

The Self-blame Scale: Development, Psychometric Properties and its Relationship with Self-criticism and Self-reassurance

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Self-Blame can be a source of pain that is insistent and remorseless. This emotion prevents us from being in the present, positively accepting ourselves and being compassionate towards ourselves. Extreme cases of being self-critical or blaming oneself has led to cases of suicide across all stages of life. The present study aimed to develop and standardize a tool on the construct 'Self-blame' in the Indian population, and study its relationship with Self-criticism and Self-reassurance. The sample consisted of 216 adult participants who belonged to the age group of 20 – 40 years (Mage = 23.95, SD = 4.51). Online forms were circulated among the population which included brief summary of the study, a consent form, the scale developed by the researcher on Self- Blame, and the "Forms of self-criticizing / attacking and self-reassuring scale - Short form" (Sommers-Spijkerman et al., 2018). Gender difference revealed a significant difference for Self-reassurance only. Exploratory factor analysis revealed 22 items for 'The Self-blame Scale' which has a Cronbach alpha of 0.891. Discriminant validity between Self-blame and Self-reassurance revealed a significant negative correlation. Since the tool is statistically reliable and valid, it could be used for research and clinical purposes for an adult Indian population. Norms for 'The Self-blame Scale' were also developed.

Keywords: Self-blame, Self-criticism, Self-reassurance, Adults College Students

India is home to 1.4 billion people which accounts for about 40% of the adult population (United Nations, 2019). According to Yen and Siegler (2003) those with greater tendencies towards Self-blame during early adulthood are more likely to commit suicide, when compared to the general population. On the other hand, having a reassuring and a compassionate attitude towards ourselves leads to better wellbeing and is negatively linked to psychopathology (Gilbert, 2010). It has also been reported that Self-blame can act as a coping mechanism (Sheerin et al., 2018). However, research has also reported that maladaptive Self-blame has ill effects on individuals and is maybe adaptive for rape victims or people with severe trauma (Janoff-Bulman, 1979). "Self-blame is the attribution that the consequences one experiences are a direct result of one's actions or character" (Hooker, 2013).

Behaviour and character Self-blame

Janoff-Bulman (1979) proposed two types of Self-blame which are behaviour oriented

and character oriented. Behaviour self-blame represents a more adaptive and a control oriented response while character self-blame represents a maladaptive and self-deprecating response. The primary distinguishing factor between behaviour and character self-blame lies in the nature of focus. Behavioural self-blame focuses on the individual's behaviour, where the focus of the blame is for having behaved in or failing to act in a situation. Character related self-blame focuses on one's character, which is where the focus lies on how the individuals perceive their overall self. In character self-blame individuals find it easier to blame themselves for the kind of people they are, thereby finding fault in their character.

Wiener et al. (1971) found that when an individual attributes failure to oneself that is attributes the failure internally, the blame points to their lack of ability or effort. The internal attribution of poor ability leads the individual to believe that there is very little that they can do in terms of behavior in order to control the

situation and succeed. This ability is stable and to an extent unchangeable (character self-blame). When it comes to internally attributing one's efforts (behaviour self-blame), this leads an individual to believe that as long as he/she puts in their effort, gives their best and tries harder, they will be able to control the situation which can lead to a positive outcome. Characterological self-blame is related to ability attribution, and behavioural self-blame similarly to effort attribution.

A further distinction between the 2 types of self-blame for lies in the time orientation of the attributor. It is proposed that in blaming one's behaviour, that is, when an individual is engaging in Behaviour self-blame, one is concerned with the future, particularly trying to avoid a future negative outcome. This concern for avoiding is similar with the control-motivated behavior. The future-oriented concerns of individual who engage in Behavioural self-blame need not focus exclusively on their ability to avoid a negative outcome for which the individual is blaming himself/herself; rather, behavioural self-blame may promote the individual's belief in their ability to avoid negative outcomes and their ability to bring about positive outcomes in the future. When it comes to character self-blame, the individual is concerned about control in the past, particularly their deservingness for past outcomes. From this is can be concluded that behavioural self-blame is similar to perceived avoidability, whereas characterological self-blame and feelings of deservingness are similar (Janoff-Bulman, 1979).

Effect of Self-blame on mental health

Mentally healthy individuals experience less Self-blame when compared to individuals with mental health issues (Pulcu et al., 2013). Self stigma which includes a dimension of Self-blame was found to have been positively associated with individuals experiencing psychological distress and who had reported a history of mental illness (Tucker et al., 2013). Numerous studies have reported that Self-blame has higher adverse effects on individuals in vulnerable conditions (Himmelstein et al. 2018; Mantilla & Birgegard, 2015). Dorresteign et al., (2019) explored the psychological wellbeing of military

officials and reported that Self-blame was related to symptoms of anxiety, depression and interpersonal sensitivity. Similarly, Babcock and DePrince (2014) explored Self-blame among survivors of intimate partner abuse. Results indicated that a history of childhood betrayal trauma predicted the degree of self-blame for the Intimate partner abuse incident. However, Sheerin et al. (2018) in their paper reported that Self-blame was associated with decreased likelihood of Post Traumatic Stress Disorder when examined for a combat trauma population indicating that Self-blame can act as a coping mechanism.

Need for the study

In India, there is a scarcity of well standardized tools that are applicable for the Indian population. Tools that are presently being used to study the Indian Population were mainly developed and standardized by the western countries. Past research work done in this area involves constructing Self Blame tools specific to the research or population being studied. Example: sexual revictimization (Katz et al, 2010), major health issues (Friedman et al., 2010), bullying (Schacter & Juvonen, 2015), etc. The present study would aim to construct, develop and standardize a tool on Self Blame.

Method

Sample

Participants belonging between the age group of 20 to 40 years were included in the study. The mean age of the sample was 23.95 (SD = 4.51). From a total of 221 responses, data from 216 participants were included since the remaining participants belonged outside the age range. The sample consisted of 107 males and 109 females. The sample size was found to be adequate to perform factor analysis after performing the Kaiser-Meyer-Olkin test for sampling adequacy which resulted in a value greater than 0.8.

Tools used

Forms of self-criticizing / attacking and self-reassuring scale - Short form (Sommers-Spijkerman et al., 2018): This scale consists of 14 items which measures factors of Self-criticism (hated self and inadequate self) and Self-

reassurance. The scale was originally developed by Gilbert et al., (2004) which consisted of 22 items. The short form of the scale had been standardised and validated for the Dutch population by Spijkerman et al. (2018). The form has a 5 point Likert scale ranging from 0 (Not at all like me) to 4 (Extremely like me). The items are divided into 3 dimensions and are summed to get a total score under each dimension. The present study had a Cronbach alpha of 0.84 for Self-criticism and 0.7 for Self-reassurance.

Development of 'The Self-blame Scale': For the present study, the researcher defined Self-blame as "characterized by attributing the consequences of any stressful event to self". The researcher extensively read through numerous literatures and finalized Janoff-Bulman's types of Self-blame (1979) as the foundation for the content development of the items. Initially the scale consisted of 30 items. The participants filled the scale after reading the following instructions 'We all have had experiences where we tend to blame ourselves when something bad happens, even when the event or situation was out of our control. We tend to believe that we brought this upon ourselves. Imagine yourself in a similar situation. Below are a number of statements which talk about your possible thoughts, feelings or behavior that you might experience during the situation.'. Items with weak factor loadings were discarded. After numerous changes and alterations, the scale finally consisted of 22 items with no sub dimensions. The final set of items were administered to the participants and the scale was developed. The scale consisted of a 5 point Likert scale. The scale consisted of 'strongly agree' (5), 'Agree' (4), 'Sometimes agree/disagree' (3), 'Disagree' (2), 'Strongly disagree' (1). 'The Self-blame Scale' is a situational scale since it presents the participants with a hypothetical scenario and further asks them to rate and identify their most appropriate response to the situation. Since the scale has been administered and validated for the age group of 20-40 years, the scale will be applicable only to an adult population. The scale was analysed through exploratory factor analysis which led to the formulation of the scale with a lesser number of items.

Procedure

The researcher first constructed a tool on Self-blame which consisted of 30 items which was to be rated on a 5 point Likert scale ranging from strongly agree (5) to strongly disagree (1). Further the researcher created an online google form was divided into 4 sections. The first section consisted of the consent form which briefly spoke introduced the researcher, information relating to the research, inclusion criteria, and about confidentiality. The second section asked the participants to share basic information about themselves such as their name/initials, age, and gender. Age was used to ensure the inclusion criteria of the study and gender was used for analysis. The third section included the 30 items of Self-blame scale and the fourth section included the 14 items from the "Forms of Self-criticizing / attacking and Self-reassuring scale - Short form" (Sommers-Spijkerman et al., 2018). The inclusion criteria for the study were participants of the Indian nationality between age group of 20-40 years. Participants who were easily accessible via internet were sent the google form. Individuals who gave their consent to use their data for the academic purposes were included in the analysis. Hard copies of the form were also printed and distributed to the participants. Data obtained was coded for the ease of analyses and to maintain confidentiality. Statistical Package of Social Sciences (SPSS - 25) was used to conduct the statistical analyses.

Data analysis

For standardization of the tool, the researcher used exploratory factor analysis. To better understand the structure of the items, varimax rotational method was applied. To measure reliability, Cronbach alpha was calculated. To measure validity, discriminant validity was used. For this, Pearson correlation was calculated to examine the relationship between Self-blame and Self-reassurance. Gender differences were also examined using independent sample t test. Norms for 'The Self-blame Scale' were formed by using standard deviation.

Results

Gender differences were also tested for all the variables as shown in table 1. Independent

sample t tests revealed that there exists a significant difference between males and females in terms of Self-reassurance only. While both males and females are equally likely to engage in Self-blame and Self-criticism.

Table 1: Gender difference for Self-blame, Self-criticism and Self-reassurance

Variables	Mean		t value
	Males (n ₁ = 107)	Female (n ₂ = 109)	
Self-blame	57.3	58.68	0.621
Self-criticism	16.00	14.94	2.315*
Self-reassurance	14.10	14.72	0.585

Note. * denotes $p < 0.05$, n₁ = number of males, n₂ = Number of females

Principal Component Analysis (PCA):

PCA was computed for 30 items to see the factor loadings, eigen values and the percentage of variance of the variables. The communalities of the items ranged from 0.504 to 0.711. 6 factors were extracted based upon eigen values greater than 1. To measure whether these 6 factors should be retained, parallel analysis was conducted. Parallel analysis is a program which creates a random data set with the same number of observations and the number of variables as the data. Parallel analysis indicated that from the 6 factors, only first 5 should be retained. First 5 factors together explained 64.5% of the variance. To make the factor matrix easier to interpret, initially the data was subjected to Oblimin rotation. The component correlation matrix resulted in correlation values less than

Table 2: Rotated Component Matrix – Varimax Rotational method

Factor	Statement	Factor loading
I	I have blamed myself for doing something wrong	0.746
	I have thought about the bad things that I have done	0.671
	I have felt guilty for my actions	0.661
	I have blamed myself for the outcome of a situation	0.645
	I regret my actions	0.645
	Sometimes I wish I hadn't done that	0.642
II	Sometimes I feel that I am never good enough	0.764
	I feel worthless and powerless	0.755
	I feel like apologizing	0.664
	Sometimes I feel that I am always at fault	0.655
	I don't feel good about myself as a person	0.579
	I have obsessed about my shortcomings	0.513
III	Sometimes I blame myself for the sort of person I am	0.483
	If given a chance, I would change a few things about myself	0.759
	I have made so many mistakes in my life	0.727
IV	If given a chance, I would do a lot of things differently	0.718
	I know I deserve what happened to me in the past	0.797
	I prefer to criticize myself, instead of someone else	0.782
V	I feel like I deserve to fail in life	0.574
	I am the kind of person who attracts trouble	0.717
	Sometimes I feel that I was at the wrong place at the wrong time	0.664
	I feel that bad things happen to me very often	0.656

Note. Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization.

Table 3: Pearman Correlation for Self-blame, Self-criticism and Self-reassurance

	Self-blame	Self-criticism	Self-reassurance
Self-blame	1.000	0.707**	-0.394**
Self-criticism	-	1.000	- 0.492**
Self-reassurance	-	-	1.000

Note. ** denotes $p < 0.01$

0.3 for all factors, therefore varimax rotational method was used. This rotation method resulted in a rotated component matrix as shown in table 2. Factor loadings for the items were greater than 0.483

Table 2 lists the final 22 items which would be used to measure the construct, which is Self-blame. The researcher decided not to have sub dimensions for the scale.

To measure the discriminant validity of the test, correlation analysis was performed between Self-blame and Self-reassurance. Theoretically both the constructs lie on opposite sides of a continuum. Table 3 indicates the Pearson correlation between the two variables. Table 3 also includes the correlation values between Self-blame and Self-criticism. This was performed to examine whether these 2 constructs are positively correlated. Results indicate that Self-blame and Self-reassurance are negatively correlated to each other, indicating that these 2 constructs are highly discriminant of each other. The correlation analysis also indicates that there is a positive relationship between Self-blame and Self-criticism indicating the similarities that exist between the 2 constructs. Even though Self-blame and Self-criticism are not the same construct, they do have similar traits and characteristics. To test the reliability of the items, Cronbach's alpha was calculated.

Table 4: Reliability Statistics – Cronbach Alpha

Number of items	Cronbach's alpha
22	0.891

From table 4 it is seen that the Cronbach alpha for 22 items is 0.891 which indicates that the scale is highly reliable.

Discussion

This study aimed to construct a tool on Self-blame and examine the psychometric properties

of the scale in the Indian adult population. Apart from this it also examined the gender differences for Self-blame, Self-criticism and Self-reassurance.

The Self-blame scale assesses an individual's behaviour, thoughts and feelings, of how they attribute the consequences of a stressful event to themselves. Psychometric properties for the test were performed on a sample of 216 Indian adults from the general population. Principal component analysis was conducted on 30 items. Initial analyses indicated that based on eigen values there were 6 factors, however, based on parallel analysis, only the first 5 factors were retained. These 5 factors were merged to yield a scale of 22 items with no dimensions. The scale was to be rated on a 5 point Likert scale, which are strongly agree (5), agree (4), sometimes agree/disagree (3), disagree (2), and strongly disagree (1). From the results section it can be concluded that the tool constructed on Self-blame is highly reliable and valid. Cronbach alpha for the 19 items was 0.891, which indicates that the test is highly reliable. Discriminant validity between Self-blame and Self-reassurance revealed that these 2 constructs are negatively correlated with each other. The 22 item scale was standardized for the adult population in India. The score would be calculated by summing the responses to yield a global score. None of the items have reverse scoring. Norms were formed on the basis of standard deviation for the entire population. From table 5 it is observed that, individuals who would get a score below 35 engage in very low Self-blame, those between 35 and 51 have low Self-blame, between 52 and 71 are those who fall in the average Self-blame, between 72 and 89 engage in high Self-blame and those above 89 engage in very high self blaming. The minimum score for 'The Self Blame Scale' is 22 and the maximum score is 110.

Table 5: Norms for 'The Self-blame Scale'

Score	Interpretation
Above 89	Very high
72-89	High
52-71	Average
35-51	Low
Below 35	Very low

Psychometric properties of the 22 items were examined by testing its relationship with Self-criticism and Self-reassurance. Discriminant validity revealed that Self-blame and Self-reassurance have a significant negative relationship and Cronbach alpha for the test was 0.891 indicating that the test is both valid and reliable. The gender differences were examined for the variables Self-blame, Self-criticism and Self-reassurance. Results indicated that among the 3 variables significant gender difference was found only for Self-reassurance. Swannell et al. (2012) in their paper reported that there existed a gender difference between males and females in terms of self blaming coping strategies with females having a higher mean score. However, engaging in Self Blame and using it as a coping strategy is quite different, which could explain the difference in the results. Craciun (2013) and, De Souza and Hutz (2016) in their paper also reported a gender difference with females engaging in higher Self-criticism strategies when compared to males. Similarly, Self Criticism as a coping strategy is quite different than Self Criticism as a mechanism. Self-reassurance is said to be a sub dimension of Self-compassion. Yarnell et al. (2015) conducted a meta analysis of gender differences in terms of self compassion. They reported that males had higher self-compassion levels than females and this analysis was applicable to all age groups. Studies found in relation to gender difference for Self-blame and Self-criticism were conducted in the western countries which are individualistic in nature. India being a collectivistic country, individuals are taught to take responsibility for others actions as well. Therefore, the results revealed no gender difference for Self-blame and Self-criticism.

Limitations

It is imperative to acknowledge the limitations of our study to gain an insight into the findings and plan for future research in this area. One of the major limitations of the study is lack of time to collect data from a larger population. The study only included 216 participants, and the participants included English speaking adults with internet access, predominantly residing in urban areas. This sample cannot be considered a representation of the adult population at large since the Mage = 23.95 and the SD = 4.51. Predominantly, the mean age of the population represents the young adult population. The mode of data collection was also restricted to the online mode with an exception of 12 participants from whom the data was collected in person. This acted as a major barrier, preventing the researcher from reaching a larger and a more diverse population. Most of the literature found with respect to the variables were studies conducted predominantly in the western countries on very specific populations such as clinical populations, military officials, veterans, survivors of abuse, emergency services, and chronic illness.

Study implications

It would be suggested that the tool could be further administered to a larger population to get a clearer understanding of its psychometric properties. Correlation analysis indicate that Self-blame and Self-criticism have a significant negative relationship with Self-reassurance. Interventions focusing on Self-reassurance and Self-compassion could be developed and administered to individuals who engage in high Self-blame and Self-criticism coping strategies.

Conclusion

There is lack of standardized and valid assessments in countries such as India. Screening individuals who are more prone to such tendencies may help in reducing the suicide rates in India. These toxic coping strategies not only affect our mental and physical health but also leads to secondary maladaptive emotions such as shame, guilt, criticism, etc. As Indians we are taught as a part of our cultural upbringing to take responsibilities of own actions as well

as others, while simultaneously blaming the individual's character rather than their behavior, for the outcome of the event. By observing those around us, we have built an innate need to be perfect in what we do. As humans we must be aware of the fact that we are not perfect and there will be certain circumstances, situations or events that we will not get it right or would be out of our control.

If as individuals we enter any situation, relationship or moment with the mindset that it is ok to fail, we open doors to new perspectives which offer opportunities for learning, introspection, self-discovery and personal evaluation. More importantly, it allows us to build upon adaptive coping strategies to situations such as Self-Acceptance, Self-Compassion and Self-reassurance. The game of Self-blame is a vicious cycle which will go on for the rest of our lives, unless we become aware of it and consciously chose to stop it.

References

- Babcock, R. L., & DePrince, A. P. (2012). Childhood Betrayal Trauma and Self-blame Appraisals Among Survivors of Intimate Partner Abuse. *Journal of Trauma & Dissociation*, 13(5), 526–538. <https://doi.org/10.1080/15299732.2012.694842>
- Craciun, B. (2013). Coping Strategies, Self-criticism and Gender Factor in Relation to Quality of Life. *Procedia - Social and Behavioural Sciences*, 78, 466–470. <https://doi.org/10.1016/j.sbspro.2013.04.332>
- Dorresteijn, S., Gladwin, T.E., Eekhout, I., Vermetten, E. & Geuze, E (2019). Childhood trauma and the role of self-blame on psychological well-being after deployment in male veterans. *European Journal of Psychotraumatology*, Vol 10. [10.1080/20008198.2018.1558705](https://doi.org/10.1080/20008198.2018.1558705)
- Friedman, L. C., Barber, C. R., Chang, J., Tham, Y. L., Kalidas, M., Rimawi, M. F., Dulay, M. & Elledge, R. (2010). Self-blame, Self-forgiveness, and Spirituality in Breast Cancer Survivors in a Public Sector Setting. *Journal of Cancer Education*, 25(3), 343–348. [10.1007/s13187-010-0048-3](https://doi.org/10.1007/s13187-010-0048-3)
- Gilbert, P., Clarke, M., Hempel, S., Miles, J., & Irons, C. (2004). Criticizing and reassuring oneself: An exploration of forms, styles and reasons in female students. *British Journal of Clinical Psychology*, 43(1), 31–50. [10.1348/014466504772812959](https://doi.org/10.1348/014466504772812959)
- Gilbert, P., McEwan, K., Irons, C., Bhundia, R., Christie, R., Broomhead, C., & Rockliff, H. (2010). Self-harm in a mixed clinical population: The roles of self-criticism, shame, and social rank. *British Journal of Clinical Psychology*, 49, 563–576. [10.1348/014466509X479771](https://doi.org/10.1348/014466509X479771)
- Himmelstein, M. S., Puhl, R. M., & Quinn, D. M. (2018). Weight stigma and health: The mediating role of coping responses. *Health Psychology*, 37(2), 139–147. <https://doi.org/10.1037/hea0000575>
- Hooker S.A. (2013) Self-blame. In: Gellman M.D., Turner J.R. (eds) Encyclopedia of Behavioural Medicine. Springer, New York, NY. https://doi.org/10.1007/978-1-4419-1005-9_1496
- Janoff-Bulman, R. (1979). Characterological versus behavioural self-blame: Inquiries into depression and rape. *Journal of Personality and Social Psychology*, 37(10), 1798–1809. [10.1037/0022-3514.37.10.1798](https://doi.org/10.1037/0022-3514.37.10.1798)
- Katz, J., May, P., Sörensen, S., & Deltosta, J. (2010). Sexual Revictimization During Women's First Year of College: Self-blame and Sexual Refusal Assertiveness as Possible Mechanisms. *Journal of Interpersonal Violence*, 25(11), 2113–2126. [10.1177/0886260509354515](https://doi.org/10.1177/0886260509354515)
- Mantilla, E. F., & Birgegård, A. (2015). The enemy within: the association between self-image and eating disorder symptoms in healthy, non help-seeking and clinical young women. *Journal of Eating Disorders*, 3(1). <https://doi.org/10.1186/s40337-015-0067-x>
- Pulcu, E., Zahn, R., & Elliott, R. (2013). The Role of Self-Blaming Moral Emotions in Major Depression and Their Impact on Social-Economical Decision Making. *Frontiers in Psychology*, 4. [10.3389/fpsyg.2013.00310](https://doi.org/10.3389/fpsyg.2013.00310)
- Sheerin, C. M., Chowdhury, N., Lind, M. J., Kurtz, E. D., Rappaport, L. M., Berenz, E. C., Brown, R., Pickett, T., McDonald, S., Danielson, C. & Amstadter, A. B. (2018). Relation between coping and post trauma cognitions on PTSD in a combat-trauma population. *Military Psychology*, 30(2), 98–107. [10.1080/08995605.2017.1420980](https://doi.org/10.1080/08995605.2017.1420980)
- Sommers-Spijkerman, M., Trompeter, H., Klooster, P. T., Schreurs, K., Gilbert, P., & Bohlmeijer, E. (2018). Development and validation of the forms of Self-Criticizing/Attacking and Self-Reassuring Scale—Short Form. *Psychological Assessment*, 30(6), 729–743. <https://doi.org/10.1037/pas0000514>
- Souza, L. K., & Hutz, C. S. (2016). Self-Compassion in Relation to Self-Esteem, Self-Efficacy and

- Demographical Aspects. *Paidéia (Ribeirão Preto)*, 26(64), 181–188. <https://doi.org/10.1590/1982-43272664201604>
- Swannell, S., Martin, G., Page, A., Hasking, P., Hazell, P., Taylor, A., & Protani, M. (2012). Child maltreatment, subsequent non-suicidal self-injury and the mediating roles of dissociation, alexithymia and self-blame. *Child Abuse & Neglect*, 36(7-8), 572–584. <https://doi.org/10.1016/j.chiabu.2012.05.005>
- Tucker, J. R., Hammer, J. H., Vogel, D. L., Bitman, R. L., Wade, N. G., & Maier, E. J. (2013). Disentangling self-stigma: Are mental illness and help-seeking self-stigmas different? *Journal of Counseling Psychology*, 60(4), 520–531. <https://doi.org/10.1037/a0033555>
- United Nations (2019). World Population Prospectus. Retrieved from <https://population.un.org/wpp/Download/Standard/Population/>
- Weiner, B., Frieze, I., Kukla, A., Reed, L., Rest, S. & Rosenbaum, R., M. (1971). *Perceiving the Causes of Success and Failure*. General Learning Press, New York.
- Yarnell, L. M., Stafford, R. E., Neff, K. D., Reilly, E. D., Knox, M. C., & Mullarkey, M. (2015). Meta-Analysis of Gender Differences in Self-Compassion. *Self and Identity*, 14(5), 499–520. <https://doi.org/10.1080/15298868.2015.1029966>
- Yen, S., & Siegler, I. C. (2003). Self-blame, social introversion, and male suicides: Prospective data from a longitudinal study. *Archives of Suicide Research*, 7(1), 17–27. <https://doi.org/10.1080/13811110301569>

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