









Suicide and Self-harm in Nigeria: a Patient and Public Involvement (PPI) activity to co-develop Learning Through Play plus Culturally adapted Manual Assisted brief Psychological Intervention for refugee mothers

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Introduction

- Maternal mental health constitutes an integral part of global health burden disease (Jidong et al., 2021).
 - Depressed mothers are emotionally distressed with high risk of self-harm.
 - Postnatal depression is more challenging for refugee mothers
 - Children lack adequate developmental support due to mothers' postnatal depression.
- Our PPI activities explore the possibilities of co-developing Learning Through Play plus Culturally adapted Manual Assisted Brief Psychological Intervention (LTP+CMAP) for Refugee Mothers with History of Self-harm in Nigeria
- LTP+CMAP is evidence-based, ecologically friendly, co-developed, manualised and sustainable. It can be delivered by non-mental health specialists such as trained community-healthworkers who are more culturally knowledgeable (Notiar et al., 2021).

PPI Research Question

- How can we reflect the patients and public needs/perspectives in the LTP+CMAP guide?
- What are the cultural appropriateness, possible best practices and ways to improve LTP+CMAP guide?

Aims/Objectives

- To implement recommendations that will be made during the PPI events.
- To co-design and develop the LTP+CMAP guide to reflect the Nigerian cultural values.

Method Design Instruments Sample **PPI** activities to • N = 40 refugee Audio digital facilitate mother-child recorder LTP+CMAP's: (e.g., for pairs note taking) Consultations Collaborations User-controlled

Inclusion Criteria

Only refugee mothers who:

- are 18 years+ from the designated Nigerian hostcommunities.
- have a child/children between ages 0-6 years.
- have history of self-harm or suicidal ideation.
- are experiencing postnatal depression.
- able to give informed consent for the PPI activities.

Research Team

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PPI Chart

Consultations:

What are the patients and public views regarding:

- (a) the LTP component?
- what could be improved?

(b) CMAP project?

- what could be improved?
 How might we improve on the proposed project?
 - planning,
 - execution and
 - completion.

The three aspects of our PPI focus

Collaborations:

How can we (e.g., service-users, the public and researchers) work together on the LTP+CMAP project?

User-controlled:

 What are the modalities for participatory action research to co-develop and validate the LTP+CMAP intervention materials?

 How do they think refugee mothers/carers could be in-charge of developing and determining how this intervention is plan and carried out?

Anticipated Outcomes

- The proposed PPI events will help us evaluate and prioritise our areas of focus regarding the LTP+CMAP project and be beneficial in the amendments of the proposed intervention plans and designs.
- We will collaborate continuously with the PPI network at different stages of developing/implementing LTP+CMAP. For example, our PPI network would continue to help evaluate the LTP+CMAP guide and be invited to offer inputs about the next steps.

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Selected References

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