

WORKSHOP EVALUATION REPORT GFMER Sexual and Reproductive Health Research Workshop, 27-31 August 2012 Geneva



GENEVA FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH

WHO Collaborating Centre in Education and Research in Human Reproduction

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The GFMER appreciates the valuable contribution of the WHO Department of Reproductive Health and Research for its continuous support, providing the venue for the workshop and teaching research related topics by experts with years of experience in the field of sexual and reproductive health.

The GFMER is also grateful to Republic and Canton of Geneva for its financial support in covering the travel costs and accommodation of the workshop participants in Geneva.

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Thanks to Dr. Blaise Bourrit's arrangement and patience for a special field visit during which the participants visited Geneva and Geneva State building, a rare chance!

Finally GFMER congratulates the participants of the workshop for completing the course and producing relevant research projects that reflected the health needs in their respective countries.

With the valuable support from our partners we continue our commitment in providing training in research methodology in sexual and reproductive health and enhance research capacity building more effectively.

Professor Aldo Campana President, GFMER

21 September 2012

WORKSHOP EVALUATION REPORT GFMER Research Workshop, 27-31 August 2012

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Background

Since 2003 the Geneva Foundation for Medical Education and Research (GFMER) in partnership with the World Health Organization (WHO) and other partner institutions organizes an intensive training course on sexual and reproductive health at the WHO headquarters in Geneva. The course focuses on research methodology and attracts participation of health professionals from different countries and particularly from developing countries. Through the pool of participants, GFMER has managed to disseminate the course in countries like Afghanistan, Argentina, Cameroon, China, Indonesia, Laos and Romania.

In order to reach more health professionals, in 2010 GFMER in collaboration with WHO and other partners launched the online course on research methodology in sexual and reproductive health. "From Research to Practice: Training Course in Sexual and Reproductive Health Research" uses distance learning and offers a training package specially developed for those health professionals involved in research, whose access to learning is limited by time, financial resource or other constraints and for whom access to quality education and learning is limited. Participants of this online training course gain experience in general, day-to-day health care demands as well as specific, long-term challenges in the field of sexual and reproductive health research.

In 2011, GFMER successfully implemented the second edition of its online training course, with more experience gained from the 2010 edition.

Of all participants of the 2011 edition of online training course, 13 were invited to attend a workshop from 27 to 31 August 2012 at the WHO headquarters in Geneva. The objectives of this intensive training course were to sharpen participants' skills in research protocol development and improve their research expertise.

The aim of this report is to provide a brief account of the event and a qualitative and quantitative evaluation of the research projects presented during the workshops.

Workshop Methodology

The participants of the workshop were selected on the basis of their online course performance, completion and quality of their assignments and the quality of their review or paper. The strict selection ensured that those attending the workshop in Geneva were the most motivated participants of the online training course. Out of the 149 participants from the 2011 edition of the online training course on sexual and reproductive health research, 13 were invited to attend the workshop. The participants were selected from 10 countries: Egypt, Nigeria, Ethiopia, Iran, Kenya, Mali, Uganda, Republic of Turkey, India and Argentina.

The GFMER Research Workshop provided participants with the opportunity to exchange knowledge and experience, both with each other and with their respective coaches, and improve the quality of their research protocols. Each participant was allocated a coach who was in charge of reviewing his /her project, providing continuous support and feedback, and identifying key areas for review within the research protocol. Moreover the coaches helped the participant to synthesize the information into a concise and clear presentation.

When deciding on the content of the course, a series of factors were taken into account: participants' needs, time constraint and available resources. Without repeating information from the online course the GFMER Research Workshop was organized so that participants could get further training in key components of research protocol planning and development. Many participants had expressed their desire to get extra training in data management and sampling methods, and those requests were prioritized when setting the agenda. The preliminary contents were reviewed with other stakeholders and, once agreed, were finalized for implementation. (See Table 1 for course schedule).

The workshop was organized around a series of presentations on selected topics given by highly qualified GFMER and WHO staff as well as health professionals from Geneva University. The aim of these presentations was to help participants improve the quality and accuracy of their research protocols as well as to provide them with solid grounding for future research projects.

Both participants and presenters relied on PowerPoint slides and other visuals to enhance the presentations. Open discussion was highly encouraged among participants and their comments and feedback was used, on many occasions, as backbone for many presentations. All the discussions and presentations and discussions were in English, with the exception of some questions for one of the participants that were made in English and answered in French (with simultaneous interpretation) to help the participant present his protocol in his native language. Handouts of exercises and extra materials were distributed among the participants to actively engage them in discussions and help them follow the presentations. Each presenter devoted several minutes to answer questions and provided participants with contact details for further enquiries.

Peer-review and monitoring of the presentations and discussion of research protocols was carried out not only at the end of the workshop but also after every protocol presentation. In an attempt to audit the quality of the projects, immediately after a protocol presentation, participants were asked to score their colleague's project on a scale from 1 to 5 (5 being the highest and indicating no further review, and 1, the lowest and indicating complete revision of the protocol). Furthermore, at the end of the workshop, participants were invited to fill in a brief-end-of workshop evaluation that included both quantitative and qualitative components, and were also awarded with a certificate of completion (sample attached) based on their attendance, participation, presentation and evaluation.

Profile of the Participants

The 13 participants who attended the workshop were selected from a pool of 149 people who had attended the online-training programme. There were 7 female and 6 men from 10 different countries, but all of them, health professionals. Different types of research methods were implemented: qualitative, quantitative and mixed and the research protocols were on the following fields:

Maternal and perinatal health (MH)
Sexually transmitted infections, HIV/AIDS (STD and HIV/AIDS)
Family planning (FP)
Adolescent sexual and reproductive health(AH)

Performance and End-of-the-Workshop Feedback

The overall performance of each participant was calculated based on several factors, including: punctuality and organization, level of participation in discussions, critical thinking (as demonstrated by providing accurate feedback, asking relevant questions, reviewing papers and designing research protocols), degree of engagement in feedbacks and peer-review, ability to present and support research study protocol, cope with pressure and constructive criticism and make amends and improve quality of work. (See Table 4 for the results of the peer review and evaluation).

Two main conclusions can be reached from the results. Firstly, all of the 13 participants scored higher than the average score (2.5, on a scale of 1 to 5, with the latter being the highest). Secondly, 8 participants scored 4 or higher. As discussed during the workshop, those receiving 4 or higher meant that their proposal could proceed further with only minor modifications. A score lower than 4, on the other hand, meant that their proposals needed further revision and modifications (some of them triggered from the feedback obtained at the workshop) before proceeding to the next stage. No participant scored less than 3 which meant that none of the research protocols had to be redesigned or significantly modified.

Appendix

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

Time	Day/Presentation	Presenters
	August 27, Monday	
09:00-10:00	Welcome and introduction	Maria Jesus Alonso, Lale Say, Alfredo Fort, Mario Festin, Igor Toskin, Chandra Mouli, Aldo Campana, Blaise Bourrit, Hanan Hamamy
	Review of the agenda	Karim Abawi, Marloes Schoonheim
10:00-11:00	HINARI for GFMER participants	Kimberly Parker
11:00-12:00	Introduction to health planning tools	Moazzam Ali
13:00-17:30	Social science research for sexual and reproductive health	Marloes Schoonheim
	August 28, Tuesday	
09:00-10:00	Review of the agenda and discussion	
10:30-12:00	Health planning cycle	Moazzam Ali
13:00-14:30	Practical M&E I - Frameworks and indicators	Alfredo Fort
14:30-15:00	Introduction to operations research	Aminu Magashi Garba
15:00-15:30	Data monitoring. Case study: neonatal vitamin A supplementation studies	Sachiyo Yoshida
16:00-17:30	Research priorities in integrating community genetic services in primary care settings	Hanan Hamamy
	August 29, Wednesday	
09:00-09:30	Review of the agenda	
09:30-10:30	Practical M&E II - Methods and reporting	Alfredo Fort
11:00-12:00	Research ethics	Sheryl van der Poel
	August 30, Thursday	
09:00-09:30	SRH Support in Africa	Heli Bathija
09:30-10:30	Clinical data management (process and practical guide)	Nguyen Thi My Huong
11:00-12:00	Sampling. A basic introduction	Armando Seuc
14:00-14:30	World Health Organization Library	Ian Robert

Table 1: Continued

	August 30, Thursday	
	Participants research protocol	
14:00-14:30	Adolescent pregnancy in rural community of Assiut Governorate: maternal and fetal perspectives	Mahmoud Ahmed Mahmoud Abdel-Aleem (Egypt)
14:30-15:00	Community versus facility based delivery of contraceptives: a cluster randomised trial in northern Nigeria	Yakubu Adamu (Nigeria)
15:00-15:30	Community perceptions and barriers influencing utilization of family planning services in Bauchi State, Nigeria	Sabaatu Elizabeth Danladi (Nigeria)
15:30-16:00	Magnitude of unintended pregnancy and associated factors in HIV positive and HIV negative reproductive age women at public health facilities of Addis Ababa; Ethiopia	Zewdu Gashu Dememew (Ethiopia)
16:00-16:30	Factors that influence utilization of health services for skilled delivery and postnatal care among women: the case of southern Amhara region- Ethiopia	Yoseph Gebriel (Ethiopia)
	August 31, Friday	
09:00-09:30	Assessment of reproductive health needs and preferences of people who live with HIV and AIDS in triangular clinics of universities of medical science in Tehran	Shayesteh Hajizadeh Anari (Iran)
09:30-10:00	Effectiveness of community mobilisation on the practice of female genital mutilation in Kenya: a literature review	Anne Majuma Khisa (Kenya)
10:00-10:30	Evaluation of sexuality and contraception program in the community of Marseille	Oumar Abdoulaye Kone (Mali)
10:30-11.00	Consequences of poor access to and use of sexual reproductive health services by the adolescents in Pader District, Uganda	Morris Okwir (Uganda)
11:00-11.30	Knowledge, attitude and practice about HPV vaccination among students of health related faculties in Marmara university in Istanbul	Ayse Nilufer Ozaydin (Turkey)
11:30-12:00	Capacity building of nursing students to address reproductive and sexual health issues for and by nurses	Maryann Victoria Washington (India)
12.00-12.30	Secondary prevention strategies of cervical cancer in the north of Argentina: Pap smear versus Pap smear + HPV DNA testing	
12:30-13:00	Demand-side barriers to maternal health care services among adolescents in Lagos	Raqibat Olabopo Idris (Nigeria)

Table 2: Participants' Profile

Family Name	First Name	Gender	Country	Education
Kone	Oumar Abdoulaye	Male	Mali	MD, Specialist
				epidemiological surveillance
				of tropical infectious diseases
Ozaydin	Ayse Nilufer	Female	Turkey	MD, MPH, PhD
ADAMU	Yakubu Mamman	Male	Nigeria	MD, FMCPH
Gessesse	Yoseph W/Gebriel	Male	Ethiopia	Master in Public Health
Abdel-Aleem	Mahmoud Ahmed	Male	Egypt	MD,
	Mahmoud			Obstetrician/Gynecologist
Dememew	Zewdu Gashu	Male	Ethiopia	MD
Washington	Maryann Victoria	Female	India	MPhil in Hospital and Health
				Systems Management
Hajizadeh	Shayesteh	Female	Iran	Master of Midwifery, MPH
Anari				and PhD Student in
				Reproductive Health
Danladi	Sabaatu Elizabeth	Female	Nigeria	Diploma in Public Health
Okwir	Morris	Male	Uganda	BSc in health services
				management
Khisa	Anne Majuma	Female	Kenya	BSc Nursing, MA in Gender
				and Development Studies
Idris	Raqibat Olabopo	Female	Nigeria /	MBBS, DO
			Switzerland	
Narice	Brenda	Female	Argentina/UK	MD

Table 3: Participants' Summary of Research Protocols

Participants	Country	Substantive Area	Research Design	Data Collection Technique	Measures/Indicators
Abdel-Aleem Mahmoud Ahmed Mahmoud	Egypt	AH Adolescent Pregnancy	Randomised Control Trial	Triangulation of different methods	Improve obstetric outcome of teenage pregnancy and decrease the occurrence of teenage pregnancy
Adamu Yakubu	Nigeria	FPUptake	Intervention study, cluster randomised trial	Triangulation of different methods	Compare uptake between community and facility based contraceptive services
Danladi Sabaatu Elizabeth	Nigeria	FP Perception and barriers	Qualitative	Triangulation of different methods	Community perceptions of and barriers influencing utilization of modern methods of family planning among women of reproductive age
Dememew Zewdu Gashu	Ethiopia	FP Unintended pregnancy	Qualitative	Cross- sectional	The status of modern contraception use and the magnitude of UIP among HIV positive and negative mothers in reproductive age group
Gebriel Yoseph	Ethiopia	STI, HIV/AIDS MTCT of HIV	Qualitative, retrospective cohort analysis	Triangulation of different methods	Assess rate and predictors for the MTCT infection among babies born to HIV positive mothers
Hajizadeh Anari Shayesteh	Iran	STI, HIV/AIDS HIV/AIDs	Mixed methods- qualitative, quantitative	Triangulation of different methods	Assess the reproductive health needs and preferences of people who live with HIV and AIDS
Idris Raqibat Olabopo	Nigeria	AH –Maternal health care	Quantitative	Survey- questionnaire s	Improve access to maternal health care services among adolescents
Khisa Anne Majuma	Kenya	MH Obstetrics fistula	Mixed methods- qualitative, quantitative	Triangulation of different methods	Explore the lived experiences of women who suffer from obstetric fistula
Kone Oumar Abdoulaye	Mali	SRHSex education	Quantitative	Questionnair es	Evaluate sex education and contraception programs
Narice Brenda	Argentin a	STI, HIV/AIDS Cervical cancer	Qualitative, intervention trial (pseudo analytic study)	Triangulation of different methods	Show an increase in the effectiveness of screening precancerous cervical lesions (CIN 1-3) by the use of Pap-HPV
Okwir Morris	Uganda	AHAccess to SRH	Quantitative	Survey- questionnaire s	Increase access and use of sexual reproductive health services by adolescents in secondary schools
Ozaydin Ayse Nilufer	Republic of Turkey	STI, HIV/AIDS HPV vaccination	Quantitative	Questionnair es	Define the knowledge, attitude and practice of adolescents about HPV vaccine
Washington Maryann Victoria	India	SRH Capacity building	Mixed methods- qualitative, quantitative	Triangulation of different methods	Sensitize and equip nursing students with contextual knowledge and skills on sexual and reproductive health and gender related issues

Table 4: Participants' Presentations Results

Presentations results (average score*) of Peer Review and Evaluation:

Participants	Score
Abdel-Aleem Mahmoud Ahmed Mahmoud	3.9
Adamu Yakubu	4.1
Danladi Sabaatu Elizabeth	3.3
Dememew Zewdu Gashu	4.0
Gebriel Gessesse Yoseph	4.2
Hajizadeh Anari Shayesteh**	4.1
Idris Raqibat Olabopo	3.8
Khisa Anne Majuma	4.1
Kone Oumar Abdoulaye	3.5
Narice Brenda**	4.3
Okwir Morris	3.5
Ozaydin Ayse Nilufer	4.0
Washington Maryann Victoria	4.5

** N=11

Note: Names are listed in the alphabetical order.

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

Table 5: Participants' Feedback

Participants' feedback at the end of workshop:

Item	N	%
1. To what extent was this workshop relevant and useful to your work?		•
1 (least relevant and useful)	0	
2	0	
3	0	
4	1	9.1
5 (most relevant and useful)	10	91
2. Were the concepts, principles and subject matter clearly presented and of	liscussed?	
1 (least relevant and useful)	0	
2	0	
3	0	
4	3	27.3
5 (most relevant and useful)	8	72.7
3. Participants 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	0	
All of it was just about right for me	7	63.6
Some of it was too simple for me	3	27.3
Most of it was too simple for me	1	9.1
4. To what extent was the workshop interactive and participatory?		
1 (least)	0	
2	0	
3	0	
4	3	27.3
5 (most)	8	72.7
5. How well were the participants' questions answered?		
1 (least satisfactory)	0	
2	0	
3	0	
4	3	27.3
5 (most satisfactory)	8	72.7

Table 5: Continued

6. Was the length of this workshop satisfactory for you?		
1 (least satisfactory)	0	
2	1	9.1
3	0	
4	4	36.4
5 (most satisfactory)	6	54.5
7. To what extent do you think you will be able to use and apply techniques introduced and discussed in this workshop?	in your work the tool	ls and
1 (least likely)	0	
2	0	
3	0	
4	6	54.5
5 (most likely)	5	45.4
8. At the end of this workshop, how would you rank your level o	f knowledge and skil	ls of
8. At the end of this workshop, how would you rank your level o	f knowledge and skil	ls of
8. At the end of this workshop, how would you rank your level o development of research protocol?		ls of
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8. At the end of this workshop, how would you rank your level o development of research protocol? 1 (lowest)	0 0	ls of 63.6
8. At the end of this workshop, how would you rank your level o development of research protocol? 1 (lowest) 2 3	0 0 0	
8. At the end of this workshop, how would you rank your level o development of research protocol? 1 (lowest) 2 3 4	0 0 0 7 4	 63.6 36.4
8. At the end of this workshop, how would you rank your level o development of research protocol? 1 (lowest) 2 3 4 5 (highest)	0 0 0 7 4	 63.6 36.4
8. At the end of this workshop, how would you rank your level of development of research protocol? 1 (lowest) 2 3 4 5 (highest) 9. To what extent did the workshop meet your expectation that your level of the protocol?	0 0 0 7 4 ou had before the wo	 63.6 36.4
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N=11 "--" indicates no value.

Table 6: Participants' Response to Open-ended Questions

Specific session of the workshop that the participants found most useful for them and their work: Response to an open-ended question from participants at the end of the workshop:

- 1. All the lectures related to research (health planning cycle, data management, sampling) have provided me with a better grounding for my own research protocol.
- 2. Feedbacks from the workshop participants and experts and the lecture on how to access WHO Library were really useful. I appreciated the lecture to understand initiatives and support for Africa.
- 3. Knowledge and practical skills in research methodology, especially sampling and designing a protocol were really useful for me. The same goes for contacts with participants and lecturers that will expand my professional network and collaboration.
- 4. Health policy tools, Health planning cycle, Research Ethics, Data management and sampling techniques were the lectures I appreciated the most.
- 5. Availability of documents, presentations from experts, access to other links and softwares, feed back and contribution for participants' presentations from lecturers and participants were most useful for me.
- 6. Lectures on open Clinica, open EPI, data monitoring and data management were most useful for me.
- 7. I appreciated the most the lectures about sampling technique and research opportunities in Africa.
- 8. The lectures on social science research, data management, sampling and ethics I appreciated the most. Everything was good.
- 9. Discussion by Alfredo was marvellous. Research revisions by participants was very constructive. Lecture on sampling technique was really useful for me. I really enjoyed Geneva's tour by Dr. Blaise.
- 10. Health planning tools, sampling, data management I appreciated the most.

N = 10

Note: Each number represents response from one participant. Some respondent made no response.

Table 7: Participants' Comments and Suggestions

Participants' comments and suggestions to improve the futures workshops: Response to an openended question from participants at the end of the workshop:

- 1. It would be really useful if we would have supervisors that would help us carry out our research after the workshop. There should be an option for the participants to post questions to a specific lecturer prior to the workshop.
- 2. It would be useful to have an audio and a video presentation so the participants could benefit of explanation given to them. I would like if we would have more time to be able to speak slower in English.
- 3. I wish we would design "a multi centre multicultural study" with all the participants, implementing it in our countries and publish it together. I would like to have more lectures such as Open Clinica, Open EPI, Data monitoring and Data management.
- 4. I wish we would visit a research site implementing a research protocol.
- 5. I wish we would an additional session on infertility prevention, on EMRO of WHO. Each participant should have a 2 minutes live recorded speech for the next year participants. I suggest including the concept of pre-test and post-test. Workshop could be longer for 2 or 3 more days.

N=8

Note: Each number represents response from one participant. Some respondent made no response.

Table 8: Peers' Evaluation of Lectures

Lecture	N	%
1. HINARI for GFMER participants Introduction to health planning tools		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		
2. Introduction to health planning tools		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		
3. Social science research for sexual and		
Very Useful	11	100
Occasionally Useful		
Not Useful		
4. Health planning cycle		
Very Useful	11	100
Occasionally Useful		
Not Useful		
5. Practical M&E I – Frameworks and indicators		
Very Useful	10	90.9
Occasionally Useful	1	9.1
Not Useful		
6. Introduction to operations research		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		
7. Research priorities in integrating community		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		

Table 8: Continued

8. Practical M&E II – Methods and reporting		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		
9. Research Ethics		
Very Useful	11	100
Occasionally Useful		
Not Useful		
10. SRH Support in Africa		
Very Useful	8	72.7
Occasionally Useful	2	18.2
Not Useful	1	9.1
11. World Health Organization Library		
Very Useful	9	81.8
Occasionally Useful	2	18.2
Not Useful		
12. Clinical data management (process and practical Guide)		
Very Useful	10	90.9
Occasionally Useful	1	9.1
Not Useful		
13. Sampling. A basic introduction		
Very Useful	10	90.9
Occasionally Useful	1	9.1
Not Useful		

N=11

[&]quot;--" indicates no value.

Remarks by Participant – Dr. Anne Khisa

Remarks at the closing session by Dr. Anne Khisa on behalf of all the workshop participants:

The SRHR training course has been a great experience for me. When I saw the opportunity on the GFMER website to participate in SRHR training I was elated. I thought, finally a course of international standard that caters for both of my interests – research and reproductive health. It was exciting.

Applying to the course is a straightforward process that takes a few days to conclude. There is prompt response to queries making the application a pleasant experience, which is rare on many online course applications.

Specific aspects that I liked during the online course are:

- Comprehensible modules
- Clear presentations
- Participants freely email questions to teachers
- Interaction on Google groups by participants created networking opportunities

As with all meaningful attempts in life, this participation in the course posed certain challenges, namely:

- Busy work and life schedules competed with study time
- Some modules had a lot of work due to multiple assignments

Ultimately, the overarching advantage of accessing world class training with state of the art modules/ facilities/ teachers cannot be overemphasised. In six months and not having to leave work or defer my PhD program, I was able to complete the course because it was available online! This is true for most participants in this workshop. In addition, I was humbled and grateful to receive a scholarship to participate in the course and attend the SRHR intensive training course in Geneva.

The August 2012 intensive training course has been a success for many reasons:

- The interactive sessions
- Teacher presentations on practical and new topics altogether
- The venue was conducive for learning
- Participants had chance to consult with world renowned scholars face to face

Geneva has been hospitable to participants; we received help whenever we needed. The Mandat International has been a home away from home; a fusion of all of us from different cultures blending and networking, solving one common problem, better health for our nations. The historic sites we visited by day and clear night skies are indeed a memory to cherish and carry home with us.

I must thank the GFMER and its partners, especially the organisers of the SRHR course for organizing the course and the support they have offered all participants. Through this course, the foundation touches the lives of many women, adolescents, men and children around the world.

As participants, we shall resolve to use the skills and knowledge gained in the course to improve SRH in our countries through research, teaching and strengthened service provision.

Remarks by Participant – Dr. Yoseph Gebriel

Remarks at the closing session by Dr. Yoseph Gebriel on behalf of all the workshop participants:

First of all, I would like to forward my heartfelt gratitude and appreciation for the course organizers, for the trainers and the WHO staff in general for their unreserved effort to help us successfully conclude this training. My special gratitude goes to Dr Karim Abawi, who goes extra mile to reach us and support us throughout the training process. For example, in my country internet network was down and he was trying to reach me through my country focal person. I would also like to thank Dr Karim team including Fionna and Raqibat for their follow up and facilitating our travel. Finally, my thanks extend to WHO, GFMER, and all stakeholders for the very helpful and well organized training and for the opportunity.

My first reflection will be on the online course and the assignments. I personally found the online course very interesting and helpful. For one thing, I was able to manage my training without affecting/deploying from my work place. I took the course with my own peace and convenience. This is one of the interesting part of the course. The other thing about the online course was the fact that the course materials are available at any time and can be easily accessible. The assignments were also very practical and they try to link theory with what is going on the real practice (contextual). The course materials and the references have extended importance in that we can access them and use them in our future research or literature review undertakings. In general, the course is best fit to adult education (Andragogy).

With regard to this week's course, the most important merit is its participatory nature. Every participant was openly discussing his/her thoughts, opinions, queries, and comments. The motivation and resourcefulness of the presenters/Lecturers was also of high standard. It is appreciable that some of the presenters were on home leave but showed interest to present their lectures.

I feel that today is not the final day when we shall wind up the history of this course here. There are a lot of opportunities in which we can work together in the future. For example, we all have presented our respective proposals. Based on the inputs and feedbacks we collected from our colleagues and our lecturers, we have to communicate, support each other and push our proposals forward until we publish it. We should also share all the useful resources we earned on this course to our friends, colleagues, and other health workers in our respective countries. I hope that GFMER also will think of a follow up actions and the way forward after today on. I thank you all very much for the happy five days we had!

Merci!

Sample of Certificate



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, 27-31 AUGUST 2012, AS FINAL PART OF THE TRAINING COURSE IN SEXUAL AND REPRODUCTIVE HEALTH RESEARCH

Prof. Aldo Campana
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