



## Suicide Attempts Among In-School Adolescents in Enugu State, Nigeria

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### Abstract

The study investigated suicide attempts among in-school adolescents in Enugu state, Nigeria. A descriptive research design was used to conduct the study. Two research questions were posed to guide the study while two null hypotheses were tested at a 0.05 level of significance. The population for the study was 149,028 in-school adolescents in secondary schools owned by the Enugu State Government. The 2,112 sample of adolescents was selected through a multistage sampling procedure. The structured questionnaire (I-SASAQ) that was utilized to generate data for the study was validated by five experts. The I-SASAQ reliability was determined using the split-half method. The reliability index of 0.80 was obtained using Pearson Product Moment Correlation Coefficient and its internal consistency of 0.69 was established using Cronbach's Alpha. Mean and standard deviation were utilized to answer the research questions whereas z-test was used to test the hypotheses. Findings showed that suicide attempt was low (male  $\bar{x} = 1.15$ ; SD=0.50: female  $\bar{x} = 1.10$ ; SD = 0.32) among in-school adolescents in Enugu state. Results also indicated that respondents aged 12-14 had a grand mean rating of 1.10 and SD of 0.43 while older adolescents aged 15-17 had a grand mean rating of 1.13 and SD of 0.53. z-test indicated that gender ( $p\text{-val}=0.000 < .05$  level of significance) made a statistically significant difference in suicide attempts among the respondents. In the same vein, age made a statistically significant difference in suicide attempts among the studied group ( $p\text{-val}=0.030 < 0.05$  level of significance). Based on the results, it was recommended that suicide attempts be de-criminalized in Nigeria generally, to enable such victims to seek health care services without restraint and thus reduce disability and fatality following the suicidal act.

**Keywords:** suicide attempt, parasuicide, adolescents, in-school adolescents

### Introduction

Every year multitudes of lives are permanently damaged in suicide attempts across the world. Many of those who attempted suicide across the world were adolescents in Africa, and Nigeria inclusive (Oyetunji et al., 2021; Tetteh et al., 2021). Akotia et al. (2019) viewed suicide attempt as a non-habitual act with the nonfatal outcome that the individual, attempting to, or taking the risk to die inflict bodily harm, initiated and carried out with the purpose of bringing about wanted changes. Olibamoyo et al. (2021) defined suicide attempt as an engagement in self-injurious behaviour in which there is at least some intent to die.

Some suicidologists try to separate suicidal acts in which the victim survived into suicide attempts and parasuicide on the basis of the intention of the individual. The use of intentionality to classify this phenomenon is problematic. However, Fairbairn (2007) insisted that the intent of the individual should not be ignored since parasuicide is merely a suicide gesture with an absence of intent to kill oneself in the original plan. In supporting this Sema (2011) maintained that some of those who were said to have survived suicide attempt never planned to kill themselves. Shneidman (1992) on the other hand had earlier argued that the use of intention as a criterion to classify suicide attempt is fraught with error since a person's motive might be uncertain or complex and even escapes self-observation. The situation is compounded further if the victim is psychiatric, under the influence of a psychotropic substance or if it is latent in form. In an effort to avoid the problem of intentionality in suicidology, non-fatal suicidal behaviour is now being adopted by some experts. Lubuale (2018) indicated that suicide attempts and non-fatal suicidal behaviour have similar manifestations and thus can be used synonymously. Therefore, the same position was adopted in the present study. Attempted suicide has serious economic, social and public health effects.

The costs of a suicide attempt in financial terms are monumental. However, in Enugu State, where this study was conducted it is difficult to quantify the cost in monetary terms due to misclassification and outright concealment of cases. Concealment of suicide attempts in Nigeria is common since it is a criminal offence

(Kukoyi et al., 2023); and the victims are socially stigmatized (Batterham et al., 2013). These factors force many victims to seek treatment outside modern health clinics or even nowhere at all. This could complicate the injuries and cause permanent disability and/or premature death of the adolescent, who is full of hope in life.

Adolescence refers to the lifespan of 12 to 19 years. It is marked by unique physical, psychological and social challenges that predispose them to suicide attempts. Apart from the marked rapid changes in the body, Bilsen (2018) showed that it is also characterized by feelings of insecurity and stress. Adolescents are also under pressure to succeed and are confronted with other challenges in life. However, adolescents differ in their experiences. For instance, Santrock (2005) indicated that older adolescents are better at decision-making than younger ones. Many in-school adolescents at this stage move to school very far away from home.

In-school adolescents constituted the subjects for this study. Most secondary school students in Nigeria fall within this category of persons (Shalangwa et al., 2019). Consequently, secondary school was the locus of the present study. According to Obayi et al. (2021), Nigeria's educational system consists of junior secondary schools (JSS) and senior secondary schools (SSS). JSS is for adolescents aged 11-13 while SSS is for those aged 14-17. Probably, some of them might have actually attempted suicide since suicide ideation was found among students in the location of this study (Ugwuoke, 2016). Cleary (2005) posited that negative psychological stressors were the major cause of the increasing rate of suicide among adolescents. However, Janackovski (2022) indicated that sociologists attributed suicide to group life. Based on these, both the psychological and sociological theories of suicide were the anchors of this subject matter in Enugu State.

The choice of Enugu State was necessitated by findings that suicide ideation, a precursor of suicide attempts, was found among secondary school students in the area (Ugwuoke, 2016). Moreover, Ugwuoke showed that predictors of suicide abound in the state. Thus, boys and girls of different ages among the in-school adolescents in the state were likely to be exposed to the precipitants of suicide attempts. Gender was involved in this study since Abubakar (2018) showed that societal expectations for males and females differ. The male-female expectations difference was noticeable in the higher enrollment of boys than girls in secondary schools in Nigeria generally (Ogwuche & Shamo, 2019). However, girls outnumbered boys in secondary schools in Enugu State (Post Primary Schools' Management Board (PPSMB, 2023). Additionally, gender was included in this study because Kukoyi et al. (2023) showed that childhood experiences like punishments, which had been shown to differ significantly between male and female children, can arouse suicide attempts. During the age of adolescence, these experiences are reinforced. In Nigeria, the society is more hostile to males than the females. In Europe, Soreff (2013) showed that female suicide was used to express femininity. The introduction of age in the present study was based on empirical evidence which showed that suicide attempt was associated with it (Olibamoyo et al., 2021). Although Mathieu et al. (2021) indicated that suicide was increasing among adolescents; the acts have traditionally been associated with adults.

Studies conducted on suicide attempts in many parts of the world yielded varying results. Ene (2000) indicated a low level of attempted suicide among secondary school students in Enugu State. Results from the study showed that the act was more among SSS 2 than SSS 3 students while neither gender nor class significantly influenced their actions. Lee et al. (2007) attributed the low prevalence of suicide attempts in Metropolitan China to the shame, stigma and secrecy associated with reporting of the act in the area. From the findings, both males and females did not differ significantly in suicide attempts. Nock et al. (2007) indicated that the average age of onset of suicidal acts was 13-14. They attributed the precipitants of suicidal acts among the subjects to mental, family factors and problems with friends. The adolescents experienced only: a moderate amount of physical pain during suicide attempts, and rarely used alcohol during the time they attempted suicide. The participants reported that the behaviours of their friends did not have much influence on their suicidal behaviours either before or after the incidents.

Fine et al. (2012) revealed a low percentage of suicide attempts but it recurred among attempters. The result indicated that there was a direct causality between the school and home environment and suicide attempts. Similarly, the psychopathology of the suicide attempt pointed to family history. The study indicated that the association between the frequency of suicide attempts and the respondents' demographic and clinical characteristics was statistically inconclusive. Akotia et al. (2019) found a significant difference between gender and suicide attempts in Ghana where women cited abandonment and men cited shame resulting from economic difficulties as the main predictor of the act. Adewuya and Oladipo (2020) found some level of suicide attempts among high school students in Nigeria and gender was significantly associated with it. Similarly, Olibamoyo et al. (2021) indicated a statistically significant difference between age and suicide attempts among adolescents in Nigeria. According to them, suicide attempts were higher among older adolescents than the younger ones. Tetteh et al. (2021) attributed a higher rate of suicide attempts in West Africa in particular than in America, Europe, Asia and Oceania to the high use of alcohol and other substances of abuse. Iwuama et al. (2024) found

suicide attempts to be higher among females and among new entrants into higher institutions in Nigeria. In view of the divergent results of the aforementioned studies coupled with the fact that most of them were conducted outside Enugu State, this study was deemed necessary.

### Research Questions

This study attempted to provide answers to the following research questions.

1. What is the extent of suicide attempts among in-school adolescents in Enugu state based on gender?
2. What is the extent of suicide attempts among in-school adolescents in Enugu state based on age?

### Hypotheses

- H<sub>01</sub> There is no significant difference between the mean response ratings of male and female in-school adolescents in Enugu state on the extent of suicide attempts.
- H<sub>02</sub> There is no significant difference between the mean response ratings of in-school adolescents aged 12-14 years (JSS students) and 15-17 years (SSS students) in Enugu state on the extent of suicide attempts.

### Methodology

The descriptive survey design was used for the study. The population for the study was 149,028 (male=65,086; female=83,942; JSS=78,466; SSS=70,562) in-school adolescents in 291 secondary schools owned by Enugu State Government (Post Primary Schools' Management Board-PPSMB, 2023). The sample for the study was 2,112 in-school adolescents drawn through a multi-stage sampling procedure from all 17 LGAs in the state. Stage one involved the selection of 34 secondary schools through a purposive sampling technique aimed at achieving adequate representation of boys', girls' and co-educational schools. Stage two was the selection of 204 out of the 732 classes in the schools that were involved in the study through a simple random sampling technique of balloting without replacement. Stage three was the selection of eight (8) respondents from each of the selected classes through the same process of balloting without replacement. The process yielded the sample (male = 1,069; female = 1,043; JSS = 1044; SSS = 1068). The sample size was sufficiently representative of the population in accordance with Kothari and Garg (2014).

A 17-item structured instrument called the 'In-School Adolescents' Suicide Attempt Questionnaire' (I-SASAQ) was employed to generate data. The I-SASAQ was constructed after a comprehensive review of the literature on the subject by the researchers. The I-SASAQ had sections A and B. Section A had two (2) items on demographic variables. Section B consisted of fifteen (15) items on suicide attempts that had 4 response options 'Three times or more', 'Twice', 'Once' and 'Never'. In order to protect the privacy of the respondents the I-SASAQ was anonymous. The face validity of the instrument was obtained through the judgment of five experts in psychology, sociology/anthropology, science education, health education and public health. In order to establish the reliability of the I-SASAQ, it was administered in a co-educational institution in Ebonyi state which had similar characteristics to Enugu State. The resultant data from the split-half method of the question items were correlated using the Pearson Product Moment Correlation Coefficient and it yielded a correlation coefficient of 0.80. Since the reliability index of 0.60 is adjudged to be suitable for data collection, the I-SASAQ was utilized to generate data. The internal consistency of each of the items and the overall questionnaire were determined using Cronbach's Alpha since Santos (2014) showed that it is suitable for scales like the I-SASAQ. It yielded a reliability coefficient of 0.69, hence was considered suitable enough to be used.

In order to gain access to the schools, the researcher got approval from the State Education Authority. The approval helped to reduce inhibitions associated with suicide studies and further conferred face validity to the research. The researcher engaged three research assistants to execute the work. The research assistants had appropriate communication skills but they were briefed to desensitize them regarding suicide. The distribution of the copies of the questionnaire lasted for two weeks in the mid-term of 2022/23 to enable the JSS 1 students to settle down in their new schools and to avoid clashing with examinations or inter-house sports. Some of the JSS 1 respondents in the rural areas who could not complete the I-SASAQ had theirs read out for them and the options of their choice were filled in by any of the members of the research team present. The copies of the questionnaire were collected on the spot to ensure that each respondent filled in the copy by him/herself and to guard against the resistance associated with suicide studies. Nonetheless, participation in the study was purely voluntary. Out of the 2,112 copies of the questionnaire distributed, 1,971 (93%) copies were returned. Since the return rate was high enough the resultant data were used for analysis.

The data that were generated were analyzed using the International Business Machine Statistical Package for Social Sciences version 21. The returned copies of the questionnaire were subjected to data editing and cleaning and 1,800 copies that were properly completed were used for data analysis. The data were analyzed on an item-by-item basis to indicate the mean ( $\bar{x}$ ) responses and standard deviations (SDs). The response options were

weighted thus: Three times or more = 3 points, Twice = 2 points, Once = 1 point and Never = 0 points. Based on this, the limits of real numbers were used to interpret both the item-by-item and overall grand mean ratings as follows: 0.00-0.49 = very low extent (VLE), 0.50-1.49 = low extent (LE), 1.50-2.49 = high extent (HE) and 2.50-3.00 = very high extent (VHE) of suicide attempt. The mean ratings, overall grand mean ratings and standard deviations were presented in tables and used for description as well as to answer the research questions posed in this study. The z-test statistic was used to test null hypotheses postulated at 0.05 level of significance. The z-test statistic, according to Kothari and Garg (2014), is appropriate where two independent large groups' mean data are compared.

## Results

### Research question

1: What is the extent of suicide attempts among in-school adolescents in Enugu state based on gender? Data for answering the above question are contained in Table 1.

**Table 1: Mean Ratings of Suicide Attempts among In-school Adolescents in Enugu State based on Gender (n=1800)**

S/N item - In-school adolescents' attempt to kill themselves by:	Responses					
	Male (n=896)			Female (n=904)		
	$\bar{x}$	SD	Dec.	$\bar{x}$	SD	Decision
3. Cutting	1.16	.51	LE	1.44	.49	LE
4. Overdosing on drugs	1.17	.54	LE	1.11	.47	LE
5. Lying down before a moving vehicle	1.19	.62	LE	1.06	.28	LE
6. Swallowing poisonous substance	1.15	.52	LE	1.06	.24	LE
7. Covering face so as to stop breathing	1.18	.58	LE	1.10	.38	LE
8. Drowning	1.22	.63	LE	1.08	.28	LE
9. Stabbing/puncturing	1.15	.48	LE	1.10	.36	LE
10. Jumping from a moving vehicle	1.10	.43	LE	1.05	.30	LE
11. Shooting with a gun	1.08	.40	LE	1.02	.14	L4
12. Jumping from a high place	1.09	.34	LE	1.07	.25	LE
13. Strangling/hanging	1.15	.56	LE	1.08	.33	LE
14. Burning	1.14	.59	LE	1.07	.37	LE
15. Crashing vehicle	1.14	.57	LE	1.03	.22	LE
16. Physical fight	1.20	.60	LE	1.10	.36	LE
17. Provoking an armed person	1.13	.48	LE	1.12	.37	LE
Grand mean and standard deviation	1.15	.52	LE	1.10	.32	LE

Table 1 shows that male in-school adolescents had a grand mean rating ( $\bar{x}$ =1.15; SD=.52) which was higher than their female counterparts' grand mean rating on suicide attempts ( $\bar{x}$ =1.10; SD=.32). The grand mean ratings were within the limit of 0.50-1.49. This implies a low extent of suicide attempts among the male and female respondents. Each of the items (3-17) had a low extent of suicide attempts too.

**Research question two:** What is the extent of suicide attempts among in-school adolescents in Enugu state based on age? Data for answering the above question are contained in Table 2.

**Table 2: Mean Ratings of Suicide Attempts among In-school Adolescents in Enugu state Based on Age (n=1800)**

S/N item - In-school adolescents' attempt to kill themselves by:	Responses						
	12-14 yrs (n=687)			15-17 yrs (n=1113)			
	$\bar{x}$	SD	Dec.	$\bar{x}$	SD	Decision	
3. Cutting	1.17	.54	LE	1.14	.47	LE	
4. Overdosing on drugs	1.14	.55	LE	1.13	.47	LE	
5. Lying down before a moving vehicle	1.07	.39	LE	1.16	.53	LE	
6. Swallowing poisonous substance	1.06	.27	LE	1.14	.47	LE	
7. Covering face so as to stop breathing	1.11	.31	LE	1.16	.57	LE	
8. Drowning	1.14	.40	LE	1.16	.53	LE	
9. Stabbing/puncturing	1.07	.29	LE	1.15	.47	LE	
10. Jumping from a moving vehicle	1.06	.28	LE	1.09	.41	LE	
11. Shooting with a gun	1.03	.23	LE	1.06	.33	LE	
12. Jumping from a high place	1.08	.27	LE	1.08	.72	LE	
13. Strangling/hanging	1.12	.47	LE	1.11	.46	LE	
14. Burning	1.08	.46	LE	1.11	.51	LE	
15. Crashing vehicle	1.08	.44	LE	1.09	.45	LE	
16. Physical fight	1.11	.35	LE	1.17	.57	LE	
17. Provoking an armed person	1.20	1.18	LE	1.16	.92	LE	
Grand means and standard deviation	1.10	.43	LE	1.13	.53	LE	

Table 2 shows that respondents aged 12-14 years had a grand mean rating of 1.10 which was lower than that of their 15-17-year-old counterparts on suicide attempts ( $\bar{x}=1.13$ ;  $SD=.53$ ). Since both grand mean ratings fell within the limit of 0.50-1.49, suicide attempt was adjudged to be of low extent among the groups.

### Hypothesis 1.

There was no significant difference between the mean ratings of male and female in-school adolescents in Enugu state on the extent of suicide attempts. Data for verifying the above null hypothesis are contained in Table 3.

**Table 3: Summary of z-test Verifying the Hypothesis of no Significant Difference in Suicide attempts among in-school Adolescents according to Gender**

Gender Decision	$\bar{x}$	SD	p-value	df	cal.z
Male	1.15	.04	*.000	1798	32.00
Female	1.09	.05			

\*Significant  $p < 0.05$

From Table 3, the calculated z-test value was 32.00 with a p-value of 0.000. The p-value (.000) was statistically significant because it was less than 0.05 alpha level at the degree of freedom (df) of 1798. This indicates that there was a significant difference between male and female respondents in Enugu state on suicide attempts. Hence, null hypothesis five stated above was rejected.

### Hypothesis 2

: There was no significant difference between the mean ratings of 12-14-year-old and 15-17-year-old in-school adolescents in Enugu state on the extent of suicide attempts. Data for verifying the above hypothesis are contained in Table 4.

**Table 4: Summary of z-test value Verifying the Hypothesis of no Significant Difference in Suicide attempts among in-school Adolescents according to Age**

Age	$\bar{x}$	SD	p-value df	cal.Z	Decision
12-14 years	1.10	.05	*.030	1798	13.84
15-17 years	1.13	.03			

\*Significant  $p < 0.05$

As shown in Table 4, the calculated z-Test for the age of in-school adolescents on suicide attempt was statistically significant because a p-value of 0.030 was less than 0.05 level of significance at degree of freedom (df) 1798 (z-test cal. = 13.84; p-value = 0.030). Hence, null hypothesis 2, which states that there was no significant difference in mean ratings of 12–14-year-old and 15–17-year-old in-school adolescents in Enugu state on the extent of suicide attempt, was rejected.

### Discussion

The finding showed that the extent of suicide attempts was higher among male in-school adolescents than the female group (Table 1). This finding did not support Soreff (2013) who attributed higher cases of attempted suicide among females to their use of suicide attempts as a signal for help in the Western world. In such an environment using suicide attempts as a signal for help was effective in communicating victims' intentions to others. Adewuya and Oladipo's (2020) result of higher suicide attempts among females might have been influenced by Western culture of femininity too since Lagos is the most advanced city in Nigeria. However, that kind of disclosure is out of the question for female in-school adolescents in Enugu state where suicide attempt is both criminalized and stigmatized (Olibamoyo et al., 2020). The acute shame and fear of prosecution which accorded with Lee et al. (2007), probably, was responsible for a number of the female respondents' non-disclosure of their suicide attempts irrespective of the assurances of confidentiality in the present study. In other words, they might be 'faking good'.

Nevertheless, the findings in the present study agreed with Cleary's (2005) report of high male cases of suicide attempt in Dublin, Ireland. Cleary attributed the result to males turning their anger inward. Since sharing concerns by young men were foreclosed in Dublin, suicide attempt was viewed by the respondents as a rational option when faced with distressful life events. That was consequent upon the male adolescents' social orientation of masculinity just like in Enugu state.

Predictably, the z-test showed that gender made a statistically significant difference in suicide attempts of in-school adolescents in Enugu state (Table 3). The finding agreed with Akotia et al. (2019) and Iwuama (2024), who reported that gender had an influence on adolescent suicide attempts. The finding in the present study could validly be ascribed to the heightened negative impact of worsening socioeconomic fortunes of the present male in-school adolescents in Enugu state contrary to the female respondents' sense of empowerment. In other words, the changing roles between the genders over the years as a result of increased educational opportunities for girls as shown by Enugu State PPSMB (2023) could be responsible for the significant gender difference. Additionally, male students are likely to be addicted to substance abuse which Tetteh et al. (2021) reported to influence suicidal behaviours significantly.

The finding showed that in-school adolescents of 12-14 years demonstrated a lower extent of suicide attempts than in-school adolescents of 15-17 years of age (Table 2). The finding was not puzzling since suicidal behaviour is developmental. In so far as the average age of onset of suicide ideation is 13-14 years as revealed by Nock et al. (2007), a higher rate of suicide attempts was expected among older in-school adolescents. This is true when viewed against the backdrop that the older in-school adolescents were at the apical stage of self-individuation. At that stage, peer clique or gang attachment overrides societal norms (Ugwuoke, 2016). This finding thus agreed with Mathieu et al. (2021) that suicide increases rapidly during adolescence. The finding could be explained to be the result of the gradual accretion of suicide ideas that imploded into self-attacks at a later age (Janackovski, 2022).

Expectedly, the z-test showed that age made a statistically significant difference in suicide attempts of in-school adolescents in Enugu State (Table 4). This is because suicidal behaviours are transitional (Kukoyi et al., 2023). The finding, however, differed from Ene (2000), who associated the high rate of suicide attempts among the

younger students in SSS 2 with the preoccupation of the older students in SSS 3 with their final examination. It is worth noting that the examination period was deliberately avoided during data collection for the present study. Therefore, preparation for examination did not influence the findings. A plausible explanation for the finding is the gradual build-up of suicide ideas that manifested in suicide attempts in their later lives as shown earlier.

### Implications for Public Health

The finding that more male than female in-school adolescents were involved in suicide attempts suggests that gender-specific intervention strategies such as reducing substance abuse, prevention of other forms of violence and general programmes that promote resiliency among males should be developed. The entire community needs to be reoriented on male-child socialization which makes it difficult for male in-school adolescents of Enugu State at the present to tolerate thwarting in life.

The findings that suicide attempts occur more among the older respondents require intensification of crises and anxiety management amongst them. The strategies include starting public health education campaigns in schools and communities to remove the shame associated with suicide attempts. The public health workers have a special role in utilizing findings from this study to tailor prevention strategies suitable for younger in-school adolescents too.

### Conclusion

The study showed that male in-school adolescents in Enugu State had higher grand mean scores than their female counterparts on suicide attempts. Also, there was a significant difference between male and female in-school adolescents on suicide attempts in Enugu State.

### Recommendations

1. Based on the findings of the present study and conclusions, the following recommendations are hereby presented. The finding that suicide attempts were more frequent among males calls for a new approach towards male-child upbringing in Enugu State. The current method that over-emphasizes perfection in all that males do is likely to lead to suicide attempts with the slightest frustration. Consequently, the general public should be educated to de-emphasize the stereotype of masculinity.
2. The finding necessitates individualized counselling to address the societal and familial factors which expose them to the risk. Furthermore, the government ought to be sensitized to review the law that makes suicide attempts a criminal offence.
3. De-criminalizing suicide attempts would enable such victims to seek health care services without restraints and thus reduce disability and fatality following self-harm.

### References

- Abubakar, S. (2018). Social and rehabilitative medicine. In C. Obionu (Ed.), *Guide to tropical public health and community medicine (1<sup>st</sup> ed.)* (pp. 501-539). Ezu Books.
- Adewuya, A. O., & Oladipo, E. O. (2020). Prevalence and associated factors for suicidal behaviours among high school adolescents in Lagos, Nigeria. *European Child and Adolescent Psychiatry*, 29, 1503-1512.
- Akotia, C. S., Knizek, B. L., Hjelmeland, H., Kinyanda, E., & Osafo, J. (2019). Reasons for attempting suicide: An exploratory in Ghana. *SAGE Journal*, 56(1), 233-249. <http://doi.org/10.1177/1363461518802966>.
- Batterham, P. J., Caelear, A. L., & Christensen, H. (2013). Correlates of suicidal stigma and suicide literacy in the community. *Suicide and Life Threatening Behaviour*, 43(4), 404-417.
- Bilsen, J. (2018). Suicide and youth: Risk factors. *Front Psychiatry*, 9. <https://doi.org/10.3389/fpsy.2018.0040>.
- Cleary, A. (2005). *Suicidal behaviour amongst young men*. [http://www.khf.ie/research\\_project/documents/suicidereport.pdf](http://www.khf.ie/research_project/documents/suicidereport.pdf).
- Ene, O. C. (2000). Suicide ideation among secondary school students in Enugu urban. *Journal of Health and Kinesiology*, 1(1), 85-94.
- Fairbairn, G. J. (2007, July). When people choose to die: does it matter what we call it. In T.C. Haliburton & C. Edwards (Eds.), *Mortality, dying and death: Global interdisciplinary perspectives* (pp. 205-216) [Conference paper]. The 5<sup>th</sup> Global Conference Making Sense of Dying and Death, Mansfield College, Oxford, United Kingdom.
- Fine, G., Alison, H. C., Van Westhuizen, D. & Kruger, C. (2012). Predicting frequency of suicide attempts of adolescent outpatients at Weskoppies hospital using clinical and demographic characteristics. *South African Journal of Psychiatry*, 18(1), 22-26.
- Iwuama, C. N., Agbaje, O. S., Lerum, N. I., Igbokwe, C. C., & Ozoemena, L. E. (2024). Suicidal ideation and attempt among Nigerian undergraduates: Exploring the relationships with depression, hopelessness, perceived burdensomeness and thwarted belongingness. *SAGE open* 25. <http://doi:10.1177/20503121241236177>

- Janackovski, A., Deane, F. P., Kelly, P. J., & Hains, A. (2022). Temporal exploration of the interpersonal theory of suicide among adolescents during treatment. *J Consult Clin Psychol*, 90(9), 682-695. <http://doi.10.1037/ccp.0000758>
- Kothari, C. R. & Garg, G. (2014). *Research methodology: methods and techniques (3<sup>rd</sup>ed.)*. New Age International (P) publishers.
- Kukoyi, O., Orok, E., Oluwami, F., Oni, O., Oluwadare, T., Ojo, T., Bamitale, T., Jaiyesimi, B., & Iyamu, D. (2023). Factors influencing suicidal ideation and self-harm among undergraduate students in a Nigerian private university. *Middle East Current Psychiatry*, 30(1), <http://doi.org/10.1186/s43045-022-00274-1>
- Lee, S., Fung, S., Tsang, A., Liu, Z. R., Huang, Y. Q., He, Y. L., Zhang, M. Y., Shen, Y. C., Nock, M. K., & Kessler, R. C. (2007). Lifetime prevalence of suicide ideation, plan and attempt in Metropolitan China. *Acta Psychiatrica Scandinavica*, 116, 429-437.
- Lubuale, E.C. (2018). The crime of attempted suicide in Uganda: The need for reforms to the law. *Journal of Law, Society and Development*, 4(1). <http://doi.org/10.25159/2520-9515/385>
- Mathieu, S., de Leo, D., Koo, Y. W., Leseke, S., Goodfello, B., & Kloves, K. (2021). Suicide attempt in the Pacific Islands: A systematic literature review. *The lancet Regional Health Western Pacific*, 17. <https://doi.org/10.1016/j.lanwpc.2021.100283>.
- Nock, L. K., Holmberg, E. B., Photos, V. I., & Michel, B. D. (2007). Self-injurious thoughts and behaviour interview: Development reliability and validity in an adolescent sample. *Psychological Assessment*; 19(3): 309-317.
- Obayi, B. A., Enemu, N. K., & Ugbelu, J. E. (2021). Oral health practices among secondary school students in Udi Local Government Area, Enugu State. *Nigerian Journal of Health Promotion*, 14, 112-118.
- Ogwuche, C. O., Shamo, I.I. (2019). Gender disparity in school enrollment: Counselling intervention for girl-child education. Benue State University Makurdi. <https://bsun.edu.ng>article26>
- Olibamayo, O., Ola, B., Cocker, O., Adewuya, A., & Olabola, A. (2021). Trends and patterns of suicidal behaviour in Nigeria: Mixed-methods analysis of media report from 2016-2019. *South African Journal of Psychiatry* 2021;27:1572. <http://doi:10.4102/sajpsy.2021.v27i0.1572>
- Oyetunji, T. P., Yasir Arafat, S. M., Famori, S. O., Akinboyewa, T. B., Afolami, M., Ajayi, M. F., & Kar, S. K. (2021). Suicide in Nigeria: Observation from the content analysis of newspapers. *Gen Psychiatr* 2021 34(1):e100347. doi:10.1136/gpsych.2020-100347.
- Post Primary Schools' Management Board-PPSMB, Enugu. (2023). *School population for JSS and SSS 2021/2022*.
- Santos, J. R. A. (2014). Cronbach alpha: a tool for assessing the reliability of scales. [www.joe.org/jeo/1999april/tt3.php](http://www.joe.org/jeo/1999april/tt3.php).
- Santrock, J. W. (2005). *Children (8<sup>th</sup>ed.)*. McGraw-Hills.
- Sema, P. (2011). *Adolescent suicide prevention manual: A public health model for Native American communities*. [http://www.sprc.org/sites/files/library/AdolescentsP\\_ProgramManualPH\\_ModelNA\\_Communitiespdf](http://www.sprc.org/sites/files/library/AdolescentsP_ProgramManualPH_ModelNA_Communitiespdf).
- Shalangwa, A.Y., Ayuk, M. B., & Enebechi, P. C. (2019). Location and media determinants of adolescent pregnancy as perceived by secondary school students in Enugu Education Zone. *Nigerian Journal of Health and Kinesiology*; 13(1): 174-181.
- Shneidman, E. S. (1992). A conspectus of the suicidal scenario. In R.W. Maris., A.L. Berman., J. T. Maltzberger & R.I. Yufit (Eds.), *Assessment and prediction of suicide* (pp.3-22). Grilford press.
- Soreff, K. (2013). Suicide overview. <http://www.emedicine/mesdcape.com/article/3013085-overview#a30>.
- Tetteh, J., Ekem-Ferguson, G., Quarshie, E. N., Swaray, S. M., Ayamore, M.A., Seneadza, N. A., Asante, A.O., & Yawson, A. E. (2021). Marianas use and suicidal behaviours among school going adolescents in Africa: Assessment of risk factors from the global school-based student health survey. *Gen Psychiatr* 2021; 35(4):e100558. doi:10.1136/gpsych-2021-100558.
- Ugwuoke, A. C. (2016). Suicidal ideation among in-school adolescents in Enugu State, Nigeria. *International Journal of Human Kinetics, Health and Education*, 2(2); 118-124.