

**RISK FACTORS OF SUCIDE AND DEPRESSION AMONG  
STUDENTS OF UNIVERSITY OF BENIN, BENIN CITY, EDO  
STATE, NIGERIA**

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**Abstract**

*Suicide is simply defined as intentional action or inaction carried out with the intent to inflict fatal harm or injury on oneself. The word suicide originates from two Latin words 'sui' meaning "self" and 'caedes' meaning "murder". The word suicide first appeared in Sir Thomas Browne's book 'religio medici' first published in the 17th century. The actual usage of the term suicide was to distinguish between accidental death and intentional self-harm leading to death. Depression is one of the frequently diagnosed mental illnesses. Depression is not just when you feel sad or blue, it is way more than been sad. There are some obvious signs and symptoms present when one is depressed, there is actual sadness, poor concentration, insomnia, fatigue, appetite disturbance, excessive guilt or hopelessness and thoughts of suicide. . There is evidence provided throughout this work which proves the rising prevalence of suicide in Nigerian campuses. Nigeria is also reported by the World Health Organisation to have one of the highest incidences of mental health challenges for example depression on the continent, investigation shows very high awareness of these mental health challenges among participants in this study. Most of the participants who are female and male undergraduate students at University of Benin at all levels hold undesirable views toward suicide and other mental challenges.*

*While many students expressed optimism that this deadly trend can be reversed if the right support facilities are in place, accessible data shows that awareness of the available support facilities within the campus is low, and many students do not take advantage of these facilities as a result of ignorance or misinformation that these facilities were not made available to all.*

**Keywords:** Depression, mental health, mental illness, suicide, suicide ideation

## **Introduction**

One of the leading causes of death globally is suicide. Almost one million people die due to suicide annually, according to the World Health Organisation 800,000 people die due to suicide every year, which is approximately one person committing suicide every forty seconds. It was also estimated that 1.5 million people will die of suicide in 2020 (WHO, 2017). Suicide is a global phenomenon, this means that suicide occurs everywhere in the world; however evidence shows that most suicide occurs in the developing world where facilities are not available in the right proportion, and are scarce to facilitate the early detection, diagnosis, and prevention of suicide. According to the WHO (2014), Suicide was classified as the third leading cause of death globally among young people between ages 15-29 years, and the second leading cause of death in 2015 for those between ages 15 - 44 years. It was also reported that suicide mostly occurs in low- and middle-income countries (WHO, 2014). Common methods of suicide include hanging, poisoning, (ingestion of harmful substances like the infamous sniper and other harmful insecticides) the use of firearms, drug overdose, deliberate auto crash, jumping from a height and drowning.

Suicide is simply defined as intentional action or inaction carried out with the intent to inflict fatal harm or injury on oneself. The word suicide originates from two Latin words 'sui' meaning "self" and 'caedes' meaning "murder". The word suicide first appeared in Sir Thomas Browne's book 'religio medici' first published in the 17th century. The actual usage of the term suicide was to distinguish between accidental death and intentional self-harm leading to death. Emile Durkheim conceptualised the term as applied to all cases of death resulting directly or indirectly from a positive or negative act of the victim himself, which he knows will produce this fatal outcome (Durkheim, 1897). Suicide is a deliberate attempt to end one's own life, Durkheim was one of the earliest scholars who sought to conceptualise suicide and provide insight into its nature and causes. Apter and Gvion (2012) defined suicide as an act of intentionally terminating one's own life. That is, the individual wishes to die, not only wishing, but actual wants to die. Suicide is therefore seen as a deliberate action or inaction by an individual on himself with the intent to produce a fatal outcome. Suicide is not to be confused with accidental self-harm which could cause death, suicide is rather a purposeful action carried out with the intent of dying. Therefore, suicidal behaviour is any deliberate action or inaction intended to end one's own life in order to escape unbearable suffering or to help change adverse conditions of living. It is the intentional act of taking one's own life and destroying one's own prospects (Ani, 2010; Apter & Gvion, 2012; Klonsky, 2015). Suicide is therefore the act of a person intentionally causing his or her own death.

We can conclude by saying that death from injury, poisoning, or self-harm where there is evidence that the injury was self-inflicted, and that the individual intended to kill him or herself is suicide. Harmer & Lee, (2021), stated that

Suicidal ideation refers to suicidal thoughts and desires. It refers to the process of developing the wish or desire to die by suicide. This is basically the onset of the actual thought of killing oneself. Suicidal ideation, are series of contemplations, wishes, and preoccupations with death by suicide. However, it could be Active or Passive suicidal ideation. That is, when the person attempt suicide it is active and if it is just mere thought or wishing without actually attempting suicide, then it is passive.

Depression is one of the frequently diagnosed mental illnesses. Depression is not just when you feel sad or blue, it is way more than been sad. There are some obvious signs and symptoms present when one is depressed, there is actual sadness, poor concentration, insomnia, fatigue, appetite disturbance, excessive guilt or hopelessness and thoughts of suicide. It has been observed that depression left untreated can lead to serious impairment in daily functioning and even suicide. (National Alliance on Mental Illness,2013). Furthermore, WHO, (2012), in support of the above assertion stated that depression is a state or situation that presents depressed mood, apathy, low self-esteem, and poor concentration. it is a mental disorder that affects the mood and actions which can be clinically diagnosed and treated. Patients who suffer from depression suffer from extreme sadness, loss of interest, tiredness, and impaired functioning. Depression is a common mental disorder which negatively affects mood and actions, causing prolonged and intense feelings of sadness, apathy, and isolation, depression, may lead to suicidal behaviour. Although treatable, depression remains a major contributor to the global disease burden and is prevalent in all regions of the globe. Silke Bachmann (2018), asserted that psychiatric diseases account for a large majority of suicide and suicides attempts, although problems concerning finances, relationships, crisis are also reasons for suicide.

O'Connell, Boat & Warner, (2009), stated that risk-factor predisposing people to danger or harm are seen as a characteristic at the biological, psychological, family, community, or cultural level, includes other levels and situations. It is associated with a higher likelihood of problem outcomes. The factors that place individuals at risk for suicide are complex and they interact with one another. Identifying these factors and understanding their roles in both fatal and non-fatal suicidal behaviour are central to preventing suicides". (Makinde, Oluwayemi, Adegbite et al, 2019). WHO (2017), report showed that Africa has the third highest age standardised rate of suicide (9.5/100,000) and almost 30 million people suffering from depressive disorders making up for 9.32% of the total number of reported cases of suicide. In Nigeria, the rate of depression and suicide shows that the country is not left out of this global scourge, because, Nigeria has the highest incidence of depression in Africa. 3.9% of the population suffers from various depressive disorders, this figure puts the total number of confirmed cases of depressive disorders at over 7 million cases. From the above assertions, African have a high risk factor of depression and suicide. This poses a significant public

health concern, because depression is very common and most people cannot tell whether they are just sad, over sad or depressed. A disturbing trend is that a significant number of Nigerians who committed suicide in the past year and half are university students, as noted above, there have been several reports of students of tertiary institutions committing suicide or attempting for different reasons ranging from mental health issues, failure to cope with academic stress, economic worries, termination of a relationship amongst other factors.

Figure 1: Suicide victim



Source: Vanguard news online, 2021

Figure 2: Sniper



Source: Guardian news online, 2021.

### **Research Design**

The research design adopted for this study is the descriptive survey research design due.

The target population for this study were the undergraduate students of the faculty of social sciences, University of Benin. At the time of this study, the undergraduate population in the faculty of social science was 2450, the faculty had 6 departments. The non-probability sampling technique was used, the purposive sampling method was further used to selection the participants. To determine the sample size, 20 students' male and female were selected from the 6 departments, according to the needs of the study. The questionnaire used in the survey was made up of two sections, section A and B. Section A for the gathering of the socio-demographic data of the respondents, while Section B was aimed at collecting information relating to the various research objectives that is, the thematic issues. The method used in the collection of the data was the face-to-face and online survey. The method will be used in order to minimize the chance of errors in the response process and also ensure a wider coverage for more accurate responses, while minimizing the risk of Covid-19 contraction. For those who may need clarification on the items, the items in the questionnaire will be properly explained to them.

The data obtained from the research instrument was analysed with the use of the IBM statistical package for social sciences (SPSS) version 25. The analysis of the different categories of the quantitative data was done using frequencies, percentages, tables. Deductive Content analysis was also used to gain insight on

the qualitative data obtained from the open-ended questions.

**Data Analysis and Discussion of Results (socio- demographic Characteristics of Respondents)**

<b>Variables</b>	<b>Frequency (n=120)</b>	<b>Percentage %</b>
<b>Age</b>		
15-19	24	20
20-24	67	55
25-29	20	17
30+	9	8
<b>Gender</b>		
Females	54	45
Males	66	55
<b>Marital status</b>		
Single or never married	107	89.16
Married	6	5
Prefer not to say	7	5.84
<b>Class</b>		
Low	40	33.4
Average	43	35.8
High	17	14
Very High	4	3.4
Prefer not to say	16	13.4
<b>Religion</b>		
Islam	15	12.5
Christianity	102	85
Traditional Religion	2	1.7
Other	1	0.8

*Source:* Field work (2021)

**SECTION B: Thematic Issues**

**Objective 1:** The growing trend of suicide among University of Benin undergraduate students.

**Table 2: Are you aware of the growing trends of suicide among University of Benin students?**

<b>Responses</b>	<b>Frequency</b>	<b>%</b>
Yes	93	77.5
No	25	20.8

Not sure	2	1.7
Total	120	100%

**Source:** Field work (2021)

Table 2 above shows student awareness of the growing trend of suicide among respondents who are male and female undergraduate students at University of Benin. The result clearly shows that majority of students responded that they were aware of the rising suicide cases on campus. This is backed by 77.5% of respondents who were aware followed by 20.8% of respondents who were not aware of the growing trend. While another section of respondents, 1.7% of total respondents were unsure.

**Table 3: How rampant (High/Low) is suicide cases in the university**

Responses	Frequency	%
Low	26	21.7
Average	38	31.7
High	43	35.8
Very High	13	10.8
Total	120	100%

**Source:** Field work (2021)

Results from table 3 above shows that respondents hold different views regarding the prevalence of suicidal behaviours on campus. 31.7% of the respondents reported that the rate of suicide on campus is on average scale, while 35.8% of the total respondents countered that the reported cases of suicide among students on campus was high, meanwhile, another section of respondents (10.8%) reported that the cases of suicide among undergraduate students at University of Benin is alarmingly high. Another section of respondents however, numbering 21.7% of the total respondents maintained that the suicide rate was relatively low.

**Table 4: Do you know, or have you heard of any suicide cases in University of Benin?**

Responses	Frequency	%
Yes	67	55.83
No	30	25
Yes, More than one	17	14.17
Very Often	6	5
Total	120	100%

**Source:** Field work (2021)

To further investigate these alleged trends of suicide among University of Benin students, the sample respondents were queried if they knew or have heard of any suicide victim on campus. Results confirm that more than half of the respondents

(55.83%) at the time of the study have either heard reports or were well aware of at least one suicide victim on campus. Followed by another 25% of the respondents who reported that they were not aware of any such cases on campus. However, over 14% of respondents' report that they were aware of more than one suicide victim on campus, surprisingly, another section representing 5% of the total respondents report that suicide among undergraduates occurs very frequently on campus.

These findings draw attention to the growing trends of suicide among University of Benin students, undoubtedly, these results are consistent with earlier reports which emphasised the growing rate of suicide among undergraduate at Nigerian institutions of higher learning, in line with the findings of Makinde, Oluwayemi, Adegbite et al, 2019; Okoedion & Okolie (2019).

**Objective 2:** Students perception on suicide, depression, and other mental health challenges.

**Table 5a: Awareness of Mental health challenges**

Responses	Frequency	%
Acknowledgement/Awareness of mental health challenges	86	96.7
Ignorance of mental health challenges	3	3.3
Total responses	89	100%
No Response	31	
Total	120	

*Source:* Field work (2021)

Table 5 above shows the results of investigation into the perception of students at University of Benin concerning suicide, depression, and other related mental health challenges. An overwhelming majority of respondents (96.7%) acknowledge the various mental health challenges which may exacerbate the risk of engaging in suicidal behaviours, few respondents however (3.3%) seemed to be ignorant of these mental challenges.

These findings show high awareness of mental health challenges among students who participated in this study.

**Content analysis of the responses provided was carried out using deductive approach.**

**Table 5b: Insights from content analysis revealed the following mutual views/opinions expressed by respondents from the responses provided.**

Opinions Stated	Frequency	% of Responses
Expression of negative views towards suicidal behaviours	62	69.7

Views that suggest mental illness and suicidal behaviours is on the increase among Uniben students	56	62.9
Emphasis on family problems or social factors as likely causes	40	44.9
Views that emphasise that this problem is preventable, and can be better managed on campus	74	83.1
Low awareness of available facilities like counselling services on campus	59	66.2

**Source:** Field work (2021)

Table 5b shows the views held by students, particularly undergraduate students of the University of Benin. The results show that majority of respondents, 69.7% of total respondent's express negative views towards suicidal behaviours, these views hold that this growing trend is "very bad" "problematic" and can have a negative impact on the health of students on campus. In addition to these negative views expressed by most of the respondents who took part in this study, 62.9% of respondents held the view that suggest that mental illness possibly leading to suicidal behaviours is on the increase among students in the campus, especially in recent years, with the rate of reported cases and suicide attempts. These findings were in line with Jumbo & Idung (2018) who stressed that stigma and negative attitudes towards mental illness is prevalent among students in tertiary institutions. An important point of diversion, however, is that participants in this study demonstrated a high awareness of mental health challenges.

Respondents who partook in this study equally frequently emphasise family problems or other social factors as likely causes of students falling into depression and subsequent risk of engaging in suicidal behaviours. 44.9% of respondents perceive that most cases of suicide and mental illness such as depression among students on campus were as a result of unresolved family issues or problems from the home.

In assessing students' perception regarding suicide, depression, and other mental health challenges it is imperative to state that 83.1% of the total respondents who took part in this study hold the view that the rising suicide cases are preventable and can be better managed in the learning environment in line with the findings of Aruah, Onwuama, Eze, and Okonkwo (2020).

A close look at the available data from table 9b above shows low awareness of available counselling and stress managements facilities in University of Benin among many respondents. At the time of this study 66.2% of the respondents, who were also students at University of Benin were not aware of some of the facilities available for students who may need someone to confide in, a substantial number of respondents who took part in this study stress the need for a functional guidance

and counselling unit. However, most of these respondents seem to be unaware that the institution has a fully functional unit dedicated for this purpose available to all on campus.

#### 4.3.1 Objective 3: Depression, mental disorders, and suicide risk

**Table 6: Do mental challenges e.g. depression pose a risk factor for attempting suicide among University of Benin students?**

Responses	Frequency	%
Yes, Agree	79	65.83
NO, Disagree	24	20
Not sure	17	14.17
Total	120	100%

*Source:* Field work (2021)

Untreated mental illness for example depression, which is by far the most prevalent, may be a significant contributing factor to the increasing cases of suicide being reported. A significant number of respondents who contributed to this study 65.83% of total respondents' report that mental challenges predominantly depression is a major contributor to these rising suicide cases. While 14.17% of respondents were unsure if any of the reported suicide cases were linked to depression, another section of respondents, 20% of respondents disagreed with this position.

**Table 7: Do you know any University of Benin students who attempted suicide due to untreated depression?**

Responses	Frequency	%
Yes	39	32.5
No	46	38.4
Yes, More than one	3	2.5
Very Often	32	26.6
Total	120	100%

*Source:* Field work (2021)

Table 7 above shows 26.6% of respondents' who reported that they know/ have heard of suicide cases very often. While another section of respondents representing 38.4% hold that they are not aware of any cases of suicide attempt on campus linked to depression, a significant number of respondents (32.5%) also indicated that they knew/ heard of at least one reported case of suicide linked to depression, on the other hand 2.5% of the total respondents, maintained that they were aware of more than one case of suicide attempt on campus linked to

depression.

These findings suggest that mental challenges such as symptoms of varying degrees of depressive disorders represent a significant causal factor which has aggravated the suicide trends among students at University of Benin, data shows that a substantial number of reported cases of completed suicides and suicide attempt on campus have been associated with these challenges, this is consistent with the findings of other studies (Mohammed, 2015; Makinde, Oluwayemi, Adegbite et al, 2019; Ogboghodo, Osadiaye & Omosun-Fadal, 2018; Okoedion & Okolie, 2019). The findings of these authors had suggested that depression is not only the most prevalent, but also the most significant risk factor of suicide attempt among students of tertiary institutions in Nigeria.

**Objective 4:** Academic stress and suicide risk

**Table 8: Does inability to cope with academic stress possibly increase suicide risk?**

Responses	Frequency	%
Strongly Agree	55	45.8
Agree	39	32.5
Neutral	10	8.3
Disagree	16	13.4
Total	120	100%

*Source:* Field work (2021)

Table 8 shows that over 77% of respondents agree, to varying degrees, maintain that that students’ inability to cope with academic stressors may cause depression and lead to subsequent suicide attempt on campus. This is backed by 45.8% of respondents who strongly agree and 32.5% of respondents who agree that academic stress contributes to suicide risk. While 8.3% of respondents maintain a neutral position, another section of respondents, 13.4% of total respondents held that academic stress is not a contributing factor to increasing suicide cases on campus.

**Table 9: Do you know of any student who got depressed or attempted suicide in the past due to academic stress, for example failing examination?**

Responses	Frequency	%
Yes	53	44.17
No	39	32.5
Yes, more than once	7	5.83
Very Often	21	17.5

*Source:* Field work (2021)

Table 9 shows that over half of the respondent's report that they know at least one student who fell into depression or subsequently attempt suicide on campus due to issues bordering around inability to cope with academic stress, for example scoring poor grades in an examination. This is backed by 44.17% of respondents who report that they knew of at least one of such cases, followed by 5.83% who report that they knew of more than one of such cases. While another section of respondents, 32.5% of total respondent's report that they were not aware of such cases, 17.5% of respondents reported that these cases of suicide attempt linked to poor grades, or inability to cope with academic stress were very rampant on campus.

Available data suggests that inability to cope with academic stressors is another complicit factor which contributes to the rising cases of suicide and suicide attempt among students on the campus. In practical terms, the findings of this study were in line with studies conducted by Oladele & Oladele (2018) and further studies conducted by Ajibola & Agunbiade (2020), Nkwuda, Ifeagwazi, Nwonyi, & Oginyi (2020). These studies earlier emphasised academic stressors as significant risk factors for suicidal ideation and subsequent suicide attempt particularly among students on campus.

#### **4.3.2 Objective 5: Economic challenges, poverty, and suicide risk**

**Table 10: The current economic realities and rising poverty level could possibly increase the danger of suicide on campuses.**

Responses	Frequency	%
Strongly Agree	49	40.83
Agree	43	35.8
Neutral	25	20.83
Disagree	2	1.7
Strongly Disagree	1	0.84
Total	120	100%

**Source:** Field work (2021)

Table 10 shows that over 75% of respondents who participated in this study, to varying degrees, maintain this position. This is backed by 40.83% who strongly agree, in addition to 35.8% of respondents who agree. This shows that a significant proportion of responses collected from students at University of Benin indicate that majority of respondents who participated in this study perceived that economic challenges could cause severe depression among students.

**Table11: Do you know of students who get depressed or attempt suicide because of inability to meet up with financial needs?**

Responses	Frequency	%
Yes	49	40.8
Rarely	30	25
Yes, more than once	27	22.5
Very Often	14	11.7

*Source:* Field work (2021)

Table 11 above shows that over 60% of respondent's reported that they were cognisant of at least one or more students who fell into depression or attempted suicide due to economic challenges or being forced to truncate their academic endeavours as a result of inability to meet up to financial needs. This is backed by 40.8% of respondents who report they were aware of at least one of such cases, followed by 22.5% of respondent's report that they are aware of more than one student who fell into depression or attempted suicide due to financial problems. Interestingly, a number of students constituting 11.7% of the total respondents also reported that cases like this are very frequent among fellow students at University of Benin and occur on a regular basis.

Thus, in line with the findings of Ajibola & Agunbiade (2019) the findings of this study emphasises economic challenges as a significant factor which has worsened the trends of suicide, particularly among students at University of Benin in recent years.

#### 4.3.3 Objective 6: Suggestions of ways this problem can be better managed on campus.

**Table 12a: The reported cases of suicide could have been prevented and avoided; do you agree?**

Responses	Frequency	%
Strongly Agree	68	56.7
Agree	39	32.5
Neutral	9	7.5
Disagree	4	3.3
Strongly Disagree	-	-
Total	120	100%

*Source:* Field work (2021)

Table 12a shows 56.7% of respondents strongly agree that the rising suicide cases are preventable and can be better managed in the learning environment. This is followed by 32.5% who agree. These sets of respondents are of the view that this deadly trend of suicide among students on campus can be reversed if the appropriate measures are put in place. On the other hand, while 7.5% of respondents maintained a neutral stance, another 3.3% assumed that this trend may

not be easily reversed.

**Table 12b: What facilities should be put in place to curb this problem of depression and suicide among students at University of Benin?**

Responses	Frequency	% of responses
Functional Guidance & Counselling Unit	68	81.9
Proper Stress Management	46	55.4
Seminars and Conferences for students who may be at risk of Mental challenges & Suicide	38	45.8
Emergency hotlines for those who may need someone to talk to	22	26.5
More family/ Parental support	33	39.7
Provision of Scholarship/ Financial aid to deserving students	55	66.3
Total Responses	83	100%
No response	37	

*Source:* Field work (2021)

Insights from content analysis using deductive approach revealed the following mutual views/ suggestions on how to better manage this problem on campus, stated by respondents from the responses provided.

Table 12b shows the measures suggested to curb this menace on campus which are: establishment of a functional guidance & counselling unit on campus (81.9%), proper stress management (55.4%), seminars and conferences for students at risk of mental challenges (45.8%), more parental/ family support (39.7%), provision of financial aid to students (66.3%), and emergency hotlines for students who may need someone to talk to (26.5%).

These findings are no doubt in line with earlier studies which emphasise that the problem of suicide can be better managed on campus through targeted support facilities geared towards assuaging this problem. In practical terms, this is in line with the findings of Ani (2010); Animashaun & Animashaun (2016); Okoedion & Okolie (2019); Nkwuda, Ifeagwazi, Nwonyi, & Oginyi (2020); Ajibola & Agunbiade (2020); Aruah, Onwuama, Eze & Okonkwo (2020) in offering practical suggestions and recommendations meant to guide prevention and intervention efforts on campus.

### **Conclusion**

This study draws attention to the growing trends of suicide in Nigerian universities, particularly among undergraduate students at University of Benin. There is evidence provided throughout this work which proves the rising prevalence of suicide in Nigerian campuses. Nigeria is also reported by the World Health Organisation to have one of the highest incidences of mental health challenges for example Depression on the continent, investigation shows very high awareness of

these mental health challenges among participants in this study. Most of the participants who are female and male undergraduate students at University of Benin at all levels hold undesirable views toward suicide and other mental challenges.

While many students expressed optimism that this deadly trend can be reversed if the right support facilities are in place, accessible data shows that awareness of the available support facilities within the campus is low, and many students do not take advantage of these facilities as a result of ignorance or misinformation that these facilities were not made available to all.

Among the most often cited risk factors of depression and suicide attempts, particularly among students on campus, the findings of this study emphasise the contribution of underlying factors such as Depression, Academic stress, and Economic challenges to the spate of suicide cases reported specifically among undergraduate students at University of Benin. These factors are reported by respondents who participated in this study as frequently reported causal factors of suicide attempts among students at the University of Benin. These underlying factors are important in guiding prevention efforts. The reality of these underlying factors aggravates risk of students falling into depression and subsequent risk of attempting suicide as a result of increased capability to carry out the act.

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