

Young peoples' help-seeking for suicidal thoughts: Implications for GPs*

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Background:

GPs have a vital role in the identification of suicidal young people, intervention, and where necessary, referral to other health professionals.

Study Objectives:

To measure public and private Christian high school students':

- ~ intentions to consult a GP vs other help-sources for personal-emotional problems and suicidal thoughts,
- ~ actual help-seeking for each problem-type.

Principal Findings:

- ~ Public and Private high school students would rather seek help from a GP than any other professional source for personal-emotional and suicidal problems (Table 1).
- ~ Public high school students indicated a GP was the only professional source they went to for suicidal thoughts (Table 2).

Implications:

- ~ Efforts to promote General Practice should target young peoples' help-seeking intentions.

Table 1. Means (M) and standard errors of help seeking intentions (GHSQ¹) for personal-emotional problems (Per-Emot), suicidal thoughts (Suicide-Thts), and different sources of help for two high school samples (Public and Private).

Help Source	Problem Type (Public)				Problem Type (Private)			
	Per-Emot		Suicide-Thts		Per-Emot		Suicide-Thts	
	M	SE	M	SE	M	SE	M	SE
Boy/girlfriend	4.53 _a	.15	3.73 _a **	.16	4.41 _a	.12	4.01 _a *	.14
Friend	5.04 _b	.10	4.24 _a **	.13	5.84 _b	.01	4.82 _a **	.11
Parent	4.89 _{a,b}	.12	3.68 _a **	.15	4.81 _a	.11	3.90 _{a,b} **	.13
Family (non-parent)	3.92 _a	.12	3.28 _{a,b,c} **	.13	4.00	.10	3.33 _{b,c,d} *	.12
Mental Health	2.57 _c	.10	2.90 _{c,d}	.12	2.62 _c	.01	3.20 _{b,c} *	.12
Help Line	2.11 _d	.01	2.50 _{d,e}	.12	1.38 _d	.01	2.78 _c **	.12
GP	2.66 _c	.10	2.50 _d	.11	1.50 _d	.01	1.70 _e	.01
Teacher	2.62 _c	.10	2.14 _{e,f} **	.01	2.54 _c	.01	2.37 _{d,e} *	.01
Religious Leader	1.83 _d	.01	1.82 _f	.01	2.02 _c	.01	2.52 _{d,e}	.11
Youth Worker	2.09 _d	.01	2.16 _f	.10	2.56 _c	.01	2.68 _{c,d}	.12
Would not seek help	2.69	.13	2.62	.13	1.68	.11	1.83	.12

n (Public) = 264, *n* (Private) = 351.

_{a,b,c,d,e,f} Means within columns differ from each other at $p < .05$, with the exception of those that share a letter.

Note. Evaluations were made on a 7 point scale (1 = extremely unlikely, 7 = extremely likely). "Would not seek help" was not included in the contrasts.

¹GHSQ refers to the General Help-Seeking Questionnaire (Deane, Wilson & Ciarrochi, 2001).

**Means differ between personal-emotional problems and suicidal ideation in the same row for each school at $p < .001$ and * $p < .05$.

Table 2. Correlations (r_s) between students' intentions to seek help from different sources (GHSQ) and their actual help-seeking from that source in the previous three weeks (AHSQ).

Help Source	Problem Type (Public)		Problem Type (Private)	
	Per-Emot	Suicide-Thts	Per-Emot	Suicide-Thts
Boy/girlfriend	.38***	.32***	.47***	.37***
Friend	.40***	.22**	.45***	.32***
Parent	.35***	.17**	.55***	.38***
Family (non-parent)	.40***	.33***	.35***	.30***
Mental Health	.13*	.10	.27***	.17**
Help Line	.17**	.12	.17**	.16**
GP	.19**	.18**	.27***	.21***
Teacher	.15*	.13*	.43***	.36***
Religious Leader	.24***	.24***	.36***	.29***
Youth Worker	.31***	.31***	.44***	.34***

n (Public) = 264, *n* (Private) = 351. *** $p < .001$, ** $p < .01$, * $p < .05$.

~ Need to identify young peoples' barriers to consulting a GP, particularly for suicidal problems.

**Study cited in Wilson, Dean, Biro & Ciarrochi (2003) Youth Barriers to Help-Seeking and Referral from General Practitioners (NHMRC Grant YS060). For PDF copies of this report, please contact the Administration Officer, Illawarra Division of General Practice. Ph (02) 4226 7052; email idgp@idgp.org.au*