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Exploring Religion as a Path to Meaning: The Role of "Pastrotherapy" in Supporting Young People's Quest for a Good Life in Nigeria

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Abstract

This paper examines suicide prevalence among Nigerian youth struggling to find meaning in life. Frustrated by unattainable ideals, they experience despair. The study explores religion's role in providing support for meaning-seeking individuals. Utilizing an explorative approach, the paper highlights how religion can play a role in offering solidarity, morality, and hope as vital resources for creating a meaningful life. It introduces "Pastrotherapy" as a pastoral care approach to addressing existential questions. Findings emphasize the importance of religious communities and leaders in promoting resilience and addressing underlying causes of despair. This study reveals how religious beliefs and practices support Nigerian youth facing existential challenges, shedding light on the intersection of religion, meaning-making, and mental health.

Keywords Suicide · Meaning in life · Religion · Pastoral care · Pastrotherapy · Nigerian youth · Suicide prevention · Chaplain · Pastor · Pastoral caregiver

Introduction

The escalating suicide rates among Nigerian youth have sparked a significant outcry (Adewuya et al., 2016). Research indicates that suicide accounts for more than 12% of deaths among young people, with its ideation particularly prevalent during adolescence (Cavelti & Kaess, 2021; Torok et al., 2019). Emile Durkheim (2002), as the progenitor of sociological investigations into suicide, established a correlation between psychopathic and sociological phenomena. From his study, suicide has been ultimately concluded to be a unique phenomenon (Wang et al., 2018). But

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rather than solely focusing on mental illness as the sole cause or outcome of suicidal tendencies, it is crucial to underscore the significance of finding meaning in life. Various studies (Hodges & Crowe, 2014; Lightsey & Boyraz, 2011; Patrick & Schulenberg, 2013) have demonstrated that discovering meaning in life can act as a protective factor against depression, alleviate suicide risk, and enhance overall well-being.

Adewuya et al. (2016) assert that effective suicide prevention begins with addressing suicidal behaviors. These behaviors are often associated with common mental disorders such as depression and anxiety, as well as societal perceptions, self-acceptance issues, and a lack of acceptance of disabilities in all forms. Their research reveals that 7.28% of prevalent suicidal ideation is independently linked to these behaviors, along with factors such as age, gender, marital status, and employment in low-valued jobs.

Religion has been recognized as a significant influence on the assessment of life's meaning based on personal experiences. In a study by Fasogbon et al. (2019), a relationship between suicide and the level of religious belief was established. The researchers identified religious belief as a contributing factor to suicidal ideation among youths. However, the occurrence of suicide cases involving clergymen and religious individuals raises doubts about these conclusions. This skepticism is reflected in Lawrence et al. (2016)'s research, which suggests that religion is not exclusively a protective factor against suicide but can also contribute to it.

The societal dysfunction characterized by ineffective government policies, breakdown of law and order, abuse of power, substandard living conditions, moral decay, and insecurity also fosters thoughts of suicide. In such circumstances, the acceptability of suicide increases, as it becomes seen as a viable option to escape from perceived insurmountable misery (Blosnich et al., 2018; Stack & Kposowa, 2011). When faced with these challenges, pastoral caregivers are left wondering which approach can be most effectively employed in cases of suicide. The need for interventions necessitates a thoughtful examination of how religion relates to the prevention and practice of caring for individuals in the context of suicide.

Literature Review

Contextualizing Suicidality in Nigeria

It is important to situate the prevalence of suicide in Nigeria. In the past decade, there has been an abundance of news about suicide deaths in Nigeria. These deaths have primarily affected young people aged 16 to 45 (Adewuya et al., 2016). Most of these cases have occurred within universities (Afolabi et al., 2020; Ajibola & Agunbiade, 2021; Ibrahim et al., 2021; Igundunasse & Medubi, 2019; Ogunleye et al., 2019; Ojoye, 2018; Onah et al., 2020). Additionally, there have been other instances of suicide, such as the case of Michael Arowosaiye, a minister in RCCG, whose suicide was linked to depression caused by "rent" issues and sexual accusations

(Ugbodaga, 2019), as well as a Nigerian Disco Jockey who took his own life due to unresolved marital problems (Linda Ikeji, 2019).

In Nigeria, suicide is carried out using various methods, including hanging, poisoning, drowning, and firearms (Onotai & Ibekwe, 2010; Oyetunji et al., 2021). Some studies have even delved into categorizing these methods based on gender. Offiah and Obiorah's research found that "women tend to choose less violent means of suicide, such as drowning or poisoning, while males often opt for more violent methods like hanging or firearms" (Offiah et al., 2014, p. 8).

The societal conditions in Nigeria have been argued to contribute to an individual's vulnerability to suicide. The dysfunctional nature of Nigerian society fosters an environment conducive to such circumstances. One significant consequence of this dysfunctional society is depression (Omigbodun et al., 2008). As highlighted by Lawal (2018), given the increasing occurrence of suicide in the country, it is essential to thoroughly investigate depression. Fasogbon et al. (2019) demonstrated that factors such as unemployment, financial crises, stress, and frustration (including emotional trauma) are responsible for suicidal behavior among Nigerian youth. They argued that these factors give rise to despair and a desire to end one's life.

Several factors have been identified as underlying factors of depression in Nigeria by some medical practitioners (Shittu, 2019; Warigon, 2018). These factors include substance abuse, economic hardship, and heartbreak. Although Feigelman et al.'s research (2014) suggests that "suicide acceptability"—the belief that suicide is a viable solution to a problem—plays a role in completed suicides, Blosnich et al. (2018) also support this notion in their study on suicide morbidity, encompassing suicide ideation, planning, and attempts. In conclusion, the conditions and experiences of individuals within a dysfunctional society shape their choice of suicide as the ultimate solution to life's challenges.

There are various interconnected factors that contribute to both suicidal thoughts and completed suicides. Pius Adejoh, a lecturer in the Department of Sociology at the University of Lagos, identified three factors behind suicide among youths: moral decadence, lack of family upbringing, faulty orientation, and socialization, which some describe as an "entitlement mentality" (The Guardian, 2019). An example highlighting the socioeconomic aspects is the crisis in job generation and availability. This crisis, along with income instability, also affects relationships. The level and quality of life of the population in a country like Nigeria are influenced by the prevailing remuneration rates. This, in turn, impacts the poverty level across the country. A recent report by the National Bureau of Statistics (Ichedi, 2022) stated that 133 million Nigerians are considered multidimensionally poor. Being in a state of unemployment (and underemployment), low wages, and resulting poverty often led to frustration.

Frustration is a reactive state influenced by social and economic deficits. Jeronimus et al., (2017, p. 85), in their investigation of adolescent frustration as a baseline and vulnerability factor for development, defined frustration as "irritable distress in response to limitation, exclusion, and failure." Adewuya and Makanjuola (2008), however, found that an individual's personal failure was not strongly endorsed as a causative factor for suicide. Their research revealed that the most frequently cited causes were substance and alcohol misuse (72.3%), followed by witchcraft/sorcery/

evil spirit (65.5%) and the belief in God's will/divine punishment (50.1%), while personal deficits/failures were least endorsed (10.2%). Turecki and Brent (2016) argue that interpersonal conflict, impulsive aggression, conduct disorder, antisocial behavior, and substance and alcohol misuse are more significant in understanding suicidal behavior among adolescents and young adults. These behaviors are prevalent among Nigerian youth and contribute to the increase in suicide cases.

We could observe that the reasons for suicide among young people in Nigeria are often connected to their everyday experiences and the root causes of suicide. These reasons, which contribute to thoughts of self-harm, are distinct from mental health problems. This differentiation aligns with the viewpoint expressed by Shilubane et al. (2013), who highlight the significance of considering the behavioral aspects of youth, in addition to psychological factors, when developing effective strategies for suicide prevention.

These facts support the viewpoint of Haw and Hawton (2015), who highlight the complexity of the causes underlying suicidal behavior. They argue that "psychiatric disorders alone do not explain why people choose to end their lives, but it is a fact that in the majority of cases, there is an underlying mental disorder, and this vulnerability interacts with multiple psychological and social factors that lead some individuals to end their lives or attempt to do so" (Haw & Hawton, 2015, p. 15). Therefore, it is essential to recognize that not every suicide is a result of outright insanity. Internal neurological and emotional disturbances, influenced by various factors, can contribute to an individual's vulnerability. These factors collectively contribute to variations and increases in suicide rates.

Netnographic Review of Religious Perception of Suicide

The news of suicide deaths elicits various reactions depending on one's perception of the phenomenon or their connection to the victim. In Nigeria, these reactions are often influenced by religious beliefs and cultural taboos associated with suicide. A netnographic study conducted by Nwafor et al. (2023) aimed to understand how Nigerians perceive and respond to suicide news on electronic media. This study sought to establish the relationship between religion and suicide in the Nigerian context. Thirteen social media platforms and online newspaper sites were analyzed to gather reports of suicide deaths. The comments (164) on these reports were thematically categorized to determine their religious or theological outlook (Table 1). The reactions fell into themes such as prayer to God, the role of God in tragedy, judgment and sin, and the influence of worldly and supernatural forces (Table 2). These findings reveal that despite the increasing number of suicides among young people and adults, there are Nigerians who still interpret and process such incidents through a theological, religious, and/or spiritual lens.

The news of death triggers various types of reactions, even though it is an inevitable event (Attig, 2010; Tomer & Eliason, 2007). In the case of death by suicide, people's reactions can quickly turn to despair, anger, and sometimes judgment. With the impact of globalization, which has expanded communication and information dissemination, these reactions are further shared on various media platforms. These

Table 1 Study resources

Suicide cases	Digital media platforms
Kaivi Kayode	Daily Post
Hikmat Gbadamosi	Facebook
Joseph Mayowa	GistmoreNG
Seun Omogaji [Dj Xgee]	Gist Mania
Grace Opeyemi Dara	The Guardian
Seun Adedutan	Linda Ikeji's Blog
Chukwuemeka Akachi	Nairaland Forum
Michael Arowosaiye	PM News
	Punch Nigeria
	Sahara Reporters
	Today
	Twitter
	YouTube

This study acknowledges the possibility that any of the sites included in this study might be in breach of the WHO guidelines for responsible reporting of suicide

Table 2 Categories and motifs of the comments and reactions on the social media platforms

Categories	Motifs
Prayer	For the victims
	For the victim's family members
	For people in similar situations to the victims prior to ending their lives and/or people in general
	For themselves (commenters) in cases where they themselves seem to be struggling with the idea of committing suicide
Role of God in Tragedy	God as a solution to depression
	The grace of God in the lives of the commenters
	God has a plan and purpose for everyone
Judgment and Sin	Condemnation of the person for committing suicide
	Criticized the person's reasons for committing suicide
	Empathy and appreciation of beauty
Worldly and Supernatural Forces	Premonition of the spirit of suicide over Nigerians
	The challenging situations and pressures in life
	Suicide is an act of cowardice that gives credence to the devil's powers
	The triumph of the devil
	The Churches [and all religious bodies] preach against the materialistic and consumerist mentality

reactions provide insights into how people perceive suicide and allow us to understand the role of religion and spirituality in shaping their responses to such news.

Several motifs were identified and grouped into the four categories mentioned earlier. The first category revolves around prayer. The news of death, particularly by suicide, often prompts individuals to turn toward the transcendent. It inspires some people to pray or communicate with God. Many of the comments take the form of prayers or requests. People pray to God for the departed soul's repose and divine

mercy upon the victim. However, prayers are more commonly offered for the family members who are left behind and have to cope with the loss (Jordan, 2001). The second category reflects on the role of God in tragedy. Most commenters express the belief that it is God who holds power over life and death. They recognize that God not only grants life (Genesis 2:7) but is also the source of peace and joy in the face of challenges (2 Corinthians 1:3). They firmly believe that God is the ultimate solution to combating depression.

There were testimonies shared about how God's grace manifested in moments of depression, weakness, and loneliness. The knowledge of divine capacity to bring relief and strength during challenging times serves as an encouragement for individuals not to consider suicide as a solution to their difficulties. Some commenters also offered words of encouragement by emphasizing that God has a purpose for each life. This kind of support aims to empower those who may be anxious about their situation and help them see their struggles within the broader context of life. There is a prevailing mentality where people believe that God is in control of everything, and this sense of reliance on God provides them with a sense of relief.

The third category focuses directly on the victims of suicide. The religious beliefs of many commenters influence their perspectives on individuals who die by suicide. In their religious teachings, life is regarded as a gift from God. Consequently, suicide is seen as a sinful and offensive act against God, deserving condemnation and punishment in hell (Potter, 2021). This approach often places the commenters in a position of presumed authority to pass judgment without considering the person's struggles and the need for preventive measures in the face of future occurrences. These situations often involve psychological and socioeconomic factors.

Neglecting the complexities of these factors contribute to a judgmental perception of suicide. Many commenters deemed suicides resulting from broken relationships as ridiculous and foolish. It is important to remember that we cannot judge or condemn suicide deaths, whether directed toward the victims or their survivors, as we cannot fully comprehend the turmoil and circumstances that led someone to take their own life. Only God can truly understand the sufferings endured by the individual (Suicide Prevention Resource Center, 2009). The fact remains that a life has been lost.

The fourth and final category explores non-natural causal factors. This reflects the broader African religious worldview that encompasses the interplay between the physical and the spiritual or supernatural realm (Le Rossignol et al., 2022). Based on this worldview, some comments absolve suicide victims of personal responsibility, attributing their actions to external influences beyond their control. However, others attribute suicide to the rise of atheism, where people have abandoned the belief in the supernatural and divine beings (Table 3).

According to certain perspectives, religious institutions may share blame due to the promotion of a prosperity mindset (Barga, 2018), which can contribute to suicidal thoughts. In the view of these commenters, the prosperity gospel, with its focus on Christians achieving good health and wealth (Kitsiiri, 2019; Smith, 2021), combined with the flaunting of material possessions by some Christian leaders on social media, creates a sense of failure and depression among those who feel they have not achieved similar success (Bishau, 2013). As a result, some comments call

Table 3 Examples of comments and reactions from digital media platforms

Categories	Comments and reactions
Prayer	'Lord, please be kind to him. Do not judge him harshly. May he not be miserable in the hereafter as he obviously was on earth.'
	'Our thoughts and prayers go to his immediate family members. May God Almighty help to comfort them and give them the strength to bear this irreparable loss.'
	'Am not sorry for him but for his mother. May God console his mother.'
	'So sad, what a waste! May God help the youth of this country.'
	'Lord I'm also depressed but don't let me end this way.'
	'I'm just very depressed here but everyone around me seems to be happy, they don't really care bout me, God pls see me through these hard times!!'
Role of God in Tragedy	'Our govt is even d worst thing that can happen to Nigerians, ppl should not judge him, depression is a fast killer, ppl dey say why him go kill himself, pray u no see depression pray e no hit u, not everybody fit stand d heat of depression it takes only GOD to solve it, and our govt even made it worst for him. may ur soul rest in peace in Jesus' name.'
	'A lot of young people have drifted away from God. Did he attend any student fellowship or church in School?… Did he know God himself? … All these twisted thoughts that God is not real should be discarded by the young people of today. If you know God, He will take care of you, mentally, physically, spiritually, and in every area of your life.'
	'The country is hard. Only God's grace and finding it easy to share ur problem with people can be a solution.'
	'You can't win your battles physically by expressing how you feel to people around you, go to Jesus in prayer and everything will turn around for your good.'
	'I was very depressed some years back, but if u know God and are very prayerful u can survive depression. I was suicidal three times in three months and ended up in d emergency room three times, I've been on medication for depression for d past 12yrs now, and when I started having d suicidal thoughts, I will start praying seriously rebuking d spirit of the dead. Praying goes a long way if you are in Christ.'
	'Fine I know suicide is not an option too. It's mindset since I know whether I graduate or not, whether I'm learned or not where God has planned for me with grace and mercy I will get there…Had it been [the victim] knew this she should've given it second and different thought.'

Table 3 (continued)

Categories	Comments and reactions
Judgment and Sin	'Foolish boy! Your parents sent you to school to study, not to be diving into women… Stupid boy. Go and rot in hell fire since that was your choice.'
	'This big-for-nothing mofo never really loved those he mentioned in his letter, if he did, he wouldn't have chosen the path of suicide. I'm only concerned about those who truly lived you that you left discombobulated. May God give them a reason to quickly forget your demise. For you, I care less. Go to hell for all I care. Nonsense!'
	'Go to hell! Even if I should die, it can never be because of a woman.'
	'Because of woman hahahahahahahaha. Very silly guy. Rest in hell.'
	'This is really sad; God rest her soul…'
	'She looks so happy and pretty. Who would think she'd suffer depression? Rest well.'
	'It's a sad one tho and it's so unfortunate because this is one sin that is unforgivable.'
	'Chai! He Committed sin upon sin. What a wasteful life. You made your life lost in act of ignorance that must face query hereafter. Hiss!!'
	'I pray Allah forgives her sins and grant her family the strength to bear the loss.'
Worldly and Supernatural Forces	'The spirit of suicide is hovering on Nigerians, especially the undergraduates and young adults, I pray it will not visit my household.'
	'No no no no no This thing don pass depression, na village people dey bewitch people now.'
	'it wasn't the best option to take your borrowed life that doesn't belong to you.'
	'Only cowards die before their time. Why hasten the event that is certain? It is a shame to give in to the voice of the devil.'
	'I got to a point where he wrote "Finit Hic Deo" meaning God ends here. He was an atheist and everything about him changed when he studied Gothic Literature as an English and Literal student nah…'
	'These occult members called churches has no shame…'

for churches to reform their teachings, expressing concern that the pursuit of material wealth has overshadowed religious care. It is important to note, however, that this atmosphere of pressure stems from a misinterpretation of the prosperity gospel. Additionally, the reaction of institutions, such as the church and reporting bodies, following a suicide is crucial in assessing the relationship that they had with the victim during their lifetime.

Meaning-Making and Suicide

To provide the context for our discussion on the relationship between religion and suicide, it is important to understand the desire for a good life, which shapes the process of finding meaning for many Nigerians. Meaning-making is a fundamental process and aspect of human experiences (Park, 2010), and Nigerians also derive

meaning based on their own experiences. To focus our discussion, we will examine the perception of the good life among a representative sample of Lagosians in Nigeria. Because how they pursue or attain the "good life" is an example that captures the meaning-making process.

The concept of the "good life" is closely related to notions of "quality of life" and "wellbeing." It can also be explored through related terms such as "happiness," "human flourishing," "welfare," and even "health" (Deaton, 2008; Skidelsky & Skidelsky, 2012). Skidelsky and Skidelsky (2012, p. 145) describe the "good life" as "a life that is desirable or worthy of desire." In Lagos, as in other parts of Nigeria, the pursuit of the good life is commonly referred to as "hustling" to attain "the beta life."

The "good life" is synonymous with the "beta life" but slightly different from the "better life." The phrase "beta life" is commonly used in Nigerian Pidgin English. It directly refers to social welfare and living conditions that constitute a good life, rather than emphasizing rights per se. The concept of the "beta life" (which can also be understood as a life better than the current status quo) is an emic term used by Lagosians to describe a good life and an aspiration for basic livelihood.

However, determining what constitutes the "beta life" is subjective. It is challenging to define because there are numerous standards of living and varying perceptions of what basic livelihood entails. It depends on individuals' outlook on life and the choices they make. Moreover, social media now heavily influences the concept of the "beta life," making it difficult, if not impossible, to attain. Young people see the ostentatious displays of wealth on social media, which intensifies the bitterness of not having a "beta life."

The aspirations for the "beta life" among Lagosians are reflected in their life experiences. Their reflections mirror the pursuit of improved living conditions, which can be explained from two perspectives: foundational components and the capacity to access or afford the "beta life." For most Lagosians, leading a good life means achieving success, although the definition of success varies depending on individual values and priorities (Fischer, 2014). These values include education, good health, happiness/peace of mind, lifestyle, shelter, and upbringing (Nwafor & Pype, 2022). Despite desiring these foundational components of a good life and having the capacity to aspire for them (Appadurai, 2004), it is evident that the necessary social resources to achieve this desired good life are lacking.

These components of "good life" have been challenged by various factors. One significant obstacle is the unfavorable government policies and security situations in the country, which adversely affect the economy and bring hardship to the people. Another obstacle to attaining a "beta life" is external pressure, such as the culture of materialism, family expectations, and peer pressure. These pressures often lead to frustration (Nwafor & Pype, 2022), and in extreme cases, individuals may develop suicidal behaviors or attempt suicide.

There is a correlation between suicide ideation and suicide attempts. Suicide ideation refers to thoughts of self-inflicted harm leading to the cessation of one's life (Esfahani et al., 2015), while a suicide attempt is the actual carrying out of such thoughts without success (Danuta, 2016) or a failed suicide attempt (O'Connor & Pirkis, 2016). It is evident that the process leading to completed suicide begins

with ideation. Therefore, there is a connection between suicide ideation and suicide attempts within the overall process of suicide. This implies that a suicide attempt is preceded by a prior disposition characterized by thoughts of ending one's life (i.e., suicide ideation). In most cases of suicide, there is a premeditative process that culminates in the realization of suicidal thoughts.

Existential Frustration and Vacuum

Discovering the meaning of life is essential for healing and serves as a fundamental motivation for human nature to navigate questions and situations in life (Kalashnikova et al., 2022). However, the pursuit of answers to these questions can sometimes lead to what Viktor Frankl once described as "existential frustration" (Frankl, 1992). This existential frustration emerges from an ongoing search for the meaning of life that can result in burnout. Additionally, Frankl introduced the concept of the existential vacuum, which represents an inner emptiness, a profound void, and a feeling of worthlessness that manifests as boredom (Frankl, 1992). This vacuum creates frustration and leaves individuals vulnerable, pushing them toward risky behaviors. In the state of existential vacuum, individuals lack the will to find meaning and may attempt to compensate for their frustration through the pursuit of immediate gratification and power, such as the accumulation of wealth.

It is important to recognize that the existential crisis and challenges encountered in daily life should not be viewed as mental disorders. Religion, through pastoral care, assumes the responsibility of providing support by fostering a sense of belonging within a community, instilling hope, and offering teachings that serve as a moral compass to fill the existential vacuum (Durkheim, 1995). These efforts assist individuals in discovering the meaning of life and alleviate the consequences, such as depression and suicide ideation, that arise from the existential vacuum and frustration.

The Influence of Religion on Meaning-Making

Religion and spirituality have been recognized for their role in promoting healthy living and offering ways to cope with human suffering. According to a report from the Suicide Prevention Resource Center (2009), religion provides hope, helps individuals find purpose and meaning in life, and fosters an appreciation for life. These aspects have been referred to as the "utilitarian side of religiosity" (Van Praag, 2021), as religion is concerned with the overall well-being of its members. It emphasizes a collaborative mindset where individuals understand that they are actively engaged in a cooperative relationship with God to solve problems (Goldston et al., 2008). This collaborative religious coping style, encouraged in pastoral care, helps individuals feel supported in the problem-solving process and develops faith in God during challenging times.

To further explore the roles of religion, we will briefly examine three dimensions in which religion serves as a protective factor against suicide. Despite research

indicating that religion can also be a risk factor (Lawrence et al., 2016), the focus here aligns with studies (Akanni & Oduaran, 2019; Fasogbon et al., 2019; Gearing & Lizardi, 2008; Rieger et al., 2015) supporting its protective nature, particularly in the social, moral, and future-oriented dimensions.

The social dimension of religion involves providing a sense of belonging within a community. Religion creates a space where individuals can belong to a social group (Gearing & Alonzo, 2018). It is crucial to recognize that the church, despite having social and economic aspects, is primarily a religious institution. The relationships formed within the religious community give meaning to individuals' lives. This social aspect of religion plays a vital role in nurturing God's people through guided pastoral care, support, reconciliation, and healing within communities.

The moral dimension of religion views suicide as a morally wrong act. This perspective is shared among the three most popular religions in Nigeria (Nigerian Indigenous Religions, Christianity, and Islam). It is based on the belief that life is a gift that should not be prematurely ended (Ex 20:13; Andy-Philip & Alamu, 2020; Liégeois & Eneman, 2012). Suicide is seen as a rejection of the gift of life and is generally prohibited by most religions.

Nevertheless, religion also demonstrates compassion for individuals who are suicidal. In pastoral care, religion reaches out to those exhibiting suicidal behaviors, prays for those who have completed suicide, and provides care for the bereaved family members. The third protective dimension is that religion serves as a source of hope (Lehmann, 2012; Osafo et al., 2021; Wnuk, 2015). Religion offers a perspective that points individuals toward the future, encouraging and supporting their aspirations, and exploring multiple options in various situations or events.

Although Nigeria is officially a secular state, it is a deeply religious nation. As mentioned earlier, two major foreign religions (Christianity and Islam) and various indigenous religions exist. Nigerians align themselves with and adhere to the principles of these religions, sharing in the spirituality of their respective religious groups. They form faith communities that foster bonding and establish relationships.

The community aspect of religion has often provided solace and opportunities for members to seek help during the tribulations of life. Nigerians commonly seek assistance from members of their faith communities, particularly their religious leaders. This inclination stems from the belief that religious institutions hold solutions to their problems and the trust in divine intervention that religion guarantees. The community dimension of religion forms the backdrop for the other two dimensions to develop and be sustained. Nigerians listen to their religious leaders, who serve as custodians of the inherent teachings of their faith, including the sanctity and gratuitousness of life, as well as the encouragement to maintain faith and foster hope in the fulfillment of divine promises in individual lives.

The community dimension encourages the participation of young people in religious activities (Akanni & Oduaran, 2019). These activities create an atmosphere that allows them to approach pastors or pastoral caregivers to address issues beyond religious discussions. This environment, which aims to be non-judgmental, helps disturbed youth realize that the world offers opportunities despite its challenges. By finding something to hold onto, new hope is ignited, and the strength to carry on is rekindled.

Given these realities, religion, through pastoral care, continues to provide support to its members. Pastoral caregivers play a crucial role in equipping faith community members to confront challenges that could potentially lead to suicide, although they may sometimes fall short in identifying suicidal behaviors and making appropriate referrals (Goldston et al., 2008). Pastoral care draws the attention of young people to the consequences of suicide for others, emphasizing that the death of an individual by suicide inflicts pain, guilt, and stigma on the living (Austin, 2017). Awareness of these repercussions can act as a deterrent. Overall, pastoral caregivers play a vital role in advocating for suicide reduction by fostering a non-judgmental climate, providing sermons on suicide prevention education, teaching the sanctity of life, and pointing to reasons for hope.

Pastrotherapy[1]

In our efforts to improve pastoral care for young people at risk of suicide, we have introduced the innovative concept of 'pastrotherapy' (Nwafor & Vandenhoeck, 2021). Pastrotherapy is a unique form of pastoral care known as 'participant-accompanied pastoral care'. This approach is characterized by the chaplain's empathic accompaniment of young people in their daily challenges. It seamlessly integrates elements of pastoral counselling and pastoral therapy (Meyer, 2020). The term 'therapy' is deliberately used to reflect the long-term nature of pastrotherapy, as it is designed to provide ongoing support, as opposed to 'counselling', which typically implies short-term interventions.

Pastrotherapy involves a comprehensive process of guiding young people on their journey from self-discovery to self-realization. It harnesses the depth and breadth of long-term therapy, while incorporating the efficiency associated with short-term counselling. A key element of this approach is the practical application of 'reframing' (Capps, 1993), which is proving to be highly effective and resulting in tangible personal growth for those in care. The pastoral caregiver assists the care receiver by changing the frame of their perception of a given situation or event. This creates an alternative option and therefore new ways of responding to the challenge.

This pioneering approach, Pastrotherapy, is specifically designed as a novel strategy for suicide prevention with a focus on the unique context of Nigeria and pastoral care of young people. Pastrotherapy is fundamentally person-centered and goes beyond scheduled counselling sessions. It involves the ongoing involvement and active engagement of pastoral care workers in the daily lives of those they serve. The

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[1] The term 'pastro' is a derivative of the Latin word '*pastor*' meaning 'shepherd' or 'shepherding' involving protecting, advocating, caring for, or curing something or someone vulnerable or in need. As noted by Carey et al. (2024), the classic model of the 'pastor'/'pastoral care' is fundamentally holistic and involves the (physical) healing, sustaining and support of individuals or communities, as well as providing (psychological) counsel and guidance, and the (social and spiritual) reconciling of people with one another and with the divine or sacred (Clebsch & Jaekle, 1964). Thus 'pastrotherapy', involving a chaplain, pastor, priest or pastoral caregiver, is not just about spiritual or religious concerns but rather utilizes an inclusive holistic bio-psycho-social-spiritual and ongoing participant-accompanied pastoral care approach when caring for people.

approach emphasizes the importance of establishing a deep and meaningful relationship and advocates the ongoing presence of the pastoral caregiver as the young people deal with their specific challenges.

Ultimately, pastoral therapy embodies a compassionate approach that combines ongoing pastoral support with the systematic development of skills aimed at enhancing the well-being of those being cared for. It provides opportunities for individuals to find or cultivate a sense of belonging within a community that values certain principles and looks forward to a better future.

Factors Limiting Pastoral Care Interventions for Suicide Prevention

In Nigeria, pastoral caregivers are often expected to provide various forms of care, even beyond their professional training. There is a lack of specialization in pastoral care, with pastors and religious leaders assuming the role of professional pastoral caregivers. This perception creates an environment where pastors are viewed as "diviners" who rely on scriptures for guidance (Louw, 2011).

However, pastors and religious leaders face challenges due to their limited training in professional pastoral caregiving. They may lack sufficient response techniques and answers to address the diverse needs of care recipients. Additionally, the influence of Western cultures on Nigeria and other African countries plays a role (Daramola, 2015). Care recipients often expect pastoral caregivers to fulfill both the role of a diviner (reflecting the African worldview) and that of a Western clinician (representing the scientific worldview). These worldviews are not necessarily conflicting but serve as illustrations of the common expectations placed on pastoral caregivers in African countries like Nigeria.

Another limitation lies in managing the power asymmetry between the pastoral caregiver and the care recipient. Care recipients may perceive the caregiver as someone who merely dispenses instructions during pastoral counselling (Daramola, 2015). However, caution has been advised to avoid imposing the caregiver's own worldviews on the care recipient, as emphasized by Woldemichael et al. (2013, p. 4). The goal should be to help the care recipient gain a deeper understanding and consider alternative perspectives or reframing of their situation (Capps, 1993).

Limitation and Conclusion

Our extensive research into the complex relationship between religion and suicide in Nigeria, particularly among the country's young people, has revealed a pressing and complex issue. Nigeria's deeply religious landscape provides the backdrop for a significant societal challenge: as young people face life's challenges and strive to make sense of their experiences, they can often be overwhelmed, leading to choices that jeopardize their well-being, including the tragic resort to suicide.

This research began by examining perceptions of suicide in Nigeria, mindful of the powerful influences of religion, mental health, and the ubiquitous presence of social media. Particularly, social media reactions to suicide cases not only reflect

societal perceptions but can also either reinforce the protective factors associated with religion or exacerbate the vulnerability of young people at risk. Further research is undoubtedly needed to explore this critical issue.

In addition, our study explored the protective role of religion in relation to suicide through dimensions such as social support, moral values, and the infusion of hope. We advocate a specific approach called "pastrotherapy", which emphasizes the need for well-trained pastors and chaplains to provide tailored support to vulnerable young people. Through this approach, religion can contribute significantly to the healing process of psychosocial crises and dysfunction among young people, ultimately acting as a preventive measure against suicide. Although this approach has not been sufficiently discussed in this paper, as it is only a recommendation here, further research will outline a detailed application of it.

This study underscores the need for an in-depth understanding of the relationship between religion, suicide and the search for meaning among Nigerian youth. By unravelling the various perceptions, influences and protective factors associated with religion, we can take proactive steps to provide effective pastoral care and support to those in vulnerable situations. In doing so, we can significantly reduce the incidence of suicide while addressing the complex psychosocial challenges faced by young people in their search for meaning and purpose in life.

In conclusion, this research has provided insights into the intricate interplay between religious beliefs and practices, the search for meaning and mental health and has highlighted the vital role of religion in supporting Nigerian youth as they face existential challenges. It is our sincere hope that the findings presented in this study will contribute to a more informed and compassionate approach to suicide prevention and the cultivation of a sense of purpose among the nation's young population, ultimately fostering a safer and more supportive environment for all.

Declarations

References

Adewuya, A. O., & Makanjuola, R. O. A. (2008). Lay beliefs regarding causes of mental illness in Nigeria: Pattern and correlates. *Social Psychiatry and Psychiatric Epidemiology, 43*(4), 336–341. https://doi.org/10.1007/s00127-007-0305-x

Adewuya, A. O., Ola, B. A., Coker, O. A., Atilola, O., Zachariah, M. P., Olugbile, O., Fasawe, A., & Idris, O. (2016). Prevalence and associated factors for suicidal ideation in the Lagos State Mental Health Survey. *Nigeria. Bjpsych Open, 2*(6), 385–389. https://doi.org/10.1192/bjpo.bp.116.004333

Afolabi, A. B., Karatu, B. A., & Ogunleye, E. (2020). Relationship between personality traits, academic performance and suicidal ideation among undergraduates in the University of Lagos. *Journal of Social Sciences & Humanities, 5*(3), 228–244.

Ajibola, A. O., & Agunbiade, O. M. (2021). Suicide ideation and its correlates among university undergraduates in South Western Nigeria. *International Quarterly of Community Health Education*. https://doi.org/10.1177/0272684X211004929

Akanni, A. A., & Oduaran, C. A. (2019). Depression, self-esteem and sociodemographic determinants of suicidal ideation among university undergraduates. *Journal of Reviews on Global Economics, 8*, 100–104. https://doi.org/10.6000/1929-7092.2019.08.10

Andy-Philip, N., & Alamu, S. (2020). Blood for blood: The old testament teaching on the sanctity of life-blood a remedy for suicide in Nigeria. *Nnamdi Azikiwe Journal of Philosophy, 12*(1), 95–102.

Appadurai, A. (2004). The capacity to aspire: culture and the terms of recognition. In V. Rao & M. Walton (Eds.), *Culture and public action* (pp. 59–84). Stanford University Press.

Attig, T. (2010). Meanings of death seen through the lens of grieving. *Death Studies, 28*(4), 341–360. https://doi.org/10.1080/07481180490432333

Austin, O. O. (2017). Religious perceptions of suicide and implication for suicidology advocacy in Nigeria. *International Journal of History and Philosophical Research, 5*(2), 34–56. www.eajournals.org

Barga, T. (2018). Theological pitfall of prosperity gospel in Nigerian churches. *Journal of African Studies and Sustainable Development, 1*(1). www.apas.org.ng/journals.asp

Bishau, D. (2013). *The prosperity gospel: An investigation into its pros and cons with examples drawn from Zimbabwe*. http://en.wikipedia.org/wiki/Prosperity_theology

Blosnich, J. R., Lytle, M. C., Coulter, R. W. S., & Whitfield, D. L. (2018). Suicide acceptability and sexual orientation: results from the general social survey 2008–2014. *Archives of Suicide Research, 22*(4), 542–554. https://doi.org/10.1080/13811118.2017.1377132

Capps, D. (1993). *The poet's gift: Toward the renewal of pastoral care* (1st ed.). Westminster John Knox Press.

Carey, L. B., Koenig, H. G., Hill, T., Drummond, D., Gabbay, E., Cohen, J., Aiken, C., & Carey, J. R. (2024). Spirituality, mental health, and COVID-19. *Journal of Religion and Health, 63*(1), 1–5. https://doi.org/10.1007/s10943-024-02000-z

Clebsch, W., & Jaekle, C. (1964). *Pastoral care in historical perspective*. Abingdon Press.

Cavelti, M., & Kaess, M. (2021). Adolescent suicide: An individual disaster, but a systemic failure. *European Child & Adolescent Psychiatry, 30*, 987–990. https://doi.org/10.1007/s00787-021-01834-2

Suicide Prevention Resource Center. (2009). *The role of faith communities in preventing suicide: A report of an Interfaith Suicide Prevention Dialogue*.

Danuta, W. (2016). *Suicide: An unnecessary death* (W. Danuta, Ed.; 2nd ed.). Oxford University Press.

Daramola, I. B. (2015). *Exploration of pastoral counselling in Africa: a study of pastoral counselling in Africa with Nigeria as a case study*. University of Aberdeen.

Deaton, A. (2008). Income, health, and well-being around the world: Evidence from the Gallup World Poll. *Journal of Economic Perspectives, 22*(2), 53–72. www.worldvaluessurvey.org.

Durkheim, E. (1995). *The elementary forms of religious life* (K. E. Fields, Ed.; New Translation). The Free Press.

Durkheim, E. (2002). *Suicide: A study in sociology: Vol. First* (G. Simpson, Ed.; 1st ed.). Routledge Classics.

Esfahani, M., Hashemi, Y., & Alavi, K. (2015). Psychometric assessment of beck scale for suicidal ideation (BSSI) in general population in Tehran. *Med J Islam Repub Iran, 29*, 268–278. http://mjiri.iums.ac.ir

Fasogbon, M. A., Agberotimi, S. F., Olaseni, A. O., & Oladele, O. T. (2019). Impact of religiosity and life orientation on attitude of youths towards suicide in Lagos, Nigeria: A religious-community based

study. *Covenant International Journal of Psychology (CIJP)*, *4*(1), 25–38. https://doi.org/10.20370/yh7z-2n20

Feigelman, W., Rosen, Z., & Gorman, B. S. (2014). Exploring prospective predictors of completed suicides: Evidence from the general social survey. *Crisis, 35*(4), 233–244. https://doi.org/10.1027/0227-5910/a000257

Fischer, E. F. (2014). *The good life: Aspiration, dignity, and the anthropology of wellbeing*. Stanford University Press.

Frankl, V. E. (1992). *Man's Search for Meaning* (Vol. 4). Beacon Press.

Gearing, R. E., & Alonzo, D. (2018). Religion and suicide: New findings. *Journal of Religion and Health, 57*(6), 2478–2499. https://doi.org/10.1007/s10943-018-0629-8

Gearing, R. E., & Lizardi, D. (2008). Religion and suicide. *Journal of Religion and Health, 48*, 332–341. https://doi.org/10.1007/s10943-008-9181-2

Goldston, D. B., Davis Molock, S., Whitbeck, L. B., Murakami, J. L., Zayas, L. H., NagayamaHallDavid, B., & Goldston, G. C. (2008). Cultural considerations in adolescent suicide prevention and psychosocial treatment. *American Psychologist, 63*(1), 14–31. https://doi.org/10.1037/0003-066X.63.1.14

The Guardian. (2019). Real reasons Nigerian youths are committing suicide. *ProQuest*.

Haw, C., & Hawton, K. (2015). Suicide is a complex behaviour in which mental disorder usually plays a central role. *Australian and New Zealand Journal of Psychiatry, 49*(1), 13–15. https://doi.org/10.1177/0004867414555419/ASSET/IMAGES/LARGE/10.1177_0004867414555419-FIG1.JPEG

Hodges, S., & Crowe, A. (2014). Attitudes of college students towards purpose in life and self-esteem. *International Journal of Existential Psychology & Psychotherapy*, *5*(1), 124–131. www.existentialpsychology.org

Ibrahim, O., Stephen, J., Abiodun, I., Garba, A., Jide, O., & Olugbenga, I. (2021). Relationship between suicide and responsible factors among undergraduates, University of Ilorin, Ilorin, Nigeria. *Journal of Social Science and Humanities, 18*(10), 157–171.

Ichedi, S. J. (2022). Nigeria launches its most extensive national measure of multidimensional poverty. National Bureau of Statistics. https://nigerianstat.gov.ng/news/78

Igundunasse, A., & Medubi, S. (2019). Substance abuse and alcohol dependence as correlates of suicide ideation among undergraduate. *Journal of Professional Counselling and Psychotherapy Research (JPCPR)*, *II*(1), 127–139.

Linda Ikeji. (2019). Nigerian entertainment industry mourns as DJ Xgee allegedly commits suicide. *Linda Ikeji Blog*. https://www.lindaikejisblog.com/2019/1/nigerian-entertainment-industry-mourns-as-dj-xgee-allegedly-commits-suicide.html

Jeronimus, B. F., Riese, H., Oldehinkel, A. J., & Ormel, J. (2017). Why does frustration predict psychopathology? Multiple prospective pathways over adolescence: A TRAILS study. *European Journal of Personality, 31*, 85–103. https://doi.org/10.1002/per.2086

Jordan, J. R. (2001). Is suicide bereavement different? A reassessment of the literature. *Suicide and Life-Threatening Behavior, 31*(1), 91–102. https://doi.org/10.1521/suli.31.1.91.21310

Kalashnikova, O., Leontiev, D., Rasskazova, E., & Taranenko, O. (2022). Meaning of life as a resource for coping with psychological crisis: Comparisons of suicidal and non-suicidal patients. *Frontiers in Psychology*. https://doi.org/10.3389/fpsyg.2022.957782

Kitsiiri, S. M. (2019). Prosperity gospel: Social and economic corruption in disguise. *International Journal of Research and Innovation in Social Science (IJRISS)*, *3*(12), 262–266. www.rsisinternational.org

Lawal, O. (2018). *Attitudes towards depression and suicide: An analysis of news coverage and online comments on Nigerian news sites* [Thesis, Georgia State University]. https://scholarworks.gsu.edu/communication_theses/120

Lawrence, R. E., Oquendo, M. A., & Stanley, B. (2016). Religion and suicide risk: A systematic review. *Archives of Suicide Research, 20*(1), 1–21. https://doi.org/10.1080/13811118.2015.1004494

Lehmann, D. (2012). Hope and religion. *Estudos Avançados, 26*(75), 219–236.

Liégeois, A., & Eneman, M. (2012). Ethical aspects of the prevention of suicide in psychiatry. *Ethical Human Psychology and Psychiatry, 14*(2), 140–149. https://doi.org/10.1891/1559-4343.14.2.140

Lightsey, O. R., & Boyraz, G. (2011). Do positive thinking and meaning mediate the positive affect: Life satisfaction relationship? *Canadian Journal of Behavioural Science, 43*(3), 203–213. https://doi.org/10.1037/A0023150

Louw, D. J. (2011). Pastoral care and counseling. In E. Mpofu (Ed.), *Counseling people of African ancestry* (pp. 155–165). Cambridge University Press.

Meyer, J. (2020). Developing pastoral therapy as a professional qualification in South Africa: Rationale and motivation. *HTS Teologiese Studies / Theological Studies, 76*(2), 1–11. https://doi.org/10.4102/HTS.V76I2.5659

Nwafor, C., & Vandenhoeck, A. (2021). *Suicide prevention in pastoral care: A social rereading of pastoral care for the youth in Nigeria*. New York: KU Leuven.

Nwafor, C. I., & Pype, K. (2022). *The prefiguration of the "good life" An imagination of beta life on the Nairaland forum*. Katholieke Universiteit.

Nwafor, I. C., Alabi, A., Ntompridou, T., & Perez, B. I. (2023). Religious reaction to suicide cases in Nigeria: A netnographic study. *AFRICA*, 1–17.

O'Connor, R., & Pirkis, J. (2016). *The international handbook of suicide prevention* (R. O'Connor & J. Pirkis, Eds.; 2nd ed.). John Wiley & Sons.

Offiah, S. A. U., Sau, O., & Cc, O. (2014). Pattern of suicide in Nigeria: The Niger Delta experience. *Journal of Medical Investigations and Practice, 9*(1), 8–11. https://doi.org/10.4103/9783-1230.132550

Ogunleye, A. J., Azikiwe, J. C., Aroso, S. O., Tenibiaje, M. O., & Ife Solomon, D. (2019). A measure of Aggression and Anxiety as factors of Suicide among undergraduates in a Nigeria University. *IOSR Journal Of Humanities And Social Science (IOSR-JHSS, 24*(2), 81–87. https://doi.org/10.9790/0837-2402018187

Ojoye, T. (2018). Overtaken by depression, undergraduates find solace in ropes, poison. *Punch Newspapers*. https://punchng.com/overtaken-by-depression-undergraduates-find-solace-in-ropes-poison/

Omigbodun, O., Dogra, N., Esan, O., & Adedokun, B. (2008). Prevalence and correlates of suicidal behaviour among adolescents in Southwest Nigeria. *International Journal of Social Psychiatry, 54*(1), 34–46. https://doi.org/10.1177/0020764007078360

Onah, B., Adagba, T., & Martina, A. (2020). Perceived influence of stress and self-esteem on suicide ideation among undergraduate first-year students of Benue state university, Makurdi, Nigeria. *Keffi Journal of Counselling and Psychotherapy, 1*(1), 122–133.

Onotai, L. O., & Ibekwe, U. (2010). The pattern of cut throat injuries in the University of Port-Harcourt Teaching Hospital. *Portharcourt. Nigerian Journal of Medicine, 19*(3), 264–266. https://doi.org/10.4314/NJM.V19I3.60178

Osafo, J., Akotia, C. S., Andoh-Arthur, J., & Buenorkie, ·, & Puplampu, M. (2021). The role of religious leaders in suicide prevention in Ghana. *A Qualitative Analysis. Pastoral Psychology, 70*, 525–539. https://doi.org/10.1007/s11089-021-00955-4

Oyetunji, T. P., Yasir Arafat, S. M., Famori, S. O., Akinboyewa, T. B., Afolami, M., Ajayi, M. F., & Kar, S. K. (2021). Suicide in Nigeria: Observations from the content analysis of newspapers. *General Psychiatry, 34*, 100347. https://doi.org/10.1136/gpsych-2020-100347

Park, C. L. (2010). Making sense of the meaning literature: An integrative review of meaning making and its effects on adjustment to stressful life events. *Psychological Bulletin, 136*(2), 257–301. https://doi.org/10.1037/a0018301

Patrick, M. E., & Schulenberg, J. E. (2013). Prevalence and predictors of adolescent alcohol use and binge drinking in the United States. *Alcohol Research*, *85*, 193–200. http://youthandsocialissues.com/people/megan-patrick-ph-d/Viewproject

Potter, J. (2021). Is suicide the unforgivable sin? Understanding suicide, stigma, and salvation through two Christian perspectives. *Religions, 12*(11), 1–19. https://doi.org/10.3390/rel12110987

Van Praag, H. M. (2021). The role of religion in suicide prevention. In D. Wasserman (Ed.), *Oxford textbook of suicidology and suicide prevention* (2nd ed., pp. 1–856). Oxford University Press.

Rieger, S. J., Peter, T., & Roberts, L. W. (2015). "Give me a reason to live!" examining reasons for living across levels of suicidality. *Journal of Religion and Health, 54*(6), 2005–2019. https://doi.org/10.1007/sl0943-014-9893-4

Le Rossignol, E., Lowes, S., & Nunn, N. (2022). *Traditional Supernatural Beliefs and Prosocial Behavior*.

Shilubane, H. N., Ruiter, R. A., Van Den Borne, B., Sewpaul, R., James, S., & Reddy, P. S. (2013). Suicide and related health risk behaviours among school learners in South Africa: Results from the 2002 and 2008 national youth risk behaviour surveys. *BMC Public Health, 13*(1), 1–14. https://doi.org/10.1186/1471-2458-13-926/TABLES/3

Shittu, S. (2019). Hardship responsible for rising suicide cases: Adewolu, UBTH chairman. *Punch Newspapers*. https://punchng.com/hardship-responsible-for-rising-suicide-cases-adewolu-ubth-chairman/

Skidelsky, R., & Skidelsky, E. (2012). *How much is enough?* Other Press.

Smith, D. J. (2021). The Pentecostal prosperity gospel in Nigeria: Paradoxes of corruption and inequality. *J. of Modern African Studies, 59*(1), 103–122. https://doi.org/10.1017/S0022278X2000066X

Stack, S., & Kposowa, A. J. (2011). Religion and suicide acceptability: A cross-national analysis. *Journal for the Scientific Study of Religion, 50*(2), 289–306. https://doi.org/10.1111/J.1468-5906.2011.01568.X

Tomer, A., & Eliason, G. T. (2007). Existentialism and Death Attitudes. In A. Tomer, G. T. Eliason, & P. T. P. Wong (Eds.), *Existential and Spiritual Issues in Death Attitudes* (1st ed., pp. 33–64). Psychology Press. https://doi.org/10.4324/9780203809679-8

Torok, M., Calear, A. L., Smart, A., Nicolopoulos, A., & Wong, Q. (2019). Preventing adolescent suicide: A systematic review of the efectiveness and change mechanisms of suicide prevention gatekeeping training programs for teachers and parents. *Journal of Adolescence, 73*, 100–112. https://doi.org/10.1016/j.adolescence.2019.04.005

Turecki, G., & Brent, D. A. (2016). Suicide and suicidal behaviour. *The Lancet, 387*(10024), 1227–1239. https://doi.org/10.1016/S0140-6736(15)00234-2

Ugbodaga, K. (2019). RCCG Gospel minister, Arowosaiye commits suicide. *PM News*. https://pmnewsnigeria.com/2019/05/15/rccg-gospel-minister-arowosaiye-commits-suicide/

Wang, Y.-P., De Berardis, D., Martinotti, G., & Giannantonio, M. D. (2018). Editorial: Understanding the complex phenomenon of suicide: From research to clinical practice. *Frontiers in Psychiatry, 9*(61), 1–4. https://doi.org/10.3389/fpsyt.2018.00061

Warigon, C. (2018). *Mental health slowly devouring the heart of society*. WHO Regional Office for Africa. https://www.afro.who.int/news/mental-health-slowly-devouring-heart-society

Wnuk, M. (2015). Religious-spiritual sources of hope and the meaning of life in alcohol co-dependent subjects receiving support in self-help groups. *Journal of Substance Use, 20*(3), 194–199. https://doi.org/10.3109/14659891.2014.896954

Woldemichael, M. T., Broesterhuizen, M., & Liègeois, A. (2013). Christian pastoral care and psychotherapy: A need for theoretical clarity. *Journal of Pastoral Care & Counseling, 67*(4), 1–13. https://doi.org/10.1177/154230501306700406