The multidimensionality of suicide risk factors and criteria in a nonclinical population: Replication across two countries and two languages

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Across two countries and two languages, this research examined the multidimensional associations between suicidality (e.g., past ideation/attempts, communication of intent) and empirically important psychological risk factors (e.g., mental pain, perceived burdensomeness, thwarted belongingness). For samples of 228 Canadian and 331 Portuguese university undergraduates, four dimensions emerged in each sample with two of these, intrapersonal and interpersonal, demonstrating strong replicability across countries and languages. It was concluded that suicidality is a phenomenon that demonstrates some multidimensional similarities across cultures.

Keywords: Multidimensionality; Suicidality; Replication; Young adults.

Worldwide, suicide claims the lives of more than 800,000 people annually (World Health Organization, 2017). Furthermore, for every suicide, there are many times more suicide attempts and occurrences of suicide ideation. Thus, suicide, suicide-related behaviours and suicide ideation constitute an international public health issue. The rationale for the present research is to contribute to understanding the structural nature of suicidality and its psychological risk factors.

Life-time risk for suicidal behaviour is indicated by established factors such as sex and a previous suicide attempt, however, a recent meta-analysis of 365 studies (Franklin et al., 2017) highlights that predicting suicidal behaviours has not improved in the last 50 years. Although predicting suicidal behaviours may not have improved, the understanding of the structure of suicidality has progressed. For example, Klonsky, May, and Safer (2016), in emphasising distinctions among suicide, suicide attempts and suicide ideation, indicate that these are separate phenomena having disparate explanations and risk factors. Furthermore, Holden and colleagues (Holden & Kroner, 2003; Johns & Holden, 1997) have demonstrated the differentiation of suicidality into distinct dimensions of action orientation and negative cognitions.

As the understanding of suicide evolves, newer theories have arisen. For example, the Interpersonal Theory of Suicide (Joiner, 2005; Van Orden et al., 2010) is an interactive conceptualization that posits perceived burdensomeness, thwarted belongingness, interpersonal hopelessness, the acquired capability for suicide, plus their interactions as critical for death by suicide. By themselves, the interpersonal unmet needs of perceived burdensomeness and thwarted belongingness and their combination can result in passive suicide ideation and, in combination with interpersonal hopelessness, in active suicide ideation (Chu et al., 2017). Yet another recent theory (Li et al., 2014) proposes a psychological pain model of suicide comprising three dimensions: affective, cognitive and avoidance. Whereas previous measures of psychological pain (e.g., Holden, Mehta, Cunningham, & McLeod, 2001) have focused on affect, Li et al. supplement the assessment of affect with cognitive and motivational components. The affective dimension includes subjective and somatic symptoms that the individual perceives as psychologically painful. The