A Study of Suicide Tendency among Students of 10th and 12th Standards

Dr. Arvind Dungrani

ABSTRACT

This present research work aims at finding out the difference between 10th and 12th standard students on suicide tendency. For this purpose a total sample of 240 students. Data was collected by using ‘Suicidal Tendency Scale’ developed by Dr. D. J. Bhatt and Dr. R. G. Meghnathi (2004). Results were analyzed by using ‘F’ test (ANOVA). Results revealed that there is no significant difference between 10th and 12th standard students on suicide tendency (F=2.70). There is significant difference between Boys and Girls students on suicide tendency (F=7.53). There is significant difference between Rural and Urban students on suicide tendency (F=43.05). There is significant difference between Standard and Gender on suicide tendency (F=134.22). There is significant difference between Gender and Residential area on suicide tendency (F=140.08).There is no significant difference between Standard and Residential area on suicide tendency (F =1.55). There is significant difference between Standard, Gender and Residential area on suicide tendency (F=144.10).

Keywords: Suicide, Suicide Tendency, 10th and 12th Standard, students

There are many problems in Social life. Out of them some issues are such that an individual resolves them in his/her own way. But some issues are such that the individual cannot resolve and suicide is the only remedy for resolving the issues which cannot be avoided. Benzel (Encyclopedia of Social Sciences 1935) states that: “the issue of suicide is the remedy of such strong problems of individual, which he/she cannot resolve in any manner” (Badhel 2001).

There is word ‘suicide’ in English, which has been derived from Latin words ‘sui’ and ‘cideo’. The meaning of ‘sui’ is ‘one’s own self and ‘cideo’ means ‘to kill’. Thus as per meaning of word ‘suicide’ means to kill one’s own self. Gujarati word ‘Atmhatya’ also have the same meaning, ‘Atma’ means ‘self’ and ‘hatya’ means ‘to kill’. Thus, Atmhatya means to kill one’s own self. As per Oxford English Dictionary, suicide means the act of killing one’s own self.

1 Associate. Prof. Shamaldas Arts College, Maharaja Krushnakumarsinhji, Bhavnagar University, Bhavnagar. (Gujarat)

*Responding Author

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A Study of Suicide Tendency among Students of 10th and 12th Standards

As Indicated by the Decision to include Suicide as one of the Leading indicators of health status in healthy people 2010 (Public health response to youth suicide and violence Act of 1990), Senate Resolution (Recognizing Suicide as a National Problem and Declaring Suicide Prevention to be a National Priority), and the public health service revised program Announcement for studies of suicide and suicidal behavior, research related to the understanding, prevention and treatment of suicidal behaviors is a high priority. Because of increased awareness of suicide as a problem, and because completed suicide is the third leading cause of death among young people, efforts to identify youths who have engaged in suicidal behaviors are at “high risk” for engaging in suicide behavior have increased markedly over the last years.

As a case in point, In November 1998, “Suicidal in youth: developing the knowledge base for youth at risk”, which brought together researchers in juvenile suicidal behavior as well as researchers in other areas including developmental epidemiology, child psychiatry and human development, several areas of need were identified the continuing need for consistently used operational definitions of suicide behaviors, the need for some consensus on important constructs regarding the study of suicidal behaviors, the need to examine suicide behaviors in the context of high-risk behaviors, and the need for some consensus as to the most useful ways of assessing suicidal. It was suggested that it would be useful for researchers to have an updated critical review of the instruments that have been used to assess suicidal behaviors among students.

The objects of fulfilling the reasons of suicide have been proved through many principles. Amongst these principles, (1) Psychoanalytical theory (2) Sociological Theory (3) Theological Theory etc. It has been admitted in these principles that an individual committing suicide abandons his/her life due to sick compulsion. Freud stated its cause as Death Instinct. As per opinion of Issanac (Jogsan 2005), in fact the individual committing suicide makes dramatic call for help. It is other matter that many times said call does not influence others and the said individual abandons own life.

In the present times, development of urban life temptation for unlimited physical development, continuous competition for physical development and situation of mental tension and pressure culminating form it, increase in mental diseases, pressure of traditional values on modern character developed under process of modernization etc, have made the issue of suicide more serious. In the present study, an effort has been made through a survey to measure tendency of suicide of students studying in Std. 10th and 12th

**Problem Statement**

“A Study of Suicide Tendency among Students of 10th and 12th Standard “

**Objective Of The Research**

(1) To study suicide tendency of 10th and 12th standard student.
(2) To study suicide tendency of gender to the student.
(3) To study suicide tendency of residential area to the student.
Hypothesis Of The Research

The following things of hypothesis have been formulated for the investigation, here, researcher builds a null hypothesis.

1. There will be no significant difference between 10th and 12th standard student in relation to suicide tendency.
2. There will be no significant difference between boys and girls student in relation to suicide tendency.
3. There will be no significant difference between rural and urban area in relation to suicide tendency.
4. There will be no significant difference between standard and gender in relation to suicide tendency.
5. There will be no significant difference between gender and residential area in relation to suicide tendency.
6. There will be no significant difference between standard and residential area in relation to suicide tendency.
7. There will be no significant difference between standard, gender and residential area in relation to suicide tendency.

Variables

(I) Independent variables
(A) Standard (A1 = 10th and A2 = 12th)
(B) Gender (B1 = Boys and B2 = Girls)
(C) Residential Area (C1 = Rural and C2 = Urban)

(II) Dependent variables
(A) Suicide Tendency Score.

Research Design

2 X 2 X 2 Factorial Design

<table>
<thead>
<tr>
<th>Variable</th>
<th>10th Standard</th>
<th>12th Standard</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Area</td>
<td>Boys</td>
<td>Girls</td>
<td>Boys</td>
</tr>
<tr>
<td>Rural</td>
<td>30</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Urban</td>
<td>30</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>60</td>
<td>60</td>
</tr>
</tbody>
</table>

N = 240  n = 30

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A Study of Suicide Tendency among Students of 10th and 12th Standards

Sample
In this research study of 10th and 12th Standard student shall be selected form Bhavnagar and its rural and urban area. These samples will random sampling method. A total of 240 students shall be selected out of which 120 would be 10th Standard students and 12th Stander students out of which 60 would be boys and 60 girls from each of these 120 students 60 10th Standard and 60 12th Stander students would take.

Tools
For this study to collect required information the following tools shall be used.

(a) Personal Data Sheet
A personal data sheet developed by Investigator was used to collect information about Standard, Gender, and Residential area, Types of family and Age.

(b) Suicidal Tendency Scale
The Scale was developed by Dr. D. J. Bhatt and Dr. R. G. Meghnathi (2004). To measure the suicide tendency. Suicidal tendency scale has presented in a simple and understandable style. Moreover, 40 data were accommodating in that moreover marks are giving to these 40 data by four options.

In this scale scoring is as per the four divisions. In each division, minimum 10 score and maximum 40 score is available. In this scoring the more the score the more is the suicidal tendency. In addition, the less the score the less is the suicidal tendency. It interpreted this way. In this way in all the divisions minimum score 40 and maximum score 160 is available.

Reliability
To decide the reliability rate of this scale, 160 rural and urban men and women of Standardized in the age group of 16 to 30 years were taken in. By the method of odd-even half division reliability found out moreover. Its Co-relation has seen as r = 0.92. This indicates high reliability rate.

Lunagariya U. B. (2013) achieves this scale reliability through test-retest method next time 80 samples were selected and the Co-relation of this reliability has been seen as r = 0.83.

Validity
The validity of this scale has obtained by the distinct characteristic for the validity of the scale, normal (N=40) and abnormal (N=40) two groups were made. In the abnormal group such patients who have tried to commit suicide and other patients who are identified as abnormal person by the psychiatrists. In all these persons, the level of the suicidal tendency has found more than the person of normal group.

To find out the difference between these two groups ‘t’ test has been used. Here the difference between these two groups has observed as significant. (‘t’ ratio found 0.01) Compared to normal group in abnormal group more suicidal tendency is found.
Thus, to prove the standard of suicidal tendency scale, this scale was prepared in Gujarati language for the Gujarati speaking people.

### Result

**Table – 1 Showing result of ANOVA on Suicide Tendency**

<table>
<thead>
<tr>
<th>Source of Variance</th>
<th>Sam of Square</th>
<th>df</th>
<th>Mean Sam of Square</th>
<th>‘F’ Ratio</th>
<th>Level of Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard (A)</td>
<td>410.81</td>
<td>1</td>
<td>410.81</td>
<td>2.70</td>
<td>N.S.</td>
</tr>
<tr>
<td>Gender (B)</td>
<td>20.20</td>
<td>1</td>
<td>20.20</td>
<td>7.53</td>
<td>0.01</td>
</tr>
<tr>
<td>Residential Area (C)</td>
<td>6552.15</td>
<td>1</td>
<td>6552.15</td>
<td>43.05</td>
<td>0.01</td>
</tr>
<tr>
<td>A x B</td>
<td>20427.18</td>
<td>1</td>
<td>20427.18</td>
<td>134.22</td>
<td>0.01</td>
</tr>
<tr>
<td>B x C</td>
<td>21318.50</td>
<td>1</td>
<td>21318.50</td>
<td>140.08</td>
<td>0.01</td>
</tr>
<tr>
<td>A x C</td>
<td>236.03</td>
<td>1</td>
<td>236.03</td>
<td>1.55</td>
<td>N.S.</td>
</tr>
<tr>
<td>A x B x C</td>
<td>21930.54</td>
<td>1</td>
<td>21930.54</td>
<td>144.10</td>
<td>0.01</td>
</tr>
<tr>
<td>Wss</td>
<td>35307.24</td>
<td>232</td>
<td>152.19</td>
<td>_</td>
<td>_</td>
</tr>
<tr>
<td>Total</td>
<td>106202.65</td>
<td>239</td>
<td>_</td>
<td>_</td>
<td>_</td>
</tr>
</tbody>
</table>

N.S. = Not Significant

**Table – 2 Showing mean differences in suicide tendency level with respect to Standard**

<table>
<thead>
<tr>
<th>Standard</th>
<th>N</th>
<th>Mean</th>
<th>Mean Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>10th</td>
<td>120</td>
<td>113.52</td>
<td></td>
</tr>
<tr>
<td>12th</td>
<td>120</td>
<td>116.13</td>
<td>2.61</td>
</tr>
</tbody>
</table>

**Table – 3 Showing mean differences in suicide tendency level with respect to Gender**

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Mean Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>120</td>
<td>105.65</td>
<td></td>
</tr>
<tr>
<td>Girls</td>
<td>120</td>
<td>124.00</td>
<td>18.35</td>
</tr>
</tbody>
</table>
A Study of Suicide Tendency among Students of 10th and 12th Standards

Table – 4 Showing mean differences in suicide tendency level with respect to Residential Area

<table>
<thead>
<tr>
<th>Residential Area</th>
<th>N</th>
<th>Mean</th>
<th>Mean Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>120</td>
<td>120.05</td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>120</td>
<td>109.60</td>
<td>10.45</td>
</tr>
</tbody>
</table>

**DISCUSSION**

The present study was to examine suicide tendency among students studying in Std. 10th and 12th Standards. On examining independent, joint and internally joint effect of three independent variables, the results were obtained.

On examining whether suicide tendency affects standard or not, it was found that if the student is in Std. 10th or 12th, it does not affect suicide tendency. Here, ‘F’ ratio is 2.70. The said hypothesis is accepted. The difference of mean between suicide tendency of students studying in std. 10th and 12th is found 2.61. Amongst both of them, the proportion of suicide tendency is found more in students studying in Std. 12th.

In reference to gender, the gender of student may be anyone – boy or girl – it affects suicidal tendency. Here, ‘F’ ratio is 7.53. The said hypothesis is not accepted. The difference of mean between suicide tendency of boy or girl is 18.35. Amongst both of them, the proportion of suicidal tendency is found more in girls.

In reference to residential area, the residential area of student may be anyone – rural or urban – it affects suicidal tendency. Here, ‘F’ ratio is 43.05. The said hypothesis is not accepted. The difference of mean between suicidal tendency of students residing in rural and urban areas is 10.45. Amongst both of them, the proportion of suicidal tendency is found more in the students of urban area.

The difference of suicidal tendency of students in reference to standard and gender is found significant. Here, ‘F’ ratio is 134.22. The said hypothesis is not accepted. Therefore, it can be said that even if the standard or gender may be any one, it affects suicidal tendency.

The difference of suicidal tendency of students in reference to gender and residential area is found significant. Here, ‘F’ ratio is 140.08. The said hypothesis is not accepted. Therefore, it can be said that even if the gender or residential area may be any one, it affects suicidal tendency.

The difference of suicidal tendency of students in reference to standard and residential area is found not significant. Here, ‘F’ ratio is 1.55. The said hypothesis is accepted. Therefore, it can be said that even if the standard of residential area may be one, it does not affect suicidal tendency.
The difference of suicidal tendency of students in reference to standard, gender and residential area is found significant. Here, ‘F’ ratio is 144.10. The said hypothesis is not accepted. Therefore, it can be said that even if the standard, gender or residential area may be any one, it affects suicidal tendency.

**RESEARCH FINDINGS**

**STANDARD**
There will be no significant difference between 10th and 12th standard students in relation to suicide tendency is accepted. This suggests that the level of standard does not play any significant role in the level of suicide tendency of a student.

**GENDER**
There will be significant difference between boys and girls students in relation to suicide tendency is rejected. This suggests that the level of Gender does play any significant role in the level of suicide tendency of a student.

**RESIDENTIAL AREA**
There will be significant difference between rural and urban students in relation to suicide tendency is rejected. This suggests that the level of Residential area does play any significant role in the level of suicide tendency of a student.

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