

The Application of Psychoanalytic Psychotherapy in Reducing Suicidal Ideation through Ego Functioning Enhancement: A Single-Subject Experiment

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Abstract

Suicide is a complex mental health issue often associated with ego dysfunction, including affect regulation, impulse control, and defense mechanisms. This study aims to evaluate the application of psychoanalytic psychotherapy in enhancing ego function and reducing suicidal ideation in a final-year university student. The research employs a single-subject experimental design, measuring ego function before and after the intervention using the Ego Functioning Assessment (EFA). The subject underwent 10 sessions of psychoanalytic psychotherapy, focusing on intrapsychic conflict exploration, transference, and defense mechanisms. The results indicate a significant improvement in all aspects of ego function, particularly in impulse regulation, defense mechanisms, and cognitive processes, contributing to a reduction in the intensity of suicidal ideation. EFA scores showed substantial increases, and the subject transitioned from a neurotic personality organization to a normal personality organization. These findings suggest that psychoanalytic psychotherapy effectively strengthens ego function, which plays a crucial role in mitigating suicide risk. Future research is recommended to include a larger sample and longitudinal evaluation to validate these findings.

Keyword : Psychoanalytic Psychotherapy, Ego Function, Suicidal Ideation

Abstrak

Bunuh diri merupakan masalah kesehatan mental yang kompleks dan sering dikaitkan dengan gangguan fungsi ego seperti regulasi emosi, kontrol impuls, dan mekanisme pertahanan diri. Penelitian ini bertujuan untuk mengevaluasi penerapan psikoterapi psikoanalisis dalam meningkatkan fungsi ego dan menurunkan ide bunuh diri pada seorang pasien berstatus mahasiswa semester akhir. Penelitian menggunakan eksperimen subjek tunggal dengan pengukuran fungsi ego dilakukan sebelum dan setelah intervensi menggunakan Ego Functioning Assessment (EFA). Subjek menjalani 10 sesi psikoterapi psikoanalisis yang berfokus pada eksplorasi konflik intrapsikis, transferensi, dan mekanisme pertahanan. Hasil penelitian menunjukkan adanya peningkatan dalam semua aspek fungsi ego, terutama dalam regulasi dan kontrol dorongan, mekanisme pertahanan, dan proses pemikiran yang berkontribusi pada penurunan intensitas ide bunuh diri. Skor EFA meningkat secara signifikan dan subjek mengalami transisi dari organisasi kepribadian neurosis ke normal. Temuan ini mengindikasikan bahwa psikoterapi psikoanalisis efektif dalam memperkuat fungsi ego yang berperan dalam mereduksi risiko bunuh diri. Penelitian ini merekomendasikan studi lebih lanjut dengan sampel yang lebih besar dan evaluasi jangka panjang untuk mengonfirmasi temuan ini.

Kata Kunci : Psikoterapi Psikoanalisis, Fungsi Ego, Ide Bunuh Diri

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BACKGROUND

The human desire to form close interpersonal relationships does not always unfold harmoniously (Munthalib, 2016). Conflict, social pressure, and isolation may lead to painful experiences (Octavia, 2014). When such conditions occur persistently and are not adequately addressed, individuals are at risk of developing serious psychological vulnerabilities, which may progress into mental disorders such as major depression, generalized anxiety disorder, or even suicidal ideation. From a sociological perspective, Durkheim (as cited in Idham et al., 2019) explains that an individual's failure to achieve sufficient social integration can give rise to a state of anomie—a condition in which social norms lose their regulatory power, potentially resulting in the desire to end one's life.

Suicide has become a highly serious mental health issue in the global context, considering its widespread impact not only on individuals who die by suicide but also on their families, communities, and health care systems. According to the World Health Organization (WHO, 2014), nearly 800,000 people worldwide die by suicide each year, making it the second leading cause of death among individuals aged 15 to 29. These data highlight the urgent need to understand the contributing factors of suicide, particularly among individuals in their productive years who are expected to be at the peak of psychosocial development.

WHO (2018) further reports that the burden of suicide disproportionately affects low- and middle-income countries, which generally have limited access to mental health services and psychosocial support systems. In Indonesia, suicide cases have shown an alarming increase, with official reports reaching 1,226 cases in 2023 (Katadata, 2023). This figure should draw serious attention from policymakers and mental health professionals alike. Moreover, there is strong evidence to suggest that the actual number may be significantly higher than reported, due to the phenomenon of underreporting, which is often caused by social stigma and limitations in data recording systems (Onie, 2022).

Recent studies indicate that university students represent one of the most vulnerable population groups in terms of experiencing suicidal ideation, particularly due to the complexity of stressors encountered during the transitional phase into adulthood. Ermawati et al. (2018) found that individuals aged 18 to 25 exhibit higher levels of suicidal ideation compared to other age groups, suggesting that this age range constitutes a critical period in psychological development. This stage is often characterized by increased academic demands, shifts in social roles, and the search for personal identity—all of which cumulatively contribute to considerable emotional pressure. High academic stress, such as overwhelming coursework, performance expectations, and anxiety about the future, may worsen students' psychological conditions, especially if not supported by adequate coping skills.

Additionally, interpersonal conflicts—whether with peers or family members—as well as financial difficulties, such as economic instability or dependence on limited resources, serve as significant stressors. Researchers have

highlighted that the lack of both emotional and instrumental social support from the surrounding environment significantly increases the potential for suicidal ideation among university students. This situation is further exacerbated by the stigma surrounding mental health disorders, which often leads students to avoid seeking professional help, thereby causing their problems to remain undetected and untreated at an early stage (Idham et al., 2019; Mukaromah, 2020).

According to Febianti (2024), one of the most frequently identified primary causes of suicide in Indonesia is depression. Depression is not merely a form of ordinary sadness, but rather a complex mental condition in which individuals experience profound sorrow or intense disappointment, typically as a response to loss, failure, or helplessness in the face of certain life events (Sari & Rohmah, 2023). In everyday life, the term depression is often associated with various negative emotional expressions such as melancholy, hopelessness, emptiness, deep suffering, and the inability to feel joy or satisfaction (Rifayanti et al., 2017). This condition affects not only emotional well-being but also has significant impacts on cognitive and physical functioning, including impaired concentration, disrupted sleep patterns, decreased energy levels, and the emergence of suicidal thoughts. In Indonesia, several studies have revealed that depression often goes undiagnosed due to the low level of mental health literacy in the general population. Moreover, cultural norms that encourage individuals to suppress negative emotions and maintain a façade of resilience may further worsen the psychological condition of those suffering from depression.

Many studies have revealed that suicidal ideation does not emerge suddenly but develops through phases leading up to suicidal action (Van Orden et al., 2010). Several studies have also identified key triggers, such as academic pressure, psychological disorders, and unresolved traumatic experiences (Bridge et al., 2006). However, there remains a gap in research on clinical interventions based on interpersonal relationships that can help students manage suicidal ideation.

Previous studies have primarily focused on suicide epidemiology and risk factors but have not extensively explored psychotherapeutic approaches to addressing suicidal ideation among university students. A preliminary study conducted on June 3, 2024, involving nine university students, found that four exhibited high levels of suicidal ideation due to loneliness, academic stress, and financial problems. However, the interventions they received were limited to general counseling, without a deeper approach focusing on interpersonal relationship-based therapy.

Addressing suicidal ideation is a critical preventive step to reducing future suicide attempts. The WHO (2014) asserts that suicide prevention is a global health priority, necessitating effective psychotherapeutic interventions. One relevant perspective in understanding suicidal ideation is psychoanalysis, particularly ego function. The ego is responsible for regulating impulses, managing anxiety, and balancing conflicts between internal drives and external

demands (Freud, 1923/2024). Individuals with ego dysfunction often struggle with affect regulation, cognitive distortions, and an overwhelming sense of helplessness (Blatt & Levy, 2003).

Psychoanalytic psychotherapy offers a unique approach to enhancing ego function through in-depth exploration of an individual's internal experiences. Through the therapeutic relationship, patients can develop greater self-awareness, improve tolerance for psychological distress, and establish more adaptive defense mechanisms (Schechter et al., 2019). A study by Briggs et al. (2019) also found that psychoanalytic psychotherapy can help individuals with suicidal ideation and self-harming behaviors develop healthier affect regulation, thereby reducing the intensity of suicidal thoughts.

Despite a growing body of evidence supporting the effectiveness of psychoanalytic psychotherapy in addressing suicidal ideation, there remains a notable gap in the literature specifically examining the role of this approach in enhancing ego functioning among individuals with suicidal thoughts. This gap is particularly significant, given that the ego is considered the central focus of psychoanalytic work and plays a crucial role in an individual's capacity to adapt to reality and manage internal drives (Freud, 1937/2024). Therefore, the present study aims to address this scientific gap by exploring the extent to which psychoanalytic psychotherapy can contribute to the improvement of ego functioning in patients experiencing suicidal ideation.

This research is expected to provide both theoretical and practical benefits, particularly by enriching the clinical psychology literature regarding the efficacy of psychoanalytic interventions in the modulation of ego dynamics, as well as offering an alternative therapeutic approach applicable in clinical practice. Practically, the findings of this study may serve as an initial reference for mental health professionals in designing interventions that focus more deeply on the intrapsychic aspects of patients with suicidal tendencies. Given that this research employs a single-case experimental design with a quantitative approach, the hypothesis proposed is as follows: Psychoanalytic psychotherapy can enhance ego functioning in patients with suicidal ideation.

RESEARCH METHODS

The primary variable in this study is suicidal ideation. According to Van Orden et al. (2010), suicidal ideation consists of two components: active and passive suicidal ideation. Active suicidal ideation refers to the conscious desire to end one's life, which can be verbally expressed, such as statements like "I want to die." In contrast, passive suicidal ideation refers to unconscious self-destructive tendencies, reflected in parapraxes that implicitly indicate a tendency toward death, such as reckless driving, increased smoking, sleep disturbances (insomnia or hypersomnia), changes in eating patterns (overeating or loss of appetite), and engaging in risky behaviors without clear justification.

In this study, the subject is a final-year university student, identified as SA, experiencing suicidal ideation. The subject was selected using purposive sampling at Klinik JiwaMu, considering the individual's willingness to undergo psychoanalytic psychotherapy as an intervention. Inclusion criteria for this study involved individuals who reported active suicidal ideation or exhibited symptoms of passive suicidal ideation based on an initial interview. Meanwhile, exclusion criteria included individuals with severe psychotic disorders or medical conditions that could interfere with therapy participation.

The primary instrument used in this study is the Ego Functioning Assessment (EFA), a semi-quantitative clinical interview developed by Leopold Bellak to evaluate 12 ego functions in human behavior (Bellak et al., 1973). These twelve ego functions assessed by EFA include reality testing, judgment, sense of reality, affect regulation and control, object relations, thought processes, adaptive regression, defense mechanisms, stimulus barrier, autonomous functioning, integrative-synthetic function, and mastery-competence. The interview results are matched with the Modal Stop Scale to determine the subject's personality organization, whether classified as normal, neurotic, borderline, or psychotic (Bellak & Sheehy, 1976).

This study employs a single-subject experimental design, a quantitative method used to assess changes in the patient's ego function before and after psychoanalytic psychotherapy intervention. The research process began with an initial assessment using EFA before treatment (Baseline 1) to evaluate the subject's initial ego function condition. Following this, 10 sessions of psychoanalytic psychotherapy were conducted, focusing on exploring emotional experiences, defense mechanisms, and interpersonal relationship dynamics. This included defense interpretation, transference interpretation, genesis interpretation, and the desire of analyst. Upon completing the therapy sessions, the therapy transcripts were analyzed to assess the latest ego function changes using EFA again (Baseline 2).

Data analysis in this study was conducted by comparing the EFA results from Baseline 1 and Baseline 2 to identify changes in ego function after psychoanalytic psychotherapy intervention. The obtained data were analyzed in the form of a ranking graph of ego function, illustrating the level of change in the 12 aspects of ego function before and after therapy. Using this approach, it can be evaluated whether a significant improvement in ego function occurred after undergoing 10 sessions of psychoanalytic psychotherapy. This graph provides a quantitative representation of how each aspect of ego function develops. An increase in ego function indicates that the individual has developed better emotional regulation, improved impulse control, and the ability to use adaptive defense mechanisms, thereby reducing the psychological distress that previously felt overwhelming and no longer triggering suicidal ideation.

Table 1. Implementation of Psychoanalytic Psychotherapy

Session	Date	Implementation	Objective
1	October 9, 2024	Pre-Treatment, Assessment (Baseline 1), and Case Formulation	Establish an initial therapeutic relationship, assess the patient's condition before treatment through Ego Functioning Assessment (EFA), and inform the patient about the purpose and objectives of the treatment.
2-3	October 16 & 23, 2024	Trial Treatment	Train the patient's verbalization capacity through free-association, ensure adherence to treatment regulations, and review the patient's reactions to interpretations
4-9	October 30, 2024; November 6, 13, 20, 27, & December 4, 2024	Core Treatment	Actively and continuously encourage reflection on the patient's emotions and thoughts, mediate them through the therapeutic relationship, and anticipate suicidal tendencies through verbal interventions. Defense interpretation, transference interpretation, genesis interpretation, and the desire of analyst are utilized.
10	December 11, 2024	Reassessment (Baseline 2) and Termination	Review the patient's ego function and formally terminate the psychological contract established during the treatment process.

RESEARCH RESULTS

This study evaluated changes in ego function before and after undergoing 10 sessions of psychoanalytic psychotherapy using the Ego Functioning Assessment (EFA). The data obtained indicate improvements in all 12 aspects of ego function, with varying degrees of score increases across categories.

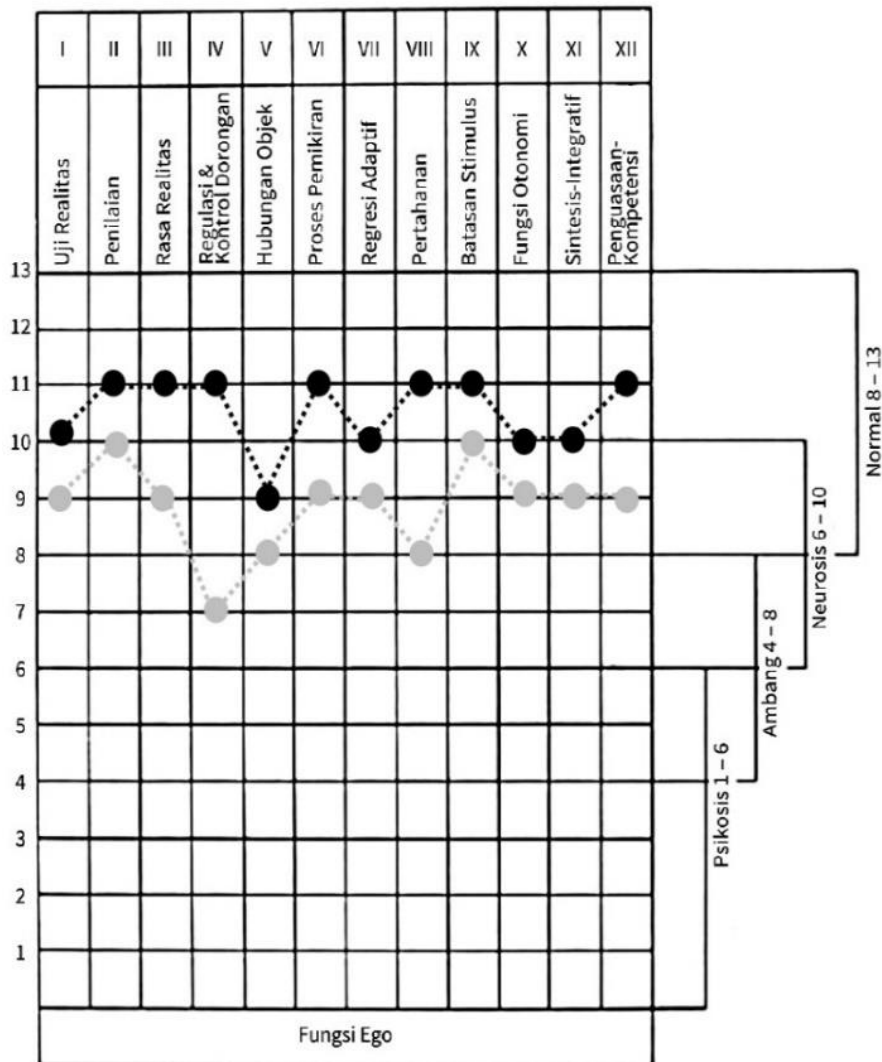
In Baseline 1 (before therapy), ego function scores ranged between 7 and 10, with the lowest scores found in impulse regulation and control (7), as well as object relations and defense mechanisms (8). The subject reported difficulty in self-control, feeling disconnected from peers, and experiencing an internal sense of emotional turmoil. These emotions caused guilt and fear of hurting others, leading the subject to withdraw from social relationships, which in turn exacerbated feelings of loneliness and neglect. The primary struggles revolved around the need for control vs. self-expression, as well as the need for closeness vs. withdraw. The subject expressed that this ambivalence led to self-directed anger, feelings of inadequacy, and helplessness. Repeatedly, the subject verbalized suicidal thoughts and imagined fatal accidents.

Psychoanalytic psychotherapy was carefully conducted to approach the subject's ambivalence in a structured and safe therapeutic environment. After 10 sessions of psychoanalytic psychotherapy, scores improved

across nearly all ego function aspects. Baseline 2 (after therapy) showed increases in all ego function categories, with the highest scores reaching 11 in judgment, impulse regulation and control, thought processes, defense mechanisms, stimulus barrier, and mastery-competence. The subject reported a greater sense of calm, increased confidence in social interactions, and found reading as a means of managing previously overwhelming anxiety. The subject also reported greater assertiveness and self-advocacy, with reduced self-directed anger and an increased desire to continue living with a more positive outlook. Suicidal ideation, which was previously reported, was no longer present throughout the course of treatment.

Furthermore, the subject's personality organization also improved. The personality organization level was calculated based on the average of all ego functions. Before therapy, the subject exhibited a neurotic personality organization, while after therapy, the subject showed improvement to a normal personality organization.

These findings support the hypothesis that psychoanalytic psychotherapy enhances ego function in individuals with suicidal ideation. Significant changes in impulse regulation and control, as well as defense mechanisms, indicate that the subject developed greater capacity to manage suicidal ideation and distress.



- Baseline 1 (before therapy)
- Baseline 2 (after therapy)

Figure 1. Before and after 10 sessions of psychoanalytic therapy

DISCUSSION

According to Siraj (2024), psychoanalytic psychotherapy differs from psychoanalysis. In psychoanalytic psychotherapy, the therapist is expected to adopt a more active stance (Ferenczi, 1926), working with focused issues relevant to the subject's life (Balint, 1972), and engaging in relational manipulations that allow the subject to experience corrective emotional experiences (Alexander, 1946). The emotional ambivalence experienced by the subject, as discussed earlier, is addressed through these technical components.

The findings of this study indicate that psychoanalytic psychotherapy is effective in enhancing ego functions in individuals experiencing suicidal ideation. Significant improvements in drive regulation and control, thinking processes, and defensive functioning demonstrate that after ten therapy sessions, the patient was able to develop more adaptive responses, improve emotional regulation capacity,

and reduce destructive impulses. These findings align with the study by Briggs et al. (2019), which reported that psychoanalytic psychotherapy supports individuals with suicidal ideation in developing more mature defense mechanisms and enhancing impulse control. Furthermore, these results corroborate the findings of Schechter et al. (2019), who emphasized that the therapeutic relationship in psychoanalytic psychotherapy can create a secure space for patients to explore and regulate their destructive drives in a healthier manner.

Several ego functions demonstrated improvement by one modal stop level, including reality testing, judgment, object relations, adaptive regression, stimulus barrier, autonomy, and integrative-synthetic functions. Individuals who previously experienced confusion in differentiating internal from external stimuli began to show clearer demarcation. They also developed the capacity to evaluate the conclusions they drew from their experiences more critically. Abdullahi (2018) stated that improvements in reality

testing and judgment are crucial aspects of clinical work, as impairments in these areas significantly affect the severity axis of diagnosis. Improvement in these functions was evident in the patient's statement: "I realized I was very angry at that time, but now I can see that I was probably overinterpreting his words. Maybe he didn't mean to offend me."

Object relations also showed improvement, although still at a relatively low and vulnerable level. Shedler (2022) warned that what is broken in relationships must be repaired within relationships. While improvement in object relations is a promising sign, its still-low score suggests a risk for relational dilemmas, reminiscent of Schopenhauer's porcupine dilemma (Luepnitz, 2002): "I actually want to join my friends when they hang out, but I'm afraid I'll end up disappointed again."

Other functions—namely adaptive regression, stimulus barrier, autonomy, and integrative-synthetic capacity—also demonstrated improvement by one modal stop level. Improvement in adaptive regression indicates that the individual became more capable of temporarily releasing conscious control to allow psychological recovery (Bilsker, 1991). This is closely related to integrative-synthetic functioning, where material arising during regression can be reintegrated into consciousness: "... during late-night prayer, I suddenly began to cry. I remembered my joyful childhood, when I didn't care much about what others thought of me. The next morning, I reflected on it and thought, maybe I really don't need to think too much about what others think. I don't even know what they're thinking. More often than not, I'm just being overly suspicious."

With regard to stimulus barrier, the individual reported improved sleep quality: "I slept very soundly and woke up feeling fresh." This is consistent with the findings of Vincent (2008), which indicated that improvements in the stimulus barrier function can reduce insomnia and improve sleep quality. Regarding ego autonomy, the individual demonstrated expanded awareness and increased personal resources (Corbin, 1974): "I used to be overwhelmed every day by thoughts of ending everything, but now I see that it's not the only option. I want to know if there is another way to get out of this pain. That's why I look forward to every session."

Some ego functions even improved by two modal stop levels, namely sense of reality, thinking processes, and mastery competence. In terms of sense of reality, the individual reported feeling present in the real world (Carlton, 1996): "Last Wednesday I hung out with my friends, and somehow I felt really present with them. I wasn't preoccupied with my usual worries. My mother suggested I try to feel both my feet firmly on the ground. Surprisingly, it really helped."

In terms of thinking processes, the individual exhibited greater clarity and ability to differentiate thoughts (Siraj, 2024): "When I felt ignored by my friends, I immediately thought I had no one. But after some reflection, I realized there are still one or two people who care about me—it's just that I've been shutting myself off."

As for mastery competence, the individual showed an increased ability to assert themselves (Bellak et al., 1973): "During a group assignment, everyone was just on their phones. I gathered the courage to ask them to focus on the task. I was very nervous. But surprisingly, they didn't get mad. We ended up having a productive discussion. It might sound silly, but I felt proud of myself."

Notably, significant improvements were observed in drive regulation and control, as well as defensive functioning. Regarding regulation and control of drives, the individual demonstrated effective inhibition of destructive impulses (Bellak et al., 1973): "I almost posted an angry status about a friend, but then I decided to wait until the next day. After sleeping, I felt much better—my anger had significantly subsided. I ended up texting the friend directly and found out they were going through relationship problems too."

In terms of defensive functioning, the individual showed increased ability to manage anxiety (Carlton, 1996): "Next week is going to be tough, so I've already scheduled time to rest, study, and meet with a friend to work on our final paper."

The shift from a neurotic personality organization to a more normal one after therapy suggests that the intervention not only reduced suicidal ideation but also contributed to strengthening the patient's overall personality structure. This is consistent with the findings of Blatt & Levy (2003), who emphasized that individuals with stronger ego functioning tend to exhibit greater psychological resilience and are more capable of managing suicidal ideation in healthier ways.

Although this study supports the use of psychoanalytic psychotherapy, the specific mechanisms contributing to improved ego functioning require further exploration. For instance, are these changes more attributable to the exploratory aspect of therapy, the therapeutic relationship, or specific technical interventions? Research by Fonagy & Bateman (2016) has shown that Mentalization-Based Treatment (MBT), which also has roots in psychoanalysis, is effective in improving emotional regulation and reducing impulsivity in individuals at risk of suicide. Future studies may benefit from comparing this approach to other formal psychoanalytic-derived interventions.

Furthermore, individuals' responses to psychoanalytic psychotherapy are not uniform. They may vary greatly depending on internal and relational factors, such as the severity of past trauma, reflective capacity, and the quality of the therapeutic alliance established during treatment (Gabbard, 2004). The severity of earlier trauma may influence how readily an individual can access and process emotional experiences consciously, raising important questions regarding analysability. Reflective capacity also plays a key role in understanding one's own and others' thoughts, emotions, and motivations—an ability essential to strengthening ego function and enhancing emotional regulation. The success of psychoanalytic psychotherapy is also heavily influenced by the strength of the working alliance between therapist and patient, which helps create a

secure space for in-depth exploration of intrapsychic conflict. Taking these factors into account, it becomes evident that the effectiveness of psychoanalytic psychotherapy cannot be evaluated in generalized terms without acknowledging the unique characteristics of each individual.

From a practical standpoint, these findings offer empirical support for mental health practitioners to utilize psychoanalytic psychotherapy as a viable intervention for patients experiencing suicidal ideation. A time-limited 10-session model can assist patients in coping with life challenges without falling into patterns of self-destruction.

Based on the findings of this study, it can be concluded that psychoanalytic psychotherapy is effective in reducing the intensity of suicidal ideation by enhancing ego functions. Significant changes across multiple ego functions suggest that individuals who undergo this treatment are able to develop improved emotional regulation capacities in response to psychological stress. Emotional regulation is especially vital, as it reflects the capacity to regulate emotions rather than being regulated by emotions (Mirza et al., 2022).

However, this study has several limitations. First, the use of a single-subject experimental design limits the generalizability of the findings to a broader population. Further studies with larger sample sizes are necessary to confirm these results. Second, the absence of a control group prevents comparison with other therapeutic approaches or with individuals who do not receive treatment. Third, the 10-session duration limits understanding of the long-term effects of ego function improvement on psychological stability. Future research should incorporate control groups, extend therapy duration, and conduct longitudinal studies to evaluate the long-term effects of the intervention. Additionally, future studies should analyze which specific elements of psychoanalytic psychotherapy most contribute to ego function improvement so that this therapeutic approach can be optimized in clinical practice.

With the growing body of empirical evidence supporting the use of psychoanalytic psychotherapy, it is hoped that this approach will become an integral part of broader clinical strategies for the prevention and treatment of suicidal ideation.

CONCLUSION

This study demonstrates that psychoanalytic psychotherapy is effective in enhancing ego functioning in individuals experiencing suicidal ideation. After undergoing ten sessions of therapy, the patient exhibited a significant transformation from a personality organization at a neurotic level to a more adaptive structure approaching the category of normal functioning. These findings support the assumption that strengthening ego functions through psychoanalytic psychotherapy can substantially contribute to both the prevention and treatment of suicidal ideation, particularly in individuals who struggle with emotional regulation and imbalances in the use of defense mechanisms. Therefore, psychoanalytic psychotherapy may be considered a viable and effective intervention approach in clinical

practice for this population group. Nevertheless, given that this research employed a single-case experimental design, the results cannot yet be generalized to a broader population. It is recommended that future research involve a larger number of participants and utilize quasi-experimental or true experimental designs in order to test the consistency and reliability of these findings. Furthermore, subsequent studies are encouraged to integrate both quantitative and qualitative methods, thereby capturing changes in ego functioning not only through test scores or objective assessments but also through the subjective narratives of patients throughout the therapeutic process. In-depth exploration of moderating factors such as reflective capacity, therapeutic relationship dynamics, and trauma history is also essential to further understand the variables that influence the effectiveness of psychoanalytic psychotherapy in addressing suicidal ideation.

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