


## Suicide Notes: An Analysis Using TGSP Framework

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**Abstract:** *Suicide notes can help to understand suicidal behavior. The present study deals with the analysis of suicide notes using the Thematic Guide to Suicide Prevention (TGSP) developed by Leenaars. The study applied TGSP to the 40 suicide notes collected from the Greater Mumbai region (2005-2015). The results show the existence of protocol clusters in collected suicide notes. All clusters were evident in suicide notes. Further, the notes were classified as per age groups to find out whether different age groups exhibit different psychological reasons for committing suicide. The results could not be replicated fully to show different psychological reasons for different age groups. The present study dealt with limited data from 40 suicide notes. The large dataset could have given more statistically satisfying results.*

**Keywords:** Protocol Clusters, Psychological Reasons, Suicide Notes, TGSP

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### 1. Introduction

National Health Profile India published a report in 2018. According to this report, 33.37% of people who committed suicide were between the ages of 30 and 45. Suicide puts a huge burden on individuals, communities and society considering emotional, financial and healthcare costs. Suicide has been defined in various ways. Erwin Ringel (Austria): Suicide is the intentional tendency to take one's own life (Leenaars, 2004).

According to Shneidman, "Currently in the Western world, suicide is a conscious act of self-induced annihilation, best understood as a multidimensional malaise in a needful individual who defines an issue for which suicide is perceived as the best solution" (Shneidman, 1985, p. 203)

Suicide notes are important documents for analyzing the motive behind suicidal behavior. It may help the reader to peep inside the mind of the note writer. After a suicide, a motive behind it is searched. Suicide notes are personal, unsolicited communication just a few minutes before death. The analysis of suicide notes tries to understand the suicidal behavior and the reason behind the act. The first official study of suicide notes was carried out by Shneidman & Farberow in 1957. Suicide notes analysis has been criticized for being person centric as it won't help in understanding suicidal behavior as a group or social fact.

To understand the suicidal mind, suicide notes can provide a window to find out what was going on inside the deceased at the time of suicide. These notes can act as data to test emotions at the time of death. These are personal documents. Research has proved that a suicidal person gives hints and indications about the intent.

The Thematic Guide for Suicide Prediction (TGSP) has been developed by (Leenaars, 1988a, 1992b). The structure of this guide is based on decades of research on suicide notes, identifying suicide as a human condition with significant psychological inconsistency. TGSP is a measure applied to written or spoken communication to categorize thematic dimensions. It is a guide to find out about suicidal ideation. There are eight parameters: unbearable psychological pain; cognitive constriction; indirect expressions; inability to adjust; ego; interpersonal relations; rejection-aggression; and identification-egression. This guide can be used for an evaluation of written communication. The qualitative analysis would help to find suicidal ideation.

TGSP has 35 protocol sentences describing psychological characteristics believed to be related to suicide. These sentences are assembled into eight clusters; they form the basis for the TGSP and are employed in the study. TGSP is not a predictive means, instead it allows one to peep into the minds of suicide victims. The TGSP is

classified into two sections: intrapsychic and interpersonal clusters. According to Leenaars, suicidal behavior is an effect of intrapsychic aspects and how people relate to their situation.

The intrapsychic section deals with themes related to intolerable psychological pain- it stops tension and provides relief from intolerable psychological pain. Certain factors are humiliation, feelings of inadequacy, emotional deprivation, becoming hopelessly dependent and feeling of boxed in. Suicide seems the urgent solution to the problems. Cognitive constriction considers trauma, overpowering emotions and grief-focused thoughts. The indirect expressions exhibit contradictory feelings and aggression turns inside. The suicide victim's inability to adjust is seen as a person who thinks himself/herself too weak to overcome problems and seems paralyzed by pain. Ego exhibits an inability to develop any attachment or love, and suicide seems like self-punishment.

The interpersonal classification analyses present interpersonal relations and problems created due to these relationships. The interpersonal frustration reaches a traumatic level, and these strained relationships constantly keep him/her frustrated. Rejection-aggression is seen as the victim experiences some traumatic events such as loss or rejection. This makes him/her turn the aggression towards himself/herself. Aggression can be observed through self-destructiveness. The person is not ready to accept loss and wants to get relief from the unbearable pain through

## 2. Methods

In total, 40 suicide notes were collected from Greater Mumbai session courts from 2005-2015. The judgment copies of section 306 of the Indian penal code are uploaded by each session court. It gives clues about the presence of suicide notes in a particular case. Such cases were noted down, and an application was filed with an affidavit for each case separately in these respective courts. The court issued photocopies of suicide notes. The notes are anonymized to assure privacy. The affidavit was submitted in court to hide the victim's identity in the research work. The research is purely to study the content of the suicide notes. The collected suicide notes are classified into different classes considering aspects like age, gender, education, marital status, occupation and addressee of the suicide victim. The suicide notes vary in length from a few lines to thirteen pages. The Thematic Guide for Suicide Prediction has been considered for analysis.

An attempt has been made to verify if the protocol statements in TGSP correspond to the content of the suicide notes. The statements indicate possible content. TGSP is applied to each note. Based on observable comparisons, judgments have been made. The 40 suicide notes were rated for the presence of protocol statements in the Thematic Guide to Suicide Prediction (TGSP). All suicide notes have been rated by the author. Leenaars (1989) identified the age classification as -young adulthood (18 -25 years), middle-aged adulthood (26 -55 years) and late adulthood (56 years and above). The research work used the same age classification. Moreover, the research tried to find out whether suicide notes from different age groups show different psychological reasons for committing suicide.

**TGSP Protocol Statements:** Leenaars (Leenaars, 1988, 1989; O'Connor & Leenaars, 2004) projected a thematic model that could be used for theoretical analysis and identification of suicide. There are two sections of TGSP: intrapsychic and interpersonal clusters. The intrapsychic cluster deals with unbearable psychological pain, cognitive constriction, the use of indirect expressions, a person's inability to adjust and his/her ego. The interpersonal cluster focuses on interpersonal relations, aggression due to some kind of rejection and escape from the trapped condition. The following concepts will help to understand suicide as there are protocol statements in each pattern. These protocol statements can be considered as testable hypotheses.

### Intrapsychic:

- Unbearable Psychological Pain - suicide helps to relieve unbearable psychological pain. The suicidal person undergoes traumatic psychological pain, and death seems only relief from that pain. The other contributing factors could be an incurable disease, the threat of senility, fear of becoming hopelessly dependent, feelings

of inadequacy and humiliation. They see suicide as a solution to all problems. In the middle of heightened emotions, victims feel boxed in, helpless and hopeless.

- **Cognitive Constriction-** The suicidal person's emotions overpower and logical thinking is restrained. In a cognitive state of mind, the person experiences fixed thinking and tunnel vision. The suicidal mind is in a fixed mental condition as the constriction suppresses the person's logic and emotions.
- **Indirect Expressions -** The struggle between survival and unbearable pain is seen. The person is full of mixed, contradictory emotions. Aggression turns inward and submission is obvious. There can be more reasons for suicide than the suicidal person is thinking of at that time.
- **Inability to Adjust -** The research has proved that about 90% of people who commit suicide have problems with adjustment. Emotional and mental disorders are related to suicide. The suicide victim considers him/herself too weak to overcome personal difficulties and, therefore, rejects everything, wanting to escape painful life events. There is no justification for living on.
- **Ego -** Ego with its different forms contributes to suicide. Suicidal people show difficulty in developing constructive tendencies like attachment and affection. The person's ego is weakened by traumatic incidents of life. Thoughts/ideas are not integrated, and such people are vulnerable to suicide.

### **Interpersonal:**

- **VI Interpersonal Relations -** Suicidal people have difficulty in forming relationships. They see no positive development to improve these relationships. They feel defeated by unresolved problems in interpersonal relations. Unsatisfied psychological needs are linked to suicidal risk. Interpersonal relations can be frustrating and distressing. The interpersonal problems keep the person frustrated and under stress.
- **VII Rejection–Aggression-** A suicidal person is hurt by any traumatic event in life. The anger directed towards someone else turns towards self. Self-destructiveness appears to be an act of aggression, attack, and/or revenge towards someone else who has hurt or injured him/her.
- **VIII Identification–Egression-** The suicidal person indirectly refers to some loss and is not ready to accept the loss. He/she wishes to escape from life. This escape will relieve them from the psychological pain.

The present research wants to find out the psychological difference across ages in suicide notes using the TGSP model. Research has proved that the causes of suicide in young people are different from the old ones. Bauer, Leenaars, Berman, Jobes, Dixon, and Bibb (1997) showed that older people communicate more issues like the inability to cope, losing control, etc. than younger people in suicide notes.

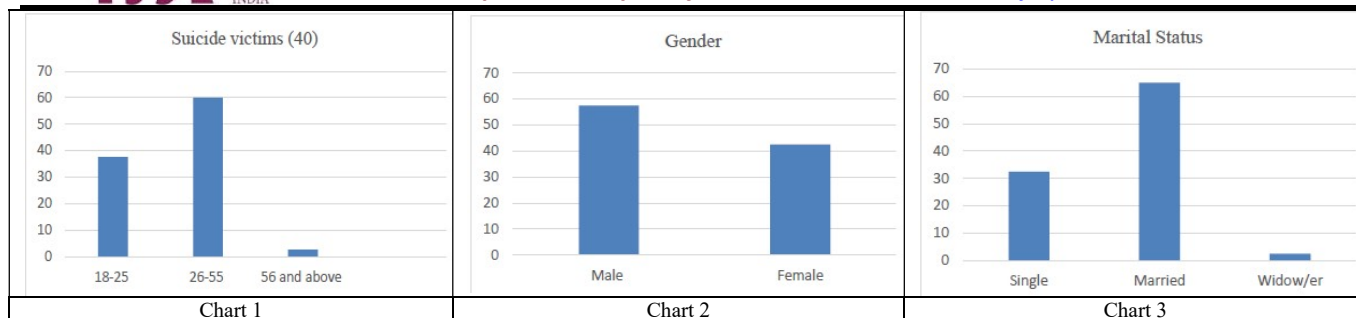
### **3. Results**

The collected suicide notes are classified considering age, gender, marital status, occupation, addressee and reason. The classification helps to analyze the data collected in a structured manner. The noted observations are as follows.

**Age:** To categorize the suicide victims as per age, three categories of age - young adulthood (18-25 years), middle-aged adulthood (26-55 years) and late adulthood (56 years and above) were created. The maximum number is observed in the middle-aged adulthood age group, 26-55 years. 24 people committed suicide in this group, making the highest percentage of 60 %. In the first category of the age group, 18-25 years, 15 people committed suicide, making it 37.50%. In the last category of the age group, 56 years and above, 1 person committed suicide, making it 2.50%.

Age Group-years	18-25	26-55	56 and above
Suicide victims (40)	37.5	60	2.5

**Table-1**



**Gender:** In the Greater Mumbai area, 57.50% of males committed suicide while 42.50% of females committed suicide.

Total=40	Gender
Male	57.50
Female	42.50

Table 2

**Marital Status:** The marital status of the suicide victim is categorized as single, married, divorced, and widow/er. 32.50% of single members committed suicide. In the married category, 65% of people committed suicide. One widower committed suicide, making a percentage 2.5% for the category.

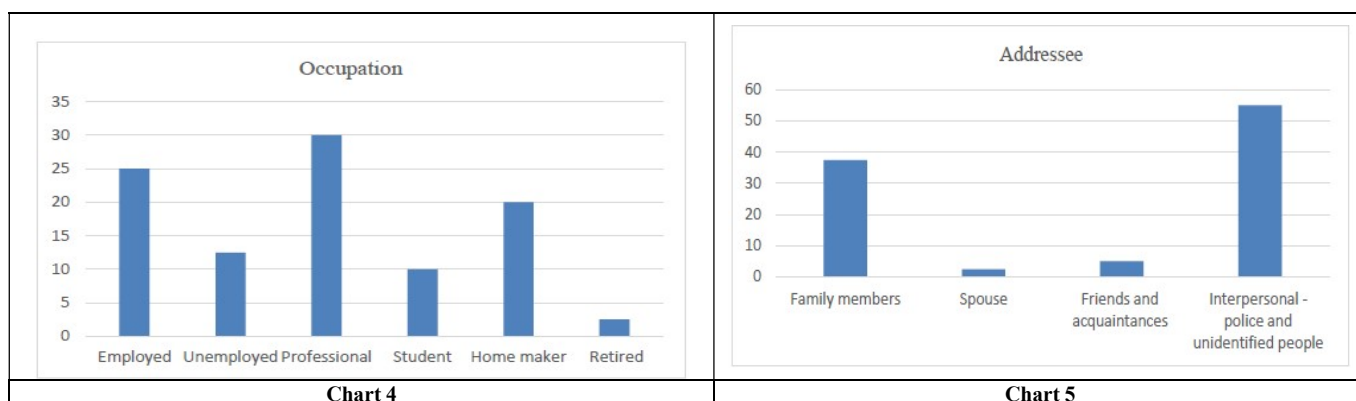
Total-40	Marital Status
Single	32.50
Married	65
Widow/er	2.5

Table 3

**Occupation:** To classify suicide victims as per their occupation, six categories were made: employed, unemployed, professional, students, homemaker, and retired people. 25% of employed people committed suicide. 12.50% of unemployed people committed suicide. 30% of professionals committed suicide. 10% of students committed suicide. 20% of homemakers committed suicide. 2.5% of retired people committed suicide.

Total-40	Occupation
Employed	25
Unemployed	12.50
Professional	30
Students	10
Homemaker	20
Retired	2.5

Table 4



**Addressee:** The collected suicide notes are addressed to specific individuals. Based on this information, four categories: family members, spouses, friends and acquaintances and interpersonal including police and unidentified people for the addressee are made. 37.5% of people addressed notes to family members. 2.5 % of people addressed notes to spouses. 5% of the notes were addressed to friends and acquaintances. 55% of the notes were addressed to police or unidentified members.

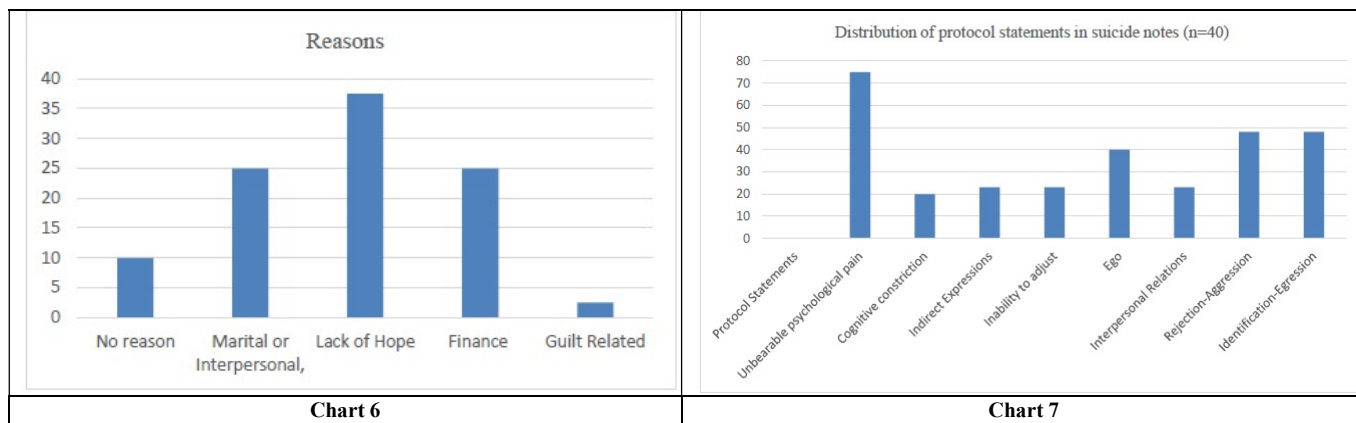
Total-40	Addressee
Family members	37.5
Spouse	2.5
Friends and acquaintances	5
Interpersonal - police and unidentified people	55

**Table 5**

**Reason:** To identify the reason for the suicide, five categories were made: no reason, marital or interpersonal, lack of hope, finance and guilt related. 10% of the notes did not mention any reason. 25% of suicide notes mentioned marital/interpersonal reasons. 37.50% of suicide notes cited a lack of hope. 25% of people committed suicide due to financial problems. 2.5% of suicide notes had guilt-related issues.

Total-40	Reasons
No reason	10
Marital or Interpersonal,	25
Lack of Hope	37.50
Finance	25
Guilt Related	2.5

**Table 6**



**Distribution of protocol sentences in suicide notes:** There was adequate evidence for the protocol clusters in suicide notes. Unbearable psychological pain was present in 75 percent of suicide notes. Other aspects like cognitive constriction, indirect expressions, inability to adjust, ego, interpersonal relations, rejection-aggression, and identification-egression were observed in collected suicide notes.

Protocol Statements	Percentage
Unbearable psychological pain	75
Cognitive constriction	20
Indirect Expressions	23
Inability to adjust	23
Ego	40
Interpersonal Relations	23
Rejection-Aggression	48
Identification-Egression	48

**Table 7**



**Distribution of Protocol Statements over age:** The study used Leenaars taxonomy to decide age categories. Accordingly, three categories were made- young adulthood (18-25 yrs), middle adulthood (26-55 yrs) and late adulthood (56 yrs and above). There were 15 people in young adulthood, 24 in middle adulthood and 1 in late adulthood. There were no statistically notable differences observed among the eight protocol clusters over the age groups.

Protocol statements	18-25yrs	26-55 yrs	56 yrs and above
Unbearable psychological pain	80	75	
Cognitive constriction	13.33	25	
Indirect Expression	20	25	
Inability to adjust	20	25	
Ego	40	45.83	
Interpersonal Relations	20	25	
Rejection-Aggression	40	41.66	100
Identification-Egression	60	41.66	100

Table 8

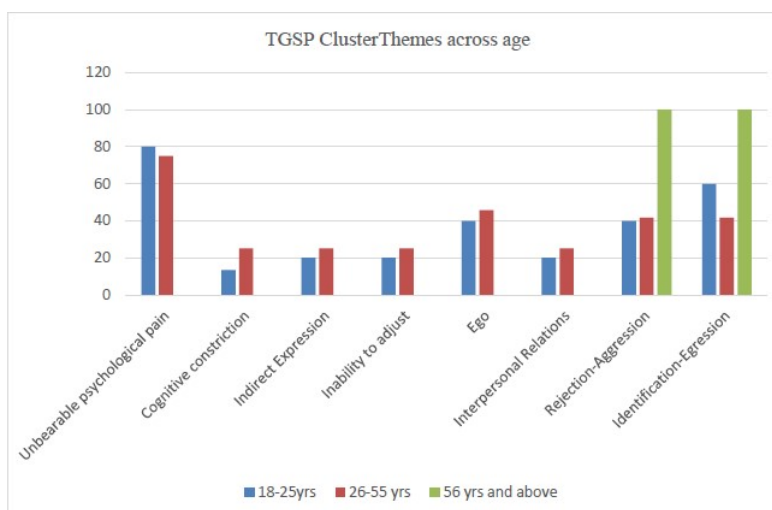


Chart 8

## 4. Discussion

There was sufficient evidence of protocol clusters in suicide notes. 75% of suicide notes showed unbearable psychological pain. Death is associated with difficulties with direct communication and unbearable psychological pain (Kelly B, 2013). Cognitive constriction was observed frequently, along with the use of indirect expressions and the inability to adjust. Thoughts related to ego cluster were seen in 40% of suicide notes. Problems related to interpersonal relations were mentioned recurrently in suicide notes. Protocol statements became evident related to rejection -aggression in 48% of suicide notes. Ideas related to identification- egression were observed in 48% of suicide notes.

It was assumed that suicide notes from different age groups would show different psychological reasons for committing suicide. It was not fully supported. Leenaars (1989) showed that young adults usually describe more interpersonal problems compared to older adults. This finding was not exactly simulated in the present research. There was evidence that 20% of younger adults wrote about interpersonal problems in suicide notes compared to 25% of middle-aged adults. If the sample data size had been large, the results would have reached statistical significance. The data comparison between young adults (18-25 years) and other adults (26+ years) proved that young adults' suicides showed more psychological pain. There were significant similarities throughout adulthood. The issues shown in the Ego cluster were supposed to be more in young adults, but a statistically significant difference was not observed. The factors related to the cluster rejection aggression were observed in

both young adults and middle-aged adults whereas older adults have shown it the most. The components associated with the cluster identification-egression were observed more in young adults compared to middle-aged adults, but older adults have shown the maximum of it.

## 5. Conclusion

The content analysis of suicide notes using TGSP protocol statements reveals the existence of protocol clusters in suicide notes. All clusters were evident in suicide notes. The classification of suicide notes as per age group could not replicate fully the different psychological reasons for committing suicide. The present result is based on a single study including 40 suicide notes.

The larger dataset could provide more statistically satisfying results. TGSP protocol statements are useful as they provide psychological profiles of people who died by suicide. It can also help in identifying people at the risk of suicide. Suicide can be prevented with research-based practices.

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**Conflict of Interest:** The author declares "No conflict of interest."

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