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PREDICTING FURTHER SUICIDAL BEHAVIOUR
IN ATTEMPTED SUICIDE PATIENTS

A thesis presented in partial fulfilment
of the requirements for the degree
Doctor of Philosophy in Psychology
at Massey University

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October, 1983.

ABSTRACT

This study examined the psychological determinants of future suicidal behaviour and ideation in attempted suicide patients. The approach taken was to identify personality variables that insulated the suicide attempter against further attempts and suicidal thoughts. Three specific areas were focused on. Firstly, past research has shown attempters to be under considerable stress both before their attempt and up to two years afterwards. Self esteem was tested here as a potential insulator against stress, and in particular, low self esteem as an indicator of future suicidal behaviour. Secondly, many studies have noted the intimate relationship between depression and suicide. Beck (1967) postulated that the cognitive variable of hopelessness moderates the relationship between depression and suicide. While hopelessness has been implicated in past studies of suicidal intent, the present research tested hopelessness as a predictor of suicidal behaviour and ideation. A further cognitive variable, rigidity, has been found previously to be a characteristic of suicidal individuals. This study predicted rigidity is more a function of the depressed condition of attempters, rather than being directly involved in suicidal behaviour. Thirdly, the fact that suicidal individuals lead socially isolated lives has been noted by many researchers. The suicide attempter's social relationships are generally unsatisfying and a major source of interpersonal friction. This study examined the role of social skills in the development of suicidal behaviour, predicting low social skill would be associated with future suicidal behaviour and ideation. Overall, the research investigated the influence of cognitive, social skill and self esteem variables on the development of

suicidal behaviour.

As well as the above theoretical questions, the study also examined the predictive validity of the Zung Index of Potential Suicide. This scale uses clinical factors as opposed to the traditional demographic approach to predicting suicidal behaviour.

The subjects were 67 attempted suicide patients admitted to three New Zealand general hospitals. Each completed personality measures within two days of their admission to hospital. All subjects were contacted six months after their discharge and 46 completed a follow-up questionnaire. This questionnaire measured current level of depression, suicidal ideation and whether any further suicide attempts had been made.

The results showed 37% of attempters to have made at least one further attempt and 17% to have been admitted to hospital for a repeat attempt. Both low self esteem and high hopelessness significantly distinguished repeaters from first time attempters at admission, and those patients making a repeat attempt over the six month follow-up period. Hopelessness was significantly related to suicidal ideation on admission, while self esteem was related to both suicidal ideation and depression at follow-up. Poor social skills did not predict future depression, suicidal ideation or attempting. The relationship between depression and the variables of suicidal ideation and the number of previous suicide attempts, was largely explained by hopelessness. As predicted, ~~cognitive rigidity was significantly related to depression~~ at admission but not to suicidal behaviour or ideation. The Zung Index

of Potential Suicide, while significantly related to suicidal ideation and the number of previous suicide attempts, was a very poor predictor of future suicidal ideation or behaviour.

The results suggest psychological variables offer considerable potential over demographic factors in assessing suicidal risk. The differential effects of hopelessness and self esteem imply a division in terms of long and short term suicidal risk is appropriate, with different variables involved over the two periods. The task for future research is to identify the specific components of hopelessness and self esteem as well as other psychological variables involved in suicidal behaviour.

ACKNOWLEDGEMENTS

In bringing this project to fruition there have been many people who have helped along the way. I would like to thank my supervisors, Dave Clarke and Kerry Chamberlain, for their patient and thoughtful criticism of my research as it developed and was completed. Their suggestions have contributed immeasurably to this thesis. George Shouksmith provided valuable departmental support for the research. I would also like to acknowledge a grant from the New Zealand Mental Health Foundation (#981R52) which helped with travelling costs..

Thanks go to the attempted suicide patients who were involved in the research, often participating in the sincere hope they may help others in similiar desperate situations. Julie Mainland and John Kavanagh, Social Workers at Waikato Hospital, together with Jo Ballagh and Liz Chamberlain at Hutt Hospital, gave valuable assistance in gathering patient data. Their help is gratefully acknowledged.

Dick (ever-smiling) Brook, as well as Ken McFarland, gave helpful suggestions on data analysis. Walt Abell, who thinks at 78 but explains at 33, provided illumination on computer processing of the data.

A special thanks to my friends for getting me through this in only an irreparably damaged state. "Honorary Kiwi" Rick Lesch at CSPP San Francisco, tracked down material unavailable in New Zealand. Mary Jane Rotheram at Cal State, L. A. has been throughly supportive during the whole project. Others who have kept a spring in my step and a sparkle

in the cortex are; Alistair Nicholson, Jye Kang, Wendon and Iona Hutchins, Alan and Sally Merry, Hugh Kininmonth and Malcolm Johnson.

Finally I would like to dedicate this thesis to Daralyn, my wife, who has worked so hard and helped so much.

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