1) Nursing Supervisor in Benha University hospitals, (2) Professor of Community Health Nursing- Faculty of Nursing, Benha University-Egypt, (3&4) Assistant Professor of Community Health Nursing- Faculty of Nursing, Benha University-Egypt.

Abstract

Background: Suicide is death caused by injuring oneself with the intent to die. Poisoning is injury or death due to swallowing, inhaling, injecting various drugs, chemicals, venoms or gases. **Aim of the study:** Assessing awareness of adolescents regarding poisoning suicidal attempts. **Research design:** A descriptive research design was used. Setting: The study was conducted in Poisoning Control Unit at Benha University Hospitals. **Subjects:** A convenience sample included (150) of studied adolescents. **Tools of data collection:** Two tools were used; **Tool (1):** A structured interviewing questionnaire to assess personal characteristics data of adolescents, knowledge of adolescents and reported practices of adolescents regarding poisoning suicidal attempts and **Tool (2):** Attitude of adolescents regarding poisoning suicidal attempts. **Results:** 13.3% of the studied adolescents had good total knowledge, 24.7% of the studied adolescents had accepted practices and 44% of them had positive attitude. **Conclusion:** There were highly statistical significant correlation between the studied adolescents' total knowledge, practices and total attitude ($P = 0.001$). **Recommendations:** Providing health education program to adolescents about early detection, risk factors and first aids treatment regarding poisoning suicidal attempts.

Keywords: Adolescents, Attempts, Awareness, Poisoning, Suicide

Introduction

Adolescence is a transitional stage of physical, psychological and social development that generally occurs during the period from puberty to adulthood typically corresponding to the age of majority. Adolescence is usually associated with the teenage years, but its physical, psychological or cultural expressions may begin earlier or end later. Puberty typically begins during preadolescence, particularly in females. Some definitions start as early as 10 and end as late as 30. The World Health Organization (WHO) definition officially designates adolescence as the phase of life from ages 10 to 19 (Miller et al., 2021).

Adolescence is very difficult stage. Adolescents during this stage are at a very

delicate crossing, sometimes they consider themselves as adult and consider themselves capable of thinking and doing everything and sometimes consider as child and depend on other. Need of adolescents increase rapidly during adolescence. Adolescence demand good food, clothes, and other facilities at home and study and sports facilities in schools. Aspirations also increase and there is no limit of aspiration. Adolescence want to get all that they have not got. In case of non-fulfillment of needs and aspirations, adolescents develop inferiority complex, which makes behavior negative (Goldstick et al., 2021)

Suicide is a growing public health concern globally, and suicidal behavior encompasses a range of outcomes, including suicidal ideation, impulses, plans, attempts,

and completed suicide. Recently, suicide has been among the top five mental health issues facing college undergraduates worldwide. It is most prominent factor of mortality among young adults, and the majority of suicides occur in low- and middle-income countries (Martínez et al., 2022).

Suicide was the eleventh leading cause of death overall in the United States, claiming the lives of over 49,400 people. Suicide was the second leading cause of death among individuals between the ages of 10-14 and 25-34, the third leading cause of death among individuals between the ages of 15-24, and the fourth leading cause of death among individuals between the ages of 35 and 44. There were nearly two times as many suicides (49,476) in the United States as there were homicides (24,849) (Saied et al., 2022).

Suicidal behavior is closely linked to psychological discomfort, mood disorders, trauma exposure, and a history of mental illness in the family. Scholastic difficulties and social obligations of university life, along with a decline in parental support and supervision, are also identified as suicide triggers for undergraduates (Bassiony et al., 2022).

It is equally important to determine the methods of suicide by which patients try to end lives. Identification of this information could help prevent the future actions of these vulnerable patients. Most of the suicide is done by using hanging, firearms and poisoning. Suicidal attempts by poisoning done by psychotropic drugs, analgesics, antidepressants, antihistamines, psychoactive drugs, and sedative-hypnotics. The situation is somewhat different in developing countries because pesticides are the most widely used method of suicide (Curtin, et al., 2022)

Poisoning is injury or death due to swallowing, inhaling, touching or injecting various drugs, chemicals, venoms or gases.

Many substances such as drugs and carbon monoxide are poisonous only in higher concentrations or dosages. And others such as cleaners are dangerous only if ingested. Adolescence is particularly sensitive to even small amounts of certain drugs and chemicals (Cai, et al., 2022).

Poisoning symptoms can mimic other conditions, such as seizure, alcohol intoxication, stroke and insulin reaction. Symptoms of poisoning may include: Burns or redness around the mouth and lips, breath that smells, like chemicals, such as gasoline or paint thinner, vomiting, difficulty, breathing, drowsiness, confusion or other altered mental status (Albano, et al., 2022).

The first aids management for the poisoning suicidal attempts include: removing anything remaining in the person's mouth. If the suspected poison is a household cleaner or other chemical, read the container's label and follow instructions for accidental poisoning. Poison on the skin; Remove any contaminated clothing using gloves. Rinse the skin for 15 to 20 minutes in a shower or with a hose. Poison in the eye. Gently flush the eye with cool or lukewarm water for 20 minutes or until help arrives. Button batteries, Get the person into fresh air as soon as possible and immediately take the child for an emergency X-ray to find its location. If the battery is in the esophagus, it will have to be removed. If it has passed into the stomach, it's usually safe to allow it to pass on through the intestinal tract. If the person vomits, turn the person's head to the side to prevent choking. Begin CPR if the person shows no signs of life, such as moving, breathing or coughing (Mohamed et al., 2024)

Community health nurses play an important role regarding poisoning suicidal attempts by engaged families and community action for preventing poisoning suicidal re-attempts was developed as an approach to

suicide prevention in low-resource settings to address these systemic, societal, and individual level factors (**Mohamed et al., 2024**).

Significance of the Study:

In the Middle East Region, including Egypt, have witnessed an increase in suicide rates in recent years. Suicide death rates in Egypt have raised dramatically reaching 3 per 100,000 people in 2019, and 2584 suicides were officially reported in 2021. Moreover, the most common causes of suicide in Egypt are social factors, such as bullying, violence, and family disintegration, bullying may be a major contributor, especially due to its spreading on social networking sites, which can expose victims to psychological pressures and loss of self-confidence, causing them to commit suicide to relieve such psychological fatigue. Family disintegration and violence within the family, especially when raising children, can also be factors contributing to suicide (**Saied et al., 2022**). The triad of love, poverty and unemployment constitute the main factors for youth suicide in the villages of Egypt. Suicide in certain villages represents a phenomenon that requires study. Some even describe it as “fashion”,. So this study was important to improve knowledge, attitude and reported practices for adolescents regarding poisoning suicidal attempts (**El-mahdi et al., 2021**)

Aim of the Study

This study aimed to assess awareness of adolescents regarding suicidal attempts.

Research questions:

- What is the level of knowledge of adolescents regarding poisoning suicidal attempts?
- What is reported practices level of adolescents regarding poisoning suicidal attempts?
- What is attitude of adolescents regarding poisoning suicidal attempts?
- Are there correlations between knowledge, reported practices, attitude of adolescents regarding poisoning suicidal attempts?

Subjects and Method

Study design: A descriptive study would be used.

Research Setting: This study was conducted in Poisoning Control Unite at Benha University Hospitals which there is high flow of patients with capacity of 5 beds for patients. It works 24 hours per day, 7days per week.

Sample type: A convenience sample would be constituted the study subject

Sample size and technique: The number of poisoning suicidal attempts patients according to last year (2022) were (600) 200 of them were adolescents. The sample would be conducted at year (2023-2024) (150) and chosen according to the following inclusion criteria:

- 1-Average age of the adolescents is between 12-21years
- 2- Adolescents able to communicate relevantly: willing and agreeing to participate in the study.

Tools of data collection:

Two tools were used to collect data.

Tool (1): A structured interviewing questionnaire. It was written in simple clear Arabic language. It composed of the following five parts:

Part I: Personal characteristics data of adolescents which included six items (age, sex, educational level, job, marital status and residence).

Part II: Knowledge of adolescents regarding poisoning suicidal attempts which included ten closed ended questions

The scoring system for adolescents' level of knowledge was calculated as the

follows: (2) score for correct complete answer, (1) score for incomplete correct answer and (0) score for don't know. For each section of knowledge, the score of the points was summed up and total divided by the number of the points, giving a mean score for the part. These score were converted into a percent score.

The total knowledge score =20 points it was considered good if the score of total knowledge equal >75 % and more (>15 points), while considered average if it equals 50<75 % (10<15 points), and considered poor if it is equal <50% (<10 points).

Part III: Reported practices of adolescents regarding poisoning suicidal attempts. It was adopted from (Kasemy et al., 2022) and modified by the researchers which included three categories included physical, psychological and social reported practices. Physical reported practices included seven items (talks about suicide, such as saying things like I'm going to kill myself, collects means and tools for suicide, such as storing pills or medicines, consumes a lot of alcohol or drugs, eats larger amounts of food than usual, eats smaller amounts of food than usual, takes longer hours to sleep than necessary and sleeps less hours than necessary).

Psychological reported practices included four items (mood swings such as feeling optimistic one day and frustration the next day, affected by electronic games, horror movies and violence, personality changes or sensation towards things, feels hopeless and frustrated about a situation).

Social Practices included five items (Says goodbye to people like he's never seen them before, isolates and stays away from others and those around him, withdraws from social, sports and cultural activities, neglects academic performance, finds it difficult to

communicate within family members). Scoring system:

The scoring system for adolescents' reported practices was calculated as the follows: (0) for always, (1) for sometimes, (2) for rarely. The total score=32 points

The total score reported practices level were considered accepted practices if the score of total reported practices equals <60 % =<19 and considered un accepted practices if the score of total reported practices equals >75% =>21

Tool II: Attitude of adolescents regarding poisoning suicidal attempts. It was adopted from O'Mara et al., (2012) and modified by the researchers using three points likert scale related to negative and positive thoughts regarding poisoning suicidal attempts which included 14 items

Scoring system:

The scoring system for adolescents attitude was calculated as the following: (2) score for degree (1) score for slightly agree (0) score for disagree. The score of items was summed-up and the total divided by number of items, giving a mean score. The total attitude score of adolescent= (28 point) was considered positive if score of total attitude equals >60% (>14 point) while consider negative if it is <60% (14 point).

Administrative approval

Before starting the study, a written official letter was obtained from the Dean of the Faculty of Nursing, Benha University and delivered to Director of Benha University hospital in Benha City, in order to obtain their approval for conduction of the study after explaining its purpose. At the time of data collection, a verbal agreement was taken from every patient in the study after a clear and proper explanation of the aim of the study to gain their cooperation.

Content validity:

Content of validity of the tools was done by five of Faculty's Staff Nursing experts includes four from the Community Health Nursing Specialty Faculty of Nursing Benha University and one from the Psychiatric Health Nursing Specialty Faculty of Nursing Benha University who reviewed the tools for clarity, relevance, comprehensiveness and applicability and give their opinion.

Reliability of tools:

Reliability of tools was applied by the researcher for testing the internal consistency of the tools, by administration of the same tools to the same subjects under similar condition on one or more occasion. Answers from repeated testing were compared (test-retest reliability). The reliability was done by Cronbachs Alpha (**Cho, 2020**) Coefficient test. The internal consistency of knowledge was 0.929 while reported practices were 0.883 and attitude was 0.831.

Pilot study:

The pilot study was conducted to assess tools clarity and applicability. It has also served in estimating the time needed for filling the tool of the study. It has also served in determining the needs of adolescents which has been taken in consideration during developing the study. It represented 10% of the sample (15 adolescents). No modification was done, so the adolescents participants involved in the pilot study were included in the main study

Ethical Considerations:

The research approval to carry out this study was obtained from the Scientific Research Ethics Committee, Faculty of Nursing, Benha University concerned the title (REC.CHN.P91). All ethical issues were assured; approval and an informed oral consent from all study participants were obtained for the fulfillment of the study. Participants were also reassured that all

information gathered would be confidentiality and the study will not cause any harmful effect. Ethics, values, cultural and beliefs was respected. The participants had the right to withdraw from the study at any time without giving any reasons

Field work

The study was carried out through period of one year from the beginning of November 2023 to beginning of November 2024, three days per week (Saturday, Tuesday and Thursday). The researchers visited the Poisoning Control Unit at Benha University Hospitals from 9 A.M.-12 P. M. Adolescents were included in the study were as group consisted of 4-5 Adolescents in each session The time of interviewing each group between 30-45 minutes. The interview questionnaire conducted by the interview for data collection in the selected setting after getting the necessary official permission; the researchers introduced themselves and asked the questionnaire using simple Arabic language

Statistical analysis:

Data were coded and transformed into specially designed formed to suitable for computer entry process. Data were enter and analyzed by using SPSS (Statistical package for social science) version 22.. Quantitative data were presented by mean (\bar{x}) a standard deviation (SD) qualitative data were presented in the form of frequency distribution tables, number and percentage. It was analyzed by chi-square test (χ^2) was used to examine the relation between it. However, if an expected value of any cell in the table was less than 5, Fisher Exact test was used. Level of significance was set as P value <0.05 for all significant tests.

Significance level was considered as follows:

******Highly statistically significance= $P < 0.01$

***** Statistically Significant= $P < 0.05$

Not Significant = $P > 0.05$

Awareness of Adolescents Regarding Poisoning Suicidal Attempts

Results:

Table (1): Shows that; 52.7% of the studied adolescents aged from 15 to less than 18 years old with mean and standard deviation was 16.77 ± 3.11 . 72.7% of them were female, 40.7% of them had basic education (primary and preparatory). While 86 % of them don't work, 79.3% of them weren't married. Regarding residence; 66% of them were lived in rural regions

Figure (1): Illustrates that; 13.3% of the studied adolescents had good total knowledge level and 49.40% had average knowledge level and the 37.30% had poor knowledge level.

Table (2): Shows that; 25.3% of the studied adolescents had accepted of reported

psychological practices and 46. of studied adolescents had unaccepted of reported Physical Practices

Figure (2): Illustrates that; 56% of the studied adolescents had negative attitude and 44% of them had positive attitude regarding poisoning suicidal attempts.

Table (3): Shows that; there were positive statistically significant correlations between the studied adolescents' total knowledge, total reported practices and total attitude ($P < 0.05$).

Table (1): Frequency distribution of studied adolescents regarding their personal characteristics (n=150)

Personal characteristics data of adolescents	No.	%
Age/ years		
12 > 15	41	27.3
15 > 18	79	52.7
18 > 21	30	20.0
Mean \pm SD	16.77\pm3.11	
Sex		
Male	41	27.3
Female	109	72.7
Education		
Cannot read and write	21	14.0
Basic education (primary-preparatory)	61	40.7
Intermediate education	58	38.7
University education	10	6.7
Job		
Work	21	14.0
Don't work	129	86.0
Marital status		
Single	119	79.3
Married	31	20.7
Residence		
Rural	99	66.0
Urban	51	34.0

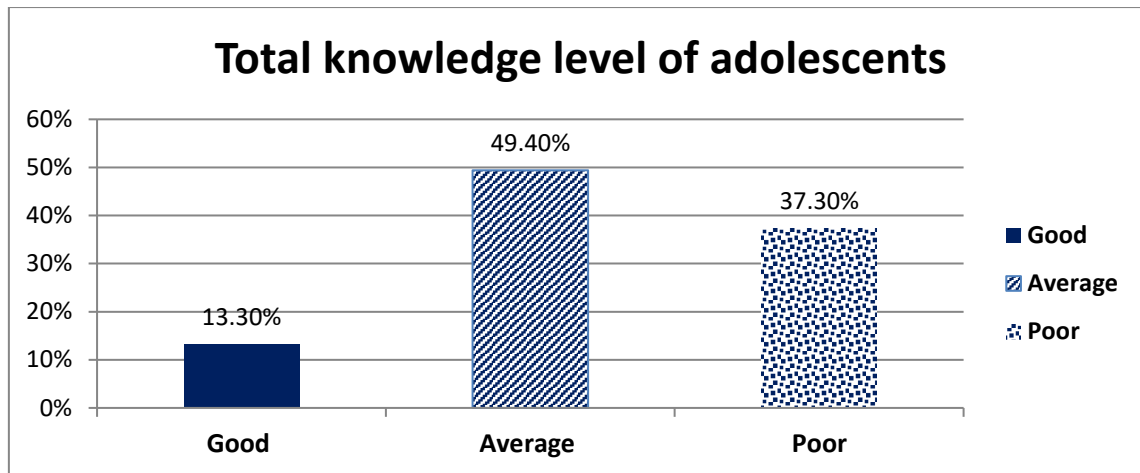


Figure (1): Total knowledge of studied adolescents regarding poisoning suicidal attempts (n=150).

Table (2): Total reported practices of studied adolescent regarding poisoning suicidal attempts (n=150)

Total practices for suicide		No	%	X ²
Physical Practices	accepted	69	46.0	.000**
	unaccepted	81	54.0	
Psychological Practices	accepted	38	25.3	.000**
	unaccepted	112	74.7	
Social Practices	accepted	29	19.3	.000**
	unaccepted	121	80.7	

**** High significant equals $p < 0.001$**

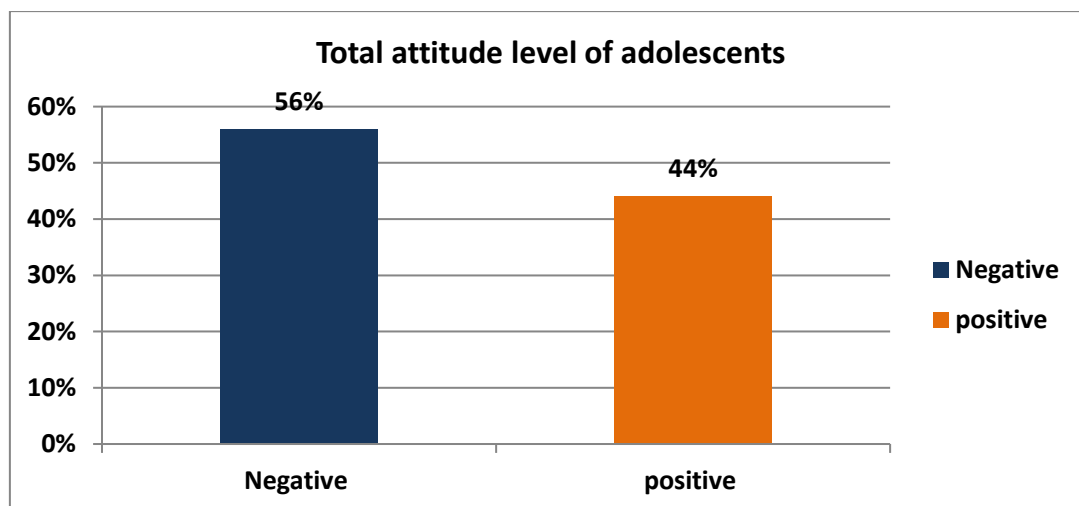


Figure (2): Percentage of total attitude level of studied adolescents regarding poisoning suicidal attempts (n=150).

Table (3): Correlation between total knowledge, reported practices and attitude among studied adolescent regarding poisoning suicidal attempts (n=150).

Adolescents	Total Knowledge	r	Total Knowledge	Total Practices	Total Attitude
		1		.188	.111
	Total Practices	P-value		.021*	.178
			.188	1	.023
	Total Attitude	P-value	.021*		.779*
			.111	.023	1
			.178*	.779*	

Statistically Significant =*P <0 .05

Not Significant= P >0 .05

Discussion

Suicide rates among adolescents increased over the past few decades. As past suicidal behavior is the most significant risk factor associated with future suicidal behavior and death, it is crucial to improve intervention for young people who have been suicidal (Simes et al., 2024). Despite the greatest onset and increased frequency of suicidal or self-harm behavior occurring in adolescence, most youth affected do not receive professional care. Families can play an integral role in supporting adolescents through the hospitalization and school reentry process (Babeva et al., 2020).

Concerning the studied adolescents' personal characteristics, the current study revealed that more than half of the studied adolescents aged from 15 to less than 18 years old with mean and standard deviation was 16.77 ± 3.11 . This may be due to the developmental and psychological changes that adolescents experience during this critical age range, as they often face heightened emotional sensitivity, identity struggles, and social pressures.

This result was in accordance with a study carried out by Mondol, (2024), entitled "Management of suicidal attempts among teenagers: a family-based approach" in Dhaka (n=6) and reported that the mean age of the

adolescents was 16.1 with a standard deviation of 1.1. On the other hand, Cloutier et al., (2022) (n=138) who conducted study about "Building resilience and attachment in vulnerable adolescents: A brief group intervention for adolescents with mild-to-moderate suicidal ideation and their caregivers", in Canada, and found that the mean and standard deviation of age among the studied adolescents was 14.5 (1.0) years old

As well, the current study demonstrated that nearly three quarters of the studied adolescents were female and slightly more than two fifths of them had basic education (primary and preparatory). This result was compatible with Inscoe et al., (2022), who applied a study about "Trauma-informed care for youth suicide prevention: A qualitative analysis of caregivers' perspectives" in USA (n=13) and found that majority of the studied adolescents were females. The high percentage of female adolescents in this study might be due to the higher prevalence of emotional and psychological distress observed among adolescent females, which can make them more vulnerable to suicidal behaviors. Females are often more likely to internalize stress and express emotional struggles through self-harming behaviors.

In addition, the present study showed that most of the studied adolescents didn't work

and more than three quarters of them weren't married. These results were congruent with a study carried out by **Ati & Kurian, (2021)** entitled "Family-based therapy for adolescents with suicidal behavior: Therapy for adolescents with suicidal behavior", in Indonesia (n=341) and found that the highest percentage of the studied adolescents were unemployed and unmarried. Conversely, **Mubarak et al., (2020)** who study entitled "Suicidal ideation in an Egyptian sample of hospitalized patients with acute psychosis" Egypt (n=150) and reported that more than two thirds of the studied adolescents were working

Besides, the current study indicated that about two thirds of the studied adolescents lived in rural regions. This result was in harmony with study carried out by **Mathew et al., (2021)** who carried out study about "Exploring the family factors associated with suicide attempts among adolescents and young adults" in India (n=22) and reported that most of the studied adolescents resided in rural areas. In contrast, a study carried out by **Andrei et al., (2024)** entitled "Non-suicidal self-injury patterns in adolescents from a Romanian child psychiatry inpatient clinic" in Romania, (n=22) and stated that the largest proportion of the studied participants were urban residents.

Concerning the studied adolescents' total knowledge about suicide, the current study portrayed that less than one fifth of the studied adolescents had good total knowledge level. This finding was in harmony with a study conducted by **Simes et al., (2024)** about "Adolescent, caregivers, and therapists' experiences of youth and family suicide intervention" in Sydney, and reported that more than half of the studied adolescents had poor level total of knowledge.

Regarding studied adolescent total reported practices items, the current study

highlighted that about one quarter of the studied adolescents accepted total psychological practices. As well, most of them had unaccepted total psychological practices.

This result was consistent with **Dai, (2022)** who carried out a study "Family Involvement in School-Based Suicide Prevention Program" Ne of the studied adolescents accepted total psychological practices w York (n=60) and reported that there was two third of the studied adolescents had unsatisfactory total psychological practices. In the same line, **Czyz et al., (2021)** who studied "Adaptive intervention for prevention of adolescent suicidal behavior after hospitalization" in USA, (n=80) affirmed that most of the studied adolescents had unsatisfied psychological practices regarding suicide.

According to the studied adolescents total attitude level, the current study displayed that more than two fifths of the studied adolescents had positive attitude. This result was in accordance with a study carried out by **Simes et al., (2024)**, who reported that most of adolescents had positive attitude regarding poisoning suicidal attempts

Pertaining correlation between total knowledge, reported practices and attitude among studied adolescent, the current study highlighted that there were positive statistically significant correlations between the studied adolescents' total knowledge, total reported practices and total attitude. This might be attributed to interconnection between knowledge, practices, and attitudes, as improved awareness and understanding often translate into better practices and more negative attitudes regarding poisoning suicidal attempts

Conclusion:

Average age of studied adolescents from 15 to less than 18 years old, one fifths of the

studied adolescents had good total knowledge; quarter of the studied adolescents had accepted practices. More than two fifth of the studied adolescents had positive attitude. There were positive statistically significant correlations between the studied adolescents' total knowledge, total reported practices and total attitude ($P < 0.05$).

Recommendations:

Providing health educational program to adolescents about early detection, risk factors and first aids treatment regarding poisoning suicidal attempts

Recommendation for further study:

Exploring awareness of adolescents regarding poisoning suicidal attempts among large size and another setting

References:

- Albano, G. D., Malta, G., La Spina, C., Rifioreto, A., Provenzano, V., Triolo, V. & Argo, A. (2022).** Toxicological findings of self-poisoning suicidal deaths: a systematic review by countries. *Toxics*, 10(11), 654.
- Andrei, L. E., Efrim-Budisteanu, M., Mihailescu, I., Buică, A. M., Moise, M., & Rad, F. (2024).** Non-suicidal self-injury (NSSI) patterns in adolescents from a Romanian child psychiatry inpatient clinic. *Children*, 11(3), 297.
- Ati, N. A. L., & Kurian, M. (2021).** Family-based therapy for adolescents with suicidal behavior: Therapy for adolescents with suicidal behavior. *Promotion and Prevention in Mental Health Journal*, 1(2), 56-63.
- Babeva, K. N., Klomhaus, A. M., Sugar, C. A., Fitzpatrick, O., & Asarnow, J. R. (2020).** Adolescent suicide attempt prevention: Predictors of response to a cognitive-behavioral family and youth centered intervention. *Suicide and Life-Threatening Behavior*, 50(1), 56-71.
- Bassiony, M. M., Seleem, D., Khalil, Y., & Saad, A. (2022).** Suicide risk and ideation among patients with substance use disorders in Egypt. *Journal of Substance Use*, 27(6), 667-673.
- Cai, Z., Junus, A., Chang, Q., & Yip, P. S. (2022).** The lethality of suicide methods: A systematic review and meta-analysis. *Journal of Affective Disorders*, 300, 121-129.
- Cho, E., (2020):** A comprehensive review of so-called Cronbach's alpha. *Journal of Product Research*, 38(1) Pp: 9-20.
- Cloutier, P., Gray, C., Sheridan, N., Silverman, A., Cappelli, M., Zemek, R., ... & Kennedy, A. (2022).** Building resilience and attachment in vulnerable adolescents (BRAVA): A brief group intervention for adolescents with mild-to-moderate suicidal ideation and their caregivers. *Child and Adolescent Mental Health*, 27(4), 343-351.
- Curtin, S. C., Brown, K. A., & Jordan, M. E. (2022).** Suicide rates for the three leading methods by race and ethnicity: United States, 2000–2020.
- Czyz, E. K., King, C. A., Prouty, D., Micol, V. J., Walton, M., & Nahum-Shani, I. (2021).** Adaptive intervention for prevention of adolescent suicidal behavior after hospitalization: a pilot sequential multiple assignment randomized trial. *Journal of Child Psychology and Psychiatry*, 62(8), 1019-1031.
- Dai, E., (2022).** Family Involvement in School-Based Suicide Prevention Program (Doctoral dissertation, Doctoral dissertation, New York University).
- El-Mahdi, M., Radwan, M., Soliman, F.(2021).** Suicidal attempts among children and teenagers in Egypt 2(34) July 2021 pp. 135-172
- Goldstick, J. E., Cunningham, R. M., & Carter, P. M. (2022).** Current causes of death in children and adolescents in the United States. *New England Journal of Medicine*, 386(20), 1955-1956.
- Inscoc, A. B., Donisch, K., Cheek, S., Stokes, C., Goldston, D. B., & Asarnow, J. R., (2022).** Trauma-informed care for youth

suicide prevention: A qualitative analysis of caregivers' perspectives. *Psychological trauma: theory, research, practice, and policy*, 14(4), 653.

Kasemy, Z. A., Sharif, A. F., Amin, S. A., Fayed, M. M., Desouky, D. E., Salama, A. A., & Abdel-Aaty, N. B. (2022). Trend and epidemiology of suicide attempts by self-poisoning among Egyptians. *PLoS One*, 17(6), e0270026.

Martínez, G., Jiang, T., Keyes, K. M., & Gradus, J. L. (2022). The recent rise of suicide mortality in the United States. *Annual Review of Public Health*, 43(1), 99-116.

Mathew, A., Saradamma, R., Krishnapillai, V., & Muthubeevi, S. B. (2021). Exploring the family factors associated with suicide attempts among adolescents and young adults: a qualitative study. *Indian Journal of Psychological Medicine*, 43(2), 113-118.

Miller, L., & Campo, J. V. (2021). Depression in adolescents. *New England Journal of Medicine*, 385(5), 445-449.

Mohamed A., Z., Mahmoud S., E., & Mohamed A. F., (2024). Effect of Educational Program on Nurses Role Regarding First Aid for Patients having Toxic

Aluminum Phosphate Suicide. *Egyptian Journal of Health Care*, 15(4), 643-652.

Mondol, M. A. (2024). Management of suicidal attempts among teenagers: a family-based approach (Doctoral dissertation, © University of Dhaka).

Mubarak, A. A., Gad, E. S., Saada, S., Ftouh, M., & Seleem, M. A. (2020). Suicidal ideation in an Egyptian sample of hospitalized patients with acute psychosis. *Psychosis*, 12(3), 212-221.

O'Mara, R. M., Hill, B. and Cheryl. A., (2012). Adolescent and Parent Attitudes toward Screening for Suicide Risk and Mental health problems in the Pediatric Emergency Department

Saied, A. A., Shah, J., Dean, Y. E., Tanas, Y., Motawea, K. R., Hasan, W., & Aiash, H. (2022). Suicide prevention in Egypt. *The Lancet Psychiatry*, 9(9), e41.

Simes, D., Shochet, I., Murray, K., & Sands, I. G. (2024). Adolescent, caregivers, and therapists' experiences of youth and family suicide intervention: A qualitative study. *Psychotherapy Research*, 1-19.

وعى المراهقين تجاه محاولات الانتحار عن طريق التسمم

اسماء نجاح عبد الرازق- هويدا صادق عبد الحميد- هدية فتحي محيي الدين- شيماء جمال الدين إبراهيم

الانتحار هو السبب الرئيسي الثاني للوفاة بين السكان الذين تتراوح أعمارهم بين ١٥ و ٢٩ عاما، ومعدلات الوفيات فيه أكثر من جرائم القتل والحرب في كل عام. **الهدف من الدراسة:** تقييم وعى المراهقين فيما يتعلق بمحاولات الانتحار عن طريق التسمم. **تصميم الدراسة:** تم استخدام التصميم الوصفي لإجراء هذه الدراسة. **مكان الدراسة:** وحده مكافحه السموم بمستشفيات بنها الجامعية. **عينة الدراسة:** أجريت هذه الدراسة علي عينة ملائمة مكونة من ١٥٠ من المراهقين الذين لديهم محاولات انتحاريه عن طريق التسمم ويخضعون للعلاج في وحدة مكافحة التسمم في مستشفيات جامعة بنها. **أدوات جمع البيانات:** تم استخدام أداتين: **الأداة الأولى:** استمارة استبيان المقابلة المنظم لتقييم الخصائص الشخصية للمراهقين، معلومات والممارسات المبلغ عنها للمراهقين تجاه محاولات الانتحار عن طريق التسمم **والأداة الثانية:** اتجاه المراهقين تجاه محاولات الانتحار عن طريق التسمم. **النتائج:** كشفت النتائج عن أقل من ١٣,٣ % من المراهقين المشاركين في البحث لديهم نسبة جيدة من المعلومات, ٢٤,٧ % من المراهقين المدروسين لديهم ممارسات مبلغ عنها مرضيه و ٤٤ % من المراهقين المدروسين لديهم موقف ايجابي تجاه محاولات الانتحار عن طريق التسمم. **الاستنتاج :** وقد لخصت النتائج هناك فروق إيجابية ذات دلالة إحصائية في العلاقات بين إجمالي معلومات المراهقين وإجمالي الممارسات المبلغ عنها والاتجاهات. **التوصيات:** وأوصت الدراسة إلي تقديم برامج تثقيف صحي للمراهقين حول مخاطر الانتحار واكتشافه المبكر، والاسعافات الأولية اللازمة فيما يتعلق بمحاولات الانتحار عن طريق التسمم.