

Prevalence of Suicidal Behavior Among University Undergraduate Students in Western Nigeria

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ABSTRACT

The increasing suicide rates among university students have significant societal consequences, constituting a moral and social crisis, potentially harming both current families and future generations. As future leaders and professionals, students are essential to the nation's progress and socio-economic development. However, suicidal behavior among students remains a permanent setback to human capital that can impede national growth. Thus, the objective of this study was to investigate the prevalence of suicidal behavior among university undergraduate students in Western Nigeria. This study was anchored on Joiner interpersonal theory of suicide. The target population was 88,286 university students, from which a sample size of 383 participants was established using the Krejcie and Morgan (1970) formula, with a 95% confidence level and a 5% margin of error. This study employed a descriptive research design. The study employed a multistage sampling technique, comprising simple random sampling to select universities from Western Nigeria, and stratified random sampling to select participants from different departments within the selected universities. Data were collected using the standardized Suicidal Behavior Questionnaire-Revised (SBQ-R). The findings indicate that 47.3% (n = 179) of the participants reported no suicidal behavior. A slightly higher proportion (52.7%) experienced some form of suicidal behavior. Among these, 24.0% (n = 91) reported suicide planning, 21.6% (n = 82) reported suicidal ideation, while 7.1% (n = 27) reported suicide attempts. The study recommends that universities should implement routine mental-health screening by carrying out periodic, confidential screening for suicidal behavior, particularly during admission, examination periods, and other high-stress periods.

Keywords: Suicidal behavior, Suicidal ideation, Suicide planning; Suicide attempts; University students; Undergraduate students; Mental health, Western Nigeria

INTRODUCTION

The university environment, often regarded as a period of personal growth, academic achievement, and preparation for future professional careers, has increasingly been associated with substantial mental health concerns which may pave the way for suicidal behavior (Kabir, 2024; Huang, 2024). Chowdhury et al. (2023) affirm that a notable proportion of students experience suicidal behavior at some point during their academic journey due to a combination of personal, institutional environment, academic, family-related, and mental health challenges, which often serve as precursors to suicidal behavior. As amplified by Afen (2026), suicide occurrence among university students in contemporary times is becoming worrisome, as individuals purposely end their lives based on their personal existential life experiences.

The World Health Organization (2014) defines suicidal behavior as including suicidal ideation (SI), suicide planning (SP), and suicide attempt (SA), is a cognitive-based behavior involving hopelessness, pessimism and repeated or persistent contemplation of ending one's life, which may involve identifying a method, formulating a plan, or having an intent to act. The American College Health Association (2023) maintains that suicidal behavior among university students has become a significant concern worldwide. This phenomenon among university students is relatively common, with studies showing that up to 10-15% of students may experience suicidal thoughts at some point during their academic engagements.

In Portugal, Pereira and Cardoso (2015) investigated suicidal ideation among university students focusing on the prevalence and association with school and gender. A representative stratified sample was drawn from the university population of 7,102 students across four schools of the institution, located in Northern Portugal. The sample has a margin of error of 5% and a 95% confidence interval. A total of 366 students were invited to participate in the study. The sample consisted of university students aged between 18 and 58, with an average age of 21.14 (SD = 4.03). Regarding gender, 63.7% (233 participants) were females and 36.3% (133 participants) were males. During the academic year, 23.8% of students lived with their families or guardians, 66.4% lived with classmates, 8.5% lived alone, and 1.4% lived with their landlords. According to the findings of the study, the lifetime, past year and past week prevalence of suicidal ideation was 12.6%, 10.7% and 10.7%, respectively, 89.3% (n = 327) of the university students belonged to the non-suicidal ideating students. Additional findings point that 12.6% of the students asserted having wishes of being dead and 5.5% maintained that they had seriously thought of doing something to take their lives. The study confirmed that suicidal ideation was a concerning issue among university students, highlighting the need for the implementation of prevention and intervention services at this educational level.

While studies in Portugal have provided valuable insights into suicidal ideation among university students, there was a need to explore how cultural, societal, and religious contexts in Western Nigeria influence the prevalence and nature of suicidal behavior. While the study was on suicidal “ideation”, the present study focused on suicidal “behavior” which encompasses ideation, plan and attempt. Research from Portugal, as carried out by Pereira and Cardoso (2015) may not fully capture the variables in the Nigerian context. Though gender differences were explored in the Portuguese study, while the present study offered understanding of the prevalence of suicidal behavior among university undergraduate students in Western Nigeria.

In Japan, Nagamitsu et al. (2020) examined the prevalence and associated factors of suicidality in adolescents. A population-based questionnaire survey on general health was conducted with 22,419 adolescents. The study included 48% female participants and 52% male participants. Data for the research were sourced from a survey by the Promotion Council for Healthy Parents and Children. The study involved 36 public junior high schools, five private junior high schools, 10 public high schools, and six private high schools. Findings demonstrated that the overall prevalence of suicidal ideation among the participants was high, being at 25.7%. It was also found that the prevalence of suicidal ideation was 21.6% in males and 28.5% in females, and that of attempted suicide was 3.5% in males and 6.6% in females.

The study by Nagamitsu et al. (2020) was concentrated on adolescents, but university students in Western Nigeria fall within a different age group, typically between 18 and 25 years. Research specifically targeting young adults in Nigerian universities could highlight different risk factors and stressors unique to this age group, which may not be relevant for adolescents. In addition, while Nagamitsu et al.'s study was conducted in Japan, the cultural context between Japan and Nigeria is vastly different. In Nigeria, factors such as societal expectations, family dynamics, religious beliefs, and community pressures may influence mental health differently. Understanding how these local cultural factors shape suicidal behavior in Nigerian university students required focused study.

In Eritrea, Berhe and Berhane (2020) examined the prevalence of suicidal ideation and associated risk factors among college students. The study was carried out among 7 Eritrean colleges and 466 college students were employed to participate in the study, using the stratification sampling technique. Of the 460 participants, 236 (51.3%) were male and 224 (48.7%) were female. The participants' ages ranged from 18 to 30, with a mean age of 20.55 (SD = ± 1.8). The general outcome of the study indicated 25.9% had high prevalence of suicidal ideation among the college students. The college of education had the highest prevalence of moderate suicidal thought (35.9%), followed by college of engineering and science at 33.8% and 28.1% respectively. However, the college of Orotta had the lowest (12.5%) moderate suicidal thought while it had the highest severe suicidal thought 4.1% which is the same as college of marine 4.1%. Further, from the 236 male participants, 28% had moderate suicidal ideation, 1% of the students had severe ideation. Out of 224 female participants, 22% have moderate suicidal ideation and only 1% had severe suicidal ideation. This study by Berhe and Berhane (2020) revealed significant findings. While the study concentrated on suicidal ideation and associated risk factors among college students, the current study investigated the prevalence of suicidal behavior among university students in Western Nigeria. Nigeria's diverse ethnic, religious, and cultural backgrounds might result in

different risk factors and prevalence rates may be different from that of Eritrea. These gaps therefore, necessitated a localized understanding of suicidal behavior and its prevalence in Western Nigerian context.

In Ethiopia, Asfaw et al. (2020) conducted a cross-sectional study on the prevalence and associated factors of suicidal behaviors among undergraduate medical students of Haramaya University. The sample size of the study was 757 students. The study employed the simple random sampling technique in selecting the students. The mean age of the students was 22.71($\pm$ 2.62SD) years, with age ranging from 18–32 years. The male participants were 489 (68.9%) and the females were 221(31.1%), 554(78%) of the students were living in dormitory, 355 (50%) were Orthodox by religion, and 652 (91.8%) were single. Based on the outcomes of the study, the 12-month prevalence of suicidal ideation and of attempt among the participants were 23.7% high and 3.9% low respectively. Also, 28 (62.2%) students had attempted suicide once, 15(33.3%) had attempted suicide twice, and 2(4.4%) had attempted suicide more than two times. The most commonly used method of suicide attempt was poisoning 22(48.9%), followed by hanging 19(42.2%). Further, among the students who had attempted suicide, 22(48.9%) were serious or determined to kill themselves, while 21(46.7%) merely tried attempted suicide, and also 52(7.3%) and 32 (4.5%) of the students reported family history of attempted and committed suicide, respectively

Asfaw et al. (2020) focused specifically on undergraduate medical students, who may face unique academic pressures and mental health challenges distinct from other fields of study. In contrast, a study in Western Nigeria may benefit from examining students across a range of disciplines to identify any discipline-specific differences in the prevalence of suicidal behavior. The cultural and societal contexts of Ethiopia and Nigeria differ significantly. While Asfaw et al. explored the prevalence of suicidal “ideation” within an Ethiopian university setting, the influence of Nigerian sociocultural practices may contribute to the expressions of suicidal behavior differently in Nigerian university students. Therefore, this gave credence for the present study among university undergraduate students in Western Nigeria.

In Nigeria, Aroyewun et al. (2022) examined the prevalence of suicidal ideation among sample of university undergraduate students in Southwestern Nigeria. Data were gathered from 2702 participants across six universities in the southwest geopolitical zone in Nigeria. In the study, 1267(46.9%) of the participants were males and 1435 (53.1%) were females. The participants were categorized by age as follows: 1,074 (39.7%) were between 15 and 20 years old, 1,375 (50.8%) were between 21 and 25 years old, 236 (8.7%) were between 25 and 30 years old, and 20 (0.7%) were older than 30 years. The multistage sampling technique was employed to select one of the six geopolitical zones in Nigeria. The study found that the prevalence of suicidal ideation among participants was relatively low, with 44.3% of participants scoring between 20 and 41 on the suicidal ideation questionnaire. Results also indicated that a higher percentage of female participants (46.1%) experienced mild suicidal ideation compared to male participants (42.3%). Aroyewun et al. focused on prevalence of suicidal ideation among university undergraduates in Southwestern Nigeria, whereas, the current study concentrated on the prevalence of suicidal behavior which comprised of suicidal ideation, suicidal plan and suicidal attempt.

Statistics have indicated that suicide is on the increase; year by year, the suicide rate surges, although in particular nations like Nigeria, the frequency fluctuates. Nigeria with a population of over 200 million people is one of the nations faced with the issue of suicide in the world, with a suicide estimate of 17.3 per 100 000, which is higher than the global (10.5 per 100 000) and Africa (12.0 per 100 000) estimates (Onoja et al., 2023; Adewuya & Oladipo, 2020). Thus, suicide has been identified as a cause of death among university students in Nigeria, and this study examined some of the underlying causes of suicidal behavior among the students. The increasing suicide rates among students in Western Nigeria have significant societal consequences, as they pose a moral and social crisis, potentially harming both current families and future generations. The extent of suicidal behavior among university students in Western Nigeria remains largely underexplored in the existing literature. Therefore, this study sought to examine the prevalence of suicidal behavior (which encompasses suicidal ideation, suicidal plan and suicidal attempt) among undergraduate university students in Western Nigeria.

Objective of the Study

The objective of this study was to investigate the prevalence of suicidal behavior among university undergraduate students in Western Nigeria.

THEORETICAL REVIEW

A theoretical review presents appropriate theories which are used to explain the empirical observations on phenomena, and evaluates their strengths, weaknesses, and their relevance in the context of the research variables being studied (Luft et al., 2022). This section reviews the Interpersonal Theory of Suicidal Ideation (IPTSI), which focuses on explaining suicidal behavior.

The Interpersonal Theory of Suicidal Ideation (IPTSI) was developed by Thomas Joiner (2005). The theorist explains suicidal thoughts and behaviors through the interaction of perceived burdensomeness, thwarted belongingness, and capability for suicide. Perceived burdensomeness occurs when individuals believe that they are a burden to others, which may generate feelings of worthlessness, guilt, shame, and inadequacy and increase vulnerability to suicidal thoughts (Joiner, 2005; Van Orden et al., 2010). Thwarted belongingness refers to the perception of being socially disconnected, rejected, or lacking meaningful relationships with family, friends, peers, or the wider community. Such experiences may result in loneliness, isolation, and emotional distress, which are associated with increased suicide risk (Björkenstam, 2017; Hames et al., 2014). The third component, capability for suicide, refers to the acquired ability to overcome the natural fear of death and tolerate pain, which may develop through repeated exposure to painful or provocative experiences (Joiner, 2005; Van Orden et al., 2010). Thus, the theory proposes that perceived burdensomeness and thwarted belongingness contribute to the desire for suicide, while acquired capability facilitates the transition from suicidal desire to suicidal behavior. The theory is valuable because it integrates interpersonal and psychological factors, although critics argue that it may not sufficiently account for broader biological, environmental, and psychological influences on suicidal behavior (Muehlenkamp, 2017).

In the present study, the theory provides a useful framework for explaining the relationship between internet addiction and suicidal behavior among university students in Western Nigeria. Excessive internet use may reduce face-to-face interaction and contribute to social withdrawal, loneliness, emotional difficulties, depression, and anxiety, thereby increasing students' experiences of thwarted belongingness. Internet addiction may also contribute to academic, social, and family difficulties, which can intensify feelings of inadequacy and perceived burdensomeness. Furthermore, prolonged exposure to distressing online content or other potentially harmful online environments may contribute to desensitization to pain or death, potentially relating to the capability component of the theory. Therefore, the IPTSI helps explain how excessive internet use may interact with interpersonal disconnection and psychological distress to increase vulnerability to suicidal ideation and behavior among university students. The theory consequently provides an appropriate framework for examining how interpersonal experiences associated with internet addiction may contribute to suicidal outcomes in the study population.

METHODOLOGY

This study employed a descriptive research design so as to determine the prevalence of suicidal behavior among undergraduate university students in Western Nigeria. A descriptive research design was considered suitable because it enabled the researcher to systematically describe the extent and distribution of suicidal behavior within the target population without manipulating any study variables. This design further facilitated the collection of quantitative data from a large sample of undergraduate students, thereby providing an accurate representation of the occurrence of suicidal behavior in the study area.

The study targeted a population of 88,286 undergraduate students enrolled in four state universities in Western Nigeria. The sample size of 383 participants was determined using the sample size determination formula by Krejcie and Morgan (1970). Following proportionate allocation, the sample was distributed across the selected universities based on their respective undergraduate student populations. Table 1 presents the resulting sampling frame for each participating university. To uphold the ethical principles of confidentiality and

anonymity, the identities of the participating universities were withheld and represented using coded identifiers.

Table 1 Quantitative Sampling Frame

Name of universities	Target population	Sample size	Percentage
University A	17,295	75	19.5%
University B	29,991	130	33.9%
University C	11, 000	48	12.7%
University D	30, 000	130	33.9
Total	88, 286	383	100%

This study employed a multistage sampling procedure to select the study participants. In the first stage, simple random sampling was used to select four state universities from the 15 state universities located in Western Nigeria. The universities were drawn from the four states within the region to ensure adequate representation of the study population. Based on the second stage, a stratified random sampling technique was employed to select undergraduate students. The students were first stratified according to their academic levels, after which simple random sampling was conducted within each stratum to select the study participants. This approach ensured proportional representation of students across the different academic levels and disciplines, thereby enhancing the representativeness of the sample. Data were analyzed using the Statistical Package for the Social Sciences (SPSS) version 26. Descriptive statistics, including frequencies, percentages, means, and standard deviations, were used to summarize the data. Inferential statistics, specifically the independent-samples t-test, was employed to determine whether statistically significant differences existed between suicidal behavior and undergraduate students' demographics characteristics.

Ethical principles were strictly observed throughout the conduct of this study. Ethical approval was first obtained from the Department of Psychology at the Catholic University of Eastern Africa (CUEA) in Nairobi County, Kenya. Subsequently, authorization to conduct the study was granted by the National Health Research Ethics Committee (NHREC), the regulatory body responsible for overseeing ethical standards and research protocols in Nigeria. Additional permission was obtained from each of the four participating state universities in Western Nigeria before data collection commenced. Data were collected using two instruments. The first instrument gathered participants' socio-demographic information, while the second was the Suicidal Behaviors Questionnaire-Revised (SBQ-R), developed by Osman et al. (2001), which was used to assess suicidal behavior among the participants.

Based on the response rate of this study, a total of 383 questionnaires (being the sample size) were distributed, all of which reached the intended respondents. Out of these, 372 questionnaires were duly completed and returned, while 11 questionnaires were not returned, representing a non-response rate of 2.9%. The overall response rate was therefore 97.1%. The response rate of 97.1% is exceptionally high and indicates strong participant engagement and cooperation in the study. Creswell and Creswell (2018) argue that a high return rate minimizes non-response bias and enhances the credibility, reliability, and representativeness of the data collected.

Further, the participants were classified into four age groups. The highest proportion of respondents was between 18 and 21 years of age, being 38.2% (n = 142) of the sample. Participants aged 30 years and above constituted 24.5% (n = 91), followed by those aged 22–25 years at 22.8% (n = 85). The lowest representation was recorded among participants aged 26–29 years, who comprised 14.5% (n = 54) of the sample. Regarding gender distribution, female students constituted a slightly larger proportion of the participants, representing 54.0% (n = 201), whereas male students accounted for 46.0% (n = 171). In addition, more than half of the undergraduate students (51.1%, n = 190) resided off campus, whereas 48.9% (n = 182) were campus residents.

Further, an independent-samples t-test was conducted to examine differences in suicidal behavior based on the demographic characteristics of the participants. The results of the analysis are shown in Table 2.

Table 2 Differences in Suicidal Behavior in age categories among undergraduate students

Suicidal Behavior	Age categories	N	Mean	Std. Deviation	Std. Error Mean	Sig.(2-tailed)
	18-21 years	142	6.1972	3.16057	.26523	.254
	22-25 years	85	6.7294	3.74925	.40666	
	26-29 years	54	6.6296	4.23951	.57692	
	30 years	91	5.7363	3.05445	.32019	

The findings as observed in 2 show that undergraduate students aged 22–25 years recorded the highest mean score for suicidal behavior ($M = 6.73$, $SD = 3.75$), followed by those aged 26–29 years ($M = 6.63$, $SD = 4.24$). Students aged 18–21 years had a mean score of 6.20 ($SD = 3.16$), whereas those aged 30 years and above reported the lowest mean score ($M = 5.74$, $SD = 3.05$). Although variations in the mean scores for suicidal behavior were observed across the different age categories, the differences were not statistically significant ($p = .254 > .05$). This finding indicates that suicidal behavior did not differ significantly across the age groups of the undergraduate students who participated in the study.

Following the analysis of differences in suicidal behavior across age categories, the study further examined whether these variables differed according to the gender of undergraduate students in Western Nigeria. An independent samples t-test was conducted to compare the mean score differences of male and female students on suicidal behavior. Table 3 shows the findings.

Table 3 Differences in Suicidal Behavior regarding gender among undergraduate students

Suicidal Behavior	N	Mean	Std. Deviation	Std. Error Mean	Sig.(2-tailed)
Male	171	5.9532	3.55099	.27155	.104
Female	201	6.5373	3.36004	.23700	

The results in Table 3, indicated no statistically significant difference in suicidal behavior between male and female undergraduate students ($p = .104 \geq 0.05$). Although female students recorded a slightly higher mean score for suicidal behavior than male students, and the observed difference was not statistically significant. This indicates that both male and female students experienced relatively comparable levels of suicidal behavior, and gender did not significantly influence the occurrence of suicidal behavior among the respondents. Following on the analysis of gener-related differences in suicidal behavior, the study further investigated differences in suicidal behavior based on students' place of residence. The outcomes are presented in Table 4.

Table 4 Differences in Place of residence among undergraduate students

Place of Residence	N	Mean	Std. Deviation	Std. Error Mean	Sig.(2-tailed)
Campus resident	182	6.6813	3.73982	.27721	.024

Off campus resident	190	5.8737	3.12099	.22642	
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The findings indicate that students residing on campus had a higher mean score ($M = 6.68$, $SD = 3.74$) than those residing off campus ($M = 5.87$, $SD = 3.12$). The difference in mean scores was statistically significant ($p = .024$), since the p -value is less than the conventional significance level of .05. This suggests that place of residence is associated with differences in the study variable, with campus residents exhibiting higher level of suicidal behavior than their off-campus counterparts.

FINDINGS

Prevalence of Suicidal Behavior Among Undergraduate University Students in Western Nigeria

The objective of this study aimed to assess the prevalence of suicidal behavior among undergraduate university students in western Nigeria. Descriptive statistical analysis was used to measure the prevalence of suicidal behavior among the participants. Thus, a score of 11 or higher = high risk suicidal behaviors, and a score of 6 or lower = low risk of suicidal behaviors. The outcome of the statistical analysis is presented in Table 5.

Table 5 Prevalence of Suicidal Behavior Among Undergraduate Students

Prevalence	Frequency	Percentage
Suicide Ideation	82	21.6%
Suicide Planning	91	24.0%
Suicide Attempt	27	7.1%
No Suicide Behavior	179	47.3%
Total	372	100%

The findings indicate that almost half of the participants (47.3%) of this study reported no suicidal behavior. This suggests that a considerable proportion of the population was not experiencing suicidal behavior. However, a slightly higher proportion (52.7%) experienced some form of suicidal behavior. Among these, 24.0% reported suicide planning, 21.6% reported suicidal ideation, and 7.1% reported suicide attempts. The relatively high rates of suicidal behavior possibly point to underlying psychological distress among undergraduate students, which may escalate if not addressed.

These findings can be understood in light of Joiner's Interpersonal Theory of Suicide, which argues that suicidal behavior is more likely when individuals experience thwarted belongingness and perceived burdensomeness, together with an acquired capability for suicide. The considerable proportion of students reporting suicidal ideation and planning suggests that some may experience feelings of social disconnection, loneliness, or perceived lack of meaningful interpersonal relationships, which can contribute to suicidal desire. The higher prevalence of suicide planning compared with ideation may further indicate that a substantial number of students experiencing suicidal thoughts had progressed toward more organized suicidal thinking. Although only 7.1% reported an attempt, this result is significant because the theory emphasizes that suicidal desire alone does not necessarily result in an attempt unless the individual also develops the capability to engage in potentially lethal self-harm.

DISCUSSION

The findings of the present study are related to the finding of Nagamitsu et al. (2020). Their study demonstrated that the overall prevalence of suicidal ideation among the adolescents was high, being at 25.7%.

The outcome of this study confirms that of Berhe and Berhane (2020) examined the prevalence of suicidal ideation and associated risk factors among college students. It was indicated 25.9% of the participants had high prevalence of suicidal ideation among the college students. Based on departmental levels, the college of education had the highest prevalence of moderate suicidal thought (35.9%), followed by college of engineering and science at 33.8% and 28.1% respectively, and they are slightly higher than the finding of the current study. The current study's outcomes corroborated those of Asfaw et al. (2020). They reported that the prevalence of suicidal behavior among the participants were 23.7% high (suicidal ideation) and 3.9% low (no suicidal behavior) respectively.

Selak et al. (2024) attributed social support as one of the protective factors for low score on suicidal behavior among university students. The authors argue that strong social support from family, friends, or peers is one of the most consistent protective factors that is connected to lower suicidal behavior among university students. Students who feel emotionally supported, have fulfilling interpersonal relationships, and are able lean on others during stressful life times are less likely to report suicidal ideation, plans and attempt. Higher perceived social support is associated with reduced risk of suicidal ideation and attempts because it helps students cope with stress and adversities of life more effectively. In addition, as noted by Cecchin et al. (2024), another strong reason for low score on suicidal behavior among university students is "resilience". Students with stronger internal resources, like resilience, good problem-solving skills, and adaptive coping mechanisms, tend to manage negative emotions and stressful academic pressures better. Increased resilience is linked with significantly lower likelihood of suicidal ideation among tertiary students.

Owusu-Ansah (2020) also added that positive self-esteem, meaning in life, and overall psychological well-being protect humans against suicidal behaviors. Students with high self-esteem are incline to perceive life challenges as manageable and believe they tenaciously have value and capability, which lowers risk of suicidal behavior. In this, a sense of purpose or meaning in life may possibly mediate feelings of hopelessness and reduce suicidal behaviors among students. Cecchin et al. (2024) further established that university terrains that offer accessible mental health resources, supportive institutional faculty, peer groups, and structured programs can amplify a possible lower suicidal behavior score in among university students. The authors held that institutional support could help students feel understood, less stigmatized, and as well more likely to seek help before crises worsen.

Students with no suicidal behavior are generally functioning without suicidal thoughts or planning. However, Nyer et al. (2013) submit that students with no suicidal behavior does not mean there is no life distress among university students. Low risk can still be associated with stress, anxiety, or life challenges but without sustained suicidal behaviors such as ideation, plan and attempt. It is likely that psychological distress among students is not always link to suicidal behavior. Based on the participants' scores between suicide ideation and suicide planning behavior, Luceño-Moreno et al. (2025) notes that there are several factors that possibly contribute to the various domains of suicidal behavior among university students. They point that the high prevalence of psychological distress such as symptoms like anxiety, depression, exhaustion, and stress strongly contribute to moderate and high scores on suicidal behavior among students. Students who experience these mental health challenges are more likely to report suicidal behaviors than students without them. The authors concluded that greater stress, anxiety as well as depressive symptoms were connected with a higher occurrence of suicidal behavior.

There is also the reason for high academic demand as another contributory factor to moderate and high levels of suicidal behaviors among students. According to Afen (2022), academic performance is very crucial for university students as it reveals students' grasp of knowledge during the periods of studies. However, Okechukwu et al. (2022) contend that academic demands, for example, heavy school workloads, fear of failure as well as pressure to achieve certain grades significantly heighten stress and feelings of inadequacy among students. Academic stress is associated with mental health strain and it likely contribute to higher scores on suicidal behavior measures. The authors in their study established that academic stress ($r = 0.17$; $p.001$) was found to be positively associated with suicidal behaviors, which are suicide ideation suicide planning, and suicide attempt. Another possible reason for in all the domains of suicidal behavior among students is financial difficulties and economic stressors. Dachew et al. (2016) affirm this by maintaining that economic pressures such as struggles paying tuition, living expenditures or some students balancing work with study are frequently

connected with elevated suicidal behavior scores. The authors added that financial distress predicts suicidal behavior, possibly because economic strain compounds other stressors and could intensify feelings of hopelessness and pessimism.

Thus, suicide attempt scores among undergraduate students highly reflect a combination of internal and external factors which comprised of psychological distress, academic stress, limited social support, economic strain as well as earlier adverse experiences. These factors strongly interact in multifaceted ways paving way to suicidal behaviors among university undergraduate students.

CONCLUSION

The study concludes that suicidal behavior constitutes a significant mental health concern among undergraduate students, encompassing suicidal ideation, planning, and attempts. The findings demonstrate that suicidal experiences occur across different levels of severity, with a substantial proportion of students reporting no suicidal behavior while others experience thoughts, plans, or attempts. Therefore, the study establishes that suicidal behavior is a weighty concern within the undergraduate student population and highlights the complex nature of students' experiences with suicidal thoughts and behaviors. The findings therefore stress the presence of suicidal behavior as a significant psychological and student-wellbeing concern within the study population.

RECOMMENDATIONS

Owing this study's establishment, universities should implement routine mental-health screening; given that 52.7% of participants reported some form of suicidal behavior, universities should establish periodic, confidential screening for psychological distress and suicidal behavior, particularly during admission, examination periods, and other high-stress periods. In addition, universities should develop clear procedures through which lecturers, academic advisers, residence staff, and student leaders can recognize warning signs and refer students to appropriate professional services.

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