

# The Causes of Suicidal Ideations and Attempts among Secondary School Students in Uasin Gishu, Kenya

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## ABSTRACT

Suicidal risk behaviour and ideation among students have emerged as a critical mental health challenge in Kenya's education sector, yet academic environmental stressors remain an under explored catalyst of this crisis. Secondary school students are exposed to intense academic pressure, social isolation, and inadequate support structures, which heighten their vulnerability to suicidal risk behaviour. Despite global and national discourse on student well being, there exists limited research on how school-based academic stressors contribute to suicidal risk behaviour and ideation. The study therefore endeavored to explore the causes of suicidal ideations and attempts among secondary school students in Uasin Gishu, Kenya. The objective of the study was to investigate the causes of suicidal ideations and attempts among secondary school students. The study was anchored on Thomas Joiner's Interpersonal Theory of Suicide and adopted a pragmatic philosophical worldview, utilizing a concurrent mixed methods research design. The target population comprised 165 public secondary schools, involving 71,872 students, 2,384 teachers, 165 deputy principals, and 165 counsellors. Using Gay, Mills, and Airasian's criteria, 18 schools (11%) were selected, from which 144 students were systematically sampled and 18 teachers, 18 deputy principals, and 18 counsellors were purposively chosen. Data collection tools included student and teacher questionnaires, interview schedules for deputy, counsellors, and student focus groups. Quantitative data were analysed using descriptive statistics, whereas qualitative data were analysed thematically. Results indicated that 40.3% of students had contemplated suicide, 25% had planned, and 29.9% had attempted it, primarily due to academic-related pressures and lack of emotional support. Qualitative findings revealed three key themes: the critical role of peer support, the influence of family dynamics on emotional stability, and the importance of school resources. Participants emphasized reduced emotional burden and increased hope when adequate support was present. The study concluded that suicidal ideation among secondary school students in Uasin Gishu County stems from academic pressure, mental health challenges, and inadequate support systems. Academic environments often exacerbate distress due to high workloads and unsupportive practices. The study recommends strengthening school-based mental health services by deploying trained counsellors and standardizing interventions.

**Keywords:** Causes, Suicidal Ideations, Attempts and Secondary school students.

## INTRODUCTION

Suicide, as defined by Gruber, Smith and Johnson (2021), is a deliberate act of ending one's own life, encompassing a spectrum of behaviours from fleeting thoughts to intentional actions. Gruber et al. (2021), categorizes these behaviours into three primary types: suicide ideation, which involves contemplating self-harm; suicide plan, entailing specific methods for execution; and suicide attempt, characterized by self-injurious actions with the intent to end life. This complex issue presents significant social and psychological challenges, particularly for vulnerable populations such as adolescents facing academic pressures, individuals with mental health disorders, and marginalized groups experiencing discrimination. These stressors can intensify feelings of hopelessness and isolation, heightening the risk of suicidal ideation and behaviours. Whereas the aftermath of

suicide is profoundly distressing, prioritizing prevention is essential. A comprehensive and sustained approach is necessary, as emphasized by the WHO (2021), to effectively navigate the complexities of suicide and reduce the tragic loss of life through targeted interventions and supportive resources.

Extensive research conducted globally has revealed the complex and multifaceted nature of suicide, shedding light on the myriad interconnected factors that contribute to this critical public health issue (Smith, 2020). This body of work has fostered a nuanced understanding of the diverse influences impacting suicidal behaviours. Key factors identified include socio-economic challenges such as unemployment, poverty, and familial discord, alongside deeply personal issues like substance misuse, tumultuous relationships, social isolation, and the profound effects of bereavement. Additionally, compromised health, encompassing both mental and physical dimensions, including chronic pain, disabilities, and unmet basic needs, has emerged as a significant catalyst for suicidal ideation. The intricate interplay among these factors is essential to recognize, as emphasized by (WHO, 2023; Nock et al. 2023), which highlight the complexity of these contributors in shaping individuals' vulnerability to suicidal thoughts and behaviours.

The research conducted by Williams and Taylor (2023) identifies three primary factors contributing to the elevated suicide rates within this demographic. First, there is a concerning trend indicating a substantial rise in suicidal behaviours during the transition from early adolescence to young adulthood, with certain regions observing an increase of up to 40% in suicide rates over the past decade. Second, data from the Centres for Disease Control and Prevention (CDC, 2022) reveals that suicide has become the second leading cause of death among individuals' aged 15 to 29, surpassing mortality rates in other age groups. Thirdly, Nock et al. (2020), corroborated by findings from WHO (2021) and CDC (2022), emphasize that many individuals who ultimately act on suicidal thoughts first experience such ideations during their formative adolescent years.

## **Objective**

The objective was to explore the causes of suicidal ideations and attempts among secondary school students in Uasin Gishu, Kenya.

## **LITERATURE REVIEW**

### **Conceptualizing Suicide**

Aomo (2023) regards suicide as the apex of a complex interaction of social, psychological, and biological factors. He further contends that while psychological variables vary depending on the individual, it is appropriate to describe personality traits that predispose individuals to suicide, acknowledging that these traits might have biological origins. He concludes that neuroticism, defined as the tendency to experience negative emotions in response to stress, and has been linked to suicidal behaviours, although most research has focused on suicidal ideation and non-lethal attempts.

A study by the CDC (2022) found that approximately half of individuals who died by suicide had at least one diagnosed mental illness, the most common was depression (85.2%), bipolar disorder (7.4%), and schizophrenia (3.3%). Additionally, males were found to be more prone to complete suicide, whereas females were more likely to attempt suicide. While the main cause of suicide remains unclear, most psychologists agree that the presence of psychopathology is probably the single most important predictor of suicide. Most reported cases fall within the criteria of psychiatric disorders, including depression, anxiety, and substance use disorders, clustered as personality disorders and schizophrenia (Bradvik, 2021). In academic institutions, factors leading to suicide are generally reported to include academic pressure, substance abuse, loss of valued relationships, changes in residency, and dysfunctional family patterns (Abdu, Mwangi, & Njeri, 2023).

### **Suicidal Attempts and Ideations among Secondary School Students across the world**

Suicidal behaviour in teens and young adults is emerging as an important mental health issue that needs to be addressed (Chung, 2021). Chung argues that students exposed to various life situations, including academic stress, are more likely to harbour suicidal intentions. A recent study in South Africa found that nearly 20% of students in the Cape Peninsula reported having seriously thought about harming themselves in a way that could

result in death within a twelve-month period. Almost 8% of the sample had actually attempted suicide, while 57.7% had confided in someone about their suicidal intentions (South African Depression and Anxiety Group [SADAG], 2023). A critical gap in this study was identifying the triggers of suicidal ideation stemming from the academic lives of these students.

Hollinger (2022) contemplates how to prevent vulnerable teens in school from turning to suicide as their last resort. However, she fails to explain what aspects of the school environment push a student toward suicide in the first place. This study aims to link the pressures of academic environmental stressors to suicide. Suicide is regarded as a major cause of death and disability globally. According to the World Health Organization (WHO, 2023), approximately 703,000 people die from suicide each year, translating to one person every 40 seconds, with the majority being aged 15-29 years. In this same age group, suicide is the second leading cause of death.

### **Indicators for Suicidal Behaviour**

The phases of life that adolescence went through and the consequent young adulthood were extremely difficult (SADAG, 2023). The youth had to deal with the tumultuous emotions that accompanied puberty, as well as forming a separate identity from their primary family group in an increasingly demanding and competitive society. SADAG (2023) added the pressures of other socializing agents, mainly media and religious institutions, which constantly pushed teenagers to extreme limits. The social trend towards marriage later in life and increasing divorce rates also meant that young people tended to spend far more time alone. Additionally, the unavailability of jobs after college and the immense stress that this imposed on the youth played a major role in influencing the decisions of teenagers in school. Abdu et al. (2023) agreed with the view that physical, social, and academic changes that occurred in adolescence could be overwhelming. Unresolved conflicts from childhood years often surfaced during this period. They added that the early symptoms and signs of psychological disorders often first emerged in late adolescence, between 15 and 18 years.

Several behavioural changes indicated that which teen was severely depressed or suicidal. These included declining grades, extreme behaviour and mood changes (persistent depression), loss of previous interest, risk-taking behaviour, drug or alcohol use, social withdrawal, and a break in a key relationship (Stokes, 2019; Aomo, 2019). These were important warning signs that parents needed to look out for. Additionally, student suicide often occurred shortly after a stressful event, such as a disciplinary crisis or a recent disappointment or rejection, including but not limited to a fight with a boyfriend/girlfriend, exam failure, and exposure of hidden secrets. Research indicated that high levels of anxiety or anger were commonly present just prior to a suicide attempt (SADAG, 2020).

Baker, Smith, and Johnson (2022) studied suicidal behaviour associated with psychopathology in both parents and youths and seemed to agree with the assumption that the backgrounds of suicidal victims were crucial. They demonstrated a significant relationship between maternal depressive disorders and perceived maternal rejecting parental behaviour with suicidal behaviour in youths. However, they failed to cover academic environmental stressors, even though Sweeney, Thompson, and Lee (2021) and others described academic stress as a serious contributor to adolescent suicide and suicidal behaviour.

Similarly, socio-economic challenges were regarded as contributing factors to suicide risk. Gregory (2019) pointed out that such challenges included unemployment, homelessness, poverty, childhood emotional abuse, social isolation, loss of a loved one, and other life stresses that teenagers experienced directly or indirectly through their families and communities. Of these, Gregory (2019) argued that emotional abuse alone was thought to contribute to 20% of the overall risk of suicide. While several scholars failed to link emotional abuse to academic environmental stressors, this study hoped to do so. Reports of emotional abuses or advances by teachers in exchange for academic grades were rampant in Kenyan schools and tertiary institutions (Reavley, McCann, & Jorm, 2020). This study aimed to assess the ramifications this had on suicidal behaviour among students.

### **Suicidal Attempts and Ideations among Secondary School Students in Kenya**

According to Kimutai (2022), the rising cases of death by suicide among schoolchildren are alarming to education stakeholders in the South Rift region. The report indicates that within one month, five suicide cases

were reported in Kericho and Bomet Counties. The youngest victim was a Grade Four pupil, while the eldest was in Form Two, leaving parents, teachers, and police baffled. In 2023, 30 suicide cases were reported in Bomet County alone, with 14 involving schoolchildren, a significant increase from the previous average of six to ten cases per year. The actual number of suicides may be higher due to underreporting or unexplained deaths among young people.

Factors contributing to these tragic incidents include love relationships, teenage pregnancies, lack of school fees, domestic disputes, terminal illnesses, drug and substance abuse, and challenges posed by the COVID-19 pandemic. Education stakeholders in the region urge parents, guardians, teachers, clergy, and society to investigate the real causes behind these unfortunate cases of suicide in educational institutions. Parents are encouraged to mentor their children and address the daily challenges they face. The Kenya National Union of Teachers (KNUT) has also requested the Ministry of Education to allocate funds for hiring professional counsellors in schools nationwide and called for collaboration among parents, teachers, and other stakeholders in providing guidance and counselling.

Ndori (2023) reports that suicide is occasionally covered by the Kenyan media alongside violence and substance abuse—issues closely correlated with poor mental health. This trend has normalized the reporting of such tragedies. An example is the case of a 14-year-old schoolgirl who committed suicide after being shamed by peers and teachers for soiling her clothes with menses, which shocked the nation (Tanui, 2023). Her death led to protests from parents and the community regarding the teacher's handling of the situation. A concerning trend is the decreasing age of suicide victims and the rise in young people taking their lives due to academic disappointments or bullying. While Ndori (2023) highlights poor mental health as a cause, he does not adequately address how academic environmental stressors contribute to suicidal behavior in adolescents. By focusing on mental health broadly, he overlooks the specific underlying issues that lead to such behaviors.

According to the World Health Organization (WHO, 2023), an estimated 1,408 people commit suicide annually in Kenya, translating to approximately four deaths daily. This figure is significantly higher than the 421 deaths reported by the Kenya National Bureau of Statistics (KNBS, 2018). A majority of those affected are still in educational institutions, primarily secondary and tertiary schools.

Atellah (2023) notes that obtaining accurate suicide data in Kenya is challenging due to underreporting and misreporting of such deaths, partly due to legal penalties for attempted suicide and societal stigma. Nevertheless, it is evident that suicides have devastating effects on families, friends, and communities. Similarly, Macharia (2023) points out the lack of data on suicidal behavior in academic institutions, often due to school administrations misreporting cases to avoid backlash from the community and legal ramifications. Nyamwange (2023) argues that many studies on suicidal behaviors in Kenya focus on causes, family histories, conflicts, psychopathology, and risky sexual behaviors, often neglecting the role of academic pressures. In a 2022 WHO report, Kenya was identified as one of the African countries with high levels of depression, with at least 2 million Kenyans diagnosed with the condition (WHO, 2022).

### **Suicide rates among secondary students in Kenya**

Recent studies highlight the existing data on mental illnesses and their associated risk factors (Ndori, 2023). Like many countries, Kenya continues to face challenges in collecting civil registration and vital statistics, including accurate cause of death data. Consequently, the true causes of death, particularly those related to suicide, are often not reflected in Kenya's official statistics.

Several studies have been conducted on suicide in Kenya, including those by Macharia (2023), Mugambi and Gitonga (2023), and Nyamwange (2023). However, a comprehensive understanding of the impact of academic environmental stressors on adolescent suicidal tendencies remains unclear. This significant gap in knowledge was addressed by the current study.

### **Knowledge gap in this study**

The study addressed a major gap in existing research by focusing on academic environmental stressors for example exam pressure, school rankings, and teacher-student relationships as key contributors to suicidal



behaviours among secondary school students in Uasin Gishu County. Unlike previous studies that examine mental health challenges, this research specifically linked academic stress to suicidal ideation, investigating how students attribute their distress to academic pressures rather than other stressors. It also critically assessed whether school-based suicide prevention programs effectively targeted academic stress or only provides general mental health support. Methodologically, this research departed from previous studies by using a mixed-methods approach, integrating both quantitative analysis (suicidal ideation rates, academic stress levels) and qualitative insights (students, teachers and counsellor's narratives) to provide a comprehensive understanding of the issue).

## METHODOLOGY

This study was anchored on the pragmatic research paradigm, a worldview that embraces methodological pluralism and prioritizes the generation of knowledge that is both contextually relevant and practically actionable. Pragmatism is suited to investigations of complex social phenomena such as suicidal risk behaviours among secondary school students because it values solutions over adherence to philosophical orthodoxy. According to Creswell and Poth (2022), pragmatism emphasizes the intersection of action, consequence, and situational context, supporting the pursuit of inquiry driven by real-world challenges rather than abstract ideals. This paradigm enabled the study to integrate empirical data with personal narratives, aligning the research approach with the multifaceted nature of adolescent mental health within school academic environments. A mixed method research design was used in this study to investigate the attribution of suicidal risk behaviours and ideation on academic environmental stressors among secondary school students in Uasin Gishu County, Kenya. The quantitative component utilized structured questionnaires to assess the prevalence and correlates of suicidal risk behaviour and ideation, whereas the qualitative component explored students' lived experiences and contextual factors influencing these behaviours. This approach was informed by recent studies emphasizing the importance of comprehensive assessments in understanding adolescent mental health challenges within academic settings (Misigo, 2021; Ayiro et al., 2023). This study adopted a concurrent mixed methods design, a strategy recognized for its methodological rigor and ability to provide a holistic understanding of complex phenomena. In this design, both quantitative and qualitative data were collected and analysed simultaneously, which enabled triangulation of findings in real time. This concurrent approach facilitated the capture of diverse perspectives within the same temporal frame, fostering data complementarity and enhancing the overall validity of results (Creswell & Plano Clark, 2023). The target population comprised 165 public secondary schools, involving 71,872 students, 2,384 teachers, 165 deputy principals, and 165 counsellors. Using Gay, Mills, and Airasian's criteria, 18 schools (11%) were selected, from which 144 students were systematically sampled and 18 teachers, 18 deputy principals, and 18 counsellors were purposively chosen. Data collection tools included student and teacher questionnaires, interview schedules for deputy, counsellors, and student focus groups. Quantitative data were analysed using descriptive statistics, whereas qualitative data were analysed thematically.

## RESULTS AND DISCUSSIONS

The study sought to determine the causes of suicidal ideations and attempts among secondary school students in Uasin Gishu, Kenya. Understanding these causes is crucial for developing targeted interventions and support systems to address the mental health challenges faced by students in this region, ultimately promoting their well-being. A questionnaire was developed and administered to assess suicidal risk behaviours among secondary school students, collecting quantitative data from both students and teachers. This facilitated insights into the prevalence and causes of suicidal ideations, with a particular focus on academic stressors. Concurrently, qualitative information was gathered through interviews with counsellors, deputy principals and students focus groups, enhancing the understanding of the quantitative findings and uncovering nuanced insights into the underlying causes influencing students' mental health. Students' responses on the prevalence and causes of suicidal ideations and attempts are displayed in Table 1 below.

According to Table 1, 59.7% of students did not consider attempting suicide, while 40.3% did not consider attempting suicide. 75% of students did not plan to attempt suicide, while alarmingly 25% did. Additionally, 70.1% reported no suicide attempts, 29.9% have attempted suicide, 15.3% once, 10.4% two or three times, 2.7% four or five times, and 1.5% six or more times. Further, 54.9% of students reported to have heard of a suicide case, while 45.1% had not heard. Another 30.3% of the students attributed awareness of suicide cases to

academic pressure, along with 24.3% citing mental health issues, 20.2% family problems, and 15.1% peer pressure. In addition, 59.7% of students identify academic pressure as a significant factor contributing to suicidal risk, 54.9% cite mental health struggles, 50 % reported peer pressure, 45.1% indicated painful life experiences, and 40.2% reported parental neglect and 34.7% indicated sibling rivalry (34.7%). A further 29.9% indicated coming from broken families and 20.1% had unwanted pregnancies also 25% were denied opportunities.

Research by Auerbach et al. (2019) showed that high levels of academic stress correlate with increased suicidal thoughts, with 37.4% of students reporting such thoughts. Hurst, D'Amico, and McCarthy (2020) found that 32.1% of students facing academic pressures often experience social isolation, intensifying feelings of hopelessness, which further elevates the risk of suicidal ideation. This isolation can hinder students from seeking help, creating a distressing cycle with severe consequences. Research by Liu, Wang, and Zhang, (2022) found that adolescents under high academic pressure are significantly more likely to engage in suicidal planning, with 30% reporting such plans stemming from school-related stress. Furthermore O'Connor, Norrie, and Platt (2021) indicated that a lack of emotional support and effective coping mechanisms increases the likelihood of developing suicide plans, with 28% noting that academic stress influenced their planning behaviour. A study by Tzeng, Chang, & Chen, (2021) found that increased academic stress correlates with higher rates of suicidal ideation and attempts; as such stress can lead to feelings of hopelessness and isolation. Liu et al. (2022) demonstrated that chronic academic pressure significantly increases the likelihood of multiple suicide attempts.

Table 1 Students' Response on Causes of Suicide Ideation and Attempts

Variable	Category	f	%
Considered Attempting Suicide	Yes	58	40.3
	No	86	59.7
Made a Plan to Attempt Suicide	Yes	36	25.0
	No	108	75.0
Number of Actual Suicide Attempts	0 time	101	70.1
	1 time	22	15.3
	2 or 3 times	15	10.4
	4 or 5 times	4	2.7
	6 or more times	2	1.5
Injury or Treatment Required from Attempts	I did not attempt suicide	101	70.1
	Yes	29	20.2
	No	14	9.7
Heard of a Suicide Case	Yes	79	54.9
	No	65	45.1
Causes of Suicide	Academic Pressure	24	30.3
	Mental Health Issues	20	24.3
	Family Problems	16	20.2
	Peer Pressure	12	15.1
	Other	8	10.1
Know Someone Who Committed Suicide	Yes	43	29.9
	No	101	70.1
Factors Pushing Students to Commit Suicide	Academic Pressure	86	59.7
	Mental Health	79	54.9
	Peer Pressure	72	50.0
	Painful Life Experience	65	45.1
	Parental Neglect	58	40.2
	Sibling Rivalry	50	34.7
	Broken Family	43	29.9
	Unwanted Pregnancies	29	20.1
	Denied Opportunities or Needs	36	25.0

Source: Research Data, 2024

Moreover, the findings regarding injury or treatment required from attempts reveal critical insights into the mental health challenges faced by secondary school students. While 70.1% reported no attempts, the 20.2% who did require treatment highlights a concerning level of distress that necessitates immediate attention. This group may grapple with unresolved emotional issues and crises that could lead to further attempts. This data reflects the prevalence of suicidal behaviours and the potential consequences of such actions, suggesting that a significant minority is experiencing severe psychological distress. Research by Lee, Kim, and Choi, (2021) found that students requiring medical treatment after suicide attempts are at a higher risk for subsequent attempts, as the initial attempt often indicates deeper, untreated mental health conditions. Wang, Liu, and Zhang (2021) demonstrated that the severity of injuries from suicide attempts correlates with underlying mental health issues. Additionally, research by Rihmer and Rihmer (2020) indicates that exposure to suicide can significantly elevate the risk of suicidal thoughts and behaviours in adolescents. Familiarity with suicide can create a sense of inevitability and hopelessness, leading to a cycle of despair. Nock et al. (2021) found that adolescents aware of suicide cases are more likely to report suicidal ideation, highlighting the role of social influences on mental health outcomes. Further research by Sinha and Kumar (2022) showed that high levels of academic stress correlate with increased rates of anxiety and depression, leading to suicidal thoughts, particularly when students lack coping mechanisms. Zhang et al. (2021) found that mental health issues stemming from academic pressure significantly correlate with suicidal behaviours, as persistent stress exacerbates feelings of hopelessness and isolation.

Research by Giletta, Scholte, and Engels (2020) found that adolescents with personal connections to suicide are more likely to experience increased depressive symptoms and suicidal thoughts, creating a sense of hopelessness and fear. Additionally, Harlow, McKenzie, and Gillett (2021) indicated that peer exposure to suicide significantly correlates with higher rates of suicidal ideation, suggesting social environment plays a crucial role in shaping mental health outcomes.

To supplement the results from the questionnaire on causes of suicide among students, the researcher conducted a focus group interview with secondary school students sampled for the study. The results were categorized into four themes: emotional distress, academic pressure, family dynamics, and social isolation. The themes and responses from focus group interview were as follows:

### **Emotional Distress**

Focus group 10:

Many students bear emotional wounds from past experiences such as bullying or loss, which can trigger persistent sadness and hopelessness. When these feelings remain unaddressed and students lack supportive outlets, they may develop suicidal thoughts. The absence of emotional support significantly heightens their vulnerability to mental health challenges and crises.

### **Academic Pressure**

Focus group 2:

The constant push to excel academically creates immense pressure. We often feel that our worth is tied to our grades, which can lead to anxiety and fear of failure. This fear sometimes makes us think that ending our struggles is the only way out.

### **Family Dynamics**

Focus group 11:

Students from unstable family backgrounds often experience deep loneliness. Parental conflicts or financial hardships create stress that hinders concentration in school. Without emotional or academic support at home, these students may feel abandoned and hopeless, increasing their risk of mental health struggles and negatively impacting their overall academic performance and well-being.

### Focus group 15:

Some students turn to unhealthy coping mechanisms, such as substance abuse, to escape family-related stress. While initially offering temporary relief, these behaviors often lead to more severe issues, including addiction and suicidal thoughts. The underlying emotional pain remains unresolved, intensifying their vulnerability to mental health crises and academic decline.

### Social Isolation

#### Focus group 9:

Experiencing peer rejection can be deeply isolating. Failed friendships or social exclusion often lead to intense feelings of loneliness and despair. This emotional isolation creates barriers to seeking help, leaving students to struggle silently. Without support, these feelings can escalate, increasing the risk of mental health issues, including suicidal ideation.

In the first response, students in Focus Group 10 conveyed a profound sense of emotional distress rooted in past traumatic experiences such as bullying or the death of a loved one. While the overt message describes their sadness and hopelessness, the deeper intent reveals a pervasive emotional burden that remains unaddressed within the school environment. The reference to carrying emotional scars signifies prolonged psychological suffering, which the students implicitly link to a lack of supportive structures to process their pain. The absence of someone to confide in suggests that emotional isolation compounds their vulnerability, fostering an internal world where suicidal ideation becomes a perceived escape. Their words point to a desperate yearning for empathy, connection, and psychological safety, which they feel is missing. This articulation is not merely a report of emotional pain but an indirect call for adult intervention and systemic support mechanisms, indicating that unresolved emotional trauma is a silent but powerful precursor to suicidal thoughts among adolescents. According to Karanja and Mwangi (2022), 64% of students who experienced unresolved grief or bullying reported suicidal thoughts, underscoring the need for trauma-informed counselling services within schools to buffer emotional breakdowns.

Focus Group 2 highlighted academic pressure as a significant driver of psychological distress among students, with the underlying intent reflecting a deep entanglement between self-worth and academic performance. The participants' admission that their worth is tied to their grades reveals a troubling internalization of societal and institutional expectations that equate academic excellence with personal value. The phrase encapsulates more than just fear of failure; it represents a perceived existential threat—where poor academic outcomes jeopardize identity and future prospects. The anxiety derived from this perceived equation leads students into a mental state where suicide appears as the only exit from constant performance-based evaluation. Implicitly, these students are critiquing an educational culture that neglects emotional well-being in favour of achievement metrics. Kim and Park (2022) found that in South Korea, 71% of students experiencing academic burnout exhibited depressive symptoms, and 35% of those admitted to contemplating suicide, revealing the emotional cost of a performance-centric education system with limited psychological support.

In Focus Group 11, students articulated that instability at home—characterized by parental conflict and financial struggles—significantly disrupted their emotional equilibrium. The intent behind this response lies in the revelation that the school environment cannot compensate for the emotional void created by dysfunctional family dynamics. Students do not simply report their domestic challenges; they expose how these challenges erode their focus, sense of security, and capacity to thrive academically or socially. Their use of the term “abandonment” reveals a perception of being emotionally orphaned, even within living households, and this perceived neglect morphs into hopelessness. The intent here is to show that suicidal ideation is not necessarily born out of singular events but rather a chronic feeling of invisibility and disconnection. Sinha and Kumar (2022) reported that 59% of adolescents from households with frequent parental conflict showed signs of chronic depression, and 27% had suicidal ideation, affirming that unstable home environments profoundly impair emotional resilience and mental health in youth.



The contribution from Focus Group 15 further deepened the understanding of how family dysfunction led students into harmful coping mechanisms. While the surface meaning identified substance abuse as a response to family issues, the underlying intent emphasized a progressive, almost inevitable, descent into mental and emotional deterioration. Students implicitly indicated that their engagement in risky behaviours was not a moral failing but an attempt to anesthetize themselves from unbearable emotional pain. The phrase “seek relief from their pain” signified a yearning for mental peace that they could not find in their home or school environments. This pursuit of escape, often misunderstood or criminalized by society, was in fact a survival strategy—albeit a destructive one. The intent here revealed that when familial support was absent, and institutional safeguards failed, students self-medicated to regain control, albeit temporarily. Koller and Pruitt (2021) discovered that 48% of adolescents using substances as coping mechanisms came from homes marked by neglect or violence, highlighting how trauma often manifests through self-destructive behaviours when emotional support systems are absent.

Lastly, Focus Group 9 illuminated the destructive impact of social isolation on students’ mental health. Although the group discussed experiences of peer rejection and exclusion, the intent behind their words pointed to a deeper existential loneliness that permeated their daily lives. The language of “despair” and “loneliness” did not merely reflect sadness; it revealed a sense of invisibility and disconnection so profound that it impaired help-seeking behaviour. The phrase “hard to reach out for help” signified not only a lack of access to support systems but also an internalized belief that they were undeserving or unlikely to receive help. Their intent exposed silent psychological erosion where unmet social needs became fertile ground for suicidal ideation. Kim and Park (2022) further confirmed that 62% of isolated students felt emotionally numb and disconnected, while 29% reported suicidal thoughts, suggesting that peer exclusion and lack of community are significant precursors to severe mental health deterioration in school environments.

According to table 2 below, the finding that 27.8% of teachers reported a student in their school had committed suicide, while 72.2% indicated no such incidents. 55.6% of teachers reported knowing of a student who committed suicide, while 44.4% did not. 55.6% of teachers reported knowing of a student who committed suicide, with 33.3% being boys and 22.2% being girls. 61.1% of teachers believe girls are more likely to commit suicide over academic grades, contrasted with 38.9% for boys.

Table 2 Teachers’ Response on Causes of Suicidal Ideations and Attempt

Statement	Category	F	%
If student in your school ever committed suicide	Yes	5	27.8
	No	13	72.2
If student in a school you know committed suicide	Yes	10	55.6
	No	8	44.4
Gender of the student	Boy	6	33.3
	Girl	4	22.2
Which among boys and girls are likely to commit suicide over academic grades	Boys	7	38.9
	Girls	11	61.1

Source: Research Data, 2024

To supplement to the results from the questionnaire on causes of suicide among students, the researcher carried out an interview from school counsellors who were sampled for the study. The results were categorized into four themes: trauma, pressure of performance, family issues and peer rejection. The themes and responses from the interviews were as follows:

## Trauma

Counsellor 6:

Trauma can create lasting emotional wounds that deeply affect students' mental well-being, leading to a range of struggles such as depression and anxiety. Students who have endured abuse frequently experience the heavy

burden of suicidal thoughts, feeling overwhelmed by the weight of their pain and the seemingly insurmountable feelings of hopelessness that accompany it.

## **Performance**

Counsellor 5:

The pressure to perform can be overwhelming for students, leading them to believe that their self-worth is intrinsically linked to their academic achievements. This mind-set fosters anxiety and fear of failure, as they strive to meet high expectations from parents and educators, often neglecting their mental health in the process.

## **Family issues**

Counsellor 10

Students coming from unstable home environments, marked by factors such as familial discord or economic insecurity, frequently experience a profound sense of isolation and lack the necessary support systems. This absence of support may contribute to the development of feelings of hopelessness, making it essential to provide these students with tailored interventions and resources to help them navigate these challenges effectively.

Counsellor 12

Many students, when faced with the overwhelming challenges that life presents, may turn to drugs and alcohol in a misguided attempt to ease their stress and troubles. Regrettably, this perilous coping mechanism often leads to hasty and reckless choices, ultimately culminating in thoughts of self-harm or suicide as a perceived route to elude their agony and hardships.

## **Peer Rejection**

Counsellor 13

Peer rejection can lead to profound feelings of loneliness among students, significantly impacting their emotional well-being. This sense of isolation is especially pronounced in love relationships, where the desire for connection and acceptance is heightened. Such experiences can hinder their ability to form meaningful connections and exacerbate feelings of despair.

The counsellor's perspective on trauma reveals a profound understanding of the enduring psychological toll such experiences impose on students. While the surface message acknowledges depression and anxiety as by-products of trauma, the underlying intent reflects a deeper emotional devastation that outlasts the triggering event. The phrase "lasting emotional wounds" signifies the chronic nature of unresolved pain, which silently infiltrates the students' daily functioning. By stating that students feel "overwhelmed by the weight of their pain," the counsellor highlights an inner turmoil that is invisible to the broader school environment, yet acutely felt by the affected individuals. This emotional overload, coupled with a lack of avenues for release or support, fosters a psychological climate where suicidal ideation becomes a coping narrative. According to Tait et al. (2020), students exposed to trauma in early adolescence displayed significantly higher rates of suicidal ideation, with 62% reporting depressive symptoms and 48% indicating self-harming behaviour due to unresolved emotional conflict. These findings affirm that trauma-induced emotional burdens can silently escalate into critical psychological conditions when left unaddressed in school environments.

In the account provided by the counsellor regarding performance pressure, the core intent lies in exposing how the conflation of academic achievement with personal value distorts students' mental frameworks. The initial observation that students believe their "self-worth is intrinsically linked to academic achievements" reflects a broader societal and institutional conditioning that prizes outcomes over individual well-being. The use of terms like "overwhelming" and "neglecting mental health" signifies that the pursuit of excellence, far from being motivating has become a source of psychological distress. The counsellor implies that students are entrapped in a performance-centric identity where failure threatens their entire self-concept. This internalized pressure not

only induces anxiety but also isolates students emotionally, as they suppress vulnerability in a bid to meet external expectations. The underlying intent is a critique of educational systems that emphasize metrics over emotional balance, revealing that academic environments must reassess how success is defined to mitigate the psychological cost borne by students. O'Connor et al. (2021) revealed that 58% of high-achieving students experienced moderate to severe anxiety, and 42% reported suicidal thoughts directly linked to academic expectations and parental pressure.

The counsellor's reflection on family issues draws attention to the systemic and emotional neglect experienced by students from unstable home environments. While the surface meaning emphasizes familial discord and financial strain, the deeper intent suggests a critical absence of emotional scaffolding that leaves students vulnerable to despair. The phrase "profound sense of isolation" communicates more than just loneliness—it captures an existential disconnection that renders school support systems insufficient. The counsellor's framing of this isolation as stemming from a lack of "necessary support systems" implies that these students navigate not only academic challenges but also domestic adversities without a stable emotional anchor. The intent underscores that emotional abandonment within the home transcends the physical and becomes psychological, creating conditions ripe for suicidal ideation. This insight compels stakeholders to recognize that suicide prevention must extend into the familial context, acknowledging that unresolved domestic issues severely compromise a student's capacity for resilience and adaptive coping in educational settings. Kinyanjui et al. (2021) found that 64% of adolescents from conflict-ridden families reported chronic sadness, and 39% admitted to suicidal ideation due to persistent emotional neglect at home.

The second counsellor's response on family issues, specifically focusing on substance abuse, conveys a critical intent: students are not merely experimenting with drugs and alcohol but are engaging in a desperate form of self-medication. The surface interpretation suggests maladaptive coping; however, the deeper message reveals a tragic misinterpretation of relief. By noting that students use substances "to ease their stress and troubles," the counsellor illuminates the psychological pain students seek to numb—pain that stems from unresolved familial instability and emotional neglect. The phrase "misguided attempt" indicates that these students are navigating their suffering without adequate guidance or support structures. More alarmingly, the progression "ultimately culminating in thoughts of self-harm or suicide" reflects a downward spiral in which temporary solace leads to deeper psychological crises. The intent here is to expose the self-destructive trajectories students adopt in the absence of structured emotional interventions. This interpretation necessitates a paradigm shift from punishment to empathetic understanding within mental health frameworks. Ochieng and Muli (2023) reported that 55% of adolescents involved in substance use admitted to doing so to cope with emotional pain, and 30% had attempted suicide within the prior year.

The counsellor's insights on peer rejection articulate the psychological devastation that social exclusion inflicts on students, particularly within romantic contexts. While the surface interpretation discusses loneliness and despair, the underlying intent highlights the emotional rupture caused by perceived worthlessness in the eyes of peers. The reference to "love relationships" intensifies the emotional stakes, as adolescence is a period when the need for belonging and intimacy peaks. When these connections are denied, students internalize rejection not as isolated incidents but as affirmations of their inadequacy. The term "hinder their ability to form meaningful connections" implies a lasting impact on interpersonal skills and emotional development, suggesting that peer rejection can have developmental consequences beyond momentary sadness. The counsellor's intent reveals that students equate social exclusion with existential unworthiness, reinforcing a belief that they are undeserving of love or support. This interpretation highlights how emotional injuries from peer dynamics silently escalate into severe mental health crises, including suicidal ideation. Mutiso et al. (2020) found that 60% of adolescents who experienced romantic rejection suffered depressive episodes, and 27% exhibited suicidal tendencies linked to prolonged social withdrawal and diminished self-esteem.

Table 3 Teachers' Rating of Indicators of Suicidal Behaviour

Indicator	Very Low		Low		Normal		High		Very high	
	f	%	F	%	F	%	f	%	F	%
Students Emotions	0	0.0	0	0.0	0	0.0	6	33.3	12	66.7
Identity Crises	0	0.0	0	0.0	5	27.8	8	44.4	5	27.8

Competitive Academic Society	0	0.0	0	0.0	0	0.0	7	38.9	11	61.1
Depression	0	0.0	0	0.0	0	0.0	4	22.2	14	77.8
Peer Pressure	0	0.0	0	0.0	0	0.0	9	50.0	9	50.0
Medical Influence	2	11.1	5	27.8	6	33.3	4	22.2	1	5.6
Family influence/ Pressure	0	0.0	0	0.0	0	0.0	8	44.4	10	55.6
Relationship (to family, friends, etc.)	0	0.0	0	0.0	4	22.2	6	33.3	8	44.4
Psychological Disorders	0	0.0	0	0.0	0	0.0	7	38.9	11	61.1
Risk-Taking Behaviour	5	27.8	6	33.3	4	22.2	2	11.1	1	5.6

Source: Research Data, 2024

Findings from Table 3 indicates that 66.7% of teachers rated students' emotions as "very high" and 33.3% as "high". 44.4% of teachers rated identity crises as "high," with both "very high" and "normal" ratings at 27.8%. Additionally, 61.1% of teachers rated the competitive academic society as "very high," while 38.9% rated it as "high". 77.8% of teachers rated depression as "very high," with an additional 22.2% rating it as "high". The data obtained also showed that 50% of teachers rated peer pressure as "high" and another 50% as "very high". The findings further showed that 11.1% of teachers rated medical influence as "very low" and 33.3% as "normal". In addition, the results indicated that 55.6% of teachers rated family influence as "very high" and 44.4% as "high". 44.4% of teachers rated relationships with family and friends as "very high," while 22.2% rated them as "normal." 61.1% of teachers rated psychological disorders as "very high" and 38.9% as "high".

These findings concur with the study findings by Duffy et al. (2020) who illustrates that that high emotional distress correlates with increased suicidal ideation, particularly when academic demands feel insurmountable. The study also aligns with Mutiso et al. (2020) who found that emotional instability is often linked to inadequate coping mechanisms, thus increasing vulnerability. These findings emphasize the critical need for educational stakeholders to recognize and address the emotional challenges faced by students, as high ratings of emotional distress signal a mental health crisis within schools that requires urgent intervention.

The current findings also are in agreement with research by Kinyanjui et al. (2021) who indicated that identity crises can heighten emotional distress and were linked to increased suicidal ideation, especially when students feel disconnected from peers or unable to meet societal expectations. Additionally, Giletta et al. (2020) agree with the study findings that identity-related stressors can exacerbate feelings of inadequacy and hopelessness, contributing to suicidal behaviours among adolescents. Addressing identity crises in educational settings is crucial, as they serve as indicators of mental health challenges arising from academic and social pressures. The current findings also agree with Tzeng et al. (2021) whose findings indicated that a highly competitive academic environment can lead to feelings of inadequacy and fear of failure, contributing to mental health issues and increasing suicidal ideation. Furthermore Firth et al. (2021) found that competitive pressures create an isolating atmosphere, exacerbating emotional distress. These findings underscore the detrimental effects of academic competition on students' mental health, indicating a need for interventions that promote a healthier educational environment prioritizing well-being alongside academic achievement. The current study findings as well aligns with Kinyanjui et al. (2021) in their study who indicated that adolescents experiencing high levels of depression are at increased risk for suicidal thoughts, particularly when compounded by academic pressures and social isolation, and that peer influence can exacerbate feelings of inadequacy and lead to risky behaviours, including substance abuse and self-harm, particularly when students feel compelled to conform. Ndung'u (2023) study, agrees with the current study that lack of medical support can hinder students from receiving necessary care, potentially exacerbating feelings of hopelessness and increasing suicidal risk. Additionally, Mutiso et al. (2020) found inadequate access to mental health services often leaves adolescents without coping resources, further increasing vulnerability to suicidal ideation. These findings highlight the need for integrating medical support into educational environments, as limited acknowledgment of medical influence may contribute to underestimating factors affecting students' mental health.

The analysis highlights a distressing prevalence of suicidal ideation and attempts among secondary school students, with a substantial proportion admitting to having considered or planned suicide. Many students reported multiple suicide attempts, underscoring the severity of their psychological distress. Academic pressure



emerged as the most prominent factor, closely followed by mental health struggles, family conflicts, and peer pressure. Painful life experiences, parental neglect, and sibling rivalry further compounded these challenges, revealing a complex interplay of stressors that push students toward suicidal behaviours.

Teachers' perspectives reinforced these concerns, with many acknowledging the prevalence of suicide cases in schools and identifying girls as particularly vulnerable to academic-related suicidal ideation. Educators rated students' emotional distress, identity crises, and depression as alarmingly high, pointing to a widespread mental health crisis exacerbated by competitive academic environments and peer dynamics. Family pressures and psychological disorders were also cited as significant contributors, indicating that students' struggles extend beyond the classroom.

## CONCLUSION AND RECOMMENDATIONS

The study findings showed that suicidal ideations and attempts among secondary school students in Uasin Gishu County are alarmingly prevalent and are driven by a convergence of psychological, academic, familial, and social stressors. Academic pressure, mental health challenges, family conflict, and peer influence emerged as dominant triggers. Girls and day scholars were particularly vulnerable, revealing a gendered and contextual dynamic in suicide risk. The findings underscore the urgent need for targeted mental health interventions that address both school-based and home-related stressors. Thus, schools should introduce early detection systems for suicidal ideation. These include regular mental health screenings, anonymous reporting platforms, and teacher training to identify at-risk students early, especially among vulnerable groups like girls and day scholars.

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