

# A Study of Depression and Suicidal Ideation Among College Students

Amit Raikwar

Masters in Psychology (Clinical Psychology), Discipline of Psychology School of Social Sciences,  
Indira Gandhi National Open University  
[raikwaramit@gmail.com](mailto:raikwaramit@gmail.com)

## Abstract

*Students have experienced a range of psychological issues as a result of unwanted life transitions, including feelings of inadequacy, rejection, loneliness, stress, sadness, violence, and suicide thoughts. The investigation's focus was on college students' melancholy and suicide thoughts. The disparity between college students studying social science and science is assessed and compared independently. Additionally, investigate each variable's association independently. For this purpose 200 college students from different college Delhi and NCR. Out of which 100 will be science students (male=50 and female=50) and 100 social science students (male=50 and female=50). They were administrated Beck depression inventory measuring depression of college students and Suicidal ideation scale for measuring suicidal ideation of college students. The pearson correlation was applied to find out relationship between variables separately. The results as follows: The science college students had significantly greater amount of depression than social science college students. Another finding revealed that science college students had significantly greater amount of suicidal ideation than social science and male college students. However, a positive relationship between depression, and suicidal ideation of college students was obtained. The review concludes with a summary of major research findings, as well as a consideration of future directions and implications for practice and policy.*

**Keywords:** Depression, Suicidal ideation, science and social science college students

## INTRODUCTION:

Life is valuable and meant to be completely experienced, according to nature. Thus, when someone chooses to terminate their life, they forfeit the one chance nature has given them—that is, the chance to fully live and experience every aspect of life. But not everyone has a happy life, and different individuals have varied reactions to the same events or circumstances. While some people can handle the pressure of failing or losing something, others allow hopelessness, despair, and a sense of defeat to overpower them and push them to take the ultimate risk of suicide. One of the earliest concerning indicators of severe suicidal behaviour is suicidal thoughts. It is specifically described as the domain of ideas and contemplations around death, suicide, and significant self-harming conduct. It is composed of ideas that are intimately connected to the preparation, execution, and result of suicidal ideation, especially the final one, which is concerned with ideas regarding other people's reactions. Scholars have concentrated on suicidal conduct as a subset of suicidal behaviour and as a unique type of psychiatric disorder.

## DEPRESSION:

The word "depression" refers to a wide range of depressive states and behavioural abnormalities. The shift in mood might be fleeting or permanent. It might be anything from a little sensation of sadness to a very pessimistic outlook on life and an incapacity to carry out daily tasks. Depression is a mental, emotional, and physical illness marked by varied degrees of hopelessness, loneliness, sorrow, disappointment, guilt, and

self-doubt. The majority of people occasionally experience depression; however, certain people may do so more frequently or with more profound, long-lasting symptoms. Depression can occasionally last for several months or even years. "Feeling blue" or "being in a bad mood" is the least severe kind of depression. It generally lasts for a short while and has little to no impact on regular, everyday activities. The duration and severity of symptoms are prolonged in moderate depression. Even if daily tasks are more challenging, the person is nevertheless able to do them. Severe depression can cause sharp mood swings or perhaps a total disengagement from one's regular activities and/or the outside world. Hopelessness might become so overwhelming that suicidal thoughts and delusions of death may surface. A person's ideas, behaviour, feelings, and overall well-being can all be impacted by depression, which is characterised by a low mood and aversion to action.

"Depression" encompasses more than melancholy. A lack of interest in and enjoyment from everyday activities, notable weight loss or increase, excessive sleepiness or sleeplessness, low energy, difficulty concentrating, feelings of worthlessness or excessive guilt, and repeated thoughts of death or suicide are some of the symptoms that people with depression may experience (APA, 2016).

Depression is a common mental illness that is characterised by melancholy, lack of interest or pleasure, low self-esteem or guilt emotions, abnormal eating or sleeping patterns, fatigue, and difficulty concentrating. Depression can be persistent or recurrent, significantly affecting a person's capacity to manage everyday life, job, or school. Suicide is a possible outcome of depression at its worst. People with mild depression can get by without medication, but those with moderate or severe depression could benefit from both professional talking therapies and medication. WHO (2015).

#### **SUICIDAL IDEATION:**

"Sir Thomas Brown" coined the term "suicide" in his "Religiomedici" in 1642. The public's perceptions of the document have generated a range of responses. These feelings are not the same as rage, sadness, disdain, anxiety, tension, fear, melancholy, or humiliation. A premeditated decision to terminate one's life, an unexpected method of dying, where the desire to die comes from within the individual and there are known or undiscovered reasons to end one's life are all considered suicide. Attempts at suicide, whether successful or not, also involve circumstances in which viable alternatives and future possibilities are never taken into account before to the act. The term "suicide" has meant different things to different individuals throughout history. A number of interpretations have been attributed to the term, such as "the murder of oneself," "nothing less than a (soft of) exit," "an end to psychic conflicts," "a conscious act of self-inflicted cessation," "to love and be loved," "to live or not to live," and "an act of despair of which the result is unknown, occurring after a battle between an unconscious death wish and a desire to live better." It is undeniably an act of self-destruction and a significant loss to society, regardless of how the word is interpreted.

According to Erikson, people try to figure out how to distinguish between identity and role uncertainty during their adolescent years. Teens should respond to the inquiry "Who am I?" in order to establish their individuality in relation to social, sexual, philosophical, and professional domains. According to Lock and Steiner (1999), teenagers usually experience significant stress in a variety of situations because they struggle to pretend to be someone else. For example, the changing roles that men and women play in sexuality may exacerbate identity confusion. Furthermore, environmental stressors such as parental pressure to achieve a certain level of schooling, the mobility of relatives, the availability of drugs, and social pressure can all contribute to depression (Capuzzi, 1994).

Suicides tend to occur in response to stress; mental incompetence and heartless attachment work together to weaken people's capacity for self-control and reason. Adolescent suicide victims reported feeling a great deal of extra strain from their parents. Mood disturbance concerns are typically prevalent in teenagers (Archer and Slesinger, 1999).

Adolescent families sometimes have higher expectations, mixed with identity uncertainty, a sense of inadequacy, genetic differences, and a generally extreme lack of self-respect. Professionals in schools may make young people more prone to suicide. Fifty percent of the replies in one research focused on family shock; the other half examined family isolation and the desire for parental care. Studies have shown that factors such as parental absence or inaccessibility, poor communication within the family, conflict within the family, high parental expectations for achievement, and overt family dysfunction are significant risk factors for suicide. Psychosocial distress, drug use, familial pressure, and ambiguous educational goals are associated with suicidal thoughts (Thompson, 1994).

### **SIGNIFICANT OF THE STUDY:**

Finally, we have concluded that "Depression, which leads to Suicidal Ideation," accounts for the majority of issues kids face. In 2008, Blanchard et al. A range of psychological issues, including insecurity, loneliness, rejection, stress, lack of affection, sadness, violence, and suicidal thoughts, have been reported by students as a result of unwanted changes in later life. As a result, in order to support self-efficacy management and wellbeing, there is an urgent need for assistance with psychological counselling, group therapy, relaxation therapy, and other alternative treatments, or a combination of them. Because of this, the goal of this research is to examine how group therapy helps college students with depression, suicidal thoughts, and a sense of purpose in life. So, first and the foremost thing which is very important is to get acquainted which have already been done in this area.

### **HYPOTHESIS:**

1. There would be significant difference between depression of science and social science college students.
2. There would be significant difference between suicidal ideation of science and social science college students.
3. There would be significant relationship between depression and suicidal ideation of science and social science college students

### **SAMPLE:**

Data was collected from 200 college students from different locations in Delhi and NCR. out of which 100 students focused on social science and 100 on science. In addition, the age range of the pupils was 20 to 25. The study's respondents were selected through the use of availability sampling approach.

### **RESEARCH DESIGN:**

In the present study a two groups design ('science students and social science students') and correlational design was used. Present study was to examine the difference between depression, and suicidal ideation of science and social science college students. On the other hand, examine the relationship between depression and suicidal ideation of science and social science college students. A correlational research design was used because it gives the measure of a relationship among variables and there is no control over them. Its aim is to find out whether any relationship exists and which one is the best predictor in model. So, Therefore, two group design and correlational research design is best suitable in this research.

### **TOOLS:**

The BDI-II, developed by A. T. Beck in 1996, consists of 21 items that measure the severity of depression as well as its physical, emotional, cognitive, and behavioural manifestations. People score each statement on

a 0–3 scale based on how well it captures their feelings during the previous two weeks. Sadness is one such object. 0 means I don't feel sad; 1 indicates I feel sad a lot of the time; 2 indicates I feel sad all the time; and 3 indicates I'm so sad or miserable that I can't take it. Item summaries result in total scores. (0–9) indicates no depression, (10–18) mild depression, (19–29) moderate depression, and (30–63) severe depression. Cronbach's alpha for the current study was .92, indicating strong internal consistency. Suicidal ideation scale, on the other hand, is a self-report tool created in 2011 by Devendra Singh Sisodia and Vibhuti Bhatnagar. This scale consists of twenty-five questions. There are four negative and twenty-one positive comments on this "scale." Thirteen, twenty-eight, eleven, and eighteen are the four negative assertions. Twenty-one positive statements are 2, 17, 3, 19, 1, 20, 4, 21, 5, 22, 6, 23, 7, 25, 8, 16, 9, 15, 10, 14, and twelve. The scale can be used to identify those who have a dangerously high level of suicidal thoughts. This is a self-administering exam that works well for both solo and group assessment. All age groups can use this test because of its "internal consistency (0.81) and test-retest reliability (0.78)." Furthermore, the measure possesses both excellent content validity and face validity. Actually, "the obtained coefficient was .74 and this scale has been validated in opposition to the external criteria." For positive statements, responses ranging from "strongly agree to strongly disagree" are assigned a score of five, four, three, two, and one. Similarly, for negative statements, responses ranging from "strongly agree to strongly disagree" are assigned a score of one, two, three, four, and five. Suicidal thoughts are more prevalent in those with higher scores. All age groups' norms for the scale are given. A person who scores between 121 and 125 is thought to have a very high level of suicidal thoughts. A score between 106 and 120 indicates a significant risk of suicide thoughts. Average suicidal ideation is represented by a score between 46 and 105. Individuals with modest levels of suicidal thoughts might be indicated by a low score, such as 31–45. On the other hand, a person scoring between 25 and 30 is considered typical and has very little suicidal ideation.

**RESULTS AND DISCUSSION:**

Obtained data were analyzed with the help of SPSS 20 using different statistical technique and the results were given in the table along with their interpretation and discussion in this chapter. The data were analyzed and tabled in the light of objectives.

**Table no. 1: Mean and SDs science and social science college students on depression, purpose of life and suicidal ideation.**

Variables	Group	N	Mean	SD
<b>Depression</b>	<b>science college students</b>	100	31.70	2.908
	<b>social science college students</b>	100	26.00	1.886
<b>Suicidal ideation</b>	<b>science college students</b>	100	46.30	2.751
	<b>social science college students</b>	100	40.20	1.317

A look at table-1 reveals that mean Depression of science and social science college students were 31.70 and 26.00 respectively and their respective SDs were 2.908 and 1.886. The same table depicts that mean scores in Suicidal ideation of science and social science college students were 46.30 and 40.20 respectively. The standard deviation of science and social science college students were 2.751 and 1.317 respectively. But these differences may be due to chance factors, hence to see that whether the differences are real or due to the chance factors, t- test were applied. The results are shown in the following table:

**Hypothesis-1: There would be significant difference between depression of science and social science college students.**

Variables	Group	N	Mean	SD	SED	t	P
Depression	science college students	100	31.70	2.908	1.096	5.201	<.01
	social science college students	100	26.00	1.886			

**Table no. 2: Means, SDs, and SED and results of t-ratio of science and social science college students on depression.**

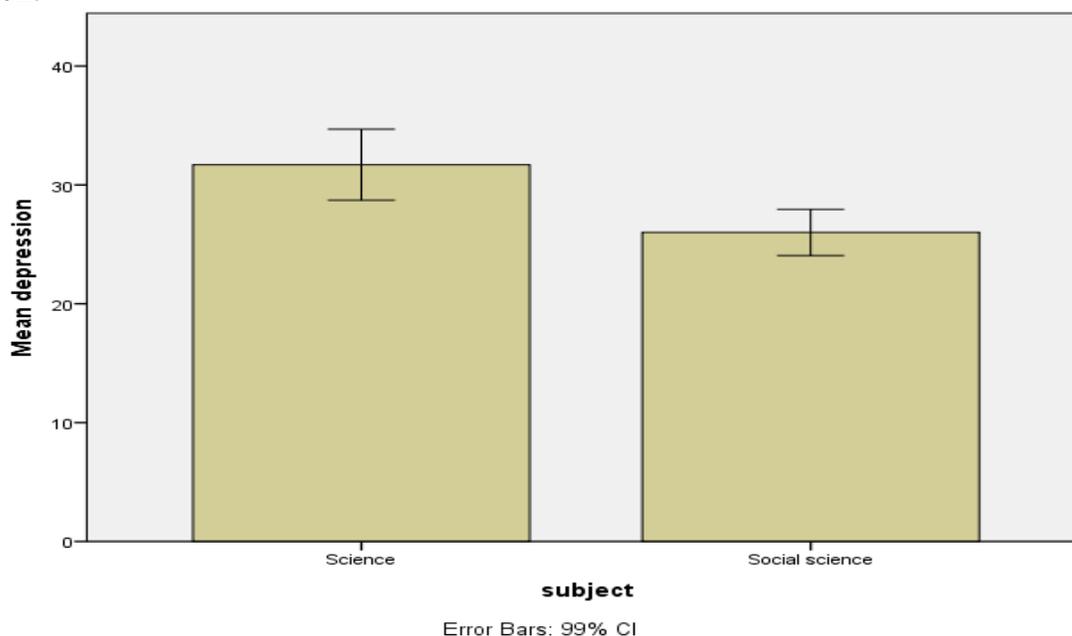


Figure 1: Graphic representation of mean depression scores of science and social science college students

Table- 2 and figure 1 shows that mean depression score of science and social science college students were 31.70 and 26.00 respectively. The SDs of depression score of science and social science college students were found 2.908 and 1.886 respectively. The t- ratios between means depression scores of the two groups was found to be 5.201 which was found significant at .01 level of significance. It means that there is statistical difference on the scores of depression between science and social science college students . The findings of the present study did confirm the hypothesis -1 which states that ‘there would be significant difference between depression of science and social science college students’ was accepted.

Significantly high levels of depression were seen in students in our study inside the scientific stream. This might be because pupils have to compete with other students to acquire a good rank and must appear for several exams. Other factors that might contribute to a high score include parental pressure, instructor pressure, and misalignment with other pupils. Similar findings were also noted in earlier research (Sanjiv K et al., 2010). The majority of college students are unfamiliar with this kind of competitive atmosphere,

which is entirely different from that of schools. In order to assist students in meeting the requirements of their courses, student counsellors are mandated for each stream. Students will experience less stress as a result, which will improve their academic performance and enable them to lead healthier campus lives.

**Hypothesis-2: There would be significant difference between suicidal ideation of science and social science college students.**

Variables	Group	N	Mean	SD	SED	t	P
Suicidal ideation	science college students	100	46.30	2.751	.964	6.325	<.01
	social science college students	100	40.20	1.317			

**Table no. 3: Means, SDs, and SED and results of t-ratio of science and social science college students on suicidal ideation.**

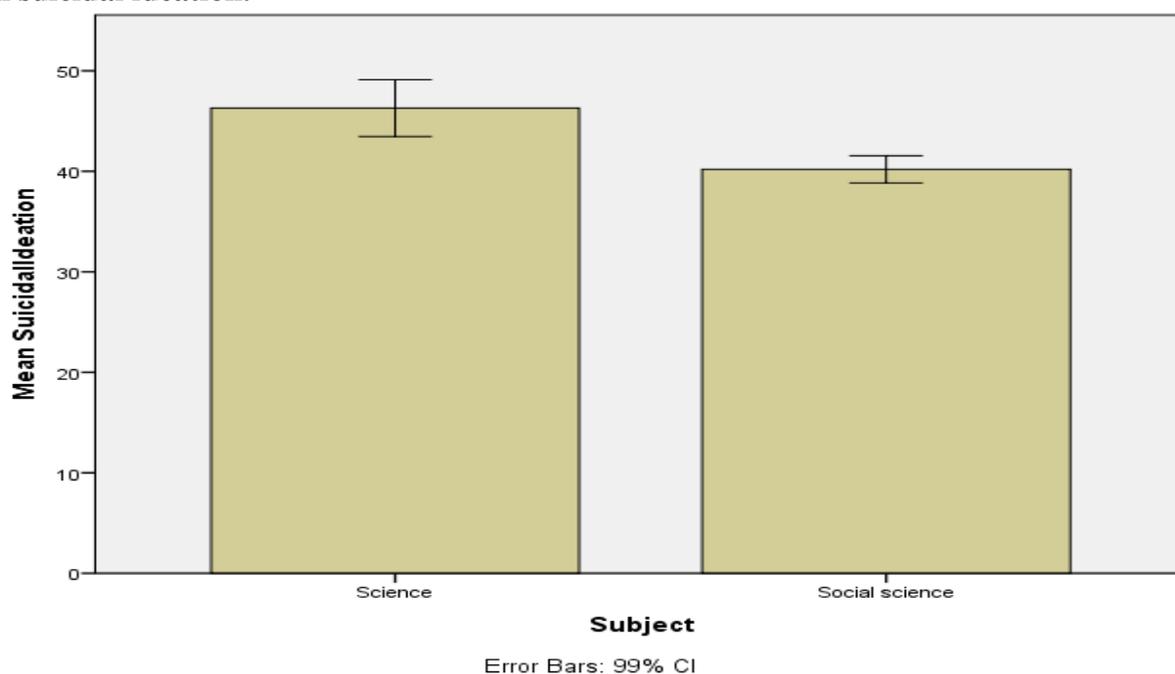


Figure 2: Graphic representation of mean suicidal ideation of science and social science college students.

Table- 3 and figure 2 shows that mean suicidal ideation score of science and social science college students were 46.30 and 40.20 respectively. The SDs of suicidal ideation score of science and social science college students were found 2.751 and 1.317 respectively. The t- ratios between means suicidal ideation scores of the two groups was found to be 6.325 which was found significant at .01 level of significance. It means that there is statistical difference on the scores of suicidal ideation between science and social science college students. The findings of the present study did confirm the hypothesis -2 which states that ‘there would be

significant difference between suicidal ideation of science and social science college students” was accepted.

The following list of causes for suicide thoughts was provided by students studying social science and science: (1) the wish to terminate one's life; (2) issues with love relationships; (3) the need for release from physical or emotional anguish; and (4) issues with academics or schooling. In the last year, 8 percent of social science students who had given suicide a serious thought and 14 percent of students who studied social science made an attempt at suicide. Medical treatment was needed by 19% of social science attempters and 28% of science student attempters.

**Hypothesis-3: There would be significant relationship between depression and suicidal ideation of science and social science college students.**

Variables	Correlation	Significance level
Depression	.932**	< .01
Suicidal ideation		

**Table 4: Results of Correlation between depression and suicidal ideation of science and social science college students.**

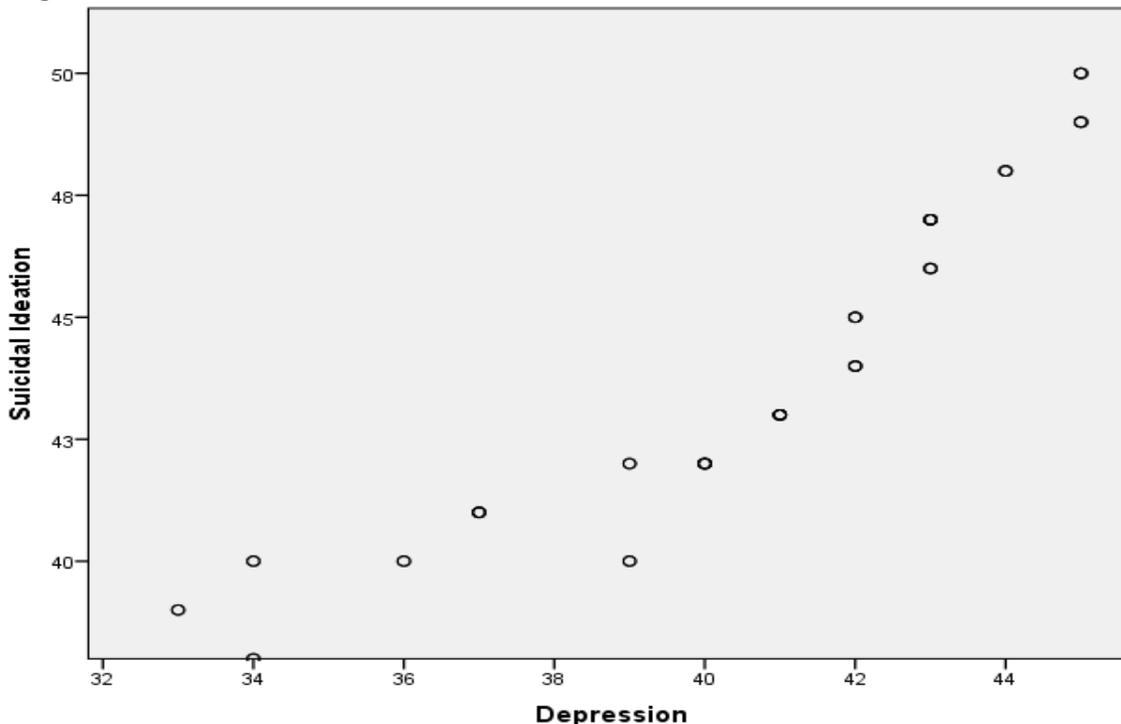


Figure: Graphic representation of correlation between depression and suicidal ideation of science and social science college students.

If we look table-4 and figure will find that coefficient of correlation between depression and suicidal ideation of science and social science college students was found as 0.932 which was significant at 0.01 level of significance. This, the value of coefficient of correlation was positive meaning thereby that the two variables are positively related. . It means increase in depression there will increase suicidal ideation in the

same direction. So, the hypothesis-3 that says that “there would be significant relationship between depression and suicidal ideation of science and social science college students.” was accepted.

The current study's findings indicate a positive and substantial correlation between suicidal thoughts and depression. This indicates that when depression grows, so do suicide thoughts, which is consistent with the findings of other studies (Gould et al., 2003; Wagner, 1997; Pinquart, 2009). According to Levine (2008), researchers hypothesise that depression among college students may contribute to the appearance of suicidal thoughts and attempts by negatively impacting their everyday performance and social interactions. Additionally, the study's other findings imply that anxiety, everyday stress, and mental health are positively and significantly correlated with suicidal ideation, which is consistent with the findings of other studies (Levine, 2008; Waldvogel, et al., 2008; Philips et al., 2002).

### CONCLUSION:

The present study was conducted with the objectives to explore the relationship between ‘depression and suicidal ideation’ of science and social science college students. For this purpose 200 college students from different college of Delhi/NCR. Out of which 100 will be science students (male=50 and female=50) and 100 social science students (male=50 and female=50). They were administered Beck depression inventory measuring depression of college students, and Suicidal ideation scale for measuring suicidal ideation of college students. The Pearson correlation was applied to find out relationship between ‘depression and suicidal ideation’ of science and social science college students separately. The following results were obtained a positive and significant relationship between depression and suicidal ideation of college students was obtained.

### REFERENCES:

- American Psychological Association. (2016). Guidelines for the undergraduate psychology major: Version 2.0. *The American psychologist*, 71(2), 102-111.
- Archer, R. P., & Slesinger, D. (1999). MMPI-A patterns related to the endorsement of suicidal ideation. *Assessment*, 6(1), 51-59.
- Beck, A. T., Steer, R. A., & Brown, G. K. (1996). *BDI-II: Beck depression inventory*. Pearson.
- Capuzzi, D. (1994). Preventing Adolescent Suicide.
- Gould, M.S., Greenberg, T., Velting, D.M., Shaffer, D. (2003). Young suicide risk and preventive interventions: a review of the past 10 years. *Journal American Academy Child and adolescent Psychiatry*. 42,(4), 386-405
- Levine, H. (2008). Suicide and Its impact on campus. *New Direction student Services*, 121, 63-76.
- Lock, J., & Steiner, H. (1999). Gay, lesbian, and bisexual youth risks for emotional, physical, and social problems: Results from a community-based survey. *Journal of the American Academy of Child & Adolescent Psychiatry*, 38(3), 297-304.
- Philips, M. R., Yang, g., Zhang, Y., Wang, L., Ji, h., Zhou, M.(2002). Risk factor for suicide in china: a national case-control. *The Lancet*, 360, (9347), 1728-1736.
- Pinquart, M. (2009). Moderating effect of dispositional Resilience on association between hassles and Psychological distress. *Journal of applied Developmental psychology*, 30, (1), 1-8.
- Sisidia, D. S., & Bhatnagar, V. (2011). *Manual for the Suicidal Ideation Scale*. National Psychological Corporation
- Thompson, J. M. (1994). Silencing the self: Depressive symptomatology and close relationships. *Psychology of Women Quarterly*, 19(3), 337-353.
- Wagner, B.M. (1997). Family risk factor for child and adolescent suicidal behavior. *Psychological Bulletin*, 121, (2), 246-298.

- Waldvogel, J. L., Rutter, M. N., Oberg, C. (2008). Adolescent suicide: Risk factor and Prevention strategies. *Current Problem Pediatric adolescent Health care*, 38,(4), 110-125
- World Health Organization. (2015). *World Health Statistics, 2015*. Retrieved from [http://www.who.int/gho/publications/world\\_health\\_statistics/2015/en/](http://www.who.int/gho/publications/world_health_statistics/2015/en/).
- Vikas, G., Parveen, B., Junaid, N., & Sanjiv, K. (2010). Phytochemistry and pharmacology of *Camilla sinensis*-a review. *Annals of Biological Research*, 1(2), 91-102.