

# PSYCHACHE AND HOPELESSNESS AS CORRELATES OF SUICIDE IDEATION AMONG KASHMIRI YOUTH

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**Abstract:** Suicide is one of the leading challenges and global health concern among youth. Previous researches have indicated that there is a strong relationship of psychache and hopelessness with suicidal ideation. The purpose of this study was to assess this relationship. This study is based on a sample of 769 youth selected purposively from various districts of Kashmir viz. Anantnag, Baramulla, Bandipora and Srinagar. The sample survey packets comprised of Hopelessness Questionnaire (Beck, 1988), The Psychache Questionnaire (Holden et al., 2001) and The Suicide Ideation Questionnaire (SSI) (Beck, Steer, & Ranieri, 1988). Results revealed that there is a significant correlation of psychache and hopelessness with suicidal ideation.

**Index Terms:** Suicide, Hopelessness, Psychache.

## I. INTRODUCTION

Suicide ideation also known as suicidal thoughts concern thoughts about or an unusually preoccupation with suicide. The range of suicide ideation varies greatly from fleeting thoughts, to extensive thoughts to detailed planning, role playing (standing on a chair with a noose) and incomplete attempts, which may be deliberately constructed to not complete or to be discovered, or may be fully intended to result in death but the individual service (e.g. in case of hanging in which the cord breaks). Thus, suicidal ideation is thoughts about how to kill oneself which can range from a detailed plan to a fleeting consideration and does not include the final act of killing oneself. Most people who have suicidal thoughts do not go on to make suicide attempts, but it is considered a risk factor. According to three factor theory the first step toward suicidal ideation begins with pain, regardless of its source. The theory does not specify the nature of the pain. Just as any sufficiently aversive stimulus can effectively punish behavior (Mazur, 2012), we believe that different sources of pain in daily life can all lead to a decreased desire to live. These may include physical suffering

(Ratcliffe, Enns, Belik & Sareen, 2008), social isolation (Durkheim 1897;1951), burdensomeness and low belongingness (Joiner,2005) defeat and entrapment (O'Connor 2011), and negative self-perceptions (Baumeister,1990), and myriad other aversive thoughts, emotions, sensations, and experiences. However, pain alone will not cause suicidal ideation. If someone in pain has hope that his situation can improve and that the pain can be diminished, the individual will strive to achieve a future with diminished pain rather than consider suicide. For this reason, hopelessness is also required for the development of suicidal ideation. That is, if someone's life includes considerable pain, and he feels hopeless that the pain will improve, he will consider ending his life. In short, the combination of pain and hopelessness is what leads to suicidal ideation. Importantly, the 3ST emphasizes that it is the combination of pain and hopelessness that brings about suicidal ideation. Someone in pain but with hope for a better future will continue to engage with life. Likewise, someone who feels hopeless about the future but lives without pain will not feel suicidal. Pain and hopelessness in combination are what lead to suicidal ideation. Suicide ideation is considered to be an important precursor to later attempted and completed suicide and is major public health significance. National surveys estimate that 11.4% of college students seriously considered attempting suicide in the past year, 7.9% made a suicide plan, and 1.7% attempted suicide. Suicide ideation has been associated with poor psychosocial functioning, future depressive disorders, school dropout, risky sexual behavior and adult substance use disorders. (Arria et. al. 2009). Suicidal ideation is considered by some to be the first step toward suicide (Gili-Planas et al., 2001).

Psychache is defined as an acute state of intense psychological pain associated with feelings of shame, humiliation, hurt, anguish, despair, loneliness, fear, and dread (Shneidman, 1993). In other words, it is the painful inner experience of negative emotions (Shneidman, 1999). Alternatively, psychache is the mental pain of being perturbed (Shneidman, 1999). Perturbation refers to one's inner turmoil, or being upset or mentally disturbed, and may be seen as a continuum from tranquil and serene to frenzied, hyper manic, and wildly disturbed. Psychache is "*the introspective recognition of perturbation*" (Shneidman, 1999, p. 87).

Psychache leads directly to suicide once the psychological pain surpasses an individual's threshold of tolerance, to the point where death is seen as the only means of escape. Shneidman (1993) outlined six

components in the progression to suicide: (1) Occurrence of life stresses and psychological insults (e.g., changes, failures); (2) Influence of other vulnerabilities, such as genetic and social factors; (3) Perception of life stresses as negative and painful; (4) Perception of pain as unbearable and unacceptable; (5) Thought that cessation of consciousness is the solution for this pain; and (6) Level of pain that exceeds one's threshold for tolerating or enduring psychache.

The purpose common to all suicides, therefore, is to seek a solution for this pain; and the common goal of suicide is to “stop the painful flow of consciousness” (Shneidman, 1992, p. 4). This conceptualization of suicide as an escape from a painful internal state views suicide as a practical act, or problem-solving behaviour (Shneidman, 1992), although dramatic and extreme (Jobes & Drozd, 2004), and is consistent with observations by Beck (1963), and other theories of suicide, such as escape theory (Baumeister, 1990) and the cry of pain model (O'Connor, 2003). Shneidman (1993) postulated that psychache is directly associated with suicidality, and mediates the effects of other relevant psychological factors, such as depression and hopelessness, in their association with suicide. All other suicidogenic factors are therefore secondary to the psychological pain that drives suicide.

Hopelessness is one of the most commonly cited risk factors for suicidal behaviors. However, several retrospective studies suggested that hopelessness, while strongly correlated with suicide ideation, does not distinguish attempters from ideators without attempts. One of the most oft-cited risk factors for suicidal behavior is hopelessness. First formulated by Beck (1967), the hopelessness theory of suicide states that hopelessness—a negative attribution style about prospects for the future—leads depressed individuals to view suicide as the only way out of insoluble problems. Hopelessness is thus conceptualized as an important cognitive vulnerability for suicide. Consistent with this perspective, several studies have shown that individuals at elevated risks for suicide tended to experience greater levels of hopelessness.

This combination of psychological pain and hopelessness results in suicide ideation and in many cases suicide attempts among youth. The present study brings together these variables in order to examine the relationship of psychache and hopelessness suicide with suicide ideation among youth. It is important to examine the entire spectrum of suicidal thoughts and behaviors, as this can provide valuable information not

only for understanding the development of suicidal behavior, but also for developing research-driven preventive programs and strategies.

## II. METHOD:

### Sample:

The current study was carried out on 769 (232 males & 537 females) youth in the age range of 18-22 years. The sample was selected using purposive sampling. The data was collected across the four districts of Kashmir valley viz: Srinagar, Anantnag, Baramulla, Bandipora. Govt. College for Women, M.A. Road Srinagar; Islamia College of Science and Commerce, Hawal, Srinagar; Amar Singh College, Gogji Bagh Srinagar.; S.P. College, Lal Chowk; Govt. girls high school, Nawakadal ,Srinagar; Govt. girls higher secondary school Rani Bagh; Govt. Degree college for women, Anantnag; Govt degree college for Boy's Baramulla; Govt. degree college Pattan; Govt Higher secondary school Kreeri Baramulla; Govt Degree college Sumbal; Govt. Higher secondary school Sumbal.

### Research Instruments:

In the current study, following tools were used for collecting the required data:

#### **The Psychache Scale (Holden, Mehta, Cunningham, & McLeod, 2001):**

The Psychache Scale is a 13-item measure of psychological pain. Items are rated on a 5-point Likert scale. The Psychache Scale has high reliability and validity in samples of students and offenders. Additionally, the Psychache Scale can successfully differentiate between suicide attempters and non-attempters (Holden et al., 2001). The reported reliability of the scale is 0 .94. For the present study, Cronbach's Alpha for this scale was found to be 0.88.

**Beck Hopelessness Scale (BHS) (Beck, 1988)** 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, aged 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 reported reliability of the scale is 0.93. For the present study, Cronbach's Alpha for this scale was found to be 0.66.

**Beck Scale for Suicide Ideation (BSS).** The Beck Scale for suicide Ideation (Beck, Steer & Ranier, 1988) is a self-report, 19-item, 3-point measure of suicidal ideation and intent. The BSS has demonstrated strong psychometric properties in various samples. Factor analysis has yielded two subscales. Suicidal Motivation refers to individuals' ambivalence about living or dying, as well the frequency and duration of suicidal thoughts; and Suicidal Preparation refers to an active component of planning the suicidal act. Holden and DeLisle (2005) report results of exploratory and confirmatory principal components analyses supporting the two-factor model, and provide alpha coefficients of .85 and .73 for motivation and preparation components, respectively, the reported reliability of the scale is 0.89. For the present study, Cronbach's Alpha for this scale was found to be 0.75.

#### **Data analysis:**

Data was analysed by using SPSS computer software version 20.0. The frequencies of variables were compared. Furthermore, bivariate correlation was used to find the correlation between study variables.

#### **Procedure:**

The data collection started after permission was taken from authorities. Various higher secondary's and colleges of districts: Srinagar, Anantnag, Baramulla, Bandipora were visited to collect the data. The administration of questionnaire took place at group level. Before questionnaire could be distributed the subjects were provided information about the questionnaire and related topic. Consent forms were attached to the questionnaires distributed among the students who participated in the research. The questionnaires were distributed among subjects and subjects were instructed to read the instruction before filling the questionnaire and it was also made sure that the subjects fill the demographics at the end of the questionnaire. The subjects were also instructed not to leave any question un-attempted and also ask for help if required. After completing the questionnaires, the subjects were thanked for their precious time and cooperation and head of every institution was also thanked for their permission.

**III. RESULT AND INTERPRETATION:**

The results of this study are summarized as under:

**Table 1: presenting descriptive statistics for suicide ideation among youth**

<b>Low</b>		<b>Average</b>		<b>High</b>	
0-9		10-15		16-36	
<i>distribution of suicide ideation</i>					
<b>Low</b>		<b>Average</b>		<b>High</b>	
<i>f</i>	%	<i>f</i>	%	<i>f</i>	%
271	35.12	266	34.59	232	30.29

*Table 1.1: different levels of frequency*

Table 1.1 shows the frequency distribution of suicide ideation in which 35.12% of sample falls under the low level of suicide ideation, 34.59% of sample group falls under the average level of suicide ideation and 30.29% of sample group falls under the high level of suicide ideation.

**Table 2: presenting descriptive statistics for hopelessness among youth**

<b>Low</b>		<b>Average</b>		<b>High</b>	
0-3		4-14		15-20	

**Table 2.1: different levels of frequency distribution of hopelessness among youth**

<b>Low</b>		<b>Average</b>		<b>High</b>	
<i>F</i>	%	<i>f</i>	%	<i>f</i>	%
51	22.14	446	76.68	272	1.18

Table 2.1 shows the frequency distribution of hopelessness in which 22.14% of sample group falls under the low level of hopelessness, 76.68% of sample group falls under the average level of hopelessness and 1.18% of sample group falls under the high level of hopelessness.

**Table 3: presenting descriptive statistics for psychache among youth**

<b>Low</b>	<b>Average</b>	<b>High</b>
<=9	10-31	33 &above

**Table 3.1: different levels of frequency distribution of psychache among youth**

<b>Low</b>		<b>Average</b>		<b>High</b>	
<b>F</b>	<b>%</b>	<b>f</b>	<b>%</b>	<b>f</b>	<b>%</b>
126	16.4	517	67.2	126	16.4

Table 3.1 shows the frequency distribution of psych ache in which 16.4% sample group falls under the low level of psych ache, 67.2% of sample group falls under the average level of psych ache and 16.4 of sample group falls under the high level of psych ache.

**Table 4: presenting correlation among study variables**

<b>Variable</b>	<b>Suicide Ideation</b>
	<b>(r)</b>
<b>Psychache</b>	0.31**(p=.000)
<b>Hopelessness</b>	0.42** (p=.000)

**\*\*p≤0.01**

The above table reveals that there is a significant positive correlation between psychache, hopelessness and suicide ideation.



To further understand the relationship between study variables multiple regression analysis was carried out the results of which are shown as under:

Table 5: ANOVA summary

Model	Sum of Squares	Df	Mean Square	F	Sig.
Regression	6388.067	2	3194.034	103.504	.000
Residual	23637.909	766	30.859		
Total	30025.977	768			

Table 5.1: summary of the final model of multiple regression analysis for psychache and hopelessness predicting suicide

Outcome	Predictors	<i>B</i>	<i>SE B</i>	<i>B</i>	<i>t</i>
Suicide Ideation	Constant	6.01	.498	-	12.06**
	Psychache	.10	.018	.19	5.61**
	Hopelessness	.75	.07	.36	10.63**

Note:  $R^2 = .21$  ( $p \leq .001$ ); \*\*  $p \leq .01$ .

The regression coefficients presented in the above table reveal that psychache and hopelessness emerged as a significant predictor of suicide ideation. The  $R^2$  of this regression equation was 0.21 indicating that the psychache and hopelessness explained 21% of variance in suicide ideation.

#### IV. DISCUSSION:

The aim of the present study was to examine the relationship between psychache, hopelessness and suicidal ideation among youth. The study found that suicidal ideation was found to be significantly and positively correlated with hopelessness and psychache. The result of this study is in line with the previous researches conducted by Klonsky & May (2015), Opperman, Gipson, and King (2016), Joiner et.al. (2009)



which showed that the above variables are significantly correlated. One of the most often cited risk factors for suicidal behavior is hopelessness. First formulated by Beck (1967), the hopelessness theory of suicide states that hopelessness—a negative attribution style about prospects for the future—leads depressed individuals to view suicide as the only way out of insoluble problems. Hopelessness is thus conceptualized as an important cognitive vulnerability for suicide. In contrast to the hopelessness theory of suicide Shneidman (1993) proposed that psychache, or intense psychological pain, is the most proximal and direct psychological cause of suicide. Suicide is an attempt to escape this pain when it becomes unbearable, coupled with the idea that death, or cessation of consciousness, is the only means of escape.

The present study will be helpful for identifying population at risk and this study can be useful in order to develop or design a suicide prevention program. The perception of hopelessness due to psychache becomes a greater risk for suicidal ideation and later for suicidal attempts. The study will also be beneficial for parents in order to develop positive attitude towards their children. It will be helpful for them to provide necessary attention towards their children that will reduce the risk of suicidal ideation and suicidal attempts. Youth can be provided knowledge about self and greater knowledge about the consequences of suicide. This knowledge can also be used by people including parents, teachers and others to make sure that these events will not occur and if by chance they occurred in such circumstances will provide necessary support so that the young people will not have to face the situation all alone.

**V. ACKNOWLEDGEMENT:** The researcher would like to thank all the participants who made this study possible.

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