Spirituality: Is It A Risk Or Protective Factor For Emerging Adults' Suicidal Behaviors?

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Abstract
This Study Examined The Role Of Spirituality On Emerging Adults' Suicidal Behaviors In Two Universities In Nairobi County, Kenya. A Total Of 431 Undergraduate Students Aged (18-29) Years Participated In A Self-Administered Survey And Focus Group Discussions. Six University Counselors Participated In A Three-Round Delphi Survey. A Convergent Mixed Method Study Design Was Used To Collect Quantitative And Qualitative Data. The Study Instruments Were Adopted From The Suicide Assessment Five-Step Evaluation & Triage (SAFE-T); Family Environment Scale (FES); Non-Suicidal Self-Injury Assessment Tool (NSSI-AT); Religious Commitment Inventory (RCI-10) And Satir's Iceberg Of The Universal-Spiritual. Data Was Analyzed Using A Multivariate Analysis (MANOVA). The Findings Showed That While Being Protestant And Muslim Were Protective Factor Against Suicidal Thinking, Being Atheism And Roman Catholic Were Risk For All Suicidal Behaviors. Regularly Attending Religious Meetings Was Risk Factors For All Suicidal Behaviors. Viewing Self As A Spiritual Being Was A Strong Protective Factor Against Suicidal Behaviors, Especially Suicidal Thinking (R =-.54, R^2=.17, P<.01). Being Hopeful For A Bright Future Was A Strong Protective Factor Against Suicidal Thinking (R =-1.18, R^2=.43, P<.01) And Attempts (R =-.65, R^2=.33, P<.05). Seeing Self As Important In The Universe Was A Strong Protective Factor Against Suicidal Planning (R =-.71, R^2=.21, P<.01); Attempts (R =-.60, R^2=.24, P<.05) And Self-Harm (R =-.65, R^2=.19, P<.01). Spirituality Is Both A Risk And Protective Factor Against Suicidal Behaviors. This Should Be Taken Into Account By Religious Leaders, Parents And University Counselors To Prevent And Intervene For Suicidal Behaviors.
Keywords: *Spirituality, Religion, Suicidal Behaviors, Emerging Adults, Mixed Methods, University Students.*

I.   Introduction

The role of spirituality on emerging adults' suicidal behaviors is puzzling and often ignored.

Although, past studies on spirituality and suicidal behaviors demonstrated that spirituality was both a risk and a protective factor against suicidal behaviors (Cook, 2014; Talib & Abdullahi, 2017; Koenig, 2012; Lawrence et al., 2016; Taliaferoo et al., 2010). On one hand, the impact of spirituality on mental health is positive and significant (Koenig, 2012). It might help emerging adults cope with adversity, support positive emotions, generate hope, optimism, meaning, purpose, and positive self-esteem (Koenig, 2012). In addition, spirituality can help emerging adults fight against hopelessness, depression and suicidal behaviors (Cook, 2014; Talib & Abdullahi, 2017). On the contrary, spirituality is a risk factor for emerging adults' suicidal thinking, negative self-esteem, and depression (Koenig, 2012; Lawrence et al., 2016; Taliaferoo et al., 2010). The role of spirituality on emerging adults' suicidal behaviors was a question for further inquiry.

The terms religion and spirituality are interchangeably used in many studies on spirituality (Eskin et al., 2019; Cook, 2014; Nkansath-Amankra, 2013; Koening, 2012; Nelson & Padilla-Walker, 2013). Furthermore, spirituality is expressed through religious and cultural practices (Taylor et al., 2015). Forming a personal spiritual identity is a key developmental task in emerging adulthood (McGoldrick et al., 2014; Arnett & Jensen, 2015). This task is accomplished when one forms independent spiritual beliefs, devote themselves to spiritual values and attaches to a community of faith (Arnett & Jensen, 2015; McGoldrick et al., 2014). The family is central in socializing emerging adults toward a personal spiritual identity (Bengtson et al., 2013). Family spirituality provides constructive answers to existential questions generated by the prevailing experiences of the emerging adult (Koenig, 2012). These existential questions are related to the emerging adult's identity, the meaning of life,

values of living, and availability of social support during distress (Taliaferoo et al., 2010). Adherence to spirituality is associated with better mental health and is a protective factor against suicidal behaviors among emerging adults (Lawrence et al., 2016; Nkansah-Amankra, 2013). Moreover, spirituality has been known to help people cope with life stress, recover from depression, abuse substance use, find social support and meaning for life (Cook, 2018). Studies on the role of spirituality on suicidal behavior among emerging adults in Kenya context is inadequate.

II. Literature Review

Parenting and Emerging Adults' Spirituality

Several studies revealed that parenting played a key role during childhood in the formation of spiritual values and morals of emerging adults (Svob et al., 2018; Arnett & Jensen, 2015; Bengtson & Putney, 2013; Leonard et al., 2013). Emerging adults who experienced warmth and support in the parent-child relationship, from either the father or mother, was more likely to develop religious affiliations and beliefs similar to the parents (Arnett & Jensen, 2015). Moreover, parenting styles were significant indicators of whether the child embraced the parents' beliefs and applied them in emerging adulthood (Bengtson & Putney, 2013). Based on Bengtson and Putney's study, it was noted that close, warm and affirming parenting was associated with the religious continuity of the parent in emerging adulthood. Whereas cold, distant, authoritarian, ambivalent and preoccupied parenting nurtured children who were unlikely to be religious, let alone continue with the parent's religious beliefs (Bengtson & Putney, 2013). Although the role of parenting and emerging adults' spiritual formation was clear, is was essential to examine the relationship between parenting and emerging adults' suicidal behaviors.

Spirituality in Daily Family Life

Emerging adults were spiritually socialized through daily interactions with family members around spiritual values and practices (Svob et al., 2018; Bengtson & Putney, 2013; Leonard et al., 2013). Children who grew up in families where religious practices were applied daily were likely to form a moral worldview and continue with these religious beliefs (Bengtson & Putney, 2013; Arnett & Jensen, 2015). These parents intentionally taught religious principles, prayed and read the sacred book and communicated openly based on their religious principles (Bengtson & Putney, 2013) had more religious children. Even with this knowledge, there was a need to identify ways faith and family practices influenced emerging adults' suicidal behaviors.

Spirituality and Emerging Adults' Wellbeing

Empirical studies showed that spirituality was helpful in medical and psychiatric health as it assisted patients to cope with illness and life's stresses (Nkansah-Amankra, 2013; Koenig, 2012; Smith, 2003). Although spirituality works differently for people, it helped reduce depression and suicidal behaviors in some university students (Nkansah-Amankra, 2013). Shek et al. (2019) claimed that spirituality was a strong safeguard against mental health problems because it enhanced character development and strength. Furthermore, character strength was a protective factor against internalizing and externalizing problems, evidenced in depression and suicidal behaviors (Shek et al., 2019). If spirituality was a protective factor against medical and psychiatric problems, this study sought to know whether spirituality was a protective or risk factor against suicidal behaviors in emerging adult in Kenya.

Attending Religious Meetings

A spiritual community is critical in emerging adulthood as it provides peers who form deep relationships to support the exploration purpose, be accountable, keep good social networks and grow holistically (Drovdahl & Keuss, 2020). Therefore, attending religious gatherings was associated with positive outcomes (Cook, 2018; Eskin et al., 2019; Drovdahl & Keuss, 2020). However, there were other factors mediating the influence of attending religious gatherings for better health outcomes. Studies revealed that attending church together as a family was a risk factor for suicidal behaviors (Kuentzel et al., 2012; Svob et al., 2018). The results were constant whether or not the emerging adults had differing spiritual beliefs or differing ones (Svob et al., 2018; Kuentzel et al., 2012). Another study showed that attending religious meetings was a protective factor against suicidal behaviors among emerging adults if only they attended these meetings at least 24 times annually (Cook, 2018). It was important to examine the whether cultural factors mediated the impact of attending religious meeting was a protective factor against suicidal behaviors.

Religious Affiliations in Emerging Adulthood

A study by Eskin et al. (2019) revealed that being affiliated with Hinduism, Orthodox Christianity, and Catholicism reduced psychological distress. While being affiliated with Islam was associated with an increased risk for psychological distress. Another study showed that being that Catholics and Seventh-day Adventists were protective factors for suicidal thinking but being Hindu was a risk factor for suicidal attempt (Toussaint et al.,

2015). In addition, being an atheist, agnostic and a nonbeliever were considered risk factors for suicidal behaviors among emerging adults (Svob et al., 2018). Specifically, female emerging adults who held their family affiliation or spiritual values were at a lower risk of engaging in suicidal behaviors than male children (Svob et al., (2018). Therefore, religious affiliation was somewhat a protective factor for emerging adults' suicidal behaviors in the university (Nelson & Padilla-Walker, 2013). It was unclear whether these conclusions were generalizable in the Kenyan context. Thus, this research was able to clarify.

There seems to be contradictory and inconsistent associations between spirituality and suicidal behaviors among emerging adults (Shel et al., 2019; Toussaint et al., 2015). Studies showed that spirituality was a proactive factor against some suicidal behaviors but not others (Taliaferro et al., 2010; Eskin et al., 2018; Lawrence et al., 2016). Taliaferro et al. (2010) revealed that existential well-being rather than spiritual well-being was a preventative factor against suicidal ideation among emerging adults in colleges. On the contrary, other studies showed that spirituality was a risk factor for suicidal behaviors (Eskin et al., 2018; Lawrence et al., 2016; Teevale et al., 2016). A review on spirituality and suicide risk by Lawrence et al. (2016) observed different interactions between spiritual factors like affiliation, participation and adherence to doctrine with suicidal ideation, attempts, and completion. Lawrence argued that spiritual affiliation and regular attendance of spiritual gatherings protected emerging adults against suicidal attempt. Nonetheless, it did not protect those who attended spiritual gatherings from suicidal ideation. Lawrence et al. (2016) concluded that spirituality was a preventative factor against suicidal attempt but not suicidal thinking, planning or self-harm. It was uncertain what made spirituality a protective factor for suicidal attempt and not for other suicidal behaviors.

Thus, this study explored the role spirituality played in emerging adults' suicidal behaviors in Kenyan. Reason being, spirituality impacts on people's behaviors, beliefs and values in the context in which the behaviors are observed.

III.   Methods
A convergent mixed methods study design was used in the study. All participants complete a questionnaire assessing suicidal behaviors and psychological stressors adapted from Suicidal Assessment Five Steps Evaluation-Triage (SAFE-T), Columbia-Suicide Severity Rating Scale (C-SSRS), Non-Suicidal Self-Injury Assessment Tools [NSSI-AT] (Whitlock & Purington, 2014; Yershova et al., 2016) and Emerging Adult Stress Inventory [EASI] (Murray et al., 2020). A test retest method was used to test the reliability of the questionnaire to determine the reliability and validity of the tools in examining the study objective. A test retest was conducted among 22 university students randomly selected in a different university from where the study was carried out. Based on the Pearson Product Moment Correlation, a score of r= .83 was obtained. The results were greater than r >.80, the acceptable reliability indices. The content validity, construct validity and internal validity were obtained by scrutiny of the research supervisors, two lecturers in the Psychology department at PAC University and peers who reviewed the content measures to confirm the variables were measuring what they were intended to measure.

Participants
The study involved 399 students who filled the self-administered questionnaire, 32 students were engaged in one of four focus group discussions and six university counselors filled out a three round delphi survey. Participation was voluntary and no compensation was given for taking part in this study.

Procedure
The universities were selected from two clusters: one private and one public university. A simple random sampling procedure was used to select the private university. The public university was selected using purposive sampling; it was the only public university in cluster in Kasarani Constituency. A stratified sampling method was used to select participants from five categories based on the years of study and to select five classes from the university's timetable. The class codes by year of study were written on pieces of paper and put in a big bowl. The papers were mixed up in the bowl and one paper was pick at a time without replacement. Two classes per year of study were selected. Only one class from the fifth year of study was available for selection make up the ninth class. A simple random sampling was done by assigning all the students attending the selected classes, then selecting those with odd numbers for the study. The selected students completed a self-administered questionnaire. The response rate in the private university was 99.5% and 100% from the public university.

Another 16 students from each university were selected for a focus group discussion using convenient sampling. The students who had even numbers were allowed to volunteer for the study. Two students volunteered in seven classes and only one student each volunteers in the fourth and fifth year classes. The students were further divided into two groups of eight each, one from every year of study apart from the fourth and fifth year students. Two interviewers facilitated each zoom focus group discussion after contracting with each student to participant and record the discussion. Two Zoom focus group discussion were held for the two universities.

Six university students were selected using a snowballing sampling procedure. Four counselors from the private university and the two working in the public university participated in a three-rounds delphi interview. The first round was a semi-structured open-ended questionnaire sent on email, while the second and third rounds were structured closed-ended questionnaire generated from the counselors' consensus on a Google form document.

Analysis

The quantitative data was analyzed by use of the Statistical Package for Social Sciences (SPSS) statistics version 27. Descriptive statistical methods were used to describe and summarize the findings using frequencies and inferential statistics. The relationship between variables were obtained using the multivariate statistics (MANOVA). In this study, mean score indexes were obtained when calculating the frequencies of suicidal behaviors among emerging adults. There were 5-scale indexes to measure suicidal thinking, suicidal planning, and suicidal attempts and 6-scale indexes measure self-harm. A mean score of one meant that the participants engaged in one incident of suicidal thinking, planning and attempts. A mean score of five and of six meant that the participants had engaged in all five incidences of suicidal thinking, planning and attempts and six incidences of self-harm. The qualitative data from the focus group discussion was coded, categorized thematically and interpreted using NVIVO version 12. The dephi interview consensus was analyzed using the Google Form by use of graphs and figures. The data from the quantitative and qualitative sources was triangulated, interpreted, merged and reported. The data report was based on two steps of data analysis: a) examination of the demographic variables of the emerging adults and their families and b) correlations between individual variables and each suicidal behavior.

The study was authorized by the Pan Africa Christian University Institution Review Board (IRB) and the National Commission of Science, Technology and Innovation (NACOSTI). In addition, the study was authorized by the Nairobi County government and the universities.

IV.   Results

A total of 399 undergraduate students participated in this study; 189 (47.4%) male, 208 (52.1%) female and 2 (0.50%) other gender. There were 199 students drawn from the private university and 200 students from the public university. The average age range of the emerging adults in the university was 20 – 25 years-old. Majority of the students 268 (67.2%) live in the hostels compared to 131(33%) who live at home. Most students 160 (40%) live alone and 114 (29%) live with a schoolmate and only 82 (21%) live with parents/guardians and siblings. Thirty-three percent of emerging adults in the university confide in peers and 28% confide in their mother. The family profiles of the emerging adults in this study revealed the prevalent family structure is that led by both biological parents (father and mother) 289 (72.4%). Most of the participants were first born 144 (36.1%) and second born 101 (25%) in their family. The dominant parenting style experienced by the participants is authoritative parenting 240 (60.2%) and authoritarian parenting 85 (21.3%). Majority of the parents' highest education level of 289 (72.4%) was college education: 93 (23%) have a post-graduate education; 106 (26.6%) are university graduates, and 90 (22.6%) are college educated.

The demographic analysis revealed female students were risk of engaging in all suicidal behaviors that their male counterparts. Moreover, students from the private university were at risk of all suicidal behaviors than students in the private university. While authoritative and permissive parenting styles were a protective factor against all suicidal behaviors; authoritarian and neglectful parenting styles were a risk for suicidal planning and self-harm but a protective factor against suicidal thinking and attempts. Confiding in a pastor or a religious leader was a risk factor for all suicidal behaviors (see Table 3).

The study revealed that students affiliated to all religions scored highly on suicidal thinking and suicidal attempts. Being an Atheist had the highest score in all suicidal behaviors as seen in Table 1. Self-harm was the lowest score mean score and participants of all the religious affiliations had a low score.

Table 1
Mean Scores of Religious Affiliation and Suicidal Behaviors

	Suicidal Thinking %	Suicidal Planning %	Suicidal Attempts %	Self-harm %
Atheist	36	22.7	26.7	13.4
Roman Catholic	17.3	5.8	7.9	5.4
Muslim	23.3	6.9	6.2	7.7
Protestant	14.1	5.4	6.9	4.2
Hindu	20	-	-	-
Unspecified	19	2.4	7.4	7.2

Further statistical analysis revealed that Atheism and Roman Catholic religious' affiliations were positively and significantly linked with suicidal behaviors. Being an Atheist was a risk factor for all suicidal behaviors: suicidal thinking (r=.374, $R^2 = 1.538$), suicidal planning (r=.705, $R^2 = 1.027$), suicidal attempt (r=1.158, $R^2 = 1.164$) and self-harm (r = .389, $R^2 = 940$). And being Roman Catholic was positively and significantly associated with all suicidal behaviors: suicidal thinking (r=.401. $R^2 = 1.490$), suicidal planning (r =.134, $R^2 = .994$), suicidal attempt (r=.532, $R^2 = 1.127$) and self-harm (r=.157, $R^2 = .910$). Islamic and Protestant affiliations were negatively associated with suicidal thinking and positively linked to suicidal planning, attempts and self-harm (see Table 3).

Table 2
Statistical Analysis on Early Family Spiritual Values and Suicidal Behaviors

	Suicidal thinking	Suicidal planning	Suicidal attempt	Self-harm
Spiritual Values				
Morality was valued and encouraged	-0.035	0.053	0.040	0.007
	(0.106)	(0.074)	(0.082)	(0.067)
Religious practices were part of the family culture	-0.021	-0.024	-0.001	-0.031
	(0.083)	(0.058)	(0.064)	(0.052)
Faithfully attended religious meetings	0.057	0.061	0.049	0.014
	(0.086)	(0.060)	(0.066)	(0.054)
Family was hopeful in stressful life events	0.132	0.006	0.039	0.078
	(0.102)	(0.071)	(0.079)	(0.064)
Observations	397	397	397	397
R-squared	0.248	0.161	0.184	0.164

The results analyzed the association between emerging adults' early family spiritual values and prevailing spiritual experiences. The participants were required to answer four questions examining ways their families adhere to morality, faithfulness in religious meetings, integration of religious practice into the family culture and maintaining hope in stressful situations as seen in (Table 2). The results revealed that growing up in a family that valued and encouraged morality might protect emerging adults from suicidal thinking (r=-.035, R2=.106). However, it was a risk factor for suicidal planning (r=.053, R2=.074), suicidal attempt (r=.040, R2.082) and self-harm (r=.007, R2=.067). However, students in the focus group discussion felt that morality training in childhood impacted on them positively in deciding not to engage in suicidal planning and attempt but not suicidal thinking or self-harm. The findings showed a negative relationship between practicing religious practices as part of the family culture and all suicidal behaviors. The analysis showed association as follows; suicidal thinking (r=-.021, R2=.083), suicidal planning (r=-.053, R^2 =.074), suicidal attempt (r=.001, R2=.064) and self-harm (r=-.031, R^2 = .052) (Table 2).

Table 3

Demographic Statistics and suicidal Behaviors	Suicidal thinking	Suicidal planning	Suicidal attempt	Self-harm
Type of university (Private=0, Public=1)	-0.402**	-0.026	-0.264*	-0.177
	(0.182)	(0.121)	(0.138)	(0.111)
Gender (Male=0, Female=1)	0.381**	0.159	0.279**	0.129
	(0.158)	(0.106)	(0.120)	(0.097)
Religious affiliation				
Roman Catholic	0.041	0.134	0.532	0.157
	(1.490)	(0.994)	(1.127)	(0.910)
Muslim	-0.105	0.243	0.306	0.179
	(1.503)	(1.003)	(1.137)	(0.918)
Protestant	-0.197	0.090	0.454	0.100
	(1.488)	(0.993)	(1.125)	(0.909)
Hindu	Omitted due to collinearity			
Atheist	0.374	0.705	1.158	0.389
	(1.538)	(1.027)	(1.164)	(0.940)
Other	0.355	-0.007	0.448	0.281
	(1.501)	(1.002)	(1.136)	(0.917)

	(1.155)	(0.771)	(0.873)	(0.705)
Parenting Styles				
Controlling	0.330	-0.029	0.139	-0.393
	(1.550)	(1.035)	(1.172)	(0.947)
Democratic	-0.198	-0.142	-0.059	-0.391
	(1.548)	(1.033)	(1.171)	(0.946)
Uninvolved	0.263	-0.016	0.029	-0.266
	(1.571)	(1.049)	(1.188)	(0.960)
Very easy	-0.145	-0.340	-0.261	-0.692
	(1.567)	(1.046)	(1.185)	(0.957)
Who you confide in				
Mother	0.094	0.142	-0.094	0.545
	(0.589)	(0.393)	(0.446)	(0.360)
Father	0.020	0.249	-0.207	0.464
	(0.654)	(0.437)	(0.495)	(0.400)
Sibling(brother/sister)	-0.251	0.036	-0.236	0.365
	(0.614)	(0.410)	(0.465)	(0.375)
Relatives	**Omitted?**			
Peers/friends	0.274	0.394	0.016	0.472
	(0.584)	(0.390)	(0.442)	(0.357)
Pastor/religious leader	0.815	0.652	0.042	0.895
	(0.897)	(0.599)	(0.678)	(0.548)
No one	0.162	0.321	0.194	0.613*
	(0.597)	(0.398)	(0.451)	(0.364)
Other	0.050	0.223	-0.183	0.280
	(0.664)	(0.443)	(0.502)	(0.406)

Attending religious meetings was positively linked to emerging adults' suicidal behaviors. The findings revealed that faithfully attending religious meetings during childhood, was positively associated with: suicidal thinking (r =.057, R^2=.086, suicidal planning (r=.061, R^2=.060), suicidal attempt (r=.049, R^2 = .066) and self-harm (r=.014, R^2=.054). These findings were divergent from those obtained from the focus group discussions. The students contended that attending religious meetings was helpful in teaching, encouraging and forming social support that might help to reject suicidal planning, attempts and self-harm.

The findings showed that growing up in a family that was hopeful in stressful life events was positively associated with all suicidal behaviors. The regression analysis showed the association as suicidal thinking (r=.132, R=.102), suicidal planning (r=.006, R2 = .071), suicidal attempt (r=.039, R2 = .079) and self-harm (r=.078, R2=.064). Nevertheless, the correlations were very weak.

Universal-Spiritual Dimension.
The universal-spiritual dimension of Satir's iceberg revealed both the universal yearnings in every human being and the definition of self. This study captured six yearnings and four definitions of self and their relationship to suicidal behaviors among emerging adults (see Table 4)

Universal yearnings.
    Yearning for Love. The results revealed that yearning for love was positively linked to suicidal thinking (r=.198, R^2 =.206), suicidal planning (r=.266, R^2 =.139) and suicidal attempt (r = .094, R^2=.159). But yearning for love was negatively associated with self-harm (r=-.043, R2 = .131). Comparatively, more female students longed for love [t (72.1) =.007] and more public university students at [t (73) =.022] when dealing with distressful situations.
    Yearning for Acceptance. This study examined the relationships between yearning for acceptance and suicidal behaviors. The results revealed a positive correlation between yearning for acceptance and suicidal thinking (r =.308, R^2 =.219), suicidal planning (r=.013, R^2 = .149) and suicidal attempt (r = .155, R^2 =.170). However, yearning for acceptance was negatively associated with self-harm (r=-.049, R^2 = 025). The results showed that more female students [t (66.8) = .023] and more students in the public university [t (68.5) =.052] yearned for acceptance when distressed.
    Yearning for Validation. The findings showed that yearning for validation was positively correlated to suicidal attempt (r=.025, R^2 =.151 and self-harm (r=.025, R^2=.124) and negatively correlated to suicidal thinking (r=-.352, R^2=.195) and suicidal planning (r=-.058, R^2 =.132). This study revealed that yearning for validation was

a risk factor for suicidal attempt and self-harm but a protective factor for suicidal thinking and suicidal planning. Moreover, the study showed that more male students [t (58.5) = .011] and students in the public university [t (60.5) =.047] needed validation in times of distress. Therefore, male students and public university students were more likely to engage in suicidal attempt and self-harm but less likely to think and plan suicide.

Table 4
Universal-Spiritual Dimensions and Suicidal Behaviors

	Suicidal Thinking	Suicidal Planning	Suicidal Attempt	Self-harm
I yearn for:				
Love	0.198	0.266*	0.094	-0.043
	(0.206)	(0.139)	(0.159)	(0.131)
Acceptance	0.308	0.013	0.155	-0.049
	(0.219)	(0.149)	(0.170)	(0.139)
Validation	-0.352*	-0.058	0.025	0.025
	(0.195)	(0.132)	(0.151)	(0.124)
A purposeful life	-0.153	-0.227	-0.356	0.257
	(0.301)	(0.204)	(0.233)	(0.191)
Meaningful living	0.103	0.192	0.451*	0.287
	(0.345)	(0.234)	(0.268)	(0.219)
Freedom to make my own choices	-0.128	-0.115	-0.182	-0.300**
	(0.230)	(0.156)	(0.179)	(0.146)
Beliefs about self				
A spiritual being	-0.019	-0.537***	-0.215	-0.092
	(0.253)	(0.171)	(0.196)	(0.160)
A lovable person	-0.162	0.241	-0.107	-0.053
	(0.354)	(0.240)	(0.274)	(0.225)
Hopeful of a bright future	-1.179***	-0.462	-0.654**	-0.256
	(0.428)	(0.290)	(0.332)	(0.272)
Important in the universe	-0.355	-0.705***	-0.598**	-0.653***
	(0.305)	(0.207)	(0.237)	(0.194)
Observations	397	397	397	397
R-squared	0.324	0.281	0.262	0.236
Standard errors are in parentheses				
*** p<.01, ** p<.05, * p<.1*				

Yearning for a Purposeful Life. Yearning for a purposeful life was positively correlated to self-harm (r=. 257, R^2 =.191). Besides, yearning for purposeful life was negatively correlated to suicidal thinking (r=-.153, R^2=.301), suicidal planning (r=-.227, R^2= .204) and suicidal attempt (r=-.356, R^2=233). A comparison was drawn between gender and university type. The results showed that more male students [t (88.9) = .014] and more public university students t (88.5) = .005 desired a purposeful life when in stressful situations. So, more male students and public university students are less likely to engage in all suicidal behaviors.

Yearning for a Meaningful Living. The study examined another universal aspect involving yearning for meaningful living. The findings revealed that yearning for meaningful living was positively correlated to all suicidal behaviors. The regression analysis exposed that longing for a meaningful living was positively correlated to suicidal thinking at (r=.103, R^2 =.345), suicidal planning (r=.192, R^2=.234), suicidal attempt (r=.451, R^2=.268) and self-harm (r=.287, R^2=.219). Moreover, female students [t (90.8) =.03] loved for a meaningful lives and more private university students [t (90.8) = .019] desired a meaningful life.

Yearning for Freedom to Make Personal Choices. The final universal yearning examined in this study was the desire for freedom to make personal choices. The results revealed that the desire to make personal choices was negatively correlated to all suicidal behaviors. The regression analysis showed the following for suicidal thinking (r=-.128, R2=.230), suicidal planning (r=-.115, R2 =.156), suicidal attempt (r=-.182, R2=179), and self-harm (r=-.300, R2=.146, p< .05). Besides, the association between yearning for freedom to make own choices was statistically significant for self-harm.

Self "I Am". The second aspect of the universal-spiritual dimension is the definition of self. This study explored four self-definitions associated with spirituality: self-identity, lovability, hope and purpose provided by spirituality. The findings revealed that spirituality is a strong protective factor for multiples (see Table 4).

A Spiritual Being. The study explored the relationship between emerging adults' core identity and suicidal behaviors. The results showed that believing that one was a spiritual being was negatively correlated to all suicidal behaviors. The analysis of the linear regression represented: suicidal thinking (r=-.019, R^2 = .253), suicidal planning (r=-.537, R^2=.171, p< .01), suicidal attempt (r=-.215, $R2$ = .196) and self-harm (r=-.092, $R2$ =.160). The results further revealed that more male students [(90.5) =.005] and more public university students [t (93) = .07] were likely to define themselves as spiritual beings. So, the male students and the public university students were less likely to engage in all suicidal behaviors.

A Lovable Person. Whereas believing one was a lovable person was positively associated with suicidal planning (r=.241, R^2 =.240) and negatively associated to suicidal thinking (r=-.162, R^2 = .354), suicidal attempt (r=-.107, R^2 = .274) and self-harm (r = -.053, R^2 = .225). The association was not statistically significant. There were more female students [t (93.2) =.002] and private university students [t (93.4) =.005] who believed they were lovable people. So, more female students and private university students who believed they were lovable beings were likely to engage in self-harm.

Hopeful of a Bright Future. In addition, the study examined the participants' beliefs about a hopeful future and suicidal behaviors. The results showed a negative relationship between being hopeful of a bright future and all suicidal behaviors. The regression analysis showed that being hopeful for a bright future was related to suicidal thinking (r=-.1.179, R^2 = .428, p< .01)), suicidal planning (r=-.462, R^2=.290), suicidal attempt (r=-.654, R^2 =.332, p< .05).) and self-harm (r-=-.256, R^2=.272). Besides, the correlation was statistically significant for suicidal thinking and suicidal attempt. Comparatively, female students had more hope for a brighter future [t(96.2) =.009] and more public university students [t(97.6) = .036] believed in hope for a bright future.

Important in the Universe. Finally, the study explored the relationship between believing one is important in the universe and suicidal behaviors. The results showed that believing one was important in the universe negatively correlated to all suicidal behaviors. The analysis recorded the regression as follows: suicidal thinking (r=-.355, R^2 =.305), suicidal planning (r=-.705, $R2$ = .207, p< .01), suicidal attempt (r=-.598, $R2$ =.237, p< .05) and self-harm (r=-.653, $R2$=.653, p< .01). Additionally, believing that one was important in the universe was statistically significant to suicidal planning, suicidal attempt and self-harm. Furthermore, a comparison between regarding believing one is important in the universe by gender and university type was explored. The results revealed that more male students t(94.7) = .038 and public university students t (95) = .045.

These findings are similar to Satir's Theory of self-esteem. Where having a positive view of self was a protective factor against suicidal behaviours (Baldwin, 2013; Satir et al., 1991). Believing that one is a spiritual being, a lovable person, being hopeful of a bright future and being important in the universe are markers of positive self-esteem. It shows that one has an optimistic judgment of their personal value which generated feelings of compassion and acceptance of one's strengths and weaknesses (Sommer-Flanagan & Sommer-Flanagan, 2015; Gehart, 2010). Thus positive beliefs of self are a protective factor against suicidal behaviours, as observed in Baldwin (2013), citing Satir et al. (1991).

Emerging adults concerned that spirituality played a key role of protecting them from engaging and progressing toward suicide. Spirituality provided purpose for life, guidance, social support, moral clarity, engagement, fear of God, decision making skills and the ability to deal with distress through prayer as seen in Figure 1.

Figure 1

The Focus Group Discussion Responses on the Role of Spirituality on Suicidal Behaviours.
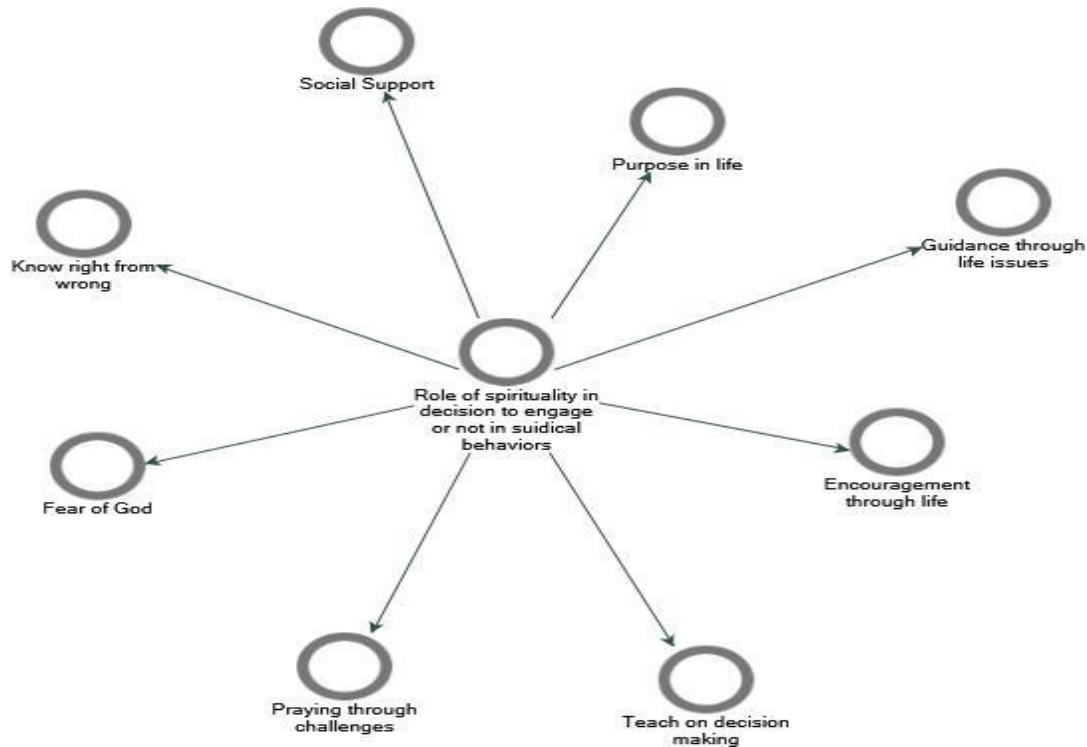
V. Discussion

This study sought to determine spirituality's role in emerging adults' suicidal behaviors. To answer this research question, this study combined findings from religious affiliation, early family spiritual values, and the universal-self concepts in relation to suicidal behaviors. This study reveals that spirituality is both a risk factor and a protective factor against suicidal behaviors among university students.

Religious Affiliation. Religious affiliation was a weak protective factor for suicidal thinking and a risk factor for suicidal planning, attempts and self-harm. These conclusion was parallel to other studied that confirmed religion affiliation was not a protective factor for suicidal behaviors (Teevale et al., 2016; Toussaint et al., 2015; Nishi et al., 2017). Growing up in a family with moral adherence was a risk factor for all suicidal behaviors. These findings resounded Nkansah-Amankra, (2013) conclusion that although many religions uphold high moral objection to suicidal behaviors, it does not eliminate suicidal behaviors. Integrating religious practices apart of the family culture was a protective factor against all suicidal behaviors. These findings are parallel to Bengtson et al. (2013), who noted that parents who modelled faith and train children through reading the sacred books, praying, serving and openly communicated faith matters reduced the risk of offspring suicidal behaviors in emerging adults.

Attending Religious Meetings. Attending religious services was a risk factor for all suicidal behaviors. These findings differed from other studies. According to Toussaint et al. (2015) attending religious services reduced the risk for suicidal thinking and suicidal attempts. Other studies proposed that attending religious meetings was a protective factor for suicidal attempt but not suicidal thinking (Gearing & Alonzo, 2018; Lawrence et al., 2016). However, Cook (2018) contended that attending religious services at least 24 times a year was a protective factor for suicidal behaviors compared to those who attended religious services less often. However, Svob et al. (2018) observed that parents who took religion seriously nurtured children, especially girls, thus it was a protective factor against suicidal behaviors. But parents who did not take religion seriously were a risk of suicidal behaviors in emerging adults.

Having Hope in Stressful Events. In addition, growing up in family that was hopeful during stressful events was a risk factor for all suicidal behaviors. These findings were divergent from previous studies that showed having hope was a protective factor for suicidal behaviors (Tucker et al., 2015; Lew et al., 2020; Gvion & Apter 2012). A study by Tucker et al. (2015) revealed that hope was a protective factor against suicidal ideation. In addition, hopelessness was a risk factor for suicidal ideation (Lew et al., 2020). Both Tucker et al. (2016) and Lew

et al. (2020) cite Snyder's (2002) Hope Theory, that sees hope as a protective factor. This is because hope is futuristic cognitive view that involves setting goals, planning to achieve them and keeping the motivation alive towards achieving the set goals (Tucker et al., 2015; Lew et al., 2020). As concluded by Gvion and Apter (2012) hope is a key factor inherent in mentally healthy individuals with the ability to see life beyond the challenges they are facing. Thus hopelessness is a state void of future objectives and goals, strategies and a compelling motivation to deal with a challenge which is a risk for suicidal behaviors.

However, according to this study, having hope in stressful events was a risk factor for suicidal behaviors. Meaning being in stressful events made being hopeful seem incongruent, which is associated with suicidal behaviors. Moreover, hope is highly generating from spirituality (Talib & Abdullahi, 2017; Mo et al., 2022) which is connected to one's religious beliefs. For example, having hope when in distress, from a Christian perspective, is founded on the believe in God's ability to help, support and resolve the believer's issue. This was evident in other religious views. Talib and Abdullahi (2017) observed that spirituality was a protective factor against hopelessness and suicidal behaviors.

Furthermore, Griggs (2017) after reviewing articles on hope and mental health among emerging adults in college from 2011 – 2016, concluded that hope was a protective factor against suicidal behaviors because it increased ability to cope with difficult situations. Therefore, having hollow hope; without object or a strong supreme to deal with one's distress was the risk factor suicidal behaviors. This means that emerging adults whose early families had hollow hope in stressful events were at risk of suicidal behavior. This conclusion was observed by Talib and Abdullahi (2017), who argued that a lack of spirituality or faith in a supreme being was the reason hope in stressful life events was a risk of suicidal behaviors.

Universal-Spiritual Dimensions
These findings show that meeting the universal yearnings is an important aspect in the development of a healthy person. Thoughts shared by Lum et al., (2002) who observed that if the yearning needs are unmet, the emerging adult experiences negative feelings in the intrapsychic that result in negative behaviors such as suicidal behaviors.

Yearning for love. The results showed that yearning for love was a risk factor for suicidal thinking, suicidal planning and suicidal attempt. Whereas, yearning for love was a protective factor against self-harm.

Yearning for Acceptance
Longing for acceptance is a protective factor for self-harm but a risk factor against suicidal thinking, suicidal planning and suicidal attempt. Feeling loved and accepted are marks of a securely attached emerging adult. While feeling unloved and unaccepted are qualities of an insecurely attached emerging adult at risk of engaging in suicidal behaviors (Cassidy et al., 2014; Marrone, 2014). It is evident that both yearning for love and acceptance are a risk for suicidal thinking, suicidal planning and suicidal attempt. Thus, these findings are similar to Goodman et al. (2018) and Davaji et al. (2010), who concluded that insecure attachment styles are a risk for suicidal thinking and suicidal attempt.

Yearning for Validation. These findings are somewhat similar to Iyer et al. (2023), who noted that supporting adolescents to form a healthy self-image and to keep socially connected was a protective factor against suicidal behaviors in emerging adulthood. Emerging adults yearning for validation will seek it out, thus reducing the risk of suicidal behaviors. This is unlike emerging adults who are not seeking support which might lead to internalizing behaviors linked with suicidal behaviors. However, these findings reveal that yearning for validation or support was a protective factor against suicidal thinking and planning but a risk factor against suicidal attempt and self-harm.

Yearning for a Purposeful Life. This means longing for a purposeful life is a risk for self-harm and a protective factor against suicidal thinking, suicidal planning and suicidal attempt. These findings are agreeable to Koenig (2015), who concluded that religion is a source of drive in life and mental health. The presence of purposeful life is associated with better mental health, which is void of suicidal behaviors.

Yearning for a Meaningful Living. The findings revealed that yearning for meaningful living is a risk factor all suicidal behaviors. Meaning that yearning for meaningful living was a risk factor for all suicidal behaviors because the emerging adult lack the reason for living. People with reason for living will not engage in suicidal behaviors. These findings were similar to those of Whitlock et al. (2013), who observed that having meaning in life was a protective factor against those already engaged in self-harm to progress to suicidal thinking and suicidal behaviors.

Yearning for Freedom to Make Personal Choices. The results revealed that the desire to make personal choices is a protective factor against all suicidal behaviors. However, the correlation was more significant for self-harm. These findings concur with several studies that observed that a lack of control over one's life choices was a risk factor for suicidal behaviors (Bruffaerts et al., 2018; Mortier et al., 2017; Tucker et al., 2015; Wanyoike,

2015). This means that yearning for freedom to make personal choices is a healthy pursuit that breaks away from feeling take charge of life.

The Self
A Spiritual Being. The study explores the relationship between emerging adults' core identity and suicidal behaviors. The results showed that believing that one is a spiritual being is a protective factor against all suicidal behaviors. So, the male students and the public university students were less likely to engage in all suicidal behaviors.

A Lovable Person. Believing one was a lovable person is a risk factor for suicidal planning. On the contrary, believing that one is a loveable person is a protective factor against suicidal thinking, suicidal attempt and self-harm. In addition, more female students and private university students who believed they were lovable beings were likely to engage in self-harm.

Hopeful of a Bright Future. Being hopeful of a bright future is a protective factor for all suicidal behaviors. Female students and public university students are less likely to engage in behaviors. These findings were convergent with those of the Delphi interviews, where a majority, four out of six, university counsellors believed that having hope in life was very significant protector against suicidal behavior, while two out of six believed it was significant.

Important in the Universe. Finally, the study showed that believing one was important in the universe is a protective factor against to all suicidal behaviors. This means that male students and public university students are less likely to engage in all suicidal behaviors.

These findings are similar to Satir's Theory of self-esteem. Where having a positive view of self was a protective factor against suicidal behaviors (Baldwin, 2013; Satir et al., 1991). Believing that one is a spiritual being, a lovable person, hopeful of a bright future and important in the universe are markers of positive self-esteem. It shows that one has an optimistic judgment of their personal value which generated feelings of compassion and acceptance of one's strengths and weaknesses (Sommer-Flanagan & Sommer-Flanagan, 2015; Gehart, 2010). Thus positive beliefs of self are a protective factor against suicidal behaviors, as observed in Baldwin (2013), citing Satir et al. (1991).

VI. Conclusion
This study's final objective was to examine spirituality's role in emerging adults' suicidal behaviors. The conclusion based on the findings is that spirituality is both a risk and protective factor against suicidal behaviors. The study revealed that religious affiliation was only a protective factor against suicidal thinking for the Muslims and Protestant. Integrating religious practices in the family culture was protective factor against suicidal behaviors. In addition, having a positive spiritual self, like believing: that one is a spiritual being who is important in the universe, a lovable and with bright future, is a protective measure against suicidal behaviors.

On the contrary, religious affiliation was a risk factor for suicidal planning, suicidal attempt and self-harm. Furthermore, growing up in a family where religious meetings were faithfully attended religious, parents valued and encouraged morality, and family members had hope in stressful life events were risk factors for suicidal behaviors. This study revealed that having an unmet yearning for meaningful living, acceptance, love, and validation is a risk for suicidal behaviors.

Implications of the Study
This study will inform parents, religious leaders, family therapists and psychologist to nurture aspects of spirituality that are protective factors to reduce suicidal behaviors among emerging adults.

Limitation
This study may not be generalizable in other universities outside the study. However, these finding provide the bases for conversation on the risk and protective factors for suicidal behaviors among university students in Kenya.

Recommendations
It is recommended that religious communities take up the role of training parents to adjust their parenting styles to authoritative and permissive for emerging adults. Due to the increase in marital problems, a recommendation is to religious institutions to help guardians and blended families to reduce distance negative interactions and eliminate ill-treatment in children and emerging adults. In addition, it is recommended that religious institutions take a key role in equipping emerging adults with practical and faith-based resources to solve problems and cope with challenges of emerging adulthood. It is recommended that religious institutions do more than condemn suicidal behaviors. Instead, create forums for open up these conversations with the aim of understanding and psycho-educating emerging adults to professionals to help them whenever they need it. Finally, religious communities need to development and maintain a secure community of support where emerging adults

feel loved, accepted, validated and helped to find meaning for living. At the same time, support emerging adults to develop a positive self-esteem that defines them as spiritual being, lovable, important in the universe and hope for a bright future.

Further Research

Further studies should be done using the full Religious assessment tool. A clinical intervention that integrates spirituality in the treatment need to be done to assess the effectiveness of spiritual intervention for emerging adults with suicidal behaviors.

Conflict of Interest

There was no conflict of interest in carrying out this study.

Acknowledgement

This study did not receive any funding.

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