



World Refugee Day 2023

Holding hands with the
Afghan Refugees

Capacity-building communication skills workshop

A dynamic, interactive event
specifically geared toward
improving communication.

Patient and Public
Involvement
and Engagement

Achievements

Prof. Saeed Farooq

Keele Research Conference





Meet the Co-Lead CONTROL

Dr. Zohaib Khan

Zohaib Khan is a public health specialist with a doctoral degree in Public Health (Summa cum Laude) from the University of Bremen. Khan also holds Post-Doctoral certificates in Tobacco Control Research from the Leibniz Institute for Prevention Research and Epidemiology- BIPS, Germany, and the University of York, UK. He is currently the Director of the Office of Research and an adjunct Associate Professor of public health at Khyber Medical University, Pakistan.



Khan's research focus is predominantly on the epidemiology and control of NCDs and their risk factors and social health protection in Pakistan. He has authored more than 50 research publications in high-impact factor journals and is an editor of the foremost journal in tobacco control "Nicotine and Tobacco Research". Khan Co-Leads the UK National Institute for Health Research (NIHR) funded research program "CONTROL", addressing TB and mental health multi-morbidity in Pakistan. He is also co-leading two German Govt funded implementation research projects on Social Health Protection in Pakistan. Khan is a Co-Investigator in a Global Health Research Centre "IMPACT" funded by the UK NIHR and is also co-investigating the effects of tobacco advertisement and promotion on adolescents in Pakistan, with funding from the UK Medical Research Council. He is also in receipt of funding from the Health Research Institute of Pakistan, to explore mental health issues in the Trans-gender communities of Pakistan.

Khan has been an active sportsman throughout his life, representing his college and university in hockey and cricket. He is an avid supporter of the Arsenal Football Club in the UK and does not miss any opportunity to watch his favorite football club playing.



What's New?

The Big Awards Night

Leadership Award

The CONTROL team congratulates Prof. Saeed Farooq on receiving NHS MPFT Leadership Award in recognition of his excellent research leadership of patient centered research that has made an incredible difference to so many people across the UK and raised the profile of MPFT on a global scale.





CONTROL Capacity Development Initiative

Ph.D. Studentships

Capacity Building in LMICs is a major component of the CONTROL program and funding is secured for five PhD studentships specifically for Pakistan and Afghan nationals. After a rigorous process of selection between Feb 2023-June 2023 with a panel including senior academics both from Keele and KMU, five PhD students are selected. These students are enrolled at Keele University and full-time based at KMU. Supervisory teams include academics and clinicians from both institutions.

Ph.D. Positions Recruitment Process



Their areas of research and PhD topics are as below;

- Developing an essential package of care for the treatment of Severe Mental Illness as a part of universal health coverage program in Pakistan.
- Adapting guidelines for the management of postnatal depression for use in LMIC using ADAPTE framework.
- Developing and testing Cognitive Behavioral Therapy based intervention for the treatment of depression in people with HIV in Pakistan (DTCD-PHP) or (CBT-HIV Hope in Victory).
- The relationship of the effect of stigma in people with depression and Tuberculosis on adherence with anti-tuberculosis treatment and quality of life.
- Feasibility of Cognitive Behavioral Therapy for Cannabis Use Disorder in Tertiary Care hospitals in Peshawar

After the final interview, candidates received conditional offer from KMU based on achieving required IELTS score and proposals peer review. Unconditional offer will be made in July 2023 and students will be enrolled on 1st August 2023.



Communication Skills Workshop

In an era defined by rapid technological advancements and globalization, effective communication stands as a cornerstone of success. The ability to convey ideas, share information, and build meaningful connections has become more critical than ever before. Against this backdrop, the Communication Skills Workshop held from May 8–12, 2023, for batch 1 and from May 22–26, 2023, for batch 2, emerged as a beacon of enlightenment, offering participants a transformative experience in refining their communication powers. The workshop was facilitated by Dr. Zill e Huma, Associate Professor of Anatomy at the Institute of Basic Medical Sciences at Khyber Medical University.



Day 1: Participants were introduced to various communication models and theoretical frameworks that aid in understanding the process of communication.

Day 2: The second day focused on the mediums and channels of communication, through which communication occurs.



Day 3: Learning styles were introduced, and a hands-on session on the VARK questionnaire was held. VARK, which stands for visual, auditory, reading/writing, and kinesthetic, represents four distinct learning styles that shape the way individuals engage with new knowledge and concepts.



Day 4: The fourth day of the workshop was dedicated to presentation skills

Day 5: The final module on the fifth day addressed stress management via communication

The workshop concluded with an address from a guest speaker. A certificate distribution ceremony was held at the end to recognize the participants completion of the workshop and their efforts to enhance their communication skills.



Participants filling VARK questionnaire





Patient and Public Involvement & Engagement (PPIE) Training

"Implementation needs everyone around the table - healthcare practitioners, patients, academics, and managers."

Krycia Dziedzic, IAU Director, Keele University

The Patient and Public Involvement & Engagement (PPIE) Initiative of the CONTROL study aims to deepen the involvement and engagement of patients, service users, and the public in the research. It emphasizes the principles of co-production, capacity development, diversity and inclusivity, empowerment, advocacy, and evaluating the outcomes, effectiveness, and sustainability of PPIE initiatives to understand their influence on research quality, policy decisions, TB and mental health outcomes, and patient experiences.

Impact Accelerator Unit (IAU) at Keele University in collaboration with CONTROL UK team developed a training module for the CONTROL research team at Khyber Medical University (KMU) Peshawar, spread across two sessions one month apart, not only to share the core concepts of PPIE but to make research team understand that research studies should be relevant, meaningful, and aligned with the priorities and concerns of patients and the public.

Training session was facilitated by:

- Adele Higginbottom, PPIE Project Officer, Impact Accelerator Unit, Keele University, UK
- Alice Moul, Post-Doctoral Researcher, Knowledge Mobilization Research Fellow, Impact Accelerator Unit, Keele University, UK



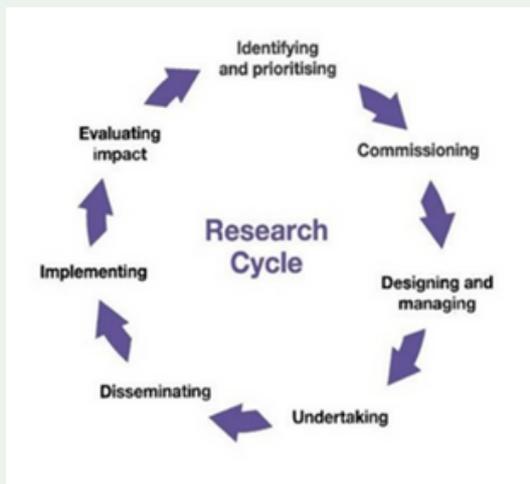
Impact
Accelerator Unit

THIS IS KEELE



Session 1 focused on:

- Overview of PPIE
- Good Practice
- What does PPIE mean to you?
- Why PPIE is important? (Group Activity)
- What are barriers to PPIE in research? (Group activity).



PPIE AT THE CORE

The topics covered in the second session included:

- ❖ How to set up a PPIE Group
- ❖ Reporting PPIE
- ❖ Supporting PPIE members





CONTROL Community Engagement Initiative

Holding Hands with Afghan Refugees – WORLD REFUGEE DAY 2023

The VoICE (Value of Integrated Community Engagement) of CONTROL is a program of interactive community engagement activities focusing on establishing strong linkages with community and patient groups in Khyber Pakhtunkhwa, Pakistan.



On World Refugee Day 2023, the CONTROL CEI team organized its fifth community engagement activity at the Khazana Afghan Refugee Camp in Peshawar. In line with the essence of World Refugee Day, the aim was to cultivate a sense of inclusiveness among the Afghan refugees and to elucidate their importance for the CONTROL program as a major stakeholder. The team engaged with the Afghan refugee community on issues regarding their mental health, stigma, and infectious diseases like tuberculosis and provided an orientation on CONTROL's scope of work. The CEI team conducted two engagement sessions, one each for males and females. The sessions were conducted at the community centers in accordance with the socio-cultural norms of the camps.





Keele Research Conference 2023

Wednesday 14 June 2023 | Keele Hall

Global Mental Health team at Keele University UK embarked on a journey to address one of the most pressing challenges of our time – the state of global mental health. In the corridors of research, in the echoes of countless personal stories, and in the shared experiences of humanity, they explored the impetus to unite and usher in a new era of understanding, compassion, and innovative solutions via research projects.

At the Keele Research Conference 2023, the team showcased the transformative mental health and global mental health projects including CONTROL, THE HOPE, STOPS+, iSWITCHED, and SPIRIT via posters.

MENTAL HEALTH RESEARCH: An overview of projects

LED BY MENTAL HEALTH RESEARCH GROUPS AT KEELE UNIVERSITY






COgNitive Therapy for depReSSIOn in tubercuLosis treatment: a programme of research to improve outcomes for depression and TB in Pakistan and Afghanistan.

Worldwide, Tuberculosis (TB) is the 10th leading cause of death. Depression is a major multimorbidity with TB in most LMICs.

The CONTROL programme aims to develop and test a psychological intervention for treating depression in Pakistani and Afghan refugee TB (and multi-drug resistant TB) patients and to improve their adherence with treatment. The programme also aims to test the intervention's effectiveness and cost effectiveness and examine how the intervention can be implemented in real-world settings.

CONTROL is jointly led by Prof. Saeed Farooq and Dr Zohaib Khan from Khyber Medical University, Pakistan. Prof. Christian Mallen and Dr Martyn Lewis are co-investigators from Keele. There are co-investigators from a variety of different organizations, including the University of Leeds, Lady Reading Hospital, University of Peshawar, and Healthnet TPO.

This is a 48-month project, consisting of four work packages, and is funded by the NIHR.

Meet the Team @ Keele



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Implementing SWITCHing Educational intervention to support switching antipsychotics to improve physical health outcomes in people with severe mental illness.

In England, there are over 490,000 people with Severe Mental Illness (SMI), such as schizophrenia and bipolar disorder. People with SMI are likely to die 15-20 years earlier than people without SMI. Some antipsychotic medications used to treat SMI may inadvertently cause physical health side-effects, which can increase the risk of a physical health problem developing. Switching antipsychotics could help improve physical health for people with SMI.

This study aims to develop and user-test iSWITCHED to enable mental health professionals to implement evidence-based guidance on reviewing and switching high-risk antipsychotics and improving communication with patients on the importance of taking vital medicines.

iSWITCHED is funded by the NIHR.




Traditional HEalers wOrking with Primary care and mental health for Early intervention in psychosis in adolescence: an intervention development and feasibility study.

In low- and middle-income countries (LMICs), more than half of patients with First Episode Psychosis (FEP) initially seek treatment from traditional and spiritual healers (TSH) as their first care. This contributes to an excessively long duration of untreated psychosis.

THEHOPE programme aims to develop a culturally appropriate and context-bespoke intervention for early identification, referral, and management of FEP in the adolescent population in Peshawar, Pakistan and evaluate its feasibility for implementation.

The study will be the first to develop and test a model of primary care practitioners working with traditional healers using a rigorous randomised controlled cluster feasibility trial.

This is a 30-month feasibility study funded by the MRC, consisting of four work packages.




Supervised Treatment in Outpatients for Schizophrenia Plus: protocol for a cluster randomised trial of a community-based intervention to improve treatment adherence and reduce the treatment gap for schizophrenia in Pakistan.

In developing countries, two-thirds of patients with schizophrenia receive no treatment. We previously reported a new approach (STOPS) that resulted in improved treatment adherence and functioning in Pakistan. We aim to implement and evaluate a scaled-up version of this which involves patient, healthcare and wider community partners. STOPS+ is led by Prof. Saeed Farooq, with Keele Co-Investigators Prof. Dikomitis, Prof. Mallen, Prof. Dziezic, Dr. Lewis and Dr. Shepherd, alongside researchers at KMU. The study is funded by the MRC.



Schizophrenia Prediction of Resistance to Treatment: a clinical tool for predicting risk of treatment resistance to anti-psychotics in First Episode Schizophrenia.

Identification of patients at high risk of treatment resistant schizophrenia (TRS) at initial diagnosis may significantly improve clinical outcomes. We developed a prognostic model for predicting the risk of TRS in patients and examined its potential utility and acceptability as a clinical decision tool.

The SPIRIT protocol was published in 2022 and was funded by the NIHR.

Further Information

To find out more about the research we are conducting, please contact Professor Farooq, or a member of the team. Alternatively, further information about our research projects is available from the Keele University website:

<https://www.keele.ac.uk/healthresearch/>
<https://www.keele.ac.uk/research/research/medicines/primarycare/mentalhealth/>

Scan the QR code for more information about our studies, including study protocols.



The Qualitative Study on Intervention Development for CONTROL (COgNitive Therapy for depReSSiOn in tuberculosis treatment) Research Programme

Fatima Khalid¹, Noor Sanauddin², Fayaz Ahmad³, Zohaib Khan¹, Saeed Farooq³

1. Khyber Medical University, Pakistan; 2. University of Peshawar, Pakistan; 3. KEELE UNIVERSITY, UK

Introduction

Pakistan ranks fifth among TB high-burden countries, where almost half of the TB patients also suffer from comorbid depression – a typical multimorbidity that leads to an increased risk of poor outcomes including treatment adherence with anti-TB treatment (ATT). No effective interventions are available to treat depression in people with TB. Therefore, in this work package (WP-1) of CONTROL, we aim to develop a psychosocial intervention for treating depression in TB and improving adherence to anti-TB treatment (ATT). WP-1 is based on ethnographic and qualitative methods for incorporating the perspectives of patients, caregivers, and health professionals.

Methodology Flow Diagram

Results

Theme 1

Understanding of cultural knowledge

"We are currently treating a married lady, according to her husband, she is just making excuses and she is completely all right. Until she is completely cured, she will stay at her mother's home."

Theme 2

Assessment of belief system

"Sadness is obvious because when your family members keep distance, you feel unwanted and deprived. It is apparently the result of social distancing and extra precautionary measures that got her [TB patient] worried because we separated everything from her."

THE CONTROL'S VOICE

Value of Integrated Community Engagement

Authors: **Saima Aileen¹, Sikandar Sultan¹, Sara Khan², Zohaib Khan¹, Saeed Farooq³**

1: KHYBER MEDICAL UNIVERSITY, PAKISTAN, 2: KEELE UNIVERSITY, UK

INTRODUCTION

CONTROL'S VOICE (Value of Integrated Community Engagement), is a series of interactive community engagement activities to establish strong linkages with community and patient groups in Khyber Pakhtunkhwa, Pakistan.

At the very outset of The CONTROL research programme, CEI was envisioned to establish a mutual understanding between patients, communities, community gatekeepers and influencers, civil society representatives and researchers regarding TB and mental health outcomes.

WHO ARE WE!

A team of

- Researchers
- Health professionals
- Community representatives

Working together to develop patient-centred COgnitive Behavior Therapy for depression among TB Patients

VOICE AIN

CONTROL'S VOICE is guided by the aim to improve mental health a TB outcomes among TB patients of both Pakistani and Afghan ori in KPK and to ensure CONTROL'S decision making at every step of research process to be driven by insights from the community.

RESULTS

Pakistani Female Patient:

"I have three children and must take care of them as my husband is unemployed. I am the only bread earner and because of these reasons my stress level has increased. In the end of my husband's illness, I had TB. Even I didn't share with anyone in my family that I am diagnosed with TB. I look at the precautionary measures myself. I used to eat in separate utensils and washed them immediately once I was done with my hands or dishes. I kept myself away from people. I avoided visiting people for fear of spreading disease to them."

Afghani Female Patient:

"I was diagnosed with TB four years ago, my family was not supportive. They did not use to talk with me or talk to me since I had tuberculosis, and I fear. My family used to stay away from me. They stopped talking with me and other relatives in the house, and they all started ignoring me. People in our community also started avoiding me like my relatives when they come to know that I am diagnosed with TB, their attitude was also not very supportive towards me. They stopped visiting our house and told others to avoid me. Due to the behaviour of people, I was very depressed and I was always left in deep thoughts."

Pakistani Male Patient:

"We didn't get afraid that much because TB is common now and there are lots of facilities regarding TB treatment. My father also didn't face any difficulties in taking medicines or any other medical health issues. Though my father did face anger issues. Before the disease, my father didn't have anger issues that much."

Mental Health & Global Mental Health Project Showcase

Internet Addiction Disorder and its Associated Factors among 15-19-Years Adolescents in Colombo District, Sri Lanka

Gayana Ariyadasa¹, Chithramalee De Silva²

1. Senior registrar in Community Medicine, Keele University, United Kingdom
2. Director-Maternal and Child Health, Family Health Bureau, Sri Lanka

Background

Internet addiction disorder is growing as a potentially problematic condition parallel to existing behavioral disorders, especially among adolescents. Nonetheless, the condition is widespread and problematic, limited scientific evidence is available on the prevalence, diagnosis, risk factors, prevention, and efficacy of the treatment

Methods

The objective of the study was to determine the prevalence of Internet Addiction Disorder and its associated factors among 15–19-year-old adolescents in Colombo district, Sri Lanka

Design: A descriptive cross-sectional study

Setting: A school-based study in Colombo district, Sri Lanka

Study population: 1327

Sampling method: Multi-stage stratified cluster sampling method

Instruments: Internet Addiction Test(IAT) was used to detect Internet addiction disorder

Culturally validated to use in Sri Lanka

Self-administered questionnaire

The scale consists of 20 items with a six-point Likert scale

Individuals exceeding one standard deviation above the mean score are considered as the cut-off for having Internet addiction disorder

Results

The overall response rate was 98.9%
The prevalence of Internet Addiction Disorder among 15–19-year-old adolescents was **17.2% (95%CI:15.2%-19.3%)**

Associated Factor	AOR	95% CI
Excessive attachment to social media	4.32	2.12- 8.80
Lack of engagement in outdoor sports	5.40	2.49-11.73
Non-employed mother	2.06	1.40-3.04
Excessive attachment in Internet Gaming	1.94	1.34-2.82
Male sex	2.27	1.27-4.07
Use of the Internet for more than 3 hours per day for non-academic activities	2.59	1.71-3.91
	2.64	1.80-3.85

Developing and user testing iSWITCHED (implementing SWITCHing Educational intervention) to support switching antipsychotics to improve physical health outcomes in people with severe mental illness

Aim: To develop and user-test iSWITCHED to enable mental health professionals to implement evidence-based guidance in reviewing and switching high risk antipsychotics and improving communication with patients and caregivers during this process

Why focus on Physical Health?

- Mortality gap: people with SMI die 15-20 years before people without SMI
- Over 60% of deaths are due to potentially preventable physical health diseases
- Multi-morbidity burden and impact on quality of life/wellbeing

Why focus on switching antipsychotics?

- Some antipsychotics (risperidone, quetiapine, olanzapine) may cause side effects
- Switching high risk antipsychotics to those with lower risks (mirtazapine, aripiprazole) may improve physical health, but rarely occurs in practice

Why might we need an educational intervention about switching?

- Complex process: lack of awareness about switching, lack of suitable guidance on how to switch, tendency to want to avoid "rocking the boat"
- To enable shared decision making and informed choices

Objectives

- To develop a medication review tool to support clinicians to review and consider switching high metabolic risk antipsychotics (APs) to lower metabolic risk APs in people living with SMI
- To develop educational guidance linked with the medication review tool for clinicians to switch APs using a shared decision making approach
- To co-produce educational materials for people living with SMI to understand the metabolic side effects of APs, risks and benefits of switching
- To develop and refine the intervention components in a mixed methods study

Explore

→

Develop

→

Test

Reviewing existing guidelines for switching antipsychotics

Interviewing service users and caregivers about switching

Discussing switching with health professionals

• Developing parts of the iSWITCHED intervention (IT tool, training module, etc.)

• Role play with simulated patients and healthcare professionals (feedback)

• Train healthcare professionals

• Support patients who want to switch, to switch

• Testing all parts of the iSWITCHED intervention in the real world

Traditional healers working with primary care and mental health for early intervention in psychosis in young persons (THE HOPE): Protocol for the feasibility cluster randomised controlled trial

Saeed Farooq, Saima Sheikh, Lisa Dikomitis, Mian Mukhtar-Ul-Haq Azemi, Abdul Jaiil Khan, Noor Sanauddin, Malik Wajid Ali, Johar Ali, Muhammad Friz Khan, Iraan Chaudhry, Nusrat Hussain, Muhammad Gul, Muhammad Irfan, Gabrielle Andrews, Prachi Kaista, Syed Mohammad Uzair Shah, Ishfaq Azemi, Shumaila Hamid, Aaliya Minhas, Christian Mallen, Martyn Lewis

Abstract

Introduction & Objectives: In Low- and Middle-income Countries (LMICs), more than half of patients with First Episode Psychosis (FEP) seek treatment from traditional and religious healers in their first care. This contributes to an increasingly long duration of untreated psychosis (DUP). There is a need for culturally appropriate interventions to involve traditional and spiritual healers (TSH) to assist in their first care provision for mental disorders. Research with TSHs in Pakistan has identified that the following three healers use different methods of treatment, including the possession from jinn (jinn), instruction and advice regarding spirits, Teels, Dams and Dua (prayers).

Methods: To prevent the consequences of long DUP in adolescents in LMICs, we aim to develop and pilot test a culturally appropriate intervention in young persons (THE HOPE) will be developed by using ethnographic and qualitative methods with traditional healers and clinicians. We will conduct a randomised controlled cluster trial with a nested qualitative study to assess study recruitment and acceptability of the intervention. Ninety-three urban councils in district Peshawar, Pakistan, will be randomised and allocated using a 1:1 ratio to either intervention arm (THE HOPE) or control arm (usual care) and stratified by educational setting. Data on feasibility outcomes will be collected at baseline and follow-up. Patients, carers, clinicians, and policymakers will be interviewed to describe their views about the intervention.

Ethics and dissemination: Ethical approval has been obtained from Keele University Ethical Review Panel, Khyber Medical University Ethical Review Board and National Bioethics Committee Pakistan.

Objectives

1. To co-develop with key stakeholders a culturally appropriate intervention for early identification, referral, and management of FEP.
2. To measure acceptability of task sharing, training procedures and to establish pathways for referral and management of FEP in collaboration with all stakeholders.
3. To establish feasibility and acceptability of involving mental health service users in training and feasibility study methods.
4. To evaluate the acceptability and feasibility of the HOPE in terms of changes in knowledge and referral to mental health services and mental health outcomes.
5. To estimate the parameters for e.g., recruitment and retention rates, means and standard deviations of the key outcome measures, to benchmark potential outcome measures and enable sample size calculations for future pragmatic RCT.
6. To assess the best methods for implementing and evaluating the intervention in the local health system.

Introduction

First Episode Psychosis (FEP) has peak onset between 15-35 years of age. Duration of Untreated Psychosis (DUP) is 125 weeks in low- and middle-income countries (LMICs) compared to 62.5 weeks in high-income countries (HICs).

A major factor for the long DUP in LMICs is the preference of the majority of the patients to use traditional and spiritual healers (TSH) in their first care provision for mental disorders. Research with TSHs in Pakistan has identified that the following three healers use different methods of treatment, including the possession from jinn (jinn), instruction and advice regarding spirits, Teels, Dams and Dua (prayers).

Another key factor in the long DUP is the lack of primary care involvement in the treatment of psychosis.

RATIONALE: There are hardly any interventions for improving collaboration with TSH in mental health. There is an urgent need to work collaboratively with TSH and develop and improve evidence (EP) interventions in LMICs as TSHs have the greatest influence in treating mental disorders.

Methodology & Analysis

The intervention will be co-developed working with TSH, PCP and service users through a series of (i) culturally appropriate interactive community engagement activities, (ii) ethnographic studies and (iii) qualitative studies.

The findings of the ethnography will feed into the rapid guide for service structures and interventions (SS) and Focus Group Discussions (FGD) SS (n=25) with both patients and carers) and six FGDs, with 8-12 participants including TSH, primary care physicians, psychiatrists, and other health workers.

Study Design: We will use a pragmatic cluster pilot RCT to test the feasibility and acceptability of the intervention. The intervention will be carried out in the selected urban council of district Peshawar, KP. Randomisation will occur at the Council level and will be allocated using a 1:1 ratio to either intervention arm (THE HOPE) or control arm (usual care) (SH) and stratified by educational setting.

In order to obtain adequate sample size to measure feasibility outcomes we will include all urban councils in district Peshawar (n=93) in the sample, allocated to TSH and THE HOPE arm in 1:1 ratio. We will aim to recruit a minimum of 90 patients (45 in each arm) over 12 months period.

Participant Eligibility Criteria: We will recruit patients (aged 15–25 years) residing in one of the urban councils in district Peshawar with (i) first ever psychotic episode who had not received antipsychotic medication previously, or if they already have used antipsychotic medications, it was for no longer than six weeks.

Study timeline: We aim to pilot RCT to start on 17 April 2023. Recruitment will commence when the trial commences and will be conducted till 17 April 2024.

End of trial: The end of the study is defined as when the 12-week follow-up assessment, and all qualitative interviews have been completed.



CONTROL Journal Club

CONTROL journal club is scheduled on a monthly basis for the research assistants, early career researchers, and CONTROL study research team to appraise the published literature and to incorporate the methodology and findings of papers into their own learning.

CONTROL's third journal club was held on 2nd May 2023. The paper titled **“The value of qualitative methods to public health research, policy, and practice”** was presented by Mr. Awais Paracha and Ms. Maryiam Rahim.

The presenters introduced the concept and background of the paper and critically appraised the paper in a very befitting manner





The fourth journal club was held on July 4th, 2023. Mr. Zeeshan Khan and Mr. Aftab Sahar presented the paper titled, “**Economics and Mental Health; The Current Scenario**” published in World Psychiatry in 2020. The relevancy of economics to the field of mental health was reviewed in terms of production, distribution, and consumption of goods and services. It was included that mental ill-health has a significant impact on economics. The concept of Challenges in shifting “Mental health economics” to “Mental health policy” were also highlighted.

The paper also stated the most well-studied interventions for depression and anxiety.





TB Liaison Group Creation

In the pursuit of eradicating one of the most persistent global health threats, Tuberculosis, and mental health issues, the seeds of change planted during the CONTROL inaugural stakeholder meeting held on 11th November 2021 has bore fruit in the form of the Tuberculosis Liaison Group established in 2023. This journey from inception to realization stands as a testament to the power of collaboration and foresight in tackling depression among Tuberculosis patients.

Over the course of two years, the momentum generated from that seminal gathering did not wane. Instead, it ignited a series of discussions, and resource mobilization efforts that gradually coalesced into the Tuberculosis Liaison Group. The pivotal meeting that marked a significant stride in the collective effort was held on 15th June 2023 at the office of Dr. Haroon, Deputy Director Provincial TB Control Program KPK, Pakistan. Under the overarching objective of facilitation, collaboration, and knowledge sharing, the meeting aimed to create mutually beneficial relationships, promote effective communications, and build a strong support system among the TB Control program and CONTROL program.



Dr. Haroon suggested to have 3-4 members in the group to serve as first point of contact in case of any on-going research related issue. The TB liaison group will be participating in CONTROL workshops and will be the primary people to communicate information about activities to their department.

Furthermore, it was added that capacity development training will be given to liaison staff to have a good understanding of the project. Noteworthy, they act as technical or subject matter experts for the TB control program and will be actively involved pilot and definitive trial as patients will be recruited through TBCP and therapy will be delivered by TB health workers.





- Twitter https://twitter.com/CONTROL_NIHR?s=20&t=qWY9O-Yidzzvhj8PamYp8w

CONTROL @CONTROL_NIHR · 20 Jun
CONTROL CEI team bringin back the light of love and smile on the World Refugee Day 2023 🌟



Saeed Farooq and 5 others

CONTROL @CONTROL_NIHR · 25 May
📖 Learning styles help in better understanding of the particular modalities that can help learners process information most effectively 💡
Participants filling VARK questionnaire to know their learning style. 📝

Communication skills workshop
Day 3 ⬇️



CONTROL @CONTROL_NIHR · 17 Apr
Two interactive group activities during the session focused on the importance of PPIE and Barriers & Facilitators to PPIE in local context 🗣️
[@KeelePPIE](#) [@ResearchKMU1](#) [@AliceMoult](#)



Saeed Farooq and 5 others

Promote

🗨️ 6 ❤️ 13 📊 844 🔗

CONTROL @CONTROL_NIHR · 24 May
"I couldn't find a hero in my life so i became one" ~ Muniba Mazari.
Meet our Iron lady Ms. Ghazala 🌹, who is a perfect blend of love, courage, kindness and resilience, who not only defeated TB but defeated the stigma, depression and taboos associated with TB 🍌



Saeed Farooq and 6 others

Promote

🗨️ 6 ❤️ 18 📊 758 🔗