Effect of spirituality as a protective and/or risk factor against suicidal ideation in university students

Fernando A. Zapata Muriel[1], Luis Fernando Garcés Giraldo[2]

[1] Corporación Universitaria Remington, Medellín, Colombia. Email: fernando.zapata@uniremington.edu.co, ORCID: https://orcid.org/0000-0002-4225-6384

[2] Dirección de Investigación e Innovación, Universidad Autónoma del Perú, Lima, Perú. Email: garcesgir@autonoma.edu.pe, ORCID: https://orcid.org/0000-0003-3286-8704

Corresponding Author:

Luis Fernando Garcés Giraldo[2]* (garcesgir@autonoma.edu.pe

Abstract: Objective: To determine the effect of spirituality as a protective and/or risk factor against suicidal ideation in university students. Method: Study type: Quantitative – Non-experimental – descriptive – explanatory design. Study design: analytical cross-sectional survey. Data was collected using two instruments: the PANSI Suicide Ideation Inventory and the Parsian & Dunning Spirituality Questionnaire (SQ) (Díaz, Muñoz, De Vargas (2012)). A simple random sampling method was used, selecting participants from among the 18,149 students enrolled in the first semester of 2024 at the Remington University Corporation's various campuses across the country. Independent variables : Spirituality as a protective and/or risk factor. Dependent variable: Suicidal ideation. Intervening variables: Sex, age, and religious/spiritual group. Results: This study aims to determine the effect of spirituality on suicidal ideation in university students and how it can be a protective and/or risk factor in some cases. It is hoped that this work will contribute to the Remington University Corporation and the university community in terms of health promotion, the creation of a prevention program, and the development of alerts or campaigns to prevent suicide and promote a sense of purpose in life. From the students. Conclusions. It is important to suggest to universities the great importance of the humanities in their curricula, since they provide students with elements related to care, respect for one's own life and the life of others, as well as promoting the meaning of life for each of its members.

Keywords: Spirituality, Suicidal Ideation, University Students, Protective Factor, Risk Factor

Introduction

Suicide can be a voluntary act intended to end one's own life. The term originates from the Latin word suicidium (sui : of oneself; cidium : caedere: to kill). Although from religious perspectives, such as Christianity, suicide has been considered a sin, it is worthwhile to first consider anthropological, psychological, and spiritual perspectives, especially the latter, which reveals the existential void, the meaninglessness of life experienced by those who seek suicide as a way out (or escape) from their problems. This is one of the tasks that universities must address today: helping students discover their purpose in life, their "what they want to be," based on Frankl's postulate: to be human means to be capable of deciding what one wants to be (Frankl, 1991). Based on this, in accordance with (Cornellà, Canals, 2010), it is worth asking: In what way can the spiritual-transcendent dimension be a direct or indirect trigger of suicide and in what way could it become a protective or risk factor for it?

On World Suicide Prevention Day, September 10, 2023, the World Health Organization (WHO, 2023) stated that suicide has become one of the major public health problems in recent times, with personal, socio-emotional, and economic consequences. It also noted that there may be more than

700,000 suicides worldwide each year, which is why its theme (2021-2023) for suicide prevention was: "Creating hope through action." This theme invites everyone—teachers, parents, community leaders, and others—to sow and cultivate hope and strengthen prevention through their words and actions in support of mental health. Cf. https://www.who.int/es/campaigns/world-suicide-prevention-day/2023

The Pan American Health Organization (PAHO) states that approximately 703,000 people die by suicide each year, meaning that one person dies every 40 seconds. Since 2020, with the pandemic, loss, suffering, and stress have plagued the lives of men and women. To prevent suicide, it is crucial today to create networks, provide social support, raise awareness, and offer hope to people in various contexts (PAHO, 2023).

Between January and March 2021, 709 suicides were recorded, of which (585 men and 124 women), growing in relation to 2019 (496 cases) and 2020 (548 cases) in similar months, it should be clarified that only self-inflicted deaths are referred to (DANE 2021, p. 39).

For its part, it is observed that, in 2022 at the National level, according to the National Institute of Legal Medicine and Sciences, 1,540 suicides were registered , of which 1,201 were men and 339 were women, with young people being the population most affected by this scourge with 661 (42.92%) (Cf. Press Bulletin No. 231 of 2023).

In Colombia, the year 2023 caused great concern: October 10, 2023 The Attorney General's Office stated the correlation between suicide, suicide attempts, and mental illness or psychopathology, revealing the first 5 months that 1,517,933 individuals presented mental disorders and illnesses, of these only 619,488 received a diagnosis.

There were also 30,021 suicide attempts; suicidal acts increased by 15.73%, from 1,564 records in 2022 to 1,810 cases, largely due to various psychopathologies suffered by Colombians (Bulletin 1348-2023).

According to Flórez (2024), it is possible to highlight findings regarding university mental health. A study by the University of Medellín with more than 2,400 students from Colombia, Mexico, Spain, and Bolivia warns about the increase in suicidal thoughts among Colombian university students, with women being the most affected population, and psychiatric and family histories being the main risk factors. The research involved 930 young Colombians and hundreds of students from three other Ibero-American countries (484 from Mexico, 479 from Spain, and 512 from Bolivia).

Suicidal ideation

The construct of suicidal ideation is ambivalent, not ambiguous. The former lies in its severity, hence the distinction: it is passive (strong desire to die) or active (planning or devising to end one's life), further aggravating the situation. For their part, Liu, Bettis & Burke (2020) believe that between these two types of suicidal ideation, there are similarities in psychiatric illness, psychic factors, and suicide attempts. The construct is not ambiguous because in each situation there will be clarity and possibly dominance of one type of ideation over another, avoiding confusion.

Baños (2022) highlights the value of the evaluation and diagnosis of active suicidal ideation and emphasizes through clinical samples how passive suicidal ideation stands out. This ideation is a first step, then suicidal ideation and acts often occur as a result of the reciprocal relationship between high-risk psychological and clinical elements (chronic pathologies), generated by the environment, manifesting the need for connection with other factors (biological, among others) that provoke it (Baños, 2022, p.43).

Passive suicidal ideation

According to Baños (2022) this refers to the desire to die that the person experiences in their mind, such ideas may be unbelievable or ignored by others, usually feelings and thoughts about one's own death emerge, with little attention to their close context.

Passive suicidal ideation is sometimes linked to depressive and anxiety symptoms, alcohol problems, or psychotic tendencies (Sáiz, de la Fuente, García, et al., 2019). Social symptoms also emerge, including hopelessness, loneliness, low social support, physical pain, general malaise, a feeling of being overwhelmed, and low income, among others.

Active suicidal ideation

According to Baños (2021) this category describes those ideas that induce one to generate one's own death, therefore including planning and strategies to carry out one's end; such thoughts range from the deep desire or intention to end one's life to planning and observing the means by which one would carry it out, the objective is an immediate death.

Active suicidal ideation can rapidly fluctuate between wanting to live and wanting to die soon. Therefore, it is important to record the nature and frequency of current suicidal thoughts in university students (weekly, daily, how many times a day), their duration (hours or minutes), the factors that trigger these suicidal thoughts (fights, arguments, addiction and alcohol or drug use, among others), the capacity for self-control and/or control, ease of access to lethal means (weapons, pesticides, medications), and the development of plans that could lead to suicide attempts (Harmer Lee, Duong, Saadabadi (2020).

Today in Latin America, the prevalence of active suicidal ideation is clear, linked to emotional-affective problems, bodily problems, drug addiction, anxiety and depressive symptoms, addictions, alcohol consumption, psychotic problems, affective instability, irritability, loss of hope, lack of a sense of belonging, frustration, suicide attempts, insomnia, economic problems, stress, low social support, among others (Baños, 2021; Salceda, Pérez, Rodríguez, et al., 2021).

The education sector is not exempt from this reality; it too has experienced suicidal ideation, attempts, or suicide among some of its students. This underscores the relevance of this research within the university setting, whether religious or secular. It is important to alert the university community (faculty, students, and administrators) to the importance of including the Humanities in their curricula. The Humanities offer students numerous resources related to self-care and caring for others, respect for life in all its dimensions, and the promotion of a sense of purpose in life for each individual. Given these realities, it is worth exploring the effects that spirituality can have as a protective and/or risk factor in relation to suicidal ideation within the university environment.

Main body

Methodology

The study was conducted using a quantitative method, with a non-experimental, descriptive-explanatory design. The study design was a cross-sectional analytical survey. Data was collected using two instruments: the PANSI to assess suicidal ideation and the Parsian & Dunning Questionnaire (SQ) on spirituality (Díaz, Muñoz, De Vargas (2012)). The survey was administered to students at the Corporación Universitaria Remington (CUR): 539 students completed the PANSI (suicidal ideation inventory), and only 437 completed the spirituality questionnaire. Participating students were selected through simple random sampling from among the 18,149 CUR students across various campuses nationwide, enrolled in the first semester of 2024. The variables considered were: Variable Independent variable: Spirituality . Dependent variable : Suicidal ideation. Intervening variables: Sex, age, and religious/spiritual group.

Ethics and consent

Ethical approval for this study involving university students was obtained from Comité Ético de Investigación de Remington (CEIR), Corporación Universitaria Remington, Medellín, Colombia, project number 4000000439, approval date June 6, 2024. The committee reviewed and approved the study protocol, the participant information sheet, the informed consent form, the online survey

procedure, and the data protection procedures before data collection began.

All participants were informed about the purpose of the study, the voluntary nature of participation, the estimated duration of the questionnaires, the absence of direct academic consequences for accepting or declining participation, the type of data collected, confidentiality safeguards, anonymisation before analysis, and the use of aggregated results for scientific publication. Written informed consent was obtained electronically before participants accessed the questionnaires. Students could only continue to the PANSI and Spirituality Questionnaire after selecting the consent option. The consent covered participation in the study, anonymous analysis of questionnaire responses, publication of aggregated non-identifiable findings, and deposition of de-identified research data in an open repository. No personally identifying information is reported in the manuscript or shared in the public dataset. All participants were 18 years of age or older, therefore, parental consent and assent procedures were not applicable.

Research materials

The materials used in the study comprised the participant information sheet, informed consent form, survey protocol, the Positive and Negative Suicidal Ideation Inventory (PANSI), and the Parsian and Dunning Spirituality Questionnaire in its validated Spanish version. These materials, together with the codebook and scoring notes required to understand the variables and response options, have been deposited as extended data in the repository indicated in the Data Availability section. If any instrument cannot be reproduced in full because of third-party copyright or licensing restrictions, the repository provides the instrument citation, response options, scoring description, and instructions for obtaining the instrument from the rights holder.

Results

Today, suicide as a means of ending one's own life is considered by almost all religions to be a grave offense against God. However, in Islam, acts of self-immolation can be seen as heroic suicide (an act of surrender and praise to Allah the Merciful) by some Islamic fundamentalists (Cornellà, Canals, 2010).

It is worth mentioning some cases in which spirituality and religion are perceived as risk factors for suicidal ideation, among these: homosexual orientation in adolescents, who feel judged for their religious creed as occurred in Catholic Christianity until a few decades ago; topics such as: guilt, punishment and discrimination in populations of terminally ill AIDS patients, likewise, traumatic social events: collective suicides generated by adherence to religious spiritual beliefs, promoted by radical groups or by religious fanaticism (Cornellà, Canals, 2010).

Relevant to this study is the university student's perception of spirituality (Zapata, et al., 2019; Sánchez, et al., 2021) and the way of conceiving life, death, among other spiritual categories (Zapata, Sánchez and Álvarez, 2025); from these perspectives based on previous research on this topic in university students and from other horizons of meaning, proposed by other scholars (Puchalski et al., 2009; Parsian and Dunning (2009b), these protective and/or risk factors against suicidal ideation and behavior in the university context will be addressed.

Spirituality, in human terms, belongs to the suprarational order, originates in the spiritual unconscious, and is perceived as that dimension capable of giving meaning to life when human beings question their existence. Human beings are essentially spiritual beings (Frankl, 1991). Spirituality is a way of life, a transformative force for human beings, which may or may not be linked to a religious creed or a deity; spirituality is the search for meaning in life, self-realization, and the connection of the human being with their inner self and the universal whole (Parsian and Dunning, 2009b).

For this research, it is important to highlight the definition of spirituality put forth by a group of scholars (Puchalski et al. 2009). According to them: Spirituality as a dimension of the human being refers to the way in which human beings unveil and express the meaning they wish to give to their lives, the way in which they connect with themselves, with other beings—animals and humans—and

with the sacred.

According to these researchers, spirituality is a human need, and for those who cultivate it from within, it facilitates decision-making regarding health care and quality of life. Likewise, deeply ingrained spiritual and religious values, when lived fanatically, can generate anxiety and increase illness (Puchalski et al., 2009, p. 887).

Based on this, the students who answered the tests were asked to indicate their degree of agreement or disagreement with the definition, using the Likert scale: 1. Strongly disagree 2. Disagree 3. Agree 4. Strongly agree.

This definition was used again for this study, as it encompasses key elements of what the word spirituality means, including:

1. Spirituality is a human dimension: the human world is essentially spiritual, this is the guideline followed by the current study.

2. This refers to the way in which human beings discover and express what life means to them. Human beings follow a path and engage in spiritual practices in order to discover their meaning in life or give it a purpose.

3. It is the way in which human beings experience their connection or attachment to the here and now, to the self, to others, to nature, and to the sacred. To discuss the construct of "connection," it is worthwhile to consider the Judeo-Christian conception of the creation of man: God takes pity on man in his loneliness and gives him a companion (Gen 2:18, 20-23).

The text of Genesis was written in the 6th century BC during the Babylonian exile. Some attribute it to Moses, others to various traditions (Yahwist, Elohist, Priestly, Deuteronomist). It is likely that its compilation from older sources took place during the Babylonian exile, while by the 4th century BC, Aristotle in Greece was asserting that humankind is a relational being, a political animal. The connection that spirituality speaks of is with the whole: the self, the other, the otherness, the sacred, and time.

Application of tests and results:

The responses of university students regarding this definition of spirituality are important: the first and third age ranges express strong agreement, while the second and fourth agree.

Group 2 (25-40 years old) is noteworthy, with a high percentage agreeing, followed by disagreeing and a slightly lower percentage strongly disagreeing; their results are separated by little difference.

Most participants agree, slightly fewer strongly agree, while the "strongly disagree" item is marked at 35% (below the average).

As described in the Methodology section, participation was voluntary and based on informed consent. The data used for the analyses were anonymised before processing and are reported only in aggregate form.

It is worth noting that the student population that responded most frequently to the tests was between 16 and 24 years old (81.9%), followed by students between 25 and 36 years old with 13% participation, followed to a lesser extent by the population between 33 and 40 years old, and slightly less by the population over 40 years old. Likewise, 61.6% of the respondents were female, while 38.4% were male.

Many of the country's locations participated, including Medellín, Montería, Yopal, Sahagún, Apartadó, Palmira, Caucasia, Tuluá, Rionegro, and Cali, with Antioquia having the strongest participation at the Medellín location. The event took place in various formats: in-person, virtual, and distance learning.

Of the participating students, 86% are attending classes in person, while 9.8% are studying virtually and 4.2% are studying remotely. 56.1% of the students are from the Faculty of Health Sciences,

while 25.2% are from the Faculty of Veterinary Medicine. The Faculty of Engineering also had a presence, with 9.2% of the students surveyed participating. Other faculties, such as Law and Political Science, Business Administration, Accounting, and Design, had lower student participation in this study.

The participating students are part of various programs at CUR, including: Medicine, Industrial Engineering, Pharmacy Management Technology, Law, Nutrition and Dietetics, Veterinary Medicine, Public Accounting, Systems Engineering, Agricultural Business Administration, Law, Business Administration and Finance, Graphic Design, Marketing and Commercial Strategy, Civil Engineering, Professional Nursing, Software Development, and Bacteriology.

Likewise, the percentages (from highest to lowest) of student participation in the study can be observed, according to the semester they are in at the time of the presentation of the two tests: semester I (36.2%), semester III (23.6%), semester II (19.9%), semester IV (9.8%), semesters V to VIII had lower percentages, while there was no participation from semesters IX and X.

The students who participated in the research come from almost all of the CUR's programs and from various towns and regions of the country, including: Bogotá, Medellín, Armenia, Manizales, Quibdó, Yopal, Palmira, Valle del Cauca, Montería, Córdoba, Rionegro, Turbo, Aranjuez, La Estrella, Apartadó, Tuluá, La Unión, Santo Domingo, Puerto Escondido, Don Matías, Istmina (Chocó), Tumaco, Santa Rosa de Osos, San Andrés de Sotavento, Itagüí, La Ceja, Amagá, Tibasosa, Apartadó, Carepa, San Juan del Cesar, Bello, Barbosa, Girardota, Sabaneta, Copacabana, Envigado, San Pedro de los Milagros, Guarne, Segovia, Santa Bárbara, Puerto Berrío, and Ríonegro (Antioquia), among others.

For this research, it is important to know the type of religious belief of the participants. When asked: What type of religious belief do you practice? A high percentage is represented by Catholic Christianity (70.5%), followed by Protestant Christianity (13.5%), other faiths such as Hinduism, Buddhism, or none make up the remaining 16.5%.

The Parsian and Dunning test (2009; Díaz, Muñoz, De Vargas, 2012) is important to analyze from these 4 dimensions: 1. Self-awareness 2. Importance of spiritual beliefs 3. Spiritual practices 4. Spiritual needs.

1. From the self-awareness dimension (items 1-10) following Parsian and Dunning (2009; Díaz, Muñoz, De Vargas, 2012), the participants tend to strongly agree (4) with some items, they believe in their personal worth (4), they value their qualities (2), they perceive themselves with qualities and defects like others (7), they cultivate a positive attitude (3), they give meaning to their life, likewise, they feel satisfaction regarding their personal being (1), they evaluate their life positively (10), and they believe in themselves (5).

2. From the importance of spiritual beliefs (11-17) according to these scholars, it is important to note that the students of the CUR are very much in agreement on the contribution of spirituality to build their life goals (11), to decide their being in their essence and in their existence (12), to give direction or meaning to their existence (13), to integrate life (14).

3. Regarding the spiritual practices referenced in the test, the students agree to follow some practices among them: reflection, in order to achieve inner harmony (15), reading texts for their inner growth (16), the practice of silence, as key to self-knowledge (17), the harmonious relationship with the environment (18), participation in programs to safeguard nature (19), the search for spaces favorable to spiritual growth (20).

Finally, regarding spiritual needs, the test highlights: seeking integral beauty (21), acquiring inner harmony (23), finding the purpose of their life (25). Similarly, the students strongly agreed on other items such as: answering existential enigmas and mysteries (22), enjoying activities such as listening to music (24), recognizing life in its evolutionary process (26), recognizing the importance of forging solid emotional bonds (27), strengthening these relationships (29), and developing their own vision of life (28).

The high value given by the participants to the variables mentioned above allows us to observe how life must be given meaning, and how spirituality is the giver and strengthener of this vibrational force or energy that springs from within and manifests itself through contemplative capacity and productive action in pursuit of the well-being of others and nature, thus becoming an element that promotes health and prevents disease.

For its part, the PANSI (Suicidal Ideation) inventory by Villalobos (2010) yielded other important findings for this study, as follows: The inventory is divided into two subscales: negative suicidal ideation (PANSI-NI), consisting of 8 items (1-8), and positive suicidal ideation (PANSI-PI), composed of 6 items (9-14). Each subscale was completed by 539 students. Analysis of these subscales allows us to observe and infer the following:

1. When participants were asked if they had ever considered suicide because they could not meet the expectations others had of them (Villalobos, 2010), 74.3% of the students answered never, while 12.8% answered sometimes and 10.2% almost never.

2. When questioned about whether or not they had control over their lives in most situations (Villalobos, 2010), 31.3% responded sometimes, 22.9% almost always, and 21.8% answered never.

3. Similarly, when asked if they had considered taking their own lives due to feelings of despair about the future (Villalobos, 2010), 65.1% of participants responded: never, 15.3% almost never, and 15.3% sometimes.

4. When students were asked if ending a relationship with an emotionally important person made them want to die (Villalobos, 2010), 71.7% answered never, 10.2% answered sometimes, and 10% almost never.

5. Similarly, when asked if they had ever thought about ending their lives because they felt they had not achieved something important in their lives (Villalobos, 2010), 76% answered never, 11% almost never, and 9.8% sometimes.

6. When asked about the future, whether they trusted and hoped for it because everything was going well (Villalobos, 2010), 32.1% answered sometimes, 32.7% almost always, and 17% always.

7. They were also asked if they had ever considered taking their own lives when they felt they could not find a way out of personal difficulties (Villalobos, 2010). 70.8% of the university students responded never, 8.6% almost never, and 3.3% sometimes.

8. Conversely, they were asked whether they felt happy when they perceived that they were doing well in their work (Villalobos, 2010). 35.5% of the students responded always, 32.2% almost always, and 19.3% sometimes.

9. They were also asked if they had thought about suicide because they felt their existence in the world was a failure (Villalobos, 2010). 72.8% of the participants responded never, 8.6% almost never, and 3.3% sometimes.

10. Similarly, it was investigated whether, upon perceiving their major problems, they believed that the only option was to end their lives (Villalobos, 2010). 71.8% responded never, 8.6% answered almost never, and 3.3% sometimes.

11. When asked if loneliness or sadness aroused in them desires to kill themselves to avoid further suffering (Villalobos, 2010), 65.9% of students responded never, 12.2% almost never, and 3.8% sometimes.

12. They were also asked if life was worth living (Villalobos, 2010). 41.7% of the students responded almost always, 25.3% sometimes, and 33% always.

13. The last items inquired about the confidence they had in their skills and talent to face their problems. 31.7% of university students responded almost always, 28.3% sometimes and 23% always.

14. Research was also conducted on the level of confidence participants had in achieving their goals (Villalobos, 2010). 33.7% of participants answered almost always, 25.3% sometimes, and 24%

always.

Discussion

The Parsian and Dunning spirituality test allows us to observe some traits of spirituality, from beliefs, motivations, needs and expectations, hence the importance of its 4 dimensions:

1. In the self-awareness dimension, university students highlight aspects such as: reflection, qualities-defects, meaning of life, positive attitude, elements that allow them at any time to transform and give meaning to life, value the moment, be attentive to the here and now.

2. Regarding the value given to their spiritual-transcendent beliefs and thoughts, they highlight the value of these in defining their goals, questioning their being and their place in the world, giving purpose to life, and seeking a transcendent being to accompany them in their daily lives.

3. Regarding the most frequent spiritual practices, university students observe: reflection, spiritual reading, practice of silence, meditation, approach to nature and identification with many of its creatures.

4. The spiritual needs that stand out most in the university world are: the search for inner peace, happiness and purpose for being, being and existing in the world, love and care for nature, discovering light and truth in the face of some mysteries such as death, illness, human limitation, among others.

The PANSI or suicide ideation test shows that there is hope for life, there is confidence in achieving the proposed goals for the future, there is optimism when things go well, there is also a moderate feeling of hope and a moderate control over life situations.

Based on these results, it is important to highlight that the responses to items that emphasized feelings such as sadness about ending a relationship with someone important were reassuring: 71.7% of participants responded "never," 10.2% "sometimes," and 10% "almost never." Similarly, when asked if they felt so alone or so sad that they wished to end their lives to escape further suffering, 65.9% responded "never," and 12.2% "almost never." Likewise, when asked if they considered suicide due to their despair and uncertainty, the students answered "never," 15.3% "almost never," and 15.3% "sometimes." This reflects their search for meaning in life.

Risk and protective factors

Risk and protective elements can be classified according to three elements: sociodemographic, comorbidity, and heredity or biology (Hawton, 2009; Fawcett, 2009; Nock, 2009; Borges, 2010; Nock, 2008; Rehkopf, 2006).

For this study it is relevant to observe these factors in adolescence, since it is the age in which the population under study is mostly found (CUR).

In line with Gutiérrez (2013), it is worth highlighting among the risk-generating elements: despair, low self-esteem, poor impulse control, deficient emotional control, little ability or practice of loving oneself, loving others, loving nature, frustration, high feelings of abandonment and helplessness, high degree of aggressiveness, emotional repression, suicidal option predominating over others, disturbed and painful psyche.

Protective factors

Durkheim (1897, cited by Cornellà, Canals, 2010, p. 291). From his sociological studies, he describes an inversely proportional relationship between the ethical, spiritual, or religious commitment of a people or culture and the frequency or absence of suicides: he asserts that spirituality, with its beliefs, practices, and needs, becomes a protective factor against suicidal ideation, attempts, or suicide itself, in turn reducing risk factors.

Along these same lines, Koenig (2001) reviewed nearly 1,600 studies relevant to the link between transcendent spirituality and various biological or psychological illnesses. He highlights that adherence to transcendent spirituality (faith) reduces symptoms associated with illnesses such as depression,

alcohol abuse, drug addiction, and suicidal thoughts and attempts. Similarly, the American Society for Adolescent Medicine, through research on health and spirituality, found that young people who were more religiously active, with deeper religious and spiritual convictions, had fewer depressive and anxiety symptoms.

From a sociodemographic perspective: Gutiérrez (2013) highlights some triggers that shape suicidal ideation or behavior among adolescents, including childhood experiences with a propensity for suicide, friendships with these ideas, consumption of psychoactive substances, appearance of psychopathologies: schizophrenic symptoms and depressive symptoms or mood disorders, suicide attempts in childhood, hereditary factors in the family, disturbances in behavior, hopelessness, negative self-image, poor development of social skills and deficient ability to resolve conflicts and lack of social support, low self-esteem, changes in behavior in the family group, rebelliousness, difficulties at school: low performance and absenteeism, letting go of highly significant things, writing letters or notes related to the topic, expressing ideas or making suicidal attempts, planning it, changing their habits, among others.

For the proper prevention of suicide, whether it be the ideation, attempt, or execution of a suicide, it is important to promote a healthy experience of spirituality as a protective factor. Spiritual practices—personal and intentional activities undertaken by individuals to cultivate a sense of purpose, inner peace, and connection with oneself, others, nature, and the transcendent—will give meaning and development to one's inner life and are closely linked to psychological well-being. This refers not only to the absence of illness but also to a state of positive mental health that encompasses resilience, personal growth, purpose, and contentment with one's way of life, along with low levels of anxiety and depression. These practices become key protective elements against suicidal ideation, attempts, or executions .

Regarding protective factors, individuals are observed to be less likely to disclose their suicidal (passive) ideas, showing in their close context life satisfaction, participation in physical and work activities, adequate coexistence with their partner, satisfaction in their family life, and good use and enjoyment of their free time (Lee, 2021). Despite this, it is worthwhile to review the risk of suicide with some frequency, so that these passive ideas do not emerge or unexpectedly become active suicidal ideas.

The first step in therapy to help someone experiencing such ideation is to ensure their safety (the therapist must be a safe haven amidst the chaos), be sensitive, available, and supportive, offering affection while working to resolve their problems. Compassion and respect for the other person allow the therapist to be a secure base (Bowlby 2009) for them.

Likewise, some protective factors appear, generating a healthy life, among which we can mention: self-love, a positive attitude and perception of life, ability to maintain satisfied biological needs (food, sleep), security needs (housing, education, health, work), belonging, self-care and self-love, sufficient social networks, self-realization, self-determination, consistent and stable spiritual practices and being resilient (Holman, Williams, 2022; Elbogen, Molloy, Wagner, Kimbrel, *et al* . 2020).

Risk factors

Faced with the lack of meaning in life, the existential void, and the current problems generated by the increase in suicides in Colombia and the world, it is imperative today to reclaim the value of spirituality in the university context, as well as to take into account some anthropological, philosophical, bioethical, and psychological considerations that can contribute from academia to address the symptoms that contemporary society is going through, especially adolescents and adults in the university context.

The university student lives in a globalized world, in which pleasure and feeling have replaced happiness and meaning. In their eager search, the university student today worships the immediate, believing they find there "their reason for living," without digging within themselves to discover, process by process, that the authentic reason is revealed when a purpose is woven day by day within the human being, as Penelope patiently wove it while waiting for Ulysses (Homer, 2019).

The responses given to the two tests lead the researcher to believe that ideas surrounding death are interwoven in the mind of the potential suicide victim. These ideas can be active or passive, generating such chaos that they can induce a suicide attempt due to a pessimistic attitude, a negative self-perception, and a bleak view of the future and others, all with the aim of ending their life. It is true that in this situation, the human being does not want to escape life, but rather suffering (Baños, 2022, p. 43).

The issue to work on here with the individual is suffering, how it can provide purpose, forge meaning, to such an extent that a reason for living is discovered. That is the task of spirituality. It is present through love, revealing the fear that loneliness arouses, the human need for others to affirm oneself, the need to see and contemplate nature not simply as a product of evolution but as a possible work of a transcendent being, a work capable of communicating wonders to the inner life. In this way, spirituality helps to discover the need to go to the heart, cultivate one's inner life, encounter one's true self, refocus on oneself, recognizing the value of otherness, of a transcendent being if one is a religious believer, avoiding all distractions.

It can also be observed that deaths by suicide result from a combination of risk factors, including pathological, psychopathological, environmental, and social elements (Steele, Thrower, Noroian, Saleh, 2017). This suggests that other religious, social, and environmental factors may contribute to the sense of meaninglessness in life that young people today may perceive, leading them to see suicide as a way to alleviate suffering. Hence the importance of recognizing that suicidal ideation can be active or passive.

According to Baños (2021), active suicidal ideation can be understood through beliefs or specific thoughts that compromise one's personal life, ideas that lead to devising strategies to end one's own life. These thoughts range from a deep desire or intention to end one's life, to repeatedly planning and observing the resources with which it would be carried out; the goal is immediate death.

There is evidence that suicidal ideation and behaviors derived from it have a high correlation with the prevalence of some mental illness (bipolar disorder, schizophrenia, personality disorders, family conflicts and passionate conflicts of couples).

According to Gutiérrez (2013, pp. 8-9) in Latin America, suicide is currently more frequently observed among the youth population, and the most common means and methods used to carry it out are: weapons, preferably firearms, strangulation, toxic or agricultural poisons, lighting fluids and fluids from automobiles or motor cars, etc.

Given the propensity of young people aged 14 to 19 to commit suicide and attempt suicide, it is imperative today, from a public health perspective, to promote health through interdisciplinary teams that will energize activities aimed at suicide prevention in schools, colleges, and universities. This should be achieved by creating interdisciplinary teams comprised of teachers, social workers, healthcare professionals (doctors, psychologists, psychiatrists), priests, and other spiritual leaders, among others, who work with the ideal of promoting a sense of purpose and the holistic development of the individual. Their work should also involve organizations that promote social and human development. This aligns with the recommendations of the WHO (2010).

An effective way to prevent suicide is to reduce the prevalence of mental health conditions, including those related to mood disorders such as mania and depression, and to reduce problems related to drugs and alcohol, which account for 75% of suicides worldwide. It is also urgent to address other factors, such as: strengthening self-esteem, especially among young people; encouraging the growth of social networks; promoting self-affirmation through assertive behavior; providing social and family support; fostering motivation; and cultivating spiritual practices, among others. The lack of these factors can predispose individuals to suicide and/or trigger suicide.

Conclusions

Human beings are eco-bio-psycho-social and existential beings (ecological, biological, sentient-thinking, social, and spiritual). Thus, the anthropological perspective from the university setting must

be framed within a holistic and multidimensional conception. Among all its multidimensionality, it is worth highlighting that human beings are by nature spiritual. This spirituality, along with the other dimensions, must contribute to the construction of an integral human being, with a "wanting to be" capable of constructing meaning.

The person as a spiritual being is not oblivious to global problems; he is capable of reading how and where the world is going: the ecological problem, population growth, wars, economic inequalities, the religious issue, among others.

Likewise, human beings are called to confront and build their existence from their own life world (their inner self), amidst the different spheres in which they live their being and existence in the world; the university, as a laboratory of ideas, a manager of scientific and humanistic knowledge, must provide sufficient tools for the student to grow integrally, to give meaning and purpose to their life and not succumb to the vicissitudes and hardships that life in its different socio-cultural contexts may generate.

The university must provide students, as human and spiritual beings, with the tools to answer certain questions: What is life? What is the purpose of human existence? What is the reason for our existence? What can we contribute to building a more humane world? What and how can we give meaning to life? These existential questions open doors for today's university students to the world of meditation, reflection, prayer, self-transcendence, and/or transcendence.

Conversely, the world today wanders aimlessly and meaninglessly. Life has lost its flavor, amidst a humanity lacking the senses to perceive and savor its true essence. There is a lack of discerning eye, attentive ear, and the appropriate touch to see deeply, listen attentively, and caress instead of scratch. Thus, without senses to clearly perceive phenomena, life, in its unfolding events, becomes a chaotic generator of emptiness and meaninglessness.

Today, promoting mental health to the point that it aims to instill a sense of purpose in university students is important and becomes not only a means of protection against suicide, but also a factor in the primary prevention of the disease. This can help university students resolve important issues regarding their being in the world, give meaning to their lives, and discover the value of transcendence and/or self-transcendence.

These two terms are important insofar as they directly relate to spirituality. According to logotherapy and other psychological theories, self-transcendence is the human capacity to go beyond oneself, discovering meaning and purpose, in pursuit of a connection with something greater than one's own "self."

Self-transcendence is achieved gradually, through dedication to projects, relationships, high values, or the search for a spiritual connection with the universe; it allows human beings to expand their limits, orient themselves outside of their self, give meaning to life, abandon themselves, among other things.

Transcendence places man in a relationship with a transcendent Thou (capital Thou), both of which are relevant as they provide psychological well-being, personal development, self-realization, self-liberation, health in adulthood, among others. Likewise, these are manifested through commitment to work (creativity and purpose), interpersonal relationships (deep connections), attitude towards adversity (strength and courage), art and creativity to transcend and give meaning to reality.

Finally, a question that seems curious to the researcher is: Why did only 437 of the 549 students invited to take the tests answer the spirituality test? It could be that the 29 items seemed quite long and tedious, and they didn't appreciate the richness of the content, or it could be that they simply didn't notice it due to a lack of attention. I leave other interpretations to the reader.

Data Availability

Underlying data and extended data supporting this study are available in Google Drive: https://drive.google.com/drive/folders/1gzrDAiG-APs6SqyCunx3eLamvMQadzlx. The shared folder contains the anonymised datasets and supporting materials used in the research, including the “test” folder, the de-identified participant lists, the PANSI suicidal ideation test data, and the graphical

outputs derived from the PANSI responses. These files support the descriptive findings reported in the article, including the frequencies and percentages obtained from the PANSI Suicide Ideation Inventory and the Parsian & Dunning Spirituality Questionnaire. Direct personal identifiers have been removed from the participant lists to protect participant confidentiality. The extended data include the research instruments, supporting test materials, participant list files with identifying information removed, and the graphs used to present the results. No DOI or accession number is available because the dataset is deposited in Google Drive, which does not assign persistent identifiers. The folder has been configured for open access through the link provided, without embargo or login restrictions.

Data restrictions

Because the study addresses mental health and suicidal ideation, identifiable raw files, institutional contact lists, IP addresses or equivalent access metadata, and signed consent records are not publicly available. These materials are stored securely by the research team and the responsible institution and may be made available to the F1000Research editorial office upon legitimate request, subject to applicable ethical approval, institutional policy, and participant confidentiality requirements.

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