

Life Satisfaction and Social Maladjustment as Predictors of Suicidal Ideation among Undergraduate Students

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Abstract: Suicide is a sombre public health predicament amongst youths globally which often results from psychological, social, emotional and economic factors. This study investigated life satisfaction and social maladjustment as predictors of suicidal ideation among undergraduate students, with one hundred (100) undergraduate students with the age range of 17-45 years, mean of 22.02, a standard deviation of 3.38 selected as participants' from four faculties of Enugu State University of Science and Technology (ESUT) which include; twenty-eight (28) from Applied Nature Sciences, twelve (12) from Law, thirty-two (32) from Management Sciences and twenty-eight (28) from Social Sciences and Humanities, using multiple-stage sampling techniques. Neugarten, Havinghurst and Tobin (1961), Life Satisfaction Index Wiggins (1966), social maladjustment scale Beck, Steer and Ranieri (1988), Beck Scale for Suicide Ideation were used for data collection; this is cross sectional research design and multiple hierarchy regression was adopted for data analysis. Findings of this study revealed that social maladjustment did not predict suicidal ideation among undergraduate; sig. = .145, at p<.05 life satisfaction also did not predict suicidal ideation among undergraduate; sig. = .527, at p<.05, social maladjustment and life satisfaction did not jointly predict suicidal ideation among undergraduate; sig. f-change =.284 at p<.05. The result was in congruity with cognitive behavioural theory which postulated that the way people acquire and interpret information impact on their choices and behaviours matters. Therefore, students are encouraged to remain always ositive in their thinking to avert suicidal ideation irrespective of the circumstances around them.

Keywords: life, satisfaction, social, maladjustment, suicidal ideation.

1. INTRODUCTION

Background of the study

Suicide is serious public health problem (Jans, Taneli and Warnke, 2018: Health, 2017: Amare, 2018) that has multiple, complex and inter-related psychological, social and economic impacts across the population (Dong, Wang, Li, Xu, Ungvari, Ng, Chow, and Xiang, 2018). Globally, one million people died by suicide per year (one person every 40 s) (Health, 2017: Stone et al., 2017: American Foundation for suicide prevention 2017: WHO, 2017: Suicide, 2017). It contributes to 1.4% of the global burden of disease and the second cause of death for individuals' age between 15 and 29 years (Zubrick et al. 2016: Nock et al. 2008). Suicidal ideation (or suicidal thoughts) means having thoughts, ideas, or ruminations about the possibility of ending one's life (World Health Organization 2020). It is not a diagnosis, but is a symptom of some mental disorders and can also occur in response to adverse events without the presence of a mental disorder (Barry 2019). Suicidal ideation refers to thoughts, fantasies and wishes about ending of one's own life (Jans, et al., 2018, Dong et, al. 2018: DSM-5 2013). Suicidal ideation and suicidal attempts were the primary risk for ended individual's life (Jans, et al., 2018: Health, 2017: Suicide, 2017: WHO, 2015). Evidence showed that 50 to 75% of suicidal ideation and suicidal attempts were reported to primary health care prior to individual's attempts (Law, et al., 2010: Barnes and Kresnow 2001, Pagura, et al., 2009). The global lifetime prevalence of suicidal ideation in the general population was ranged from 3.1 to 56% (Nock, et al., 2008). Hence the need to investigate factors that can predict suicidal ideation, this necessitate the study social maladjustment and life satisfaction as predictors of suicidal ideation among undergraduates.

The ICD-11 describes suicidal ideation as thoughts, ideas, or ruminations about the possibility of ending one's life, ranging from thinking that one would be better off dead to formulation of elaborate plans (World Health Organization 2020). The DSM-5 defines it as thoughts about self-harm, with deliberate consideration or planning of possible techniques of causing one's own death (American Psychiatric Association (2013). The CDC referred to suicidal ideation as thinking about, considering, or planning suicide (Klonsky, May and Saffer, 2016). Suicidal ideation is the thoughts and ideas about committing suicide or a desire to terminate one's life without the suicidal act (Bum and Taesuk, 2021, Gvion and Apter, 2017). Suicidal ideation (or suicidal thoughts) means having thoughts, ideas, or ruminations about the possibility of ending one's life (World Health Organization 2020). Suicidal ideation refers to thoughts, fantasies and wishes about ending of one's own life (Jans, Taneli and Warnke, 2018: Dong, Wang, Li, Xu, Ungvari, Ng, Chow, and Xiang, 2018: American Psychiatric Association, 2013). Overlapping terms in the concept of suicide attempt: (i) attempted suicide/self-harm/suicidal intent, refer to a deliberated direct destruction of body tissues with a conscious suicidal intent, (ii) non-suicidal attempt/self-injury, refer to a deliberated direct destruction of body tissues without a conscious suicidal intent (Dong et, al. 2018: World Health Organization, 2013) and (iii) para-suicide, is a term that does not refer to the intention and covers behaviours that can vary from suicidal gestures to serious attempted suicide but unsuccessful to kill oneself. Most standard guidelines and evidence focus on self-harm irrespective of the intent. In line with other similar studies, in this study, suicidal attempt was defined irrespective of its intent and assessment tools (Dong et, al. 2018: World Health Organization, 2013: Diekstra, 1993). Different factors can cause the occurrence of suicidal ideation, but this study considered life satisfaction and social maladjustment as the two predictors of suicidal ideation. Yu, et al., (2022) examined the moderating mediating model between life satisfaction and suicidal ideation among Chinese college students, and they found out that life satisfaction was not only directly affected suicidal ideation, but also indirectly affected suicidal ideation through the mediating effect of college students' depression.

Liu, Ye, and Yang, (2022) defined life satisfaction as a cognitive assessment of an individual's entire life. Life satisfaction has been defined as a person's cognitive and affective evaluations of his or her life (Diener, Lucas and Oishi, 2002; Haider, Ahmed, Pasha, Pasha, Farheen and Zahid, 2022). Life satisfaction strongly influences overall wellbeing. Existing evidence indicate that life satisfaction decreases during medical school among medical students (Wang, Sun and Wu, 2022; Kjeldstadli, et al., 2006). Some of the consistently reported stressors relate to academics, time pressures, heavy workload, poor relationships, poor student guidance/support finances, fear of failure and examination frequency (Abdulghani, AlKanhal, Mahmoud, Ponnampereuma and Alfaris, 2011; Dyrbye, et al. 2011; Dyrbye, et al. 2014; Abreu Alves, et al., 2022). Life satisfaction is an important indicator to measure an individual's living situation, and it has received more and more attention. In addition, Proctor et al. (2009) as cited in Liu, Ye, and Yang, (2022) found that life satisfaction can affect an individual's future psychological state, and has important implications for an individual's

physical and mental development. Previous researches have shown that higher life satisfaction predicts an individual's future good mental state, and also improving college students' academic performance, academic well-being, and lowering student psychology health risks; lower life satisfaction predicts mental dysfunction (Antaramian, 2017). Therefore, improving life satisfaction is critical for undergraduate students to adapt to school and grow up healthily (Liu, Ye and Yang, 2022). Students are at a stage where they are not clear about their future plans and constantly adjust their life goals, so their life satisfaction is highly susceptible and unstable (Karatzias, et al., 2013). In that case, any events they experience in their lives can easily affect their life satisfaction. Another variable of interest is social maladjustment, Restrepo, et al., (2016) theorised that there is a relationship between social maladjustment and suicidal ideation.

Maladjustment is a term used in psychology to refer the inability to react successfully and satisfactorily to the demand of one's environment (dictionary.com, 2018). The term maladjustment can be referring to a wide range of social, biological and psychological conditions (Khanfer, et al., 2013). Maladjustment can be both intrinsic and extrinsic. Intrinsic maladjustment is the disparities between the needs, motivations and evaluations of an individual, with the actual reward gain through experiences. Extrinsic maladjustment on the other hand, is referred to when an individual's behaviour does not meet the cultural or social expectation of society (Bergman, 2018). The causes of maladjustment can be attributed to a wide variety of factors, including: family environment, personal factors, and school-related factors (Manichander, 2016). A lack of intervention for individuals who are maladjusted can cause negative effects later on in life (Manichander, 2016; Restrepo, et al., 2016). There are different types of maladjustment, namely: university maladjustment, social maladjustment, marital maladjustment. Sam et al. (2022) defined social maladjustment as the inability to develop a satisfying relationship, lack of social finesse and tact, breakdown in maintaining constructive social relationships. Social Maladjustment construct encompasses the aspects understood as Antisocial Personality and Antisocial Cognition (Bonta and Wormith, 2013). The most common behaviours that were considered maladjusted include: stealing, fighting, drug abuse, truancy, homosexuality, lesbianism, bullying, hooliganism, verbal violence as well as use of dangerous objects to threaten others such as knives and sharp broken bottles. Gibbon (2011) describes the socially maladjusted behaviour of a learner as one motivated by self-gain and strong survival skills. The five main causes of socially maladjusted behaviour of a young adult include: the family's socio-economic status, psychological needs, and personal needs, school related causes as well as teacher and peer related causes.

Cognitive behavioural theory by Beck, (1976) is adopted as theoretic framework because it postulated that the way people acquire and interpret information impact on their choices and behaviours matters, especially if the perception is hopeless, also this theory is based on the idea that, how we think (cognition), how we feel (emotion) and how we act (behaviour) all interact together. The negative evaluation an individual gives to situation will determine if he or she will be hopeless. The cognitive behavioural theory helps to anchor the three variables together, because our day-to-day activities depend on how we think and react or act. If one chooses to think positive he/she will likely act positively which will help to reduce suicidal thought and ideation, because the individual will learn to navigate through the stressful situation so as to stay afloat. Life satisfaction is a personal self evaluation of life event, if one perceived or interprets self as an achiever irrespective of the situation on ground; they tend to shy away from suicidal ideation. In addition, social maladjustment is an inability of an individual to adopt, which might be as a result of faulty thinking, positive evaluation of situation can enhance adjustment which may help to avoid suicidal thought and ideation.

Statement of the Problem

Suicidal ideation is a serious mental condition that put those affected at risk for attempted suicide or suicide. The developed world, unlike developing countries, has carried out a number of researches that have linked suicidality in students. Such researches have provided the developed world with statistical data that can be used to provide assistance to those who are prone to suicidality. Nigeria is not known to have a data bank where information on suicidality among students can be accessed. Lack of information on suicidality in Nigerian students is due to religious, cultural and traditional beliefs. Researches on suicidality in Nigeria will provide statistics that can guide mental health experts and related professionals on how to overcome these problems. Students need to be assisted to overcome factors that predispose them to suicidal ideation so that they will not go on to attempt or commit suicide. Is it as a result of lack of life satisfaction or social maladjustment, hence follows the questions;

- I. Will life satisfaction significantly predict suicidal ideation among under-graduate?
- II. Will social maladjustment significantly predict suicidal ideation among under-graduate?
- III. Will life satisfaction and social maladjustment jointly predict suicidal ideation among under-graduate?

2. METHOD

Participants

One hundred (100) students were selected as participants' using multiple-stage sampling techniques. With the age range of 17-45, mean of 22.02, a standard deviation of 3.38. Participants were selected from four faculty which include; twenty-eight (28) from Applied Nature Sciences, twelve (12) from Law, thirty-two (32) from Management Sciences and twenty-eight (28) from Social Sciences and Humanities. Inclusive criteria: the participants must be undergraduate student of the selected school. Exclusive criteria: none undergraduate student.

Instruments

Three instruments were employed in this study:

Life Satisfaction Index by Neugarten, Havinghurst and Tobin (1961)

Social Maladjustment scale by Wiggins (1966)

Beck Scale for Suicide Ideation by Beck, Steer & Ranieri (1988)

Neugarten, Havinghurst and Tobin (1961), Life Satisfaction Index

Neugarten, Havinghurst and Tobin (1961), Life Satisfaction Index, is a 18-item inventory designed to measure the psychological well-being of people in general and of elderly persons, over 6- years, of age in particular psychological well-being in an individual's perception of the degree of emotional and social satisfaction he/she derives from life; especially, the joy living. Add together the values of the number shaded in all the items to obtain the client's total score. Neugarten et al. (1961) provided the original psychometric properties for American samples while Erinoso (1996) provided the properties for Nigerian samples.

Neugarten et al. (1961) reported excellent inter-rate reliability coefficients when the scale was used by interviewers to rate respondents. The concurrent validity coefficients obtained by Erinoso (1966) by correlating LSI-Z with Death Anxiety Scale (DS; Templar, 1970) and Religious Affiliation Scale (RAS; Omoluabi; 1995) are: 26 and -26 respectively. The Nigerian norms or mean of scores of the clients: Scores lower than the norms indicate that the client is satisfied with life while scores higher than the norms indicate dissatisfaction with life. In short, the lower the score, the higher the life satisfaction.

Wiggins (1966) social maladjustment scale

Wiggins (1966) social maladjustment scale, is a 25-item inventory which is to measure specific personality/ behavioural characteristics that are distinct from the Clinical Scales of the MMPI specifically, SMS is designed to measure those behaviour characteristics which make an individual unable to adjust adequately to social situations because he/she is too self-conscious, introverted and lacks necessary social skills. Wiggins (1966-1969) provided the original psychometric properties for American samples while the properties for Nigerian samples were provided by Adekunle (2002) and Bolaji (2002). The Cronbach's alpha internal consistency reliability coefficients reported by Wiggins (1969) are; .856 and .835 for males and females respectively. The reliability coefficients obtained by Bolaji (2002) are 21- days test-retest = .55. KR -20= 45; spit - half = .81. Wiggins (1969) obtained a concurrent validity coefficient of .899 by correlating SMS with MMPI scale (social introversion). The concurrent validity coefficient obtained with political Participation Scale (PPS) by Gough et al. (1951) is .36 (Bolaji, 2002) while that with self-Efficacy Scale (SES) by Sherer et al (1982) is .24 (Adekunle, 2002).

The Beck, Steer & Ranieri (1988) Beck Scale for Suicide Ideation

The Beck, Steer and Ranieri (1988) Beck Scale for Suicide Ideation contains 21 statement groups each assessing various aspects of suicidal ideation. Each statement group consists of three sentences that describe different intensities of suicidal ideation, representing a three-point scale (0 to 2). Participants are instructed to choose the particular statement of each group that is most applicable to them. The total BSS score can range from 0 to 38, with higher values indicating a greater risk of suicide. The BSS has proven to be a reliable measure across many different settings and samples, showing good internal consistencies e.g. $\alpha = .87$ in an outpatient sample (Barnhofer, Crane, Hargus, Amarasingh, Winder and Williams, 2009), $\alpha = .89$ in a risk sample (Crane, Barnhofer, Duggan, Eames, Hepburn, Shah and Williams, 2014), and

$\alpha = .88$ in a non-clinical student sample (Hirsch and Conner 2006). One-week retest reliabilities of $r_{tt} = .54$ (Beck and Steer, 1993) and $r_{tt} = .88$ (Pinninti, Steer, Rissmiller, Nelson and Beck, 2002) have been found. Suicidal ideation as measured by the BSS has been shown to be strongly associated with hopelessness (Cochrane-Brink; Lofchy; Sakinofsky, 2000; Cornette; Strauman; Abramson; Busch 2009 and Hewitt; Flett; Weber 1994) and depression (Cochrane-Brink; Lofchy; Sakinofsky, 2000; Bisconer; Gross 2007 and Fitzpatrick; Witte; Schmidt, 2005). High correlations between the BSS and other instruments for the measurement of suicidality have also been found, for example with the Suicide Probability Scale (Bisconer and Gross, 2007), the Adult Suicidal Ideation Questionnaire (Bisconer and Gross, 2007), and the Ratings of Suicidal Thoughts (Hewitt; Flett; Weber, 1994), providing support for convergent validity.

Procedure

The researcher employed the help of research assistants whom are the faculties' student executives to help in administering and collecting the instrument, the participants who are students were selected using multi-stage (cluster, simple: by balloting and purposive) sampling techniques; the students were clustered according to their faculty, then Applied Nature Sciences, Law, Management Sciences and Social Sciences and Humanities faculties were picked with the aid of simple random selection: by balloting, before purposive sampling techniques was apply to select the students that participate in the research. The participants were asked to respond to the items by shading one of the boxes in front of the statements which best reflects how much they agree or disagree with the statement. One and thirty copies of questionnaire were send out, one hundred and fifteen were return, of which nine bears multiple names and six were not properly responded to, which total the while responded ones to be one hundred, which were used for the analysis.

Design and statistics

This is a Cross-sectional survey design and multiple Regressions were adopted for data analysis.

3. RESULTS

Table I: Summary table of descriptive statistics on social maladjustment and life satisfaction as predictors of suicidal ideation among undergraduate

Descriptive Statistics			
	N	Mean	Std. Deviation
Suicidal ideation female	56	11.0351	6.43085
Suicidal ideation male	44	13.9545	7.02472
Social maladjustment male	44	14.7727	3.38164
Social maladjustment female	56	13.9123	2.81755
Life satisfaction male	44	22.6818	6.87690
Life satisfaction female	56	23.4912	7.65582

Table I above indicates that male students have more suicidal ideation with a mean of 13.95, standard deviation of 7.02 than female students' mean of 11.04 and a standard deviation of 6.43. Male students show more socially maladjusted with a mean of 14.77, standard deviation of 3.38 than female student with a mean of 13.91 and standard deviation of 2.82. the female student have more life satisfaction with mean of 23.49, standard deviation of 7.66 than their male counterparts mean of 22.68 and standard deviation of 6.88

Table II: regression statistics

Model	Variables	R	R ²	Adj R ²	Unst Coeff β	St Coeff β	t	Sig.
1		.160	.026	.006				.284
	Social maladjustment				.321	.147	1.471	.145
	Life satisfaction				-.060	-.064	-.635	.527

Dependent Variable: suicidal ideation, at $p < .05$. R= relationship, R²= relationship square, Adj R= adjusted relationship, Unst= unstandardised, St= standardised, Coeff= coefficients.

From table II above, the result indicated that the regression for social maladjustment did not significantly predict suicidal ideation among undergraduate (sig. = 0.145, $p < .05$). A no strong relationship between social maladjustment and suicidal ideation among students was obtained, thus the first hypothesis tested, which stated that social maladjustment will significantly predict suicidal ideation among students is hereby rejected. This is based on the fact that a no significant association between social maladjustment and suicidal ideation among students was obtained at 95% confidence level. Also result indicated that the regression for life satisfaction cannot significantly predict suicidal ideation among undergraduate (sig. = 0.527, $p < .05$). A no strong relationship between life satisfaction and suicidal ideation among students was obtained, thus the second hypothesis tested which stated that life satisfaction will significantly predict suicidal ideation among students is hereby rejected. This is based on the fact that a no significant association between life satisfaction and suicidal ideation among students was obtained at 95% confidence level. Also the result obtained shows that life satisfaction has negative interaction with suicidal ideation, this means that when one of the variable is going up the other will be going down.

Result as shown in Table II above, indicated that there was no association between the dependent variable and the independent variables at $r = .2$ ($R = 0.16$). Both social maladjustment and life satisfaction accounted for 2.6% of the variation in suicidal ideation among undergraduate ($R^2 = .026$). Also, the table did not show a significant outcome based on the value of sig. = .284 at $p < .05$ in relation to the predictor's variables on the dependent variable suicidal ideation among undergraduate. Thus the third hypothesis tested which stated that social maladjustment and life satisfaction jointly predicted suicidal ideation among undergraduate is hereby rejected. This is based on the fact that no significant value was obtained.

4. SUMMARY

This study shows that social maladjustment and life satisfaction are not good predictors of suicidal ideation; the result also signifies that lack of satisfaction viewed from material angle cannot predict or cause suicidal thought.

5. DISCUSSION

The first hypothesis tested which stated that social maladjustment will significantly predict suicidal ideation was not confirmed, hence, the hypothesis was rejected. The result was not in agreement with the work of Restrepo, Chesin, William and Jeglic (2016), Park and Kim (2017). The non-affirmation of the result means social maladjustment cannot cause suicidal thought among undergraduate. Though the regression did not show any significant result among the male and female but the mean statistic display that male possess more suicidal ideation and are more socially maladjusted than female. The result gotten indicated that being socially maladjusted alone is not enough to generate suicidal ideation, rather other factors might be underlying causes. The higher mean score shows that male is more socially maladjusted than female, which means that male is easily maladjusted socially than their counterpart. This implies that being socially maladjusted cannot lead to possessing of suicidal thought by undergraduate student.

The second hypothesis tested which stated that life satisfaction will significantly predict suicidal ideation among undergraduate was not confirm, hence, the second hypothesis was rejected. The result is not in congruence with the work of Hossain, Paul and Towhidul (2016), Heisel and Flett (2004), the result shows that lack of life satisfaction cannot trigger suicidal ideation among undergraduate, and it means other factors can mediate life satisfaction for suicidal ideation not to be presented. Though gender differences did not predict suicidal ideation the male student display higher mean scores than female, showing that male student possesses high suicidal ideation than their female counterpart.

Further, hypothesis three tested which stated that social maladjustment and life satisfaction will jointly suicidal ideation among undergraduate was not confirmed, indicating that the two variables did not jointly/significantly predict suicidal ideation among undergraduate, In other words, social maladjustment and life satisfaction cannot jointly predict suicidal ideation, which means other factors have to be looked at as a major facilitator of suicidal ideation among undergraduate.

Implication of the finding

The result obtained is in congruity with cognitive behavioural theory which was adopted as theoretic framework because it postulated that the way people acquire and interpret information impact on their choices and behaviours matters, especially if the perception is hopeless, also this theory is based on the idea that, how we think (cognition), how we feel (emotion) and how we act (behaviour) all interact together, which means that students do not attach negative

interpretation to be social maladjustment and lack of life satisfaction to trigger suicidal ideation. This research has added to existing literature which can be referred to by future researcher. The study shows that social maladjustment life satisfaction cannot trigger suicidal ideation among undergraduate, which means no matter the high degree of social maladjustment it cannot predict suicidal ideation, and also life satisfaction and suicidal ideation cannot meet at same time, when one of the variable is going up the other will be going down.

Limitation of the study

Many factors militated against this research; one such factor is the unnecessary calling for sit at home by none state actors which reduces the lectures days of students, more participants would have participated assuming there were no call for sit at home. The researcher has to extend the duration for distribution and collection of the scale from the participated students

Post covid-19 era affected school calendar, because the school management were trying to balance the academic calendar, it lead to heisting lectures. This situation also affected the numbers of students that agreed to participate in this study. The researcher has to allow the participants to go home with the scale to give time to those whom wish to participant

Suggestions for further studies

Future researchers should consider sampling participants from different geo-political zones so as give room for more participants.

Secondary school and none university student students should be consider also by future researcher in case of ASUU strike.

Conflict of interests

The authors declare that they have no financial or personal relationship(s) that may have inappropriately affected their report of the findings of this research.

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