

WORKSHOP EVALUATION REPORT GFMER Research Workshop, 13-17 June, 2011

Geneva



Geneva Foundation for Medical Education and Research WHO Collaborating Centre

Chemin du Grand-Montfleury 48 1290 Versoix, Switzerland

Phone: +41 22 791 3339; Web: http://www.gfmer.ch

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Professor Aldo Campana 1 July 2011

President, GFMER

WORKSHOP EVALUATION REPORT GFMER Research Workshop, 13-17 June, 2011

Background

The Geneva Foundation for Medical Research and Training (GFMER), in partnership with the World Health Organization's Department of Reproductive Health and Research (RHR)/Special Program of Research, Development and Research Training in Human Reproduction (HRP), organized and conducted a one-week workshop on research methods and study protocol development, June 13-17, 2011 at the World Health Organization (WHO) headquarters. The two main objectives of the workshop were: (i) assist in sharpening participants' skills in research protocol development through critical thinking, and (ii) assist in improving and strengthening research protocols.

This report provides a summary of the workshop methodology and a qualitative and quantitative evaluation of the workshop.

Workshop Methodology

The workshop participants were selected on the basis of their online course performance, completion and quality of the periodic online assessments, and the quality of the draft of their respective study protocols. In many respects, the participants were the "cream of the crop" from the 2011 cohort, numbering over 150 from 45 countries.

The Geneva workshop was expected to provide participants with additional opportunities to interact with each other and share their experiences while improving upon their respective study protocols. The study protocols and online courses served as the main guidance when designing the workshop contents. The core resource persons for the workshop (Professor Aldo Campana, Dr. Shyam Thapa, and Dr. Karim Abawi) reviewed each protocol and identified key areas in which further training could help improve the participants' skills. In addition, the following factors were taken into account when deciding on the workshop content: time constraint of one week, participants' diverse background and experience, and the availability of the staff to conduct workshop sessions.

The basic principles that we followed in deciding the workshop course were: avoid repeating the online course, and allow adequate time for one-on-one consultation, access to resources, and interaction and dialogues. The preliminary contents were reviewed with other key stakeholders and finalized for implementation. The final course schedule is shown in Table 1.

Prior to starting the course, we also tried to identify a mentor for each of the participants based on the topic of their research protocols. The workshop input included presentations on selected topics by WHO staff from several departments. The themes were aimed at enhancing the participants' study protocols.

PowerPoint slides and other visuals were used to enhance the presentations. Presenters posed questions to encourage discussion among participants and make the sessions as interactive as possible. The presentations and all the discussions were held in English. Handouts of the presentations, as well as other supplementary materials, copies of reference materials, were prepared for each day's session and distributed to participants at appropriate times. These were also prepared in an effort to make them useful for the participants for use as reference materials in their work. Morning sessions were generally set aside for presentations followed by group discussions in the afternoon sessions.

Process monitoring was designed to be a critical component of the workshop experience for the participants. One such effort included a participatory evaluation of the individual presentations by the peers (i.e., participants) themselves. Further, a brief endof-workshop evaluation that included both quantitative and qualitative components was conducted. At the conclusion of the workshop, each participant received a certificate (sample attached) of completion based on their attendance, participation, presentation, and peer review / evaluation.

Profile of the Participants

Of the 15 participants selected for the workshop, one could not attend because of problems encountered while obtaining a visa. There were, thus, a total of 14 participants, 7 females and 7 males representing various local- and national-level organizations. These participants were selected from a pool of over 150 online-training program administered by the GFMER, Versoix.

The 14 participants of the workshop came from 12 countries. The majority of them (10) were medical doctors, one was a PhD, two had master's level education, and one was a diploma holder (Table 2).

Of the 14 participants, one decided to work on a new topic for study protocol development because the study protocol that the person had been working on was already implemented and completed. Two participants decided to change their topics for research. However there was not enough time for them to prepare and present the materials for feedback from resource persons/mentors and peers. Consequently, there were a total of 12 study protocols on various topics for review and discussions in the workshop. The 12 study protocols belonged to two broad areas – maternal health and adolescent health (Table 3).

Performance and End-of-the-Workshop Feedback

The performance of each participant was evaluated on multiple factors, including: regularity in attendance, participation in the discussion, critical thinking (as demonstrated by providing comments, asking questions, reviewing papers and study protocols), ability to present and discuss research study protocol, level of improvement during the workshop period, and giving peer reviews and evaluations. Table 4 presents the results of the peer review and evaluation.

Three main points emerged from the results. First, all of the 12 presenters scored higher than the average score (2.5, on a scale of 1 to 5, 5 being the highest). Second, three of the participants scored over 4. Third, three scored slightly less than 3. As discussed in the workshop, those receiving 4 or higher signified that the proposal could proceed further with only minor modifications. Those in the middle meant that the proposals needed further clarification and some revision, as suggested in the discussion, before proceeding further. Finally, those that received less than 3 signified that the researchers needed to re-think either the research questions or research design or both, and most likely make major modifications on the study protocols.

The resource persons gave their feedback on each presentation after the scoring was completed by the peer reviewers. The resource persons' criteria for evaluations were both technical and general. The technical criteria included: appropriateness of the research questions, knowledge of the literature, study design, data collection instruments,

internal consistency, and carefulness in preparing the protocol. The general criteria included: clarity in presentation, quality of presentation (use of visual), proportionality of different components of the study protocol, demonstration of confidence/competence, nature/types of comments from the peers, and reply to queries for clarification and comments/suggestions.

At the end of the five-day workshop, an evaluation form was administered to obtain both quantitative and qualitative feedback from the participants. The responses were anonymous (the participants were asked not to specify their names or other identification on the form). The quantitative data are presented in Table 5.

The overwhelming majority of the participants found the workshop to be satisfactory, relevant and useful to their work. Similarly, 10 out of the 13 participants thought the concepts, principles and subject matters were presented in a highly satisfactory way. Seven participants found the technical level to be "just about right," while none thought it was "too simple" or "too difficult and technical" to understand. Nine thought the workshop was most participatory and interactive. The majority thought that the participants' questions were answered in a highly satisfactory way.

Eight of the 13 participants felt that the duration of the workshop was "just about right," while 4 thought that it was "too short." Nearly all the participants thought that they would be able to use and apply the skills that they learned from the workshop in their own work. Likewise, most of the participants felt that the workshop met the expectations they had about the workshop.

On the qualitative side, three specific questions were included in the form for the participants to comment on. The first question asked which specific sessions of the workshop the participants found most useful and least useful for them and their work. The second open-ended question asked which tools and methods covered in the workshop that the participants found to be most useful. The third question asked for comments or suggestions on how to make the workshop more useful and effective in the future. The results are reported in Tables 6, 7 and 8.

The feedback indicated that most of the participants found the various materials presented and discussed useful to them and in their work (Table 6). Many thought the peer review and evaluation approach adopted for the workshop was innovative and highly useful. At the same time, a few found some sessions least useful (Table 7).

Although most of the participants felt a high degree of satisfaction with the contents and scope of the workshop, several had specific suggestions towards making such a workshop more effective and useful (Table 8). These ideas included allowing more time for review and discussions of the individual research protocol, and providing opportunities to interact with the assigned mentors prior to the workshop or more frequently during the workshop period. Several felt that the accommodations could have been better. Some wondered whether it might be feasible for the GFMER to consider giving participants an option to stay in more convenient hotels in town. Many of the points raised in the anonymous evaluation form were also highlighted in the remarks at the concluding session from two participants on behalf of all the participants (attached).

Conclusions, Recommendations, and Follow-on Activities

The participants' feedback—based on individual reporting, and group verbal reporting, and end-of-the-workshop evaluation—indicated that the workshop was highly satisfactory and effective and that it was able to meet the expectations of the overwhelming majority of the participants. The most common response from the participants was that the knowledge and skills imparted during the workshop were "practical" and "innovative." Furthermore, they expressed that group review discussion of each of their own study protocols made the experience more applied rather than just theoretical.

Nearly all participants commented that they found the peer review and evaluation tool very innovative and highly useful in continuous improvements in their study protocols. None of the participants dropped out from the workshop. All the participants found the working group, presentations and peer evaluations highly useful for learning. They began challenging each other on the assumptions, concepts and proposed indicators. We believe this promoted critical thinking of the participants. The participants made commitments to continue to work on their respective research protocols and access online technical consultations particularly with the WHO staff.

Among the 12 who presented their study protocols, we identified 2-3 to be significantly above average in their knowledge and skills in research methods and study protocol development. We believe this corps of professionals could eventually be turned into a field-based cadre of professionals who would be capable of assisting other

professionals/partners in strengthening and building local research capacity. They could also be mobilized to serve as local liaison resource persons on behalf of the GFMER and WHO RHR/HRP workshops in the future. It is therefore important for GFMER to explore to the possibility of setting up local resource persons in selected sites. The local resource offices can be an important vehicle towards democratizing the administration and delivery of the courses.

Some important suggestions were made by the participants, many of which were reflected in the end-of-workshop evaluation. Common among these included improvement in accommodations and the possibility of meeting with the assigned mentors early on the process. The original plan to connect the participant to a mentor early on in the workshop place could not take place as effectively as expected. Timing was a major issue; some mentors were away, and further the annual meeting of the governing council of WHO RHR/HRP took place during the same week. The overlapping of the workshop with the governing council meeting should be avoided in planning for the future workshops.

The suggestions should be used to improve the 2012 round of the workshop (assuming resources will be available). In hindsight, a time-period of one week is most likely insufficient for a workshop schedule. If the workshop were conducted over 9 days it would provide more time both for the participants to prepare their materials and for the resource person to work with them more satisfactorily. This suggestion does have implications for financial resources. In order to make the Geneva meet the needs and expectations of the participants in the future, we recommend that a one-on-one interviews over the phone with the participants identified for the course be considered. We further recommend that to be eligible for the Geneva part of the workshop a participant should posses at least a Master's degree in a related field. Not doing so will most likely result in a frustrating experience for such participants especially when the majority of the participants hold higher education degrees.

As follow-up steps, each participant was encouraged to complete the online course in research ethics. It was hoped that each participant will continue working on their respective study protocols. As well, we assured the participants that they would receive continued online support and consultation. We also discussed the possibility of certain participants attending the 5th African Sexual and Reproductive Health Conference

to be held Feb 9-12 in Cairo. We further discussed possible panel topics for consideration, to be will be followed up via email. We will continue exploring the possibility of establishing some country-specific GFMER training liaison point persons. Some of the best performing participants who are strategically located may be engaged to expand the reach of the course especially by those who may not have a readily online access to the courses. There are several indications that there is a growing demand for the course.

Finally, the report mainly focuses on immediate outcomes. It would be highly useful to consider mechanisms for long-term follow-up of the participants and successes with their respective protocols. This warrants exploration.

Time	Day	Presenters
	June 13, Wed	
09-10	Welcome and Introduction Review of the Agenda	Aldo Campana, Alexis Ntabona, Heli Bathija, V. Chandra-Mouli, Blaise Bourrit, Shyam Thapa, & Karim Abawi
10-12	Retrieving scholarly medical literature from WHO, HINARI and more	Kim Parker and Ian Roberts
12-13	Lunch	
13-17	Individual or group work on literature search	Karim Abawi /Shyam Thapa
	June 14, Tues	
09-9:30	Review of the agenda	
09:30-11	Systematic reviews: an overview of what, why, and how	Doris Chou
11:12	Formative research: What, why, and how	Elizabeth. Corey / Shyam Thapa
12-13	Lunch	
13-17	Further discussions on systematic reviews	Shyam Thapa
	June 15, Wed	
09-9:30	Review of the agenda	
9:30-10	Support for SRH research overview	Heli Bathija
10-10:30	Support for SRH research for Africa	Hady Diallo
10:30-12	Ethics in research	Jacqueline Marks / Shyam Thapa
12:00 onwards	Field tour	Blaise Bourrit

Table 1: Schedule of Main Activities for the GFMER Research Workshop

Time	Day	Presenters
	June 16, Thurs	
09-12:00	Individual work on ethics section in the protocol	Jacqueline Marks / Shyam Thapa
12:00-13:00	Lunch	
13:00-14:00	Developing recommendations & guidelines at WHO	Mary Lyn Gaffield
Presentation	n of Research Protocol by the Participants and	d Peer Review / Evaluation
14:00-14:30	Point-of-care ultrasound as an AID to triage, diagnosis and intervention in developing countries	Asma Ali (Kenya)
14:30-15:00	The maternal diary: Its role in reducing obstetric emergencies and improving pregnancy outcome in resource poor settings	Bonventure Ameyo Masakhwe (Kenya)
15:00-15:30	Epidemiological Characteristics of Obstetric Fistula Patients in Afghanistan	Homa Kabiri (Afghanistan
15:30-16:00	Access to maternal health in post-conflict southern Sudan Does the health system understand the context?	Elmusharaf Khalifa (Sudan)
16:00-16:30	Active management of term prelabour rupture of membrane with oral misoprostol versus expectant management followed by Oxytocin stimulation	Alexander Uamai (Nigeria
16:30-17:00	Measuring the effectiveness of the free maternal health program in Bauchi and Sokoto states Nigeria	Garba Aminu Magashi (Nigeria)

Table 1: Continued

Time	Day	Presenters
	June 17, Fri	
09:00-09:30	Progress made toward empowering of communities in maternal and newborn health and increasing access to quality health services, in Netrakona district, Bangladesh	Cecilia Capello (Switzerland)
09:30-10:00	An update on the diagnosis of the infertile woman	Jesame Cristian (Chile)
10:00-10:30	The impact of adolescent friendly services in sexual and reproductive health behaviour of adolescent in Ethiopia	Mengistu Asnake (Ethiopia)
10:30-11:00	Assessing the vulnerability of adolescent to HIV /AIDS in Chitungwiza, Zimbabwe	Hilda Musonza (South Africa)
11:00-11:30	Exploring the Context of Vulnerability of Adolescent Girls and Identifying Mitigating Strategies in Eldoret, Kenya.	Abraham K.Mulwo (Kenya)
11:30-12:00	Exploring challenges and barriers for effective implementation of adolescent friendly sexual and reproductive health services under National Rural Mission in India	Sita Shankar (India)
12-13	Lunch	
13:00-13:30	Assessing availability and accessibility of adolescent sexual and reproductive Health Services in Urban Zimbabwe: the Case of Harare	Delice Gwaze (Zimabwe /Switzerland)
13:30-14:00	Awareness and practice of contraception among the youth in urban Malaysia -A Pilot Study	Prachi Renjhen (Malaysia)
14:00-14:30	Evaluation of NorAQ questionnaire validity and reliability among women living in Donetsk region, Ukraine	Anna Yermachenko (Ukraine)
	End-of-the-workshop session	

Table 1: Continued

Table 1: Continued

	June 17, Fri
	End-of-the-workshop Session
3:30 PM	Chair –Prof. Aldo Campana
	Results of the peer evaluation on individual presentations
	Awarding of the Certificate and Special recognization
	Remarks by two participants (Dr. Prachi Renjhen and Dr. Abraham Mulwo) on behalf of all the participants
	Remarks by Dr Karim Abawi
	Remarks by Dr Heli Bathija
	Remarks by Dr Shyam Thapa
	Remarks and closing by the Chair

Last Name	First Name	Gender	Country	Education	E-mail
Capello	Cecilia	F	Switzerland	MD, Master in International Health Management, Economics and Policy	zimbaceci@yahoo.it
Elmusharaf	Khalifa	М	Sudan	MD, Health System	khalifaelmusharaf@rcsi.ie
Garba	Aminu Magashi	М	Nigeria	MD, Public Health	gamagashi@gmail.com
Gwaze	Delice	F	Zimbabwe/ Switzerland	MBA, BSc Politics and Administration	delice.gwaze@gfmer.org
Jesam	Cristian	М	Chile	MD, Obs/Gyne	cjesam@icmer.org
Kabiri	Homa	F	Afghanistan	MD, Obs/Gyne	homa.kab@gmail.com
Kibret	Mengistu Asnake	М	Ethiopia	MD, Public Health	MAsnake@pathfind.org
Masakhwe	Bonventure Ammeyo	М	Kenya	MD	ammeyos@yahoo.com
Mulwo	Abraham	М	Kenya	Doctor of Philosophy in Culture, Communication and Media Studies	abraham.mulwo@gmail.com
Musonza	Hilda	F	Botswana	Diploma in Nursing	hildaroiel@gmail.com
Renjhen	Prachi	F	Malaysia	MD, Obs/Gyne	renjhen@yahoo.com
Uamai	Alexander Omoarebu	М	Nigeria	MD, Obs/Gyne	alexuamai@yahoo.com
Wunnava	Sita Shankar	F	India	BA Economics, MA Social Work	wsitashankar@gmail.com
Yermachenko	Anna	F	Ukraine	MD, Obst/Gyne	Anna_yermachenko@hotmail.co m

Table 2: Participants' Profile, GFMER Research Workshop, 13-17 June 2011, Geneva

Sr No	РІ	Context	Substantive Area	Research Design	Data Collection Technique	Measures/Indicators
1	Aminu	Nigeria	MH Free	Pre- post	Survey	Effectiveness of free maternal
	Garba		services			health services
2	Asma Ali	Kenya	MHUltra sound	OR		Improving care through early
						detection of risk pregnancies
3	Cecilia	Bangladesh	MHMNH/IFC	Qualitative	Triangulation of	Effects of IFC (individual, family
	Capello				different methods	and community)
4	Masakhwe B.	Kenya	MHObst	Controlled	Cross-sectional	Use of maternal diary, health
	Ammeyo		emergencies	comparative		literacy among women of
				interventional		childbearing age
				study		
5	Homa Kabiri	Afghanistan	MHObstetric	Observational,	Cross-sectional	Epidemiological characteristics
			Fistula	quantitative		
6	Khalifa	Sudan	MH health	Mixed	Triangulation of	Access to maternal health services
	Elmusharaf		systems	methods	Various methods	in post-conflict situation, health
						system barriers
7	Alexander	Nigeria	MHterm	RCT	Specific	Active Management of term
	Uamai		prelabour rupture		questionnaire	prelabour rupture of membrane
			of membrane			with oral misoprostol versus
						conservative management

Table 3: GMFER 2011 Geneva Workshop Participants: Summary of Research Protocols

Table 3, Continued

Sr No	РІ	Context	Substantive Area	Research Design	Data Collection Technique	Measures/Indicators
8	Anna Yermachenko	Ukraine	NorAQ instrument	One-time x survey	Survey	Reliability and validity of the measures of violence experienced by women
9	Abraham Mulwo	Kenya	AH street children	Qualitative	IDI/FGDs	
10	Mengistu Kibret	Ethiopia	AH Adolescents/youth friendly services	Mixed methods	Cross Sectional	Impact on SRH
11	Sita Shankar Wunnava	India	AH Adolescents/youth friendly services	Qualitative	Triangulation Interview, questionnaire and FGD	Barriers and challenges
12	Delice Gwaze	Zimbabwe	AH Adolescents/youth friendly services	Observational	Cross Sectional	availability of and accessibility to SRH services
13	Hilda Musonza	Botswana	AHvulnerability to HIV/AIDS		Survey	Assessment of vulnerability (adolescents)
14	Prachi Renjhen	Malaysia	AH Contraception	Qualitative	Survey	Knowledge and use of contraception

Name	Score
Homa Kabiri	3.2
Ameyo Masakhwe	2.9
Elmusharaf Khalifa	4.3
Alexander Uamai	3.2
Aminu M. Garba	3.6
Cecilia Capello	3.8
Cristian Jesame	3.2
Mengistu Asnake	4.4
Abraham Mulwo	4.1
Delice Gwaze	2.9
Prachi Renjhen	3.5
Anna Yermachenko	2.8

Table 4: GFMER Workshop Presentations:Results (average score*) of Peer Review and Evaluation

*On a scale of 1 to 5, 5 being the highest. The scores are averages of the individual scores given, anonymously, by all (N=12) the participants.

Note: Names listed in the order presentations were made.

Item	Ν	%
To what extent was this workshop relevant and useful to your work?		
1 (least relevant and useful)	0	
2	0	
3	$\frac{0}{2}$	15.4
4	3	23.1
5 (most relevant and useful)	8	61.5
Were the concepts, principles and subject matter clearly presented and discussed?		
1 (least satisfactory)	1	7.7
2	0	
3	2	15.4
4	7	53.8
5 (most satisfactory)	3	23.1
Opinion about the technical level of this workshop		
Most of it was too technical and difficult to understand for me	0	
Some of it was too technical and difficult to understand for me	4	30.8
All of it was just about right for me	7	53.8
Some of it was too simple for me	2	15.4
Most of it was too simple for me	0	
To what extent was the workshop interactive and participatory?		
1 (least)	0	
2	0	
3	3	23.1
4	1	7.7
5 (most)	9	69.2
How well were the participants' questions answered?		
1 (least satisfactory)	0	
2	0	
3	3	23.1
4	5	38.5
5 (most satisfactory)	5	38.5

Table 5: Participants' Feedback at the End of the Workshop, GFMER 2011 GenevaResearch Workshop, 13-17 June 2011

Table 5, continued

Opinion about the time duration (length) of this workshop	1	
Too long	1	7.7
Just about right	8	61.5
Too short	4	30.8
To what extent do you think you would be able to use and apply		
in your work the tools and techniques introduced and discussed		
in this workshop?		
1 (least likely)	0	
2	0	
3	0	
4	5	41.7
5 (most likely)	7	58.3
Missing	1	
At the end of this workshop, how do you rank your level of knowledge and skills about the development of research protocol?		
1 (lowest)	0	
2	0	
3	1	7.7
4	10	76.9
5 (highest)	2	15.4
To what extent did the workshop meet your expectation that you had before the workshop?		
1 (lowest)	0	
2	1	7.7
3	2	15.4
4	7	53.8
5 (highest)	3	23.1

-- indicates no value.

Table 6: Specific sessions of the workshop that the participants found most useful for them and their work: Response to an open-ended question from the GFMER Research Workshop participants at end-of-the workshop (N=13)

- 1. Systematic reviews and project discussions.
- 2. Review of literature, development of guidelines, and formative research were the most useful. Peer evaluation was extremely good session in stimulating critical thinking.
- 3. Research methods, retrieving scholarly medical literature from WHO, and systematic reviews.
- 4. The discussions on participant topics were very useful.
- 5. Sessions on ethics, systematic reviews and presentations of research protocols.
- 6. Individual presentations of research proposals.
- 7. Qualitative research design, research questions (how to frame), and research ethics.
- 8. I think that for me the most interesting modules were about research methodology.
- 9. Protocol presentations (review and comments), systematic reviews.
- 10. Study design discussions, research methodology, literature research, systematic reviews and formative reviews.
- 11. Structured presentations from experts, PowerPoint with peer review, comments on PowerPoint by experts.
- 12. The comments on the research proposals and peer review session was the most useful, followed by literature review/HINARI/Pubmed and systematic reviews.

Note: Each number represents response from one participant. One respondent had no response.

Table 7: Specific tools and methods covered in the workshop that the participantsfound likely to be least useful: Response to an open-ended question from theGFMER Research Workshop participants at end-of-the workshop (N=13)

- 1. Most of it was useful but comparatively sessions that had more of biomedical content was not as appealing to me as they did not relate to my specialization.
- 2. Ethics in research / informed consent. Need to understand it better.
- 3. Genetics course offered through online.
- 4. Presentation of systematic reviews / WHO guidelines preparation.

Note: Each number represents response from one participant. Nine respondents had no specific comments.

Table 8: Comments/suggestions as to how this kind of a workshop could be mademore useful/effective in the future: Response to an open-ended question from theGFMER Research Workshop participants at end-of-the workshop (N=13)

- 1. The workshop was perfect. Thanks.
- 2. Interaction with mentors before coming for intensive training would probably help polish our protocols before presentation. During intensive training some specific time should be allocated for interaction with mentor.
- 3. Tutors should be assigned and they should comment on proposal before students arrive in Geneva so that there can be enough time for corrections.
- 4. If time can be increase, and if the participants can interact with the mentors before coming for the course then it would be very helpful.
- 5. Time is needed for continued support from mentors. Interactions between participants should be enhanced by posting questions which can then be interactively discussed online.
- 6. Improve remarkably on accommodation arrangement. Make presentation on "Introductory Medical Statistics". Reduce number of presentations by WHO interns.
- 7. More one-on-one with mentor. Receive feedback on research proposal from mentor before the workshop.
- 8. I would include modules on contraception and infertility. I also suggest that this kind of evaluation be made at the end of the all the modules.
- 9. The mentors should start working with participants before coming to Geneva to enable more time for feedback. Improve on accommodation.
- 10. Presentations could be done in more structured way by topics (ppt on youthfriendly centers the same day and so on). More experts coming to give suggestions to presenters.
- 11. If proposals are reviewed earlier then it would give more time for improvement.
- 12. I think involving the participants in advance in selecting the topics to be covered during the workshop. Participants' proposals could be available to other participants before the presentation so they can read them in advance. Overall this was a very nice workshop, interactive and very dynamic.

Note: Each number represents response from one participant. One respondent had no response.

Remarks at the closing session by Dr. Abraham Mulwo on behalf of all the workshop participants, GFMER Research Workshop, 13-17 June 2011

On behalf of all my colleagues who participated in the workshop in sexual and reproductive health research in Geneva, I wish to make the following remarks and observations based on the deliberations we, the participants, had on the eve of our last day of training in Geneva.

First, we wish to sincerely thank the sponsors, organizers and the resource persons of both the online course and the one-week research training in Geneva for the noble initiative and the opportunity that they gave us to participate in the training. We would also like to thank the Geneva State Chancellery for their sponsorship that enabled many of us to attend the workshop in Geneva.

As participants in the training, we have found the GFMER/WHO training to be very useful not only in building our professional and research capacities, but also in advancing our skills in training others. Those of us who teach at universities have not only benefitted from latest reference materials that were provided by the key resource persons, but we have also acquired innovative teaching techniques that we are now adopting in training our students. The reading materials were as useful to us as they were to some of our graduate students who are pursuing research in issues relating to adolescent sexuality and reproductive health.

As participants, we have benefitted from the online platform which enabled us to interact with our colleagues and, more importantly, with the resource persons who facilitated the various sessions. We have also found the interactions that we have had with our respective mentors useful in strengthening our individual research protocols and our general capacities to conduct research. We feel privileged to have had the chance to meet and engage face-to-face with our mentors regarding our research protocols while in Geneva. We also learned a lot through our engagement with the interns and other staff working in the various sections of WHO.

The highly interactive nature of the training in Geneva provided a platform for knowledge-sharing amongst our colleagues which added value to the incisive comments that we also got from the resource persons. Additionally, the peer critique mechanism,

adopted in the workshop, enabled us to reflect deeply not only on our colleagues' research protocols, but on our individual work as well. It was amazing to see the quality of knowledge, expertise and experience that various participants had on various research issues. For his role and contribution we would like to especially acknowledge and thank Dr. Shyam Thapa. He provided undivided attention and led most of the discussion and review sessions. Except for the field tour, he was present in all the sessions, facilitated the discussions, provided technical guidance and was truly as the main technical resource person in every sense of the word. All of us are grateful for this role and mentorship. We are also thankful to other resource persons that spoke on specific thematic areas. We are thankful to Dr Karim Abawi and his associate Ms. Fionna Poon expertly coordinating the workshop from the start to finish. Our heartfelt thanks to Professor Campana for his overall leadership and to Dr. Blaise Bourrit for his generosity and kind hospitality.

As we conclude the course, we are humbly request for the GFMER's continued support not only in finalizing our research protocols, but also in entire research process and dissemination of research findings. We hope that your technical input will continue until our individual research projects are completed successfully.

We do hope that this course will continue to expand so as to benefit more and more people who are looking for such opportunities. To this effect, we wish to make the following suggestions that we think may be useful in strengthening the programme:

- 1. That an alumni association be established to enable those who have been through the course to continue engaging on various issues that might be of mutual interest.
- 2. That the intensive workshop in Geneva should in future also involve selected previous scholarship beneficiaries who have successfully completed their research projects. This will enable them to share their research findings and provide case examples that the trainees may draw from in their discussions.
- 3. Those scholarship beneficiaries should, in future, be involved in discussing accommodation arrangements in Geneva. We did realize that Geneva is an extremely expensive city in terms of accommodation, which clearly explains the preference of Mandat International by many organizations. However, there are those who feel that the organizations that they work for may be willing to subsidize accommodation costs, and therefore enable them to stay in an alternative accommodation.

4. Several of us think it would be better it the duration of the workshop could be extended by couple more days so that there is a weekend before ending the workshop. This would provide the extra time required for the participants to complete their assignments, revisions, and preparation of the presentation materials.

Once again, we would like to thank the resource people, organizers and the funding agencies for a highly useful and successful workshop. The workshop showed innovative approaches and was practical in many respects. We all greatly appreciated the opportunity.

Remarks at the closing session by Dr. Prachi Renjhen on behalf of the workshop participants, GFMER Research Workshop, 13-17 June 2011

On behalf of all the participants as well as on my own behalf, I would like to thank the Geneva Foundation for Medical Research and Training (GFMER) and WHO for conducting such a highly useful workshop. It indeed is an honor to present the feedback and suggestions of all the participants.

We all are greatly indebted to the Geneva Foundation for Medical Research and Training (GFMER) and World Health Organization's Department of Reproductive Health and Research (RHR)/Special Program of Research, Development and Research Training in Human Reproduction (HRP), to organize and conduct the online course and one-week intensive training workshop on research methods and study protocol development, at the World Health Organization (WHO) headquarters.

We extend their heartfelt gratitude and thanks to Professor Aldo Campana, Dr. Blaise Bourrit, Dr. Karim Abwai, Dr. Alexis Ntabona, and Dr. Heli Bathija for providing this great learning opportunity. The topics for the workshop were well chosen and resource faculty for the workshop --Dr. Doris Chou, Ms. Elizabeth Corey, Dr. Hadi Diallo, Dr. Mary Lyn Gaffield, Ms. Jacqueline Marks, Ms. Kimberly Parker, and Mr. Ian Roberts--did a great job in their respective presentations / talks. The online presentation and the tips on literature search during the workshop by Professor Aldo Campana were extremely helpful.

Our special thanks and gratitude, to Dr. Shyam Thapa for being excellent teacher and guide. Through him, we also got insight into the finer aspects of teaching and evaluation methodologies. We all felt encouraged and appreciated the presence and comments on our presentations by Dr. V. Chandra-Mouli and Dr. Krishna Bose. We truly appreciate the efforts of Dr. Karim Abwai. He coordinated the workshop extremely and took good care of needs and comforts of all the participants and made all efforts to make the stay comfortable and workshop fruitful. We would be failing in our duty if we don't thank Vanessa Brandalesi and Fionna Poon for providing technical support and assistance in making this workshop a great success. We also extend our thanks to the Geneva State

Chancellery and their sponsors for the financial support towards the travel and accommodation in Geneva.

The best thing about this workshop was that it not only helped in sharpening skills in research protocol development but also stimulated critical thinking, especially the session on peer evaluation. The interaction with participants from other nations helped in getting Global perspective of maternal and adolescent health.

We have a few suggestions for the training program.

During the online course

- Feedback from participants after each online module is completed should be taken.
- Each participant should be given the feedback on the online assignment submitted.
- Rating of participants according to the performance would be a good way of feedback.
- Assignment of volunteer local coordinators for facilitating the projects if possible
- To conduct short orientation workshops locally before the course (if feasible), which will have the following benefits: (i) Many more local health researchers will become aware of this course, (ii) the basics and advantages of distance learning would be promoted, and (iii) the basic of research methodology could be discussed on a one-to-one basis.

Intensive training/workshop

- There should be active interaction with the assigned mentors regarding the project proposal before the intensive training program, if at all possible.
- During the 7-day program, it would good to allocate more time for interaction with mentors.
- Complimentary coffee during sessions would be welcome.

Special thanks to Dr. Blaise Bourrit for his kind hospitality and organizing the field tour which made the workshop memorable. Once again we complement the good work being done collaborately by the Geneva Foundation for Medical Research and Training and WHO and wish continued great success in all their future endeavors.

Links

- Training Course in Sexual and Reproductive Health Research Geneva Workshop 2011 (http://www.gfmer.ch/SRH-Course-2010/Geneva-Workshop/Geneva-Workshop-June-2011.htm)
- Training Course in Sexual and Reproductive Health Research Geneva Workshop
 <u>2011 Images (http://www.gfmer.ch/SRH-Course-2010/Geneva-Workshop/Geneva-Workshop-June-2011-Images.htm</u>)



FROM RESEARCH TO PRACTICE: TRAINING COURSE IN SEXUAL AND REPRODUCTIVE HEALTH RESEARCH

THE GENEVA FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH

WHO COLLABORATING CENTER IN EDUCATION AND RESEARCH IN HUMAN REPRODUCTION IN PARTNERSHIP WITH WORLD HEALTH ORGANIZATION THE DEPARTMENT OF REPRODUCTIVE HEALTH AND RESEARCH

CERTIFIES THAT

Ms./MR./DR.

HAS SUCCESSFULLY COMPLETED THE RESEARCH WORKSHOP, HELD IN GENEVA, 13-17 JUNE 2011, AS FINAL PART OF THE TRAINING COURSE IN SEXUAL AND REPRODUCTIVE HEALTH RESEARCH

Prof. Aldo Campana President Geneva Foundation for Medical Education and Research **Dr. Shyam Thapa** Scientist Reproductive Health and Research World Health Organization, Geneva

Dr. Karim Abawi Course Coordinator Geneva Foundation for Medical Education and Research