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February 2026 Newsletter

Invitation to the first Virtual Global Health Café

You're warmly invited to join our first **Virtual Global Health Café** on **Friday 27 February (11-12pm)**. It's an informal get-together to socialise, catch up, and share information. Please feel free to drop in, even if you can only join for a short while. Bring your own brew and we hope to see you there ☕😊

The Teams link to join: https://teams.microsoft.com/meet/31013876647144?p=0ckzWKxelHn7dXfl4U

Meeting ID: 310 138 766 471 44

Passcode: Qt9FJ9FZ

First Evidence Synthesis Centre Opens in Nepal

Nepal opened its first National Evidence Synthesis Centre last week. The Centre is based within the School of Medical Sciences at Kathmandu University (KUMS), Nepal, and forms part of a broader initiative funded by the British Academy project, *"Strengthening Institutional Knowledge and Capacity of Federal, Provincial and Local Governments for Evidence-Informed Health Policymaking in Nepal."*

The initiative is a collaboration between four UK universities (Chester, Keele, Bournemouth, Huddersfield) with Nepalese partners (Kathmandu University, the Nepal Health Research Council and Green Tara Nepal). Keele researchers Prof Priya Paudyal and Dr Opeyemi Babatunde

are key to this initiative, contributing to several capacity-strengthening training programmes covering key aspects of evidence synthesis for policy, research, and practice.

Twenty-eight highly motivated academics, researchers, and policymakers are currently undertaking evidence synthesis training under this initiative. Earlier phases of the initiative included a series of online workshops on systematic reviewing and evidence synthesis, followed by in-person training delivered in Nepal. Prof Paudyal travelled to Nepal in Dec 2025 to deliver a three-day residential training programme as a part of the programme. These activities are designed to strengthen methodological capacity and institutional expertise in evidence synthesis for health policy and practice in Nepal. The initiative adopts a co-designed, equitable partnership approach to identify existing best practices and address barriers to translating research into policy and practice. These activities have been summarised in recent publications [1,2].

1. Strengthening Evidence Synthesis for Health Policymaking in Nepal: A New Fellowship Initiative | Nepal Journal of Epidemiology
2. Progress of the Unique Fellowship in Health Research Evidence Synthesis in Nepal - PubMed

Researchers find link between higher levels of air pollution and Dengue-related deaths

A research team including a Keele scientist have found that countries with higher levels of air pollution were also more likely to have higher numbers of deaths from Dengue, a rapidly expanding disease spread by mosquitoes.

The team including Keele's Dr Najmul Haider conducted a multi-country study across 20 nations across Asia, Africa and Latin America where Dengue is endemic, and found that those with higher levels of air pollution also had higher numbers of Dengue-related deaths during that time.

Their findings, published in the journal *Environmental Pollution*, offer the first multi-continental evidence of a link between exposure to air pollution and increased Dengue mortality, with the researchers highlighting that strategies to control both air pollution and the Dengue virus could have benefits for both disease prevention and environmental health.

To investigate this link the team looked at data from the 20 different countries between 2020 and 2024. They looked at national data about the prevalence of Dengue in these countries, combined with air pollution data indicated by the concentration of fine particulate matter (known as PM 2.5).

Their data showed that countries with higher PM 2.5 concentrations, particularly Bangladesh, Indonesia, and Burkina Faso, recorded 3–5 times more deaths from Dengue than those with lower air pollution, such as Brazil, Ecuador and Costa Rica. They also found that countries with higher GDP per capita had lower dengue case fatality rates.

Long term exposure to PM 2.5 is known to induce symptoms like systemic inflammation and oxidative stress, which can impair endothelial function; a process which can have a major impact on the body's overall vascular health. In dengue infection, this may increase the risk of key pathological processes associated with severe and fatal cases, such as vascular permeability and plasma leakage.

Dr Najmul Haider, Lecturer in Epidemiology at Keele and co-author of the study, said: "Our findings offer early global evidence that air pollution may worsen dengue outcomes, including the risk of death. Understanding the underlying biological mechanisms, particularly through laboratory biomarkers, will be crucial for improving prevention and clinical management."

PhD student Safat Ullah published his first output from his PhD

I am Safat Ullah and I belong to District Karak, Khyber Pakhtunkhwa, Pakistan. I am a distance learning PhD student at Keele University. An important milestone in my academic journey has been achieved with the publication of my first PhD research article in an international peer-reviewed journal. The experience of completing and publishing this work has been unforgettable and has required sustained learning, patience, and perseverance, all of which have been central to my doctoral training.

The article, titled “Effectiveness of cognitive behavioral therapy for harmful cannabis use: a systematic review and meta-analysis,” has been published in the journal Cognitive Behaviour Therapy. The study systematically reviews and quantitatively synthesises evidence from randomised controlled trials to evaluate the effectiveness of cognitive behavioral therapy for harmful cannabis use and cannabis use disorder. Findings indicate that while cognitive behavioral therapy remains a widely used psychosocial intervention, its standalone effectiveness in reducing cannabis use frequency is limited when compared with other psychosocial approaches, highlighting the need for more targeted, standardised, and contextually adapted treatment models. The full article is available at https://www.tandfonline.com/doi/full/10.1080/16506073.2026.2613114#abstract

I am extremely thankful to Keele University, Khyber Medical University, and The CONTROL Programme for their continuous institutional support. I also acknowledge the invaluable guidance of my supervisors Priya Paudyal, Saeed Farooq, Farooq Naeem, Ghasem, and Fayaz Ahmad, and I extend sincere appreciation to all co-authors for their dedicated collaboration throughout this research.

"Spotlight on"...Dr Tope Oyelade

Tope joined Keele University in January 2025 as a Teaching Fellow in Public and Global Health following his Ph.D. in prognostic data modelling at the University College London's Institute for Liver and Digestive Health, Hampstead. Alongside teaching, he holds an Honorary Researcher position at UCL's Division of Medicine and currently conducts research both in population and global health as well as complex-systems (network) physiology.

His academic profile spans public health, pedagogy, evidence-based medicine, and network physiology; a field that reframes health and disease as the product of dynamic interactions between multiple physiological systems, rather than isolated organs. This systems-first lens shapes both his research questions and the methods he applies, from modelling multi-system coordination to translating findings into clinically meaningful insights.

A major thread of Tope's research is prognosis in complex disease, including liver disease and sepsis, where he has developed and evaluated network-based approaches that use routinely

collected clinical data to improve risk stratification and decision-making. His doctoral work at UCL reflects this practical focus: building models that are mathematically rigorous but designed to be usable in real clinical settings.

Alongside this, Tope contributes to large-scale global evidence efforts, including the Global Burden of Disease (GBD) collaborations, where he is currently a senior collaborator contributing specifically to the methodological rigor of high-impact work on global and national communicable and non-communicable disease trends. This combination i.e., systems modelling at the patient level and burden estimation at the population level, means his work guides both frontline clinical decision-making as well as upstream public and global health priorities.

Beyond research, Tope is an active educator in statistics, epidemiology, big data mining and analysis etc., devoted to ensuring that the next generation of public health experts and physiologists are well prepared for emerging health challenges.

Looking ahead, Tope's work is geared toward impact at scale: expanding collaborations, strengthening reproducible analytics, and pushing network-based methods closer to the kinds of tools clinicians and public health teams can actually use.

Upcoming Funding Deadlines

- Homepage - Global Health EDCTP3 - European Union

Recent Publications

Ambient PM2.5 exposure and increased dengue case fatality: a global multi-country analysis - ScienceDirect

Unravelling the dengue surge in South Asia during 2000–2023: pattern, trend, genomics, and key determinants | Epidemiology & Infection | Cambridge Core

New IGHW website and call for publications

Our new website is now live! Please take a look HERE

We have seven key research themes for which we would like to invite you to share your publications underneath. The themes are:

- Mental Health and Wellbeing
- Infectious Diseases
- Maternal, Child and Adolescence Health
- Climate and Health
- Non-communicable Diseases
- Primary Care
- Health Policy and Systems

Please forward your publications to: IGHW@keele.ac.uk

About the Institute for Global Health and Wellbeing

The Institute for Global Health and Wellbeing is one of Keele University's flagship institutes. Our aim is to address global health disparities and improve the health and well-being of the most vulnerable populations in resource poor settings. We conduct high quality interdisciplinary and innovative research in number of global health areas including mental health, infectious diseases, primary care, maternal child and adolescent health, non-communicable diseases, and climate and health. Our current research projects are supported by funding from GCRF, AHRC,

MRC and NIHR. We are currently working on a number of global health projects with interdisciplinary teams in Pakistan, Sri Lanka, Brazil, Ethiopia, Malawi and India.

If you would like to stay connected with the IGHW community and activities, please complete this brief FORM

Please visit the Institute webpage here for further details.

Contact Us

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Visit us on the web at HERE

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