

Gender Difference among Young Adults for Suicidal Ideation

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ABSTRACT

According to recent studies suicide claims many lives' s per year and suicide is seen as the third leading cause of death. One of the commonly seen causes of suicide is depression. The objective of the study is to understand the attitude of young adults towards suicidal ideation and to know if there is a gender differences for suicidal ideation. The total sample of this study consisted of 300 respondents out of which 150 were males and 150 were females. The subjects belonged to the age group of 18-23. The Suicidal Ideation Scale by Dr. Devendra Singh Sisodia and Dr. Vibhuti Bhatnagar (SIS-SDBV) was administered to the subjects. The conclusion of this study was that there is significant gender difference among young adults for suicidal ideation.

Keywords: Suicidal Ideation, Young adults, Gender

Crime is part of our everyday lives. Forensic psychology is the interaction of the practice or study of psychology and the law. The word forensic pertains to the "the scientific method for investigation of crime". As a result of which Forensic psychology is often described as the combination of law and psychology. Hugo Münsterberg (1863–1916) is often referred to as the father of forensic psychology.

Suicide

The word "suicide" is derived from two Latin words, "sui" meaning of oneself and "cidium" meaning killing or slaying. Hence suicide is described as the voluntary and intentional decision of an individual in taking one's own life. Suicide is ranked as the 4th leading cause of death in the age group of 15-19 and is the highest among the age group of 15-29.

Ideation

The process of making and relating ideas or in other words bringing ideas to life is called ideation. This refers to conceiving new ideas and implementing it. Ideas are a result of the mental activity which can be due to knowledge, thoughts, opinions, convictions or principles from the past or the present.

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Suicidal Ideation

Suicidal ideation is known as the desire to take one's life or thoughts about suicide without having a plan of suicide. But most of the time the term suicidal ideation is perceived as the intent to commit suicide. Suicidal ideation is considered to be one of the symptoms of major depression and bipolar depression.

THEORY ON SUICIDAL IDEATION

Thomas Joiners gave the interpersonal-psychological theory of suicidal behavior which states that an individual does not die by suicide unless and until he/she has the desire to die by suicide and has the ability to do so. According to this theory when people have two psychological states in their mind at the same time and if this prevails for a long time they develop a desire for death.

Aaron Beck provided a classification and measurement of suicidal behavior which makes it possible to identify the high-risk in individuals. The study led to the formulation of an algorithm which can be used to predict future suicides.

Edwin S. Shneidman is known as the father of contemporary suicidology. His contributions on the study of suicidology are numerous. One of his most extraordinary studies on suicide is "Moby Dick".

Factors Influencing Individuals to Commit Suicide

There are many reasons for an individual to commit suicide out of which the most common being depression. Some of the following can also be considered as possibilities to commit suicide.

A. Drug Addiction / Substance Abuse

People who are addicted to drugs or alcohol are those who are more likely to become depressed. Most of the people use drugs to escape painful feelings of depression and hopelessness of their present life situation. Addiction could escalate into feelings of deep depression which in turn makes people think suicide is the only way out of the addiction trap.

B. Traumatic Experience

Any type of traumatic experience can make a person feel helpless, guilty, and ashamed. If an individual was a victim of physical abuse, sexual abuse, and/or dealt with trauma in war, he/she is more likely to end up with post-traumatic stress disorder (PTSD). This disorder and the feelings associated with traumatic experiences could lead to suicidal thoughts.

C. Mental illness

There are a variety of treatment options for people with mental illnesses. Although medications are available some people are stuck in a constant state of mental pain and despair. Disorders like social phobia, generalized anxiety disorder (GAD), panic attacks, or obsessive-compulsive disorder (OCD) can drive a person crazy. These are a few forms of anxiety disorders, the combination of loneliness and fear along with anxiety disorders can lead a person to contemplate suicide.

Gender Difference among Young Adults for Suicidal Ideation

Bipolar disorder mainly involves fluctuations in mood from states of severe depression to elevations in mood such as mania and hypomania. These mood fluctuations can make it difficult for individuals with this disorder to maintain relationships and a balanced life. Depression along with this disorder can lead a person to feel suicidal.

Schizophrenia can include severe depression, cognitive impairment and hallucinations. Having this illness makes it difficult for an individual to function in life and can serve as a major challenge because most of the medications used to treat this illness carry severe side effects.

D. Personality Disorders

Individuals with personality disorders are considered to have a set of traits that make it difficult for them to function within society. They have trouble in maintaining relationships, holding down a steady job, or coping with life. This can result in the individual feeling as if there is no hope for escaping from the problems caused by their personality disorder and may choose suicide as an option.

E. Bullying

Most people experience bullying to some extent while growing up and going through school. Many people who get bullied end up feeling extremely depressed, worthless, and hopeless. Unfortunately in many cases, bullying goes completely unrecognized until the victim can't take it anymore and finds suicide as the ultimate way to escape the pain that they are experiencing.

F. Unemployment and Financial problems

Being unemployed can lead to feelings of isolation and make the individual feel worthless resulting in depression and anxiety which in turn may bring suicidal thoughts to the individual.

G. Prescription Drugs

The side effects of various prescription drugs such as antidepressants can result in suicidal ideation or in other words these drugs affect the levels of neurotransmitters that can sometimes put a person at increased risk for suicide.

H. Genetics / Family History

Individuals those who are from a family in which suicide is common are more likely to commit suicide themselves. Additionally if the individual inherits mental illness like major depression, this can further increase the risk of suicide. Traits that include aggression, borderline personality disorder, cognitive inflexibility, and stress sensitivity are all linked to influencing suicidal behavior. Additionally epigenetic or the activation or deactivation of genes based on the environmental factors is considered to play a role.

I. Social Isolation /Loneliness

Being socially isolated from the society can mentally affect an individual and lead a person to become depressed and consider suicide. Loneliness is defined as a general feeling of sadness as a result of being alone or feeling disconnected from others due to fear of rejection, mental illness, death of a close friend or family member, poor physical health, being introverted, etc

J. Relationship problems

Many people struggle with relationships like not feeling appreciated, being in abusive relationships, and/or going through break-ups. Problems in a relationship can lead to an individual into a state of depression which in turn can lead to him/her committing suicide.

Gender Difference among Young Adults for Suicidal Ideation

Prevention of Suicide

The first thing to be done to is to identify the problem when it is at the early stage. Individuals with suicidal thoughts would talk as if they do not have hope in their life; they may constantly talk about ending their life or may feel useless about their existence. If this state prevails due to other reasons the reasons must be identified and then treated. At the parental level the best thing to be done is to have a good interaction with the children, should keep a watch over the child's behaviors and must note any abnormal behavior by the child. If any kind of suicidal behavior is seen the parents should consult a good psychologist and must seek immediate help.

Rationale

The purpose of the study is to understand what suicidal ideation is and to study the gender differences in suicidal ideation among young adults as suicidal ideation is seen to be at a higher rate at this age group.

Significance

The main significance of the study is to understand suicidal ideation as suicide is considered as a crime and to understand the attitudes of young adults towards it. The study differs from other studies such that there has been no study done on the gender differences among suicidal ideation in male and female in India.

REVIEW OF LITERATURE

Sisodia Devendra Singh (2015) conducted a study on "Life Satisfaction as a Parameter of Suicide among Youth". The total sample consists of 360 respondents who were selected from urban and rural areas. The respondents belonged to the age group of 18-25 years. Among these 360 respondents, 180 were males and other 180 were females. The tests Attitude towards Suicide (D.S. Sisodia and Vibhuti Bhatnagar) and Life Satisfaction Scale (Alam Srivastava) were administered on the sample. The conclusion of the study was found that there is higher level of life satisfaction in males as compared to females and Life satisfaction was found to be negatively correlated with suicidal tendency.

Rajkumar E, Vishwanatha B N, Hemilnath. E G (2015) studied "Hope, Optimism and Its Relation to Suicidal Ideation among University Students". The sample was drawn from adolescents aged between 18 to 23 years and the sample consisted of 70 adolescent students. The data was collected using the Suicidal Ideation Scale (Devendra Singh Sisodia and Vibhuti Bhatnagar), Optimism- Life Orientation Test- revised (Scheier, Carver, & Bridges (1994) and Adult Dispositional Hope Scale (Snyder, Irving, & Anderson, 1991). It was concluded from this study that there is no significant correlation between suicidal ideation and hope among university students as well as there is inverse correlation between suicidal ideation and optimism.

Gender Difference among Young Adults for Suicidal Ideation

Rahul Kamble (2015) conducted a study on “The relationship of Resilience, Suicidal Ideation, and Depression in Adolescents”. Data was obtained from 70 participants (35 male, 35 female) whose age ranged from 17 to 21 years. The subjects taken were of lower middle to high socio – economic status from different race, without having any psychological problems. The Bharathiar University Resilience Scale form A (Dr. Annalaxmi Narayanan), Suicidal Ideation Scale (SIS, Dr. Devendra Singh Sisodia and Dr. Vibhuti Bhatnagar, 2011) and Mental Depression Scale (MDS, L.N Dubey, 1993) were administered to the subjects. It was concluded that there is significant gender difference in resilience among adolescents, suicidal ideation and depression was found significantly correlated with each other among adolescents.

Sharif Mustaffa, Rashid Aziz, Mohd Nasir Mahmood and Shukri Shuib (2014) conducted a study “Depression and suicidal ideation among university students”. The study utilized a survey using simple random sampling methodology. Involving 65 respondents chosen at random residential colleges. The instruments used in this study was Adult Suicidal Ideation (ASIQ 1988) and Reynolds Adolescent Depression Scale (RADS2 1981) by William Reynolds. The overall findings of the study showed that there are no significant differences in the level of depression based on gender however there are significant differences in suicidal ideation based on gender.

Norhayati Ibrahim, Noh Amit, Melia Wong Yui Suen (2014), studied “Psychological Factors as Predictors of Suicidal Ideation among Adolescents in Malaysia”. A cross-sectional study was conducted on 190 students (103 males and 87 females), aged 15 to 19 years old from two different schools. The Depression Anxiety Stress Scale 21-item version (DASS-21) was used to measure depression, anxiety and stress among the students, and the Beck Scale for Suicide Ideation (BSS) to measure suicidal ideation. The results indicated that there were significant correlations between depression, anxiety, and stress with suicidal ideation. However, only depression was identified as a predictor for suicidal ideation.

Ibadat Khan (2011) conducted a study on “Relationship of suicide ideation with depression and hopelessness”. The sample comprised of 200 participants (100 males and 100 females) in the age range of 15- 19 years. The participants were provided with the following scales: Beck's Suicide Ideation Scale (Beck, Kovacs, & Weissman, 1979), Beck's Depression Inventory (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961) and Beck's Hopelessness Scale (Beck, Weissman, Lester, & Trexler, 1974). The correlation between suicide ideation, depression and hopelessness was found to be positive and the correlation between suicide ideation and depression remained significant for males.

Jameson K. Hirsch, Kenneth R. Conner, and Paul R. Duberstein (2007), studied “Optimism and Suicide Ideation among Young Adult College Students”. Participants were 284 undergraduate students (185 female, 99 males) recruited from a large Western University and a rural Eastern college. The ages of the students ranged from 18–57 years. The sample was

Gender Difference among Young Adults for Suicidal Ideation

predominantly White and the rest being African American, Hispanic, and Asian students. The Beck Scale for Suicide Ideation (BSS; Beck, Kovacs and Weissman, 1979), the Beck Hopelessness Scale (BHS; Beck, Weissman, Lester et al., 1974) and Beck Depression Inventory-II (BDI-II; Beck, Steer, & Brown, 1996). It was found that female gender was significantly negatively correlated with optimism and positively associated with depression. Dispositional optimism was significantly negatively correlated with depression, hopelessness, and suicide ideation.

Daniel L. Segal, Meghan A. Marty, William J. Meyer, and Frederick L. Coolidge (2011), Studied “Personality, Suicidal Ideation, and Reasons for Living among Older Adults”. Participants were 109 community-dwelling older adults recruited through newspaper Advertisements and an older adult research registry database. The Coolidge Axis II Inventory (CATI), NEO Five-Factor Inventory, Reasons for Living Inventory and Geriatric Suicide Ideation Scale were administered to the participants. Personality Disorder features had positive correlations with suicidal ideation and mixed relationships with aspects of reasons for living. Personality traits had negative correlations with suicidal ideation; neuroticism was unrelated to reasons for living. Borderline and histrionic were the only Personality Disorder features that contributed significant variance in suicidal ideation, whereas neuroticism was the only personality trait that contributed significant variance in suicidal ideation.

J. Johnson, P.A. Gooding, A.M. Wood, P.J. Taylor, D. Pratt, N. Tarrier (2010) conducted a study on “Resilience to suicidal ideation in psychosis: Positive self-appraisals buffer the impact of hopelessness”. A total of 90 participants with schizophrenia-spectrum disorders were recruited into the study. The participants were administered with Beck Hopelessness Questionnaire (BHS; Beck, Weissman, Lester, & Trexler, 1974), Beck Scale for Suicidal Ideation (BSS; Beck & Steer, 1991) and Resilience Appraisals Scale (RAS; Johnson et al., 2010). Participants had a mean duration illness of 17.6 years. Twenty-two participants reported no previous suicide attempt whereas 17 reported one previous attempt and 38 reported two or more previous attempts. Age, gender and duration of illness were not found to be related to suicidal ideation. Positive self-appraisals were found to have a moderate association between hopelessness and suicidal ideation.

METHODOLOGY

Aim

- The aim of the research is to study gender differences among young adults towards suicidal ideation.

Objectives

1. To develop knowledge on this crime
2. To understand the attitude of the young adults on suicidal ideation.
3. To know the gender differences in the attitudes towards suicidal ideation.

Gender Difference among Young Adults for Suicidal Ideation

Research Design

Experimental research design

Definitions

Suicide

Conceptual- It is defined as the intentional taking of one's own life. The person who commits suicide may see his or her actions as some sort of solution to a severe physical or psychological dilemma.

Operational- It is the act of taking one's own life. The individual purposely tries to end his/her life due to various problems faced on life.

Ideation

Conceptual- It is the process of forming and relating ideas. Ideation means to conceive or generate an idea and implement it. Ideas are the result of mental activity that can be based on past or present knowledge, thoughts, opinions, convictions or principles.

Operational- It is the process of generation of ideas. Generation of ideas takes place through cognition.

Hypothesis

- There is no significant gender difference for attitude towards suicidal ideation among young adults.

Variables

1. Attribute — Gender
2. Dependent variable - Attitude towards suicidal ideation

Extraneous variables

1. Age
2. Social status
3. Background

Sampling

Population

The Subjects chosen for this particular research belonged to the age group of 18-23. A general population of 150 males and 150 females were chosen as the subjects.

Sample size

The sample size is 300, which consisted of 150 males (50%) and 150 females (50%).

Gender Difference among Young Adults for Suicidal Ideation

Sampling method

The sampling method was random. Non probability sampling: purposive sampling method.

Inclusion criteria

The subjects are required to be above the age of 18 and below the age of 23 and must know the English language and must be educated.

Exclusion criteria

Mentally challenged, Trans-gender's and married people were not taken as subjects. The people who not have English knowledge were also not taken as subjects.

Procedure

The subjects were comfortably seated and were debriefed about the topic. The subjects were given the questionnaire and were asked to fill it honestly. They were asked to give spontaneous responses. The subjects were assured that their responses would be kept confidential and was only for research purpose. There was no time limit as such but the subjects were asked to fill it as soon as possible.

Data collection: Tools used

The Suicidal Ideation Scale (SIS) was used which was developed two psychologist by Dr. Devendra Singh Sisodia and Dr. Vibhuti Bhatnagar which was standardized in the year 2011. The questionnaire consisted of 25 items and was scored on a 5 point likert scale.

Data Analysis

Parametric-independent t-test

Ethics

Before the subjects filled the questionnaire, they were briefed about the topic. The main aim of the research and its objectives were told to them. A consent form from the subjects was obtained and the subjects were assured that their responses would be kept confidential and was only for research purpose.

RESULT AND DISCUSSION

The study was conducted on a sample size of 300 individuals out of which 150 were males and 150 were females. Purposive sampling technique was used to collect data. The Suicidal Ideation Scale was administered on the sample. The scale was developed by two psychologists Dr. Devendra Singh Sisodia and Dr. Vibhuti Bhatnagar which was standardized in the year 2011. The questionnaire consisted of 25 items and was scored on a 5 point Likert scale. The scoring ranged from strongly disagree to strongly agree. The scale has a positive scoring 1, 2, 3, 4, 5 for the items 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 14, 15, 16, 17, 19, 20, 21, 22, 23, 25 and a negative scoring 5, 4, 3, 2, 1 for the items 11, 13, 18 and 24.

Gender Difference among Young Adults for Suicidal Ideation

TABLE 1: Table showing the total score, mean and standard deviation

Gender	N	SIS Total	Mean	Std. Deviation
Male	150	7923	52.8200	13.34069
Female	150	8060	53.7333	13.72484

According to table 1 the total score for male is 7923 and the mean is seen as 52.8200 and the total score for female is 8060 and the mean is 53.7333 respectively. The standard deviation for males is 13.34069 and for female 13.72484 as shown in the above table.

Graphical representation of Mean and Standard Deviation

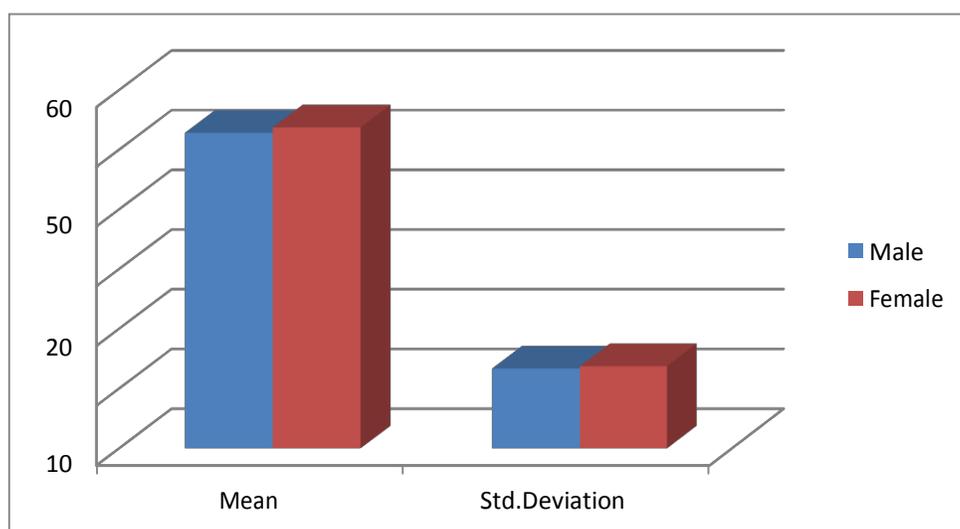


TABLE 2: Table showing the t values and significance

Gender	t-value	Significance
Male	-.584	.559
Female		

Parametric independent test was done for males and females and the t score was found to be -.584 and the significance were found to be .559. As observed from the above table the significance value is seen to be greater than 0.05 hence rejecting the hypothesis which states that “there is no significant gender difference among young adults for suicidal ideation”. As in the present scenario men and women both get equal exposure to the society and are equally educated but women are seen to be more emotional and sensitive than men as a result of which they have a slightly more suicidal ideation than men.

SUMMARY AND CONCLUSION

The aim of the research was to study gender differences towards suicidal ideation among young adults. The suicidal ideation scale developed by Dr. Devendra Singh Sisodia and Dr. Vibhuti Bhatnagar was administered on the sample.

Gender Difference among Young Adults for Suicidal Ideation

Major findings

1. There is significant gender difference among young adults for suicidal ideation.

Limitations

1. The sampling method used for collecting data was purposive due to which the study cannot be generalized.
2. The practical difficulty of time factor has obstructed the study from expanding.
3. The study cannot be generalized as the samples were collected from a smaller population.

Recommendations

1. The study should be conducted on a larger population
2. Comparative studies can be done for other age groups to find their levels of suicidal ideation.

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Gender Difference among Young Adults for Suicidal Ideation

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