

The Relationship between Resilience and Well-Being on Suicidal Ideation

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Received Juny 05, 2024 | Accepted October 15, 2024 | Published November 30, 2024

Abstract: Suicidal ideation refers to thoughts about planning and behaviors that can lead to actual and fatal suicide attempts. This research aims to examine whether there is a relationship between resilience and well-being and suicidal ideation. The study is a quantitative correlational study conducted among adolescents in Jakarta. The participants of this study numbered 139, obtained through incidental sampling techniques. The measurement tools used in this study are the Brief Resilience Scale, the Satisfaction with Life Scale (SWLS), and the Indonesian version of the Suicide Ideation Scale (R-SIS). Correlation analysis results show that resilience and well-being are jointly related to suicidal intention ($p < 0.01$). The study found a moderate relationship between resilience and subjective well-being simultaneously with suicidal ideation. The simultaneous contribution of these two variables to suicidal ideation is 19.6% ($R = 0.442a$, $R^2 = 0.196$, $p = 0.000$).

Keywords: Suicidal Ideation; Subjective Well-Being; Resilience



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Introduction

Suicide cases in various regions in Indonesia are often heard in various news media. This is also revealed by WHO that suicide is one of the growing cases and continues to occur among adolescents to adults. Suicide is also the second leading cause of death among 15-29 year olds, and occurs in 79% of low and middle income countries (World Health Organization, 2021). Suicidal ideation is also more common in urban areas than in rural areas. This was also stated by Doctor Nova Riyanti Yusuf, SpKJ, who is also a WHO consultant, explaining in his research that 5% of students from 910 A-accredited SMAN and SMKN students in DKI Jakarta had suicidal ideation. Her research also explained that students who were detected at risk of suicide had a 5.39 times greater risk of having suicidal ideation mainly related to depression; compared to students who were not detected at risk of suicide (Yusuf et al., 2019).

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Prasetya (2019) presented the results of an interview with Suicidology Benny Prawira who stated that 34.5% of students aged 18-24 years in Jakarta had suicidal thoughts in the past year. This study also stated that 4.2% of students in Indonesia had thought of suicide; 6.9% of students had suicidal intentions; while another 3% had attempted suicide (Rachmawati, 2020). Another study conducted on 8,417 students from 12 Muslim-majority countries, Indonesia is one of the highest countries that have thoughts of suicide (Savira et al., 2021). In line with research conducted by Adinda and Prastuti in 2021 on 210 students, as many as 80% of students had suicidal ideas at an advanced stage. These results also refer to how this suicidal desire refers to readiness, both physical and psychological, to make a suicide attempt (Artissy et al., 2022).

Based on this explanation, we can see that there is a need for appropriate treatment to help reduce suicidal ideation. Efforts to unravel the problem of high suicide rates cannot be separated from an examination of the what, who and how characteristics of adolescents. Previous research has also explained some of the risk factors, namely abstract mindsets that lead to risk-taker behaviour, genetic transmission that can lead to aggressive and impulsive traits, having a history of other mental disorders, unsupportive social environments, and misuse of internet access, which are some of the reasons adolescents have suicidal ideation (Yusuf et al., 2019). This cannot be separated from the characteristics of adolescence, which is known as the developmental transition period between childhood and adulthood.

The development of adolescents is known as their developmental task to find their identity or known as identity vs identity confusion (Papalia, E & Feldman, Ruth, 2014). In this phase, adolescents are given the freedom to explore themselves with different identities. Teenagers who explore indirectly also cause their own pressure. They may start to be pressured because of the desire to be accepted in a group, become famous, get achievements or achievements, fit in a community, relationships with the opposite sex and body image, and so on (Hasmarlin & Hirmaningsih, 2019). This situation is also caused by adolescents experiencing emotional changes, changes in interests, roles and environmental conditions that cause social pressure, making emotional tension in adolescents even higher (Santrock, 2019).

The pressure that occurs in this phase of adolescent identity seeking can also be one of the causes of adolescents experiencing pressure to cause suicide attempts. Suicidal ideation is generally thoughts and cognitions related to suicidal behaviour (Liu et al., 2021). Reynolds explained that suicidal ideation is thoughts about planning, behaviour and outcomes about suicide, death, and self-harming behaviour (Karisma & Fridari, 2021). According to Rud, suicidal ideation is divided into two, namely covert thoughts and overt thoughts such as ideation intentions and actual and lethal suicide attempts (Artissy et al., 2022). Based on this explanation, the two aspects refer to an approach to suicide risk that shows the seriousness of suicidal ideation. Covert aspects are conditions in which suicide is implicitly interpreted but not explicitly stated, whereas overt aspects are conscious suicidal ideation that is explicitly stated (Luxton et al., dalam Artissy et al., 2022). Suicidal ideation is often associated with depressive conditions. The intensity of suicidal ideation showed the highest correlation with the intensity of depression.

According to the Diagnostic and statistical manual (DSM) 5th edition classifies recurrent suicidal thoughts as symptoms of depression. Research conducted by Rachmawati explained that adolescents (15-24 years old) have a percentage of depression of 6.2%. Severe depression will experience a tendency to self-harm to suicide (Rachmawati, 2020).. Furthermore, research conducted on 247 adolescents in Jakarta showed that there was a significant relationship between suicidal ideation and depression levels (Mandasari & Tobing, 2020). Frijanto (2022) explained that at least 55% of people with depression have suicidal ideation. This is because symptoms of depression, such as feeling useless and hopeless, are two of the factors that trigger suicide. The conclusion that psychological factors are considered to be the dominant trigger for the emergence of suicidal ideation (Aulia et al., 2019). In addition to the symptoms of depression previously described, there are several other factors that can trigger individuals to have suicidal ideation.

These factors include environmental factors - various kinds of difficulties such as in financial or family aspects and individual factors, hopelessness, anxiety, pain and individual perceptions of stress and pressure (Vilhjalmsson et al., dalam Karisma & Fridari, 2021). However, difficulties or pressures are unavoidable in everyday life. Therefore, resilience is needed for adolescents to be able to face challenges in their lives, and can avoid stress, depression, and negative behaviour that is detrimental to themselves and their social environment (Ruswahyuningsih & Afiatin, 2015). Previous research found that the level of resilience was significantly negatively correlated with suicidal ideation (Putri & Tobing, 2020). Research conducted by Okechukwu explains resilience as the tendency of individuals to bounce back to a previous state of normal functioning or not show negative impacts after stress and adversity (Okechukwu et al., 2022).

Resilience also talks about how individuals have the capacity to survive and continue to develop when faced with a changing environment (Folke, 2016). Individuals who have resilience tend to be more emotionally stable, have a fairly relaxed or easy-going nature, good socialisation skills, high self-efficacy, and close interpersonal relationships (Smith et al., 2013). Other research also explains that individuals with high resilience are better able to handle difficult life events (Claudia & Sudarji, 2019). Smith's research results also explain that there are two factors that influence resilience, namely personal and social factors. Personal factors refer to active coping, mindfulness, mood clarity, optimism, purpose in life, and spirituality. Social factors include positive relationships and social support.

Luthar et al., (2014) explain resilience as a phenomenon or process that reflects adaptation that tends to be positive. This positive adaptation or adjustment refers to a situation where the perceived outcome or impact is much better than expected, despite experiencing certain pressures or risk exposure. Thus, resilient individuals tend to have positive mental health conditions and ultimately improve the well-being of the individual. This is in line with a number of previous studies. Research related to resilience, self-efficacy, and social networks is quite effective in improving the subjective well-being (SWB) of individuals with spinal cord injuries (Bhattarai et al., 2021). In addition, a positive effect of resilience on subjective well-being (SWB) was also found in adolescents with high academic stress (Rakhmadiani et al., 2021). The term subjective well-being (SWB) is more often associated with the concept of happiness.

Diener explains that well-being encompasses individuals' judgements and evaluations of their own lives. This assessment and evaluation includes two general components, namely the cognitive dimension and the affective dimension. The cognitive dimension refers to reflective cognitive assessments such as life satisfaction, while the affective dimension is an emotional response to ongoing life; such as the presence of positive and pleasant emotions or vice versa (Diener et al., 2018). The results of other studies also found that subjective well-being is not only influenced by factors from within the individual (internal), but can also be influenced by factors from outside (external). Internal factors consist of 5 factors that can be explained as gratitude, forgiveness, personality, self-esteem, and spirituality. An external factor that influences well-being is social support (Dewi & Nasywa, 2019).

Based on the background of the above problems in accordance with the reality experienced by the world of education, especially in Indonesia itself, this research is very important and interesting to do so that a common thread can be found from resilience and self-being towards suicidal intentions in adolescents. This research is also driven on the basis of previous research that has shown that resilience traits are negatively associated with mental illness, such as depression and anxiety, and positively associated with positive aspects of mental health such as subjective well-being (SWB) (Fan et al., 2022). Previous research has also shown a direct relationship between resilience and well-being. However, research on both variables by linking them to one group of disorders, namely suicidal ideation, is still minimal. Therefore, this study was designed to look at the correlation of resilience and well-being (SWB) to suicidal ideation in adolescents.

Method

This research is non-experimental quantitative research, with the sampling technique used is non-random sampling (Kastanya et al., 2022) and conducted in Jakarta. The target population of this study is students to college students who are studying in the DKI Jakarta area. Sample subject criteria include adolescents with an age range of 12-24 years and male or female. Researchers obtained 139 student respondents (59 male students and 80 female students). The questionnaire research was distributed online, which contained three measuring scales, namely: (1) Brief Resilience Scale, (2) Satisfaction with Life Scale, (3) Revised-Suicide Ideation Scale (R-SIS). The research questionnaire was created using Google Form and distributed through various groups on social media. The method contains identification of variables, research subjects, research instruments, research methodology and analysis techniques used in the study.

The sampling used in the research is convenience sampling, which is data collection based on the willingness of participants to become research participants. The distribution of research measuring instruments was carried out online, and filling was carried out via google form. The questions in this questionnaire are closed questions that have been accompanied by answers, so respondents only need to choose the answers that are available. In the data collection process, respondents were asked for their willingness to fill out the questionnaire voluntarily and provide informed consent before participating.

The measuring instrument used to measure resilience uses the Brief Resilience Scale adapted from (Smith et al., 2008). The measuring instrument consists of 5 items, with answer options from 1

(strongly disagree) to 5 (strongly agree). Self-being was measured using the Satisfaction with Life Scale (SWLS) measuring instrument from (Diener et al., 1985). The SWLS scale consists of 5 items with answer options from 1 (strongly disagree) to 5 (strongly agree). The measurement of suicidal ideation was carried out using the Indonesian version of the Suicide Ideation Scale (R-SIS) which consists of 10-items measuring two dimensions of suicide ideation. The RSIS measure provides critical information regarding the presence or absence of suicidal thoughts, the intensity of these thoughts, and the presence or absence of suicide attempts. The questionnaire utilises all criteria (dimensions) of the Rudd model. The questionnaire is in the form of a Likert scale, where the alternative answer points correspond to the R-SIS measuring instrument, namely: 1) Never; 2) Rarely; 3) Sometimes; 4) Often; 5) Always. The total score of the instrument is calculated by summing up all the respondents' answer choices on each item. Scoring on this measure has a range from 10 indicating 'no suicidal ideation', to ≥ 36 indicating 'serious suicidal ideation' (Artissy et al., 2022). The validity and reliability scores of the study sample are summarised in Table 1.

This research design is a correlation study. Correlation research is research that aims to find whether or not there is a relationship and if so, how close the relationship is and whether or not the relationship is meaningful. The correlation research design in this study is in accordance with the research objectives, namely to determine the relationship between variables X1 (Resilience) and X2 (Self-being) with variable Y (Suicidal Intention). Thus, this research includes multiple correlation research. Multiple correlation research is a number that shows the direction and strength of the relationship between two or more variables X together with one variable Y. The following is an illustration of a simple paradigm research design.

Table 1
Validity and Reliability Test of Measuring Tools

Variable Measurement Tools	Reliability of Measuring Tool <i>Cronbach's Alpha</i>	Item Validity <i>Corrected-Item-Total-Correlation</i>
Resilience	.756	.288 – .692
<i>Subjective- Well Being</i>	.812	.345 – .802
Suicidal ideation	.906	.499 – .834

In Chart 1, it can be explained that r_1 is the relationship between X1 and Y; r_2 is the relationship between X2 and Y; R is the relationship together between X1 and X2 with Y. The data analysis technique used in this study is the multiple correlation test, which is carried out using the help of the SPSS program ver. 22.

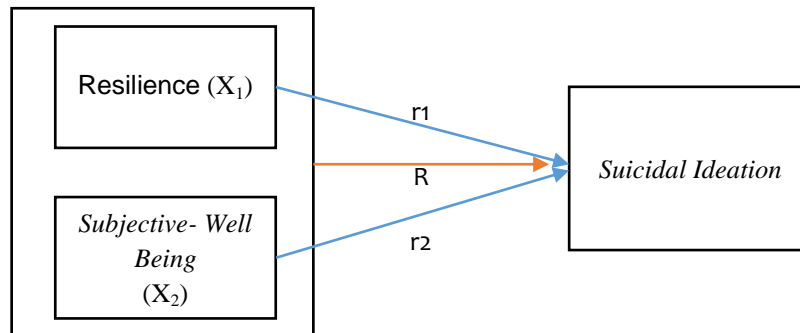


Chart 1 Research Design

Result

This study was attended by 139 respondents who had met several specified criteria. The age limit in this study shows a minimum age of 12 years to 24 years. The results of the demographic data description of the research results are presented in the following table: Data Demography Respondent.

Based on the analysis of demographic data, age range ($\rho = -.433^{**}$, $p < .05$) is significantly negatively correlated with subjective well-being. This shows that there are other factors outside of the variables studied that result in the increasing age of a person, then he will feel less happy or satisfied with his life. In addition, the demographic data of the gender category ($\rho = .198^*$, $p < .05$) was significantly positively correlated to suicidal ideation. On the other hand, gender range ($\rho = -.193^*$, $p < .05$) was significantly negatively correlated to resilience. Based on the predominance of female gender in this study, this suggests that the tendency of female gender in this study sample data to be more prone to suicidal ideation is associated with lower levels of resilience (see table 3).

Table 2
Validity and Reliability Test of Measuring Tools

Respondent Demographic Data		Frequency (f)	Percent
Age	12-15	12	8.0%
	15-18	95	58.9%
	18-24	31	32.4%
	miss	1	0.7%
Gender	Female	80	58.0%
	Male	58	42.0%
Education	SMP	5	3.6%
	SMA	118	85.5%
	SMK	7	5.1%
	Diploma/S1	8	5.8%
	miss	0	0%

Table 3
Correlation Matrix of Research Variables

Variabel	M	SD	1	2	3
Subjective well-being	20.53	5.67	-		
Suicidal Ideation	18.59	9.718	-.414**	-	
Resilience	2.9892	.65853	.463**	-.433**	-

Based on the correlation matrix analysis listed in table 3, it is known that the dimensions of self-being and resilience have a significant negative correlation with both dimensions of suicidal ideation, namely both visible and invisible suicidal intentions. The dimensions of self-being and resilience also have a significant correlation. In addition, it can also be concluded that the resilience variable has a higher degree of correlation strength with suicidal ideation when compared to subjective well-being.

Table 4
Correlation Matrix between Dimensions of Research Variables

Dimensi Variabel	1	2	3	4
Subjective well-being	-			
Resilience	.437**	-		
Overt Suicidal Intentions	-.236**	-.375**	-	
Covert Suicide Intention	-.363**	-.434**	.798**	-

The researcher also summarised the descriptive analysis of the variable norming categories in the study. Based on this analysis, it can be concluded that most of the samples in this study had self-being categorised as 'slightly satisfied' and followed by the second most in the category of 'slightly dissatisfied'. On the other hand, the resilience of the research sample was mostly in the 'low' and 'normal' categories. The suicidal ideation of the samples was mostly in the 'low' category followed by the 'moderate' category. The results of the multiple correlation analysis are summarised in Chart 2 and discussed systematically according to the three research hypotheses.

Hypothesis 1: Relationship between Resilience and Suicidal Intention

The results of path r1 testing showed that there is a significant correlation or relationship between resilience and suicidal ideation ($\rho = -.433^{**}$, $p = .000$). The value of $\rho = -.433$ explains that the level of relationship is moderate negatively (inverse) between resilience and suicidal ideation. Thus, individual suicidal ideation will decrease if the level of individual resilience increases. Based on this, it can be concluded that there is a relationship between the two variables.

Hypothesis 2: The Relationship of Self-being to Suicidal Intention

The results of path r2 testing, it is known that there is a significant correlation or relationship between subjective well-being and suicidal ideation ($\rho = -.414^{**}$, $p = .000$). The value of $\rho = -.414$ explains that a moderate level of negative relationship (inverse) between subjective well-being and suicidal ideation. Thus, individual suicidal ideation will decrease if the level of individual subjective well-

being increases. Thus, the hypothesis is accepted, namely there is a significant relationship between subjective well-being and suicidal ideation.

Hypothesis 3: Simultaneous Relationship of Resilience and Well-being to Suicidal Ideation

The results of path R testing, it is known that there is a simultaneous and significant correlation or relationship between resilience and well-being with suicidal ideation ($R = .442a$, $R^2 = .196$, $p = .000$). It is known that the magnitude of the relationship between resilience and well-being simultaneously the two variables on suicidal ideation is 19.6%. Based on this, it can be concluded that the hypothesis is accepted.

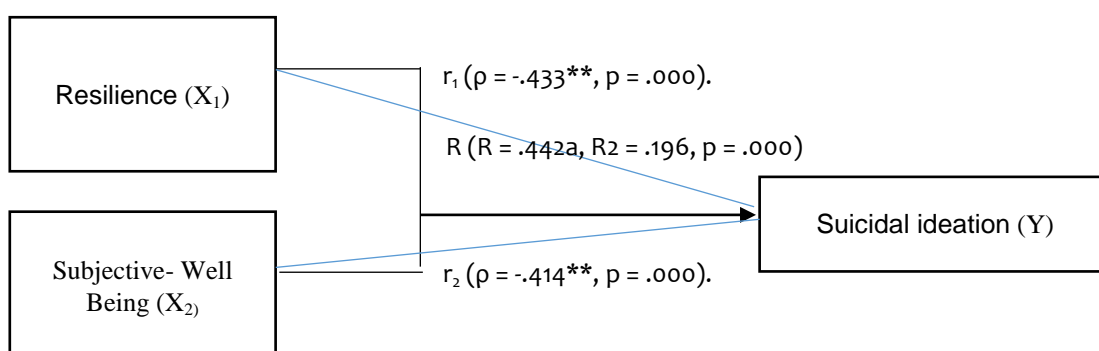


Chart 2 Multiple Correlations of Resilience and Subjective Well-Being on Suicidal Ideation

Discussion

The results of the study regarding the significant correlation between resilience and self-being towards suicidal ideation indicate that resilience and self-being contribute to helping reduce suicidal ideation in participants. This is in line with the results of previous research where self-being is negatively correlated and can reduce suicidal ideation in community populations (Suh et al., 2021). Previous research also explains that resilience, perceived social support, psychosocial, stress resistance, and positive mental health - show a correlation and moderate the impact of depressive symptoms on suicidal ideation in individuals (Siegmann et al., 2018). The correlation between resilience and suicidal ideation is due to the construct of resilience that can help adolescents overcome difficulties. This is because resilience is not a fixed trait in each individual, but is the result of dynamic transactions that occur between external and internal forces (Kaisar & Kurniawan, 2022). Thus, when adolescents experience experiences or situations that are full of certain stressors in their lives, the resilience possessed by each individual will move to maintain in the face of challenges and setbacks.

Another study conducted by Yu et al., (2021) found that depression and suicidal behaviour can be attenuated by resilience as well as life satisfaction and optimism factors. Life satisfaction is a core component of well-being and an important predictor of hopeful thinking, both of which were found to moderate the depression-suicide relationship. Commensurate with other research outlining the link between resilience and well-being in adolescent samples. This research explained that resilience is likely to contribute to aspects of academic success and health; whereas low resilience is associated

with increased externalising and internalising problems (Kaniušonytė & Laursen, 2022). Research by Chen & Kuo (2020) outlined that perceived stress substantially increases the risk of suicidal behaviour. Thus, in undergoing the process of searching for adolescent self-identity, psychological capital and stress coping are needed to be able to undergo this developmental process.

According to Siebert (in Subandy & Jatmika, 2020), resilience can be connected and combined with coping because the existence of resilience leads a person to do coping. Nezelek, et al. (in Manita et al., 2019). which explains that well-being is significantly related to daily stress, where individual well-being becomes higher when individuals feel less stressed. If individuals who have a low level of self-being will perceive the events that occur in their lives as something unpleasant and cause various negative things, such as anger, anxiety, or depression (Ekawardhani et al., 2019). Thus, there is a connection if individuals have appropriate stress coping then this also connects individuals to seek their own well-being.

The finding that resilience and well-being are negatively correlated with suicide implies the importance of programmes that support the development of resilience and well-being in adolescents. Psychology-based intervention programmes such as stress coping training and psychological capital development can help reduce suicidal ideation and improve adolescents' ability to cope with life stressors. Furthermore, as social support is an important moderator between depression and suicidal ideation, efforts that improve social relationships within the family, school and community may play an important role in reducing suicide risk. In addition, these findings suggest that a holistic approach to adolescent psychoeducation is needed. Providing education not only addresses depressive symptoms but also builds positive traits such as optimism, life satisfaction and well-being, which can increase mental resilience.

Although these findings are relevant, the results of this study may not be fully generalisable to all adolescent populations, especially those from different cultural and social backgrounds. Further research needs to consider culturally and demographically specific factors that may influence the relationship between resilience, well-being and suicidal ideation. This study also used a correlational approach, making it difficult to draw causal conclusions. Future studies could utilise experimental or longitudinal studies to gain a better understanding of how well-being and resilience influence suicidal ideation over time, and to review useful interventions to increase resilience and reduce suicide risk.

Conclusion

Based on the results of the study, two conclusions can be drawn. First, if individuals have high resilience and well-being, it will help reduce suicidal ideation in individuals. Therefore, this research is expected to contribute to efforts in preventing and anticipating the level of suicidal intentions in adolescents in Indonesia, especially in Jakarta, through efforts to increase individual resilience and well-being. Second, each dimension of resilience and self-being has an opposite role to suicidal ideation. Third, the simultaneous contribution of the two variables to suicidal ideation is 19.6%. Therefore, the rest is influenced by other variables not examined in this study, such as social support, religiosity, self-esteem, religiosity, and so on.

This study has several limitations, namely the sampling method, number, and scope of samples obtained. This study used a sampling method in the form of non-probability sampling with a minimal number of samples and was limited to the Jakarta area only. The author suggests that future research can use probability sampling with a larger number of samples so that the results obtained can be more representative and generalised to the population throughout Indonesia. There are a number of limitations in the use of measuring instruments in this study such as the translation of measuring instruments from English to Indonesian which was carried out by the author directly and the adaptation of measuring instruments for suicidal ideation variables used by the author is still ongoing. The previous adaptation of the suicidal ideation variable measuring instrument used a fairly small sample size of 106 people. Therefore, the author also suggests that further research can test the adaptation of the R-SIS measuring instrument that has been done previously so that the results obtained can be more reliable and valid.

In addition, future research is also recommended to use adaptations of measuring instruments that have been translated and validated by expert translators. Based on the results of the research that has been conducted, the author suggests that building and increasing resilience in children and adolescents can be done to improve personal well-being and lead to reducing the level of suicidal intentions in adolescents and adults. Some forms of intervention carried out in an effort to improve resilience can be in the form of stress management, mindfulness, yoga, cognitive reappraisal, humour, relaxation techniques, developing life skills, and gratitude.

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