Suicidal Risk Behaviour among Young Adults in Kolkata: An Exploratory Study

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Abstract: The present study aims to explore and assess suicidal behaviour among total of 160 undergraduate students (18-21 years of age), in Kolkata. They were assessed were assessed on the General Health Questionnaire (GHQ 12) and the Suicidal Behaviours Questionnaire – Revised (SBQ-R). The result of the present study shows that 69% and 31% of the students scored below and above cutoff respectively. 22% of male and 48% of female students scored above cut off in SBQ-R. Thus the result of the present study suggests that there is a dire necessity of intervention for the students having suicidal risk behaviour.

Keywords: Suicide; Young Adult; Risk Behaviour

1. Introduction

Suicide is one of the major public health problems in India. It is the act of causing one’s own death, which is driven by intention. The probable causes are environmental situation, genetics, psychological and social conditions. It is often conjectured that suicide or suicidal tendency is an outcome of any disorder. It is the result when the person fails to endure the disorder. Though there is a relationship between suicide and mental disorders, many suicides happen out of impulsivity or breakdown in the ability to deal with life stresses, or a perceived sense of loss or isolation. The Government of India classifies a death as suicide if it is an unnatural death, the person himself or herself has conceived the intention of death, there is a specified (in suicide note) or may be unspecified reason for the death. In order to be addressed as suicide, it has to meet all of these criterion (Report by Government of India, 2012).

Suicidal Ideation is the thoughts of harming or killing oneself. Suicidal behaviour is defined along a continuum of severity, with thoughts of death and dying at one end, then, suicidal ideation, followed by plans to attempt suicide, and then suicide attempts and finally the end of the continuum consists of suicide completion. Stress at home as well as at work often caters to suicide. One methodological obstacles in the study of suicidal behaviour is the concealing suicidal thoughts and intentions, which has hindered suicide research. Since a stigma is associated with the revelation, people often keep it hidden.

Young people are among those most affected; suicide is now the second leading cause of death for those between the ages of 15 and 29 years globally (WHO,2014).A cohort study found that anxious-disruptive girls and disruptive boys were more likely than their peers to attempt suicide by early adulthood, suggesting the differences in gender (risk for suicidal behaviour ) is an important indication for clinical intervention (Brezo,Barker and Paris,2008). Thus, the current scenario is alarming and initiative for intervention is urgently required. An important concern of the mental health professional is to identify risk behaviours so that further contemplation of suicidal attempt can be aborted. The present study aims at identifying suicidal risk behaviour among undergraduate students.

2. Method

This is a cross- sectional, exploratory study conducted to identify the presence of suicidal risk behaviour among undergraduate students.

Sample
The present study is conducted, at different colleges in Kolkata, following Purposive sampling. The study explores the suicidal risk behaviour among 168 college students.

Description of the Tools
Socio-Demographic Data Sheet
A semi structured proforma was used to assess the socio demographic details, focusing on age, gender, education, family type and size, presence of physical or psychiatric illness.

General Health Questionnaire (GHQ-12)
GHQ-12 is a short version of the original GHQ and has a sensitivity 89% and specificity of 80%. (Goldberg, 1992).

Suicide Behaviour Questionnaire Revised (SBQ-R)
For Adult General Population , the cut off score of SBQ-R is ≥7 , with 93% sensitivity and 95% specificity. (Osman et al , 2001).

Procedure
In the present study, firstly the semi – structured socio-demographic sheet is administered the undergraduate students, followed by administration of GHQ-12 , ( for screening; cut off =2) . After screening, selected subjects were then given SBQ-R. Ethical consideration and confidentiality was maintained. The data thus obtained are subjected to the following statistical treatment using IBM SPSS 21.

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3. Result

The present study aims at exploring and assessing suicidal behaviour among total of 160 undergraduate students (18-21 years of age), in Kolkata. Descriptive Statistical Analysis will help to show the mean age and average year of education, along with the percentage of young adults scoring below and above the cut-off points.

**Table 1 (a):** Socio-demographic details of participants-

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>50</td>
<td>110</td>
</tr>
<tr>
<td>%</td>
<td>31</td>
<td>69</td>
</tr>
</tbody>
</table>

**Table 1 (b):** Socio-demographic details of students- age and average year of education

<table>
<thead>
<tr>
<th>Age(in year)</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19.15</td>
<td>0.78</td>
</tr>
</tbody>
</table>

| Average Year of Education | 13.92 | 0.35 |

From the above tables, it is seen that total number of undergraduate students comprised of 31% of male and 69% of female in the current study Mean age of students and average year of education are 19.15 and 13.92 respectively.

**Table 2(a):** Percentage of students scoring above and below cut-off

<table>
<thead>
<tr>
<th>Below cut-off</th>
<th>Above cut-off</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>111</td>
<td>69</td>
</tr>
<tr>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>49</td>
<td>31</td>
</tr>
</tbody>
</table>

**Table 2 (b):** Male- female percentage of students scoring above and below cut-off

<table>
<thead>
<tr>
<th>Cut off for SBQ-R=8</th>
<th>Below cut-off</th>
<th>Above cut-off</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>Percentage</td>
<td>N</td>
</tr>
<tr>
<td>Male</td>
<td>15</td>
<td>9</td>
</tr>
<tr>
<td>Female</td>
<td>35</td>
<td>22</td>
</tr>
</tbody>
</table>

From the above tables, it is seen that the 69% of the total students were below cut-off and 31% of the total students were above cut-off. 22% of male and 48% of female students scored below cut-off score of SBQ-R, 9% of male and 22% of female students scored above cut-off score of SBQ-R.

4. Discussion

The present study aims to explore the suicidal risk behaviour of undergraduate students. Due to changing society in respect of political and economic scenario, state of education system is in constant move. In this context, researches show that young adults are prone to suicidal tendency. Adolescents are the most vulnerable group, since this age is associated with emotional turmoil. They often undergo tremendous stress, leading to committing or attempting suicide. Suicide is one of the leading causes of death among college students. There are different behaviour patterns which precede suicide attempts. It suggests that mental health issues associated with suicide are rising. The present study, thus, focuses to identify the suicidal risk behaviour among young adults, so that intervention programme can be planned, starting from identification of the risk behaviour.

Young adults often tend to be secretive, since it is a crucial time of their ‘identity’ formation. They isolate themselves from others as well. Various signs and expressions of depression, like loss of interest, disrupted sleep patterns, or overwhelming feelings of hopelessness, may indicate the possibility of impending suicide. However, suicidal risk does not always depend on the place of dwelling. According to Chakraborty and Halder (2018), there’s no significant difference between the students residing with family and that of at hostel.

Not only the committed suicide, but also the nature of suicidal ideation and suicidal behaviour majorly depend on the gender. It is found in the present study (Table 2b) that suicidal risk behaviour for female is more than that of male. However, there is an uneven distribution of the suicidal rate between male and female. Another study by Ibrahim, Amit, Din and Ong (2017) showed that age was the predictor of suicidal ideation for males, while depression and loss of motivation (components of hopelessness) were the predictors of suicidal ideation among females. It is further supported by the research finding where Vijaykumar (2015) shows that women are more vulnerable to suicidal behavior due to gender related vulnerability to psychopathology and to psychosocial stressors. Thus, the present finding would help to design a suitable intervention programme for the young adult students having suicidal risk behaviour.

Suicide prevention efforts targeted for young adults are rare. Most programs have been targeted toward adolescents in high school, and these programs generally do not extend to include young adults. The focus of prevention efforts on adolescents may be because they are relatively easy to access in comparison with young adults, who may be working or in college. There are ample researches which show that the suicide rate for young adults is substantially higher than the rate for adolescents.

An important suicide prevention strategy has been to identify and intervene with individuals who are at early points along the continuum (e.g., target programs toward individuals who are engaging in high levels of risk taking behaviour, or who are expressing suicide ideation, or who have made a suicide attempt). However, motivational issues of adolescents need to be addressed. In many instances,
suicide prevention programs directed towards young adults have not established close working ties with traditional community mental health resources.

5. Conclusion

Thus, the present study is a screening for identifying suicidal risk behaviour among Undergraduate students in Kolkata. Result shows that 31% of students scored above cut-off point, measuring suicidal risk behaviour, also female students scored more than male students. The American College Health Association’s National College Health Assessment (2012) found 30% of college students reported feeling so depressed they were unable to function properly. Research by Stern et al (2015) show that female are two to four times more vulnerable to suicide than male. Thus, detailed exploration of different personality facets would help to design relevant intervention programme in future.

6. Implication

However the study contains limited number of participant, the result showed that 31% the suicidal risk behaviour among the young adults. It is a state of crisis which need to be addressed. Despite the stigma attached with suicide or suicidal behaviour, appropriate intervention is preeminent. Encouragement of communication of such idea is of utmost importance. Mental health professionals play a crucial role for catering the purpose. Motivational approaches and non-judgemental stances of therapists which provide validation for adolescents’ feelings. Adequate assessment of the suicidal thought and designing the suitable intervention programme can be done. However, other social supports like family, peer groups, teachers can be encouraged to deal such situations with empathy, sympathy and patience. The therapeutic program must focus on the crisis management, followed by other behavioural difficulties and cognitive restructuring eventually.

Authors Declaration

I/We declare that this research work is our own, original and neither published nor submitted for publication elsewhere.

References


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[11] Using the phrase ‘commit suicide’ is offensive to survivors and frightening to anyone contemplating taking his/her life. It’s not the same as ‘being committed’ to a relationship or any other use of it as a verb. Suicide prevention (SUPRE) World Health Organization (2012)