PARENTAL EMPLOYMENT STATUS IN THE RELATIONSHIP BETWEEN TRAUMATIC EXPOSURE AND ADOLESCENT SUICIDE RISK

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ABSTRACT

Parent's socio-economic status is considered a protective factor in families, if it enables family members to access resources and to escape from environmental hardships, and if it acts as a buffer against suicidal behaviours. This study aimed to investigate what effect the parental employment status has on traumatised adolescents and their suicide risk. Using a cross-sectional and correlational design, 989 grade 10 learners from nine schools in the Free State province were selected. A self-compiled biographical questionnaire, the suicidal ideation questionnaire for adolescents, and the stressful life events questionnaire were used to gather information. A hierarchical multiple regression analysis investigated whether parental employment status moderates or mediates the relationship between stressful life exposure and suicide risk. Results indicated a significant relationship (p = 0.000) between stressful life exposure and suicide risk. However, the parental employment status does not moderate the relationship between stressful life exposure and suicide risk. Future studies should explore employment differences, as career choices may create different contexts for support and development of adolescents.

Keywords: suicide risk; stressful life; traumatic exposure; adolescents; parental employment status



INTRODUCTION

Adolescent suicide is a major public health problem (WHO 2016; Schlebusch 2005). For decades, it has been found that suicide is the leading global cause of death among young people between the ages of 15 and 24 (George 2005; Kerr, Owen, and Capaldi 2008; Paulson and Everall 2001; Rutter and Behrendt 2004; Tomasula et al. 2012; Wolmarans 2010; Yip and Chiu 1998). The nationwide survey conducted in the United States of America by the Centre for Disease Control and Prevention (2015) among learners in grades 9 to 12 found that about 4 600 young people lose their lives to suicide each year.

In South Africa, several studies documented a continuing increase in the prevalence of adolescent suicide (NIMSS 2005; Reddy et al. 2010; Schlebusch 2005). South African statistics show that 11.5 per cent of all teenage deaths are due to suicide (Stark et al. 2010). The South African Depression and Anxiety Group (SADAG) (2015) reported one suicide attempt every three seconds while one suicide is completed every 40 seconds. Therefore, suicide rates have shown an alarming increase with 20 suicide attempts for every completed suicide (Schlebusch 2005). Evidence from various researchers (Blum, Sudhinaraset, and Emerson 2012; George 2009; Hanssens 2016; Kaminer et al. 2013; Kernier 2012; Loots 2008; Moolman 2013; Tomasula et al. 2012; Wolmarans 2010) notes that an increase in suicidal behaviour is also attributed to the fact that adolescence is a highly vulnerable phase of development.

Suicide risk is viewed as a probability that a person will attempt suicide, repeat, continue or increase suicidal behaviour and need careful monitoring to ensure well-being (George 2009; Pienaar and Rothmann 2005; Schlebusch 2005). The risk of suicide is increased by the presence or absence of various psychosocial and environmental factors (Beautrais 2000; Schlebusch 2005).

From a psychosocial perspective, changes in the basic family system affect the interactive well-being of family members (Bronfenbrenner 1994; Bronfenbrenner and Morris 2006). Changes in one functional area of the system, such as changes in the parental employment status, may affect the functioning of other subsystems adversely (Johnson 2008). Parental unemployment increases the propensity for a negative home environment and consequent relationships, which have been associated with increased tendencies towards suicidal behaviour (Mpiana et al. 2004).

In addition to stressors such as parental unemployment, adolescents are frequently exposed to various traumatic situations such as living in unsafe neighbourhoods, physical and sexual assault, crime, and domestic violence (Hunt, Martens, and Belcher 2011; Nduna and Jewkes 2012). These experiences may influence the well-being of individuals negatively and further reduce their capacity to cope (American Psychiatric Association 2013; Kaplan, Sadock, and Grebb 1994). Consequently, adolescents who are exposed to trauma may be more distressed and present with depression symptoms and post-traumatic stress symptoms, which increase the risk of suicide (Hanssens 2016).

A review of prevailing literature on EBSCOhost and Google Scholar (accessed 9 September 2016) reveals a lack of research information explicitly exploring the

role of parental employment status in clarifying the relationship between traumatic life exposure and suicide risk among adolescents in South Africa. In view of limited research available, this study aimed to investigate the role of parental employment status in explaining a relationship between traumatic exposure and suicide risk among adolescents.

As a critical developmental period, adolescence is characterised by exploration, discovering, and experimenting. In addition to these developmental experiences, economic hardship in families may cause adolescents to be overly anxious about their future (Conger and Dogan 2007; McLoyd 1990). They may be concerned about their ability to have access to effective educational institutions, to have equal opportunities in exploring different careers, and to engage with suitable peers and romantic partners (Griggs and Walker 2008). Exposure to social challenges such as poverty, family dysfunction, and high educational or academic expectations may compromise their ability to master developmental tasks successfully (Beekrum, Valjee, and Collings 2011; Kruger 2010; Loots 2008; Nts'ekhe 2008). Failure to achieve an integrated identity successfully may increase the possibility of engaging in risky behaviour, which in turn increases the risk of suicide (Elkind 1998; King 1997).

Exposure to environmental stressors may be traumatic for some adolescents and can cause extreme emotional distress that predisposes them to experiencing symptoms of depression (Nduna and Jewkes 2012; Nduna et al. 2010; Wingo et al. 2010). Therefore, they may experience a sense of helplessness and hopelessness, which increases their risk of indulging in alcohol abuse, risky sexual behaviour (which might result in HIV infections), sexual violence, and suicidal behaviour (Nduna et al. 2010). Thus, adolescence is a period with a high potential for suicide risk (George 2009; Pienaar and Rothmann 2005; Schlebusch 2005).

South Africa has undergone major political, social, and economic changes following the adoption of a democratic dispensation in 1994 (Beekrum et al. 2011; Holtman et al. 2011; Schlebusch, Vawda, and Bosch 2003). However, to some extent, two decades into our democratic dispensation, social changes are being redefined by a high crime rate, unequal access to healthcare, high rates of HIV/AIDS infections, and a high rate of unemployment (Statistics South Africa 2014; SAFMH 2012–2013).

According to the Quarterly Labour Force Survey of January to March 2013, the highest employment rate was found among the age groups 15 and 64 years, namely 44.7 per cent before the recession in 2008 (Statistics South Africa 2014). The general unemployment rate in South Africa has increased from 25.20 per cent in the first quarter to 25.50 per cent in the second quarter of 2014 (Statistics South Africa 2014). According to the South African Federation for Mental Health (2012–2013), findings between 2002 and 2010 show that 32.8 per cent of young people between the ages of 15 and 24 were living in households where they were exposed to poverty because of parental unemployment.

There is evidence that adolescents' coping abilities are affected by the parental employment status (Beekrum et al. 2011; Schlebusch 2005). Parents serve as a major link between environmental settings and adolescents' well-being (Amoateng and Kalule-Sabiti 2013). Thus the employment status of a parent may either have a negative influence on an adolescent's well-being (Montemayor and Clayton 2001; Nyanjaya and Masango 2012), or serve as a protective factor in buffering against negative health outcomes such as depression or suicide (Beekrum et al. 2011; Nduna and Jewkes 2012).

In conceptualising the parental employment status, Rushing (1968) defines unemployment as an economic indicator that refers to the number or proportion of people in an economy who are willing and able to work, but who are unable to find employment. A forerunner study by Diekstra and Garnefski (1995) found that unemployed parents, especially if fathers were unemployed, showed a significant relationship with the occurrence of depression and suicidal reactions in the siblings of those parents. Researchers (Kalichman et al. 2006; Kerr, Owen, and Capaldi 2008; Wadsworth and Achenbach 2005) have shown that unemployed workers are twice as likely to experience psychological problems (depression, anxiety, psychosomatic symptoms, low subjective well-being, and poor self-esteem) than employed workers.

Social support is related to healthier adolescent functioning (Rutter and Behrendt 2004). The family environment is the most important domain for adolescents as it contributes to the healthy development of self-esteem, effective problem-solving, and socio-emotional competence (Pfeffer et al. 1986). Findings by Bacikova-Sleskova et al. (2011) reveal that during economic hardship, parental support is low and may lead to increased emotional distress for adolescents.

Financial security owing to fixed employment allows for the provision of resources such as a household structure, stability, adequate supervision, and parental involvement and monitoring, which serve as protective factors against adolescent suicide (Holtman et al. 2011; Schlebusch, Vawda, and Bosch 2003; Wadsworth and Achenbach 2005). Furthermore, employed parents are more engaging and emotionally supportive (Bacikova-Sleskova et al. 2011; Beekrum, Valjee, and Collings 2011; Nduna et al. 2010; Sleskova et al. 2006). Several studies (George and Van den Berg 2012; Hicks, Vaidyanathan, and Patrick 2010) confirm that family provides a safe refuge for children, specifically with regard to providing social support, emotional support and stability that are needed for healthy development and protection against the risk of suicide.

On the other hand, some authors (Han, Miller, and Waldfogel 2010; Montemayor and Clayton 2001; Nyanjaya and Masango 2012) found that employment of a parent may sometimes have a negative effect on adolescents' well-being. A study that examined the effect of changes to parent working schedules on risky behaviour of adolescents of 13 and 14 years (Han, Miller, and Waldfogel 2010), found that mothers who work more often at night spend significantly less time with their children and have lower-quality home environments. These mediators were linked significantly to risky behaviour of adolescents (Han, Miller, and Waldfogel 2010).

South Africa is not only known for its high prevalence of unemployment but also for its high levels of crime and interpersonal violence. Researchers in South Africa report a lifetime prevalence of traumatic experiences of more than 80 per cent (Atwoli et al. 2013; Makhubela 2012). Trauma is defined as inescapable direct or indirect experiences of stressful life events that threaten an individual's physical or psychological well-being (American Psychiatric Association 2013; Seiffge-Krenke 2004). Findings of Borges et al. (2008) and Kaminer et al. (2013) reported trauma exposure among a Mexican adolescent group that significantly increased their risk for suicide.

Donson et al. (2008) and Kalichman et al. (2006) found that the experience of trauma is intensified when parents are unemployed because it contributes to increased tension, arguments, violence, and disengagement from the family system. Adolescents can be exposed to domestic violence in which they can either witness violence toward their loved ones or become victims themselves (Makhubela 2012). Various researchers (Loots 2008; Read et al. 2011) conclude that children who live in fear of triggering violence in their families become estranged from their parents. Secondary problems due to estrangement lead to poor problem-solving skills, uncertainty, sadness and an inability to express themselves adequately (Holtman et al. 2011). Often, these adolescents experience feelings of extreme inadequacy, hopelessness, and shame which are exacerbated by the presence of depression symptoms, alcohol abuse and the concomitant increased risk for suicide (Mpiana et al. 2004; Reddy et al. 2010; Shilubane et al. 2012; Visser and Moleko 2012).

Living in South Africa, adolescents are likely to be affected by high rates of crime and violence (Flannery et al. 2007; Kaminer et al. 2013). Involvement in gang-related activities, negative peer influence, limited access to mental healthcare, witnessing someone being beaten, harassed or killed, being a victim or forced to participate in school-related violence are quite likely to occur (Craig and Dunn 2010; Kaminer et al. 2013; Sigelman and Rider 2012; Wadsworth and Achenbach 2005). Such exposures predispose adolescents to develop behavioural problems and have a negative effect on their psychological well-being (Wadsworth and Achenbach 2005).

In view of the limited research knowledge focusing on how parental employment status affects adolescent risk behaviour, this study aimed to investigate how parental employment status affected adolescents who had been traumatised and how this influenced their risk for suicide. The research hypothesis was as given below.

RESEARCH QUESTION

Hypothesis: Does parental employment status significantly influence the relationship between trauma exposure and suicide risk?

Null hypothesis: Parental employment status does not significantly influence the relationship between trauma exposure and suicide risk.

Alternative hypothesis: Parental employment status significantly influences the relationship between trauma exposure and suicide risk.

RESEARCH METHODOLOGY

Research design

To realise the objectives of the study, a quantitative, non-experimental correlational design was used to investigate the stated hypotheses (Maree and Pieterson 2007).

Participants

This study utilised an existing data set collected by the Department of Psychology of the University of the Free State as part of a broader study on adolescent risk and resilience in the Free State province during 2012. A group of 989 grade 10 learners was selected using random sampling from nine schools spread across five districts in the Free State (Maree and Pieterson 2007). The participants were selected from urban and rural areas and were distributed across race, gender, and socio-economic groups. Data were collected by using standardised questionnaires, which were administered during school time at the respective schools. Questionnaires were bound in booklet form and were completed by participants in smaller groups of 20 to 30 participants under the supervision of registered psychologists and registered counsellors. Testing time was approximately three to four hours with a 30-minute break given halfway through the testing. The method of back translation was used to translate all the tests from English into Afrikaans and Sesotho (Brislin 1986; Foxcroft and Roodt 2005).

The mean age of the group was 16.3. With regard to gender, 410 males (57.6%) and 571 females (41.7%) were included in the participant group. An incomplete data set accounted for eight in totality. With regard to race distribution, the majority of participants were Black (71.1%), and the remaining participants were White (17.1%), Coloured (8.6%) and Asian (2.4%). The language of first choice for participants included Sesotho (44.1%) and Afrikaans (23.6%), which indicates the languages spoken by the majority of the population in the Free State (Statistics South Africa 2012), Setswana (13.1%), IsiXhosa (10.2%), English (4.6%), IsiZulu (3.1%), and Sepedi (0.3%). With regard to the employment status, 68.8 per cent of the participants' parents were employed, while 17 per cent were unemployed.

Ethical clearance to conduct the study was received from the Committee of Title Registrations (CTR) of the Faculty of Humanities at the University of the Free State. Permission was also obtained from the Department of Education in the Free State, participating school principals, and parents. Participants were informed about the goals of the study, assured that all information received would be treated with the highest confidentiality and that information would be given anonymously. Participants were

furthermore informed that participation was voluntary and that they could withdraw during any part of the research process. Once participants had volunteered their assent, the testing started.

Measuring instruments

Self-compiled biographical questionnaire

A self-compiled biographical questionnaire was used to obtain specific information with regard to the demographic nature of the participants. This self-compiled questionnaire was based on the information extracted from previous research on South African youth risk behaviour (Reddy et al. 2002). One question of particular importance to this study (question 10) related to participants' parental employment status. The employment status was determined by the employment of one or both of a participant's parents. Employment status implied being employed in the formal or informal sector, as opposed to being unemployed. However, no question on the period of unemployment was included in the questionnaire.

The suicidal ideation questionnaire for adolescents (SIQ-A)

The suicidal ideation questionnaire for adolescents (SIQ-A) (Reynolds 1988) measures the frequency and intensity of suicidal thoughts. The instrument consists of 30 items that are measured along a seven-point Likert scale, and the total score ranges from 0 to 180 (Du Plessis 2012; Reynolds 1988). In line with the recommendation of Reynolds (1988), a SIQ-A total score of greater than 31 is considered high. Pienaar and Rothmann (2005) adapted the instrument as a predictor for suicide risk by introducing the criteria of low risk (0–16), moderate to higher risk (17–31), and high risk (32 and above) as a means of categorising suicide risk. The total score was used to calculate suicide risk. A South African study on adolescent learners in the Northern Cape (George 2005) produced a satisfactory alpha coefficient of 0.97.

The stressful life events questionnaire (SLEQ)

A shortened version of the stressful life events questionnaire (SLEQ) (Goodman et al. 1998) identifies the type and frequency of stressful or traumatic life events to which a person has been exposed. The questionnaire includes 12 identified traumatic life themes to which participants may have been exposed either directly or indirectly. The questionnaire consists of a nominal scale to which participants must answer "yes" or "no". All "yes" responses are explored further in terms of the context of the traumatic event. As a clinical screening measure, Goodman et al. (1998) found a gamma alpha coefficient of 0.76 for men and 0.85 for women with post-traumatic stress disorder.

One should take cognisance of the terms "stressful life event" and "traumatic exposure" which are used interchangeably in this study. South African studies that reported using the SLEQ could not be found (EBSCOhost and associate databases, Google Scholar, Nexus, NiPAD, accessed 9 September 2016).

Statistical Analysis

Descriptive statistics were calculated for all the scales and subscales. The Statistical Product and Service Solutions (SPSS) program was used to analyse the data (SPSS Incorporated 2011). The chi-square test for independent groups was used to determine the difference in suicide risk between adolescents whose parents were employed and adolescents whose parents were unemployed. The levels of suicide risk were then identified. Furthermore, a product-term regression analysis was utilised to determine whether the parental employment status moderated the relationship between trauma exposure and suicide risk. The reliability coefficient of the scales was calculated for the current group of participants. The alpha coefficient of 0.98 for the SIQ-A was found to be above the acceptable level (≥ 0.70) according to the guidelines for a non-cognitive construct provided by Nunnally and Bernstein (1994). An alpha reliability coefficient for the SLEQ could not be calculated as each of the traumatic events in the scale is considered independent from the others. This inter-item independence constitutes poor inter-item reliability, therefore the researcher did not expect the participants' responses to show any inter-item consistency.

Results

The mean score obtained for suicide ideation (M = 38.91) is significantly higher than that of the original American participant group (M = 17.76) of Reynolds (1988). However, it is slightly lower than the mean score obtained for a sample of secondary school learners (M = 39.51) from the Northern Cape (George 2005). The mean number of traumatic events reported by the current participant group is 2.83. This implies that this group of learners as a whole was exposed to almost three different traumatic events in their lifetime.

Using the criteria to delineate suicide risk, Table 1 shows adolescents being compared with regard to their low, medium and high suicide risk predisposition (Pienaar and Rothmann 2005).

Suicide risk predisposition	Frequency	Percentage	
Low risk (≤ 16)	450	45.7	
Medium risk (17–31)	150	15.2	
High risk (≥ 32)	385	39.1	
Total	985	100.0	

Table 1: Categories of risk for suicide as measured by the SIQ-A

The results indicate that 54.3 per cent of the participants were identified as having a medium to high suicide risk.

Table 2 indicates that the level of suicide ideation correlates significantly on the one per cent level with the frequency of being exposed to traumatic life events. For both groups, the results indicate a positive correlation between the frequency of exposure to traumatic life events (r = 0.191, p = 0.000) and levels of suicide risk (r = 202, p = 0.000) respectively. The effect sizes of the above interactions were small (0.1–0.3) and should be interpreted with caution.

Table 2: Correlation coefficient between suicide ideation and traumatic life events for the entire group and employment status

Suicide ideation							
	Total Employed		Unemployed				
SLEQ	0.179*	0.191*	0.202*				

 $p \le 0.01$

Hierarchical regression analysis

In this study a hierarchical regression analysis (Cook and Weisberg 1982) was conducted to explore the role of the parental employment status in the relationship between traumatic life exposure and suicide risk. A moderator variable affects the direction and/or strength of the relationship between the predictor variables. The moderator variable (parental employment status) was categorised into two groups (i.e. employed and unemployed parents) with employed parents coded as 1 and unemployed parents coded as 0. A hierarchical regression analysis entails the following: First, the unique contribution of each dependent and independent variable is explored, and second, the dependent variable (suicide risk) and the independent variable (traumatic life exposure)

are included in the equation to determine their contribution to the regression analysis. (See Table 3.)

This method involves omitting one variable each time to determine its contribution. The percentage variance that is explained by specific variables is indicated by R² (squared multiple correlation coefficient) (Cohen et al. 2003). A preliminary analysis was conducted to ensure that the assumptions of normality, linearity, multicollinearity, and homoscedasticity were not violated (Cohen et al. 2003; Kutner et al. 2005).

Table 3: Moderated hierarchical regression with suicide risk and traumatic life events exposure as independent variable and parental employment status as moderator variable

				Change Statistics				
Model	R	R ²	Adjusted R ²	R ² change	F change	df1	df ²	Sig. F change
1 2	0.209 0.209	0.044 0.044	0.042 0.041	0.044 0.000	21.954 0.079	2	962 961	0.000 0.779

Model 1: Employment status, traumatic life events exposure - total score.

Model 2: Traumatic life events exposure multiplied by employment status.

Traumatic life exposure is significantly related with suicide ideation for this group of adolescents $[R^2 = 0.044, F(2.962) = 21.954, p = 0,000]$. It is apparent that the addition of an interaction term of $[R^2 = 0.0078\%]$ did not increase the percentage variance in suicide risk explained for this group of adolescents. Furthermore, the results in Table 3 indicate that there was not a statistically significant moderator effect of parental employment status [F(1.961) = 0.079, p = 0.779), p < .0005J. Thus, the employment status of a parent does not moderate the relationship between traumatic life exposure and the level of suicide risk.

The main effects between trauma exposure and suicide ideation reported the following results. One unit increase in "exposed to traumatic events" resulted in an increase of 4.162 units in suicide ideation in the group whose parents were employed, and 4.688 units in the group whose parents were unemployed. This implies that, for both groups of adolescents in the study (employed and unemployed parents), an increase in traumatic life exposure leads to an increase in the level of suicide risk.

DISCUSSION

The primary aim of this study was to investigate the role of parental employment status in the relationship between traumatic life exposure and suicide risk. Descriptively,

results in this study indicate that the measuring instrument had acceptable levels of internal consistency. The alpha coefficient obtained for the current study is similar to that of a study on adolescents in the Northern Cape (George and Van den Berg 2012).

Results from this study are consistent with the expected outcome portrayed by the literature that South African adolescents are at high risk for suicidal behaviour (Du Plessis 2012; George 2009; Mashego and Madu 2009; Schlebusch 2005). In the current study, 54.3 per cent of all participants were identified as having a medium to high risk for suicidal behaviour. These results are in line with the findings from George's (2009) study, which reported 60.5 per cent of the participants being at high risk for suicide. These findings support the idea that South African adolescents may be at risk for suicidal behaviour, given the many socio-economic and political disparities and their consequential negative effect on the psychological well-being (Schlebusch, Vawda, and Bosch 2003).

An investigation of the relationship between traumatic exposure and suicide risk for both employed and unemployed groups showed a significant positive relationship between traumatic exposure and suicide risk behaviour. This relationship was found significant for employed and unemployed groups on the one per cent level of significance. The positive correlation between exposure to traumatic life events and suicide risk corresponds with similar findings reported in the literature and implies that exposure to traumatic events increases the risk of suicidal behaviour (Borges et al. 2008; Kaminer et al. 2013; Read et al. 2011; Yen et al. 2005).

From an exploration of the role of parental employment status in the relationship between traumatic exposure and suicide risk, it was concluded that the parental employment status (employed or unemployed) does not have a statistically significant moderator effect. The finding seems to suggest that being employed as parents does not appear to have any influence on whether adolescents will be protected against the risk for suicidal behaviour when exposed to traumatic life events. These findings are supported by research by George (2009), which indicates that parental employment does not have any significant influence on participants' level of suicide risk. However, contrary findings by Simons and Murphy (1985), Skegg (2005), and Xing et al. (2010) seem to indicate the presence of a strong relationship between unemployment and suicidal behaviour. Therefore, unemployment of parents can be regarded as a contributing factor toward suicide risk, as the consequences of unemployed parents create an emotionally charged and socially destabilised home environment that may act as a trigger factor for suicide behaviour (Holtman et al. 2011). A forerunner study by Diekstra and Garnefski (1995) alludes to the importance of a stable family environment that, if destabilised by factors such as unemployment, may have an even harsher effect on the children.

However, Holtman et al. (2011) significantly refer to their and other similar findings by highlighting the fact that not all forms of employment seem to offer a buffering effect against suicidal behaviour. A number of researchers seem to agree and emphasise the need for certain parental requirements, such as providing emotional resources and

access to necessary resources, and ensuring adequate supervision and monitoring, if employment is to be a factor in buffering against suicide risk (Griggs and Walker 2008; Han, Miller, and Waldfogel 2010; Montemayer and Clayton 2001; Nyanjaya and Masango 2012).

LIMITATIONS AND RECOMMENDATIONS

The findings of the study should be interpreted in the context of the limitations discussed below. The research design did not accommodate changes over a period, therefore, it is unable to predict possible direction or causal effects of other variables. On the other hand, longitudinal studies allow for a valuable time factor that allows the observance of developmental changes in parental circumstances and those of the participants. Such data may yield a richer source of information especially in terms of how maturation influences variables.

In hindsight, the construct parental unemployment status could have been explored differently and with greater depth of variety, for example the types of careers, as this may have offered greater differentiation. The rationale behind this recommendation is that certain careers increase the presence or transference of certain social and emotional skills more than others. By implication, people in the caring professions may offer significantly greater socio-emotional support than, for example, a transport officer who spends more time on the road than at home. The American-based SLEQ was unable to provide an indication of the quality of traumatisation. In addition to the SLEQ, the suicidal ideation questionnaire, although previously used on South African adolescents, has also not been standardised in a South African context. Using instruments contextualised for South African participants may offer more relevant and richer sources of information; however, these are not yet available in South Africa.

Nonetheless, the study yielded valuable information highlighting the need for greater sensitivity in measuring the parental employment status as different types of employment may offer different skills sets that could influence adolescents' well-being. Follow-up studies should explore if differences in employment careers affect or moderate the relationship between traumatic exposure and suicide risk better than others, as compared to merely being employed. Such findings could assist career guidance therapists and practitioners in adjusting their approaches to parental counselling.

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