

BÖLÜM 11

Çocuk ve Ergenlerde İntihar

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GİRİŞ

Dünya sağlık örgütü (DSÖ) verilerine göre 2019 yılında 15-29 yaş arasında yaklaşık 160,000 kişi intihar ederek hayatını kaybetmiştir (1). Bundan daha fazla sayıda intihar girişiminde bulunan ve intihar fikirleri olan ergen bulunmaktadır. Hem aile hem de arkadaş çevresinde intihar hakkında konuşmak zor olsa dahi intihar dalgaları oluşturabilmesi nedeniyle bu durumun etkileri düşünüldüğünden daha büyütür (2,3). İntihar ve benzeri davranışlar daha hayatının erken yıllarda olan çocuk ve ergenlerde getirdiği mortalite ve morbidite açısından üzerinde ciddiyetle çalışılması gereken bir konudur.

Çocukluktan ergenliğe ve ergenlikten erişkinliğe beynin sürekli değişen yapısı, erişkinlerden farklı sosyal ve ailesel dinamikleri, problem çözme becerilerinin gelişmeye devam etmesi ve hayat tecrübelerinin yetersizliği gibi durumların her biri çocukların ve ergenlerdeki intihar ve benzeri davranışları erişkinlerden farklı kılmaktadır (4).

İntihar girişimleri sonrasında oluşturulabilecek destek ve tedavi ortamı ergenin psikopatolojilerinin, intihara yönelik düşüncelerinin, yeniden intihar riskinin artıp azalmasında etkili olacaktır. Yapılan bir takip çalışmasında ergenlerin teda-

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onu intihar fikrine daha yakın hissettirebilir. Yaşamaya dair nedenler de koruyucu olarak değerlendirilebilmektedir. İntihar davranışları ile yaşamak için nedenler arasındaki uyumsuzluk gösterilebilir, bu şekilde intihar düşüncelerinde azalma gözlemlenebilir.

Tekrar girişimin engellenmesinde riskler değerlendirildikten sonra yatis planı veya ergenin yalnız kalmaması için planlamalar yapılması gerekmektedir. Umutsuzluk ve öfke takip altında tutulmalıdır.

Ergen manipülatif girişimde bulunduğuna dair ima yapmak gerekmektedir. İntihar girişimi “problem çözmede yaşanan bir sorun şeklinde yeniden sınıflandırılmalı, problem çözme becerilerini arttırmaya yönelik müdahaleler yapılmalıdır (97).

SONUÇ

İntihar ergenlerde en sık görülen ölüm nedenlerinden birisi olması ve kişilerin beklenen yaşam sürelerini ciddi anlamda azaltması nedeniyle önemli bir tablodur. Bu dönemde sağlanacak tedavi ve sosyal destegin genç erişkinlik, hatta daha da ilerleyen dönemlerde daha az intihar girişimi ile ilişkisi olduğu ortaya konmuştur (98). Hem intiharın sıklığını azaltmak için kullanılacak önlem çalışmalarında hem de tedavi amaçlı yaklaşımların başarılarının artmasında yeni çalışmaların gerekliliği çok net görülmektedir.

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