





The CONTROL

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

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THE VoICE of CONTROL

"Art for Impact Co-Creation Workshop Piloting NIHR CEI Guiding Principles"

26th September 2024





EXECUTIVE SUMMARY

The Art for Impact: Co-Creation Workshop, held on September 26, 2024, at the Senate Hall of Khyber Medical University, was organized as part of the NIHR-CEI guiding principles pilot project. The workshop aimed to present findings from the CEI pilot field activities and to build consensus on the art-based genres preferred by local and Afghan refugee communities for raising awareness on mental health and tuberculosis (TB).

The workshop brought together a diverse group of stakeholders, including TB workers, mental health professionals, teachers, youth representatives, content creators, religious scholars, Afghan journalists, IT experts, Afghan and local community representatives, and CEI & PPIE advisory group members. Three main awareness mediums were discussed: videos, flyers, and booklets. Each medium's pros and cons were considered, with participants sharing insights from their respective communities. Videos emerged as the preferred medium due to their accessibility, ability to engage both literate and illiterate audiences, and their alignment with the growing use of social media. This report narrates the details of co-creation workshop.





INTRODUCTION

Activity Aims & Objectives:

On September 26th, 2024, the Art for Impact Co-Creation Workshop, aimed at piloting the NIHR CEI guiding principles, was held at the Senate Hall of Khyber Medical University. The workshop focused on presenting findings from the CEI pilot field activities, reaching a consensus on the art genre preferred by both local and Afghan refugee communities, and finalizing the components of the selected genre for the Community Engagement Initiative (CEI). Additionally, the event gathered input from various fields, inviting valuable suggestions to shape the art-based approach further.

Activity Background:

Art for impact piloting NIHR CEI guiding principles is divided into 3 phases. Phase 1 comprises of two objectives:

- Four field activities for Understanding the Community's Perspective Regarding Art-Based CEI
- 2. Co-Creation Workshops

A total of eight CEI field activities (four at female *hujra* and four at male *hujra*) were conducted at Naguman Afghan refugee camp and Hazar Khwani in Peshawar, as well as Khalabat Township and Panian Afghan refugee camp in Haripur. These activities aimed to raise awareness and understand the community's perspective on the art-based CEI. Following this, a co-creation workshop was organized to build consensus on the art genre preferred by both local and Afghan refugee communities and to finalize the components of the selected genre. Participants included individuals from diverse fields, such as TB workers, mental health experts, content writers, religious scholars, media professionals, IT experts, lady health





workers (LHWs), journalists, and representatives of both the Afghan and local communities, along with members of the CEI and PPIE advisory groups. The CEI advisory group plays a key role in the initiative, having been involved from the very beginning and actively participating in every field activity and meeting.

Participants:

The workshop was attended by 32 participants majority of which were community members.

Facilitators:

- ➤ **Dr. Saima Aleem** (Lead, Art for impact co-creation workshop to piloting NIHR CEI guiding principles)
- ➤ Mr. Asad Ullah (Project manager, Art for impact co-creation workshop to piloting NIHR CEI guiding principles)
- ➤ Ms. Saara Khan (MEAL manager, Art for impact co-creation workshop to piloting NIHR CEI guiding principles)

CEI Team:

- ➤ Ms. Maria Marjan (Qualitative expert)
- ➤ Ms. Sania Abdul Jalil (Qualitative expert)
- ➤ Ms. Rida Zarkaish (Co-Creation Coordinator)
- > **Dr. Kanwal Safeer** (Co-Creation Coordinator)
- ➤ Ms. Tuba Khan (Media coordinator)
- ➤ Mr. Ihtesham ul Haq (Community Engagement Officer [Local Community])
- ➤ Mr. Ihsan Ullah (Community Engagement Officer [Afghan Community])



Workshop proceeding:





The workshop began with a beautiful recitation of verses from the Holy Quran by religious scholar Abdul Shakoor. Dr. Saima Aleem then warmly welcomed all participants, including stakeholders and members of the CEI advisory

group, and explained the aim and purpose of the co-creation workshop. Following this, Ms.

Saara Khan led an interactive activity to introduce participants to one another. Each participant had three minutes to mingle, learn the name, profession, origin, hobbies, and favorite colors of a fellow attendee, then introduce them to the audience. This innovative activity fostered connection and socialization among the participants.



After the introductions, Mr. Asad Ullah outlined the objectives of the co-creation workshop, which aimed to present findings from the CEI pilot field activities, build consensus on the art genre preferred by the local and Afghan refugee communities, and finalize the components of



the chosen art form. He
also provided an
overview of the
NIHR's seven guiding
principles. The
facilitator then shared
the phases of CEI,
provided an overview





of activities conducted in Peshawar and Haripur, and presented glimpses of the fieldwork to the participants.

Phase 1: (0-2 months)

- ✓ 4 Field activities for Understanding the Community's Perspective Regarding Art-Based CEI
- ✓ Two Co-Creation Workshops

Phase 2: (3-4 months)

✓ Developing art genres and dissemination strategies

Phase 3: (5-6 months):

✓ Impact and success measurements will be conducted



Session	District	Area	Gender of participants	No of Participants	Nationality
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1	Haripur	Panian Camp	Males	35	Afghan
2			Females	39	Afghan
3		Khalabat town	Males (Community healthcare workers)	35	Pakistani
4			Females (LHWs)	35	Pakistani
5	Peshawar	Hazar Khwani	Males	40	Pakistani
6			Females	38	Afghani
7		Naguman Camp	Males	30	Afghan
8			Females	36	Afghan

The facilitator provided an overview of the typical process followed during CEI field activities, explaining how they are planned and the structure used for each session. Different art-based community awareness mediums—such as digital, performing, and visual arts—were also discussed.





Preferred Awareness Medium

The mediums selected by the communities during the CEI field activities were videos, flyers,

and booklets. Mr.

Asad Ullah elaborated on why the communities preferred these mediums, as well as the reasons for rejecting others.



Community

quotes from both local and Afghan participants were shared to highlight their preferences for each medium.

Language Preference

A strong consensus emerged for bilingual content in both Pashto and Urdu to ensure accessibility across diverse audiences.

Content for Printed Materials (Booklets/Flyers)

It was emphasized that the images should clearly depict situations and symptoms of diseases. For example, an image of someone holding their head in their hands effectively conveys worry or stress. Animated images were favored, as they allow ideas to be communicated in a universally understandable manner. However, real photographs were discouraged for booklets due to cultural restrictions, as households may prohibit them.

Content for Video-Based Genre





The community expressed a preference for concise videos or dramas, ideally around 5 minutes in length, though they could extend to 10 minutes if necessary. Animated videos were seen as

particularly effective, as animation is both engaging and culturally appropriate. Urdu was the preferred language for videos since it is widely understood, and animation would appeal to a broad audience.



Cultural sensitivity and sustainability

were also important points of discussion among participants. After this, the three mediums selected by the local and Afghan communities, videos, flyers, and booklets—were opened for discussion. Participants shared their thoughts on the pros and cons of each medium, and following this discussion, a voting session was held to capture the preferences and opinions of all participants.

Participants' Responses:

• Farman Ali (Afghan Refugee, CEI Advisory Group Member):

Farman Ali highlighted the power of videos in community engagement. He mentioned that videos, especially on social media, are widely enjoyed and attract a large audience, making them an effective tool for spreading messages.

• Abdul Shakoor (Religious Scholar):

Abdul Shakoor expressed a preference for videos over flyers. He noted that flyers







often get damaged in the rain and are removed from walls, with some community members requesting that nothing be posted on their property, reducing their effectiveness.

• Asadullah (Afghan Refugee, CEI Advisory Group Member):

Asadullah strongly favored videos, noting that they cater to both literate and illiterate audiences. He emphasized their sustainability, as videos are not affected by rain like flyers, which can hinder communication.

• Agha Shireen (Afghan Refugee, CEI Advisory Group Member):

Agha Shireen advocated for both booklets and flyers, stating that people respect books, which hold long-term value. In most families, at least one person is educated







and can share the information.

However, he noted that videos require electricity, and not everyone owns a smartphone.

Male Participant (Local community member)

This participant emphasized the

importance of flipbooks, which can be used in offices, schools, and hospitals by staff to clearly explain information to visitors. He also pointed out that educated individuals can easily understand flipbooks.

• Female Participant (Local community member)

She expressed indecision between videos and booklets. While she acknowledged the effectiveness of videos in raising awareness, she stressed the importance of clear and straightforward information, especially for mental health topics. She added that booklets might be more practical for Afghan communities due to limited access to electricity and smartphones in camps.



• Maham (Teacher)

Maham favored videos, arguing that flipbooks are only suitable for patients, whereas videos are more inclusive and can reach a wider audience.





• Arsalan (university student)

Arsalan suggested that both videos and flyers are important. He recommended that videos be story-based and include animations, with a specific duration. Flyers should be used when video access is limited, and both formats should be in local languages for better understanding.

• Muska (Journalist, Voice of America):



Muska highlighted that in villages, access to videos is limited, and radio is the best medium for communication. She explained that booklets and flyers are not practical, as many villagers are uneducated, making radio a more effective option.

• Bushra (Artist, Actor & Poetess):

Bushra proposed creating a calendar that features precautions, symptoms, and signs for both

tuberculosis (TB) and depression, believing it would be an effective tool for raising awareness.

• Male Participant (Afghan refugee)

He advocated for videos, noting that social media is widely used. However, he emphasized that videos should be available in all local languages to maximize their reach and impact.

• Ihsan Ullah (Community mobilizer, Panian Camp):

Ihsan Ullah noted that videos appeal to everyone, including children, women, and people with disabilities, who can watch them at home. He added that booklets are often left on office tables and only accessible to literate individuals, while some communities do not allow women to own mobile phones.





• Siddiq Ullah (Representative of the Afghan community):

Siddiq Ullah strongly favored videos, stating that they are the best medium to reach people from various backgrounds.

• Aisha Bibi (DOTs Facilitator)

Aisha Bibi noted that videos are accessible to both educated and uneducated individuals and can be played in TB facilities for more awareness to people visiting.

• Female Participant: (Community mobilizer)

She believed that videos, especially those that tell a story, are the best option. She also suggested that booklets containing a mix of text and images would make the information more engaging.

• Ali Kamran: (Male community member)

He preferred video for clear communication and stated their effectiveness in conveying important information.

• Roma (Female):

Roma argued that flyers are only useful for educated individuals and employers, but not everyone has the time to read them. She emphasized that videos are the best way to reach a broader audience, including patients.

• Female Participant (Teacher):

The teacher stated that videos are preferable because students nowadays favor videobased learning and are less inclined to read books.

• Faryal (Psychologist):

Faryal believed that videos are the best medium for easy information processing and





retention, particularly short video reels.

While flyers and booklets may work in official settings, she felt they are less effective for the general community.

• Female Participant (LHW 1):

The LHW suggested that videos in

Pashto would be effective as the LHWs visits houses and having a video will help them to spread more information easily.



• Female Participant: (LHW 2)

She also suggested that videos are accessible on mobile devices and are suitable for all ages and literacy levels, particularly if they are in animated format.

• Female Participant (Hazara Afghan Camp):

This participant favored videos for illiterate individuals, citing the effectiveness of short, simple videos like those used during COVID-19 awareness campaigns.

• Dr. Abdul Rehman(Medical Officer):

Dr. Abdullah recommended videos, particularly cartoon-animated ones in local languages, as they are more cost-effective than flyers and booklets and can reach more masses.

• Dr. Sabeen Rahim (Psychologist):

Dr. Sabeen stated that videos are the most accessible option for reaching a wide audience.





• Afghan Male Participant:

This participant emphasized the impact of short films shown in schools, as children often share the information with their families.

• Dr. Abdul Jalil Khan (Assistant Professor):

Dr. Abdul Jalil Khan believed both videos and flyers/booklets are effective, noting that some people are audio learners and others are visual. He suggested podcasts, combining both elements, and recommended short, engaging videos with dramatic elements and catchy titles.



• Dr. Ghazala Yasmin (PPIE Member):

Dr. Ghazala recommended short, culturally sensitive videos based on real-life scenarios. She also suggested incorporating written messages in flyers and using radio



as a complementary medium. To avoid boredom, she proposed regularly updating video content over time.

After an extensive discussion, 27 out of 33 participants voted in favor of using videos, while 4 participants preferred flyers and 3 opted for booklets. The final consensus was to proceed with videos as the primary communication tool.







The discussion was followed by a group activity where groups developed their storyboards, characters, content and dissemination options.

• Group 1 suggested brief animations (one to three minutes) featuring 3D cartoon characters that addressed stigma (e.g., demonstrating that it's acceptable to shake hands and go to social events),



basic TB education, including symptoms, and free treatment options. Group 1 was also interested in addressing mental health issues. They focused on appropriate mask-wearing, and practical dos and don'ts i.e., SOPs. They suggested that the content end with a true success story and be available in multiple languages like Persian, Pashto, and Urdu.

• **Group 2** suggested an extended 5-minute video titled "Not Tomorrow, today." They focused on addressing mental health issues as well as tuberculosis, prioritizing prevention and intervention. The content they explicitly requested includes background



music and success stories in

Pashto and Urdu with

subtitles

Group 3 proposedperiodic animated videos (1-2 minutes) based on a TB





patient's journey, including their struggles with isolation and depression. They suggested voice-overs with background music and designed to rotate different videos every two weeks. Their main concentration was on television and radio dissemination.

• **Group 4** designed a 3–5-minute video with several parts covering symptoms and information, stigma (especially in religious settings like mosques), mental health impacts, treatment and counselling, and a positive conclusion.

The group reached a final agreement on the use of videos. It was decided that the video would be 2-3 minutes long, with simple language, and would be available in both Pashto and Urdu to ensure wider accessibility and understanding.



Key Similarities



happy endings.

- Fivery group

 highlighted the

 significance of treating

 mental health issues as

 well as tuberculosis.
- ✓ Every group

 aimed to incorporate

 success stories or





- ✓ Every group addressed stigma in some way, and there were frequent considerations of several languages, especially Pashto and Urdu.
- ✓ Every group wished to include both emotional and intellectual components.

Conclusion: The workshop concluded with certificate distribution and a vote of thanks delivered by Dr. Saima Aleem and the CEI team, expressing gratitude to all stakeholders for their active participation and valuable contributions.







Group Picture of CEI Team with stakeholders







CEI Team group picture





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September 26, 2024

Senate Hall, Khyber Medical University

Agenda

Time	Session	Resource Persons/ Facilitators			
12-00-12:05 pm	Recitation of the Holy Quran				
12-05-12-10 pm	Welcome & Introduction	Saara Khan			
12:10-12:25 pm	CEI Pilot Overview & Findings Presentation	Asad Ullah			
12:25-12:50 pm	Co-Creation Activity	Saara Khan All participants			
12:50-01:15 pm	Reflection on Group Activities	Group Leads			
01:15-01:20 pm	Concluding Remarks	Dr. Zeeshan Kibria Dr. Saima Aleem			
01:20-01:30 pm	Certificate Distribution & Group Picture	Prof Abdul Jalil & Dr. Saima Aleem			
1:30 pm onwards	Lunch				