

Suicidal Ideation Among Undergraduate Students in Nigeria: Associated Factors and Implications for Counselling and Mental Health Service Delivery

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Abstract

This study examined psychological, social and institutional risk factors associated with suicidal ideation among undergraduate students in Nigeria, with particular attention to implications for early intervention, psychosocial support, and mental health service delivery in resource-constrained university settings. An explanatory sequential mixed-methods design was adopted. Quantitative data were collected from 190 undergraduate students using a questionnaire, while qualitative data were obtained from 16 purposively selected participants through in-depth interviews. Quantitative data were analyzed using descriptive statistics and chi-square tests, while qualitative data were analyzed thematically. Respondents had a mean age of 22.49 years ($SD = 3.09$), and 40.0% reported suicidal ideation. Academic stress, financial hardship, lecturer–student relationships, academic pressure, and limited recreational facilities were significantly associated with suicidal ideation. Although awareness of counselling services was not statistically significant, stigma and low utilization of support services emerged as important barriers to help-seeking. The findings underscore the need for university-based psychosocial support systems, stigma-reduction strategies, early identification of at-risk students, and strengthened mental health services that promote prevention, recovery, and wellbeing among undergraduates in low-resource settings.

Introduction

Suicidal thoughts represent a significant public health concern and are widely recognized as important precursors to suicidal behavior and completed suicide. Suicide remains one of the leading causes of death worldwide, particularly among young people. According to the World Health Organization (WHO, 2019, 2021), nearly 800,000 people die by suicide annually, making it the second leading cause of death among individuals aged 15–29 years. Beyond the loss of life, suicide generates profound emotional, social, and economic consequences for families, communities, and national development (World Health Organization, 2025; Centers for Disease Control and Prevention [CDC], 2024). Within higher education settings, students encounter numerous psychosocial stressors, including academic workload, financial strain, social pressures, and uncertainty regarding future employment, all of which may increase vulnerability to psychological distress, suicidal thoughts, and suicidal behavior (Bruffaerts et al., 2018).

Across Africa, suicide and suicidal ideation remain largely under-recognized yet urgent mental health challenges. Structural barriers such as limited mental health infrastructure, persistent stigma, and shortages of trained personnel continue to undermine prevention and intervention efforts (Osafo et al., 2017; WHO, 2021). Nevertheless, recent developments, including South Africa's National Mental Health Policy Framework and Kenya's movement toward decriminalizing suicide attempts, demonstrate growing recognition of suicide as a complex public health issue requiring coordinated psychosocial, institutional, and policy responses (South African Department of Health, 2023; High Court of Kenya, 2025).

In Nigeria, concerns regarding suicide and suicidal thoughts among university students have become increasingly prominent. Rising reports of student suicide have drawn national attention to the

psychosocial and institutional pressures that characterize many higher education environments. Students frequently contend with academic demands, financial hardship, social expectations, family responsibilities, and uncertainties regarding future opportunities, all of which may contribute to emotional distress, mental health difficulties, and suicidal ideation (Adesokan & Olawole, 2020). Empirical studies highlight the magnitude of the problem. Ladi-Akinyemi et al. (2023) found that 21.6% of students in Lagos State University and Lagos State Polytechnic reported experiencing suicidal thoughts, while Olufemi (2019) and Agbedo (2019) documented the contribution of academic failure and inadequate support systems to elevated suicide risk. Additional evidence underscores the influence of psychosocial and institutional stressors, including family pressure, strained lecturer–student relationships, and social isolation on student well-being and mental health outcomes (Adesokan & Olawole, 2020; Owusu-Ansah et al., 2020). Despite these challenges, many Nigerian universities remain insufficiently equipped with mental health services, counseling infrastructure, and supportive institutional policies (Adebayo & Nwagu, 2021). In response, the Federal Ministry of Health introduced the National Suicide Prevention Strategic Framework (2023–2030), which emphasizes awareness creation, service integration, helplines, and advocacy for decriminalization as key components of suicide prevention efforts (Federal Ministry of Health, 2023).

This study is anchored in the sociological theory of suicide proposed by Émile Durkheim, which emphasizes the roles of social integration and social regulation in shaping suicidal behavior (Durkheim, 1897/1951). Durkheim posits that individuals who experience weak social bonds, inadequate social support, or insufficient institutional regulation are at greater risk of suicidal behavior. Within university environments, factors such as peer relationships, family attachment, lecturer–student interactions, counseling services, and institutional policies reflect the degree of students’ connection to and support within their social environment. Applying this framework, suicidal thoughts among students can be understood not merely as individual psychological experiences but also as outcomes shaped by social relationships, institutional structures, and support systems. Recent studies continue to affirm the importance of social connectedness and environmental context in understanding suicidal behavior and suicidal ideation among young people (Kleiman & Liu, 2013; Mars et al., 2019).

Recent scholarship further highlights the importance of psychosocial support services, counseling interventions, and professional mental health responses in addressing suicide across multiple levels of prevention and intervention. Armstrong and Kuppens (2024) identify social workers as key actors in gatekeeping, risk screening, safety planning, and postvention support, while Frey et al. (2024) and Frey et al. (2022) emphasize the need for stronger suicide-specific training and systemic mental health responses within social work practice. Practice-based studies further demonstrate the effectiveness of interventions such as lethal-means counseling, collaborative safety planning, and culturally responsive engagement in reducing suicide risk and supporting vulnerable populations (Draper et al., 2023; Stanley et al., 2023). These findings underscore the importance of multidisciplinary approaches involving counselors, social workers, psychologists, and other mental health professionals in suicide prevention efforts.

Empirical evidence also demonstrates the effectiveness of psychosocial and counseling interventions within university settings. Campus-based strategies such as crisis counseling, peer mentoring, and referral systems have been shown to reduce suicidal behaviors and improve student well-being (Beautrais, 2004; Maple et al., 2016). However, in Nigeria, mental health and counseling services remain under-resourced and poorly integrated into university systems (Adebayo & Nwagu, 2021). Institutional counseling services are frequently identified as the first line of response to student mental health crises, yet many students remain unaware of available services or avoid utilizing them because of stigma and limited visibility (Mortier et al., 2017; Amoateng et al., 2023). Social workers and other mental health professionals are therefore uniquely positioned to strengthen access to psychosocial support, crisis intervention, and culturally responsive care (Draper et al., 2023).

Peer-based interventions also represent an important component of suicide prevention in higher education. Studies in Ghana and South Africa demonstrate that peer mentoring reduces loneliness, enhances coping, and lowers suicidal ideation (Owusu-Ansah et al., 2020). In Nigeria, where social relationships play a significant role in daily life, formalizing peer support systems and peer counseling programmes may provide culturally relevant and cost-effective approaches to early identification and intervention among students experiencing psychological distress.

Emerging evidence further suggests that digital peer-support platforms are gaining acceptance among African youth and may complement traditional support systems and counseling services (Osafo et al., 2023). Family engagement has similarly been identified as a protective factor against suicidal ideation, as strong family communication and involvement reduce vulnerability to emotional distress and isolation (Okafor, 2020; Ezea, 2025). At the macro level, effective suicide prevention requires supportive policy frameworks that prioritize student mental health and well-being. Countries such as the United States and Australia have demonstrated success in reducing youth suicide through integrated health and education policies (WHO, 2019; Stanley et al., 2023). In contrast, Nigerian higher education policies have historically focused more on academic performance and infrastructure than on mental health and student well-being (Ishola & Adesina, 2021). The introduction of the National Suicide Prevention Strategic Framework (2023–2030) represents a significant step toward addressing this gap, although implementation challenges remain (Federal Ministry of Health, 2023). Social workers and other mental health professionals also play important roles in advancing policy integration, reducing stigma, strengthening psychosocial support services, and promoting inclusive institutional cultures (NASW, 2025).

Against this backdrop, understanding the factors associated with suicidal thoughts among university students is essential for informing effective counseling practice and mental health service delivery. While previous studies have documented the prevalence of suicidal ideation and identified several psychosocial risk factors, there remains a need to better understand how psychosocial and institutional factors collectively shape suicidal thoughts within Nigerian university contexts. Such understanding is critical for developing evidence-based counseling interventions, strengthening campus mental health services, and informing institutional prevention strategies.

This paper therefore investigates suicidal thoughts among students at the University of Nigeria, Nsukka (UNN), with particular emphasis on the psychosocial and institutional factors associated with suicidal ideation and their implications for counseling practice and mental health service delivery. Guided by Durkheim's theory of suicide and ecological systems theory, the study adopts a multi-level analytical framework encompassing counseling support, peer mentoring, institutional reforms, and policy-level interventions. By integrating these perspectives, the study contributes to a more comprehensive understanding of suicidal thoughts among university students and highlights the importance of counseling-informed mental health interventions, accessible support services, and institutional prevention strategies in addressing this complex public health challenge.

Methodology

Research Design and Study Setting

This study adopted an explanatory sequential mixed-methods design in which quantitative findings were complemented with qualitative interviews to provide a deeper understanding of the psychosocial and institutional experiences associated with suicidal ideation among university students. The quantitative component identified socio-demographic factors associated with suicidal ideation, while the qualitative component explored students' lived experiences, perceptions, and challenges related to suicidal thoughts.

The study was conducted at the University of Nigeria, Nsukka (UNN), one of Nigeria's leading federal universities. Established in 1955 and formally inaugurated in 1960, the university has a large and diverse student population, with 10 faculties and more than 90 academic departments. UNN was selected because it provides a suitable setting for examining suicidal ideation within a complex academic environment. The institution has also received public attention in recent years due to reported suicide-related incidents among students, particularly those linked to academic stress and performance pressure (Ozor & Aliu, 2021). This made the university a relevant setting for exploring both the determinants and lived experiences of suicidal ideation among undergraduate students.

Respondents and Sampling Procedure

The study employed a purposive sampling strategy to select undergraduate students from the University of Nigeria, Nsukka (UNN), ensuring representation across key academic disciplines. A two-stage sampling approach was adopted. First, the university was grouped into five faculties: Social Sciences, Arts, Biological Sciences, Agricultural Sciences, and Education. Second, one department was purposively selected from each faculty based on students' exposure to academic and psychosocial stressors, particularly in departments with reported mental health concerns. Selected departments included Religious Studies, English and Literary Studies, and Library and Information Science. A total of 200 questionnaires were distributed, of which 190 were fully completed and returned, yielding a response

rate of 95%. The sample size was determined using Cochran's formula for large populations, appropriate for UNN's undergraduate population of approximately 27,917 students. The final sample comprised 81 males and 109 females, broadly reflecting the university's gender distribution. For the qualitative component, 16 students (8 males and 8 females) were purposively selected from among those who completed the questionnaire survey to participate in in-depth interviews (IDIs). Initial participants were identified through the assistance of class representatives and student leaders, while additional participants were recruited through peer referrals using a snowball sampling approach. This recruitment strategy enabled the selection of students with relevant experiences and perspectives, thereby providing deeper insight into the psychosocial and institutional factors associated with suicidal ideation among university students. This approach facilitated access to students with relevant experiences who might otherwise have been reluctant to participate due to the sensitivity of the topic. All participants provided informed consent, and interviews were conducted confidentially. The in-depth interviews provided detailed insights into students' academic, emotional, and psychosocial experiences related to suicidal ideation. These qualitative data complemented the survey findings by offering deeper contextual understanding and informing targeted mental health and social work interventions. The qualitative sample was selected to ensure depth and diversity of perspectives rather than statistical representation.

Data Collection

Data were collected using a mixed-methods approach, which included structured questionnaires and in-depth interviews (IDIs). The questionnaire was administered to 200 undergraduate students, out of which 190 were fully completed and used for analysis, giving a response rate of 95%. For the qualitative component, 16 students, comprising 8 males and 8 females, were purposively selected from those who had participated in the quantitative survey. Semi-structured interviews were conducted in private settings to ensure confidentiality and encourage open discussion on sensitive issues relating to mental health and suicidal ideation. Each interview lasted approximately 40 minutes. The survey instrument and interview guide were developed by the researchers to collect information on socio-demographic characteristics, academic stress, suicidal ideation, coping mechanisms, and institutional factors. The dependent variable, suicidal ideation, was measured using items adapted from previously validated instruments (Mortier et al., 2017; Owusu-Ansah et al., 2020). Responses were coded to indicate the presence or absence of suicidal thoughts, allowing for statistical analysis of their association with selected independent variables.

This design allowed the study to combine quantitative patterns with qualitative insights into students' lived experiences. By integrating both numerical data and personal narratives, the mixed-methods approach strengthened the depth and reliability of the findings.

Ethical standards were strictly observed throughout the study. Participants were fully informed about the purpose, procedures, and possible risks of the study, and written informed consent was obtained before participation. Participation was voluntary, with no monetary incentives offered, and participants had the

right to withdraw at any stage without penalty. To protect confidentiality, all responses were anonymized, and data were handled carefully to safeguard participants' privacy, dignity, and well-being.

Data Analysis

Data were analyzed using SPSS version 23 and thematic analysis. Quantitative data were analyzed using descriptive statistics, including frequencies, percentages, means, and standard deviations, to summarize respondents' socio-demographic characteristics and the prevalence of suicidal ideation among undergraduate students. Chi-square (χ^2) tests were used to examine associations between suicidal ideation and selected socio-demographic, psychosocial, and institutional factors within the university setting. Statistical significance was set at $p < .05$. The analysis focused on identifying patterns of association rather than establishing causal relationships.

For the qualitative component, in-depth interviews were transcribed verbatim and analyzed thematically. Codes were generated from the transcripts and grouped into recurring themes, including academic stress, financial difficulties, social isolation, coping mechanisms, and perceptions of support services and social work interventions. These qualitative findings provided deeper insight into students' lived experiences and helped explain the patterns observed in the quantitative results. The integration of quantitative and qualitative findings provided a more comprehensive understanding of suicidal ideation among undergraduate students. This approach also informed recommendations for social work interventions, institutional support systems, and policy strategies for suicide prevention in Nigerian universities.

Ethical Considerations

The study adhered to established ethical standards for research involving human participants. Ethical approval was obtained from the Ethical Review Board of the University of Nigeria Nsukka. Participation was voluntary, and informed consent was obtained from all respondents prior to data collection. Participants were assured of confidentiality and informed of their right to withdraw at any time without penalty. Given the sensitive nature of suicidal ideation, participants were provided with information on available mental health and professional support services to ensure their well-being throughout the study.

Results

This section presents the findings of the study from both the quantitative survey and the qualitative in-depth interviews. A total of 200 questionnaires were distributed to undergraduate students, and 190 were fully completed and analyzed, giving a 95% response rate. In addition, 16 in-depth interviews were conducted. Suicidal ideation, the dependent variable, was measured as respondents' self-reported experience of suicidal thoughts (Yes/No). The findings are presented under these areas: sociodemographic characteristics, psychosocial factors associated with suicidal ideation, institutional

factors, and the perceived roles of social workers in suicide prevention. All results are presented as statistical associations rather than causal relationships.

Sociodemographic Characteristics

Table 1 presents the sociodemographic distribution of the respondents. A total of 190 students completed the survey, with a mean age of 22.49 years (SD = 3.09) and a median age of 21 years. Of the respondents, 81 (42.6%) were male and 109 (57.4%) were female. Most participants were aged 18–24 years (78.9%), while students were represented across different levels of study, with 300-level students forming the largest group (33.7%). The majority of respondents also lived off campus (64.7%). Descriptive statistics were presented first, followed by chi-square analysis to examine the association between sociodemographic variables and suicidal ideation.

Table 1
Summary of Sociodemographic Characteristics of Respondents (N = 190)

Variable	Category	Frequency	Percentage (%)
Sex	Male	81	42.6
	Female	109	57.4
Age	18–24	150	78.9
	25–31	39	20.5
	32+	1	0.5
Level	100L	51	26.8
	200L	36	18.9
	300L	64	33.7
	400L+	39	20.6
Residence	Hostel	67	35.3
	Off-campus	123	64.7

Sociodemographic Characteristics of IDI Participants

Table 2 presents the socio-demographic characteristics of the IDI participants. A total of 16 participants were involved in the interview. The participants comprised both males and females, with ages ranging from 20 to 28 years. They were drawn from different places of residence, including hostels, campus, and off-campus locations. The participants also came from various faculties, namely Social Sciences, Arts, and Education, and were distributed across different levels of study from 100 to 500 levels. This shows

that the IDI participants represented a diverse group of students in terms of gender, age, residence, faculty, and level of study.

Table 2
Socio-demographic Characteristics of IDI Participants

S/N	Pseudo Name	Gender	Age	Residence	Faculty	Level of Study
1	Chijioke	Male	23	Hostel	Social Sciences	300
2	David	Male	24	Off-campus	Arts	400
3	Emeka	Male	25	Off-campus	Arts	400
4	Obinna	Male	23	Off-campus	Social Sciences	300
5	Frank	Male	21	Hostel	Social Sciences	400
6	Amaka	Female	24	Off-campus	Arts	400
7	Grace	Female	24	Hostel	Arts	300
8	Nenye	Female	24	Off-campus	Social Sciences	400
9	Kosara	Female	22	Campus	Arts	300
10	Angela	Female	24	Off-campus	Social Sciences	300
11	Uchenna	Male	24	Campus	Education	500
12	Joy	Female	22	Off-campus	Education	300
13	Zion	Male	20	Off-campus	Education	100
14	Jenny	Female	23	Campus	Education	300
15	Jane	Female	28	Off-campus	Education	400
16	Ekene	Male	21	Off-campus	Social Sciences	200

The qualitative findings from the in-depth interviews align with the quantitative data on determinants of suicidal ideation among students. Three main themes emerged: academic pressures and stress management, personal and social factors, and the need for support services.

Prevalence of Suicidal Ideation

Table 3 presents the prevalence of suicidal ideation among respondents. Out of 190 students, 114 (40.0%) reported experiencing suicidal thoughts, while 76 (60.0%) did not. This indicates that a substantial proportion of students reported suicidal ideation.

Table 3
Summary of Prevalence of Suicidal Ideation (N = 190)

Variable	Frequency	Percentage (%)
Suicidal Thoughts (Yes)	114	40.0
Suicidal Thoughts (No)	76	60.0
Total	190	100.0

This pattern is reflected in participants' narratives. providing deeper insight into the emotional context behind students' suicidal thoughts. The interviews highlighted gender-specific emotional experiences that help explain the observed patterns. One participant stated,

There were periods when I felt completely overwhelmed by academic pressure, family expectations, and personal problems, and during those moments I began to have thoughts that life was becoming too difficult to continue. I did not always want to die, but I often wished I could escape from everything I was going through. (Chijioke, Male student).

Another explained,

Sometimes I felt so lonely, emotionally drained, and hopeless about the future that suicidal thoughts came into my mind. It usually happened when I believed that nobody understood what I was facing, and I started thinking that ending my life might be the only way to stop the pain and constant stress. (Angela, Female Student).

Sex and Suicidal Ideation (Engagement in Suicidal Thoughts)

The data in Table 4, shows the relationship between sex and suicidal ideation among the respondents. A high proportion of both males (80.0%) and females (78.8%) reported suicidal thoughts. However, the chi-square result ($\chi^2 = 0.040$, $p = 0.491$) indicates that this difference is not statistically significant. This means that sex is not significantly associated with suicidal ideation, and both male and female students reported similar levels of suicidal thoughts. There was no statistically significant association between sex and suicidal ideation ($p > .05$).

Table 4
Summary of Sex and Suicidal Ideation

Sex	Yes n (%)	No n (%)	Total	χ^2	p-value
Male	84 (80.0%)	21 (20.0%)	105	0.040	0.491
Female	69 (78.8%)	18 (21.2%)	85		
Total	153	39	190		

Qualitative interviews reinforced the quantitative findings, providing deeper insight into the emotional context behind students’ suicidal thoughts. The interviews highlighted gender-specific emotional experiences that help explain the observed patterns.

Male participants described feeling pressured to suppress emotions and maintain strength, reflecting internalized social expectations of masculinity. As one 400-level student shared:

Sometimes I keep everything bottled up because people expect men to be strong. But deep inside, it feels heavy. When it overwhelms me, I wonder if there is really any point in continuing...” (Emeka, Male Student).

Female students, on the other hand, emphasized the intersection of academic stress, family expectations, and self-imposed perfectionism, which intensified their vulnerability to emotional exhaustion and hopelessness. One respondent noted:

...I cry at night, but no one sees it. I feel pressured to excel in school and act perfectly at home. The weight is too much, and sometimes I imagine if ending everything would bring peace...” (Jenny, Female Student). Another female participant added: “As a girl, there’s pressure to succeed academically while also living up to family expectations. I feel torn between these worlds, and it pushes me toward hopeless thoughts when I fail to meet everyone’s standards...” (Angela, Female, Student) ...

These narratives corroborate the quantitative results, suggesting that while measurable differences between sexes were minimal, both male and female students face distinct psychosocial pressures that contribute to suicidal thoughts.

Age and Suicidal Ideation

The result in Table 5 shows the relationship between age and suicidal ideation among respondents. Among students aged 18–24 years, 48.7% reported suicidal thoughts, while 62.5% of those aged 25–31 years reported suicidal thoughts. Although older students (25–31 years) had a higher proportion of suicidal ideation, the chi-square result ($\chi^2 = 2.420$, $p = 0.084$) indicates that this difference is not statistically significant. This means that age is not significantly associated with suicidal ideation, and suicidal thoughts were reported across both age groups. There was no statistically significant association between age and suicidal ideation ($p > .05$).

Table 5
Summary of Age and Suicidal Ideation

Age Group	Yes n (%)	No n (%)	Total	χ^2	p-value
18–24	73 (48.7%)	77 (51.3%)	150	2.420	0.084
25–31	25 (62.5%)	15 (37.5%)	40		
Total	98	92	190		

This pattern is reflected in participants’ accounts, one younger age 21 respondent stated,

At my age, I face pressure from school, relationships, and uncertainty about the future, and there were moments when I felt hopeless and had suicidal thoughts because everything seemed too heavy for me to manage alone. (Ekene, Male Student).

Another older respondent in 28 explained,

As an older student, I often worried about delayed progress, family responsibilities, and financial stress, and during difficult periods I experienced suicidal thoughts, especially when I compared myself with others who seemed more settled in life. (Jane, Female Student).

Level of Study and Suicidal Ideation

The data analysis in Table 6 shows the relationship between level of study and suicidal ideation. Among new students, 45.7% of those who reported suicidal thoughts belonged to this group, while 54.3% were old students. The chi-square result ($\chi^2 = 0.803$, $p = 0.370$) indicates that the difference is not statistically significant. This means that level of study is not significantly associated with suicidal ideation, as both new and old students reported similar patterns of suicidal thoughts.

Table 6
Summary of Level of Study and Suicidal Ideation (N = 190)

Level of Study	Yes n (%)	No n (%)	Total	χ^2	p-value
New Students	75 (45.7%)	7 (26.9%)	82	0.803	0.370
Old Students	89 (54.3%)	19 (73.1%)	108		
Total	164 (100%)	26 (100%)	190		

This is reflected in participants’ narratives. One new student stated,

Being a new student was not easy for me because I was still trying to adjust to the school environment, academic demands, and new relationships, and there were times I felt emotionally overwhelmed and began to experience suicidal thoughts. (Zion, Male Student).

An old student also shared

Even as an old student, I still struggled with pressure from academics, uncertainty about the future, and personal challenges, and there were moments when I felt deeply tired of everything and had thoughts of ending my life (Nenye, Female student).

Place of Residence and Suicidal Ideation

The data analysis in Table 7, shows the relationship between place of residence and suicidal ideation. Among students living in the hostel, 32.7% reported suicidal thoughts, while 67.3% of those reporting

suicidal thoughts lived off-campus. Although a higher proportion of off-campus students reported suicidal ideation, the chi-square result ($\chi^2 = 0.604$, $p = 0.437$) indicates that this difference is not statistically significant. This means that place of residence is not significantly associated with suicidal ideation, and students reported similar patterns of suicidal thoughts regardless of where they live. There was no statistically significant association between residence and suicidal ideation ($p > .05$).

Table 7
Summary Place of Residence and Suicidal Ideation

Residence	Yes n (%)	No n (%)	Total	χ^2	p-value
Hostel	32 (32.7%)	35 (38.0%)	67	0.604	0.437
Off-campus	66 (67.3%)	57 (62.0%)	123		
Total	98	92	190		
The transcripts of the qualitative narratives deepened this understanding, illustrating how living arrangements shape emotional well-being. The excerpts below highlight participants' views on the issue:					

Living off-campus sounds free, but it comes with hidden costs. Bills, loneliness, and insecurity drain my mind daily. Some nights without light or money make me question if all this struggle for a degree and peace of mind is worth it. (Obinna, Male, Student)

I moved off-campus thinking it would help me focus, but isolation hit harder than I expected. I rarely talk to anyone, especially when I don't have money, and the silence makes me overthink everything until my chest tightens, tears flow, and sadness quietly fills my entire head. (Emeka, Male Student)

The hostel feels crowded. There's always noise, gossip, and no privacy. Even when I want quiet, it's impossible to think clearly. Sometimes I just walk out and cry alone at night because the environment itself feels suffocating and emotionally draining. (Grace, Female, Student)

...The gossip, unseen competition, show-off lifestyle and constant monitoring in the hostel drive me crazy. Sometimes I stay awake all night because I can't find peace. Those nights, suicidal thoughts creep in stronger than usual, and it scares me a lot..." (Kosara, female Student).

These testimonies align with the quantitative findings, revealing that although residence type was not statistically significant, living conditions strongly influence emotional stress, social connection, and perceived support, all of which shape students' vulnerability to suicidal thoughts.

Psychosocial Factors Associated with Suicidal Ideation

The analysis in Table 8, showed that academic stress was significantly associated with suicidal ideation ($\chi^2 = 5.06$, $p = .024$), with students experiencing high academic stress reporting more suicidal thoughts than those with low or moderate stress. Similarly, financial hardship was significantly associated with suicidal ideation ($\chi^2 = 6.43$, $p = .011$), as students with higher financial difficulty were more likely to

report suicidal thoughts. However, peer support was not significantly associated with suicidal ideation ($\chi^2 = 1.88$, $p = .171$), although students with weaker peer support reported higher levels of suicidal thoughts. Also, lecturer support was not statistically significant ($\chi^2 = 2.93$, $p = .087$), even though students who perceived lecturers as supportive reported fewer suicidal thoughts. Finally, family attachment was not significantly associated with suicidal ideation ($\chi^2 = 1.97$, $p = .160$).

Table 8
Summary of Psychosocial Factors and
Suicidal Ideation (N = 190)

Variable	χ^2	p-value
Academic Stress	5.06	.024
Financial Hardship	6.43	.011
Peer Support	1.88	.171
Lecturer Support	2.93	.087
Family Attachment	1.97	.160

These patterns were also reflected in participants' narratives. One participant stated,

Most of the time, the pressure from assignments, examinations, and the fear of failing my courses made me feel trapped and exhausted. When I added that to my financial struggles and the difficulty of meeting my daily needs, I sometimes started having suicidal thoughts. (Uchenna, Male Student).

Another participant explained,

There were periods when I felt emotionally overwhelmed because I had little money, too many academic expectations, and no real sense that anyone understood what I was going through. Even though support from friends, lecturers, or family was not always absent, I still sometimes experienced suicidal thoughts. (Joy Female, Student).

Institutional Factors Associated with Suicidal Ideation

The data in Table 9, showed that lecturer–student relationship was significantly associated with suicidal ideation ($\chi^2 = 9.84$, $p < .05$), with students who reported poor relationships more likely to experience suicidal thoughts. Awareness of counseling services was not significantly associated with suicidal ideation ($\chi^2 = 1.13$, $p = .287$). In addition, academic pressure was significantly associated with suicidal ideation ($\chi^2 = 10.92$, $p < .05$), as students experiencing higher pressure reported more suicidal thoughts. Similarly, availability of recreational and social facilities was significantly associated with suicidal ideation ($\chi^2 = 11.48$, $p < .05$), with students who had inadequate access reporting higher levels of suicidal thoughts.

Table 9
Summary of Institutional Factors and Suicidal
Ideation (N = 190)

Variable	χ^2	p-value
Lecturer–Student Relationship	9.84	< .05
Counseling Awareness	1.13	.287
Academic Pressure	10.92	< .05
Recreational Facilities	11.48	< .05

These findings were reflected in participants' narratives. One participant stated,

What affected me most in school was the constant academic pressure and the way some lecturers relate with students. At times, I felt misunderstood, unsupported, and afraid of failing. When there was no comfortable space to relax or ease stress, suicidal thoughts became more frequent. (Jenny, Female Student).

Another participant explained,

For me, it was not only the school workload but also financial problems, frustration, and loneliness that made things worse. Even though I had heard about counseling services, I did not feel encouraged to use them, and I often felt isolated with my emotional struggles. (Frank, Male student).

Reported Factors Associated with Suicidal Ideation Among Undergraduate Students

The Table 10 result presents the reported factors associated with suicidal ideation among undergraduate students. The results show that academic pressure and frustration were the most frequently reported factors, accounting for 26.3% of responses. This indicates that academic demands play a central role in shaping students' mental health experiences. Financial difficulties and lack of social support were the second most reported factors, each contributing 15.3%. This suggests that both economic challenges and inadequate support systems significantly influence students' vulnerability to psychological distress. In addition, loneliness and isolation (13.1%) and emotional or mental disturbances (12.6%) were also notable contributors, highlighting the importance of social connectedness and emotional well-being. Personal relationship issues accounted for 10.5%, while substance abuse was the least reported factor at 5.7%. Overall, the table indicates that suicidal ideation among students is associated with a combination of academic, financial, and psychosocial stressors, with academic-related factors emerging as the most prominent.

Table 10
Reported Factors Associated with Suicidal Ideation Among Undergraduate Students

Factor	Frequency (n)	Percentage (%)	Rank
Academic pressure/frustration	50	26.3	1
Financial difficulties	30	15.3	2
Lack of social support	30	15.3	2
Loneliness and isolation	25	13.1	4
Emotional/mental disturbance	24	12.6	5
Personal relationship issues	20	10.5	6
Substance abuse	11	5.7	7
Total	190	100.0	

This pattern is reflected in participants' narratives. One participant stated,

What pushed me most into having suicidal thoughts was the pressure from schoolwork and the frustration of trying so hard without feeling successful. At the same time, I was struggling financially, and there were moments when I felt nobody really understood or supported what I was going through. (Angela, Female student).

Another participant explained,

There were times I felt extremely lonely and emotionally unstable, especially when I had problems in my personal relationships and no one to talk to. The stress kept building, and during those periods of isolation and confusion, suicidal thoughts came very strongly into my mind. (David, Male Student).

Perceived Roles of Mental Health Professionals in Suicide Prevention

The findings in Table 11 show a high level of agreement among respondents on the roles of social workers in suicide prevention. Overall, there were no statistically significant differences by gender across all roles examined. A large majority of respondents (90.5%) agreed that advocacy is an important role of social workers in preventing suicide ($\chi^2 = 0.01$, $p = .999$). Similarly, 94.2% of respondents supported the educator role, indicating that social workers are seen as important in providing awareness and education on mental health issues ($\chi^2 = 0.39$, $p = .941$). Counseling received the highest level of support, with 96.9% of respondents agreeing that it is a key role of social workers in addressing suicidal ideation ($\chi^2 = 0.66$, $p = .881$). In addition, 87.4% of respondents supported the mediation role, suggesting that social workers are also viewed as important in resolving conflicts that may contribute to suicidal thoughts ($\chi^2 =$

0.13, $p = .988$). Overall, these results indicate strong recognition of the importance of social workers in suicide prevention among university students.

Table 11
Summary of Perceived Roles of Social Workers
(N = 190)

Role	Support (%)	χ^2	p-value
Advocacy	90.5	0.01	.999
Education	94.2	0.39	.941
Counseling	96.9	0.66	.881
Mediation	87.4	0.13	.988

This is reflected in participants' views. One participant stated,

I believe social workers and mental health professionals have a major role in suicide prevention because they can speak up for students, create awareness about mental health, and provide counseling for those going through emotional pain. Many students keep their struggles to themselves, so social workers can help them feel heard, understood, and supported before things get worse. (Grace, Female student).

Another participant explained,

Social workers are important in the university because they do more than just counsel students. They can educate people about suicidal ideation, mediate in situations involving conflict or misunderstanding, and also advocate for better support services. Their presence can make students feel less alone and more willing to seek help during difficult times. (Chijioke, Male Student).

Discussion

This study examined the psychosocial and institutional factors associated with suicidal ideation among undergraduate students and explored the perceived roles of social workers in suicide prevention. The findings indicate that suicidal ideation among students was more strongly associated with psychosocial and institutional conditions than with sociodemographic characteristics.

Although respondents differed in sex, age, level of study, and place of residence, these variables were not significantly associated with suicidal ideation. This suggests that suicidal ideation was reported across different demographic groups and was not limited to a particular category of students. Existing evidence similarly suggests that suicidal ideation among university students is shaped by a combination of academic, financial, and psychosocial stressors, highlighting the need for a comprehensive and context-specific understanding of student mental health challenges. The findings suggest that academic stress and academic pressure were important factors associated with suicidal ideation among university students. Students experiencing high academic stress and pressure reported higher levels of suicidal

ideation than those with lower academic demands. These findings support previous studies showing that heavy academic workload, examination pressure, and difficulties coping with academic expectations contribute to emotional distress and suicidal ideation among students (Mortier et al., 2017). Within university environments where students are expected to meet demanding academic expectations with limited institutional support, stress may increase vulnerability to psychological distress and suicidal ideation.

The findings also indicate that financial hardship was significantly associated with suicidal ideation. Students experiencing greater financial difficulty reported higher levels of suicidal ideation than those with fewer financial challenges. This finding is consistent with earlier studies identifying economic hardship as a major source of emotional strain and suicide risk among young people (Amoateng et al., 2023; WHO, 2021). In the Nigerian context, where many students experience difficulties related to school fees, accommodation, feeding, and other living expenses, financial hardship may worsen emotional distress and increase vulnerability to suicidal ideation.

The study further showed that lecturer–student relationship was significantly associated with suicidal ideation. Students who reported poor lecturer–student relationships were more likely to experience suicidal ideation. This suggests that the quality of interaction between students and lecturers may influence students’ emotional well-being and sense of belonging within the university environment. Supportive lecturer relationships may foster encouragement and connectedness, whereas poor relationships may increase frustration, isolation, and psychological distress. This finding aligns with previous studies demonstrating the importance of positive school and institutional relationships for student mental health (Adesokan & Olawole, 2020; Maple et al., 2016). The availability of recreational and social facilities was also significantly associated with suicidal ideation. Students who reported inadequate recreational and social facilities were more likely to report suicidal ideation than those with better access to such facilities. This finding suggests that recreational opportunities and social engagement spaces may help students manage stress, build social relationships, and improve emotional well-being. In the absence of these support structures, students may become more vulnerable to isolation and emotional distress.

Peer support, lecturer support, and family attachment were not statistically significant predictors of suicidal ideation in this study. However, the response patterns showed that students with weaker peer support, poor lecturer support, and weak family attachment reported higher levels of suicidal ideation. Although these relationships were not statistically significant, they still suggest the potential importance of social support in promoting students’ mental well-being. These findings are consistent with studies showing that supportive relationships may reduce emotional distress and strengthen resilience among young people (Owusu-Ansah et al., 2020; Osafo et al., 2023; Maple et al., 2016). These findings should therefore be interpreted cautiously and may require further investigation in future studies.

The findings also revealed that awareness of counseling services was not significantly associated with suicidal ideation. Although students who were aware of counseling services reported lower levels of

suicidal ideation than those who were unaware, the difference was not statistically significant. This suggests that awareness alone may not be sufficient to reduce suicidal ideation. Students may know about counseling services but still avoid utilizing them because of stigma, fear, accessibility barriers, or lack of trust in institutional support systems. This finding is consistent with earlier studies that identified low utilization of mental health services as a major challenge among university students (Adebayo & Nwagu, 2021; Kukoyi et al., 2022).

This study is anchored in the sociological theory of suicide proposed by Émile Durkheim, which emphasizes the roles of social integration and social regulation in shaping suicidal behavior (Durkheim, 1897/1951). Durkheim posits that individuals who experience weak social bonds, low social support, or inadequate institutional regulation are at increased risk of suicide. In the university context, factors such as peer relationships, family attachment, lecturer–student interactions, counseling services, and institutional policies reflect the degree of students’ connection to, and support within, their social environment. Applying this framework, the findings suggest that suicidal ideation among students can be understood not solely as an individual psychological condition, but also as a phenomenon associated with the strength of social relationships and institutional support systems. Recent studies similarly affirm the importance of social connectedness and environmental context in understanding suicidal behavior among young people (Kleiman & Liu, 2013; Mars et al., 2019).

The findings also revealed strong support for counseling and mental health interventions in suicide prevention. Most respondents agreed that mental health awareness, counseling services, psychosocial support, advocacy, and conflict resolution are important strategies for addressing suicidal ideation among students. Counseling received the highest level of support, followed by education, advocacy, and mediation. This suggests that students recognize the importance of accessible counseling services and mental health professionals in providing psychosocial support, promoting mental health literacy, addressing emotional distress, and facilitating early intervention for students experiencing suicidal thoughts. These findings are consistent with recent literature highlighting the contributions of counseling and mental health services to student well-being, mental health promotion, and suicide prevention (Frey et al., 2022; Armstrong & Kuppens, 2024; Draper et al., 2023; Stanley et al., 2023).

Implications for Counselling Practice and Mental Health Service Delivery

The findings have important implications for counseling practice and mental health service delivery within Nigerian universities. Given the significant associations between academic stress, financial hardship, lecturer–student relationships, and suicidal ideation, university counseling services should adopt proactive and preventive approaches that focus on early identification of at-risk students, routine mental health screening, psychoeducational programmes, and crisis intervention. Mental health professionals should collaborate with academic staff, student affairs units, and peer-support networks to create supportive campus environments that promote psychological well-being and social connectedness. Universities should also strengthen the visibility, accessibility, and responsiveness of

counseling services while reducing barriers such as stigma and limited awareness. Enhancing campus-based mental health services may contribute significantly to the prevention of suicidal ideation and the promotion of positive mental health outcomes among students.

Conclusion and Recommendations

This study examined psychosocial and institutional factors associated with suicidal ideation among undergraduate students and explored the role of mental health service providers in prevention. The findings showed that academic stress and financial hardship were significantly associated with suicidal ideation, while sociodemographic factors were not significant. Although peer support, lecturer support, family attachment, and awareness of counseling services were not statistically significant, their observed patterns suggest possible protective roles that require further investigation. The findings also showed strong support for the role of mental health service providers in suicide prevention, particularly in counseling, mental health education, advocacy, psychosocial support, and mediation. Overall, the study concludes that suicidal ideation among students is more strongly linked to psychosocial and institutional conditions than to demographic characteristics. The study contributes to student mental health practice by showing how targeted interventions can address key risk factors within university settings.

Based on the findings, interventions are recommended at the micro, mezzo, and macro levels. At the micro level, mental health service providers should provide counseling, stress management support, and coping skills training for students experiencing academic and financial difficulties. At the mezzo level, universities should employ qualified mental health professionals, improve access to counseling services, promote positive lecturer–student relationships, and expand recreational and peer-support programmes. At the macro level, government and university authorities should strengthen mental health and suicide prevention policies through increased funding, mental health education, and anti-stigma initiatives. These measures can help reduce suicidal ideation and strengthen suicide prevention efforts among students in Nigerian universities.

Declarations

Conflict of interest:

The authors have no conflict of interest

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Data Availability Statement

The data supporting the findings of this study are not publicly available due to their sensitive nature; however, the quantitative data are available from the corresponding author upon reasonable request.

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