

Meaning in Life and Suicidal Tendency Among Immigrant (Ethiopian) Youth and Native-Born Israeli Youth

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Abstract The impact of meaning in life, or lack thereof, on suicidal tendencies among populations at greater risk—youth born to immigrants from developing countries, in this case Ethiopia—in comparison to native-born Israeli youth was examined among 277 adolescents—162 of Israeli origin and 115 of Ethiopian origin—aged 15–18. (1) Overall significant negative correlation between meaning in life and suicidal tendencies was found; (2) no difference was found in meaning in life between immigrant and native-born youth; (3) higher suicidal tendency, anxiety and depression were found among immigrants, with boys displaying more anxiety than girls. No difference in depression was detected between Ethiopian boys and girls. Meaning in life is crucial to minimizing suicidal tendencies among youth, native-born and immigrant alike. Establishment of prevention, intervention and therapy plans in the age range crucial for suicide. Such programs should be based upon finding meaning in life.

Keywords Immigrant · Suicidal tendency · Meaning in life · Youth

Introduction

Over the last 45 years suicide rates have increased by 60 % worldwide, rendering suicide one of the three leading causes of death among men and women aged 15–44 in some countries, and the second highest cause of death in the 10–24 year age group [1].

Suicide rates among teen immigrants are higher still, particularly when the cultural gap between the countries

from and to which the family had immigrated are very large. In Israel, for instance, Ethiopian boys aged 15–24 are 5.9 times more likely to commit suicide than their native-born peers, and 2.8 times more likely to do so than immigrants from the Former Soviet Union (FSU) of the same age range [2]. More worrying still is that between 1996 and 2000, 5.2 % of all young suicides in Israel were committed by Ethiopians, although their percentage in Israel's young adult population is just 1.75 [3].

Professional literature has reviewed numerous suicide attempts in order to identify the causes of suicide [4], however, more questions than answers remain [5–7]. Adolescence is a period of physical, emotional and social change and development that affects the adolescent's body and personality [8, 9]. It is a time filled with causes of pressure, distress and anxiety that, in extreme cases, may lead to suicide attempts.

These issues are further accentuated among teen immigrants, who experience all the growing pains of adolescence as well as immigration-related difficulties, such as intercultural conflicts, problems forming their identity, and difficulties resolving conflicts in the absence of a cultural role model [10].

Some scholars believe that meaning in life may serve as a restraining force that lessens the propensity for suicide [11]. The present study therefore attempts to examine the connection between meaning in life and suicidal tendencies among normative teenage boys and girls by comparing immigrant Ethiopian youth and native-born Israeli ones.

Suicide Among Immigrants and Their Children

Adolescent suicide is a particularly common and disturbing global phenomenon across all nations and states [7]. Professional literature has reviewed numerous suicide attempts

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in order to identify the causes of suicide, though more questions than answers remain [7]. Orbach et al. [8] argues that suicide attempts do not necessarily manifest morbid deterioration. At times pressing life circumstances, internal and external pressures and a difficulty coping with them lead individuals to feel caged and frustrated, and they thus develop emotional states that negate life and foster death. Immigration is one such pressing life circumstance that may lead to suicide attempts.

Many epidemiological studies have investigated the link between immigration and suicide [12–17]. The majority of those studies have found suicide rates among immigrants to be higher compared to the native-born population (see for example 3, 18); although several of them have noted that differences in suicide rates between the immigrant and native-born populations do not necessarily exist [19, 20]. But when the connection between immigration and suicide is examined by country of origin, studies find that certain groups of immigrants are at greater risk to commit suicide compared to others, for instance: Hispanics and African-Americans in the US; Indian and Pakistani women in the UK, as well as Ethiopian refugees in London; and Ethiopians and their children in Israel [2, 3, 21–25].

An attempt has been made to link high levels of suicide among second generation immigrants, particularly from developing countries, with adolescence-related issues combined with difficulties in adjusting and the individuals' socio-demographic state [26]. According to this theory, teen immigrants form a risk group because they are forced to go through adolescence while coping with language barriers and in the absence of a social network and cultural role models. They are caught up in an intercultural conflict and suffer from identity disorders and emotional difficulties. Therefore, under pressure, young adults may adopt self-destructive behavior patterns, including suicide [10]. Hovey [27] uses the term *acculturation stress* to describe the immigrants' emotional response to the physical, socio-cultural and emotional changes they must undergo in order to adjust to their new cultures.

Another explanation lists high unemployment and low social integration rates among immigrants, as well as the xenophobia some are exposed to, as risk factors for mental health and, consequently, suicide [10, 28, 29].

Addad et al. [30] adds another risk factor. He claims that teens try to make sense of their lives and the reality in which they live in an effort to find meaning in their lives. Immigrant teens, particularly from developing countries, find themselves undergoing rapid social changes, including facing advanced and intense technology, the collapse of their family traditions and values, a different familial structure in modern society, and more. The reality of an immigrant adolescent is therefore complex, unclear and unstable. It confuses and places obstacles in their paths to

rendering their lives meaningful. A difficulty finding meaning in one's life may lead to narcissistic obsession and various other pathologies, including suicidal tendency [31–33].

Meaning in Life and Suicidal Tendencies

The term *meaning in life* is attributed to a life of value [34]. Frankl [35] broadens this definition, arguing that an individual describing their life as meaningful speaks of experiencing emotional involvement in interpersonal relations, a sense of uniqueness, and involvement in activities of sentimental value. Frankl [11, 35] believes that a life of meaning is a life that an individual feels is worth living. By contrast, a person who regards their life as meaningless feels unable to achieve goals of any value, or that the goals themselves have lost all importance. It should be clarified that meaning in life is not equal to self-fulfillment, but rather to rising above oneself, a departure from the self. Frankl [35] claimed that rising above oneself is devoting oneself to another, believing in values and actions that go beyond an individual's personal, narcissistic needs, seeing the world as being beyond one's mere expression of personal self.

Various theorists [36–38] have considered the pursuit of meaning in life a fateful element, without which one's ability to cope with life's hardships and stress factors is extremely limited. Thus, the ability to understand the world and render it meaningful serve as a basis for the capabilities required to better cope with and adjust to life. They argue that meaning in life is a prerequisite to maintaining mental health, grappling with and protecting oneself from crises and difficulties, and leading a satisfying life [39]. Or as Frankl [11, 35] would have it, finding meaning in life is the universal human goal, creating a person's identity and giving him the strength to go on under all sorts of circumstances.

Much like Frankl [11, 35], Lucas [40] too believes that suffering cannot defeat a man as long as he is willing to seek meaning; any loss is acceptable if it at least has meaning. The term *the defiant power* [41] defines the power people have after growing up under difficult conditions and nevertheless refusing to despair, and evolving into satisfied, self-fulfilled and creative human beings. By contrast, an existential void is characterized by focusing on one's present or past, and having no insight into the future. Thus a sense of pessimism takes over, intensifying the existential void [42]. The main outcomes of an existential void are depression, addiction, indiscriminate sexual relations and suicide [30].

Empirically, a lack of meaning in life was found to be related to a range of pathological behaviors, such as drug abuse, delinquency, anxieties, depressions and suicidal

tendencies [30]. Heisel and Flett [43] also found that, among patients suffering from mental disorders, meaning in life contributes to mental and physical wellbeing whereas a lack thereof may lead to pathology and suicide. Similarly, while depression was found to be related in professional literature to suicide, adding the variable “hopelessness” to “feeling depressed” increases the predictability of suicidal tendency [44]. Edwards and Holden [45] as well as Aviad-Wilchek et al. [46] have found a significant negative correlation between meaning in life and suicidal tendency among women and girls. It therefore seems that experiencing emptiness, loss of meaning and a lack of future intentionality is a force that may lead to suicide attempts. By contrast, meaning in life is a restraining force against suicidal tendency, regardless of the source of such a tendency.

The present study looks at the connection between meaning in life and suicide among a population that is at greater risk of suicide—youth born to immigrants from a developing country, in this case Ethiopia—compared to native-born Israeli youth. Prior studies conducted by the author [46, 47] as well as other scholars [45] have consistently found a negative correlation between levels of meaning in life and levels of suicidal tendency, anxiety and depression among various groups: normative youth and adults, pathological youth and adults, and more. The common factor to all prior studies was that all participants came from a developed (western) culture. This link has yet to be examined in an immigrant population with a different culture, or a population experiencing an intercultural conflict. The aim of the present study is to correct this lacuna and examine whether such a negative correlation between meaning in life and suicidal tendency is indeed found among adolescents born to immigrants from developing countries, in order to attempt to form preventive therapy plans for immigrant youth at risk of suicide.

Study Hypotheses

1. A negative correlation between meaning in life and suicidal tendency will be found.
2. Native-born youth will display higher levels of meaning in life than immigrant youth.
3. Immigrant youth will display higher levels of suicidal tendency than native-born youth.
4. Native-born boys will display the highest level of meaning in life and lowest level of suicidal tendency; whereas immigrant girls will display the lowest level of meaning in life and the highest level of suicidal tendency.

Method

Participants

Participants were 277 adolescents, 162 adolescents of Israeli origin, and 115 adolescents of Ethiopian origin. The latter were all born in Israel or had immigrated to Israel at a very young age. All participants were students in grades ninth through twelfth, 15–18 years old, with a mean age of 16.43 years ($SD = 1.12$), with no group (Israeli/Ethiopian) differences. There were 123 boys (44.4 %) and 154 girls (55.6 %), with no group difference. Most of the adolescents' parents were married ($N = 199$, 74.3 %), with no group difference. Other parents were divorced (10 %), single (9 %), or widowed (9 %). Over half of the adolescents of Israeli origin were secular ($N = 89$, 54.9 %), and others were traditional ($N = 51$, 31.5 %) or religious ($N = 22$, 13.6 %). Among the adolescents of Ethiopian origin, less than a third were secular ($N = 32$, 28.1 %), about half were traditional ($N = 58$, 50.9 %), and others were religious ($N = 24$, 21.0 %). This difference was significant ($\chi^2(2) = 19.63$, $p < .001$).

Instruments

The Socio-Demographic Questionnaire—respondents were asked to provide the following information about themselves: age, grade, ethnic origin and religious status. They were also asked how they spend their leisure time.

The Purpose in Life Questionnaire (PIL)—an attitude scale created on the basis of logotherapy theory. This questionnaire examines perceptions of meaning in life, i.e., perceiving the world as coherent, understandable and meaningful. The questionnaire, devised by Crumbaugh and Maholick [48], consists of 20 items, and was found to be valid for differentiating between psychiatric and normative populations. In the present study, the questionnaire was adapted to youth, inter alia by removing two items, leaving a total of 18. Each item consisted of a statement, and respondents were asked to rate the extent to which it applied to them on a 6-point Lickert scale from 1 (low meaning in life) to 6 (high meaning in life). The final meaning in life score calculated for each respondent was the average score for the 18 items, with a higher score representing greater meaning in life ($M = 4.23$, $SD = .72$). The 18 items were analyzed for internal reliability using Cronbach's alpha test, which showed it to be high ($\alpha = .86$). The total score was composed of the mean of the items, with a higher score representing greater meaning.

The Suicide Tendency Questionnaire—the Israeli version of a questionnaire identifying suicidal tendency, based on the original questionnaire devised by Zheng (1974).

Items included in the Israeli version were the ones found to significantly differentiate between suicidal and non-suicidal groups. The scale consists of 21 items relating to three factors: depression, anxiety and sadness, and sense of anger and guilt. It is a self-report questionnaire, and respondents were asked to choose one of six possible answers encoded in a Lickert scale, from “none of the above” to “very often.” A high score indicated a high suicide risk. The 21 items were analyzed for internal reliability using Cronbach’s alpha test, which showed it to be high ($\alpha = .82$). According to the original definition of the scales, internal consistencies were: depression- $\alpha = .76$, anxiety- $\alpha = .57$, and emotional state- $\alpha = .54$. Due to low internal consistency in two of the three sub-scales, factor analysis of the items was conducted, with varimax rotation and the criterion of Eigenvalue greater than 1. No meaningful results with acceptable internal consistencies were reached. Furthermore, the correlation between meaning in life (total score) and suicidal tendency (total score) was $r = -.65$ ($p < .001$), thus approaching multicollinearity. This high correlation was due to a high correlation between the depression scale of suicidal tendency and meaning in life ($r = -.70$, $p < .001$). Thus, an additional attempt was conducted to factor analyze the remaining items of suicidal tendency (without those composing the depression scale). This resulted in two factors that resembled the original ones to a large extent, and still had low internal consistencies. The correlation between the two scales of anxiety and emotional state was $r = .44$ ($p < .001$), and the internal consistency of the combined scale was acceptable $\alpha = .68$.

Thus, suicidal tendency was defined using two sub-scales: (a) depression, and (b) anxiety and emotional state, as well as a total score.

Procedure

The study questionnaires were approved by the Chief Scientist’s Office in the Israeli Ministry of Education. The schools were selected at random from among those that had a large Ethiopian student population. The relevant school principals were contacted and they agreed to allow the distribution of the questionnaires among the students. Upon receiving the principals’ consent, we contacted the home-room teachers and asked to be allowed into their classrooms in the final 30 min of a lesson of their choice. It took approximately 20 min to complete the questionnaires, which the respondents were asked to complete honestly. Respondents were assured that confidentiality and anonymity will be maintained. While the questionnaires were being given out, the questions contained in them were explained to the respondents if any difficulty understanding them arose. Once the questionnaires had been filled out,

they were gathered back and placed in an envelope so that no one could see the responses.

Results

Preliminary Findings

Prior to examining the differences in study variables between the two adolescent groups and by gender, differences in study variables were examined by religiosity (and religiosity within group), and correlations were conducted with the adolescents’ ages. Both variables, religiosity and age, were found to have no significant correlation with the study variables.

Group and gender differences in the study variables were examined using two-way analyses of variance, presented in Table 1—two ANOVAs for meaning in life and the total score of suicidal tendency, and a MANOVA for the dimensions of suicidal tendency.

The analysis was not significant for meaning in life. Adolescents from the various groups tended to show high meaning in life (grand $M = 4.27$, $SD = .72$, range 1–6).

The analysis of the dimensions of suicidal tendency was significant for group [$F(2, 272) = 4.43$, $p = .013$, $\eta^2 = .033$], and for the interaction of group and gender [$F(2, 272) = 4.64$, $p = .010$, $\eta^2 = .034$].

For suicidal tendency, group differences in the total score and that of the two dimensions—depression, and anxiety and emotional state—show that adolescents of Ethiopian origin have higher scores than adolescents of Israeli origin.

Analysis of the interaction for the total score revealed that boys of Israeli origin had lower scores than girls of Israeli origin [$F(1, 273) = 4.04$, $p = .045$, $\eta^2 = .015$], while boys of Ethiopian origin had higher scores than girls of Ethiopian origin [$F(1, 273) = 5.19$, $p = .023$, $\eta^2 = .019$]. Boys of Ethiopian origin had higher scores than boys of Israeli origin as well [$F(1, 273) = 16.20$, $p < .001$, $\eta^2 = .058$], yet no differences were found between girls of Israeli origin and girls of Ethiopian origin. That is, boys of Ethiopian origin had the highest scores, boys of Israeli origin had the lowest scores, and the girls of both origins scored somewhere in between them.

Analysis of the interaction revealed that regarding depression, boys of Israeli origin scored lower than girls of Israeli origin [$F(1, 273) = 4.16$, $p = .042$, $\eta^2 = .016$], and lower than boys of Ethiopian origin [$F(1, 273) = 13.00$, $p < .001$, $\eta^2 = .047$]. No differences were found between boys and girls of Ethiopian origin, or between girls of Israeli origin and girls of Ethiopian origin. That is, boys of Israeli origin scored lower than all other groups studied.

Table 1 Means, standard deviations and F values for meaning in life and suicidal tendency by group and gender (N = 277)

	Israeli origin			Ethiopian origin			F_{group} (1, 273) (η^2)	F_{gender} (1, 73) (η^2)	$F_{\text{group} \times \text{gender}}$ (1, 273) (η^2)
	Boys (n = 72)	Girls (n = 90)	Total (n = 162)	Boys (n = 51)	Girls (n = 64)	Total (n = 115)			
Meaning in life	4.23 (.86)	4.34 (.71)	4.29 (.78)	4.16 (.68)	4.30 (.58)	4.24 (.63)	.44 (.002)	1.89 (.007)	.04 (.001)
<i>Suicidal tendency</i>									
Total score	2.61 (.68)	2.82 (.55)	2.73 (.67)	3.09 (.56)	2.81 (.62)	2.93 (.61)	8.78** (.032)	.21 (.001)	9.23** (.034)
Depression	2.51 (.80)	2.75 (.75)	2.64 (.78)	3.00 (.66)	2.79 (.69)	2.88 (.68)	8.36** (.031)	.02 (.001)	6.17* (.023)
Anxiety and emotional state	2.70 (.72)	2.88 (.70)	2.80 (.72)	3.16 (.70)	2.82 (.67)	2.97 (.70)	5.30* (.020)	.86 (.003)	8.42** (.031)

* $p < .05$, ** $p < .01$

Table 2 Correlations between meaning in life and suicidal tendency, by group (N = 277)

	Meaning in life and total score for suicidal tendency r	Meaning in life and depression R	Meaning in life and anxiety and emotional state r
Total sample	-.66***	-.70***	-.49***
Adolescents of Israeli origin	-.68***	-.74***	-.50***
Adolescents of Ethiopian origin	-.61***	-.63***	-.46***
Boys of Israeli origin	-.80***	-.82***	-.61***
Girls of Israeli origin	-.60***	-.67***	-.41***
Boys of Ethiopian origin	-.52***	-.50***	-.38**
Girls of Ethiopian origin	-.68***	-.73***	-.52***

* $p < .05$, ** $p < .01$, *** $p < .001$

Regarding anxiety and emotional state, boys of Ethiopian origin scored higher than both girls of Ethiopian origin [$F(1, 273) = 6.23, p = .013, \eta^2 = .023$] and boys of Israeli origin [$F(1, 273) = 12.19, p < .001, \eta^2 = .044$]. In this case, the scores of Ethiopian boys were higher than all other groups.

Table 2 presents correlations between meaning in life and suicidal tendency for the various study groups. Results show significant negative correlations in all groups between meaning in life and the two scales of suicidal

tendency, so that the higher the level of meaning in life, the lower the level of suicidal tendency.

Discussion and Conclusions

The main study hypothesis was confirmed. A negative correlation was found between the level of meaning in life and suicidal tendency. A negative correlation was also found between the level of meaning in life and the dimensions of suicidal tendency, i.e. depression, anxiety and emotional state, both among the native-born Israeli group and the immigrant one. These findings match those of prior studies [8, 44–47], that have clearly shown the broad connection between meaning in life, or lack thereof, and happiness, distress, and pathology. Or, as Lucas [40] claims, a meaningful existence provides protection from pathological behaviors, and since some distresses simply must be borne (for not all can be mended), it is possible that the more one knows “what for”, the more one is able to bear them. As Nietzsche said (in: 11): “He who has a why to live can bear almost any how”. The present study therefore adds to the studies previously conducted around the world by finding that this connection exists among immigrants who experience a cultural gap between their country of origin and absorbing country.

The present study also examined the level of meaning in life among native-born Israeli youth compared to immigrant youth, as well as boys versus girls. No differences in their levels of meaning in life were found between the various groups. This finding, despite being contrary to the study hypotheses, is not surprising, since Frankl [49] claims human beings differ from all other creatures in the world as they have a unique attribute—intelligence. Thus man strives to acknowledge the reason wherefore he lives, seeking a purpose that will provide him with a unique sense

of self-fulfillment and expression. This pursuit is common to all humans, and therefore both native-born Israeli youth and their immigrant peers, be they male or female, have similar levels of meaning in life. The difference, however, lies in the type of meaning the various groups attribute to their lives. For instance, Arnett [50] discovered that teenage boys tend to demonstrate their goals through religious and political ideology, whereas teenage girls tend to demonstrate theirs in areas of personal orientation, such as friendship, acquaintance and family. The author therefore recommends conducting a follow-up study to examine the content comprising meaning in life among people of various cultures.

In keeping with the study hypotheses, a higher level of suicidal tendency was found to characterize the immigrant youth compared to their native-born peers both in general and in relation to the two dimensions of suicidal tendency—depression and anxiety. The study hypothesis was based on the background provided by literature whereby immigrants find it difficult to adjust and therefore suffer from reduced social and emotional states [26, 27]. The rate of suicides and suicide attempts among immigrants is also much higher than that of native-born individuals [3, 18].

Analysis of the interaction revealed that regarding depression, boys of Israeli origin scored lower than both girls of Israeli origin and boys of Ethiopian origin. No differences were found between boys and girls of Ethiopian origin, or between girls of Israeli origin and girls of Ethiopian origin.

Professional literature tends to attribute higher levels of depression to girls than boys [27, 51] as well as to immigrants compared to native-born individuals. It is therefore understandable and logical that native-born Israeli boys displayed the lowest level of depression compared to their peers. However, it is unclear why no differences were found between native-born Israeli girls and immigrant girls, or between immigrant boys and girls (an elaboration on this finding will soon follow).

The findings regarding anxiety and emotional state also demand a profound explanation, for here too findings are contrary to research literature, as the latter maintains that girls display higher levels of anxiety than boys [52], and immigrants display higher levels of anxiety than native-born individuals [27]. The present study, by contrast, reveals that boys of Ethiopian origin scored higher in the second dimension of suicidal tendency (anxiety and emotional state) than both girls of Ethiopian origin and boys of Israeli origin. In this case, boys of Ethiopian origin had higher scores than all other groups.

Studies on immigration do not reach a consensus over the question ‘who adjusts better, immigrant boys or immigrant girls?’. Most studies conducted outside Israel point out that boys integrate better and faster than girls [26,

53]. However, studies conducted in Israel on the Ethiopian community have found that girls integrate better and quicker compared to boys [54, 55] since the countries from which they had immigrated were under a patriarchal rule. Immigrants who leave a culture in which men are dominant and immigrate to a country that believes in gender equality experience a culture shock; but while the women, whose status improves as a result of immigrating to the new culture, recover more quickly and seize the opportunity to get ahead and prosper [54–56], the men feel demoted, frustrated, and disrespected, and struggle to recover. Thus, the immigrating man or patriarch experiences a harsh absorption crisis, is confused about his identity and status, and suffers a blow to his self-esteem. This hardship endured by the head of the family—who is otherwise a role model and object of identification—must have an impact on his sons [57], some of whom may be young adults at an age in which their identity is formed [58]. The outcome among these teens may be difficulties in forming an identity, at times manifested in higher than average levels of depression and anxiety [59, 60]. This may serve to explain the results obtained in this study, whereby the immigrant boys displayed high levels of anxiety and depression, placing them in the very same class as the native-born and immigrant girls. It should be noted that their levels of anxiety exceeded their levels of depression.

Yet this explanation does not suffice to shed light on the absence of significant difference in levels of anxiety and depression between native-born Israeli girls and immigrant girls. This finding may prove that the immigrant girls, being second generation immigrants, have managed to integrate well into Israeli society despite the striking cultural difference between their new homes and countries of origin, possibly due to their improved social-familial status in the absorbing country. But this conclusion requires a more thorough and in-depth investigation in follow-up studies that will focus on the immigrant girls’ level of integration in additional dimensions.

Finally, this study joins a series of others conducted by the author and her colleagues to empirically examine Frankl’s theory on the connection between meaning in life and suicidal tendency. In the present study, as in previous ones, a negative correlation was found between meaning in life and suicidal tendency; however, the present study makes a unique contribution to professional literature due to the special characteristics of its respondents—second generation immigrants from Ethiopia who experience a cultural conflict between their original and absorbing cultures. Prior studies have found this group to have a high suicide potential compared to local teens; however, according to the findings of the present study, this potential decreases when the level of their meaning in life increases. This gives rise to the practical contribution of the present

study as well, as it recommends adding another element to the current rehabilitation and prevention plans for second generation immigrants: assistance in seeking meaning in life as possible means by which to lower the risk of suicide. The main advantage of this solution is that it is easy to execute, inexpensive, and can be implemented with relatively little effort. Since this study focused solely on respondents of Ethiopian origin, it should be repeated among various other groups of immigrants.

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