PSYCHO-SOCIAL CORRELATES OF SUICIDAL IDEATION AMONG

COLLEGE STUDENTS

A Thesis Submitted

To

Sikkim University

In Partial Fulfillment of the Requirement for the

Degree of Doctor of Philosophy

By

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CERTIFICATE

This is to certify that the dissertation entitled *"**Psycho-Social Correlates of Suicidal Ideation among College Students**"* submitted by **Ms. Anjana Prusty** (Roll No. 14PDPS01 and Reg. No. 14/Ph.D./PSY/01) in partial fulfilment of the requirement for the award of Ph.D. Degree in Psychology of Sikkim University has not been previously submitted for the award of any degree/diploma of this or any other University and it is her original work. She has been working under my supervision.

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DECLARATION

The work embodied in the dissertation entitled "**Psycho-Social Correlates of Suicidal Ideation among College Students**" was conducted at the Department of Psychology under School of Human Sciences, Sikkim University, in partial fulfilment of the required for the award of Ph.D. degree of Sikkim University. The work has not been submitted in part or full to this or any other university or institution, for any degree or diploma.

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I recommend this thesis to be placed before the examiners for evaluation.

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"PSYCHO-SOCIAL CORRELATES OF SUICIDAL IDEATION AMONG COLLEGE STUDENTS"

Submitted by **Ms. Anjana Prusty** under the supervision of **Dr. Satyananda Panda** of the Department of PSYCHOLOGY, School of HUMAN SCIENCES, Sikkim University, Gangtok, 737102, INDIA.

Signature of the Candidate

Signature by the Supervisor

ACKNOWLEDGEMENTS

Dedicated

To My

Maa & Baba

&

Other Well-wishers

LIST OF ABBREVIATIONS

A&C	Acceptance & Caring
AAS	Adolescent Aggression Scale
AHS	Adult Hope Scale
ANOVA	Analysis of Variance
ARO	Active Recreational Orientation
ATSS	Attitude Towards Suicide Scale
AUD	Alcohol Use Disorder
BDI-II	Beck Depression Inventory-II
BHS	Beck Hopelessness Scale
BPD	Borderline Personality Disorder
BSS	Beck Suicide Scale
C	Control
CDCP	Centre of Disease Control & Prevention
CDI	Child Depression Inventory,
CO	Cohesion
CON	Conflict
D	Depression
df	Degree of Freedom
DSM-IV-TR	Diagnostic and Statistical Manual of Mental Disorders-Fourth Edition-Text Revision
E	Extroversion
E	Extroversion
EPQ-R	Eysenck Personality Questionnaire-Revised
EXP	Expressiveness
FDA	Food and Drug Administration
FES	Family Environment Scale
FES-BC	Family Environment Scale-Bhatia & Chadda
GES	Generalized Expectancy Scale
H	Hopelessness

I	Introversion
ICD	International Classification of Diseases
IND	Independence
JFEDC	Jed Foundation and Education Development Center
L	Loneliness
N	Neuroticism
N	Number of Items
N	Neuroticism
NCRB	National Crime Record Bureau
OBC	Other Backward Class
OR	Organization
P	Psychoticism
P	Psychoticism
PEPSS	Perceived Emotional/Personal Support Scale
RFL	Reasons for Living
SAD	Seasonal Affective Disorder
SC	Schedule Caste
SD	Standard Deviation
SI	Suicidal Ideation
SIQ	Suicidal Ideation Questionnaire
SPSS	Statistical Package Social Science
SSI	Suicide Ideation Scale
SSRIs	Serotonin Reuptake Inhibitors
ST	Schedule Tribes
TAS	Trouble Communicating Feelings
UCLA	University of California; Los Angeles
UK	United Kingdom
USA	United States of America
WHO	World Health Organization

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WORLD SUICIDE PREVENTION DAY (10TH SEPTEMBER)

THEMES

2003	"Suicide Can Be Prevented!"
2004	"Saving Lives, Restoring Hope"
2005	"Prevention of Suicide Is Everybody's Business"
2006	"With Understanding New Hope"
2007	"Suicide Prevention across the Life Span"
2008	"Think Globally, Plan Nationally, Act Locally"
2009	"Suicide Prevention in Different Cultures
2010	"Families, Community Systems and Suicide"
2011	"Preventing Suicide in Multicultural Societies"
2012	"Suicide Prevention across the Globe: Strengthening Protective Factors and Instilling Hope"
2013	"Stigma: A Major Barrier to Suicide Prevention"
2014	"Light a Candle near A Window"
2015	"Preventing Suicide: Reaching Out and Saving Lives"
2016	"Connect, Communicate, Care"
2017	"Take a Minute, Change a Life"

Suicide: facts and figures

Suicide is the **second** leading cause of death among **15-29** year-olds

Over 800 000 people die by suicide **every year**

1 death every 40 seconds
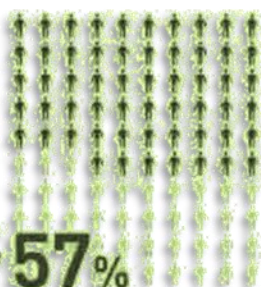
High-income countries **75%** of suicides occur in low- and middle-income countries

There are more deaths from suicide than from war and homicide together **57%**

Pesticides, hanging and firearms are the most common methods used globally

Suicides are preventable

Restricting access to means

Responsible media reporting

Introducing alcohol policies

Effective preventive measures

Early identification and treatment

Training of health workers

Follow-up care and community support

Key is a comprehensive multisectoral approach

Media · Government · Civil society

Most countries currently do not have a national suicide prevention strategy

10% reduction of suicide rates is the target in the Mental Health Action Plan 2013-2020

World Health Organization

PSYCHO-SOCILA CORRELATES OF SUICIDAL IDEATION

ABSTRACT

The aim of the present study was to investigate psycho-social correlates of suicidal ideation among college students.Various suicidal cognitions (death wish, suicidal ideation, and suicide plan) and behaviors (suicide attempt, and commit suicide) are determined by common factors, such as personality characteristics, psychopathology, parenting style, family function, and substance. College is a time many young adults feel a pressure to develop identities, develop life goals, and make meaningful relationships. Internal conflicts can develop when these complex social lives, academic roles, and extracurricular activities conflict with an individual's beliefs or schedule. Undergraduate college students are a unique at-risk population for development of suicidal ideation.

The present study intends to get a holistic picture of suicidal ideation with hopelessness, loneliness, depression, psychoticism, extroversion, neuroticism, and family environment condition of undergraduate male and female from different Government Collegesof Sikkim. 400 undergraduate college students (200 males and 200 females) from four different government collegesof Sikkimwere selected for data collection.

The results suggest that a significant and positive correlation existed between suicidal ideation with loneliness, depression, psychoticism, and negatively correlates of all the dimension of family environment among undergraduate college students. There exists significant gender difference among male and female undergraduate college students on loneliness, depression, psychoticism and neuroticism dimensions of personality and cohesion dimension of family environment.Loneliness, depression, personality, and family environment indicated significant predictor of suicidal ideation among undergraduate college students. The findings on family type variable suggest that family is additionally one of the risk factors for suicidal ideation. A high score among undergraduate college students indicate that students from orphanage and joint family have high effect on suicidal ideation.After the rigorous efforts, the present study reached to its destination that highlights the fact that the male undergraduate college students of Sikkim have faced less competence in comparison to the female students. One of the reasons behind this could be the academic atmosphere in the colleges. Another problem among college students is loneliness and related risky behaviours for overcoming loneliness could be smoking, drinking, substance abuse, risky sexual behaviour, physical harm etc. Therefore, there is an urgent need to provide information to health care providers, educators, mental health professional and policy makers to better understand the need of training in identifying and counselling the students to prevent depression related suicide among college students.

Keywords: *College students, Suicidal ideation, Hopelessness, Loneliness, Depression*

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Sources included in the report:

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Theoretical Background of the Study

Suicide has consistently been a subject of extensive enthusiasm for various topographical regions of the world in light of the fact that an analysis of the suicide rate around the world, of youth, may discover something of their well-being. Moreover, suicide stays such an enigma to the point that similar analysts have their own interest. The developing rate of suicide among specific age groups needs our assumed affection forever and dread of death. This disorienting question, "Why do human beings especially college/university students' commits suicide?" Furthermore, expanding acknowledgement of suicide as a noteworthy medical issue has prompted various endeavours to recognize the social and psychological characteristics of individuals attempting suicide. Psychologists specifically are progressively worried about the identification of suicide chance factors and their relationships.

Worldwide, suicide death rates are close to 80, 0,000 individuals, because of suicide happening in every 40 seconds of each hour in the society. Suicide happens all through the life expectancy and is the second leading reason for death among 15-29 year olds globally. Recently, World Health Organisation reported that in the year 2015, 78% of suicides happened in the country of low and middle-income source (World Health Organisation, 2017).

Suicide in India

Incidence and rate of suicides during the decade (2004-2014) on an average, in excess of one lakh people commit suicides consistently in the nation during the decadal period from the year 2004 to 2014. The number of suicides in the nation during the decade (2004-2014) has recorded an expansion of 15.8% (1, 31,666 in 2014 and 1, 13,697 in 2004). The populace has expanded by 14.6% during the decade, while the

rate of suicides has marginally expanded by 1.0% (10.5 in 2004 to 10.6 in 2014). The rate of suicides is demonstrating a blended pattern in the decade 2004 - 2014. Seventy-five percent of suicides comprehensively happen in the world (World Health Organisation, 2016). Rates of finished suicides are higher in men than in women, ranging from 1.5 times as much in the world to 3.5 times in the developing world (World Health Organisation, 2014).

"Suicide is applied to all cases of death resulting directly or indirectly from a positive or negative act of the victim himself, which he knows will produce this result" (Maris, 1997).

Emil Durkheim, (1897, p.43).

Suicide is "a conscious of self-included annihilation, best understood as a multidimensional malaise in a needful individual who defines an issue for which suicide is perceived as the best solution" (Maris, 1997).

Edwin Shneidman, (1985, p.203)

Suicidal Ideation Defined

Suicidal ideation is known as suicidal thought and is thoughts about how to kill one. Those might be as particular as a detailed arrangement, however without the suicidal act itself. Although most people who experience suicidal ideation do not confer suicide, some do move specifically to attempt suicide. The suicidal ideation range varies from fleeting thoughts to certain planning, role-playing, and unsuccessful tries which could be each deliberately made to fail or are completely meant to achieve success but are dissatisfied via discovery. Appropriately speaking, suicidal ideation

suggests that wanting to take one's own life or considering suicide while not primarily making arrangements to commit suicide (Gliatto & Rai, 1999).

Suicidal Behaviour

The nonspecific term "suicidal behaviour" includes completed suicide, nonfatal anticipate self-harm (for instance suicide attempt, suicide motions, self-damage, self-poisoning) with or without a suicidal goal, suicide interchanges not including suicide threats: and suicide ideation (Donald, 1989). Three general classifications of "suicidal behaviours" are:

o   Completed suicide, including all deaths in which a wishful. Self-beset life-threatening act has brought about death.

o   Suicidal attempt, and

o   Suicidal ideation "suicidal behaviour" in the present research is limited to suicidal ideation.

Suicidal Attempt

The suicidal attempt is any demonstration of self-injury intentionally going for self-destruction (Stengel & Cook, 1958). Suicide attempt includes those circumstances in which an individual has played out a real or appearing life-threatening behaviour with the purpose of exploring his life or giving the presence of such goal, but which has not resulted in death. A suicidal attempt in the past research referred to a non-deadly act by the individual himself.

Suicidal Thought

Suicidal thought is called as suicidal ideations are thoughts about how to kill oneself, which can range from a point by point plan to a transitory thought and does exclude the last plan of killing oneself. The majority of individuals who encounter suicidal

ideation do not carry it through. Some might be that, makes suicide attempts. Some suicidal ideations can be intentionally wanted to discover or fail, while others may be precisely wanted to succeed. As indicated by a Finnish research, more than one-fifth of individuals who really died by suicide had talked about their aim with a doctor or other health care proficient during their last session (Gliatoo & Rai, 1999).

History of Suicide

Suicide is a major national social issue in the US States (Suicide Injury Deaths and Rates, 2018). In 2016, there were 44,965 recorded suicides up from 42,773 in 2014, according to the CDS's National Centre for Health Statistics (NCHS) (Data Brief of CDCP, 2017). As per the FDA (Food and Drug Administration), there are around 30,000 completed suicides in America every year, the yearly occurrence of 0.01% to 80% of suicides are among males. Suicide is the third driving reason for death among 15 to 24 years old. Twenty percent of all suicides are among these age groups (Nordqvist, 2014). As per the Centre of Disease Control report, the annual age of suicide rate is 13.42 per 100,000 individuals. Men are dying by suicide 3.57 times more often than women. On an average, the suicide rate in the USA is 123 per day. Moreover, white males are accounted for 7/10 suicides in 2016. Firearms account for 51% of all the suicides. In 2016, adolescents and young adults aged 15 to 24 had a suicide rate of 12.5% and the highest U.S. suicide rate (15.2%) was among Whites. The second highest rate (13.5%) was among American Indians and Alaska Natives. Much lower and roughly similar rates were found among Asians and Pacific Islanders (6.7%), and Black or African Americans 6.1% (Center for Disease Control & Prevention, 2017).

As indicated by the (National Health Service (NHS), during the last recent 20 years suicide rates in the United Kingdom (UK) have been persistently dropping. In

2006, there were 5,554 completed suicides among individuals aged below 15 years. Every year, 140,000 people are hospitalized in England and Wales after suicide attempts. Seventy-five percent of all UK suicides are among males, with the highest risk among those aged 25 to 34 years, followed by 35 to 44 years. After incidental demise, suicide is the second basic reason for death among males aged 15 to 44 years (Nordqvist, 2014).

As indicated by National Crime Records Bureau (NCRB, 1990), the suicide rate in India is equivalent to Australia and the USA. The suicide rates in India ascended from 6.3 for per 100,000 in 1978 to 8.9 for every 100,000 in 1990, an expansion of 41.3% during the decade from 1980 to 1990, and a compound development rate of 4.1% every year (Accidental Deaths and Suicides in India, 1990). In addition, the rate of suicide demonstrated a declining pattern from 1999 to 2002 and a mixed pattern during 2003 to 2006, followed by an expanding pattern from 2006 to 2010 (Accidental Deaths and Suicides in India, 2008). During 2009, the rate was 10.9 for every 100,000 individuals (Accidental Deaths and Suicides in India, 2007). This represented a 1.7% increase in suicides since 2008 (Accidental Deaths and Suicides in India 2006). Consequently, as indicated by NCRB report in 2008 the suicide rate in 2010 rose to 11.4 for every 100,000 populaces; an expansion of 5.9% in the number of suicides (Accidental Deaths and Suicides in India, 2007).

A psychological post-mortem investigation of Khan et al. (2005) saw youth suicide in India. The age aggregate 15-29 years represented the biggest extent (34.5%) of suicides followed by those in the age group 30-44 years (34.2%). Furthermore, youthful adults have at increased risk, with aged 20-24 years followed by 25-29 years which suggests the highest rates of suicide (Khan et al., 2005). Further, the 15-39 years age groups identified as the most defenceless in another review (Vijayakumar et

al., 1999). Two-thirds of women had completed suicide at the age of 25 years (Banerjee et al., 1990; Nandi et al., 1979).

Signs and Symptoms of Suicidal Ideation

The signs and symptoms of suicide have been recorded by many organisations (Centre for Addiction and Mental Health, 2010; Mental Health Commission of Canada, 2012; American Association of Suicidology, 2013) have been classified into three categories such as behavioural, cognitive and emotional.

Behavioural Symptoms: These are the talking about death, giving away prized belonging, using phrases, dying, for example, "I am going to kill myself" or "when I am gone". The attitude is like saying goodbye to friends and family, finding items required for the suicide attempt, decreased social contact, increasing drugs and liquor use, withdrawing from the pleasurable activities, threatening himself or herself, increased unsafe behaviour (Centre for Addiction and Mental Health, 2010; Mental Health Commission of Canada, 2012; American Association of Suicidology, 2013).

Cognitive Symptoms: Distraction with death and passing on, believe that dying by suicide is the best way to end emotional suffering. The person moves from suicidal thoughts to ideation (Hawton et al., 2012).

Emotional Symptoms: Feeling helpless; caught by emotional agony, psychosis, self-despising, hopelessness, paranoia, intense emotional irritation, feeling sad about a circumstance, mood swings, sudden changes in personality, severe nervousness and disturbance (Centre for Addiction and Mental Health, 2010; Mental Health Commission of Canada, 2012; American Association of Suicidology, 2013).

Causes of Suicidal Ideation

Common causes and risk factors for suicidal ideation include:

Hereditary: People those are naturally belonging to families with mental illness or suicidal thoughts are at a higher risk of creating suicidal thoughts or emotional sickness themselves. However, there is a hereditary part to suicidal ideation and maladjustment. Not everyone who has a family history will create suicidal ideations, nor each one of the individuals who have suicidal ideation has a family history of the disorder (Cannon, & Hudzik, 2014).

Physical: The physical cause is a kind of thought process that particularly changes the structure and capacity of the cerebrum through low levels of the neurotransmitters 'dopamine and serotonin', and it can build the risk for emotional instability, including those that cause suicidal thoughts and behaviour (Goodwin, & Jamision, 2007).

Environmental: Those who are barraged with rehashed, negative life occasions and experience steady levels of major stress that overpower their capacity to adapt are at higher threat of suicide. Also, those presented to other people who passed on by suicide are at more serious risk for creating suicidal ideation themselves. The most common situations or lives occasions that may bring about suicidal thought are the pain, sexual abuse, financial issues, regret, dismissal, relationship, separation and unemployment (Rockefeller, 2017).

Risk Factors of Suicidal Ideation

Risk factors for suicide ideation refer to characteristics that are related to suicide. Individuals who are influenced by at least one or more risk factors may have a more

prominent likelihood of suicidal behaviour. Some risk factors cannot be changed, for example, a past suicide attempt however, can be utilized to help identify somebody who might be helpless against suicide. There is no single risk factors of suicide, however, list below identified by the latest researches (Cukrowicz et al., 2006; Drum et al., 2009; JFEDC, 2011; Langhinrichsen-Rohling et al., 2011; Di-Martino et al., 2014; Nadroff et al., 2011; Nadorff et al., 2013; Westefield et al., 2005; Whitlock et al., 2013) are discussed.

In the present research, among many, the researcher picked up five factors of suicidal ideation which are: Hopelessness, Loneliness, Depression, Personality, and Family Environment.

Hopelessness Defined

Hopelessness is a belief that conditions will not enhance later on includes the desire of negative results consolidated with desires, that those negative results are out of one's control (Abramson, Alloy, & Metalsky, 1989). As per the hopelessness theory of suicide (Cornette, Abramson, & Bardone, 2000), a negative subjective life works as helplessness for the development of hopelessness. Hopelessness is a proximal reason for the manifestation of depression, including suicidal thoughts and behaviour (Orden et al., 2008).

Hopelessness has been characterized in a different way. Engel (1968) have characterized it as an emotional state showing the feeling of difficulty, the inclination that life is too much to deal with, and disregard. The person turns out to be extremely inactive and cannot anticipate constantly being in an alternate situation. The lack of care results from his failure to adapt to the present and from a conviction that nothing will ever change. In Scotland's (1969) definition, hopelessness has been determined

as a system of negative expectations concerning oneself and one's future life (Bruss, 1988). Hopelessness means a sense of impossibility, negative hopes for the future, loss of control in connection to the future, inactive acknowledgment or the worthlessness of wanting to accomplish goals (Campbell, 1987).

Hopelessness and Its Relation with Hope and Despair

Despair means an absence of hope, while hopelessness implies an offensive type of despair, where all hope is lost (McGee, 1984). Many authors have depicted hopelessness as being orientated to or focusing on the past (Bruss, 1988; Cutcliffe, 1997; Collins & Cutcliffe, 2003; Engel, 1968). McNaught and Spicer (2000) emphasized that hopelessness has not been characterized as having any desires without bounds but as having negative desires without bounds and recommend that the future of hope does not really mean the absence of hopelessness; the capacity to take control and end one's own suffering can give an individual hope without moderating hopelessness.

Dynamics of Hopelessness

Farran, Herth, and Popovich (1995), in their research of hope and hopelessness, have introduced the developmental roots of hopelessness to lie in intra-personal, interpersonal and environmental/sociological experiences. As situational determinants of hopelessness, those associated with a person's life stage, sickness and treatment settings have been illustrated, and also three levels of hopelessness (and hope). On the lowest, no hopelessness is being experienced. The middle level of hopelessness might be experienced as people's troublesome life experiences. These feelings of hopelessness are short-lived in nature and with activation of e-sources, they can be managed and they may even come out with increase in physical, mental, and spiritual

or personal satisfaction. On the third level, hopelessness is more certain and people have given up to the test. In its most extreme form, this pathological level of hopelessness is shown as dysfunctional behaviour including the feeling of depression and suicidal ideation (Beck et al., 1975). Hopelessness as a trait has been described in cognitive behavioural theories (Beck et al., 1985; Abramson et al., 1989), where hopelessness has been thought to be an etiological element as forerunner for the onset or running of depression.

Hopelessness: Facet of Depression or Distinct Entity

Hopelessness a major manifestation of depression has been determined as a system of negative anticipations concerning oneself and one's future. Hope is an essential determinant of subjective prosperity (Stotland, 1969). Lack of hope is related to different signs of psychological morbidity. Psychological variables related to hopelessness in the general population include depression, suicidal ideation, and alexithymia which mean a poor capacity to perceive and verbalize feelings and remotely situated state of mind (Haatainen et al., 2004). A few studies proposed that hopelessness may be even a more intense risk component of suicidality than depression (Beck et al., 1993; Salter & Platt, 1990).

Impact of Hopelessness on Suicidal Ideation

Hopelessness is one of the significant parts of Beck's negative cognitive trait i.e. negative insights about future. When confronted with a negative occasion, people with an antagonistic speculation process are vulnerable to depression because they will derive that contrary outcomes will take after this pessimistic occasion and that event of the occasion implies that the people themselves are useless or defective (McGinn, 2000). The expressiveness of hopelessness in conjunction with a mental

disorder, for example, depression represents an exceptionally dangerous cautioning sign and should be considered as serious. It is a kind of feeling that conditions can never improve, that there is no resolution for a problem, and for several inclinations that dying by suicide would be better than living. Most of the people who feel hopeless have depression, and untreated depression is the main reason for suicide. There is a high relationship with hopelessness in long-term suicide risk.

As per Beck's formulation, hopelessness is a centre norm for depression and serves as the connection amongst depression and suicide. Moreover, hopelessness related to another psychiatric issue likewise inclines the patient to suicidal behaviour. The central part of hopelessness is the development of suicidal ideation (Bedrosian & Beck, 1979; Dyer & Kreitman, 1984; Minkoff et al., 1973; Nekanda-Trepka, et al. 1983). Wetzel et al. (1980) reviewed tending to the relationship between depression, hopelessness, and suicidal ideation. They revealed that the dominant nature encouraged the association between hopelessness and suicide plan.

Loneliness Defined

Loneliness is an unpleasant fleeing of emotional reaction to isolation or lack of brotherhood. It generally includes anxious feelings about a lack of connectedness or group with different persons, both in the present and extending into the future. The reasons for loneliness differ and it includes social, mental or emotional factors. Peplau and Perlman (1982) have explained that loneliness is most pervasive in every society among people in marriages, relationships, families and successful careers.

Experience of Loneliness

Loneliness has been connected with feelings of general disappointment, despondency, anxiety, hostility, emptiness, weariness, and restlessness. In the cognitive domain,

lonely people are accepted to be alert about their interpersonal relationships (Perlman & Peplau, 1981). Horowitz et al. (1982) offered another approach for describing the nature of loneliness. They have distinguished the model that lays people in different categories of loneliness. They found that the major qualities of a lonely individual fall into three bunch. The main group reflect feelings and thoughts of being distinctive, segregated and isolated from others. The individual considers "I don't fit in" and feels disliked, deficient and friendless. The second group include negative feelings of depression, bitterness, anger, and even paranoia. The last bunch reflects activities, for example, maintaining a strategic distance from social contacts or working for long periods of time that may make loneliness.

Types of Loneliness

Numerous social researchers have theorized about the different structures that loneliness can take. Three fundamental dimensions have been identified in the type of loneliness discussion (Jong-Gierveld & Raadschelders, 1982). These dimensions need to do with the positive or negative nature, the source, and the span of loneliness.

Positivity or Negativity: As indicated by Moustakas (1961), existential loneliness is an inescapable part of the human experience, including times of self-confrontation and giving a road to self-development. Existential loneliness can prompt positive experiences of "triumphant creation" interestingly; loneliness anxiety is a negative experience those outcomes from a "basic alienation amongst man and men". Some systematic research has focused on existential loneliness or one's philosophical attention to aloneness as a major aspect of the human condition. Empirical evidence suggested that negative feelings prevail in the lives of lonely individuals (Russell et al., 1980).

Social Versus Emotional Loneliness: The second method of loneliness has been on the premise of the social deficiency included. Weiss (1973) described emotional loneliness (base on the non-appearance of an individual, imply relationship or attachment) from social loneliness (in view of an absence of social "connectedness" or sense of a community). He believed that emotional loneliness is more intensely painful type of isolation; social isolation is experienced as a blend of feeling rejected or inadmissible, together with a feeling of fatigue.

Chronicity: The chronic loneliness occurs when a person has lack of social relationships for a period of at least two years or more. When situational loneliness perseveres for long stretches, it can be chronic. One study (e.g., Hojat, 1983) had started to exhibit the utility of the chronicity refinement. For example, Gerson and Perlman (1979) found that lonely subjects were better at communicating their feelings over were constantly lonely subjects.

Factors of Loneliness

Many factors can contribute to the experience of loneliness.

Predisposing: Predisposing variables which make people vulnerable against loneliness and accelerating occasions that trigger the onset of loneliness. The predisposing factor can include attributes of the individual (e.g., timidity, lack of social aptitudes), qualities of the environment (e.g., aggressive communication, social isolation), and general social values (e.g., individuality).

Precipitation: In the situation like the separation of a romantic relationship or shifting to another group that changes a man's social life in some critical way. Encouraging situations make a mismatch between the individual's genuine social relations and the individual's social needs or desires; an adjustment in one of these

two factors without a comparing change in the other can produce loneliness. And also, cognitive processes can influence the experience of loneliness.

(Figure presented by Rubenstein et al., 1979)
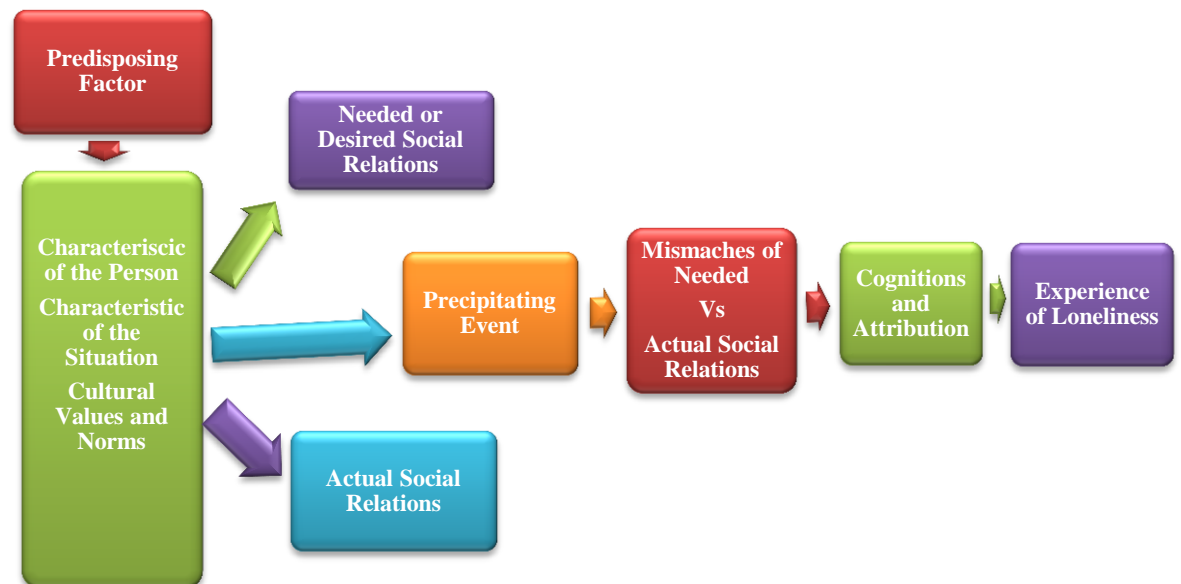
Predisposing Factors

Characteristic of the Person: A large number of studies (Perlman & Peplau, 1981) have researched personality correlates of loneliness. Accessible evidence showed that loneliness is related to: Low self-regard (Cutrona, 1982; Jones et al., 1981), Shyness (Jones et al., 1981; Maroldo, 1981), Self-consciousness (Jones et al., 1981), Introversion (Russell et al., 1980), Lower affiliated tendencies (Russell et al., 1980), Lack of assertiveness (Russell et al., 1980), External locus of control (Diamant & Windholz, 1981).

Isolated individuals also show certain unique social behaviour. These behaviours (or some may state social skill deficiencies) may make it troublesome for lonely individuals to form as well as maintain relationships. For instance, isolated

students experience the ill effects of "hindered friendliness," that is, they report issues making friends, presenting themselves, taking part in groups, appreciating parties, making telephone calls to start social activities, and so forth (Horowitz et al., 1982).

Situational Determinants: Situational factors can also incline individuals to loneliness. Situations differ in the opportunities they accommodate social contact and the start of new relationships. A few limitations are very basic time, distance, and money. The student, who conveys a full task load and a scheduled work routine may have little time for rest, let making friends. The fire spotter who lives on a remote part of the forest has a couple of chances to mingle. The single parent on a tight spending plan will be unable to manage the cost of the sitter who might allow time for social activities. Imperatives can also constrain a person's "pool of qualified" to the set of individuals whom we consider suitable as friends or lovers. People who are "different" from everyone around them, the one old individual in the apartment building or the only Hispanic family on the part may have fewer chances to begin relationships (Perlman & Peplau, 1981).

Cultural Determinants: Sociologically prepared theorists have considered loneliness to be resulting because of cultural factors and the organizing of social institutions. Riesman et al. (1961) portrayed Americans as "other-directed" concerned with popularity and how others assess them. In any case, they are cut off from their internal identities, their emotions and their goals. The outcome, incomprehensibly, is that the other coordinated individual remains a lonely individual from the group since he never truly approaches others or to himself.

Actual Social Relationships: Perhaps the clearest determinant of loneliness is the way of a person's real social relationships. Although few of abnormalities and disappointments to duplicate, the heaviness of the confirmation family recommends

that lonely individuals have less social contacts than the non-lonely individuals (Perlman & Goldenberg, 1981). In three reviews (Jones, 1981; McCormack & Kahn, 1980), students kept everyday records of their interactions. In McCormack and Kahn's review, lonely students detailed investing less energy with other individuals. Conversely, in Jones' review, loneliness was not identified with the aggregate number of interactions the students had. Perlman and Goldenberg (1981) overviewed teenagers in Grade 8, Grade 11, and the first year of college. As the students got older, their contact with friends turned into an increasingly strong indicator of loneliness, and mother-child relations decreased in significance. At the point when students achieved the end of college and enter graduate school, romantic relations turn into an inevitably essential factor in loneliness (Russell et al., 1981).

Needed or Desired Social Relations: Loneliness researchers have seldom specified the particular social needs that are most pertinent to loneliness. An exception is Weiss' (1974) delineation of six basic "provisions" supplied by social relationships. These include feelings of personal attachment (as in intimate relations), social integration, the opportunity to receive nurturance, reassurance of one's worth, sense of reliable alliance and guidance. In an investigation of UCLA students (Cutrona, 1982), members evaluated, how well their present relationships provided them with each of Weiss' six provisions? As anticipated, students whose needs were well met had a tendency to feel less lonely. Specifically, having a set of relationships that gave the social mix, a feeling of worth, and guidance helped students avoid from being lonely.

Precipitating Events: Events that develop a person's desire for social contact can also be initiated loneliness if they are not related to a comparing increment in true contact. Accordingly, Jones (1981) found that loneliness was now and again activated

by occasions, for example, failing an examination or having a stabbed fatigue which apparently disturbed unfulfilled supplementary needs.

Cognitive Processes: Once a mismatch happens between one's coveted and skilled levels of contact, loneliness would be a presumable result. According to Perlman and Peplau's (1981) point of view, the power of the loneliness reaction is mediated by intervening cognitive procedures. Cognitive procedures are delineated as working late in the causal link that prompts to loneliness. Regardless precisely where they enter the chain, it is clear from the accessible information that social comparison is an important forerunner of loneliness. And furthermore, loneliness experience is the individual's perception of having individual control over his or her relationships (Perlman & Goldenberg, 1981).

Impact of Loneliness on Suicidal Ideation

Interpersonal models of suicide may give a structure to understanding the relationship between social anxiety and increased risk for suicidal thoughts and behaviour. As indicated by Joiner's Interpersonal Theory of Suicide, two components are thought to contribute to the desire for suicide; frustrated on-going and saw harshness, while a third variable called the gained capacity for suicide is involved in suicidal behaviour. Perceived burdensomeness, over includes a belief such one's reality has turned into a burden to loved ones (Joiner, 2005).

Depression Defined

Depression is a most common and serious mood disorder and from a societal perceptive, it may be the most expensive. Depression is also very recurrent disorder with an increasingly more youthful time of onset for the initial episode. Depression concept started with a clear meaning of the type of depression in which they were

intrigued. There was apparently not any more essential factor of depression research than to characterize who is depressed and criteria behind it.

Depression as a Theoretical Construct: Depression is a construct that is the part of a more extensive class of mental thoughts. Ought to establish researchers choose that melancholy contains an alternate group of syndromes (e.g.; suicide ideation, as opposed to disgraceful mood, is the characterizing highlight of depression), the nature of depression itself would change, the attributes of individuals diagnosed with depression would be distinctive and epidemiological information on the predominance of depression would be changed (Ingram & Siegle, 2002).

Depression as a Clinical Syndrome: DSM-IV-TR is the way to deal with the psychological disorder; the disorder is perceived as discrete substances that happen autonomously of other discrete disorders, despite the fact that these other discrete disorders can also happen and offer ascent to co-morbidity. In this manner, depression is one of numerous particular classifies of disorder (Ingram & Siegle, 2002).

Types of Depression

There are several kinds of depressive disorders:

Major Depression: Severe side-effect that interferes with the capacity to work, eat, study, sleep, and enjoy life. A scene can happen just once in an individual's lifetime but more frequently, an individual has no active scenes.

Persistent Depressive Disorder: A discouraged mindset that goes on for not less than 2 years. An individual determined to have the diligent depressive issue may have episode of actual depression alongside periods of less serious side effects, but side effects should keep going for a long time. A few types of depression are marginally extraordinary, or they may create under one of a kind condition. There are:

Psychotic Depression: It is occur when an individual has extreme discouragement in addition to some type of psychosis, for example, having aggravating false convictions or a break with reality (delusion), or hearing or seeing irritating things that others can't hear or see (hallucinations).

Postpartum Depression: It is more serious than the "baby sadness", that the number of women encounter in the wake of conceiving an offspring when hormonal and physical changes and the new duty of looking after an infant can be overpowering. It is evaluated that 10 to 15 percent of women encounter post birth anxiety in the wake of conceiving an offspring.

Seasonal Affective Disorder (SAD): It is portrayed by the beginning of sadness within the winter months, when there is less common sunshine. The depression normally boosts between spring and summer. Seasonal affective disorder might be adequately treated with light therapy, but almost 50% of those with SAD don't improve with light treatment alone. Antidepressant medication and psychotherapy can reduce SAD side effects, either alone or in the mix with light therapy (National Institute of Mental Health US, 2015).

Causes of Depression

Depression is more complicated. Depression is not recently the after-effects of chemical imbalance in the cerebrum, and it's not just cured with the medications. Specialists hoped that depression is caused by a blend of biological, psychological, and social factors.

In our modern society, dysfunctional behaviour, which now affects 10% to 25% of the Indian populace, could be an instance of depression, a psychotic illness, substance abuse or personality break down. The misery which constitutes almost 70%

of all psychological instability, has taken an alarming proportion, nudging the medical world alert (Mendonca, Prasad, & Ragunatha, 1993). The main motivation behind why it is more noticeable now is that the social structure has been changing and the atomic family can't give the help that the joint family could (Upmanyu, 1998).

In present, social encouraging group of people is lesser than it used to be. With rivalry turning into the principle and main thrust in this day and age, everybody is occupied with attempting to be one-up finished the other and endeavouring to keep a picture above water. This can wreak devastation in individual lives, particularly now, during a time of dissolved trust. With adapting abilities at a top-notch, stress, uneasiness, and gloom could be normal results. If not illuminated in time, the intensity might be exacerbated. One can talk a man out of general despondency by persistent tuning in, comprehension, and guidance, but sadness, the ailment, is not so natural to dispose of (cf. Sunday Magazine: The Indian Express, April 18, 1993).

Signs and Symptoms of Depression

Depression changes from individual to individual, but there are some common signs and symptoms. It is essential to recollect that these symptoms can be a part of life's typical lows; such as the feelings of helplessness and hopelessness, loss of interest and pleasure in hobbies and anger or irritability, loss of energy, activities, appetite or weight changes, sleep changes, self-loathing, concentration problems, unexplained aches and pains, reckless behaviour, etc. (National Institute of Mental Health U.S, 2015).

Impact of Depression on Suicidal Ideation

Mental disorder represents the most classification of inclining danger for suicide. The relative danger of suicide is exacerbated significantly among those with diagnosing

psychiatric syndromes when contrasted with those with diagnosing, with over 90% of suicides considered by psychological post-mortem examination having a reproductively analyzed mental disorder (Tanney, 2000). The danger of suicidal behaviour is personally attached to the depressive disorder. Suicide ideation or an attempt is one of the nine major criteria of depressive disorder. Indeed, 40% of clinically depressed patients over 17 years old have suicidal thoughts (Substance Abuse and Mental Health Services Administration, 2006). It has been proposed (Brent, 2007) that there was a direct association between a period of declining suicide rates, especially among juvenile, observed universally between 1995-2003 and contemporaneously increased rates of medicine in particular serotonin reuptake inhibitors (SSRIs).

Screening and Assessment of Depression

Primary care providers should screen all youth for depression by asking about key symptoms, including sad or irritable mood and anhedonia or the inability to experience pleasure and have fun. In youngsters, readily observable changes associated with an onset of depression might include deteriorating academic performance, weight or appetite loss or gain, social withdrawal, changes in sleep, increased defiance (related to irritability), and discontinuation of previously preferred activities. Teenagers with increased negative moods should be further assessed for changes in thinking to a more negative view of themselves, the world, and the future. Asking about suicidal ideation and screening for safety are also important parts of the interview.

The clinical presentation of depression in youth resembles that in adults with some differences stemming from developmental considerations. For instance, children are more likely than adults to exhibit mood liability or irritability and display indirect

or behavioural manifestations of disturbed moods, such as temper outbursts, somatic complaints, social withdrawal, or diminished frustration tolerance. They are less likely than adults to explicitly complain of feeling depressed and unlikely to exhibit melancholic symptoms, including depressed mood worse in the morning, early morning awakening, marked psychomotor retardation, significant weight loss, and excessive guilt.

Depression in youth may be accompanied by hallucinations or delusions, although rarely. Psychotic depression in children has been associated with a family history of bipolar and depression with psychotic features, more severe depression, greater long-term risk, resistance to antidepressants, and increased risk of future onset of bipolar disorder (Fombonne et al., 2001). Youth with a seasonal affective disorder (SAD) mainly have symptoms of depression during seasons with less daylight. Depression triggered by school stress should be differentiated from seasonal affective disorder because both usually coincide with the school calendar.

A diagnosis of a depressive disorder would be considered if the youth demonstrated markedly impaired functioning in social, academic, or family domains. Functionality can be readily and objectively assessed using the Children's Global Assessment Scale or Global Assessment of Functioning. Complaints of significant emotional distress in the child would also merit further investigation for depressive symptoms. Screening can be facilitated by using depressive symptom checklists derived from the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR) or The International Classification of Diseases, Tenth Revision (ICD-10), clinician-based instruments, or youth or parent self-reports. Examples of widely used and well-validated screening checklists include the Child

Depression Inventory, as well as the Reynold's Adolescent Depression Scale (American Academy of Child and Adolescent Psychiatry, 2007).

Youth does not always readily report on emotional or behavioural manifestations of psychiatric disorders. They might deny the existence of these symptoms or behaviours or simply have difficulty articulating their thoughts and feelings. The use of open-ended or indirect questions is recommended in paediatric interviews, as the information collected is likely to be more comprehensive and reliable. Direct or closed-ended questions tend to elicit more limited and potentially biased responses from children and teens, due to their leading nature and the tendency of youth to be suggestible. Collateral information from parents, alternative caregivers, and teachers is often essential for confirming or ruling out depression or other psychiatric or behavioural disorders. The onset and course of a mood disorder may be determined through the use of a mood diary or timeline, using significant life events as anchors. A mood timeline can enable the provider, child, and parents to identify environmental triggers, as well as co-morbid conditions (Cook, Peterson, & Sheldon, 2009).

Personality Defined

Personality is the particular characteristic of musings, emotions, and behaviour that make a person unique. Personality emerges from inside the individual and remains relentless throughout life. Allport (1937) fights that the psychology of personality can make these liabilities, which analysts have condensed which are as follows:

Develop general laws with reference to how an individual's uniqueness comes to fruition.

o   Predict a person's behaviour on the premise of his or her individual qualities.

o   Discover the distinctive individual's own perspective of who she or he is.

o   Discover the parts of the personality.

o   Discover the structure that holds those parts together.

o   Give preference to specific ideas e.g., self-image framework, attribute, a life history that perceive a person's independence.

o   Discover common traits.

o   Organize information with regards to the way of human nature.

o   Turn interpersonal impressions into more reliable learning. Adequately represent the person in science and give that individual regard.

Henry Murray and the Harvard Guidance Clinic (Murray, 1938): "The man is today's great problem". What would we be able to think about him and how might it say in words that have a clear meaning? The perspective embraced in his book is that personalities constitute the topic of psychology, the life history of a single person being the unit with which this discipline has to deal (Murray, 1938, p.3).

Theories of Personality

The examination of personality depends on the basic knowledge that all individuals are comparable in some ways, but different in others. For instance, all individuals learn, but individuals learn distinctive things, in various courses, and to various degrees. There has been a wide range of meanings of personality proposed. Most contemporary psychologist, however, would agree on the following definition:

Trait Theories

As indicated by the Diagnostic and Statistical Manual of the American Psychiatric Association (DSM-IV), personality traits are continuing examples of seeing, related with, and thinking about the environment and oneself that are displayed in an extensive variety of social and personal settings. The most widely spread models of

traits include three to five wide dimensions or components. All trait theories have no less than two dimensions, extraversion, and neuroticism.

Raymond Cattell's research defined a two-layered personality structure with sixteen "primary factor" (16 Personality variables) and five "secondary factors." For Cattell, personality itself was characterized as far as behavioural forecast. He characterized personality as that which allows an expectation of what a person will do in a given situation.

Hans Eysenck accepted only three traits extraversion, neuroticism, and psychotics were adequate to depict human personality. Differences amongst Cattell and Eysenck rose because of inclinations for various types of factor investigation, with Cattell utilizing oblique, Eysenck's orthogonal revolution to examine the variables that rose when personality questionnaires were subject to factual analysis. Today, the Big Five variables have the heaviness of a lot of observational research behind them, increasing the work of Cattell and others. Eysenck, along with another contemporary in attribute psychology named J. P. Guilford (1959), believed that the resultant trait factors obtained from factor investigation should be statistically independent of each other that is, the factors need to be organized (rotated) so that they are unrelated or orthogonal (at right angles) to each other.

Goldberg (1993) proposed a five-measurement personality to demonstrate, nicknamed the "Big Five":

o **Openness to Experience:** the tendency to be creative, autonomous, and inspired by interested versus practical, adjusting, and inspired by schedule.

o **Conscientiousness:** the tendency to be composed, careful, and trained versus muddled, reckless, and imprudent.

o **Extraversion:** the tendency to be agreeable, carefree, and loving versus resigning, dismal, and reserved.

o **Agreeableness:** the tendency to be kind-hearted hoping, and accommodating versus ruthless, suspicious, and uncooperative.

o **Neuroticism:** the tendency to be quiet, secure, and self-satisfied versus on edge, insecure, and self-indulging.

Eysenck's Hypothesis

Eysenck (1967) described extraversion and introversion as the degree an individual is cordial and interactive with different people. These activity differences are ventured to be the consequence of basic differences in brain physiology. Extrovert individuals search for excitement and social action with an end goal to extend their arousal level, whereas introvert individuals have a tendency to avoid social circumstances with an end goal to stay such arousal to a base. Eysenck assigned extraversion as one of three noteworthy traits in his P-E-N model of personality, which also include psychotic and neuroticism. Eysenck initially proposed that extraversion was a blend of two major tendencies, lack of impulsiveness and sociability. He later included some more particular traits, to be specific traits, activity level, and excitability. These characteristics are personality connection in the personality order to considerably more particular frequent reactions, for example, partying in the weekend. Eysenck compared this attribute with the four temperaments of ancient medication, with choleric and sanguine dispositions comparing to extraversion, and melancholic and impassive personalities comparing to introversion. Twin reviews find that extraversion or introversion has a hereditary segment.

Extraversion: Extraversion (E) is "the act, state, or habit of being transcendently worried about and getting satisfaction from what is outside the self". Extroverts have a tendency to appreciate human collaborations and to be eager, talkative, confident, and gregarious. They take pleasure in activities that include large get-togethers, for example, parties, group activities, public demonstration, and business or political groups. Politics, educating, deals, overseeing and handling are fields that favour extroversion. An extrovert individual is probably going to appreciate time went through with individuals and find less reward in time spent through alone. They have a tendency to be energised around other individuals, and they are more inclined to fatigue when they are by themselves.

Introversion: Introversion (I) is "the state of or propensity toward being completely or overwhelmingly worried with and inspired by one's own mental life". Some prominent writers have portrayed introvert as individuals whose vitality has a tendency to extend through reflection and diminish in an association. This is like Jung's view, despite the fact that he concentrated on psychic vitality as opposed to physical vitality. A couple of current originations make this distinction.

Neuroticism: It is one of the fundamental personality characteristic that has the tendency to persistently experience negative emotional states. Individuals who score high on neuroticism are more plausible than the average as they experience emotions such as guilty, depressed mood, anxiety, anger, and loathe. They respond more inadequately to ecological stress, and will probably interpret conventional situations as threatening, and minor disappointments as hopefully difficult. They are regularly self-conscious and shy, and they may experience difficulty controlling urges and delaying gratifications. Neuroticism is a risk factor for the "internalizing" mental

disorders, as an example, depression, and different mental disorder, and panic disorder, phobia.

Psychoticism: Psychoticism (P) is associated not solely with the liability to possess a psychotic episode (or split up reality), however, also with aggression. While not more research has been done on psychoticism than on neuroticism and extraversion, previous research has indicated that psychoticism contains a robust genetic component. Eysenck (1982) describes that the high scorers of "P" as emotionless, egocentric and uncommon, impulsive, suspicious, hostile, aggressive, and disruptive. Lower scorer of P (in the direction of superego function) tends to be empathic, caring, cooperative and highly socialized. These different personality dimensions extraversion, neuroticism, and psychoticism, in different combinations, lead to the perception of similar social situations from the different perspective. Hence it is individual's way of perception through conditioning of social situations those determine their adjustment patterns.

The Role of Personality in Suicide

One way suicide has been conceptualized is, in essence, as a solution to a problem; regardless of whether the problem is the frustration of interpersonal (Joiner, 2005) or accomplishment related necessities (Baumeister, 1990), insufferable psychic anguish (Shneidman, 1996), or loss of identity-rationality (Maltsberger, 2004). Baechler (2001) has even gone so far as to express that "it is not the act, which is just the solution, but the problem is pathological". All theorists in the field of suicidality agree that suicide serves the specific capacity of conveying to end situations that turned out to be intolerable for the person. Different theorists recommend that a continuous contraction of the cognitive field because of overpowering negative influence leaves

the casualty feeling persuaded that ending their life is the best way to determine the problem (Baumeister, 1990; Shneidman, 1996).

From this point of view, what is most prominent interest for the investigation of the development of suicidality is "the issue", or the wellspring of the individual's anguish or trouble, which conveys such a high level of subjective significance that the individual will take part in absolute self-destruction to "resolve" the issue. The issue in this sense likely emerges from a devastating disturbance of conditions within the suicidal individual's life that are of high personal silent nature because of the individual's lived encounters, instead of reflecting annoying situations that are more broad or indifferent in nature (Pompili, 2010).

Personality Centered Models of Suicidal Behaviour

The idea that suicide emerges in the response to problems of high individual importance resonates with models of suicidal crises that emphasizes the part of impeded psychological needs in the development of suicidality. Shneidman (1996) argued that the desire for death emerges in conditions where essential subjective psychological needs are disappointed, bringing about a condition of serious pessimistic affectivity called "psychache". Shneidman's theoretical point of view is firmly associated with the conceptualization of suicide as a reaction to a specific issue; an issue that is specific to the individual's exceptional general personality pattern, and which fills in as an essential organizing force. Shneidman's personality-based approach exists that have yielded exact support for the association between personality association and risk for suicidal behaviour (Berman, 2007).

Family Environment Defined

Family plays an important role in the overall development and well-being of its members. The Family is the first to affect the individual. It is the family which gives the child his first experience of living. The influence of the family on the child is therefore immense. Parents are responsible for shaping the personality of their child. If there are secure bonds between parents and their children, it allows them the freedom to grow, explore and gain experience. The influence of other agencies although important must build upon the groundwork furnished by the family (Bhatia & Chadha, 1993).

A family is the principal group of society which gives the regular habitat to the development and prosperity to every individual, particularly child. Prior at one-time family was characterized as the gathering of individuals made out of a man (the provider) and a woman (the home-produced and parental figure) who were tied in marriage and the children that this specific couple had brought into the world. This conventional family was viewed as the core of a steady society and thought to be the basic setting for raising balanced children. As indicated (Burgess & Locke, 1953; Mitchell, 1968), a family is a group of people joined by the ties of marriage, blood or adoption constituting a strong family unit, interfacing and intercommunicating with each other in their separate social role, mother, and father, child and girl, brother and sister, making and keeping up a typical culture.

Family Type

Family structure has drastically changed in last fifty years. Late marriage results in late birth of the child and in this way, there is less availability of parents for their child and in this way an era gap develops. Because this era is the era of absence of

availability of parents for adolescents, adolescents are more connected with different angles rather than guardians, for example, the web, mass communications i.e. TV, mobile, magazines and so on. Family as an essential foundation, has survived through ages, however, has changed radically throughout the years in its structure, capacities, and attributes, particularly in India. This adjustment in Indian family setup can be ascribed to monetary components (industrialization, urbanization and versatility) or cultural elements (development of demographic standards, the decrease of religious universality and so forth.).

Parental Factors Affecting Parent-Child Relationship

Family conflict and disorders affecting relationship are the disagreement about child rearing as well as lack of discipline and planning. The parental control is too tight. Overprotection is a risk factor for childhood or adolescent anxiety. Marital conflict, separation or detachment has a large portion of the negative impact which is caused by disturbance of child rearing. The emotional and social changes are enhanced for a child whose father takes an interest and assume a sustaining part of their childhood. Father's contribution is related to positive intellectual, formative and socio-behavioural growth of the child. Young offspring of discouraged mothers have a raised danger of behavioural, developmental and emotional issues due to maternal depression. Recent research found that discouraged kids who are children of discouraged parents may be at particular hazard for the deficits of depression, for instance, smoking, drinking, physical dysfunction, nervousness, psychiatric related issues and financial issue. Furthermore, with parents' physical disease, alcoholic parents, substance abuse, and parental maladjustment, remarriage or stepfamilies, children will have many risk issues (Greszta, 2006; Marianne et al., 2016).

Family Attachment Process

The family background incorporates the situations and social environment conditions inside families. Since every family is contained different individuals in a substitute set, every family condition is different. The family environments can fluctuate from numerous perspectives. Child rearing practice incorporates the security and trade of imperatives, information and social status to children. Natural determination has regulated the components that serve these ends for the particular demands of every species 'environment' (e.g., Clutton-Brock, 1991). The child-rearing attitudes or parental behaviour might be discussed in many different of dimensions, such as acceptance, friendship control, warmth, leniency, limitation, and demandingness. Commonly warmth and control are thought to be the most imperative routes in which parents impact the advancement of their posterity or children's (Maccoby & Martin, 1986).

Baumrind (1967) attempted to conceptualize three worldwide styles of parenting. As per her, authoritarian parents were the individuals who had strict thoughts regarding order and behaviour which were not open to discussion. They attempted to shape, control and assess the behaviour and attitudes of their children as per demand principles. They underlined obedience and respect for authority, work convention and the protection of order. Verbal give and take among parents and child were debilitated. Authoritative parents were the individuals who have thoughts regarding behaviour and discipline which they were ready to clarify and talk about with children. Parents expected to matured behaviour from their youngsters. Authoritative guardians were likewise warm and strong. They expect suitable behaviour. They empowered in directional communication and verbal give and take. Permissive guardians were the individuals who had relaxed thoughts regarding

behaviour and discipline, who were tolerant, who once in a while utilized discipline and attempted to punish from utilizing confinement and control whenever possible. As indicated by Casey, Bradley, Nelson and Whaley (1988), home environment had been distinguished similar to a contributing variable in a child's education, cognitive, and full of feeling advancement.

Effect of Family Environment on Depression

Poor family relationships are psychological hazards at any age, particularly during adolescence because that time both boys and girls experience physical changes and it relies on upon their families to give them the feeling of security. Conducive family environment is even more essential as they require direction and help in facing the developmental assignment of an adolescent. At the point when family relationships are set apart by rubbing, feeling of insecurity, adolescent will be denied the chance to create balance and more develop a pattern of behaviour (Hurlock, 1981). A few types of researches have demonstrated that insecure attachment and parenting portrayed by coldness, dismissal, cruel teach and unsupportive behaviour is decidedly identified with juvenile depressive manifestations. The perception of a family environment is a significant indicator of depression among adolescents. Family disruption, strife, lack of control, lack of attachment and expressiveness have been seen as the common factors for the family functioning of children which predict depression (Campbell et al., 1993; Schwartz et al., 2012).

Effect of Family Environment on Suicidal Ideation

The family environment is an essential factor while breaking down the possible systems that prompt the development of suicidal behaviour. Strain and family conflict are identified as risk factors for suicidal behaviour in children. At the point when view

of family environment has additionally been studied, family disruption, lack of control, and conflict, attachment, and expressiveness have been seen as basic factors the family functioning of children who develop suicidal behaviour (Asarnow, 1992; Campbell, Milling, Laughlin, & Bush, 1993). In the past, research on the relationship between family functioning and adolescent suicidal ideation were obscure.

Suicidal Ideation among College Students

National consideration regarding the problem of suicide among college students has been growing steadily. Currently, attempts by mental health experts to anticipate suicides and to report individuals to their pre-morbid conditions are based largely on research that has analyzed the part of different factors in suicide attempts or completion. Since these are generally low frequency situation, it is both unseemly to concentrate exclusively on components related to these results and almost difficult to reach significant inferences about helping suicidal students (Haas, Hendin, & Mann, 2003). Besides, the confined extent of this research adds impossibility on helping the individuals who are in emergency as opposed to centering attempts around keeping individuals from entering and advancing along a continuum of suicidality. Scenes of suicidal thoughts and behaviour change over many components, including duration, power, recurrence, related mood states, thought of strategies, correspondence of hopelessness, and help seeking behaviour. This review gives depth examination of the whole suicidal continuum, from passive suicidal thinking to different attempts. The knowledge in this way produced another world view for conceptualizing the issue of student's suicidality. Their proposed world view is problem centered in that it characterizes suicidality in the populace as the problem to be tended to instead of concentrating exclusively on suicidal people. Moreover, the problem centered world view both encompasses and expand the method of treating people in an emergency

with a specific end goal to diminish both predominance and rate of all types of suicidality among college students.

Gender Differences in Suicidal Ideation

The suicidal behaviour in elderly, women and adolescents are different from the other age groups or moderately aged men. Suicide will probably be missed in elderly and children because of their circuitous strategies for communication with respect to the suicide plan. Children are especially influenced by the media and suicide. Women suicide attempt to completion rate is significantly higher than elderly, in whom attempts to completion rate is low. Lethality of techniques utilized by individuals in India, particularly women, and elderly is high (Garg, &Trivedi, 2007).

Female suicide attempters were more than male suicide attempters and the rate of suicide attempts were frequent and high for females. The most successive purpose of attempting suicide was diverse amongst females and males. Attempted suicide is a risk factor for suicide at a later date, the ramifications of these gender differences for clinical practice must be contemplated while confining measures for suicide anticipation (Singh et al., 2016).

Suicidal Ideation by Age

In India, suicide is a second driving reason for death in both men and women in the 15-29 ages bunches (Patel et al., 2012). The fact is that 71% of suicides in India are by people below the age of 44 years, forcing a gigantic social, emotional and economic burden on our society (National Crime Records Bureau, 2005). The male: the female proportion of 1.4: 1 means that more Indian women die by suicide than their Western counterpart (Mayer, & Ziaian, 2002). Suicide rates vary among women by age. Joseph and associates reported that most women who conferred suicide were

between 15-24 years or older than 65 years and discovered more suicides among women (102/278) than among men (58/331) in 15-24 years age bunch. In a review done at eight different sites, it was observed that there were more female suicide attempters than male at the emergency care department running from 51.3% (Chennai) to 71.2% (Durban) and furthermore, a large part of the females was in the age group of 14-19 years. Srivastava and associates revealed that most extreme females who attempted suicide were in age group of 14-19 years and males were in the age group of 25-29 years (Srivastava, Sahoo, Ghotekar, Dutta, & Danabalan, 2004).

The National Crime Records Bureau reported in 2009 a similar suicide pattern (Accidental Deaths and Suicides in India, 2007). Other studies in India conjointly indicate that young adults are at magnified risk of suicide, with ages 20-24 years followed by 25-29 years showing the highest rates of suicide in a psychological autopsy study (Khan, Anand, Devi & Murthy, 2005).

Warning Signs of Acute Risk Factors for Suicidal Ideation

Anxiety: Symptoms include extreme tension fomentation or sleep deprivation. Emotional turmoil and insomnia are symptoms of both anxiety and mood disorder strongly related to cognitive confusion and poor controls of emotions and behaviour (Fawcett et al., 1990).

Anger: Anger/aggression range or looking for revenge, the signals and potential for violent behaviour and impulsive acts seen and has been loved as responsive hostility to suicidal acts (Conner, Duberstein, Conwell, & Caine, 2003).

Hopelessness: One of the continuing discoveries in the suicidality literature is the importance of hopelessness as the best clinical indicator of suicide among

depressed patients. Hopelessness is one of the chronic and acute risk factors for suicide show itself clinically in its relation both to suicide ideation even without depression and to feeling caught (Elliott & Frude, 2001).

Ideation: Suicide ideation is a significant forerunner to suicidal behaviour particularly if suicidal thought is persevering and interfering prompt to arranging and is related to intent. Ideation might be expressed verbally through dangers in composed form or it might be converted into behaviour, for example, searching for a way to kill oneself (Busch, Fawcett, & Jacobs, 2003).

Mood: Mood changes or state of mind cycling is one of the symptoms related with short term risk which many also indicate the intensifying of a mood or other disorder (Cavanaugh, Owens, & Johnstone, 2002).

Purposelessness: Seeing no reason for living or having no sense of reason in life is a risk factor. Suicidal individuals have low self-esteem and purposes behind for dying many overpower explanations behind living. Suicidal individuals additionally perceive a sense of difficulty (Joiner, 2005).

Recklessness: Suicidal behaviour is strongly identified with other risk taking and life-threatening behaviour signalling carelessness for oneself and a detached wish to give destiny a chance to choose whether one lives or passes on. Sudden and sensational changes in behaviour toward less self-care and self-respect signal potential danger.

Substance Use: Increasing or excessive substance use, particularly in conjunction with scenes of depression, is common. Alcohol inebriation is common at the time of the suicidal act encourages suicidal behaviour by decreasing hindrances, increasing impulsivity and so on (Bartels et al., 2002).

Tapped: There is no chance to get out if feelings get trapped. Suicidal individuals ponder themselves and their reality. Their cognition is constricted and they turn out to be less versatile in their critical thinking, dissolving into apparently high contrast decisions as though they are tapped and suicide is the main escape from their psychic pain (Ellis, 2006).

Withdrawn: Friends are made and regular activities occur on different social situations of the society. Due to suicide ideation, there would be serious anhedonia, lost joy or pleasure; show itself in behavioural shirking of common and managing relationships at work, schools, friends, and hobbies.

Research Accumulated

Chapter: I: Theoretical Background of the Study

Chapter-I covered introduction, meaning, definition, signs and symptoms, theories, and importance of suicidal ideation; hopelessness; loneliness; depression; personality and family environment dimensions; suicidal ideation of college students; history of suicidal ideation; suicidal impact and overview of the cheater.

Chapter: II: Review of Related Literature

Chapter II will include reviews of related literature of suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality and family environment, gender differences in suicidal ideation as well as overview of the chapter.

Chapter: III: Methodology and Design of the study

Chapter III will include problems of research, objectives, hypotheses, variables, research design, sample, tools, data collection methods, statistical techniques and conclusion of the chapter.

Chapter: IV: Data Analysis, Results, Discussion and Interpretation

Chapter IV will include results, discussion and interpretation of suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality and family environment, as well as overview of the chapter.

Chapter: V: Main Findings of Research, Conclusion, Implications, Limitations, and Suggestions for future Research

Chapter V will include main findings and conclusions of research work, limitations of research, chapter summary and suggestions for future research.

Review of Related Literature

The essence of any research should be closely connected with the work exclusively conducted in the area in order to meet a general significance and purpose. The reviews of literature in this way formulate a kind of bridge between the research proposed and the studies formally done. This gives a kind of insight to the researcher regarding works done in the area and consequently familiarises him/her to the unearth area in the field. The works which have been now developed or finished up by various researchers and furthermore allows to the researcher to value the proof that has already been collected by previous research works, leading to covers the flow of research about selected work in the correct perspective.

A large part of the review of literature must entirely to be done even before the research project is formalised. This is basic research method to ascertain that no one has carried out similar research work officially, in the select field of study. In some cases, if the research proposed by the one has been comprised before, then it gives a choice of modifying one's work by including another point of view or modifying a portion of the strategies for research in order to get a viewpoint that will be not the same as prior works and in this way the select work would be more useful.

So often, one's work might be same repetition of the work done before, however, with an alternate arrangement of information or sources of truths and reason for the research may simply be checking whether one's outcomes are like prior works or something else.

A decent researcher witnesses thoroughly sufficient portion of literatures that are existing in select area of study. This is because of various literature may have varying significance for the present endeavour and every last bit of it may not worth

detailing at last, but rather in the primary stage, when someone searching for all parts of a problem that could be important one might want to broadly investigate the literature and check whether any pertinent discoveries are as of now accessible. A portion of the literature surveyed is straightforwardly significant and henceforth utilized as an introduction to clarify the groundwork or background of work. At that point, different reports might be pertinent from the perspective of the project as they give a few insights to the field by proposing a hypothesis, which might be the topic of the research.

Ultimately, the review of literature is additionally imperative to highlight distinction in opinions, conflicting discoveries or confirm, and the diverse clarifications given for their decisions and contracts by various writers. Now and again, an investigation of these elements can help one to comprehend numerous aspects of a perplexing issue and at different circumstances; such research can prompt to another probability that can be inquired about upon in the present research. In this way survey of literature is an essential section of one's research.

Best (1977) exclusively mentions these issues when he says, "practically all human knowledge can be found in books and libraries. Unlike different animals that have to begin a new with every generation, man builds upon the accumulated and recorded data of the past. His constant adding to the large store of information makes possible progress altogether area of human endeavour".

Areas of the Chapter

The entire part has been grouped into six wide areas; Suicidal Ideation, Hopelessness, Loneliness, Depression, Personality, and Family Environment. Under these areas

researches related to each construct and their related other variables have been highlighted independently.

Gender Differences in Suicide Ideation

Canetto (1992) conducted a study on gender difference on suicidal ideation in North America. He found that gender was an essential indicator of suicide in the elderly. In North America, older women were less liked to be suicidal than older men. Until now, sociologists have either ignored gender differences or have focused on the assumed reasons for older men suicidal behaviour. He furthermore reported that older women had low rates of suicidal mortality.

Chatterjee and Basu (2010) researched the intrinsic and extrinsic components that could bring out suicidal ideation among female college students. Findings uncovered that around 12.5% of the college students had high suicidal ideation. Reasons behind living (aggregate score) have been found to have negative but significant relation was found on suicidal thought. Concern for future and moral protests is observed to be strongly and negatively identified with suicidal thought.

Colucci and Montesinos (2013) reviewed few researches to discover suicide and domestic violence among ethnic minorities, foreigners and displaced people relationship in women. Results found the higher danger of being a casualty of viciousness, extra types of violence (i.e., migration related manhandle), and more noteworthy boundaries to looking for help, add to make women from settler and exile foundations especially defenceless against suicidal behaviour. While violence against women was broadly perceived as a significant worldwide issue, a noteworthy general medical problem and a standout amongst the most far-reaching violation of human

rights, suicidal behaviour among migrant women has gotten constrained fact oration as a general wellbeing concern and even less as a human/women's rights issue.

Hamilton and Klimes-Dougan (2015) did a review to defeat how the potential gender bias predisposition in suicide ideation techniques may convert into youth suicide prevention efforts. Their outcomes suggested that element programming impacted for both males and females were provocative. They proposed that when gender differences were significant, in all cases, females appear to be more probable than males to profit by existed prevention programmed.

Kanchan, Menon, and Menezes (2008) did a study to distinguish the favoured strategies in acknowledged suicides among male and females in the west seaside district of India. During the review time frame, an aggregate of 539 instances of suicidal deaths was autopsied. Male participants were overwhelmingly influenced (male: female-1.9:1). The age of the casualties ranged from 13 to 90 years in male (mean = 40.1 years, middle = 37.0 years) and 15 to 85 years in females (mean = 36.6 years, middle = 32.0 years). Most supported method for suicide among male and females was hanging (36.9%, n = 199) trailed by poisoning (34.7%, n = 187). Male predominance was clear for every technique for suicide apart from self-immolation. Males were moderately more prone to utilize hanging and poisoning while females probably leaned toward suffocating and self-immolation as techniques for suicide. Generally, more adolescent females (mean = 33.0 years, middle = 32.0 years) favoured hanging as a strategy for suicide when contrasted with males (mean = 42.4 years, middle = 40.0 years). Among females, essentially more adolescent females depended on hanging when contrasted with older females who favoured suffocating. On researching the different hypotheses proposed for decision of suicide techniques in males and females in various locales, they inferred that inclination of strategy for

suicide in males and females is impressively decided. In this area, accessibility, availability, ubiquity, and socio-worthiness appeared to be the real determinants in the selection of strategies among males and females instead of viciousness related and lethality of the technique.

Khokher and Khan (2005) did a study on the prevalence of suicidal ideation among Pakistani college students. Results demonstrated that the general rate of suicidal ideation was 31.4%. Though there was no significant contrast between genders, more females (33%) than male college students (29.2%) reacted emphatically to suicidal ideation. Results also indicated that respondents who were from single-parent families and living at home, contrasted with those live in the hostel, as respondents from single parent families reported higher rate of suicidal ideation.

Kirchner, Frrer, Forms, and Zanini (2011) have reviewed researches between intents of think self-harm in suicidal symptoms and suicidal ideation among a general adolescent populace as per gender. Outcomes demonstrated that the pervasiveness of self-mischief behaviour was 11.4% and the one for the suicidal ideation was 12.5% that was as per the literature. Though no gender differences were found, however, there was an expanded with age in both types of dangerous behaviour. Results also discovered significant relationship between the thought of self-hurt and suicidal ideation. They also demonstrated that the self-hurting behaviour was ten-times more likely to happen among the young adolescents with suicidal ideation than in the adolescents without such ideation.

Mendez-Bustos, Lopez-Castroman, Bca-Garcia, and Ceverino (2013) examined the development of female suicidal rates from childhood to old age, factoring the points of reference in their life history. Results showed that women

commit fewer suicides than men but make more incessant attempts. However, female suicidal threat shifts enormously along the lifetime and is connected to the most significant moments. A detailed investigation of gender differences in suicidal behaviour would help in setting up preventive measures and needs.

Mihandoost (2013) did a meta-analysis of suicide rates in male and female suicide in Iran from 2000 to 2012. The results showed that suicide was related with family issues, financial issues, full of feeling contributions, and psychological disorders. Likewise, his review demonstrated that the rate of suicide in females was higher than in males which are opposite to that in other parts of the world.

Muelle, James, Abrutyn, and Levin (2015) examined on large sample of 75,344 to evaluate race or ethnicity, gender, and sexual orientation change in being harassed and weakness to suicide ideation among adolescents. They broke down pooled data from the 2009 and 2011 of Youth Risk Behaviour Surveys. The result comes about White and Hispanic gay and bisexual male, White lesbian and bisexual females and Hispanic bisexual females will probably be pained than were White hetero adolescents. Dark lesbian, gay, and androgynous young people's defencelessness to being harassed was not essentially unique in relation to that of White heterosexual adolescents. Black and Hispanic heterosexual young people were more significant to be pained than were White hetero adolescents. Apart from differences in the probability of being harassed, gender minority youth will probably report suicide ideation, paying little mind to their race or ethnicity, their gender, or whether they have been pained.

Palmier (2011) analyzed the prevalence and correlates of suicidal ideation amongst adolescent males and females in Botswana, Kenya, Tanzania, Uganda and Zambia, all sub-Saharan African nations. The outcomes indicated inconstancy in the

predominance of suicidal ideation over these African nations. Zambia had the most significant prevalence of suicidal ideation (31.9%) among all college students, trailed by Kenya (27.9%), Botswana (23.1%), Uganda (19.6%) and Tanzania (11.2%). Hopelessness and isolation feeling was the most usually related with suicidal ideation among college students over these sub-Saharan nations. Sadness was significantly connected with suicidal ideation in Kenya, Tanzania, and Uganda. Sadness remained significantly related among young males and females in Kenya, Tanzania, and Uganda. All hazard variables, with the exception of 'had no close friends' were the indicators of suicidal ideation in among male and female college students.

Gonzalez-Rodriguez et al. (2014) researched on gender differences in age at onset, psychopathology, and suicidal behaviour rates in patients diagnosed with delusional disorder. Results demonstrated 76% of the patients were women. The average age at onset was 48.76±12.67 years, mean age at first psychiatric counsel was 54.13±13.67 years, and men were probably utilized than women (p =0.041). There was no significant gender differences in depressive co-morbidity, the presence of suicidal ideation and behaviour, or consistency rates at followed.

Upadhaya and Singh (2006) did a similar study to know the differences amongst male and female adolescents on suicidal ideation. Results suggested that male of all the age groups conferred suicide at a higher rate than females in spite of the fact that females attempted suicide more frequently than male. Contemplate uncovered that male adolescents have scored significantly higher on the measures of suicidal ideation, and they had more mental exhaustion on the psychopathologic deviation. Moreover, there were significant gender differences in the measure of suicide ideation.

Hopelessness and Suicidal Ideation

Abdollahi and Abu (2015) studied on hardiness, spirituality, and self-destructive ideation within 450 in-patients those patients were looking for treatment from 10 distinctive addicted treatment centres in Iran with substance abuse and the moderating role of gender and marital status. Results showed that spirituality and hardiness were positively associated with each other whereas they were negatively associated with suicidal ideation. This suggested 46% of the variance in suicidal ideation. This suggests that those with low levels of spirituality and low levels of hardiness were more likely to report suicide ideation. Greater hardiness predicted a less likelihood of suicidal ideation for male participants, but not for females.

Britton et al. (2008) tried the theory that purposes behind living (RFL) were contrarily related with suicide ideation on the sample consisted of 125 adults 50 years or older receiving treatment for a mood disorder. Findings of discovered patients who revealed more elevated rates of fear of suicide were less inclined to report suicide ideation. The relationship amongst hopelessness and both the nearness and seriousness of suicide ideation were more grounded among the individuals who announced more prominent levels of responsibility to family.

Chang (2017) conducted a study among 395 Hungarian college students to find out whether or not hopelessness and dispositional hope predict suicide ideation. An unambiguous prediction of suicide ideation was observed in both hopelessness and hope without any change in pattern even when psychological symptoms were controlled. Moreover, a significant interaction was found among hopelessness, and hope predicted suicide ideation among college students.

Collins and Cutcliffe (2003) provided details regarding how the remedial relationship can be improved by using a cognitive behavioural approach when managing hopelessness in suicidal individuals. Discoveries explain the key components/intercessions which incorporated the remedial relationship and particular cognitive-behavioural systems that the attendant advisor may use when attempted to enhance the clients feeling of hopelessness. These key components/intercessions are further explained upon. While cognitive behavioural systems were appeared to be advantageous when managing with hopelessness, it was pushed that the restorative relationship was essential for successful treatment.

Heisel, Flett, and Hewitt (2003) examined the relationship between suicide ideation and various predictive psychological factors on college student suicidality. They gave specific attention to social hopelessness, an interpersonal form of hopelessness, in the prediction of suicidality. The samples of 143 college students were measured of suicide ideation, daily stress, depression, general hopelessness, and social hopelessness. Results demonstrated that suicide ideation was associated significantly with daily stress, depression, general hopelessness, and social hopelessness.

Izci et al. (2015) explored a study in patients with and without of alexithymia in suicidal ideation, suicide attempt and hopelessness levels in major depressive disorder. The results suggested that there was no significant distinction as far as socio statistic information (aside from the marital status) between major depressive patients with or without alexithymia and healthy controls is concerned. As indicated by a cut-off purpose of 61 for TAS-20, 34.3% (n=34) of the patient group was alexithymic and 65.7% (n=65) was non-alexithymic. The rate of suicide attempt was higher in the alexithymic major depressive patients (67.6%) than the non-alexithymic major

depressive patients (29.2%). The mean scores of SSI and BHS were higher in alexithymic patients than non-alexithymic patients. There was a positive association between TAS-1 (trouble distinctive feeling), TAS-2 (trouble communicating feelings) and hopelessness, suicidal ideation scores.

Khan (2011) research had intended to analyse the part of depression and hopelessness in suicide ideation on 100 male and 100 females in the age scope of 15-17 years completed, tools used to collect data were Beck's Suicide Ideation Scale, Beck's Depression Inventory, and Beck's Hopelessness Scale. The findings suggested that deliberate of suicide ideation, depression, and hopelessness were correlated. And also the review uncovered that suicide ideation corresponded with depression (r = .48).

Khan, Mustaffa, Hamdan, and Ahmad (2014) reviewed to identified the factors on different psychological variables i.e., academic stress, depression, negative impacts, hopelessness and suicide ideation among Malaysian and Indian adolescents. The results indicated significant difference on variables of hopelessness, negative effects, depression, academic stress and suicide ideation between Indian and Malaysian adolescents.

Kwok and Shek (2010) based a research on Chinese secondary college students in Hong Kong, to perceived relationships among hopelessness, family functioning, and suicidal ideation was analyzed. Outcomes demonstrated that suicidal ideation was positively identified with hopelessness, but contrarily identified with parent-adolescent communication. Contrasted and father-adolescent communication, mother-adolescent communication, for the most part, had a more grounded relationship with adolescent suicidal ideation. It was further found that the linkage

amongst hopelessness and adolescent suicidal ideation was more grounded in a low parent-adolescent correspondence condition.

Lamis and Lester (2012) analyzed the distinctions in hazard elements of suicidal ideation between 99 African American and 529 European American college women (18-24 years of age). The main significant contrast that was accounted for between the two groups of women was of hopelessness, with African American women having lower hopelessness scores. In various levelled regression analysis, accounted for hopelessness, depressed, and perceived helplessness, however not obstructed belongingness, significantly anticipated suicidal ideation in college women. Besides, race directed the relationship amongst hopelessness and suicidal ideation with the end goal that hopelessness was a more grounded indicator for African American women than it was for European American women. Race likewise directed the depression suicidal ideation relationship, with hopelessness rising as a more grounded indicator of suicidal ideation for European American than for African American women.

Lamis, Ballard and Patel (2014) examined the potential to see variations within the overall expression of suicide disposition among Japanese college students. The sample of Japanese (n = 396) as compared with U.S. (n = 417) of hopelessness and suicide disposition in both college students. Their research findings reported that Japanese students were more suicide disposition, higher hopelessness, and higher levels of depressive symptoms than the U.S. students. Furthermore, the results also showed that in both US and Japanese culture, hopelessness and depressive symptoms were significantly related to suicide disposition. Additionally, the hopelessness and suicide proneness link was significantly mediated by depressive symptoms in both samples.

Mascaro and Rosen (2005) studied on college students to find out implicit and explicit meanings of life predicted level of hope and depression symptoms. They confirmed that existential meaning has a unique relationship and future can predict levels of hope and depression symptoms within the college students. Implicit and explicit meaning was related to decrease of the depressive symptoms and increase the levels of trait hope and state hope.

Mascaro and Rosen (2006) also confirmed that a sense of existential meaning as buffers against the effect of stress on depression and hope among college students. Similar result was found in **Steger et al. (2006)** studies on among the relationship between meaning in life and other well-being measures and results of the studies reveal that presence of meaning in life is positively correlated with life satisfaction, love, joy but search for meaning in life is positively correlated with fear, sadness, depression among college students.

Mehrotra (1998b) focused on assessing the role of trait hope, reasons for living and social desirability apart from depression and state hope in prediction of suicidal ideations in a nonclinical sample. Results indicated that current as well as past ideators had weaker repertoires of reasons for living compared to non-ideators. Depression and reasons for living predicted 42% of the variance in current suicidal ideations in males, whereas trait hope and social desirability accounted for 32% of the total variance in current ideations in females.

Morano, Cisler, and Lemerond (1993) contemplated on a 20 juvenile unaffected suicide attempters and 20 non-attempters coordinated on depression scores were taken some information about their apparent hopelessness, social support, and misfortune went before hospitalization. Attempters and non-attempters were comparative in psychiatric status, gender, age, race, and financial status. And

furthermore, information demonstrated that trouble and low family support were the best indicators of an adolescent's suicide attempt. Additionally, suicide attempters detailed more hopelessness than did non-attempters.

Noy, Kaigang, Xia, Nattiporn, and Bock-Hee (2008) did a study to evaluate the status of suicide behaviour and to look at the association between hopeless feelings, suicidal behaviour, and components of the Quality-of-Life-BREF tools among college students with the samples of 1,217 from Thailand, Korea and China. The result has shown the past twelve months of suicidal behaviour of Korean students were 3.7% Thai, 10% Chinese, and 13.2% exhibited. Most elements of the Quality-of-Life-BREF were significantly associated with hopelessness feelings among Chinese, Thai, and Korean students. Moreover, all the elements of quality life were significantly related to suicidal behaviour between Chinese, Thai, and Korean students except the part of psychological among Thai students.

Sil and Basu (2007) examined the role of hope, hopelessness and reasons for living in the development of suicidal ideation in college students. Significant relationships were found between trait hope, hopelessness, and different dimensions of reasons for living and suicidal ideation.

Stewart et al. (2005) researched a cross-sectional and longitudinal relationship between psychological factors, depressive symptoms and suicidal ideation in Hong Kong Chinese and Caucasian American adolescents. The result showed self-efficacy was a feeble interesting indicator of suicidal ideation in both societies. Hopelessness was the most grounded intellectual factors in a simultaneous relationship with suicidal ideation in bivariate and multivariate models, in both societies, and in both young boys and young girls. Hopelessness kept on offering one

of a kind forecast when depressive indications were controlled, both simultaneously and tentatively.

Sylvia, Kwok, and Shek (2008) studied the relationship among hopelessness, perceived family functioning, and suicidal ideation on 5,557 Chinese secondary college students in Hong Kong. The results of their study demonstrated that while hopelessness had a positive association with suicidal ideation; perceived worldwide family functioning had a negative association with suicidal ideation of Chinese adolescents. Suicidal ideation was correlated with the diverse measurements of family functioning, conflict and harmony, parental concern and parental control indicating more grounded prediction of adolescent suicidal ideation than commonality and communication. It was further observed that family functioning directed the relationship amongst hopelessness and adolescent suicidal ideation.

Thakur and Basu (2006) conducted a study which focuses on examining the role of reasons for living conceptualized as cognitive barriers and protective factors against suicidal ideation in 280 college students including males and females. Significant relations emerged between suicidal ideation and three dimensions of reasons for living, i.e., moral objection, college and future related concern and survival and coping belief.

Loneliness and Suicidal Ideation

Chang, Sanna, Hirsch, and Jeglic (2010) analyzed loneliness and negative life event as indicators of suicide hazard (viz., hopelessness and suicidal behaviour) in Hispanic grown-ups. Consistency with desires discovered depression and negative life experience to be decidedly connected with both hopelessness and suicidal behaviour. Also, consequences of led regression investigations demonstrated that loneliness

represented significant measures of fluctuation in both measures of suicide hazard, extending from 24% to 29% of the variance. The inclusion of negative life event as an indicator was found to represent a completely unique variance in hopelessness (3%), but not in suicidal behaviours, beyond what was predicted by loneliness. At long last, in each suicide risks measures through consistent with a diathesis-stretch model found to state an extra 3% of the variation in the association of loneliness and negative life.

Lamis, Ballard, and Patel (2014) conducted a study on risk factors of suicidal ideation on samples of 207 undergraduate drug-using university students. Results found that suicidal ideation was positively correlated with both loneliness and drug use. A significant mediated impact of loneliness on suicidal ideation through drug use indicated that loneliness contribute to suicidal ideation among college students through increased drug use.

Lasgaard, Goossens, and Elklit (2011) did a longitudinal investigation of the relationship between depression, depressive manifestations, and suicide ideation on 1009 high school adolescents. Results on cross-lagged structural equation modelling showed that depressive symptoms led to more loneliness over time, while loneliness did not predict higher level of depressive systems. Gender orientation did not predict loneliness, depressive symptoms or suicide ideation crosswise over time.

Maleka and Nafiza (2016) examined the connection between suicidal ideation and depression, loneliness, hopelessness among Dhaka University students. The study samples were comprised of 112 university students (51 males and 61 females). The obtained data were analyzed by using Pearson product moment correlation and stepwise multiple correlations. Results showed that suicidal ideation was positively correlated with depression, loneliness, and hopelessness. However,

loneliness, depression, and hopelessness significantly predicted suicidal ideation among university students after using stepwise multiple regression analysis.

Page et al. (2006) completed an investigation on suicide endeavors in three school-based examples of Southeast Asian young people (Taipei, Taiwan; Philippines; & Chiang Mai, Thailand). This study was done to measure if juvenile suicide attempters score higher on measures of misery and forlornness identified with non-attempters. The findings proposed that suicide attempters scored higher on despondency and depression than non-attempters over every one of the three examples and for the two sexes. However, the factual loneliness provably debilitated the relationship between suicide endeavor conduct and hopelessness over the samples and for every sexual orientation, and moreover results found in non-noteworthy ANCOVA tests for a couple of the samples gender groups.

Rani (2013) analyzed the relationship of suicidal ideation, depression, peer pressure and self-efficacy among young people. The finding uncovered that suicidal ideation in girls is adversely related to father bonding (r = - .287, p<.01), optimism level (r = - .185, p<.05), and decidedly related with scholastic stress (r = .295, p<.01) and peer pressure. The outcomes showed that suicidal ideation in young boys are adversely related with father holding (r = - .175, p<.01), hopeful level (r = - .284, p < .01), mother holding and decidedly related with scholastic stress (r= .414, p <.01), peer relations and suicidal ideation.

Sharma, Lee, and Nam (2017) examined whether or not being intimidated, fighting, and injury, regarded in terms of frequency and nature, were considerably related to psychological distress and suicidal behaviour, independent of drug abuse and parental support in adolescents. Secondary analysis of information from the world School-based Student Health Survey from Kiribati, and Vanuatu was conducted. The

sample size of the students were 4122 out of which 45.5% were male, and 52.0% were 14 years of age or younger. Results showed that out of the total sample, 9.3% felt lonely and 9.5% had sleep disorder most of the time over the last 12 months; 27.6% had unsafe ideation and 30.9% reported a minimum of one suicide attempt in their past 12 months. Multivariable logistic regression analysis showed that being tormented, battling damage were altogether identified with mental wellbeing results; balanced chances proportions (AORs) of forlornness, sleep deprivation, hazardous ideation and suicide attempt increased with an increased exposure to harassing, battling, and damage contrasted with the non-exposed group. Among the categories of bullying victimization, the highest AORs of sleep disorder and suicide attempts were among students who were not noted of activities, compared to the non-bullied.

Shu-yue and Yan (2014) conducted a study on suicide ideation among college students, and to explore possible relations among self-consistency, loneliness and suicide ideation for suicide prevention and intervention. 1101 sample of male and female college students was selected. Results reported that the rate of college students' suicide ideation was 41.1%, and there were no significant differences in gender, grade, specialty and residential location. The scores of self-consistency, self-inconsistency, self-stereotype had significant and positive correlations with loneliness and suicide ideation; Self-flexibility had significant and negative correlations with loneliness and suicide ideation. Three dimensions of self-consistency clearly affected loneliness and suicide ideation. Loneliness played the mediating role within the association between self-consistency and suicide ideation, accounting half-hour in total effect.

Stravynski and Boyer (2001) examined loneliness in relation to suicidal ideation and parasuicide for the variety of subgroups (e.g., college students, the

elderly and psychiatric patients). They tried this hypothesis by utilizing the results of a populace wide survey. The strong relationship among suicide ideation, parasuicide and distinctive methods for being isolated and alone, characterized either subjectively (i.e., the feeling), or impartially (i.e., living alone or being without a friend), were observed. Except this, the prevalence of suicide ideation and parasuicide increased with the degree of loneliness. A negligible gender difference was found on the said variables.

Depression and Suicidal Ideation

Abreu, Lafar, Baca-Garcia, and Oquendo (2009) looked into the confirmation for the real risk elements related to suicidal behaviour in bipolar disorder. The results demonstrated that bipolar disorder is strongly associated with suicide ideation and suicide attempts. In clinical samples between 14-59% of the patients have suicide ideation and 25-56% present no less than one suicide attempt during their lifetime. Around 15% to 19% of patients with bipolar issue died from suicide.

Afifi (2004) did a study to measure the adolescent's attitude towards suicide, to survey the magnitude of the issue of suicidal ideation or attempt and to study their relationship among non-clinical, non-degenerate high school adolescents aged 14-19 years in Alexandria, Egypt. Findings proposed high scorers of Child Depression Inventory (CDI), Adolescent Aggression Scale (AAS), and Attitude Towards Suicide Scale (ATSS) were more likely to be preoccupied by death, having a desire to die, think to damage themselves or attempt to harm themselves (without serious restorative gloominess) than low scorers. History of physical abuses during childhood, family history of attempting suicide and individual history of emotional instability were the most significant related factors for the adolescents who have attempted to harm themselves during the year before the review.

Arria et al. (2009) did a study on suicide ideation among college students with or without depression. Results indicated that affectionate depressive symptom effects were firmly connected with suicide ideation among college students with suicide ideation; just 40% additionally had high depressive symptoms effects. An absence of social support was an unmistakable hazardous factor for suicide ideation, notwithstanding holding steady depressive manifestations. Suicide ideation among college students is also related with full of feeling dysregulation, and personality characteristic portrayed by trouble controlling one's emotion. At long last, suicide ideation was likewise connected with alcohol used disorder, however just without high depressive symptom effects.

Baker (1995) analysed suicidal ideation and depression among scholastically talented adolescents, extraordinarily skilled adolescents, and adolescents average in scholarly performance. No significant differences were observed among the three groups in level, seriousness, or nature of pain experienced.

Research work by **Brar and Kaur (2015)** led to gain knowledge on suicide ideation among middle-income group abused women as a result of their depression. Abuse of women had been operationally characterized as those women who were consistently physically and emotionally abused by their life partners. The outcomes demonstrated that relationship between greater part of the factors of depression and suicide ideation was significant. Multiple regression suggested a portion of the factors of depression associated with suicide ideation in abused women.

Cato (2012) reviewed a research to analyze both depression and optimism as it relates to suicidal ideation on African-American college students. Results found that depression and suicide ideation demonstrated a non-significant relationship.

Furthermore, it was found that optimism and suicide demonstrated a significant and negative relationship.

Hong et al. (2016) conducted a study to find out the combined effects of depression and harassing on suicidal ideation among adolescents. The results found that there was an interaction amongst depression and bullying (P=0.001). Subgroup investigations demonstrated a more grounded relationship amongst performance and suicidal ideation in students with depression than in those without depression. The relationship amongst exploitation and suicidal ideation were weaker in students with depression than in those without. The relationship of each victimization and execution with self-destructive ideation was weaker in students with depression. They also observed an independent relationship of bullying with the expanded danger of self-destructive ideation among adolescent college students. This independent relationship was influenced by depression.

Ibrahim, Amit, and Suen (2014) studied to find out whether psychological factors (i.e., hopelessness, anxiety and stress) are indicators for suicidal ideation among adolescents or not. A cross-sectional study was conducted on college students. Results demonstrated that 11.10% were depressed, 10.00% had anxiety, and 9.50% of the college students reported high stress level. There was a significant relationship between depression, anxiety, and stress with suicidal ideation among college students. Depression was found to be the only distinguished indicator for suicidal ideation.

Kandel, Raveis, and Davies (1991) did a review for inter-relationships of depression and suicide with adolescent drug use, delinquency, eating disorder, and the risk factors for these diverse issues were examined among students of urban high school. Results found a strong relationship between drug use with suicidal ideation among young girls and a more significant association with attempts among young

girls and young boys. Suicidal adolescents were not well balanced and showed a lack of attachment and responsibility to family and school. Furthermore, causal models verified poor interpersonal associations with guardians, the absence of peer interaction, and life occasions prompt to depression, which fluctuated towards suicidal ideation. Effects of depressive symptoms were the strongest indicators of suicidal ideation. Finally, among females, depression predicted drug impact, and thus, drugs use increased suicidal ideation.

Nagendra, Sanjay, Goulin, Kalappanavar, and Vinodkumar (2012) studied the prevalence of depression, suicidal ideation and related socio-demographic variables among adolescent college students. Results found out predominance of depression in the group were 57.7%. The predominance of suicidal ideation was significantly more among depressed (41.7%) compared with non-depressed (11.4%). Private college students were more depressed (74.5%) than non-private college students (52.1%). Secondary school students from joint family were less depressed (40.1%) compared with those from atomic family (63.3 %,). Moderate depression was the common type followed by mild, serious and serious type. Age, gender, class, recent academic performance, mother's education level, factor at home like quarrel, money related, liquor addiction and constant ailment in guardians demonstrated a significant association with the pervasiveness of depression. Depressed students had a problem of getting along with guardians, relatives, companions, and educators. Parent's education level and occupation status had no relationship with rates of depression.

Another study by **Pranjic and Bajraktarevic (2010)** was done to find out the relationship between involvement in secondary school bullying and depressive symptoms and suicide ideation among victims, bully-victims, and those uninvolved.

They also tried to see the impact of helplessness on depression and suicide ideation among subjects involved in secondary school bullying. Outcomes showed that there was an increased prevalence of depression (29.0% versus 8.8%) and suicidal ideation (16.1% versus 3.5%) in adolescents who had been victims in relation to respondents who were uninvolved subjects. There was an increased pervasiveness of depression (17.5% versus 8.8%) and suicidal ideation (15.8.1% versus 3.5%) in adolescents who had been bully victims to respondents who were uninvolved subjects as well. Adolescents who were victims and the individuals who were not victims will probably have suicide ideation compared with uninvolved subjects.

Roberts and Chen (1995) analyzed the predominance of depressive manifestations and suicidal ideation, their co-morbidity, and related hazard in Mexican-origin and Anglo adolescents. Finding suggested that Mexican-origin minority adolescents showed significantly high rates of symptoms of depression and thoughts of suicide than their Anglo counterparts. Predominance rates were most significant for females of Mexican at the starting point. There was a solid relationship amongst depression and suicidal ideation in both ethnic groups. Multivariate strategic regression analyses demonstrated significant correlates of depressive indications were suicidal ideation (balance odd ratio = 10.9), loneliness, and utilization of English, in a specific order. Significant relates to suicidal ideation were depression (balance odd ratio = 10.6), loneliness, two-parent family unit, utilization of English, and being of Mexican. Over 80% of those with high appraisals on suicidal ideation scored as depressed in both ethnic groups.

Soumia, Robert, Lillian, Erin, and Regina (2015) studied the association between the factors of depressive symptoms, suicidal ideation, brooding rumination, reflective rumination, and hopelessness among 690 Black, Latino, and Biracial

college students. Among all the variables, hopelessness was positively related to suicidal ideation and brooding was negatively related to suicidal ideation. However, for depressive symptoms, the specified reflection was negatively associated with suicidal ideation among Latino people and they reported higher depressive symptoms. Furthermore, results showed that Biracial with Mono-racial race/ethnicity interacted with reflection and depressive symptoms, and reflection was related to higher level of suicidal ideation at depressive symptoms.

Sungeun and Conner (1997) did a review to know the distinctions in life-stress, life stress event, depression, and suicide ideation in a blended ethnic of skilled and non-talented urban high school students. Findings showed that talented school students detailed encountering significantly less life-stress event. The perceived stressfulness of the life-stress occasions, levels of depression, and suicide ideation was compared among talented and non-skilled members, and it indicated suicide ideation among the whole sample was significantly and positively associated both the level of depression and the levels of past and recent stress.

Personality and Suicidal Ideation

Arie, Catalan, and Apter (2005) focused on the personality groupings involved in suicidality beyond psychopathology with suicidal adolescents in three diverse setting of psychological post-mortem, psychiatric inpatients, and emergency ward workers. Results suggested that impulsive and aggressive qualities identified with imperfections in drive control like those found in the borderline personality and narcissistic harm and consolidated with socially oriented perfectionism builds the helplessness for perceived failure. When they were consolidated with schizoid components, bringing about low capacity to self-uncover, the individual was not ready to request help and in this way may well end up in an unbearable circumstance.

Cross, Jerrell, Cassady, and Miller (2006) conducted research on psychological characteristics of talented or gifted adolescents. It also distinguished the relationship between psychological personality types and suicide ideation. The findings showed that skilled adolescents did not display uplifted rates of suicide ideation when compared with their non-talented adolescents. Female college students scored more suicide ideation than male college students. It was also found out that the female college student's introversion perceives hold larger amounts of suicide ideation than those with different types of introversion perceive. There was a significant difference between-groups impact for the judging-perceiving research. College students distinguished as perceiving personality types held more elevated amount of suicide ideation than those with the judging personality type. Except this, 18% of the variance in suicide ideation was dependably predicted by gender, judging or perceiving, and extraversion or introversion.

Devi and Prakash (2015) explored the relationship between personality traits and suicidal ideation among college students. The outcomes uncovered that 11(11%) participants had suicidal ideation within the past one month. The research likewise uncovered that high neuroticism; low extraversion and low conscientiousness have a positive relationship with suicidal ideation. They further found that openness to experience and agreeableness has an insignificant association with suicidal ideation.

Dogra, Basu, and Das (2011) conducted a research to know whether importance in life predicts trait hope, state hope and suicidal ideation beyond the effects predicted by reasons for living, personality and stressful life events and whether purposes behind living predict past the impacts anticipated by personality and stressful life occasions. The results found that the samples of future desires and adapting convictions of explanations behind living and presence of importance in life

act as basic components for both hope and suicidal ideation but in opposite direction and the significance in life impacts hope and suicidal ideation past the impact of different factors.

James and Taylor (2008) tested the relationship between symptoms of borderline personality disorder, externalizing disorders and suicide-related behaviours. Findings demonstrated that symptoms and effects of reserved personality disorder, alcohol use disorder, and drug-using disorder each were significantly connected with suicide dangers and self-damaging behaviour in women. Symptoms of antisocial personality disorders were related to suicide attempts in women. Except for the relationship between symptoms effects of alcohol dependence and self-harmful behaviour, borderline personality issue indications intervened or in part interceded all relationship between externalizing issue and suicide-related behaviour in women.

Muiru, Thinguri, and Macharia (2014) investigated the impact of personality traits on suicide ideation and attempts among secondary school students in Kenya. The results from the regression research yielded the estimation of R=0.848 which implies the variety in a number of suicide ideations and attempts were clarified by the review parts. Further, the calculated value of $R^2 =0.72$ exhibited a strong positive relationship between the review factors and the occurrences of suicide ideation and attempts in Kenya.

Mohamed, Abdel, and Masry (2016) evaluated some demographic profile with personality characteristics related to suicidal ideation in depressive disorders on inpatients of the ward and the outpatient clinic. It showed that 65.7% of the patients had suicidal ideation over the span of their illness. Female patients, who were separated, widowed, or married, and those with over 6 years of education had high

rates of suicidal ideation. Additionally, there was a measurable significant relationship between suicidal ideation and psychoticism and neuroticism personality domains.

Robbins, and Francis (2009) focused the relationship between suicidal ideation and both routine religiosity and paranormal convictions, in the wake of controlling for individual contracts in gender, age, and personality (extraversion, neuroticism, and psychoticism). The data exhibited that, while traditional religiosity was marginally associated with lower levels of suicidal ideation, paranormal convictions were unequivocally associated with higher level of suicidal ideation.

Shorey et al. (2016) conducted research on the relationship between dispositional care, Borderline Personality Disorder (BPD), and suicidal ideation among women in treatment for substance use to support their affiliations. Results showed that dispositional care negatively related to Borderline Personality Disorder and suicidal ideation. Furthermore, a negative relationship was found even after controlling for age, substance abuser, and impression administration.

Family Environment and Suicidal Ideation

Eshun (2003) conducted a study on socio-cultural determinants of suicidal ideation. He investigated the role of the family cohesion, gender, religiosity, and negative suicide attitudes as potential determinants of social differences in suicide ideation among college students from Ghana and the United States. Significant cultural differences were found in suicide ideation, religiosity, family cohesion, and negative suicidal attitudes. Furthermore, negative attitudes and family cohesion were significant indicators for both social groups. It was also found that the demographic variables of gender were a significant determinant for suicide ideation among Ghanaians, but not among Americans. Religiosity was not a significant determinant for either group.

Ferran, Josepa, M-Eugenia, Claudia and Edelmira (2002) surveyed the psychological and family factors related to suicidal ideation in preadolescent children. They found that students with suicidal ideation by and large displayed more prominent depressive symptoms effects and hopelessness, and lower self-esteem and family expressiveness, despite the fact that there were differences both amongst genders, and when the variable depression was controlled.

Fotti, Katz, Afifi, and Cox (2006) researched the relationship between suicidal ideation and attempts, and poor peer and parental relationships in Canadian youths. The results found through the logistic regression models, depression, poor peer relationships, decreased parental nurturance, and increased parental rejection were all significantly related to suicidal ideation and attempts among boys and girls. In any case, subsequent to altering for every single variable in the multiple logistic regression models, poor peer relationships were no longer significantly related to suicidal ideation among boys and were miserably related to immature girls.

Kerr, Preuss, and King (2006) conducted a study on social support of family, non-family adults, and peer association to the psychopathology among suicidal female adolescents. The results of regression analysis showed that among females, family support was negatively identified with hopelessness, depressive symptoms, and suicidal ideation. Furthermore, when compared with the male adolescents, results showed that peer support was related to depressive symptoms and suicidal ideation. Across gender, more peer support was related to additionally externalizing behavioural problems. But family support was adversely identified with these variables and to alcohol/substance abuse. Paralleling standardizing discoveries, age was positively associated with peer support, and females showed more companion support than the males.

Rodriguez-Figueroa (2008) did a study to evaluate the prevalence of suicidal ideation and attempts among adolescents, to figure out whether pervasiveness grouped spatially, and to decide the relationship between suicidal behaviour and socio-statistic, individual, family, associate, college, and community attributes. Findings indicated that suicidal ideation was accounted by 15.7% of the college students where as 12.8% revealed attempts. Most of the college students who revealed suicide ideation (75.5%) additionally reported attempts. Predominance's were significantly higher if female, not living with both guardians, not conceived in the Island, and with the mother, not a secondary college graduate. The most elevated prevalence's grouped in the south eastern/eastern regions, with depression pervasiveness a conceptual clarification of the spatial bunching. Individual and family qualities were the most vital indicators of suicidal behaviour with the presences of depressive symptoms effects, sensation looking for behaviour, and family conflict being key hazard variables. The presence of depressive symptoms effects was related to a seven-overlap increment in the chances of suicidal behaviour. The family conflict in the presence of depressive symptoms extraordinarily increased hazard among females (those revealing conflict had three circumstances higher chances of detailing symptoms effects than the individuals who said no conflict). Community attributes, especially disruption and perceived handgun accessibility, were more imperative determinants of suicidal behaviour than were an associate and school characteristic.

Goldstein, Birmaher, Axelson, Goldstein, and Gill (2010) did a study to find the relationship between the family environment and suicidal ideation among youth with bipolar disorder. Suicidal ideation, family functioning, and family stress were evaluated at admission. Bipolar youth with current suicidal ideation revealed more conflict with their mother and less family flexibility. Ideators supported more

stressful family events over the earlier year and higher rates of particular familial stressors.

Khan and Sharma (2018) did an interesting study on the role of depression, anxiety, cognitive rigidity, affective dysregulation and family environment as predictors of suicide ideation among female adolescents. The findings suggest that combination of the presence of depression; affective dysregulation and lack of moral religious emphasis in the family environment were the core predictors of suicide ideation among female adolescents.

Khan and Singh (2013) conducted a research on the relationship of depression, affective dysregulation and family environment with suicide ideation on college students. Regression analysis indicated that organization, moral-religious emphasis and depression were significant indicators of suicide ideation among male students whereas depression affective dysregulation and moral religious emphasis were significantly predicted suicide ideation among female students. Shockingly, the moral-religious emphasis was the consistent indicator of suicide ideation for male and female students.

Yadegarfard, Mallika, Meinhold-Bergmann, and Robert (2014) conducted a study on Thai male/female transgender adolescents to measure their impact of family dismissal, social isolation, and loneliness. Transgender respondents contrasted with the cisgender respondents, as they had significantly higher family dismissal, higher loneliness, lower social support, higher depression, lower protective factors and higher negative hazard variables with suicidal behaviour. Transgender were less sure in maintaining a strategic distance from gender risk behaviour. Multiple regression analysis also showed that the exogenous factors of family dismissal, social segregation, and loneliness were significant indicators of both transgender and

cisgender adolescents accounted for levels of depression, suicidal factoring, and sexual hazard behaviour.

Zhai et al. (2015) researched the relationship between suicidal ideation and family environment on Chinese university students. Results showed that predominance of suicidal ideation was 9.2% (476/5183). Most participants with suicidal ideation had significant similarities: they had poor family structures and relationships, their parents had temperamental work, and their parents used improperly for child-rearing styles. Female students will probably have suicidal contemplations than male university students.

Zhang and Thomas (1999) investigated suicidal ideation and its compelling elements among university students. It was found that participants had a lower rate of suicidal ideation than other college students nationally. The two stronger indicators for suicide were depression and attitude favouring suicide, both of which were enormously impacted by one's religiosity. It additionally demonstrated that though family cohesion did not directly influence suicidal ideation, it strongly affected depression and the student's level of religiosity.

Demographical Variables and Suicidal Ideation

Abel, Sewell, Martin, Bailey, and Fox (2012) conducted a study among Jamaican youth to measure the variables of suicidal ideation and socio-demographic characteristics, defensive and risk components. Results indicated that the prevalence rate of suicidal ideation was 9.7%. Furthermore, the results revealed significant correlation in suicidal ideation with the variables of depressed, living in rural areas, likes oneself, indulging aggressive behaviour, being a female, defensive at home, contribution in dangerous behaviour, and being pained/poked.

Harikrishna, Kumar and Thulsi (2016) led a cross-sectional study at Sree Gokulam Nursing College, Trivandrum among nursing college students to survey suicidal ideation and its relationship with socio-demographic factors. Outcomes uncovered that 80% of tests had moderate suicidal ideation and 20% of tests had severe suicidal ideation and it had a significant relationship with the demographic variable like kind of family.

Kwok and Shek (2008) reviewed on several socio-demographic correlates, including the age of adolescents, family financial status, parental conjugal status; a parental occupational related status and parental education level of juvenile suicidal ideation among Chinese youth. The outcomes demonstrated that older youths had a significantly higher level of suicidal ideation than did younger adolescents. Adolescents living in non-in-place families had a significantly higher level of suicidal ideation than those in intact families. Adolescents with lower financial status (listed by monetary inconvenience, a parental word related status and parental educational accomplishment) showed a more elevated level of suicidal ideation than did adolescents with higher suicidal ideation. Despite the fact that these socio-demographic correlates were significantly identified with suicidal ideation, the practical significance was not high.

Menezes et al. (2012) did cross-sectional review to discover the pervasiveness of suicidal ideation and components impacting suicidal ideation among college students. Results discovered suicidal ideation in the year of 2011 were available in almost one-tenth of the review populace and in right around one-fifth of them, lifetime suicidal ideation was available. Variables that were related to suicidal ideation were basically disappointment with scholastic performance, being in the clinical semesters, having a history of drug abuse and feeling dismissed by guardians.

Most basic reason revealed for suicidal ideation was family related took without anyone else's input related.

      Polatoz, Kugu, Dogan, and Akyuz (2011) examined suicidal behaviour and correlation with certain socio-demographic factors in Sivas region in Turkey. The pervasiveness of lifetime suicide behaviour was observed to be as 2.23%, the commonness of lifetime suicide arranging or an attempt was 3.58%, suicide ideation throughout the previous one year was 1.43%, lifetime suicide attempt was 1.43%, and the lifetime suicide expectation was 0.62%. Suicidal behaviour was more successive in involuntary marriage than in deliberate ones. With the increased period of the marriage, both suicide behaviour and suicide ideations were decreasing significantly. The rate of suicide ideation was basically higher for individuals with liquor abuse history than those without any abuse.

      Zarrouq et al. (2015) explored the predominance and the hazard elements of suicidal behaviour among Moroccan school students. Outcomes about: appeared an aggregate of 53 % young men aged 11-23 years (average age = 16 ± 2.1 years) were incorporated into the review. The commonness of suicide ideation, suicide arranging, and suicide attempts during the last month were 15.7, 6.3, and 6.5 % individually. Univariate analysis showed that suicidal behaviour took various epidemiological examples. The hazard variables for every suicidal behaviour among Moroccan school students were the female gender, middle school level, urban areas, low family wage, parents' separation, tobacco utilization and psychoactive substances (liquor and cannabis) used.

Significance of the Study

The motivation behind the present investigation is to find out the prevalence and correlates of suicidal ideation among undergraduate college students in the Sikkim state of India. This research will address differences in prevalence and correlates of suicidal ideation amongst undergraduate male and female college students. As per the review of National Crime Records Bureau Report (2009), Sikkim had the foremost elevated suicide rate in 2008 as Sikkim was recorded as a second most notable state in India (48.2% per 100,000 populace). The national suicide rate is 10.5 for every 100,000 populace whereas in Sikkim, the suicide rate is higher in the most recent decade. The impacts of modernization, particularly in Sikkim, have prompted far-reaching developments in the financial, socio-economic and socio-cultural of individuals' lives, which have extraordinarily added to the stress throughout everyday life, warning significantly higher rates of suicide. Quick urbanization, industrialization, and developing family frameworks are bringing about social change and unhappiness. The lessening conventional emotionally supportive systems leave individuals powerless against suicidal behaviour. Henceforth, there is a rising requirement for outside enthusiastic help (Sikkim Developmental Report, 2014). Along these lines, the present study has been comprised to discover the relationship of suicidal ideation with hopelessness, loneliness, depression, personality and family environment among college students.

Statement of the Problem

The problem under investigation in the present study was stated as under: "Psycho-Social Correlates of Suicidal Ideation among College Students".

Objectives of the Study

Following objectives were taken into consideration in the research:

O1: To identify the frequency and percentage of demographic variables among undergraduate college students.

O2: To explore if there is any relationship between suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment among undergraduate college students.

O3: To explore if there is any significant predictor between suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment among undergraduate college students.

O4: To determine the model effect of hopelessness, loneliness, depression, different dimensions of personality, family environment on suicidal ideation among undergraduate college students.

O5: To make a gender-wise comparison on variables of suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment dimensions among undergraduate college students.

O6: To evaluate the main effect of the selected demographic variables and suicidal ideation among undergraduate college students.

Hypotheses of the Study

In social sciences, the research hypothesis is usually considered as a principal instrument, which helps the decision makers to explore new experiment and observation. The research investigators are interested in this area in testing the hypothesis on the basis of available information where direct knowledge of population parameters is somewhat rare. So, hypothesis testing is used as a strategy for deciding sample and data, which could be the basis of generalization. Thus, hypothesis enables us in making a probability statement about the population from

which the sample has been drawn. It is obvious that the proposed hypothesis cannot be proved absolutely but in practice, it is either accepted or rejected. In the light of literature reviewed and realizing the significance of this study certain research, hypotheses have been formulated and are verified to draw meaningful conclusions. The following hypotheses were formulated based on the above objectives and related literature:

H1: A significant correlation would exist between hopelessness, loneliness, depression, different dimensions of personality, family environment and suicidal ideation among undergraduate college students.

H2: Hopelessness will be the significant predictor of suicidal ideation among undergraduate college students.

H3: Loneliness will be the significant predictor of suicidal ideation among undergraduate college students.

H4: Depression will be the significant predictor of suicidal ideation among undergraduate college students.

H5: Different personality dimensions (i.e. psychoticism, extraversion, and neuroticism) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

H6: Different family environment dimensions (i.e. cohesion, expressiveness, conflict, acceptance, caring, independence, active-recreational orientation, organization, and control) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

H7: The hierarchical logistic regression model would provide the best predictor relationships within all the independent variables of suicidal ideation.

H8: There would exist significant gender difference on Suicidal ideation among male and female undergraduate college students.

H9: There would exist significant gender difference on Hopelessness among male and female undergraduate college students.

H10: There would exist significant gender difference on Loneliness among male and female undergraduate college students.

H11: There would exist significant gender difference on Depression among male and female undergraduate college students.

H12: There would exist significant gender difference on different dimensions of Personality (i.e. Psychoticism, Neuroticism, and Extraversion) among male and female undergraduate college students.

H13: There would exist significant gender difference on different dimensions of family environment (i.e. Cohesion, Expressiveness, Conflict, Acceptance & Caring, Independence, Active Recreational Orientation, Organization, and Control) among male and female undergraduate college students.

H14: There will be significant effect of selected socio-demographic variables on suicidal ideation among undergraduate college students.

Overview of the Chapter

Along these lines in this section, related literature of Suicidal Ideation Hopelessness, Loneliness, Depression, Personality, Family Environment and Socio-demographic profile have been checked on. The entire part was dispersed in six important areas; Suicidal Ideation, Hopelessness, Loneliness, Depression, Personality, and Family Environment. The principal segment distinguished the literature that clarifies the suicide ideation and its measurable association with different factors. This segment

demonstrates that suicide ideation has an association with family influence, gender and socio-demographic variables like age, education, semester, community, social group, religion, family type, family members, family occupation, and family income. All the literature on suicide ideation proposes that suicide ideation either contrarily influence the behaviour or prompt to the negative lead. The outcomes of the factorable number of movements in the end prompt to hazardous and unsafe outcomes. Depression can prompt to lost uniqueness. Depression is the human inclination to join the temporary trend, in which, the individual loses his/her unique method for taking a gander at life.

The second segment of the research which is globally known as inception was depression. There are confirmations proposing that depression is exceptionally all around identified with hazing, embarrassment, seclusion, lack of sleep, gender acts and even death. Follow-up on anti-loneliness has been made.

The period of college life is a time of disarray with differing dispositions where college students need to manage scholarly, social and depression. Additional anxiety components like poor execution, vacation and so forth can make them feel that there is nothing to live for. Students' suicides resemble valuable lives turned useless bringing on an unsafe trouble to the person as well as his nearby concerns. Suicide ideas are picked in light of the fact that pain gets to be distinctly deplorable. There is little hope for change, change or probability of a superior future with the life that they encounter. They have a simple arrangement at the top of the priority list i.e. death implies no pain.

The Chapter-III will be methodology, procedure, research design, sample, variables, tools, data collection, preparation and statistical techniques for analysis.

Methodology

Research methods are the different methodology, plans, and calculations utilized as a part of the research. Every one of the techniques utilized by a researcher amid an exploration study is named as research methods. They are basically arranged, logical and esteem unbiased. They incorporate hypothetical techniques, exploratory reviews, numerical plans, measurable methodologies, and so forth. Research methods help us gather tests, information and discover a solution for a problem. Especially, logical research techniques call for clarifications in view of gathered truths, estimations and perceptions and not on thinking alone. These methods acknowledge just those clarifications which can be confirmed by investigators. While the research methodology recommending a precise approach to tackling the issue. Research about the procedure is a study of considering how research is to be done. Basically, the procedures by which researchers/investigators approach their work of portraying, clarifying and anticipating wonders is called research methodology. And furthermore, it is characterized by the investigation of methods of which learning is picked up. It aims to give the work plan of research (Rajasekar, Philominathan, & Chinnathambi, 2013).

Procedure

The technique of the study can be considered as the rationale or master of the method of a research that tosses light on how the study is to be conducted. It demonstrates how the whole real parts of the exploration think about the samples, method, measures and statistical design; and so on cooperate trying to address the research targets. The method of the review is like a design plot. The Procedure of the review can be viewed as an understanding of rationale in an arrangement of techniques that enhances the validity of information for a given research issue. As indicated by

Mouton (1996), the research configuration serves to "plan, structure and execute" the exploration to augment the "validity of the findings". It gives directions from the hidden philosophical presumptions to research plan and data collection. This is the most basic part of the methodology and insight about research configuration embraced for this review has been introduced.

Research Design

In the research, the background of the research configuration is important. Before beginning any research work, its systematic arranging needs to do. As before building a house, its arrangement needs to make. Similarly, its blueprint must be prepared. Research about arranging is the establishment stone of research work. At the point when anyone research has attempted to demonstrate its aims, some research arranging appropriate to that needs to do. Research means planning on how many independent variables of the exploration needs to be taken. How many levels are there of these factors and which methods have been utilized to control the external factors. Additionally, goals, determination of test, factors, intend to gather information, reliability, and validity of that, which statistical system ought to choose, etc. needs to be taken care of. For all these, pre-thinking needs to do. Looking into a design is an essential and unmistakable arranging instrument and technique of any exploration work. Polit and Hungler (1999) represented the research plan as a diagram, or blueprint, or directing the review in a manner that most extreme control will be practiced over elements that could meddle with the validity of the exploration outcomes.

The present section is sorted out remembering the essential targets of the review and it gives the prudent look at the operational arranging and preparing of the population, sample, method, the tools, the statistical procedures, and so on.

Chart 3.1

Exhibiting the Steps of the Plan and Procedure of the Study

Method	Sample	Tools	Statistical Techniques
Descriptive Statistics	Stratified Random Sampling	Beck Suicide Ideation Scale	Mesurement of Central Tendency & Despersion
	Male	Beck Hopelessness Scale	Frequency & Percentage
	Female	Loneliness Scale	Correlation & Regreesion
		Beck Depression Inventory-II	Inferential Statistics
		Eyseneck Personality Quuestionnair Revised	
		Family Environment Scale	

Method

In the planning of the study, the investigator endeavours to choose the method most suitable to the issue under consideration. The nature of research depends on the exactness of configuration as well as on the productivity of the technique for the review keeping the nature and goals of the review in perspectives. The observational verification of the proposed hypotheses, notwithstanding, is needed firstly, on the dependable estimation of the factors of extreme intrigue, and besides, on the methods and procedure for getting conclusions from such measurements. This requires:

o   Selection of a suitable sample;

o   Selection of proper tools that could be gainfully utilized for solid measures; and

o   Selection of appropriate statistical techniques for analysing the data.

The methodology has its own significance in logical research since objectivity in any exploration research cannot be acquired unless it is completed in a highly systemic and arranged way. Logical research includes cautious reception of proper research configuration, utilization of institutionalized instruments and tests, picking sufficient samples by utilizing proper inspecting systems, undertaking sound procedure for gathering information, and utilization of suitable statistical procedures for analysing the information. The points of interest of the methodological steps i.e. portrayal of the sample, tools, and statistical investigations are exhibited as follows:

Sample

The sample was delimited to the participants who were accessible to taking part in this review, restricting the supposition of randomization. At that point, stratified random sampling was applied inside every stratum. This frequently enhances the representativeness of the sample by reducing sampling blunder. Kerlinger (1986) portrayed "randomization as the task of objects (subjects, treatments, groups, and so forth) of a populace to subsets (sample) of the populace in a manner that, for any offered task to a subset (sample), each individual from the populace has an equivalent likelihood of being decided for that task. Randomization is basic for likelihood tests which are the main samples that can generalize results back to the populace". Information has been conducted regarding each subject one by one.

Choice of the Sample Unit

The sample of the present review comprised of 400 undergraduate college students randomly selected (200 males and 200 females) from different streams of four different Government Colleges of Sikkim (i.e. Sikkim Government College, Tadong,

East Sikkim; Government College Namchi, South Sikkim; Gauzing Government College, Gauzing, West Sikkim; and Rhenock Government College, East Sikkim).

Inclusion Criteria

o All adolescents were regular undergraduate students in customary classes in each selected colleges of Sikkim.

o All the respondents were unmarried, nonworking and with no evident physical or dysfunctional behaviour.

o In general, the subjects were having great wellbeing and did not experience the ill effects of any disease.

o All students originated from poor class, middle class and upper working class (moderate socio-economic background).

o All students were perpetual occupants of Sikkim (domicile of Sikkim).

Exclusion Criteria

o Those students who did not give consent to take an interest in the research.

o Students determined to have any major psychiatric issue/s.

Ethical Considerations

o Participation was voluntary and anonymous.

o All participants were assured of confidentiality and were also informed to assert this right to withdraw at any time.

o All the personal information of the participants has been locked in their respective files and was assessed only by the researcher.

o The participants' details will be destroyed few years after the study.

Chart 3.2

Number of Subjects from Four different Government Colleges of Sikkim is Given Beneath (N=400).

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                            Sample
                            (N=400)

   Sikkim              Gauzing            Namchi            Renock
  Government          Government        Government        Government
College, Tadong    College, Gauzing   College, Namchi   College, Renock
 (East Sikkim)      (West Sikkim)     (South Sikkim)     (East Sikkim)

Female    Male    Female    Male    Female    Male    Female    Male

  50       50       50       50       50       50       50       50

     100             100             100              100
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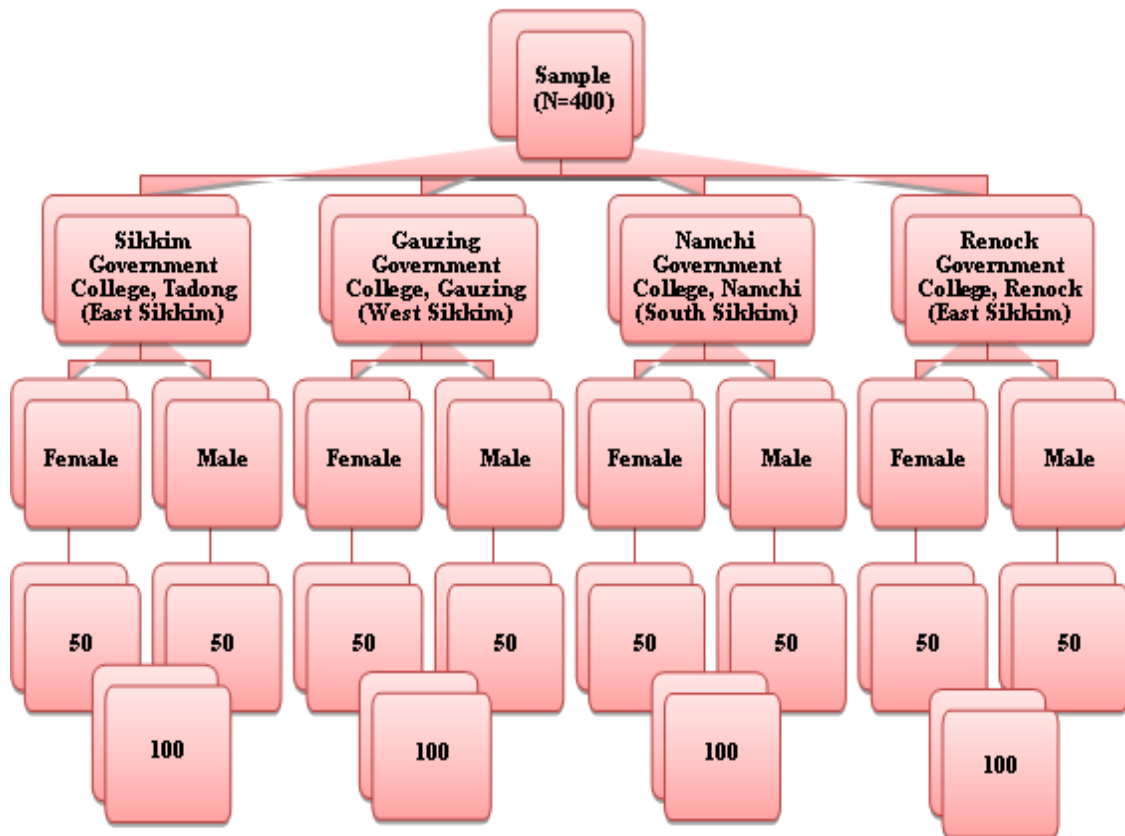
Tools Used

Choice and Description of the Tools: After the choice of the sample, the following assignment was to pick the tools/ questionnaires for an accumulation of information.

Achievement in research relies upon the accessibility of tools and methods of adequate exactness to measure the marvels under research. The determination of research tools or questionnaires is basic steps of any research which requests a profound understanding and point of view of all fields of the research. The determination of the tools for a specific research depends on different contemplations, for samples, the objective of the research, the measure of the time accessible at the

transfer of researcher, accessibility of reasonable test, individual ability of the analyst to administer, score and interpret the test outcomes and so forth. As per Best (1977), "Aptitude in decisions and utilization of research tools is significant to the accomplishment of the research and validity of its outcome and conclusion".

A seven-part questionnaire was intended to gather the information. The initial segment included survey about personal information and familial background attributes of college students, the second section a measure of suicide ideation (BSS), the third section a measure of hopelessness (BHS), the fourth section a measure of loneliness (UCLA), the fifth section a measure of depression (BDI-II), the sixth section a measure of personality (EPQ-R), and the seventh part incorporated the measure of family environment (FES) of subjects.

To put it plainly, the accompanying standardized questionnaires were utilized to measure suicidal ideation, hopelessness, loneliness, depression, personality, family environment of subjects.

Table 3.1

List of Research Tools

Aspect Studies	Name of Questionnaire/Scale	Developed by
Demographic Characteristics	Socio-Demographic Datasheet	Self (2015)
Suicidal Ideation	Beck Scale for Suicide Ideation (BSS)	Beck & Steer (1993)
Hopelessness	Beck's Hopelessness Scale (BHS)	Beck & Steer (1993)
Loneliness	Loneliness Scale (UCLA)	Russell, Peplau, & Ferguson (1978)
Depression	The Beck Depression Inventory II	Beck, Steer, & Brown (1996)
Personality	Eysenck's Personality Questionnaire-Revised (EPQ-R)	Eysenck & Eysenck (1985)
Family Environment	Family Environment Scale (FES-BC)	Bhatia & Chadha (2012)

Keeping in view the goals of the present research, the following tools were selected:

1. Socio Demographic Datasheet (Self, 2015)

The personal information sheet comprises of individual points of interest and family background of the subject. The personal details in regards to the name, age, sex, social group, religion, and family type and so forth were included. The family history of the subject comprises of family member, relationship with respondent, sex, age, education, occupation and nature of work, income and so on. Volanen, Lahelma, Silventoinen and Suominen (2014) highlighted the absence of studies investigating the proportional impact of socio-demographic factors and proposed the investigation of basic demographical factors, for sample, age and education, work-life factors, for sample, business and financial status, and family life factors, for sample, marital status and number of dependents.

2. Scale for Suicidal Ideation

Selection of the Suicidal Ideation Test: Precise appraisal of suicidal ideation is of real significance in research settings. Students' suicide happens normally with regards to a dynamic, frequently treatable, yet unrecognized or untreated emotional instability. There are various indicators that one can search for when attempting to distinguish self-destructive ideation. There are additional circumstances in which the hazard for self-destructive ideation might be increased. For the choice of the suicidal ideation test, the researcher firstly studied the related literature and discovered a few tests on suicidal ideation. Few of them are being displayed here in a tabular shape:

Table 3.2

Exhibiting Various Tools to Measure Suicidal Ideation

Sl. No.	Tools	Authors	Populations
1.	Suicide Intent Scale	Beck, Schuyler & Herman (1974)	Clinical Patients
2.	Suicidal Ideation Questionnaire (SIQ)	Reynolds (1987)	Early Adolescents
3.	**The Beck Scale For Suicidal Ideation (BSS)**	**Beck & Steer (1993ed)**	**Clinical & Non-Clinical**
4.	The Kessler Psychological Distress Scale (K10)	Kessler (1992)	Clinical Patients
5.	Columbia Suicide Severity Rating Scale	Posner et al. (2008)	Clinical Patients

The Beck Scale for Suicidal Ideation (Beck & Steer, 1993ed)

The Beck Scale for Suicidal Ideation (1993) was chosen by the researcher to measure the extent of suicidal ideation among students. The criteria for the choice of this scale were; this scale has been discovered appropriate for the organization on the non-clinical sample, accessible and one of the most widely used scale in a few reviews. This test has 21 items in light of suicidal ideation. Each item comprises of three choices reviewed by self-destructive thinking on a 3-point scale ranging from 0 to 2. The tool profile of the Beck Scale for Suicidal Ideation is given in Table 3.3.

Table 3.3

Tool Profile of Beck Scale for Suicidal Ideation

The Beck for Suicidal Ideation (BSS)	
Authors	Beck & Steer (1993ed)
Nature	Verbal
Group/Individual	Individual
Duration	10 Minutes
Structure	21 Items
Reliability	Internal Consistency Reliability ; 0.90,
	Test-Retest; 0.54
Validity	Content, Concurrent, Construct, Discriminate, Factorial
	Predictive Validity

Interpretation of the Scale

The Beck Scale for Suicidal Ideation (BSS; Beck & Steer, 1993ed) is a self-report measure. The BSS is a simple to control 21items self-report questionnaire that has a guarantee for most important use with adolescents and adults. The authors of the BSS propose that the test is best used to distinguish and measure the severity of self-destructive ideation, which is thought to be a sign for suicide hazard. The scale depends on five measurements via the intensity of self-destructive ideation, active self-destructive desire, suicide arranging, passive suicide desire, and covering.

Reliability of the Scale

The BSS has high internal reliability with Cronbach's alpha coefficients ranging from 0.87 to 0.90 (Beck & Steer, 1991). The BSS has direct test-retest reliability ($r = 0.54$) over a one-week time frame with psychiatric inpatients.

Validity of the Scale

The BSS is exceedingly connected with the clinically appraised SSI with correlation coefficients ranging from 0.90 for psychiatric inpatients to 0.94 for outpatients. The information proposes that patient's reactions to the self-report and clinician-controlled renditions are steady paying little heed to the method of organization. Moreover, the BSS is modestly correlated with the Beck Depression Inventory. Suicide items correlation coefficients ranging from 0.58 to 0.69. Besides, the BSS has been observed to be modestly associated with the Beck Depression Inventory (0.64 to 0.75) and the Beck Hopelessness Scale (0.53 to 0.62; Beck, Steer, & Ranieri, 1988). This guarantees the concurrent validity of the scale.

Scoring of the Tool

The size of suicidal ideation comprises of 21 but 19 used for the basic thought of suicidal ideational and 2 items used for attempted suicide in past, for these items, scored 0 to 2, which can be utilized to assess a person's self-destructive intention. The minimum and maximum score run in 0-38. The high score is interpreted as high self-destructive ideation and low score demonstrates low or no self-destructive ideation. Individual scoring up to 10 is distinguished as the low level of suicidal ideation, scoring between 11-27 average levels of suicidal ideation and scores greater than 28 will fall under the category of high suicidal ideation.

3. Hopelessness Scale

Selection of Hopelessness Scale: For the purpose of the hopelessness test, the researcher firstly surveyed the related literature and discovered some tests on hopelessness. Few of them are being exhibited here in a tabular frame:

Table 3.4

Exhibiting Various Tools to Measure Hopelessness

Sl. No.	Tools	Authors	Populations
1.	The Hopelessness Scale (BHS)	Beck, Weissman, Lester & Trexler (1974)	Clinical and Non-Clinical
2.	The Hopelessness Scale (BHS)	Beck (1988)	Adult
3.	**Beck's Hopelessness Scale (BHS)**	**Beck & Steer (1993ed)**	**Clinical & Non-Clinical**
4.	Adult Hope Scale (AHS)	Snyder, Harris, et. al. (1991)	Adult
5.	The Chinese Hopelessness Scale (C-Hope)	Shek (1993)	Adolescent

Beck's Hopelessness Scale (Beck & Steer, 1993ed)

The Beck Hopelessness Scale was chosen to measure the level of hopelessness among students. The criteria for the choice of this scale were; the scale is, for the most part, intended to quantify the levels of hopelessness and appropriate in the Indian environments. Further, this test is institutionalized predominantly on the college students or adolescents. This scale is a 20-item self-report measure that surveys the feelings about the future, future desires, loss of motivation and overall hopelessness in which members are made a request to peruse a statement and respond true or false in light of how they feel at present.

As the investigator has chosen the Beck Hopelessness Scale and for giving insight about the tool, here the researcher has given a tool profile in the table as given beneath:

Table 3.5

Tool Profile of Beck Scale for Hopelessness

The Beck Scale for Hopelessness (BHS)	
Authors	Beck & Steer (1993ed.)
Nature	Verbal
Group/Individual	Individual
Duration	15 minutes
Structure	20 Items
Reliability	o Internal Consistency Reliability ; 0.93
	o Test-Retest ; 0.69
Validity	o Content Validity
	o Concurrent Validity; 0.86
	o Discriminant Validity; 0.86
	o Construct Validity
	o Factorial Validity

Description of the Scale

The hopelessness scale is a self-report 8-point Likert scale. Hopelessness scale is a unidimensional scale which gives an estimate of hopelessness in adolescents and adult of ordinary populace. It was created mostly for the reason that young suicide issues are expanding day by day and hopelessness scale is one of the main considerations affecting such issues among them. As per Stotlands (1969), the origination of hopelessness as an arrangement of subjective mappings in which the basic category is negative anticipation about the short and long term future. Hopeless people trust that nothing will turn out ideal for them, that they will never prevail at what they endeavour to do, that their essential objectives can never be accomplished, and that their most exceedingly bad issues will never be solved (Beck & Steer, 1988). This scale, for the most part, focusing on measuring of the hopelessness or the hopefulness has been developed.

Reliability of the Test

The hopelessness scale is a reliable scale. There are two essential concerns regarding reliability, consistency of items within a measure and stability of the measure after some time:

o *Internal Consistency***:** The internal consistency of the scale was built up by utilizing Kuder-Richardson of high-reliability range from 0.82 to 0.93 and lower reliability of 0.65 was obtained in college students for the last 20 items.

o *Test-retest Reliability:* For the research of test-retest reliability of 20- items scale was utilized on a similar specimen following a period of 7 days. The system for the retest was indistinguishable to that utilized for the underlying information accumulation. The coefficient of temporal stability was measured by utilizing Pearson product-moment correlation method, and internal consistency of the scores was measured by utilizing Kuder Richardson formula. The outcomes showed high test retest reliability (r = 0.69, p<.01) and lowest following six week was (r = 0.66, p<0.01).

Validity of the Scale

o *Content Validity*: Initially, BHS was designed to follow the Scotland concept of hopelessness as a procedure of negative attitudes concerning the person's future. Most of the items of the scale were chosen from an expansive pool of explanations made by patients who were made a request to depict their hopes when they were depressed.

o *Concurrent Validity:* For the present scale, the authors have evaluated both BDI and BHS and given relationship of BHS were significantly related with the BDI beyond. In the psychiatric literature, relationship between the BHS and the BDI

might be overestimated in a few samples because few reviews have not presented subtracting the negativity rating from BDI total score before connecting it with BHS. Pessimism items and the BHS (r = 0.63**, p<.01) as one of their files of concurrent validity.

o *Discriminant Validity*: To decide the validity, the authors have directed a considerable measure of study and found that hopelessness has a noteworthy connection with age, just the variable like generalised anxiety disorder risk discernment (r = 0.86) and age (r = 0.24).

o *Construct Validity:* Hopelessness scores with Generalized Expectancy Scale (GES) of Minkoff, Bergman, Beck and Beck (1973) were utilized to check the construct validity of the measure. There was a significant positive connection (r = 0.68**, p< 0.01) between two depression and hopelessness in measures.

o *Factorial Validity:* To measure the variables of BHS reactions, there are three segments the authors uncovered. The central segments like (1) Feelings about the future, (2) Loss of motivation and (3) Future desires.

Scoring of the Test

The BHS in consists of 20 items. The answer ought to note in YES or NO insightful reactions. In scoring the measure, each item gets a 0 or 1. Nine items are keyed false and 11 items are keyed valid so that the total hopelessness score is an entirety of the scores on the individual items. The BHS score shows the severity of negativity about the future, extending from 0 to 20. Moreover, the reaction scores scope of 0-3 is within the minimal range, 4-8 is mild; 9-14 is moderate and accumulate more than 14 are extreme.

4. Loneliness Scale

Purpose of the Loneliness Test: For the purpose of the loneliness test, the investigator firstly overviewed the related literature and discovered some test on loneliness. Few of them are being introduced here in a tabular shape:

Table 3.6

Exhibiting Different Questionnaires to Measure Loneliness

Sl. No	Tools	Authors	Populations
1.	The Loneliness and Social Dissatisfaction Scale (LSDS)	Asher, Hymel & Renshaw (1984)	Children/Early Adolescent
2.	UCLA Loneliness Scale (UCLA)	Lasgaard (2007)	Adolescent
3.	**UCLA Loneliness Scale**	**Russell, Peplau, & Ferguson (1978)**	**Adolescent / Adult**
4.	UCLA Loneliness Scale (R-UCLA)	Russell et al. (1980)	Adolescent
5.	UCLA Loneliness Scale (UCLA)	Russell (1996)	Adolescent

UCLA Loneliness Scale (Russell, Peplau, & Ferguson, 1978)

The loneliness scale was chosen to measure the level of loneliness among students. The criteria for the determination of this scale were; the scale is mainly intended to quantify the levels of loneliness, appropriate in the Indian environments. Further, this test is standardized principally on the undergraduate college students or adolescents. A 20-item scale is intended to measure one's subjective feelings of loneliness and feelings of social isolation. Participants rate each item as O ("I regularly feel this way"), S ("In some cases feels this way"), R ("I seldom feel this way"), and N ("I never feel this way"). The measure has been changed two circumstances since its first

publication; once to make a turnaround scored items, and once to streamline the wording.

As the investigator has chosen the loneliness and for giving insight about the tool, here the researcher has given an instrument profile in the table as given beneath:

Table 3.7

Tool Profile of Scale for Loneliness

The Scale for Loneliness	
Authors	Russell, Peplau, & Ferguson (1978)
Nature	Verbal
Group/Individual	Individual
Duration	Not fixed
Structure	20 Items
Reliability	o Internal Consistency Reliability ; 0.96
	o Test-Retest ; 0.73
Validity	o Concurrent Validity
	o Construct Validity

Description of the Test

This scale is a self-report measure of loneliness and social segregation. A 20-item scale intended to measure one's subjective feelings of loneliness and also feelings of social isolation of adolescent or college student. The authors of the UCLS propose that the tool is best used to distinguish and measure the severity of loneliness and isolation, which is thought to be a sign of suicide hazard. The scale depends on four dimensions via sometimes, never, often, and rarely feelings of loneliness. Loneliness is related to measures of negative impact, social hazard taking, and affiliate propensities; it is regardless an unmistakable psychological experience.

Reliability of the Scale

The loneliness scale is a dependable scale. There are two essential worries concerning reliability, consistency of items within a measure and stability of the measure after over time.

o *Internal Consistency:* The internal consistency of the scale was established by utilizing Kuder-Richardson Coefficient Alfa 0.96 was obtained for the last 20-items.

o *Test-Retest Reliability:* For the research of test-retest reliability of the 20 items scale was utilized. Test-retest reliability (over a 2-month interval) of 0.73 is accounted for by Rathus (1973), alongside a split-half correlation of 0.77. For the present review, half of the 30 items on the Rathus (1973) measure were used, comprising of each odd item from the scale.

Validity of the Scale

o *Concurrent Validity:* The concurrent validity is built up when the items in the tool are plainly and clearly identified with the marvels being measured, when the items are significant to the expressed emotional state or reason for the tool and when the items are based upon whatever information is accessible at the time of construction. The items of the loneliness scale fulfil these environments significantly correlated with different measures of loneliness.

o *Construct Validity:* Construct validity was built to measure the adequacy of individual's social relations, and also the relations among loneliness, well-being, and prosperity. Authors discovered primarily with self-report of both loneliness and glowing states (Russell et al., 1978).

Scoring of the Scale

Participants rate each item as either or, O ("I regularly feel this way"), S ("In some of the time feel this way"), R ("I once in a while feeling this way"), N ("I never feel this way"). The aggregate score is ascertained by finding the total of 20 items. Score ought to put attention to make all O ("I regularly feel this way"), score =3, all S ("I once in a while feeling this way"), score =2, all R ("I once in a while feeling this way"), score =1, and all N ("I never feel this way"), score = 0. Range: 0-60, with a higher score showing more loneliness.

5. Depression Inventory

Choice of the Test on Depression: Depression conveys a high risk of suicide. Anyone who communicates self-destructive thoughts or intentions ought to be considered seriously. To keep in, remember that not each test is a depression test for college students. A few tests are not utilized to analyse clinical depression but instead to preclude different serious medical conditions that may bring about comparable manifestations. So, for the choice of the depression test, the investigator firstly studied the related literature and discovered some tests on depression. Few of them are being displayed here in a tabular frame:

Table 3.8

Exhibiting Various Tools to Measure Depression

Sl. No.	Tools	Authors	Populations
1.	Reynolds Adolescent Depression Scale (ASIQ-RADS)	Reynold (1991)	Adolescent/Adult
2.	Beck Depression Inventory (BDI)	Beck, Ward, Mendelson, Mock & Erbauge (1961)	Clinical/Non-Clinical
3.	SIQ	Reynold (1987)	Clinical/Non-Clinical
4.	**Beck Depression Inventory (BDI-II)**	**Beck, Steer, & Brown (1996)**	**Adolescent/Adult**
5.	Hamilton Depression Inventory (HDI)	Reynold & Kobak (1995)	Clinical / Non-Clinical

Beck Depression Inventory (BDI-II: Beck, Steer, & Brown, 1996)

Beck Depression Inventory (BDI-II) developed by Beck, Steer, and Brown (1996) was chosen to measure the severity of depression in the adults and adolescents matured 13 years and older. It has to contain 21 self-report instrument items evaluating disturbing, inefficiency, fixation, trouble, and loss of vitality with a specific end goal to record indications of severe depression or depression warranting hospitalization. In each item, the respondent chooses one of four explanations that best depict how he/she has been feeling in the course of recent days. As the investigator has chosen the Beck Depression Inventory and for giving insight into test, a tool profile is given in the table below:

Table 3.9

Tool Profile of Scale for Depression

Beck Depression Inventory II (BDI II)	
Authors	Beck, Steer, & Brown (1996)
Nature	Verbal
Group/Individual	Individual/ Group
Duration	15 minutes
Structure	21 Items
Reliability	o Internal Consistency Reliability: 0.92
	o Test-Retest Reliability: 0.93
Validity	o Content Validity
	o Construct Validity: 0.60
	o Factorial Validity: 0.66

Depiction of the Test

The BDI-II is a broadly utilized 21-item self-report test measuring the severity of depression in adolescences and grown-ups. The BDI-II was changed in 1996 to be steadier with DSM-IV criteria for depression. For instance, people were made a request to react to each question in view of a two-week era as opposed to the one-week time allotment on the BDI. The BDI-II is generally utilized as a pointer of the severity of depression, however, not as a demonstrative tool, and various reviews give proof to its reliability and validity crosswise over various populaces and social groups. It has additionally been utilized as a part of various treatment results thinks about and in various reviews with injury uncovered people. The items on the BDI-II were produced to survey an individual's depressive side effects in view of the criteria found in the DSM-IV for the depressive issue. The BDI-II depends on the changed Beck Depression Inventory (BDI-A). Items from the BDI-A were modified, 4 new items comparing to DSM-IV Depression criteria were included, and the time span was

changed from 1 week to 2 weeks to relate to the DSM-IV. Every statement gets a score of 0 to 3, with 3 demonstrating the highest abnormal of severity for each item.

Reliability of the Test

The Beck Depression Inventory-II is a reliable scale. There are two essential concerns regarding reliability, consistency of items inside a measure and security of the measure after several times.

o *Internal Consistency Reliability:* The inner consistency of the scale was built up by utilizing coefficient alpha and a reliability of 0.92 was gotten for the last 21 items.

o *Test-retest Reliability:* For the research of test-retest reliability (knowing stability coefficient), 21-items scale was utilized on a similar specimen after a period of 1week. There was a relationship of 0.93, which was significant at $p < 0.001$.

Validity of the Test

o *Content Validity:* BDI-II was created particularly to evaluate depression, and the items were included, dispensed with and rephrased to explicitly survey the manifestations of depression recorded in the DSM-IV and hence increment the content validity of the measure.

o *Construct Validity:* As to develop validity, the construct validity of the BDI-II was evaluated by the organization of the BDI-1A and the BDI-II to two sub-tests. The order of presentation was offset no less than one other measure was controlled between these two variants of the BDI, the correlation of BDI-II was (0.60 $p <$ 0.001).

Scoring of the Test

The scale score is figured as the whole of the 21 items. The BDI-II is a self-report research of depressive side effects. Each of the 21 items relating to a side effect of depression is summed to give a single score for the BDI-II. There is a four-point scale for each item running from 0 to 3. On two items (16 and 18), there are seven choices to demonstrate either an expansion or diminishing of craving and rest. Cut score rules for the BDI-II are given with the proposal that limits be balanced in light of the attributes of the sample, and the reason for the utilization of the BDI-II. Total score of 0-13 is viewed as insignificant/minimal range, 14-19 is mild, 20-28 is moderate, and 29-63 is extreme. Scores run from 0 to 63, with zero demonstrating no depressive side effects and 63 showing the most elevated level of depressive side effects conceivable.

6. Personality Questionnaire

Selection of the Personality Test: A personality test is a survey or other institutionalized tool intended to uncover parts of an individual's character or psychological makeup. For the choice of the personality test, the investigator firstly studied the related literature and discovered a few tests on personality. Few of them are being displayed here in a tabular shape:

Table 3.10

Exhibiting Different test to Measure Personality

Sl. No.	Tools	Authors	Populations
1.	The NEO Five-Factor Inventory (NEO-FFI)	Costa & McCrae (1992b)	Clinical / Non-Clinical
2.	Eysenck's Personality Questionnaire (EPQ)	Eysenck & Eysenck (1975)	Junior/Adult
3.	**Eysenck's Personality Questionnaire- Revised (EPQ-R)**	**Eysenck, Eysenck & Barrett (1985)**	**Adolescent / Adult**
4.	The Inventory of Personality Organization (IPO)	Lenzenwerger, Clarkin, Foelsch, & Kernberg (2001)	Clinical / Non-Clinical
5.	Neo Five-Factor Inventory-3	Costa, & McCrae (1989, 1992, 2010)	Clinical / Non-Clinical

Eysenck's Personality Questionnaire-Revised; EPQ-R (Eysenck, Eysenck & Barrett, 1985):

Eysenck's Personality Questionnaire- Revised (EPQ-R) is created by Eysenck, Eysenck, and Barrett (1985). It comprises to measure three noteworthy measurements of personality that record for the vast majority of the change in personality. The EPQ-R is a magnificent decision when someone is regulating a test battery and need a short tool speaking to the personality area. This measure has demonstrated value for various applications in human resource profession, clinical settings, and research. There is a refreshed and enhanced psychoticism/intense mindedness scale. It has 90 items surveying to quantify of 4 critical measurements for the sample; psychoticism, extraversion, neuroticism, and lie-scale. Names of the measurements are P-Psychoticism or Tough-Mindedness, E-Extraversion, N-Neuroticism or Emotionality and L-Lie scale.

As the investigator has chosen the EPQ-R and for giving insight into the test, a tool

profile is given in the table below:

Table 3.11

Tool Profile of Scale for Personality

The Scale For Personality	
Authors	Eysenck, Eysenck & Barrett (1985)
Nature	Verbal
Group/Individual	Individual/ Group
Duration	20-35 Minutes
Structure	90 Items
Reliability	o Internal Consistency Reliability: 0.80
	o Test-Retest Reliability: To 0.89
Validity	o Construct Validity

Description of the Test

Psychoticism: High Psychoticism (P) scores show inclinations to creating psychotic

disorder while in the meantime missing the mark regarding actual psychotic

environments. People with high "P" scores are slanted toward being unsympathetic,

insensitive, socially apathetic, negative, forceful, and not thinking of threat, separate,

frigid, and narrow-minded. They demonstrate an inclination towards raising hell for

others, disparaging, acting problematically, and ailing in compassion.

Neuroticism: High Neuroticism (N) scores show forceful enthusiastic risk and

over the movement. People with high scores have a tendency to be emotionally over

responsive, and experience troubles in quieting down. Such people gripe of

ambiguous physical miracles and report many stresses, nerves, and disturbing

enthusiastic feelings. They may create a neurotic issue when under stress, which

missed the mark regarding actual psychotic breakdown. High scores do not block such people working sufficiently in the family and work circumstances.

Extraversion: High scores on extraversion in people have a tendency to imprudent, outgo, have numerous social contacts, uninhibited and frequently participate in gathering exercises. Regularly, the extrovert is exceedingly social, likes get-togethers, has numerous companions, needs individuals to converse with and hates lone interests, for the sample, perusing, examining, and thinking. Rather, the common extravert lean towards fervour likes to take risks, frequently follows up on the spontaneous, and for the most part is very dynamic. Such a man might be enamoured with down to earth jokes and as a rule, has a response to anything. By differentiation, the introvert has a tendency to be peaceful, resigning and studios. The commonplace thoughtful person is saved and far off but to private companions, tends to prepare and generally doubts following up on the drive. Such people favour a very much orchestrated presence, keep their emotions all around controlled, and are more aloof than forceful. By and large solid albeit fairly critical, run of the mill contemplative people from time to time lose their temper and tend to place an extraordinary incentive on a moral standard.

Table 3.12

Traits Associated with the Three Dimensions in Eysenck's Model of Personality

Psychoticism	Extraversion	Neuroticism
Aggressive	Sociable	Anxious
Assertive	Irresponsible	Depressed
Egocentric	Dominant	Guilt Feelings
Unsympathetic	Lack of reflection	Low self-esteem
Manipulative	Sensation-seeking	Tense
Achievement-oriented	Impulsive	Moody
Dogmatic	Risk-taking	Hypochondriac
Masculine	Expressive	Lack of autonomy
Tough-minded	Active	Obsessive

Reliability of the Test

o *Internal Consistency Reliability:* Historically, the extraversion (E), neuroticism (N), and psychoticism (P) subscales of the EPQ-R have shown adequate levels of internal consistency reliability (i.e., Cronbach's Alpha). In their underlying introduction of the EPQ-R, Eysenck, Eysenck, and Barrett (1985) described reliability appraisals running from .85 to .90 and, that for extraversion, 0.85 to 0.86, for neuroticism, 0.84 to 0.88 and for psychoticism, ranging from 0.74 to 0.77. Internal consistency and inter-correlation coefficients of the scales are given in Cronbach's alpha coefficients ranged from 0.71 to 0.86, and all correlation between the scales were underneath 0.21.

o *Test-retest Reliabilities:* With one month of testing, utilizing a specimen of 159 subjects, where Psychoticism=0.72, Extraversion=0.86, Neuroticism=0.82, and Lie-scale=0.86, showing that the scales have very good compact and stable.

Reliability coefficients both inward and test-retest, and in addition mean between item correlation were observed to be satisfactory for E, N, L, and low for P.

Validity of the Test

Construct Validity: Construction of the "P" scale and its psychometric properties, the author's measures to the validity in exhibiting scale. After the long check, the result indicated significant contrasts in "P" score. Authors began with different psychotic groups tried and their "P" scores as identified with different male and female groups that experienced the test. Psychotic and poisoners, as anticipated, had the most astounding P score. Every single psychotic group was checked introverted. Psychiatric groups and criminal groups had lifted N-score, and psychiatric groups demonstrate raised L score, but prisoners did not; this proposed, they had not dissimulated; psychotics and neurotic people had higher P and N scores.

Scoring of the Test

It has 90 items surveying to quantify of 4 critical measurements, for the sample, psychoticism, extraversion, neuroticism, and lie-scale. The answer ought to put into the "Yes" Or 'No'. P- Psychoticism or Tough-Mindedness, E- Extraversion, N- Neuroticism or Emotionality, and L- Lie. The answer ought to put into the "Yes" Or 'No'. Scoring of EPQ-R should be possible physically or with the assistance of templates. 1 check for every reaction amends reactions as indicated by scoring key of EPQ-R. Those scoring high on the E scale is portrayed by extroversion, great blender, amiability, lack of caution, an inclination to end up distinctly forceful. "P" scale: psychoticism or intense mindedness, or crazy scale is, generally, considered an estimation of negative feeling. "L" scale: lie scales are built from items posting issues and practices which are either socially attractive yet rarely honed or as often as

possible rehearsed yet socially undesirable. Psychoticism is a free measurement which portrays the personality as sociality, troublesome, cruel, ailing in feeling and compassion, negative to others, sensation chasing, and preferring odd and abnormal things.

Table 3.13

Scoring Key of Eysenck Personality Questionnaire -Revised

Scales	Mode of Response	Score No. of Items	Score
Psychoticism	Yes	22, 26, 30, 33, 34, 43, 46, 50, 65, 67, 74, 76, 79, 83, 87	1
	No	2, 6, 9, 11, 18, 53, 57, 61, 71, 90	
Extraversion	Yes	1, 5, 10, 14, 17, 25, 32, 36, 40, 45, 49, 52, 56, 57, 60, 64, 70, 82, 86.	1
	No	21, 29, 42	
Neuroticism	Yes	3, 7, 12, 15, 19, 23, 27, 31, 34, 3, 38, 41, 47, 54, 58, 62, 66, 68, 72, 75, 77, 80, 84, 88.	1
	No	NIL	
Lie-Scale	Yes	13, 20, 35, 55, 78, 89,	1
	No	4, 8, 16, 24, 28, 39, 44, 48, 51, 59, 63, 69, 73, 81, 85	

7. Family Environment Scale

Choice of the Family Environment Scale: The Family Environment Scale (FES) has been broadly used in clinical settings, to encourage family advising and psychotherapy, to show clinicians and program evaluators about family frameworks and in the program. It can be utilized for individual and family directing or for research and program assessment. For the determination of the family environment

test, the researcher firstly overviewed the related literature and discovered a few tests

on the family environment. Few of them are being displayed here in a tabular shape.

Table 3.14

Exhibiting Various Tools to Measure Family Environment

Sl. No.	Tools	Authors	Populations
1.	Chinese Family Assessment Instrument (C-FAI)	Shek (2000)	Clinical/Non-Clinical
2.	Family Environment Scale (FES)	Moos & Moos (1981)	Adolescent/Adult
3.	Family Environment Scale	Bhatia & Chadha (1993)	Clinical/Non-Clinical
4.	**Family Environment Scale (FES-BC)**	**Bhatia & Chadha (2012)**	**Adolescent/Adult**
5.	The Perceived Emotional/Personal Support Scale (PEPSS)	Slavin (1991)	Family Members, Non-Family Adults, and Friends/Co-workers

Family Environment Scale (Bhatia & Chadha, 2012)

This scale was developed by Bhatia and Chadha (2012), but family environment scale

was originally developed by Moos (1974) to measure social and environmental

characteristics of all families. Family Environment is characterized by the

environments that influence the conduct and advancement of relatives (Hornby,

2005). Family environment scale created by Bhatia and Chadha (1993ed, version

2012) was utilized to evaluate the family environment of students. The scale

comprises of eight measurements like Cohesion, Expressiveness, Conflict,

Acceptance and Caring, Independence, Active Recreational Orientation, Organization

and Control. In spite of the fact that the idea of measurements has been taken from

Moos' scale, all the subscales in each measurement have been operationally characterized by specific alterations of unique definitions. Three of the first subscales have been dropped, and one new subscale has been included by the authors. This scale comprises of three measurements which have been taken from Moos' scale.

As the investigator has chosen the FES and for giving insight about the test, here the researcher has given a tool profile in the table as given beneath:

Table 3.15

Tool Profile of Scale for Family Environment

The Scale For Family Environment	
Authors	Bhatia & Chadha (2012)
Nature	Verbal
Group/Individual	Individual/ Group
Duration	20-35 Minutes
Structure	69 Items
Reliability	o Split-Half Reliability: 0.95
Validity	o Face Validity
	o Content Validity

Description of the Test

Family environment alludes to the environments or circumstances inside the receptive family that influence the association, relationship, and advancement of its individuals. It comprises of 8 measurements. Initial six measurements are relationship and personal growth measurement and another two measurements are system maintenance measurement; for example; cohesion, expressiveness, conflict, acceptance and caring, independence, active recreational orientation, organisation, and control, which are measured by the family environment scale. The measurements, alongside their operational definitions and substance, were given to eight subscales. In the wake of

rolling out the recommended improvements and adjustments, they have been again given in five different subscales. Only those dimensions and substance of the dimensions having no less than 75% agreement have been held. These are:

Relationship Dimensions

o Cohesion - level of responsibility, help and bolster relatives accommodate each other.

o Expressiveness - degree to which relatives are urged to act transparently, express their feelings and musings specifically.

o Conflict - measure of transparently communicated hostility and strife among the individuals.

o Acceptance and caring - degree to which relatives are genuinely acknowledged and how much caring is communicated in the family.

Personal Growth Dimensions

o Independence - degree to which relatives are confident and freely settle on their own choices.

o Active-Recreational Orientation- Extent of interest in social and recreational exercises.

System Maintenance Dimension

o Organisation- Degree of importance of clear association structure in arranging family exercises and obligations.

o Control- Degree of farthest point setting inside a family.

Reliability of the Test

In the present scale, author used the spilt-half reliability with the end goal of reliability estimation; the present scale has been divided into two parts. The scores of each measurement have likewise been divided into two parts. The scores for each of these parts have been correlated. From this self-correlation of the half-tests, the reliability coefficient of the entire test was assessed by utilizing the Spearman-Brown Prophecy equation. The reliability of all subscales ranges from 48-92. Overall reliability coefficient = 0.95.

Validity of the Test

In the present scale, eighteen researchers assessed the test items in both face and content validity. Only those items with no less than 75% understanding among the subscales have been held. For content validity, the measurements of the family environment have been chosen and unmistakably characterized with the end goal of measuring the particular parts of the environment. For these conclusions, eight researchers gave support in the initial step and five researchers gave support for the second step.

Scoring of the Test

FES was produced by Dr. Harpreet Bhatia and Dr. N.K. Chaddha (2012) of Psychology, University of Delhi, India in the year 1993. Subjects were requested to react to their items by denoting any of the five reactions: alternatives strongly agree, agree, neutral, disagree and strongly disagree this idea. The items were scored after gathering the information from the subjects. In this test, there are 69 items and every statement has its score. There are two types of proclamations: positive and negative

and there are five reaction alternatives: strongly agree, agree, neutral, disagree and strongly disagree. The items were scored as:

Table 3.16

Item Analysis (Family Environmental Scale)

Positive Items	Response	Negative Items
5	Strongly Agree	1
4	Agree	2
3	Neutral	3
2	Disagree	4
1	Strongly Disagree	5

On the premise of the aggregate score, the gathered data was divided into two-a high score gathering and low score a mass. These scores were then subjected to chi-square calculation. Only those items with no less than 0.05 level of essentialness were held. Subsequently, out of the 104 items held in the wake of rating, 35 items were rejected and 69 items were held in the last shape. The last scale alongside the response categories has appeared in the following table:

Table 3.17

Scoring Key (Family Environmental Scale)

Sl. No.	Sub Scales	Positive Items	Negative Items	Total Items
Relationship Dimension				
1.	Cohesion	1,9,24,37,43,55,60, 63,66,69	17,49,31	13
2.	Expressiveness	10, 25, 38 ,44,56	2,18,32,50	9
3.	Conflict	11,19,39,51,61,67	3,26,33,45,57,64	12
4.	Acceptance and Caring	8,16,36,42,48,54,59 ,62	23,30,65,68	12
Personal Growth Dimensions				
5.	Independence	4,27,46,52	12,20,34,40,58	9
6.	Active Recreational Orientation	5,13,21,28,47	35,41,53	8
System Maintenance Dimension				
7.	Organization	14	6	2
8.	Control	7,22	29,15	4

Preparation of Data Collection

The researcher got consent from the Principals of the concerned colleges with the end goal of accumulation of information. At that point, different questionnaires were appropriated individually to the subjects after getting consent of the subject. A good compatibility was built up with them before asking for them to top off the surveys. Awesome care was taken to eject any misguided judgments with respect to a proposed plan. Subjects were guaranteed of the privacy of their reactions and asked for to augment their co-operation. For making surveys considerably simpler to comprehend, the guidelines were perpetually disclosed to the subjects. Each subject, on a normal,

took around one hour and fifteen to thirty minutes to top off the surveys. At last, the questionnaires were collected from the respondents after which scoring and further research were gone ahead. However, subjects who did not fill questionnaires in a satisfactory way were excluded from the study.

Statistical Analyses

Measurements give the methodology and techniques to get-together the most extreme measure of data for a given consumption of time and different assets. Once the applicable data is obtained, the analyst obliges methods to depict and condense information with the goal that outcomes are interpretable and imparted (Mendenhall & Ramey, 1973). Investigation in behavioural sciences clarifies the way of correlation amongst behavioural and its determinants. In this circumstance, it can be expressed that, these behavioural sciences try to look at the relationships between different autonomous variables and the dependent variables.

In the present review, the investigator has used clear and also inferential statistics for the investigation of information. The quantization information was examined by utilizing Statistical Package Social Science (SPSS) software. The reason of using of statistical methods can be shown as taking after:

Chart 3.3

Exhibiting the Reasons of utilizing of the Statistical Analysis
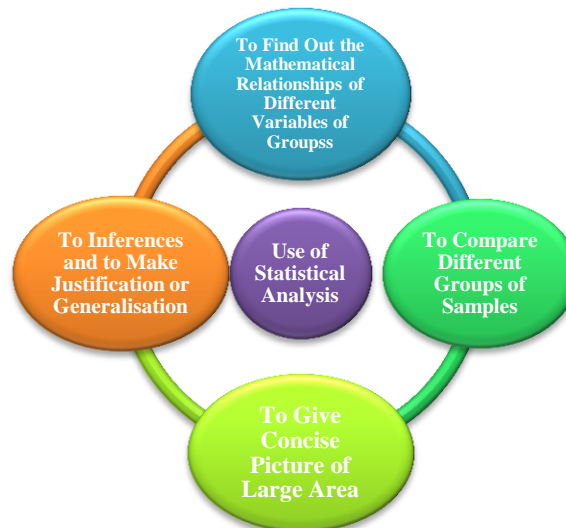
In order to mastermind and explore the quintessence from gathered information and to make information significant, the accompanying statistical methods were utilized:

Chart 3.4

Types of Statistical Techniques
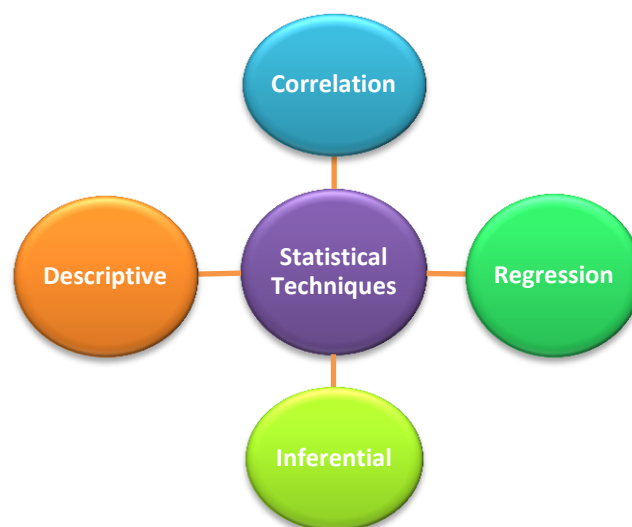
Descriptive Statistics

Certain descriptive statistics were figured so as to portray the nature and commitment of scores acquired through different scales:

Mean

In the present research, mean value was registered as the measure of central tendency of the scores of different variables of suicidal ideation, hopelessness, loneliness, depression, personality, and family environment endearing among subjects and to portray the average scores of different groups and in addition to manage target which goes for concentrating the pattern of previously mentioned factors among subjects.

Percentage

The rate was processed with a specific end goal to highlight the dissemination of subjects into various classes of suicidal ideation, hopelessness, loneliness, depression, personality, and family environment, and furthermore, to discover the most well-known style of suicide ideation.

Mode and Median

Mode and Median were computed to ensure regularity in the dissemination of the factors of the review as it is trusted that in a typical dispersion Mean, Median and Mode lie on a similar point.

Standard Deviation

The standard deviation of the scores of factors was figured to concentrate the difference of scores of different variables of suicidal ideation, hopelessness, loneliness, depression, personality and family environment. This was likewise useful in the calculation of other statistical measures.

Correlational Analysis

The correlation was computed to see the relationship between variables and also to see whether the variables of hopelessness, loneliness, depression, personality dimensions and family environment dimensions relating to the suicidal ideation.

Regression Analysis

Various Regressions were figured to see the relationships between the independent factors and dependent variable and furthermore to see whether hopelessness, loneliness, depression, different dimensions of personality and family environment filled in as the determinant of suicidal ideation.

Inferential Statistics

In the present review with a specific end goal to test the different hypotheses of the review and in addition to make certain determination taking after inferential insights, were utilized:

t-Test

A t-test was connected to see the significant differences in male and female subjects with reference to variables like suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality and family environment.

Coefficient of Variance

ANOVA was utilized to see the way of the group as far as homogeneity and heterogeneity is concerned. It was likewise used to see the relative changeability of the different groups.

Graphical Representation

The graphical portrayal was done to demonstrate the obtained results because of different groups. The accompanying diagrams were utilized to highlight the acquired outcomes:

Pie-Diagram

Pie-graph was utilized to divide the entire space of factors; age, education, semester, social group, community, religion, family member, family type, family occupation and parent's income evaluate to identify their frequency and percentage.

Bar Diagram

Bar Diagram was utilized to represent the distinction in the mean on suicidal ideation, hopelessness, loneliness, depression, personality dimension, and family environment dimensions scores of male and female students.

Overview of the Chapter

The reason for this chapter was to represent the exploration method for this review, clarify the sample choice, depict the technique utilized as a part of the determination of the test and accumulation the information, and give a clarification of the factual systems used to break down the information. A consecutive timetable of the means was given and the stratified random sampling method was utilized as the testing technique to choose the examining units to research the pervasiveness of hopelessness, loneliness, depression, personality, family environment and suicidal ideation among students of various colleges. The tools such as: Personal Data Sheet, Back Scale for Suicidal Ideation (BSS), Beck's Hopelessness Scale (BHS), Loneliness Scale (UCLA), Beck Depression Inventory (BDI-II), Eysenck's

Personality Questionnaire-Revised (EPQ-R), and Family Environment Scale (FES) were utilized for measuring the suicidal ideation separately. Descriptive Research (Frequency, Percentage, Mean and Standard Deviation), Correlational Research (Correlation, Regression), Inferential Statistics (t-Test, and ANOVA) and graphical representation (Bar-Diagram and Pie-Diagram) were utilized to analyse the information to drive valid conclusions.

The next chapter will integrate the hypotheses results and discussions of the research.

Analysis and Interpretation of the Data

After gathering data, analysis and interpretation are the foremost and essential step of the research work. Therefore, it is the mandatory duty of the investigator to show her full attention to analysis and interpretation of the accumulated data. In fact, the raw scores are of no value unless they are analyzed and interpreted. Without interpreting the data collected through the tools, the investigator cannot be ready to accomplish her objectives. In keeping with Mouly (1978, p.29), "Among the more common errors in the interpretation of results of research are failing to see the significance of data, to see the limitations of research design, overlooking contrary evidence, mistaking, coincidence for cause and effect and reversing the effect and cause. The best safeguards of such errors are common sense and insight into the field". Thus, it is necessary to induce a meaningful image out of the data collected by the investigator for the current study. Analysis of data means that finding out the organized data as to find existing fact. The data is additionally studied to explore the new facts. An analysis needs an alert, versatile and open mind. It involves breaking down of the prevailing complicated issue into easy part and putting their easy parts along in new arrangement for the aim of the interpretation. The main purpose of the interpretation is to reach for broader which means of the desired answer (Cohen & Manion, 1980).

Value of research depends largely on the degree of intellect that its results are analyzed and taken for drawing sound conclusions and valid generalizations. Organization of data includes redaction, classifying and tabulating data whereas redaction implies checking of gathered data accuracy, quality and completeness. Classification refers to dividing the information into completely different classes, categories and groups. Tabulation could be a method of transferring information, classified consistently examined. Analysis of knowledge suggests that learning the

organized material so as to get inherent facts. The data are studied from as several angles as potential to explore the new facts. The aim of interpretation of the data is to summarize the whole observation in such a way that they yield an answer to the research problem, whereas the aim of interpretation is to research for the broader which means of those answers by linking them to the other accessible data. Both these purpose govern the complete analysis method.

The present study was conducted with the aim of examining the suicidal ideation of undergraduate college students in reference to their hopelessness, loneliness, depression, psychoticism, extraversion, neuroticism and family environment dimensions. The data of 400 (200 male and 200 female) students was analysed by calculating "coefficient of correlation" (r), "regression" "t" test and "main effect" besides the descriptive statistics (frequency, percentage, mean and standard deviation).

Statistical Interpretation Section: The analysis of data and interpretation of results have been given in four sections:

Section I: Descriptive Analysis

The aim of descriptive analysis was to find out the nature of socio-demographic variables under study with gender, age, semester education, stream, social group, community, religion, family type, family members, family occupation and family income, in case of total sample, males and females.

Section II: Correlation

The aim of correlation analysis was to find out the relationship of dependent variable 'suicidal ideation' with the independent variables of hopelessness, loneliness,

depression, different dimensions of personality and family environment in case of total sample, males and females.

Section III: Regression Analysis

The aim of regression analysis was to find out the predictors (contributors) of criterion (dependent) variable 'suicidal ideation' from among the independent variables of hopelessness, loneliness, depression, different dimensions of personality and family environment in case of total sample, males and females.

Section IV: Inferential Analysis

The aim of inferential analysis was to find out the gender differences on the variables of suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality and family environment. And also the main effect of demographic variables on independent variable of suicidal ideation.

A detailed description of section-wise analysis and interpretation is being given as follows:

Section I: Descriptive Analysis

Socio-Demographic Variables

Initially, questionnaires were distributed individually among 480 respondents. However, out of 480 respondents, 92% of the respondents filled and returned valid questionnaires. Ultimately, the researcher collected valid questionnaires from 400 respondents. There were males (50%) and females (50%) within the sample that reflects the gender distribution among the overall population. The mean age of the participants was 20.39 (SD =1.52), which ranged from 17 to 26 years. The study sample was composed of 200 male and 200 female undergraduate college students.

The present study tried to understand the factors influencing college students for developing suicidal ideations by examining the assorted demographic variables. Demographic variables were divided into 2 categories: Personal demographic variable (academic and personal affairs) and Family related demographic variable (religion, social groups, family relationship, family income, types, and occupation). The tables are highlighting the foremost widespread ideations of suicide. These tables have pointed out the proportion among the various demographic categories of male and female undergraduate college students. These tables are also highlighting the frequency and percentage of students being used to different thoughts of suicidal ideation.

Gender-wise Distribution

Present study found females are more seemingly possess suicidal ideation compared to males; it is similar to the study of Birbal et al. 2009. Suicide is the seventh leading cause of death for males and fourteenth leading cause for females Firearms are the foremost normally used technique of suicide among males 56.9% (World Health Organization, 2012). Globally, attempted suicide is commoner in women and completed suicide is commoner in men (Phillips, Yang, Li & Li, 2004). In Chinese women, however, the suicide rate is close to double that of women elsewhere (Phillips, Yang Li & Li, 2004; World Health Organisation, 2012). Men normally use a lot of deadly modes and set up the act more meticulously to avoid detection. In distinction, women normally use less fatal modes and are a lot of impulsive, less strategically, and a lot of doubtless to be found and saved. The male and female suicide ratio is in Australia (3.8%), Canada (3.9%), the United States (4.1%), and the UK (3.4%), severally (Desjarlais, Good, & Kleinman, 1995) and it is lower in Asian countries per 100,000 (Lester, 1997).

Though some Indian studies have found a higher incidence of suicide in men than in women (Gururaj, & Issac, 2001), others have found the contrary (Banerjee et al., 1990). The male: female suicide ratio was 1.78 in India in 2008 and 2009. In youngsters up to age 14 years, the ratio was 1.04; that is, nearly equal between the sexes (Accidental Deaths and Suicides in India, 2007). In young men and women in 1991-1997, the ratio was 1.3, different with the male preponderance in developed countries (Mayer & Ziaian, 2002). The reasons for larger female suicide completion in India may be sociocultural. The common repetition of arranged marriages in India result in social and family pressure for the woman to remain married even in an abusive relationship; this might increase the chance of suicide in women (Gururaj, Issac, Subbakrishna & Ranjani, 2004). Additionally, stresses associated with dowry demands might drive young brides to suicide (Kumar, 2004). Though attempted suicide was as high as 1.2 times higher in women relative to men in some studies (Suresh, 2004), other studies showed a male predominance, male: female ratio starting from 1.13:1 (Das, et al., 2008) to 1.63:1 (Latha, Bhat, & D'Souza, 1996). These variations could also be reconciled by an appreciation of social changes in the Asian country, with a shift toward nuclear families and therefore the cultural emphasis on the male stereotype that the individual tries to fulfil in vain. While the male to female sex ratios in suicide is similar in several Asian and Western countries, there are some vital exceptions. China has reported equal or higher numbers of female suicides and suicide attempts (Phillips, Li, & Zhang, 2002) and a close to equal sex ratio have also been discovered in India (Mayer, & Ziaian, 2002).

Age-wise Distribution

Age of the respondents is one among the foremost important characteristics in understanding their views concerning the actual problems. By and large, age indicates

the level of maturity of people therein sense 'age' becomes additionally important to examine the response.

Table 4.1

Frequency and Percentage of Age of Undergraduate College Students (N=400)

Categories (Age)	Male (N=200)	Female (N=200)	Total (400)	
	Frequency	Frequency	Frequency	Percentage
16-19	50	64	114	28.5
20-23	142	134	276	69
24-27	8	2	10	2.5

Figure 4.1: Age wise Percentage of Undergraduate College Students (N=400)
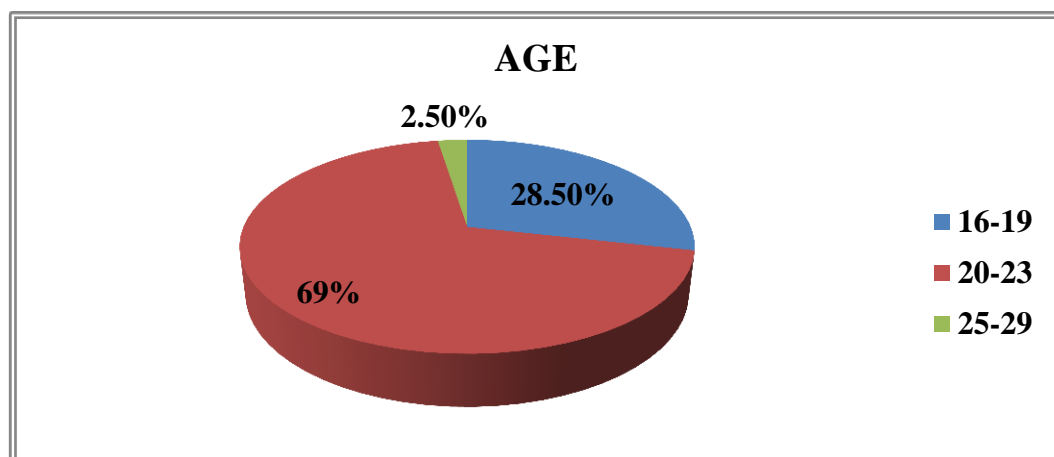
Table 4.1 represents the age frequencies and proportion of male and female undergraduate college students with the controlled age range of demographic variables. In this row, the other factors are adjusted with one another in demographic variables. Out of four hundred male and female students between the age of 16-19 years, frequency and percentage is 114 (28.5%), the age category of 24-27 years is 10 (2.5%) and the most of the students are falling in 20-23 years age groups and their frequency percentage is 276 (69%).

Suicide is that the second cause among persons aged 15-34 years (Centers for Disease Control and Prevention: CDCP, 2013). An Indian study reported that the suicide rate was highest within the 15-29 years age group (38 per 100,000 population) followed by the 30-44 years group (34 per 100,000 population). Other studies in India conjointly indicate that young adults are at magnified risk, with ages 20-24 years followed by 25-29 years showing the highest rates of suicide in a psychological autopsy study (Khan, Anand, Devi & Murthy, 2005). Two-thirds of women who completed suicide were above 25 years (Banerjee et al., 1990; Nandi et al., 1979). This trend is additionally seen in attempted suicides. In one study, the mean age of attempters was 25.3 years (Srivastava et al., 2004). Suicidal ideation was conjointly more common within the 16-45 years' age group in an exceedingly study of suicidal ideators in a general hospital setting (Unni & Mani, 1996).

Educational Semester -wise Distribution

A semester is meant for six months, as it comes from Latin word Semesters, "of six months". Education is one amongst the foremost necessary characteristics which may have an effect on the person's attitudes and also the way of looking and understanding any particular social phenomena. In a way, the response of an individual is probably going to be determined by his educational status and thus, it becomes imperative to understand the educational background of the respondents. Therefore, the variable 'Educational Level' was investigated by the researcher and also the data bearing on education is given in the following Table. The present study conjointly focuses on how the semester effect varies in terms of a suicidal ideation of the undergraduate college students.

Table 4.2

Frequency and Percentage of Semester-wise Education of Undergraduate College

Students (N=400)

Semester	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
First Sem	74	61	135	33.8
Second Sem	30	32	62	15.5
Third Sem	41	48	89	22.3
Fourth Sem	39	43	82	20.5
Fifth Sem	11	14	25	6.3
Sixth Sem	5	2	7	1.8

Figure 4.2: Semester wise Percentage of Undergraduate College Students (N=400)
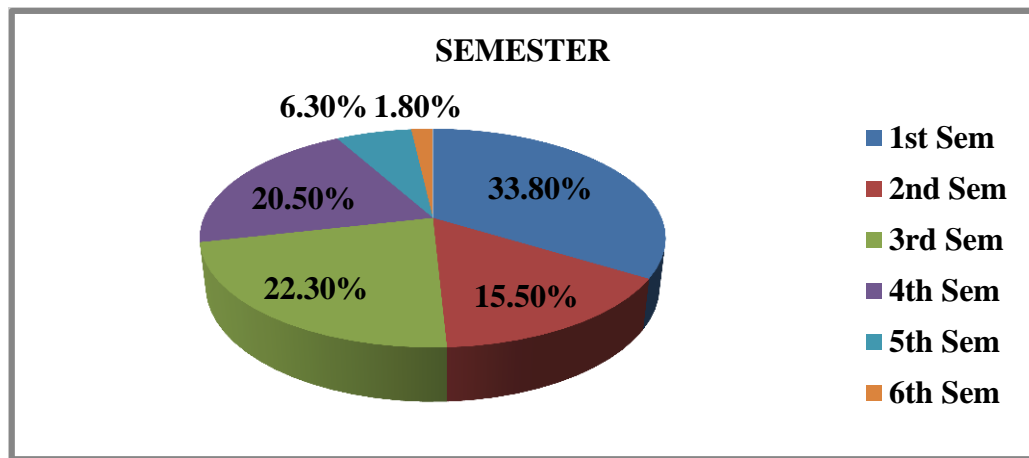
Table 4.2 represents the education in semester frequencies and proportion of male and

female college students with controlled semester range of demographic information.

Out of the 400 male and female college students chosen from 6 different semesters of

undergraduate courses, frequency and percentage of students from the first semester is

135 (33.8%), frequency and the percentage from second semester is 62 (15.5%),

frequency and percentage of students from third semester is 89 (22.3%), frequency

and percentage of students from fourth semester is 82 (20.5%), frequency and

percentage from fifth semester is 25 (6.3%), and lastly frequency and percentage of students from sixth semester is 07 (1.8%). Out of these, maximum number of the students was from first semester followed by other semesters of the undergraduate course.

Educational Stream-wise Distribution

Education is one among the most powerful means for empowerment and for a sustained improvement in well-being of individuals. Education makes the person tuned in to his conditions and prepares him to take up the challenges in life. An individual's perceptions concerning the deterioration of his educational stream are therefore becoming necessary to assess the impact of any external development.

Table 4.3

Frequency and Percentage of Educational Stream of Undergraduate College Students

(N=400)

Categories (Stream)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
Arts	90	107	197	49.3
Science	76	69	145	36.3
Commerce	34	24	58	14.5

Figure 4.3: Stream wise Percentage of Undergraduate College Students (N=400)
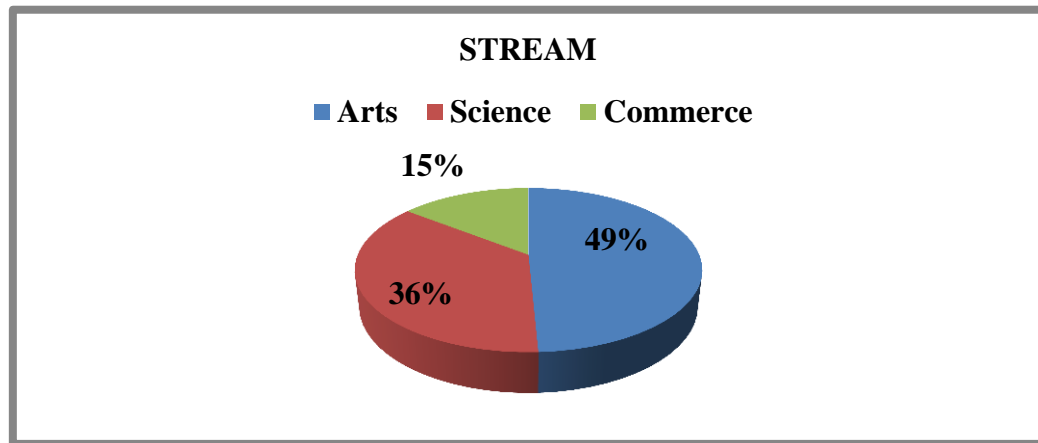
Table 4.3 represents the education in stream frequencies and percentage of male and female college students with controlled stream range of demographic information. Out of 400 samples, most of the students fall under the Arts stream and their frequency and percentage is 197 (49.3%), from science stream, the frequency and percentage of students is 145 (36.3%), and finally from commerce stream, the frequency and percentage of students is 58 (14.5%). Therefore, as it can be observed, most of the students are falling in Arts stream followed by students from other streams.

The National Crime Record Bureau (NCRB) data reveals that 25.3% of suicide victims were educated up to primary level, 23.7% had a middle-school education, 21.4% were illiterate, and 3.1% were graduates or postgraduates (Accidental Deaths and Suicides in India, 2007). These percentages, however, could reflect the proportion of persons with completely different educational attainment in India. In one study on attempted suicide in India, it was reported that 55.5% were uneducated (Srivastava et al., 2004). In another study, 54 of suicide attempters had received high-school education or higher (Latha, Bhat, & D'Souza, 1996). Women

attempting suicide had a lower educational status compared to men (Sudhir, Mohan, Ranjith, & Chandrasekaran, 2006).

Social Group-wise Distribution

Indian society is historically compartmental and stratified one. The channels of communication among numerous social groups were not opened and therefore the exchange of ideas and views were not potential. With the passage of time, there was educational advancement of the individuals followed by modernisation. The social group equations are now changed and became a lot of cordial. In this section, it was absolutely necessary to research the social group variable of the respondents. The information pertaining to social groups of the participants is presented in following table.

Table 4.4

Frequency and Percentage of Social Group of Undergraduate College Students

(N=400)

Categories (Social Group)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
General	17	26	43	10.8
OBC	85	83	168	42
SC	17	11	28	7
ST	81	80	161	40.3

Figure 4.4: Social-Group wise Percentage of Undergraduate College Students

(N=400)
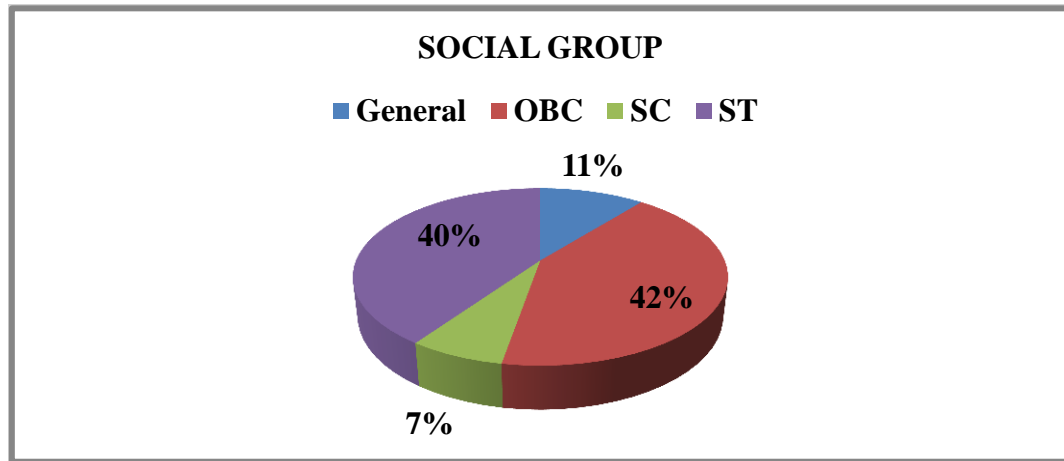
Table 4.4 represents the social groups' frequencies and proportion of male and female undergraduate college students. In this row, the other factors are adjusted with one another in demographic variables. As per the Indian government rules of social group category, present study accumulated four different social groups of Sikkim college students from the 400 male and female samples: General, OBC, SC, and ST. Out of these 400 undergraduate college students, frequency and percentage of students from General category were 43 (10.8%), frequency and the percentage of students from OBC were 168 (42%), frequency and percentage of SC students were 28 (7%), whereas frequency and percentage of ST group students were 161 (40.3%). It can be observed that maximum numbers of participants were from the social group of OBC and ST social groups.

Nath, Paris, Thombs, and Kirmayer (2012) suggested that suicide ideation was foreseen by female gender, economic stress, stress because of life events involving religious violence within the community, and life events involving caste conflicts or caste discrimination. However, economic stress and trying the experience of religious conflict continued to be significantly related to life time suicide attempt. Furthermore,

in one study by Lamis and Lester (2012), race is a moderator to the depression suicidal ideation for European American than African American women.

Community-wise Distribution

The alarming rise of fundamentalism could be a great concern to the nation. Majority the states of our country suffer due to spiritual intolerance. Inter-communal relationship suffers a breach in this vitiated atmosphere. In our country unity, integrity, and commonality are now at stake. It hampers the growth of the state at each step. If the country needs to make sound progress inside the socio-monetary, political and scientific spheres, communal harmony must be ensured as a permanent function of lifestyles. Evil forces seeking to break this ought to be overwhelmed at any cost. In Sikkim state, there different communities but the present study focused on three different majority communities, that is, Nepali, Lepcha, and Bhutia, whereas Limbo, Gurung, & Sherpa have been clubbed in "Others" category. The variable 'community' was investigated by the researcher and the data is presented in the following table.

Table 4.5

Frequency and Percentage of Communities of Undergraduate College Students

(N=400)

Categories (Community)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
Nepali	108	125	233	58.3
Lepcha	28	37	65	16.3
Bhutia	29	9	38	9.5
Others: (Limbo, Gurung, Sherpa)	35	29	64	16

Figure 4.5: Community wise Percentage of Undergraduate College Students (N=400)
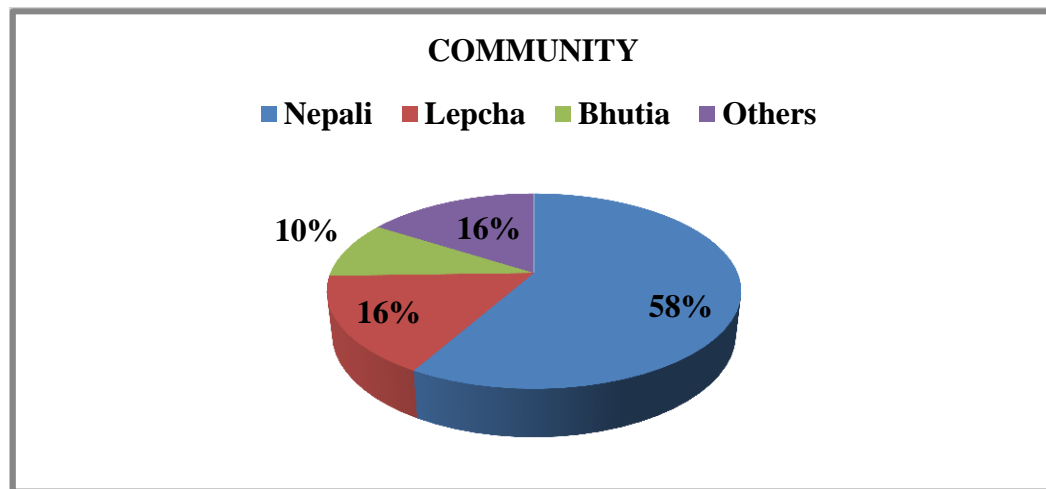
Table 4.5 represents the community frequencies and proportion of male and female college students with controlled community range of demographic data. In this row, the other factors are adjusted with one another in demographic variables. Out of these 400 undergraduate college students, frequency and percentage of students from Nepali community was 233 (58.3%), frequency and percentage from Lepcha community was 65 (16.3%) frequency and percentage from Bhutia community was 38 (9.5%) whereas frequency and percentage of students from other categories (i.e. Limbo, Sherpa, and Gurung) was 64 (16%). It can also be observed that out of 400 undergraduate college students participated in the study, maximum students were from Nepali and Lepcha community. Few researchers have given their view points on religious belief and suicidality among college students which are as follows:

Though suicide is an individual's action, it affects a person's entire social group network. In some cases, suicide is the result of a decreasing social network no matter home country or religious affiliate (Horton, 2006; Young, Sweeting, & Ellaway, 2011). Some cultures generally stress temperament that may contribute to increased risk for some college students. Pressure to stand out and be excellent has

been connected to an increasing number of suicide attempts, most notably among college students and celebrities (Flett, Hewitt & Heisel, 2014). For men and women college students who feel the cultural pressure to be good, there is an increase in suicidality if temperament is paired with one amongst the following: 1) increased stress, owing to daily activities, 2) an increase in educational struggles, and 3) a poor social network (Flett, Hewitt & Heisel, 2014). Even for college students who do not strive for perfection, there is a magnified risk of being a region of the college community. Students were shown to possess a 15-18% increase in suicidality for having low involvement in their college community (Young, Sweeting, & Kirmayer, 2011). Whereas being religious is typically thought of a protecting issue, attending a school of various religious backgrounds increased a student's risk of suicide by 2-4 times compared to the general student body.

Religion-wise Distribution

India, called as the land of spirituality and philosophy, was the origin of some religions, which even exist today in the world. People from the various religions and cultures of India, unite in a chord of brotherhood and amity in this fascinating and diverse land. Religion could play a big role in the identity of an individual. A key element of an individual's culture, religion can act both as a shoulder against emotional distress and additionally as a precipitant. Therefore, the variable religion was investigated by the researcher and also the information is conferred in the following table.

Table 4.6

Frequency and Percentage of Religion of Undergraduate College Students (N=400)

Categories (Religion)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
Hindu	95	110	205	51.3
Buddhist	69	58	127	31.8
Christian	33	27	60	15
Others:				
(Yumaism &	3	5	8	2
Limboo)				

Figure 4.6: Religion wise Percentage of Undergraduate College Students (N=400)
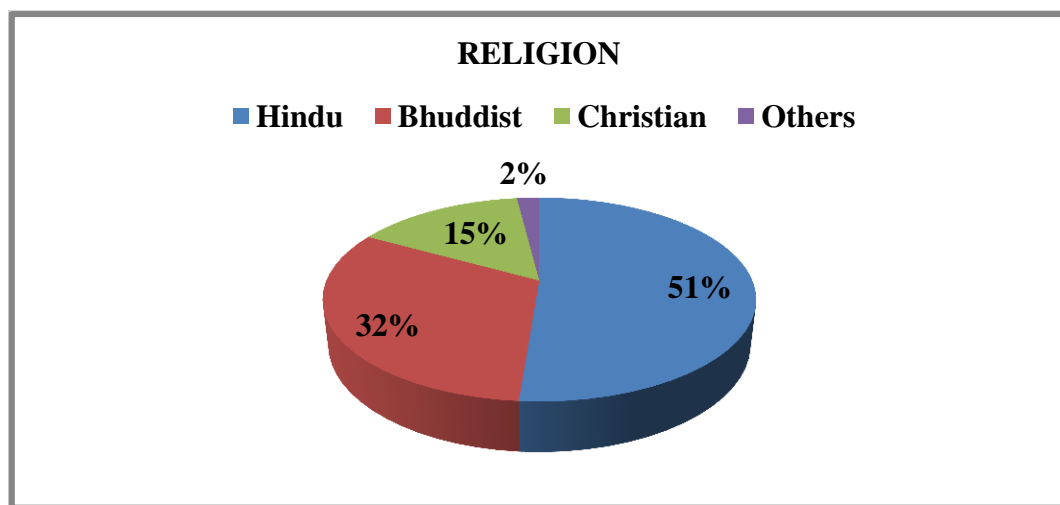
Table 4.6 represents frequencies and percentage of undergraduate male and female college students on religion. During this row, the other factors are adjusted with one another in demographic variables. As far as religion is concerned, out of 400 samples, most of the students fall under the Hindu and Buddhism religion. Frequency and percentage of Hindu was 205 (51.3%), students from Buddhism were 127 (31.8%)

followed by Christians who were 60 (15%), and others (i.e., Yumaism & Limbo) were 8(2%).

The diverse philosophical, religious and spiritual traditions in Asia and their associated cultural ideologies and practices additionally influence the perception of suicide and propensity for suicidal behaviors. Most research suggests that suicide is less dominant wherever the predominant religion has strong sanctions against suicide. For example, in the Islamic country of Pakistan, suicide rates are abundant lower than its sub-continental neighbours (Khan, & Reza, 2000). In other regions, bound sorts of culture-specific suicides that were socially acceptable could be sanctioned at some point may still have an effect on suicide statistics. As an example, the tendency to suicide by a fireplace, a comparatively common technique in Asian nation (National Crime Records Bureau, 2006) will be connected to *sati*, a Hindu tradition sanctioning the self-immolation of a woman on her dead husband's funeral pyre (Bhugra, 2005). Another sort of culture-related suicide, *hara-kiri*, or a lot of properly *seppuku,* could be an ancient type of suicide committed by warriors in feudalistic times in Japan (Takahashi, 1997). Such suicides are rare in modern world. However, it is doable that persistent cultural ideas regarding the worth of co-operation, social responsibility and social 'face', increase the propensity for suicidal behavior in response to shame and failure.

Family Type-wise Distribution

The type of family in which someone lives and is liberal, has large importance when making a decision about his values, beliefs and behaviour patterns that are possible to affect his or her attitudes towards a specific problem. Therefore, the family sort plays its own role in giving the response of an individual and thus it was thought important to understand the type of family of the respondents. A *nuclear family* is a group of

family that consisting of two parents and their kids (one or more). A *joint family* that includes two or more generations of kindred related through either the paternal or maternal. An *extended family* is a family that is beyond the nuclear family, residing with parents, aunts, uncles, and cousins, altogether living closely or within the same house. *Others* mean who the orphan kids are staying either with their relatives or in a social organization of the government or orphanage. Data associated with the family type is presented in the following table:

Table 4.7

Frequency and Percentage of Family Type of Undergraduate College Students

(N=400)

Categories (Family Type)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
Joint	98	84	182	45.5
Nuclear	65	87	152	38
Extended	23	23	46	11.5
Others (Orphan)	14	6	20	5

Figure 4.7: Family Type wise Percentage of Undergraduate College Students

(N=400)
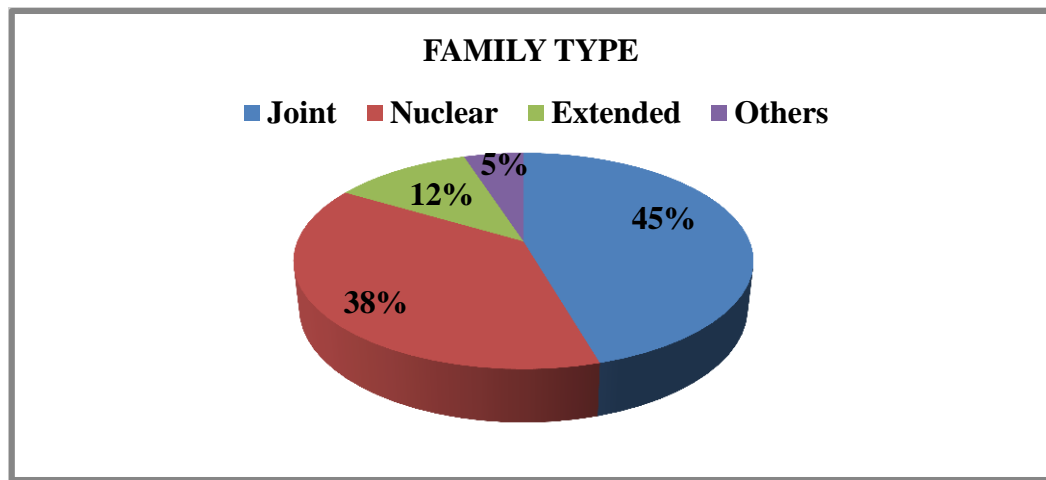
Table 4.7 represents the family type frequencies and share of male and female collegian with controlled family type range of demographic information. In this row, the other factors are adjusted with one another in demographic variables. As far as the family type is concerned, out of 400 undergraduate college students, frequency and percentage of students from joint family were 182 (45.5%), students from nuclear family were 152 (38%), from extended family 46 (11.5%) and 20 (5%) of the undergraduate college students were from other categories (i.e. orphan). It can be observed from the table that most of the students participated in the study fall under the joint and nuclear family type. This shows the increasing trends in the changing families from joint family to the nuclear family and therefore the change in the family system can be attributed to the processes of urbanization, industrialization, migration, and modernization.

India has witnessed an amendment in family structure throughout recent decades, with more people moving out of joint and extended families into nuclear family structures. The effect of this alteration on suicide rate has not been systematically studied. Variable leads to analysis might faucet a secular trend. The

majority of suicide attempters were from nuclear families (Srivastava et al., 2004; Latha, Bhat & D'Souza, 1996) presumably reflective of the role of social integration, although earlier study showed that more suicide attempters came from joint families (Adityanjee, 1986). A study on burn victims found that being in a joint family was a risk issue for dowry deaths (Gupta & Srivastava, 1998).

Family Member-wise Distribution

The association of an individual with the family shows the degree of his time investment with members' problems and issues. The social interaction of family can also mould the personality of an individual. The personal characteristics of an individual are closely related to the membership and activeness with family. Keeping this in mind, the variable of family members was investigated and the information is presented in the table.

Table 4.8

Frequency and Percentage of Family Member of Undergraduate College Students

(N=400)

Categories (Family Members)	Male (N=200)	Female (N=200)	Total	
	Frequency	Frequency	Frequency	Percentage
0-2	12	15	27	6
3-5	165	167	332	83
6-8	23	18	41	10

Figure 4.8: Family Member wise Percentage of Undergraduate College Students

(N=400)
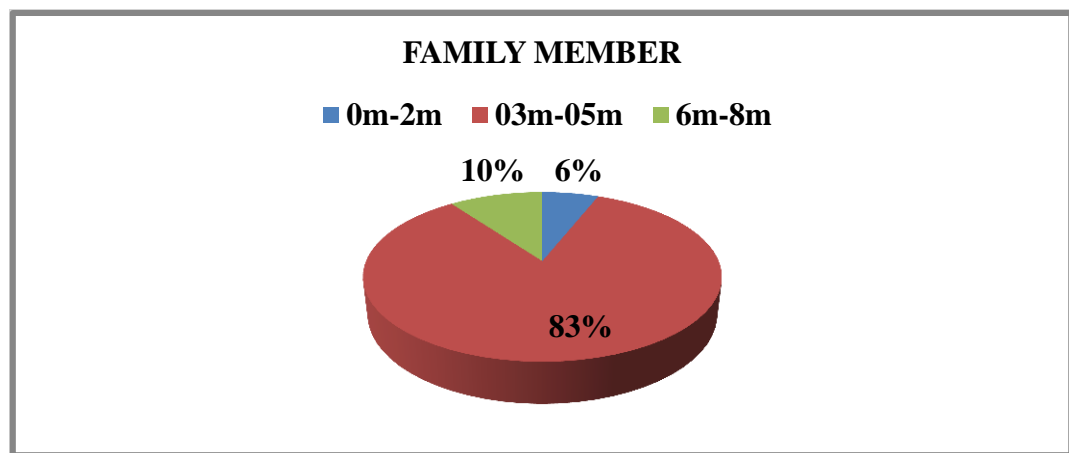
Table 4.8 represents the family member frequencies and proportion of male and female collegian with controlled family member range of demographic data. In this row, the opposite factors are adjusted with one another in demographic variables. Out of 400 undergraduate college students, frequency and percentage of students those who have 0-2 members in the family were 27 (6%), students having 3-5 family members were 332 (83%) and students having 6-8 family members were 41 (10%). It can be observed that maximum number of undergraduate students had family members of 3 to 5.

Since the well-being of the community and family are of central importance in Asian cultures, upheavals in communal or family life have a more pronounced impact on the psychological state in our societies. Disturbances in family life are related to higher risk for suicidal behaviors of adolescents in China (Liu & Tein, 2005). In India, unspecified family issues were cited because of the leading reason behind suicide (National Crime Records Bureau, 2007). Other stressful life events like socio-economic and political changes, cultural tensions as well as changes in ancient values

systems have also been linked to suicidal behaviours (Chan, Hung, & Yip, 2001; Lam et al., 2004; Vijayakumar, Nagaraj, Pirkis, & Whiteford, 2005).

Family Occupation-wise Distribution

The occupation of a person is a very important factor in the life in achieving the economic well beings. It is quite possible that the views and perceptions of persons are affected by the changes in occupations and also the way the person socializes with his or her family. Therefore, the variable 'occupational changes' were investigated and the data regarding an equivalent is presented in the table. In the present study, the researcher has analyzed family occupation of parents of all 400 samples, and the occupation category like the private job, government job, business, farmer, retired and others (seasonal workers) were identified.

Table 4.9

Frequency and Percentage of Family Occupation of Undergraduate College Students

(N=400)

| Categories (Family Occupation)	Male (N=200)	Female (N=200)	Total	
	Frequency	Percentage	Frequency	Percentage
Private skilled job	30	30	60	15
Government job	52	41	93	23.3
Business	26	30	56	14
Farmer	85	94	179	44.8
Retired	1	2	3	0.5
Others (Seasonal Workers)	6	3	9	2.5

Figure 4.9: Family Occupation wise Percentage of Undergraduate College Students

(N=400)
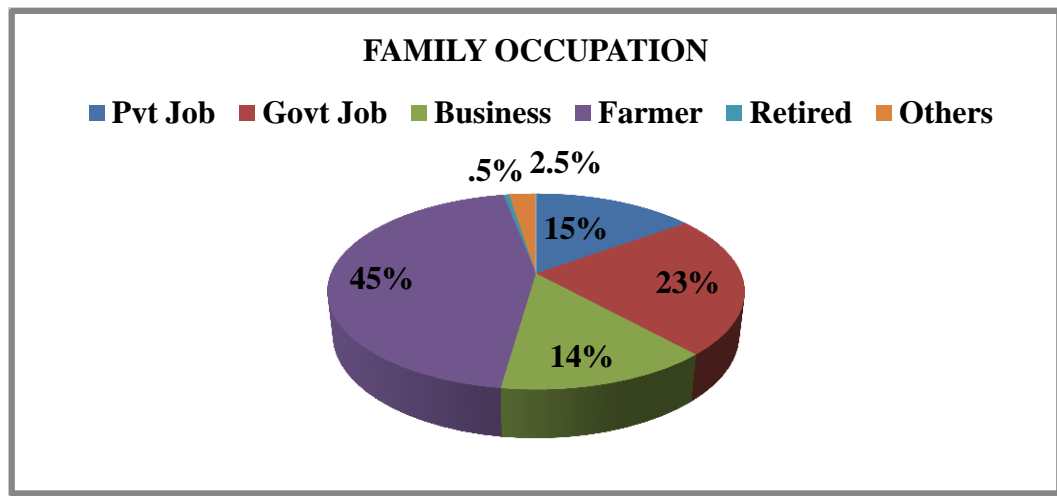
Table 4.9 represents the family occupation frequencies and share of male and female college students with controlled family occupation range of demographic data. In this row, the other factors are adjusted with each other in demographic variables. As it can be observed from the table that out of 400 participants, frequency and percentages of students' parents in private jobs were 60 (15%), followed by 93 (23.3%) in government job, 56 (14%) of them had business, 179 (44.8%) parents were farmers, 3 (0.5%) of the parents were retired from services, and lastly 9 (2.5%) of the parents of the students were seasonal workers. All of the above, the present research found out that parents of the maximum number of undergraduate students were farmers compared to government job. This shows that the agriculture as occupation continues to be a significant sector of employment for the unskilled and less educated people in the rural and semi-urban areas.

Monthly Income-wise Distribution of Family Member/s

Income of an individual plays a vital role in shaping the economic conditions of the family which in turn is likely to possess concerning the responses about a problem

exhibit to him. The investigator, thus, tried to explore the monthly income of the family members (parents) and the information associated with the financial gain of the family is presented in the following table.

Table 4.10

Frequency and Percentage of Family Income of Undergraduate College Students

(N=400)

| Categories (Family income in Rs.)	Male (N=200)	Female (N=200)	Total (N=200)	
	Frequency	Frequency	Frequency	Percentage
0-20,000	148	159	307	76.8
20,001-40,000	33	30	63	15.8
40,001-60,000	13	5	18	4.5
60,001-80,000	3	3	6	1.5
80,001-1,00000	3	3	6	1.5

Figure 4.10: Family Income wise Percentage of Undergraduate College Students

(N=400)
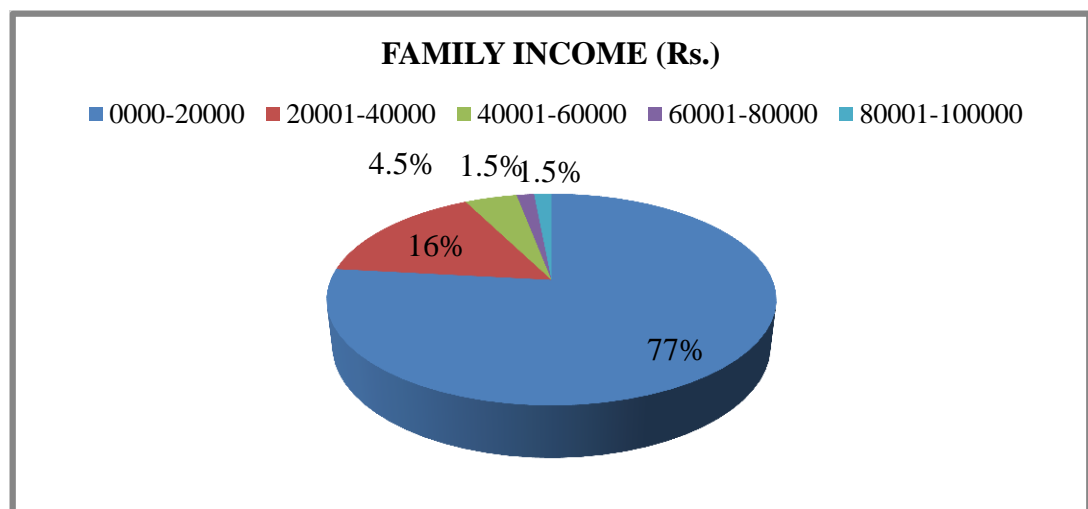
Table 4.10 represents the family income frequencies and share of family members of male and female college students with the controlled family income range of

demographic data. In this row, the other factors are adjusted with one another in demographic variables. Out of 400 undergraduate college students, frequency and percentage of monthly income of the family members of the students in the category of Rs.0-20,000 were 307(76.8%) followed by 63(15.8%) family members had monthly income of Rs.20001-40000; 18(4.5%) family members of the students had monthly income of Rs.40001-60000; 6(1.5%) family members of the students had monthly income of Rs.60001-80000; whereas only 6(1.5%) family members of the undergraduate students had monthly income of Rs.80001-1,00000. Further, the table indicates that monthly family income of a large number of undergraduate students were Rs.0-20,000.

The sociological theory of suicide emphasizes social integration; a theme reflected in John Donne's (1923, p.98) "No Man is an Island". People who are well integrated with their families and community have a good support system throughout crises and protect them against suicide (Martin & White, 1994).

Section II: Correlation Analysis (for Total Sample)

The main objective of the analysis was to identify the correlates of suicidal ideation among undergraduate college students. Inter-correlations among the tested variables included in the current study were computed by making use of Pearson's product-moment method. This was done after ascertaining that the data fulfilled the main requirements underlying the use of Pearson's Inter-correlations (r) separately for two groups comprising of males and females, are shown in Tables 4.11. For the sake of convenience, the inter-correlations have been discussed under the normal grouping of various tested variables:

Hypothesis-01: A significant correlation would exist between suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality and family environment among undergraduate college students.

An analysis of Table 4.11 reveals the relationship between suicidal ideation and hopelessness. The calculated "r" value (r=.08 $p \leq 0.05$) shows the insignificant correlation between suicidal ideation and hopelessness. This also shows that as the score of hopelessness will increase or decreases, the scores of suicidal ideation do not have any effect because the college students are more involved with open personal romantic relationships which give extra companion to them to reduce their hopelessness. It means the directional hypothesis 01 "there would exist significant relationship between suicidal ideation and hopelessness among undergraduate college students" is not accepted. To support the present result, few previous researches are discussed below:

Alexandrino-Silva et al. (2009) did a similar study on the presence of suicidal ideation among medical, nursing and pharmacy students and found an equivalent as per current analysis. There was additionally no distinction relating to the presence of hopelessness and suicidal ideation among medical students as compared to nursing and pharmacy students ($p = 0.125$).

Table 4.11

Mean, SD and Coefficient of Correlation Between Suicidal Ideation, Hopelessness, Loneliness, Depression, Personality Dimensions (Psychoticism, Extraversion and Neuroticism) and Dimensions of Family Environment (Cohesion, Expressiveness, Conflict, Acceptance and Caring, Independence, Active Recreational Orientation, Organization & Control) among Undergraduate College Students (N=400)

Variables	Mean	SD	SI	H	L	D	P	E	N	CO	EXP	CON	A&C	IND	ARO	OR	C
Suicidal Ideation	5.06	7.12	1														
Hopelessness	11.96	2.58	0.08	1													
Loneliness	23.23	9.17	.28**	.19**	1												
Depression	17.68	10.12	.43**	.16**	.46**	1											
Psychoticism	7.81	3.36	.21**	.20**	.17**	.17**	1										
Extraversion	13.86	3.14	-0.045	.17**	-0.01	0.03	.13**	1									
Neuroticism	13.48	4.25	0.07	.27**	.23**	.29**	.30**	.29**	1								
Cohesion	50	6.7	-.23**	-.12*	-.21**	-.15**	-.27**	.11*	-0.08	1							
Expressiveness	30.71	4.64	-.20**	-.16**	-.16**	-.18**	-.21**	0.07	-.22**	.54**	1						
Conflict	39.18	5.29	-.23**	-.20**	-.21**	-.12*	-.26**	-0.02	-0.08	.40**	.31**	1					
Accept & Caring	41.85	5.75	-.25**	-0.06	-.22**	-.17**	-.19**	0.08	-.11*	.62**	.48**	.41**	1				
Independence	29.9	4.39	-.18**	-.12*	-0.07	-.11*	-.19**	.11*	-.12*	.42**	.44**	.33**	.43**	1			
ARO	28.6	3.91	-.24**	-.10*	-.16**	-.19**	-.12*	.15*	-0.08	.56**	.41**	.31**	.51**	.41**	1		
Organisation	8.08	1.98	-.19**	-0.04	-.21**	-.15**	-.17**	0.02	-0.06	.45**	.32**	.29**	.33**	.28**	.30**	1	
Control	13.96	2.64	-.18**	-.12*	-0.07	-0.03	-.20**	0.05	-0.04	.38**	.24**	.36**	.40**	.25**	.35**	.32**	1

*p<.05; **p<.01

Another study was done by Abdollahi, Tlib, Yaacob, and Ismail (2015) who found that hopelessness partly mediates the connection between problem-solving skills and suicidal ideation. Similarly, the relationship between hope, hopelessness, and suicidal behavior with 206 undergraduate psychology students' results disclosed that scores on hope and coping were more strongly related to suicidal behaviour than hopelessness (Range & Penton, 1994).

The calculated "r" value (r=0.28, p $\leq$01) shows the positive significant correlation between suicidal ideation and loneliness. This shows that as the scores of loneliness increase, the scores of suicidal ideation also increase. It implies that the students who have high level of loneliness, have a high degree of conflicts, low level of cooperation, less degree of commitment, less support, lower level of acceptance, caring, etc. Therefore, the directional hypothesis 01 that states "there would exist significant relationship between suicidal ideation and loneliness among undergraduate college students" is accepted. The positive and significant relationship between suicidal ideation and loneliness shows that loneliness directly influences the suicidal ideation among undergraduate college students. The students having less feeling of loneliness live supportive life, and stay aware and seem to be happy of their future. To support the present result, some literatures are as follows:

Stravynski and Boyer (2001) did a study between loneliness and different manifestations of suicidal behaviour with some subgroups (e.g., college students, the elderly and psychiatric patients). They found a strong association among suicide ideation, parasuicide and different ways of being lonely and alone, defined either subjectively (i.e., the feeling), or objectively (i.e., living alone or being without friends), were observed among the subjects. Moreover, a prevalence of suicide ideation and parasuicide increased with the degree of loneliness. Lamis, Ballard, and

Patel (2014) examined suicide risk factors, loneliness, and drug abuse with nonclinical sample of 207 undergraduate drug-using students at a large south-eastern university. They found that suicidal ideation was positively correlated with loneliness (r = .40). In another study, Shu-yue and Yan (2014-05) perceived the case of suicide ideation and loneliness among college students of 1101 samples. Their findings suggested that loneliness played the mediating role in the association between self-consistency and suicide ideation, accounting half-hour in total effect. Similar research was conducted by Chang et al. (2017) on loneliness among college students (54 males and 174 females) and the results of regression analyses indicated that loneliness was a significant predictor of both indices of suicidal risk among college students. Another study was done by Pervin and Fedowshi (2016) on university students and the results showed that suicidal ideation was positively correlated with loneliness. Additionally, stepwise multiple regression analysis further discovered that loneliness significantly predicted suicidal ideation among university students.

The calculated "r" value (r=.43, p<.01) shows the positive significant correlation between suicidal ideation and depression. This positive relationship shows that as the scores of depression increase, the scores of suicidal ideation also increase. It implies that the students who have shown high level of depression also have high degree of suicidal ideation and thoughts. Therefore, the hypothesis which states "there would exist significant relationship between suicidal ideation and depression among undergraduate college students" is accepted. It also shows that there is a positive and significant relationship between suicidal ideation and depression which indicates that depression directly influences to the suicidal ideation among undergraduate college students the possible reason could be their academic stress and personal problems. To support the present result, some literatures are as follows:

This finding is in contract with the finding of the study that was conducted by Reynolds (2015) who found significantly moderated effect between depression and suicidal behaviours. This finding is analogous with the findings of earlier study that was conducted by Garlow et al. (2008) on undergraduate college students. They participated within the American Foundation for Suicide Prevention-Sponsored College Screening Project at Emory University. Their results revealed that there was a strong relationship between severity of depressive symptoms and suicidal ideation in college students. Suicidal feeling and actions were comparatively common in that group. In another study, Lester (2014a) examined self-blame, anxiety, and depression as determinants of suicidal ideation among tertiary students with their history of abortion. The results revealed that depression (r=0.27, p< .05) has positive significant correlations with suicide ideation among tertiary students with the history of abortion.

The calculated "r" value (r =.21, p<.01) shows the positive significant correlation between suicidal ideation and psychoticism. This shows that as the scores of psychoticism increases or decreases, the scores of suicidal ideation additionally increases or decreases. It means the students who have high psychoticism have a high degree of suicidal ideation. Moreover, implies that the directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and psychoticism among undergraduate college students" is accepted. The calculated "r" value (-.05, p<.05) shows the negative insignificant correlation between suicidal ideation and extraversion. Moreover, that the directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and extraversion among undergraduate college students" is not accepted due to insignificant relationships between suicidal ideation and extraversion. This could be because the students are sociable, talkative and familial with their peers. The calculated "r" value

(.07, p<.05) shows the positive insignificant correlation between suicidal ideation and neuroticism. This could be because of the students' social support, cultural impact and emotional stability probably could not affect the suicidal thought directly. And additionally, that the directional hypothesis formulated earlier "there would exist significant relationship between suicidal ideation and neuroticism among undergraduate college students" is not accepted. To justify this result some literatures are as follows:

A research by Singh and Joshi (2008) demonstrated that suicidal ideation was positively associated with two dimensions of personality i.e. extraversion and psychoticism. Kerby (2003) proposed a study to look at the big five traits as multiple predictors of suicidal ideation. The study suggested that increased suicidal ideation is related to high neuroticism and low extraversion. Similarly, Devi and Prakash (2015) investigated the link between personality traits and suicidal ideation among 100 undergraduate college students. Their results showed that 11% participants had suicidal ideation. The study also discovered that high neuroticism; low extraversion and low conscientiousness have a positive relationship with suicidal ideation.

Table 4.11 shows the Pearson coefficient of correlation between different dimensions of family environment (cohesion, expressiveness, conflict, acceptance and caring, independence, active recreational orientation, organisation, and control) and the suicidal ideation among undergraduate college students.

Cohesion: The calculated correlation shows the negative and significant correlation of suicidal ideation with cohesion (r= -.23, p<.01). This shows that because the family setting dimensions of cohesion increases, the scores of suicidal ideation decreases. It means the students who have good family commitment, provide help and support of members for one another have the low degree of suicidal ideation.

The directional hypothesis developed earlier "there would significant and relationship between suicidal ideation and cohesion dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of cohesion directly influences the suicidal thought among undergraduate college students. Most participants with suicidal ideation have negative significant similarities: because they have healthy family organisation and relationships, their parents are openly committed to them, and their parents used proper parenting styles. Similarly, Shuang-yu and Xiao-fang (2013) discovered significantly inverse correlations of suicide ideation with cohesion (r=-.120) among college students.

Expressiveness: The calculated correlation shows the negative and significant correlation of suicidal ideation with expressiveness (r=-.20, p<.01). It means the students who express their personal and social problem with family members directly have the low degree of suicidal ideation. The directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and expressiveness dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of expressiveness directly influences the suicidal thought among undergraduate college students. It means the participants with suicidal ideations have negative significant similarities: because they have open expressiveness and relationships with their family members. Similarly Shuang-yu and Xiao-fang (2013) discovered significantly inverse correlations of suicidal ideation with emotional expression, (r=-0.10) among college students.

Conflict: The calculated correlation shows the negative and significant correlation of suicidal ideation with conflict (r=-.23, p<.01). This shows that because

the family setting dimensions of conflict decreased the scores of suicidal ideation also decreased. It means the students who have openly expressed their aggression and conflicts family background, have the low degree of conflict and suicidal ideation. The directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and conflict dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of conflict directly influences the suicidal thought among undergraduate college students. If the conflict increases in the family, suicidal ideation also increases. Shuang-yu and Xiao-fang (2013) discovered significantly positive correlations of suicide ideation with contradictory (r=.085) were found among college students.

Acceptance and Caring: The calculated correlation shows the negative and significant correlation of suicidal ideation with acceptance and caring (r=-.25, p<.01). It means the students who have highly caring family, have the low degree of suicidal ideation. The directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and acceptance and caring dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of acceptance and caring as the family members are unconditionally accepted and the caring is expressed highly in the family. The healthy family environment influences thinking pattern positively among undergraduate college students.

Independence: The calculated correlation shows the negative and significant correlation of suicidal ideation with independence (r=-.18, p<.01). It means the students who are assertive and make their own decisions in the family have the low

degree of suicidal ideation. The directional hypothesis developed earlier "there would exist negative and significant relationship between suicidal ideation and independence dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of independence because the students have freedom within the family members.

Active Recreational Orientation: The calculated correlation shows the negative and significant correlation of suicidal ideation with active recreational orientation (r=-.24 p<.01). The directional hypothesis developed earlier "there would significant and relationship between suicidal ideation and active recreational orientation dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of active recreational orientation because the students highly engage themselves in social and recreational activities within their personal as well educational life. As a result of this recreational engagement, they do not have suicidal ideation.

Organisation: The calculated correlation shows the negative and significant correlation of suicidal ideation with organisation (r= -.19, p<.01). It means the students who have high degree of clear organisation structure in planning family activities and responsibilities in the family have the low degree of suicidal ideation. The directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and organisation dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of organisation directly influences the suicidal thought among

undergraduate college students. Shuang-yu and Xiao-fang (2013) discovered significantly inverse correlations of suicide ideation with sense of organization (r= -.12).

Control: The calculated correlation shows the negative and significant correlation of suicidal ideation with control (r=-.18, p<.01). The directional hypothesis developed earlier "there would exist significant relationship between suicidal ideation and control dimension of family environment among undergraduate college students" is accepted. It shows that there is a negative and significant relationship between suicidal ideation and family environment of control directly influences the suicidal thought among undergraduate college students. It means the participants with suicidal ideation have negative significant similarities: because they have some limit setting within their family and their family environmental factors are controlling their overall behaviour and thought. Shuang-yu and Xiao-fang (2013) discovered significantly positive correlations of suicide ideation with control (r= .09) were found among college students.

Zhai et al. (2015) investigated the association between suicidal ideation and family environment on Chinese university students. The prevalence of suicidal ideation was 9.2% (476/5183). Female students were likely to possess more suicidal thoughts than male students.

Section III: Regression Analysis

Hypothesis-02: Hopelessness will be significant predicator to suicidal ideation among undergraduate college students.

Table 4.12

Simple Regression Analysis of Hopelessness as Predictor of Suicidal Ideation among

Undergraduate College Students (N=400)

Variables	Std Beta	R	R²	F-value
Hopelessness	.08	.08	.004	2.55

*p<.05; **p<.01

The result of simple linear regression was calculated to find out whether hopelessness is the predictor of suicidal ideation. A significant regression equation was found (F= 2.55), with an R^2 of 0.004. Hopelessness indicated mild significant predictors of suicidal ideation. Pearson product moment correlation was used to examine the relationship of hopelessness with suicidal ideation (Table 4.11). The result reveals that hopelessness is not significant with suicidal ideation. Similarly research was done by Kleiman, Adams, Kashdan, and Riskind (2013) who examined with gratitude mitigated existing risk factors for suicide on 369 diverse undergraduate students. The results indicated that for people who are highly grateful, both hopelessness and depressive symptoms are less likely to be associated with thoughts and intentions to kill one-self. In another study, Tucker et al. (2017) investigated on 173 undergraduate students sample having history of suicide ideation, planning for suicide, and suicide attempts. They found that the general hopelessness, not predicted unique variance of suicide ideation and suicide risk. Lester (2013) studied hopelessness with undergraduate students. Sixty-one studies were found for the United States and 28 for other countries. The mean scores of American students on the hopelessness were significantly lower than those of students in other nations.

Hypothesis-03: Loneliness will be significant predictor to suicidal ideation among undergraduate college students.

Table 4.13

Simple Regression Analysis of Loneliness as Predictor of Suicidal Ideation among Undergraduate College Students (N=400)

Variables	Std Beta	R	R²	F-value
Loneliness	.22	.28	.08	34.08**

*p<.05; **p<.01

The result of simple regression was calculated to find out whether loneliness is the predictor of suicidal ideation. A significant regression equation was found (F= 34.08), with a R² of 0.079. Loneliness indicated significant predictors of suicidal ideation. Pearson product moment correlation was used to examine the relationship of loneliness with suicidal ideation (Table 4.11). The result reveals that loneliness is significant predictor of suicidal ideation. Present finding is also being supported by Lamis, Ballard and Patel (2014) who suggested that loneliness may contribute to suicidal ideation through increased drug use among college students. Chang et al. (2015) also examined loneliness and sexual assault with the sample of 334 college students. Results from regression analyses indicated that loneliness and sexual assault were important and distinctive predictors of suicidal risk in students.

Hypothesis-04: Depression will be significant predicator to suicidal ideation among undergraduate college students.

Table 4.14

Simple Regression Analysis of Depression as Predictor of Suicidal Ideation among

Undergraduate College Students (N=400)

Variables	Std Beta	R	R²	F-value
Depression	.30	.423	.18	89.75**

*p<.05; **p<.01

The results of simple regression were calculated to find out whether depression predicts suicidal ideation among undergraduate college students or not. A significant regression equation was found (F= 89.75), with an R² of 0.18. Model R, Std. Beta 0.43, 0.30, that is independent measure depression indicated as the significant predictor of suicidal ideation. Research also suggests that depression is a risk factor for suicide-related ideation. Similar results were also found by Cukrowicz et al. (2011) on depression and self-destructive ideation with college students. The results of their analysis recommend that though the greatest elevation in suicide ideation happens at the highest depressive symptoms, significant suicide ideation was also experienced by college students with mild and moderate depressive symptoms. Wang (2013) also found that depression was a statistically significant predictor of suicidal behaviour. Egwuonwu and Olonade (2014) examined self-blame, anxiety, and depression as causes of suicidal ideation among tertiary students with their recent history of abortion. Results revealed that depression predicted suicide ideation among tertiary students with traumatic experiences of abortion. Lin, Lin, Hsieh, and Chang (2014) analyzed and compared suicidal ideation among elementary school children from distinct families and school-related backgrounds of 979 eligible participants.

The results revealed that 175 students (17.9%) exhibited depression, and 146 students (14.9%) had contemplated suicide. Katie, Agata, Daniel, and Parveenin (2016) examined the predictors of self-destructive ideation for males and females separately. Regression analyses accounted for significant amount of variance in suicide ideation, 54 for males and 68 for females. Moreover, the analyses disclosed that depression was independently related to suicide ideation in males but not females. Ibrahim, Amit, Din, and Ong (2017) found that age was the predictor of self-destructive ideation for males, whereas depression and loss of motivation, as elements of hopelessness, were the predictors of self-destructive ideation among females. Ibrahim, Amit, Din, and Ong (2017) compared gender differences in suicidal ideation and determine the predictors of suicidal ideation among 232 youths aged between 15 and 25 years chosen from urban areas in Malaysia. The results showed that depression was the predictor of self-destructive ideation among females.

Hypothesis-05: Different family environment dimensions (i.e. psychoticism, extraversion and neuroticism) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

Table 4.15

Multiple Regression Analysis of Personality Dimensions (i.e. Psychosis, Extraversion and Neuroticism) as Predictors of Suicidal Ideation among Undergraduate College Students (N=400)

Variables	Std Beta	R	R²	F-value
Psychoticism	.45**			
Extraversion	-.16	.22	.05	6.81**
Neuroticism	.04			

*p<.05; **p<.01

The result of multiple regressions was calculated to find out whether personality is the predictor of suicidal ideation. A significant regression equation was found (F= 6.81), with a R^2 of 0.18. Personality indicated as the significant predictors of suicidal ideation. The multiple regression analysis revealed that there are three predictors that are able to contribute to knowledge on personality among college students i.e. (1) psychoticism, (2) extroversion, and (3) neuroticism. The most significant contributor in this result is psychoticism, extroversion and lastly followed by neuroticism. Similar research was done by Chioqueta and Stiles (2005) who investigated the relationship between personality traits, depression, hopelessness, and suicide ideation among 219 students. The results of the factor-level multiple regression analyses revealed that depressive symptoms were positively predicted by neuroticism and openness, and negatively predicted by extraversion. Finally, suicide ideation was positively predicted by neuroticism.

Hypothesis-06: Different dimensions of family environment (i.e. cohesion, expressiveness, conflict, acceptance, caring, independence, active-recreational orientation, organization and control) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

Table 4.16

Multiple Regression Analysis of Different Dimensions of Family Environment (i.e. Cohesion, Expressiveness, Conflict, Acceptance, Caring, Independence, Active-recreational Orientation, Organization and Control) as Predictors of Suicidal Ideation among Undergraduate College Students (N=400)

Variables	Std Beta	R	R²	F
Cohesion	.00			
Expressiveness	-.06			
Conflict	-.15			
Acceptance & Caring	-.11	.32	.08	5.57**
Independence	-.03			
Active Recreational Orientation	-.18			
Organization	-.25			
Control	-.10			

*p<.05; **p<.01

Family factors as moderators: A variable is said to be a moderator if it affects the direction and/or strength of the relationship between an independent variable and a dependent variable. For a variable to be classified as a moderator, there should be a significant interaction between the independent variable (suicidal ideation) and moderate variable (family factors) when predicting the dependent variable(s) suicide ideation. The most effects of suicidal ideation and family environment were entered respectively into the equation. A significant regression equation was found (F= 5.57), with an R² of 0.08, which is measure family environment was indicated as a significant predictors of suicidal ideation. This analysis shows that there is a high relationship between the dependent variable (suicide ideation) and the set of

predictors as a whole. The multiple regression analysis revealed that there were eight predictors that are able to contribute to data on family surroundings among undergraduate college students i.e. (1) cohesion, (2) expressiveness, (3) conflict, (4) acceptance & caring, (5) independence, (6) active recreational orientation, (7) organization and (8) control. The foremost important contributor to suicide ideation in this study is organization which is followed by active recreational orientation and conflict. Similar studies have also been found in the literatures which are as follows:

Egwuonwu and Olonade (2014) revealed family type, level of study and length of past abortion expertise put together predicted suicide ideation among tertiary students with traumatic experiences of abortion. Similarly, Ahookhosh, Bahmani, Asgari, and Hassanian (2017) explored that family cohesion and expressiveness were stronger predictors of suicide ideation than family conflict. Indeed, family cohesion exerted direct and indirect effects through depression, hopelessness, and anxiety on suicide ideation, and family expressiveness was additionally directly associated with suicidal thinking. Arria et al. (2009) developed a multi-dimensional model to explain suicide ideation among college students. Face-to-face interviews were conducted with 1,249 first-year college students. Low social support, affective dysregulation, and father-child conflict were each independently related to suicidal thinking. Only 400th of individuals with suicidal thinking were classified as depressed consistent with standard criteria. In the group who accorded to low levels of depressive symptoms, low social support and effective dysregulation were important predictors of suicide ideation. The parental conflict was not was independently associated with suicidal ideation.

Multivariate Regression Analysis (MANOVA)

Hypothesis 07: The hierarchical logistic regression model would provide the best predictor relationships within all the independent variables of suicide ideation.

A hierarchical logistic regression model is proposed for studying data with 20 different independent variables under study and suicidal ideation as dependent variable. A hierarchical multiple stepwise multivariate analyses was used to analyse factors affecting suicidal ideation in Sikkim undergraduate college students, which includes four models for suicidal ideation variables (i.e. response variables). The primary model includes demographic variables of gender (f), age, semester (1) and community of Nepali, Lepcha, Bhutia. Within the second model of the variables, psychoticism, extroversion, and neuroticism were added. Hence, within the third model, the family environment dimensions were added and with the fourth model of hopelessness, loneliness, and depression were included respectively. Only major variables were calculated to show the regression amount of variance. Corresponding beta estimates, adjusted R^2, and R^2 change and significance F are presented (N = 400) in the table.

Table 4.17

Hierarchal Logistics Regression Analysis of the Predictors of Suicidal Ideation (N=400)

Independent Variables	Models 1 Suicidal Ideation			Models 2 Suicidal Ideation			Models 3 Suicidal Ideation			Model 4 Suicidal Ideation		
	B	SE B	t	B	SE B	t	B	SE B	T	B	SE B	t
Gender (Female)	0.73	0.05	1.03	1.03	0.07	1.42	1.28	0.09	1.8	0.57	0.04	0.85
Age	0.81	0.17	2.89	0.76	0.16	2.76	0.63	0.13	2.28	0.52	0.11	2.05
Semester 1	-1.4	-0.09	-1.56	-1.38	-0.03	-1.57	-1.22	-0.08	-1.41	-1.64	-0.11	-2.03
Nepali Community	2.03	0.14	2.09	1.54	0.11	1.6	1.21	0.08	1.26	1.1	0.08	1.24
Lepcha Community	2.77	0.14	2.28	2.61	0.14	2.17	2.4	0.12	2.02	1.57	0.08	1.42
Bhutia Community	3.98	0.16	2.78	3.38	0.14	2.41	3.1	0.13	2.24	2.31	0.1	1.81
Psychoticism				0.43	0.2	3.96	0.32	0.15	2.84	0.24	0.11	2.3
Extraversion				-0.13	-0.06	-1.09	-0.03	-0.01	-0.28	-0.01	-0.004	-0.09
Neuroticism				0.02	0.01	0.18	-0.03	-0.02	-0.3	-0.17	-0.1	-2.03
Cohesion							0.01	0.01	0.15	0.004	0.004	0.06
Expressiveness							-0.004	-0.002	-0.04	0.002	0.002	0.03
Conflict							-0.09	-0.07	-1.23	-0.07	-0.05	-1.06
Acceptance & Caring							-0.11	-0.09	-1.37	-0.06	-0.05	-0.79
Independence							-0.01	-0.006	-0.11	-0.04	-0.03	-0.52
Active Recreational Orientation							-0.18	-0.1	-1.64	-0.08	-0.05	-0.81
Organisational							-0.17	-0.05	-0.9	-0.03	-0.01	-0.16
Control							-0.13	0.15	-0.05	-0.24	-0.09	-1.78
Hopelessness										-0.12	-0.04	-0.9
Loneliness										0.05	0.07	1.38
Depression										0.26	0.36	7.18
R^2	0.08			0.12			0.18			0.31		
ΔR^2	0.07			0.1			0.14			0.27		
F	5.9			6.1			4.83			8.4		
P	.000[b]			.000[c]			.000[d]			.000[e]		

*Note. N = 400; *p < .05, **p < .01, ***p< .001*

The hierarchical multivariate analysis revealed that at stage one, demographic variables contributed significantly to the regression model (F=5.90, p<.01) and accounted for 95% of the variation in suicidal ideation. Introducing the personality variables explained an additional 95% of the variation in gender and this change in R^2 was significant, F = (6.10), p< .01. Adding family environment to the regression model explained a further 95% of the variation in suicidal ideation and this alteration

in R² was significant, F = (4.83), p< .01. Finally, the depression, hopelessness, loneliness to the regression model explained an additional 95% of the variation in suicidal ideation and this modification in R² was additionally significant, F (8.40, p<.01). When all 20 independent variables were included in stage four of the regression model 01: gender (f), age, semester (1), community of Nepali, Lepcha, Bhutia model 02: psychoticism, extroversion, neuroticism, model 03: cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organisation and control, model 04: hopelessness, loneliness, depression are significant predictors of suicidal ideation. The most important predictors of suicidal ideation were depression and psychoticism which uniquely explained 95% of the variation in suicidal ideation. Twenty independent variables accounted for 95% of the variance in suicidal thought.

Table 4.17 suggests that at the first step of the hierarchical multivariate analysis shows R² is .08 (adjusted R² is .07) and R² change is .08. That means 95% of the variance in suicidal ideation among college students was explained by gender, semester, community: Nepali, Lepcha, Bhutia of F change (df = 6) are 5.90 and it is significant at 0.01 level. Therefore, the hypothesis 7 which states "The hierarchical logistic regression model would provide the best predictor relationships within different independent variables of suicidal ideation" is accepted. On the idea of beta value, it might be additionally same among 6 predictors variables, gender (f) (beta value = 0.73), age (beta value = 0.81), Nepali community (beta value = 2.03), Lepcha community (beta value = 2.77) and Bhutia community (beta value = 3.98) significantly predicted suicidal ideation at .01 level. In another sense, semester (beta value = -1.40) contributes negatively to suicidal ideation as the direction of beta value suggests.

After the primary step, at second step, R^2 is 0.12 (adjusted R^2 is 0.10) and R^2 change is .04 psychoticism, extroversion, and neuroticism F change (df = 3) is 6.10 and it is significant at 0.01 level. It can therefore be stated that statistical hypothesis 07 is accepted. On the basis of beta value, it might be additionally same that among 9 predictor variables, psychoticism (beta value = 0.43) is significantly predicting suicidal ideation at .01 level. Extroversion contributes negatively to suicidal thought as per the direction of beta value (-.13) suggests. Once again, neuroticism contributes positively to suicidal ideation as the direction of beta value (beta value = .02) suggests.

After the second step, a third step, R^2 is 0.18 (adjusted R^2 is 0.14) and R^2 change is 0.05 examination of the R^2 change statistic indicates that 95% exploit the variance in suicidal ideation was explained by the addition dimensions of family environment: cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organisation and control with the variables gender, age, semester , communities, psychoticism, extroversion, neuroticism and F change (df = 8) is 4.83 which is significant at 0.01 level. It suggests that various components of reasons for suicidal ideation have the significant effect in predicting suicidal ideation. It can, therefore, be stated that statistical hypothesis 07 is accepted. On the basis of beta value, it would be additionally same that among seventeen predictors, solely Bhutia community (beta value = 3.10) significantly predicted suicidal ideation at 0.01 level. Cohesion is positively related with suicidal ideation as the direction of beta values 0.01 suggest. Beta values of other dimensions of family environment are negatively correlated with suicidal ideation as the beta values suggest.

After the third step, a fourth and final step, R^2 is 0.31 (adjusted R^2 is 0.27) and R^2 change is .13 examination of the R^2 change data point indicates that 95% of the

variance in suicidal ideation was explained by the addition parts of hopelessness, loneliness, depression, and different dimensions of family environment: cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organisation and control with the variables sex, age and semester, communities, psychoticism extroversion, neuroticism and F change (df = 3) is 8.40 and it is significant at 0.01 level. It suggests that depression have important effects in predicting suicidal ideation beyond the results and various dimensions of the family environment. It can therefore be stated that statistical hypothesis 7 is accepted. On the basis of beta value, it would be additionally said that among 20 predictors, loneliness (beta value = 0.05), hopelessness (beta value = -0.12) and depression (beta value = 0.26) significantly predicted suicidal ideation at .01 level. To finding was supported by Lester (2014a) who examined self-blame, anxiety and depression as determinants of suicidal ideation among tertiary students with their recent history of abortion. Analyses of results showed that depression had a significant independent influence on suicide ideation among tertiary students with the history of abortion. Similarly, Kitamura and Nagata (2014) targeted childhood abuse experiences and borderline personality traits, and depressive mood would influence suicidal ideation among approximately 500 Japanese college students. Childhood abuse and trauma had a significant impact on suicidal ideation through borderline personality characteristics revealed by using the structural equation model analysis. Furthermore, suicidal ideation is also mediated by borderline personality traits and depressive mood effect of childhood abuse experiences.

Overall, in terms of total variance in suicidal ideation was explained by gender, age and semester, Nepali, Lepcha and Bhutia communities, psychoticism, extroversion, neuroticism, cohesion, expressiveness, conflict, acceptance & caring,

independence, active recreational orientation, organization and control, hopelessness, loneliness, and depression. Findings of the present study were supported by Xiu-Ya, et al. (2010) who suggested that all stressful family life events were strongly related to increased risk for self-reported suicide attempts. Another study was conducted by Sali (2014) who found that 4.4 percent suicide attempts were reported solely because of family member's alcohol abuse problem. Sibling rivalries lead to anxiety, depression and low-self-esteem later in life. Male and female college students may face different problems in adjustment. Researcher scanned these relationships separately by gender, since some disparity between males and females have been found with respect to the influence of quality of family interactions on the development of behavioural problems in college students. Some recent studies also suggest that family risk factors, such as weak, affective, cohesion and low parental support are more strongly related to aggressive behaviour in girls than in boys (Blum, Ireland, & Blum, 2003; Flood-Page, Campbell, Harrington, & Miller, 2000). Hence, the proposed hypothesis which states "there would exist significant association between gender and family environment of undergraduate college students" is proved.

Section IV: Inferential Analysis

t-Test

In order to compare the mean scores of males and females on the measured variables, t-test of significance was applied. This was done to find out whether there is any significant difference between male and female undergraduate college students on the measured variables, 't-test' of significance was applied after ascertaining that the data fulfilled the main requirements underlying the use of t-test of significance as propounded by Guilford (1956, p.145).

Hypothesis 08: There would exist significant gender difference on suicidal ideation among male and female undergraduate college students.

Table 4.18

Mean, SD and t-value of Male and Female Undergraduate College Students on Suicidal ideation (N=400)

Gender	N	Mean	SD	Df	t-ratio	Sig./Not Sig.
Male	200	4.86	7.05	398	.56	Not Significant
Female	200	5.26	7.20			

Figure 4.11: Bar Diagram Showing Comparison between Male and Female Undergraduate College Students on Suicidal ideation (N=400)

From Table 4.18 it is evident that the "t"-value of suicidal ideation of male and female college students is (.56) which is insignificant. It indicates that male and female undergraduate college students of Sikkim do not differ considerably on suicidal ideation. Further, the mean scores revealed that the female college students (M=5.26) are found to be higher on suicidal ideation compared to male students (M=4.86).

Therefore, the hypothesis which states "there would be significant gender difference on suicidal ideation among male and female undergraduate college students" is not accepted. It implies that the male and female students have not a different approach to suicidal ideation. It could be the reason of female college students are comparatively depressed to adjustment problem with personal relationship. Similarly, the research findings of Alsalman (2016) directed that the mean (BSS) score was 5.2 for males and 7.0 for females. The present study result is also supported by the findings of Stephenson, Pena-Shaff, and Quirk (2006) where women were reported higher levels of suicidal ideation than men. Lin, Lin, Hsieh, and Chang (2014) consistently reviewed to identify prevalence estimates of suicidal ideation among Chinese college students. A total of 41 studies involving 1, 60,339 college students were identified, and the prevalence ranged from 1.24% to 26.00%. The overall pooled prevalence of self-destructive thought among Chinese college students was 10.72% (95%: 8.41% to 13.28%). They noted no substantial uniformity in prevalence estimates of suicidal ideation. Subgroup analyses showed that prevalence of suicidal thought in females was higher than in males. Similarly, Katie, Agata, Daniel, and Parveen (2016) examined the predictors of suicidal ideation for males and females on an individual basis. The results found significant association between suicidal ideation and gender and specified mean levels were significantly higher in females than males. Shu-yue and Yan (2014-05) studied the situation of suicidal ideation and loneliness among 1101 college students. Results reported that rate of college students' suicidal ideation was 41.1%, and there have been no significant differences in gender on suicidal ideation.

Hypothesis 09: There would exist significant gender difference on hopelessness among male and female undergraduate college students.

Table 4.19

Mean, SD and t-value of Male and Female Undergraduate College Students on

Hopelessness (N=400).

Gender	N	Mean	SD	df	t-ratio	Sig./Not Sig.
Male	200	11.96	2.46	398	-.04	Not Significant
Female	200	11.95	2.69			

Figure 4.12: Bar Diagram Showing Comparison between Male and Female

Undergraduate College Students on Hopelessness (N=400)

From Table 4.19 it is evident that the "t" value of hopelessness of male and female college students is (-04) which is not significant. It indicates that male and female undergraduate college students differ non-significantly on hopelessness. Further, the mean scores revealed that mean score of the male (Mean=11.96) and female (Mean=11.95) college students on hopelessness are found to be the same. Therefore, hypothesis 9 which states "there would be significant gender difference on hopelessness among male and female undergraduate college students" is not accepted.

It can be interpreted that the male and female students have a same approach to hopelessness because of family behaviour did not differ gender wise as boy and girls are given equal weightage by the parents.
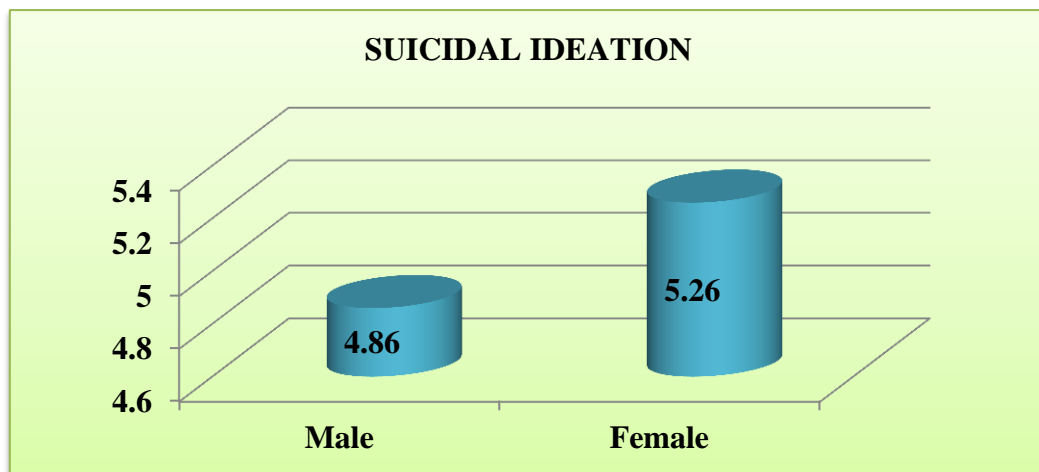
Hypothesis 10: There would exist significant gender difference on loneliness among male and female undergraduate college students.

Table 4.20

Mean, SD and t-value of Male and Female Undergraduate College Students on Loneliness (N=400)

Gender	N	Mean	SD	df	t-ratio	Sig./Not Sig.
Male	200	22.20	8.80	398	2.27	Significant at .01 level
Female	200	24.27	9.44			

Figure 4.13: Bar Diagram Showing Comparison between Male and Female Undergraduate College Students on Loneliness (N=400)
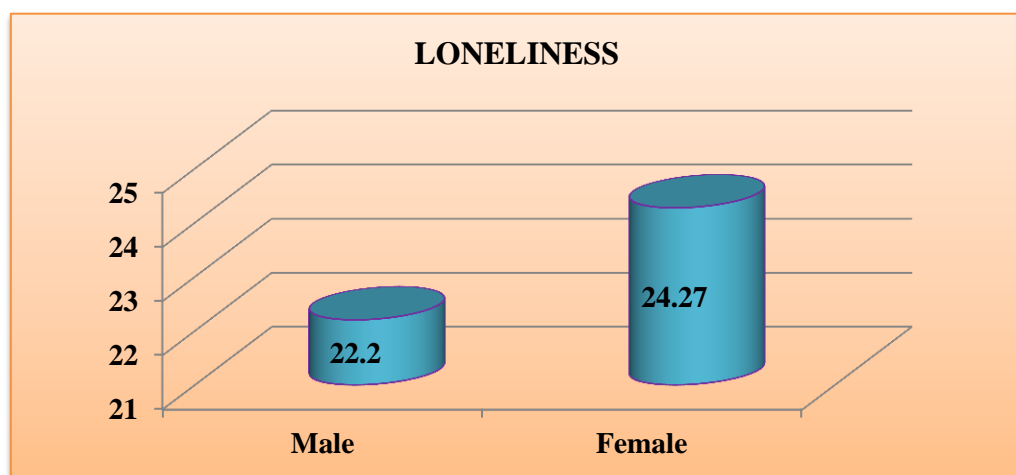
From Table 4.20 it is evident that the "t" value of loneliness of male and female undergraduate college students is (2.27), which is significant at 0.01 level. It indicates that male and female undergraduate college students differ significantly on loneliness. Further, the mean scores revealed that the female students (M=24.27) were found to be higher on loneliness compared to male students (22.20). Therefore, the hypothesis 10 which states "there would be significant gender difference on loneliness among male and female undergraduate college students." is accepted. It means both male and female undergraduate college students have a totally different approach to loneliness. The male undergraduate college students are always more mature and friendly than female college students concerning loneliness. The female undergraduate college students could be having negative self-concept compared to male college students. Similar results were found by Stravynski and Boyer (2001) who tested hypothesis by exploitation of the results of a population-wide survey. Results found that prevalence of suicidal ideation and parasuicide increased with the high degree of loneliness. Only minimal variations between men and women were found.
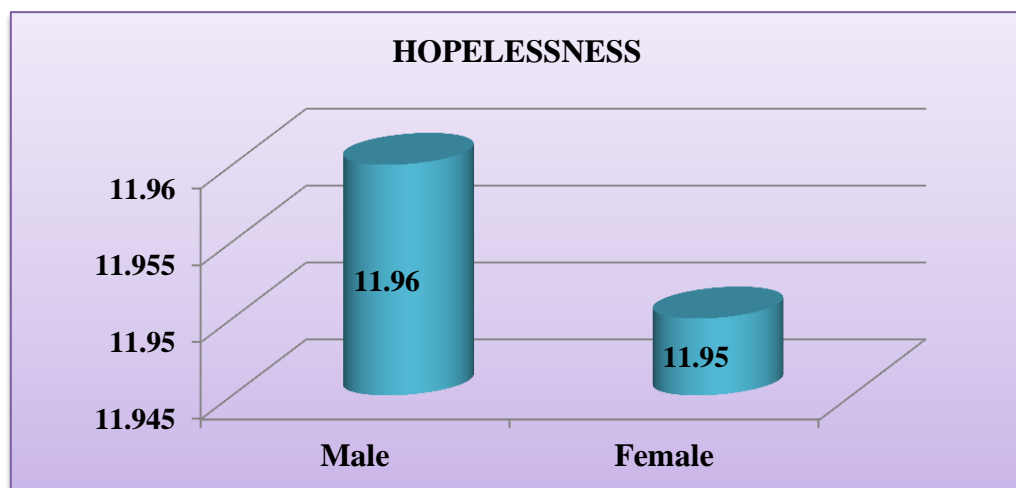
Hypothesis 11: There would exist significant gender difference on depression among male and female undergraduate college students.

Table 4.21

Mean, SD and t-value of Male and Female Undergraduate College Students on Depression (N=400)

Gender	N	Mean	SD	df	t-ratio	Sig./Not Sig.
Male	200	16.52	9.97	398	2.31	Significant at .01 level
Female	200	18.84	10.16			

Figure 4.14: Bar Diagram Showing Comparison between Male and Female

Undergraduate College Students on Depression (N=400)
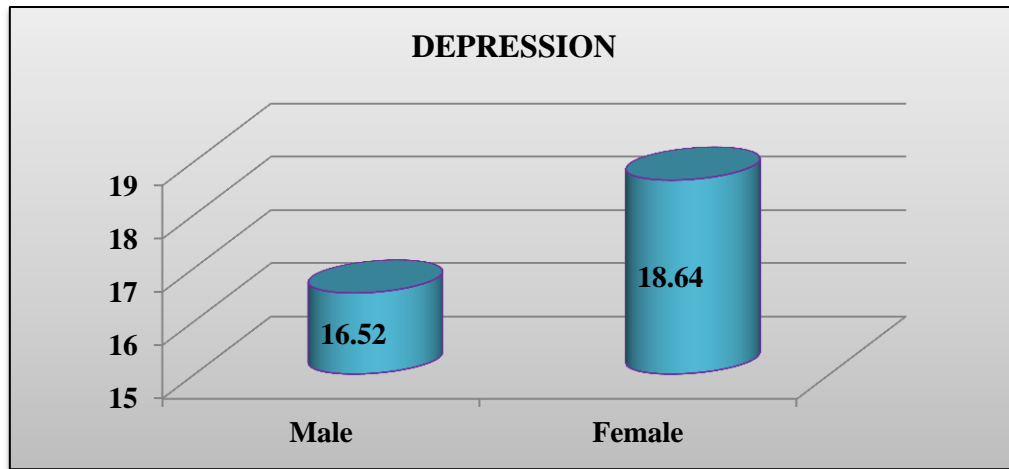
From Table 4.21, it is evident that the "t" value of depression of male and female undergraduate college students is 2.31 which significant at 0.01 level. It indicates that male and female undergraduate college students differ significantly on depression. Further, the mean scores revealed that the female students (M=18.84) are found to be higher on depression compared to male students (M=16.52). Thus, the hypothesis 11 which states "there would exist significant gender difference on depression among male and female undergraduate college students" is accepted. It means the male and female students have different approaches to depression. If the mean values of male and female college students are compared, then it can be found that female students are more depressed than their male counterparts. One of the reasons for this could be because female students are more career-oriented compared to males. The same findings of Thompson, Mazza, Herting, Randell, and Eggert (2005) explored the roles among 1,287 potential high school dropouts. The results showed direct effects of depression on suicidal behaviors for males. Similar researches have been done by few researchers (Brokington, 2001; Lewnsohn, Rodhe, & Seeley, 1996) who suggested

that suicide attempt and suicide completion occur frequently within the context of depression. They also found that women are much likelier than male to attempt suicide. However, men are much more likely to finish suicide than women (Centers for Disease Control and Prevention: CDCP, 2004).

Hypothesis 12: There would exist significant gender difference on different dimensions of personality (i.e. psychoticism, neuroticism and extraversion) among male and female undergraduate college students.

Table 4.22

Mean, SD and t-value of Male and Female Undergraduate College Students on different Dimensions of Personality (i.e. Psychoticism, Neuroticism and Extraversion) (N=400)

Personality Dimensions	Gender	N	Mean	SD	df	"t" Value	Sig/Not Sig
Psychoticism	Male	200	8.27	3.51	398	-2.74**	Sig. At .01 level
	Female	200	7.36	3.15			
Extraversion	Male	200	14.06	3.05	398	1.26	Not Significant
	Female	200	13.66	3.22			
Neuroticism	Male	200	12.89	4.38	398	2.82**	Sig. At .01 level
	Female	200	14.08	4.03			

Figure 4.15: Bar Diagram Showing Comparison between Male and Female Undergraduate College Students on Different Dimensions of Personality (i.e. Psychoticism, Neuroticism and Extraversion) (N=400)
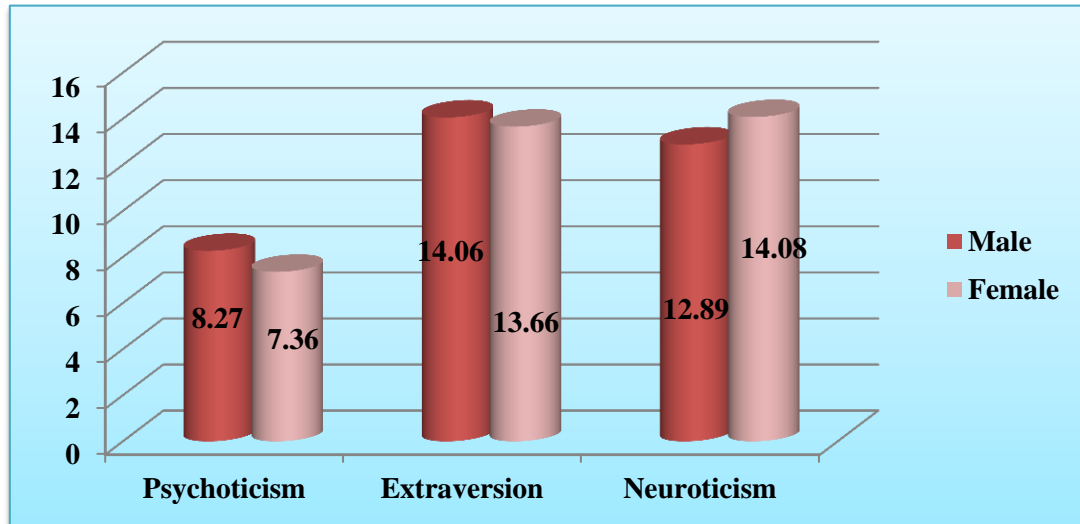
From Table 4.22 it is evident that the "t" value of psychoticism of male and female undergraduate college students is -2.74 whereas on neuroticism; the "t" value is 2.82 which are significant at 0.01 levels. However, the difference among both male and female college students on extraversion was insignificant (t=1.26). It indicates that male and female undergraduate college students differ significantly on psychoticism and neuroticism. Further, the mean scores reveal that the male undergraduate college students have scored more on psychoticism (M=8.27) compared to female students (M=7.36). Similarly, the mean scores on extraversion (M=14.06) revealed that the male college students are found to be higher on extraversion compared to female students (M=13.33). Furthermore, the mean scores indicates that the female students have scored high on neuroticism (M=14.08) compared to male college students (M=12.89). Therefore, the hypothesis 12 which states "there would exist significant gender difference on different dimensions of personality (i.e. psychoticism, neuroticism and extraversion) among male and female undergraduate college

students" is partially accepted. It implies that the male and female undergraduate college students have the different approach for psychoticism, and neuroticism followed by extraversion. High score of psychoticism and neuroticism among male and female college students represents their risks for suicidal behaviour, possibly, as a result of coping ineffectively with various stresses of life. Similar results were found by Devi and Prakash (2015) who investigated the link between personality traits and suicidal ideation among college students of 100 undergraduate students. Their results revealed that the highlighted personality traits individual variations were the key contributing factor to suicidal ideation.

Hypothesis 13: There would exist significant gender difference on different dimensions of family environment (i.e. cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organization and control) among male and female undergraduate college students.

Table 4.23

Mean, SD and t-value of Male and Female Undergraduate College Students on Family Environment Dimensions (i.e. Cohesion, Expressiveness, Conflict, Acceptance & Caring, Independence, Active Recreational Orientation, Organization and Control) (N=400)

Dimensions of Family Environment	Gender	N	Mean	SD	df	"t" Value	Sig/N.S.
Cohesion	Male	200	49.30	7.30	398	2.11*	Sig. at .05 level
	Female	200	50.70	5.97			
Expressiveness	Male	200	30.79	5.00	398	-.37	N.S.
	Female	200	30.62	4.25			
Conflict	Male	200	38.68	5.34	398	1.88	N.S.
	Female	200	39.67	5.21			
Acceptance & Caring	Male	200	41.41	6.11	398	1.56	N.S.
	Female	200	42.30	5.33			
Independence	Male	200	29.72	4.76	398	.85	N.S.
	Female	200	30.09	3.10			
Active Recreational Orientation	Male	200	28.40	4.17	398	1.04	N.S.
	Female	200	28.81	3.64			
Organization	Male	200	8.09	1.81	398	-.15	N.S.
	Female	200	8.06	2.15			
Control	Male	200	13.72	2.70	398	1.88	N.S.
	Female	200	14.21	2.57			

Figure 4.16: Bar Diagram Showing Comparison between Male and Female Undergraduate College Students on Different Dimensions of Family Environment (i.e. Cohesion, Expressiveness, Conflict, Acceptance & Caring, Independence, Active Recreational Orientation, Organization and Control) (N=400)
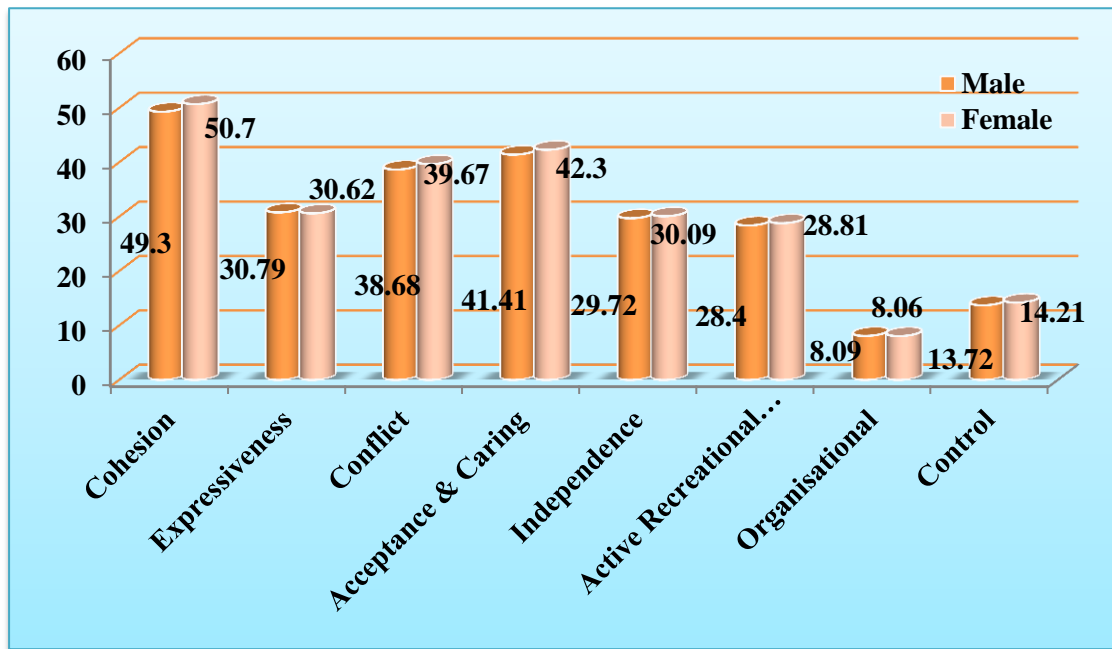
From Table 4.23 it is evident that the male and female undergraduate college students differed significantly only on one dimension of family environment i.e. cohesion (t=2.11, p<.05). It could be because of females are more close to parents rather than males. The mean score of female undergraduate college students (M=50.70) was found to be higher compared to male college students (M=49.30) on cohesion dimension of family environment.

However, they did not differ significantly on other dimensions of family environment i.e., expressiveness (t=-.37). Further, the mean scores revealed that the male college students (M=30.79) were found to higher in expressiveness compared to female college students (M=30.62). Similarly, they did not differ significantly on conflict dimension of family environment (t=1.88), but the mean scores shows that

the female college students (M=39.67) were found to be higher in conflict compared to male undergraduate college students (M=38.68). Savitha and Sreemathi (2016) similarly attempted to find the distinction in family environment between female and male adolescents with low and severe suicidal ideation on 120 college going students. They found the result in the area of 'conflict' where the mean values for male and female were 38.83 and 39.30 respectively. The t-value on 'conflict' being 0.45 was not significant at .05 level indicating no significant distinction between females and males in expressing aggression and conflict among the adolescents with low suicidal ideation. Males showed less conflict compared to females though they did not differ significantly. Males perceived less aggression and conflict among family members compared to females.

Male and female undergraduate college students also did not differ significantly on acceptance & caring dimension of family environment (t=1.56). But the mean scores on acceptance and caring revealed that the female college students (M=42.30) were found to be higher compared to male college students (M=41.41). Similar study was conducted by Savitha and Sreemathi (2016) who found that in the area of 'acceptance and caring,' the mean values were 44.27 and 42.40 for males and females and the t-value being 1.75 was not significant at .05 level. However, the female students perceived that they were accepted and the care given to them by their family members more compared to male subjects.

Male and female undergraduate college students also did not differ significantly on independence dimension of family environment (t=.85), but the mean scores revealed that the female college students (M=30.09) were found to be higher on independence compared to male college students (M=29.72). Similar study by Savitha and Sreemathi (2016) showed that the mean values for female and male

participants in the area of independence are 28.40 and 29.17 respectively and the t value being .74 was not significant at .05 levels. Females and males who scored low suicidal ideation did not differ significantly in being assertive and making choices independently, though females enjoy more independence than males.

Male and female undergraduate college students did not differ significantly on active recreational orientation dimension of family environment (t=1.04). But the mean scores on active recreational orientation revealed that the female college students (M=28.81) are found to be higher compared to male college students (M=28.40). The mean sores indicated that female's participation in social and recreational activities was comparatively more as female college students are more likely to be busy with social activities than their male counterparts. Similar results were also found by Savitha and Sreemathi (2016) in the area of active recreational orientation. The mean for female and male participants in the area of active recreational orientation were 27.23 and 29.67 respectively.

Similarly, male and female undergraduate college students did not differ significantly on organisation dimension of family environment (t=.15). But the mean scores revealed that the male college students (M=8.09) were found to be slightly higher in the organization dimension compared to female undergraduate college students (M=8.06). Savitha and Sreemathi (2016) also conducted a study and the results showed that in the area of organization, the mean values for female and male college students were 7.27 and 7.63 respectively and the t-value being .76 was not significant at .05 level. Male students were found to be more organized in planning activities and sharing responsibilities compared to female students within the domain of organization, though the findings were not significant.

Male and female undergraduate college students did not differ significantly on control dimension of family environment (t=1.88). But the mean scores revealed that the female college students (M=14.21) were found to be higher in control dimension compared to male college students (M=13.72). Similar study was done by Savitha and Sreemathi (2016) who found that in the areas of control, the mean for female and male college students were 13.77 and 13.93 severally and the t-value being 0.23 was not significant. Females and males did not differ considerably within the degree of limit setting within their family though males appeared to be in less control than female college students.

The bar diagram (Fig. 4.16) also shows the same trend. Therefore, the proposed hypothesis which states "there would exist significant gender difference on different dimensions of family environment (i.e. cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organization and control) among male and female undergraduate college students" was partially accepted. It indicates that the male and female college students have some degree of different approach to cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organization, and control. The female college students were more adjustable than male college students concerning different dimensions of family environment. In some situations, it was found that male students, whose main source of social support was their family, experienced increased suicidal ideation (Lamis & Lester, 2013). The study reveals that family support by itself is not an efficient technique of suicide prevention for male college students. There was no data regarding family support and its impact on females, however, both men and women were found to possess decreased suicidal thoughts with healthy peer relationships (Lamis & Lester, 2013). And also they had conjointly reported that

negative interactions are additional to the strain of a college life, leading to increased suicidal ideation. During the adjustment period for college students, they are at an exaggerated risk for suicidality if there is parent-child conflict. The conflict will cause a negative disruption within the adjustment, instead of adaptation to the environment (Lamis & Jahn, 2013). In another research, Lin, Lin, Hsieh, and Chang (2014) analyzed and compared self-destructive ideation among elementary school kids from distinct families and school-related backgrounds of 979 eligible participants. The results discovered an argumentative family environment was found to be an important independent factor in kid suicidal ideation after controlling for depression status. Children living in argumentative families showed a 3.7-fold risk of suicidal ideation compared to children from a harmonious family. Among boys living in argumentative family environments, self-destructive ideation risk was 7.4-fold beyond for girls living in harmonious families. A 27-fold high increased self-destructive intellection risk was additionally discovered among the depressed children living within the argumentative family surroundings, compared with the non-depressed within the harmonious family surroundings. Similarly, Zhai et al. (2015) investigated the association between self-destructive intellection and family surroundings on 5183 students from Chinese university. Results indicated that maximum participants with suicidal ideation had significant similarities: that they had poor family structures and relationships, their parents had unstable work, and their parents used improper caring parenting styles. Female students were more probably to possess suicidal thoughts than male students.

ANOVA Analysis

Hypothesis-14: There would exist significant effect of selected socio-demographic variables on suicidal ideation among undergraduate college students.

Table 4.24

Summary of Analysis of Variance for Suicidal ideation and Socio-demographic Variables (i.e. Gender, Age, Education, Group, Community, Religion, and Family Type) of Undergraduate College Students (N=400)

Variables	N	Mean	SD	F	Sig.
Gender					
1. Male	200	4.86	7.05	0.32	0.56
2. Female	200	5.26	7.2		
Age					
1. 16-19 yrs.	114	3.01	5.22		
2. 20-23 yrs.	276	5.75	7.49	8.96	0
3. 24-27 yrs.	10	10.3	10.05		
Education					
1. First Semester	135	3.11	5.14		
2. Second Semester	62	4.92	6.86		
3. Third Semester	89	5.75	6.99	4.67	0
4. Fourth Semester	82	7.01	8.89		
5. Fifth Semester	25	5.36	7.19		
6. Sixth Semester	7	11.14	11.16		
Social Group					
1. General	43	5.63	7.88		
2. OBC	168	4.92	6.77	0.12	0.95
3. SC	28	4.96	7.71		
4. ST	161	5.07	7.23		
Community					
1. Nepali	233	4.99	7.09		
2. Lepcha	65	5.97	7.21	3.46	0.02
3. Bhutia	38	7.34	8.97		
4. Others	64	3.03	5.28		
Religion					
1. Hindu	205	5.14	6.95		
2. Buddhist	127	5.68	7.86	1.32	0.27
3. Christian	60	3.85	6.2		
4. Others	8	2.25	3.69		
Family type					
1. Joint	182	6.18	7.63		
2. Nuclear	152	3.68	5.7	4.44	0.004
3. Extended	46	4.17	6.13		
4. Others(orphan)	20	7.35	11.31		

*p<.05; **p<.01

In order to evaluate the results of seven variables, i.e., gender, age, education, social group, community, religion, and family type on suicidal ideation, a 2 x 2 x 2 x 2 x 2 x 2 x 2 factorial design was used separately (Table 4.24). This factorial design additionally satisfied the assumption for the application of analysis of variance (ANOVA). Therefore, to check the main effects of the variables, analysis of variance was used as a statistical measure. The dependent or criterion measure was an index of suicidal ideation as derived from suicide ideation scale (Beck, Kovacs & Weissman, 1979). The table additionally enlists standard deviation, mean square, F-ratio and level of significance for the main effects up to the seventh order. It is significant to emphasize that this information is based on the actual fact when gender, age, education, social group, community, religion, and family type was used as an independent variable in consideration with the dependent variable of suicidal ideation included in the present study. Summary of ANOVA (2-way) conferred in the Table 4.24, shows that gender has no significant effect on suicidal ideation. The F-ratio (0.32) shows an insignificant variation on suicidal ideation between the undergraduate male and female college students.

Age range has significant main effect on suicidal ideation. The findings prove that age is one of the key risk factors for suicidal ideation. These results recommend that there is a distinct age variation of suicidal ideation which is clear evidence of its risk factor. Because the study reports high suicidal ideation (F=8.96) among students above 24 years of age and low suicidal ideation between 16 to 19 years of age. Roy's (1984) research results suggest that high suicidal risk in this age range can be improved through psycho-social intervention.

Semester-wise education is found to have a highly significant effect on suicidal ideation. Table 4.24 shows the ANOVA results in education semester among

the female and male students. The F value is 4.67 which indicate a significant distinction between all the six semesters in suicidal ideation among the female students. The findings of the present study reveal that the students of the sixth semester and students of the fourth semester differ in terms of suicidal ideation. The rates of suicidal ideation are also comparatively high among the college students of the sixth semester than the students of the first semester which is supported by Wallin and Runeson (2003) who also discovered that 34% of first-year medical students at Karolinska Institute had suicidal ideas, and sometimes, throughout their lives, vs. 44% among final-year students.

The possible reason for significant effect of age category of 24-27 as well as sixth semester on suicidal ideation of college students could be because they are about to complete their graduation and more worried about their future career.

In social group, the F ratio (0.12) shows an insignificant effect on suicidal ideation between social groups but these results recommend that there is mean wise distinct social group effect of suicidal ideation which is clear evidence of its risk factor in general group. Because the study reports high suicidal ideation in general group comparison to ST group and low suicidal ideation between SC & OBC social group.

Community is found to have a highly significant effect on suicidal ideation. Table 4.24 shows the ANOVA results in community among the female and male students. The F value is 3.46 which indicate a significant effect between all the communities in suicidal ideation among the male and female students. The findings of the present study reveal that the students of the Bhutia and Lepcha community are highly affected in terms of suicidal ideation.

In religion category, the F ratio (F=1.32) shows an insignificant variation on suicidal ideation between religion groups but the findings recommend that there is mean wise effect on religion group of suicidal ideation which is clear evidence of its risk factor in Buddhist because the study reports high suicidal ideation in Buddhist group comparison to Hindu group.

One of the possible causes for significant effect of Bhutia and Lepcha community on suicidal ideation could be they have the feelings that they belong to minority community. This minority feelings among students probable helps in developing a negative filling of insecurity and loneliness. Most of Buddhists in Sikkim are from Bhutia and Lepcha community.

The most vital variable was the Family Type. The ANOVA results (F=4.44) show that there is a significant effect of family type on suicidal ideation. These findings suggest that family is additionally one of the risk factors for suicidal ideation. Mean scores on joint family (M=6.18), nuclear family (M=3.68), extended family (M=4.17) and others (orphan) (M=7.35). A high score indicates high orphanage and joint family students. The findings agree with other studies that an increased family interaction level reduces suicidal behavior risk. Family type of orphanages shows poor interaction with members and high conflict and disturbances, and they do not share their issues even with their guardian. These suppressed findings or block in goal-directed behavior that leads to frustration develops feelings of helplessness, worthlessness and pervasive sad mood. In the depressed state, they need to die and their suicidal concepts lead to a suicidal attempt.

Overview of the Chapter

It can be concluded that from the whole there has some hypotheses were significant relationship between the male and female students with reference to their suicidal ideation, hopelessness, loneliness, depression, psychoticism, neuroticism, extraversion, cohesion, expressiveness, conflict, acceptance and caring, independence, active recreational orientation, organisation and control but there was also no significant relationship found between male and female students with reference to their same variables. It is also found that there was a significant difference in the loneliness, depression, psychoticism, neuroticism, cohesion, among the male and female college students. Multiple Regression suggests that independent variables; loneliness, depression, personality trait (psychoticism, neuroticism, extraversion), and family environment (cohesion, expressiveness, conflict, acceptance and caring, independence, active recreational orientation, organisation and control) of the students and there is a close connection between them.

Thus, it can be concluded that suicidal ideation among undergraduate college students is affected by the supportive variables of hopelessness, loneliness, depression, psychoticism, neuroticism, extraversion, cohesion, expressiveness, conflict, acceptance and caring, independence, active recreational orientation, organisation and control. The next chapter will integrate discussions, conclusion and educational implications/limitations of the study.

Summary, Conclusion and Suggestions for Further Research

The researcher arrived at the stage of drawing conclusion on the basis of findings after rigorous exercise of analysing the data and insight into make objectives more fruitful and significant for layman as well as for the technical person associated with the work of teaching and learning at various levels. The writing of research findings is usually the concluding task of research endeavour. Everything is combined together during writing of the findings. It is a matter of communication, what was done, what occurred and what the results meant in a concise, understandable, accurate and logical manner. The final process of summarizing the findings, arrival at conclusion making recommendations and formulating generalizations for the population to which they will be applicable is an important component of any research. It serves as a refresher for the person involved in the research project to focus on the investigation perspective of the problem. It has a dissemination function because it is crucial to future practical application of the study findings of the study. It aids the future workers to understand the general purpose and the findings of the study. On the basis of analysis and interpretation of the data discussed in the previous chapter certain findings have been obtained and conclusions were drawn. The findings are presented here in accordance with the objectives of the study. Depression is common and frequently undiagnosed among college students. College students easily become susceptible to hopeless and depression based on various factors like, difficult to adjust, lack of confidence, feelings of inadequacy, work pressure, and assignments.

Suicides in India incidence and rate of suicides during the decade (2004 - 2014) on an average, in excess of one lakh people commit suicides consistently in the nation during the decadal period from 2004 to 2014. The number of suicides in the nation during the decade (2004 - 2014) has recorded an expansion of 15.8% (1,

31,666 in 2014 and 1, 13,697 in 2004). The populace has expanded by 14.6% during the decade while the rate of suicides has marginally expanded by 1.0% (10.5 in 2004 to 10.6 of 2014). The rate of suicides is demonstrating a blended pattern during the decade (2004 - 2014). Seventy-five percent of suicides comprehensively happen in the world. Rates of finished suicides are large higher in men than in women, ranging from 1.5 times as much in the world to 3.5 times in the developing world. National consideration regarding the problem of college student suicide has been growing steadily past years. Currently, attempts by mental health experts to anticipate suicides and to report individuals to their pre-morbid conditions are based largely on research that has analyzed the part of different factors in suicide attempts or completion. Since these are generally low-frequency situation, it is both unseemly to concentrate exclusively on components related to these results and almost difficult to reach significant inferences about helping suicidal students.

After reviewing the relevant scientific studies, it was observed that psycho-social determinants of suicidal ideation among undergraduate college students in different government colleges are still unexplored scientifically for the purpose of understanding various reasons of suicide among youth in Sikkim. That is why it is proposed to carry out the present study.

Statement of the Problem

The problem under investigation in the present study was stated as under: "Psycho-Social Correlates of Suicidal Ideation among College Students".

Objectives

The present study was conducted to achieve the following objectives:

1. To identify the frequency and percentage of demographic variables among undergraduate college students.

2. To explore if there is any relationship between suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment among undergraduate college students.

3. To explore if there is any significant predictor between suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment among undergraduate college students.

4. To determine the model effect of hopelessness, loneliness, depression, different dimensions of personality, family environment on suicidal ideation among undergraduate college students.

5. To make a gender-wise comparison on variables of suicidal ideation, hopelessness, loneliness, depression, different dimensions of personality, and family environment dimensions among undergraduate college students.

6. To evaluate the effect of selected demographic variables and suicidal ideation among undergraduate college students.

Hypotheses

Following hypotheses were formulated in the present study:

1. A significant correlation would exist between hopelessness, loneliness, depression, different dimensions of personality, family environment and suicidal ideation among undergraduate college students.

2. Hopelessness will be the significant predictor of suicidal ideation among undergraduate college students.

3. Loneliness will be the significant predictor of suicidal ideation among undergraduate college students.

4. Depression will be the significant predictor of suicidal ideation among undergraduate college students.

5. Different personality dimensions (i.e. psychoticism, extraversion, and neuroticism) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

6. Different dimensions of family environment (i.e. cohesion, expressiveness, conflict, acceptance, caring, independence, active-recreational orientation, organization, and control) will contribute significantly in predicting suicidal ideation among undergraduate college students conjointly as well as independently.

7. The hierarchical logistic regression model would provide the best predictor relationships within all the independent variables of suicidal ideation.

8. There would exist significant gender difference on suicidal ideation among male and female undergraduate college students.

9. There would exist significant gender difference on hopelessness among male and female undergraduate college students.

10. There would exist significant gender difference on loneliness among male and female undergraduate college students.

11. There would exist significant gender difference on depression among male and female undergraduate college students.

12. There would exist significant gender difference on different dimensions of personality (i.e. psychoticism, neuroticism, and extraversion) among male and female undergraduate college students.

13. There would exist significant gender difference on different dimensions of family environment (i.e. cohesion, expressiveness, conflict, acceptance & caring, independence, active recreational orientation, organization, and control) among male and female undergraduate college students.

14. There would exist significant effect of selected socio-demographic variables on suicidal ideation among undergraduate college students.

Method

The points of interest of the method steps i.e. representation of the sample, tools, and statistical investigations are exhibited as follows:

Sample

The sample of the present review comprised of 400 undergraduate college students randomly selected (200 males and 200 females) from different streams of four different Government Colleges of Sikkim (i.e. Sikkim Government College, Tadong, East Sikkim; Government College, Namchi, South Sikkim; Gauzing Government College, Gauzing, West Sikkim; and Rhenock Government College, East Sikkim). Stratified random sampling method was used for the purpose of collection of data.

Inclusion Criteria

o   All adolescents were regular undergraduate students in customary classes in each selected colleges of Sikkim.

o   All the respondents were unmarried, nonworking and with no evident physical or dysfunctional behaviour.

o   In general, the subjects were having great wellbeing and did not experience the ill effects of any disease.

o   All students originated from poor class, middle class and upper working class (moderate socio-economic background).

o   All students were perpetual occupants of Sikkim (domicile of Sikkim).

Exclusion Criteria

o   Those students who did not give consent to take an interest in the research.

o   Students determined to have any major psychiatric issue/s.

Ethical Considerations

o   Participation was voluntary and anonymous.

o   All participants were assured of confidentiality and were also informed to assert this right to withdraw at any time.

o   All the personal information of the participants has been locked in their respective files and was assessed only by the researcher.

o   The participants' details will be destroyed few years after the study.

Tools Used

The following tests were used for collection of data:

o   *Socio-demographic Data Sheet (Self, 2015):* The personal information sheet comprises of individual points of interest and family background of the subject. The personal details in regards to the name, age, sex, social group, religion, and family type and so forth were included. The family history of the subject

comprises of family member, relationship with respondent, sex, age, education, occupation and nature of work, income and so on.

o *The Beck Scale for Suicidal Ideation (Beck & Steer, 1993):* The criteria for the choice of this scale were; this scale has been discovered appropriate for the organization on the non-clinical sample, accessible and one of the most widely used scale in a few reviews.

o *Beck's Hopelessness Scale (Beck & Steer, 1993)*: The Beck Hopelessness Scale was chosen to measure the level of hopelessness among college students or adolescents. This scale measure that surveys the feelings about the future, future desires, loss of motivation and overall hopelessness in which members are made a request to peruse a statement and respond true or false in light of how they feel at present.

o *UCLA Loneliness Scale (Russell, Peplau, & Ferguson, 1978)*: The loneliness scale was chosen to measure the level of loneliness among college students or adolescents. Further, this test is standardized principally on the undergraduate college students or adolescents.

o *Beck Depression Inventory (BDI-II: Beck, Steer, & Brown, 1996)*: Beck Depression Inventory (BDI-II) was chosen to measure the severity of depression in the adults and adolescents matured 13 years and older.

o *Eysenck's Personality Questionnaire-Revised; EPQ-R (Eysenck, Eysenck & Barrett, 1985):* It comprises to measure three noteworthy measurements of personality that record for the vast majority of the change in personality. It measures to quantify of 4 critical measurements for the sample; psychoticism, extraversion, neuroticism, and lie-scale.

o *Family Environment Scale (Bhatia & Chadha, 2012)*: Family environment scale

  was utilized to evaluate the family environment of students. It comprises eight

  dimensions like Cohesion, Expressiveness, Conflict, Acceptance and Caring,

  Independence, Active Recreational Orientation, Organization and Control.

Procedure for Data Collection

The researcher got consent from the principals of the concerned colleges with the end

goal of accumulation of information. At that point, different questionnaires were

appropriated individually to the subjects after getting the consent of the subject. Each

subject, on a normal, took around one hour and fifteen to thirty minutes to top off the

surveys. At last, the questionnaires were collected from the respondents after which

scoring and further research were gone ahead. However, subjects who did not fill

questionnaires in a satisfactory way were excluded from the study.

Statistical Analyses

In the present study, the investigator has used clear and also inferential statistics for

the investigation of information. The quantization information was examined by

utilizing Statistical Package Social Science (SPSS) software.

It analyzed to evaluate the descriptive statistics of mean, standard deviation,

percentage, mode and median along with correlation and regression analysis.

Inferential statistics like "t" test and ANOVA were also used to measure the

significant differences and main effect among the variables of undergraduate college

students.

Major Findings

Section I: Findings on Socio-demographic Variables

o The mean value of suicidal ideation scores obtained by male and female undergraduate college students was found to be 4.86 and 5.26 which suggests that female undergraduate college students have comparatively reported more suicidal ideation than male college students.

o Out of 400 undergraduate college students, most of the students fall under the age of 20-23 years.

o Out of the 400 male and female college students, most of the students fall under the first semester of the undergraduate course.

o Out of 400 samples, most of the students are falls under the Arts stream of undergraduate college students.

o The present study is showing that maximum students were from the social group of OBC and ST undergraduate college students.

o Out of 400 students, most of the students fall under the community of Nepali and Lepcha.

o From the present study sample of 400 male and female undergraduate college students, most of the students fall under the Hindu and Buddhist religion,

o Out of all the samples, most of the college students fall under the joint and nuclear family type.

o From 400 college students, maximum students are staying with the family members of three to five.

o Out of 400 samples, most of the undergraduate college students were from farmer family background followed by government job.

o Out of all the samples, monthly income of family members of most of the undergraduate college students was between Rs. 0-20,000.

Section II: Findings on Relationship among Variables

o A significant and positive correlation existed between suicidal ideation and loneliness among undergraduate college students.

o A significant and positive correlation existed between suicidal ideation and depression among undergraduate college students.

o A significant and positive correlation existed between suicidal ideation and psychoticism among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and cohesion dimension of family environment among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and expressiveness dimension of family environment among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and conflict dimension of family environment among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and acceptance and caring dimension of family environment among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and independence dimension of family environment among undergraduate college students.

o A significant and negative relationship existed between suicidal ideation and active recreational orientation dimension of family environment among undergraduate college students.

o   A significant and negative relationship existed between suicidal ideation and
    organization dimension of family environment among undergraduate college
    students.

o   A significant and negative relationship existed between suicidal ideation and
    control dimension of family environment among undergraduate college students.

Section III: Findings on Predicting Variables

o   Hopelessness indicated mild significant predictor of suicidal ideation among
    undergraduate college students.

o   Loneliness indicated significant predictor of suicidal ideation among
    undergraduate college students.

o   A significant regression equation was found between depression and suicidal
    ideation of undergraduate college students.

o   Personality indicated as the significant predictor of suicidal ideation among
    undergraduate college students. The most significant contributor was
    psychoticism, extroversion, and lastly followed by neuroticism.

o   The multiple regression analysis revealed that there were eight predictors that are
    able to contribute to data on family surroundings among undergraduate college
    students i.e. cohesion, expressiveness, conflict, acceptance & caring,
    independence, active recreational orientation, organization and control. The
    foremost important contributor to suicidal ideation among college students was
    organization is followed by active recreational orientation, and lastly conflict.

o   First step of the hierarchical multivariate analysis shows significant at 0.01 level.
    Age of college students individually significantly predicted suicidal ideation at
    0.01 level.

o Second step of the hierarchical multivariate analysis shows significant at 0.01 level. Psychoticism dimension of personality individually significantly predicted suicidal ideation at 0.01 level.

o Third step of the hierarchical multivariate analysis suggests that various factors for suicidal ideation have the significant effect in predicting suicidal ideation. Psychoticism dimension of personality individually significantly predicted suicidal ideation at 0.01 level.

o The fourth and final step suggests that depression has important effect in predicting suicidal ideation beyond the results and various dimensions of the family environment. Except this, model four suggests significant prediction of suicidal ideation.

Section IV: Findings on Gender Differences on Different Variables

o There exists significant gender difference among male and female undergraduate college students on loneliness, depression, psychoticism and neuroticism dimensions of personality and cohesion dimension of family environment.

o The mean values show that female undergraduate students have higher level of suicidal ideation than the male college students.

o The mean values show that male and female undergraduate college students have same level of hopelessness.

o The mean values show that female undergraduate students have higher level of loneliness than the male college students.

o The mean values show that female undergraduate students have higher level of depression than the male college students.

o The mean values show that male undergraduate students have scored high on psychoticism dimension of personality than the female college students.

o The mean values show that male undergraduate students have scored high on extraversion dimension of personality than the undergraduate female college students.

o The mean values show that female undergraduate students have scored high on neuroticism dimension of personality than the male college students.

o The mean values show that female undergraduate students have scored high on cohesion dimension of family environment than the male college students.

o The mean values show that male undergraduate students have scored high on expressiveness dimension of family environment than the female college students.

o The mean values show that female undergraduate students have scored high on conflict dimension of family environment than the male college students.

o The mean values show that female undergraduate students have scored high on acceptance and caring dimension of family environment than the male college students.

o The mean values show that female undergraduate students have scored high on independence dimension of family environment than the male college students.

o The mean values show that female undergraduate students have scored high on active recreational orientation dimension of family environment than the male college students.

o The mean values show that male undergraduate students have scored high on organization dimension of family environment than the female college students.

o The mean values show that female undergraduate students have scored high on control dimension of family environment than the male college students.

ANOVA Analysis

o The F-ratio shows that age range of undergraduate college students has significant main effect on suicidal ideation. This finding proves that age is one of the key risk factors for suicidal ideation.

o Semester range of undergraduate college students has significant main effect on suicidal ideation. The findings of the present study revealed that of undergraduate college students of sixth semester have scored high on suicidal ideation.

o In social group, mean wise distinct effect on suicidal ideation can be observed which is clear evidence of its risk factor in general group. Because the study reports high suicidal ideation in general group of college students compared to ST group whereas SC and OBC social group scored low on suicidal ideation.

o Community level of undergraduate college students is found to have a highly significant effect on suicidal ideation. The findings of the present study revealed that college students from the Bhutia and Lepcha community have high effect in terms of suicidal ideation.

o In religion of undergraduate college students, the findings show that there is mean wise effect on religion group of suicidal ideation. There is clear evidence of risk factor among Buddhist religion as the study reports high rate of suicidal ideation in Buddhist group compared to Hindu group.

o The findings on family type variable suggest that family is additionally one of the risk factor for suicidal ideation. A high score among undergraduate college students indicate that students from orphanage and joint family have high effect on suicidal ideation.

Delimitations

The present investigation provided an exploratory investigation of suicidal ideation in relation to the hopelessness, loneliness, depression, psychoticism, neuroticism, extraversion, and family environment among undergraduate college students. Before drawing conclusions, there is a need to highlight some delimitations of this study that should be considered in externalizing the conclusions to general population. The following delimitations were made for the study:

o   The first delimitation of the study was sample size. Although a sample of 480 college student respondents was collected but only a sample of 400 respondents could be used for research purpose.

o   The second delimitation of the study was college sample size. Only four colleges from each zone of Sikkim were taken to conduct the study.

o   The sample was biased in terms of its economically developed and urban and rural college context.

o   The study was delimited to only regular college students in respect of: Gender, Age, Academic Education and Stream, Social Group, Religion, Family Background, and Ideation of Suicide and the supportive variables.

o   The study was delimited to six criterion variables: Suicidal Ideation, Hopelessness, Loneliness, Depression, Personality, and Family Environment.

o   The findings of the present study are related to undergraduate college students who live in the state of Sikkim.

o   The study was also delimited with reference to tools. The Beck Scale for Suicidal Ideation (Beck & Steer, 1993), Beck's Hopelessness Scale (Beck & Steer, 1993), UCLA Loneliness Scale (Russell, Peplau, & Ferguson, 1978), Beck Depression Inventory (BDI-II: Beck, Steer, & Brown, 1996), Eysenck's Personality

Questionnaire-Revised; EPQ-R (Eysenck, Eysenck, & Barrett, 1985) and Family Environment Scale (Bhatia & Chadha, 2012) were used for data collection.

o   The study was delimited in terms of statistical analysis technique also as correlation, regression, t-test and ANOVA were used.

o   Despite these delimitations, the study enhances our knowledge on suicidal ideation in relation to hopelessness, loneliness, depression, personality, and family environment of the undergraduate college students of Sikkim.

Conclusion

After the rigorous efforts, the present study reached to its destination that highlights the fact that the male undergraduate college students of Sikkim have faced less competence in comparison to the female students. One of the reasons behind this could be the academic atmosphere in the colleges. Another problem among college students is loneliness and related risky behaviours for overcoming loneliness could be smoking, drinking, substance abuse, risky sexual behaviour, physical harm etc. After such tormenting period of suffering, the victim reaches to the heights of the hopelessness. They may develop symptoms of depression later on. Instead of sharing perceived problems with their dear ones, they tend to find the solution with thoughts of endangering their lives through ideas of suicide. Students with high level of depression and low self-confidence level start feeling helpless, hopeless, and full of despair. They do not see themselves as the active agent to solve such problems and suicide may seem to be just the ticket to solve their problems. Career counselling should be started at secondary stage in various colleges. Except this, to overcome depression and suicidal ideation among undergraduate college students, workshops, seminars, counselling, etc. on depression and stress management, etc. should be conducted on regular basis. It is high time for the mental health professionals to adopt

proactive and leadership roles in the prevention of suicide and thereby saving lives of thousands of youth of our country.

Educational Implications

The educational implications of the present study are not difficult to discover as it is applied in nature. The findings of this research have direct educational implications. Keeping in view objectives of the study, some important educational implications have been suggested. This study has implications for parents, family members, teachers, educational counsellors, other laypersons and all those involved in the lives of college students.

However, the family can save their children from taking the wrong track in their lives by making them understand the difference between good and bad and telling them what is good for them. This maturity among students can be attained over a period of time with proper guidance and training. College authorities should teach the ways of dealing with loneliness, hopelessness, depression and what to do in times of difficulties.

Generating confidence among students is very important as students low on confidence and emotional strength are more prone to be depressed. Depression can be observed by the increasing number of youngsters getting involved in bunking classes and poor academic achievement not involved in the extra-curricular activity, avoiding peer group. By guiding students in a friendly way, college authorities can pave the path of their progress.

College authorities need to look out for the warning signs and differentiate them from the normal student angst over helplessness. Expression of feelings related to worthlessness and anxious definitely means something is going seriously wrong.

These symptoms may be present together or in varied combinations and are most effectively addressed if noticed earlier. They must also take some responsibility and encourage their children to report any such incident immediately so that they can take up the issue with the psychiatrist and prevent any tragic unfortunate outcome. Also, they could counsel their victim-students to refrain from suicidal ideation.

A researcher has to pass through a maze of trees in a dense forest. To cross within the stipulated time is a herculean task. The superfluous growth of foliage has to be cut down, for carrying out a proper path in order to reach the other side, the fixed destination of a tortuous journey. In spite of limitation, hurdles have to be surrounded because my culmination of research must be fastened with fruitful results.

The following lines throw light on the limitations of the present study;

o In the present investigation, only the students belonging to the age group 17 to 26 have been taken into consideration. Hence, the results derived from this study cannot be true for all other age groups.

o The study was carried out on the sample of Arts, Commerce, Science streams.

o Due to the paucity of time, the study was restricted to the colleges of undergraduate courses of Sikkim state only.

o It could have been more interesting and useful if the representative sample of different parts of the state and outside the state would have been selected.

On the other hand, none of the limitations is fatal enough to deteriorate the standard and worth of this study, however, by taking into consideration in future, some prominent information can definitely be obtained for the enrichment of present work.

Suggestions for Further Research

Various problems areas like suicidal ideation, hopelessness, loneliness, depression, psychoticism, neuroticism, extraversion, and family environment are major areas of higher education and present study revealed quite interesting results in this regard. No research is complete or perfect in itself and each research presents itself as a stepping stone for further researches. The following are some of the suggestions for the further researches:

o The study was conducted only on a Sikkim colleges sample providing general courses. Efforts need to be made to broaden the size of the sample including more colleges. Larger samples would help to generalize the results.

o Other streams of college students courses such as PG. PhD, B.Ed., MBA, MCA, Engineering, Management and so on can be included in the future research to draw a more comprehensive picture.

o The present study was based on quantitative method for analysis of results. However, future research should adopt a mixed method approach for collection and analysis of data.

o This study may also be replicated in other north-eastern states like Assam, Manipur, Tripura, etc.

o A comparative study may also be carried out to find the differences between rural and urban area college students on suicidal ideation.

o Present research is descriptive one, exploring the suicidal ideation, hopelessness, loneliness, depression, psychoticism, neuroticism, extraversion, and family environment among undergraduate college students. Besides exploring the descriptive foundations, further research should be directed toward applying some

behavioural intervention programs like cognitive restructuring, counselling etc. by keeping the findings of the present research as baseline.

Thus, research studies in this area evince good scope and will contribute to make notable contributions in the future.

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CONSENT LETTER

From

………………………..

………………………..

…………………………..

I am hereby willing to participate in the study initiated by Ms. Anjana Prusty **"Psycho-Social Correlates of Suicidal Ideation among College Students".** Ms Anjana Prusty explained in the in details the procedure aspects of the study well in advance. I agree to be the part of the study in my own wish and not by force. I have not been paid any amount by the researcher for the purpose of providing information.

Signature

SOCIO-DEMOGRAPHIC DATASHEET					
Name					
Age			Contact No.-		
Gender (Put a tick Mark)	Male			Female	
Education (With Stream)					
Social Group (Put a tick Mark)	General	OBC	SC	ST	Other
Community (Put a tick Mark)	Nepali	Lepcha	Bhutia	Any Other	
Religion (Put a tick Mark)	Hindu	Muslim	Buddhist	Christian	Any Other
Family Type (Put a tick Mark)	Nuclear	Joint	Extended	Other (Mention)	

ABOUT FAMILY:

Sl.No.	Relation with Respondent	Sex	Age	Education	Occupation	Income (Per month)	
1							
2							
3							
4							
5							
6							
7							
8							

BSS®

Date: _____

Name:_____ Marital Status:_____ Age:_____ Sex:_____

Occupation:_____ Education:_____

Directions: Please carefully read each group of statements below. Circle the one statement in each group that **best** describes how you have been feeling for the **past week, including today.** Be sure to read all of the statements in each group before making a choice.

Part 1

1 0 I have a moderate to strong wish to live.
   1 I have a weak wish to live.
   2 I have no wish to live.

2 0 I have no wish to die.
   1 I have a weak wish to die.
   2 I have a moderate to strong wish to die.

3 0 My reasons for living outweigh my reasons for dying.
   1 My reasons for living or dying are about equal.
   2 My reasons for dying outweigh my reasons for living.

4 0 I have no desire to kill myself.
   1 I have a weak desire to kill myself.
   2 I have a moderate to strong desire to kill myself.

5 0 I would try to save my life if I found myself in a life-threatening situation.
   1 I would take a chance on life or death if I found myself in a life-threatening situation.
   2 I would not take the steps necessary to avoid death if I found myself in a life-threatening situation.

If you have circled the zero statements in both Groups 4 and 5 above, then skip down to Group 20. If you have marked a 1 or 2 in either Group 4 or 5, then open here and go to Group 6.

_____ Subtotal Part 1

6 0 I have brief periods of thinking about killing myself which pass quickly.
1 I have periods of thinking about killing myself which last for moderate amounts of time.
2 I have long periods of thinking about killing myself.

7 0 I rarely or only occasionally think about killing myself.
1 I have frequent thoughts about killing myself.
2 I continuously think about killing myself.

8 0 I do not accept the idea of killing myself.
1 I neither accept nor reject the idea of killing myself.
2 I accept the idea of killing myself.

9 0 I can keep myself from committing suicide.
1 I am unsure that I can keep myself from committing suicide.
2 I cannot keep myself from committing suicide.

10 0 I would not kill myself because of my family, friends, religion, possible injury from an unsuccessful attempt, etc.
1 I am somewhat concerned about killing myself because of my family, friends, religion, possible injury from an unsuccessful attempt, etc.
2 I am not or only a little concerned about killing myself because of my family, friends, religion, possible injury from an unsuccessful attempt, etc.

11 0 My reasons for wanting to commit suicide are primarily aimed at influencing other people, such as getting even with people, making people happier, making people pay attention to me, etc.
1 My reasons for wanting to commit suicide are not only aimed at influencing other people, but also represent a way of solving my problems.
2 My reasons for wanting to commit suicide are primarily based upon escaping from my problems.

12 0 I have no specific plan about how to kill myself.
1 I have considered ways of killing myself, but have not worked out the details.
2 I have a specific plan for killing myself.

13 0 I do not have access to a method or an opportunity to kill myself.
1 The method that I would use for committing suicide takes time, and I really do not have a good opportunity to use this method.
2 I have access or anticipate having access to the method that I would choose for killing myself and also have or shall have the opportunity to use it.

14 0 I do not have the courage or the ability to commit suicide.
1 I am unsure that I have the courage or the ability to commit suicide.
2 I have the courage and the ability to commit suicide.

15 0 I do not expect to make a suicide attempt.
1 I am unsure that I shall make a suicide attempt.
2 I am sure that I shall make a suicide attempt.

16 0 I have made no preparations for committing suicide.
1 I have made some preparations for committing suicide.
2 I have almost finished or completed my preparations for committing suicide.

17 0 I have not written a suicide note.
1 I have thought about writing a suicide note or have started to write one, but have not completed it.
2 I have completed a suicide note.

18 0 I have made no arrangements for what will happen after I have committed suicide.
1 I have thought about making some arrangements for what will happen after I have committed suicide.
2 I have made definite arrangements for what will happen after I have committed suicide.

19 0 I have not hidden my desire to kill myself from people.
1 I have held back telling people about wanting to kill myself.
2 I have attempted to hide, conceal, or lie about wanting to commit suicide.

Go to Group 20.

20 0 I have never attempted suicide.
1 I have attempted suicide once.
2 I have attempted suicide two or more times.

If you have previously attempted suicide, please continue with the next statement group.

21 0 My wish to die during the last suicide attempt was low.
1 My wish to die during the last suicide attempt was moderate.
2 My wish to die during the last suicide attempt was high.

_____ **Subtotal Part 2**

_____ **Total Score**

BHS®

Date: _____

Name: _____ Marital Status: _____ Age: _____ Sex: _____

Occupation: _____ Education: _____

This questionnaire consists of 20 statements. Please read the statements carefully one by one. If the statement describes your attitude for the **past week including today,** darken the circle with a 'T' indicating TRUE in the column next to the statement. If the statement does not describe your attitude, darken the circle with an 'F' indicating FALSE in the column next to this statement. **Please be sure to read each statement carefully.**

1. I look forward to the future with hope and enthusiasm. ⓣ Ⓕ

2. I might as well give up because there is nothing I can do about making things better for myself. ⓣ Ⓕ

3. When things are going badly, I am helped by knowing that they cannot stay that way forever. ⓣ Ⓕ

4. I can't imagine what my life would be like in ten years. ⓣ Ⓕ

5. I have enough time to accomplish the things I want to do. ⓣ Ⓕ

6. In the future, I expect to succeed in what concerns me most. ⓣ Ⓕ

7. My future seems dark to me. ⓣ Ⓕ

8. I happen to be particularly lucky, and I expect to get more of the good things in life than the average person. ⓣ Ⓕ

9. I just can't get the breaks, and there's no reason I will in the future. ⓣ Ⓕ

10. My past experiences have prepared me well for the future. ⓣ Ⓕ

11. All I can see ahead of me is unpleasantness rather than pleasantness. ⓣ Ⓕ

12. I don't expect to get what I really want. ⓣ Ⓕ

13. When I look ahead to the future, I expect that I will be happier than I am now. ⓣ Ⓕ

14. Things just won't work out the way I want them to. ⓣ Ⓕ

15. I have great faith in the future. ⓣ Ⓕ

16. I never get what I want, so it's foolish to want anything. ⓣ Ⓕ

17. It's very unlikely that I will get any real satisfaction in the future. ⓣ Ⓕ

18. The future seems vague and uncertain to me. ⓣ Ⓕ

19. I can look forward to more good times than bad times. ⓣ Ⓕ

20. There's no use in really trying to get anything I want because I probably won't get it. ⓣ Ⓕ

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LONELINESS SCALE

Instruction: - Indicate how often each of the statements below is descriptive of you. Just put a tick (√) mark.

Never – "I never feel this way"

Rarely- "I rarely feel this way"

Sometimes- "I sometimes feel this way"

Often- "I often feel this way

Sl.No.	Statements	Never	Rarely	Sometimes	Often
1	I am unhappy doing so many things alone				
2	I have nobody to talk to				
3	I cannot tolerate being so alone				
4	I lack companionship				
5	I feel as if nobody really understands me				
6	I find myself waiting for people to call or write				
7	There is no one I can turn to				
8	I am no longer close to anyone				
9	My interests and ideas are not shared by those around me				
10	I feel left out				
11	I feel completely alone				
12	I am unable to reach out and communicate with those around me				
13	My social relationships are superficial				
14	I feel starved for company				
15	No one really knows me well				
16	I feel isolated from others				
17	I am unhappy being so withdrawn				
18	It is difficult for me to make friends				
19	I feel shut out and excluded by others				
20	People are around me but not with me				

BDI-II

Name: _____ Marital Status: _____ Age: _____ Sex: _____

Occupation: _____ Education: _____

Instructions: This questionnaire consists of 21 groups of statements. Please read each group of statements carefully, and then pick out the **one statement** in each group that best describes the way you have been feeling during the **past two weeks, including today.** Circle the number beside the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number for that group. Be sure that you do not choose more than one statement for any group, including Item 16 (Changes in Sleeping Pattern) or Item 18 (Changes in Appetite).

1. Sadness
0 I do not feel sad.
1 I feel sad much of the time.
2 I am sad all the time.
3 I am so sad or unhappy that I can't stand it.

2. Pessimism
0 I am not discouraged about my future.
1 I feel more discouraged about my future than I used to be.
2 I do not expect things to work out for me.
3 I feel my future is hopeless and will only get worse.

3. Past Failure
0 I do not feel like a failure.
1 I have failed more than I should have.
2 As I look back, I see a lot of failures.
3 I feel I am a total failure as a person.

4. Loss of Pleasure
0 I get as much pleasure as I ever did from the things I enjoy.
1 I don't enjoy things as much as I used to.
2 I get very little pleasure from the things I used to enjoy.
3 I can't get any pleasure from the things I used to enjoy.

5. Guilty Feelings
0 I don't feel particularly guilty.
1 I feel guilty over many things I have done or should have done.
2 I feel quite guilty most of the time.
3 I feel guilty all of the time.

6. Punishment Feelings
0 I don't feel I am being punished.
1 I feel I may be punished.
2 I expect to be punished.
3 I feel I am being punished.

7. Self-Dislike
0 I feel the same about myself as ever.
1 I have lost confidence in myself.
2 I am disappointed in myself.
3 I dislike myself.

8. Self-Criticalness
0 I don't criticize or blame myself more than usual.
1 I am more critical of myself than I used to be.
2 I criticize myself for all of my faults.
3 I blame myself for everything bad that happens.

9. Suicidal Thoughts or Wishes
0 I don't have any thoughts of killing myself.
1 I have thoughts of killing myself, but I would not carry them out.
2 I would like to kill myself.
3 I would kill myself if I had the chance.

10. Crying
0 I don't cry any more than I used to.
1 I cry more than I used to.
2 I cry over every little thing.
3 I feel like crying, but I can't.

_____ Subtotal Page 1

Continued on Back ▶

11. Agitation

0   I am no more restless or wound up than usual.
1   I feel more restless or wound up than usual.
2   I am so restless or agitated that it's hard to stay still.
3   I am so restless or agitated that I have to keep moving or doing something.

12. Loss of Interest

0   I have not lost interest in other people or activities.
1   I am less interested in other people or things than before.
2   I have lost most of my interest in other people or things.
3   It's hard to get interested in anything.

13. Indecisiveness

0   I make decisions about as well as ever.
1   I find it more difficult to make decisions than usual.
2   I have much greater difficulty in making decisions than I used to.
3   I have trouble making any decisions.

14. Worthlessness

0   I do not feel I am worthless.
1   I don't consider myself as worthwhile and useful as I used to.
2   I feel more worthless as compared to other people.
3   I feel utterly worthless.

15. Loss of Energy

0   I have as much energy as ever.
1   I have less energy than I used to have.
2   I don't have enough energy to do very much.
3   I don't have enough energy to do anything.

16. Changes in Sleeping Pattern

0   I have not experienced any change in my sleeping pattern.
1a I sleep somewhat more than usual.
1b I sleep somewhat less than usual.
2a I sleep a lot more than usual.
2b I sleep a lot less than usual.
3a I sleep most of the day.
3b I wake up 1–2 hours early and can't get back to sleep.

17. Irritability

0   I am no more irritable than usual.
1   I am more irritable than usual.
2   I am much more irritable than usual.
3   I am irritable all the time.

18. Changes in Appetite

0   I have not experienced any change in my appetite.
1a My appetite is somewhat less than usual.
1b My appetite is somewhat greater than usual.
2a My appetite is much less than before.
2b My appetite is much greater than usual.
3a I have no appetite at all.
3b I crave food all the time.

19. Concentration Difficulty

0   I can concentrate as well as ever.
1   I can't concentrate as well as usual.
2   It's hard to keep my mind on anything for very long.
3   I find I can't concentrate on anything.

20. Tiredness or Fatigue

0   I am no more tired or fatigued than usual.
1   I get more tired or fatigued more easily than usual.
2   I am too tired or fatigued to do a lot of the things I used to do.
3   I am too tired or fatigued to do most of the things I used to do.

21. Loss of Interest in Sex

0   I have not noticed any recent change in my interest in sex.
1   I am less interested in sex than I used to be.
2   I am much less interested in sex now.
3   I have lost interest in sex completely.

_____ Subtotal Page 2

_____ Subtotal Page 1

_____ Total Score

281283-2 32

EYSENCK'S PERSONALITY QUESTIONNAIRE – REVISED
(E.P.Q. - R)

Instructions : Please answer each question by putting (×) mark in the box following "Yes" or "No". There are no right or wrong answers or no trick questions. Work quickly and do not think too long about the exact meaning of the question.

PLEASE REMEMBER TO ANSWER EACH QUESTION

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1. Do you have many different hobbies ?   Yes ☐ No ☐
2. Do you stop to think things over before doing anything ?   Yes ☐ No ☐
3. Does your mood often go up and down ?   Yes ☐ No ☐
4. Have you ever taken the praise for something you knew someone else had really done ? Yes ☐ No ☐
5. Are you a talkative person ?   Yes ☐ No ☐
6. Would being in debt worry you ?   Yes ☐ No ☐
7. Do you ever feel "just miserable" for no reason ?   Yes ☐ No ☐
8. Were you ever greedy by helping yourself to more than your share of anything ? Yes ☐ No ☐
9. Do you lock up your house carefully at night ?   Yes ☐ No ☐
10. Are you rather lively ?   Yes ☐ No ☐
11. Would it upset you a lot to see a child or an animal suffer ?   Yes ☐ No ☐
12. Do you often worry about things you should not have done or said ?   Yes ☐ No ☐
13. If you say you will do something, do you always keep your promise no matter how inconvenient it might be ?   Yes ☐ No ☐
14. Can you usually let yourself go and enjoy yourself at a lively party ?   Yes ☐ No ☐
15. Are you an irritable person ?   Yes ☐ No ☐
16. Have you ever blamed someone for doing something you knew was really your fault ? Yes ☐ No ☐
17. Do you enjoy meeting new people ?   Yes ☐ No ☐
18. Do you believe insurance schemes are a good idea ?   Yes ☐ No ☐
19. Are your feelings easily hurt ?   Yes ☒ No ☐
20. Are *all* your habits good and desirable ones ?   Yes ☐ No ☐
21. Do you tend to keep in the background on social occasions ?   Yes ☐ No ☐
22. Would you take drugs which may have strange or dangerous effects ?   Yes ☐ No ☐
23. Do you often feel "fed up" ?   Yes ☐ No ☐

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24.	Have you ever taken anything (even a pin or a button) that belonged to someone else ?	Yes ☐ No ☐
25.	Do you like going out a lot ?	Yes ☐ No ☒
26.	Do you enjoy hurting people you love ?	Yes ☐ No ☐
27.	Are you often troubled about feelings of guilt ?	Yes ☐ No ☐
28.	Do you sometimes talk about things you know nothing about ?	Yes ☐ No ☐
29.	Do you prefer reading to meeting people ?	Yes ☐ No ☐
30.	Do you have enemies who want to harm you ?	Yes ☐ No ☐
31.	Would you call yourself a nervous person ?	Yes ☐ No ☐
32.	Do you have many friends ?	Yes ☐ No ☐
33.	Do you enjoy practical jokes that can sometimes really hurt people ?	Yes ☐ No ☐
34.	Are you a worrier ?	Yes ☐ No ☐
35.	As a child did you do as you were told immediately and without grumbling ?	Yes ☐ No ☐
36.	Would you call yourself happy-go-lucky ?	Yes ☐ No ☐
37.	Do good manners and cleanliness matter much to you ?	Yes ☐ No ☐
38.	Do you worry about awful things that might happen ?	Yes ☐ No ☐
39.	Have you ever broken or lost something belonging to someone else ?	Yes ☐ No ☐
40.	Do you usually take the initiative in making new friends ?	Yes ☐ No ☐
41.	Would you call yourself tense or "highly-strung" ?	Yes ☐ No ☐
42.	Are you mostly quiet when you are with other people ?	Yes ☐ No ☐
43.	Do you think marriage is old-fashioned and should be done away with ?	Yes ☐ No ☐
44.	Do you sometimes boast a little ?	Yes ☐ No ☐
45.	Can you easily get some life into a rather dull party ?	Yes ☐ No ☐
46.	Do people who drive carefully annoy you ?	Yes ☐ No ☐
47.	Do you worry about your health ?	Yes ☐ No ☐
48.	Have you ever said anything bad or nasty about anyone ?	Yes ☐ No ☐
49.	Do you like telling jokes and funny stories to your friends ?	Yes ☐ No ☐
50.	Do most things taste the same to you ?	Yes ☐ No ☐
51.	As a child were you ever cheeky to your parents ?	Yes ☐ No ☐
52.	Do you like mixing with people ?	Yes ☐ No ☐
53.	Does it worry you if you know there are mistakes in your work ?	Yes ☐ No ☐

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54. Do you suffer from sleeplessness ?   Yes ☐ No ☐

55. Do you always wash before a meal ?   Yes ☐ No ☐

56. Do you nearly always have a "ready answer" when people talk to you ? .   Yes ☐ No ☐

57. Do you like to arrive at appointments in plenty of time ?   Yes ☐ No ☐

58. Have you often felt listless and tired for no reason ?   Yes ☐ No ☐

59. Have you ever cheated at a game ?   Yes ☐ No ☐

60. Do you like doing things in which you have to act quickly ?   Yes ☐ No ☐

61. Is (or was) your mother a good woman ?   Yes ☐ No ☐

62. Do you often feel life is very dull ?   Yes ☐ No ☐

63. Have you ever taken advantage of someone ?   Yes ☐ No ☐

64. Do you often take on more activities than you have time for ?   Yes ☐ No ☐

65. Are there several people who keep trying to avoid you ?   Yes ☐ No ☐

66. Do you worry a lot about your looks ?   Yes ☐ No ☐

67. Do you think people spend too much time safeguarding their future with savings and insurance ?   Yes ☐ No ☐

68. Have you ever wished that you were dead ?   Yes ☐ No ☐

69. Would you dodge paying taxes if you were sure you could never be found out ?   Yes ☐ No ☐

70. Can you get a party going ?   Yes ☐ No ☐

71. Do you try not to be rude to people ?   Yes ☐ No ☐

72. Do you worry too long after an embarrassing experience ?   Yes ☐ No ☐

73. Have you ever insisted on having your own way ?   Yes ☐ No ☐

74. When you catch a train do you often arrive at the last minute ?   Yes ☐ No ☐

75. Do you suffer from "nerves" ?   Yes ☐ No ☐

76. Do your friendships breakup easily without it being your fault ?   Yes ☐ No ☐

77. Do you often feel lonely ?   Yes ☐ No ☐

78. Do you always practice what you preach ?   Yes ☐ No ☐

79. Do you sometimes like teasing animals ?   Yes ☐ No ☐

80. Are you easily hurt when people find fault with you or the work you do ? .   Yes ☐ No ☐

81. Have you ever been late for an appointment or work ?   Yes ☐ No ☐

82. Do you like plenty of bustle and excitement around you ?   Yes ☐ No ☐

83. Would you like other people to be afraid of you ?   Yes ☐ No ☐

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P	E	N	L

84. Are you sometimes bubbling over with energy and sometimes very sluggish ?   Yes ☐ No ☐

85. Do you sometimes put off until tomorrow what you ought to do today ?   Yes ☐ No ☐

86. Do other people think of you as being very lively ?   Yes ☐ No ☐

87. Do people tell you a lot of lies ?   Yes ☐ No ☐

88. Are you touchy about something ?   Yes ☐ No ☐

89. Are you always willing to admit it when you have made a mistake ?   Yes ☐ No ☐

90. Would you feel very sorry for an animal caught in a trap ?   Yes ☐ No ☐

P	E	N	L

PLEASE CHECK THAT YOU HAVE ANSWERED ALL THE QUESTONS

PAGE NO.	P	E	N	L
1.				
2.				
3.				
4.				
TOTAL				

Dr. Harpreet Bhatia *(Hyderabad)*

Dr. N. K. Chadha *(New Delhi)*

Consumable Booklet

of

F E S-BC

(English Version)

Please fill in the following informations :—   **Date** ☐☐☐☐☐☐☐☐

Name _____

Age _____   **Sex** _____

Family Income _____

INSTRUCTIONS

This booklet contains some statements. These Statements are about your family, you have to decide which of these statements are applicable to you about your family and which are not. Alongside the statements have FIVE cells (☐). If you **'Strongly agree'** with the statement, mark tick ☑ under the cell labelled **'Strongly Agree'**. If you **strongly disagree** with the statement, mark tick under the cell labelled **'Stongly Disagree'**. For in between preferences mark accordingly **'Agree', 'Neutral'** or **'Disagree'**.

Give us your general impression of your family. There are no right or wrong answers to any statement. Your responses will be kept in strict confidence and will be used for research purposes.

Please respond to each statement and do not leave any statement unanswered. Your help will be duly acknowledged.

SCORING TABLE

Sub Scale of FES	I	II	III	IV	V	VI	VII	VIII
Raw Score								
Interpretation								

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
1.	We enjoy doing things together.	☐	☐	☐	☐	☐	⬭
2.	Family members often do not express their feelings.	☐	☐	☐	☐	☐	⬭
3.	Breaking things in anger is quite common in our family.	☐	☐	☐	☐	☐	⬭
4.	Making decisions independently is strongly encouraged in our family.	☐	☐	☐	☐	☐	⬭
5.	In our family everyone is encouraged to play and interact with neighbours.	☐	☐	☐	☐	☐	⬭
6.	Responsibilities are not taken seriously in our family.	☐	☐	☐	☐	☐	⬭
7.	All members of the family are expected to be together for at least one meal in a day.	☐	☐	☐	☐	☐	⬭
8.	Affection is expressed openly, quite often in our family.	☐	☐	☐	☐	☐	⬭
9.	Togetherness is the basic feeling of our family.	☐	☐	☐	☐	☐	⬭
10.	Our feelings of happiness are shared openly with others in our family.	☐	☐	☐	☐	☐	⬭

Area	I		II		III	IV	V	VI	VII	VIII
Item No.	1	9	2	10	3	8	4	5	6	7
Score										
Total										

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
11.	Beating up people in anger is not seen in our family.	☐	☐	☐	☐	☐	⬭
•12.	There are a lot of restrictions in our family.	☐	☐	☐	☐	☐	⬭
13.	Freinds and guests are always welcome in our family.	☐	☐	☐	☐	☐	⬭
14.	Everyone in our family is well aware of their responsibilities.	☐	☐	☐	☐	☐	⬭
•15.	Nobody in our family is bothered about rules of my kind.	☐	☐	☐	☐	☐	⬭
16.	Everyone in our family listens to what each one of us has to say.	☐	☐	☐	☐	☐	⬭
•17.	Whenever any work comes up, every-one tries to get out of the situation.	☐	☐	☐	☐	☐	⬭
•18.	It is difficult to express ourselves openly for fear of some one reacting to it angrily.	☐	☐	☐	☐	☐	⬭
19.	Everyone tries to sort things out if there is a disagreement in the family.	☐	☐	☐	☐	☐	⬭
•20.	Thinking for ourselves is not encouraged in our family.	☐	☐	☐	☐	☐	⬭

Area	I	II	III		IV	V		VI	VII	VIII
Item No.	17	18	11	19	16	12	20	13	14	15
Score										
Total										

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
21.	We often go out together for movies in our family.	☐	☐	☐	☐	☐	◯
22.	Going for programmes without informing at home is not accepted in our family.	☐	☐	☐	☐	☐	◯
23.	Nobody bothers to look after any-one else in our family.	☐	☐	☐	☐	☐	◯
24.	Any new situation that arises is discussed openly in the family in order to get ideas and suggestions from every body.	☐	☐	☐	☐	☐	◯
25.	We talk about our personal problems to each other in our family.	☐	☐	☐	☐	☐	◯
26.	When members are angry, they do not talk to each other for days together.	☐	☐	☐	☐	☐	◯
27.	In our family, members ask for what they need, quite openly.	☐	☐	☐	☐	☐	◯
28.	Having hobbies is encouraged in our family.	☐	☐	☐	☐	☐	◯
29.	Quite often members of our family stay out without informing at home.	☐	☐	☐	☐	☐	◯
30.	Only when we do something well we get praise and attention from others in our family.	☐	☐	☐	☐	☐	◯

Area	I	II	III	IV		V	VI		VII	VIII	
Item No.	24	25	26	23	30	27	21	28	–	22	29
Score											
Total											

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
•31.	Family members do not get along with each other.	☐	☐	☐	☐	☐	⬭
•32.	Complaining about something that we dont't like is not accepted in our family.	☐	☐	☐	☐	☐	⬭
•33.	Finding faults with each other is quite common in our family.	☐	☐	☐	☐	☐	⬭
•34.	It is difficult to do something on your own in our family, without some-one feeling rejected or left out.	☐	☐	☐	☐	☐	⬭
•35.	Watching T.V. is our only form of entertainment.	☐	☐	☐	☐	☐	⬭
36.	There is plenty of time and attention for everyone in our family.	☐	☐	☐	☐	☐	⬭
37.	Everyone comes together to sort out any new situation that may arise in our family.	☐	☐	☐	☐	☐	⬭
38.	At home we feel free to anything we want to.	☐	☐	☐	☐	☐	⬭
39.	Shouting in anger is not common in our family.	☐	☐	☐	☐	☐	⬭
•40.	Everyone is expected to accept all decisions made in the family, whether they like it or not.	☐	☐	☐	☐	☐	⬭

Area	I		II		III		IV	V		VI	VII	VIII
Item No.	31	37	32	38	33	39	36	34	40	35	–	–
Score												
Total												

Sr. No.	STATEMENTS	RESPONSES					
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	Score
•41.	Our family members are just confined to either work or school.	☐	☐	☐	☐	☐	⬭
42.	We are careful not to hurt anyone in the family by making thought-less remarks.	☐	☐	☐	☐	☐	⬭
43.	Whenever something needs to be done in the house, everyone joins in, happily.	☐	☐	☐	☐	☐	⬭
44.	When any member is feeling upset, he/she talks to some one in the family.	☐	☐	☐	☐	☐	⬭
•45.	The members of our family constan-tly keep bickering over small matters.	☐	☐	☐	☐	☐	⬭
46.	Whenever a marriage takes place in our family the person concerned is asked his/her views.	☐	☐	☐	☐	☐	⬭
47.	We go out often to visit friends or relations.	☐	☐	☐	☐	☐	⬭
48.	In our family if anyone is upset, there is always some one to comfort them.	☐	☐	☐	☐	☐	⬭
•49.	There is no sense of closeness in our family.	☐	☐	☐	☐	☐	⬭
•50.	Family Members often keep their feelings to themselves.	☐	☐	☐	☐	☐	⬭

Area	I		II		III	IV		V	VI		VII	VIII
Item No.	43	49	44	50	45	42	48	46	41	47	–	–
Score												
Total												

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
51.	Whenever anyone in our family is angry with another member, he makes sure to sort out things with him.	☐	☐	☐	☐	☐	⬭
52.	The decision to take on or continue a particular job is taken by the family members concerned in consultation with other family members.	☐	☐	☐	☐	☐	⬭
•53.	Joking and laughing is not encouraged in our family.	☐	☐	☐	☐	☐	⬭
54.	When things get taugh there is always someone in the family whom we can turn to.	☐	☐	☐	☐	☐	⬭
55.	When someone is sick in our family everyone participates in looking after the person.	☐	☐	☐	☐	☐	⬭
56.	Expressing an opinion about matters at home is strongly encouraged in our family.	☐	☐	☐	☐	☐	⬭
•57.	Whenever a family member does something well, the other members feel upset about it.	☐	☐	☐	☐	☐	⬭
•58.	All major decisions in our family are taken by the elders in our family, without asking anyone else's opinion..	☐	☐	☐	☐	☐	⬭
59.	There is a lot of affection amongst our family members...	☐	☐	☐	☐	☐	⬭
60.	When a family vacation is planned we all give our suggestions.	☐	☐	☐	☐	☐	⬭

Area	I		II	III		IV		V		VI	VII	VIII
Item No.	55	60	56	51	57	54	59	52	58	53	—	⊥
Score												
Total												

Sr. No.	STATEMENTS	RESPONSES					Score
		Strongly Agree	Agree	Neutral	Dis-agree	Strongly Disagree	
61.	Our family believes in not letting differences continue unsorted out.	☐	☐	☐	☐	☐	⬭
62.	If any member gets into trouble he/she gets help and sympathy from other family members.	☐	☐	☐	☐	☐	⬭
63.	When in trouble, all of us stand up for our family member.	☐	☐	☐	☐	☐	⬭
•64.	Quite often members of our family fail to arrive at a mutually acceptable solution.	☐	☐	☐	☐	☐	⬭
•65.	When anyone makes a mistake, the other members ridicule him.	☐	☐	☐	☐	☐	⬭
66.	In our family, we enjoy sitting together and talking to each other.	☐	☐	☐	☐	☐	⬭
67.	Showing anger by banging doors is rarely seen in our family.	☐	☐	☐	☐	☐	⬭
•68.	Members of our family are very critical of each other.	☐	☐	☐	☐	☐	⬭
69.	All of us participate together in family functions/programmes.	☐	☐	☐	☐	☐	⬭

Area	I			II	III			IV			V	VI	VII	VIII
Item No.	63	66	69	—	61	64	67	62	65	68	—	—	—	—
Score														
Total														