

## Suicidal Ideation in Working Women

Sonam Begum<sup>1\*</sup>, C. P. Khokhar<sup>2</sup>

### ABSTRACT

The present study attempted to explore the effects of marital status, job status and age on Suicidal ideation in working women. Suicide is the intentional taking of one's own life. Suicidal thoughts and behaviors are on a continuum from those representing a clear intention to die to those representing ambivalence about dying. A sample of 200 working women were taken from different institution of Delhi, Uttarakhand and Uttar Pradesh. The age range from 35-55 years. Analysis of variance was used to analyse the data. Results indicated that the unmarried working women have higher feelings of suicidal ideation in comparison to married working women. Working women having age group of 35-43 years have higher feelings of suicidal ideation in comparison to working women having age group of 46-55 years. Women, who are working in Pvt. Sector have higher suicidal ideation in comparison to those women who are working in Govt. sector.

**Keywords:** *Suicidal Ideation, Marital Status, Job Status*

Suicidal ideation is a global cause of death and disability. Suicide has become one of the biggest social problems of our society affecting all our lives in one way or the other. It is a day-to-day experience and everyday news in our society. Moreover this still remains as a silent issue of discussion with less or no efforts being done to prevent or stop this act. The society is silent in this issue, No effective step picked-up to resolve this problems.

The terms derive its origin from two Latin words 'sui' and 'ceado'. The meaning of 'sui' is oneself and 'ceado' means kill. Thus, suicide means to kill oneself. Suicidal ideation, defined as plans and wishes to commit suicide and as self-reported thoughts of engaging in suicide-related behaviour, is common in young people (Beck et al., 1979; O'Carroll et al., 1996). In other views, Suicidal ideation and attempts are strongly predictive of suicide deaths; can result in negative consequences such as injury, hospitalization and loss of liberty; and exert a financial burden of billions of dollars on society (CDC 2010; Nock et al. 2008; WHO 2014). Taken together, suicide and suicidal behaviour comprise the nineteenth leading cause of global disease burden (i.e. ill-health), and the sixth and ninth leading cause of global disease burden among men and women 15 to 44 years of age, respectively (WHO 2008). By any measure, there is urgency to better understand and prevent suicide and suicidal behaviour. In

<sup>1</sup> Research Scholar, Department of Psychology, Gurukul Kangri Vishwavidyalaya, Haridwar, India

<sup>2</sup> Professor, Department of Psychology, Gurukul Kangri Vishwavidyalaya, Haridwar, India

\*Responding Author

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the juvenile justice system, “suicidal behaviour” and “suicide attempts” are often used interchangeably (Crosby et al 2011).

Worldwide, suicide is the fifteenth leading cause of death, accounting for 1.4% of all deaths (WHO 2014). In total, more than 800000 people die by suicide each year. The annual global age-standardized death rate for 2012 is estimated to be 11.4 per 100000, and the World Health Organization (WHO) projects this rate to remain steady through 2030 (WHO 2013, 2014). In addition to suicide deaths, suicidal thoughts and nonfatal suicide attempts also warrant attention. Globally, lifetime prevalence rates are approximately 9.2% for suicidal ideation and 2.7% for suicide attempt (Nock et al. 2008).

This study reviews relevant literature about suicidal ideation in working women. The studies indicated that Suicide rates are not distributed evenly across people or places. Studies shows that high-income countries have higher suicide rates than low and middle income countries (LMIC). Suicide rates also differ by gender, age, job and marital status. Men account for roughly three times the number of suicides than women, and this gender disparity is even greater in high income countries (WHO 2014). When filtered by age, suicide rates are highest in adults and older across both men and women. However, although overall rates of suicide are lower in children and young adults. Studies shows that rates of life time suicidal ideation, suicide plans, and suicide attempts are higher in females than males (Kessler et al. 1999; Nock et al. 2008a, 2013) and higher in adolescents than adults (Nock et al. 2008b). C.P. Khokhar, M. Chatterjee, 2010, also founded that role stress, work schedule and personality of working women affected the way they think, from positive to negative and therefore, leading to a high level of suicide in them.

### *Objective*

- To find out the effect of marital status, job status and age of working women on Suicidal ideation.

### *Hypotheses*

The following hypotheses are framed to verify in reference to suicidal ideation through ex post-facto experiment:

1. Suicidal ideation will differ on marital status in working women.
2. Suicidal ideation will differ on job status in working women.
3. Suicidal ideation will differ on age in working women.
4. Mutual interaction of marital status, job status and age will influence suicidal ideation.

## **METHODOLOGY**

### *Sample:*

A total sample of 200 working women from various job status, age groups and marital status has been selected randomly from the various districts of Uttarakhand, Uttar Pradesh and Delhi.

### *Design:*

The present investigation is an Ex post facto design in  $2 \times 2 \times 2$  factorial settings. Three independent and one dependent variable were used. The dependent variable was suicidal ideation. The independent variables were marital status, age and job status. Participant's age varying between 35-55 years. The obtained data were analyzed by using ANOVA.

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**Tool:**

Suicidal ideation scale by Aron T. Beck (1987). The scale of suicidal ideation (SSI), a 19 items clinical research instrument designed to quantify and access suicidal ideation intention.

**Procedure**

Participants were contacted personally and requested to respond on above mentioned measures. They were asked to read carefully the instructions given in the questionnaire. Participants were allowed to take their own time to complete the questionnaire. Above mentioned psychometric device was administered to the selected participants.

### RESULTS

**Table 1: Research Paradigm on Suicidal ideation:**

		Marital status				$\Sigma$
		Married		Unmarried		
		Pvt.	Govt.	Pvt.	Govt.	
AGE	35-43	$\Sigma X$ -253	$\Sigma X$ -253	$\Sigma X$ -427	$\Sigma X$ -314	<b>1247</b>
		M-10.12	M-10.12	M-17.08	M-12.56	
		N- 25	N- 25	N- 25	N- 25	
	46-55	$\Sigma X$ -300	$\Sigma X$ -244	$\Sigma X$ -298	$\Sigma X$ -263	<b>1105</b>
		M-12.00	M-9.76	M-11.92	M-10.52	
		N- 25	N- 25	N- 25	N- 25	
$\Sigma$		<b>553</b>	<b>497</b>	<b>725</b>	<b>577</b>	<b>2352</b>

**Table 2: Anova summary of results on suicidal ideation**

Source of variance	SS	Df	MS	F	P
Marital status	317.52	1	317.52	14.09**	<0.01
Age	100.82	1	100.82	4.47*	<0.05
Job status	208.08	1	208.08	9.23* *	<0.01
Marital status×Age	237.62	1	237.62	10.55**	<0.01
Marital status×Job status	42.32	1	42.32	1.87	
Age×Job status	2.42	1	2.42	0.10	
Marital status× Age× Job status	89.78	1	89.78	3.98*	<0.05
Error	4323.92	192	22.52		
Total	5322.48	199			

\*\*p < .01, \* p<.05

F.05 (1,199) =3.89;

F.01 (1,199) =6.76

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Table-2 indicate that 'F' value for 'Marital status' is (1, 199) =14.09,  $p < .01$  is significant. The computed 'F' value for 'Age' is (1,199) = 4.47,  $p < .05$  is significant. The 'F' value for 'Job status' (1,199) = 9.23,  $p < .01$  is also significant. The 'F' value for bivariate interaction of 'Marital status×Age' (1,199) =10.55,  $p < .01$  is also significant. The interaction effects of 'Marital status×Job status' and 'Age×Job status' are not significant. The 'F' value for trivariate interaction of 'Marital status × Age × Job status' is (1,199) =3.98,  $p < .05$  is significant.

**Table 3: In the context of Trivariate (2×2×2) interaction of marital status, age and job status in working women have impact on suicidal ideation. Breakup of the results are as given under**

S.N.	Source of variance	SS	df	MS	F	P
1.	Married: Age×Job	15.68	1	15.68	0.69	
	Unmarried: Age×Job	30.42	1	30.42	1.35	
2.	Age(35-43):M.S× Job	63.84	1	63.84	2.83	
	Age(46-55): M.S× Job	2.20	1	2.20	0.09	
3.	Job(Pvt.): Age× M.S	154.88	1	154.88	6.87**	< .01
	Job(Govt.): Age× M.S	8.82	1	8.82	0.39	
4.	Error	4323.92	192	22.52		

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

F.05 (1,199) =3.89;

F.01 (1,199) =6.76

Table 3 indicate that 'F' value of interaction effects of 'Age and Marital status' in the context of Pvt. Sector is (1,199) = 6.87,  $p < .01$  is significant. All the other interaction effects are not significant.

### INTERPRETATION AND DISCUSSION

The results shows that, Unmarried women who are working in Pvt. Sector, having age group of 35-43 years have higher suicidal ideation in comparison to married women working in Govt. sector having age group of 46-55 years. Suicide rates tend to increase with age. In 2000, the female rates for the different age groups are: The female rates for the different age groups are: 5–14 years - 0.4, 15–24 years - 4.8, 25–34 years - 6.2, 35–44 years - 7.8, 45–54 years - 9.7, 55–64 years - 10.6, 65–74 years - 12.3 and 75+ years - 15.9. Patel et al., (2012) also found that of the total suicides at ages 15 years and older, about 40% of male suicides (45/1000/114,800) and about 56% of female suicides (40 500/72,100) occurred at ages 15–29 years. Suicides occurred at younger ages in women (median age 25 years) than in men (median age 34 years). Male death rates at ages 15 and older were generally consistent at around 25–30/100,000 men across age groups. Female death rates peaked at about 25/100,000 women at ages 15–29 years, and then fell in older women.

Table 2. The results indicate that unmarried working women have higher suicidal ideation in comparison to married working women. According to the exist literature, married women are less prone to suicide ideation than single, divorced and widowed women. Never married, divorced or widowed women conduct most suicides (64.4%). In the US Cutright et al. analyzed retrospective data from 12 developed countries to explain the differences in suicide between married and non-married women. They concluded that the compatibility of marital status with the corresponding age group was the best explanation of these differences. "Khokhar and Chatterjee (2010) studied the role stress of working women. High role stress leads towards suicide ideation in general but neurotics and introverts are more prone to the effects of high stress in relation to suicide ideation".

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The results shows that working women having age group of 35-43 years have higher feelings of suicidal ideation in comparison to working women having age group of 46-55 years. In the US, female suicide is concentrated in the 35-64 years age group (64.8%) with a 9.1/100000 peak between those aged 45-54 years. Similar results have been reported for England and Wales. Societal changes lead many women in this age group to become economically active, maybe increasing the risk of suicide among them. From 50 years of age, the suicide rates among women tend to diminish progressively till old age, when rates start increasing again. Women, who are working in Pvt. Sector have higher suicidal ideation in comparison to those women who are working in Govt. sector. In the context of mutual interaction of marital status and age, within the age group of 35-43 years, unmarried state of the working women promotes suicidal ideation in comparison to older age group 46-55 years married working women. White and Holmes found that suicide rate in women increases with age reaching its peak at 35-44 years. Yet, depression and suicide ideation have been associated with the premenopausal phase in women when compared to premenopausal and postmenopausal. “Singh (2006) reported working women bearing dual role responsibility one in family and other at job, when cannot discharge their duties equally efficiently feels tense and continuous tension creates stress which in turn may affect their mental health status and life satisfaction. During middle age some biological changes like menopause, aging coupled with psychosocial factors and work-family conflict may generate irritation, frustration, anxiety, depression etc. in those women. There was a need to assess the mental health status of working middle-aged women so that some programmed interventions may be planned for maintaining and improving the quality of their life. To assess the psychosocial stress, work-family conflict and the level of anxiety, depression, somatic symptoms and social dysfunction of middle-aged female school teachers. A sample of 50 middle-aged female school teachers was selected randomly from 15 government recognized girl's schools of Varanasi city in the year 2001-2002. An interview schedule and two questionnaires namely General Health Questionnaire and Psycho Social Stress Scale were administered simultaneously. Psycho Social Stress Scale score showed moderate to high level of stress in 54% subjects whereas, 18% cases had low scores while, 28% cases were in between low to moderate level of stress. Anxiety level was observed low in 64% cases and moderate in 32% cases. Depression level was low in 92% cases. Somatic symptom score was moderate in 44% cases while, social dysfunction score had been observed moderate in 80% cases. The overall assessment revealed that though the subjects are normal in general, but a substantial proportion is at risk of developing psychosocial stress generated problems that may affect their mental health”. Singh and Joshi (2008) examined the relationship of depression, life stress and personality with suicidal ideation. It was found that suicidal ideation was positively associated with depression, stressful life events and two dimensions of personality i.e. extraversion and psychoticism.

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### ***Conflict of Interest***

The authors carefully declare this paper to bear not a conflict of interests

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