



Building capacity: lessons learnt from an intensive online health information training programme in Vietnam

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Abstract:

INASP (www.inasp.info) is the International Network for the Availability of Scientific Publications. It is a small UK based charity established in 1992. Our vision is simple: effective access, use, dissemination and communication of information are key drivers of democracy, good governance and poverty reduction. Thus we support capacity building in the university and research sector in developing countries by strengthening the production, access and dissemination of information.

We work across four areas: Information Delivery, Library Development and ICT training, Publishing Support and Evidence-Informed Policy Making.

Librarians play a crucial role in developing and emerging countries, both in promoting access to information and in supporting their user communities – hence the importance of our work in this area. INASP works closely with libraries to strengthen existing skills and capacity to access, use and disseminate information.

This paper concentrates on one aspect of our Library Development work, namely a health information (online information) training programme in Vietnam. This was a new approach for us in terms of intensity and scale and although the experience is specific to a particular country it has a number of learning opportunities for the work INASP and other organisations do in relation to training and building capacity in less economically developed countries (LEDCs).

Context

In the library and information field INASP supports training in a broad range of areas such as information literacy, library automation, institutional repository development, digitisation, monitoring and use of e-resources, consortium building, etc. through the medium of short course workshops. These typically take place over 1-5 days. Usually

run at an institutional or national level and on occasion as a multinational event. With the local partners organising the training (the host institution or consortium) usually being responsible for selecting the participants (to an agreed participant's profile). Whilst over a number of years these workshops may provide a progressive development of skills, they are not usually part of a predetermined long term programme. Rather they are in response to the locally identified training needs in a broad range of areas.

In the case of the Vietnam online health training programme there were several factors that made us consider a different approach than simply offering short course workshops. We had conducted several online health information workshops in Vietnam in the past but there were always calls for these to be repeated due to large scale demand. With the growth in the availability of e-resources (HINARI, PERii and others), the increasing emphasis on medical and health education in the country, coupled with simultaneous improvements in IT infrastructure, we recognised that this demand for skills and capacity development would continue to increase without necessarily addressing the fundamental problem of lack of capacity to locate, evaluate, use online information resources and to train others in their use. The short course workshop approach we had used in the past had also been adversely affected by the selection of inappropriate participants without the necessary or prerequisite skills. And all the while a cultural shift was taking place as libraries in Vietnam were moving towards a service culture with higher expectations being expressed by library users.

Programme objectives

The programme was conceived by the head librarian at the Hanoi School of Public Health (HSPH), Nguyen Hai Ha, Dr Martha Garrett from INFORM (a Swedish based organisation specializing in on-site, topic-focused, country-specific workshops about online information resources¹) and Martin Belcher (at the time, Head of ICT training), in direct response to requests and discussions had with various senior members of staff from a range of Vietnamese education and research focused health institutions.

The ultimate objective would be to change the information culture of a sector at the practitioner level in a sustainable way; by building the capacity of all key institutions to undertake their own high quality and high impact training and to actually deliver that training. This would involve:

- getting online information access and usage ingrained across the health research and education sectors in Vietnam
- taking full advantage of online information resources available
- building capacity of librarians/ information professionals to effectively provide e-information services
- enhancing the health sector by encouraging better use of up to date information via online information resources

¹ INFORM is hosted by the Medical School at the University of Uppsala. Since 2003 it has trained over 2,000 health professionals, primarily at workshops in the NIS, Asia, and sub-Saharan Africa regions. INFORM had previously run successful health information training activities in Vietnam

The programme plan and approach: master trainer workshops

The training plan would be a modified cascade system^{2,3} involving initial intensive training of a core team of master trainers. The training would be led by INASP and INFORM, supported by a coordination and content expert team made up of librarians at HSPH. A further 16-20 people would be selected from leading Vietnamese medical universities in the targeted areas to be trained and act as master trainers, who would then be responsible for rolling out a programme of skills development training at participating institutional level.

The participating institutions were selected by our local partner at the Hanoi School of Public Health. She had managed to obtain direct support from the Ministry of Health with the result that with this official approval the profile and status of the project had been raised immediately. The selection of the institutions was based on consideration of national needs and benefits. In practice this effectively meant concentrating on the largest medical research and educational institutions as expertise there would generate the maximum impact.

Meetings were held between the partners and institutional administrators at the highest level to fully explain what would be involved and to secure formal institutional commitment. A formal Memorandum of Understanding (MOU) was then signed with each institution.

Each institution then nominated two staff to become “master trainers”. There were strict selection criteria, and formal interviews were held to assess their suitability. In the event some original nominations proved not to be strong enough so new nominations were requested. This initial stage involved significant effort in recognition of the fact that getting the right trainers was central to success. This involved visits to all participating institutions by HSPH and INFORM representatives.

Nine participating institutions were eventually selected in three regions of Vietnam – North, Central and Southern. Several were based in “Learning Resource Centres” – these are high quality information centres whose remit to share knowledge and who therefore were likely to be good partners⁴.

The formal opening ceremony was a particularly important event as it conveyed official recognition and status. Such events are also culturally important in Vietnam

² INASP Travelling workshop methodology:

<http://www.inasp.info/file/9672fb0f3f915df9911b8fa2d7926ec1/travelling-workshops.html>

³ Ideas on the move: Weighing up the benefits of INASP's cascading training methodology
<http://www.inasp.info/file/0dc3a697bc5d4234667a2114852231d5/ideas-on-the-move.html>

⁴ “The Learning Resource Centre projects were commenced in 2000, and involve the design, construction and development of large-scale library facilities in four regional Vietnamese universities in Hue, Danang, Cantho and Thai Nguyen. The projects bring together contemporary models and standards of library and information services with the provision of a sound information technology infrastructure, high quality teaching and learning facilities, and a range of current print and electronic information resources and services. The projects are supported by a broader national program which includes a range of professional development programs, establishment of bibliographic standards, and co-operative approaches to the provision of services and the acquisition of resources”.

Michael Robinson and Huynh Dinh Chien, Multi-functional library design and sustainability: designing multi-functional Learning Resource Centres in Vietnam. (Paper presented at the 72nd WLIC, August 2006) http://archive.ifla.org/IV/ifla72/papers/124-Robinson_Chien-en.pdf

and therefore it was important that INASP, INFORM and all programme partners were represented.

Following the opening ceremony the 18 master trainers attended a two-week intensive hands-on course (2-13 March 2009) focusing on basic to advanced information skills – the access and use of online health information resources available to users in Vietnam. This covered all information literacy with a particular emphasis on the free at the point of access information resources of use and benefit to the health education and research sector in Vietnam.

The second workshop (4-8 May 2009) was for one-week and this concentrated on teaching and learning methods, facilitation skills and participatory learning techniques, and presentational skills. The third workshop (8-12 June 2009) focused on bringing the information and teaching content of the previous two workshops together, with practical exercises undertaken to review and practice access and using the target online information resources and the effective teaching of others in their access and use.

Before and after each workshop in the series a number of “homework” tasks were set and undertaken by all participants. These involved practising what was covered in the preceding workshop and preparing activities and exercises for the following workshop. The content of these tasks always formed a practical part of the next workshop in the series and peer review and feedback played an important part in the assessment of these. The effort required to complete each set of workshop tasks was estimated at 3-6 days working effort, so not insignificant.

Thus all training workshops and associated assignments took place within an 18 week period. In addition, during the workshops a number of social events were organised as these were considered an important part in the process of team building. These were supplemented by some regional team meetings after the initial workshop to help with assignment completion, team development and peer assistance. There were activities, at institutional and regional level which helped to support cultural / service-orientated change, with the stronger members of group helping drive / support others.

Use of video as a training aid

Video was used at various stages during the programme. The approach was twofold:

1. To use humorous videos as a demonstration tool for effective and ineffective training methodologies and practice. The programme partners made a number of short films to demonstrate a range of how not to do things, which were then reviewed by participants to identify what should be avoided and how to undertake effective presentations and training.
2. To capture participants undertaking a number of tasks to help review and develop their individual presentation and training skills. This was done as a before and after exercise with individual and group review and comment, to provide direct evidence of strengths, weaknesses, areas for development and to capture progress.

The quality of the participant's presentations captured on video were inevitably variable with some good ones and some weaker ones, but all showed marked areas of improvement over the course of the programme. Comparing the initial workshop presentations with those from actual training workshops later in the programme was a pleasing and effective illustration of progress for the individuals concerned and the programme as a whole.

Later feedback from the participants confirmed that the use of the video (pre-shot films and the filming of participants during various sessions) worked well and was very positively received. Indeed, although the idea of being filmed was initially greeted with horror, more than 50% highlighted filming in particular as a most useful element. Once given feedback, they tended to be much more forthcoming in later sessions. Clearly video is a useful, low cost training tool.

Language and translation

Translation was used throughout the workshops and although nearly all participants seemed comfortable without it, there were a few where it was really required, in order to aid understanding. The translation also seemed to act as a reinforcement of what was covered as everything was in effect said twice. This seemed to be useful as participants all appeared to switch attention from the English presenter to the Vietnamese translator and back again. The extra time that the translation took was not significantly more than just covering the content in English. The extra time available to the presenter to think about the next words to say (whilst being translated) was also a useful time to focus content, words and delivery.

Translation was also useful for INASP and INFORM trainers in terms of observation and understanding of discussions and exercises that were undertaken in Vietnamese. Overall, it is felt that the translation in fact made the workshop more effective than would have been the case without any translation (or indeed, any need for translation).

The programme plan and approach: pilot regional workshops

Following the completion of the master trainer workshops in June 2009, pilot regional workshops were conducted in each of the three regions during October 2009 (Hanoi School of Public health, Can Tho LRC and Hue LRC). The topic for all three workshops was information resources for maternal and child health. The target groups at the three sites were final year medical students (HSPH and Hue) and second year pharmacy students (Can Tho).

A second round of three pilot workshops was organised in November-December 2009 in different venues within the three regions (Hanoi Medical University, Hue Medical University, and Pham Ngoc Thach (PNT) Medical University in Ho Chi Minh City).

The objective of these workshops was to allow institutional teams working in regional groups to practise their developing training skills within a peer based and supportive environment. The first regional workshops were intentionally set at the sites which had the strongest trainers in the region. The second round of workshops were held at the sites where the trainers were considered to have weaker backgrounds in medical information and/or pedagogy and consequently to benefit from learning from their

peers in the first instance and having more time to prepare and practise before they hosted their own training workshops.

The 6 regional workshops were mentored by two of the programme partners (a member of INFORM and HSPH). They were available the day before the workshop (pre-workshop day) to meet with, guide, and assist the core team and/or regional team as requested, and they were present on the second day, when the workshop was held. During the delivery of the workshops they did not actively intervene they just acted as observers.

On the third day (the post-workshop day), the mentors met with the regional teams and reviewed how the workshop went, what went well, what the problems were, and how those problems can be avoided at the institutional workshops in the future. The members of the regional teams were also an important element in this review and peer support process. The peer feedback and support at these stages was identified as an important element in skills and confidence development amongst the master trainers.

Institutional training programmes

In December 2009 each institution prepared a training plan and accompanying budget for its planned institutional training. Institutions were free to select the target group, the specific medical or health information topics, the resources to cover, and the format for the training. They were encouraged to continue collaborating and encouraged to work in regional or multi-institutional teams where possible (especially in terms of managing costs).

HSPH and INASP then reviewed these plans, provided feedback and through a number of rounds of iteration, a training plan and supporting budget were agreed with each institution. Financial and mentoring support was provided to institutions in a phased manner to support the roll out and implementation of these training plans.

Four basic points about the institutional training were crucial:

- That each institutional team should organize three or four training activities under the umbrella of the national programme;
- That each institutional team should investigate other ways in which they can provide training locally without financial support from the programme, examples being short presentations within individual departments, inclusion of information training into other training focused primarily on other topics, expansion of the training to other institutions, including clinical settings, and so forth.
- That each institutional team should take steps to guarantee the sustainability of health and medicine information training at their institution after the programme has ended. This would involve convincing the leadership of the institution of the value of such training and working to get information training accepted as a compulsory part of the curriculum.
- That costs and budgets were tightly managed – even though there was programme funding to support these activities, it was important that the cost base for them was at a level that would be locally sustainable and replicable after the programme was over.

Institutional level workshops (i.e. delivery of end user training workshops) began in January 2010 and continued through April 2011. During this period some 1,400 health researchers, university teaching staff, students and health care practitioners received online health information training. These have mainly been staff and students from participating institutions. However pharmacists, doctors, surgeons, nurses and other research and medical staff from hospitals have also been included.

Key characteristics

INASP is of the view that this approach has proven effective for a number of reasons:

1. The programme was conceived and guided by a strong local partner who was able to offer guidance on relevant course content and cultural issues, who was able to identify appropriate institutions and help select individual participants.
2. We sought institutional commitment at the highest level from the outset.
3. The content was broad covering not just information about how to locate / evaluate / use online information resources, but also how we learn, characteristics of effective information training and how to train others. Workshops took into account the cultural shift to “service culture” and “evidence based” services, teaching, learning and research.
4. Mentoring, both local and international, constituted a significant part of the whole process.
5. The workshops throughout the programme took place in the working environment of participants, allowing issues that arose on a day-to-day basis to be included within the training. This enabled the building of capacity by developing training skills appropriate to the local environment.
6. Peer support at the local and regional level was available throughout (unlike the one-off workshop where the trainer is often isolated with no peer support network, as few, if any, of their peers have undertaken the same training).
7. Intensive training, out of people's day-to-day context, can be less effective, because when they return to their daily working situation they do not have the resources or time to effectively apply their newly learnt skills. This programme however had both institutional and individual commitment from the outset. And the initial master training workshops were held within a short time-frame, supported by pre and post workshop assignments and followed quickly by the pilot regional workshops.
8. Financial and mentoring support was available for all the workshops in the programme.

Programme evaluation

A preliminary evaluation of this training programme was completed in April 2011 by Shampa Nath, formerly of HealthLink Worldwide⁵. Many of these assumptions have been substantiated.

The evaluation was carried out in two stages and involved surveys, in-depth interviews with the master trainers, heads of participating institutions, workshop participants and the INASP/INFORM trainers. “Most significant change” stories were also collected. Among some of the findings⁶:

Suitability of the training programme: All the heads of institutions interviewed strongly believe that this training programme was a good fit with the strategic objectives of their respective institutions. It has helped undergraduate and postgraduate students, medical doctors and faculty members with their studies, research and, in the case of practitioners, with their treatment of patients. The heads were impressed by the content taught and the teaching methods used, which they considered to be of a professional standard.

The heads of institutions also felt that there had been unexpected gains from this programme:

- a) The *profile of institutions was raised* as others now know where to go for such training or for assistance with sourcing information. The Vice Rector of the University of Medicine & Pharmacy, Ho Chi Minh City, which covers hospitals in the entire province was satisfied that the University is now known for being able to provide good information to doctors and nurses in the province.
- b) One of the heads reported that a *strong network for sharing information is being formed* as a result of this programme.
- c) One of the heads felt that ever since the workshops have been held by the master trainers, *attitude towards learning and behaving in common areas has changed* among people visiting the institution’s library. They are more disciplined, creating a better environment for learning, and there is better care of common resources.

Gains from the Programme: the master trainers felt they had gained immensely not only in terms of increased awareness of many types of online health resources available, but also in other aspects such as:

- a) Learning how to conduct needs assessments prior to the workshops and post workshop evaluations
- b) Ability to now assess the quality of the information sourced and determine which ones are good and reliable.

⁵ The evaluation was undertaken by Shampa Nath of Healthlink Worldwide, a UK charity focusing on health communication issues in developing countries. Shampa has a background in participatory communication, programme management and monitoring and evaluation. Following the closure of Healthlink Worldwide in October 2010, Shampa was contracted by INASP as an independent consultant to complete the evaluation.

⁶ Nath, S. Vietnamese health information access and use: capacity development programme evaluation final report (April 2011), <http://www.inasp.info/file/bf780b4e44d4290c9a83f6f86738fbfd/online-health.html>

- c) Links with librarians in other parts of the country have become stronger as health information is shared among them.
- d) There has been tremendous improvement in terms of teaching and presentation skills of the Master Trainers. They are now able to make better presentations, speak in front of the class, make eye contact and use the right body language. Feedback provided by colleagues and the Lead Trainers throughout the programme duration has helped in this regard as has the opportunity to apply newly learnt skills by conducting workshops within their institutions and externally.
- e) There is a better understanding of how to take care of all aspects of workshop preparation including the administrative tasks

Change in perception of role of librarians/libraries

There is now *recognition by librarians of their role in the field of health information and the responsibility of spreading information and knowledge* to others in the medical field, which helps boost their morale. Previously they felt that as librarians they played an insignificant role in the health sector.

Overall performance of the training programme: Without exception all those interviewed were of the opinion that the training programme was extremely valuable, not only for themselves and their institutions but for the wider health sector.

Of course there were shortcomings too. It was suggested that more time might have been spent practising pedagogic skills; more should have been done to enable inter-institutional feedback; and also that content in some areas was weak and that the master trainers needed to put in more effort to do research so that resources for the workshop were more relevant or useful.

There are many key questions now that the programme and its funding has come to an end:

- Will activities continue once without the external finance?
- Will the training be integrated into day-to-day work?
- Has there been a change in service culture in participating institutional libraries?
- How have people involved in training changed their behaviour in terms of online information access and usage?
- To what extent are health sector practitioners and professionals making decisions based on up-to-date valid information?

Time will of course tell and an impact assessment and review will be undertaken by the programme evaluator at the start of 2012 (12 months after the formal end of the programme). Even at this early stage every institution head interviewed was committed to incorporating the training within their curricula and train their faculty and staff. Some have already embarked on such a plan. In the case of PNT University for instance, training courses on research methodology are held for lecturers. Training on online health information access is now part of the curriculum to be provided to 5th and 6th year medical students.

At HSPH, searching for online health information is a part of the regular curriculum. While budget restrictions prevent University of Medicine & Pharmacy, Ho Chi Minh City from extending this training to the provincial hospitals in their remit, the Vice Rector is committed to spreading it to every medical student at the University itself. As there are almost 10,000 students, it was acknowledged that reaching them all would be a big challenge. The initial plan is to have a training course for first year students at the University.

The master trainers too are already starting to think about different ways of supporting the programme objectives including the possibility of charging workshop fees and looking for ways to get such training into the institutional curriculums.

INASP learning and recommendations

From our own perspective INASP has gained valuable insights.

- Training such as this which is aimed at sustained behaviour change requires intense monitoring, mentoring and support in order to be successful.
- Cultural contexts and language issues are important factors to be considered in any international programme as being able to respond to the local contexts can be a determining factor for whether or not the objectives are achieved.
- Attitudinal change takes time but it is possible. In a training programme such as this, being able to demonstrate positive results and benefits to those who hold certain views is important so that they themselves realise that their perceptions need to change.
- Two way dialogue is important between the trainer and trainee if the training is to be meaningful.

The programme has seen the start of an interesting and promising change among the medical library community in Vietnam and it would be useful to see one year on how far learning has spread, whether practices that have changed with respect to access and use of online health information have been sustained, and the extent to which the original curricula might have been modified to suit the Vietnamese context.

Certainly if the gains so far are built on, Vietnam could provide a model for change in libraries and in online health information access behaviour in the region.

INASP will be studying the evaluation results in depth and will decide on how best to maintain the positive momentum that has been built over the last two years.

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