



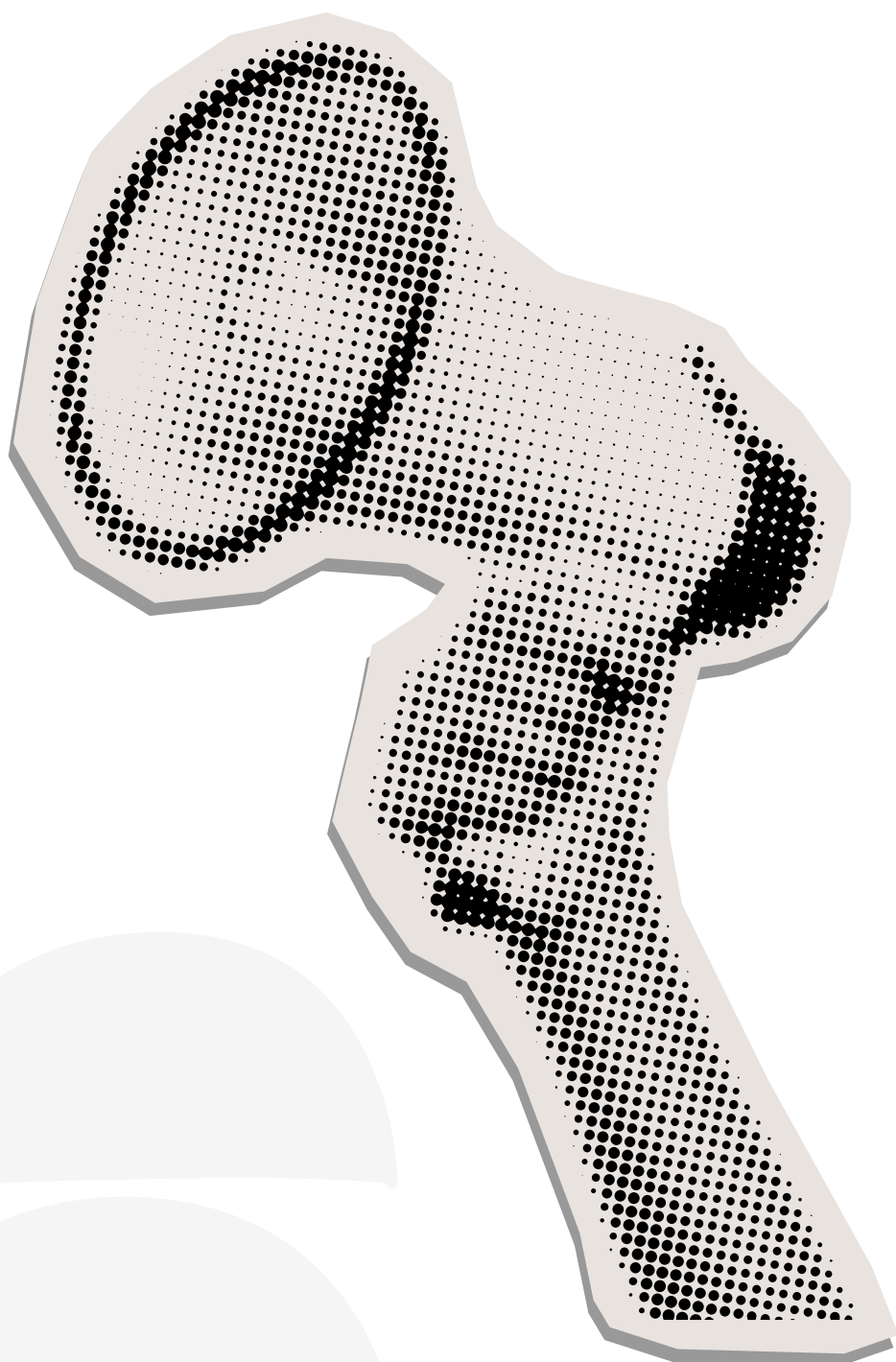
CONTNEWS

CONTROL

The Quarterly Newsletter of the CONTROL Research
Programme



TRIAL UPDATES

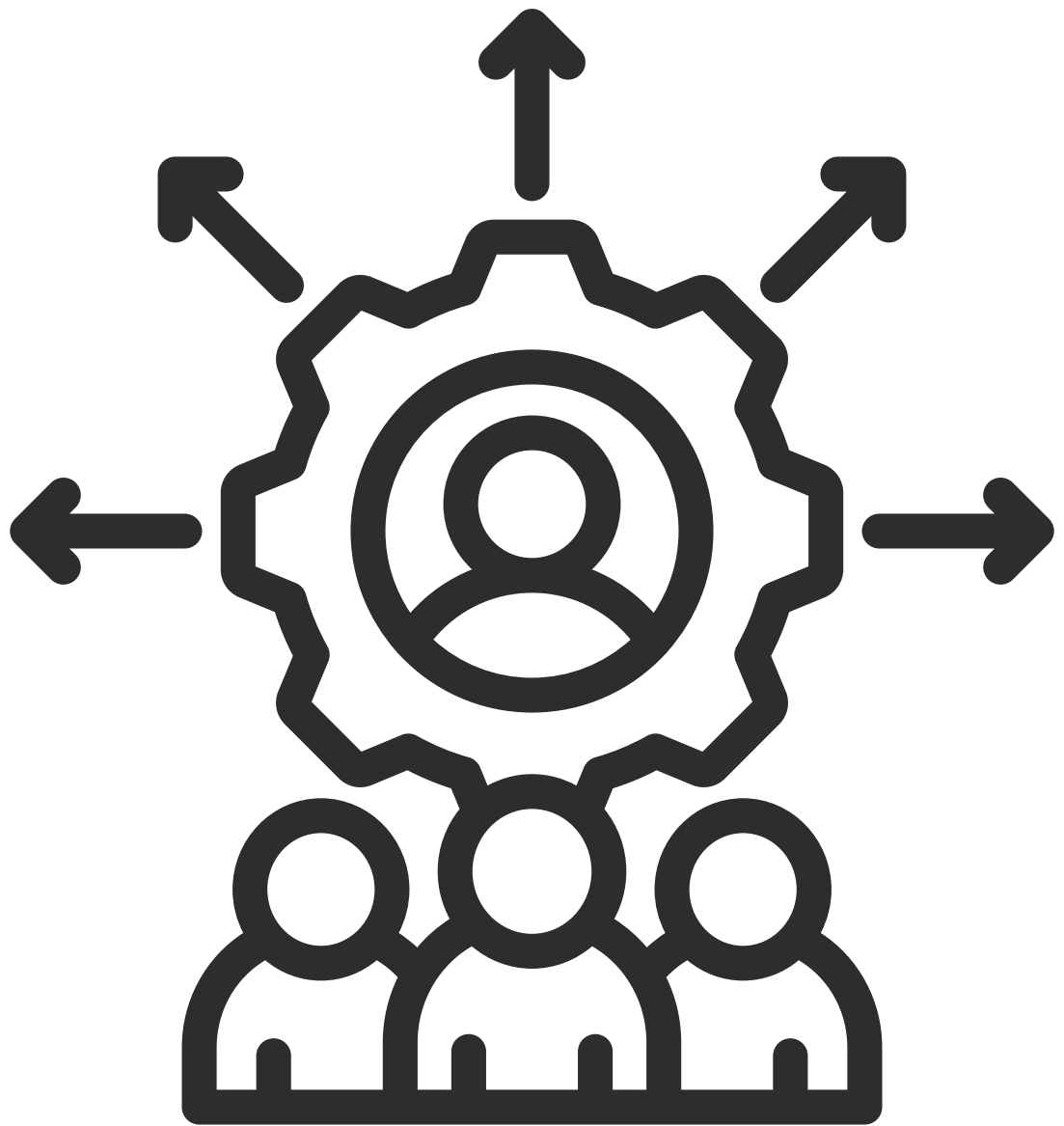


Trial Follow-up and Close-out Summary

As of 1 July 2026, follow-up activities for the trial have been completed at almost all participating study centres. Alfalah TB Hospital, Peshawar remains the only active site, with two participants yet to complete their scheduled follow-up visits, which are still within the permitted 2-week follow-up window. All other TB centres have completed their follow-up activities and have been closed. The 8-week follow-up milestone was completed on 3 February 2026, with a total of 443 follow-up visits completed. The 24-week follow-up milestone was completed on 18 May 2026, with 421 follow-up visits completed. As of 1 July 2026, a total of 407 participants had completed their 32-week follow-up visits.



CAPACITY DEVELOPMENT



Capacity Development

On 16th April 2026, the CONTROL team participated in a workshop titled "Ethical Considerations in Global Health Research", organized by Khyber Medical University. The workshop was delivered by the Centre of Biomedical Ethics and Culture (CBEC), SIUT, Karachi. The workshop focused on ethical challenges in global health research, including data ownership, informed consent, privacy, data sharing, and the responsibilities of ethics review mechanisms in research practice.

During this quarter, two CONTROL Master of Health Research students, Hafiza Zumar Malik and Samina Ihsan, successfully completed their master's degrees and defended their research work.

During the period from April to June 2026, four CONTROL PhD scholars successfully completed their Progress Review 3. PhD scholar Abdul Latif published his systematic review, "Cost-effectiveness of Interventions for Severe Mental Illness in Low- and Middle-Income Countries (LMICs): A Systematic Review," in the Journal of Mental Health. In addition, PhD scholar Aliya Durrani successfully completed her PhD thesis. Two PhD students, Huma Mughal and Abdul Latif presented their research at the Keele Postgraduate Research (PGR) Symposium. In addition, PhD scholar Huma Mughal also participated in the 3MT competition at the Keele PGR Symposium.



Process Evaluation



Data collection

The data collection for process evaluation is in progress since July 2025. For quantitative data collection, coordination was established with the data manager, and a 10% random sample was selected, totalling 31 survey participants. All 31 survey questionnaires have been completed by patients in the intervention arm after the eighth week post-randomisation. For the qualitative part, patient IDs were intentionally selected from the sample to conduct semi-structured interviews (SSIs). To date, we have conducted 13 SSIs with patients in the intervention arm who completed five or six CBT sessions and three SSIs from those who couldn't complete the intervention (attended 1-4 sessions), after the eighth week post-randomisation. Seven SSIs were with control arm patients after the 24th week post-randomisation. Two focus group discussions (FGD) were conducted with DOTS facilitators, two with medical officers, and three with trial staff. We also conducted seven SSIs with health managers.

A total of 140 sessions were assessed. All data were entered into Excel spreadsheets and exported to SPSS for data analysis. The CBT fidelity audio-recorded sessions were evaluated by independent CBT experts



evaluators using the CTS-R scale and the CBT delivery assessment scale.

Data Analysis:

Qualitative data collection is progressing well. Meanwhile, quantitative data have been entered into SPSS, and data cleaning is currently underway in preparation for analysis.

Way Forward:

Complete the qualitative data analysis and quantitative data collection within the next three months.

Workpackage 4



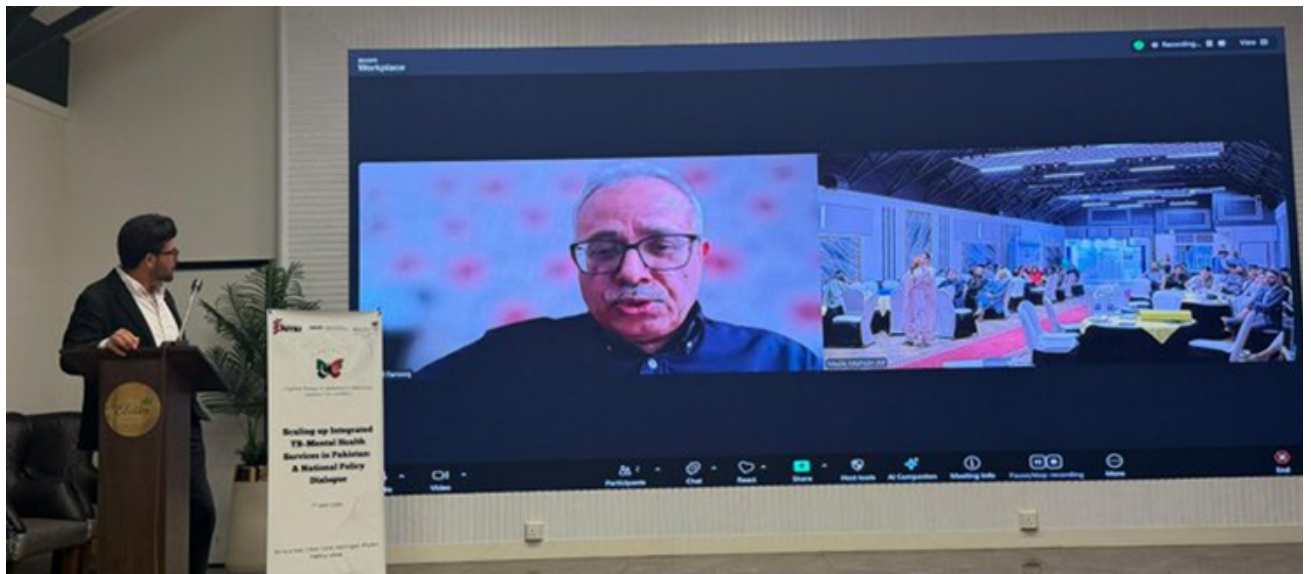
Work Package 4

As part of Work Package 4 (WP4), a series of Theory of Change (ToC) workshops were conducted to co-develop and refine the implementation pathway for integrating TB and mental health services in Pakistan. Earlier workshops engaged members of the CONTROL team, TB patients from Peshawar and Haripur, and provincial TB programme managers, DOTS facilitators, and medical officers. Insights from these workshops informed the development of a draft ToC and identified priorities, assumptions, and implementation strategies for service integration.

The fourth and final ToC workshop titled “Scaling up integrated TB-Mental health services in Pakistan; A national policy dialogue” was held on 7th May 2026 at Elites Hotel, Nathia Gali, Khyber Pakhtunkhwa. Building on the findings and recommendations from the previous workshops, the meeting brought together representatives from the provincial TB programmes, health department officials, implementation partners, and members of the CONTROL team to review, refine, and validate the implementation pathway for scaling up integrated TB and mental health services in Pakistan.

The workshop was moderated by Dr. Saima Aleem and featured a series of presentations by members of the CONTROL programme. Dr. Zeeshan presented an overview of the CONTROL Programme, followed by Dr. Rubab Farooqi, who shared the trial's progress and overall journey. Dr. Fayaz Ahmad presented on the process evaluation, while Dr. Aamir Aziz discussed the intervention development and refinement process. The workshop concluded with an insightful keynote presentation by Prof. Saeed Farooq on the burden of tuberculosis and its comorbidity with mental health conditions in Pakistan.





Panel Discussion on Scaling Integrated TB-Mental Health Services

The panel was led by Dr. Zohaib Khan and brought together key representatives including Dr. Mudassar Shehzad from the TB Control Program, Dr. Naveed from ACD, Mr. Ghazanfar from Greenstar, Dr. Saima from Indus Hospital, Dr. Sabir from the Global Fund, and Dr. Jalil from Khyber Medical University.



The discussion focused on identifying practical pathways for integrating mental health support into routine TB services, with emphasis on programme ownership, coordination between partners, and sustainable financing. Panelists shared perspectives from policy, implementation, service delivery, and donor viewpoints, highlighting the need for a coordinated and system-level approach.



Theory of Change Activity for TB-Mental Health Service Integration



The activity engaged participants in refining the implementation pathway for integrated TB-mental health care by identifying key steps, resources, assumptions, and system-level requirements for effective scale-up. Through interactive group discussions, stakeholders developed a practical, context-specific pathway while strengthening collaboration, shared ownership, and commitment to sustainable integration within TB services.



Celebrating Contributions and Closing the Dialogue

The event concluded with the presentation of tokens of appreciation to the organizers and participants in recognition of their valuable contributions and active participation in the successful National Policy Dialogue on Scaling up Integrated TB–Mental Health Services in Pakistan. This gesture acknowledged their commitment and collaborative efforts toward advancing integrated TB–mental health care in Pakistan.

ORGANIZERS



DR. ZEESHAN KIBRIA



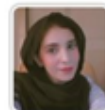
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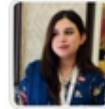
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Advancing Mental Health Support Within TB Care

Discussion with TB Program, KPK

A discussion was held with the Provincial TB Program, KPK on scaling up mental health support within routine TB care services.

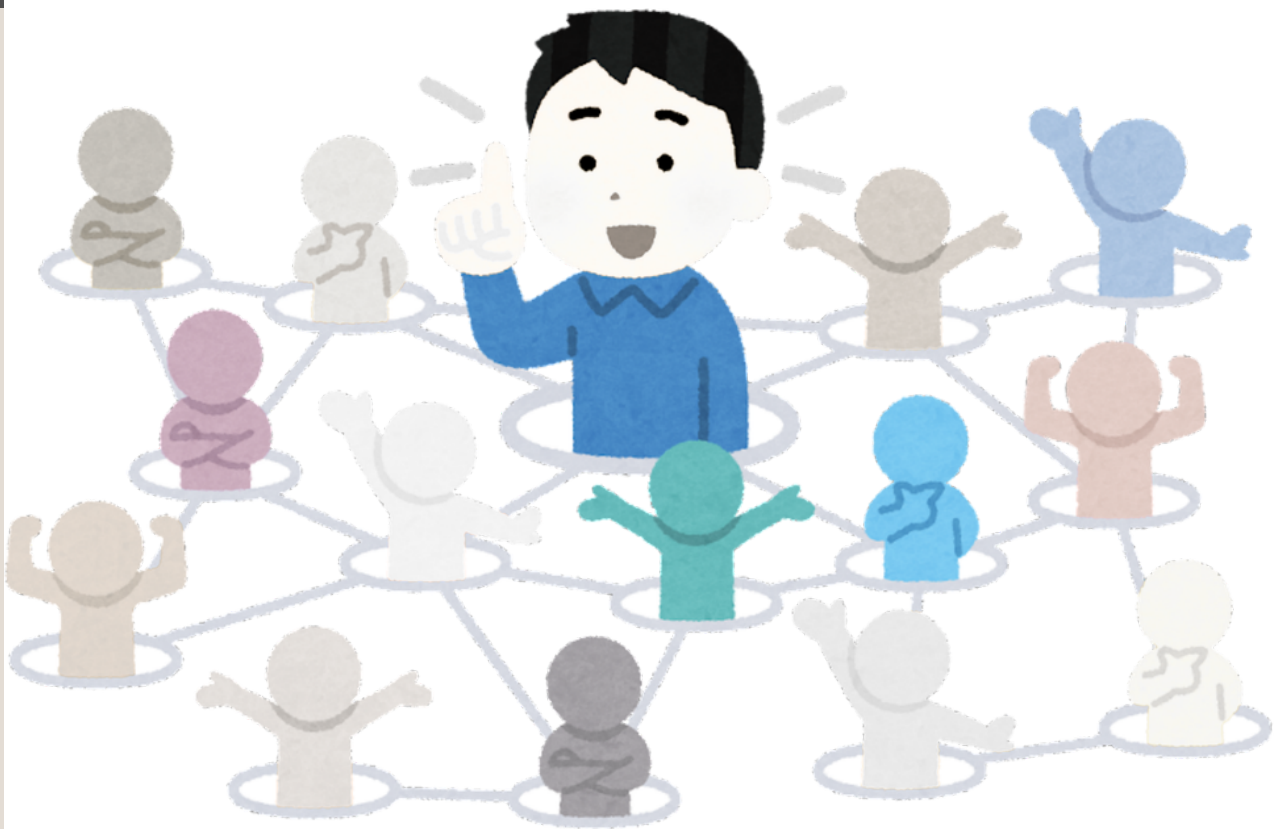
The discussion highlighted the urgent need for integrating mental health screening and support into TB treatment pathways, particularly as more than 60% of screened TB patients showed depressive symptoms. This finding emphasized the importance of routine depression screening, timely identification, and structured psychological support for people receiving TB treatment.

The session also underscored the potential role of CBT-based support in improving treatment outcomes, strengthening patient engagement, and reducing loss to follow-up.

Continued collaboration with the KP TB Program was appreciated as an important step toward building more patient-centered and integrated TB–mental health services in Pakistan



COMMUNITY ENGAGEMENT INITIATIVE



The Consultative Session for the Contextualized Community Engagement Toolkit for Pakistan

The Consultative Session for the Contextualized Community Engagement Toolkit for Pakistan was conducted on 5th June 2026 at Nathiagali & commenced with welcome remarks, participant introductions, and an overview of the session objectives by Prof. Saeed Farooq and Dr. Zohaib Khan.

The opening session introduced the purpose of developing a contextually relevant toolkit to strengthen community engagement practices within research and public health settings in Pakistan. Participants were welcomed into an interactive discussion focused on shared learning, local experiences, and practical approaches for meaningful community involvement.

The session featured a series of presentations on community engagement and involvement (CEI) across NIHR-funded projects. Prof. Abdul Jalil Khan presented the CEI work of HOPE and TRANSLATE, Dr. Noor Sanuddin shared the EMPOWER-D CEI activities, Dr. Najma Baseer presented the COPE-BP CEI work, and Dr. Saima Aleem highlighted the CONTROL CEI initiatives.



Turning Stakeholder Insights into Toolkit Improvements

Participants actively engaged in breakout group discussions during the consultative session to review and refine the Contextualized CEI Toolkit for Pakistan. Drawing on their expertise and field experience, they assessed the toolkit's content, structure, and practical applicability in local research settings. The discussions generated valuable suggestions to improve its relevance, clarity, and usability. Following the group work, representatives from each breakout group presented their feedback, highlighting key strengths, identifying areas for improvement, and sharing recommendations to further strengthen the toolkit. The session fostered collaboration and ensured that diverse stakeholder perspectives were incorporated into the toolkit's development.





Celebrating CEI Excellence and Team Contributions

Recognition of the CEI Team

The Community Engagement and Involvement (CEI) team was recognized and awarded for their outstanding efforts and valuable contributions during the Consultative Session for the Contextualized Community Engagement Toolkit for Pakistan. The recognition highlighted the team's dedication to strengthening meaningful community engagement within health research. Their work has played an important role in supporting participatory approaches, promoting community voices, and contributing to the development of a locally relevant CEI toolkit for Pakistan.

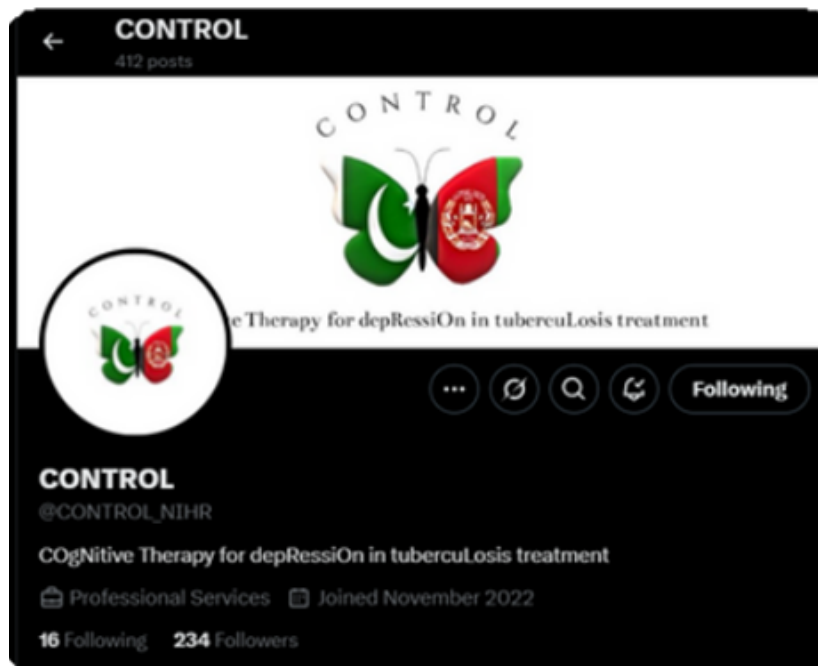


Closing the CEI Consultation with Appreciation and Shared Commitment

The Consultative Session for the Contextualized Community Engagement Toolkit for Pakistan concluded with the presentation of tokens of appreciation and participation to stakeholders and participants in recognition of their valuable contributions and a group photo.



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