



**Citation:** Jamil, U., Iqbal, S. A., Altaf, E., Afzal, B., & Batool, S. (2026). Socioeconomic and Demographic Predictors of Suicidal Risk and Interpersonal Needs: A Cross-Sectional Study of University Students in Pakistan. *Regional Lens*, 5(1), 101-111.  
<https://doi.org/10.55737/rl.v5i1.26169>

Pages: 101-111 ▶ DOI: 10.55737/rl.v5i1.26169 ▶ Volume 5 ▶ Issue 1 (Jan-Feb 2026) ▶ © The Author(s) 2026

## Socioeconomic and Demographic Predictors of Suicidal Risk and Interpersonal Needs: A Cross-Sectional Study of University Students in Pakistan.

Uroosa Jamil<sup>1</sup> Syed Azeem Iqbal<sup>2</sup> Eiman Altaf<sup>3</sup> Bakhtawar Afzal<sup>4</sup> Samaira Batool<sup>5</sup>

**Corresponding Author:** Uroosa Jamil (Email: [uroosaj7@gmail.com](mailto:uroosaj7@gmail.com))

**Abstract:** Within the context of the Interpersonal Theory of Suicide, this look at checked out socioeconomic and demographic predictors of interpersonal desires and suicide hazard amongst Pakistani College students. A pattern of 522 college students changed into decided on from universities legal with the aid of using the Higher Education Commission the use of a cross-sectional survey technique. Along with demographic and socioeconomic data, members crammed out questionnaires measuring emotions of hopelessness, thwarted belongingness, perceived burdensomeness, and suicide thoughts. The findings confirmed that interpersonal misery and pessimism had been drastically better amongst scholars from lower-profits houses and people whose fathers had much less training. Perceived burdensomeness, thwarted belongingness, hopelessness, and suicidal ideation all confirmed sturdy fine correlations, with hopelessness displaying the very best correlation with suicidal hazard, in line with correlation studies. The theoretical speculation that socioeconomic inequality will increase suicide susceptibility thru interpersonal and cognitive pathways is supported with the aid of using those data. The look at emphasizes how institutional injustices and person mental problems have an effect on college students' suicidal hazard. Early detection of high-hazard college students can be more advantageous with the aid of using inclusive of socioeconomic evaluation into campus intellectual fitness services. The outcomes spotlight the need for socially aware suicide prevention strategies in South Asian better training settings and guide the cross-cultural validation of the Interpersonal Theory of Suicide.

**Key Words:** Suicidal Risk, Interpersonal Needs, Perceived Burdenomeness, Socioeconomic Status, University Students, Pakistan

### Introduction

Suicide and thinking about suicide are some of the biggest health problems in the world. The World Health Organization (WHO) says that over 720,000 people die from suicide every year. Most of these deaths happen in countries that aren't very rich or are only somewhat rich. Because many college students have mental health issues, it's important to find ways to catch problems early and prevent them. This is shown by data from the WHO's World Mental Health International College Student Initiative (WMH-ICS), which looks at mental health worldwide.

There is also an emerging body of results showing that whereas suicidal risk might be evenly distributed among the students' population, it is actually affected by a list of sociodemographic and socioeconomic variables, which also encompasses the educational level of the parents, income levels of families, financial problems, and gender differences related to the experience of support and stress. The presence of chronic stressors, as well as the experience of few coping options, adds more weight to the symptoms associated with depression, and thus, suicidal ideation. This could be related to the kinds of socioeconomic deprivations that some people experience in their lives. Various instances have

<sup>1</sup> M.Phil. Psychology, Muslim Youth University, Islamabad, Pakistan. Email: [uroosaj7@gmail.com](mailto:uroosaj7@gmail.com)

<sup>2</sup> BS in Psychology, International Islamic university Islamabad, Pakistan. Email: [azeemiqbalsyed@gmail.com](mailto:azeemiqbalsyed@gmail.com)

<sup>3</sup> BS in Psychology, National University of Modern Languages, Islamabad, Pakistan. Email: [eimanaltaf169@gmail.com](mailto:eimanaltaf169@gmail.com)

<sup>4</sup> BS in Psychology, National University of Modern Languages, Islamabad, Pakistan. Email: [Bakhtawar2003afzal@gmail.com](mailto:Bakhtawar2003afzal@gmail.com)

<sup>5</sup> BS in psychology, Fatima Jinnah Women College, Rawalpindi, Punjab, Pakistan. Email: [sumi.ali1214@gmail.com](mailto:sumi.ali1214@gmail.com)

revealed scenarios where persons with low socioeconomic status experience a boost in their suicidal ideations, which results in the appearance of psychological problems among adolescent and youth populations as a whole. Demographic variables might play a role simultaneously as those associated with predicting stressors as well as those who can be used as an indicator for the experience of differential pressure from social, academic, and financial sources.

According to this framework, interpersonal distress is especially troubling because it reflects the social meaning of the self: whether one feels connected, valued, and capable of contributing—psychological experiences that can be influenced by demographic position (e.g., gender roles, educational trajectories) and socioeconomic conditions (e.g., financial dependence, unemployment fears, family expectations).

The Interpersonal Needs Questionnaire (INQ), which has been determined to have strong psychometric support based on various research on the topic, has been produced to measure perceptions of burdensomeness and thwarted belongingness. It can therefore be considered an easy approach for finding interpersonal vulnerability patterns that could influence future chances of the students attaining suicidal thoughts. Such an analysis can be deemed significant for the Pakistani university sector, particularly because of the socioeconomic changes in the location.

In the case of Pakistan, it has increasingly come to be realized that suicidal ideation and behaviors among students may be influenced by a variety of social and psychological factors. However, even from the available theory-driven and mechanism-based studies, one may conclude that the available evidence from studies done in Pakistani populations, along with related literature from the region, clearly points to the fact that suicidal tendencies and ideation may be present among particular groups of students. In the case of Pakistan, although it may be noted that interpersonal constructs of burdensomeness and belongingness and related potential pathways to suicidal ideation have recently been investigated, what may be of crucial importance is that it needs to be understood how the socioeconomic and demographic gradients may relate to the interpersonal constructs.

## **Problem Statement**

University student suicide risk seems to be a new public mental health concern that needs to be addressed, particularly in low- and middle-income countries. Unquestionably, there are insufficient support networks for people with mental health problems when socioeconomic conditions shift. University students deal with social pressures of comparison, financial demands of support, academic pressures of rivalry, and the worry of landing a stable career after graduation. However, university students are not equally burdened with these academic demands. Rather, socioeconomic and demographic disparities moderate them.

International studies have proven that mental soreness and suicide ideation are connected to demographic hazard and socioeconomic deprivation. Nonetheless, a huge part of the paintings now in guide is focused on Western populations and perspectives suicidal hazard as a wonderful medical category. The intersection of mental notions that positioned someone at hazard for suicide ideation in South Asian college settings with structural determinants including own circle of relatives income, parental schooling levels, and demographic hazard has now no longer obtained a great deal empirical attention.

One perspective that clarifies how socially deprived conditions would possibly bring about interpersonal discomfort is the Interpersonal Theory of Suicide. Nevertheless, no studies have been determined that mixes the interpersonal idea of suicide behaviors in Pakistani college students with socioeconomic elements. It is uncertain how societal variables have an effect on interpersonal elements within the absence of such integrative investigations.

University students in Pakistan deal with competing educational environments, family obligations, and unstable finances, all of which could make the already severe issue of inequality among people worse. However, the problem of suicide risks may also cause people to experience significant amounts of stress. It is important to recognize that there is a dearth of research utilizing an integrative or unifying perspective on the interrelated relationship between socioeconomic determinants, demographic characteristics, interpersonal requirements, and suicidal risks. The creation of particular mental health screening and intervention techniques is impeded as a result. Research on the connection

between socioeconomic and demographic characteristics and interpersonal needs and suicidal risks among Pakistani university students is therefore crucial.

### Research Questions

1. Do socioeconomic factors predict suicidal risk among university students?
2. Do demographic factors predict suicidal risk?
3. Do socioeconomic and demographic factors predict interpersonal needs?
4. Do interpersonal needs predict suicidal risk?

### Hypotheses

**H1:** Socioeconomic factors will significantly predict suicidal risk.

**H2:** Demographic factors will significantly predict suicidal risk.

**H3:** Socioeconomic and demographic factors will significantly predict interpersonal needs.

**H4:** Interpersonal needs will significantly predict suicidal risk.

### Theoretical Framework

The Interpersonal Theory of Suicide (IPTS), one of the most important current theories for comprehending the phenomenon of suicidal thoughts, serves as the conceptual foundation for the current investigation. As first defined by Joiner (2005) and then elaborated by Van Orden et al. (2010), the IPTS can be summed up as the presence of a co-occurring combination of two interpersonal cues for suicide: perceived burdensomeness and thwarted belongingness. Perceived burdensomeness is the term used to describe someone who has suicide thoughts who feels that they are a burden to others and that the world would be a better place without them. A widespread feeling of loneliness and social alienation are signs of unfulfilled belongingness.

According to IPTS, this illness goes against basic human needs for social value and belonging. A person's psychological pain is made worse by their perception of being burdened and alone. This increases the likelihood of suicidal thoughts. The IPTS states that suicidal thoughts are not random nor arbitrary. Interpersonal distress leads to these predicted and expected processes. The relationship between suicidal thoughts and burdensomeness in a range of populations has been shown by important research on this subject (Chu et al., 2017; Van Orden et al., 2010).

Importantly, the IPTS provides an opportunity to include other external socioeconomic factors. It has been shown that demographic marginalization and socioeconomic hardship can affect social support, financial security, and personal social worth, all of which can affect the probability of interpersonal distress. Therefore, it can be shown that structural adversity may have an effect on proximal psychological pathways to suicidal risk. The current study extends the IPTS as a multilevel theory by incorporating the predictor factors and establishing a connection between interpersonal risk and suicidal ideation and social inequality and demographic marginalization.

### Conceptual Framework

The relationship between the Interpersonal Theory of Suicide and other socioeconomic and demographic characteristics, which eventually influence the pattern of the link with suicide risk among college students, has also been considered in the conceptual framework of the current study. Suicide research studies also emphasize the importance of social circumstances, which are critical in shaping an individual's psychological state and the potential course of suicidal behavior (WHO, 2021). Socioeconomic factors including low family income and parental education, which are linked to high levels of stress and poor coping skills, influence young adults' psychological states with relation to comfort and suicidal thoughts (Auerbach et al., 2016). Likewise, there may be a connection between emotion-regulating behavior and other demographic characteristics including age and gender.

The proximal psychological mechanism by which social injustice may manifest in the feeling of suicidal desire within this social context can be investigated using the Interpersonal Theory of Suicide (IPT). According to this perspective,



suicidal thoughts occur when an individual feels burdened or does not experience social connections or a sense of belonging, which correspond to the social value and belonging necessary for the human experience. These interpersonal forms of experiencing social connections are perceived burdensomeness and thwarted belongingness (Van Orden, 2010).

There is proof that interpersonal needs act as a mediator in the relationship between societal pressures and suicidality. According to systematic reviews and sample studies with larger participant groups, suicidal thoughts are consistently associated with burdensomeness and thwarted belongingness across a variety of demographics (Chu et al., 2017). Most importantly, socioeconomic difficulties can make people feel more burdened by increasing perceived dependency and financial stress, while demographic marginalization can make people feel more excluded from society.

The Interpersonal Needs Questionnaire (INQ), which measures interpersonal components of suicide vulnerability, is based on these dimensions and has excellent psychometric validity (Van Orden et al., 2012). By combining socioeconomic components with the IPTS constructs, a multilevel framework is created in which the proximal interpersonal states are linked to the distal variables of socioeconomic and demographic traits, which are then linked to suicide risk. This is in line with contemporary mental health models that highlight the interaction between structural and psychological processes.

Therefore, this study takes into account socioeconomic and demographic characteristics as distal predictors, interpersonal requirements as mediating factors, and suicidal risk as an end variable. This integrated model will be used to investigate whether social disparity raises the risk of suicide by reducing interpersonal belonging through social value, particularly in a university setting.

## Method

### Research Design

In order to investigate the demographic characteristics of interpersonal needs and socioeconomic predictors of suicide risk among Pakistani university students, the current study employs the quantitative cross-section survey research method. The prediction model of correlational research was used to examine the association between a number of indicators, including economic level and other demographic traits, including students' age and gender, educational programs, and interpersonal needs.

### Participants

522 participants from various universities across Pakistan who were enrolled in institutions approved by the Higher Education Commission (HEC) made up the sample. Convenience sampling of online surveys sent over the internet was used to gather sample participants. Undergraduate and graduate students from a range of socioeconomic backgrounds participated.

The age range of the participants was late youth to early adulthood. Current enrollment in a university program and voluntary, informed permission were prerequisites for inclusion. Incomplete answers were not included in the analysis.

## Measures

### Interpersonal Needs Questionnaire (INQ)

The INQ, one of the most popular tools based on the Interpersonal Theory of Suicide, was created to assess interpersonal requirements. Perceived burdensomeness and thwarted belongingness are the two main constructs measured by the INQ. A Likert-type scale is used to grade the 15 items in the questionnaire; higher scores indicate more severe interpersonal discomfort.

Therefore, the perceived burdensomeness subscale assesses emotions of social alienation and lack of meaningful interpersonal interactions, whereas the thwarted belongingness subscale represents beliefs that one is a burden on

others. The INQ has been widely utilized in suicide-related research involving student and clinical populations, and it has shown very strong construct validity.

In the present study, internal consistency coefficients were acceptable for perceived burdensomeness ( $\alpha = .78$ ) and moderate for thwarted belongingness ( $\alpha = .54$ ).

### **Beck Hopelessness Scale (BHS)**

The Beck Hopelessness Scale, which was created to measure hopelessness. The scale measures three unique aspects of hopelessness, which are pessimism, lack of drive, and negative expectations (Beck et al., 1974). There are 10 questions that are measured using a 5-point rating scale. Higher ratings point to the presence of more dejection. The scale possessed strong internal reliability ( $\alpha = .86$ ) in the current study. It has been used in most suicide research.

### **Frequency of Suicidal Ideation Inventory (FSII)**

The Frequency of Suicidal Ideation Inventory (FSII), a 5-item assessment of the frequency and severity of suicidal thoughts, was utilized to gather information on the participants' suicidal risk. Five items that quantify the degree of suicidal ideation are used to measure the frequency of suicidal thoughts. A 5-point Likert-type scale, ranging from never to always, is used to answer each question. With an  $\alpha$  of .78, the instrument's dependability for this investigation was deemed adequate.

### **Procedure**

The appropriate academic authorities gave their clearance for this study's conduct prior to data collection. The study complied with the ethical standards that regulate research involving human subjects. All respondents gave their informed agreement before to accessing the survey, and participation in the study was entirely optional.

Initially, the pilot phase was carried out to determine the instrument's preliminary reliability and comprehension of the questionnaire's phrasing. The method of gathering data began after the comprehension of the scoring or the instrument's dependability was established. Data collection: An anonymous online survey made with Google Forms was used to collect data. Students enrolled in any HEC-approved university in Pakistan were informed of this through university networks and social media platforms, such as WhatsApp.

Informed consent had been obtained before the survey was used. It contained all the information about the purpose of the study, security about privacy, participation is voluntary and this freedom to withdraw at any time during the study without any penalty. Interpersonal needs and hopelessness and suicidal ideation were assessed using standardized psychological questionnaires in the representative sample of the consenting study subjects.

The participant spent ten to fifteen minutes filling out the questionnaire. Anonymity was ensured by not collecting personal information from the participant. Additionally, at the end of the questionnaire, the participant received a brief overview of the resources available for mental health aid due to the delicate nature of the suicide-related questions. The data set was initially examined for completeness, and replies that contained inaccurate or partial information were removed. There were 522 participants in the data.

### **Results**

#### **Table 1**

*Study Participants Demographics Characteristics (N = 522)*

| Characteristics | Frequency | Percentage |
|-----------------|-----------|------------|
| Age             |           |            |
| $\leq 20$       | 201       | 38.5       |
| $\geq 21$       | 299       | 57.3       |
| Missing         | 22        | 4.2        |



| Characteristics   | Frequency | Percentage |
|-------------------|-----------|------------|
| Gender            |           |            |
| Female            | 259       | 49.6       |
| Male              | 252       | 48.3       |
| Missing           | 11        | 2.1        |
| Marital Status    |           |            |
| Single            | 467       | 89.5       |
| Married           | 40        | 7.7        |
| Missing           | 15        | 2.9        |
| Monthly Income    |           |            |
| < Rs.50,000       | 190       | 36.4       |
| ≥ Rs.50,000       | 314       | 60.2       |
| Missing           | 18        | 3.4        |
| Father Education  |           |            |
| ≤ 12 Years        | 281       | 53.8       |
| ≥ 14 Years        | 223       | 42.7       |
| Missing           | 18        | 3.4        |
| Mother Education  |           |            |
| ≤ 12 Years        | 394       | 75.5       |
| ≥ 14 Years        | 106       | 20.3       |
| Missing           | 22        | 4.2        |
| Education Program |           |            |
| Undergraduate     | 437       | 83.7       |
| Graduate          | 59        | 11.3       |
| Missing           | 26        | 5.0        |

The demographic details of the study participants (N=522) are shown in table 1. Age groups > 21 and < 20 have 299 frequencies and 57.3% and 20.1 and 38.5%, respectively. (Missing 4.2 m and 22 f). Compared to male, which had 252 (f) and 48.3(%), which had 11 (f) and 2.1(%) missing, more women participated in the study, with 259 (f) and 49.6(%). Married people made up 40 (f) and 7.7 (%) of the study participants, whereas single people made up 467 (f) and 89.5 percent. (1 missed having 2.9% and 15f). Compared to < RS. 50,000, which has 190 (f) and 36.4 (%), monthly income above RS. 50,000 has larger (314) and 60.2 (%). Some, with 18(f) and 3.4(%), were absent. Fathers with less than 12 years of education had higher frequency (281) and percentage (53.8) than fathers with more than 14 years of education (223) and percentage (42.7). (Frequency of missing education level: 18; percentage: 3.4). Mothers with less than 12 years of education had higher rates (349) and percentages (75.5) than mothers with more than 14 years of education (106) and (4.2). (Missing data 4.2% and 22f). The percentage (83.7) and frequency (437) of undergrads are higher than those of graduates (59) and (11.3), respectively. (Data 26f and 5.0%) are missing.

**Table 2***Descriptive Statistics and Reliability Coefficients of Instruments Used in the Study (N = 522)*

| Measure | Items | M     | SD   | $\alpha$ | Skewness | Kurtosis | Range  |           |
|---------|-------|-------|------|----------|----------|----------|--------|-----------|
|         |       |       |      |          |          |          | Actual | Potential |
| INQ     | 15    |       |      |          |          |          |        |           |
| BUR     | 6     | 17.20 | 7.38 | .78      | 0.63     | 0.23     | 6-42   | 6-42      |
| BEL     | 9     | 34.29 | 7.83 | .54      | -0.05    | 0.34     | 9-59   | 9-63      |
| IHS     | 10    | 21.00 | 7.95 | .86      | 0.62     | 0.14     | 10-50  | 10-50     |
| FSII    | 5     | 10.34 | 4.39 | .78      | 0.70     | 0.07     | 5-25   | 5-25      |

*Note:* INQ = Interpersonal Needs Questionnaire; BUR = Perceived Burdenomeness; BEL = Thwarted Belongingness; IHS = Interpersonal Hopelessness Scale; FSII = Frequency of Suicidal Ideation Inventory.

Table 2 shows descriptive statistics and reliability coefficients and instruments in the main study. Reliabilities coefficient ranged from .78 to .54. Thwarted belonging this had the lowest reliability coefficient (.54) among all instruments. Departure from normality is not problematic according to rule of thumb [Skewness] >3.0 and [Kurtosis] >10.0.

**Table 3**

*Comparison of Family Monthly Income on Study Variables (N = 522)*

| Measure | < Rs.50,000 |       |      | ≥ Rs.50,000 |       |      | t    | df     | p    | 95% CI |      | Cohen's<br><i>d</i> |
|---------|-------------|-------|------|-------------|-------|------|------|--------|------|--------|------|---------------------|
|         | n           | M     | SD   | n           | M     | SD   |      |        |      | LL     | UL   |                     |
| BUR     | 186         | 18.20 | 7.40 | 311         | 16.66 | 7.34 | 2.26 | 495.00 | .024 | 0.20   | 2.88 | 0.21                |
| BEL     | 187         | 35.70 | 7.44 | 307         | 33.55 | 7.92 | 2.99 | 492.00 | .003 | 0.74   | 3.56 | 0.28                |
| IHS     | 184         | 22.45 | 7.70 | 305         | 20.22 | 8.00 | 3.03 | 487.00 | .003 | 0.78   | 3.67 | 0.28                |
| FSII    | 185         | 10.69 | 4.51 | 308         | 10.12 | 4.32 | 1.38 | 491.00 | .169 | -0.24  | 1.37 | 0.13                |

*Note:* BUR = Perceived Burdenomeness; BEL = Thwarted Belongingness; IHS = Interpersonal Hopelessness Scale; FSII = Frequency of Suicidal Ideation Inventory.

Table 3 shows the result of t-test comparing family monthly income (<RS. 50,000: ≥ RS. 50,000) on study variables. There were significant differences on Thwarted Belongingness for monthly income. < RS. 50,000 (M= 35.70, SD= 7.44) and monthly income: ≥RS. 50,000 (M= 33.55, SD= 7.92), t(492.0), p= .003. The results suggest that monthly income: < RS. 50,000 reported high Thwarted Belongingness then monthly income: ≥ RS. 50,000 leading to small effect size (Cohen's *d*= 0.28).

**Table 4**

*Comparison of Father Education Level on Study Variables (N = 522)*

| Measure | ≤ 12 Years |       |      | ≥ 14 Years |       |      | t    | df     | p    | 95% CI |      | Cohen's<br><i>d</i> |
|---------|------------|-------|------|------------|-------|------|------|--------|------|--------|------|---------------------|
|         | n          | M     | SD   | n          | M     | SD   |      |        |      | LL     | UL   |                     |
| BUR     | 277        | 17.63 | 7.47 | 221        | 16.55 | 7.36 | 1.61 | 496.00 | .107 | -0.24  | 2.40 | 0.15                |
| BEL     | 275        | 34.92 | 7.67 | 220        | 33.43 | 7.90 | 2.11 | 493.00 | .035 | 0.10   | 2.87 | 0.19                |
| IHS     | 271        | 22.13 | 8.03 | 219        | 19.52 | 7.65 | 3.65 | 488.00 | .000 | 1.20   | 4.01 | 0.33                |
| FSII    | 273        | 10.92 | 4.52 | 220        | 9.51  | 4.08 | 3.61 | 491.00 | .000 | 0.64   | 2.19 | 0.33                |

*Note:* BUR = Perceived Burdenomeness; BEL = Thwarted Belongingness; IHS = Interpersonal Hopelessness Scale; FSII = Frequency of Suicidal Ideation Inventory.

Table 4 shows the result of t-test comparing father education level (≤ 12 years: ≥ 14 years) on study variables. There were significant differences in Thwarted Belongingness for education level: (≤ 12 years (M=34.92, SD= 7.90), t= 493.00, p= .035. The results suggest that education level: ≤ 12 years reported high Thwarted Belongingness then education level: ≥ 14 years leading to small effect size Cohen's *d*= 0.19).

**Table 5**

*Correlations among Scores on Study Variables (N = 522)*

| Variable | 1     | 2     | 3     | 4  |
|----------|-------|-------|-------|----|
| 1. BUR   | --    |       |       |    |
| 2. BEL   | .29** | --    |       |    |
| 3. IHS   | .63** | .38** | --    |    |
| 4. FSII  | .49** | .27** | .61** | -- |

*Note:* BUR = Perceived Burdenomeness; BEL = Thwarted Belongingness; IHS = Interpersonal Hopelessness Scale; FSII = Frequency of Suicidal Ideation Inventory.

\**p* < .05, \*\**p* < .01.

Table 5 shows correlation among scores on study variables according to our Hypothesis the relationship between perceived Burdensomeness and Thwarted Belongingness is positively significant ( $r = .29$ )  $p < .05$ ,  $p < .01$ . Similarly, our hypothesis hopelessness and perceived Burdensomeness was positively significant ( $r = .63$ )  $p < .05$ ,  $p < .01$ . In our hypothesis the relationship between suicidal ideation and perceived Burdensomeness is positively significant ( $r = .49$ )  $p < .05$ ,  $p < .01$ . Similarly, correlation among scores on study variables Hopelessness have significant relationship with perceived Burdensomeness and Thwarted Belongingness ( $r = .38$ )  $p < .05$ ,  $p < .01$ . Similarly, correlation on study variable suicidal ideation significant relationship perceived Burdensomeness and Thwarted Belongingness ( $r = .27$ )  $p < .05$ ,  $p < .01$ . According to correlation among scores on study variables suicidal ideation has significant relationship with perceived burdensomeness, Thwarted Belongingness and hopelessness ( $r = .61$ )  $p < .05$ ,  $p < .01$ . Therefore, correlation among score on study variable ( $N = 522$ ) have Great relationship with all variables (BUR, BEL, HIS, FSII) because the actual value of  $p < .05$ ,  $p < .01$ .

## Discussion

This study examined demographic and socioeconomic variables that may be indicators of interpersonal needs and suicide risk in Pakistani university students. In order to validate the corresponding integrated theoretical model, this research was essential. The results clearly indicate that socioeconomic disparities are predictors of suicide risk and have an effect on interpersonal distress and hopelessness. By demonstrating the connection between social and psychological aspects for South Asian university students, this study broadens the scope of previous studies on suicide.

As anticipated, students from lower-income families also reported higher levels of perceived burdensomeness, thwarted belongingness, and hopelessness. Additional research on university students around the world that shows a correlation between socioeconomic status and stress, financial difficulties, and perceived social exclusion lends more credence to this conclusion. It is possible to associate these factors with greater levels of dependency and marginalization, which in turn lead to the circumstances described by the Interpersonal Theory of Suicide. The results shown here show that, in addition to financial consequences, financial status also has psychological effects.

The parents' educational attainment was no different. Suicidal thoughts and despondency increased when the father's educational attainment was low. This may be explained by the fact that a student's impression of their potential for success in the future may be influenced by their educational level, which may have an impact on opportunities and resources. Among all the variables examined, hopelessness was discovered to be a significant mediator between suicidal conduct and socioeconomic disadvantage. It has long been known that one of the most potent cognitive elements linked to suicide thoughts is this concept. Its importance to the demographic under study here cannot be overstated.

The findings of the correlation study only reinforced the significance of interpersonal need. Perceived burdensomeness and thwarted belongingness were found to be significantly associated with hopelessness and suicidal thoughts. These findings provided complete support for the INTERPERSONAL THEORY OF SUICIDE. Nonetheless, the greatest correlation coefficient was found between despondency and suicide ideation. This could suggest that hopelessness about the future increases the impact of interpersonal need. In this way, interpersonal demands may be the most problematic when they are believed to be unchangeable.

Crucially, it was discovered that socioeconomic traits had a bigger impact than demographic factors like gender and age differences. These results could support the idea that structural inequalities may be more closely associated with student suicidal risk than demographic factors. Although age and gender were found to be major factors in terms of student suicidal risk in previous studies, the new findings emphasize the importance of economic conditions in terms of demographic risk variables.

The results of this study have important practical implications, especially for university mental health programs. In student mental health services, it is as important to look for financial stressors as emotional or mental ones when developing a suicide prevention strategy.

Underlying psychological pressures that may not always show up in traditional counseling settings in Pakistani universities can be created by a combination of financial, academic, and family responsibilities.

Additionally, the study provides empirical evidence in favor of the IPTS's cross-cultural generality. Because it determines the degree to which the burdensomeness, thwarted belongingness, and pessimism experienced by the sample are theoretically coherent, the current study supports the applicability of the IPTS in non-Western nations. Therefore, the research's contribution is the necessity of creating an IPT of suicide that takes into account global social settings, paying particular attention to the effect of socioeconomic stress.

There are a few restrictions to be aware of. First of all, because the study is cross-sectional, no causal conclusions can be drawn from it. The correlations between socioeconomic stress, interpersonal need, and suicidal thoughts are positive; nevertheless, longitudinal study is needed to examine the temporal sequence of these interactions. Second, because the study relied on respondent accounts, responder bias may have affected the data. Lastly, since university students made up the study's sample, it is unclear whether the results will hold true for non-student samples.

Despite these drawbacks, the current study significantly advances our knowledge of suicidal risk in South Asian institutions. Generally speaking, it highlights the complexity of suicide risk and the interplay between psychological and social factors.

### **Implications for Future Research**

The study's findings provide several intriguing avenues for more research. For instance, longitudinal research could help us better understand how socioeconomic and interpersonal factors combine dynamically to cause suicide ideation. Longitudinal research could determine whether socioeconomic and interpersonal difficulties predict pessimism and suicidal thoughts, or whether these relationships vary with developmental stage.

Future research should look into combining self-report measures with a cross-sectional study design and mixed-method approaches. Interviews can offer a deeper knowledge of how students evaluate burdensomeness in specific cultural situations, which makes this especially true. It might be helpful in clarifying the meanings of parental duties, academic expectations, and societal obligations in specific cultural contexts. Another fascinating area of TAS research is the need to look into protective factors that mitigate the impact of stressors linked to socioeconomic level. Social support, hope, coping strategies, and community involvement are some of the factors that may change the relationship between SI and ILDS issues. But as the start of this essay makes clear, these issues remain untapped research areas that require further investigation.

Future research must also consider the impact of institutional and policy-level initiatives on lowering the risk of suicide. These could include research on the effects of peer mentorship programs, financial aid programs, on-campus counseling facilities, and mental health awareness campaigns in order to convert psychological findings into useful educational policy.

Last but not least, cross-cultural comparative study is required to determine whether the correlations seen work similarly in different South Asian regions and other LMIC. This would help to improve the theoretical models of suicide by situating them within broader social and cultural frameworks.

### **Limitations**

It is necessary to note some of the study's limitations. First of all, its cross-sectional design restricts its ability to make inferences about causes and effects. The study found a positive correlation between interpersonal needs, suicide risk, and socioeconomic disadvantage, but it was unable to identify the direction of this interaction. It needs to be followed by a long-term study that looks into how interpersonal risk develops and whether it can predict suicidal thoughts.

Second, self-report measures were the only ones used in the study. Despite the use of standardized measures, self-report data may contain underreporting or social desirability biases, particularly when it comes to the shame



associated with suicide in South Asian cultures. Future research ought to think about employing multi-method techniques, such as behavioral measurements or clinical interviews.

Third, the sample cannot be said to be representative or generalizable to a working population, therapeutic, or to children below university student status, owing to the homogeneous representation of university students only. A rather specific segment in developmental, educational, and possibly socioeconomic studies is university students. The need for generalizability might be addressed by targeting a wider population than university students.

Fourth, because culture may influence how people report feeling socially connected, the thwarted belongingness subscale's overall low reliability may indicate that the tool needs to be further improved in a South Asian setting. To further develop the culturally relevant assessment of interpersonal requirements, more study is necessary. Despite its shortcomings, this study provides valuable insights into how interpersonal needs, socioeconomic inequality, and suicidal risk interact in a Pakistani institution.

## Conclusion

The findings of this present research revealed that, among Pakistani university students, IPP and suicidal thoughts are significantly correlated with low socioeconomic status and parent educational backgrounds. Higher levels of burden, belongingness, and hopelessness were also reported by students whose families were of lower educational and socioeconomic backgrounds. All three are highly correlated with suicidal thoughts. These results, which show how structural inequalities can impact psychological distress through an interpersonal process, support the ICTS.

Significantly, it is noted from this particular piece of research that suicide behavior amongst students at a university is acknowledged as a clinical and social construct with resultant impacts on their educational and economic living environment. Given this specific research, it is observed that addressing juvenile suicide risk factors requires a comprehensive strategy.

By integrating suicidal risk within a multilevel approach that connects interpersonal psychology and structural variables, the current study can be used to develop cross-cultural theories of suicide and apply findings in the context of South Asian higher education.

Beyond individual therapy, prevention measures should aim for holistic approaches that address the psychological resilience, financial burden, and social support of the student body.

## References

Auerbach, R. P., Mortier, P., Bruffaerts, R., Alonso, J., Benjet, C., Cuijpers, P. ... Kessler, R. C. (2016). WHO World Mental Health Surveys International College Student Project: Prevalence and distribution of mental disorders. *Journal of Abnormal Psychology, 127*(7), 623–638.

Beck, A. T., Weissman, A., Lester, D., & Trexler, L. (1974). The measurement of pessimism: The hopelessness scale. *Journal of Consulting and Clinical Psychology, 42*(6), 861–865. <https://doi.org/10.1037/h0037562>

Chu, C., Buchman-Schmitt, J. M., Stanley, I. H., Hom, M. A., Tucker, R. P., Hagan, C. R. ... Joiner, T. E. (2017). The interpersonal theory of suicide: A systematic review and meta-analysis. *Psychological Bulletin, 143*(12), 1313–1345. <https://doi.org/10.1037/bul0000123>

Joiner, T. (2005). *Why people die by suicide*. Harvard University Press.

Van Orden, K. A., Cukrowicz, K. C., Witte, T. K., & Joiner, T. E. (2012). Construct validity of the Interpersonal Needs Questionnaire. *Psychological Assessment, 24*(1), 197–215.

Van Orden, K. A., Witte, T. K., Cukrowicz, K. C., Braithwaite, S. R., Selby, E. A., & Joiner, T. E. (2010). The interpersonal theory of suicide. *Psychological Review, 117*(2), 575–600. <https://doi.org/10.1037/a0018697>

World Health Organization. (2021). *Suicide worldwide in 2019*. WHO.