

Public Perception of Mass Media Campaigns' Effectiveness in Nigeria's Control and Prevention of Suicide amongst Youths

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Abstract: Media reporting involves using media, such as television, newspaper, internet, radio, and so on, to pass information on specific issues to a large group. Media reporting is a veritable instrument for educating the masses on societal problems. The media strongly influence community attitudes, beliefs, and behaviours and play a vital role in politics, economics, social practices, and suicidal behaviour. Anchored on the Rational Model Theory, the paper adopted the survey research method. The finding reveals that depression is a leading cause of suicide among youths. Depression is a common mental disorder that presents with a depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration. The paper recommends that the media should take responsibility to report responsibly and accurately on suicide and its risk factors. They can also provide information on available resources, such as mental health services and helplines, and encourage people to seek help if they struggle with suicidal thoughts or mental health problems. It will help reduce stigma and encourage people to seek help.

Keywords: Media Awareness, Suicide Prevention, Social Responsibility, Mental Health Promotion, Youth Empowerment.

INTRODUCTION

Suicide is a significant public health concern globally, and Nigeria is not immune to this problem. In recent years, there has been a surge in the number of youths committing suicide in the country. It has led to a growing concern among the public and policymakers about how to control and prevent suicide among youths in Nigeria effectively. Mass media has been recognized as a potential tool in preventing suicide, and its effectiveness is a matter of public perception.

According to Kerkhof (2004), suicide attempts are more common in young people, those with poor socioeconomic statuses—such as those with low educational levels—the disabled, the unemployed, those who are divorced or separated, and those who are terminally sick. Economic challenges, such as inadequate financial support from parents or guardians, hunger, unemployment, and illness, have thus predisposed teenagers and others to suicidal behaviour.

According to the World Health Organization (2012), suicide is the third highest cause of death worldwide. It is estimated that 9.9 per 100,000 youngsters in Western countries commit suicide yearly (Centre for Disease Control and Prevention, 2013). Jaffe, (2014) estimates that every year, there are at least 380,000 suicide attempts and roughly 38,000 completed suicides. Suicidal behaviour is one of the strongest predictors of psychiatric admissions, according to Robert (2008), who also noted that it had been reported to be a leading cause of psychiatric emergencies in children and adolescents in technologically advanced nations. These all show that suicidal

tendencies are common. Teenage suicidal ideation and attempts, for instance, have reportedly come to be recognized as significant public health issues in the United States of America. Youth suicides have increased recently, not just in Nigeria but worldwide. It is understandable why news stories with headlines like “guy jumps into the lagoon and dies,” “student kills himself due to poor grades,” “men’s body found hanging from the ceiling fan in his room,” “nd “man dies after purposefully ingesting deadly liquid,” etc. are frequently reported.

Suicidal behaviour is any action that causes a person to wish to kill themselves on purpose. According to Lahti (2014), suicide is the deliberate act of self-harm committed by the individual with full awareness or expectation of its lethal outcome. According to Turecki and Brent (2016), suicide is a deadly act of self-harm with some indication of harmful intent. It also known as wants to end one’s life or harming one’s interests or opportunities. Suicidal behaviour, according to Castle and Kreipe (2007), includes suicidal ideation (recurring thoughts of taking one’s own life), suicide attempts (the actual act of attempting to take one’s own life), and accomplished suicide (which involves death). Suicidal behaviour, according to Kerkhof (2004), is any deliberate action or omission designed to end one’s life to alleviate severe suffering or improve unfavourable living circumstances.

The mass media In Nigeria, including television, radio, newspapers, and social media, have been recognized as powerful tools for disseminating

information and influencing public opinion. They are essential in shaping attitudes, beliefs, and behaviour, and their influence on suicide prevention is no exception. The general perception of the effectiveness of mass media in the control and prevention of suicide among youths in Nigeria is a complex issue, influenced by various factors such as the content and quality of the information provided, the mode of delivery, and the target audience.

Using media outlets like television, newspapers, the internet, radio, and other platforms to disseminate information about specific topics to a large audience is known as media reporting. Reporting in the media is a fundamental tool for enlightening the general public on critical societal concerns. Media significantly impact politics, economics, social practices, and suicidal behaviour. They also have a strong positive impact on community attitudes, beliefs, and behaviours (World Health Organisation, 2000). WHO, (2000) added that one of the many factors that may encourage a vulnerable individual to take their own life is media coverage of suicides. In other words, news stories about suicide cases may contribute to increased suicides. Teenagers may imitate the suicide methods employed in that instance if they see or hear about it in the media (television, radio, print). Following Cheng, Hawton, Lee, and Chen (2008), it is called the modelling effect.

Many programs have been launched to educate the public, including those that disseminate knowledge on suicidal tendencies through town hall meetings, workshops, youth development programs, and conferences. Despite the popularity of public awareness and education programs as health interventions, Jaffe (2014) referenced John (2005), who stated that their efficiency in lowering suicidal behaviour has rarely been rigorously studied. According to studies, public awareness programs only serve to increase people's understanding and attitudes concerning suicide behaviour, not to prevent it. According to Hor and Taylor (2010), receiving and sticking with appropriate treatment is the sole protective factor against suicide.

According to Wasserman, Hoven, and Wasserman (2012), a mental health awareness program for teens to prevent suicide helped improve understanding about and attitudes around suicide but did not indicate a decrease in suicidal behaviour. Jaffe, (2014) cited a study by Dumesnil

and Verger, (2009) that examined 200 publications from 1987 to 2007 that described programs to raise awareness of depression and suicide among the general public. The researchers found that while the programs had a modestly positive impact on people's knowledge of and attitudes toward depression and suicide, they did not contribute to an increase in care-seeking or a decrease in suicidal behaviour.

It is obvious where the media fit into health communication strategy. The media have a significant role in educating, energizing, and mobilizing the populace. The press is an efficient instrument for influencing women's health behaviours because it can reach a vast, dispersed audience at the lowest cost. There are two ways that the media might influence behaviour, knowledge, and attitudes regarding health care, according to Robertson and Wortzel, (2008). By campaigns created intentionally for such an impact, the media may inadvertently change information, attitudes, and behaviour. When media audiences are exposed to messages that contain health-related themes intended to impact health knowledge, attitudes, and behaviours, the media may do so incidentally or unintentionally.

Successful communication is only feasible when the proper message is communicated to the relevant audience reasonably through the appropriate channels. Because it is a weapon for mobilizing, sensitizing, educating, informing, and entertaining the vast majority of its audience in and throughout the globe, the media's significance is escalating. The control and prevention of suicide could be significantly aided by proactive and practical media programs that are thoughtfully conceived, produced, and packaged with the socio-cultural patterns of the community in mind.

One of the main ways in which the mass media can be effective in preventing suicide among youths in Nigeria is by providing information about the causes, warning signs, and risk factors associated with suicide. The media can help to raise awareness about the problem of suicide, promote public discussion, and provide information about available resources for individuals at risk. It can be done through various channels, such as news reports, feature articles, documentaries, and public service announcements.

However, the public often questions the effectiveness of the mass media in this regard. Some believe the media's sensationalization of

suicide and graphic portrayal of suicidal behaviour can negatively impact at-risk individuals. They argue that this can lead to copycat suicides, where individuals imitate the suicidal behaviour of others, leading to a “contagion effect.” Others say that the media’s portrayal of suicide can create a stigma around the issue, making it more difficult for individuals to seek help.

Statement of the Problem

The mental health crisis in Nigeria is making individuals hopeless and leading some to suicide; this silent epidemic stealthily claims countless Nigerian lives without anyone noticing it. The alarming trend is brought on by numerous interrelated elements, including addictions, absolute lunacy, and joint disorders that impact millions of individuals, such as depression and acute anxiety. It becomes vital to launch media efforts on the management and prevention of juvenile suicide to quell this incubus. Despite several suicide prevention campaigns (such as the “Life is an egg” campaign on social media), were these efforts successful? So, whether young people in Nigeria engage in suicidal behaviour emerges. If so, what preventive measures are necessary to stop such actions? What role—and how effectively—has the media played in managing and preventing teenage suicide? They make up the bulk of the study’s problem.

OBJECTIVES OF THE STUDY

The objectives of this study are as follows;

- i. To ascertain the causes of suicide among Nigerian youths.
- ii. To determine public perception of mass media campaigns' effectiveness in controlling and preventing suicide among Nigerian youths.
- iii. To determine the frequency of exposure of youths to an anti-suicide media campaign.

RESEARCH QUESTIONS

The following research questions will serve as a guide for this study;

- i. What are the causes of suicide among Nigerian youths?
- ii. How does the public perceive the effectiveness of mass media campaigns in controlling and preventing suicide among Nigerian youths?
- iii. What is the frequency of exposure of youths to anti-suicide media campaigns?

LITERATURE REVIEW

Concept of Suicide and Suicidal Behaviour

Almost a million individuals die by suicide yearly, a worldwide epidemic (WHO, 2016). Like other issues in life, the question of suicide has been debated for as long as there have been people. It is mired in historical debates that have resisted any resolution to the puzzle. Suicide is best described as a multidimensional malaise in a needy person who defines an issue for which the act (suicide) is viewed as the most significant answer, according to Maris, (2001). The act of intentionally killing oneself, begun and carried out by the individual concerned with full knowledge or anticipation of its lethal outcome, was classified as a menace by Alabi, Alabi, Ayinde, and Abdulmalik, (2014). Conversely, Dowie, (2020) described suicide as “self-killing.” However, he dissociated himself from the “intentional” element frequently found in other scholars’ definitions of suicide because he claimed that acting intentionally is so weak that intention is not a necessary condition of suicide but instead posited that an agent is the direct cause of death by suicide.

Suicidal behaviour is an intentional action to end one’s life to relieve extreme suffering or improve unfavourable living circumstances (Kerkhof, 2004). It is the deliberate act of ending one’s life or sabotaging one’s interests or opportunities. Suicidal behaviour was characterized as problem-solving behaviour by Maris, (2002). Suicidal behaviour, according to Udoh (2000), includes any deliberate action intended to end one’s life. He claims that it constitutes a crime against one’s nature, humanity, and God for many.

Suicidal behaviour can also be characterized as having the intention to harm oneself or having made at least one previous attempt (Walter, et al., 2005). It alludes to any plans, suggestions, or deeds involved in, related to, or leading up to suicide. It is a collection of several people’s seemingly unsolvable personal issues that lead them to believe death is the only option. They are primarily trying to find a solution to a huge problem. Suicide behaviour is sometimes linked to the mental health of people unable to handle their lives (Kerkhof, 2004, WHO, 2006). Suicide behaviour is a sign that something is fundamentally wrong with the person exhibiting it, with the situation in which they are living, or with both. It doesn’t just appear out of nowhere. It involves suffering and the person’s unwillingness to put up with it, the choice not to put up with it, and the active desire to terminate it.

Suicide behaviour can be self-destructive, deadly (finished), non-fatal (attempted), or ideative (thought about) (Seiden & Gleiser, 2000; and Canetto, 2001). According to Robert (2008), suicides are classified as fatal or attempted suicides depending on whether the person survives (non-fatal). Self-destructive behaviour and suicidal behaviour are different but slightly related behaviours (Seiden & Gleiser, 2000). So, self-destructive behaviour refers to indirect, slowly killing behaviour with no immediate end to life. In contrast, suicidal behaviour relates to ideas, intentions, plans, and attempts to terminate one's life quickly.

Although there is evidence that the frequency of suicide behaviour varies by several criteria, including sex, nationality, ethnicity, and socioeconomic difficulties, most studies have focused on adolescents and young people. While studies on the suicidal behaviours of adolescents and youth in developed nations have been conducted, there are data on these behaviours in Nigeria, particularly among university undergraduates, the majority of whom are adolescents and youth. Due to the absence of data in Nigeria, the most relevant evaluated literature was sourced from publications with primarily foreign backgrounds, including periodicals, textbooks, inserts, seminar papers, and unpublished project reports.

According to Marecek (2001), some factors contributing to suicide behaviour include discrete crises, typically involving interpersonal issues like disappointments or problems in a romantic relationship. Others had academic or professional failures, disputes within families or households, economic issues, or personal difficulties with achievement. He listed several factors that can lead to suicidal behaviour, including unexpected pregnancies, rape, drug addiction, and unfulfilled needs. According to Pillary and Van der Veen (2001), suicide behaviours, particularly for women, are statistically connected with families that experience chronic tension, marital conflict, poor communication, poor issue identification, role conflict, and low cohesion. Gender-related contests have been linked to suicide behaviour globally, notably in Asian nations and nations where women have a low social position. Although Bertolote, et al., (2004) found that gender-related conflicts were linked to suicide behaviours across the board, particularly in Asian nations and nations where women have low social status, they shared the same opinion.

Many psychological conditions, such as hostility, humiliation, guilt, anxiety, inferiority complex, reliance, and disorganization, have all been linked to suicidal behaviour. According to Krauss (2006), when a person is denied a special relationship or objective, suicidal behaviour occurs, and the person destroys the representation of the relationship or goal they had inside of themselves. Appel (2007), who asserted that a broken, deeply loved relationship could result in suicidal behaviour, also backed up this claim. According to Faber (2004), hopelessness is most directly linked to suicidal behaviour. A diminished sense of self and a lack of satisfaction from meaningful relationships or roles in life are characteristics of desperation. The poor social integration tribes, where a band-level organization is typically the most effective form of social control, are hypothesized by May and Van Winkle, (2009) to have more excellent rates of suicide behaviour in most years. Lower rates are found among tribes with higher levels of social integration, where more prominent permanent group-supporting functions are established around clan and communal groupings and where the clan-level organization is supplemented by a broader group of control at the community level.

Causes of Suicide

People's attitudes and behaviours may have become more aberrant due to a significant occurrence that affected the current generation of Nigerians and led to many individuals demanding too many goods that were not readily available. It most likely caused the country to enter the current economic crisis, which may have undermined family bonds and school discipline and sped up relationship disintegration in various contexts. Suicide and suicidal behaviours are linked to these and other factors. Unfavourable economic conditions, grief, family turmoil, work pressure, strained relationships, and individual circumstances are a few of these.

- **Bad Economic Times:** According to Okafor and Okafor (2018), rising suicide rates were correlated with poor economic conditions. Notwithstanding the lack of statistics in Nigeria to support this claim, they insisted that recessionary periods had likely contributed to an overall increase in suicide rates in Nigeria. Fewer jobs were available, and more people lost jobs and other financial reversals due to the severe economic conditions. As sufferings and hardships wore people down, they argued,

they would wish for a 'rest in peace' or a 'better shelter.' This drive may result in suicidal thoughts and actions.

- **Family Disruption:** Suicidality among persons has been linked to several family disruptions, including separation, divorce, death, parental psychopathology, and family violence (Okafor & Okafor, 2018). This research concurs that parental attitudes, feelings, and behaviours impact children and result in long-lasting identification, which is then observable in their perceptions and imaginations of others and themselves. A youngster may want to run away from their parents' unpleasant interactions, such as when one of them is violent. According to research, children mimic their parents' violent behaviour and identify with their hatred and criticism of them. Youngsters view themselves as terrible, hostile, disruptive, and useless (Okafor & Okafor, 2018). So, one drastic method a child may use to release their unpleasant sentiments is to engage in suicidal behaviour.
- **Grief:** Losing a significant other is difficult for everyone but particularly for young individuals with shaky social bonds. When a loved one dies, the pain can be so overwhelming that the survivor is tempted to follow them. For instance, losing a parent at a young age can lead to unwarranted guilt, excruciating sadness, or worry about mental illness. Suicide and other suicidal behaviours may result from this intolerable grief and unjustified guilt.
- **The Pressure of Work:** Academic strain seems to have a simple correlation with suicide. The typical student who commits suicide has a solid academic history but feels that their performance falls short of expectations. Individuals who believe they fall short of expectations from others may experience feelings of shame and guilt, which can leave them vulnerable to feeling unworthy and inadequate. Unwanted negative thoughts that could lead to suicide and other suicidal behaviours in their children can arise from parents who demand too much of them or place too much pressure on them to succeed and achieve. Poor relationships may result from these destructive emotions.

- **Poor Relationship:** When one cannot develop intimate and meaningful relationships with friends, parents, and older role models, it may lead to loneliness. Someone may feel deeply hurt and resentful after being rejected by a lover, passed over for a job promotion, or selected over another youngster. Some risk factors for suicide and suicidal behaviours include being continuously maltreated, having one's accomplishments ignored no matter how hard one tries, and denying affection and admiration. Someone who is ignored or doesn't have strong peer ties could misbehave to get attention. Then, they may decide to punish themselves for punishing others. Social isolation is one element that raises the risk of suicide in later life. It is true in communities where older persons are not given respect or valuable duties.
- **Personal Factors:** The main cause of suicide is self-directed aggression, which extends to "partial" suicides like accident propensity, drug addiction, and excessive risk-taking. It seems to encompass Freud's theory of the lurking death wish. Children and suicidal schizophrenics, for example, frequently complain of loss of doing away with "bad me" in their desire for rebirth and atonement. Lastly, hopelessness, a loss of self-worth, and a negative self-image are all risk factors for suicide and suicidal behaviours.
- **Other Factors:** Lewinsohn, Hops, Roberts, Seeley, and Andrews (2003) list peer issues, familial dysfunction, and a history of suicide behaviour as additional risk factors for suicidal behaviour. Hovey and King (2004), George (2007), and Canino and Roberts (2007), who added parental conflict, educational challenges, and substance abuse/dependence as contributory reasons for suicidal behaviours, reinforced this viewpoint.

Being a burden to others, feeling trapped, experiencing unbearable pain, having no reason to live, killing themselves, increasing alcohol or drug use, acting recklessly, isolating from family and friends, sleeping excessively or insufficiently, aggression, depression, loss of interest, rage, irritability, humiliation, anxiety, mental health conditions, bipolar disorder, schizophrenia, conduct disorder, and increased use of alcohol or drugs are all factors that contribute to suicide, according to Mentally Aware Nigeria Initiative (2017).

Mass Media Role in Suicide Prevention

The media, which includes television, newspapers, magazines, and the internet, has a powerful influence on public opinion and behaviour. As such, the media can play an essential role in raising awareness about suicide and promoting prevention strategies. However, the media can also exacerbate the problem by sensationalizing suicide, reporting graphic details about methods, and glorifying suicide victims. Thus, it is essential to understand the potential benefits and harms of media coverage of suicide and develop guidelines for responsible reporting.

The media is crucial in bringing attention to social concerns like the suicide threat. Their reporting on suicide plays a significant role in influencing how the general public views the problem. Although the part of the media in publicizing this threat is crucial, academics have expressed worry that the broad coverage of the problem could lead to what behavioural scientists refer to as “suicide contagion” or “copycat” suicides (Lake & Gould, 2014). These academics agreed that suicide stories in the media could influence people who are mentally ill in society to imitate the actions of those who are sick in the stories.

One of the most critical roles of the media in suicide prevention is to raise awareness and reduce stigma. Suicide is often stigmatized and not openly discussed, which can lead to feelings of isolation and shame for individuals struggling with suicidal thoughts. Media campaigns, such as public service announcements, documentaries, and news stories, can help to break down barriers and promote understanding and empathy. For example, the “It Gets Better” campaign, launched in 2010, aimed to reduce suicide among LGBTQ+ youth by sharing positive messages of hope and support.

Suicide is a delicate subject for journalists to cover, and a delicate topic in society. While it is the responsibility of the media to report on the threat, concerns are raised by the copycat act effect of their reporting. Mass media and professional groups, including governments, have taken the initiative by creating codes of ethics that address the issue of reporting suicide without inciting a copycat effect.

Researchers recommended restricting coverage, avoiding sensationalism, omitting any specifics about the technique used, and refraining from defining the deceased favourably as part of the media’s responsibility in preventing suicide

(Stack, 2003). According to the BBC’s Producers’ Guideline for journalists reporting on suicide from 2000, writers should refrain from romanticizing the tragedy, offering oversimplified explanations, or interfering with the grieving process of impacted individuals. In general, they should avoid any visual or technical information about suicide methods, especially if those methods are unusual or involve the use of language.

The media can also provide information about suicide prevention resources and encourage individuals to seek help. Suicide hotlines, crisis centres, and mental health services can be highlighted through targeted advertising and news coverage. By providing accurate and accessible information, the media can help individuals make informed decisions and take proactive steps to protect their mental health.

At the same time, the media must be cautious about how they report suicide. Irresponsible reporting can lead to copycat suicides, also known as the Werther effect. Studies have shown that sensationalized media coverage of suicide can increase suicide rates by providing detailed information about methods, romanticizing suicide victims, and minimizing the impact on the community. Therefore, it is essential to follow established guidelines for responsible reporting of suicide.

The World Health Organization has developed guidelines for media reporting on suicide. The procedures include recommendations to avoid sensationalizing the suicide, using graphic images or details, and providing information about prevention and resources. The guidelines also suggest that the media should avoid presenting suicide as a solution to problems, avoid attributing suicide to a single cause, and avoid reporting on suicide clusters.

Many programs have been launched to educate the public, including those that disseminate knowledge on suicidal tendencies through town hall meetings, workshops, youth development programs, and conferences. Despite the popularity of public awareness and education programs as health interventions, Jaffe, (2014) referenced John, Alan, et al., (2005), who stated that their effectiveness in lowering suicidal behaviour has rarely been rigorously assessed. According to studies, public awareness programs only serve to increase people’s understanding and attitudes concerning suicide behaviour, not to prevent it. According to

Hor and Taylor (2010), receiving and sticking with appropriate treatment is the sole protective factor against suicide.

THEORETICAL FRAMEWORK

This paper is anchored on the Rational Model Theory. The theory posits that people are rational decision-makers who weigh the costs and benefits of their actions before making a decision. In the case of suicide, individuals may contemplate taking their own lives due to various factors, including mental illness, social isolation, financial stress, or relationship problems. The theory suggests that individuals may consider suicide if they perceive that the benefits of ending their lives outweigh the costs of continuing to live.

Bayo, (2019) noted that mass media, including television, newspapers, and social media platforms, can influence how people perceive suicide and its consequences. Media coverage of suicide can potentially shape public attitudes and behaviours towards suicide. The media can provide accurate and helpful information about suicide prevention and control or inadvertently promote suicidal behaviour through sensationalized reporting or graphic depictions of suicide.

The rational model theory suggests that media coverage of suicide can influence individuals' decision-making by providing information about suicide prevention and control strategies. For example, media campaigns that promote suicide prevention hotlines or encourage individuals to seek help for mental health problems can increase the likelihood that individuals will seek help before contemplating suicide. Media coverage of successful suicide prevention programs or stories of individuals who have overcome suicidal thoughts can also provide hope and inspiration to those struggling with suicidal ideation.

On the other hand, media coverage of suicide that is sensationalized or glamorizes suicide can have a detrimental effect on suicide prevention and control efforts. Graphic depictions of suicide methods or details of suicide notes can create a contagion effect, where vulnerable individuals may be more likely to contemplate or attempt suicide after exposure to such content.

METHODOLOGY

Surveys were used as the research design for this investigation. According to Wimmer and Dominick (2003), a survey design aims to picture or describe situations or attitudes present at the time. Hence a descriptive survey was desired. The survey approach in research is well renowned for its efficacy in describing and explaining the connections between and among phenomena. Although the survey method does have some limitations, it is thought that these limitations are overshadowed by how effectively and powerfully it may be used to concretize and validate study findings and conclusions.

The Population of the Study

The population for this study comprised School of Information and Communication Technology (SICT), Auchu Polytechnic, who are in the regular programmes in the 2022/2023 academic session. The numerical strength of this population is 4,534 students (MIS, Auchu Poly, 2023).

Sample Size

The sample size for this study is 400, which was drawn from the population. This sample size is made up of individuals who have been selected randomly from the people.

In getting the sample size of 400, the researcher employed Taro Yamane's formula;

$$n = \frac{N}{1 + N(0.05)^2}$$

n = sample size
N = Population
0.05 = Margin of error

$$\begin{aligned} n &= \frac{4534}{1 + 4534(0.05)^2} \\ &= \frac{4534}{1 + 4534(0.0025)} \\ &= \frac{4534}{4535 \times 0.0025} \\ &= \frac{4534}{11.33} \\ &= 400 \end{aligned}$$

DATA PRESENTATION AND ANALYSIS

During this research, 400 copies of questionnaires were printed and distributed to the respondents. Of the above figure, 380 documents were returned, and 20 documents were wrongly filled. It reduced the total number of questionnaires collected to 380 copies. The data collected is shown in the tables below;

Table 1: Gender of the Respondents

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Male | 214 | 56 |
| Female | 166 | 44 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 2: Age Range

| Responses | Frequency | Percentage (%) |
|--------------|-----------|----------------|
| 18-25 | 193 | 51 |
| 26-45 | 180 | 47 |
| 46 and above | 7 | 2 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 3: Marital Status

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Married | 96 | 25 |
| Single | 284 | 75 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 4: Departments of Respondents

| Responses | Frequency | Percentage (%) |
|------------------------------|-----------|----------------|
| Computer Science | 95 | 25 |
| Mass Communication | 95 | 25 |
| Office Technology Management | 95 | 25 |
| Statistics | 95 | 25 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 5: Level/Class of Respondents

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| ND 1 | 85 | 22 |
| ND 2 | 100 | 26 |
| HND 1 | 90 | 24 |
| HND 2 | 105 | 28 |
| Total | 380 | 100 |

Source: Field survey, 2023

Research Question 1: What are the causes of suicide among Nigerian youths? Items 6 and 7 were used to answer this research question.

Table 6: Have you ever heard of the prevalent cases of suicide among youths in Nigeria?

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Yes | 380 | 100 |
| No | 0 | 0 |
| Undecided | 0 | 0 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 7: Which of the following is a significant cause of suicide among Nigerian youths?

| Responses | Frequency | Percentage (%) |
|--------------------|------------|----------------|
| Depression | 217 | 57 |
| Bad economic times | 5 | 1 |
| Bereavement | 86 | 23 |
| Other factors | 72 | 19 |
| Total | 380 | 100 |

Source: Field survey, 2023

Research Question 2: How does the public perceive the effectiveness of mass media campaigns on the control and prevention of suicide

among Nigerian youths? Items 8, 9 and 10 were used to answer this research question.

Table 8: Do you think the media has been effective in the campaign on controlling and preventing suicide among Nigerian youths?

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Yes | 380 | 100 |
| No | 0 | 0 |
| Undecided | 0 | 0 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 9: How will you rate the effectiveness of mass media campaigns on controlling and preventing suicide among Nigerian youths?

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Excellent | 104 | 27 |
| Very good | 76 | 20 |
| Good | 93 | 24 |
| Moderate | 71 | 19 |
| Poor | 26 | 7 |
| Very poor | 10 | 3 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 10: How do you perceive the effectiveness of mass media campaigns on controlling and preventing suicide among Nigerian youths?

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Positive | 380 | 100 |
| Negative | 0 | 0 |
| Neutral | 0 | 0 |
| Total | 380 | 100 |

Source: Field survey, 2023

Research Question 3: What is the frequency of exposure of youths to anti-suicide media

campaigns? Items 11 and 12 were used to answer this research question.

Table 11: Are you exposed to anti-suicide media campaigns?

| Responses | Frequency | Percentage (%) |
|-----------|-----------|----------------|
| Yes | 380 | 100 |
| No | 0 | 0 |
| Undecided | 0 | 0 |
| Total | 380 | 100 |

Source: Field survey, 2023

Table 12: How often are you exposed to anti-suicide media campaigns?

| Responses | Frequency | Percentage (%) |
|-------------|-----------|----------------|
| Daily | 97 | 26 |
| Weekly | 108 | 28 |
| Fortnightly | 115 | 30 |
| Monthly | 60 | 16 |
| Total | 380 | 100 |

Source: Field survey, 2023

DISCUSSION OF FINDINGS

All the data collated for this study will be discussed here;

Research Question 1: What are the causes of suicide among Nigerian youths? This research question aims to ascertain the causes of suicide among Nigerian youths. The data in Tables 6 and 7 were used to answer this research question. The data in Table 6 shows that all the respondents answered in the affirmative that they have heard of the prevalent cases of suicide among youths in Nigeria. The data in Table 7 shows that 217 respondents (57%) noted that depression is a significant cause of suicide among Nigerian children; 5 respondents (1%) chose bad economic times while 86 respondents (23%) chose bereavement, and 72 respondents (19%) select other factors.

According to the information above, depression is a significant factor in teenage suicide. Depression is a common mental condition that manifests as low mood, lack of interest or pleasure, diminished energy, guilt or feelings of low self-worth, interrupted sleep or food, and difficulty concentrating. Furthermore, anxiety symptoms frequently coexist with depression. These issues can develop into chronic or reoccurring problems that significantly impede a person's capacity to handle daily obligations. Suicide can result from depression at its worst. An estimated one million lives are lost to suicide yearly, or 3000 suicides every day. Twenty or more people may attempt suicide for every individual who succeeds (WHO, 2012).

Research Question 2: How does the public perceive the effectiveness of mass media campaigns on the control and prevention of suicide among Nigerian youths? This research question aims to determine public perception of the effectiveness of mass media campaigns on the management and prevention of suicide among Nigerian youths. The data in Tables 8, 9 and 10 were used to answer this research question. The data in Table 8 shows that all the respondents answered in the affirmative that the media has

been influential in the campaign on the control and prevention of suicide among Nigerian youths. The data in Table 9 shows that 104 respondents (27%), which constitute the majority of the respondents, rated the effectiveness of mass media campaigns on the control and prevention of suicide among Nigerian youths as excellent. It was closely followed by 93 respondents (24%) who rated it as good, while 76 respondents (20%) rated it as very good. Also, 71 respondents (19%) rated it as moderate, while 26 respondents (7%) rated it as poor, and ten respondents (3%) rated it as very poor. The data in Table 10 shows that all the respondents perceive the effectiveness of mass media campaigns on the control and prevention of suicide among Nigerian youths as positive.

Based on the above, the public perceives the effectiveness of mass media campaigns on controlling and preventing suicide among Nigerian youths as positive. It is because the media has been the instrument in leading campaigns against suicide through various enlightenment and health programmes. Also, it is well-known that the media has been leading the campaign for mental health awareness among youths.

Research Question 3: What is the frequency of exposure of youths to anti-suicide media campaigns? This research question aims to determine the frequency of exposure of youths to anti-suicide media campaigns. The data in Tables 11 and 12 were used to answer this research question. The data in Table 11 shows that all the respondents answered in the affirmative that they are exposed to anti-suicide media campaigns. The data in Table 12 shows that 97 respondents (26%) noted that they are exposed to anti-suicide media campaigns on a daily basis; 108 respondents (28%) choose a weekly basis, while 115 respondents (30%) choose fortnightly and 60 respondents (16%) choose monthly basis.

CONCLUSION

The study may conclude that developing nations like Nigeria do not experience the same conditions as industrialized nations like the United States. It was demonstrated by the study's findings that

suicidal behaviour is uncommon in Nigeria. Although there was a low prevalence of suicidal behaviour among the students, efforts should be made to keep pace by educating the public about the risks associated with established suicidal behaviour risk factors. Health instructors should be ready to offer prevention and intervention tactics to lessen the dreadful suicide problem at our colleges. The finding may contribute to better social integration and management and reduce social retreat and isolation, according to theoretical implications. In other words, there might be improvements in the relationship between the individual student and the social setting in which they find him or her.

RECOMMENDATIONS

Based on the results, the study recommends the following.

- **Raise awareness and educate the public:** One of the critical roles of mass media in suicide prevention and control is to raise awareness and educate the public. The media should take responsibility to report responsibly and accurately on suicide and its risk factors. They can also provide information on available resources, such as mental health services and helplines, and encourage people to seek help if they struggle with suicidal thoughts or mental health problems. It will help to reduce stigma and encourage people to reach out for help.
- **Promote responsible reporting of Suicide:** The media should adopt responsible reporting guidelines when reporting on suicide. It means avoiding sensationalizing suicide, not providing excessive details on the method of suicide, and not glamorizing the act. It is important to prevent suicide contagion or the “copycat” effect. The media should also avoid using language that stigmatizes mental illness or portrays suicide as an inevitable outcome of mental health problems. By promoting responsible reporting of suicide, the media can help to prevent suicide and encourage help-seeking behaviour.
- **Advocate for mental health policy and legislation:** Mass media can also advocate for mental health policy and legislation supporting suicide prevention and control in Nigeria. They can report on mental health issues and promote public discussions on the importance of mental health policies and laws. They can

also highlight the need for increased funding for mental health services and the importance of access to quality mental health care. It will help to reduce the burden of mental illness and suicide in Nigeria.

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