and 27% prevalence for psychological distress, depression, and anxiety. The systematic review investigated COVID-19-related stress, suicidal ideation, and self-harm thoughts among low- and lower-middle-income countries (LLMICs).

Methods. We search four electronic databases (PsycINFO, Medline, Embase, and PubMed). Quantitative studies, including both published and grey literature, from LLMICs focused on the prevalence of suicidal ideation or psychological distress during COVID-19 were included. Qualitative studies, non-English studies without full-text English translation, meta-analysis, commentary, books, and discussion articles were excluded.

Results. 1157 titles and abstracts were screened for inclusion and exclusion, resulting in 79 full-text articles. After full text screening, 11 articles were included. In Bangladesh, 12.8% of university students reported suicidal ideation (SI), while 19% of young adults had SI, and 18.5% reported suicidal planning. In addition to this, in Iran, 12.8% of pregnant women and in the Philippines, 24.9% of the general population reported SI. Mental health conditions like depression and anxiety, female gender, younger age groups, economic loss or financial stress, fear of COVID-19 infection, lack of social support, family problems, lower education levels, smoking, and substance use are identified as risk factors. Moreover, anosmia and dysgeusia symptoms were associated with a 30–80% increased risk of transitioning to suicidal ideation or depression in India. A study from Nepal reported a 44% increase in suicide attempts during lockdown compared with pre-pandemic periods in Nepal.

Conclusion. The findings of this review suggest that the impact of the COVID-19 pandemic on mental health in LLMICs is substantial. In addition to the increased risk of SI and suicide attempts, there was a significant rise in depression and SI associated with anosmia and dysgeusia symptoms. These results underscore the urgent need for increased psychosocial support in LLMICs to address the growing mental health burden caused by the pandemic. Moreover, understanding the long-term effects of the pandemic is crucial for developing effective interventions and support systems. Further research is needed to examine the lasting impact of the pandemic on mental well-being and identify future strategies.

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Assessing the Efficacy of a Brief Universal Family Skills Program on Child Behaviour and Family Functioning in Families in Gilgit Baltistan, Pakistan

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Aims. The burden of mental health difficulties is a global problem and preventing them from childhood is paramount. Children living in challenged and underserved settings can suffer various harmful lifelong consequences including alcohol and substance abuse, low self-esteem, health issues, poor school performance, self-harm and suicide. This study aims to assess the feasibility, acceptability and efficacy of the culturally adapted Strong Families program in improving child behaviour and family functioning in families living in a challenged setting i.e. Gilgit-Baltistan (GB), Pakistan.

Methods. This is a two-arm, multisite feasibility randomised controlled trial with 90 families (n = 45 in intervention, and n = 45 in waitlist group) including a female primary caregiver (mostly mother) and at least one of their children between the age of 8–15 years in three districts of GB. There will be three raters' blind assessments: at baseline, week 2, and 6 weeks after Strong Families Program sessions.

Results. Strong Families Program is a brief evidence-based prevention programme designed to improve parenting skills, child well-being and family mental health. The primary outcome measures include the feasibility of Strong Families, as determined by families' recruitment, attendance rates, and program completeness (mean number of sessions attended, attrition rates). Additionally, purposefully selected participants, including up to 5 caregivers from each study site, researchers, and facilitators delivering the intervention, will be interviewed. Descriptive statistics will be used to analyse primary and secondary outcomes. The process evaluation will be conducted in terms of program context, reach, fidelity, dose delivered and received, implementation, and recruitment.

Conclusion. The findings from this feasibility trial hold the potential to carry out the large multicentre trial of clinical and cost-effectiveness and scale-up across Pakistan and other similar settings to meaningfully impact child behaviour and family dynamics in culturally diverse contexts.

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Culturally Adapted School-Based Suicide Prevention Program for Pakistani Adolescents: Feasibility, Acceptability, and Preliminary Outcomes

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Aims. Suicide is one of the leading causes of death among young people. For adolescents, schools are considered as the best place to identify and respond to youth suicide risk but evidence on culturally sensitive, school-based suicide prevention programs is limited in low-resource settings such as Pakistan. This study aims to explore the perspectives of students, parents, teachers, and general practitioners regarding cultural adaptation, participation experiences, identified areas for improvement, and recommendations for scaling up the school-based suicide prevention program in Pakistan.

Methods. This qualitative study was nested in a pilot randomized controlled trial that aimed at exploring the feasibility, acceptability and preliminary effectiveness of three suicide prevention interventions: (1) Linking Education and Awareness of Depression and Suicide-LEADS training for students (12–17 years), (2) Question-Persuade-Refer (QPR) training for teachers and parents and (3) Professional screening of at-risk students (ProfScreen) for health practitioners. A total of 8 focus group discussion (FGDs)

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were conducted at pre- and post-intervention stage with each type of stakeholder (students, teachers, parents and health professionals) by trained qualitative researchers using the semi-structured topic guides. Each FGDs involved a detailed presentation on intervention, sharing videos and educational posters.
Results. As a result of pre-intervention FGDs, adaptations were made in the content of the interventions and were further refined through consultations with Patient and Public Involvement and Engagement group. All stakeholders who participated in post-intervention FGDs marked this suicide prevention program as feasible, acceptable and helpful in both identifying the risk of and preventing self-harm and suicide among young individuals, while also enhancing treatment pathways. Stakeholders perceived the interventions as valuable in augmenting knowledge about mental health, understanding the impact of mental health challenges on functioning, reducing stigma, and providing stakeholders with the necessary skills to identify and guide at-risk individuals. Teachers and parents endorsed the importance of discussing issues with children. Improvement in clinical practice of clinicians and teaching practice of teachers as well as understanding others' behaviors were also reported.
Conclusion. This study highlights potential role of culturally adapted school-based youth suicide prevention program for settings where rates of suicide are high and there are limited mental healthcare resources in addition to limited access to healthcare. School-based suicide prevention program is perceived as helpful in improving knowledge, attitudes, and help-seeking behaviours in adolescents.

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Culturally Adapted Manual Assisted Problem-Solving Intervention for Older Adults With Suicidal Ideation (E-CMAP): A Study Protocol From Pakistan

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Aims. Suicide poses a significant public health issue, and the presence of suicidal thoughts stands out as a prominent risk factor, highlighting the importance of addressing this aspect for early intervention and prevention efforts. While older adults face an elevated risk of attempted suicide, research in this domain is currently constrained. This study aims to enhance and evaluate the efficacy of an E-CMAP (Culturally Manual Assisted psychological intervention for Elderly) in mitigating suicidal ideation among individuals aged 55 years and older in Pakistan.
Methods. The study will be carried out in 2 phases. Phase 1 is cultural adaptation and refinement of the intervention and phase 2 is exploratory randomised control trial. In Phase 1, focus groups were conducted (N = 2) with Health professionals and service users and carers for adaptation of CMAP manual for suicidal ideation. In Phase 2 randomized exploratory trial will be conducted with 192 older adults with suicidal ideation randomized either to 1) E-CMAP added to Treatment As Usual (TAU) or TAU arm. ECMAP is a problem solving intervention comprising 6 sessions delivered one to one over 3 months by trained therapists. All participants will be assessed at baseline and after intervention (i.e. 3 months) for suicidal ideation, hopelessness, depression, health-related quality of life, coping resources, satisfaction with intervention, and episodes of self-harm.
Results. Thematic Analysis of focus group discussions indicates that participants expressed a preference for incorporating a religious element into distraction techniques, delivering information about the significance of medical treatment, showcasing recorded sessions illustrating problem-solving techniques, and involving family throughout the intervention period.
Conclusion. A culturally tailored psychosocial intervention that incorporates problem-solving and cognitive components has the potential to decrease the risk of suicide among older adults.

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Adherence to a Mediterranean Diet and Impact on Mental Health Outcomes in Adolescents and Adults With Severe Mental Illness: A Systematic Review

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Aims. The Mediterranean diet has shown to improve mental health outcomes in people with depressive disorder. However, little is known of the impact of the Mediterranean diet on severe mental illness. The aim of this systematic review was to evaluate the impact of a Mediterranean diet on mental health and quality of life outcomes in adolescents and adults with severe mental illness (as defined by schizophrenia spectrum disorders, at risk mental states for psychosis, bipolar affective disorder and severe depression with psychosis).
Methods. The following databases were systematically searched: MEDLINE and EMBASE via Ovid, CINAHL via EBSCO, PsychInfo via ProQuest, PubMed and Clinicaltrials.gov, using relevant subject headings and free text search terms to encompass severe mental illness and the Mediterranean diet. Screening, data extraction and quality assessment were completed by two independent reviewers. Eligible study designs included randomised controlled trials, other non-controlled or controlled interventional or experimental studies, cohort studies, case-control studies and cross-sectional studies that included adults and adolescents. The search was not limited to a specific time frame or language. The Mediterranean diet and mental health and quality of life outcomes were defined by primary paper author definitions.
Results. Thirteen eligible studies were identified: 4 interventional, 2 cohort, 2 case-control and 4 cross-sectional studies and 1 mixed

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