



**The CONTROL**  
**(COgNitive Therapy for depRessiOn in tubercuLosis treatment)**  
**to improve outcomes for depression and TB in Pakistan and**  
**Afghanistan**

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# **“Second Consensus Workshop”**

**2<sup>nd</sup> October 2023**

**Held at**

**Khyber Medical University, Peshawar**

## EXECUTIVE SUMMARY

On the 2<sup>nd</sup> of October 2023, CONTROL arranged its second consensus workshop, which was conducted at the Khyber Medical University, in the office of the Clinical Trials Unit. The objective of this workshop was to involve the representatives from the Provincial TB Control Program KP alongside service users for their feedback in the development process of CONTROL CBT intervention. The feedback was mainly regarding the content, structural arrangement, and layout of the handbooks and therapy sessions that had been meticulously worked out in the first consensus workshop. The report narrates the sequence of events and comprehensive deliberations during this workshop.

## INTRODUCTION

### **Background, Aim, and Objective of the Consensus Workshop.**

During the first consensus workshop, it was decided to gather representatives from the Provincial TB Control Program and service users for the second consensus workshop to get feedback on the CBT handbook for TB health workers.

The second consensus workshop was an event of paramount importance considering the intervention to be delivered by the TB health workers. The overarching objective and intent behind this event was to facilitate a detailed discussion, earnestly seeking their objective and subjective feedback pertaining to the content, structure, and layout of the handbooks and the meticulously articulated therapy sessions, an important output finely tuned after the first consensus workshop.

### **Facilitators:**

The workshop was facilitated by Dr. Fayaz Ahmad, Post Doc Fellow Control, and Ms. Saara Khan, Clinical Psychologist and Master trainer CONTROL.

### **Participants:**

The session was attended by Dr. Zohaib Khan, Co-Lead CONTROL, Deputy Director TB Control Program KP, Dr. Haroon Latif, one male and female DOTs facilitator each, two service user group members, Communication Manager CONTROL, and six CONTROL study team members.

### **Workshop Proceedings**

The workshop commenced with a recitation of the Holy Quran by Dr. Fayaz Ahmad. Subsequently, warm greetings were extended to the attendees. Ms. Saara Khan initiated the

discussion by presenting an overview of the handbook's layout. Key elements discussed included:



- ❖ The order of sessions
- ❖ The number of sessions
- ❖ The theoretical orientation of the content.

These aspects are pivotal in ensuring that the handbook effectively serves its intended purpose.

The workshop delved into the particulars of each session within the handbook. This involved a comprehensive exploration of the following aspects:

- **Session Objectives:** The defined goals and expected outcomes of each session were reviewed and discussed.
- **Feedback Mechanism:** The process for gathering feedback regarding previous sessions was elucidated. It is essential for continuous improvement and adaptation.
- **Therapeutic Approach:** The therapeutic aspects of each session were discussed including techniques.
- **Homework Assignments:** The inclusion of homework assignments in each session was addressed. These assignments are designed to reinforce learning and self-management for patients.

#### Layout of Handbook for TB Health Workers:

<p><b>Session 1: <i>About TB, Psychoeducation &amp; Behavioural activation</i></b></p>	<ul style="list-style-type: none"> <li>• Greetings &amp; rapport building (5 minutes)</li> </ul> <p>→ <b>Therapeutic work:</b></p> <ul style="list-style-type: none"> <li>• Information about TB &amp; Psychoeducation about depression &amp; anxiety, mental health &amp; TB, CBT and CaCBT. (10 minutes)</li> <li>• Vicious cycle (for depression) &amp; Behavioural activation program (Checklist 02) (15 minutes)</li> <li>• Exercise-Daily activity dairy (10 minutes)</li> </ul> <p>→ <b>Homework:</b></p> <ul style="list-style-type: none"> <li>• Exercise (Daily activity dairy) (5 minutes)</li> </ul>
<p><b>Session 2: <i>Cognitive restructuring &amp; recognition of thoughts</i></b></p>	<p>→ <b>Feedback</b> (of the previous session): Greetings, medication adherence</p> <ul style="list-style-type: none"> <li>• feedback on daily activity dairy (10 minutes)</li> </ul>

	<p>→ <b><u>Therapeutic work:</u></b></p> <ul style="list-style-type: none"> <li>• Mood &amp; thoughts (5 minutes)</li> <li>• Unhelpful ways of thinking (5 minutes)</li> <li>• Cognitive errors (5 minutes)</li> <li>• Exercise-Thought diary # 01 (10 minutes)</li> </ul> <p>→ <b><u>Homework:</u></b></p> <ul style="list-style-type: none"> <li>• Exercise (Thought diary 01) (5 minutes)</li> </ul>
<p><b>Session 3: <i>Cognitive restructuring &amp; challenging thoughts</i></b></p>	<p>→ <b><u>Feedback</u></b> (of the previous session):</p> <ul style="list-style-type: none"> <li>• Greetings, medication adherence, feedback thought diary 1 (10 minutes)</li> </ul> <p>→ <b><u>Therapeutic work:</u></b></p> <ul style="list-style-type: none"> <li>• Helpful techniques for recognizing thoughts (5 minutes)</li> <li>• Helpful techniques for Dealing with thoughts (5 minutes)</li> <li>• Challenging unhelpful thoughts (5 minutes)</li> <li>• Exercise-Thought diary # 2 (10 minutes)</li> </ul> <p>→ <b><u>Homework:</u></b></p> <ul style="list-style-type: none"> <li>• Exercise (Thought diary 2) (5 minutes)</li> </ul>
<p><b>Session 4: <i>Cognitive restructuring &amp; Alternative thoughts</i></b></p>	<p>→ <b><u>Feedback</u></b> (of the previous session):</p> <ul style="list-style-type: none"> <li>• Greetings, medication adherence, thought diary 2 (10 minutes)</li> </ul> <p>→ <b><u>Therapeutic work:</u></b></p> <ul style="list-style-type: none"> <li>• Finding Alternative/Balanced Thoughts (5 minutes)</li> <li>• Creating a Balanced Thought (5 minutes)</li> <li>• Exercise-Thought diary # 03 (15 minutes)</li> </ul> <p>→ <b><u>Homework:</u></b></p>

	<ul style="list-style-type: none"> <li>• Exercise (Thought diary 3) (5 minutes)</li> </ul>
<b>Session 5: Problem-solving</b>	<p>→ <b>Feedback</b> (of the previous session): Greetings, medication adherence, thought diary 3 (10 minutes)</p> <p>→ <b>Therapeutic work</b></p> <ul style="list-style-type: none"> <li>• Identifying and defining the problem</li> <li>• Exercise- Problem-solving worksheet.</li> </ul> <p>→ <b>Homework:</b></p> <ul style="list-style-type: none"> <li>• Exercise (Problem solving worksheet)</li> </ul>
<b>Session 6: Motivational interviewing and medicine adherence therapy</b>	<p>→ <b>Feedback</b> (of the previous session): Greetings, medication adherence, feedback on problem-solving worksheet (10 minutes)</p> <p>→ <b>Therapeutic work</b></p> <ul style="list-style-type: none"> <li>• Motivational interviewing (Urdu handouts)</li> <li>• A balanced decision exercise (<i>Table 4</i>)</li> <li>• Medication adherence therapy</li> </ul>
<b>Session 7: Follow-up session</b>	<ul style="list-style-type: none"> <li>• Greetings and review about the last session (10 minutes)</li> <li>• Evaluate treatment gains (5 minutes)</li> <li>• Plan for future skill use (5 minutes)</li> <li>• Staying well (10 minutes)</li> </ul>

Dr. Fayaz Ahmad continued the workshop by discussing these consensus points. Below are the main feedback points from the TB health workers and service user group members.

### 1. Need of detailed Training

TB Health workers expressed their confidence in delivering the intervention after receiving comprehensive training. This highlights the importance of thorough and detailed training to equip them with the necessary skills and knowledge.

## **2. Simplified Language**

To enhance the effectiveness of the sessions, health workers recommended translating the content into simpler Urdu and Pashto languages. This adjustment will make the information more accessible to patients.

## **3. Challenges in home works**

Both TB Health workers and service users raised concerns about the homework tasks included in the sessions, particularly for illiterate patients. They suggested several approaches to address this issue:

- ❖ Offering mid-week in-person support from health workers for maintaining the diary.
- ❖ Health workers can help to maintain the diary via telephonic conversations on any one or two days of the week.
- ❖ Involving Lady Health Workers (LHWs) to visit and assist patients in completing homework tasks.



#### **4. Integration of content regarding medicine adherence**

All the participants recommended integrating medication adherence discussions across all the sessions, rather than having a separate session dedicated to this topic. They emphasized the importance of addressing medicine adherence earlier in the intervention due to its critical role in the TB treatment.

#### **5. Behavioral Activation Session**

In the first session on behavioral activation, TB health workers questioned the rationality of having patients monitor their activities and receive a list of healthy activities in the same session. They proposed two alternative approaches:



- Instead of activity monitoring, patients recall their routine activities and then provide a list of healthy activities for them to incorporate into their routine.
- Have patients maintain an activity monitoring diary or log for three days and then replace unhealthy activities with healthy ones from the provided list for the next three days.

## 6. Patient Comfort

Service user group members highlighted the importance of patient comfort, especially when male DOTs will be providing therapy to female patients. They proposed the inclusion of a field coordinator or site coordinator who could inquire about the patient's comfort in each session. This additional support would ensure that patients feel at ease during their therapy sessions.

### Conclusion:

The feedback and suggestions provided by TB health workers and service user group members during the second consensus workshop were invaluable for refining the handbook for TB health workers and improving the intervention's delivery. The recommendations included the use of simple everyday language, integrating medicine

adherence discussions across all sessions, adjusting homework approaches, and introducing a field or site coordinator for patient comfort.

**Closing of the workshop:**

The Second Consensus workshop was closed by vote of thanks to all by Dr. Fayaz, Dr. Saima Aleem and Ms. Saara Khan.