Examining the Relations between Hopelessness, Thwarted Interpersonal Needs, and Death Ideation among Older Adults: Does Meaning in Life Matter?
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Introduction
Older adults are at an increased risk of suicide compared to younger age groups (Centers for Disease Control, 2017).

Older adults who report death ideation are similar to older adults who report suicide ideation in terms of risk for suicide (Baca-Garcia et al., 2011).

The interpersonal theory of suicide (Joiner, 2005; Van Orden et al., 2010) posits two key variables are independently related to death ideation:

- Thwarted Belongingness (TB): Indicated by perceived disconnection from others and a lack of reciprocal caring relationships.
- Perceived Burdensomeness (PB): Indicated by feelings of self-hatred and the belief that one’s death is worth more than one’s life.

Hopelessness is significantly associated with death ideation in older adults and is a stronger indicator of suicide risk than depression (Choi et al., 2016; Pinquart, 2002).

The 3-step theory (3ST) posits that connectedness, or one’s perceived meaning or purpose in life, motivates an individual to keep living; therefore, meaning in life may influence the development of death ideation in older adults.

Low meaning in life has been associated with depression, hopelessness, and the loss of the will to live (Hedberg, Gustafson, Alèx, & Brulin, 2010; Pinquart, 2002).

High meaning in life has been associated with decreased suicide ideation and is a strong resilience factor against suicide (Heisel & Flett, 2008; Kleiman, Adams, Kashdan, & Riskind, 2013; Kleiman & Beaver, 2013).

This study aimed to integrate suicide theories and examine the role of meaning in life in the association between theory-based risk factors (e.g., TB, PB, and hopelessness) and death ideation among older adults.

Hypotheses
We hypothesized that meaning in life would moderate the associations between 1) TB and death ideation, 2) PB and death ideation, and 3) hopelessness and death ideation.

Specifically, when meaning in life is low, the associations between TB, PB, and hopelessness and death ideation will be stronger, whereas when meaning in life is high, there will be a weaker association between TB, PB, and hopelessness and death ideation.

Method
Participants
Sample: Adults ages 60 years and older recruited from a primary care setting (N = 243)

Age: M = 72.22 years (SD = 6.70 years)

Gender: 99 Males (40.7%); 144 Females (59.3%)

Race: Caucasians/Whites (90.4%); Hispanics/Latinos (6.6%); African Americans/Blacks (1.6%); Native Americans (0.8%); Asians/Pacific Islanders (0.4%)

Measures
Interpersonal Needs Questionnaire (Van Orden et al., 2012): The INQ is a 15-item self-report assessment of TB and PB with higher scores indicating greater feelings of TB and PB.

Beck Hopelessness Scale (Beck & Steer, 1988). The BHS is a 20-item true/false self-report assessment that measures hopelessness and feelings about the future.

Geriatric Suicide Ideation Scale (Heisel & Flett, 2001). The GSIS is a 31-item self-report assessment of suicide ideation and related factors in older adults. Only the Death Ideation and Meaning in Life subscales were used.

Center for Epidemiologic Studies Depression Scale Radloff, 1977) The CES-D is a 20-item self-report assessment of depressive feelings and behaviors during the past week.

Moderation PROCESS Model 1 regression analyses were used to test the hypotheses (Hayes, 2013).

The hypotheses were supported, such that meaning in life was a significant moderator of the associations between 1) TB and death ideation (p < 0.01), 2) PB and death ideation (p < 0.01), and 3) hopelessness and death ideation (p = .0128).

Results

Main Findings

It appears that low meaning in life strengthens the associations between thwarted interpersonal needs (i.e., TB, PB) and death ideation, and hopelessness and death ideation among older adults.

These findings hold particular importance for older adults who may be more prone to experiencing elevated levels of thwarted belongingness and perceived burdensomeness (Conwell et al., 2011; Cukrowicz et al., 2011; Van Orden, Talbot, & King, 2012).

Theoretical and Clinical Implications

These findings support the integration of current suicide theories, particularly aspects of the interpersonal theory of suicide (Joiner, 2005; Van Orden et al., 2010) and the 3ST (Klonsky & May, 2015).

Clinicians working with older adults in primary care settings may aim to increase meaning in life through interventions such as values-based behavioral activation to reduce the impact of TB, PB and hopelessness on death ideation.

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