IJCRT.ORG ISSN : 2320-2882

INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

A Study of Psychological Factors Influencing Suicide Risk

Mansi Patel (M.A. Psychology)

Abstract

Suicide has become a serious public health concern worldwide, affecting individuals, families, and communities. Suicidal behaviour does not occur due to a single reason; rather, it develops through the interaction of various biological, social, environmental, and psychological factors. Among these factors, psychological conditions have a significant influence on an individual's emotional experiences, thought patterns, and behavioural responses, which may increase the risk of suicide. The present study aims to examine the psychological factors influencing suicide risk. The study focuses on major psychological factors, including depression, anxiety, stress, and hopelessness. These factors are considered important contributors that may affect an individual's mental state and increase vulnerability towards suicidal thoughts and behaviours. The study attempts to understand the relationship between psychological conditions and suicide risk by examining different aspects associated with suicidal tendencies. The research highlights the importance of understanding psychological factors involved in suicide risk and explores the role of emotional and cognitive experiences in the development of suicidal thoughts and behaviours.

Keywords: Suicide Risk, Psychological Factors, Depression, Anxiety, Stress, Hopelessness, Mental Health.

Introduction

Suicide is a major public health concern that affects every region of the world. It is a complex phenomenon resulting from the interaction of psychological, biological, social, and environmental influences rather than a single cause. Over the past decade, increasing attention has been given to identifying the factors that place individuals at greater risk, particularly those related to mental health. The World Health Organization (WHO) estimates that more than 700,000 people die by suicide each year, making it one of the leading causes of preventable deaths worldwide. Young people between 15 and 29 years of age are among the most affected groups, highlighting the need for continuous research on suicide risk and its associated determinants.

India contributes a substantial share of global suicide deaths. According to the National Crime Records Bureau (NCRB), 170,746 suicide deaths were reported in the country during 2024, indicating that suicide continues to be a serious public health challenge. Research conducted in India has consistently emphasized the role of psychological factors in suicidal behaviour. Anil Rane and Abhijit Nadkarni (2014), in their systematic review, reported that suicide in India is influenced by multiple interacting factors and highlighted psychological distress as one of the major contributors. They also noted considerable regional variation in suicide patterns across the country. Similarly, Lakshmi Vijayakumar and colleagues (2021)

reviewed the epidemiology and prevention of suicide in India while discussing the National Suicide Prevention Strategy. Their work identified depression, stress, substance use, and other psychosocial conditions as important areas requiring attention for reducing suicide deaths.

More recently, a national mortality study published in 2025 reported that India accounts for more than one fourth of global suicide deaths and highlighted the influence of social and psychological vulnerabilities on suicide mortality across different population groups. These findings indicate that understanding psychological factors remains essential for explaining suicide risk. Therefore, examining depression, anxiety, stress, and hopelessness may contribute to a better understanding of the psychological dimensions associated with suicide risk.

Need of the Study

Suicide continues to be a major public health concern across the world, with increasing social and psychological consequences. Although considerable research has been conducted on suicide, differences in research findings indicate that no single psychological factor can fully explain suicide risk. A comprehensive understanding of the psychological conditions associated with suicide is therefore essential. Depression, anxiety, stress, and hopelessness have frequently been identified as important psychological conditions associated with suicide risk. However, evidence related to these factors is dispersed across different reports and research studies. Examining these findings together can provide a clearer understanding of their relationship with suicide risk and help identify consistent patterns reported in the literature. Growing suicide rates in India and the increasing burden of mental health problems further emphasize the need to examine psychological factors from a broader perspective. Bringing together available evidence may improve the understanding of how these conditions are associated with suicide risk across different populations and settings.

Objectives of the Study

1. To examine the major psychological factors associated with suicide risk.
2. To analyse the findings reported in previous studies regarding the psychological factors associated with suicide risk.

Research Methodology

The study is based on an analytical research design using secondary data. Information has been collected from authentic sources, including reports published by the World Health Organization (WHO), the National Crime Records Bureau (NCRB), government publications, peer reviewed research articles, books, and other academic sources. Relevant literature related to suicide risk was selected, with particular emphasis on the psychological factors of depression, anxiety, stress, and hopelessness.

Review of Literature

S. No.	Researcher/ Organization & Year	Study/ Report	Objective	Method/ Data Source	Major Findings
1	Rane, A. & Nadkarni, A. (2014)	*Suicide in India: A Systematic Review*	To review suicide patterns and risk factors in India.	Systematic review of published studies.	Mental disorders, alcohol misuse, interpersonal conflicts and socioeconomic adversity were identified as major suicide risk factors.
2	Kishore Meghani (2020)	*Why Anxiety, Depression, Stress and After that Commit Suicide*	To examine the relationship between depression, anxiety, stress and suicide in India.	Systematic review.	Depression, anxiety and stress were consistently associated with suicidal thoughts and suicidal behaviour.
3	Senthil Amudhan et al. (2020)	*A Population-based Analysis of Suicidality and its Correlates*	To estimate suicidality and its correlates in India.	National Mental Health Survey (2015–16).	About 5.1% of adults reported suicidality. Mental illness and adverse social conditions increased suicide risk.
4	Tandon, R. et al. (2020)	*Suicide Research in India: An Overview of Four Decades*	To summarize suicide research conducted in India.	Review of 270 published articles.	Psychological distress, mental illness, substance abuse and environmental stressors were repeatedly reported as important contributors to suicide.
5	Harpreet Kaur et al. (2024)	*Prevalence of Depression, Anxiety, Stress and Suicide Ideation among Undergraduate Medical Students in India*	To estimate depression, anxiety, stress and suicidal ideation among medical students.	Systematic review and meta-analysis.	High prevalence of depression, anxiety, stress and suicidal ideation was observed among Indian medical students.

6	Ministry of Health & Family Welfare (2022)	*National Suicide Prevention Strategy*	To provide a national framework for suicide prevention.	Government policy document.	The strategy highlights early identification of depression, stress and other psychological problems as priorities for suicide prevention.
7	National Crime Records Bureau (2024)	*Accidental Deaths and Suicides in India*	To present national suicide statistics and trends.	Government statistical report.	The report shows continuing high suicide deaths in India and identifies demographic and occupational patterns requiring intervention.
8	World Health Organization (2024/2025)	*Suicide Fact Sheet*	To provide global evidence on suicide and prevention.	Global surveillance and official statistics.	More than 700,000 people die by suicide annually worldwide; depression and other mental disorders are major contributors.
9	Arya, V., Page, A., Armstrong, G., Kumar, A. G. & Dandona, R. (2021)	*Under-reporting of Suicide Deaths in India*	To compare NCRB and GBD suicide estimates.	Epidemiological analysis.	The study reported under-reporting of suicide deaths in official statistics and recommended strengthening surveillance systems.
10	World Health Organization (2021)	*Mental Health Atlas*	To assess global mental health resources and services.	International health systems assessment.	The report emphasized strengthening mental health services and suicide prevention programmes, particularly in low- and middle-income countries.

Analysis of the Reviewed Literature

The reviewed evidence reflects a gradual shift in suicide research from descriptive reporting to psychological interpretation. Rane and Nadkarni (2014) emphasized that mental disorders and adverse social conditions frequently coexist with suicide. Meghani (2020) further highlighted that depression, anxiety, and stress are consistently associated with suicidal thoughts and behaviour. Using data from the National Mental Health Survey, Senthil Amudhan et al. (2020) demonstrated that suicidality was more common among individuals experiencing mental health problems, supporting the importance of psychological assessment in suicide prevention. Tandon et al. (2020) observed that Indian suicide research has increasingly incorporated mental health perspectives instead of focusing only on mortality statistics. Harpreet Kaur et al. (2024) reported a substantial burden of psychological distress and suicidal ideation among medical students, indicating that educational settings also require systematic mental health support.

Government and international reports complement these findings from a broader perspective. The National Suicide Prevention Strategy (Ministry of Health and Family Welfare, 2022) prioritises early detection, counselling services, and coordinated preventive action. NCRB (2024) provides statistical

evidence that helps identify vulnerable population groups and recurring life circumstances associated with suicide. WHO (2021; 2024) emphasises suicide as a preventable public health issue and recommends strengthening mental healthcare systems and community-based interventions. Collectively, these sources indicate that no single category of evidence is sufficient to explain suicide risk. Research studies clarify psychological mechanisms, while national reports and international guidelines provide epidemiological patterns and policy directions. Their combined interpretation offers a more comprehensive understanding of the factors influencing suicide risk.

Analysis of Evidence from NCRB, WHO and NIMHANS

Evidence from the National Crime Records Bureau (NCRB), the World Health Organization (WHO), and the National Institute of Mental Health and Neurosciences (NIMHANS) indicates that suicide is a multifaceted public health concern influenced by psychological, social, and environmental factors. While NCRB primarily documents the demographic profile, methods, and circumstances associated with suicide deaths, WHO and NIMHANS provide evidence regarding the contribution of mental health conditions to suicide risk. NCRB reports consistently identify family problems, illness, marital conflicts, financial difficulties, unemployment, and substance use as common circumstances associated with suicide in India. These factors often create prolonged emotional distress, which may contribute to the development of depression, anxiety, stress, and hopelessness. Although these psychological conditions are not reported as independent categories in NCRB statistics, they are recognised in scientific research as important contributors to suicidal behaviour.

WHO has emphasized that depression is one of the most significant mental health conditions associated with suicide and has also highlighted the influence of anxiety disorders, psychological distress, and limited access to mental health care. Similarly, findings from NIMHANS indicate that individuals experiencing common mental disorders, particularly depressive and anxiety disorders, are more likely to experience suicidal ideation and suicidal behaviour when adequate psychological support is unavailable. The collective evidence from these sources demonstrates that suicide cannot be explained by a single cause. Instead, it results from the interaction of adverse life circumstances and psychological vulnerabilities. Therefore, integrating official statistics with mental health research provides a more comprehensive understanding of the psychological factors influencing suicide risk.

Conclusion

The available evidence indicates that psychological factors play a significant role in understanding suicide risk. Although the selected studies differ in their objectives, study populations, and research methods, most of them report a close association between depression, anxiety, stress, hopelessness, and suicidal ideation or suicidal behaviour. The findings also suggest that these psychological conditions are shaped by personal experiences and life circumstances, making suicide risk a complex phenomenon that cannot be explained through a single factor. Evidence obtained from research articles, systematic reviews, national surveys, and official reports complements one another and provides a broader understanding of the subject. Collectively, these findings indicate that psychological factors should be considered an essential component in the interpretation of suicide risk and provide a meaningful direction for future scientific inquiry.

References

- Amudhan, S., Gururaj, G., Varghese, M., Benegal, V., Rao, G. N., Pathak, K., Singh, L. K., Mehta, R. Y., Ram, D., Shibukumar, T. M., Kokane, A., Lenin Singh, R. K., Chavan, B. S., Sharma, P., & NMHS Collaborators Group. (2020). A population-based analysis of suicidality and its correlates: Findings from the National Mental Health Survey of India, 2015–2016. *Indian Journal of Psychiatry, 62*(6), 588–597. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_114_19

- Arya, V., Page, A., Armstrong, G., Kumar, G. A., & Dandona, R. (2021). Estimating patterns in the under-reporting of suicide deaths in India: Comparison of administrative data and Global Burden of Disease Study estimates, 2005–2015. *Journal of Epidemiology and Community Health, 75*(6), 550–555. https://doi.org/10.1136/jech-2020-215260

- Kaur, H., Gupta, V., Garg, A., Sangeeta, & Padhi, B. K. (2024). Prevalence of depression, anxiety, stress, and suicide ideation among undergraduate medical students in India: A systematic review and meta-analysis. *National Journal of Community Medicine.*

- Meghani, K. (2020). Why anxiety, depression, stress and after that commit suicide: A systematic review (India): Prevalence and factors associated. *International Journal of Indian Psychology, 8*(3).

- Ministry of Health and Family Welfare. (2022). *National suicide prevention strategy*. Government of India.

- National Crime Records Bureau. (2024). *Accidental deaths and suicides in India 2023*. Ministry of Home Affairs, Government of India.

- National Institute of Mental Health and Neurosciences. (2016). *National Mental Health Survey of India, 2015–2016: Summary*. NIMHANS.

- Rane, A., & Nadkarni, A. (2014). Suicide in India: A systematic review. *Shanghai Archives of Psychiatry, 26*(2), 69–80. https://doi.org/10.3969/j.issn.1002-0829.2014.02.003

- Tandon, R., Nath, S., & Sharma, P. (2020). Suicide research in India: An overview of four decades. *Asian Journal of Psychiatry, 53*, 102432.

- Vijayakumar, L., Chandra, P. S., Kumar, M. S., Pathare, S., Banerjee, D., Goswami, T., & Dandona, R. (2022). The national suicide prevention strategy in India: Context and considerations for urgent action. *The Lancet Psychiatry, 9*(2), 160–168. https://doi.org/10.1016/S2215-0366(21)00152-8

- World Health Organization. (2021). *Mental health atlas 2020*. World Health Organization.

- World Health Organization. (2024). *Suicide*. World Health Organization. https://www.who.int/news-room/fact-sheets/detail/suicide