

To Assess the Relationship Between Suicidal Ideation, Depression and Hopelessness in Adolescents

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ABSTRACT

The focus of proposed study is to study the relationship between depression, hopelessness and suicidal ideation among adolescents. It is significant for assessing the possible causes of suicidal ideation. Findings of this study will improve the knowledge of not just adolescents but the general public on suicidal ideation so that they stand a better chance to manage it. The findings will also add to the existing body of knowledge. It will help the adolescents in managing the suicidal thoughts. This will further help in providing better mental health to adolescents. If the relationship between these three is understood, then new strategies can be developed to improve it.

Keywords: *Depression, Suicidal Ideation, Hopelessness*

Suicidal behavior is complex. It is an irrational desire to die. A person who dies by suicide leaves behind a tangled confusion of family members and friend who try to make sense of a senseless and a purposeless act. The primary motivation to suicide is depression which is characterized by mood disturbance, feelings of sadness, despair and discouragement, resulting from personal loss and tragedy. A concept synonymous to “suicidality” is “suicidal behaviour” (which thus, not only refers to acts but also to thoughts). “Suicidal ideation” refers to suicidality without action, i.e. all types of suicidal thoughts and plans. Suicide Ideation refers to the thoughts about taking one's own life with some degree of intent (Johnson, 2006). A “suicide attempt” not only refers to an unsuccessful suicide but also comprises deliberate acts of lower lethality and intention. Suicidal Ideation have incorporated different thoughts as attitudes to suicidal behavior, for example, considering the suicidal act as potential coping option, and contemplated plans and preparations for self-harm. Suicide is the third leading cause of death among 15-to-24 year olds (Anderson & Smith, 2005) and the second leading cause of death among college students (Schwartz, 2006). Worldwide, suicide is among the top five causes of mortality in the 15- to 19- year age group. In many countries it ranks first or second as a cause of death among both boys and girls in this age group.

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Received: October 13, 2021; Revision Received: December 25, 2021; Accepted: December 28, 2021

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Suicidal ideation is generally associated with depression and other hopelessness; however, it seems to have associations with many other psychiatric disorders, life events, and family events, all of which may increase the risk of suicidal ideation.

Suicidal ideation has a straightforward definition — suicidal thoughts — but there are some other related signs and symptoms. Some symptoms or co-morbid conditions may include unintentional weight loss, feeling helpless, feeling alone, excessive fatigue, low self-esteem, presence of consistent mania, excessively talkative, intent on previously dormant goals, feel like one's mind is racing. The onset of symptoms like these with an inability to get rid of or cope with their effects, a possible form of psychological inflexibility, is one possible trait associated with suicidal ideation. They may also cause psychological distress, which is another symptom associated with suicidal ideation. Other possible symptoms and warning signs include: hopelessness, insomnia or oversleeping, loss of appetite or overeating, depression, etc.

Depression is a state of low mood and aversion to activity that can affect a person's thoughts, behavior, feelings and sense of well-being. People with a depressed mood can feel sad, anxious, empty, hopeless, helpless, worthless, guilty, irritable, ashamed or restless. They may lose interest in activities that were once pleasurable, experience loss of appetite or overeating, have problems concentrating, remembering details or making decisions, and may contemplate, attempt or commit suicide. Insomnia, excessive sleeping, fatigue, aches, pains, digestive problems or reduced energy may also be present. Depressed mood is a feature of some psychiatric syndromes such as major depressive disorder, but it may also be a normal reaction to life events such as grief, a symptom of some bodily ailments or a side effect of some drugs and medical treatments.

At least one of two essential features of clinical depression must be present in order to suspect a diagnosis of major depressive disorder. One of these is depressed mood, and the other is a loss of interest or pleasure in activities. A mental health professional will evaluate whether a person has depressed mood in any of several ways. A person may simply state that he or she has been feeling sad, depressed, blue, empty, "down in the dumps," hopeless, etc. If a person denies such feelings, but either appears to be on the edge of tearfulness, shows a depressed facial expression and disposition, or appears to be overly irritable, then these may also indicate the presence of depressed mood.

Additionally, some people may be more likely to report physical complaints (i.e., aches, pains, headaches) rather than depressed mood. This may be because some people more easily recognize physical than emotional symptoms, they experience their mood in physical terms, or it may be more socially acceptable to report physical symptoms.

For the symptom to meet the criteria towards a diagnosis of major depression, a person must have had a depressed mood for most of the day, nearly every day for a two-week period of time.

Feelings of hopeless and/or helplessness are common in those who are clinically depressed. They are also some of the most frustrating feelings that depressed individuals' experience. Research on the cognitive theory of depression has shown that people who are depressed struggle with feelings of hopelessness and helplessness more so than people who are not depressed (Sacco & Beck, 1995). A sense of hopelessness reflects a negative view of the

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future. This includes expectations of personal dissatisfaction, failure, and a continuation of pain and difficulty-- a belief that nothing will get better. Feelings of helplessness reflect a negative view of the *self*. Depressed individuals view themselves more negatively, their self-esteem suffers, and they have little or no self-confidence. They do not believe they have any control or that they can help themselves to feel better. They may have an urge to give up and think, "What's the use?"

It is a feeling that conditions will never improve, that there is no solution to a problem, and, for many, a feeling that dying by suicide would be better than living.

Most people who feel hopeless have depression, and untreated depression is the number one cause for suicide.

People often express hopelessness in statements that they make, such as the following: things will never get better; there are no solutions to my problems; I will never be happy again; I don't see things ever improving; there is no point in trying anymore; I just want to give up, and so on.

Research has also indicated that severe hopelessness may be a predictor of suicide. This does not mean that if a person feels hopeless that he or she will attempt to commit suicide. This is a common symptom of clinical depression. What it does tell us, however, is that depressed individuals who struggle with strong feelings of hopelessness may be at a higher risk for self-harm. They should receive treatment from a trained medical or mental health professional.

Depression and suicidality are deeply entangled. Suicidality is a diagnostic symptom for major depression, and depression is the most common mental disorder leading to suicide, although substance abuse and schizophrenia are also major contributors (WHO, 2001). Major depression affects 3 to 5 percent of children and adolescents. Depression negatively impacts growth and development, school performance, and peer or family relationships and may lead to suicide.

Kessler, Borges and Walters (1999) reported that rates of attempted suicide rise precipitously during adolescence. Borst, Noam and Bartok (1991) postulate that with the advent of puberty, social-cognitive changes lead to more internal than external attributions of unhappiness. This shift in attributional style leads to more self-blames in response to interpersonal stressors and in some adolescents results in suicidal behavior. Similarly maladaptive cognitive processes frequently play an important role in suicidal behavior.

Although numerous studies have demonstrated a relation between hopelessness and adolescent suicide attempts, hopelessness does not consistently predict suicidality once depression is controlled (Esposito, Johnson, Wolfsdorf & Spirito, 2003). It has been suggested that hopelessness may place adolescents at risk for suicidal behavior for only a limited period during a depressive episode (Dori & Overholser, 1999).

Depression is a long-established risk factor for suicide (Brent, Perper, Goldstein, Kolko & Allan, 1988; Driessen, Veltrup, Weer, Joh, Wetterling & Dilling, 1998; Friedman, Aronoff, Clarkin, Corn & Hurt, 1983; Kessler, Borges & Walters, 1999; McGlashan, 1986; Preuss, Schuckit, Smith, Danko & Buckman, 2002; Yen, Shea, Pagno, Sanislow & Grilo, 2003), and mood disorders are most frequently associated with suicide and suicide ideation and

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discussed as risk factors for the presence of suicidality (Chioqueta & Stiles, 2003; Hawton, 1987).

Objectives

The specific objective of the study includes:

- To investigate the relationship between suicidal ideation and depression among adolescents.
- To investigate the relation between hopelessness and suicidal ideation.
- To study the effect of gender on suicidal ideation, depression and hopelessness.

Hypotheses:

The following alternate hypotheses will be tested in this study.

H1: There exists a significant relationship between hopelessness and suicidal ideation.

H2: There exists a significant relationship between depression and suicidal ideation

H3: There exists a significant relationship between hopelessness and depression

H4: There exists a difference of gender in suicidal ideation, depression and hopelessness.

METHODOLOGY

Sample

The sample consists of 150 subjects (75 males and 75 females). The subjects are drawn from various Institutions in Delhi using cluster sampling. The age of the selected subjects range from 13 to 19 years. The subjects are having good health and don't suffer from any serious ailments.

Tools

- **Scale for Suicide Ideation (SSI) (Beck, Kovacs, Weissman, 1979):** It consists of nineteen items and is designed to quantify the intensity of current conscious suicidal intent by scaling various dimensions of self-destruction thoughts or wishes. Each item consists of three alternative statements graded in intensity from 0 to 2. The scale has reliability (Cronbach alpha) and validity coefficients of .89 and .41, respectively.
- **Beck Depression Inventory (BDI) :** It is comprised of twenty one items. Although the inventory was designed as a clinical instrument but in practice it is frequently used to dichotomise subjects in to depressed and non- depressed groups. This inventory has test-retest reliability coefficient ranging from .74 to .83 on different time intervals and positively correlated with Hamilton Depression Rating Scale with a Pearson r of .71.
- **Beck hopelessness scale (BHS) :** It is a 20-item self-report inventory developed by Dr. Aaron T. Beck that was designed to measure three major aspects of hopelessness: feelings about the future, loss of motivation, and expectations. The test is designed for adults, age 17-80. It measures the extent of the respondent's negative attitudes, or pessimism, about the future. It may be used as an indicator of suicidal risk in depressed people who have made suicide attempts. The test is multiple choices.

Statistical Analysis

The obtained data will be analyzed with the help of descriptive statistics and T-test.

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RESULT & DISCUSSION

Table 1

Variables	Coefficient of correlation	Level of Significance
Hopelessness and SSI	0.613267	p<0.01

A Pearson product-moment correlation coefficient was computed to assess the relationship between the hopelessness and suicidal ideation. There was a positive correlation between the two variables, $r = 0.613$, $p = 0.001$. A table summarizes the results (Table 1) Overall, there is a strong, positive correlation between hopelessness and suicidal ideation. Increase in hopelessness was correlated with increase in suicidal ideation.

Therefore, the hypothesis H1 (There exists a significant relationship between hopelessness and suicidal ideation.) is accepted.

Table 2

Variables	Coefficient of correlation	Level of Significance
BDI and SSI	0.745233	p<0.01

There was a positive correlation between the two variables, $r = 0.745$, $p = 0.01$ while assessing the relationship between the depression and suicidal ideation (refer Table 2 for results). All in all, there is a strong, positive correlation between depression and suicidal ideation. Increase in depression was correlated with increase in suicidal ideation.

Hence, the hypothesis H2 (There exists a significant relationship between depression and suicidal ideation) is accepted

Table 3

Variables	Coefficient of correlation	Level of Significance
Hopelessness and BDI	0.633793477	p<0.01

Nevertheless, the relationship between the hopelessness and depression shows a positive correlation between the two variables, $r = 0.634$, $p = 0.01$. A table sums up the results (Table 3). In general; there is a strong, positive correlation between hopelessness and depression, wherein increase in hopelessness was correlated with increase in depression.

So, the hypothesis H3 (There exists a significant relationship between hopelessness and depression) is accepted.

Table 4

Hopelessness	Gender	Mean	Standard Deviation	t-value	Level of Significance
	Male	6.9189189	4.2361805		
	Female	8.184211	3.94274336		

Table 5

Beck's Depression Inventory	Gender	Mean	Standard Deviation	t-value	Level of Significance
	Male	18.810811	13.00461		
	Female	20.89474	9.080084		

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Table 6

Suicidal Ideation	Gender	Mean	Standard Deviation	t-value	Level of Significance
	Male	9.1351351	7.587652	-1.279853	Not Significant
	Female	10.64474	6.803762		

The t-test was computed to assess the gender differences in hopelessness, depression and suicidal ideation. The results are summarized in table (Table 4). The table shows that there are no significant gender differences in hopelessness, depression and suicidal ideation.

Therefore, the hypothesis H4 (There exists the gender differences in hopelessness, depression and suicidal ideation) is rejected.

CONCLUSION

From the above study it was found that hopelessness and depression are positively correlated with suicidal ideation. Increase in hopelessness and depression will lead to increase in suicidal ideation. So to reduce the suicidal behavior in adolescents, adequate measures to reduce their hopelessness and depression must be considered. Furthermore, it is also concluded that there is no difference of gender in hopelessness, depression and suicidal ideation. Adolescents suffer from these problems irrespective of their gender.

The obtained results are in concordance with the earlier studies which have also found the role of depression and hopelessness in suicide ideation. Hopelessness is one of the major components of Beck's negative cognitive triad i.e., negative cognitions about future. When confronted with a negative event, individuals with a negative thinking process are vulnerable to depression, because they will infer those negative consequences will follow from this negative event and that occurrence of that event means that the individuals themselves are worthless or flawed (McGinn, 2000). The expression of hopelessness in conjunction with a mental disorder such as depression represents a very dangerous warning sign and always needs to be taken very seriously. Since hopelessness is positively related to adolescent suicidal ideation, it is important to cultivate the sense of hope in adolescents. Local studies had found that family functioning and perceived parental control were significantly related to hopelessness (Shek, D.L.2007). Students who are depressed are more likely to have suicidal ideation, as are students in a state of hopelessness. The results also support the differential activation model of suicidality (Lau et al., 2004; Williams et al., 2008). The model assumes that during a depressive episode an association is formed between sad mood and suicidal and hopelessness cognitions, so that in the future, a mild mood fluctuation acts as a prime to re-activate such cognitions, increasing the risk of relapse. The unique association of the past symptoms of guilt and suicidality with current Hopelessness and Suicidal reactivity was replicated (Williams et al., 2008). This trend indicates there is a strong relationship of suicide ideation with depression and hopelessness. The results of the present study suggest that targeting hopelessness may be as important in adolescents as in adults to reduce suicidal ideation and prevent suicidal attempts.

Recommendations for further study

For further study, the other factors like stress, insomnia could be considered.

- Other socio-demographic details could also be considered.
- The sample could be larger and include wider age group
- Other areas could also be included in the research.

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REFERENCES

- Anderson, R. & Smith, B. (2005). Deaths: leading cause for 2002. National Vital Statistics Report: from the Centre for Disease Control and Prevention, National Centre for Health Statistics, National Vital Statistic System, 53, 1-89.
- Beck, A., Kovacs, M., & Weissman, A. (1979). Assessment of suicidal intention: The Scale for Suicide Ideation. *Journal of Consulting and Clinical Psychology*, 47, 343-352.
- Beck, A., Rush, A., Shaw, B., & Emery, G. (1979). *Cognitive therapy of depression*. New York: Guilford.
- Beck, A., Steer, R., & Ranieri, W. (1988). Scale for suicide ideation: Psychometric properties of a self-report version. *Journal of Clinical Psychology*, 44, 499-505.
- Beck, A., Ward, C., Mendelson, M., Mock, J., & Erbaugh, J. (1961). An inventory for measuring depression. *Archives of General Psychiatry*, 4, 561-71.
- Beck, A., & Steer, R. (1988). *Manual for the Beck Hopelessness Scale*. San Antonio, Tex, Psychological Corporation.
- Beck, A., Ward, C., Mendelson, M., Mock, J., & Erbaugh, J. (1961). An inventory for measuring depression. *Archives of General Psychiatry*, 4, 561-71.
- Beck, A., Weissman, A., Lester, D., & Trexler, L. (1974). The measurement of pessimism: The Hopelessness Scale. *Journal of Consulting and Clinical Psychology*, 42, 861-865.
- Bedrosian, R., & Beck, A. (1979). Cognitive aspects of suicidal behavior. *Suicide and Life Threat Behavior*, 2, 87 - 96.
- Brown, M. (1986). Power, gender, and the social meaning of Aguaruna suicide. *Man: New Series*, 21, 311 - 328.
- Dyce, J. (1996). Factor structure of the Beck Hopelessness Scale. *Journal of Clinical Psychology*, 52, 555-558.
- Dyer, J., & Kreitman, N. (1984). Hopelessness, depression, and suicide intent in para suicide. *British Journal of Psychiatry*, 144, 127-133.
- Giddens, A. (1964). Suicide, attempted suicide, and the suicide threat. *Man* 64, 115-116.
- Holden, R. & DeLisle, M. (2005). Factor analysis of the Beck Scale for Suicide Ideation with female suicide attempters. *Assessment*, 12, 231-238.
- Indian Journal of Psychological Science*, December-2011, V-2 (2)(126-133)
- Johnson, C. (2006). Familicide and family law: a study of filicide-suicide following separation. *Family Court Review*, 44, 448-463.
- Lau, M., Segal, Z., Williams, J. (2004). Teasdale's differential activation hypothesis: implications for mechanisms of depressive relapse and suicidal behaviour. *Behaviour Research and Therapy*. 42, 1001-1017.
- McGinn, L. (2000). Cognitive behavioral therapy of depression: Theory, treatment and empirical status. *American Journal of Psychotherapy*, 54, 254-260.
- Minkoff, K., Bergman, E., Beck, A., et al. (1973). Hopelessness, depression, and attempted suicide. *American Journal of Psychiatry*, 130, 455-459.
- Nekanda-Trepka, C., Bishop, S. & Blackburn, M. (1983). Hopelessness and depression. *British Journal of Clinical Psychiatry*, 132, 954-956.
- Schwartz, A.J. (2006). College student suicide in the United States: 1990-91 through 2003-04. *Journal of American College Health*, 54, 327-337.
- Shek, D. (2007). Adolescent developmental issues in Hong Kong: Relevance to positive youth development programs in Hong Kong. In: Shek DTL, MaHK, Merrick J, Eds. *Positive youth development: Development of a pioneering program in a Chinese context*. London: Freund Publishing House.

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Stevenson, J. (1988). Suicide, in the American Psychiatric Press text book of psychiatry. Edited by Talbot, J.A., Hales, R.E., Yudofsky, S.C. Washington, DC. American Psychiatric Press, pp1021-1035.

Watson, P., & Andrews, P. (2002). Toward a revised evolutionary adaptationist analysis of depression: The social navigation hypothesis. *Journal of Affective Disorder*, 72, 1–14.

Acknowledgement

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

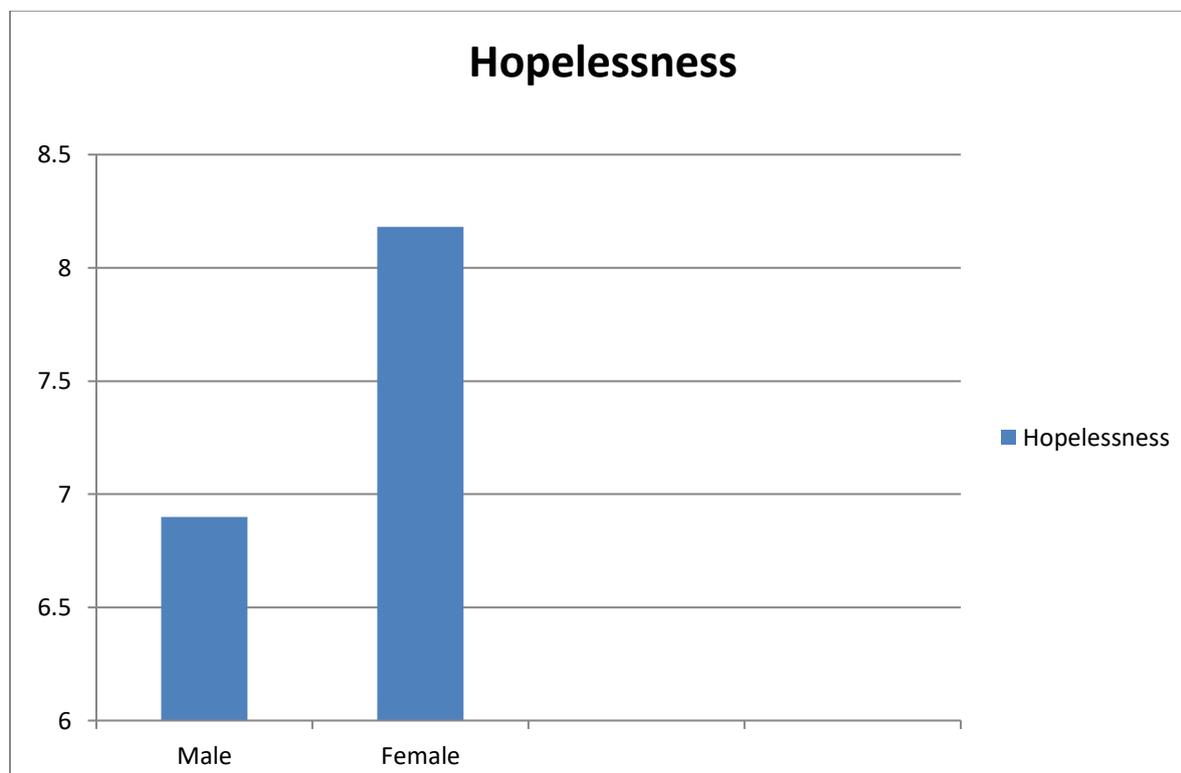
Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Choudhary S.& Samantaray S. K. (2021). To Assess the Relationship Between Suicidal Ideation, Depression and Hopelessness in Adolescents. *International Journal of Indian Psychology*, 9(4), 2056-2064. DIP:18.01.196.20210904, DOI:10.25215/0904.196

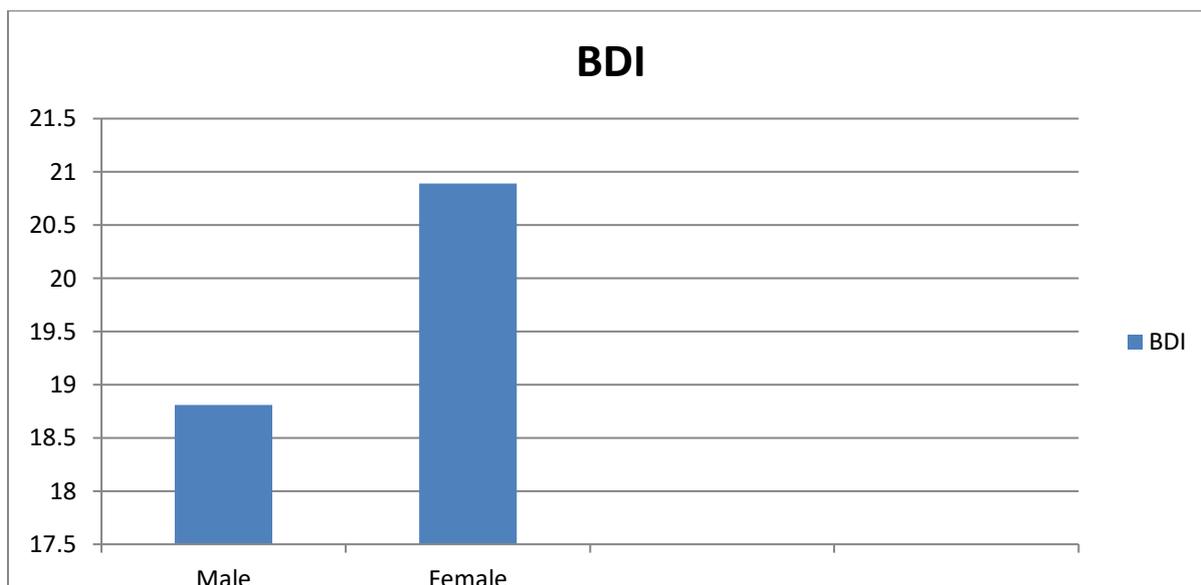
APPENDIX

Graph 1



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Graph 2



Graph 3

