

Was Shneidman Right?

The Frustration of a Psychological Need, Psychache and Suicidal Behaviours

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Introduction

Shneidman is a founder of modern suicidology. By the end of his career, he summarized the kernel of his theory in a few words : **"Suicide is caused by psychache"** (Shneidman, 1993, p.147). This means that psychache is for him the variable **most proximal** to suicide. Psychache designates a psychological or mental suffering defined as the pain of overwhelming emotions (Shneidman, 1993). According to Shneidman's theory, psychache is engendered when **important psychological needs are frustrated**. For example, these include the need for comfort, affiliation, humiliation, nurturance, defence, harmavoidance, etc. (Murray, 1938 ; Shneidman, 1980). Among these needs, the **need for affiliation**, derived from Henry Murray's list, is certainly among crucial needs in explaining suicide (Shneidman, 1999), particularly in young adults (Erikson, 1980; Leenaars, 1989). Also, at the empirical level, **loneliness** (resulting in a lack of satisfying social needs) has been identified as a risk factor for suicidal behaviours (e.g., Joiner & Rudd, 1996).

Several studies have supported portions of **Shneidman's theory** and/or the concept of **psychache** in various populations (e.g., Bancroft, Skrimshire & Simkin, 1976; Holden & DeLisle, 2006; Holden & Kroner, 2003; Holden, Kerr, Mendonca & Velamoor, 1998; Holden & McLeod, 2000; Holden, Mehta, Cunningham & McLeod, 2001; Johns & Holden, 1997; Leenaars, 1988; Mills, Green & Reddon, 2005). However, **few studies have tested directly Shneidman's theory** by measuring the frustration of psychological needs. To our knowledge, Flaumenbaum and Holden (2007) recently measured the frustration of psychological needs and produced mixed results, and Berlim et al. (2003) confirmed Shneidman's theory but without measuring psychache per se.

Aims of study

The purpose of the study was to determine the **mediational role of psychache** between loneliness and suicidal behaviour. If psychache has a mediational role, this would **support Shneidman's theory** on suicide.

Method

Participants

Participants were university students met in their classrooms setting in September 2003. The sample consisted of **615 young adult university undergraduates** of French-Canadian origin. These were **18 to 30 years of age (mean of 21.81 years old and standard deviation of 2.38)** and comprised **422 women (68.6%) and 193 men (31.4%)**. They were asked by an evaluator to complete a series of questionnaires for a mental health study. The participants were treated in accordance with the ethical standards.

Instruments

Psychache Scale (Holden et al., 2001): The *Psychache Scale* is a 13-item single-factor self-report instrument that serves to measure level of "intolerable psychological suffering" in an individual, as defined by Shneidman (1993). The items are rated on a 5-point Likert scale from 1 (never or strongly disagree) to 5 (always or strongly agree).

UCLA Loneliness Scale (Russell, Peplau & Cutrona, 1980): The *UCLA Loneliness Scale* is a 20-item scale that measures feelings of solitude, disconnection, and lack of closeness. The scale has adequate psychometrics properties and has been extensively validated.

Questions regarding suicidal behaviours: The following yes/no questions drawn from the Quebec Health Survey (Gouvernement du Québec, 1993) were used to screen for presence or absence of suicidal behaviours in the **past 12 months** : (Q1) In the past 12 months, have you ever seriously thought about attempting suicide? (Q2) In the past 12 months, have you ever planned or attempted suicide? (Q3) In the past 12 months, how often have you attempted suicide? Participants were distributed into two groups : The "suicidal" group and the "non-suicidal" group. To fall into the suicidal group, a participant had to respond affirmatively to questions Q1, Q2 or Q3?

Results

Among de 615 participants, **42 individuals** (6.8% of the overall sample) reported having had at least serious suicidal thoughts in the past 12 months. Of these, 36 were **women** (8.5% of all the women) and 6 were men (3.1% of all the men).

First, we wished first to verify whether the two groups could be **distinguished** from one another through psychache or loneliness. The relevant data on these two variables are presented in Table I where we can find descriptive statistics on the overall sample, the suicidal group and the non-suicidal groups considered separately.

	Coefficient Alpha	Non-suicidal group (n = 573)		Suicidal group (n = 42)	
		M	SD	M	SD
Psychache*	.95	19.6	7.2	35.0	12.4
Loneliness*	.92	34	8.5	42.2	11.9

Table I. Means and standard deviations for suicidal group and non-suicidal group

* $p < .001$

Second, three conditions must hold to confirm the hypothesis (Baron & Kenny, 1986). Partial correlations were used.

- 1) Variations of the "frustration of the affiliation need" (or loneliness) significantly account for variation in the mediator (psychache) $\Rightarrow (r = .54; r^2 = .29; p < .001)$.
- 2) Variations in the mediator (psychache) significantly account for variations in the dependant variable (suicidal behaviours) $\Rightarrow (r = .40; r^2 = .16; p < .001)$.
- 3) When the mediator's path is control for (psychache), a previously significant relation between the independent variable (loneliness) and the dependant variable (suicidal behaviours) is no longer significant. $\Rightarrow (r = -.25; p = ns)$.

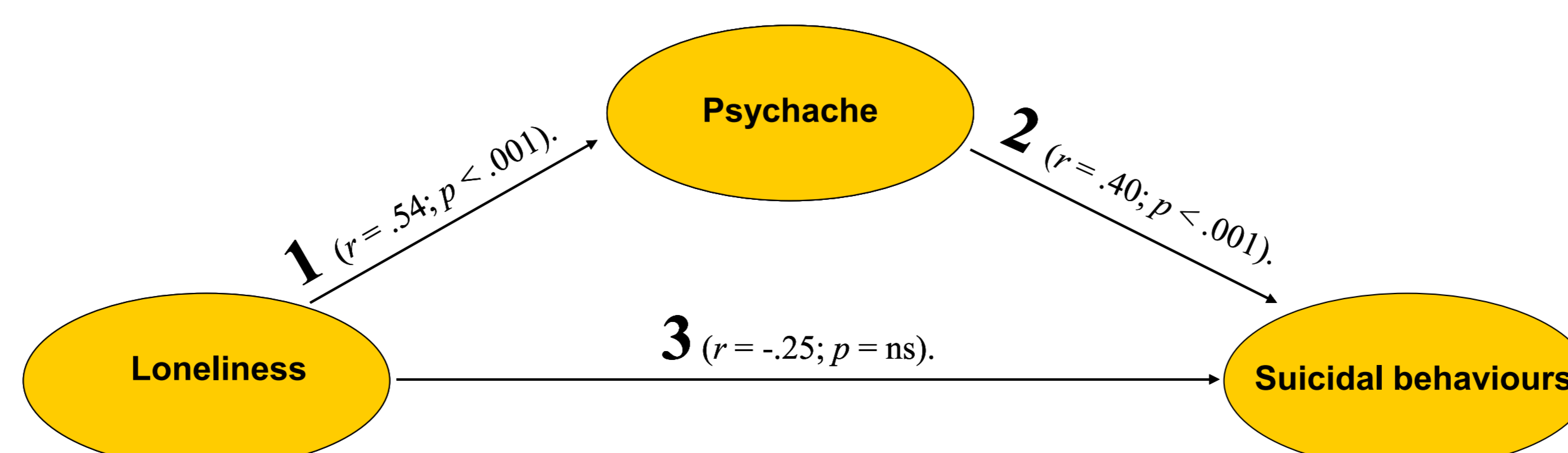


Figure 1. Mediational model. Perfect mediation of psychache between loneliness and suicidal behaviours.

Discussion

The results confirmed Shneidman's path to suicidal behaviours. In our sample, psychache was a mediator between loneliness and suicidal behaviours. Effectively, the three conditions held concordant using partial correlations. The "frustration of the affiliation need" (or loneliness) affected significantly psychache. Psychache and suicidal behaviours were associated when loneliness was in the equation. When psychache was controlled for, the link between loneliness and suicidal behaviours was reduce to non-significance. This finding is meaningful because it offers empirical data on Shneidman's theorizing and adds to the understanding of variables and risk factors related with suicidal behaviours, particularly in young adults university students.

Limitations

However, they were some limits that reduced the generalization of the research. Giving our experimental design, it would be necessary to conduct a **longitudinal study** to test the model and conclude in a cause-and-effect relationship. Additionally, other measures might be considered like **depression and hopelessness** to find variables that covariate with loneliness and psychache. Also, utilizing a sample drawn from a **general population** reduces the score range and limits the statistical potential of the measure scales. The results are encouraging, but it will be essential to conduct research on **clinical populations** (e.g., mood-disordered individuals, suicide attempters) in order to gain a finer appreciation of Shneidman's theory of suicide.

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