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Depression, Stressful Life Event, Coping Skills and Family Relationship as Predictor's of Suicidal Ideation among Correctional Centers' Inmates in Ondo State

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ABSTRACT

This study investigated family relationship, stressful life event, depression, and coping skills as predictors of suicidal ideation among Correctional Centers' inmates. Two hundred and forty six (246) Correctional Centers' inmates (220 males and 26 females) sampled from Olokuta Correctional Centers and Owo Correctional Centers participated in the Study. Their ages ranged from 19 to 50 with a mean of 30.86 years and standard deviation of (SD-9.94). Family relationship was measured using Index of Family Relation, Stressful Life event was measured using Life Event Scale, depression was measured using Zung Self-Rating Depression Scale, coping skills was measured using Pro-active Coping Skill Scale, and suicidal ideation was measured using Modified scale for Suicidal Ideation. Six hypotheses were formulated and tested with Hierarchical Regression. Results showed that depression significantly predicted suicide ideation (B=-0.04; t -2.33; p< 0.05). Life event significantly predicted suicide ideation (B=-0.38; t = -17.23; p < 0.01). To add with, the results also showed that family relation significantly predicted suicide ideation (B = 1.10; 1= 66.05; p < 0.01). Furthermore, the results also showed that perceived coping skills significantly predicted suicide ideation (B = -0.25; t = -14.01; p < 0.01). Lastly, on the joint contribution of all the independent variables to the prediction of suicide ideation, the results indicated that all the independent variables when pulled together yield a multiple R of 0.99 and R' of 0.99 (F (1, 236) = 1882.29; p<0.01). Based on these findings, it is recommended that future research should focus on the inclusion of additional variables such as socio-economic status, as well as the use of longitudinal studies to explore the dynamics of Correctional Centers inmate's suicidal behaviour. The implementation of programs aimed at enhancing effective coping strategies and social skills of inmates are also recommended.

Keywords: Family relationships, depression, coping skills, life stressful events, correctional centers suicidal ideation

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1 INTRODUCTION

Suicide Ideation and Suicide is recognized as a critical problem within the jail environment, the issue of Correctional Center suicide has not received comparable attention. Until recently, it has been assumed that suicide is a problem for jail inmates as they face the initial crisis of incarceration. This assumption, however, has not been supported in the literature. Although, it likely for suicide rate in our Correctional Centers to be far lower than that of jails, it remains disproportionately higher than in the general population. Looking at Correctional Center inmate in our society, it likely for prisoner to be facing pains in prison, harm, both self-inflicted injury, suicide and even imprisonment for offence that they know nothing about. Suicidal ideation generate more negative consequent not only to the victim for also the relative of the victim, the society and the nation at large. Suicidal ideation which may be seen as thoughts an individual has about taking his/her own life with some degree of intent is calling for concern among scholars and learned society. Suicidal Ideation does not necessarily mean that a person is an imminent risk to self, but most have the intention to carry out such act. It is imperative that all suicidal ideation or thought is taking seriously and explored to determine the level of risk. The range of suicidal ideation varies greatly from fleeting to detailed planning, self-harm and unsuccessful attempts, which may be deliberately constructed to fail or be discovered, or may be fully intended to succeed. Around the world suicide takes nearly 1 million lives each year. Ellis and Rutherford (2008) indicated that suicide accounts for fully one-half of violent deaths worldwide, outpacing homicide and war combined as the cause of death.

Suicide varies across cultures and ages. Children and adolescent between 10 to 19 years of age as well older adult in their late 50 are more likely to commit suicide in Nigeria. More also, cultural variations as well as religion belief are equally responsible for suicide rate in Nigeria. More people are committing suicide each year in Nigeria. It is estimated that there are as many suicide attempts in Nigeria each year. Suicide is another leading cause of death in the in Nigeria which has not cut the attention of researcher in Nigeria, with fewer completed suicide. General population data obtain from our national Newspaper on Correctional Centers suggested that upwards of 13.5% of individuals report lifetime suicidal ideation and 4.6% report making suicide attempts at some point in their lives.

The major risk factor for elderly suicide in Nigeria is more likely to be Major Depressive Disorder (MDD). Older people in Nigeria fail to communicate their suicidal act to close relatives or significant others. This is another reason why we have poor record on attempted or completed suicide among the populace in the country. It is possible for lifetime risk of suicide for adult individuals with Major Depressive Disorder (MDD) to be more among psychiatric inpatients. Individuals with MDD are at higher risk to be suicidal completers, especially when they also have comorbid psychiatric and medical disorders such as psychotic disorders and substance abuse disorders. Most individuals with MDD are highest risk for suicide during the early years within the course of their illness. Those who attempt suicide most often do so in the first 3 months of a depressive episode and within 5 years of their depression. Anxiety increases the risk of early suicide in the course of major depression. This statement is in line with the finding of Rector et al. (2008) who observed that the incidence of suicidal behaviors increases with the number of anxiety disorders, and moreover, the presence of anxiety disorder in combination with a mood disorder increases the suicide risk beyond a mood disorder alone. Stable levels of hopelessness also increase the long-term risk of suicide.

Clinical psychologist have long research on the link between suicide depression and other mood affective disorders. The most frequently associated with suicide and suicide ideation is depression. The majority of the studies that evaluate the relation of psychiatric disorders to suicide report. Major depression is most significant diagnosis related to suicide people. Depressed people often experience hopelessness, they may seem unable to experience any feelings of happiness, when participating in activities they normally derive pleasure with. Many of these people experience either a rapid weight gain or weight loss along with their depression. They may seem inattentive, and their performance at work or

school may suffer. They may appear listless and even complain of feeling "down" or depressed. Depressed people are often burdened with a tremendous sense of guilt. To an outside observer, this guilt often seems unwarranted, but to the depressed person, it feels deserved. Divorce, loss of job, legal trouble, and financial difficulties often grow from a dependence on alcohol or drugs and can bring about thoughts of suicides. As a result of this most victims develop thought of suicide. Depression is probably the most common psychological disorder. Everybody seems to know someone who is depressed whether family members, a close friend or a co-worker. Depression makes a person feel sad, hopeless, worthless, pessimistic and guilty as a result of this depressed prisoners may likely develop thought and ideas for suicide.

Family means different things to different people; families may span several generations, several households, and may change in response to life events such as divorce, remarriage, and children leaving the parental home. It is sometimes easier to define a family not by what it looks like but by what it does caring, supporting, protecting and loving are what families have in common. In recent years, stable family relationships and community ties have been recognized as important factors in effective resettlement and reducing offending by ex- prisoners. Active family support can also help to ameliorate the 'pains of imprisonment', thereby potentially reducing the risk of suicide/self-harm. In addition to assisting in resettlement, Family support during the term of incarceration can help to ameliorate the 'pains of imprisonment' particularly the deprivation of liberty (Sykes 1958). This in turn is likely to improve general prisoner well-being, and can contribute to the prevention of suicide/self-harm.

The importance of maintaining family ties has long been recognized by the Correctional Center Service, but could hardly be described as a priority of the Correctional Center system, as keeping in touch with imprisoned family members and being able to support them effectively can be extremely difficult for many families, particularly if prisoners are kept some distance away from their home area. Before examining the role that prisoners' families can play, it is important to consider what is meant by the term 'prisoners' families'. Studies of prisoners' families overwhelmingly tend to discuss the experiences of prisoners' partners, particularly young wives and girlfriends, and prisoners' children. It more like for prisoners with low social support to develop thought of suicide. Many prisoners develop suicidal ideation based on the kind of relationship they have or develop with their caregivers and significant others.

Coping is conceptualized as the cognitive and behavioural efforts used to manage, master, tolerate and reduce external and/or internal demands that are appraised as taxing or exceeding a person's resources (Bishop et al., 2001; Patterson, 2000). According to Bishop et al. (1996), coping is viewed as a dynamic process that changes according to the situation and the corresponding appraisal made by the individual. It appears that individuals do have consistent coping preferences or dispositions that are employed across a wide range of situations. Parkes (1986) found that coping may be influenced not only by the nature of the stressful episode but also by the resources, both intra-individual and environmental, available to the person concerned. Callan (1993) defines non-coping as failed efforts to cope, accompanied by various physical and psychosocial disturbances, which result in higher stress. Thus the use of effective coping strategies and a strong support system protect individuals from psychological distress by reducing or eliminating distress (Patterson, 1999).

Stress-related events: researchers conceptualized events children perceive to be the most upsetting into two, The first is the child's sense of security in relation to the threat of events such as the loss of a parent (through death, divorce, separation, neglect, and so on), loss of sight parental discord, sickness, surgery, scary dreams, displacement (e.g., getting physically lost), and the likes. Another cluster has to do with the threat or injury to the child's sense of dignity and respectability. Such an experience is revealed in events like being caught thieving, not being promoted to the next grade, being suspected or accused of lying, receiving a bad report card, being sent to the headmaster to be disciplined, or being publicly ridiculed. Like everyone else, children fear and detest being shamed and embarrassed.

Some researchers have suggested that life stressors may affect adolescents in similar ways to adults. This is particularly evident in the areas of self-esteem and psychosocial functioning (Yen, et al., 2003).

Life-stress is a continue feeling or worry about social, occupational, cognitive and physiological of life that prevents you from relaxing. General causes of stress include death of spouse, family, friend, family change, sexual problem .etc. Gould et al. (1996) reported that stressful life events have been associated with complete suicide in adolescence even after controlling for psychiatric symptoms. early parental loss by a child to generate a particular life events that increase the risk of attempted and completed suicide The type of life events that are related to suicidal behaviours vary with age. However, some stressors that precipitate suicidal behaviour may be specific to various pre-existing psychiatric disturbance. That is, legal problems are more common in adolescents with disruptive behaviour disorders. If suicide ideation is common experience among Correctional Center inmates which can be at least partially explained by environmental factors, it is not clear why some prisoners deny ideation. Exploration of this issue is impeded by the inherent limitations of research on stigmatized behaviours that are completely dependent on self-report.

There is no procedure for determining the specificity i.e. the proportion of false negatives produced by any one measure of ideation. Therefore, research on suicide ideation may actually be the study of one's willingness to admit to suicidal thoughts under these conditions, it is important to account for attitudes since how the phenomenon is perceived by the subject potentially affects his or her willingness to report. The events may have occurred in childhood, such as physical and/or sexual abuse, neglect, separation and previous suicidal attempts (King, et al., 2009). These stressors often overwhelm the coping skills of adolescent because of his / her inexperience with such life situations (Wagner, et al., 1995). Other life events are also associated with suicide risk; interpersonal losses (e.g., breaking up with a boyfriend/girlfriend), legal or disciplinary problems (e.g., getting into trouble at schools or with a law enforcement agency), and victimization by peers (Kaminski& Fang, 2009) the experience of a disproportionate number of stressful life events may compound problem-solving difficulties present among prisoners.

Several personal and environmental factors have been associated with a significant increase in the risk for suicidal behaviour. Suicidal ideation had long being a problem not only in our society but also throughout the world. Most completed suicide does not only cause a problem to the individual but also to the society at large. The family provides emotional support both in the family context as well as the broader community. However, these problems ranges from environmental stressors such as parental divorce, death of a parent, interpersonal conflict between parents and siblings, pre-existing family psychiatric conditions and suicidal behaviour in the family context can all lead to an increased sense of insecurity and a risk for suicidal behaviour. Relationships outside the family, namely peer and romantic relationships, have also been implicated as contributing towards suicidal behaviour. However, the study is established to investigate family relationship, stressful life event, depression coping skills as a predictor of suicidal ideation among Correctional Center inmates in Nigeria Prisons in Ondo State.

In the present study, the research proposed to examine the predictive influence of family relationship, stressful life event, depression, and coping skills on suicidal ideation among Correctional Center inmates. The following research questions were ascertained: to determine the relationship that exists between each of the studied variables (Depression, Stressful life event, Coping skill, and Family relationship) with suicidal ideation among Correctional Center inmates, to determine whether depression, stressful life event, family relationship, and coping skill will have a joint and independent influence on suicidal ideation among Correctional Center inmates, to determine whether stressful life event will have influence on suicidal ideation among Correctional Center inmates, to determine whether depression will have influence on suicidal ideation among Correctional Center inmates, to determine whether family relationship will have influence on suicidal ideation among Correctional Center inmate,

and to determine whether coping skill will have influence on suicidal ideation among Correctional Center inmate

The relevance of this study can be appraised from both the theoretical and practical aspect. This study is relevant to education and seeks to contribute to knowledge in areas that family relationships, stressful life event, depression, and coping skill especially among Nigerian youths play a significant role in development of suicidal ideation among Correctional Center inmates. This research work, serve as a data bank for policy makers in these areas of study. The result of this study provides information that can be used in designing programs aimed at controlling suicidal ideation among Correctional Center inmates. The result is beneficial to guidance counsellors and professionals who have to deal with factors that cause suicidal ideation and antisocial behaviour problems in the society and further studies in this field. Apart from that, researchers and Correctional Center management would also update their knowledge through the results of this study. This study will contribute to empirical findings and also in clinical setting (psychiatric hospitals) and general psychology. This study will also contribute to theories on the predictors of suicidal ideation among Correctional Center inmates.

2 LITERATURE REVIEW

2.1 Theoretical Review

2.1.1 Beck Depression Theory

Beck (1967) proposed a cognitive model of depression. He saw depression as a consequence of particular patterns of thinking. He postulated that dysfunctional thought patterns resulted from negative childhood experiences that led to the individual forming negative core beliefs about the self, the world and the future. Beck proposed that depression was in part a consequence of a systematic tendency to pre-processing that serve to warp the way that information is processed in the direction of existing beliefs. He introduced his concept of the negative cognitive triad-negative views about the self, the world, and the future-and explicated the role of schema, clusters of beliefs, and proclivities with respect to information. According to Beck, depression which as to do with negative view of life as Beck put it in its cognitive triad where individual have this feeling of hopelessness, worthlessness and selflessness is much more related to suicidal ideation since majority of prisoners attested to feelings of hopelessness, worthlessness and selflessness.

2.1.2 The ABC model of Coping Skill

Psychologist and researcher Dr. Albert Ellis in 1957 created the ABC model to help us understand the meaning of our reactions to adversity: A is the adversity-the situation or event. B is our belief-our explanation about why the situation happened. C is the consequence-the feelings and behaviours that our belief causes. This theory is very much related to coping and it explains how best an individual adapt and fails to adapt to situations. According to Ellis, A is the adversity—the situation or event. It can be as a result of unpleasant life event, economic hardship and the likes. B is our belief-our explanation about why the situation happened. This can be adaptive or maladaptive based on one interpretation of the event. The interpretation of the event will tell whether one is able or unable to cope. C is the consequence-the feelings and behaviours that our belief causes. Positive consequence produced favorable coping whereas negative consequence lead to unfavorable coping skills. Most prisoners who are unable to cope with life events and challenges developed suicidal ideation and sometime completed suicide.

2.1.3 Lazarus transactional model of Stressful Life Events

Lazarus (1991) developed a comprehensive emotion theory that also includes a stress theory. According to Lazarus stress reside neither on the individual nor in his environment. It is an interaction between the individual and his environment. This theory distinguishes two basic forms of appraisal,

primary and secondary appraisal. These forms rely on different sources of information. Primary appraisal concerns whether something of relevance to the individual's well- being occurs, whereas secondary appraisal concerns coping options. Lazarus (1991) distinguishes 15 basic emotions. Nine of these are negative (anger, fright, anxiety, guilt, shame, sadness, envy, jealousy, and disgust), whereas four are positive (happiness, pride, relief, and love). (Two more emotions, hope and compassion, have a mixed valence.) At a molecular level of analysis, the anxiety reaction, for example, is based on the following pattern of primary and secondary appraisals. It more likely for prisoners under stress to see suicidal ideation as more viable alternatives.

Coping is intimately related to the concept of cognitive appraisal and, hence, to the stress- relevant person-environment transactions. Most approaches in coping research follow Folkman and Lazarus (1980), who define coping as 'the cognitive and behavioral efforts made to master, tolerate, or reduce external and internal demands and conflicts among them. Or can also relate to internal elements and try to reduce a negative emotional state, or change the appraisal of the demanding situation (emotion-focused coping).

2.2 Empirical Review

2.2.1 Depression and Stressful Life Event

Ormel et al. (2001) investigated life stress and the onset of subsyndromal and full syndromal depression in older adults, and they also examined the differential prediction of onset for the first depressive episodes versus recurrences (Ormel, et al., 2001). Participant were 83 individuals aged 57 or older who developed a subsyndromal or full syndromal depressive episode beginning in the 9 month preceding the interview. These depressed individuals were selected from a larger community survey of 3,700 non-institutionalized older persons, with 83 comparison participants selected from the same pool (Ormel, et al., 2001). History of depression was defined as positive for participants for whom “there had been at least one previous episode that would have met the criteria for at least a subsyndromal depressive episode” (Ormel, et al., 2001). this study is noteworthy, too, in the use of the LEDS (Brown & Harris, 1978, 1989) to asses life stress, Ornel et al. (2001) reported a differential role of life stress events in the 3- month period prior to depression onset: The effects of severe life events were considerably stronger for first episodes of depression compared with recurrence (odds ratios of 41.00 vs 9.11, respectively) 2(1, N 83) 5.75, p.02. Additionally, mild stressful life events for a first onset versus a recurrence, 2(1, N 83) 3.29, p.07. chronic difficulties did not predict differentially for first onset versus recurrent episode. Overall, these findings again provide support for the differential role of major life events for a first episode of depression but not for recurrence. They also add to the literature the finding that milder forms of stress may be capable of triggering a recurrence. This researcher does not look in to the role of suicidal ideation.

Maciejewski et al. (2001) reported on the changing role of life stress and depression for a community sample of 1,024 men and 1,800 women. The study drew from the Americans’ changing lives data set, a multistage stratified area probability sample of individuals over age 25 in the united states, with an oversampling of African Americans and individuals 60 years of age and older. Participants were interviewed in two wave separated by 3 years. Past depression was assessed by inquiring about whether participants had “experienced a period in their life lasting at least 1 week when they felt sad or depressed most of the time or when they lost all interest and pleasure in things about which they usually cared” (Maciejewski, et al., 2001) if they responded affirmatively to this question and it was determined that at least one of these periods preceded the date of the entry into the study, participant were considered to have “a history of severely depressed mood (Maciejewski, et al., 2001) Diagnosis of major depression was based on meeting Diagnosis and statistical manual of mental disorders (American Psychology Association, 2000) symptoms criteria during the interval between Wave 1 and Wave 2. Eleven specific

life events occurring during the 12 month period preceding the calendar month of the respondent's interview (n -237) were assessed using a simple inventory approach.

Maciejewski et al. (2001), tested risk ratios for events as a group as well as individually occurring during the month of depression onset. These investigators reported that the risk ratio for life events considered collectively was significantly lower for participants reporting a prior history of severely depressed mood (95% confidence interval 0.13, 0.6-.001). It is interesting to note that risk ratios for individual event suggested that prior depression modified the relationship for only particular events and not others. Overall, though, the authors concluded there was a diminishing association between life events and episode onset over successive recurrence, the two remaining studies represent some of the most sophisticated research to date bearing directly on the kindling hypothesis. These reports come from the same research group but address different facets of the kindling hypothesis. First, Kendler et al. (2000) assessed 2,395 Caucasian female -female twin pairs from the population-based Virginia twin registry. Most participants (88) were interviewed in personal interview and a wave 4 assessment. In an interview section prior to the assessment of major depression, major life events were assessed (e.g 11 personal life events, 4 network events) for waves 3 and 4, life events also were rated by the interviewer on long- term contextual threat and independence (using LEDS principle; Brown & Harris 1978, 1989). Depression and history of depression were assessed by structured interview based on the structured clinical interview for DSM-III-R (Spitzer & Williams, 1985). From literature above, it likely for prisoners to become depressed after a lot of stressful life event. Therefore the literature does not look in to the role depression and stressful life event have on suicidal ideation.

2.2.2 Depression and Suicidal Ideation

Boothby and Clements (2000) noted that depression was the most often treated psychiatric condition in prison. Their national survey of correctional centers psychologists showed that 80% of their respondents cited depression as one of four most frequently treated problems in the U.S. Correctional Center system. Daniel (2006) also noted that depressive disorders are more closely linked to suicide than any other psychiatric illness. According to Rowan and Hayes (1988), depression is the best predictor of suicide; 70% to 80% of all suicides are committed by people who are severely depressed (Rowan & Hayes, 1988).

Jenkins et al. (2005) analyzed the prevalence of suicidal ideation and suicide attempts in the National Correctional Center Survey of the UK, and their association with the presence of psychiatric disorders. These data were compared with data from a national survey of psychiatric morbidity in adults living at home. Both surveys used a two phased interviewing procedure covering general health, mental health, and activities of daily living, socio-demographic data, substance abuse, life events, substance use and intelligence. Suicidal behaviours were commoner in prisons than in the general population and these were significantly associated with various psychiatric disorders. In addition, demographic factors such as being young, single, school drop outs, poor social supports and social adversities were important factors for suicidal thoughts. The following were the adjusted odds ratios (95% confidence intervals) for selective variables: moderate lack of social support -1.37(1.02-1.86); female gender-1.91(1.43-2.56); 16-20 years of age-3.00(1.80-4.98); remand prisoner -1.56(1.20-2.02); depressive episode-1.68(1.2-2.35); psychosis -4.87(3.53-6.72); personality disorder -1.98(1.26-3.11). All values were statistically significant at $p<0.05$. Among social psychological factors, depression, anxiety, and hopelessness have been reliably associated with an increased probability of suicidal behaviour (Friedrich, et al., 1982; Pfeffer, 2003).

Palmer and Connelly (2005) compared depressive characteristics of prisoners who reported previous self-harm with those who did not. The researchers administered the Beck Hopelessness Scale, the Beck Depression Inventory, and the Beck Scale for Suicide Ideation to inmates in an" England Correctional Center within four weeks of their arrival. Results indicated that prisoners with a history of

self-harm scored significantly higher on all three measures, suggesting continued risk for suicide attempt.

Reizel and Harju (2000) argued that depressive symptoms were relatively predominant in newly incarcerated Correctional Center inmates and that therefore it would be valuable to low more about the nature of the depression. The authors classified inmate "depression as short-term reactive depression or as more serious and chronic prison-adjustment depression. They theorized that over time inmates may experience an Exacerbation or alleviation of depression based on their personal locus of control orientation. Reizel and Harju (2000) concluded that inmates with high internal control experienced less depression than inmates with high external control, and they theorized that individuals in the first group had developed a realistic view of the Correctional Center setting and adjusted accordingly, whereas the individuals in the latter group had a sense of helplessness. Thus, in this study, inmates identified as having high external control carried a higher risk for suicide than did those with an internal locus of control.

Depression also has been found to fully and partially mediate the relationship between other common risk factors and suicidal ideation and behaviors (Lewinsohn, et al., 1993). The study sample is approximately 1,700 high school students, the authors reported that when depression was statistically controlled, other psychological variables, including hopelessness and low self-esteem, were no longer predictive of suicidal behavior. Depression also has been found to mediate the relationship between negative life events and suicidal ideation. Konick and Gutierrez (2005) in an examination of suicidal ideation in 345 undergraduate college students found that the relationship between negative life events and suicidal ideation was fully mediated by depression. Similarly, Dube et al. (2001) conducted a retrospective study of over 17,000 adults who attended a primary care clinic in San Diego to examine childhood abuse, household dysfunction, suicide attempts, and other health related behaviors. They found that depression and substance abuse partially mediated the relationship between adverse childhood events (i.e., physical abuse, sexual abuse, domestic violence, household substance abuse, and mental illness in the household, parental separation or divorce, incarcerated household members) and suicide attempts. They posited that children who experienced traumatic events are more likely to have problems with emotional and behavioral regulation later in life (Dube, et al., 2001).

Thompson et al. (2005) explored the roles of anxiety, depression, and hopelessness as mediators between known risk factors and suicidal behaviors among 1,287 potential high school dropouts using structural equation modeling. Results indicated that depression and hopelessness had direct effects on suicidal behaviors for males. Reynolds (1998) examined suicide ideation in a sample of 1,249 first-year college students as part of an ongoing prospective study of college student health behaviors. Results indicated that only 40% of those with suicidal ideation were classified as depressed by having a score of 16 or higher on the Beck Depression Inventory, a 21-item self-report measure of depressive symptoms (Reynolds, 1998). The authors theorized that suicidal ideation in young college students may have a unique etiology because of developmental transitions that occur in young adulthood, including changes in family relationships, peer contexts, and increase opportunities for alcohol and drug use. In another study of 424 college students, nearly half of the suicide attempters failed to meet lifetime criteria for depression.

Cukrowicz (2011) conducted a series of three studies to examine the relationship between self-reported suicidal ideation and the severity of depressive symptoms. In each study, a sample of college students was utilized; study 1 had 222 undergraduate students, study 2 had 309 undergraduate students, and study 3 had 914 undergraduate students. Participants in studies 1 and 2 were from the same university, whereas participants from study 3 were from a university in a different geographic location and was a more ethnically diverse sample that the other 2 studies. The results of all three studies indicated that although the greatest elevation in suicidal ideation occurred at the highest level of depressive symptoms, significant suicidal ideation was also experience by college students with mild and moderate

levels of depression. The authors concluded that elevated suicidal ideation is not limited to college students with severe depression and that suicide assessments should be conducted with all students experiencing any depressive symptoms Substance use and abuse also have been examined in relation to suicidal ideation, suicide attempts and suicide in young people.

Rassmussen et al. (1997) conducted a study of 242 eighth grade adolescent Mexican Americans regarding their suicidal ideation and the associated risk factors. The study was done to determine whether acculturation levels, specific risk factors, depression, and self-esteem could predict suicidal ideation. They found that Mexican Americans had many more suicidal risk factors than the White Americans of the same age. Some of these risk factors included acculturation, poverty, and substance abuse. Within this study, suicidal ideation was found to be significantly correlated with depression and self-esteem.

2.3 Family Relationship and Suicidal Ideation

Garnefski and Diekstra (1997) in their study focused on the emotional effect of children raised in one-parent or stepparent homes. The participants in this study were 13,953 secondary students, ages 12 to 19 years old, from the Netherlands. Participants filled out self-report questionnaires under the guidance of a teacher. In general, children of one-parent or stepparent families reported more emotional problems, including low self-esteem. Children of these families also had a significantly higher rate of suicidal behavior over their lifetime. Once again, the low self-esteem of these adolescents was significantly correlated with suicide. Environmental factors such as the quality of interpersonal relationships between adolescents, their family members (parents and siblings) and friends can be a major resource for adolescents, but can also serve as major stressors, especially if conflict occurs within these relationships. Stable and secure relationships with family and peers can assist adolescents in making a smooth transition into adulthood and to cope with negative life events (Cornwell, 2003; Liu, 2002; Way & Robinson, 2003). The quality of the sibling relationship affects not only adolescents" peer relationships, but their overall adjustment.

2.4 Coping Skill and Suicidal Ideation

Britton et al. (2008) found that survival and coping beliefs, fear of suicide, and moral objections were negatively associated with the presence of suicide ideation among depressed individuals aged 50 years and older receiving clinical services; however, responsibility to family appeared to strengthen the association between hopelessness and suicide ideation. Britton et al. Hypothesized that this finding may indicate that depressed and hopeless older adults may perceive themselves to be burdens on their families. Stable and secure relationships with family and peers can assist adolescents in making a smooth transition into adulthood and to cope with negative life events (Cornwell, 2003; Liu, 2002; Way & Robinson, 2003). Way and Robinson (2003) suggest that the family is an essential part of the adolescent's support system. The family provides emotional support both in the family context as well as the broader community. However, environmental stressors such as parental divorce, death of a parent, interpersonal conflict between parents and siblings, pre- existing family psychiatric conditions and suicidal behaviour in the family context can all lead to an increased sense of insecurity and a risk for suicidal ideation. Sibling support is associated with higher perceived self-competence and better adjustment. The quality of the sibling relationship affects not only adolescents" peer relationships, but their overall adjustment. Positive sibling relationships contribute to adolescent school competence, sociability, autonomy and increased self-worth (Basson & Van-den-Berg, 2009; Steinberg & Morris, 2001) while negative relationships can influence the development of suicidal behaviour (Conger, et al., 1997).

2.5 Stressful Life Event and Suicidal Ideation

Several studies have addressed associations between traumatic life events and attempted suicide in community samples. The experience of traumatic events, such as sexual abuse, physical maltreatment, and emotional neglect in childhood and later life, has been found to be related to attempted suicide in adulthood (Arensman, et al., 1999; Yang & Clum, 1996).

A number of recent life events (i.e., occurring 6-12 months prior to the suicide attempt), such as loss of a family member or friend, parental addiction, and parental inpatient psychiatric treatment, have also been found to be related to attempted suicide (Arensman et al., 1999; Paykel, et al., 1975; Welz, 1988). The few studies in samples of inmates have revealed relationships between attempted suicide and early loss of significant others (Koller & Castanos, 1969; Rieger, 1971), sexual and physical abuse during childhood (Lester, 1991; Liebling, 1992, 1995), family histories of offending and mental disorder (Griffiths, 1990; Liebling, 1992, 1995), and recent domestic or family problems (Lester, 1991; Liebling, 1992, 1995; Power & Spencer, 1987; Wool & Dooley, 1987). Thus, attempted suicide has been found to be associated with a large array of recent life events and a large array of life events during childhood and later life.

Most inmates have experienced a relatively high degree of trauma as children and young adults (Collins & Bailey, 1990; Irwin & Austin, 1994; Weeks & Widom, 1998). Disproportionate numbers of inmates have family backgrounds that include divorce, criminality, alcoholism, and physical, emotional, or sexual abuse. Many inmates have a lifestyle through which they are frequently confronted with violence and death of significant others (Collins & Bailey, 1990; Gibbs, 1991; Jankowski, 1991; Jessor & Jessor, 1977; Masuda et al., 1978) Furthermore, the vast majority of inmates have experienced at least one life event that meets the DSM-III-R criteria for an "extreme event" (Jordan, et al., 1996) and in many cases imprisonment seems to be the result of an escalation of life changes in the previous year (Keaveny & Zauszniewski, 1999; Masuda, et al., 1978). Finally, inmates are found to report a higher prevalence of life-time traumatic events than cohorts in the community (Jordan, et al., 1996). These findings demonstrate that histories of traumatic life events and high rates of actual and attempted suicide coincide in inmate populations, but the findings do not confirm a relationship between these two phenomena.

From the literature reviewed, depression has been found to mediate the relationship between negative life events and suicidal ideation. The relationship between negative life events and suicidal ideation was fully mediated by depression. Depression and substance abuse partially mediated the relationship between adverse childhood events (i.e., physical abuse, sexual abuse, domestic violence, household substance abuse, and mental illness in the household, parental Separation or Divorce, incarcerated household members) and suicide attempts. Children who experienced traumatic events are more likely to have problems with emotional and behavioral regulation later in life. Therefore from the body of literature reviewed, researchers have not looked in to the relationship depression, family relationship, coping skill, stressful life event have on suicidal ideation. This is the reason why this study is interested to look in to the influence depression, family relationship, coping skill, stressful life event have on suicidal ideation.

3 METHODOLOGY

This study adopted an ex post facto research design. It involves administration of t Questionnaires to subjects incorporating of psychological tests and some demographic information variables. The independent variables involved in the study were depression, stressful life event, coping skills, and family relationship. The dependent variable for this study was suicidal ideation. Using a combination of purposive and accidental sampling techniques, two hundred and forty six (220 males; 26 females) participants drawn from Nigerian Correctional Center Service Akure. In terms of their marital status 187(76.0%) of the respondents are single, 52(21.1%) of the respondents are married, while 7(2.8%) of the respondents are divorced. In terms of their educational background, 84(34.1%) have

secondary school certificate, 75(30.5%) have NCE/HND, 81(32.9%) have B.Sc./HND, while 6(2.4%) were M.Sc./Ph.D. Their Occupation distribution indicated that, 138(56.1%) are self-employed, 20(8.1%) are civil servants, while 88(35.8%) are students. The age of the respondents ranged between 19 and 50 years (Mean = 30.86; SD = 9.94). The instrument used in this study was a questionnaire made up of six different sections (Section A-F).

Section A: It is the first section of the questionnaire is primarily designed for socio- demographic information's of respondents such as sex, marital status, education qualification, age and occupation.

Section B: The second section was made up of depression scale (Zung Self-Rating Depression Scale). The scale which was developed by Zung (1965) to assess the level of depression for patients diagnosed with depressive disorder. The Zung Self-Rating Depression Scale is a short self-administered survey to quantify the depressed status of a patient. There are 20 items on the scale that rate the four common characteristics of depression: the pervasive effect, the physiological equivalents, other disturbances, and psychomotor activities. There are ten positively worded and ten negatively worded questions. Each question is scored on a scale of 1-4 (a little of the time, some of the time, good part of the time, most of the time). The scale has a reliability of 067. However, this study recorded a reliability of .58.

Section C: Life stress was also measured through life Events Scale (LES): The scale was developed by Singh et al. (1984) and consists of forty eight stressful life events. The items were chosen to represent life changes frequently experienced by individuals in the general population. The contents of the scale are similar to other existing life stress measures i.e. SRRQ- Holmes & Rahe in 1967. The test-retest reliability and content validity were found to be satisfactory. The reliability coefficient ranged from.59 to.99 but the research work through Cronbach's Alpha formula got .963. This study recorded .88 reliability.

Section D: Family relationship was measured using Index of Family Relations (IFR) developed by Hudson, (1997). The IFR is a 25-item scales used to measure the extent, severity or magnitude of problems that family members have in their relationships with one another. There are two cutting scores for the IFR. The first is a score of 30 (±5); scores below this level indicate absence of a clinically significant problem, while scores above this level indicate the potential presence of a clinically significant problem. The second cutting score is 70. Scores above these levels nearly always indicate that clients are experiencing sever stress with the possibility that some type of violence might be present or used in dealing with problems. The IFR is scored by reverse-scoring of items 1, 2, 4, 5, 8, 14, 15, 17, 18, 20, 21, and 23. The next step is summing the scores, subtracting the number of completed items, multiplying this figure by 10, and dividing by the number of items completed times 6. This will produce a range from 0 to 100 with higher scores indicated greater magnitude or severity of problems. The scale has test-retest reliability of 0.78..897 reliability was recorded for this study.

Section E: Coping skills was measured using Pro-active Coping Scale developed by Grenglass, Schwarzar & Taubert (1999). This is a 14 item scale with 4 point Likert scale questionnaire. The Cronbach Alpha ranging from 0.85 to 0.92 with research coefficient alpha of 0.75 for 0.93 was obtained. A split half reliability coefficient of 0.48 was obtained for this study.

Section F: The Modified Scale for Suicidal Ideation (MSSI; Miller, Norman, Bishop, & Dow, 1986) is a revised version of the Scale for Suicidal Ideation (SSI; Beck A.T, Koovacs, & Weissman, 1979). The MSSI is an 18 item scale that contains 13 items from the SSI and 5 additional items. These new items are related to intensity of ideation, courage and competence to attempt, and talk and writing about death. The MSSI was designed to be a semi-structured interview that could be administered by both professionals and paraprofessionals. The MSSI assesses suicide symptoms over the past year. The

first 4 items have been designated as screening items to identify those individuals whose suicidal ideation is severe enough to warrant the administration of the entire scale. Therefore for the purpose of this research only the 4 items will be used. Each item was rated on a 0-3 point scale and the ratings are summed to yield a total score ranging from 0 to 12. A reliability coefficient of .89 using cronbach Alpha formula. The study recorded reliability of .59

The researcher used accidental sampling techniques to select the participants in Nigeria Correctional Center Service from Owo and that of Akure, Ondo State. The selected Correctional Center was visited to secure permission for data collection. After receiving the authority's approval, a data collection day was selected for the distribution of questionnaire to inmates. Explained the purpose of the survey and how it was to be completed. The respondents reported demographic information, received a warning as to the explicit nature of some items.

Questionnaires were administered on one to one basis for filling. Instructions were in the questionnaires to help the respondents to fill the questions correctly. However the researcher verbally explains to those who did not understand how to fill them. Another instruction was given to respondents to fill every question with answer. Inmates were debriefed about the nature of the study and given researcher contact information upon completion. Data were screened such that partial responders and invalid profiles were removed from the analyses. The researcher took about six weeks to complete the administration of the questionnaires because he has to go to the field several times.

The researcher used Pearson product moment correlation to test hypothesis 1 (i.e. to know the relationship that exist among all the variables and the independent variable) and hierarchical multiple regression analysis was used to test hypothesis 2, 3, 4, 5 and 6 (to show the prediction of Depression, Stressful life event, Coping skill and Family relationship on suicidal ideation among Correctional Center inmates). All analysis were carried out using SPSS Window 17.0.

4 DATA ANALYSIS AND DISCUSSION OF FINDINGS

4.1 Test of relationships among the study variables and hypothesis 1

Pearson Products Moment Correlation (PPMC) was used to inter correlate the study variables in order to ascertain the extent and direction of relationships among them. The result is presented

Table 4.1: Pearson Products Moment Correlation

	Variable	1	2	3	4	5	6	7	8	9	10
1	**Sex**	1									
2	**Marital Status**	.001	1								
3	**Education**	.272**	-.050	1							
4	**Age**	.278**	.401*	.416*	1						
5	**Occupation**	-.297**	-152*	-.169*	-478*	1					
6	**Depression**	.201**	.078	.167*	.441*	-.449	1				
7	**Life Event**	-.217**	-.157*	-.345**	522**	.460**	-.576**	1			
8	**Family Relationship**	-.162*	.161*	-.331**	-.270**	.331**	-.526**	.785**	1		
9	**Perceived Coping Skills**	.202**	-.264**	.398**	.317**	-.333*	.644**	-.132**	-.376**	1	
10	**Suicidal Ideation**	-.197**	.136*	-.379**	-.350**	.368**	-.615**	.612**	.923**	-.641**	1
	Mean	-	-	-	-	-	53.67	122.67	53.92	42.47	2.74

Std. D.	-	-	-	-	-	6.43	22.55	17.25	5.18	2.44

Note: **p< 0.01 (2tailed) *p< 0.05 (2-tailed) N = 246

4.1.1 Test of Hypothesis 1

The results in Table 4.1 showed that there was a significant negative relationship between sex [r(246) = -.20, p<0.01].Education qualification [r(246) = -0.38, p<0.05] Age [r(246) = -0.35, p<0.01] Depression [r(246) = -0.62, p<0.01] Perceived coping skills [r(246) = -0.64, p<0.01] and suicidal ideation. Also there was a significant positive relationship between Marital status [r(246) p<0.01] Stressful life event [r(246) p<0.01] and suicidal ideation = 0.37, 0.14, p<0.05].Occupation[r(246) =.61, p<0.01] Family relationship[r (246) = .61, Although, all the variables had independent significant relationship with suicidal ideation but there was no joint relationship among them so therefore the hypotheses was only partially confirmed.

4.2 Test of Hypotheses

In order to test hypotheses 2, 3, 4, 5 and 6 hierarchical multiple regression analysis was conducted. The result is presented in table 2.

Predictor Variables	R	R^2	ΔR	F	B	T	P
Step 1	0.55	0.30	0.28	20.31	-	-	-
Sex					0.01	0.09	>0.05
Marital Status					0.26	4.23**	<0.01
Education Qualification					-0.23	-3.58**	<0.01
Age					0.24	-3.20**	<0.01
Occupation					0.26	4.07**	<0.01
Step 2	0.99	0.99	0.99	1882.29	-	-	-
Depression							
Life Event					-0.04	-2.33*	<0.05
Family Relationship					-0.38	-17.23**	<0.01
Perceived Coping Skill					1.10	66.05	<0.01
					-0.25	-14.01	<0.01

Note: **P<0.01 (2 tailed) *P< 0.05 (2-tailed) N = 246

From the table 4.2, step 1 indicated that sex had no significant influence suicidal ideation (B = 0.04, p>0.05). However, marital status had a significant influence on suicidal ideation (B = 1.26, p<0.01), educational qualification had a significant influence on suicidal ideation (B = -0.62, p < 0.01). In similar vein, age had a significant influence on suicidal ideation (B = -1.04, p < 0.01) and also occupation had a significant relationship on suicidal ideation (B = 0.67, p < 0.01). Thus, from the table also there was a significant joint influence of demographic variables on suicidal ideation [F 5, 240)=20.312, p<0.01].

4.2.1 Test of hypothesis 2

The results in table 2 above showed in step 2, that depression significantly predicted suicide ideation (ß = -0.04; t = -2.33; p < 0.05). Therefore, hypotheses 2 which state that depression will significantly predict suicide ideation was confirmed and therefore accepted.

4.2.2 Test of hypothesis 3

Similarly, the results in table 2 above showed in step 2, that life event significantly predicted suicide ideation (B = -0.38; t = -17.23; p < 0.01). Therefore, hypotheses 3 which state that life event will significantly predict suicide ideation was confirmed and therefore accepted.

4.2.3 Test of hypothesis 4

To add with, the results in table 2 above showed in step 2, that family relation significantly predicted suicide ideation (B = 1.10; t = 66.05; p < 0.01). Therefore, hypotheses 4 which state that family relation will significantly predict suicide ideation was confirmed and therefore accepted.

4.2.4 Test of hypothesis 5

Furthermore, the results in table 2 above showed in step 2, that perceived coping skill significantly predicted suicide ideation (B = -0.25; t = -14.01; p<0.01). Therefore, hypotheses 5 which state that perceived coping skill will significantly predict suicide ideation was confirmed and therefore accepted.

4.2.5 Test of hypothesis 6

Lastly, the results in table 2 above showed in step 2, on the joint contribution of all the independent variables to the prediction of suicide ideation, the results indicated that all the independent variables when pulled together yield a multiple R of 0.99 and R2 of 0.99 (F (1,236) = 1882.29; p < 0.01). This indicates that all the independent variables contributed 99% of the variance in suicide ideation. Meanwhile, other variables not considered in this study therefore accounts for 1%. Therefore hypothesis 6 which stated that, depression, life event, family relationship and perceived coping skill will jointly predict suicide ideation was confirmed and therefore accepted.

5 Summary, Conclusion and Recommendation

5.1 Summary

This present study examine the influence of depression, family relationships, stressful life events and coping skills on suicidal ideation among Correctional Center inmates in Nigeria Prisons. Six hypotheses were formulated and tested.

Multiple correlations was used to test hypothesis 1 to know the relationship that exist among the studied variables: sex, marital status, education qualification, age, occupation, depression, life event, family relationship, perceived coping skill and suicide Ideation. The result showed that age had a significant relationship with suicidal ideation; which was supported by the research of Overholser (2003) who found that the type of life-events that are related to suicidal behaviors vary with age. Religion also had a significant relationship with suicidal ideation supported by the work of Stack & Lester (1991) who submitted that there is a strong effect of religious commitment on suicidal ideation. Marital status also had a significant relationship with suicidal ideation which corroborate with the work of Friedrich, Reams, & Jacob (1982) who found out in their research that suicidal ideation was correlates with family characteristics.

Hypothesis 2 which stated that depression will significantly predict suicidal ideation was confirmed. This explains that depression increase the level of suicidal ideation among Correctional Center inmates. Therefore hypothesis 2 was accepted. The result of the study is in line with the findings of Mazza, et al. (2005), Reynolds (1998) and Cukrowicz (2011). Mazza et al. (2005) who submitted that depression and hopelessness had direct influence on suicidal behaviors among Correctional Center inmates. However, Reynolds (1998) found that only 40% of those with suicidal ideation were classified as depressed by having a score of 16 or higher on the Beck Depression Inventory. Thus Cukrowicz (2011) found that although the greatest elevation in suicidal ideation occurred at the highest level of depressive symptoms, significant suicidal ideation was also experience by Correctional Center inmates with mild and moderate levels of depression.

Hypothesis 3 which states that life stressful event will significantly predict suicidal ideation was confirmed. Result of the study showed that stressful live events increase the level of suicidal ideation among Correctional Center inmate. Therefore hypothesis 3 was accepted. The results is in line with the findings of Lester, (1991); Liebling, (1995); Power & Spencer, (1987); Wool & Dooley, (1987). They reported in their findings that attempted suicide has been found to be associated with a large array of recent life events and a large array of life events during childhood and later life. However, this study is also in line with the findings of Arensman et al., (1999); Yang & Clum, (1996). They found that a number of recent life events (i.e., occurring 6- 12 months prior to the suicide attempt), such as loss of a family member or friend, parental addiction, recent domestic or family problems and parental inpatient psychiatric treatment, have also been found to be related to attempted suicide. In similar vein, Esposito & Clum, 2003; Grover et al., 2009; Horwitz et al., 2011; Johnson et al., 2002; Overholser,

2003; Yang & Clum, 2000) research also support the result of this findings. They found that pervasive risk factor that is increasingly found to be associated with suicidal ideation is perceived stress.

Hypothesis 4 which stated that perceived coping skills will significantly predict suicidal ideation was confirmed. Result indicated that the coping skills of Correctional Center inmates reduce the level of suicidal ideation. Therefore, hypothesis 4 was accepted. The study agrees with the findings of Britton et al. (2008) who discovered that survival and coping beliefs, fear of suicide, and moral objections were negatively associated with the presence of suicide ideation among depressed individuals. However, the result also confirmed the findings of Compas, et al. (2001) and Clarke (2006). They submitted that active forms of coping such as problem solving and support seeking can have beneficial effects in promoting mental health and reducing adjustment problems, but mostly in response to controllable stressors.

Hypothesis 5 which stated that family relationship will significantly predict suicidal ideation was confirmed. This explains that family relationship reduces the level of suicidal ideation among Correctional Center inmates. Therefore, hypothesis 5 was accepted. Result supports the findings of Cassimjee & Pillay, (2000); Aspalan, (2003); Engelbrecht & Van Vuuren, (2000); Evans et al. (2004); Ittel, et al. (2010). They found that environmental stressors such as parental divorce, death of a parent, interpersonal conflict between parents and siblings, pre-existing family psychiatric conditions and suicidal behaviour in the family context can all lead to an increased sense of insecurity and a risk for suicidal behaviour.

Hypothesis 6 which stated that depression, life stressful events, family relationship and coping skills will have a joint significant prediction on suicidal ideation was confirmed. This implies that depression, life stressful events, family relationships and coping skills all predicted suicidal ideation among Correctional Center inmates. Therefore, hypothesis 6 was accepted.

5.2 Conclusion

Conclusively, the study shows a numbers of finding which can be verified in other similar studies. It can be concluded that there is a joint predictive influence of family relationship, stressful life event, depression and coping skills on suicidal ideation among Correctional Center inmates. The high prevalence of suicide risk factors among prisoner populations complicates the task of identifying which prisoners are most at risk of attempting suicide.

5.3 Recommendation

The Nigerian Correctional Center Service should as a matter of importance make it mandatory for inmates to be subjected to periodical assessments of their psychological functioning by the psychological personnel in the Correctional Center service in other to be able to identify those at risk early enough to be helped by psychological interventions; Correctional Center warders should also be trained to identify symptoms of depression, suicidal behaviours etc. in individuals who tend towards suicide tendencies; Correctional Center inmates must also be encouraged to make use of more adaptive coping strategies to manage stressful life events, depression and coping skills. Appropriate coping strategies can be learned as methods for managing stressful life events, and inappropriate strategies perhaps unlearned.

5.4 Implication of the Study

One implication of the present findings is that different emotion-focused coping strategies should be examined separately by researchers, as suggested by Carver et al. (1989), rather than as a unitary construct. It appears that not all cognitive coping strategies are equal (e.g., positive reinterpretation and growth and mental disengagement) and the simplistic distinction between problem- and emotion-focused coping is not adequate. This distinction between diverse emotion focused coping strategies may be especially important for older adults for whom many times there is nothing that can be done to actually change the circumstances of some types of problems (e.g., death of a spouse, loss of a physical ability such as eyesight). In many cases, changing how one thinks about a problem may be the only option that would possibly lead to reduced stress and increased psychological well-being.

Although the sample was a nonclinical one, if further research extends these findings to clinical populations, there could be important implications for the assessment and treatment of Correctional Center

inmates who are at some risk for suicide. Because coping styles, stressful life event, depression and reasons for living are potentially modifiable, clinicians might consider attempts to bolster or enhance these cognitive deterrents to suicide as part of general suicide prevention efforts. Certainly, a full assessment of coping styles and reasons for living should be part of a thorough assessment of suicidal risk among Correctional Center inmates. It may be useful for therapeutic interventions that are designed to reduce or prevent suicidal behavior in Correctional Center inmates to target coping abilities that are related to protective factors against suicide. In contrast to the findings of previous research, which clearly indicate that problem-focused coping is adaptive but the effectiveness of emotion-focused coping is uncertain, this study suggests emotion-focused coping strategies are also adaptive and may be more relevant to the risk factors for and protective factors against suicidal ideation at least in the present sample of Correctional Center inmates. Future research should test the extent to which interventions that strengthen coping skills and reasons for living reduce suicidal ideation and suicidal behaviors among Correctional Center inmates in a prospective design.

5.5 Limitations of the Study

This study has certain limitations which should be taken into account in future studies. It was not originally designed for presenting comparative data, nor is it a longitudinal study, which would provide a richer perspective of the results. Likewise, although the statistical analysis were adequate at descriptive level, additional elements are required to use more robust procedures, which in turn would allow to reach more solid conclusions. Therefore, further studies are needed to provide a better understanding of suicide.

The study found that prisoners expressing suicidal ideation, parental incarceration was associated with having made a suicide attempt, but depressive symptoms and self-harm were not. Further work is required to determine particular patterns of risk factors that heighten the likelihood of a suicide attempt. Prospective studies encompassing entire prisoner populations would assist in more clearly delineating associations between risk factors for suicide, and suicide attempt, among prisoners.

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