



Suicide prevention and contributing factors among elementary school-age children in Indonesia

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ARTICLE INFO

Received 2025-11-12
Revised 2026-02-15
Accepted 2026-03-13

Keywords

Child suicide
Elementary education
Suicide prevention
Mental health
School-based intervention

ABSTRACT

Suicide among elementary school-age children has become an emerging public health and educational concern in Indonesia. Mental health problems, inadequate parenting, bullying, and socioeconomic challenges have been identified as major contributing factors. This study aims to examine the risk factors associated with child suicide and identify preventive strategies for elementary school-age children. A descriptive qualitative approach was employed using observation and interviews, complemented by a systematic literature review based on the PRISMA framework. The findings indicate that child suicide is influenced by both internal and external factors. Internal factors include mental health problems, emotional instability, and individual psychological conditions, whereas external factors comprise ineffective parenting, bullying, economic hardship, and adverse social environments. The study further reveals that effective suicide prevention requires collaborative efforts among families, schools, communities, and religious leaders through positive parenting, mental health literacy, anti-bullying initiatives, psychosocial support, and strengthened supervision of children. These findings highlight the importance of developing comprehensive and multi-stakeholder prevention strategies to reduce suicide risk among elementary school-age children. The study contributes to the growing body of knowledge on child suicide prevention and provides practical implications for educators, policymakers, and child protection practitioners in Indonesia.



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1. Introduction

The cause of suicide in elementary school children is a serious threat to the nation's resilience that deserves mutual attention. Emotional deregulation has been found to be an underlying factor in the cause of suicide in children and adolescents [1]. KPAI said the cause of suicide in children occurred due to problematic parenting factors, bullying, romance, and economic factors. Medical research mentions several factors that cause children to commit suicide, namely: (1) Low socioeconomic status; (2) Mental health problems of the elderly; (3) Often talking about suicide in a family or a family member who died by suicide; (3) Trauma to the child, and/or the child has experienced bullying; (4) Other risk factors identified include childhood anxiety and gender and sexual diversity [2]. Children commit suicide by hanging themselves, falling from the floor of schools/bridges/buildings, crashing into trains/vehicles, and falling into rivers (KPAI). Suicide methods may also differ in children aged 12 and under compared to older adolescents, such as greater hanging attempts or suffocation, although more research is needed [3].

The way children commit suicide is mostly obtained from social media and also from the information they get [4]. The developmental conditions of children of elementary school age, aged 6-12 years, have their own characteristics. Elizabeth Hurlock divides the developmental age group of children, especially elementary school children, into two stages, namely late childhood (age 6-11 years) and puberty (11-13 years). Havighurst conveyed the developmental tasks of children aged 6-12 years as follows: (1) learning the physical skills needed in games; (2) developing themselves as a developing individual; (3) making friends with peers; (4) learning to carry out social roles as men and women; (5) learning to master basic skills, reading, writing and arithmetic; (6) developing concepts needed in child development; (7) developing morals, values and conscience; (8) developing attitudes towards social groups and institutions [5]. However, the mental health of elementary school-age children today certainly changes along with changes in the surrounding environmental conditions [6].

The role of the family is very important in providing care and assistance for children of primary school age today, where mental health conditions, technological changes and social changes affect children to grow up faster [7]. The family's contribution to the development of children is as follows: (1) feeling safe because they are members of a stable group; (2) a reliable person in meeting physical and psychological needs; (3) a source of affection and acceptance that is not affected by what they do; (4) approved behavioral models for learning to socialize; (5) guidance in the development of socially approved behavior patterns; (6) guidance and assistance in learning motor, verbal, and social skills; (7) stimulate the ability to achieve success in school and social life; (8) Source friendship until they make friends outside the home or when friends outside are not available [8].

One of the main tasks of the family in addition to the above is to provide a comprehensive religious and spiritual foundation as a basis for children to think and act within the framework of emotional and cognitive control, of course in a way that is easy for the child to understand and not because of coercion. Data collected from the World Health Organization (WHO). states that 720 thousand people die by suicide every year. Suicide is one of the highest causes of death in the world and is found in adolescents and adults with an age range of between 15 and 29 years. In Indonesia, the number of suicides continues to increase every year, even increasing by 60% in the last five years. In 2020, there were more than 640 suicides handled by the National Police. The following year, in 2021, the number of suicides dropped slightly to 629 cases. In 2022, 887 lives were lost to suicide. The number of cases continued to increase in 2023, even reaching 1,288 cases. Suicide cases have shown an upward trend in recent years. This year, during January-October 2024, the number of suicides has reached 1.023 cases (Bareskrim Polri).

Data from the Indonesian Child Protection Commission (KPAI) states that in 2022 there were 20 child suicides, while in 2023 there were 46 child suicides, and in 2024 there will be 43 child suicides [9]. The age range of children who commit suicide is 9-17 years. In fact, on average every year there are 1-5 elementary school children who try to commit suicide. From a developmental point of view, suicidal ideation is very rare before the age of 10, increases gradually until the age of 12, and continues to increase until the age of 17 [10]. When a child or adolescent dies by suicide or ends their life, family members often report that the death was sudden without warning [11]. Most research on suicide, however, identifies previous indications of risk, which often include self-harm or communication of suicidal ideation, and even a history of recent contact with psychiatric services. In 2023, the public was shocked by the news of a fifth-grade elementary school student who threw himself from the 3rd floor of his school building in South Jakarta. Shortly after, news also emerged about elementary school-age children who ended their lives or committed suicide in their rooms after being reminded by their parents; this incident occurred in Banyuwangi and Pekalongan.

This phenomenon must receive serious attention from various parties because this incident occurs in elementary school children who should still be able to play and learn like other children. Research conducted by Trigylidas explained that children with certain mental disorders that resulted in the death of children by suicide, it was found that the causes of suicide in children were as follows: depression by 40.8%, attention deficit disorder/hyperactivity disorder by 20.6%, opposition/resistance behavior disorder by 20.1%, and bipolar disorder in children by 16.3% [12]. Research conducted by R. Yan et al found that the factor of elementary school students committing suicide was due to the presence of depression and bullying factors

[13]. Based on the results of these data and existing research, a qualified study is needed on suicide prevention and its causative factors for children in elementary school to be a comprehensive evaluation material. The formulation of the problem of the research is how to prevent child suicide and the factors that cause it in elementary school units. The purpose of this study is to describe prevention efforts and the causative factors of child suicide in elementary schools. This research was carried out to raise awareness among various parties about the dangers of suicide in children, targeting elementary school-aged children and also as informational material to carry out early prevention so as not to commit suicide.

2. Method

This research was carried out qualitatively with a descriptive approach. The results of the research were produced from data collection techniques in the form of observation with research subjects through realities encountered in the field and literature studies. The research data were obtained in the areas of South Jakarta, Banyuwangi, Puliwalimandar, Tabalong, Denpasar, Pekalongan, Kolaka, and Buleleng. The data were obtained from 2023 to 2024. The subjects of the study are parents or guardians of children, teachers, and religious leaders. Direct and measurable observation was carried out to obtain data through participatory observation techniques. The data collection instrument used was an observation sheet. The observation data analysis technique uses the Miles and Huberman model, which consists of data collection, data reduction, data presentation, and verification [14]. For the literature study on the reference search, with the help of the Publish or Perish application with a research span of the last 5 years published in Indonesia (2022-2026), after conducting an initial search using the terms "suicide" and "elementary school", a total of 75 results were obtained. Based on the predetermined inclusion criteria, the total number of eligible studies amounted to 4 studies or articles. The following is a flow of the literature review conducted by the researcher using the PRISMA method analysis. As shown in Fig. 1.

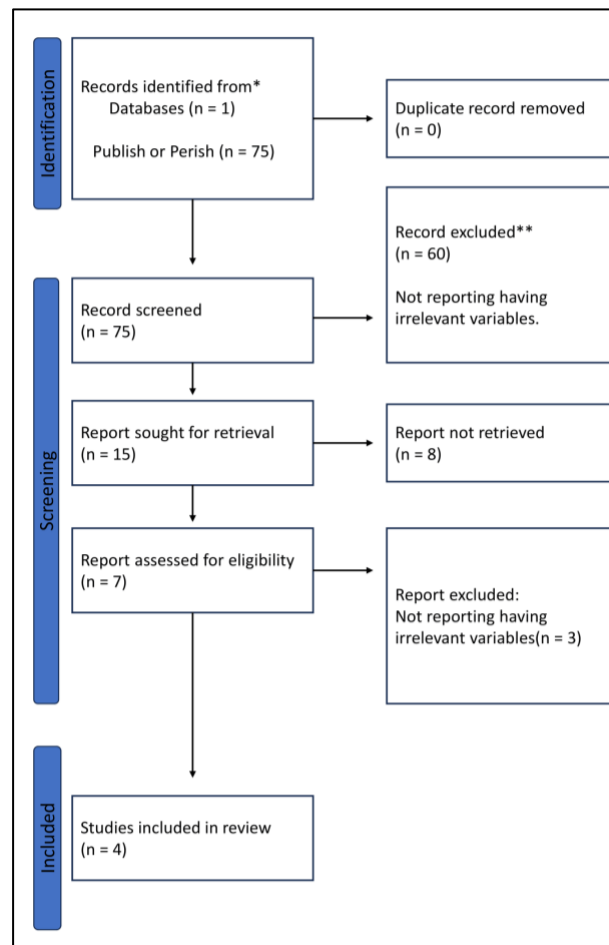


Fig. 1. Systematic Literature Review Flow Chart

3. Results and Discussion

Suicide is an act of mental illness that results from mood and anxiety disorders and can cause death, intentional and done by oneself [15]. The data on child suicides carried out by KPAI in 2023 and 2024 are presented in Table 1. From the data in Table 1, the factor of decreasing the suicide rate among children in 2024 is that most of the children who commit suicide are 11 years old, with a background of wrong parenting in the family; for example, children who are reminded to play with cell phones, children often experience swearing and violence in the family. And what should not be underestimated are the personal factors of children who are stressed and depressed, as well as family economic factors. In 2024, there will be 15 cases of children attempting suicide, and fortunately they can still be saved and still need to get psychological help so that they do not try to commit suicide again.

Table 1. Suicide Data for Elementary School-Age Children

2023			2024		
Age	Location	Causes	Age	Location	Causes
11 yrs/SD	South Jakarta, DKI Jakarta	Stress	11 yrs/SD	Kolaka, Sultra	Depression
11 yrs/SD	Banyuwangi, East Java	Parenting	6 / SD	Buleleng, Bali	Economy
11 yrs/SD	Polwali Mandar, West Sulawesi	Parenting			
12 yrs/SD	Tabalong, South Kalimantan	Bullying			
11 yrs/SD	Bali Resort and Spa	Economy			
12 yrs/SD	South Jakarta, DKI Jakarta	Parenting			
10 th/SD	Pekalongan, Central Java	Parenting			

In Indonesia, early suicide is still considered taboo, especially if it occurs in children, so many cases of suicide in children are not reported to the police or reported by the media. This makes it difficult for the police to conduct further investigations, even though if there is an investigation, the body can be autopsied to find out if there were injuries due to violence before the incident. In addition to the examination, the police can work with social workers under the Ministry of Social Affairs to find out the background before the incident by combining the information of people around the child. This examination will determine the cause and background of the child's suicide, so that it can be used to prevent the incident from happening again. In some areas, the police have difficulty conducting checks because there is a culture or belief in the community to move the items that a person uses to commit suicide so as not to bring and eliminate bad luck both for the deceased child and for the family left behind; these items are usually burned or thrown into the sea. This is also the reason why investigation efforts cannot be carried out optimally.

The stages of suicide obtained from the results of the examination and the title of the case start from: (1) The idea of suicide involves the thought of ending one's own life. Suicidal ideation is relatively common among teenagers, and not all suicidal ideation leads to serious suicidal plans or attempts. Nevertheless, frequent and intense suicidal thoughts are a concern, as they can increase the likelihood of suicide attempts; (2) Suicide planning involves making a plan about how to commit suicide; (3) A suicide attempt (Suicide) is an action taken to resolve the suicide. This is in line with Michelle L. Townsend's research that talking about suicide often influences children to be curious about suicide.

Especially in today's digital native era, information is interconnected, or called social media algorithms, so things that are often mentioned and typed will always appear on children's social media homepages. This can be seen from the results of the investigation and analysis by the National Police and KPAI, which found that some children who committed suicide had previously typed or knew about suicide on several social media application sites. The data findings in Table 1 are also supported by a literature study analyzed using the PRISMA method. From the results of the PRISMA method, 4 articles were found related to prevention efforts and causative factors for elementary school children. The following Table 2 is related to the literature review from existing research. Based on Table 2, it was found that child suicide in elementary school units is influenced by internal and external factors. Meanwhile, the prevention efforts that can be carried out are the closest involvement of children with the community environment.

Table 2. Article Data Summary

Author	Year	Causes	Prevention
[16]	2026	Social Stigma is a disgrace	Positive Parenting
[17]	2023	Bullying	Preventing cyberbullying
[18]	2025	Mental disorders	Children's potential, talents and interests
[19]	2023	Mental health issues	Mental Health Literacy

3.1. Factors that cause suicide in elementary school children

There is no single factor in suicidal behavior, but there are many underlying factors. Personal, parental, interpersonal, and even global (*e.g.* cultural) factors are involved. Self-injurious behaviors are positively associated with stress and depression. Early teens are prone to self-harm because they tend to have difficulty controlling and regulating their unstable emotions and have difficulty regulating emotions. Loneliness and emotional dysregulation in adolescents have also been found to be associated with self-harm without suicidal intent and with borderline personality disorder (BPD). The majority of children and adolescents who attempt suicide have serious mental health disorders; stress, self-doubt, pressure to succeed, financial uncertainty, disappointment, and loss. Most mental health disorders are depressive [13]. Depression is part of the process of committing suicide [20]. In younger children, suicide attempts are often impulsive. These efforts are associated with feelings of sadness, confusion, anger, or may also be related to ADHD symptoms. Mental Health is a key and important component of the well-being of individuals and society. The high rate of self-harm and child suicide indicates a serious mental health problem in Indonesia. Approaching religion as a strategy is inevitable to prevent and overcome this phenomenon.

Based on the results of the literature review in Table 2, self-harm behavior arises from at least two factors, namely internal factors and external factors. Internal factors include neurotic or psychotic characteristics, innate traits of emotional intelligence, and negative emotions. External factors include trauma caused by the external environment, be it inadequate schooling or upbringing in the family. Bullying is the cause of at least 40% of child suicides due to bullying. A study in Korea found that bullying is a factor that triggers children to commit suicide [21]. Suicidal thoughts or acts, even in very young children, are signs of extreme stress and should not be ignored [22]. Even when convinced that the child is not in a crisis situation, it is important to take all suicidal thoughts seriously. There are previous symptoms, which may go unnoticed by a loved one. The last trigger is more of a potential booster that pre-existed. Social factors greatly influence why someone commits suicide.

Social symptoms are very influential in individuals when they have social connections in society. Durkheim formulated four types of suicide: Selfish suicide, which is an act of suicide because it feels that the interests of the individual are higher than the interests of social unity. Altruistic suicide, which is a feeling of integration between fellow individuals with each other, thus creating a society that has strong integration. Anomic suicide, which is more focused on the moral state in which the individual in question loses his ideals, goals, and norms in his life. Fatalistic suicide, which occurs when the values and norms that apply in society increase and feel excessive [23]. Some cases of child suicide are caused by anomic suicide factors, where there is an emotional surge in the child and confusion about the situation that occurs, so that they end up committing suicide. Economic factors with low status are also triggering factors for children to commit suicide. The deterioration of the economic status of the family triggers children to commit suicide [24].

3.2. Child suicide prevention efforts

Parenting styles are attitudes and behaviors that parents adopt in a variety of situations to deal with their children's behavior. This parenting style consists of control, punishment, responsiveness, and warmth patterns. It is a fact that parenting styles greatly affect the child's overall development; therefore, positive parenting will prevent suicidal thoughts in children [16]. In some cases of suicide in elementary school-age children, children are reminded by parents not to play with mobile phones excessively, but the delivery method is not right, which can make children emotional, sad, and confused so that they commit suicide. So the family approach is very important for the prevention of suicide in children. Preventing violence against children will greatly support the prevention of the most severe impact, namely child suicide. Violence experienced by children in the form of bullying, cyber-bullying, and bullying to physical

violence will directly traumatize children; some children experience fear and feel excluded from social circles [25]. Preventing cyber-bullying is one of the problems to overcome suicide in children [17]. Violence in the family environment can also cause children to feel unloved, so preventing children from becoming victims of violence will prevent children from hurting themselves. This kind of education is important to be given to families, schools, and also peers so that

Prevention can also be done by strengthening children's personalities by providing opportunities for children to develop their interests and talents more optimally [18]. Channeling to be able to regulate emotions with positive activities will make children less immersed in negative thoughts [26]. In addition, interaction with children of the same age can stimulate brain activity and social intelligence so that children will have a stronger personality. Screening and consultation of children's problems will be better for identifying children's mental health. The need for mental health literacy in children is necessary, so that if there is a problem, they can solve it [19]. Therefore, peer-to-peer counseling and psychological counseling should be socialized by eliminating negative stigma for those consulting. A fundamental problem with the reluctance of society and children to consult is stigma. Supervision in the family and school environment is very important, including children's activities on social media. In some cases, elementary school-age children who fell in school buildings did so due to weak supervision from schools, including inadequate CCTV facilities. Child suicide at home also occurs due to weak supervision from parents, especially regarding children's activities.

3.3. The role of schools, families, communities and religious leaders

The family has a very important role in providing care and growth for children, including strengthening the spiritual foundation and religious education, so that children from an early age know what is right and wrong. A harmonious family will make children feel comfortable so that children can develop themselves optimally, without fear. Likewise, if the child has problems outside the home, then when they return to the family, they feel protected [27]. Schools have a role in social education about the dangers of child suicide. In addition, schools can provide activity services to allow children to channel their talents and interests so that, with many positive activities, they can eat up positive thoughts and actions [28]. Schools can also offer counseling services to children if there is a need, so that children are not afraid and are not negatively labeled when counseling is offered. Schools can also form peer counselors so that same-age children can help each other. The role of Islamic figures, Islamic organizations, and the community is a very strategic social infrastructure in the field of child protection and its aspects: paradigm, regulatory monitoring, implementation, protection-based protection, and advocacy for the community, especially the younger generation. The role of Islamic organizations strengthens noble values that are deeply rooted in Islamic culture. Islamic culture applied to Islamic organizations is useful in strengthening behavioral values in guiding the ummah to progress and strengthen national values in themselves [29].

4. Conclusion

Suicide in elementary school-age children is increasing and becoming a common concern, requiring efforts in analyzing, preventing, and dealing with it, so that nothing is repeated. Prevention efforts must be carried out comprehensively by various parties, namely those closest to children and the community environment in the community. Children commit suicide because of the presence of a person in themselves and their external condition. This study shows that systematic prevention of child suicide involving multiple stakeholders can be implemented even by families. It is important to always introduce suicide danger to children, but it is even more important to set up a system that can prevent early suicide in elementary school children. This research contributes to elementary school education on how to prevent child suicide by addressing the causative factors. The recommendation for further research is to be able to compare suicide prevention efforts for elementary school children in Indonesia with the international world and use different research methods.

Acknowledgment

Thank you to the author to Ahmad Dahlan University and the Indonesian Child Protection Commission for their support in this study. Hopefully, this research will bring good results for a better future for Indonesian children.

Declarations

- Author contribution** : The author was solely responsible for the conceptualization, methodology, data collection, analysis, writing, and revision of this manuscript. The author has read and approved the final version of the manuscript.
- Funding statement** : None of the authors have received any funding or grants from any institution or funding body for the research
- Conflict of interest** : The authors declare no conflict of interest
- Additional information** : No additional information is available for this paper
- AI Use Disclosure** : The authors declare that no generative artificial intelligence tools were used in the design, analysis, interpretation, or writing of this manuscript.

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