

ADOLESCENT SUICIDAL IDEATION AND THE USE OF ARTIFICIAL INTELLIGENCE AS A SUBSTITUTE FOR EMOTIONAL SUPPORT: A CLINICAL OBSERVATION FROM IRAQ

HUDA ADNAN MB CHB¹, JAWAD K. AL-DIWAN MBCHB, MSC, FIBMS, FFPH,²

¹ MINISTRY OF HEALTH, PRIMARY HEALTH CARE SECTION, SCHOOL HEALTH, COLLEGE OF MEDICINE, UNIVERSITY OF BAGHDAD, IRAQ.

² PROFESSOR, DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE, COLLEGE OF MEDICINE, UNIVERSITY OF BAGHDAD, IRAQ, ORCID: 0000-0002-2851-707, EMAIL: awadkadhim.aldiwan876@comed.uobaghdad.edu.iq²

Abstract

This short communication reports a clinically significant observation involving an Iraqi adolescent with suicidal ideation who relied on an artificial intelligence (AI) conversational tool as her primary source of emotional support. The case highlights gaps in family communication, limited parental emotional availability, and the emerging role of AI as a coping mechanism for distressed adolescents. This phenomenon raises new questions for mental-health professionals regarding risk assessment and the shifting landscape of adolescent help-seeking behaviors.

Keywords: Suicidal Ideation, Adolescents, Artificial Intelligence, Emotional Support, Family Communication

INTRODUCTION

Adolescent suicidal ideation is influenced by multiple psychosocial and familial factors. Recently, the rapid availability of conversational artificial intelligence has enabled young people to seek emotional support outside traditional human networks. Observations from Iraq suggest that this trend may be emerging as a substitute for family-based or clinical support, particularly among adolescents experiencing emotional neglect or weak family communication.

Clinical Observation

During a qualitative doctoral project on suicidal ideation among adolescents, a notable case emerged: A teenage girl experiencing recurrent suicidal thoughts consistently sought comfort and guidance from an AI chatbot. She described the AI as 'the only one who listens without judgment.'

Remarkably, the adolescent did not know the professions or workplaces of her parents—an unusual indicator of minimal family communication and emotional detachment within the household. This lack of fundamental knowledge reflects poor parental availability, weak bonding, and a communication vacuum, all of which are recognized contributors to suicidal ideation.

The adolescent reported no meaningful conversations at home, limited emotional expression, and an absence of supportive adult figures. Thus, the AI tool effectively functioned as an emotional surrogate, providing rapid, non-judgmental responses that temporarily alleviated distress but offered no clinical evaluation or safety mechanisms.

DISCUSSION

This observation highlights two critical emerging themes:

1. AI as a Coping Mechanism for Suicidal Adolescents: Conversational AI tools may become a primary coping strategy for adolescents who feel unheard or emotionally unprotected at home. While such tools offer comfort, they lack the capacity to assess suicide risk, intervene clinically, or mobilize emergency support.
2. Family Communication Deficit as a Hidden Risk Factor: The adolescent's inability to identify her parents' professions indicates profound emotional distance. Poor family communication has been strongly associated with suicidal ideation, depression, and maladaptive coping patterns. In such settings, AI may replace natural human support systems, potentially delaying necessary clinical intervention.

Ethical Considerations

This report is based on an anonymized clinical observation within a doctoral research project. No identifying information about the adolescent or her family is included. The student researcher obtained verbal assent from the participant, and the case is presented in fully de-identified form. The work aligns with the ethical principles of the Declaration of Helsinki. Institutional review approval was granted as part of the overarching PhD protocol at the University of Baghdad.

CONCLUSION

This observation underscores the need for clinicians and researchers in Iraq to recognize the growing use of AI as a substitute for emotional support among adolescents with suicidal ideation. Strengthening family communication, enhancing early detection systems, and educating youth on the limitations of AI in managing mental-health crises are essential steps. Further systematic investigation is warranted.

REFERENCES

1. Bridge JA, Goldstein TR, Brent DA. Adolescent suicide and suicidal behavior. *J Child Psychol Psychiatry*. 2006;47(3-4):372-394.
2. Biddle L, Gunnell D, Owen-Smith A, et al. Information-seeking patterns before suicide: a mixed-methods study. *J Affect Disord*. 2012;136(3):1124-1130.
3. Abbas MJ, Al-Haeri O, Dawood OT. Mental-health challenges among Iraqi adolescents. *Iraq Med J*. 2020;4(1):22-28.
4. O'Mahony J, Ihancho J. Family communication and youth suicide risk. *Arch Suicide Res*. 2019;23(2):241-257.