# Adaptation and feasibility assessment of a primary suicide prevention intervention for school adolescents in Nigeria

Submission date	Recruitment status	[X] Prospectively registered
19/11/2025	Not yet recruiting	Protocol
Registration date	Overall study status	Statistical analysis plan
24/11/2025	Ongoing	☐ Results
Last Edited	Condition category	Individual participant data
24/11/2025	Mental and Behavioural Disorders	[X] Record updated in last year

## Plain English summary of protocol

Background and study aims

Many adolescents in Nigeria experience psychological distress and suicidal thoughts but often lack access to support. This study aims to test whether it is feasible to adapt and deliver a school-based programme called Youth Aware of Mental Health (YAM) in Lagos secondary schools. YAM has been effective in other countries, and this study will determine whether we can successfully conduct a larger study in Nigeria to test whether it helps reduce suicidal behaviour among students.

This is a feasibility study – the main goal is to test whether it is possible to:

- 1. Recruit schools and students successfully
- 2. Deliver the adapted YAM programme as planned
- 3. Keep students engaged throughout the study
- 4. Collect reliable information about students' wellbeing at 3 months
- 5. Identify any problems that need to be fixed before a larger study

If this study shows it is feasible, we will plan a larger study to definitively test whether YAM helps Nigerian adolescents, potentially with a longer follow-up period.

## Who can participate?

Students aged 13–17 years in selected public secondary schools in Lagos whose parents or guardians provide consent, and who provide assent.

## What does the study involve?

Schools will be randomly placed into one of two groups. One group will receive the adapted YAM programme delivered over five sessions during the school day. The other group will continue standard health education and display suicide awareness posters. All students will complete questionnaires at the beginning of the study, after 3 months, and after 6 months.

What are the possible benefits and risks of participating? Students may gain improved emotional skills, knowledge about mental health, and confidence to seek help. Some may feel uncomfortable discussing difficult topics, but trained staff will provide support, and any serious concerns will be referred for further help using a safety protocol.

Where is the study run from?

The study is being conducted in public secondary schools in Lagos State.

When is the study starting and how long will it run?

The study is expected to start in early 2026 and run for approximately 7 months (recruitment through 3-month follow-up completion). Each student will participate for approximately 3-4 months.

Who is funding the study?

The study is funded by UK Research and Innovation (Medical Research Council) with project reference MR/Y01958X/1

Who is the main contact?

Prof. Abiodun Adewuya, abiodun.adewuya@lasucom.edu.ng

## Contact information

## Type(s)

Principal investigator, Scientific, Public

#### Contact name

Prof Abiodun Adewuya

#### **ORCID ID**

https://orcid.org/0000-0002-7611-6953

#### Contact details

Dept of Behavioural Medicine Lagos State University College of Medicine Ikeja Lagos Nigeria 10010 +234 (0)8055617605 abiodun.adewuya@lasucom.edu.ng

## Additional identifiers

## **Project Reference**

MR/Y01958X/1

# Study information

## Scientific Title

Adaptation and feasibility assessment of a primary suicide prevention intervention for school adolescents in Nigeria: the Suicide PREvention for School ADolescents (SPREAD) study

## Acronym

**SPREAD** 

## **Study objectives**

Primary objective:

To assess the feasibility of conducting a definitive cluster RCT

## Specific feasibility objectives:

- 1. Evaluate recruitment feasibility
- 2. Assess retention rates
- 3. Determine intervention fidelity
- 4. Examine intervention acceptability
- 5. Assess implementation barriers/facilitators
- 6. Estimate parameters for future trial
- 7. Assess delivery costs
- 8. Evaluate data collection procedures

## **Exploratory objectives:**

Obtain preliminary estimates of intervention effects on suicidal behaviour and secondary outcomes at 3 months

## Ethics approval required

Ethics approval required

## Ethics approval(s)

approved 04/11/2024, LASUTH Health Research Ethics Committee (Lagos State University Teaching Hospital (LASUTH) 1-5, Oba Akinjobi Way Ikeja, Lagos, 10010, Nigeria; +234 (0)1-4710670; dcst@lasuth.org), ref: LREC/06/10/2656

## Primary study design

Interventional

#### Allocation

Randomized controlled trial

## Masking

Blinded (masking used)

#### Control

Active

#### **Assignment**

Parallel

## **Purpose**

Prevention

## Study type(s)

Health condition(s) or problem(s) studied

Suicidal behaviour, self-harm, adolescent mental health

## **Interventions**

Intervention arm (YAM Project):

Participants will receive a culturally adapted Youth Aware of Mental Health (YAM) programme comprising five 3-hour sessions delivered over 5 consecutive weeks by trained facilitators. Sessions will include role-play-based learning, guided discussions, scenario cards adapted to the Nigerian context, and take-home materials. A safety and referral protocol will be followed for any student who expresses suicidal intent.

## Control arm (Enhanced usual practice):

Participants will receive the standard health education curriculum plus the placement of suicide awareness posters in classrooms. No YAM content, role-plays, or facilitator-led sessions will be delivered.

## Randomisation and follow-up:

Schools will be randomised 1:1 using computer-generated cluster randomisation stratified by school size. Baseline data collection will occur before intervention delivery. Follow-up assessments will take place at 3 months and 6 months.

## Total duration of participation:

Approximately 5 months (including intervention delivery period of 5 weeks and 3-month follow-up).

## Intervention Type

Behavioural

## Primary outcome(s)

- 1. Recruitment rate (reach) measured using school recruitment rate: proportion of approached schools agreeing to participate (target:  $\geq$ 60%); student recruitment rate: proportion of eligible students providing consent/assent (target:  $\geq$ 70%) at during recruitment period
- 2. Retention rate measured using follow-up completion rate (target: ≥75%) at 3 months post-intervention (T1) Primary endpoint
- 3. Implementation fidelity measured using proportion of core YAM content delivered (target: ≥80%), quality of delivery assessed via observation checklist at during intervention delivery
- 4. Intervention acceptability measured using student satisfaction scores (target: ≥70% rating "satisfied" or "very satisfied"), facilitator acceptability ratings at 3 months post-intervention via surveys and qualitative interviews
- 5. Intervention adherence measured using student attendance rate across five sessions (target: ≥75%) at during intervention delivery
- 6. Data collection feasibility measured using completeness of outcome measures (target: ≥85% item completion), time required for data collection at baseline and 3-month follow-up
- 7. Implementation barriers and facilitators measured using qualitative interviews using CFIR constructs at 3 months post-intervention (30-40 stakeholder interviews)

8. Parameter estimation for future trial measured using Standard deviations for continuous outcomes, intraclass correlation coefficients (ICCs) for cluster design, preliminary effect size estimates (with 95% CIs) at 3 months post-intervention

## Key secondary outcome(s))

- 1. Depression and anxiety symptoms measured using Revised Child Anxiety and Depression Scale, 25-item short version (RCADS-25) at Baseline (T0), 3 months (T1), 6 months (T2)
- 2. Suicide literacy (knowledge about suicide) measured using Literacy of Suicide Scale short form (LOSS) at Baseline (T0), 3 months (T1), 6 months (T2)
- 3. Attitudes toward suicide measured using Attitudes Toward Suicide Scale (ATS) at Baseline (T0), 3 months (T1), 6 months (T2)
- 4. Stigma of suicide measured using Stigma of Suicide Scale (SOSS) at Baseline (T0), 3 months (T1), 6 months (T2)
- 5. Self-esteem measured using Rosenberg Self-Esteem Scale (RSES) at Baseline (T0), 3 months (T1), 6 months (T2)
- 6. Help-seeking Intentions measured using General Help-Seeking Questionnaire (GHSQ) at Baseline (T0), 3 months (T1), 6 months (T2)
- 7. Actual help-seeking behaviours measured using Actual Help-Seeking Questionnaire (AHSQ) at Baseline (T0), 3 months (T1), 6 months (T2)
- 8. Health service utilisation and costs measured using Client Service Receipt Inventory (CSRI) adapted for Nigerian context at Baseline (T0), 6 months (T2)
- 9. Implementation outcomes (YAM schools only) measured using RE-AIM framework indicators using mixed methods at During intervention delivery (months 20-22) and post-intervention.

## Completion date

31/08/2026

# **Eligibility**

## Key inclusion criteria

School-level:

- 1. Public co-educational secondary schools in Lagos State, Nigeria
- 2. Minimum enrolment of 600 students across all classes
- 3. At least 6 classes with students aged 13-17 years, each containing minimum 20 students
- 4. School leadership agreement to participate (documented through signed MoU)
- 5. Adequate physical space for conducting group activities

#### Student-level:

- 1. Enrolled in participating school
- 2. Aged 13-17 years
- 3. Able to understand English sufficiently to participate in group activities and complete questionnaires
- 4. Parental consent and student assent provided

## Healthy volunteers allowed

Yes

## Age group

Child

## Lower age limit

13 years

## Upper age limit

17 years

#### Sex

All

## Total final enrolment

0

## Key exclusion criteria

School-level:

- 1. Schools currently implementing structured mental health or suicide prevention programmes
- 2. Schools planning major transitions (relocations, leadership changes, infrastructure projects) during the study period
- 3. Schools participating in other research projects creating competing demands or contamination risks

#### Student-level:

- 1. Severe cognitive impairment or developmental disability precluding meaningful participation in group-based curriculum
- 2. Active psychotic symptoms requiring immediate clinical intervention
- 3. Current school suspension or expulsion

## Date of first enrolment

01/02/2026

## Date of final enrolment

30/03/2026

# **Locations**

## Countries of recruitment

Nigeria

## Study participating centre 10 secondary schools in Lagos State, Nigeria

-

Nigeria

# Sponsor information

## Organisation

Lagos State University College of Medicine

# Funder(s)

Funder type

#### **Funder Name**

Medical Research Council

## Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

## **Funding Body Type**

Government organisation

## **Funding Body Subtype**

National government

## Location

**United Kingdom** 

# **Results and Publications**

## Individual participant data (IPD) sharing plan

Individual participant data (IPD) will be made available upon reasonable request to the Principal Investigator after completion of the study and publication of main results, subject to appropriate data sharing agreements and ethical approval.

## IPD sharing plan summary

Available on request