Determinants of Suicidal Intention among Undergraduate Students in Bayelsa State

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Abstract

This cross-sectional study investigated the determinants of suicidal intention among 163 undergraduate students in Bayelsa State, focusing on socio-demographic, economic, psychological and health factors. The study is built on the theoretical model of Durkheim's social integration and regulation theory. Whereas the questionnaire served as the instrument of data collection, chi-square cross-tabulations, Pearson correlation and percentages, through the aid of the SPSS were the basic tools used in data analysis. Findings indicated that the prevalence rate for the thought of suicide among undergraduate students was 18%, whereas, suicidal intention rate was 8.6%. Furthermore, suicidal thought was significantly related to CGPA of students ($p<0.041$) and academic satisfaction ($p<0.001$). Suicidal intention was related to the gender of students ($p<0.024$) at 0.05 level of significance. Also, social factors like the relationship with parents/guardian ($p<0.000$), academic pressure ($p<0.013$) and relationship status of parents ($p<0.006$), were significantly related to suicidal thoughts at 0.01 level of significance. While only loss of close relation was associated with suicidal intention. Additionally, the findings revealed that the financial status of students ($p<0.02$) was significantly related to suicidal thought at 0.01 level of significance. Finally, depression ($p<0.000$) and health challenge ($p<0.008$) were significantly related to suicidal thought. While depression ($p<0.000$) and health challenges were also significantly associated with suicidal intention. Based on the findings, it is recommended that there should be the teaching of suicide education in universities. For this to be meaningful, suicide education should be capable of loading its content with topics such as signs, myths and facts about suicide, factors associated with suicide and possible ways of helping the suicidal persons.

Keywords: Socio-demographic determinants, undergraduates, social integration, suicidal intention.

Introduction

According to the World Health Organization (WHO) [2012], it was estimated that 804,000 young people aged 15-29 years committed suicide in the world, and has accounted for 8.5% of death among this age category. Evidence in the increment of suicide rates among this population is of concern to academics, considering their possibility of living longer years and the need for

productivity and transformation among young people, especially those in the university (Taliaferro et al., 2009).

A study conducted among 105,000 university students in the United States of America (USA) on suicide behaviour showed that 3.7% had thought about suicide in the past 12 months and 1.5% in the past two weeks (ACHA,2011). Regarding suicide attempt, the report highlighted that 0.89% of the students have attempted suicide in the previous year, 0.3% in the last two weeks and 0.25 in the previous days (ACHA,2011). Another study in north-eastern Brazil among 637 university students a prevalence of 7.5% for suicide attempts and 52.5% for suicidal ideation (Hugo et al., 2017).

Several factors have been suggested as being associated with suicidal behaviour, implying that it is multifactorial and multi-dimensional (Pereira & Cardoso, 2015). Subjective factors such as hopelessness, impulsivity, aggression, body perception, communication difficulties and lack of social belonging have been suggested as possible factors that trigger suicidal behaviour (Braga, & Dell'Aglio, 2013, Gvoin, et al., 2015). Other factors include demographic and socio-economic variables, sexual orientation, religious practices, history of suicidal behaviour in the family and among friends, alcohol consumption and depressive symptoms (Macias et al., 2015; Mackenzie et al., 2011).

Among undergraduate students, the possible factors associated with suicidal ideation include developmental processes that require maturity and autonomy to make decisions, especially in a strict economic environment (Mackenzie, et al., 2011; Mojs, et al., 2012; Nyer, et al. 2013). Although Nigeria comes 91st place in the ranking of happiness among 156 countries worldwide, suicide and suicide-related behaviours have been on the increase and more worrisome is the fact that the case is high among college students. For instance, on the first lap of 2017, there were reported cases of suicide in Nigerian universities (Arya, 2017). Reason for such behaviours has become a major scientific concern to both behavioural researchers and health practitioners.

Suicidal behaviour is one of the lead cause of death in the global population and the second leading cause of death among people between ages 15-29 globally (WHO, 2017) it has been estimated to potentially contribute to a proportion greater than 2% to the world burden of disease

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by 2020 particularly in sub-Saharan African (Vijayakumer et al., 2005). The weighted prevalence of suicide has been put at 7.28% (Adewuya, et al, 2016). In fact, it has been established to be responsible for 9.9 out of every 100.000 (both sexes) death in Nigeria (WHO, 2017)

Other risk factors include; anxiety, stress, Self-esteem, and age. (Adewuya el al, 2016) it also influences individuals' evaluation of their worth. Self-esteem is an important predictor of some behavioural outcomes among youth (Orth & Robbin 2014). Manani and Sharma (2013) reported a negative correlation between self-esteem and suicidal ideation (Singh & Pathak, 2019). This may differ across age group. Chung and Joung (2012) reported that age significantly predicts suicidal ideation among countries of American and Korea Youths.

Religious activities may also be related to suicidal behaviours. Nigeria is a highly religious country which is evident on most campuses with several religions and groups. Research on the link between religion and suicide can be traced to the work of Durkheim's finding that suicidal tendencies were lower among catholic than those who are not religious (Durkheim,1897, Colucci & Martin, 2008; Hoffman & Marsiglia, 2014).

Though studies investigating trends and patterns of suicide abound, research investigating suicidal thoughts and factors responsible for them are very limited and inadequate especially in Nigeria. This is worrisome as suicidal thoughts are precursors of the actual realisation of the act among students. On this note, this study sought to investigate the determinants of suicidal thoughts among undergraduate students using undergraduate students in Bayelsa state as a case study.

Theoretical Framework: Durkheim's Theory of Social Integration and Social Regulation

The theoretical framework on which this study is anchored in the Social Integration and Social Regulation Model propounded by Emile Durkheim in 1897. The theory states that there is an inverse relationship between suicidal behaviour and the degree of integration of an individual in a social group. He proposed that suicide results, in part, from the failure of social integration. The theory posits that an individual will not commit suicide unless he/she has both the desire to die and the ability to do so. He referred to social integration as the degree to which individuals in

the society were bound by social ties and relationship, while social regulation referred to the degrees to which individuals have their desires and emotions controlled by the social values of society. Durkheim held the view that suicidal behaviour would be more likely if social integration was too strong (leading to altruistic suicidal behaviour), if social regulation was too weak (leading to anomic suicidal behaviour), or if these two social forces were too strong (leading to altruistic and fatalistic suicidal behaviours respectively).

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

Materials and Methods

This study is a cross-sectional survey that was conducted among 163 undergraduate students in two universities in Bayelsa State, namely; the Federal University Otuoke and the Niger Delta University. The sample size for this study was determined using Taro Yamane's sample size formula.

In selecting the sample for the study, the multi-stage sampling technique was utilised. The first stage used purposive sampling to select two universities in Bayelsa State (Niger Delta University and Federal University Otuoke), from the four existing universities in the state. These two universities were selected because they are the only universities currently operating in the state with undergraduate students ranging from 100 to 500 levels. The second stage used the stratified sampling to group faculties in the two universities into four categories namely; Social/Management Sciences and Humanities; Engineering, Sciences and Agricultural Sciences; College of Health Sciences; and Law, Arts, and Education. The third stage used simple random sampling to select one Department from the four categories of Faculties in the two universities. Thus, twelve (12) Departments were randomly selected namely; Geography and Environmental Management Science, Accounting, History and Diplomacy, Chemical Engineering, Agricultural Economics, Geology, Medicine, Law, Theatre Arts, Nursing, Pharmacy, and Mathematics

Education. Finally, accidental sampling was employed to recruit students who were available at their departments for the study.

The questionnaire served as the primary source of data collection. The questionnaire was in different sections which elicited information based on the objectives of the study. Data analysis was done at the univariate and bivariate levels using tools such as; percentages, frequencies and graphs. In testing the hypothesis in the study, bivariate statistics such as chi-square cross-tabulation and Pearson correlation was used in setting the p-value at 0.05 level of significance.

Results and Finding

Socio-Demographic Characteristics of Respondents

Table 1 shows that the average age of the respondents was 22+3.17 while the highest proportion of the respondents (44.2%) were between the ages of 19-21. The marital status revealed that more than three-quarter of the respondents (94.5%) were single compared. More than half of the respondents (68.7%) were males. The FUO yielded 60.1% of respondents, leaving NDU with 39.9%.

The majority of the students (96.3%) were affiliated with the Christian religion. Those in their second year of study had more than half of the respondents (54.6%). While a good number of respondents (33.3%) received an estimated monthly allowance of between N6,000-N10,900,

More than half of the students indicated that they were on clear standing (64.4%). The indigenes of Bayelsa State had the highest percentage (76.1%). Majority of the students (83.4%) resided off-campus. Finally, the majority of students (69.3%) came from monogamous families.

Table 1: Distributions of Respondents by Socio-demographic variables

Variables	Frequency (n=163)	Percentage
Age		
16-18	22	13.5
19-21	72	44.2
22-24	45	27.6
25 and above	24	14.7
Mean/SD Age (22 ± 3.17)		
Marital Status		
Single	154	94.5
Cohabiting	5	3.1
Others specify	4	2.5
Gender		
Male	112	68.7
Female	51	31.3
Name of university		

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NDU	65	39.9
FUO	98	60.1
Religion		
Christian	157	96.3
Muslim	3	1.8
Others specify	3	1.8
Year of study		
100	28	17.2
200	89	54.6
300	17	10.4
400	27	16.6
500	2	1.2
Estimated allowance per month (₦)		
1,000-5,000	28	17,3
6,000-10,900	54	33.3
11,000-15,900	31	19.1
16,000-20,900	23	14.2
21,000 and above	26	16.0
Current CGPA		
1.00-2.99	36	22.1
3.00-3.49	61	37.4
3.50-4.49	53	32.5
4.50 and above	13	8.0
What is your academic status?		
Clear stand	105	64.4
1-3 carryovers	54	33.1
4-6 carryovers	4	2.5
Ethnic affiliations		
Bayelsan	124	76.1
Non-Bayelsan	39	23.9
Residence pattern		
Off-campus	136	83.4
Hostel	27	16.6
Type of family		
Monogamous	113	69.3
Polygamous	50	30.7

Trends in Suicidal Intention

Figure 1 displayed the distribution of suicidal intention among the students' the figure further revealed that majority of the students had never intended committing suicide (91.4%). However, a few of the respondents (8.6%) admitted to having had suicidal intentions.
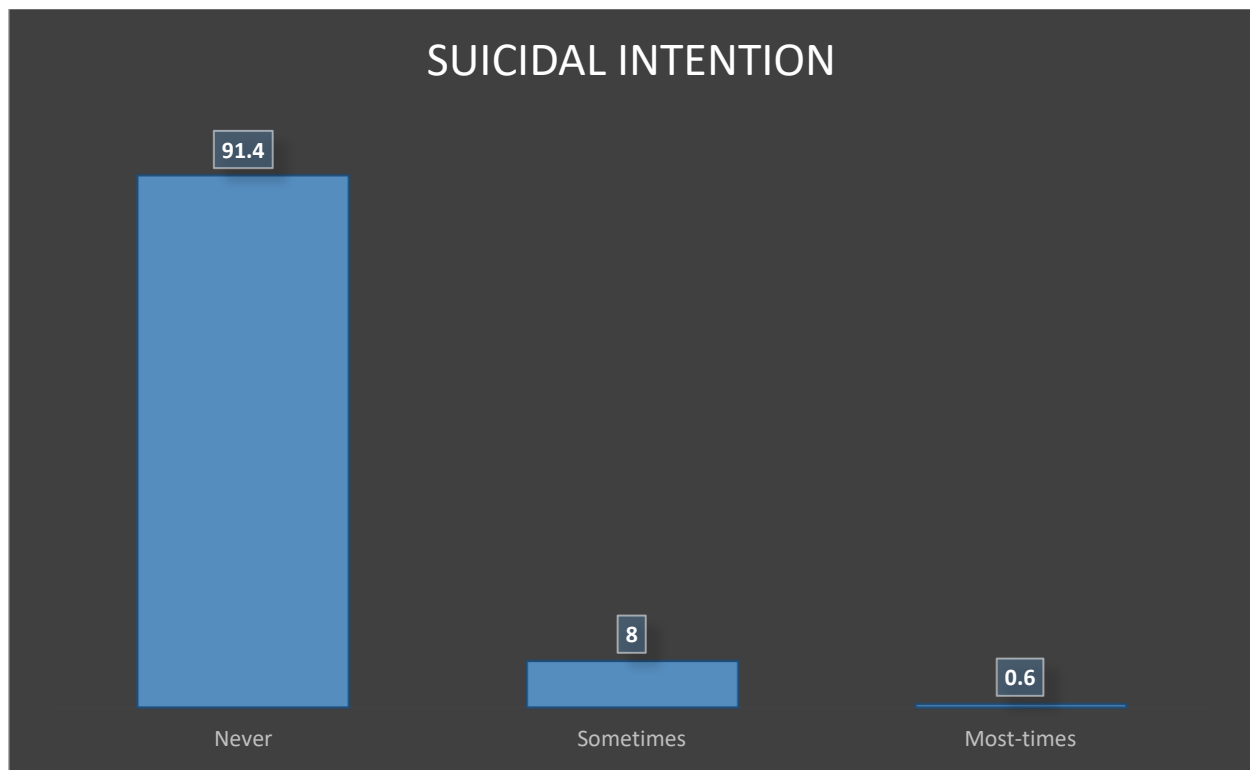
Figure 1: Percentage distribution of Suicidal Intention

Demographic correlates of suicidal intention

As shown in Table 3, none of the demographic variables was significant with the students' suicidal intention. Though, suicidal intention was highest among single students' (8.6%) followed by cohabiting students' (3.1%).

Table 3: Demographic Correlates of Suicidal Intention

Demographic Variables	Suicide Intention (N=163)			Total (N%)	X^2	P-value
	Never	Sometimes	Most times			
Age						
16-18	20(12.5%)	2(1.3%)	0(0.0%)	22(13.8%)	4.281	.639
19-21	64(40.0%)	4(2.5%)	1(0.6%)	69(43.1%)		
22-24	42(26.3%)	3(1.9%)	0(0.0%)	45(28.1%)		
25 and above	20(12.5%)	4(2.5%)	0(0.0%)	24(15.0%)		
Marital status						
Single	140(85.9%)	13(8.0%)	1(0.6%)	154(94.5%)	.895	.925
Cohabiting	5(3.1%)	0(0.0%)	0(0.0%)	5(3.1%)		
Others specify	4(2.5%)	0(0.0%)	0(0.0%)	4(2.5%)		
Gender						
Male	106(65.0%)	5(3.1%)	1(0.6%)	112(68.7%)	6.398	.041
Female	43(26.4%)	8(4.9%)	0(0.0%)	51(31.3%)		
Name of university						
NDU	60(36.8%)	4(2.5%)	1(0.6%)	65(39.9%)	1.967	.374
FUO	89(54.6%)	9(5.5%)	0(0.0%)	98(60.1%)		
Religion						

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Christian	144(88.3%)	1(0.6%)	0(0.0%)	3(1.8%)	2.945	.567
Muslim	3(1.8%)	0(0.0%)	0(0.0%)	3(1.8%)		
Other specify	3(1.8%)	0(0.0%)	0(0.0%)	3(1.8%)		
Year of study						
100	25(15.3%)	2(1.2%)	1(0.6%)	28(17.2%)	5.500	.703
200	82(50.3%)	7(4.3%)	0(0.0%)	89(54.6%)		
300	16(9.8%)	1(0.6%)	0(0.0%)	17(10.4%)		
400	24(14.7%)	3(1.8%)	0(0.0%)	27(16.6%)		
500	2(1.2%)	0(0.0%)	0(0.0%)	2(1.2%)		
Estimated allowance per month						
1000-5000	23(14.2%)	4(2.5%)	1(0.6%)	28(17.3%)	11.971	.152
6000-10,900	47(29.0%)	7(4.3%)	0(0.0%)	54(33.3%)		
11,000-15,900	31(19.1%)	0(0.0%)	0(0.0%)	31(19.1%)		
16,000-20,900	22(13.6%)	1(0.6%)	0(0.0%)	23(14.2%)		
21,000 and above	25(15.4%)	1(0.6%)	0(0.0%)	26(16.0%)		
Current CGPA						
1.00-2.99	34(20.9%)	2(1.2%)	0(0.0%)	36(22.1%)	4.206	.649
3.00-3.99	53(32.5%)	7(4.3%)	1(0.6%)	61(37.4%)		
4.00-4.99	49(30.1%)	4(2.5%)	0(0.0%)	53(32.5%)		
4.50 and above	13(8.0%)	0(0.0%)	0(0.0%)	13(8.0%)		
What is your academic status?						
Clear stand	95(58.3%)	10(6.1%)	0(0.0%)	105(64.4%)	5.206	.267
1-3 carryovers	51(31.3%)	2(1.2%)	1(0.6%)	54(33.1%)		
4-6 carryovers	3(1.8%)	1(0.6%)	0(0.00%)	4(2.5%)		
Ethnic Affiliations						
Bayelsa	115(70.6%)	9(5.5%)	0(0.0%)	124(76.1%)	3.614	.164
Non-Bayelsa	34(20.9%)	4(2.5%)	1(0.6%)	39(23.9%)		
Residence pattern						
Off-campus	125(76.7%)	10(6.1%)	1(0.6%)	136(83.4%)	.620	.733
Hostel	24(14.7%)	3(1.8%)	0(0.0%)	27(16.6%)		
Type of family						
Monogamous	106(65.0%)	8(4.9%)	0(0.0%)	114(69.9%)	2.865	.239
Polygamous	43(26.4%)	5(3.1%)	1(0.6%)	49)30.1%)		
Number of siblings						
None	9(5.5%)	0(0.0%)	0(0.0%)	9(5.5%)	6.807	.339
1-3	43(26.4%)	4(2.5%)	1(0.6%)	48(26.4%)		
4-7	70(42.9%)	9(5.5%)	0(0.0%)	79(48.5%)		
8 and above	27(16.6%)	0(0.0%)	0(0.0%)	27(16.6%)		
Age of admission						
15	3(1.9%)	0(0.0%)	0(0.0%)	3(0.0%)	7.194	.156
15-16	12(7.4%)	2(1.2%)	0(0.0%)	14(8.6%)		
17-18	55(34.0%)	4(2.5%)	0(0.0%)	59(36.4%)		
19-20	37(22.8%)	1(0.6%)	1(0.0%)	39(24.1%)		
21 and above	41(25.3%)	6(3.7%)	0(0.0%)	47(29.0%)		

Others can be found in table 3. Again, the table indicated that students' who are resident off-campus had higher suicidal intention (6.7%) when compared to those staying the hostels (1.8%). Other categories can be found in table 3 above.

Social correlates of suicidal intention

Results showing from table 4 revealed that only loss of close relation had an association with students' suicidal intentions.

Table 4: Social correlates of suicidal intention

	Suicidal Intention (N=163)			Total	X²	p-value
	Never	Sometimes	Most times	(N/%)		
Satisfaction with course of study.					3.383	.908
Very satisfied	32(19.8%)	4(2.5%)	0(0.0%)	36(22.6%)		
Satisfied	35(21.6%)	4(2.5%)	0(0.0%)	39(24.1%)		
Moderately satisfied	56(34.6%)	3(1.9%)	1(0.6%)	60(37.0%)		
Dissatisfied	22(13.6%)	2(1.2%)	0(0.0%)	24(14.8%)		
Very dissatisfied	3(1.9%)	0(0.0%)	0(0.0%)	3(1.9%)		
Support from friends					2.611	.625
High	32(19.8%)	4(2.5%)	0(0.0%)	36(22.2%)		
Moderate	106(65.4%)	7(4.3%)	1(0.6%)	114(70.4%)		
Low	10(6.1%)	2(1.2%)	0(0.0%)	12(7.4%)		
Relationship with parents/guardian					4.706	.788
Very cordial	69(42.3%)	3(1.8%)	0(0.0%)	72(44.2%)		
Cordial	53(32.5%)	7(4.3%)	1(0.6%)	61(37.4%)		
Moderately cordial	20(12.3%)	2(1.2%)	0(0.0%)	23(13.5%)		
Distant	6(3.7%)	1(0.6%)	0(0.0%)	7(4.3%)		
Very distant	1(0.6%)	0(0.0%)	0(0.0%)	1(0.6%)		
Loss of close relation					6.998	.030
Yes	63(38.7%)	10(6.1%)	1(0.6%)	74(45.4%)		
No	86(52.8%)	3(1.8%)	0(0.0%)	89(54.6%)		
Academic pressure					2.792	.593
Never	36(22.2%)	0(0.6%)	0(0.0%)	37(22.8%)		
Sometimes	77(47.5%)	8(4.9%)	1(0.6%)	86(53.1%)		
Most-times	35(21.6%)	4(2.5%)	0(0.0%)	39(24.1%)		
Suicide attempt by family members					170	.918
Never	138(86.3%)	12(7.5%)	1(0.6%)	151(94.4%)		
Sometimes	8(5.0%)	1(0.6%)	0(0.6%)	9(5.6%)		
Relationship status of parents					2.130	.712
Ever remain married	101(62.0%)	8(4.9%)	1(0.6%)	110(67.5%)		
Divorced	26(16.6%)	4(2.5%)	0(0.0%)	30(18.4%)		
Lone parent	22(13.5%)	1(0.6%)	0(0.0%)	23(14.1%)		
Estimated number of friends					11.428	.076
None	8(4.9%)	0(0.0%)	0(0.0%)	8(4.9%)		
1-3	33(20.2%)	8(4.9%)	0(0.0%)	41(25.2%)		
4-6	43(26.4%)	2(1.2%)	0(0.0%)	45(27.6%)		
7 and above.	65(39.9%)	3(1.8%)	1(0.6%)	69(42.3%)		

*significant at 0.05 level of significance

The table further showed that suicidal intention is higher among students' who have not lost their close relation (6.7%), while it is lower among those who have lost a close relation (1.8%).

Again, the table indicated that students with 1-3 friends have the highest suicidal intentions (4.9%), while it is lowest among those with 4-7 friends (1.2%) others can be found in table 4.

Economic correlates of suicidal intention

With regards to the economic correlates of suicidal intention, no variable was found to be associated with students' suicidal intentions.

Table 5: Economic Correlates of Suicidal Intention

Economic factors	Suicidal Intention (N=163)			Total	X^2	p-value
	Never	Sometimes	Most times	(N/%)		
Current economic status					4.223	.377
High	8(4.9%)	1(0.6%)	0(0.0%)	9(5.5%)		
Moderate	109(66.4%)	8(4.9%)	0(0.0%)	117(71.8%)		
Low	32(19.6%)	4(2.5%)	1(0.6%)	37(22.7%)		
Affordance of materials and textbooks					1.434	.488
Yes	83(51.2%)	8(4.9%)	0(0.0%)	91(56.2%)		
No	65(40.1%)	5(3.1%)	1(0.6%)	71(43.5%)		
Current financial status					3.618	.460
High	12(7.9%)	1(0.6%)	0(0.0%)	13(19.0)		
Moderate	103(63.2%)	8(4.9%)	0(0.0%)	111(68.1%)		
Low	32(20.9%)	4(2.5%)	1(0.6%)	39(23.9%)		

However, students with moderate financial status had the highest suicidal intentions (4.9%). Other categories can be found in table 5.

Socio-economic status of respondents and suicidal intention

According to table 6, academic satisfaction had an association with suicidal intentions (.001), likewise relationship with parents (002) and relationship status of parents (.002).

Table 6: Pearson Product Moment Correlation (PPMC) showing the relationship between the socio-economic status of respondent and suicidal intention

Variable	Mean	Std.Dev	N	R	P-value	Rmks
Academic satisfaction	2.50	1.050	163	.987	.001	Sig.
Suicidal thought	1.21	.477				
Relationship with parents	1.80	.876	163	.308**	.000	Sig.
suicide thought	1.21	.477				
Relationship status of parents	1.47	.731	163	.180*	.022	Sig.
Suicidal thought	1.21	.477				
Economic status	2.17	.504	163	.132	.092	Not Sig.
Suicidal thought	1.21	.477				
Financial status	2.16	.543	163	.288**	.003	Sig.
Suicidal thought	1.21	.477				

*Significant at 0.01 level of significance

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Though, the table still indicated that economic status was not significantly associated with students' suicidal intentions. Finally, the table showed that financial status was also found significant with the student's suicidal intentions (.003).

Psychological correlates of suicidal intention

Regarding the psychological correlates of suicidal thoughts, table 7 revealed that only depression had an association with student's suicidal intention (.000), which was significant at 0.01 level. While other categories can be found in table 7 above.

Table 7: Pearson Product Moment Correlation (Ppmc) showing the relationship between respondents' psychological status and suicidal intension

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

Sig at 0.01 level, 0.05 level.

Health correlates of suicidal intention

Table 8 showed that only health challenge among other variables was significant with students' suicidal intention (.008). Other categories can be found in table 8.

Table 8: Pearson Product Moment Correlation (Ppmc) showing the relationship between respondents' health status and suicidal intention

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

Significant at 0.01level of significance

Physical and drug correlates of suicidal intention

According to table 9, no variable was found to be significantly associated with students' suicidal intention. This can be found in table 9 below.

Table 9: Pearson Product Moment Correlation (Ppmc) showing the relationship between physical and drug status of respondents and suicidal intention

Variable	Mean	Std. Dev	N	R	P-Value	Rmks
Bullying	1.22	.485				
Suicidal thought	1.21	.477	163	.147	.062	Not Sig.
Starvation	1.55	.557				
Suicidal thought	1.21	.477	163	.052	.512	Not Sig.
Smoking	1.20	.499				
Suicidal thought	1.21	.477	163	.029	.714	Not Sig.

Discussion of Findings

In this study, it was found out that no relationship exists between age and suicidal intention. This finding is similar to that of Asante, Kugbey, Osafo Quarshie & Sarfo (2017), Hugo, Samira, Mariano, Makilin& Paula (2017) and Omigbodun, Dogra, Oluyemi, Esan & Adedokun (2015) which also affirmed that no relationship exists between age and suicidal ideation. Nevertheless, this study found that gender has an association with suicidal intension. Although, Hugo et al, (2017), had contrasting findings which revealed that gender is not associated with the presence of suicide ideation. The findings still indicated that the number of carryovers is not associated with suicidal intentions. This finding again is similar to that of Amare, Woldey Hannes, Haile and Yeneabat (2018), which also found out that there is no relationship between disappointed with grade results and suicidal ideation. Again, Meng, Jian Li, Loerbroks, Jiao Wu and Hui Chen (2013) also found that no relationship exists between poor academic performance and background (rural/urban).

Additionally, findings in this study revealed that no relationship exists between religion and suicidal intention. However, Hugo et al (2017) contrasted with these findings as they found out that a relationship exists between religious practices and the presence of suicidal ideation. Year of study from the findings is also not associated with suicidal intentions. Thus, Hugo et al (2017)

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also found that no relationship exists between the year of study and the presence of suicide ideation.

However, findings in this study still showed that relationship with parents/guardians has a significant relationship with suicidal intension. This finding is also similar to that of Asante et al (2017) which found out that parental understanding has a relationship with suicidal ideation, suicidal plan and suicidal attempt. However, the findings in the study revealed that financial status has a relationship with suicidal intention, this is similar to the findings of Meng et al. (2013) which found out that there is an association between financial problems and suicidal ideation.

In continuation, the findings in this study again indicated that there was an association between the loss of close relations and suicidal intension. However, Hugo et al (2015) had a contrary finding that no relationship exists between attempted suicide among friends and the presence of suicidal ideation. The study still found that relationship status of parents had an association with suicidal intention. Also, Omigbodun et al (2015) in a study found that the relationship status of parents has an association with suicidal ideation and suicide attempt.

Nonetheless, the findings in this study indicated that no relationship exists between suicide attempt by family members and suicidal intention. However, Hugo et al (2017) in a study found out that attempted suicide in the family has a relationship with the presence of suicidal ideation. Findings in this study again showed that there is a relationship between loss of close relations and suicidal intension. On the contrary, Hugo et al (2017) found that no relationship exists between attempted suicide among friends and the presence of suicidal ideation.
This study again found that the estimated number of friends has no association with suicide intention. However, Asante et al. (2017) found in a study that there is a relationship between close friends and suicidal plan.

Findings in the study still showed that no relationship exists between intoxication by alcohol and suicidal intention. Thus, Asante et al. (2017) in a study discovered that alcohol misuse also has no association with suicidal ideation, plan and attempt. Still, Hugo et al. (2017) figured that alcohol consumption has no relationship with suicidal ideation among universities students.

The findings again indicated that involvement in physical fights and been attacked are also having no relationship with suicidal intension. This is similar to that of Asante et al (2017) which also indicated that attacked and in a fight are not associated with suicidal ideation, suicidal plan and suicidal attempt. Still, in the findings of this study, bullying was found not having a relationship with suicidal ideation and intention. However, Asante et al. (2017) discovered that being bullied is a predictor of suicidal ideation, plan and attempt. Starvation with regards to the study's findings has no relationship with suicidal ideation and intention. However, Asante et al. (2017) in a study revealed that food insecurity is a risk factor for suicidal ideation, plan and attempt. Again, findings in this study indicate that smoking is not associated with suicidal ideation and intention, this is similar to Asante et al. (2017) which also indicates that smoking has no relationship with suicidal ideation, suicidal plan and suicidal attempt. Also, Meng et al. (2013) in a study revealed that Cigarette smoking has not association with suicidal intention.

Finally, the findings in this study revealed that depression is associated with suicidal intentions. This finding is similar to that of Hugo et al (2017) which also found out that there is a relationship between the presence of depressive symptoms and suicidal ideation among university students. Again, Animasahun and Animasahun (2016) still found out that depression is a risk factor for suicide among Nigerian youths. Again, Adewuya, Ola, Coker, Atilola, Zachariah, Olugbile, Fasawe and Idris (2016) also found depression to be associated with suicidal ideation.

Conclusion

The suicidal intention is relatively low among the undergraduates. However, the major routes with which they intend killing themselves whereby hanging and drinking harmful substance. Again, gender is the only demographic correlate found significantly related to suicidal intentions. Also, the loss of close relation influences their (students') suicidal intentions. Nonetheless, only the financial status among other economic factors is significant with the students' suicidal intentions. Additionally, depression served as the risk factor for the undergraduates' suicidal behaviour.

Recommendations

There should be teachings of suicide education and prevention in schools and colleges. For this to be meaningful, suicide education should be capable of loading its contents with topics such as signs, myths and facts about suicide, factors associated with suicide and the possible ways of helping the suicidal persons. Also, parents are in the unique position of helping adolescents build healthy interpersonal relationships, self-esteem and improve problem-solving and coping skills; in turn, this can help them deal with negative life stressors and reduce the occurrence of intrusive intentions about suicide.

University authorities should ensure that possession of harmful substances and lethal weapons by students in the campuses must be drastically checked and students found with dangerous weapons rusticated or dismissed from the university to serve as a deterrent to others. Bulletins on suicidology should be mounted; prevention centres whose scope should not only be that of preventing suicide but also handling other psychological and emotional problems of crisis nature should be opened. These centres could be staffed through volunteer agencies, mental health services, public health departments and hospitals. Programs of preventive intervention strategies should be organized in the various universities for the students.

Additionally, specific university-based mental health services should be established in various universities in Nigeria. These services should aim at finding out and taking care of depressed and at-risk students to prevent incidences of suicidal behaviours. Lastly, the government should tackle vigorously social health problems. This can be done by sponsoring studies to identify factors that can enhance suicidality and to find solutions to them.

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