

E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

A Quantitative Investigation into The Psychology of Suicide: Understanding Suicidal Ideation to Intervention Among the Young Adulthood in Guwahati

Takhellambam Somibala¹, Md. Nazarul Islam Shah²

¹MSc Clinical Psychology/ Psychologist and pursuing a diploma in guidance and counselling, Faculty of Humanities and Social Sciences, Assam Downtown University.

²Ph.D. Scholar, Department of Physical Education, Annamalai University.

ABSTRACT

Suicide is a complex public health problem of global importance. Poisoning, hanging and self-immolation (particularly women) were the methods to commit suicide. Physical and mental illness, disturbed interpersonal relationships and economic difficulties were the major reasons for suicide. The vulnerable population was found to be women, students, farmers etc. A social and public health response in addition to a mental health response is crucial to prevent suicidal behaviour in India. The purpose of the study is to find out symptoms that everybody is probable in all likelihood to self-injure, and to prevent suicidal behavior among young adults. For the research simple Random Sampling Technique has been used to collect the data, of 100 participants with the help of Google Forms. The proposed research will be quantitative in nature. The purpose study's main focus will be fieldwork based on quantitative surveys as well as the descriptive exploratory method. Members who shape the goal class were selected for the use of the questionnaires (18-25 years old). The overall pattern for this observation will encompass a hundred respondents from the city of Guwahati, 100 of whom will be male and one hundred of whom might be a lady. The resulting finding of standard deviation is 7.17 which means 45% of participants had moderate to high levels of suicidal ideation and 55% of participants had low levels of suicidal ideation.

Keywords: Suicide Risk, Operational Definition, Mental Health.

1. INTRODUCTION

Suicide is a complex and multifaceted phenomenon that poses a significant public health concern, particularly among the young adult population. As mental health continues to gain recognition as a critical component of overall well-being, understanding the psychology of suicide becomes imperative for effective intervention and prevention strategies (Mann, J. J., et al. 2005). Suicidal ideation, characterized by thoughts of self-harm or taking one's own life, is a crucial aspect of this phenomenon that demands thorough exploration and comprehension (Joiner, T. E., Jr. 2005). The transition from adolescence to young adulthood is a vulnerable period marked by numerous challenges, including identity formation, academic pressures, relationship dynamics, and societal expectations (Arnett, J. J. 2000). These challenges can contribute to the emergence of suicidal thoughts, making it essential to unravel the underlying



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

psychological processes that drive such ideation among young adults (Klonsky, E. D., & May, A. M. 2014). By gaining insights into the factors influencing suicidal ideation, mental health professionals, policymakers, and educators can develop targeted interventions to mitigate the risk of suicide among this demographic group (Niederkrotenthaler, T., et al. 2020).

This exploration into the psychology of suicide aims to shed light on the intricate interplay of biological, psychological, and social factors that contribute to the development and persistence of suicidal thoughts among young adults. Additionally, the significance of timely and effective intervention strategies will be discussed to address the complexities surrounding suicidal ideation among this demographic group (Zalsman, G., et al. 2016). Through an understanding of the psychological nuances associated with suicidal thoughts, society can work towards creating a supportive environment that promotes mental well-being and prevents the tragic loss of young lives (Gould, M. S., et al. 2003). Suicide skills when humans desire to damage themselves to give up their lives. Some examples of suicide are self-poisoning, placing and self-immolation which is in women the approach to committing suicide. Physical and intellectual illnesses disturbed interpersonal relationships and monetary difficulties are the foremost reasons for suicide. The inclined population was found to be women, students, farmers etc. A social and public health response in addition to an intellectual fitness response is crucial to preventing suicidal behaviour in India. Suicidal behaviour ranges between genders, ages businesses, geographical places, and socio-political contexts. It is also erratically connected with danger variables, which increases the opportunity for heterogeneous aetiology. Even though there may be in medical coaching, multiplied consciousness and information of medical, psychological, social, and organic factors might also help become aware of high-hazard people and manual the selection of remedy. Psychotherapeutic, pharmacological, or neuromodulator remedies to mental problems can often forestall suicidal behaviour, additionally, ordinary follow-up of a human being who strives suicide via intellectual fitness services is key to forestall future suicidal behaviour.

2. STATEMENT OF THE PROBLEM

Many younger humans strive for suicide rather than simply succeed. Suicide charges in India have been rising over the past 5 decades. There may be a choice to take a look at the variable related to suicidal minds in more youthful individuals since university college students and more youthful adults are a huge problem. Suicide ideation is a critical section of the suicide process; it precedes suicide attempts and achieved suicides. The suicide technique includes suicide ideation, a suicide plan, a suicide attempt, and carried-out suicide. It is critical to become aware of early steps in the suicide process, such as suicide ideation, because then, efforts can be made to cease the progression of the suicide method before a suicide diagram or try is made. Thus, suicide ideation plays a vital position in detecting and preventing suicidal behaviour.

3. SIGNIFICANCE OF THE STUDY

Suicide seems now no longer in high-income countries; however, it is a common phenomenon in all vicinitys of the world. Suicide is tremendous public health trouble, yet it could be averted with active, proof-primarily based, and normally less expensive remedies. Behind each suicide and strive is a longer-term conflict of these humans as nicely as experiences of trauma and distress amongst their household and friends. The need to expand new scientific interventions a more recognition of aiding in improving the



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

understanding of individual occasions while giving a hazard to search for powerful prevention and counselling is a key implication of those findings.

4. OBJECTIVES OF THE STUDY

- To learn the way suicide costs among more youthful individuals vary from those of older adults.
- > To find out symptoms that everybody is probable in all likelihood to self-injure.
- To take a look at the prevention of suicide behaviour.

5. HYPOTHESIS

- The study will bring awareness to suicidal ideation among young adults.
- It will help understand the signs and symptoms of Suicide Ideation.
- The study will help young adults recognise there is a way out, rather than committing suicide.

6. METHODOLOGY

Debriefing about Methodology: A quantitative investigation into the psychology of suicide: understanding suicidal ideation to intervention among the young adults in Guwahati. I am very grateful to everyone who took the time to participate in the research study. The take a look at the objective is to learn the way suicide costs among more youthful individuals vary from those of older adults. To find out symptoms that everybody is probable in all likelihood to self-injure and to take a seem to be at the prevention of suicide behaviour. It had a hundred members—a hundred men and 100 ladies—and was accomplished via passing out the questionnaire. Allow participants to withdraw their consent to participate or their data from the study at any time. The researcher will offer to send them the study's findings. If the participants wish, they may visit a website for additional reading on the subject.

Method: In quantitative research, the strategy focuses on quantifying the collection and analysis of data. This method is formed from deductive approaches where the emphasis the placed on the whole testing of theory and shaped by empirical and positive philosophy. It is referred to as a set of strategies, techniques, and assumptions and is used to study psychology, and social and economic processes through the exploration of the numeric pattern. Quantitative research to gather a range of numeric data from the collection.

Operational Definitions: Self-harm: It is intentional behaviours that are considered to be harmful to oneself. Mental health: Mental health includes all aspects of properly being, along with emotional, psychological, and social factors. It affects behaviour, perception, and cognition. It affects someone's selection-making method, interpersonal interactions, and stress response. Examples of subjective mental health include perceived self-efficacy, autonomy, competence, intergenerational dependency, and self-actualization of one's intellectual and emotional potential. Psychosocial: Psychosocial is related to the combination of psychological and social behaviour.

Study Design: The proposed research will be quantitative in nature. The purpose study's main focus will be fieldwork based on quantitative surveys as well as the descriptive exploratory method. members who shape the goal class were selected for the use of the questionnaires (18-25 years old). The overall pattern



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

for this observation will encompass a hundred respondents from the city of Guwahati, 100 of whom will be male and one hundred of whom might be a lady.

Process of Data: The simple Random Sampling Technique has been used to collect the data, of 100 participants with the help of Google Forms. Filling up this questionnaire will take only 5 minutes to complete. For data analysis, use descriptive exploratory for a clearer result. Every individual in the population has the chance of being included in the sample. The quantitative method mainly uses secondary sources of data which consist of books, journals, newspapers, articles, and the Internet extensively.

Limitations of the Study: Quantitative research is not cheap, time-consuming, and presents a limited understanding of consumer needs. Therefore, they do not allow the participant to explain their choice or the importance the questions may have to those participants. It can be tough to comprehend the context of the phenomenon and the statistics might not be reliable enough to explain complicated problems.

7. FINDING & ANALYSIS

Data Interpretation:

Table 1- Questionnaire Response Percentage

Sl.no	Question	Response	Never	Infrequently	Sometime	Frequently	Always
1	Have been thinking of ways to kill myself	100 % M- 29% F- 71%	58%	9%	33%	0%	0%
2	Have been told by someone that I want to kill myself	100 % M- 29% F- 71%	67%	12%	20%	0%	1%
3	I believed my life will end up in suicide	100 % M- 29 F- 71	83%	10%	7%	0%	0%
4	Have been made attempt to kill myself	100 % M- 29 F- 71	80%	14%	6%	0%	0%
5	Feeling like life isn't worth living	100 % M- 29 F- 71	43%	10%	43%	3%	1%
6	Life is so bad I am feeling like giving up	100 % M- 29 F- 71	50%	15%	32%	1%	2%



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

7	I just wish my life will end	100 % M- 29 F- 71	61%	8%	25%	4%	2%
8	It would be better for everyone involve if I were to die	100 % M- 29 F- 71	69%	13%	12%	4%	2%
9	I feel that there is no solutions to my prob- lems other than taking my own life	100 % M- 29 F- 71	70%	12%	14%	2%	2%
10	I have been come close to taking my own life	100 % M- 29 F- 71	70%	9%	17%	2%	2%

Table1: In the survey involving 100 respondents, an exploration of suicidal ideation revealed noteworthy patterns among young adults. Notably, 58% of participants reported never having thought about ways to end their lives, while 33% acknowledged occasional contemplation and 9% indicated infrequent consideration of such thoughts. Additionally, concerning communication about suicidal thoughts, 67% of respondents had never disclosed their feelings to someone, while 20% infrequently shared, and 12% sometimes conveyed their desire to end their lives. The belief that life would ultimately end in suicide was largely absent, with 83% never harboring such convictions, while 10% infrequently and 7% sometimes held such beliefs. Actual suicide attempts were relatively rare, with 80% reporting never having attempted, 14% infrequently, and 6% sometimes. Feelings of life not being worth living were diverse, as 43% never experienced such sentiments, 43% sometimes did, and 10% infrequently felt that way. Similarly, when contemplating giving up due to life's difficulties, 50% had never considered it, 32% sometimes did, and 15% infrequently felt like giving up. A substantial proportion (61%) occasionally expressed a wish for their lives to end, while 25% sometimes harbored such wishes and 8% infrequently did. Furthermore, thoughts about the impact of their death on others were varied, with 69% never believing it would be better for everyone involved if they were to die, 13% infrequently thinking so, and 12% sometimes holding this belief. Despite challenges, a majority (70%) never perceived suicide as the sole solution to their problems, while 14% occasionally did, and 12% infrequently considered it. Finally, in terms of proximity to taking their own lives, 70% had never come close, 9% infrequently did, and 17% sometimes found themselves in such circumstances. These findings underscore the complexity and diversity of suicidal ideation among the surveyed young adults, highlighting the need for nuanced interventions and support mechanisms.

Table 2: Descriptive Statistics for the Suicidal Ideation Scale

Suicidal Ideation Scale	N	Mean	S. D
	100	16	7.17



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

Table 3: Classification of Suicidal Ideation Levels

Suicidal Ideation	Percentage (%)
Low level	45%
Moderate to High Level	55%

The tables provide insights into the descriptive statistics of a Suicidal Ideation Scale (Table 2) and the distribution of Suicidal Ideation Levels (Table 3).

Results: All the data for this research article was collected through Google Forms. The data were collected from each respondent, where the average mean score was calculated. According to this Suicidal Ideation Scale recommended scores greater than one standard deviation above the mean (SIS total score of 15 or greater) to be considered serious suicidal ideation. The result finding of standard deviation is 7.17 which is 45% of participants had moderate to high levels of suicidal ideation and 55% of participants had low levels of suicidal ideation.

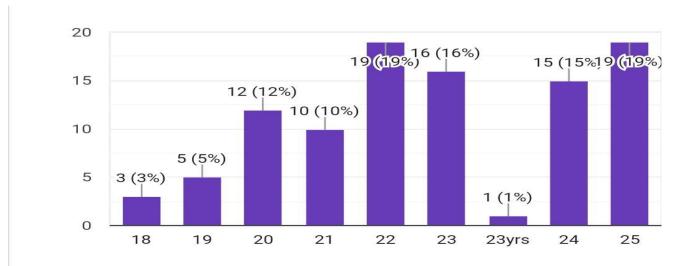


Figure 1: Column Graph on the age of participation and response (Age: 18 – 25, 100 Response)

Female Male Male

Figure 2: Pei Graph on Male and Female Participation/Response.

8. DISCUSSION

The goal of the current study was screening and assessment that provides critical information about the presence or absence of suicidal thinking, the intensity of those thoughts, and the presence or absence of



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

prior suicide attempts. The participants ages ranged from 18-25 years. A total of 100 young adult participants consisting of both males and females took part in the study. Randomly selected from the urban area of the city of Guwahati. These results provide support for the presence of a two-factor solution for the Suicide Ideation Scale, and to provide the additional support of the reliabilities and build-up validities of the SIS. The one factor can be characterized by wish life or end, feeling like giving up, and burdensomeness. The second factor can be described as resolved plans and preparation, characterized by a history of suicide attempts (or nearly attempting suicide), it is the belief that life will end in suicide, it is the belief that there is no solution to the problem, and planned, or communicated intent, to dead by suicide. From data interpretation, according to the Suicidal Ideation Scale scores of 15 or greater are considered serious suicidal ideation. In this study, the result finding of the mean of the total 100 participants is 16 and the Standard Deviation was 7.17 which means that 45% of participants had moderate to high risk levels of suicide. and 55% of participants were low Risk Level of Suicide. In tandem, O'Connor and Nock's (2014) exploration of personality, cognitive factors, and social aspects as contributors to suicidal behavior underscores the scarcity of evidence on protective factors and advocates for innovative psychological treatments (O'Connor, R. C., & Nock, M. K. 2014). De Beurs et al.'s (2019) study, utilizing network analysis, emphasizes central factors like internal entrapment and perceived burdensomeness influencing suicidal ideation in young adults (De Beurs, D., et al. 2019). Okolie et al.'s (2017) systematic review on suicide prevention in older adults highlights promising interventions, including primary care-based depression screening (Okolie C, et al. 2017). Miller and Glinski's (2000) comprehensive review of suicidal adolescents outlines a limited body of randomized clinical treatment trials, emphasizing the scarcity of evidence for effective interventions and the urgent need for further research (Miller, A.L. and Glinski, J. 2000). Collectively, these studies underscore the imperative for innovative psychological treatments, a deeper understanding of risk and protective factors, and ongoing research to advance suicide prevention across different age groups.

9. CONCLUSION

Suicidal ideation is the term for contemplating or planning suicide. The suicidal mind might vary from developing a radical method to having a passing perception. And it cannot include the very last act of suicide. In this study, the result came out that 45% of participants had moderate to a higher level of suicidal ideation and 55% of participants, 'results got here out low-stage of suicide notion. It was concluded that 45% of a participant who are having moderate to excessive stages of negative suicidal ideation want to get help from the intellectual fitness authorities if they are going through any problems of bad thoughts or mental health troubles so that they can cope with their negative thoughts.

Some key prevention techniques can be population-based (for example:- intellectual health promotion, careful media coverage, limited access to the capacity of committing suicide, education, awareness by way of campaigns on intellectual resilience) and it is concentrated on high-risk subgroups (e.g., unique school-based programmes, educating gatekeepers in extraordinary domains, imparting disasters hotlines and online help, detecting and teaching dysfunctional families) or even focusing on people recognized as a suicidal for example:- to increase mental health treatment, follow-up after suicide ideas and attempts and approach for coping with stresses and grief). So, family, Friends, colleagues, and different human beings can also help with a chance man or woman to prevent resources. Thus, in each suicide danger is very serious because every man or woman's lifestyle is most valuable.



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

10. RECOMMENDATION

This study was to find out the psychology of suicide: Understanding Suicidal Ideation to intervention among early adulthood in Guwahati. It was quantitative research, it had 100 participants, both male and female and was conducted in a descriptive exploratory method and the age ranges were 18-25 young adults. The suicidal behaviour of individuals is related to psychology like Loss, stress, loneliness, low self-esteem, and feelings of anxiety, rejection, helplessness, and hopelessness characterize late-life alcoholism and depression. In this research, some participants are having some psychological disturbed. The prevention of suicide behaviour among young adults. The methods and treatment are based on patient risk factors. Treatments are prescribed in light of underlying the condition in addition to the prevention of suicidal ideation and its acts. For people suffering from mental disorders or mental illness, the treatment plan to treat this condition is to be implemented first. The most common suicide prevention technique is psychotherapy and it is also known as talk therapy in the form of Cognitive Behavioral Therapy (CBT).

Conflict of Interest

There is no conflict of interest regarding the publication of this paper. The research and the cited references are conducted and presented impartially without any financial or personal relationships that could potentially bias the work.

Acknowledgment

We extend our heartfelt appreciation to all those who played a crucial role in bringing this work to fruition. Your support has been instrumental, and we express our gratitude for your invaluable contributions.

REFERENCES

- 1. Mann, J. J., Apter, A., Bertolote, J., Beautrais, A., Currier, D., Haas, A., Hegerl, U., Lonnqvist, J., Malone, K., Marusic, A., Mehlum, L., Patton, G., Phillips, M., Rutz, W., Rihmer, Z., Schmidtke, A., Shaffer, D., Silverman, M., Takahashi, Y., Varnik, A., ... Hendin, H. (2005). Suicide prevention strategies: a systematic review. JAMA, 294(16), 2064–2074. https://doi.org/10.1001/jama.294.16.2064.
- 2. Joiner, T. E., Jr. (2005). Why people die by suicide. Cambridge, MA: Harvard University Press. https://www.hup.harvard.edu/books/9780674025493.
- 3. Arnett J. J. (2000). Emerging adulthood. A theory of development from the late teens through the twenties. The American psychologist, 55(5), 469–480. https://pubmed.ncbi.nlm.nih.gov/10842426/
- 4. Klonsky, E. D., & May, A. M. (2014). Differentiating Suicide Attempters from Suicide Ideators: A Critical Frontier for Suicidology Research. *Suicide and Life-Threatening Behavior*, 44(1), 1-5. https://doi.org/10.1111/sltb.12068.
- 5. Niederkrotenthaler, T., Gunnell, D., Arensman, E., Pirkis, J., Appleby, L., Hawton, K., John, A., Kapur, N., Khan, M., O'Connor, R. C., Platt, S., & International COVID-19 Suicide Prevention Research Collaboration (2020). Suicide Research, Prevention, and COVID-19. Crisis, 41(5), 321–330. https://doi.org/10.1027/0227-5910/a00073.
- 6. Zalsman, G., Hawton, K., Wasserman, D., van Heeringen, K., Arensman, E., Sarchiapone, M., Carli, V., Höschl, C., Barzilay, R., Balazs, J., Purebl, G., Kahn, J. P., Sáiz, P. A., Lipsicas, C. B., Bobes, J., Cozman, D., Hegerl, U., & Zohar, J. (2016). Suicide prevention strategies revisited: 10-year systematic review. The lancet. Psychiatry, 3(7), 646–659. https://doi.org/10.1016/S2215-0366(16)30030-X



E-ISSN: 2582-2160 • Website: www.ijfmr.com • Email: editor@ijfmr.com

- 7. Gould, M. S., Greenberg, T., Velting, D. M., & Shaffer, D. (2003). Youth suicide risk and preventive interventions: a review of the past 10 years. Journal of the American Academy of Child and Adolescent Psychiatry, 42(4), 386–405. https://doi.org/10.1097/01.CHI.0000046821.95464.CF
- 8. O'Connor, R. C., & Nock, M. K. (June 2014). The psychology of suicidal behaviour. *The Lancet Psychiatry*, 1(5), 369-379. https://doi.org/10.1016/S2215-0366(14)70222-6
- 9. D. De Beurs, E.I. Fried, K. Wetherall, S. Cleare, D.B. O' Connor, E. Ferguson, R.E. O'Carroll, R.C. O' Connor, Exploring the psychology of suicidal ideation: A theory driven network analysis, Behaviour Research and Therapy, Volume 120, 2019, 103419, ISSN 0005-7967, https://doi.org/10.1016/j.brat.2019.103419. (https://www.sciencedirect.com/science/article/pii/S0005796719301056)
- 10. Okolie C, Dennis M, Simon Thomas E, John A. A systematic review of interventions to prevent suicidal behaviors and reduce suicidal ideation in older people. International Psychogeriatrics. 2017;29(11):1801-1824. doi:10.1017/S1041610217001430. https://www.cambridge.org/core/journals/international-psychogeriatrics/article/abs/systematic-review-of-interventions-to-prevent-suicidal-behaviors-and-reduce-suicidal-ideation-in-older-people/7363DA09A7EEAA33E352218C3D7F4DD7
- 11. Miller, A.L. and Glinski, J. (2000), Youth suicidal behavior: Assessment and intervention. J. Clin. Psychol., 56: 1131-1152. <a href="https://doi.org/10.1002/1097-4679(200009)56:9<1131::AID-JCLP3>3.0.CO;2-8">https://doi.org/10.1002/1097-4679(200009)56:9<1131::AID-JCLP3>3.0.CO;2-8
- 12. Rane, A., & Nadkarni, A. (2014). Suicide in India: a systematic review. Shanghai archives of psychiatry, 26(2), 69–80. https://doi.org/10.3969/j.issn.1002-0829.2014.02.003
- 13. Bob Lew, Augustine Osman, Jenny Mei Yiu Huen, Ching Sin Siau, Mansor Abu Talib, Cun-xian Jia, Caryn Mei Hsien Chan, Angel Nga Man Leung, A comparison between American and Chinese college students on suicide-related behavior parameters, International Journal of Clinical and Health Psychology, Volume 20, Issue 2, 2020, Pages 108-117, ISSN 1697-2600, https://doi.org/10.1016/j.ijchp.2020.03.005.
- 14. Jayaraman, S., Asokkumar, M., & Gandhibabu, R. A study aim of Recent Stressful a Life Event in Attempted Suicide. chart, 1, 3. https://dx.doi.org/10.18535/jmscr/v8i10.49
- 15. Dandona, R., Bertozzi-Villa, A., Kumar, G. A., & Dandona, L. (2017). Lessons from a decade of suicide surveillance in India: who, why and how?. International journal of epidemiology, 46(3), 983–993. https://doi.org/10.1093/ije/dyw113
- 16. Arya, V., Page, A., River, J., Armstrong, G., & Mayer, P. (2018). Trends and socio-economic determinants of suicide in India: 2001-2013. Social psychiatry and psychiatric epidemiology, 53(3), 269–278. https://doi.org/10.1007/s00127-017-1466-x