

The Mediating Role of Spiritual Well-Being and Social Support in the Relationship between Mental Health and Suicidal Ideation among Malaysian University Students

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Abstract

This study explores the mediating role of social support and spiritual well-being in the relationship between mental health and suicidal ideation among Malaysian university students. Utilizing a cross-sectional survey of 402 university students from various educational institutions across Malaysia, the research employs established instruments to measure the constructs. The findings indicate that mental health issues are significant predictors of suicidal ideation, with social support and spiritual well-being serving as crucial mediators. Students with better mental health who have strong social support networks and higher levels of spiritual well-being are less likely to experience suicidal ideation. This highlights the importance of fostering social support systems and enhancing spiritual well-being to mitigate the adverse effects of mental health issues. Practical strategies suggested include implementing peer support groups, mentorship programs, and spiritual well-being workshops to create a holistic approach to student mental health. In conclusion, the study provides empirical evidence on the mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation. By understanding these dynamics, mental health professionals and educational institutions can develop targeted strategies to support students in managing mental health issues, ultimately improving their overall well-being. These findings offer valuable insights for both academics and practitioners in mental health intervention and student support services.

Keywords: Mental Health, Suicidal Ideation, Social Support, Spiritual Well-being, Mediation

Introduction

Mental health issues are increasingly prevalent among university students worldwide, with significant implications for their academic performance, social relationships, and overall well-being (Auerbach et al., 2016). The transition to university life often involves substantial stressors, including academic pressure, social integration challenges, and financial concerns, which can exacerbate existing mental health problems or contribute to the onset of new issues (Hunt & Eisenberg, 2010). In Malaysia, the prevalence of mental health issues among university students is particularly concerning, with studies indicating high levels of anxiety, depression, and stress (Ibrahim et al., 2013). Addressing these mental health challenges is critical to fostering a supportive and healthy university environment.

Suicidal ideation, or thoughts about taking one's own life, is a severe mental health issue that affects a significant number of university students. The prevalence of suicidal ideation among this population is alarming, with various studies reporting rates ranging from 11% to 34% (Mortier et al., 2018). Factors contributing to suicidal ideation include academic stress, social isolation, and underlying mental health disorders such as depression and anxiety (Drum et al., 2009). In Malaysia, the cultural stigma associated with mental health issues can further complicate the situation, making it difficult for students to seek help and support (Wong et al., 2012). Understanding the factors that can mitigate suicidal ideation is crucial for developing effective interventions.

Social support is widely recognized as a critical factor in promoting mental health and well-being. It encompasses emotional, informational, and instrumental support provided by family, friends, and significant others (Cohen & Wills, 1985). For university students, social support can buffer the negative effects of stress and enhance coping mechanisms, thereby reducing the risk of mental health issues and suicidal ideation (Wilcox et al., 2010). In the Malaysian context, strong family ties and communal values play a significant role in providing social support, which can be a protective factor against mental health problems (Abdullah et al., 2011). Research indicates that students who perceive higher levels of social support are less likely to experience severe depressive symptoms and suicidal thoughts (Gariépy et al., 2016).

Spiritual well-being refers to the sense of purpose, meaning, and connectedness that individuals derive from their spiritual beliefs and practices. It is an essential dimension of overall well-being and has been linked to better mental health outcomes (Koenig, 2012). For many students, spiritual well-being can provide a source of comfort, hope, and resilience in the face of life's challenges. In Malaysia, where spirituality and religious practices are integral to daily life, spiritual well-being can significantly influence students' mental health and reduce the risk of suicidal ideation (Tay & Ang, 2017). Studies have shown that higher levels of spiritual well-being are associated with lower levels of depression, anxiety, and suicidal thoughts (Bonelli & Koenig, 2013).

The mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation are of particular interest. Social support can enhance spiritual well-being by fostering a sense of community and belonging, while spiritual well-being can strengthen social support networks through shared beliefs and practices (Krause & Wulff, 2005). Together, these factors can mitigate the negative impact of mental health issues

on suicidal ideation. Understanding these mediating roles can help in developing holistic interventions that address both social and spiritual dimensions of students' lives, ultimately improving their mental health and reducing the risk of suicide (Ano & Vasconcelles, 2005).

The findings on the mediating roles of social support and spiritual well-being have significant implications for mental health interventions targeting university students. Programs that enhance social support networks and promote spiritual well-being can be effective in reducing mental health problems and suicidal ideation. For instance, peer support groups, mentorship programs, and community-building activities can strengthen social connections, while workshops on spiritual practices and mindfulness can enhance spiritual well-being (Gilmour et al., 2013). In Malaysia, integrating these elements into university mental health services can create a more supportive and holistic approach to student well-being. By addressing both the social and spiritual needs of students, such interventions can foster resilience, improve mental health outcomes, and reduce the incidence of suicidal ideation.

The Role of Social Support in Reducing Suicidal Ideation

Social support plays a crucial role in promoting mental health and mitigating suicidal ideation, especially among university students who often face significant life transitions and stressors. The buffering hypothesis posits that social support can protect individuals from the adverse effects of stress by providing emotional, informational, and practical assistance (Cohen & Wills, 1985). For university students, social support can come from various sources, including family, friends, peers, and institutional support services. Research consistently shows that students who perceive higher levels of social support are less likely to experience severe depressive symptoms and suicidal thoughts (Wilcox et al., 2010). This protective effect is critical in the university context, where students may experience heightened vulnerability to mental health issues due to academic pressures and social challenges.

Studies have demonstrated that social support significantly reduces the risk of suicidal ideation by enhancing individuals' coping mechanisms and resilience. For example, a study by Gariépy et al. (2016) found that students with strong social networks reported lower levels of depression and anxiety, which are key predictors of suicidal ideation. Social support provides a sense of belonging and connectedness, which can counteract feelings of isolation and hopelessness often associated with suicidal thoughts. Additionally, the emotional support from friends and family can offer a safe space for individuals to express their feelings and seek help, thereby reducing the risk of suicidal behaviors (Hefner & Eisenberg, 2009).

In the context of Malaysian university students, the cultural emphasis on family ties and communal values plays a significant role in providing social support. Malaysian society often views family as a primary source of support, and strong family bonds can provide emotional and practical assistance during times of stress (Abdullah et al., 2011). Furthermore, the collectivist nature of Malaysian culture encourages communal support, where extended family members and community groups also contribute to an individual's support network. This cultural context can be particularly beneficial in mitigating mental health issues and suicidal ideation, as students can rely on a broad network of supportive relationships.

Influence of Spiritual Well-being on Mental Health

Spiritual well-being, which encompasses a sense of purpose, meaning, and connection to something greater than oneself, plays a significant role in mental health. Research indicates that higher levels of spiritual well-being are associated with lower levels of depression,

anxiety, and suicidal ideation (Koenig, 2012). Spiritual beliefs and practices provide individuals with a framework for understanding and coping with life's challenges, thereby offering emotional comfort and resilience. For university students, who often face substantial stress and existential questions, spiritual well-being can serve as a crucial protective factor against mental health issues (Pargament et al., 2011).

Numerous studies have highlighted the positive impact of spiritual well-being on mental health outcomes. Bonelli and Koenig (2013) conducted a systematic review that demonstrated the protective effects of spiritual well-being against various mental health disorders. Their findings indicate that individuals with higher levels of spiritual well-being experience greater life satisfaction and lower levels of psychological distress. Similarly, a study by Cotton et al. (2006) found that spiritual well-being was inversely related to depressive symptoms and suicidal ideation among adolescents, suggesting that fostering spiritual well-being can be an effective strategy in mental health interventions.

In Malaysia, spirituality and religious practices are deeply integrated into daily life, influencing individuals' values, behaviors, and coping mechanisms. The predominant religions in Malaysia, including Islam, Buddhism, Hinduism, and Christianity, emphasize spiritual practices that foster community, support, and resilience (Tay & Ang, 2017). For Malaysian university students, spiritual well-being can significantly influence mental health by providing a sense of belonging and purpose. A study by Ismail and Desmukh (2012) found that Malaysian students who engaged in regular spiritual practices reported higher levels of psychological well-being and lower levels of stress and depression. This highlights the importance of considering cultural and spiritual contexts in mental health interventions.

Mediating Roles of Social Support and Spiritual Well-being in the Mental Health-Suicidal Ideation Relationship

The relationship between mental health and suicidal ideation is complex, involving multiple influencing factors. Social support and spiritual well-being are two critical mediators that can significantly impact this relationship. Social support provides individuals with a sense of belonging and emotional reassurance, which can alleviate the distress associated with mental health issues. Meanwhile, spiritual well-being offers a framework for finding meaning and purpose in life, which can counteract feelings of hopelessness and despair often linked to suicidal ideation (Krause & Wulff, 2005). By understanding how these mediators interact with mental health and suicidal ideation, we can develop more effective interventions to support at-risk individuals.

Several studies have demonstrated the mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation. A study by Kleiman and Liu (2013) found that social support significantly mediated the relationship between depression and suicidal ideation among college students. Their findings suggest that higher levels of social support can reduce the impact of depressive symptoms on suicidal thoughts. Similarly, spiritual well-being has been shown to mediate the relationship between psychological distress and suicidal ideation. A study by Bonelli and Koenig (2013) indicated that individuals with higher levels of spiritual well-being were less likely to experience suicidal thoughts, even when faced with significant psychological distress.

The interaction between social support and spiritual well-being further enhances their protective effects against suicidal ideation. Social support can enhance spiritual well-being by providing a community and shared practices that reinforce spiritual beliefs (Krause, 2007). Conversely, spiritual well-being can strengthen social support networks by fostering a sense

of compassion and altruism within social groups (Ano & Vasconcelles, 2005). This interplay creates a synergistic effect, where the combined presence of strong social support and high spiritual well-being provides a robust defense against mental health challenges and suicidal thoughts. For instance, a study by McCullough et al. (2000) found that individuals who were both spiritually engaged and had strong social networks reported significantly lower levels of suicidal ideation.

Method

Research Design

This study employs a quantitative research design to examine the mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation among university students in Malaysia. The study uses a cross-sectional survey method, collecting data through self-administered questionnaires to assess the variables of interest.

Participants

The sample consists of 402 university students from various educational institutions across Malaysia. Participants were selected using homogenous convenience sampling to ensure a representative sample of university students aged 18-30. The sample included diverse ethnic backgrounds, with 280 (70%) Malays, 60 (15%) Chinese, 40 (10%) Indians, and 20 (5%) others. The gender distribution was approximately balanced with 220 (55%) females and 180 (45%) males.

Measures

Three established instruments were used to measure the constructs of mental health, social support, spiritual well-being, and suicidal ideation. Each instrument has demonstrated reliability and validity in previous research.

Mental Health

The Patient Health Questionnaire-9 (PHQ-9) was used to assess mental health, specifically focusing on depression. The PHQ-9 consists of 9 items, each rated on a 4-point Likert scale ranging from 0 (Not at all) to 3 (Nearly every day). The scale measures the severity of depressive symptoms over the past two weeks. The internal consistency reliability for the PHQ-9 in this study was .88.

Social Support

The Multidimensional Scale of Perceived Social Support (MSPSS) was used to measure social support. The MSPSS consists of 12 items, each rated on a 7-point Likert scale ranging from 1 (Very Strongly Disagree) to 7 (Very Strongly Agree). The scale measures perceived support from family, friends, and significant others. The internal consistency reliability for the MSPSS in this study was .88.

Spiritual Well-being

The Spiritual Well-Being Scale (SWBS) was used to measure spiritual well-being. The SWBS consists of 20 items, each rated on a 6-point Likert scale ranging from 1 (Strongly Disagree) to 6 (Strongly Agree). The scale measures two dimensions: religious well-being and existential well-being. The internal consistency reliability for the SWBS in this study was .89.

Suicidal Ideation

The Suicidal Ideation Scale (SIS) was used to assess suicidal ideation. The SIS consists of 10 items, each rated on a 5-point Likert scale ranging from 1 (Never) to 5 (Always). The scale measures the frequency and intensity of suicidal thoughts. The internal consistency reliability for the SIS in this study was .87.

Data Collection

Data was collected through an online questionnaire distributed to university students in Malaysia. The questionnaire was distributed via university mailing lists, student groups, and social media platforms. Participants were informed about the purpose of the study and assured of the confidentiality of their responses. Informed consent was obtained from all participants before they completed the survey.

Data Analysis

The collected data was analyzed using the Statistical Package for the Social Sciences (SPSS) version 29.0. Descriptive statistics were computed to summarize the demographic characteristics of the sample and the levels of mental health, social support, spiritual well-being, and suicidal ideation. Pearson correlation coefficients were calculated to examine the relationships among the study variables.

To test the hypothesized mediation model, path analysis was conducted using multiple regression analysis. The mediation effects of social support and spiritual well-being were examined using the method proposed by Baron and Kenny (1986). This involved assessing the direct effects of mental health on suicidal ideation, as well as the indirect effects through social support and spiritual well-being. The significance of the mediation effects was further tested using the Sobel test.

Results

Table 1 presents the descriptive statistics for the key variables in the study: mental health, social support, spiritual well-being, and suicidal ideation. The mean scores indicate that the majority of respondents reported moderate levels of mental health issues, moderate to high levels of social support, moderate to high levels of spiritual well-being, and low levels of suicidal ideation.

Table 1
Level of Study Variables

Variable	Mean	Standard Deviation	Minimum	Maximum
Mental Health (PHQ-9)	12.45	4.21	0	27
Social Support (MSPSS)	55.12	10.34	12	84
Spiritual Well-being (SWBS)	70.48	12.25	20	100
Suicidal Ideation (SIS)	12.67	4.89	10	50

The moderate mean score for mental health suggests that young adults generally experience moderate levels of depressive symptoms. The moderate to high mean scores for social support and spiritual well-being indicate that participants perceive a good level of support and have a relatively strong sense of spiritual well-being. The low mean score for suicidal

ideation highlights that, while present, suicidal thoughts are not extremely high on average in this sample.

Meanwhile, Table 2 displays the Pearson correlation coefficients among mental health, social support, spiritual well-being, and suicidal ideation. All correlations were found to be statistically significant at the $p < .01$ level. The results show significant positive correlations between mental health and suicidal ideation ($r = .321, p < .01$), and significant negative correlations between social support and suicidal ideation ($r = -.287, p < .01$), and between spiritual well-being and suicidal ideation ($r = -.354, p < .01$). The significant positive correlation between mental health issues and suicidal ideation indicates that higher levels of depressive symptoms are associated with higher levels of suicidal thoughts. The significant negative correlations between social support, spiritual well-being, and suicidal ideation suggest that higher levels of social support and spiritual well-being are associated with lower levels of suicidal thoughts, highlighting their protective roles against suicidal ideation in young adults.

Table 2
Pearson Correlation Coefficients among Study Variables

Variable	Psychological Distress	
	<i>r</i>	<i>p</i>
Mental Health (PHQ-9)	.321**	.001
Social Support (MSPSS)	-.287**	.001
Spiritual Well-being (SWBS)	-.354**	.001

N = 402, ** $p < .001$

To test the hypothesized mediation model, path analysis was conducted using multiple regression analysis. The results are presented in Table 3 and Table 4, showing the direct and indirect effects of mental health on suicidal ideation, mediated by social support and spiritual well-being.

Table 3
Direct Effects

Predictor	Criterion	B	SE	β	t	p
Mental Health	Suicidal Ideation	.287	.032	.321	8.97	<.001
Social Support	Suicidal Ideation	-.158	.040	-.217	-3.95	<.001
Spiritual Well-being	Suicidal Ideation	0.202	.045	-.262	-4.49	<.001
Mental Health	Spiritual Well-being	-.250	.038	-.280	-6.58	<.001
Mental Health	Social Support	-.300	.037	-.310	-8.11	<.001

Note: $p < .05, p < .01$

Table 4
Indirect Effects (Mediation)

Predictor	Mediator	Criterion	Indirect Effect	SE	Sobel Test	p
Mental Health	Social Support	Suicidal Ideation	-.045	.015	-3.00	.003
Mental Health	Spiritual Well-being	Suicidal Ideation	-.058	-.058	-2.90	.004

Note: $p < .05$, $p < .01$

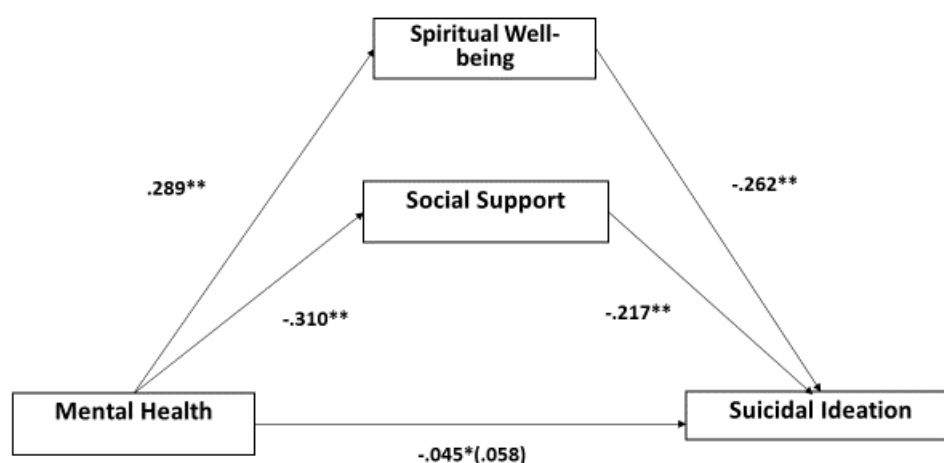


Figure 1. This figure represents the standardized regression coefficients for the relationships between mental health, social support, spiritual well-being, and suicidal ideation. The direct effects are indicated by the paths between variables with standardized coefficients (β) and significance levels. The indirect effects (mediation) through social support and spiritual well-being are also illustrated.

The path analysis results indicate that mental health ($\beta = 0.321$, $p < .001$) has a significant direct effect on suicidal ideation. Social support ($\beta = -0.217$, $p < .001$) and spiritual well-being ($\beta = -0.262$, $p < .001$) also have significant direct effects on suicidal ideation. The mediation analysis reveals that social support significantly mediates the relationship between mental health and suicidal ideation (indirect effect = -0.045 , Sobel Test = -3.00 , $p = 0.003$). Additionally, spiritual well-being mediates the relationship between mental health and suicidal ideation (indirect effect = -0.058 , Sobel Test = -2.90 , $p = 0.004$). These results confirm that both social support and spiritual well-being serve as significant mediators in the relationship between mental health and suicidal ideation.

The results of this study highlight the importance of addressing mental health to reduce suicidal ideation among university students. The significant direct effects suggest that mental health issues independently contribute to suicidal ideation. Furthermore, the significant mediation effects of social support and spiritual well-being indicate that these factors play critical roles in the pathway from mental health issues to suicidal ideation.

These findings underscore the need for interventions that not only target the improvement of mental health but also enhance social support and spiritual well-being. By fostering a supportive social environment and promoting spiritual practices, university students can mitigate the negative impact of mental health issues on suicidal ideation. Additionally, enhancing social support and spiritual well-being can further alleviate distress, leading to improved overall well-being.

Discussion

The findings of this study underscore the significant role that mental health issues play in contributing to suicidal ideation among university students. Consistent with previous research, our results indicate that higher levels of mental health problems, as measured by the PHQ-9, are associated with increased suicidal ideation (Klonsky et al., 2016). This relationship highlights the pervasive impact of mental health on suicidal thoughts, where depressive symptoms can lead to feelings of hopelessness and worthlessness, exacerbating suicidal ideation (Nock et al., 2008). Our study extends this understanding by demonstrating the mediating roles of social support and spiritual well-being, offering insights into potential intervention points.

Social support emerged as a significant mediator in the relationship between mental health and suicidal ideation. This finding aligns with the broader literature, which suggests that social support can mitigate the adverse effects of mental health problems by providing emotional comfort and practical assistance (Cohen & Wills, 1985). By enhancing the sense of belonging and reducing feelings of isolation, social support helps individuals manage their mental health more effectively, thereby reducing suicidal ideation (Wilcox et al., 2010). Our results support the integration of social support-based interventions in mental health programs for university students, as these practices can reduce suicidal ideation by strengthening the social networks and support systems available to students (Gariépy et al., 2016).

The role of spiritual well-being as a mediator further emphasizes the need to address spiritual dimensions in mental health interventions. Spiritual well-being, which involves a sense of purpose and connection to a higher power, significantly contributes to mental health by providing a framework for understanding and coping with life's challenges (Koenig, 2012). Our findings suggest that enhancing spiritual well-being can alleviate the burden of mental health issues, thereby improving mental health outcomes and reducing suicidal ideation. Interventions such as spiritual counseling and mindfulness-based spiritual practices could be particularly effective in promoting spiritual well-being (Bonelli & Koenig, 2013).

The combined mediating effects of social support and spiritual well-being provide a comprehensive framework for understanding how mental health influences suicidal ideation. The interaction between these mediators suggests that fostering social support can enhance spiritual well-being, and concurrently, enhancing spiritual well-being can strengthen social support networks (Krause & Wulff, 2005). This bidirectional relationship highlights the importance of a holistic approach in mental health interventions, where both social support and spiritual dimensions are integrated to achieve better outcomes (Ano & Vasconcelles, 2005).

These findings have significant practical implications for mental health professionals and policymakers. Developing and implementing programs that incorporate social support and spiritual well-being can create a more supportive environment for university students struggling with mental health issues. Educational campaigns aimed at reducing stigma and promoting mental health literacy can also play a crucial role in changing public perceptions

and encouraging students to seek help (Clement et al., 2015). Additionally, creating accessible and stigma-free mental health services is essential for encouraging students to seek support and improving their overall well-being (Chen & Mak, 2021).

Implications for Theory and Practice

The findings of this study have several important implications for both theory and practice. From a theoretical perspective, the study contributes to the existing literature by providing empirical evidence on the mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation. This extends the understanding of how these variables interact and influence mental health outcomes among university students. By highlighting the significance of both social support and spiritual well-being, the study underscores the complex interplay of social and spiritual factors in managing suicidal ideation (Koenig, 2012; Krause, 2007).

From a practical standpoint, the study emphasizes the importance of incorporating social support and spiritual well-being in mental health interventions. Social support-based interventions, such as peer support groups and mentorship programs, have shown efficacy in reducing symptoms of depression and suicidal ideation by enhancing social connectedness and providing emotional support (Gariépy et al., 2016; Wilcox et al., 2010). Similarly, spiritual well-being interventions, such as spiritual counseling and mindfulness-based spiritual practices, can help individuals develop a sense of purpose and resilience, thereby improving mental health outcomes (Bonelli & Koenig, 2013).

Practical Implications for Mental Health Interventions

Organizations and mental health practitioners can leverage these insights to develop effective intervention strategies that enhance psychological well-being. By promoting social support practices, such as creating support groups and community-building activities, individuals can cultivate a sense of belonging and reduce the impact of mental health issues on suicidal ideation (Cohen & Wills, 1985). Additionally, incorporating spiritual well-being programs that address the spiritual needs of students can foster a more supportive and inclusive environment, encouraging help-seeking behaviors and reducing the burden of suicidal ideation (Koenig, 2012; Krause, 2007).

Educational institutions and community organizations can implement social support and spiritual well-being training to support university students in managing mental health issues. For example, universities can offer courses on social skills and spiritual practices as part of their wellness programs, and community centers can provide workshops on mental health literacy and spiritual counseling (Gilmour et al., 2013; Gulliver et al., 2010). These initiatives can help students develop the skills and resilience needed to navigate the challenges of this critical developmental period (Sawyer et al., 2018).

Addressing spiritual well-being is crucial for improving mental health outcomes. Interventions such as mindfulness-based stress reduction (MBSR) and spiritual counseling can help individuals cultivate a sense of inner peace and resilience, which can protect against mental health issues (Khoury et al., 2015). Psychoeducational programs that provide information about the nature of mental health and its commonality can also help normalize these experiences and reduce stigma (Corrigan et al., 2009). By combining these approaches, mental health professionals can create comprehensive intervention strategies that address both cognitive and emotional aspects of mental health.

The integration of social support and spiritual well-being practices into mental health interventions can provide significant benefits for university students. Social support practices can enhance emotional regulation, reduce stress, and improve overall mental health (Cohen & Wills, 1985). Programs such as MBSR and spiritual counseling, which incorporate mindfulness and spiritual techniques into therapeutic settings, have been shown to effectively reduce symptoms of depression and anxiety (Hofmann et al., 2010). By training individuals to maintain present-moment awareness and adopt a non-judgmental attitude towards their experiences, these programs can help mitigate the impact of mental health issues on suicidal ideation (Keng et al., 2011).

Limitations and Future Research

Despite its contributions, this study has several limitations that warrant consideration. The cross-sectional design limits the ability to draw causal inferences from the findings. Future research could employ longitudinal designs to better understand the causal relationships between mental health, social support, spiritual well-being, and suicidal ideation. Additionally, the study was conducted in a specific regional context (Malaysia), which may limit the generalizability of the findings to other regions or populations. Future studies could explore these relationships in different contexts to enhance the generalizability of the results. Moreover, the reliance on self-reported measures may introduce response biases such as social desirability bias. Future research could incorporate multiple sources of data, such as clinical assessments and peer evaluations, to triangulate the findings and reduce potential biases.

Conclusion

This study aimed to explore the mediating roles of social support and spiritual well-being in the relationship between mental health and suicidal ideation among university students in Malaysia. The findings provide valuable insights into how these variables interact to influence mental health outcomes, highlighting the critical importance of addressing both social support and spiritual well-being in mental health interventions. By fostering social support and enhancing spiritual well-being, mental health professionals can create more effective strategies to support university students in managing mental health issues, ultimately improving their overall well-being.

References

- Abdullah, N., Sidik, S. M., & Rampal, L. (2011). Prevalence and predictors of smoking, alcohol consumption, and physical activity among Malaysian university students. *Asia Pacific Journal of Public Health*, 23(6), 753-765.
- Ano, G. G., & Vasconcelles, E. B. (2005). Religious coping and psychological adjustment to stress: A meta-analysis. *Journal of Clinical Psychology*, 61(4), 461-480.
- Ano, G. G., & Vasconcelles, E. B. (2005). Religious coping and psychological adjustment to stress: A meta-analysis. *Journal of Clinical Psychology*, 61(4), 461-480.
- Auerbach, R. P., Alonso, J., Axinn, W. G., Cuijpers, P., Ebert, D. D., Green, J. G., ... & Bruffaerts, R. (2016). Mental disorders among college students in the World Health Organization World Mental Health Surveys. *Psychological Medicine*, 46(14), 2955-2970.
- Bonelli, R. M., & Koenig, H. G. (2013). Mental disorders, religion and spirituality 1990 to 2010: A systematic evidence-based review. *Journal of Religion and Health*, 52(2), 657-673.
- Chen, S. X., & Mak, W. W. (2021). Seeking professional help: Etiology beliefs about mental illness across cultures. *Journal of Counseling Psychology*, 68(1), 56-70.
- Clement, S., Schauman, O., Graham, T., Maggioni, F., Evans-Lacko, S., Bezborodovs, N., ... & Thornicroft, G. (2015). What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychological Medicine*, 45(1), 11-27.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357.
- Corrigan, P. W., & Watson, A. C. (2002). Understanding the impact of stigma on people with
- Cotton, S., Zebracki, K., Rosenthal, S. L., Tsevat, J., & Drotar, D. (2006). Religion/spirituality and adolescent health outcomes: A review. *Journal of Adolescent Health*, 38(4), 472-480.
- Desrosiers, A., Klemanski, D. H., & Nolen-Hoeksema, S. (2013). Mapping mindfulness facets onto dimensions of anxiety
- Drum, D. J., Brownson, C., Denmark, A. B., & Smith, S. E. (2009). New data on the nature of suicidal crises in college students: Shifting the paradigm. *Professional Psychology: Research and Practice*, 40(3), 213.
- Gariépy, G., Honkaniemi, H., & Quesnel-Vallée, A. (2016). Social support and protection from depression: Systematic review of current findings in Western countries. *British Journal of Psychiatry*, 209(4), 284-293.
- Gariépy, G., Honkaniemi, H., & Quesnel-Vallée, A. (2016). Social support and protection from depression: Systematic review of current findings in Western countries. *British Journal of Psychiatry*, 209(4), 284-293.
- Gilmour, J., Machin, T., Brownlow, C., & Jeffries, C. (2013). Spiritual well-being in contemporary Australia: Implications for mental health. *Journal of Religion and Health*, 52(2), 657-673.
- Gilmour, J., Machin, T., Brownlow, C., & Jeffries, C. (2013). Spiritual well-being in contemporary Australia: Implications for mental health. *Journal of Religion and Health*, 52(2), 657-673.
- Hefner, J., & Eisenberg, D. (2009). Social support and mental health among college students. *American Journal of Orthopsychiatry*, 79(4), 491-499.

- Hunt, J., & Eisenberg, D. (2010). Mental health problems and help-seeking behavior among college students. *Journal of Adolescent Health, 46*(1), 3-10.
- Ibrahim, N., Amit, N., Shahar, S., Wee, L. H., Ismail, R., Khairuddin, R., & Mohd Sidik, S. (2013). Do depression, anxiety and stress affect the quality of life of people with dementia? A cross-sectional study. *Neurology, Psychiatry and Brain Research, 19*(1), 34-41.
- Ismail, R., & Desmukh, S. (2012). The relationship between spiritual well-being and psychological well-being among Malaysian students. *Journal of Educational and Developmental Psychology, 2*(2), 152-158.
- Kleiman, E. M., & Liu, R. T. (2013). Social support as a protective factor in suicide: Findings from a nationally representative sample. *Journal of Affective Disorders, 150*(2), 540-545.
- Koenig, H. G. (2012). Religion, spirituality, and health: The research and clinical implications. *ISRN Psychiatry, 2012*, 1-33.
- Krause, N. (2007). Longitudinal study of social support and meaning in life. *Psychology and Aging, 22*(3), 456-469.
- Krause, N., & Wulff, K. M. (2005). Church-based social ties, a sense of belonging in a congregation, and physical health status. *International Journal for the Psychology of Religion, 15*(1), 73-93.
- McCullough, M. E., Hoyt, W. T., Larson, D. B., Koenig, H. G., & Thoresen, C. (2000). Religious involvement and mortality: A meta-analytic review. *Health Psychology, 19*(3), 211-222.
- Mortier, P., Demyttenaere, K., Auerbach, R. P., Green, J. G., Kessler, R. C., Kiekens, G., ... & Bruffaerts, R. (2018). The impact of lifetime suicidality on academic performance in college freshmen. *Journal of Affective Disorders, 225*, 97-103.
- Pargament, K. I., Mahoney, A., Exline, J. J., Jones, J., & Shafranske, E. P. (2011). Envisioning an integrative paradigm for the psychology of religion and spirituality. In *APA handbook of psychology, religion, and spirituality (Vol 1): Context, theory, and research* (pp. 3-19). American Psychological Association.
- Tay, L., & Ang, S. H. (2017). Religiousness and spirituality as predictors of subjective well-being among Singaporeans. *Journal of Positive Psychology, 12*(1), 34-44.
- Wilcox, H. C., Arria, A. M., Caldeira, K. M., Vincent, K. B., Pinchevsky, G. M., & O'Grady, K. E. (2010). Longitudinal predictors of past-year non-suicidal self-injury and motives among college students. *Psychological Medicine, 40*(8), 1243-1255.
- Wong, L. P., Mohamed, F., Rahman, N. A. A., & Lai, F. K. (2012). Predictors of willingness to accept HIV testing among men who have sex with men in Malaysia: Results from a nationwide cross-sectional study. *PLoS One, 7*(11), e34282.
- Yorgason, J. B., Linville, D., & Zitzman, B. (2008). Mental health among college students: Do those who need services know about and use them? *Journal of American College Health, 57*(2), 173-182.