LEARNED HELPLESSNESS, SELF-CONCEPT CLARITY AND FATIGUE AS PREDICTORS OF SUICIDALITY AMONG ADOLESCENTS AND ADULTS IN OYO STATE, NIGERIA

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Abstract

This study examined learned helplessness, self-concept clarity and fatigue as predictors of suicidality among adults and adolescents in Ibadan metropolis, Oyo State. Using a cross-sectional survey design, data was collected from 2493 (Males = 969, Females = 1524 with a mean age of 37.78 years; SD = 11.94) using a cluster sampling technique. Multiple regression analysis (Stepwise), Inter-Variable correlation and independent t-test were employed to test the four stated hypotheses. Results from the stated hypotheses indicated that learned helplessness, self-concept clarity and fatigue jointly accounted for 99.6% of the variance in suicidality (R^2 = .998; R2 = .996; F (3, 2489) = 196657.17; p <.001) and separately predicted suicidality at different degrees in this order (fatigue β = .427; t = 22.04; p <.001; self-concept clarity β =-.403; t = -16.83; p <.001; learned helplessness β = .169; t = 8.785; p <.001). It is therefore recommended among others that practical interventions be implemented to reduce fatigue and imbue graceful self-concept clarity in Nigerian adults and adolescents, consequently preventing them from acquiescing into a helpless mindset. This will have a sheltering effect against the possibility of their developing any form of suicidal behavior.

Keywords: Learned helplessness, self-concept clarity, fatigue, suicidality, Nigeria

1. INTRODUCTION

Globally, suicide is a significant public health problem. It is no doubt, one of the major health challenges humankind faces in the course of his/her existence (Gesinde, 2012). World Health Organization (2014) describes suicide as the deliberate act of causing one's own death. The American Psychological Association (2013) has put suicide as well as it accompanied risk factors to be the most perilous and high rate of societal vice the world ever recorded. The WHO has estimated that about a million persons pass away from suicide annually. It is also believed that by the year 2020, the death rate is expected to multiply.

Furthermore, in the United State, statistics from 2016 indicated that the peak in frequency of suicide occurred among those age brackets of 45 and 54 and those 85 and older (American Foundation for Suicide Prevention, 2018). Unlike the US, the demographic group that engages in suicide in Nigeria is not restricted to a particular age group. Every now and then, the dailies report of either an elderly man who hung himself because he was denied his pension allowances or a young teenager who takes his life because he or she was unable to cope with social pressures. This is an irony considering the fact that Nigeria is ranked among the happiest people in the world for the happiest people in the world to report increased number of suicide cases calls for attention. Some of the cases of completed suicide include the ordeal of one Dr. Orji a medical

doctor who jumped off the third mainland bridge on 24th of March 2017, the undergraduate student who hanged himself in his hostel at Abubakar Tafawa Balewa University, Bauchi state, Punch Newspaper (2017a), the 5th year Urban and Regional Planning student of Ladoke Akintola University of Technology, Ogbomosho who committed suicide by hanging himself in the hostel. Also reported is the scenario of the 19 year old student of Babcock University in Ogun state who committed suicide in his parents' house. Again it was reported of the case of a commercial bank manager in Lagos state who killed himself due to pressure from his bank to pay his loan. All these and other recordings of suicide took place in Nigeria (Punch Newspaper, 2017b)

Suicidal acts seldom occur spontaneously. They are characteristically prearranged, premeditated sometimes scheduled events elicited by a sequence of traumatic internal and external state of affairs. Several factors are believed to trigger suicide in a society. In the case of Nigeria, and many other developing nations, economic instability among other factors plays a major role. Thus this has driven many people who to end their lives. For instance in Nigeria, every year, thousands of young people graduate from the universities. However, there are no available jobs to cater for them. This situation has driven prospective individual who in the long run could have contributed to the grown and development of the nation into taking their lives. Below, other factors that have contributed to suicide include: family instability, unhealthy relationship, the loss of a loved one, economic hardship, work pressure, personal factors.

Suicide as an act is accompanied with many dangers affecting both government, family, individuals and the society at large. Some of the adverse effects include grief, perception as motivation for onlookers to give up, decline in a country's population, motivation for others vulnerable to suicide to also commit suicide and many more dangers. Suicide has a lot of economic and health cost/implications for any nation. For example, a nation where most of its youth commit suicide due to perceived economic hardship, on the long-run, such nation will have a significant decline in manpower since a the strength of every nation lies in its youth population. In terms of health implications, families of people that commit suicide are at risk of developing certain psychopathology such as depression, insomnia, substance abuse disorder, schizophrenia, anxiety disorders among other. These health implications are usually the outcome of family bereavement after the act of suicide has been successfully committed. In addition, spiritual dangers are also associated with suicide, for example, the Bible and Quran teachings indicates that life is precious to the supreme God, hence any person that commits suicide is not fit for paradise. Also, churches such as the Catholic Church do not give persons that commit suicide a befitting Christian burial.

Most previous studies on suicidality have focused attention on the outcomes and paid little attention to the antecedents of suicide. Those studies were interested in the effects of suicide on the family or larger society. It was thus observed that studying the outcomes of suicide alone was insufficient in militating against the increasing rate of suicide. Contemporary studies e.g., Littlewood, Kyle, Pratt, Peers & Gooding (2016); McManimen, *et al.* (2016); Scala, *et al.* (2016) indicated research problems in area of suicidality to be lack of focus on the antecedents and too much attention on the outcomes of suicide among vulnerable population. Literatures have suggested that learned helplessness may be a state prior to suicidality; as a result further studies are required to ascertain the clarity on the association between learned helplessness and suicidality (e.g. Jones & Philips, 2017). Learned helplessness is a condition where a person or animal learns and suffers from a sense of hopelessness after contact with a very dangerous or traumatizing event. This usually happens after a person or animal feels under the mercy of a life threatening event or traumatic event. Learned helplessness could be implicated in suicidality as a predictor. This suggests that when individuals feel a sense of powerlessness after contact to a traumatizing event, the same individuals could resort to suicidality due to the experienced sense of powerlessness. Thus feelings of powerlessness or hopelessness may be salient reason people resort to committing suicide.

There is literature based evidence on the fact that self-concept clarity could be positively or damagingly implicated in suicidality, e.g. Talley, Brown, Cukrowicz & Bagge (2016) found in a study. Self-concept clarity could be a protective factor against suicidality, as well as a risk factor for suicidality. This suggests that it is not in all cases that high self-concept clarity is a protective factor against suicidality; high self-concept clarity could also be a hazardous factor for suicidality. As a result, further studies are required to increase our understanding on the association between self-concept clarity and suicidality (Talley, Brown, Cukrowicz & Bagge, 2016).

Fatigue severity is defined as a state of being chronically or excessively demoralized, frustrated or tired after contact to a traumatizing event. Individuals who are severely fatigued usually develop this after being under the mercy of a traumatic event such as a life threatening illness. Persons with fatigue severity may feel that all hope is lost therefore fatigue severity set in. fatigue severity is mostly found in depressed people.

McManimen, Devendorf, Brown, Moore, Moore, & Jason (2016) reported that fatigue severity is commonly found in patients with terminal illnesses such as cancer. Fatigue severity could be a motivator for suicidality among people. When people feel a sense of chronic tiredness or frustration due to being under a traumatic event, such feelings could energize or drive people to resort to committing suicide. Fatigue severity is an advanced form of fatigue as its name implies, this suggest that there is mild and moderate fatigue before fatigue severity. Hence, fatigue severity being the severe form may be implicated in serious clinical issues such as suicidality, major depressive disorder, anxiety etc.

From the foregoing, it is clear that learned helplessness, self-concept clarity, and fatigue are variables that could influence suicidaility. However, attempts have not been made by researchers to determine the combined and separate effects of these variables on suicidality. Consequently, this study the aim of this study is to investigate learned helplessness, self-concept clarity and fatigue severity as predictors of suicidality among adolescents, as well as adults in Ibadan metropolis, Oyo State, Nigeria. The following hypotheses were tested in this study:

i. There will be significant combined effects of learned helplessness, self-concept clarity and fatigue severity on suicidality among adolescents and adults in Ibadan metropolis, Oyo State, Nigeria

ii. There will be significant separate effects of learned helplessness, self-concept clarity and fatigue severity on suicidality among adolescents and adults in Ibadan metropolis, Oyo State, Nigeria.

2. METHODS

This study adopted a cross-sectional survey design. Participants were 2493 adolescents and adults selected through cluster sampling technique, 1091 (43.7%) were male while 1402 (56.1%) were female. The research was carried out among students of the University of Ibadan, the rehabilitation patients at the Cheshire Rehabilitation Centre in Eleyele and Oluyole Ibadan North Local Government area and the juvenile correctional home at Sango Ibadan. A total of 4 instruments independent of each other were administered to every participant. First, Learned Helplessness Scale (LHS) developed by Quinless & Nelson (1988). The reliability of the scale as reported by Quinless& Nelson, (1988) was 0.85 Cronbach's Alpha while a pilot study was conducted on 100 participants and a test-re-test reliability of $r = .881$ was obtained for the study. Second, Self-Concept Clarity (SCC) developed by Campbell, Trapnell, Heine, Katz, Lavallee and Lehman (1996) with an internal consistency reliability of the scale as measured by Cronbach's alpha coefficient to range from 0.70 to 0.79 in several studies. The researchers further cross validated the scale through pilot study and a test-re-test reliability using Pearson's Product Moment Correlation of $r = .601$ was obtained as and a split half reliability 0.998. Third, Fatigue Severity Scale (FSS) developed by Neuberger (2003). Neuberger (2003) reported good internal consistency as measured by Cronbach's alpha to be 0.88. For the present study, a pilot study was conducted and a test-re-test reliability of $r = .817$ and split half reliability of 0.998 were obtained. Four, Risk Assessment Suicidality Scale (RASS) developed by Fountoulakis, Pantoula, Siamouli, Moutou, Gonda, Rihmer, Iacovidesand Akiskal (2011). They reported reliability for the scale as measured by Cronbach's alpha to range from 0.69 to 0.85. For the present study, a test re-test reliability $r = .553$ and split-half reliability value of 0.98 were obtained. The data obtained from this research were analysed using the Statistical Package for the Social Sciences (SPSS). Multiple regressions (step wise) were used to test the hypotheses.

3. RESULTS

Table 1: Model summary of stepwise multiple regression analysis and analysis of variance showing the contribution of learned helplessness, self-concept clarity and fatigue on suicidality

Model	Regression	Source of variation	SS	Df	MS	F	Sig.
A	$R = .996$ $R^2 = .992$ R^2 (adj) = .992	Regression Residual Total	723747.12 5556.169 729303.29	1 2491 2492	723747.12 2.230	324477.91	.000
B	$R = .997$ $R^2 = .995$ R^2 (adj) = .995	Regression Residual Total	725641.23 3662.059 729303.29	2 2490 2492	362820.62 1.471	246698.20	.000

C	R = .998 R^2 = .996 R^2 (adj) = .996	Regression Residual Total	726239.39 3063.894 729303.29	3 2489 2492	242079.80 1.231	196657.17	.000

a: predictor: (constant), learned helplessness, b: predictor: (constant), learned helplessness, self-concept clarity, c: predictor: (constant), learned helplessness, self-concept clarity, fatigue, d: dependent variable: suicidality.

Table 1 revealss the joint contribution of the three independent variables to suicidality. A significant impact was established when learned helplessness was entered into the regression (R = .996; R^2 = .992; F (1, 2491) = 324477.91; p <.001). This implies that learned helplessness was able to explain 99.2% of the variance in adolescent and adult suicidality. The addition of self-concept severity improved the prediction level (R = .997; R2 = .995; F (2, 2490) = 246698.20; p <.001). Self-concept clarity was able to contribute 0.3% to the prediction while the addition of leaned helplessness and self-concept clarity accounted for 99.5% of variance in adolescent and adult suicidality. The addition of fatigue severity to the regression model revealed a significant contribution (R = .998; R2 = .996; F (3, 2489) = 196657.17; p <.001). While the three variables put together could only explain 99.6% of the total variance observed in suicidality among the study population. We therefore accept this hypothesis.

Table II: Summary of testing the regression weight of learned helplessness (a), self-concept clarity (b) and fatigue (c) on suicidality

Model	Unstandardized coefficient		Standard coefficient	t	Sig
	B	Standard Error	Beta		
A	.104	.012	.169	8.785	.000
B	-.305	.018	-.403	-16.83	.000
C	.433	.020	.427	22.04	.000
Constant	11.892	1.351		8.806	.000

A: Predictors in the Model: (Constant), Learned helplessness; b: Predictors in the Model: (Constant), learned helplessness, Self-concept clarity; c: Predictors in the Model: (Constant), learned helplessness, self-concept clarity, fatigue; d: Dependent variable: Suicidality.

Table 2 tested the regression weights of the independent variables. It was evident from the table that fatigue severity was the most potent predictor of suicidality among the study sample (β = .427; t = 22.04; p <.001). This was followed by self-concept clarity (β =-.403; t = -16.83; p <.001) though negative and finally learned helplessness (β = .169; t = 8.785; p <.001) respectively. We therefore accept this hypothesis.

4. DISCUSSION

The finding from hypothesis one is consistent with previous findings which found that learned helplessness, self-concept clarity and fatigue predicted suicidality (Thomas, Johnson & Martha 2017; Stone, Luo, Ouyang, Lippy, Hertz & Crosby 2014; Ogunkola & Oyesoji 2017; Talley, Brown, Cukrowicz & Bagge, 2016). Furthermore, Williams & Pollock, (1993) identified helplessness as mediating variable between depression and suicidal intent within parasuicide population. Previous studies had investigated helplessness as a predictor of depression among adolescents and adult, also studies had identified helplessness as a risk factor for depression and suicidality among adolescents and adult. Furthermore, in a similar study by Bromberg, Law, & Palermo (2016) result revealed that rate of suicidality was not different in youth with chronic fatigue when compared with those without chronic fatigue, and the content of suicidal thoughts also did not vary by group, though higher depressive symptoms and lower self-worth were associated with suicidality.

Fatigue severity was the most potent predictor of suicidality among the study sample from the analysis of

hypothesis two. This supports some previous studies. For instance, in a study by Kleiman, Turner, Chapman & Nock (2017) found that fatigue moderates the relationship between perceived stress and suicidal ideation among young adults, the result revealed high perceived stress and high fatigue (which might affect the ability to cope with stress) interact to predict the short-term occurrence of suicidal ideation and non-suicidal self-injury (NSSI).

In a similar study by Yoon, Jung, Roh, Seok & Won (2015) revealed long hours of intellectually demanding work were correlated to suicidal thoughts. The total number of suicidal thoughts was higher for those who worked 60 or more hours per week when compared especially with those who worked less than 52 hours per week. Additionally, suicidal thoughts were higher for those who worked 60 or more hours per week when compared with those who worked less than 52 hours per week. These relationships remained significant after controlling factors like household income, marital status e.tc. and past two weeks' experience of injury, type of work, chronic disease or intoxication.

5. CONCLUSION AND RECOMMENDATIONS

Undoubtedly, sucide is a major challenge among adolescents and adult in the world today, and in Nigeria in particular, although studies on suicide is numerous, however, none have simultaneously examined learned helplessness, self-concept and fatigue as predictors of suicidality among adolescents and adult, indicating a vacuum in literature. This study attempts to fill the gap by investigating the effects of learned helplessness, self-concept clarity and fatigue as predictors of suicidality among adolescents and adult in Ibadan, Nigeria. In support of the premeditated hypotheses, the findings of this present study shows that learned helplessness, self-concept clarity and fatigue jointly and independently predicted suicidality among adolescents and adult in Ibadan, Nigeria. There is need for mental health practitioners to embark on aggressive campaign on the need to arrest the scrouge of suicide and suicidal behaviours. Adolescents and adults have to develop the act of seeking help from relevant professionals to resolve life challenges (Gesinde & Sanu, 2015).

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REFERENCE LIST

American Foundation for Suicide Prevention (2018). *Suicide Statistics*. https://afsp.org/about-suicide/suicide-statistics/

American Psychological Association (2013). Gun violence: Prediction, prevention, and policy. http://www.apa.org/pubs/info/reports/gun-violence-prevention.aspx

Bromberg, Law, & Palermo (2016). Suicidal Ideation in Adolescents With and Without Chronic *Pain. Clin J Pain*. 2017 Jan; 33(1):21-27.

Campbell, J. D., Trapnell, P. D., Heine, S. J., Katz, I. M., Lavallee, L. F., & Lehman, D. R. (1996). Self-Concept Clarity: Measurement, personality correlates, and cultural boundaries. *Journal of Personality and Social Psychology,* 70, 141 156.

Fountoulakis, K. N., Pantoula, E., Siamouli, M., Moutou, K., Gonda, X., Rihmer, Z & Akiskal, H. (2011). Development of the Risk Assessment Suicidality Scale (RASS): a population-based study. *Psychiatrike= Psychiatriki, 22*(2), 132-147.

Gesinde, A. M. (2012). Challenges in meeting the HIV/AIDS counselling needs in Nigeria. *International Journal for the Advancement of Counselling*, 34 (4), 297-306. https://link.springer.com/article/10.1007%2Fs10447-012-9158-4#page-1

Gesinde, A. M., & Sanu, O. J. (2015). Psycho-demographic correlates of behaviour towards seeking counselling intervention among workers in Lagos, Nigeria. British Journal of Guidance & Counselling, 43(5), 570–583. doi:10.1080/03069885.2014.999025.

Jones, A. I. & Philips, J. S. (2017). Psychosocial factors influencing suicidal intention among newly diagnosed HIV patients in University of Michigan teaching hospital. *Journal of clininal Psychology*, 12, 112-125.

Littlewood, D., Kyle, S. D., Pratt, D., Peers, S., & Gooding, P. (2016). Examining psychological factors in the role between sleep problems and suicide. *Clinical Psychology Review*, 54 1-16.

Kleiman, E. M., Turner, B. J., Chapman, A. L., & Nock, M. K. (2018). Fatigue Moderates the Relationship Between Perceived Stress and Suicidal Ideation: Evidence From Two High-Resolution Studies. *Journal of Clinical Child & Adolescent Psychology*, *47*(1), 116-130.

McManimen, S. L., Devendorf, A. R., Brown, A. A., Moore, B. C., Moore, J. H.,& Jason S. L. (2016). Mortality in Patients with Myalgic Encephalomyelitis and Chronic Fatigue Syndrome. *Fatigue*. 2016; 4(4): 195–207.

Neuberger, G.B. (2003). Measures of fatigue: The fatigue questionnaire, severity scale. Multidimensional assessment of fatigue scale and short form-36 Vitality (energy/fatigue) Subscale of the short form health survey. Arthritis Care & Research, 49(S5)

Ogunkola, J. O. and Oyesoji A. I. (2017). Impact of suicide on the psychological wellbeing of family of the deceased. *Clinical Psychology Review,* 38 (2017) 25-35.

Punch Newspaper (March 19, 2017). Featured: Doctor Jumps off third mainland bridge, commits suicide, Retrieved from http://punchng.com/breaking-doctor-commits-suicide-jumps-off-third-mainland-bridge/

Punch Newspaper (November 25, 2017). News: Undergraduate commits suicide in Bauchi, Retrieved from http://punchng.com/undergraduate-commits-suicide-in-bauchi/

Quinless, F. W., & Nelson, M. M. (1988). Development of a measure of learned helplessness. *Nursing Research*.

Scala, J. W., Levy, K. N., Johnson, B. N., Kivity, Y., Ellison, W. D., Pincus, A. L., Wilson, S. J., and Newman, M. G. (2018). The role of negative affect And self-concept clarity in Predicting self-injurious urges in borderline personality disorder Using ecological momentary assessment. *Journal of Personality Disorders*, 32, Special Issue, 36–57, 2018

Stone DM, Luo F, Ouyang L, Lippy C, Hertz MF, Crosby AE. (2014). Sexual orientation and suicide ideation, plans, attempts, and medically serious attempts: Evidence from local Youth Risk Behavior Surveys, 2001–2009. *American Journal of Public Health*. 104:262–271.

Talley, A. E., Brown, S. L., Cukrowicz, K., & Bagge, C. L. (2016). Sexual self-concept ambiguity and the interpersonal theory of suicide risk. *Suicide and Life-Threatening Behavior*, *46*(2), 127-140.

Thomas, Johnson & Martha (2017). The role of self-concept clarity in reducing the susceptibility to suicide among children that lost their parent or caregiver early in life. *Clinical Psychology Review*, 42, 132-155.

WHO (2014). Preventing suicide: a global imperative. pp.7, 20, 40. http://apps.who.int/iris/bitstream/handle/10665/131056/9789241564779_eng.pdf;jsessionid=260360A4 EE3B1BE11787594550833C00?sequence=1