



CORRELATES OF SUICIDAL THOUGHTS AMONG UNIVERSITY UNDERGRADUATE STUDENTS IN BAYELSA STATE, NIGERIA

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Abstract

This cross-sectional study investigates the determinants of suicide among 163 undergraduate students in Bayelsa State, focusing on demographic, social, economic, psychological and health determinants. This study is built on the theoretical model of Durkheim's social integration and regulation theory. Findings from the study indicate that the prevalence rate for the thought of suicide among undergraduate students is 18%. Furthermore, suicidal thought is significantly related to CGPA of students ($p < 0.041$). The social and economic correlates that are significant to suicidal thoughts using chi-square cross-tab from the study include; relationship with parents ($p < 0.000$), academic pressure ($p < 0.013$), relationship status of parents ($p < 0.006$), and current financial status ($p < 0.002$). On the other hand, the Pearson test found the following socio-economic variables to be significant with suicidal thoughts; academic dissatisfaction ($p < 0.001$), relationship with parents ($p < 0.006$), relationship status of parents ($p < 0.022$), and financial status. Other determinants of suicidal thoughts include; depression ($p < 0.000$) and health challenges ($p < 0.008$). The study, therefore, concludes that suicidal thoughts among students could be a function of mainly societal factors which might be inherent in the school environment. Consequently, the study recommends that a guidance and counselling unit be strengthened in higher institutions that will assist students who might be depressed from school activities.

Keywords: Suicidal thoughts, undergraduate students, social integration, Niger Delta University, Federal University Otuoke

Introduction

According to the World Health Organisation (Cited in Abdallah, et al, 2018), globally, it has been estimated that close to about 800 000 people die due to suicide every year. Going by these statistics, it means that one person dies every 40 seconds as a result of suicide. It was also estimated that in 2015, suicide accounted for about 1.4 per cent of all deaths worldwide, making it the 17th leading cause of death.





The WHO also stated that with a ranking of 15.1 suicides per 100,000 population in a year, Nigeria was placed at the 30th position of the most suicide-prone country (out of 183 nations) in the world (Abdallah, et al, 2018). Nigeria was also ranked 10th in the suicide rate among African countries. It was estimated that about 80 persons killed themselves between 2017 and 2018 in Nigeria (Abdallah, et al, 2018). Still, Lagos State led in suicide rate with 14 reported cases in 2017. The International Association for Suicide Prevention (IASP) has also stated that suicide occurs throughout the lifespan and is estimated to be the second leading cause of death among those aged 15-29-year globally.

Previously, taking one's own life especially among those that are emotionally unstable was a common phenomenon among the industrialised capitalist countries. For instance, studies have reported that in the United States, about eighty (80) suicide cases occur per day with more than thirty-two thousand suicide cases per year and fifteen thousand unsuccessful ones per day, and it is the fourth leading cause of death among eighteen to sixty-five (18-65) year age group (O'Connor, Platt & Gordon, 2008; Hawton & Van Heerigen, 2009). Currently, about 78 per cent of suicide cases were recorded in the low and middle-income countries in 2015.

But now, the issue is fast taking a foothold in the developing countries of Africa. The trend of suicide in Nigeria has become a serious problem for development planners and policymakers given the rate at which suicide occurs in the country, especially among young people. The major reasons that have been attributed to the high suicide rate in the world range from economic difficulty, marital related problems, academic problems, etc.

Of most worrisome in the suicide trend in Nigeria is the high rate of suicide among students of tertiary institutions. Mac-Leva et al (2019), reported that students topped the list of about 42 suicide cases within the first and second quarters of 2019, with sniper being the most prevalent source of self-termination. Table 1 below is a compilation of some incidents of suicide among students as reported by various newspaper outlets.





Table 1: Some reported cases of suicide among Nigerian students in 2019

S/N	Institution of Study	Sex	Level of student	Department	Supposed cause of suicide	Suicide medium
1.	University of Nigeria, Nsuka	Male	400	English and Literary studies	Deteriorating mental health	Sniper
2.	University of Nigeria, Nsuka	Male	400	Religion and Culture	Inability to Graduate	Sniper
3.	University of Benin, Benin city	Female	300	Medical Laboratory Science	Jilted by a boyfriend/Raped	Sniper
4.	Niger Delta University, Wilberforce Island	Male	300	Medicine and Surgery	Failed MBBS examination.	Drowned self
5.	University of Port Harcourt, Choba	Female	100	Chemical Engineering	Depression	Sniper
6.	Federal University of Agriculture, Abeokuta	Female	200	Pure and Applied Botany	Withdrawn for poor academic performance	Sniper
7.	Federal University of Agriculture, Abeokuta	Male	400	Zoology	\$20,000 debt	Sniper
8.	Federal Polytechnic, Offa in Kwara State	Male	ND 1	Civil Engineering Department	embarrassed by one of his lecturers	Insecticide
9.	Delta State University	Female	Dropout	Nursing	Frustration	Insecticide
10.	Kogi State University, Ayingba	Female	100	Philosophy	Broken relationship	Sniper
11.	Obafemi Awolowo University, Ile-Ife	Male	Extra-year	Computer Science	Failing some courses repeatedly.	Poisonous substance
12.	University of Port Harcourt, Choba	Female	100	Chemical Engineering	Depression	Sniper
13.	Federal Polytechnic Oko	Male	ND 1	Public administration	Unidentified reason	Sniper
14.	Lagos State Polytechnic	Male	HND 2	Hospitality Management	Jilted lover	Sniper
15.	Waziri Umaru Federal Polytechnic, Birnin Kebbi	Male	-	-	financial misfortune	Insecticide
16.	Obafemi Awolowo University, Ile-Ife	Female	Final year	English Language	Poor academic performance	Sniper
17.	University of Port Harcourt, Choba	Male	Final year	Electrical engineering	Lack of fulfilment	poisonous substance

Source: Culled from various newspapers by authors, 2020.

Though studies investigating trends and patterns of suicide abound, research investigating suicidal thoughts and factors responsible for them are very limited and inadequate especially in Nigeria. This is worrisome as suicidal thoughts are precursors of the actual realisation of the act among students. It is based on this note that this study seeks to investigate the determinants of





suicidal thoughts among undergraduate students using undergraduate students in Bayelsa state as a case study.

Theoretical Framework: Durkheim’s theory of social integration and social regulation

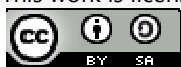
The theoretical framework on which this theory is built is social Integration and social regulation model propounded by Emile Durkheim in 1897. The theory states that there is an inverse relationship between suicidal behaviour and the degree of integration an individual has with his or her social group. He proposed that suicide results, in part, from the failure of social integration. The theory posited that an individual will not die by suicide unless he/she has both the desire to die by suicide and the ability to do so. He referred to social integration as the degree to which individuals in the society were bound by social ties and relationship, while social regulation referred to the degrees individuals have their desires and emotions controlled by the social values of the society. Durkheim held the view that suicidal behaviour would be more likely if social integration was too strong (leading to egoistic suicidal behaviour), if social regulation was too weak (leading to anomic suicidal behaviour), or if these two social forces were too strong (leading to altruistic and fatalistic suicidal behaviours respectively) [Colucci & Martin, 2008].

This theory was re-emphasized in 1997 by Simpson; Durkheim; and Emile. One of the clearest findings in the literature on suicide is that individuals who die by suicide often experience social isolation and social withdrawal before their death (Waern, Rubenowitz & Wilhelmson, 2003). Hence this theory can be adequately applied to this study as suicidal behaviour might result from rigid school rules and regulation or poor self-esteem or isolation which might make students commit suicide.

Materials and Methods

Study Design and Population of Study

This study is a cross-sectional survey that was conducted among 196 undergraduate students in Bayelsa. The population of the study consisted of mainly undergraduate students in two universities in Bayelsa State namely; the Federal University Otuoke and the Niger Delta





University. From the National University Commission report in 2017, a total of 6,051 and 14,547 students were enrolled at the Federal University Otuoke and the Niger Delta University respectively. Thus, the total population for this study was put at 20,598 undergraduate students of two universities in Bayelsa State. It is from this population the sample for this study was drawn from.

Sample and Sampling Techniques

Given the fact that the population of the study is known, the sample size for this study was determined using the Taro Yemeni's sample size determination formula;

$$n = \frac{N}{1+I(e)^2} \quad \text{Where; } n = \text{Sample size, } N = \text{Population of the study, } e = \text{Error level (0.05)}$$

Thus, the sample becomes;

$$\begin{aligned} n &= \frac{20598}{1+20598(0.05)^2} &= \frac{20598}{1+20598(0.0025)} &= \frac{20598}{1+51.495} \\ & & &= \frac{20598}{52.495} = 392.380 = 392 \end{aligned}$$

However, due to the limited period and resources accorded to the study, the sampled size was divided into two, thus giving a sample of 196 students. Nevertheless, only one hundred and sixty-three (163) copies of the questionnaire (83.2%) were found valid for data analysis as about 17.8 per cent of the questionnaire were either filled incorrectly or nonresponsive, with NDU having the highest number of unresponsive students.

In determining the sample respondents for the study, the multi-stage sampling technique was utilised. The first stage used purposive sampling to select the two existing universities in Bayelsa state; The Niger Delta University and the Federal University Otuoke, from the four existing universities in Bayelsa state. These two universities were selected on the ground that they are the only universities currently having undergraduate students in 100 to 500 level. At the second stage, the stratified sampling was used to group the faculties of the two universities into four categories namely; Social/Management Sciences and Humanities; Engineering, Sciences and Agricultural Sciences; College of Health Sciences and Law, Arts, and Education. At the third stage, the simple random sampling was employed to select one department each from the four

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categories of faculties in the two universities, which yielded twelve (12) departments namely; Geography and Environmental Management science, Accounting, History and Diplomacy, Chemical Engineering, Agricultural Economics, Geology, Medicine, Law, Theatre Arts, Nursing, Pharmacy, and Mathematics Education. Finally, accidental sampling was employed to recruit students who were available at the departments that were selected for the study.

Data Collection

Primary data for this study was generated using the questionnaire based on the objectives of the study. However, the questionnaire was divided into five sections; Section A was directed at the respondents' socio-demographic characteristics which include; estimated monthly allowance, faculty, age, gender, level, religion, etc. Section B deals with the trends and patterns of suicidal thoughts, Section C on the other hand, contains the social and economic factors associated with suicidal thoughts, while Section D deals with the psychological and health factors associated with suicidal thoughts.

Data Analysis

Data generated from the field in this study were analysed using univariate and bivariate statistics. The univariate descriptive statistics percentages, frequencies and graphs were mainly used to analyse the socio-demographic characteristics of the respondent such as sex, estimated monthly allowance, level of student, etc. In testing the hypothesis in the study, bivariate statistics such as chi-square cross-tabulation and Pearson correlation was used in the study, while setting the p-value at 0.05 level of significance.

Measurement of Key Variables

For ease of statistical analysis, the dependent and independent variables were measured using different scales of measurement.

Dependent variable

The dependent variable in this study is suicidal thought measured at the ordinal level. Thus, trend and patterns of suicidal thoughts were measured using an ordinal continuous variable. Thus, Thoughts of suicide = Never (1) some times (2) most time (3)





Independent variables

The independent variables include first, the socio-demographic characteristics of the respondent measured using normal, ordinal, and interval scale of measurement; thus, Age, = 15 – 18, 19-22, 23-26, 27 and above; Marital status = Single, cohabiting, others; Gender = Male, Female, etc. Second, social and economic factors which serve as independent variables were also measured at the ordinal level thus; Satisfaction from academic performance = very satisfied, satisfied, moderately satisfied, dissatisfied, very dissatisfied; Level of social support from friends = never, sometimes, most-times. Current economic status = high, moderate, low ,etc. Psychological and health factors also served as independent variables and were measured using the ordinal scale, thus; Level of self-esteem = very high, high, moderate, low, very low. Access to food and nutrition = high, moderate, low. Academic pressure = never, sometimes, most times.

Results and Finding

Socio-Demographic Characteristics of Respondents

The Socio-demographic variables of the respondents consist of age, marital status, gender, name of university, religion, year of study, estimated allowance per month, and current CGPA. Other variables include; academic status, ethnic affiliations, residence pattern and type of family.

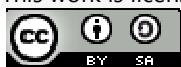
Table 2 shows that the average age of the respondents is 22+3.17, while the highest proportion of the respondents (43.1%) were between the ages of 19 and 21. Other categories of age intervals are demonstrated in table 2. The marital status of the respondents revealed that more than three-quarter (94.5%) were single compared to other categories of marital status. Also, more than half of the respondents (68.7%) were males. However, FOU yielded 60.1% of respondents, leaving NDU with 39.9%.





Table 2: Distributions of Respondents by Socio-demographic variables

Variables	Frequency (n=163)	Percentage
Age		
16-18	22	13.8
19-21	69	43.1
22-24	45	28.1
25 and above	24	15.0
Mean/SD Age (22 ± 3.17)		
Marital Status		
Single	154	94.5
Cohabiting	5	3.1
Others specify	4	2.5
Gender		
Male	112	68.7
Female	51	31.3
Name of university		
NDU	65	39.9
FUO	98	60.1
Religion		
Christian	157	96.3
Muslim	3	1.8
Others specify	3	1.8
Year of study		
100	28	17.2
200	89	54.6
300	17	10.4
400	27	16.6
500	2	1.2
Estimated allowance per month (₦)		
1,000-5,000	28	17.3
6,000-10,900	54	33.3
11,000-15,900	31	19.1
16,000-20,900	23	14.2
21,000 and above	26	16.0
Current CGPA		
1.00-2.99	36	22.1
3.00-3.49	61	37.4
3.50-4.49	53	32.5
4.50 and above	13	8.0
What is your academic status?		
Clear stand	105	64.4
1-3 carryovers	54	33.1
4-6 carryovers	4	2.5
Ethnic affiliations		
Bayelsan	124	76.1
Non-Bayelsan	39	23.9
Residence pattern		
Off-campus	136	83.4
Hostel	27	16.6
Type of family		
Monogamous	113	69.3
Polygamous	50	30.7





The religious affiliations of the respondents indicated that the majority of the students (96.3%) were affiliated to the Christian religion. The year of study of respondents revealed that those in their second year of study had more than half of the respondents (54.6%). While looking at the estimated allowance per month for students, the study indicated that majority of respondents (33.3%) received an estimated monthly allowance of between N6,000-N10,900. Other categories can be found in table 2.

With regards to respondents' academic status, more than half of the students indicated that they were on clear standing (64.4%). Other categories are illustrated in table 2. The ethnic affiliations of respondents showed that indigenes of Bayelsa state had the highest percentage (76.1%). More, the residence pattern of the respondents on the other hand, revealed that more students (83.4%) resided off-campus. Finally, the type of family pattern of respondents indicated that the majority of students (69.3%) came from monogamous families.

Trends in Suicidal Thoughts

Figure 1 below shows the distribution of suicidal thoughts by the respondents. From the figure, though most of the respondents (82%) have never thought about suicide, a significant number of the respondents (18%) have, however, thought of suicide at one point or the other. Though this number might seem small, it is very significant to health planners as having such a number among a category of persons (students) in the society could be very disastrous.



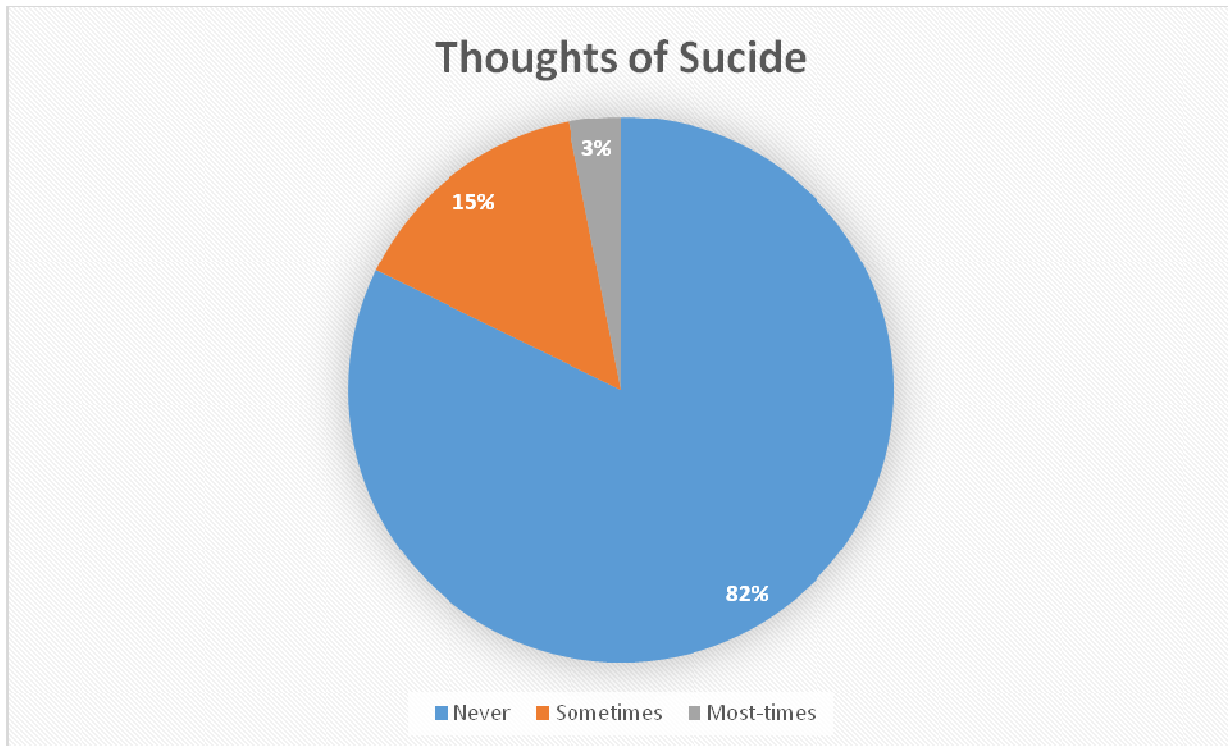


Fig. 1: Percentage distribution of suicidal thoughts

Demographic Correlates of Suicidal thoughts

With regards to the demographic correlates of suicidal thoughts, Table 3 reveals that only current CGPA of students was associated with suicidal thoughts ($p < 0.024$). Hence, a cross-tab between suicidal thoughts and demographic variables indicated that suicidal thought was highest among students whose CGPA is between 3.00- 3.99 (11.1%), followed by respondents whose CGPA is between 4.00-4.49 (4.9%). Other categories can be found in table 3. Though other variables were not significant, the cross-tab, however, indicated that suicidal thought was higher among those aged between 19-21 (3.1%), single (16.6%), male (9.8%), 200 level students (9.2%), etc. Other categories can be found in table 3.



Table 3: Demographic Correlates of Suicidal Thoughts

Demographic Variables	Suicidal Thoughts (N=163)			Total (N/%)	X ²	p-value		
	Never	Sometimes	Most times					
Age								
16-18	20(12.5%)	2(1.3%)	0(0.0%)	22(13.8%)	7.283	.295		
19-21	64(40.0%)	4(2.5%)	1(0.6%)	69(43.1%)				
22-24	42(26.3%)	3(1.9%)	0(0.0%)	45(28.1%)				
25 and above	20(12.5%)	4(2.5%)	0(0.0%)	24(15.0%)				
Marital status					5.128	.274		
Single	127(77.9%)	22(13.5%)	5(3.1%)	154(94.5%)				
Cohabiting Married	5(0.0%) 2(1.3%)	0(0.0%) 2(1.3%)	0(0.0%) 0(0.0%)	5(3.1%) 4(2.5%)				
Gender					3.073	.215		
Male Female	96(58.9%) 38(23.3%)	13(8.0%) 11(6.7%)	3(1.8%) 2(1.2%)	112(68.7%) 51(31.3%)				
Name of university					.866	.649		
NDU FUO	34(33.1%) 80(49.1%)	10(6.1%) 14(8.6%)	1(0.6%) 4(2.5%)	65(39.9%) 98(60.1%)				
Religion					1.543	.819		
Christian Muslim Others specify	129(79.1%) 2(1.2%) 3(1.8%)	23(14.1%) 1(0.6%) 0(0.0%)	5(3.1%) 0(0.0%) 0(0.0%)	157(96.3%) 3(1.8%) 3(1.8%)				
Year of study							5.709	.680
100 200 300 400 500	24(14.7%) 74(45.4%) 14(8.6%) 20(12.3%) 2(1.2%)	3(1.8%) 11(6.7%) 3(1.8%) 7(4.3%) 0(0.0%)	1(0.6%) 4(2.5%) 0(0.0%) 0(0.0%) 0(0.0%)	28(17.2%) 89(54.6%) 17(10.4%) 27(16.6%) 2(1.2%)				
Estimated allowance per month					4.816	.777		
1000-5000 6000-10,900 11000-15,900 16000-20,900 21000 and above	22(13.6%) 43(26.5%) 27(16.7%) 20(12.3%) 21(13.0%)	4(2.5%) 9(5.6%) 4(2.5%) 2(1.2%) 5(16.0%)	2(1.2%) 2(1.5%) 0(0.0%) 1(0.6%) 0(0.0%)	28(17.3%) 54(33.3%) 31(19.1%) 23(14.0%) 26(16.0%)				
Current CGPA								
1.00-2.99 3.00-3.99 4.00-4.99 4.50 and above	34(20.9%) 43(26.4%) 45(27.6%) 12(7.4%)	2(1.2%) 13(8.0%) 8(4.9%) 1(0.6%)	0(0.0%) 5(3.1%) 0(0.0%) 0(0.0%)	36(22.1%) 61(37.4%) 53(32.5%) 13(8.0%)				
Academic status							.663	.956
Clear stand 1-3 carryovers 4-6 carryovers	83(52.8%) 45(27.6%) 3(1.8%)	16(9.8%) 7(4.3%) 1(0.6%)	3(1.8%) 2(1.2%) 0(0.0%)	105(64.4%) 54(33.1%) 4(2.5%)				
Ethnic affiliations					.836	.658		
Bayelsan Non-Bayelsan	102(62.6%) 32(19.6%)	19(11.7%) 5(3.1%)	3(1.8%) 2(1.5%)	124(76.1%) 39(23.9%)				
Residence pattern					1.028	.598		
Off-campus Hostel	111(68.1%) 23(14.1%)	20(12.3%) 4(2.5%)	5(3.1%) 0(0.0%)	136(83.4%) 27(16.6%)				
Type of family					3.463	.177		
Monogamous Polygamous	97(59.5%) 37(27.7%)	13(8.0%) 11(6.7%)	4(2.5%) 1(0.6%)	114(69.9%) 49(30.1%)				
Number of siblings					4.992	.545		
None 1-3 4-7 8 and above	9(5.5%) 38(23.3%) 63(38.7%) 24(14.7%)	0(0.0%) 9(5.5%) 12(7.4%) 3(1.8%)	0(0.0%) 1(0.6%) 4(2.5%) 0(0.0%)	9(5.5%) 48(29.4%) 79(48.5%) 27(16.6%)				
Age of admission							6.907	.547
15 15-16 17-18 19-20 21 and above	3(1.9%) 11(6.8%) 50(30.9%) 33(20.4%) 36(22.2%)	0(0.0%) 2(1.2%) 7(4.3%) 4(2.5%) 11(6.8%)	0(0.0%) 1(0.6%) 2(1.2%) 2(1.2%) 0(0.0%)	3(1.9%) 14(8.6%) 59(36.4%) 39(24.1%) 47(29.0%)				

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* Significant at 0.05 level of significance

Social correlates of suicidal thoughts.

Regarding the social correlates of suicidal thoughts, Table 4 shows that relationship with parents/guardian has an association with suicidal thoughts of students ($p < 0.000$). Thus, a cross-tab between social correlates and thoughts revealed that the thought was highest among students who have a cordial relationship with their parents/guardian (7.6%), while it is lower among students who have a moderately cordial relationship with their parents/guardian (4.9%). Others can be found in table 4. Again, the table showed that academic pressure is significant with students' suicidal thoughts ($p < .013\%$). However, table 4 further revealed that suicidal thought rate is higher among students who sometimes feel pressured from their academics (9.9%). Other categories can be found in table 4.

Table 4: Social correlates of suicidal thoughts

Social factors	Suicidal Thoughts (N=163)			Total (N/%)	X ²	p-value
	Never	Sometimes	Most times			
Satisfaction with course of study.						
Very satisfied	56(34.4%)	6(3.7%)	1(0.6%)	63(38.7%)	11.842	.158
Satisfied	46(28.2%)	12(7.4%)	2(1.2%)	60(36.8%)		
Moderately satisfied	28(17.2%)	3(1.6%)	1(0.6%)	32(19.6%)		
Dissatisfied	3(1.8%)	2(1.2%)	1(0.6%)	6(3.7%)		
Very dissatisfied	1(0.0%)	1(0.6%)	0(0.0%)	2(1.2%)		
Support from friends					2.885	.577
High	29(17.9%)	5(3.1%)	2(1.2%)	36(22.2%)		
Moderate	94(58.0%)	18(11.1%)	2(1.2%)	114(70.4%)		
Low	10(6.2%)	1(0.6%)	0(0.0%)	12(7.4%)		
Relationship with parents/guardian					45.972	.000**
Very cordial	66(40.5%)	5(3.1%)	1(0.6%)	72(44.2%)		
Cordial	50(30.7%)	9(5.5%)	2(1.2%)	61(37.4%)		
Moderately cordial	14(8.6%)	7(4.3%)	1(0.6%)	22(13.5%)		
Distant	4(2.5%)	3(1.9%)	0(0.0%)	7(4.3%)		
Very distant	0(0.0%)	0(0.0%)	1(0.0)	1(0.6%)		
Loss of close relation					.736	.692
Yes	59(36.2%)	12(7.4%)	3(1.8%)	74(45.4%)		
No	75(46.0%)	12(7.4%)	2(1.2%)	89(54.6%)		
Academic pressure					12.753	.013**
Never	35(21.6%)	2(1.2%)	0(0.0%)	37(22.8%)		
Sometimes	70(43.2%)	15(9.3%)	1(0.6%)	86(53.1%)		
Most-times	28(17.3%)	7(4.3%)	4(2.5%)	39(24.1%)		
Suicide attempt by family members						

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Never	127(79.4%)	20(12.5%)	4(2.5%)	151(94.4%)	6.590	0.37
Sometimes	5(3.1%)	4(2.5%)	0(0.0%)	9(5.6%)		
Relationship status of parents						
Ever remain married	97(59.5%)	10(6.1%)	3(1.8%)	110(67.4%)	14.426	.006**
Divorced	20(12.3%)	10(6.1%)	0(0.0%)	30(18.4%)		
Lone parent	17(10.4%)	4(2.5%)	2(1.2%)	23(14.1%)		
Estimated number of friends						
None	6(3.4%)	2(1.2%)	0(0.0%)	8(4.6%)s	11.238	.081
1-3	28(17.2%)	12(7.4%)	1(0.6%)	41(25.2%)		
4-6	39(23.9%)	4(2.5%)	2(1.2%)	45(27.6%)		
7 and above.	61(37.4%)	6(3.7%)	2(1.2%)	69(42.3%)		

* Significant at 0.05 level of significance, ** Significant at 0.01 level of significance

Furthermore, table 4 indicated that the relationship status of students' parents is associated with their suicidal thoughts ($p < 0.006\%$). More so, suicidal thought rate is highest among students with unbroken marriages (7.9%), followed by those with divorced parents (6.1%). Others can be found in table 4.

Though some of the variables were not significant, the cross-tabulations still revealed that students who are moderately supported by their friends have the highest rate of suicidal thoughts (12.3%), while it is lowest among students who get a low level of support from their friends (0.6%). Others can be found in table 4.

Economic correlates of suicidal thought

Results from the economic correlates of suicidal thought indicated that only the financial status of students had a significant correlation with suicidal thoughts ($p < .002$). However, table 5 further showed that students with moderate financial status had the highest level of suicidal thought (10.4%) followed by those who had a low financial status. Other categories can be found in table 5.





Table 5: Economic correlates of suicidal thoughts

Economic factors	Suicidal Thought (N=163)			Total (N/%)	X ²	p-value
	Never	Sometimes	Most times			
Current economic status						
High	8(4.9%)	1(0.6%)	0(0.0%)	9(5.5%)	4.458	.348
Moderate	98(60.1%)	17(10.4%)	2(1.2%)	117(71.8%)		
Low	28(17.2%)	6(3.7%)	3(1.8%)	37(22.7%)		
Affordability of materials and textbooks						
Yes	75(46.3%)	14(8.6%)	2(1.2%)	91(56.2%)	.579	.749
No	58(35.8%)	10(6.2%)	3(1.9%)	71(43.8%)		
Current financial status						
High	12(7.4%)	1(0.6%)	0(0.0%)	13(8.1%)	17.130	.002**
Moderate	94(57.7%)	17(10.4%)	0(0.0%)	111(68.1%)		
Low	28(17.2%)	6(3.7%)	5(3.1%)	37(22.7%)		

* Significant at 0.05 level of significance, ** Significant at 0.01 level of significance

Analysis of table 6 revealed that the academic satisfaction of students had an association with their suicidal thoughts, ($p < 0.001$). Again, the relationship with parents was found significant with students suicidal thoughts ($p < 0.000$). Likewise, the relationship status of parents ($p < 0.002$). Finally, the table revealed that students financial status was associated with their suicidal thoughts ($p < 0.003$).

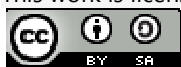




Table 6: Pearson Correlation showing the relationship between the socio-economic status of respondent and suicidal thoughts

Variable	Mean	Std.Dev	N	R	P-value	Rmks
Academic satisfaction and Suicidal thought	2.50	1.050	163	.987**	.001	Sig.
Relationship with parents suicide thought	1.80	.876	163	.308**	.000	Sig.
Relationship status of parents Suicidal thought	1.47	.731	163	.180*	.022	Sig.
Economic status Suicidal thought	2.19	.539	163	.109	.167	Not Sig.
Financial status Suicidal thought	2.16	.543	163	.228**	.003	Sig.

* Significant at 0.05 level of significance, ** Significant at 0.01 level of significance

Psychological factors and suicidal thoughts

In ascertaining the relationship between psychological factors and suicidal thoughts, Table 7 revealed that only depression among the three psychological factors was significant to suicidal thoughts among students ($p < 0.000$). Thus, the depression level of a student might determine the idea of suicide crossing a student’s mind.

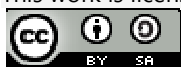




Table 7: Pearson correlation showing the relationship between respondents’ psychological factors and suicidal thoughts

Variable	Mean	Std. Dev	N	R	P-Value	Remark
Depression	1.72	.613	163	.348**	.000	Sig.
Suicidal thought	1.21	.477				
Self-esteem	2.41	.902	163	.103	.193	Not Sig.
Suicidal thought	1.21	.477				
Stress	2.18	.547	163	.136	.084	Not Sig.
Suicidal thought	1.21	.477				

** Sig. at 0.01

Health factors and suicidal thoughts

Table 8 shows three health-related factors that were correlated with suicidal thoughts. Thus, it indicated that of the three health factors measured, only respondents with health challenges were significantly related to suicidal thoughts ($p > 0.008$). Hence, students with poor health status are more predisposed to having suicidal thoughts crossing their minds.

Table 8: Pearson correlation showing the relationship between the health status of respondent and suicidal thoughts

Variable	Mean	Std. Dev	N	R	P-Value	Remark
General health status	2.35	.814	163	.066	.406	Not Sig.
Suicidal thought	1.21	.477				
Visit to the Doctor	1.53	.500	163	-.133	.090	Not Sig.
Suicidal thought	1.21	.477				
Health challenge	1.47	.501	163	-.208**	.008	Sig.
Suicidal thought	1.21	.477				

** Sig. at 0.01





Discussion of Findings

This section discusses the various findings made in this study and compares them with other studies. First, the findings in this study show that no relationship exists between age and suicidal thoughts and intentions. This finding is similar to that of Asante, Kugbey, Osafo Quarshie & Sarfo (2017), dos Santos, Marcon, Espinosa, Baptista, and Paulo (2017), and Omigbodun, Dogra, Esan, and Adedokun (2008) which affirm that no relationship exists between age and suicidal thoughts. The study still indicated that marital status has no relationship with suicidal ideation. The study of Asante et al (2017), similarly confirm this assertion. Again, this study found that gender has no relationship with suicidal thoughts, which is similar to that of Hugo et al (2017), which also shows that gender is not associated with the presence of suicide thoughts.

Additionally, this study revealed that no relationship exists between religion and suicidal thoughts. However, dos Santos et al (2017) study contrasted with these findings as they found a relationship between religious practices and the presence of suicidal thoughts. Findings from this study regarding the number of carryovers also confirm that of Amare, Woldeyhannes, Haile and Yeneabat (2018), which has no relationship between disappointed low grade results and suicidal thoughts. Asante et al (2017) also ascertained this position in their study when they found that parental understanding has a relationship with suicidal ideation, plan and attempt. On a similar note, the study by Omigbodun et al (2015), buttressed position of this study which found a relationship between the status of parents and suicidal thoughts and attempt.

Also, while findings in this study showed no relationship between the estimated number of friends and suicidal ideation, that of Asante et al. (2017) found in their study that the number of close friends is related to suicidal plan. In furtherance to this, economic status according to this study has no relationship with suicidal ideation. Findings from this study which revealed that financial status has a relationship with suicidal thought was again confirmed from the findings of Meng et al. (2013) which also indicated a relationship between financial problems and suicidal ideation. Finally, findings in this study revealed that depression is associated with suicidal thoughts. This finding is also in tandem with those of Animasahun and Animasahun (2016) which asserted that depression is a risk factor for suicide among Nigerian youths.





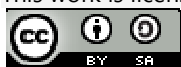
Conclusion and Recommendations

From the findings of the study, the following conclusions could be drawn. First, suicidal thoughts among students though low in percentage, the number could however be very disastrous for policymakers, especially those in the higher institutions. Again, the study concluded that social determinants such as relationship with parents/guardian, academic pressure and relationship status of parents are important factors in suicidal thoughts among undergraduate students. Still, some economic factors (finance), psychological (depression), and health factors (health challenges) were also found by the study to be significant predictors of suicidal thoughts among undergraduate students.

Based on the findings, the following recommendations have been made; First, there is the need for tertiary education administrators to strengthen their counselling units to deal with cases of depression among students, since depression has been observed as an early stage of suicide. Second, a body for coordinating efforts on suicide prevention should be formed in the universities. This body can organise seminars on the earlier warning signs and encourage students to be free in sharing depressing feelings with the university counselling units. In addition, specific university-based mental health services should be established in various universities in Nigeria. These services should aim at finding out and taking care of depressed and at-risk students to prevent incidences of suicidal behaviours.

Again, since suicidal thoughts could emanate from financial related difficulties of students, there is the need for universities' administrators to impress it on the government to pay bursaries regularly and make scholarships available to those students whose parents are not financially capable of meeting the educational needs of their children/wards. Alternatively, NGOs and government at both federal and state levels should make soft loan facilities available for undergraduate students with financial problems.

More so, universities should reduce the workload of undergraduate students and give them enough time to prepare for their examination especially those in the education faculties where approximately twelve courses are taken, sometimes in just one semester. Finally, there is the

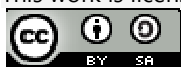




need for parents to pay adequate attention to the feelings and state of mind of their children. They should be encouraged to participate actively in the lives of their children as this will help them detect earlier warning signs of suicidal behaviour.

References

- Abdallah, N.M., Ibrahim, H., Akor, O. & Jimoh, A. (Daily Trust June, 2018). *Nigeria: 80 Nigerians Commit Suicide in 13 Months*. <https://www.dailytrust.com.ng/80-nigerians-commit-suicide-in-13-months.html>
- Amare, T., Woldeyhannes, S.M., Haile, K., & Yeneabat, T. (2018). ‘‘Prevalence and Associated Factors of Suicide Ideation and Attempt among Adolescent high School Students in Dangila Town, Northwest Ethiopia’’. *Psychiatry Journal*, 1-9.
- Animasahun, R. A., & Animasahun, V.O. (2016).’’ Psychological Predictors of Suicide Mission among Nigerian Youths’’. *African Journal for the Psychological Study of Social Issues*, 19(1): 79-102.
- Asante, K. O., Kugbey, N., Osafo, J., Quarshie, E. N. B., & Sarfo, J. O. (2017)’’. The Prevalence and Correlates of Suicidal Behaviours’’ (ideation, plan and attempt) among adolescents in senior high schools in Ghana. *SSM-Population Health*, 3, 427–434.
- Colucci, E., & Martin, G. (2008).’’ Religion and Spirituality along the Suicidal Path’’. *Suicide and Life-Threatening Behaviour*, 38 (2), 229–244.
- dos Santos, H.G.B., Marcon, S.R., Espinosa, M.M., Baptista, M.N., & Paulo, P.M.C. (2017). ‘‘Factors Associated with Suicidal Ideation among University Students’’. *Rev. Latino-Am. Enfermagem*, 25:e2878.
- Durkheim, E., (1897). *Suicide*. New York: Free Press.
- Hawton, K., & Van Heeringen K. (2009).’’ Suicide’’. *Lancet*, 373:1372-81.
- Mac-Leva, F. Ibrahim, H & Usman, U.S. (Daily Trust June, 2018). *Students Top List as 42 Nigerians Commit Suicide in 6 Months*. <https://www.dailytrust.com.ng/students-toplist-as-42-nigerians-commit-suicide-in-6-months.html>
- Meng, H., Li, J., Loerbroks, A., Wu, J., & Chen, H. (2013).’’ Rural/urban Background, Depression and Suicidal Ideation in Chinese College Students: A Cross-Sectional Study’’. *PLoS ONE* 8(8): e71313.
- O’Connor, R.C., Platt, S., & Gordon, J., (2008).’’ *International Handbook of Suicide Prevention, Policy and Practice*’’. P. 34-8.





Omigbodun, O., Dogra, N., Esan, O., & Adedokun, B. (2008) Prevalence and Correlates of Suicidal Behaviour among Adolescents in Southwest Nigeria”. *Int J Soc Psychiatry*. 54(1):34-46.

Waern, M., Rubenowitz, E., & Wilhelmson, K. (2003). ‘‘Predictors of Suicide in the Old, elderly’’. *Gerontology*, 49(5): 328–334.

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