

Predictors of Suicidal Behavior Among University Undergraduate Students in Western Nigeria

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ABSTRACT

Suicide is a significant mental health concern, characterized by the intentional act of taking one's own life. The objective of this study was to examine predictors of suicidal behavior among university students in Western Nigeria. The study employed a phenomenological research design to explore the lived experiences and perceptions of university students concerning the phenomenon under investigation. Participants were recruited through purposive sampling to ensure the inclusion of individuals with firsthand experience of the issue being studied. A total of eight participants were selected from four universities in Western Nigeria, with two participants drawn from each institution. The sample size was guided by the principle of data saturation. Data were collected through individual semi-structured interviews, which were audio-recorded with participants' informed consent while maintaining strict confidentiality and anonymity. The data were analyzed using thematic content analysis, and the findings were presented narratively according to the emerging themes. Findings on predictors of suicidal behavior among university students included academic pressure, institutional stressors, socio-economic challenges, social comparison, psychological vulnerability, and lack of support systems. The study recommends that the university administrations should take a leading role in establishing comprehensive mental health wellness systems within their institutions by introducing routine screening programs to identify students at risk of suicidal behavior at an early stage.

Keywords: Mental Health, University Students, Suicide, Suicidal Behavior, Western Nigeria.

INTRODUCTION

Suicide is a major public health concern because it involves the intentional act of ending one's own life and represents the culmination of a continuum of self-destructive thoughts and behaviors. Globally, suicide disproportionately affects young people, with approximately 76.8% of individuals who die by suicide being younger than 30 years (WHO, 2019). According to the World Health Organization (WHO, 2014), suicidal behavior encompasses three interrelated components: suicidal ideation (SI), suicide planning (SP), and suicide attempt (SA).

Suicidal ideation is the initial stage of suicidal behavior and refers to persistent thoughts, wishes, or preoccupations with ending one's life. These thoughts are often accompanied by feelings of hopelessness and pessimism and may progress to identifying a method, developing a plan, or forming an intention to act. If left unrecognized and untreated, suicidal ideation may escalate into more severe forms of suicidal behavior. Suicide planning involves the deliberate formulation of specific strategies and preparations for carrying out a suicide attempt, while a suicide attempt refers to the intentional execution of self-injurious behavior with the aim of ending one's life, irrespective of whether death occurs. Hence, suicidal ideation, suicide planning, and suicide attempts constitute a continuum of suicidal behavior, with suicide attempts representing a critical predictor of completed suicide and one of the strongest indicators of future suicide risk (He et al., 2024; Chidozie et al., 2023; Klonsky et al., 2016).

Research conducted across 40 low-and middle-income countries found that 17.2 % of individuals reported having made suicidal attempts, with older adolescents and females being the most affected (Liu et al., 2018).

According to Agrawal and Talapalliwar (2019), there are various mental health conditions, including bipolar disorder, sociopathy disorder, anxiety disorders, substance use disorders, chronic depression, and dementia, contribute to the underlying causes of suicidal behavior.

In England and Wales, Gunnell et al. (2020) carried out a study on the incidence of suicide in university students. According to the study's findings, a total of 1,330 students died by suicide between 2000/01 and 2016/17. Among them, 878 (66%) were male and 452 (34%) were female. The median age at the time of death was 26 years, with an age range of 18 to 82 years, and 766 (58%) of the individuals were aged 30 or older. The suicide incidence rates were as follows: 2.8 per 100,000 for those aged 18-20 years, 5.0 per 100,000 for those aged 21-24 years, 5.9 per 100,000 for those aged 25-29 years, and 6.4 per 100,000 for individuals aged 30 and above. The annual incidence rate for suicide in the 2015/16-2016/17 period was 4.7 per 100,000 students. The data showed an increase in the incidence since 2009/10, with an incidence rate ratio of 1.04 per year (95% CI 1.00-1.07, $p=0.029$). From 2012/13 to 2016/17, the incidence rate was less than half that of the general population within the same age group. There was also some indication of a lower risk of suicide among black students compared to white students, with a relative risk of 0.53 (95% CI 0.32-0.88). Further, there was statistical evidence showing that the suicide methods used by students differed from those in the general population aged 18-29 years (chi-square (df 4) = 55.36; $p<0.001$), although the differences, except for jumping, were generally small. Among students, 49.9% used hanging (compared to 59.8% in the general population), 17.6% used poisoning (compared to 17.7%), 8.2% used jumping (compared to 4.2%), 3.1% used drowning (same as in the general population), and 21.1% used other methods (compared to 15.3%).

This study by Gunnell et al. revealed some significant findings. However, the study focuses on students in England and Wales, where societal norms, mental health awareness, and academic pressures may differ from those in Western Nigeria. In addition, the Gunnell et al. study found a higher incidence of suicide among males (66%) compared to females (34%). However, in some cultures, like those in Western Nigeria, societal pressures and gender expectations may affect the way male and female students experience and express suicidal ideation. The study also used the descriptive research design, whereas, the current study utilized the phenomenological design and as well responded to the objective on predictors of suicidal behavior among university undergraduate students in Western Nigeria.

Sara et al. (2024) conducted a study in Bangladesh, examining the prediction of suicidal thoughts and the risk factors among university students in the southern region of the country using a machine learning approach. The study involved a sample of 584 participants, with 51.5% identifying as male and 48.5% as female. Most of the participants were unmarried (78%). The findings indicated that factors such as gender, bullying, anxiety, loneliness, financial difficulties, pressure to perform well academically, socioeconomic status, and previous suicidal behavior were significant contributors to suicidal ideation.

Similarly in Brazil, Santos (2017) conducted a study to explore factors linked to suicidal ideation among university students at the Federal University of Mato Grosso. The study involved 637 students, and it was found that 9.9% of them had experienced suicidal thoughts in the past 30 days. Specifically, 9.9% of students answered "yes," while 90.1% answered "no." The study also revealed that alcohol consumption and depressive symptoms were significantly associated with suicidal ideation, with statistically significant results ($p=0.002$). These studies from Bangladesh and Brazil showed significant outcomes. Though, the studies primarily focused on quantitative data, leaving a gap in understanding the nuanced, lived experiences of students. This study aimed address this gap by exploring the underlying factors contributing to suicidal behavior from the perspectives of university students themselves in Western Nigeria.

In South Africa, Seedat et al. (2025) carried out research examining the prevalence and factors influencing suicidal thoughts among students in the Health Sciences field. An online survey was distributed to 4,089 students enrolled in the Faculty of Health Sciences, with a majority of the participants being female (73.6%). A significant portion of the respondents (71.0%) did not live in university accommodations. Individuals with disabilities represented 3.1% of the sample. The study's results indicated that elements such as financial difficulties, lack of scholarships, exposure to violence, and family-related issues are key factors contributing to suicidal ideation.

Another investigation in South Africa by Alabi et al. (2021) examined the prevalence and contributing factors of suicidal thoughts among college students in the Nelson Mandela Bay Municipality. The study found that 30.1% of female students experienced suicidal ideation at some point in their lives, in contrast to 15.5% of male students. This difference is frequently linked to various factors, including sexual harassment, pre-existing health issues, gender-based violence, societal expectations on women, academic failure, and conflicts in relationships.

Both Seedat et al. and Alabi et al. study concentrated exclusively on suicidal ideation, which serves as a significant early warning sign. However, their research did not delve into suicidal planning or attempts, which are more direct and predictive aspects of suicidal behavior. In contrast, the current study broadened the scope by examining the entire spectrum of suicidal behavior, including ideation, planning, and potential attempts. Seedat et al. restricted their research to Health Sciences students, while Alabi et al. confined their analysis to a specific geographic area (Nelson Mandela Bay). Consequently, the results from these studies may not be applicable to the entire university student population. This present study involving university undergraduate students from various disciplines and institutions in Western Nigeria, offered a more comprehensive perspective and a wider range of students' experiences.

In Ghana, a study conducted by Salifu and Yidana (2024) examined the prevalence of suicidal thoughts and the related risk factors among undergraduate students at the University for Development Studies. The research involved a sample of 375 participants drawn from a total population of 6,183. To address issues of incomplete surveys and missing responses, an additional 10% was added to the initial sample, resulting in a total of 412 students included in the analysis. The findings indicated that the lifetime prevalence of suicidal ideation among these university students was 22.5%, with academic stress and financial hardship identified as significant contributing factors. Among the respondents, 142 students reported experiencing academic stress, with 80 of them indicating they were not meeting their personal academic objectives. Notably, those struggling to keep pace with their coursework exhibited the highest rates of suicidal thoughts, at 42.9%. Furthermore, the study highlighted a concerning case involving a third-year medical student from the University of Ghana, who tragically took his own life after sharing several posts on social media that suggested suicidal behavior. He posited:

Now I put the phone down to do some actual studying; Some days I feel like a King; other days I wish for death, need a new life, this one is broken, sometimes I feel like I'm fading away.

This started after he had failed courses and was billed to repeat.

In Kenya, a study was carried out by Obinna et al. (2021) academic stress as a predictor of suicide ideation among university students in Nairobi County, Kenya. The target population was 128,984 students. The sample size was 398 respondents. Academic stress was one of the significant contributing factors to suicidal ideation among student. The study used the correlational research design, while the present study adopted the mixed method research paradigms.

Similarly in Kenya, Afen (2026) conducted a study on factors associated with suicidal ideation among university students in Karen, Nairobi County. The study comprised of 10 participants. An interview guide was utilized in the study. According to the study's findings, factors contributing to suicidal ideation among university students included high expectations to perform well academically, and heartbreak from romantic relationship. With regards to high expectations to perform well academically, one of the participants submitted:

Because poor performance, sometimes the parents are expecting this from you, and maybe you've tried your best, but you are not able to achieve that, shame and guilt can lead to suicidal ideation. You can also give the best according to yourself, but it does not reciprocate when it comes to the results in the school, especially with the.... with the outgoing form of education, where performance is key. Like the grade is really key. Anything contrary to what your parents expect, yeah, that one can easily make you think. Maybe to also think of the same aspect of performance. Remember when they said first, rejection by the, by the peers, okay, they may reject you because you're not performing or sometimes also performing well, but they are not performing well on your site. So, they reject you from their group. So, they go hand in hand in the group that you're going

to be in, because most of the times you will not find somebody who's performing very poorly associated with those who are performing very high and then the parent wants you to associate with those who are performing and it is automatic. (Participant 1 Interview, Female, 22 years, 30/5/ 2026).

Another participant also shared a similar sentiment with regards to the expectation to perform well in academics:

I think as a university student, I think one number one factor would be academic pressure, you know, the higher expectations to perform well. And that fear of failing, and the implications that it might bring, and also feel like financial stress, you know, many of us come from humbling backgrounds, so could be struggling with our parents could be struggling with raising fees, and you know, that they're doing their best, but it's also beyond them. And just having that stress, whereby you're not able to pay fees in good time. Or maybe you don't have fees for pocket money or for accommodation. As we know, tuition is very high, the cost is high, and living expenses also high. So, if you don't have any support in terms of scholarship, or it could give you that stress, that can lead to want to want to take their own life think. (Participant 2 interview, Male, 3/5/ 2026).

With regards to the finding on “heartbreak from romantic relationship” as one of the factors contributing to suicidal behavior among university students in Karen-Nairobi, Kenya, one of the participants submitted:

My boyfriend broke up with me. I couldn't believe he can do that to me. I was the one providing most things in the house, when he was financially down. We shared intimate moments, exchange gifts. One day he texted me that “it is over”, I called several times and days, he refuses to pick my calls. I felt the world has ended. No more hope in life. I felt rejected and abandoned. It was the worst experience of my life. I thought of killing myself, because there was no reason to live. (Participant 6 interview, Male, 13/5/2026).

Suicidal behavior among university students is a multifaceted issue influenced by various interrelated factors. These can be categorized into psychological, social, environmental, cultural, and substance-related factors.

In Nigeria, Babatunde (2020) conducted a study on suicidal ideation among undergraduates in Nigeria. The sample size of the study was 203 undergraduate students. The ages of the participants ranged from 18-29 years, with a mean age of 22.53% and a standard deviation of 2.33%. The result from the regression analysis showed that suicidal ideation was not significantly predicted by academic stress, $F(1,196) = -.457, P < .05$. Similarly, Akpunne et al. (2022) investigated suicidal tendencies among Nigerian university students, focusing on their links to gambling disorders and emotional dysregulation. The research involved 1,338 undergraduates, with an average age of 19.84 ± 3.22 years, who were selected through a combination of random and purposive sampling methods for the universities and participants, respectively. Among the participants, 512 were males (38.3%) and 826 were females (61.7%). The findings indicated that both gambling disorders and emotional dysregulation were strong contributory factors to suicidal behaviors in this student population. These studies by Babatunde (2020) and Akpunne et al. (2022) employed the quantitative research method, while the present study explored predictors of suicidal behavior among university students in Western Nigeria; employing the phenomenological study design.

METHODS

A research design provides the overall framework that directs the systematic collection, analysis, and interpretation of data to address a research problem. It serves as a blueprint for transforming research questions into empirical evidence, thereby ensuring that the findings generated are valid, reliable, and aligned with the study objectives (Asenahabi, 2019). This study employed a phenomenological research design to gain an in-depth understanding of the lived experiences and perceptions of undergraduate university students regarding suicidal behaviour in Western Nigeria. The study was conducted among undergraduate students drawn from four universities in Western Nigeria. The researcher utilized a simple random sampling to select State Universities from four States in Western Nigeria. According to Bryman (2016), simple random sampling is a probability sampling technique where each individual or unit in a population has an equal chance of being selected to participate in a study. The simple random sampling technique was used to select 4 universities from a total of 15 State Universities in Western Nigeria to participate in the study. This constituted 40%, a

proportion deemed appropriate according to the recommendation of Mugenda and Mugenda (2013). In addition, participants were selected using purposive sampling, a non-probability sampling technique widely used in qualitative research to recruit individuals who possess firsthand experience and are capable of providing rich, relevant, and detailed information about the phenomenon under investigation. Prior to data collection, the researcher identified and recruited participants who met the study's inclusion criteria to facilitate a comprehensive exploration of the research objective, which was to examine predictors of suicidal behaviour among university students in Western Nigeria.

A total of eight participants were recruited, with two participants selected from each university. The sample size was guided by the principle of data saturation, which refers to the stage at which no new themes, concepts, or insights emerge from additional interviews. Data saturation indicates that sufficient information has been obtained to achieve a comprehensive understanding of the phenomenon under investigation. Previous methodological studies have demonstrated that, within relatively homogeneous qualitative samples, data saturation is commonly achieved with approximately 6 to 12 interviews, depending on the complexity of the research questions and the richness of the data (Guest et al., 2006; Hennink et al., 2017). Consequently, a sample of eight participants was considered adequate for this study.

Further, data were collected through individual face-to-face interviews using a semi-structured interview guide comprising predominantly open-ended questions. This approach enabled participants to describe their experiences and perspectives in detail while allowing the researcher to probe further and seek clarification where necessary. With the informed consent of the participants and in accordance with established ethical principles, all interviews were audio-recorded to ensure the accurate capture of participants' narratives. The audio recordings were transcribed verbatim to preserve the authenticity of the participants' accounts. Each transcript was carefully reviewed through proofreading and editing to correct typographical, spelling, and punctuation errors without altering the original meaning of the responses. The transcripts were subsequently read repeatedly to facilitate familiarization with the data before conducting a thematic content analysis. Thematic analysis was undertaken to identify, analyse, and interpret recurring patterns and themes that reflected participants lived experiences and perceptions of suicidal behaviour. The participants represented diverse socio-demographic backgrounds, including different age groups, both male and female students, and various levels of undergraduate study. These diverse characteristics enhanced the breadth of perspectives obtained and enriched the understanding of the phenomenon under investigation.

Ethical principles governing research involving human participants were strictly observed throughout the study. Ethical approval was obtained from the Department of Psychology at the Catholic University of Eastern Africa (CUEA). In addition, ethical clearance and authorization to conduct the study were granted by the National Health Research Ethics Committee (NHREC), the body responsible for regulating and overseeing ethical research involving human participants in Nigeria. Permission to conduct the study was also obtained from each participating university. Before participation, all respondents received detailed information regarding the purpose and procedures of the study and voluntarily provided written informed consent. To uphold the ethical principles of confidentiality and anonymity, the identities of the participating universities were concealed and replaced with coded identifiers throughout the study. This precaution was taken to protect the institutions from potential stigmatization or reputational harm that could arise from their association with sensitive issues such as suicidal behaviour among undergraduate students. Table 1 presents a summary of the socio-demographic characteristics of the study respondents. The code UUS given to the respondents signifies the acronym for "University Undergraduate Student". The respondents involved in the interviews were requested to indicate their gender, age and level of studies as tabulated.

Table 1 Demographic of Respondents

Code	Universities	Gender	Age	Level of studies	Dates
UUS1	A	F	26	Year 3	January 11th 2026
UUS2	A	F	23	Year 1	January 21 st 2026

UUS3	B	M	31	Year 2	January 16 th 2026
UUS4	B	M	20	Year 1	February 2 nd 2026
UUS5	C	M	27	Year 4	February 9 th 2026
UUS6	C	F	24	Year 3	February 9 th 2026
UUS7	D	M	26	Year 2	February 9 th 2026
UUS8	D	M	30	Year 4	March 8 th 2026

Out of the eight participants, five were males and three were females. This indicates that males constitute 62.5%, while females account for 37.5%. The ages of the participants ranged from 20 to 31 years, indicating a relatively young adult population. The majority of participants fall within their mid-to-late twenties. This suggests that most participants were within the typical age range for undergraduate students. There was an even distribution across all academic levels, with each year of study equally represented. This distribution allows for a balanced perspective across different stages of academic progression. Thus, the four universities were all represented, with each of the universities having two respondents respectively.

Results

The objective of this study was to examine predictors of suicidal behavior among undergraduate university students in western Nigeria. A thematic content analysis was employed to systematically examine participants' narratives and experiences. From the analysis, several key themes emerged, reflecting the complex and multifaceted nature of suicidal behavior within this population: Academic pressure and institutional stressors, socio-economic challenges and social comparison, and psychological vulnerability and lack of support systems. Findings revealed that suicidal behavior among undergraduate students is shaped by a complex interaction of academic, socio-economic, psychological, and environmental factors. Participants consistently described how intense academic pressure, financial hardship, social comparison, emotional distress, and weak institutional support systems contribute to students' vulnerability. Across interviews, students demonstrated awareness of warning signs such as withdrawal, depression, and behavioral changes, while also highlighting systemic gaps in mental health awareness and support within universities.

Academic Pressure and Institutional Stressors

The respondents overwhelmingly identified the rigorous academic environment and institutional demands as major contributors to suicidal behavior. The pressure to perform, fear of failure, and overwhelming workload often lead to stress, burnout and depression, which are precursor to suicidal behaviors. One of the respondents asserted:

Hmmm, I...think, the university, especially this one, is very competitive. There is this constant pressure on students to measure up with others who have higher GPAs, and it feels like eh... you are always being compared, whether directly or indirectly. Some students are even working alongside their studies just to survive or support themselves, so they are not able to give their full attention to their academics. It becomes very overwhelming trying to balance everything. Then when the results come out and they don't meet expectations, it can be very discouraging. At that point, some of them begin to feel like they are not good enough, and that feeling can lead to depression and, in some cases, suicidal thoughts. (UUS2 Interview, January 11th 2026).

There was a respondent who added her narrative:

Hopelessness. Yes, maybe, okay, for instance, I am, for just an example, like my grades are terrible, you know? I think pass mark is 45. Even though it's just a little above, oh, no, it's- I think the pass mark is 45, 30 is below. Oh, I mean, 45 about 100. Oh, okay, yeah, yeah, yeah, in total, yes, yes, yes. So, someone like that,

the person usually starts feeling, person becomes kind of depressed, maybe. The person becomes depressed. You know, the person sees their inter-course mates excelling, doing well, but no matter how much the person falls into reading and studying and doing TDB (Till dawn break) and everything, the person does not do well. So, I think that's a factor. Okay. Yes, in 300 level, they said, we have to pay extra 50,000 Naira, psychology students for laboratory, human laboratory. Different from your school fees? Yes, and we've never seen the laboratory, we've never used, till now, we've never, it was in 300 level and 400 level, we've never seen the laboratory. We've never seen the laboratory till now. Yeah, that was the time when people were protesting. That same time, they increased, they brought, they just brought 50,000 Naira. So, I, at that moment, at that time, I had not paid my school fees yet. Not to talk of the extra 50,000, I was looking for how to pay my school fees. Not to talk of the extra 50,000 Naira they included. So, it was really, it was, let's say, mental, yes, because I had to start thinking about how will I get money, and there was a deadline for payments. (UUS8 Interview, Male, March 8th /2026).

This finding reflects academic pressure and performance-related stress as one of the key factors contributing to suicidal behavior among students. The respondent highlights how a highly competitive university environment fosters constant comparison, which undermines students' self-worth. The added burden of combining academic work further reduces students' capacity to cope effectively. When academic outcomes fall below expectations, it is possible that students may internalize failure, leading to feelings of inadequacies. It also highlights that academic stress is not just about workload, but also includes fear of failure, unrealistic expectations, and institutional rigidity, all of which contribute significantly to emotional distress and suicidal ideation.

Another respondent added:

Academic failure is a big factor. Some students are really scared of failing, not just because of the grades themselves, but because of what it means to them and the expectations around them. Instead of facing the situation or trying to improve, they become overwhelmed by the fear and pressure. It starts to feel like too much to handle, especially when they think about disappointing their family or themselves. At that point, some of them begin to lose hope and feel like there is no way out, and they may start thinking that it is better not to continue life at all. (UUS6 Interview, Female, February 9th /2026).

This respondent's statement stresses how fear of academic failure operates as a powerful psychological stressor, particularly among students who perceive failure as catastrophic rather than manageable. The anticipation of failure creates intense anxiety and emotional overwhelm, which can impair coping abilities. Instead of confronting academic challenges, some students resort to avoidance, withdrawal, or hopeless thinking, where discontinuing life itself is perceived disturbingly as an escape from perceived failure. This reflects a pattern of maladaptive coping. Other respondents also highlight that academic stress is not just about workload, but also includes fear of failure, unrealistic expectations, and institutional rigidity, all of which contribute significantly to emotional distress and suicidal behaviors. They narrated:

Hmmmm, some students are trying to balance academics with side gigs and other things they feel will help them survive or succeed in life. Okay., along the way, they start to lose focus on their studies because they are putting more energy into those side hustles. At some point, they even begin to feel like academics are not as important anymore, especially when they believe that even if they graduate with very good grades, it still does not guarantee them a job or a better future. That mindset can really affect them mentally, because they feel confused, unmotivated, and uncertain about what they are even working towards. (UUS1 Interview, Female, 13/1/2026). This university is a tough system... some students are motivated, but others feel frustrated because they put in effort and still get poor results (UUS7 Interview, Male, February 11th 2026).

These narratives highlight how competing demands and disillusionment with academic outcomes undermine students' motivation and mental well-being. Participant 1 shows that when students juggle academics with side hustles for survival, they may gradually lose academic focus and question the value of education, especially when good grades are no longer seen as a guarantee of success. This creates uncertainty, low motivation, and emotional strain. Similarly, Participant 7 emphasizes that within a highly demanding academic system, effort does not always translate into success, leading to frustration and discouragement. The

respondents' experiences suggest that when hard work is not perceived to yield meaningful outcomes, students may experience hopelessness and reduced academic engagement, which can negatively affect their mental health and increase vulnerability to distress. (UUS7 Interview, Male, February 11th 2026).

Socio-economic Challenges and Social Comparison

Another theme was the role of financial hardship and peer comparison in shaping students' mental health. respondents described how economic struggles and exposure to wealth disparities fuel feelings of inadequacy, low self-esteem, and hopelessness. One of the respondents shared:

Some students cannot even afford to pay their school fees, and it becomes a very serious issue for them. Eh...when payment deadlines are approaching and they still don't have the money; the pressure starts building up. They begin to worry about being sent out of school, missing exams, or not being able to continue their education. It creates a lot of stress and anxiety, especially when there is no one to turn to for financial support. At that point, many of them start feeling helpless and overwhelmed, and it can lead to depression. (UUS2 Interview, January 21st 2026)

Another respondent posited with regard to social comparison:

There are different classes of people... some are rich, some are poor. Sometimes people compare themselves... when they see others with the latest phones, they start asking 'why can't I have this?' and it weighs on them. (UUS1 Interview, Female, January 11th 2026).

Two other respondents further added:

Students are dependent on parents, and the school is demanding a lot... combined with peer pressure to 'upgrade' like others, it creates pressure that can lead to depression and suicidal behavior. (UUS8 Interview, Male, 8/3/2026). Some students feel they must succeed at all costs because they want to lift their family out of poverty... when academic demands become too much, the pressure can push them into suicidal thoughts. (UUS 5 Interview, Male, February 9th 2026).

These outcomes illustrate how financial hardship and social comparison jointly intensify students' psychological distress. The inability to meet basic academic financial demands, such as paying school fees, creates immediate stress, fear, and uncertainty about continuing education, which can lead to feelings of helplessness and depression. At the same time, exposure to wealth disparities and peer lifestyles fosters upward social comparison, causing students to feel inadequate and pressured to "measure up." When combined with family expectations and the burden of wanting to escape poverty, these factors create a layered pressure system where economic strain, societal expectations, and personal aspirations intersect, increasing vulnerability to emotional distress and, in severe cases, suicidal behavior.

Psychological Vulnerability and Lack of Support Systems

The respondents emphasized internal emotional struggles such as depression, loneliness, guilt, and low self-esteem, alongside a lack of accessible and effective mental health support within universities. One of the respondents held that:

We are not really educated about suicidal behavior... I feel like everybody needs therapy, but many cannot afford it. I didn't even know there was a counseling unit... these are things students should be told during onboarding. (UUS1 Interview, Female, January 11th 2026).

Two respondents also shared a similar sentiment:

Many students don't even know where the counseling units are... and even if they know, they don't trust them or feel comfortable going. (UUS7 Interview, Male, 11/2/2026). There should be counseling units available and students should not be dismissed when they seek help. (UUS2 Interview, January 21st 2026).

These respondents further articulated their stance:

People are influenced by social media... they live based on what others are doing, and this affects their decisions and mental state. There should be proper facilities and professionals... not just saying they exist, but actually making them accessible. (UUS 3 Interview, Male, January 16th 2026). In Africa, people conceal things... even when someone is depressed, people make mockery of them instead of noticing the seriousness. (UUS8 Interview, Male, 8/3/2026).

There was a concern of self-expression among some students, owing to various reasons. This participant maintained:

Some students don't open up... they isolate themselves, feel lonely, and think there is no one to fall back on. (UUS6 Interview, Female, 9/2/2026).

These participants' sharing indicate that psychological vulnerability among university students is intensified by inadequate awareness, limited accessibility, and low trust in available mental health support systems. The respondents' accounts suggest that emotional difficulties such as depression, loneliness, guilt, and low self-esteem may remain unaddressed because students are either unaware of counselling services or perceive them as inaccessible, unaffordable, or unresponsive to their needs. The influence of social media further appears to heighten psychological vulnerability by encouraging social comparison and shaping students' decisions and emotional states. Importantly, the findings also reveal that stigma and cultural attitudes toward mental health, particularly the tendency to conceal emotional difficulties or ridicule individuals experiencing depression, may discourage help-seeking and delay appropriate intervention.

DISCUSSION

The assertion echoed by the participants of this study highlight how psychological vulnerability among students is compounded by inadequate awareness and access to mental health support. Participants reported experiencing internal struggles such as depression, loneliness, guilt, and low self-esteem, yet many were unaware of existing counseling services or distrusted them, reducing the likelihood of seeking help. Social influences, including pressure from social media and cultural tendencies to conceal emotional distress, further exacerbate isolation and mental strain. The lack of accessible, trusted, and proactive mental health facilities leaves students without effective outlets for coping, increasing their risk of severe emotional distress and potential suicidal behavior.

The findings of the present study confirm those of Sara et al. (2024) who found that factors such as gender, bullying, anxiety, loneliness, financial difficulties, pressure to perform well academically, socioeconomic status, and previous suicidal behavior were significant contributors to suicidal ideation. This study's finding is closely related to the study by Seedat et al. (2025). It was established that financial difficulties was one of the key factors contributing to suicidal ideation among the participants. The current study's finding is also aligned with the findings by Salifu and Yidana (2024). It was reported that the lifetime prevalence of suicidal ideation among these university students was 22.5%, with academic stress and financial hardship identified as significant contributing factors. The outcome of the present study is closely related to those of Obinna et al. (2021). It was found that academic stress was one of the strong predictors of suicide ideation among university students in Nairobi, Kenya.

Academic pressure is widely recognized as a significant contributor to suicidal thoughts and behavior among university students. In the Nigerian university context, students often face heavy workloads, frequent exams, strict grading policies, and competitive environments that demand high performance. Okechukwu et al. (2022) established that academic stress correlates with increased suicidal ideation, particularly when students lack effective coping skills or resilience to manage these demands. The authors contend that beyond workload, institutional structures themselves can act as stressors. When students feel that institutional systems are inflexible, punitive, or overly focused on academic achievement without adequate emotional support, this can heighten feelings of failure and hopelessness. These stressors may worsen as students struggle to balance academic responsibilities with personal needs, often without sufficient guidance or institutional mechanisms

that promote psychological wellbeing. In environments where academic success is equated with self-worth, the impact of poor performance can be particularly severe, increasing vulnerability to suicidal behaviors (Adewuya & Oladipo, 2020).

Apart from academic stress, Pillay (2021) holds that socio-economic challenges significantly shape students' mental wellbeing and risk for suicidal behaviour. Many students in Western Nigeria contend with financial instability, limited access to resources, and pressures related to supporting themselves or their families while pursuing higher education. Economic hardship can exacerbate stress, making students feel overwhelmed and trapped in circumstances that seem beyond their control. Linked to socio-economic difficulties is social comparison, a psychological process where students measure their worth against their peers based on achievements, academic success, and material status. Pillay (2021) further maintains that in competitive academic settings, students may interpret others' performance or apparent success as a reflection of their own inadequacies, contributing to feelings of inferiority, distress, or self-criticism. This dynamic is intensified in environments where social networks, both in person and online, highlight differences in academic standing, social opportunities, or lifestyle, deepening emotional strain. Such comparisons can fuel a sense of isolation and worthlessness, which are known psychological risk factors for suicidal behavior.

Further, psychological vulnerability refers to underlying emotional and mental health conditions that predispose students to distress under stress. These include depression, anxiety, feelings of burdensomeness, and thwarted belongingness, factors strongly linked to suicidal behavior. Okechukwu et al. (2022) affirm this by postulating that indicators like depression and hopelessness were strongly associated with suicidal thoughts and behaviors. These internal vulnerabilities can intensify reactions to stress, making students more sensitive to academic and socio-economic pressures. As noted by the authors, compounding psychological vulnerability is the lack of robust support systems within many university settings, particularly in Western Nigeria where mental health services may be limited, poorly promoted, or under-resourced. When students do not have access to trusted counselling, peer networks, or supportive institutional policies, their ability to manage emotional distress is weakened. Without reliable support, stressors that might otherwise be mitigated; such as academic setbacks or financial worries, can escalate into more serious psychological crises. Thus, these findings highlight that students with limited social or institutional support are at higher risk for suicidal behavior, reinforcing the need for accessible mental health services and supportive environments in universities.

CONCLUSION

The study concludes that suicidal behavior among undergraduate students is influenced by a complex interplay of academic pressure and institutional stressors, socio-economic challenges and social comparison, and psychological vulnerability coupled with inadequate support systems. The findings indicate that excessive academic demands, financial difficulties, emotional distress, and comparisons with peers heighten students' susceptibility to suicidal behavior. Furthermore, although participants were able to recognize common warning signs such as social withdrawal, depressive symptoms, and noticeable behavioral changes, they identified significant deficiencies in institutional mental health awareness, counselling services, and support mechanisms

Recommendations

The University administrations should take a leading role in establishing comprehensive mental health wellness systems within their institutions. This can be achieved by introducing routine screening programs to identify students at risk of suicidal tendencies at an early stage. The universities should further establish financial support initiatives, including scholarships, bursaries, emergency financial aid, and work-study opportunities, to reduce the socio-economic challenges that contribute to psychological distress and suicidal behaviors among financially disadvantaged students.

The government bodies such as the Federal Ministry of Education in collaboration with the Federal Ministry of Health should develop and implement a national framework for the prevention and management of suicidal behavior among university students. The framework should provide standardized guidelines for mental health

promotion, suicide prevention, early identification of at-risk students, referral pathways, and crisis intervention across tertiary institutions.

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