

Causes of Suicide as Perceived by Educated Adults in Ondo Metropolis, Ondo State

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Abstract

This study examined causes of suicide as perceived by educated adults. Description survey research design was adopted for this study. Population of the study consisted of all educated adults in Ondo metropolis, Ondo State. The sample comprised two hundred (200) educated adults randomly selected from the metropolis. Structured questionnaire was used as instrument to collect data for the study. Data collected was analysed using mean, ranking, t-test and analysis of variance (ANOVA). The findings showed causes of suicide as seeing life as meaningless, terminal illness, traumatic experience, chronic pain among others. The results revealed that there is a significant difference in the perception of causes of suicide based on gender ($t = 3.448$). It was found that marital status does not influence the perception of causes of suicide among educated adults while religion does ($F = 4.411$). It was therefore recommended that both governmental and non-governmental organization should use all avenues to sensitize people on seeing life meaningful. People with terminal illness should be given social support by different groups of people around them. Peculiarity of each gender should be identified and addressed appropriately. All religions should encourage their followers to see life as meaningful no matter what is happening around them.

1. Introduction

Suicidal behaviours can be conceptualized as a complex process that can range from suicidal ideation, which can be communicated through verbal or non-verbal means, to planning of suicide, attempting suicide, and in the worst case, suicide. Suicidal behaviours are influenced by interacting biological, genetic, psychological, social, environmental and situational factors (Wasserman, 2001).

Suicide has been identified to as a major cause of death in the present world. In every country, the rate for a particular figure of population is increasing day by day. It is a serious public health problem that causes immeasurable pain, suffering, and loss to individuals, families, and communities nationwide.

According to United States National Strategies for Suicide Prevention (2012), suicide is the 10th leading cause of death, claiming more than twice as many lives each year as does homicide; on average, between 2001 and 2009, more than 33,000 Americans died each year as a result of suicide. Also, more than 8 million adults report having serious thoughts of suicide in the past year, 2.5 million reports making a suicide plan in the past year, and 1.1 million report a suicide attempt in the past year. Almost 16 percent of students in grades 9 to 12 report having seriously considered suicide, and 78 percent report having attempted suicide one or more times in the past 12 months.

In the same vein, Onofa (2019) reported cases of suicide in the news in Nigeria. The cases include: a lecturer who committed suicide because of frustration on Ph.D programme, another did the same because of financial indebtedness. A student who was displeased with low score in the entrance examination into university died by taking sniper and another 500 level undergraduate hanged himself inside the hostel room. Also, a 19 year old undergraduate in a private university committed suicide when parents could not meet up with his financial needs. Other cases are a 35 years old medical doctor who committed suicide by jumping into the lagoon, a bank manager who shot himself because he could not repay back bank loan and a secondary school student who died by taking tramadol overdose.

Risk factors for suicide include mental and physical illness, alcohol or drug abuse, chronic illness, acute emotional distress, violence, a sudden and major change in an individual's life, such as loss of employment, separation from a partner, or other adverse events, or in many cases, a combination of these factors. While mental health problems play a role which varies across different context, other factors, such as culture and socio-economic status, are also particularly influential (Public Health Action for the Prevention of Suicide, 2012).

Ebohon (2024) found causes of suicidal behaviours among university students as poor relationship with family members, poor academic performance, relationship problem such as being jilted by lover, burdensomeness, low belongingness, substance abuse, issues with course adviser, pain and hopelessness in descending order.

The theoretical framework that is considered relevant for this study is Family Systems Theory propounded by Murray Bowen (1992). This theory is based on the idea that each individual should be viewed not in isolation, but in terms of the interactions, transitions, and relationship within the family. The focus of assessment and intervention shifts from one individual to the patterns of relations among all individuals in a family. The central tenet of this theory is that what affects one individual family member affect the entire family and what affects the family affect each member as well. All components are mutually interdependent. Family system theory provides a framework for observing and understanding general characteristics of human relationships (Ebohoh, 2024). Furlong (2019) stated that wherever human exist, social problems will be there, committing suicide is also a social problem and it affect the society. Suicide thoughts are present in every stage of life.

Stigma related to suicide has been considered a major obstacle to proper reporting. Those who have lost someone to suicide, as well as those who have a history of suicide attempts, often face considerable stigma within their communities. Hence, there is a need to investigate how educated adults perceive causes of suicide as a step towards its prevention.

1.1. Objectives of the Study

This study is designed to:

- a. Investigate causes of suicide as perceived by educated adults;
- b. Determine the influence of gender on the perception of causes of suicide among educated adults;
- c. Examine the influence of marital status on the perception of causes of suicide among educated adults;
- d. Find out the influence of religion on the perception of causes of suicide among educated adults.

1.2. Research Question

What are the causes of suicide as perceived by educated adults?

1.3. Research Hypotheses

- a. There is no significant difference in the perception of causes of suicide based on gender.
- b. There is no significant difference in the perception of causes of suicide based on marital status.
- c. There is no significant difference in the perception of causes of suicide based on religion.

2. Method

Descriptive survey research design was adopted for the study. The population comprised all educated adults in Ondo metropolis. Random sampling technique was used to select two hundred (200) educated adults as sample for the study. The instrument used for the study was a structured questionnaire titled "Questionnaire on Suicide (QS)". The questionnaire was divided into two sections (A & B). Section A was on personal data of the respondents while Section B consisted of items on causes of suicide with four Likert Type scale of Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD). Reliability of the instrument was ascertained using Cronbach's Alpha statistics which yielded a coefficient of 0.91. Data collected was analysed using mean, ranking, t-test and Analysis of Variance (ANOVA).

3. Results and Discussion

3.1. Results

3.1.1. Research Question: What are the Causes of Suicide as Perceived by Educated Adults?

In analyzing the data on research question one, mean and ranking were used. Table 1 represent the result.

Table1. Mean and Rank Order Table of the Causes of Suicide

S/N	Common causes of suicide	\bar{X}	Rank
1	Mental illness	3.05	8 th
2	Traumatic experience	3.25	3 rd
3	Bullying	2.95	11 th
4	Personality disorder	3.18	5 th
5	Drug addiction	3.09	7 th
6	Eating disorder	2.69	14 th
7	Unemployment	2.95	11 th
8	Social isolation/Loneliness	3.05	8 th
9	Relationship problems	3.17	6 th
10	Genetics/Family history	2.87	13 th
11	Seeing life as meaningless	3.31	1 st
12	Terminal illness	3.27	2 nd
13	Chronic pain	3.24	4 th
14	Financial problem	3.01	10 th
15	Use of anti-depressants	2.62	15 th

Table 1 shows the causes of suicide. Seeing life as meaningless ($\bar{X}=3.31$) ranked 1st, terminal illness ($\bar{X}=3.27$) ranked 2nd, traumatic experience, ($\bar{X}=3.25$) ranked 3rd, chronic pain, ($\bar{X}=3.24$) ranked 4th, personality disorder, ($\bar{X}=3.18$) ranked 5th, relationship problems ($\bar{X}=3.17$) ranked 6th, drug addiction ($\bar{X}=3.09$) ranked 7th, social isolation loneliness and mental illness ($\bar{X}=3.05$) ranked 8th,, financial problem ($\bar{X}=3.01$) ranked 10th, unemployment and bullying ($\bar{X}=2.95$) ranked 11th,, genetic/family history ($\bar{X}=2.87$) ranked 13th, eating disorder ($\bar{X}= 2.69$) ranked 14th, while use of anti-depressants ranked 15th and the last.

3.1.2. Testing of Hypotheses

3.1.2.1. Hypothesis One: There Is No Significant Difference in the Perception of Causes of Suicide Based on Gender

In testing this hypothesis, the respondents were classified into two groups based on their gender (i.e male and female) and scores on causes of suicide were analysed using t-test. The results are presented in Table 2

Table 2. Independent t-Test Summary Showing the Difference in the Perception of Causes of Suicide Based on Gender

Variable	Gender	N	\bar{X}	St.D	df	t	Sig	P	η^2
Perception on the causes of suicide	Male	91	19.38	5.182	198	3.448	.000	<.05	0.057
	Female	109	15.14	4.701					

Source: Field, (2024)

As shown in Table 2, male subjects have a mean score of 19.38 and a standard deviation of 5.182 while female subjects have a mean score of 15.14 and a standard deviation of 4.701. A t-test analysis of these values yielded a t-value of 3.448 which is significant at 0.05 level. This implies that there is a significant difference in the perception of causes of suicide based on gender. Size of effect ($\eta^2=0.057$) reveals that gender had moderate effect (according to Cohen 1988 and field 2000 rule of thumb for size of effect) on the perception of causes of suicide; that is gender accounted for 5.7% change in the perception of subjects towards causes of suicide

3.1.2.2. Hypothesis Two: There Is No Significant Difference in the Perception of Causes of Suicide Based on Marital Status

In testing this hypothesis, the respondents were classified into two groups based on their marital status (i.e single or married) and scores on the causes of suicide were analysed using t-test. The results are presented in Table 3.

Table 3. Independent t-Test Summary Showing the Difference in the Perception of Causes of Suicide Based on Marital Status

Variable	MS	N	\bar{X}	St.D	df	t	Sig	P
Perception on the causes of suicide	Single	124	7.61	1.061	198	7.142	.820	.05
	Married	76	8.03	.828				

Source: Field, (2024)

From table 3, when the mean score of single respondents (\bar{X} = 7.61, SD = 1.061) were compared with those of married respondents (\bar{X} = 8.03, SD = 0.828) using the t-test statistical analysis, a t-value of 7.142) was obtained. This value is not significant at 0.05 level. Thus, the null hypothesis is accepted. This implies that marital status does not influence the perception of causes of suicide among educated adults.

3.1.2.3. Hypothesis Three: There Is No Significant Difference in the Perception of Causes of Suicide Based on Religion

In testing this hypothesis, the respondents were classified into three groups based on their religion (i.e Christianity, Islam or African Traditional Religion) and scored on causes of suicide were analysed using ANOVA. The results are presented in Table 4.

Table 4. Independent t-test Summary Showing the Difference in the Perception of Causes of Suicide Based on Religion

Source of variance	N	\bar{X}	St.D	df	SS	MS	F	Sig	P	η^2	η^2
Christianity	129	6.40	1.026	2	92.372	41.186	4.411	.001	<0.05	0.0537	0.0891
Islam	64	3.27	.725	197	1839.201	9.336					
ATR	7	2.19	.615								
TOTAL	200	11.86	3.68	199	14434.16						

Source: Field, (2024)

As shown in Table 4, mean squares between groups and within groups are 92.372 and 1839.201 respectively. These yielded the F-value of 4.411 which is significant at the 0.05 level. This implies that there is significant difference in the perception of causes of suicide by educated adults based on religion. The size of effect omega square (η^2) = 0.0537 reveals that religion has low effect (according to Cohen 1988 and Field 2000 rule of thumb for size of effect) on what the respondents perceive as causes of suicide. That is, religion accounted for 5.4% variance in the perception of causes of suicide among educated adults.

3.2. Discussion

Findings of this study showed the causes of suicide. These include seeing life as meaningless, terminal illness, traumatic experience, chronic pain, personality disorder, relationship problems, drug addiction, social isolation and mental illness among others. This is corroborated by Shah, Sajid and Ashiq (2022) who found causes of suicide among school students as low self-esteem, lack of knowledge, lack of self-confidence, lack of patience, failure in an examination, and a mental health problem. They also noted that most of the suicide cases were caused due high negative parental, domestic and societal pressure. Soetan (2022) highlighted seeing life as meaningless, terminal illness, mental illness and chronic pain as some of the causes of suicide. Ondeng and Etieno (2025) reported maladaptive perfectionism, perceived stress, attribution style, self-awareness, depression, anxiety, hopelessness, reasons for living, drug and substance abuse as the major causes of suicide among university students.

This study revealed that gender has significant influence on the perception of causes of suicide among educated adults and that gender had moderate effect on the perception of causes of suicide. According to US Centers for Disease Control and Prevention (undated), the rate of suicide in males is higher than that in females, but studies of suicidal thoughts and non-fatal suicidal behaviour routinely show females with higher rates than males. Behera, Balabantray and Nayak (2005) found that in sexual variation, male sex are very prone to take extreme decision (2.7 times more than female sex). Gumbo (2022) and Ndetei et. al., (2022) also suggest that female are more likely to report suicidal ideation and seek help, whereas males are likely to die by suicide due to culture that require men to be tough.

The results of the study showed that marital status does not influence the perception of causes of suicide among educated adults. In contrast to this, Behera, Balabantray and Nayak (2005) reported that married people take suicide decision more frequently than unmarried ones. It was also stated that the psychosocial factor like family dispute plays a great role as compared to mental illness or physical illness as regards cases of suicide and that disharmony existing between family members trigger the fatal decision. Manoranjitham et. al., (2007) found family problems as the most commonly mentioned cause of suicide. These included marital discord, interpersonal problems with in-laws, major differences of opinion between parents and children, dowry

problems, and property disputes. The contrast in the study may be due to sample differences since the single also double the marriage.

It was also found that there is a significant difference in the perception of causes of suicide by educated adults based on religion. Religion is a most important part of the life of human beings. In very many communities, people have thought religion to be very important, and some have thought it more important than any other part of life. Shah, Sajid and Ashiq (2022) stated that suicide is forbidden in every society and religion. Every religion is against the act of suicide. This significant difference in the perception may be due to sample differences since there is a wide gap in the sample among Christianity, Islam and African Traditional Religion.

3.3. Recommendations

Based on the findings of this study, the following recommendations are made:

- a. All religions should encourage their followers to see life as meaningful no matter what is happening around them.
- b. Both governmental and non-governmental organizations should use all avenues to sensitise people on seeing life as meaningful.
- c. Government should get professionals who would work on propagating the message of hope in the midst of crises through various media.
- d. People with terminal illness should be given social support by different groups of people around them.
- e. There should be emergency response for people going through traumatic experience.
- f. Mental health workers should be made available for individuals with mental illness and personality disorder.
- g. Individuals with behavioural problems such as drug addiction should be counseled and monitored for positive change.
- h. Peculiarity of each gender should be identified and addressed appropriately.
- i. Each religion should identify and use its aspects of beliefs that would prevent suicide among its followers.

4. Conclusion

Suicide has been found to be caused by biological, psychological, social, environmental and situational factors. The perception of educated adults about causes of suicide has been significantly influenced by gender and religion while marital status does not.

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Data Availability

The datasets generated during and/ or analysed during the current study are available from the corresponding author on reasonable request.

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